Dear Contractors,

As you know, the Payability Guide has been developed by PHS and the New York City Department of Health and Mental Hygiene (NYCDOHMH) to provide guidance on submitting data for performance-based contracts.

The Guide brings together the most pertinent information about services & data reporting for all contracts. The major emphasis of the guide is the requirements for payment, but it also covers certain requirements for contract compliance.

The following are updates to the new Payability Guide for January 2018:

New sections have been added for the following Ryan White service categories:

- Legal Services (LSN/LST)

New sections have been added for the following service categories:

- Status Neutral – Care Coordination (SNC)
- Undetectables Viral Load Suppression Program (UND)

For the service category Outreach and Status Neutral Prevention and Care Navigation in Brooklyn (BCP), the service type Linkage to Care – Known Positive within 30 days (Code N58) has been removed. The following new types have been added:

- Linkage to Care within 14 days (Immediate) (Code N54)
- Linkage to Care between 15 and 30 days (Expedient) (Code N55)
- Linkage to Care between 31 and 365 days (Code N57)

For service categories Outreach and Status Neutral Prevention and Care Navigation in Brooklyn (BCP) and HIV Testing and Status Neutral Prevention and Care Navigation in Brooklyn (BTP) the following service type has been added:

- Follow-Up Communication (Code N46). This service type has a rule that it is only payable two times per client per enrollment period.

For service categories Sexual and Behavioral Health for Priority Populations (SBH) and HIV Testing and Status Neutral Prevention and Care Navigation in Brooklyn (BTP), their recoupment rule has changed for STI Screening (Code P65).

- The new rule is that only four STI Screenings are payable per client per contract year.
Rules have been changed for **Harm Reduction Services (HRM)** and **Mental Health Services (MHV)**:

- The rule that a Reassessment (Code 076) is only payable once every six months has been removed.
- The frequency rule for a service plan update (Code 226) has been changed, and is now payable four times within a 365-day period.

Rules have changed for the following service categories:

- **Sexual and Behavioral Health for Priority Populations (SBH)**
- **Evidence-Based Interventions to Support Biomedical Prevention: Clinical Settings (EBP)**
- **PrEP for Adolescents (ADL)**, and
- **PEP Centers of Excellence (PCE)**

The new rules for these service categories are:

- A PEP Follow Up – Weekly (Code N18) must occur no more than 60 days after an initial medical visit (Code N05, N34 or N06).
- No more than four PEP Follow Up – Weekly (Code N18) visits are payable after each PEP initial medical visit (N05, N34 or N06).

Please click here and select “Guide to Requirements for Payability” under “Manuals and Guides” to view and download the Payability Guide:

[https://www.healthsolutions.org/get-funding/for-current-contractors/contractor-resources/]