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#### State/Territory Name: New York

#### State Plan Amendment (SPA) #: 13-0048

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services New York Regional Office 26 Federal Plaza, Room 37-100 New York, NY 10278

CENTERS FOR MEDICARE & MEDICAID SERVICES

DIVISION OF MEDICAID AND CHILDREN'S HEALTH OPERATIONS

DMCHO:PM:SPA-NY-13-0048-FCA

May 10, 2017

Jason A. Helgerson State Medicaid Director Deputy Commissioner Office of Health Insurance Programs NYS Department of Health Empire State Plaza Corning Tower (OCP-1211) Albany, NY 12237

RE: TN 13-0048

Dear Commissioner Helgerson:

This is to notify you that New York State Plan Amendment (SPA) #13-0048 has been approved for adoption into the State Medicaid Plan with an effective date of April 4, 2013. This SPA amends and updates the State's APG system for Outpatient Hospital Services.

Enclosed are copies of SPA #13-0048 and the CMS-179 form, as approved.

If you have any questions, please contact Peter Marra at 518-396-3810, ext 104.

Sincerely,

10 2

Michael Melendez, LMSW Associate Regional Administrator Division of Medicaid and Children's Health Operations

Enclosures

cc. J. Ulberg R. Deyette L. Tavener R. Weaver R. Holligan P. Marra M. Lopez

DEPARTMENT OF HEALTH AND HUMAN SERVICES HEALTH CARE FINANCING ADMINISTRATION		FORM APPROVED
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL	1. TRANSMITTAL NUMBER: 13-0048	OMB NO. 0938-019
	15-0048	New York
FOR: HEALTH CARE FINANCING ADMINISTRATION	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE	
HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES	April 4, 2013	
5. TYPE OF PLAN MATERIAL (Check One):		
NEW STATE PLAN	SIDERED AS NEW PLAN	AMENDMENT
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMEN	DMENT (Separate Transmittal for each as	AIVIENDIVIEN I
6. FEDERAL STATUTE/REGULATION CITATION:	7. FEDERAL BUDGET IMPACT: (in	thousands)
§1902(a) of the Social Security Act, and 42 CFR 447	a. FFY 04/04/13-09/30/13 \$ 0 b. FFY 10/01/13-09/30/14 \$ 0	(inousands)
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPERS SECTION OR ATTACHMENT (If Ap.	
Attachment 4.19-B: Pages 1(e)(2), 1(e)(2.1), 1(e)(2.2)	SECTION OR ATTACHMENT (I) AP	oncaole).
	Attachment 4.19-B: Pages 1(e)(2), 1(e)	e)(2.1), 1(e)(2.2)
10. SUBJECT OF AMENDMENT: Apr 2013 Hospital OP APG Weight Adjustments (FMAP = 50%)		
<ul> <li>11. GOVERNOR'S REVIEW (Check One):</li> <li>☑ GOVERNOR'S OFFICE REPORTED NO COMMENT</li> <li>☑ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED</li> <li>☑ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL</li> </ul>	OTHER, AS SPEC	IFIED:
SIGNATURE OF STATE AGENCY OFFICIAL	16. RETURN TO:	
	New York State Department of Health	
5 FYPED NAME: Jason A. Helgerson	<ul> <li>Division of Finance &amp; Rate Setting</li> <li>99 Washington Ave – One Commerce Plaza</li> </ul>	
4 FITLE Medicaid Director	Suite 1460	
Department of Health	Albany, NY 12210	
JUN 2 4 2013		
FOR REGIONAL OFF	ICE USE ONLY	
17. DATE RECEIVED:	18. DATE APPROVED: MAY 10, 2017	
PLAN APPROVED - ONE		
<ol> <li>EFFECTIVE DATE OF APPROVED MATERIAL: APRIL 4, 2013</li> </ol>	20 SIGNATURE OF REGIONAL OFF	FICIAL
21. TYPED NAME: Michael Melendez	22. TITLE: Associate Regional Administrator Division of Medicaid and Children's Health	
23. REMARKS:		
23. REMARKS:		

#### New York 1(e)(2)

# APG Reimbursement Methodology – Hospital Outpatient

The following links direct users to the various definitions and factors that comprise the APG reimbursement methodology, which can also be found in aggregate on the APG website at http://www.health.ny.gov/health\_care/medicaid/rates/apg/index.htm. In addition, prior period information associated with these links is available upon request to the Department of Health.

#### **Contact Information:**

http://www.health.ny.gov/health\_care/medicaid/rates/apg/index.htm Click on "Contacts."

# 3M APG Crosswalk, version 3.8; updated as of 10/01/12 and 01/01/13:

http://www.health.ny.gov/health\_care/medicaid/rates/crosswalk/index.htm http://dashboard.emedny.org/CrossWalk/html/cwAgreement.html Click on "Accept" at bottom of page to gain access.

# APG Alternative Payment Fee Schedule; updated as of 01/01/11:

http://www.health.ny.gov/health\_care/medicaid/rates/methodology/index.htm Click on "Alternative Payment Fee Schedule."

# APG Consolidation Logic; logic is from the version of 04/01/08, updated as of 10/01/11:

http://www.health.ny.gov/health\_care/medicaid/rates/bundling/ Click on "2011."

# APG 3M Definitions Manual Versions; updated as of 10/01/12 and 01/01/13:

http://www.health.ny.gov/health\_care/medicaid/rates/crosswalk/index.htm

# APG Investments by Rate Period; updated as of 01/01/11:

http://www.health.ny.gov/health\_care/medicaid/rates/methodology/index.htm Click on "Investments by

# APG Relative Weights; updated as of [10/01/12 and 01/01/13] 04/01/13:

http://www.health.ny.gov/health\_care/medicaid/rates/methodology/index.htm Click on "Weights, Proc Weights, and APG Fee Schedule Amounts" file.

### Associated Ancillaries; updated as of 01/01/11:

http://www.health.ny.gov/health\_care/medicaid/rates/apg/index.htm Click on "Ancillary Policy."

TN#13-0048	Approval Date	May 10, 2017
Supersedes TN <u>#12-0038</u>	Effective Date	April 4, 2013

#### New York 1(e)(2.1)

#### Carve-outs; updated as of 10/01/12:

http://www.health.ny.gov/health\_care/medicaid/rates/methodology/index.htm Click on "Carve Outs."

## Coding Improvement Factors (CIF); updated as of 07/01/12:

http://www.health.ny.gov/health\_care/medicaid/rates/methodology/index.htm Click on "CIFs by Rate Period."

# If Stand Alone, Do Not Pay APGs; updated as of 07/01/12:

http://www.health.state.ny.us/health\_care/medicaid/rates/methodology/index.htm Click on "If Stand Alone, Do Not Pay APGs."

# If Stand Alone, Do Not Pay Procedures; updated as of 04/01/11:

http://www.health.state.ny.us/health\_care/medicaid/rates/methodology/index.htm Click on "If Stand Alone, Do Not Pay Procedures."

#### Modifiers; updated as of 10/01/12:

http://www.health.ny.gov/health\_care/medicaid/rates/methodology/index.htm Click on "Modifiers."

#### Never Pay APGs; updated as of 07/01/12:

http://www.health.ny.gov/health\_care/medicaid/rates/methodology/index.htm Click on "Never Pay APGs."

# Never Pay Procedures; updated as of [10/01/12 and 01/01/13] 04/01/13:

http://www.health.ny.gov/health\_care/medicaid/rates/methodology/index.htm Click on "Never Pay Procedures."

#### No-Blend APGs; updated as of 04/01/10:

http://www.health.ny.gov/health\_care/medicaid/rates/methodology/index.htm Click on "No Blend APGs."

### No-Blend Procedures; updated as of 01/01/11:

http://www.health.ny.gov/health\_care/medicaid/rates/methodology/index.htm Click on "No Blend Procedures."

TN	#13-0048

Supersedes TN <u>#12-0038</u>

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#### New York 1(e)(2.2)

## No Capital Add-on APGs; updated as of 10/01/12 and 01/01/13:

http://www.health.ny.gov/health\_care/medicaid/rates/methodology/index.htm Click on "No Capital Add-on APGs."

# No Capital Add-on Procedures; updated as of 04/01/12 and 07/01/12:

http://www.health.ny.gov/health\_care/medicaid/rates/methodology/index.htm Click on "No Capital Add-on Procedures."

## Non-50% Discounting APG List; updated as of [07/01/12] 04/01/13:

http://www.health.ny.gov/health\_care/medicaid/rates/methodology/index.htm Click on "Non-50% Discounting APG List."

## Rate Codes Carved Out of APGs; updated as of 01/01/11:

http://www.health.ny.gov/health\_care/medicaid/rates/methodology/index.htm Click on "Rate Codes Carved Out of APGs for Article 28 facilities."

## Rate Codes Subsumed by APGs; updated as of 10/01/12:

http://www.health.ny.gov/health\_care/medicaid/rates/methodology/index.htm Click on "Rate Codes Subsumed by APGs – Hospital Article 28."

### Statewide Base Rate APGs; updated as of 01/01/12:

http://www.health.ny.gov/health\_care/medicaid/rates/methodology/index.htm Click on "Statewide Base Rate APGs."

### Uniform Packaging Ancillaries; updated as of 01/01/12:

http://www.health.ny.gov/health\_care/medicaid/rates/methodology/index.htm Click on "Uniform Packaging APGs."

TN \_\_\_\_\_\_#13-0048

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