Change Log as of June 2019 (version 9)

Current Page #	Data Element	Change
228	Core Listing of Required Providers by Program Type	General dentistry changed to required for Commercial non-MCO Dental in table 1

Change Log as of April 2019 (for May 2019-version 9)

Current Page #	Data Element	Change
All	Data Dictionary Date	Date changed to May 2019 and Version number changed to 9.0
32	Physician and Other Providers Detailed Record Format	Submitting an organization/site NPI in this field will cause a hard error. This type of hard error will not count towards the NPI threshold
34	Physician and Other Providers Detailed Record Format	Language edited for License Number for non-licensed providers
35	Physician and Other Providers Detailed Record Format	Update on MMIS validation: This validation edit is processed by comparing the submitted MMIS ID to Medicaid Provider Enrollment (reference data). If no match is found, a Part A error will occur. If a match is found, but the submitted NPI-MMIS combination does not match the reference data's NPI-MMIS combination, a Part B error will occur
39	Physician and Other Providers Detailed Record Format	Address validation: submitting P O Box in this field will result in hard error
78-80, 103-104, 116-121, 162, 167, 227-229	Layout update/Physician and Other Providers Detailed Record Format/ Core Listing of Required Providers by Program Type	Filler fields BQ and BR replaced by Fax area code and Fax number. NYSOH Product fields replaced by Commercial Non MCO Medical Indicators 2-8, Commercial Non-MCO Vision Indicators 2-6, Commercial Non MCO Dental Indicators 2-5, NYSoH Medical Network Indicator 1-9, NYSoH Dental Network Indicator 1-4, NYSoH Medical Panel Status 1-9, NYSoH Medical Panel Size 1-9, SIP-PL Indicator, SIP-PL Panel Status, SIP-PL Panel Size, filler DB-DE, DV-EG, EQ-FR and GB-HP

Current Page #	Data Element	Change
109	Physician and other Providers Data Element Description	Total Office Hours: Edit changed to capture the average hours worked by a PCP per week during the submission period
130	Physician and Other Providers Detailed Record Format	Submitting a provider's NPI in this field will cause a hard error. This type of hard error will not count towards the NPI threshold.
161,166-167	Layout update Ancillary/ Service centers Data Element Description	NYSOH Product fields replaced by NYSoH Medical Network Indicator 1-9, Commercial Non MCO Medical Indicators 2-8, SIP-PL Indicator, filler BN-BP and BX-CO

Note: The number of overall fields in the Provider and Ancillary layouts did not change but many have been repurposed. |
171	Ancillary/ Service centers Data Element Description	Non-emergent transportation added to the list of services using servicing county fields
172,174, 239	Ancillary/ Service centers Data Element Description	Outpatient Chemical Dependency broken into Outpatient Chemical Dependency (Clinic) and Outpatient Chemical Dependency (Outpatient Rehabilitation). Designated service codes and additional service codes updated.
172-174	Ancillary/ Service centers Data Element Description	Updated language on reporting of OASAS services
176	Ancillary/ Service centers Data Element Description	Updated language on reporting of OMH services
199-211	Provider and Ancillary/Service Specialty Codes	New codes added: Doula, Outpatient Mental Health Clinic - Children & adolescents under 21 ,Children's Mental Health Outpatient (Non-Residential), Children's Mental Health Clinic Treatment, Children's Community Psychiatric Support & Treatment, Children's Crisis Intervention, Children's Family Peer Support Services, Children's HCBS Caregiver Family Support and Services, Children's HCBS Community Habilitation, Children's HCBS Community Self Advocacy Training and Support, Children's HCBS Crisis Respite, Children's HCBS Day Habilitation, Children's HCBS Palliative Care Bereavement Services, Children's HCBS Palliative Care Expressive Therapy, Children's HCBS Palliative Care Massage Therapy, Children's HCBS Palliative Care Pain and Symptom Management, Children's HCBS Planned Respite, Children's HCBS Pre-Vocational Services, Children's HCBS Supported Employment, Children's Other Licensed

Current Page #	Data Element	Change
		Practitioner, Children's Psychosocial Rehabilitation, Children's Youth Peer Services, Vehicle modification, School Based Health Centers
214	Attestation	Update to address on attestation page
217-222	Physician and Other Provider Error Listing	New Error Codes added
227	Core Listing of Required Providers by Program Type	PCP Nurse practitioner category of service removed, and PCP Nurse Practitioner provider type code added to Family Practice, General Practice and Internal medicine
227	Core Listing of Required Providers by Program Type	New service added to Table 1: Doula
228	Core Listing of Required Providers by Program Type	Non-PCP Nurse Practitioner designated service code updated
230-237	Core Listing of Required Services by Program Type	New services added to Table 2: Outpatient Mental Health Clinic - Children & adolescents under 21, Children's Mental Health Outpatient (Non-Residential), Children's Mental Health Clinic Treatment, Children's Community Psychiatric Support & Treatment, Children's Crisis Intervention, Children's Family Peer Support Services, Children's HCBS Caregiver Family Support and Services, Children's HCBS Community Habilitation, Children's HCBS Community Self Advocacy Training and Support, Children's HCBS Crisis Respite, Children's HCBS Day Habilitation, Children's HCBS Palliative Care Bereavement Services, Children's HCBS Palliative Care Expressive Therapy, Children's HCBS Palliative Care Massage Therapy, Children's HCBS Palliative Care Pain and Symptom Management, Children's HCBS Planned Respite, Children's HCBS Pre-Vocational Services, Children's HCBS Supported Employment, Children's Other Licensed Practitioner, Children's Psychosocial Rehabilitation, Children's Youth Peer Services
231-233	Core Listing of Required Providers by Program Type	SIP-PL Provider requirements added to Table 1
231-241	Core Listing of Required Services by Program Type	Dentistry changed to crossover specialty for Commercial Non MCO Medical

Current Page #	Data Element	Change
234-241	Core Listing of Required Services by Program Type	SIP-PL services requirements updated in table 2
234-241	Core Listing of Required Services by Program Type	LHCSA services changed to required for MAP/MLTC
234-241	Core Listing of Required Services by Program Type	Medicaid and MLTC core requirements updated in table 2 for Assistive Technology Agency, Community Transitional Service, Moving Assistance, Environmental Modifications, Home & Community Support Services, Home Delivered/Congregate Meals, Non-Emergent Transportation, Vehicle Modification
236	Core Listing of Required Services by Program Type	Residential Habilitation and Respite category of services added to Table 2
237	Core Listing of Required Services by Program Type	Designated service code for Dental services-article 28 and Dentistry updated in Table 2
237	Core Listing of Required Services by Program Type	Dental services category added in Table 2 for Commercial Non MCO Medical

Change Log as of October 2018

Current Page #	Data Element	Change
All	General Information	Ancillary file layout update: Commercial Non-MCO Vision indicator changed to Filler and OASAS PRU, OASAS Provider Number, and OMH ID fields added.
8, 60	Physician and Other Providers Detailed Record Format	CSW (Certified Social Worker) changed to LSW (Licensed Social Worker)
275	Ancillary/ Service centers Data Element Description	Zip Plus Four now required for all plans when reporting Harm Reduction Services/SEP.
341-342	Ancillary/ Service centers Data Element Description	List of services updated for Servicing County Fields (1-5)
341-342	Ancillary/ Service centers Data Element Description	Updated All 62 Counties code language.

Current Page #	Data Element	Change
343-349	Ancillary/ Service centers Data Element Description	Added the following data elements: OASAS PRU, OASAS Provider Number, and OMH ID.
351	Borough/County Codes	County "Manhattan" has been changed to "New York" (FIPS code 061).
351	Borough/County Codes	Updated "All County" to "All 62 Counties".
356-381	Provider and Ancillary/Service Specialty Codes	New Service Codes added for: Addiction Medicine, Advanced Heart Failure & Transplant Cardiology, Assisted Living Services, Community Habilitation, Day Habilitation, Female Pelvic Medicine and Reconstructive Surgery, Harm Reduction Services/SEP, Home Infusion Vendors, ICF/IID Facilities, Intensive Behavioral Service, Lithotripsy Centers, Neuromusculoskeletal Medicine & OMM, OASAS Diag and Treatment DSRIP Integrated Services, OASAS Diag and Treatment MMTP DSRIP Freestand, OASAS Hospital-Based Outpatient DSRIP, OASAS Hospital-Based Outpatient MMTP DSRIP, Pathways to Employment, Prevocational Services, Residential Habilitation- Family Care, Residential Habilitation- Supervised IRA/CR, Residential Habilitation- Supportive IRA/CR, Sleep Centers, Sleep Medicine Physicians, START Program, State Operated Clinic, Supported Employment
382-384	Attestation	Update to Attestation
386-395	Physician and Other Provider Error Listing	New Error Codes added.
396-399	Ancillary/Service Center Error Listing	New Error Codes added.
401-403	Core Listing of Required Providers by Program Type	Nurse Practitioners (Provider Type 02) added as an allowable Provider Type for Pediatrics.
401-403	Core Listing of Required Providers by Program Type	HIV Specialist PCP added – Required for HIV/SNP
401-403	Core Listing of Required Providers by Program Type	Certified Social Worker changed to Licensed Social Worker
401-403	Core Listing of Required Providers by Program Type	Dental Care Providers no longer required for Commercial MCO off of the NYSOH.

Current Page #	Data Element	Change
401-403	Core Listing of Required Providers by Program Type	Removed Hospitalists.
401-403	Core Listing of Required Providers by Program Type	Nutrition considered Crossover specialties for MAP & MLTC, and PACE.
404-407	Core Listing of Required Services by Program Type	Nutrition considered Crossover specialties for MAP & MLTC, and PACE.
404-407	Core Listing of Required Services by Program Type	Dental Services no longer required for Commercial MCO off of the NYSOH.
404-407	Core Listing of Required Services by Program Type	Updated Audiology for MAP & MLTC, and PACE.
404-407	Core Listing of Required Services by Program Type	Updated Assisted Living Services for MAP & MLTC, MA, and PACE.
404-407	Core Listing of Required Services by Program Type	Updated the following services for MAP & MLTC, PACE, HARP, Medicaid, and HIV Special Needs requirements: Assistive Technology Agency, Community Transitional Service, Environmental Modifications, Moving Assistance, Non-Emergent Transportation
404-407	Core Listing of Required Services by Program Type	The requirement for Home Delivered/Congregate Meals was updated for Medicaid, HARP and HIV Special Needs
404-407	Core Listing of Required Services by Program Type	Added 321 (COMPREHENSIVE SPECIALTY CLINIC SERVICES) as allowable designated service code for Opioid Treatment Program.
404-407	Core Listing of Required Services by Program Type	Institutional Long Term Care (Pediatric Skilled Nursing Facility) no longer required for Medicaid, HIV/SNP or HARP. Removed from Table.
404-407	Core Listing of Required Services by Program Type	New Services Added: Article 16 Clinic/IPSIDD, Assisted Living Service, Community Habilitation, Day Habilitation, OPWDD Day Treatment, Fiscal Intermediary, Harm Reduction Services/SEP, Intensive Behavioral Service, Pathways to Employment, Prevocational Services, Support Brokerage, Supported Employment, START program.

Change Log as of May 2018

Current Page #	Data Element	Change
All	Data Dictionary Date	Date changed to May 2018 and Version number changed to 8.1
44, 47-53, 68, 118	Physician and other Providers Data Element Description	Updated critical data elements to have consistent language.
273, 301, 342-343	Ancillary/ Service centers Data Element Description	Updated critical data elements to have consistent language.
43	Physician and other Providers Data Element Description	Updated NPI Threshold to 95%.
44	Physician and other Providers Data Element Description	Removed example regarding formatting of fixed width files.
45	Physician and other Providers Data Element Description	Changed to Critical Data Element.
114	Physician and other Providers Data Element Description	Updated language referencing page numbers.
119	Physician and other Providers Data Element Description	Removed requirement for area code to match practice location.
278	Ancillary/ Service centers Data Element Description	Updated NPI Threshold to 95%.
279, 281	Ancillary/ Service centers Data Element Description	Added language regarding Tribal Health Centers
281	Ancillary/ Service centers Data Element Description	Removed Permanent Facility Identifier (PFI) requirement for LHCSA
283	Ancillary/ Service centers Data Element Description	Changed to Critical Data Element. Removed OASAS Provider Number reporting requirement.
284	Ancillary/ Service centers Data Element Description	Removed OASAS PRU number and OMH HCBS number requirement.
299	Ancillary/ Service centers Data Element Description	Removed requirement for area code to match practice location.
349	Language Codes	Language was added regarding the full list of official ISO-639-2 codes.

Current Page #	Data Element	Change
386	Physician and other Provider Error Listing	New error codes added.
390	Ancillary/Service Center Error Listing	New error codes added.
395	Core Listing of Required Providers by Program Type	Primary Designation of 1, 2 and 3 added for Non-PCP Nurse Practitioners.
400	Core Listing of Required Services by Program Type	Removed Developmental Disability Service requirements for FIDA IDD.

Change Log as of February 2018

Current Page #	Data Element	Change
All	Data Dictionary Date	Date changed to February 2018 and Version number changed to 8.0
61	Physician and other Providers Data Element Description	Added: 2 new Applied Behavioral Analysis provider types to the Provider list
258-267	Physician and other Providers Data Element Description	Added new fields to the Provider file: FIDA IDD Indicator, FIDA IDD Panel Status, FIDA IDD Panel Size, HARP Panel Status, HARP Panel Size, HIV SNP Indicator, HIV SNP Panel Size, HIV SNP Panel status, Site NPI
279, 281	Ancillary/ Service centers Data Element Description	Added: LHCSA, FQHC and AIDS Designated centers to the existing DOH certified designated services list
284	Ancillary/Service Centers Data Element Description	Language was added to Managed Care Plan's Facility ID description for Plans reporting OMH Home and Community Based Services (HCBS)
340-343	Ancillary/Service Centers Data Element Description	Added new fields to the Ancillary file: FIDA IDD Indicator, HIV SNP Indicator, Servicing County Fields (1-5)
345	Borough/ County Codes	Added: All County Code
346-349	Language Codes	Language field changed to 3-byte; additional languages added to list
All	General Information	All Dental Indicators removed from Ancillary file: Commercial Non MCO dental indicator, NYSOH Individual Pediatric Dental High indicator, NYSOH

Current Page #	Data Element	Change
		Individual Pediatric Dental Low indicator, NYSOH Individual Adult Dental indicator, NYSOH Individual Family Dental indicator, NYSOH SHOP Pediatric Dental High indicator, NYSOH SHOP Pediatric Dental Low indicator, NYSOH SHOP Adult Dental indicator and NYSOH SHOP Family Dental indicator
350, 362	Provider and Ancillary/ Service Specialty Codes	Added: "Applied Behavioral Analysis Providers" to the Provider and Ancillary/Service Specialty codes lists
350, 364, 365, 366, 373	Provider and Ancillary/ Service Specialty Codes	New service codes added for Day treatment (OPWDD), Fiscal intermediary (OPWDD), HCBS Self direction (Support brokerage), State operated facilities
359, 369	Provider and Ancillary/ Service Specialty Codes	Updated: Code 912 to "Orthodontics- Clinic Specialty" to the Provider and Ancillary/Service Specialty codes lists
386	Physician and other Provider Error Listing	New error codes added
390	Ancillary/Service Center Error Listing	New error codes added
394	Core Listing of Required Providers by Program Type and Core Listing of Required Services by Program Type	Tables 1 and 2 simplified to show 'required for adequacy' or 'not required for adequacy'. The Category of Services was sorted alphabetically.
394	Core Listing of Required Providers by Program Type	New category of service added: Behavior Analysis
395	Core Listing of Required Providers by Program Type	Added code 651 (Cardio-thoracic) under Thoracic surgery in Table 1

Current Page #	Data Element	Change
397, 398, 399	Core Listing of Required Services by Program Type	Updated Non-Emergent Transportation, Home Delivered/Congregate Meals, Assistive Technology Agency, Community Transitional Service, Environmental Modifications, Moving Assistance requirements in Table 2
400	Core Listing of Required Services by Program Type	Personalized Recovery Oriented Services, Continuing Day Treatment, Intensive Psychiatric Rehabilitation Treatment Programs services were combined in to one row in Table 2 for Medicaid, HARP, HIV SNP and FIDA. FIDA IDD has these services listed separately.
400	Core Listing of Required Services by Program Type	New Developmental Disability Services added: Day habilitation, Prevocational services, Respite, Supported Employment, Fiscal Intermediary, Support brokerage, Community Habilitation, Pathway to employment, Article 16 to Table 2

Change Log as of September 7, 2017

Current Page #	Data Element	Change
All	Data Dictionary Date	Date changed to September 2017
43	Physician and other Providers Data Element Description	Example referencing Meds ID request deleted
271, 272	Ancillary/Service Centers: Data Element definition	Language was added about plans reporting OASAS facilities using the Medicaid Provider Identification Number and Managed Care Plan's Facility ID
290	Ancillary/Service Centers Data Element Description	Edited the service numbers to be consistent with the examples
365	Provider Specialty/ Service Description	Added code 674 Respiratory Therapy to the list of Provider and Ancillary/Service Specialty Codes (Alphabetical order)

Change Log as of August 1, 2017

Current Page #	Data Element	Change
All	Data Dictionary Version Number (Title and Footer)	Version number changed to 7.8 (August 2017)
5	General Information	Added: As of August 1st 2017, fixed width files are no longer supported as a format for submission
All	General Information	Deleted: Record position information and references to fixed width
All	Physician and other providers detailed record format	Maximum field size for PFI changed from 4 to 6
42	Physician and other Providers: Data element example	Edited the License number threshold to 98%
271, 272	Ancillary/Service Centers: Data Element definition	Language was added about OASAS plans reporting Provider Identification Number and Facility Program Number
343, 360, 365	Provider and ancillary/service specialty codes	Added new codes: Medically Managed Detoxification, Residential Substance Abuse Treatment Services (Stabilization), Residential Substance Abuse Treatment Services (Rehabilitation)
389	Core Listing of Required Services	Additional service codes for Medically Managed Detox Services changed from 754 to 013 in Table 2
389	Core Listing of Required Services	Category of service added in Table 2: Residential Substance Abuse Treatment Services

Current Page #	Data Element	Change
393	Core Listing of Required Services	Institutional Long Term Care split into 6 categories: Institutional Long Term Care, Institutional Long Term Care (Aids Skilled Nursing Facility), Institutional Long Term Care (HEAD INJURY/TBI INJURY SNF), Institutional Long Term Care (Behavioral Health Intervention Skilled Nursing Facility -Neuro), Institutional Long Term Care (Pediatric Skilled Nursing Facility), Institutional Long Term Care (Vent Skilled Nursing Facility)
394	Core Listing of Required Services	Two additional Designated Service Codes added to Dentistry
398	Core Listing of Required Services	CHP, Medicaid, HIV Special Needs, PACE, FIDA and HARP services changed to Not Required for Dental Services in the Crossover Specialties section. There are specific requirements for dental providers and dental sites for these products that must be met individually

Change Log as of June 6, 2017

Current Page #	Data Element	Change
All	Data Dictionary Version Number (Title and Footer)	Version number changed to 7.7 (June 2017)
All	All	FHP error code numbering reverted
5	General	Removed paragraph on Investigation of Fraud
5	General Information	Added: Fixed width will no longer be accepted effective 8/1/2017
48	Zip code	Deleted wording about zip reference file
114	Area Code	Changed from soft edit to critical edit
115	Phone number	Changed from soft edit to critical edit
304-334	NYSOH Non Standard products	Edited wording to reflect the matching Data Element Name
341, 342,	General Information	Edited the spelling of Ophthalmology

Current Page #	Data Element	Change
351, 360, 361, 386		
369, 378	Physician and other provider error listing	Deleted duplicate HARP provider indicator wording

Change Log as of March 8, 2017

Current Page #	Data Element	Change
All	Data Dictionary Version Number (Footer)	Version number changed to 7.6 (March 2017)
All	All	Removed FHP references
ALL	ALL	Removed HCS references
4	General Information	Added: NYS Provider & Health Plan Look-Up: The PNDS will be used to feed a public provider lookup tool on the NYS DOH website, allowing consumers to anonymously search multiple providers and find participating health plans, or search by county, by specialty, by language, and more.
5	Data Submission Schedule section	A health plan must update their online directory, as well as their PNDS submission within 15 days of becoming aware of the addition or termination of a provider from its network, or a change in a physician's hospital affiliation. PNDS data can be submitted at any time, and must be submitted at least quarterly, regardless of network changes. Once per quarter, the submitted network will be reviewed for adequacy. The network review will occur 15 business days after the end of the quarter (quarters end March 31, June 30, September 30, and December 31).
39, 40, 47-49, 55, 57, 58, 63, 69, 117, 259-261, 266, 287	Physician and Other Providers Element Descriptions	Added language about leading zeros: license number, prim spec, secd spec, tax ID, mmis/meds ID, prov type, pfi, designated service code, additional service codes, physician extenders, county code, zip.

Current Page #	Data Element	Change
42	Physician and Other Providers Element Descriptions	Site Name; Cannot be blank
43	Physician and Other Providers Element Descriptions	Room or Suite; Cannot be blank
46	Physician and Other Providers Element Descriptions	State; Must be a valid state code
47	Physician and Other Providers Element Descriptions	County; Must be a valid NYS county code (FIPS)
113	Physician and Other Providers Element Descriptions	Language 1-7; Language 1 cannot be blank. Language code must be found in the PNDS dictionary.
114	Physician and Other Providers Element Descriptions	Area Code; Area code (other than toll free) must correspond to the state submitted for provider's address. *Change from soft to critical*
115	Physician and Other Providers Element Descriptions	Phone Number; Must be 7 digits. *Change from soft to critical*
117	Physician and Other Providers Element Descriptions	FEIN; *Change from soft to critical*
285	Ancillary/Service Centers Element Descriptions	Area Code; Area code (other than toll free) must correspond to the state submitted for provider's address. *Change from soft to critical*
288	Ancillary/Service Centers Element Descriptions	Phone Number; Must be 7 digits. *Change from soft to critical*
343	Provider Specialty/Service Description	Removed code 280 for chiropractic as it is no longer in use. Chiropractors should be reported under code 162 (osteopathic manipulative medicine).
345	Provider Specialty/Service Description – Numerical Order	New codes added: 405-FEDERALLY QUALIFIED HEALTH CENTER (FQHC) 406-PRESUMPTIVE ELIGIBILITY 407-TRIBAL HEALTH CENTERS 408-DESIGNATED AIDS CENTERS
354	Provider Specialty/Service Description - Alphabetical	New code added: 408-DESIGNATED AIDS CENTERS

Current Page #	Data Element	Change
355	Provider Specialty/Service Description - Alphabetical	New code added: 405-FEDERALLY QUALIFIED HEALTH CENTER (FQHC)
361	Provider Specialty/Service Description - Alphabetical	New code added: 406-PRESUMPTIVE ELIGIBILITY
363	Provider Specialty/Service Description - Alphabetical	New code added: 407-TRIBAL HEALTH CENTERS
381-384	Table 1 Core Listing of Required Providers by Program Type	Omit certain pediatric provider types for HARP: PCP/Pediatrics (150) Child Psychiatry (191) Pediatric Surgery (153) Pedodontics (804)
385	Table 2 - Core Listing of Required Services by Program Type	Medically Managed Detox Services, Additional Service Codes updated to 357
385	Table 2 Table 2 - Core Listing of Required Services by Program Type	Added: Medically Supervised Detox Services
386	Table 2 Table 2 - Core Listing of Required Services by Program Type	Updated: Outpatient Chemical Dependency; Designated Service Codes (011, 321, 914, 749) and Additional Service Code (749, 922, 984,986, 987).
386	Table 2 Table 2 - Core Listing of Required Services by Program Type	Added: Integrated Services for Chemical Dependence (Clinic and Opioid)
386	Table 2 Table 2 - Core Listing of Required Services by Program Type	Added: Office Based Substance Abuse Services
386	Table 2 Table 2 - Core Listing of Required Services by Program Type	Updated: Certified Home Health (HHA); 'required' QHP/EP.
387	Table 2 Table 2 - Core Listing of Required Services by Program Type	Updated: Licensed Home Health Care – Personal Care Assistant (HHA/PCA); 'required' for EP, but not required for QHP
388	Table 2 Table 2 - Core Listing of Required Services by Program Type	Updated: Dentistry; 'optional' for NYSoH Dental.
389	Table 2 Table 2 - Core Listing of Required Services by Program Type	Updated: Freestanding Birth Center, not required for FIDA.
389	Table 2 Table 2 - Core Listing of Required Services by Program Type	Updated: Mobile Mental Health Treatment; Medicaid and HIV/SNP as 'required'.
390	Table 2 Table 2 - Core Listing of Required Services by Program Type	Updated: Personalized Recovery Oriented Services; Medicaid and HIV/SNP as 'required'.

Current Page #	Data Element	Change
390	Table 2 Table 2 - Core Listing of Required Services by Program Type	Updated: Continuing Day Treatment; Medicaid and HIV/SNP as 'required'.
390	Table 2 Table 2 - Core Listing of Required Services by Program Type	Updated: Partial Hospitalization; Commercial off the NYSoH, Medicaid, HIV/SNP, QHP/EP, HARP and Commercial Non-MCO Medical as 'required' and PACE as 'optional'.
391	Table 2 Table 2 - Core Listing of Required Services by Program Type	Updated: AIDS Designated Centers; Designated Service Codes (011, 312) and Additional Service Code (408).
391	Table 2 Table 2 - Core Listing of Required Services by Program Type	Updated: Dental Services; 'optional' for NYSoH Dental.
392	Table 2 Table 2 - Core Listing of Required Services by Program Type	Added: Tribal Health Centers
392	Table 2 Table 2 - Core Listing of Required Services by Program Type	Added: Comprehensive Psychiatric Emergency Program (CPEP)

Change Log as of December 5, 2016

Current Page #	Data Element	Change
348	Provider Specialty/Service Description	Remove reference to HCBS from the following provider specialty codes: Provider Travel - 835 Psycho Social Rehab - 836 Peer Support - 837 Community Psychiatric Supportive Treatment - 839
357	Provider Specialty/Service Description	Updated code 824 to "MOBILE MENTAL HEALTH TREATMENT PROVIDER/CRISIS INTERVENTION"
354	Provider Specialty/Service Description	Removed HCBS from code 839 "COMMUNITY PSYCHIATRIC SUPPORTS AND TREATMENT"
355	Provider Specialty/Service Description	Removed "HOME & COMMUNITY BASED SERVICE PEER SUPPORT" and moved it to page 360, alphabetized as "PEER SUPPORT"
361	Provider Specialty/Service Description	Removed HCBS from code 836 "PSYCHOSOCIAL REHAB"

Current Page #	Data Element	Change

Change Log as of August 26, 2016

Current Page #	Data Element	Change
All	Data Dictionary Version Number (Footer)	Version number changed to 7.5
All	Data Dictionary Version Number and Date	Version number changed to 7.5 (August 2016)
All	HCS updated throughout to reflect new PNDS portal, when necessary	Most references to the HCS have been updated to reflect the new PNDS portal, unless it is a historical reference to the system or in the case that plans might still need to access the HCS for a specific reason (MEDS ID)
4	About the Provider Network Data System	Added Health and Recovery Plan(s) (HARP); New York State of Health (NYSOH) Qualified Health Plan(s) (QHP's); Basic Health Plan(s) (BHP's); and Commercial networks outside of the NYSOH.
5	Connection to the Provider Network Data System (PNDS)	Added updated URL, access information and notification.
5	Data Submission Schedule	Added Basic Health Plan(s) (BHPs), and updated submission quarters.
10	Physician and Other Providers Detailed Record Format	Added indicator data elements for Commercial Non-MCO Medical, Commercial Non-MCO Vision, and Commercial Non-MCO Dental.
31	Ancillary/Service Centers Detailed Record Format	Added indicator data elements for Commercial Non-MCO Medical, Commercial Non-MCO Vision, and Commercial Non-MCO Dental.
47	Physician and Other Providers Edit Application	Deleted Edit Application #2: "There is an edit check between FIPS code and zip code; records may be rejected if a zip code does not fall in the appropriate FIPS county code. This may mean you have either entered a wrong zip code or FIPS county code."
82	Physician and Other Providers Element Description	Added data element descriptions for Commercial Non-MCO Medical line of business.
83	Physician and Other Providers Element Description	Added data element descriptions for Commercial Non-MCO Vision line of business.
84	Physician and Other Providers Element Description	Added data element descriptions for Commercial Non-MCO Dental line of business.
107	Physician and Other Providers Edit Applications Description	Updated to reflect the OPCERT for all hospitals are posted on the PNDS portal.
108	Physician and Other Providers Edit Applications Description	Updated to reflect the PFI numbers for all hospitals are posted on the PNDS portal.

Current Page #	Data Element	Change
110	Physician and Other Providers Definition	Updated to reflect if a primary care provider works in a clinic, the clinic must be identified by OPCERT and PFI (see page 107-108 for description of OPCERT and PFI). The two data elements are needed to identify the facility location for each primary care provider. The full list of OPCERTs and PFIs is posted on the PNDS portal.
109	Physician and Other Providers Edit Applications Description	Updated to reflect the data element must be a valid operating certificate number as listed on the PNDS portal (originally from HFIS).
110	Physician and Other Providers Definition	Updated to reflect the full list of OPCERTs and PFIs is posted on the PNDS portal.
259	Physician and Other Providers Definition	Updated to reflect that FIPS codes are listed on the PNDS page.
260	Physician and Other Providers Definition	Updated to reflect that zip codes are listed on the PNDS page.
261	Physician and Other Providers Edit Application	Deleted Edit Application: "There will be an edit check between FIPS code and zip code; records may be rejected if a zip code does not fall in the appropriate FIPS County code. This may mean you have entered either a wrong zip or a wrong FIPS County code."
282	Ancillary/Service Centers	Added data element descriptions for Commercial Non-MCO Medical line of business.
283	Ancillary/Service Centers	Added data element descriptions for Commercial Non-MCO Vision line of business.
284	Ancillary/Service Centers	Added data element descriptions for Commercial Non-MCO Dental line of business.
336	Language Codes	Added Bosnian (BS) language name in Indo-European language family.
337	Language Codes	Added Karen (KR) language name in Asian/Pacific Islander language family.
348	Provider Specialty/Service Description	Added code 835 (HCBS Provider Travel), code 836 (HCBS Psychosocial Rehab), code 837 (HCBS Peer Support), code 838 (OMH Other Licensed Practitioners), and code 839 (HCBS Community Psychiatric Supports and Treatment).
357	Provider Specialty/Service Description	Added code 839 (Home & Community Based Service (HCBS) Community Psychiatric Supports and Treatment), code 837 (Home & Community Based Service (HCBS) Peer Support), code 835 (Home & Community Based Service (HCBS) Provider Travel), and code 836 (Home & Community Based Service (HCBS) Psychosocial Rehab).

Current Page #	Data Element	Change
369	Physician and Other Provider Error Listing	Added Message Number 38 (Commercial Non-MCO Medical Indictor), and Message Number 39 (Commercial Non-MCO Vision Indicator).
368	Physician and Other Provider Error Listing	Added Message Number 40 (Commercial Non-MCO Dental Indicator).
377	Ancillary/Service Center Error Listing	Added Message Number 24 (Commercial Non-MCO Medical Indicator), Message Number 25 (Commercial Non-MCO Dental Indicator) and Message Number 26 (Commercial Non-MCO Vision Indicator).
381-384	Table 1 – Core Listing of Required Providers by Program Type	Added three new columns (Commercial Non-MCO Medical, Commercial Non-MCO Vision, and Commercial Non-MCO Dental)
385-391	Table 2 – Core Listing of Required Services by Program Type	Added three new columns (Commercial Non-MCO Medical, Commercial Non-MCO Vision, and Commercial Non-MCO Dental)

Change Log as of February 26, 2016

Current Page #	Data Element	Change
342	Provider and Ancillary/Service Specialty Codes	Added provider/ancillary codes: 835 HCBS PROVIDER TRAVEL 836 HCBS PSYCHOSOCIAL REHAB 837 HCBS PEER SUPPORT 838 OMH OTHER LICENSED PRACTITIONERS 839 HCBS COMMUNITY PSYCHIATRIC SUPPORTS AND TREATMENT

Change Log as of February 3, 2016

Current Page #	Data Element	Change
378	Table 2 – Core Listing of Required Services by Program Type	Added Urgent Care Center category of service.

Change Log as of September 29, 2015

Current Page #	Data Element	Change
All	Data Dictionary Version Number (Footer)	Version number changed to 7.0
All	Data Dictionary Version Number and Date	Version number changed to 7.0 (September 2015)

Change Log as of September 29, 2015

Current Page #	Data Element	Change
4-5	General Information	Added HARP
9	Physician and Other Providers Detailed Record Format	Added indicator for the HARP line of business.
30	Ancillary/Service Centers Detailed Record Format	Added indicator for the HARP line of business.
74	Physician and Other Providers Element Description	Added indicator data element descriptions for the HARP line of business.
271	Ancillary/Service Centers Element Descriptions	Added indicator data element descriptions for the HARP line of business.
334	Provider and Ancillary/Service Specialty Codes	Added behavioral health provider specialty codes 854-862
370, 373	Provider and Ancillary File Error Codes	Added ancillary and provider error codes for HARP.
375-377	Table 1 – Core Listing of Required Providers by Program Type	Added HARP as a program type.
378-382	Table 2 – Core Listing of Required Services by Program Type	Added HARP as a program type.

Change Log as of May 13, 2015

Current Page #	Data Element	Change
All	Data Dictionary Version Number (Footer)	Version number changed to 6.9
All	Data Dictionary Version Number and Date	Version number changed to 6.9 (May 2015)
2	Table of Contents	Updated table of contents to take into account fields added with insertion of BHP indicators, panel status and panel size fields
4	About the Provider Network Data System	Added in Basic Health Plan (BHP)
9-12	Physician and Other Providers Detailed Record Format	Added indicators, panel status and panel size fields for Standard BHP and BHP plus Adult Vision and Dental lines of business.
32	Ancillary/Service Centers Detailed Record Format	Added indicators for the Standard BHP and BHP plus Adult Vision and Dental lines of business.
80-81	Physician and Other Providers Element Description	Added indicator data element descriptions for the Standard BHP and BHP plus Adult Vision and Dental lines of business.

Change Log as of May 13, 2015

Current Page #	Data Element	Change
91-92	Physician and Other Providers Element Description	Added panel status data element descriptions for the Standard BHP and BHP plus Adult Vision and Dental lines of business.
102-103	Physician and Other Providers Element Description	Added panel size data element descriptions for the Standard BHP and BHP plus Adult Vision and Dental lines of business.
277-278	Ancillary/Service Centers Element Description	Added indicator data element descriptions for Standard BHP and BHP plus Adult Vision and Dental lines of business.
330	County Codes	Added in the code to be used when submitting out of state providers (088).
371, 374	Provider and Ancillary File Error Codes	Added Error Codes for Standard BHP and BHP plus Adult Vision and Dental indicators, panel status and panel size fields.
376-382	Core Listing of Required Providers by Program Type	Added BHP to the NYSOH QHP program type

Change Log as of March 2, 2015

Current Page #	Data Element	Change
All	Family Health Plus	Family Health Plus is no longer an active product and has been replaced with filler fields that should be space-filled.
1	Data Dictionary Version Number	Version number changed to 6.8
5	Connection to the Health Commerce System (HCS) and Provider Network Data System (PNDS)	Updated email address for the New York Health Exchange. Added email address for PNDS.
5	Data Submission Schedule	Health providers with multiple products will now submit all lines of business in a single file.
9-12	Physician and Other Providers Detailed Record Format	Added indicators, panel status and panel size fields for the FIDA line of business.
32	Ancillary/Service Centers Detailed Record Format	Added indicators for the FIDA line of business.
79	Physician and Other Providers Element Description	Added indicator data element descriptions for the FIDA line of business.

Change Log as of March 2, 2015

Current Page #	Data Element	Change
88	Physician and Other Providers Element Description	Added panel status data element descriptions for the FIDA line of business.
97	Physician and Other Providers Element Description	Added panel size data element descriptions for the FIDA line of business.
258, 333, 343 & 371	License/Facility Operating Certificate	Added code 663 - Institutional Short Term Care renamed code 660 - Nursing Homes to Institutional Long Term Care
270	Ancillary/Service Centers Element Description	Added indicator data element descriptions for FIDA.
333-335 338-350	Provider and Ancillary/Service Specialty Codes	Added nursing home provider specialty codes 655-659. Added FIDA specialty codes 816-834
353	Provider Network / Medicaid Encounter Data Attestation	Attestations are to be addressed to the new director of the Bureau of Managed Care Certification and Surveillance, Susan Bentley.
367-369	Table 1 – Core Listing of Required Providers by Program Type	Added FIDA as a program type.
368	Table 1 - Core Listing of Required Providers by Program Type	Added new Categories of Service: Family Planning, Nutrition and Palliative Care.
370-374	Table 2 – Core Listing of Required Services by Program Type	Added FIDA as a program type.
370-374	Table 2 - Core Listing of Required Services by Program Type	Added new Categories of Service: Institutional Short Term Care (NH/SNF), Hemodialysis, Oncology – Therapy, General Vascular Surgery, Transplant Surgery, Hospital Based/Freestanding Surgery, Assisted Living, Assertive Community Treatment, Assistive Technology Agency, Community Integration Counseling, Community Transitional Service, Environmental Modifications, Freestanding Birth Center, Independent Living Skills, Mobile Mental Health Treatment, Moving Assistance, Peer Delivered Services, Peer Mentoring, Personalized Recovery, Oriented Services, Positive Behavioral Interventions & Support, Social Day Care Transportation, Structured Day Programs, Tele-health, Home & Community Support Services, Continuing Day Treatment, Intensive Psychiatric Rehabilitation Treatment Programs, Partial Hospitalization and NYS OMH Licensed CRs.

Change Log as of January 17, 2014

Current Page #	Data Element	Change
1	Data Dictionary Version Number	Version number changed to 6.7
5	Connection to the Health Commerce System (HCS) and Provider Network Data System	Contact phone number added for the New York State Health Benefit Exchange.
5	Data Submission Schedule	Added New York State Health Benefit Exchange submission schedule. Health insurers with multiple products are now instructed to report MLTC; Mainstream; and HIV SNP programs separately.
45, 46 & 262	Data Element Allowable Thresholds	Removed percentages of the allowable thresholds required for a file submission to be considered accepted due to differences between managed care and managed long term care requirements, these thresholds are available during the review process on HCS in the Plan Error Reports From Latest Data Submission.
354-363	Provider & Ancillary File Error Codes	This section has been updated to reflect the established New York State Health Benefit Exchange error codes. Error codes now cover pages 354-363, previously 354-358.
364-373	Coding Scheme Summary Reports	Coding Scheme Summary Reports now cover pages 364-372, previously 359-367.
365	Table 1 – Primary Care Providers	Added footnote that states Primary Care Providers are required for both Medicaid and HIV Special Needs.
365	Table 1 – Primary Care Providers – Nurse Practitioners	Nurse Practitioners may no longer use Primary designation code 3 (PCP and Specialist)
366	Table 1 – Specialty Care Providers – Chiropractic	Primary Designation code 3 has been removed and specialty code 280 has been removed.
366	Table 1 – Specialty Care Providers – Nurse Practitioners	Nurse Practitioners removed from Specialist Care Providers to prevent being represented twice.
367	Table 1 – Dental Care Providers	Primary Designation code 3 has been removed. Dental care providers cannot be primary care providers.
368	Table 1 – Crossover Specialties	Primary Designations for Crossover Specialties>Therapy changed, additional provider type added for Therapy: Respiratory.

Change Log as of January 17, 2014

Current Page #	Data Element	Change
369-370	Table 2 – Ancillary/Tertiary Care Services	Updated Core Listing of Required Services By Program Type, additional Category of Services coded in the Ancillary/Tertiary Care Services section. Home Based Occupational Therapy, Physical Therapy, Speech Therapy and Medical Social Services have been added to Certified Home Health (CHHA) categories of service with additional service codes 300, 301 and 302. Home Based Physical Therapy, Occupational Therapy, Speech Therapy and Medical Social Services have been added to Licensed Home Health Care (HHA) categories of service with additional service codes 300, 301 and 302.
370	Table 2 – Ancillary/Tertiary Care Services - Dentistry	Now required to provide HIV Special needs services.
371	Table 2 – Traditional Medicaid Providers - Federal Qualified Health Center (FQHC)	Federal Qualified health Centers (FQHC) are now required to provide HIV Special needs services.