

KATHY HOCHUL Governor JAMES V. McDONALD, M.D., M.P.H. Commissioner JOHANNE E. MORNE, M.S. Acting Executive Deputy Commissioner

December 28, 2023

Todd McMillion Director Department of Health and Human Services Centers for Medicare and Medicaid Services 233 North Michigan Ave, Suite 600 Chicago, IL 60601

> RE: SPA #24-0013 Non-Institutional Services

Dear Mr. McMillion:

The State requests approval of the enclosed amendment #24-0013 to the Title XIX (Medicaid) State Plan for non-institutional services to be effective January 1, 2024 (Appendix I). This amendment is being submitted based on enacted legislation. A summary of the plan amendment is provided in Appendix II.

The State of New York reimburses these services through the use of rates that are consistent with efficiency, economy, and quality of care and are sufficient to enlist enough providers so that care and services are available under the plan at least to the extent that such care and services are available to the general population in the geographic area as required by § 1902(a)(30) of the Social Security Act and 42 CFR § 447.204.

A copy of pertinent sections of enacted legislation is enclosed for your information (Appendix III). A copy of the public notice of this plan amendment, which was given in the <u>New</u> <u>York State Register</u> on December 13, 2023, is also enclosed for your information (Appendix IV). In addition, responses to the five standard funding questions are also enclosed (Appendix V).

If you have any questions regarding this State Plan Amendment submission, please do not hesitate to contact Regina Deyette, Medicaid State Plan Coordinator, Division of Finance and Rate Setting, Office of Health Insurance Programs at (518) 473-3658.

Sincerely,

Amir Bassiri Medicaid Director Office of Health Insurance Programs

Enclosures

	1. TRANSMITTAL NUMBER	2. STATE
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL		
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	3. PROGRAM IDENTIFICATION: TITLE C	F THE SOCIAL
	SECURITY ACT XIX	XXI
TO: CENTER DIRECTOR	4. PROPOSED EFFECTIVE DATE	
CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES		
5. FEDERAL STATUTE/REGULATION CITATION	6. FEDERAL BUDGET IMPACT (Amou a. FFY \$	unts in WHOLE dollars)
	b. FFY\$	
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	8. PAGE NUMBER OF THE SUPERSE OR ATTACHMENT (If Applicable)	DED PLAN SECTION
9. SUBJECT OF AMENDMENT		
10. GOVERNOR'S REVIEW (Check One)		
GOVERNOR'S OFFICE REPORTED NO COMMENT COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	OTHER, AS SPECIFIED:	
11. SIGNATURE OF STATE AGENCY OFFICIAL	15. RETURN TO	
12. TYPED NAME		
13. TITLE		
14. DATE SUBMITTED December 28, 2023		
FOR CMS U	SE ONLY	
16. DATE RECEIVED	17. DATE APPROVED	
PLAN APPROVED - ON	IE COPY ATTACHED	
18. EFFECTIVE DATE OF APPROVED MATERIAL	9. SIGNATURE OF APPROVING OFFICIAL	
20. TYPED NAME OF APPROVING OFFICIAL	I. TITLE OF APPROVING OFFICIAL	
22. REMARKS		

Appendix I 2023 Title XIX State Plan Fourth Quarter Amendment Amended SPA Pages

New York 10(a.3.ii)

1905(a)(13) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

Reimbursement methodology (cont.)

Effective January 1, 2024, the freestanding Ambulatory Patient Group base rates are as follows:

<u>Service</u>	<u>Region</u>	<u>1/1/2024</u>
Addiction Rehab	<u>Upstate</u>	<u>\$ 172.78</u>
Addiction Rehab	<u>Downstate</u>	<u>\$ 202.16</u>
Addiction Day Rehab	<u>Upstate</u>	<u>\$ 172.78</u>
Addiction Day Rehab	<u>Downstate</u>	<u>\$ 202.16</u>
Opioid Treatment Program (OTP)	<u>Upstate</u>	<u>\$ 172.78</u>
Opioid Treatment Program (OTP)	Downstate	<u>\$ 202.16</u>
Offsite - Rehab and Day Rehab	<u>Upstate</u>	<u>\$ 241.89</u>
Offsite - Rehab and Day Rehab	Downstate	<u>\$ 283.02</u>
<u>Offsite - OTP</u>	<u>Upstate</u>	<u>\$ 241.89</u>
Offsite - OTP	<u>Downstate</u>	<u>\$ 283.02</u>

The rates in the table above are posted at:

https://oasas.ny.gov/reimbursement/ambulatory-providers

TN <u>#24-0013</u>

Superseding TN _#NEW___

Approval Date _____ Effective Date _<u>January 1, 2024</u> Appendix II 2023 Title XIX State Plan Fourth Quarter Amendment Summary

SUMMARY SPA #24-0013

This State Plan Amendment proposes to provide APG rate parity across all OASAS freestanding outpatient settings (i.e., outpatient addiction rehab, day rehab, opioid treatment programs), such that all program types within a rate setting region (upstate or downstate) will share the same APG base rate.

Appendix III 2023 Title XIX State Plan Fourth Quarter Amendment Authorizing Provisions

SPA 24-0013

Sections 43.01 and 43.02 of the Mental Hygiene Law grant the Commissioner the power and responsibility to adopt regulations that are necessary and proper to implement matters under his/her jurisdiction and to establish standards and methods of payment made by government agencies pursuant to title 11 of article 5 of the Social Services Law for eligible addiction services certified by the Office.

Additionally, the NYS SFY 22/23 Budget (Chapter 53 of the Laws of 2022) establishes the following (full text attached):

DEPARTMENT OF MENTAL HYGIENE

OFFICE OF ADDICTION SERVICES AND SUPPORTS

AID TO LOCALITIES 2022-23

March 31, 2023 the commissioner shall not 1 2 apply any other cost of living adjustment for the purpose of establishing rates of 3 payments, contracts or any other form of 4 5 reimbursement. Notwithstanding any other provision of law, 6 the money hereby appropriated may be 7 transferred to state operations and/or any 8 appropriation of the office of addiction 9 services and supports, with the approval 10 of the director of the budget. 11 The state comptroller is hereby authorized 12 13 to receive funds from the office of 14 addiction services and supports that were returned from providers in the current 15 fiscal year in respect of a settlement of 16 17 local assistance funds from prior fiscal 18 years and is authorized to refund such moneys to the credit of the local assist-19 ance account of the general fund for the 2.0 21 purpose of reimbursing the 2022-23 appro-22 priation. 23 For services and expenses related to 24 providing healthcare and mental hygiene worker bonuses; provided, however, that 25 funds shall not be made available pursuant 26 27 to this appropriation for services and 28 expenses related to providing healthcare 29 and mental hygiene worker bonuses unless the legislature shall pass the appropriate 30 31 chapter law of 2022 which adds section 32 367-w to the social services law in a form 33 identical to that submitted by the executive in budget bill S8007/A9007 as 34 35 part of the fiscal year 2022-2023 budget 36 submission. 37 Funds appropriated herein shall be available 38 in accordance with the following: 39 For services and expenses related to the administration of chemical dependency 40 41 services by local governmental units 42 (11834) 43 For the state share of medical assistance payments for outpatient services (11816).. 44 45 For services and expenses of the medical 46 assistance program including reinvestment 47 in behavioral health services of general 48 fund savings directly related to savings 49 realized through the transition of 50 populations from the medicaid fee-for 51 service system to a managed care model, including savings resulting from the reduction of inpatient and outpatient 52 53 54 behavioral health services provided under 55 the medicaid program 56 For services and expenses related to resi-57 dential services (11822) 58 For services and expenses related to crisis 59 services (11823) 60

3,696,000

21,325,000

37,000,000

124,902,000

DEPARTMENT OF MENTAL HYGIENE

OFFICE OF MENTAL HEALTH

AID TO LOCALITIES 2022-23

1 office of mental health or by transfer or suballocation to any department, agency or 2 public authority for expenditures incurred 3 in the operation of such programs with the 4 approval of the director of the budget: 5 For transfer to the department of health to 6 7 reimburse the department for the state share of medical assistance payments for 8 9 various mental health services. For the period April 1, 2022 through March 10 31, 2023, the office of mental health is 11 12 authorized to recover from community resi-13 dences and family-based treatment providers licensed by the office of mental 14 health, consistent with contractual obli-15 gations of such providers and notwith-16 standing any other inconsistent provision 17 18 of law to the contrary, for the period 19 January 1, 2003 through December 31, 2009 20 and January 1, 2011 through June 30, 2019 for programs located outside of the city 21 22 of New York and for the period July 1, 23 2003 through June 30, 2010 and July 1, 24 2011 through June 30, 2019 for programs located in the city of New York, in an 25 amount equal to 50 percent of the income 26 27 received by such providers which exceed 28 the fixed amount of annual medicaid reven-29 ue limitations, as established by the 30 commissioner of mental health. 31 Notwithstanding sections 112 and 163 of the 32 state finance law and section 142 of the 33 economic development law, or any other 34 inconsistent provision of law, funds 35 appropriated to the department of health 36 in accordance with a schedule based upon 37 approved Medicaid claims for eligible home and community-based services, or other 38 39 approved services as defined in section 40 nine thousand eight hundred and seventeen 41 of the American rescue plan act of 2021, 42 from April 1, 2022 through March 31, 2023 43 and made available by the department of 44 health via sub-allocation or transfer of 45 up to \$160,000,000 may be allocated and 46 distributed by the commissioner of the 47 office of mental health, subject to 48 approval of the director of the budget, 49 without a competitive bid or request for 50 proposal process for the services and 51 expenses of qualified applicants. All 52 awards will be granted utilizing criteria 53 established by the commissioner of the office of mental health to strengthen and 54 55 enhance home and community-based services 56 consistent with the American rescue plan 57 act of 2021 (36942) For services and expenses of the medical 58 59 assistance program including reinvestment 60 in behavioral health services of general

297,247,000

782

DEPARTMENT OF MENTAL HYGIENE

OFFICE OF MENTAL HEALTH

AID TO LOCALITIES 2022-23

1 fund savings directly related to savings 2 realized through the transition of populations from the medicaid fee-for 3 service system to a managed care model, 4 including savings resulting from the reduction of inpatient and outpatient 5 6 behavioral health services provided under 7 8 the medicaid program 9 Notwithstanding any other provision of law, and except for transfers to the department 10 of health to reimburse the department for 11 12 the state share of medical assistance 13 payments and as modified below, this appropriation shall be available for obli-14 gations for the period commencing July 1, 15 16 2022 and ending June 30, 2023 and shall be 17 available for expenditure from July 1, 18 2022 through September 15, 2023. 19 For services and expenses of various commu-20 nity mental health non-residential programs, pursuant to article 41 of the 21 22 mental hygiene law, including but not 23 limited to sections 41.13, 41.18, and 24 41.47. Notwithstanding any other provision of law to the contrary, up to \$7,000,000 25 of this appropriation may be made avail-26 27 able to the Research Foundation for Mental 28 Hygiene, Inc. pursuant to a contract with 29 the office of mental health for two mental health demonstration programs. One program 30 shall be a behavioral health care manage-31 ment program for persons with serious 32 33 mental illness, and the other program 34 shall be a mental health and health care 35 coordination demonstration program for 36 persons with mental illness who are 37 discharged from impacted adult homes in 38 the city of New York. An amount from this 39 appropriation when combined with the 40 appropriation for the miscellaneous special revenue fund medication reimburse-41 42 ment account shall provide up to 43 \$15,000,000 for grants to the counties and 44 city of New York to provide medication, 45 and other services necessary to prescribe and administer medication pursuant to a 46 47 plan approved by the commissioner of 48 mental health, as authorized under chapter 49 408 of the laws of 1999 as amended (36940) 50 Notwithstanding any inconsistent provision of law, funds appropriated herein shall be 51 52 made available for the payment of costs as 53 determined by the commissioner of the office of mental health in consultation 54 with the commissioner of the office of 55 addiction services and supports associated 56 with the administration, design, 57 58 installation, construction, operation, or maintenance of a 9-8-8 suicide prevention 59 and behavioral health crisis hotline 60

74,000,000

405,926,000

Appendix V 2023 Title XIX State Plan Fourth Quarter Amendment Responses to Standard Funding Questions

MISCELLANEOUS NOTICES/HEARINGS

Notice of Abandoned Property Received by the State Comptroller

Pursuant to provisions of the Abandoned Property Law and related laws, the Office of the State Comptroller receives unclaimed monies and other property deemed abandoned. A list of the names and last known addresses of the entitled owners of this abandoned property is maintained by the office in accordance with Section 1401 of the Abandoned Property Law. Interested parties may inquire if they appear on the Abandoned Property Listing by contacting the Office of Unclaimed Funds, Monday through Friday from 8:00 a.m. to 4:30 p.m., at:

1-800-221-9311 or visit our web site at: www.osc.state.ny.us

Claims for abandoned property must be filed with the New York State Comptroller's Office of Unclaimed Funds as provided in Section 1406 of the Abandoned Property Law. For further information contact: Office of the State Comptroller, Office of Unclaimed Funds, 110 State St., Albany, NY 12236.

PUBLIC NOTICE

Department of Health

Pursuant to 42 CFR Section 447.205, the Department of Health hereby gives public notice of the following:

The Department of Health proposes to amend the Title XIX (Medicaid) State Plan for non-institutional services authorized pursuant to Social Services Law section 365-a(2)(jj). The following changes are proposed:

Non-Institutional Services

Effective on or after January 1, 2024, Medicaid will reimburse for doula services rendered to pregnant and postpartum members. Doulas provide physical, emotional, educational, and non-medical support for pregnant and postpartum persons before, during, and after childbirth or end of pregnancy. Doulas are not licensed medical or clinical providers, and they do not require supervision. Doula services must be recommended by a licensed practitioner. Doula services may include the development of a birth plan and continuous labor support; patientcentered advocacy, and physical, emotional and non-medical support; education, guidance, and health navigation; facilitating communication between the Medicaid member and medical providers; and providing connections to community-based resources and childbirth and parenting resources.

The estimated net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2023-2024 is \$4.6 million and for state fiscal year 2024-2025 is \$17 million.

The public is invited to review and comment on this proposed State Plan Amendment, a copy of which will be available for public review on the Department's website at http://www.health.ny.gov/regulations/ state_plans/status. Individuals without Internet access may view the State Plan Amendments at any local (county) social services district.

For the New York City district, copies will be available at the following places:

New York County

250 Church Street New York, New York 10018

Queens County, Queens Center 3220 Northern Boulevard Long Island City, New York 11101

Kings County, Fulton Center 114 Willoughby Street Brooklyn, New York 11201

Bronx County, Tremont Center 1916 Monterey Avenue Bronx, New York 10457

Richmond County, Richmond Center 95 Central Avenue, St. George Staten Island, New York 10301

For further information and to review and comment, please contact: Department of Health, Division of Finance and Rate Setting, 99 Washington Ave., One Commerce Plaza, Suite 1432, Albany, NY 12210, spa_inquiries@health.ny.gov

PUBLIC NOTICE

Department of Health

Pursuant to 42 CFR Section 447.205, the Department of Health hereby gives public notice of the following:

The Department of Health proposes to amend the Title XIX (Medicaid) State Plan for non-institutional services in accordance with Chapter 53 of the Laws of 2022 and Subdivision 5 of section 365-m of the social services law. The following changes are proposed:

Non-Institutional Services

Effective on or after January 1, 2024, OASAS will amend the base rates for Part 822 outpatient services reimbursed under the Ambulatory Patient Groups (APGs) such that each of the three services covered under Part 822 will share the same APG base rate within a region (upstate or downstate) and setting (hospital or freestanding); those three services being clinic (outpatient addiction rehab), outpatient rehab (outpatient addiction day rehab), and opioid treatment program.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative is \$345 thousand.

The public is invited to review and comment on this proposed State Plan Amendment, a copy of which will be available for public review on the Department's website at http://www.health.ny.gov/regulations/ state_plans/status. Individuals without Internet access may view the State Plan Amendments at any local (county) social services district.

For the New York City district, copies will be available at the following places:

New York County 250 Church Street New York, New York 10018 Original copies of public information and data submitted by the applicant are available for inspection at the New York State Department of State offices located at One Commerce Plaza, 99 Washington Avenue, in Albany, New York.

Any interested parties and/or agencies desiring to express their views concerning any of the above proposed activities may do so by filing their comments, in writing, no later than 4:30 p.m., 30 days from the date of publication of this notice, or January 12, 2024.

Comments should be addressed to: Consistency Review Unit, Department of State, Office of Planning, Development and Community Infrastructure, One Commerce Plaza, 99 Washington Ave., Albany, NY 12231, (518) 474-6000, Fax (518) 473-2464. Electronic submissions can be made by email at: CR@dos.ny.gov

This notice is promulgated in accordance with Title 15, Code of Federal Regulations, Part 930.

PUBLIC NOTICE

Department of State F-2023-0757

Date of Issuance – December 13, 2023

The New York State Department of State (DOS) is required by Federal regulations to provide timely public notice for the activities described below, which are subject to the consistency provisions of the Federal Coastal Zone Management Act of 1972, as amended.

The applicant has certified that the proposed activity complies with and will be conducted in a manner consistent with the approved New York State Coastal Management Program.

In F-2023-0757, Novelis Corporation is proposing to construct a fire house and training center. The proposal includes ~20,610sf of single-story building and associated utilities and parking. Construction would include the clearing and grading forested land and permanent impacts to 0.69 acres of federally regulated freshwater wetland, with proposed compensatory mitigation through the purchase of inlieu fee credits.

The stated purpose of the proposed action is, "to support infrastructure improvements, facility revitalization, and manufacturing expansion operations."

The applicant's consistency certification and supporting information are available for review at: https://dos.ny.gov/system/files/ documents/2023/12/f-2023-0757.pdf or at https://dos.ny.gov/publicnotices

Original copies of public information and data submitted by the applicant are available for inspection at the New York State Department of State offices located at One Commerce Plaza, 99 Washington Avenue, in Albany, New York.

Any interested parties and/or agencies desiring to express their views concerning any of the above proposed activities may do so by filing their comments, in writing, no later than 4:30 p.m., 30 days from the date of publication of this notice, or January 12, 2024.

Comments should be addressed to: Consistency Review Unit, Department of State, Office of Planning, Development and Community Infrastructure, One Commerce Plaza, 99 Washington Ave., Albany, NY 12231, (518) 474-6000, Fax (518) 473-2464. Electronic submissions can be made by email at: CR@dos.ny.gov

This notice is promulgated in accordance with Title 15, Code of Federal Regulations, Part 930.

PUBLIC NOTICE Department of State F-2023-0763

Date of Issuance - December 13, 2023

The New York State Department of State (DOS) is required by Federal regulations to provide timely public notice for the activities described below, which are subject to the consistency provisions of the Federal Coastal Zone Management Act of 1972, as amended.

The applicant has certified that the proposed activity complies with and will be conducted in a manner consistent with the approved New York State Coastal Management Program. In F-2023-0763, Glenna and Donald Ryan, proposes to install fixed a 4' x 57' pier with a 3' x 14' ramp and a 6' x 20' float in an L shape. The pier is to have water and electric available, and an optional landward ramp. The project is located at 760 Oak Avenue in the Town of Southold, Suffolk County, Goose Creek.

The stated purpose of the proposed action is "to access waterway for recreational use and personal enjoyment."

The applicant's consistency certification and supporting information are available for review at: https://dos.ny.gov/system/files/ documents/2023/12/f-2023-0763.pdf or at https://dos.ny.gov/publicnotices

Original copies of public information and data submitted by the applicant are available for inspection at the New York State Department of State offices located at One Commerce Plaza, 99 Washington Avenue, in Albany, New York.

Any interested parties and/or agencies desiring to express their views concerning any of the above proposed activities may do so by filing their comments, in writing, no later than 4:30 p.m., 30 days from the date of publication of this notice, or January 12, 2024.

Comments should be addressed to: Consistency Review Unit, Department of State, Office of Planning, Development and Community Infrastructure, One Commerce Plaza, 99 Washington Ave., Albany, NY 12231, (518) 474-6000, Fax (518) 473-2464. Electronic submissions can be made by email at: CR@dos.ny.gov

This notice is promulgated in accordance with Title 15, Code of Federal Regulations, Part 930.

PUBLIC NOTICE

Department of State

F-2023-0765

Date of Issuance – December 13, 2023

The New York State Department of State (DOS) is required by Federal regulations to provide timely public notice for the activities described below, which are subject to the consistency provisions of the Federal Coastal Zone Management Act of 1972, as amended.

The applicant has certified that the proposed activity complies with and will be conducted in a manner consistent with the approved New York State Coastal Management Program.

In F-2023-0765, Clover House LLC - c/o Andrew Wetenhall, is proposing to construct a new 4' x 100' fixed pier extending from the face of the existing bulkhead, construct two mooring piles on the southern waterward end of the pier remove existing stairs which are extending off of the pier adjacent to the bulkhead and construct a 4' x 22' stairway leading to the sea-floor grade using 10'' dia piles. The Proposed pier is elevated 4.25' above the MHW line and constructed with open grate decking. The proposed project would be located at 29 Peconic Ave, on Little Peconic Bay, Town of Southampton, Suffolk County.

The stated purpose of the proposed action is to "Access to waterway and boat dockage".

The applicant's consistency certification and supporting information are available for review at: https://dos.ny.gov/system/files/ documents/2023/12/f-2023-0765.pdf or at https://dos.ny.gov/publicnotices

Original copies of public information and data submitted by the applicant are available for inspection at the New York State Department of State offices located at One Commerce Plaza, 99 Washington Avenue, in Albany, New York.

Any interested parties and/or agencies desiring to express their views concerning any of the above proposed activities may do so by filing their comments, in writing, no later than 4:30 p.m., 30 days from the date of publication of this notice, or January 12, 2024.

Comments should be addressed to: Consistency Review Unit, Department of State, Office of Planning, Development and Community Infrastructure, One Commerce Plaza, 99 Washington Ave., Albany, NY 12231, (518) 474-6000, Fax (518) 473-2464. Electronic submissions can be made by email at: CR@dos.ny.gov

This notice is promulgated in accordance with Title 15, Code of Federal Regulations, Part 930.

Appendix VI 2023 Title XIX State Plan Fourth Quarter Amendment Responses to Standard Access Questions

NON-INSTITUTIONAL SERVICES State Plan Amendment #24-0013

CMS Standard Funding Questions

The following questions are being asked and should be answered in relation to all payments made to all providers reimbursed pursuant to a methodology described in Attachment 4.19-B of the state plan.

 Section 1903(a)(1) provides that Federal matching funds are only available for expenditures made by States for services under the approved State plan. Do providers receive and retain the total Medicaid expenditures claimed by the State (includes normal per diem, supplemental, enhanced payments, other) or is any portion of the payments returned to the State, local governmental entity, or any other intermediary organization? If providers are required to return any portion of payments, please provide a full description of the repayment process. Include in your response a full description of the methodology for the return of any of the amount or percentage of payments that are returned and the disposition and use of the funds once they are returned to the State (i.e., general fund, medical services account, etc.)

Response: Providers receive and retain 100 percent of total Medicaid expenditures claimed by the State and the State does not require any provider to return any portion of such payments to the State, local government entities, or any other intermediary organization.

- 2. Section 1902(a)(2) provides that the lack of adequate funds from local sources will not result in lowering the amount, duration, scope, or quality of care and services available under the plan. Please describe how the state share of each type of Medicaid payment (normal per diem, supplemental, enhanced, other) is funded. Please describe whether the state share is from appropriations from the legislature to the Medicaid agency, through intergovernmental transfer agreements (IGTs), certified public expenditures (CPEs), provider taxes, or any other mechanism used by the state to provide state share. Note that, if the appropriation is not to the Medicaid agency, the source of the state share would necessarily be derived through either an IGT or CPE. In this case, please identify the agency to which the funds are appropriated. Please provide an estimate of total expenditure and State share amounts for each type of Medicaid payment. If any of the non-federal share is being provided using IGTs or CPEs, please fully describe the matching arrangement including when the state agency receives the transferred amounts from the local government entity transferring the funds. If CPEs are used, please describe the methodology used by the state to verify that the total expenditures being certified are eligible for Federal matching funds in accordance with 42 CFR 433.51(b). For any payment funded by CPEs or IGTs, please provide the following:
 - (i) a complete list of the names of entities transferring or certifying funds;
 - (ii) the operational nature of the entity (state, county, city, other);

- (iii) the total amounts transferred or certified by each entity;
- (iv) clarify whether the certifying or transferring entity has general taxing authority: and,
- (v) whether the certifying or transferring entity received appropriations (identify level of appropriations).

Response: The Non-Federal share Medicaid provider payment is funded by a combination of the following funds/funding sources through enacted appropriations authority to the Department of Health (DOH) for the New York State Medicaid program.

		4/1/23 – 3/31/24	
Payment Type	Non-Federal Share Funding	Non-Federal	Gross
Normal Per Diem	General Fund; County Contribution	\$24.63M	\$49.26M

- A. **General Fund:** Revenue resources for the State's General Fund includes taxes (e.g., income, sales, etc.), and miscellaneous fees (including audit recoveries). Medicaid expenditures from the State's General Fund are authorized from Department of Health Medicaid.
 - New York State Audit Recoveries: The Department of Health collaborates with the Office of the Medical Inspector General (OMIG) and the Office of the Attorney General (AG) in recovering improperly expended Medicaid funds. OMIG conducts and coordinates the investigation, detection, audit, and review of Medicaid providers and recipients to ensure they are complying with all applicable laws and regulation. OMIG recovers any improper payments through cash collections and voided claim recoveries. Cash collections are deposited into the State's General Fund to offset Medicaid costs.

In addition to cash collections, OMIG finds inappropriately billed claims within provider claims. To correct an error, OMIG and DOH process the current accurate claim, and reduce this claim by the inappropriate claim value to recoup the previous overclaim and decrease state spending.

B. Additional Resources for Non-Federal Share Funding:

County Contribution: In State Fiscal Year 2006, through enacted State legislation (Part C of Chapter 58 of the laws of 2005), New York State "capped" the amount localities contributed to the non-Federal share of providers claims. This was designed to relieve pressure on county property taxes and the NYC budget by limiting local contributions having New York State absorb all local program costs above this fixed statutory inflation rate (3% at the time).

However, in State Fiscal Year 2013 New York State provided additional relief to Localities by reducing local contributions annual growth from three precent to zero over a three-year period. Beginning in State Fiscal Year 2016, counties began paying a fixed cost in perpetuity as follows:

Entity	Annual Amount	
New York City	\$5.200B	
Suffolk County	\$226M	
Nassau County	\$217M	
Westchester County	\$204M	
Erie County	\$194M	
Rest of State (53 Counties)	\$1.187B	
Total	\$7.228B	

By eliminating the growth in localities Medicaid costs, the State has statutorily capped total Statewide County Medicaid expenditures at 2015 levels. All additional county Medicaid costs are funded by the State through State funding as described above. DOH provides annual letters to counties providing weekly contributions. Contributions are deposited directly into State escrow account and used to offset 'total' State share Medicaid funding.

NOTE: The Local Contribution is not tied to a specific claim or service category and instead is a capped amount based on 2015 county spending levels as stated above.

3. Section 1902(a)(30) requires that payments for services be consistent with efficiency, economy, and quality of care. Section 1903(a)(1) provides for Federal financial participation to States for expenditures for services under an approved State plan. If supplemental or enhanced payments are made, please provide the total amount for each type of supplemental or enhanced payment made to each provider type.

Response: The Medicaid payments under this State Plan Amendment are not supplemental payments.

4. For clinic or outpatient hospital services please provide a detailed description of the methodology used by the state to estimate the upper payment limit (UPL) for each class of providers (state owned or operated, non-state government owned or operated, and privately owned or operated). Please provide a current (i.e., applicable to the current rate year) UPL demonstration. Under regulations at 42 CFR 447.272, States are prohibited from setting payment rates for Medicaid inpatient services that exceed a reasonable estimate of the amount that would be paid under Medicare payment principals.

Response: The Medicaid payments authorized under this State Plan Amendment do not impact the UPL demonstrations.

5. Does any governmental provider receive payments that in the aggregate (normal per diem, supplemental, enhanced, other) exceed their reasonable costs of providing services? If payments exceed the cost of services, do you recoup the excess and return the Federal share of the excess to CMS on the quarterly expenditure report?

Response: Providers do not receive payments that in the aggregate exceed their reasonable costs of providing services. If any providers received payments that in the aggregate exceeded their reasonable costs of providing services, the State would recoup the excess and return the Federal share of the excess to CMS on the quarterly expenditure report.

ACA Assurances:

1. <u>Maintenance of Effort (MOE)</u>. Under section 1902(gg) of the Social Security Act (the Act), as amended by the Affordable Care Act, as a condition of receiving <u>any</u> Federal payments under the Medicaid program <u>during the MOE period</u> indicated below, the State shall <u>not</u> have in effect any eligibility standards, methodologies, or procedures in its Medicaid program which are more restrictive than such eligibility provisions as in effect in its Medicaid program on March 10, 2010.

MOE Period.

- Begins on: March 10, 2010, and
- <u>Ends on:</u> The date the Secretary of the Federal Department of Health and Human Services determines an Exchange established by a State under the provisions of section 1311 of the Affordable Care Act is fully operational.

Response: This SPA complies with the conditions of the MOE provision of section 1902(gg) of the Act for continued funding under the Medicaid program.

2. Section 1905(y) and (z) of the Act provides for increased FMAPs for expenditures made on or after January 1, 2014 for individuals determined eligible under section 1902(a)(10)(A)(i)(VIII) of the Act. Under section 1905(cc) of the Act, the increased FMAP under sections 1905(y) and (z) would not be available for States that require local political subdivisions to contribute amounts toward the non-Federal share of the State's expenditures at a greater percentage than would have been required on December 31, 2009.

<u>Prior to January 1, 2014</u> States may potentially require contributions by local political subdivisions toward the non-Federal share of the States' expenditures at percentages greater than were required on December 31, 2009. <u>However</u>, because of the provisions of section 1905(cc) of the Act, it is important to determine and document/flag any SPAs/State plans which have such greater percentages prior to the January 1, 2014 date in order to <u>anticipate potential violations and/or appropriate corrective actions</u> by the States and the Federal government.

<u>Response</u>: This SPA would $[] / would <u>not</u> [<math>\checkmark$] violate these provisions, if they remained in effect on or after January 1, 2014.

3. Please indicate whether the State is currently in conformance with the requirements of section 1902(a)(37) of the Act regarding prompt payment of claims.

Response: The State complies with the requirements of section 1902(a)(37) of the Act regarding prompt payment of claims.

Tribal Assurance:

Section 1902(a)(73) of the Social Security Act the Act requires a State in which one or more Indian Health Programs or Urban Indian Organizations furnish health care services to establish a process for the State Medicaid agency to seek advice on a regular ongoing basis from designees of Indian health programs whether operated by the Indian Health Service HIS Tribes or Tribal organizations under the Indian Self Determination and Education Assistance Act ISDEAA or Urban Indian Organizations under the Indian Health Care Improvement Act.

IHCIA Section 2107(e)(I) of the Act was also amended to apply these requirements to the Children's Health Insurance Program CHIP. Consultation is required concerning Medicaid and CHIP matters having a direct impact on Indian health programs and Urban Indian organizations.

- a) Please describe the process the State uses to seek advice on a regular ongoing basis from federally recognized tribes Indian Health Programs and Urban Indian Organizations on matters related to Medicaid and CHIP programs and for consultation on State Plan Amendments waiver proposals waiver extensions waiver amendments waiver renewals and proposals for demonstration projects prior to submission to CMS.
- b) Please include information about the frequency inclusiveness and process for seeking such advice.
- c) Please describe the consultation process that occurred specifically for the development and submission of this State Plan Amendment when it occurred and who was involved.

Response: Tribal consultation was performed in accordance with the State's tribal consultation policy as approved in SPA 17-0065, and documentation of such is included with this submission. To date, no feedback has been received from any tribal representative in response to the proposed change in this SPA.