



Department of Health

KATHY HOCHUL
Governor

MARY T. BASSETT, M.D., M.P.H.
Commissioner

KRISTIN M. PROUD
Acting Executive Deputy Commissioner

March 16, 2022

Dear Health Clinic Administrator:

Pursuant to our tribal consultation policy, enclosed please find a summary of each proposed amendment to the New York State Plan. We encourage you to review the enclosed information and use the link below to also view the plan pages and Federal Public Notices for each proposal. Please provide any comments or request a personal meeting to discuss the proposed changes within two weeks of the date of this letter.

https://www.health.ny.gov/regulations/state_plans/tribal/

We appreciate the opportunity to share this information with you and if there are any comments or concerns please feel free to contact Regina Deyette, Medicaid State Plan Coordinator, Office of Health Insurance Programs at 518-473-3658.

Sincerely,

/S/

Brett R. Friedman
Acting Medicaid Director
Office of Health Insurance Programs

Enclosures

cc: Sean Hightower
US Dept. of Health and Human Services

Nancy Grano
CMS Native American Contact

Michele Hamel
NYSDOH American Indian Health Program

SUMMARY
SPA #20-0081

This State Plan Amendment is a temporary amendment in response to COVID-19 Emergency Relief.

DRAFT

State/Territory: New York

- c. x Tribal consultation requirements – the agency requests modification of tribal consultation timelines specified in [insert name of state] Medicaid state plan, as described below:

New York will reduce the tribal consultation to zero days before submission to CMS. Tribal consultation will still be completed and mailed as per guidelines in New York's approved state plan.

Section A – Eligibility

1. The agency furnishes medical assistance to the following optional groups of individuals described in section 1902(a)(10)(A)(ii) or 1902(a)(10)(c) of the Act. This may include the new optional group described at section 1902(a)(10)(A)(ii)(XXIII) and 1902(ss) of the Act providing coverage for uninsured individuals.

Include name of the optional eligibility group and applicable income and resource standard.

2. The agency furnishes medical assistance to the following populations of individuals described in section 1902(a)(10)(A)(ii)(XX) of the Act and 42 CFR 435.218:

- a. All individuals who are described in section 1905(a)(10)(A)(ii)(XX)

Income standard:

-or-

- b. Individuals described in the following categorical populations in section 1905(a) of the Act:

Income standard:

3. The agency applies less restrictive financial methodologies to individuals excepted from financial methodologies based on modified adjusted gross income (MAGI) as follows.

Less restrictive income methodologies:

State/Territory: New York

3. The agency designates the following entities as qualified entities for purposes of making presumptive eligibility determinations or adds additional populations as described below in accordance with sections 1920, 1920A, 1920B, and 1920C of the Act and 42 CFR Part 435 Subpart L. Indicate if any designated entities are permitted to make presumptive eligibility determinations only for specified populations.

Please describe the designated entities or additional populations and any limitations related to the specified populations or number of allowable PE periods.

4. The agency adopts a total of months (not to exceed 12 months) continuous eligibility for children under age enter age (not to exceed age 19) regardless of changes in circumstances in accordance with section 1902(e)(12) of the Act and 42 CFR 435.926.
5. The agency conducts redeterminations of eligibility for individuals excepted from MAGI-based financial methodologies under 42 CFR 435.603(j) once every months (not to exceed 12 months) in accordance with 42 CFR 435.916(b).
6. The agency uses the following simplified application(s) to support enrollment in affected areas or for affected individuals (a copy of the simplified application(s) has been submitted to CMS).
- a. The agency uses a simplified paper application.
 - b. The agency uses a simplified online application.
 - c. The simplified paper or online application is made available for use in call-centers or other telephone applications in affected areas.

Section C – Premiums and Cost Sharing

1. The agency suspends deductibles, copayments, coinsurance, and other cost sharing charges as follows:

Please describe whether the state suspends all cost sharing or suspends only specified deductibles, copayments, coinsurance, or other cost sharing charges for specified items and services or for specified eligibility groups consistent with 42 CFR 447.52(d) or for specified income levels consistent with 42 CFR 447.52(g).

2. The agency suspends enrollment fees, premiums and similar charges for:
- a. All beneficiaries
 - b. The following eligibility groups or categorical populations:

State/Territory: New York

Please list the applicable eligibility groups or populations.

3. The agency allows waiver of payment of the enrollment fee, premiums and similar charges for undue hardship.

Please specify the standard(s) and/or criteria that the state will use to determine undue hardship.

Section D – Benefits

Benefits:

1. The agency adds the following optional benefits in its state plan (include service descriptions, provider qualifications, and limitations on amount, duration or scope of the benefit):

2. The agency makes the following adjustments to benefits currently covered in the state plan:

3. The agency assures that newly added benefits or adjustments to benefits comply with all applicable statutory requirements, including the statewideness requirements found at 1902(a)(1), comparability requirements found at 1902(a)(10)(B), and free choice of provider requirements found at 1902(a)(23).

4. Application to Alternative Benefit Plans (ABP). The state adheres to all ABP provisions in 42 CFR Part 440, Subpart C. This section only applies to states that have an approved ABP(s).

- a. The agency assures that these newly added and/or adjusted benefits will be made available to individuals receiving services under ABPs.
- b. Individuals receiving services under ABPs will not receive these newly added and/or adjusted benefits, or will only receive the following subset:

Please describe.

State/Territory: New York

Telehealth:

5. The agency utilizes telehealth in the following manner, which may be different than outlined in the state's approved state plan:

Please describe.

Drug Benefit:

6. The agency makes the following adjustments to the day supply or quantity limit for covered outpatient drugs. The agency should only make this modification if its current state plan pages have limits on the amount of medication dispensed.

Please describe the change in days or quantities that are allowed for the emergency period and for which drugs.

7. Prior authorization for medications is expanded by automatic renewal without clinical review, or time/quantity extensions.
8. The agency makes the following payment adjustment to the professional dispensing fee when additional costs are incurred by the providers for delivery. States will need to supply documentation to justify the additional fees.

Please describe the manner in which professional dispensing fees are adjusted.

9. The agency makes exceptions to their published Preferred Drug List if drug shortages occur. This would include options for covering a brand name drug product that is a multi-source drug if a generic drug option is not available.

Section E – Payments

Optional benefits described in Section D:

1. Newly added benefits described in Section D are paid using the following methodology:
- a. Published fee schedules –
- Effective date (enter date of change):
- Location (list published location):

State/Territory: New York

b. Other:

Describe methodology here.

Increases to state plan payment methodologies:

2. X The agency increases payment rates for the following services:

1905(a)(16) Inpatient Psychiatric Hospital – PRTF
Residential Treatment Facility (RTF)

a. Payment increases are targeted based on the following criteria:

Please describe criteria.

b. Payments are increased through:

i. A supplemental payment or add-on within applicable upper payment limits:

Please describe.

ii. X An increase to rates as described below.

Rates are increased:

 Uniformly by the following percentage:

 Through a modification to published fee schedules –

Effective date (enter date of change):

Location (list published location):

 Up to the Medicare payments for equivalent services.

 X By the following factors:

The current State Plan authority requires rates are calculated from a cost report 2-years prior. Those cost reports would be unable to reflect the current difficulties resulting from the Public Health Emergency. Due

SUMMARY
SPA #20-0082

This State Plan Amendment is a temporary amendment in response to COVID-19 Emergency Relief. This amendment proposes to revise the State Plan to correct the New York COVID-19 disaster SPA #20-0048 to add 'treatment' which was omitted by oversight under the D Benefit and E Payments sections. This SPA, in part, intends to allow for reimbursement to pharmacies for administration of COVID-19 authorized treatments by licensed pharmacists, pharmacy interns or pharmacy technicians, as authorized by the PREP Act, and any other COVID-19 related services that may be required in the future to address the Public Health Emergency.

This amendment also proposes a temporary revision to the State Plan to allow reimbursement:

- to paramedics/emergency medical technicians providing influenza vaccine administration,
- to qualified providers for COVID-19 vaccine administration provided to individuals eligible for the Family Planning Benefits Program,
- of a supplemental fee for COVID-19 vaccine administration provided in a home setting, and
- to FQHCs for COVID-19 vaccine visits using an alternate payment method.

State/Territory: New York

3. The agency designates the following entities as qualified entities for purposes of making presumptive eligibility determinations or adds additional populations as described below in accordance with sections 1920, 1920A, 1920B, and 1920C of the Act and 42 CFR Part 435 Subpart L. Indicate if any designated entities are permitted to make presumptive eligibility determinations only for specified populations.

Please describe the designated entities or additional populations and any limitations related to the specified populations or number of allowable PE periods.

4. The agency adopts a total of months (not to exceed 12 months) continuous eligibility for children under age enter age (not to exceed age 19) regardless of changes in circumstances in accordance with section 1902(e)(12) of the Act and 42 CFR 435.926.
5. The agency conducts redeterminations of eligibility for individuals excepted from MAGI-based financial methodologies under 42 CFR 435.603(j) once every months (not to exceed 12 months) in accordance with 42 CFR 435.916(b).
6. The agency uses the following simplified application(s) to support enrollment in affected areas or for affected individuals (a copy of the simplified application(s) has been submitted to CMS).
- a. The agency uses a simplified paper application.
 - b. The agency uses a simplified online application.
 - c. The simplified paper or online application is made available for use in call-centers or other telephone applications in affected areas.

Section C – Premiums and Cost Sharing

1. The agency suspends deductibles, copayments, coinsurance, and other cost sharing charges as follows:

Please describe whether the state suspends all cost sharing or suspends only specified deductibles, copayments, coinsurance, or other cost sharing charges for specified items and services or for specified eligibility groups consistent with 42 CFR 447.52(d) or for specified income levels consistent with 42 CFR 447.52(g).

2. The agency suspends enrollment fees, premiums and similar charges for:
- a. All beneficiaries
 - b. The following eligibility groups or categorical populations:

State/Territory: New York

Please list the applicable eligibility groups or populations.

3. The agency allows waiver of payment of the enrollment fee, premiums and similar charges for undue hardship.

Please specify the standard(s) and/or criteria that the state will use to determine undue hardship.

Section D – Benefits

Benefits:

1. XX The agency adds the following optional benefits in its state plan (include service descriptions, provider qualifications, and limitations on amount, duration or scope of the benefit):

1. Effective 3/1/2020, for Other Licensed Practitioner Services, as specified on page 2(xiv)(a) of the Supplements to Attachments 3.1-A and B of the Plan, adding language as follows: Pharmacists, pharmacy interns, pharmacy technicians, and pharmacies are qualified providers of COVID-19 vaccinations, treatments and therapeutics, specimen collection, testing and any other services per the HHS COVID-19 PREP Act Declaration and authorizations.

2. Effective 3/11/2021, for the duration of the Public Health Emergency and ending on the last day of the first quarter that begins one year after the last day of the COVID-19 emergency period described in section 1135(g)(1)(B) of the American Rescue Plan Act, NYS Medicaid proposes adding Covid-19 vaccine administration coverage for individuals eligible for the Family Planning Benefits Program in accordance with SSA 1902(a)(10)(A)(ii)(XXI). This proposal intends to increase access to the covid-19 vaccine to individuals with Family Planning Benefits.

3. Effective 9/27/2021, for the duration of the Public Health Emergency and ending on the last day of the first quarter that begins one year after the last day of the COVID-19 emergency period described in section 1135(g)(1)(B) of the American Rescue Plan Act, the NYS Medicaid Program proposes to reimburse Emergency Medical Technicians / Paramedics for the administration of the flu vaccine. This proposal is intended to increase access to the flu vaccine by increasing the network of providers available to the Medicaid population.

2. The agency makes the following adjustments to benefits currently covered in the state plan:

TN: 20-0082
Supersedes TN: New

Approval Date:
Effective Date: March 1, 2020

State/Territory: New York

3. The agency assures that newly added benefits or adjustments to benefits comply with all applicable statutory requirements, including the statewideness requirements found at 1902(a)(1), comparability requirements found at 1902(a)(10)(B), and free choice of provider requirements found at 1902(a)(23).
4. xx Application to Alternative Benefit Plans (ABP). The state adheres to all ABP provisions in 42 CFR Part 440, Subpart C. This section only applies to states that have an approved ABP(s).
 - a. xx The agency assures that these newly added and/or adjusted benefits will be made available to individuals receiving services under ABPs.
 - b. Individuals receiving services under ABPs will not receive these newly added and/or adjusted benefits, or will only receive the following subset:

Please describe.

Telehealth:

5. The agency utilizes telehealth in the following manner, which may be different than outlined in the state's approved state plan:

Please describe.

Drug Benefit:

6. The agency makes the following adjustments to the day supply or quantity limit for covered outpatient drugs. The agency should only make this modification if its current state plan pages have limits on the amount of medication dispensed.

Please describe the change in days or quantities that are allowed for the emergency period and for which drugs.

7. Prior authorization for medications is expanded by automatic renewal without clinical review, or time/quantity extensions.
8. The agency makes the following payment adjustment to the professional dispensing fee when additional costs are incurred by the providers for delivery. States will need to supply documentation to justify the additional fees.

Please describe the manner in which professional dispensing fees are adjusted.

State/Territory: New York

3. Effective 6/8/2021, for the duration of the Public Health Emergency and ending on the last day of the first quarter that begins one year after the last day of the COVID-19 emergency period described in section 1135(g)(1)(B) of the American Rescue Plan Act, the NYS Medicaid program proposes to reimburse providers a supplemental COVID-19 vaccine administration fee of \$35.50 based on the CMS rate at 100% FMAP for COVID-19 vaccine administration provided in the home setting, defined as follows:

- A private residence
- Temporary lodging (for example, a hotel or motel, campground, hostel, or homeless shelter)
- An apartment in an apartment complex or a unit in an assisted living facility, group home or non-Medicaid nursing facility
- A Medicaid's patient's home that's made provider-based to a hospital during the COVID-19 PHE
- Communal spaces of a multi-unit or communal living arrangement
- Assisted living facilities participating in the CDC's Pharmacy Partnership for Long-Term Care Program when their residents are vaccinated through this program

Covid-19 vaccine home administration will be available to a patient(s) that:

- has a condition that makes them more susceptible to contracting a pandemic disease such as COVID-19.
- is generally unable to leave the home, and if they do leave home it requires a considerable and taxing effort.
- has a disability or faces clinical, socioeconomic, or geographical barriers to getting a COVID-19 vaccine in settings other than their home.
- The patient faces challenges that significantly reduce their ability to get vaccinated outside the home, such as challenges with transportation, communication, or caregiving.

NYS Medicaid program will reimburse providers for the supplemental home vaccine administration:

- if the sole purpose of the visit is to administer a COVID-19 vaccine.
- for dates of service on or after August 24, 2021, once for each Medicaid patient vaccinated in a single home unit or communal space and up to a maximum of 5 times if fewer than 10 Medicaid patients are vaccinated on the same day in the same group living location. This proposal is intended to increase access to Covid-19 vaccines for Medicaid individuals that are home bound.

Increases to state plan payment methodologies:

2. The agency increases payment rates for the following services:

Please list all that apply.

- a. Payment increases are targeted based on the following criteria:

TN: 20-0082
Supersedes TN: New

Approval Date:
Effective Date: March 1, 2020

State/Territory: New York

Please describe criteria.

b. Payments are increased through:

i. A supplemental payment or add-on within applicable upper payment limits:

Please describe.

ii. An increase to rates as described below.

Rates are increased:

 Uniformly by the following percentage:

 Through a modification to published fee schedules –

Effective date (enter date of change):

Location (list published location):

 Up to the Medicare payments for equivalent services.

 By the following factors:

Please describe.

Payment for services delivered via telehealth:

3. For the duration of the emergency, the state authorizes payments for telehealth services that:

a. Are not otherwise paid under the Medicaid state plan;

b. Differ from payments for the same services when provided face to face;

c. Differ from current state plan provisions governing reimbursement for telehealth;

Describe telehealth payment variation.

State/Territory: New York

- d. Include payment for ancillary costs associated with the delivery of covered services via telehealth, (if applicable), as follows:
 - i. Ancillary cost associated with the originating site for telehealth is incorporated into fee-for-service rates.
 - ii. Ancillary cost associated with the originating site for telehealth is separately reimbursed as an administrative cost by the state when a Medicaid service is delivered.

Other:

- 4. Other payment changes:

Please describe.

Section F – Post-Eligibility Treatment of Income

- 1. The state elects to modify the basic personal needs allowance for institutionalized individuals. The basic personal needs allowance is equal to one of the following amounts:
 - a. The individual's total income
 - b. 300 percent of the SSI federal benefit rate
 - c. Other reasonable amount:
- 2. The state elects a new variance to the basic personal needs allowance. (Note: Election of this option is not dependent on a state electing the option described the option in F.1. above.)

The state protects amounts exceeding the basic personal needs allowance for individuals who have the following greater personal needs:

Please describe the group or groups of individuals with greater needs and the amount(s) protected for each group or groups.

Section G – Other Policies and Procedures Differing from Approved Medicaid State Plan /Additional Information

TN: 20-0082
Supersedes TN: New

Approval Date:
Effective Date: March 1, 2020

SUMMARY
SPA #22-0004

This amendment proposes to revise the State Plan to amend reimbursement fees for OPWDD Day Treatment services to reflect changes in costs and service providers.

DRAFT

**New York
3h12.2**

1905(a)(9) Clinic Services

Effective July 1, 2021, reimbursement fees for Ambulatory Services in Facilities Certified Under Article 16 of the Mental Health Law Clinic Day Treatment program providers are as follows:

Corp Name	Site	Rate Codes				
		4170 Full Day	4171 Half Day	4172 Collocated Model	4173 Intake	4174 Diagnosis & Evaluation
Family Residence & Essential Enterprises	120 Plant Avenue	\$206.66	\$103.33	\$0.00	\$206.66	\$206.66
Monroe County ARC	1651 Lyell Avenue	\$0.00	\$0.00	\$37.33	\$0.00	\$0.00
Otsego County ARC	3 Chenango Road	\$99.80	\$49.91	\$0.00	\$99.80	\$99.80
UCP Nassau	380 Washington Avenue	\$171.31	\$85.66	\$0.00	\$171.31	\$171.31
UCP Suffolk	250 Marcus Boulevard	\$153.06	\$76.54	\$0.00	\$153.06	\$153.06

Effective [April 1] January 1, 2022, reimbursement fees for Ambulatory Services in Facilities Certified Under Article 16 of the Mental Health Law Clinic Day Treatment program [providers are] provider is as follows:

Corp Name	Site	Rate Codes				
		4170 Full Day	4171 Half Day	4172 Collocated Model	4173 Intake	4174 Diagnosis & Evaluation
[Family Residence & Essential Enterprises]	[120 Plant Avenue]	[\$205.98]	[\$102.99]	[\$0.00]	[\$205.98]	[\$205.98]
[Monroe County ARC]	[1651 Lyell Avenue]	[\$0.00]	[\$0.00]	[\$37.21]	[\$0.00]	[\$0.00]
[Otsego County ARC]	[3 Chenango Road]	[\$99.47]	[\$49.74]	[\$0.00]	[\$99.47]	[\$99.47]
[UCP Nassau]	[380 Washington Avenue]	[\$170.75]	[\$85.38]	[\$0.00]	[\$170.75]	[\$170.75]
UCP Suffolk	250 Marcus Boulevard	[\$152.56] \$221.22	[\$76.29] \$110.61	\$0.00	[\$152.56] \$221.22	[\$152.56] 221.22

TN #22-0004

Approval Date _____

Supersedes TN #21-0047Effective Date January 1, 2022

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 all qualifying Mental Hygiene services to comply with enacted statutory provisions. The following changes are proposed:

Non-Institutional

Effective on or after December 30, 2021 the Department of Health will adjust rates to reflect labor costs resulting from statutorily required increases in the New York State minimum wage. The minimum wage rate increases apply to services provided in Office of Mental Health licensed rehabilitation programs, effective December 31, 2021.

The estimated annual aggregate increase in gross Medicaid expenditures attributable to the rate increase is \$14,032 in State Fiscal Year 2022 and \$56,128 in State Fiscal Year 2023.

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.

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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 long term care services to comply with Public Health Law Section 2808 (2-c)(d). The following changes are proposed:

Long Term Care Services

Effective on and after January 1, 2022, the quality incentive program for non-specialty nursing homes will continue to recognize improvement in performance and provide for other minor modifications.

There is no estimated annual change to gross Medicaid expenditures as a result of this proposed amendment.

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.

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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 to comply with enacted statutory provisions. The following changes are proposed:

Non-Institutional Services

Effective on or after January 1, 2022, the Department of Health will adjust the reimbursement rate for Ambulatory Services in Facilities Certified Under Article 16 of the Mental Health Law Clinic Day Treatment program to remove the providers that no longer offer the service and update the reimbursements for the remaining providers based on more current cost data.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2022 is \$300,000.

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.

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For further information and to review and comment, please contact:
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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 long term care services to comply with sections 2803, 2895-b, and 2828 of the Public Health Law. The following changes are proposed:

Long Term Care Services

Effective on or after January 1, 2022, the Department of Health will adjust rates for residential health care facilities meeting the requirements set forth in section 2828 of the Public Health Law and implementing regulations. This rate adjustment will support increases in resident-facing staffing services provided by registered nurses, licensed practical nurses, certified nurse aides, and nurse aides in accordance with standards set forth in section 2895-b of the Public Health Law and implementing regulations, which shall be sufficient to attain the highest practicable physical, mental, and psychological well-being of the residents of such residential health care facilities.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to the residential health care facility rate

adjustment is \$128 million as appropriated in the budget for state fiscal year 2021/2022.

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.

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For further information and to review and comment, please contact:
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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 institutional services to comply with enacted statutory provisions. The following changes are proposed:

Institutional Services

Effective on or after December 31, 2021, the Department of Health will adjust Residential Treatment Facility (RTF) rates for providers to consider increased labor costs resulting from increases in the New York State minimum wage in the Remainder of State region.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2021/2022 is \$16,000.

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:

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

SUMMARY
SPA #22-0005

This State Plan Amendment proposes to redefine rural designation of hospitals for the Article 28 psychiatric services to better meet community mental health needs in rural areas in the State of New York.

DRAFT

**New York
117(i)**

1905(a)(1) Inpatient Hospital Services

772	1	Alcohol & Drug Dependence w Rehab or Rehab/Detox Therapy, SOI-1	0.8373
772	2	Alcohol & Drug Dependence w Rehab or Rehab/Detox Therapy, SOI-2	0.8373
772	3	Alcohol & Drug Dependence w Rehab or Rehab/Detox Therapy, SOI-3	0.8373
772	4	Alcohol & Drug Dependence w Rehab or Rehab/Detox Therapy, SOI-4	0.8373
773	1	Opioid Abuse & Dependence, SOI-1	1.0204
773	2	Opioid Abuse & Dependence, SOI-2	1.0204
773	3	Opioid Abuse & Dependence, SOI-3	1.0361
773	4	Opioid Abuse & Dependence, SOI-4	1.0361
774	1	Cocaine Abuse & Dependence, SOI-1	0.9807
774	2	Cocaine Abuse & Dependence, SOI-2	1.0360
774	3	Cocaine Abuse & Dependence, SOI-3	1.0513
774	4	Cocaine Abuse & Dependence, SOI-4	1.0513
775	1	Alcohol Abuse & Dependence, SOI-1	1.0196
775	2	Alcohol Abuse & Dependence, SOI-2	1.0709
775	3	Alcohol Abuse & Dependence, SOI-3	1.0709
775	4	Alcohol Abuse & Dependence, SOI-4	1.0709
776	1	Other Drug Abuse & Dependence, SOI-1	0.9363
776	2	Other Drug Abuse & Dependence, SOI-2	1.0926
776	3	Other Drug Abuse & Dependence, SOI-3	1.0926
776	4	Other Drug Abuse & Dependence, SOI-4	1.0926

- [
- iii. A rural adjustment factor of 1.2309 will be applied to the operating per diem for those hospitals designated as rural hospitals. A rural facility is a general hospital with a service area which has an average population of less than 175 persons per square mile, or a general hospital with a service area which has an average population of less than 200 persons per square mile measured as population density by zip code. For dates of service beginning on or after July 1, 2014, rural designation will be applicable to hospitals located in an upstate region, as defined in subparagraph (l) of this section, and with population densities of 225 persons or fewer per square mile as determined based on the New York State 2010 Vital Statistics table of estimated population, land area, and population density. Accordingly, there are 27 rural facilities that provide inpatient psychiatric services.
 - iv. An age adjustment payment factor of 1.3597 will be applied to the per diem operating component for adolescents ages 17 and under. For ages 18 and over, an adjustment payment factor of 1 will be applied.]

TN #22-0005

Approval Date _____

Supersedes TN #18-0059

Effective Date January 1, 2022

New York
117(i)(1)

1905(a)(1) Inpatient Hospital Services

- iii. A rural adjustment factor of 1.2309 will be applied to the operating per diem for those hospitals designated as rural hospitals. A rural facility is a general hospital with a service area which has an average population of less than 175 persons per square mile, or a general hospital with a service area which has an average population of less than 200 persons per square mile measured as population density by zip code. For dates of service beginning on or after July 1, 2014, rural designation will be applicable to hospitals located in an upstate region, as defined in subparagraph (l) of this section, and with population densities of 225 persons or fewer per square mile as determined based on the New York State 2010 Vital Statistics table of estimated population, land area, and population density. For dates of service beginning on or after January 1, 2022, rural designation will be applicable to hospitals located in an upstate region, as defined in subparagraph (l) of this section, and with population densities of 300 persons or fewer per square mile as determined based on the New York State 2020 Vital Statistics table of estimated population, land area, and population density.
- iv. An age adjustment payment factor of 1.3597 will be applied to the per diem operating component for adolescents ages 17 and under. For ages 18 and over, an adjustment payment factor of 1 will be applied.

TN #22-0005

Approval Date _____

Supersedes TN #NEW

Effective Date January 1, 2022

(APG) reimbursement methodology is revised to include recalculated weight and component updates to reflect the APG policy updates.

There is no additional estimated annual change to gross Medicaid expenditures as a result of this proposed amendment.

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 institutional services to comply with enacted statutory provisions. The following changes are proposed:

Institutional Services

Effective for dates of service on or after January 1, 2022, the Department of Health will redefine the rural designation for the inpatient psychiatric services provided in exempt general hospitals or exempt units of general hospitals by increasing the average county population density from 225 to 300 per square mile based on 2020 census data. This State Plan Amendment is necessary to adequately reimburse hospitals for providing these services and better meet the community's mental health needs.

The estimated annual increase in gross Medicaid expenditures attributable to this initiative is \$2,300,000. Funding for this redefinition is included in the State Budget for State Fiscal Year 2022.

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.

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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 Long Term Care services as authorized by § 2826 of New York Public Health Law. The following changes are proposed:

Long Term Care Services

Temporary rate adjustments have been approved for services related to providers that are undergoing closure, merger, consolidation, acquisition or restructuring themselves or other health care providers. The temporary rate adjustments have been reviewed and approved for the following six Nursing Homes:

- Loretto Health and Rehabilitation with aggregate payment amounts totaling up to \$4,747,976 for the period January 01, 2022 through March 31, 2022 and \$2,977,124 for the period April 1, 2022 through March 31, 2023.

- St. Vincent DePaul Residence with aggregate payment amounts totaling up to \$3,681,188 for the period January 01, 2022 through March 31, 2022 and \$1,538,986 for the period April 1, 2022 through March 31, 2023.

- Fort Hudson Nursing Center with aggregate payment amounts totaling up to \$1,129,968 for the period January 01, 2022 through March 31, 2022, \$475,930 for the period April 1, 2022 through March 31, 2023 and \$551,772 for the period April 1, 2023 through March 31, 2024.

- Adirondack Health - Mercy Living Center with aggregate payment amounts totaling up to \$500,000 for the period January 01, 2022 through March 31, 2022.

- Greenfield Health and Rehabilitation Center with aggregate payment amounts totaling up to \$695,000 for the period January 01, 2022 through March 31, 2022, \$1,647,500 for the period April 1, 2022 through March 31, 2023, and \$620,000 for the period April 1, 2023 through March 31, 2024.

- The Trustees of Eastern Star Hall and Home of New York with aggregate payment amounts totaling up to \$869,050 for the period January 01, 2022 through March 31, 2022.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2021/2022 is \$11,623,182. The Medicaid expenditures attributable to state fiscal year 2022/2023 and state fiscal year 2023/2024 are \$6,639,540 and \$1,172,772, respectively.

The public is invited to review and comment on this proposed State Plan Amendment, a copy of which will be available for public review

SUMMARY
SPA #22-0006

This amendment proposes to revise the State Plan to update the Amount that Would have Otherwise been Paid (AWOP) calculation and Rate Methodology description for PACE Plans due to modifications in the premium rate structure and available data sources.

DRAFT

New York
17

1905(a)(26): PACE
[Type of Service]

Program of All-Inclusive Care for the Elderly (PACE)

Method of Reimbursement

The Department uses the following process in establishing rates:

The Department will determine the Amount that Would have Otherwise been Paid (AWOP) equivalent [a fee-for-service equivalent] per member per month cost for State Plan approved services provided to an equivalent non-enrolled population group. Medicaid data sources that will be used to calculate the AWOP include data from the Managed Long Term Care (MLTC) Partial Capitation program, the Medicaid Advantage Plus (MAP) program, the Mainstream Managed Care program as well as fee-for-service and supplemental payments. This information; and/or any information received from the PACE provider, such as the provider’s anticipated enrollment, projected utilization of services and costs, cost experience, and indirect/overhead costs; and/or any other relevant information, will be used by the Department to determine a per member per month capitation rate for the provider that is less than the AWOP [fee-for-service] equivalent per member per month cost determined by the Department.

DRAFT

TN #22-0006 Approval Date _____
Supersedes TN #02-01 Effective Date April 1, 2022

Public Notice **NYS 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 long term care services to comply with enacted statutory provisions. The following changes are proposed:

Long Term Care Services

Effective on or after April 1, 2022, noticed provision for capitation payments intended for services provided by the Program of All-inclusive Care for the Elderly (PACE) plans will be revised. The Department proposes to amend the State Plan by updating the Amount that Would have Otherwise been Paid (AWOP) calculation and rate methodology description contained in the present State Plan for PACE plans due to modifications in the premium rate structure effective April 1, 2022. Specifically, as a result of the movement of beneficiaries and their corresponding cost data to managed care, this data source will also be used in the development of the AWOP and in the rate methodology as well as fee-for-service and other acceptable data sources consistent with Federal requirements. Rates will continue to be subject to the upper payment limit provisions under 42 CFR 460.182.

There is no estimated annual change to gross Medicaid expenditures as a result of this proposed amendment.

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

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3220 Northern Boulevard
Long Island City, New York 11101

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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:

New York State Department of Health
Division of Finance and Rate Setting
99 Washington Ave – One Commerce Plaza
Suite 1432
Albany, New York 12210
spa_inquiries@health.ny.gov

SUMMARY
SPA #22-0008

This State Plan Amendment proposes to maintain the quality incentive for nursing homes into the 2022 rate year and will continue to recognize improvement in performances as an element in the program and provide for other minor modifications. This SPA will clarify the reporting requirements related to the 2022 quality adjustments.

DRAFT

**New York
110(d)(21)**

1905(a)(4)(A) Nursing Facility Services

The New York State Nursing Home Quality Pool (NHQP) is an annual budget-neutral pool of \$50 million dollars. The intent of the NHQP is to incentivize Medicaid-certified nursing facilities across New York State to improve the quality of care for their residents, and to reward facilities for quality based on their performance. The set of measures used to evaluate nursing homes are part of the Nursing Home Quality Initiative (NHQI). The performances of facilities in the NHQI determine the distribution of the funds in the NHQP.

NHQI is described below using MDS (Minimum Data Set) year and NHQI (Nursing Home Quality Initiative) year. MDS year refers to the year the assessment data is collected. NHQI year refers to the year when the nursing home performance is evaluated. For example, if the NHQI year is [2019] 2021, then the MDS year is [2018] 2020. For [the NHQI year] NHQI 2021, the Commissioner will calculate a score and quintile ranking based on data from the MDS year 2020 (January 1 of the MDS year through December 31 of the MDS year), for each non-specialty facility. The score will be calculated based on measurement components comprised of Quality [,] and Compliance[, and Efficiency] Measures. These measurement components and their resulting score and quintile ranking will be referred to as the Nursing Home Quality Initiative. From the NHQI, the Commissioner will exclude specialty facilities consisting of non-Medicaid facilities, Special Focus Facilities as designated by the Centers for Medicare and Medicaid Services (CMS), Continuing Care Retirement Communities, Transitional Care Units, specialty facilities, and specialty units within facilities. Specialty facilities and specialty units [shall] will include AIDS facilities or discrete AIDS units within facilities, facilities or discrete units within facilities for residents receiving care in a long-term inpatient rehabilitation program for traumatic brain injured persons, facilities or discrete units within facilities that provide specialized programs for residents requiring behavioral interventions, facilities or discrete units within facilities for long-term ventilator dependent residents, facilities or discrete units within facilities that provide services solely to children, and neurodegenerative facilities or discrete neurodegenerative units within facilities. The score for each such non-specialty facility will be calculated using the following Quality [,] and Compliance [, and Efficiency] Measures. To offset the impact of COVID-19, some of the quality and the efficiency measures are removed from NHQI 2021 with the intent of bringing back the measures for future NHQI. The measures in this NHQI are listed below:

Quality Measures		Measure Steward
[1]	[Percent of Long Stay High Risk Residents With Pressure Ulcers (As Risk Adjusted by the Commissioner)]	[CMS]
[2]	Percent of Long Stay Residents Who Received the Pneumococcal Vaccine	CMS
[3]	Percent of Long Stay Residents Who Received the Seasonal Influenza Vaccine	CMS
[4]	Percent of Long Stay Residents Experiencing One or More Falls with Major Injury	CMS
[5]	[Percent of Long Stay Residents Who have Depressive Symptoms]	[CMS]
[6]	Percent of Low Risk Long Stay Residents Who Lose Control of Their Bowels or Bladder	CMS
[7]	[Percent of Long Stay Residents Who Lose Too Much Weight (As Risk Adjusted by the Commissioner)]	[CMS]

TN #22-0008

Approval Date _____

Supersedes TN #19-0012

Effective Date January 1, 2022

**New York
110(d)(22)**

1905(a)(4)(A) Nursing Facility Services

[8]	Percent of Long Stay Antipsychotic Use in Persons with Dementia	Pharmacy Quality Alliance (PQA)
[9]	[Percent of Long Stay Residents Who Self-Report Moderate to Severe Pain (As Risk Adjusted by the Commissioner)]	[CMS]
[10]	Percent of Long Stay Residents Whose Need for Help with Daily Activities Has Increased	CMS
[11]	Percent of Long Stay Residents with a Urinary Tract Infection	CMS
[12]	Percent of Employees Vaccinated for Influenza	NYS DOH
[13]	Percent of Contract/Agency Staff Used	NYS DOH
[14]	Rate of Staffing Hours per Resident per Day	NYS DOH
	Compliance Measures	
[15]	CMS Five-Star Quality Rating for Health Inspections as of April 1 of the NHQI year (By Region)	CMS
[16]	Timely Submission and Certification of Complete New York State Nursing Home Cost Report to the Commissioner for the MDS year	NYS DOH
[17]	Timely Submission of Employee Influenza Immunization Data for the September 1 of the MDS year - March 31 of the NHQI year Influenza Season by the deadline [of May 1 of the NHQI year]	NYS DOH
	Efficiency Measure	
[18]	[Rate of Potentially Avoidable Hospitalizations for Long Stay Residents January 1 of the MDS year – December 31 of the MDS year (As Risk Adjusted by the Commissioner)]	[NYS DOH]

Quality Component:

The maximum points a facility may receive for the Quality Component is [70] 50. The applicable percentages or ratings for each of the [14] 10 quality measures will be determined for each facility. Four quality measures are removed in this NHQI year. Three of these measures are temporarily removed to offset the impact of COVID-19 (Percent of Long Stay High Risk Residents with Pressure Ulcers, Percent of Long Stay Residents Who have Depressive Symptoms, Percent of Long Stay Residents Who Lose Too Much Weight). These measures would be reassessed and brought back in the next NHQI year as appropriate. One measure was retired by CMS in October 2019 (The Percent of Long Stay Residents Who Self-Report Moderate to Severe Pain).

The quality measures will be awarded points based on quintile values or threshold values. For quintile-based measures, the measures will be ranked and grouped by quintile with points awarded as follows:

Scoring for quintile-based Quality Measures	
Quintile	Points
1 st Quintile	5
2 nd Quintile	3
3 rd Quintile	1
4 th Quintile	0
5 th Quintile	0

TN #22-0008

Approval Date _____

Supersedes TN #20-0007

Effective Date January 1, 2022

**New York
110(d)(22.2)**

1905(a)(4)(A) Nursing Facility Services

- Percent of Contract/Agency Staff Used

The quintile-based quality measures that are eligible for improvement points are listed below:

- [Percent of Long Stay High Risk Residents with Pressure Ulcers]
- [Percent of Long Stay Residents Who have Depressive Symptoms]
- Percent of Low Risk Long Stay Residents Who Lose Control of Their Bowels or Bladder
- [Percent of Long Stay Residents Who Lose Too Much Weight]
- Percent of Long Stay Residents Whose Need for Help with Daily Activities Has Increased
- Percent of Long Stay Residents Who Received the Seasonal Influenza Vaccine
- Percent of Long Stay Antipsychotic Use in Persons with Dementia
- Percent of Long Stay Residents Who Received the Pneumococcal Vaccine
- Rate of Staffing Hours Per Resident Per Day

The grid below illustrates the method of awarding improvement points.

MDS year Performance						
NHQI year Performance	Quintiles	1 (best)	2	3	4	5
	1 (best)	5	5	5	5	5
	2	3	3	4	4	4
	3	1	1	1	2	2
	4	0	0	0	0	1
	5	0	0	0	0	0

For example, if MDS year performance is in the third quintile, and NHQI year performance is in the second quintile, the facility will receive four points for the measure. This is three points for attaining the second quintile and one point for improvement from the previous year's third quintile.

Risk Adjustment of Quality Measures

The three risk-adjusted quality measures are removed in this NHQI year (Percent of Long Stay Residents Who Self-Report Moderate to Severe Pain, Percent of Long Stay High Risk Residents with Pressure Ulcers, Percent of Long Stay Residents Who Lose Too Much Weight).

[The following quality measures will be risk adjusted using the following covariates as reported in the MDS 3.0 data to account for the impact of individual risk factors:

- Percent of Long Stay Residents Who Self-Report Moderate to Severe Pain: the covariate includes cognitive skills for daily decision making on the prior assessment.
- Percent of Long Stay High Risk Residents with Pressure Ulcers: The covariates include gender, age, BMI, prognosis of less than six months of life expected, diabetes, heart failure, deep vein thrombosis, anemia, renal failure, hip fracture, bowel incontinence, cancer, paraplegia, and quadriplegia.]

TN #22-0008

Approval Date _____

Supersedes TN #20-0007

Effective Date January 1, 2022

**New York
110(d)(22.3)**

1905(a)(4)(A) Nursing Facility Services

[

- Percent of Long Stay Residents Who Lose Too Much Weight: The covariates include age, hospice care, cancer, renal failure, prognosis of less than six months of life expected.

For these three measures the risk adjusted methodology includes the calculation of the observed rate; that is the facility's numerator-compliant population divided by the facility's denominator.

The expected rate is the rate the facility would have had if the facility's patient mix was identical to the patient mix of the state. The expected rate is determined through the risk-adjusted model and follows the CMS methodology found in the MDS 3.0 Quality Measures User's Manual, Appendix A-1.

The facility-specific, risk-adjusted rate is the ratio of observed to expected measure rates multiplied by the overall statewide measure rate.]

Reduction of Points Base: When a quality measure is not available for a nursing home, the number of points the measure is worth will be reduced from the [base of 100 maximum NHQI points] NHQI maximum base points. The nursing home's total score will be the sum of its points divided by the base. This reduction can happen in the following scenario:

- When a quality measure has a denominator of less than 30

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:

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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 all qualifying Mental Hygiene services to comply with enacted statutory provisions. The following changes are proposed:

Non-Institutional

Effective on or after December 30, 2021 the Department of Health will adjust rates to reflect labor costs resulting from statutorily required increases in the New York State minimum wage. The minimum wage rate increases apply to services provided in Office of Mental Health licensed rehabilitation programs, effective December 31, 2021.

The estimated annual aggregate increase in gross Medicaid expenditures attributable to the rate increase is \$14,032 in State Fiscal Year 2022 and \$56,128 in State Fiscal Year 2023.

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.

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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 long term care services to comply with Public Health Law Section 2808 (2-c)(d). The following changes are proposed:

Long Term Care Services

Effective on and after January 1, 2022, the quality incentive program for non-specialty nursing homes will continue to recognize improvement in performance and provide for other minor modifications.

There is no estimated annual change to gross Medicaid expenditures as a result of this proposed amendment.

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.

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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, New York 12210, pa_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:

SUMMARY
SPA #22-0009

This State Plan Amendment proposes to extend the Ambulatory Patient Group (APG) reimbursement methodology until December 31, 2022 and include recalculated weight and component updates that will become effective on or after January 1, 2022.

DRAFT

**New York
2(g)(2)**

1905(a)(9) Clinic Services**APG Reimbursement Methodology – Freestanding Clinics**

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*:

http://www.health.ny.gov/health_care/medicaid/rates/apg/index.htm Click on “3M Versions and Crosswalks,” then on “3M APG Crosswalk” toward bottom of page, and finally on “Accept” at bottom of page.

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 version [3.16.21.3 and 3.16.21.4] 3.17.22.1 and 3.17.22.2, updated as of [07/01/21 and 10/01/21] 01/01/22 and 04/01/22:

http://www.health.ny.gov/health_care/medicaid/rates/bundling/ Click on “[2021] 2022”

APG 3M Definitions Manual; version [3.16] 3.17 updated as of and [07/01/21 and 10/01/21] 01/01/22 and 04/01/22:

http://www.health.ny.gov/health_care/medicaid/rates/methodology/index.htm Click on “3M Versions and Crosswalk.”

APG Investments by Rate Period; updated as of 07/01/10:

http://www.health.ny.gov/health_care/medicaid/rates/methodology/index.htm Click on “Investments by Rate Period.”

APG Relative Weights; updated as of [07/01/21] 01/01/22:

http://www.health.ny.gov/health_care/medicaid/rates/methodology/index.htm Click on “Weights, Proc Weights, and APG Fee Schedule Amounts.”

Associated Ancillaries; updated as of 01/01/20:

http://www.health.ny.gov/health_care/medicaid/rates/apg/index.htm Click on “Ancillary Policy.”

*Older 3M APG crosswalk versions available upon request.

TN _____ **#22-0009**
Supersedes TN _____ **#21-0051**

Approval Date _____
Effective Date **January 01, 2022**

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 Civil Service

PURSUANT to the Open Meetings Law, the New York State Civil Service Commission hereby gives public notice of the following:

Please take notice that the regular monthly meeting of the State Civil Service Commission for January 2022 will be conducted on January 12th and January 13th commencing at 10:00 a.m. This meeting will be conducted at NYS Media Services Center, Suite 146, South Concourse, Empire State Plaza, Albany, NY with live coverage available at <https://www.cs.ny.gov/commission/>

For further information, contact: Office of Commission Operations, Department of Civil Service, Empire State Plaza, Agency Bldg. One, Albany, NY 12239, (518) 473-6598

PUBLIC NOTICE

Office of Fire Prevention and Control

Pursuant to Section 176-b of the Town Law, the Office of Fire Prevention and Control hereby gives notice of the following:

Application for Waiver of the Limitation of Non-resident Members of Volunteer Fire Companies

An application for a waiver of the requirements of paragraph a of subdivision 7 of section 176-b of the Town Law, which limits the membership of volunteer fire companies to forty-five per centum of the actual membership of the fire company, has been submitted by the Pembroke Fire District, County of Genesee.

Pursuant to section 176-b of the Town Law, the non-resident membership limit shall be waived provided that no adjacent fire department objects within sixty days of the publication of this notice.

Objections shall be made in writing, setting forth the reasons such waiver should not be granted, and shall be submitted to:

James B. Cable
State Fire Administrator
Office of Fire Prevention and Control

1220 Washington Avenue
Building 7A, Floor 2
Albany, New York 12226

Objections must be received by the State Fire Administrator within sixty days of the date of publication of this notice.

In cases where an objection is properly filed, the State Fire Administrator shall have the authority to grant a waiver upon consideration of (1) the difficulty of the fire company or district in retaining and recruiting adequate personnel; (2) any alternative means available to the fire company or district to address such difficulties; and (3) the impact of the waiver on adjacent fire departments.

For further information, please contact: Deputy Chief William H. Rifenburgh, Office of Fire Prevention and Control, 1220 Washington Ave., Bldg. 7A, Fl. 2, Albany, NY 12226, (518) 474-6746, William.Rifenburgh@dhses.ny.gov

PUBLIC NOTICE

Office of General Services

GreenNY Interagency Committee on Sustainability and Green Procurement

Pursuant to Executive Order No. 4: Establishing a State Green Procurement and Agency Sustainability Program, April 24, 2008 ("EO 4"), the Interagency Committee on Sustainability and Green Procurement hereby gives public notice of the following:

Three (3) green procurement specifications were tentatively approved by the Interagency Committee on Sustainability and Green Procurement and have been posted for public comment.

These include new or amended specifications on the following topics:

- Lower Carbon Concrete
- Menstrual Products
- Packaging

All the above specifications are available for viewing at: <https://ogs.ny.gov/greenny/executive-order-4-tentatively-approved-specifications>

Information regarding the green specification approval process is also available at the above link.

Comments may be submitted electronically to: GreenEO4@ogs.ny.gov

Comments from the public regarding the tentatively approved specifications will be accepted until Friday, April 1, 2022.

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 to revise provisions of the Ambulatory Patient Group (APG) reimbursement methodology. The following changes are proposed:

Non-Institutional Services

Effective on or after January 1, 2022, the Ambulatory Patient Group

(APG) reimbursement methodology is revised to include recalculated weight and component updates to reflect the APG policy updates.

There is no additional estimated annual change to gross Medicaid expenditures as a result of this proposed amendment.

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 institutional services to comply with enacted statutory provisions. The following changes are proposed:

Institutional Services

Effective for dates of service on or after January 1, 2022, the Department of Health will redefine the rural designation for the inpatient psychiatric services provided in exempt general hospitals or exempt units of general hospitals by increasing the average county population density from 225 to 300 per square mile based on 2020 census data. This State Plan Amendment is necessary to adequately reimburse hospitals for providing these services and better meet the community's mental health needs.

The estimated annual increase in gross Medicaid expenditures attributable to this initiative is \$2,300,000. Funding for this redefinition is included in the State Budget for State Fiscal Year 2022.

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.

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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 Long Term Care services as authorized by § 2826 of New York Public Health Law. The following changes are proposed:

Long Term Care Services

Temporary rate adjustments have been approved for services related to providers that are undergoing closure, merger, consolidation, acquisition or restructuring themselves or other health care providers. The temporary rate adjustments have been reviewed and approved for the following six Nursing Homes:

- Loretto Health and Rehabilitation with aggregate payment amounts totaling up to \$4,747,976 for the period January 01, 2022 through March 31, 2022 and \$2,977,124 for the period April 1, 2022 through March 31, 2023.

- St. Vincent DePaul Residence with aggregate payment amounts totaling up to \$3,681,188 for the period January 01, 2022 through March 31, 2022 and \$1,538,986 for the period April 1, 2022 through March 31, 2023.

- Fort Hudson Nursing Center with aggregate payment amounts totaling up to \$1,129,968 for the period January 01, 2022 through March 31, 2022, \$475,930 for the period April 1, 2022 through March 31, 2023 and \$551,772 for the period April 1, 2023 through March 31, 2024.

- Adirondack Health - Mercy Living Center with aggregate payment amounts totaling up to \$500,000 for the period January 01, 2022 through March 31, 2022.

- Greenfield Health and Rehabilitation Center with aggregate payment amounts totaling up to \$695,000 for the period January 01, 2022 through March 31, 2022, \$1,647,500 for the period April 1, 2022 through March 31, 2023, and \$620,000 for the period April 1, 2023 through March 31, 2024.

- The Trustees of Eastern Star Hall and Home of New York with aggregate payment amounts totaling up to \$869,050 for the period January 01, 2022 through March 31, 2022.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2021/2022 is \$11,623,182. The Medicaid expenditures attributable to state fiscal year 2022/2023 and state fiscal year 2023/2024 are \$6,639,540 and \$1,172,772, respectively.

The public is invited to review and comment on this proposed State Plan Amendment, a copy of which will be available for public review

SUMMARY
SPA #22-0010

This State Plan Amendment proposes to extend the Ambulatory Patient Group (APG) reimbursement methodology until December 31, 2022 and include recalculated weight and component updates that will become effective on or after January 1, 2022.

DRAFT

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 Civil Service

PURSUANT to the Open Meetings Law, the New York State Civil Service Commission hereby gives public notice of the following:

Please take notice that the regular monthly meeting of the State Civil Service Commission for January 2022 will be conducted on January 12th and January 13th commencing at 10:00 a.m. This meeting will be conducted at NYS Media Services Center, Suite 146, South Concourse, Empire State Plaza, Albany, NY with live coverage available at <https://www.cs.ny.gov/commission/>

For further information, contact: Office of Commission Operations, Department of Civil Service, Empire State Plaza, Agency Bldg. One, Albany, NY 12239, (518) 473-6598

PUBLIC NOTICE

Office of Fire Prevention and Control

Pursuant to Section 176-b of the Town Law, the Office of Fire Prevention and Control hereby gives notice of the following:

Application for Waiver of the Limitation of Non-resident Members of Volunteer Fire Companies

An application for a waiver of the requirements of paragraph a of subdivision 7 of section 176-b of the Town Law, which limits the membership of volunteer fire companies to forty-five per centum of the actual membership of the fire company, has been submitted by the Pembroke Fire District, County of Genesee.

Pursuant to section 176-b of the Town Law, the non-resident membership limit shall be waived provided that no adjacent fire department objects within sixty days of the publication of this notice.

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State Fire Administrator
Office of Fire Prevention and Control

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The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2021/2022 is \$11,623,182. The Medicaid expenditures attributable to state fiscal year 2022/2023 and state fiscal year 2023/2024 are \$6,639,540 and \$1,172,772, respectively.

The public is invited to review and comment on this proposed State Plan Amendment, a copy of which will be available for public review

SUMMARY
SPA #22-0011

This State Plan Amendment proposes to on or after February 1, 2022, Residential Treatment Facilities (RTF) rates may be adjusted to consist of a percentage increase on the clinical/direct care (C/DC) rate component to include additional funds appropriate to maintain the required level of care that are not reflected in the base year.

DRAFT

New York
3

1905(a)(16) Inpatient Psychiatric Hospital – PRTF

B. RESIDENTIAL TREATMENT FACILITIES FOR CHILDREN AND YOUTH

Medicaid rates for Residential Treatment Facilities for Children and Youth (“RTFs”) are established prospectively, based upon actual costs and patient days as reported on cost reports for the fiscal year two years prior to the rate year. The RTF fiscal year and rate year are for the twelve months July 1 through June 30. Alternate Cost Reports may be utilized to align with appealed rate periods until such time that the appealed information would be fully reflected in the facilities annual cost report. Actual patient days are subject to a maximum utilization of 96 percent and a minimum utilization of 90 percent.

1. OPERATING COSTS

Allowable operating costs are subject to the review and approval of the Office of Mental Health. In determining the allowability of costs, the Office of Mental Health reviews the categories of cost, described below, with consideration given to the special needs of the patient population to be served by the RTF. The categories of costs include:

- (i) Clinical/Direct Care (C/DC). This category of costs includes salaries and fringe benefits for clinical and direct care staff. Effective on or after February 1, 2022, the C/DC rate component may be adjusted to include a percentage increase to include additional funds appropriate to maintain the required level of care that are not reflected in the base year.
- (ii) Administration, Maintenance and Supports (AMS). This category of costs includes the costs associated with administration, maintenance and child support.
- (iii) Purchased Health Services (PHS). This category of costs includes clinical services such as dental services, purchased on a contractual basis and not subject to the clinical standard if the services are not uniformly provided by all RTFs and thus not considered by the Commissioner in the establishment of the approved staffing levels.

Allowable per diem operating costs in the category of C/DC are limited to the lesser of the reported costs or the amount derived from the number of clinical staff approved by the Commissioner multiplied by a standard salary and fringe benefit amount.

TN #22-0011 _____

Approval Date _____

Supersedes TN #20-0062 _____

Effective Date February 01, 2022 _____

2022. This enhancement will allow providers to supplement the implementation of one or more activities to enhance, expand or strengthen HCBS under the Medicaid program, including strengthening the response to the COVID-19 Public Health Emergency, executing peer support service provision, expanding offsite service delivery, implementing electronic health record (EHR) changes, and strengthening provider staffing resources. The estimated annual net aggregate increase in gross Medicaid expenditures as a result of the proposed increase for Outpatient Mental Health Rehabilitative Services is \$5,300,000 in State Fiscal Year 2022 growing to \$31,700,000 annually.

2) Rates for state-plan approved Outpatient Mental Health Rehabilitative Services will be increased by an additional 11.5 percent for the period February 1, 2022 – September 30, 2022. This enhancement will allow providers to increase recruitment and retention of experienced and dedicated direct care and other staff through measures including, but not limited to, targeted loan forgiveness, tuition reimbursement, hiring and signing bonuses, longevity payments, expanded student placements, shift differential pay and retirement contributions.

The estimated annual net aggregate increase in gross Medicaid expenditures as a result of this proposed increase for Outpatient Mental Health Rehabilitative Services is \$12,200,000 in State Fiscal Year 2022 and \$36,500,000 in State Fiscal Year 2023.

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:

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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 institutional services. The following changes are proposed:

Institutional Services

Effective on or after February 1, 2022, Residential Treatment Facilities (RTF) rates may be adjusted to consist of a percentage increase on the clinical/direct care (C/DC) rate component to include additional

funds appropriate to maintain the required level of care that are not reflected in the base year.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2022/2023 is \$6,000,000.

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.

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PUBLIC NOTICE

Department of State
F-2021-0962

Date of Issuance – January 26, 2022

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 (CZMA) of 1972, as amended.

The applicant has certified that the proposed activities comply with and will be conducted in a manner consistent with the federally approved New York State Coastal Management Program (NYSCMP). The applicant’s consistency certification and accompanying public information and data 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.

In F-2021-0962, Niagara Mohawk Power Corporation is proposing the installation of a submarine cable (1.5”) (7.6kV) to extend from the shore of Welcome Island to Knobby Island. Cable to extend from property owned by Peter R Lembo and Jodette Magari-Lembo, along the natural bottom of the St. Lawrence River, to the point of land on Knobby Island, owned by A. John and Beverly Merola, Alexandria Bay, NY 13607 for approximately 550’ in length.

The applicant’s consistency certification and supporting information are available for review at: <https://dos.ny.gov/system/files/documents/2022/01/f-2021-0962knobbyisland.pdf> or at <https://dos.ny.gov/public-notice>

Any interested parties and/or agencies desiring to express their views concerning any of the above proposed activities may do so by

SUMMARY
SPA #22-0012

This State Plan Amendment proposes to provide Supplemental Payments to the following providers to address the critical Direct Support Professional (DSP) shortage stemming from the COVID-19 emergency.

- Crisis Services for Individuals with Intellectual and/or Developmental Disabilities (CSIDD)
- Intermediate Care Facilities for Individuals with Intellectual and/or Developmental Disabilities (ICF/IID)
- Day Services, including Day Treatment and Vocational Services, for Individuals Residing in an ICF/IID
- Rehabilitation Agencies (known as Article 16 Clinics under State Law)
- OPWDD-certified Specialty Hospital

These payments are in addition to the amount billed by the provider for the underlying Medicaid services.

A supplemental payment will be made to qualifying provider agencies based upon the number of DSPs who qualify for employee incentives. The full value of the provider's supplemental payment will be paid to qualified workers. The parameters for the employee incentives mirror the payments for DSPs implemented via the CMS-approved Appendix K (NY 0238.R06.08) and are as follows:

- **Employee service during the COVID emergency.** A payment of \$1,000 per full-time employee who served in the capacity of a DSP during the period of the first payroll that occurred on or after March 17, 2020 to the first payroll that occurs on or after September 1, 2021 for at least 90 days and continues to be employed by the provider agency. Payments may be pro-rated for employees with less than full-time service.
- **Longevity and Retention Payment.** A payment that is available to qualified workers who are employed by an eligible, OPWDD-certified provider in a DSP capacity.
 - The Longevity Bonus will be retroactive and cover the period from April 1, 2020 to March 31, 2021.
 - The Retention Bonus will be prospective and cover the period from April 1, 2021 to March 31, 2022.
- **Vaccination Incentive Payment.** A \$500 payment that is available to qualified workers who are employed on a full-time basis by an eligible, OPWDD-certified provider in a DSP capacity and who have completed the COVID-19 vaccination regimen as of the first complete payroll that ends on or after January 14, 2022. Payments may be pro-rated for employees with less than full-time service.

The issuance of supplemental payments will be based on CFR data or a survey issued by NYS and completed by the provider agency and returned to NYS. The provider agency's Executive Director and Board Chair must sign an attestation verifying the accuracy of the number of qualified employees for each category of incentive payment that is reported in the survey, as well as confirm that these supplemental payments, net of any salary-sensitive fringe benefits, will be made available and paid to eligible staff. The value of the supplemental payment will then be reported to CMS on the CMS-64. Supplemental payments will be subject to audit and review to ensure program compliance.

Section 7 – General Provisions

7.4. Medicaid Disaster Relief for the COVID-19 National Emergency

On March 13, 2020, the President of the United States issued a proclamation that the COVID-19 outbreak in the United States constitutes a national emergency by the authorities vested in him by the Constitution and the laws of the United States, including sections 201 and 301 of the National Emergencies Act (50 U.S.C. 1601 et seq.), and consistent with section 1135 of the Social Security Act (Act). On March 13, 2020, pursuant to section 1135(b) of the Act, the Secretary of the United States Department of Health and Human Services invoked his authority to waive or modify certain requirements of titles XVIII, XIX, and XXI of the Act as a result of the consequences of the COVID-19 pandemic, to the extent necessary, as determined by the Centers for Medicare & Medicaid Services (CMS), to ensure that sufficient health care items and services are available to meet the needs of individuals enrolled in the respective programs and to ensure that health care providers that furnish such items and services in good faith, but are unable to comply with one or more of such requirements as a result of the COVID-19 pandemic, may be reimbursed for such items and services and exempted from sanctions for such noncompliance, absent any determination of fraud or abuse. This authority took effect as of 6PM Eastern Standard Time on March 15, 2020, with a retroactive effective date of March 1, 2020. The emergency period will terminate, and waivers will no longer be available, upon termination of the public health emergency, including any extensions.

The State Medicaid agency (agency) seeks to implement the policies and procedures described below, which are different than the policies and procedures otherwise applied under the Medicaid state plan, during the period of the Presidential and Secretarial emergency declarations related to the COVID-19 outbreak (or any renewals thereof), or for any shorter period described below:

<p><i>Describe shorter period here.</i> Effective January 1, 2022</p>

NOTE: States may not elect a period longer than the Presidential or Secretarial emergency declaration (or any renewal thereof). States may not propose changes on this template that restrict or limit payment, services, or eligibility, or otherwise burden beneficiaries and providers.

Request for Waivers under Section 1135

- The agency seeks the following under section 1135(b)(1)(C) and/or section 1135(b)(5) of the Act:
- a. SPA submission requirements – the agency requests modification of the requirement to submit the SPA by March 31, 2020, to obtain a SPA effective date during the first calendar quarter of 2020, pursuant to 42 CFR 430.20.
 - b. Public notice requirements – the agency requests waiver of public notice requirements that would otherwise be applicable to this SPA submission. These requirements may include those specified in 42 CFR 440.386 (Alternative Benefit Plans), 42 CFR 447.57(c) (premiums and cost sharing), and 42 CFR 447.205 (public notice of changes in statewide methods and standards for setting payment rates).

State/Territory: New York

- c. x Tribal consultation requirements – the agency requests modification of tribal consultation timelines specified in [insert name of state] Medicaid state plan, as described below:

New York will reduce the tribal consultation to zero days before submission to CMS. Tribal consultation will still be completed and mailed as per guidelines in New York’s approved state plan.

Section A – Eligibility

- 1. The agency furnishes medical assistance to the following optional groups of individuals described in section 1902(a)(10)(A)(ii) or 1902(a)(10)(c) of the Act. This may include the new optional group described at section 1902(a)(10)(A)(ii)(XXIII) and 1902(ss) of the Act providing coverage for uninsured individuals.

Include name of the optional eligibility group and applicable income and resource standard.

- 2. The agency furnishes medical assistance to the following populations of individuals described in section 1902(a)(10)(A)(ii)(XX) of the Act and 42 CFR 435.218:

- a. All individuals who are described in section 1905(a)(10)(A)(ii)(XX)

Income standard:

-or-

- b. Individuals described in the following categorical populations in section 1905(a) of the Act:

Income standard:

- 3. The agency applies less restrictive financial methodologies to individuals excepted from financial methodologies based on modified adjusted gross income (MAGI) as follows.

Less restrictive income methodologies:

State/Territory: New York

Less restrictive resource methodologies:

- 4. The agency considers individuals who are evacuated from the state, who leave the state for medical reasons related to the disaster or public health emergency, or who are otherwise absent from the state due to the disaster or public health emergency and who intend to return to the state, to continue to be residents of the state under 42 CFR 435.403(j)(3).

- 5. The agency provides Medicaid coverage to the following individuals living in the state, who are non-residents:

- 6. The agency provides for an extension of the reasonable opportunity period for non-citizens declaring to be in a satisfactory immigration status, if the non-citizen is making a good faith effort to resolve any inconsistencies or obtain any necessary documentation, or the agency is unable to complete the verification process within the 90-day reasonable opportunity period due to the disaster or public health emergency.

Section B – Enrollment

- 1. The agency elects to allow hospitals to make presumptive eligibility determinations for the following additional state plan populations, or for populations in an approved section 1115 demonstration, in accordance with section 1902(a)(47)(B) of the Act and 42 CFR 435.1110, provided that the agency has determined that the hospital is capable of making such determinations.

Please describe the applicable eligibility groups/populations and any changes to reasonable limitations, performance standards or other factors.

- 2. The agency designates itself as a qualified entity for purposes of making presumptive eligibility determinations described below in accordance with sections 1920, 1920A, 1920B, and 1920C of the Act and 42 CFR Part 435 Subpart L.

Please describe any limitations related to the populations included or the number of allowable PE periods.

State/Territory: New York

Please list the applicable eligibility groups or populations.

3. The agency allows waiver of payment of the enrollment fee, premiums and similar charges for undue hardship.

Please specify the standard(s) and/or criteria that the state will use to determine undue hardship.

Section D – Benefits

Benefits:

1. The agency adds the following optional benefits in its state plan (include service descriptions, provider qualifications, and limitations on amount, duration or scope of the benefit):

2. The agency makes the following adjustments to benefits currently covered in the state plan:

3. The agency assures that newly added benefits or adjustments to benefits comply with all applicable statutory requirements, including the statewide requirements found at 1902(a)(1), comparability requirements found at 1902(a)(10)(B), and free choice of provider requirements found at 1902(a)(23).

4. Application to Alternative Benefit Plans (ABP). The state adheres to all ABP provisions in 42 CFR Part 440, Subpart C. This section only applies to states that have an approved ABP(s).

- a. The agency assures that these newly added and/or adjusted benefits will be made available to individuals receiving services under ABPs.
- b. Individuals receiving services under ABPs will not receive these newly added and/or adjusted benefits, or will only receive the following subset:

Please describe.

State/Territory: New York

Telehealth:

5. The agency utilizes telehealth in the following manner, which may be different than outlined in the state's approved state plan:

Please describe.

Drug Benefit:

6. The agency makes the following adjustments to the day supply or quantity limit for covered outpatient drugs. The agency should only make this modification if its current state plan pages have limits on the amount of medication dispensed.

Please describe the change in days or quantities that are allowed for the emergency period and for which drugs.

7. Prior authorization for medications is expanded by automatic renewal without clinical review, or time/quantity extensions.

8. The agency makes the following payment adjustment to the professional dispensing fee when additional costs are incurred by the providers for delivery. States will need to supply documentation to justify the additional fees.

Please describe the manner in which professional dispensing fees are adjusted.

9. The agency makes exceptions to their published Preferred Drug List if drug shortages occur. This would include options for covering a brand name drug product that is a multi-source drug if a generic drug option is not available.

Section E – Payments

Optional benefits described in Section D:

1. Newly added benefits described in Section D are paid using the following methodology:

- a. Published fee schedules –

Effective date (enter date of change):

Location (list published location):

TN: 22-0012

Supersedes TN: NEW

Approval Date:

Effective Date: January 1, 2022

State/Territory: New York

b. Other:

Describe methodology here.

Increases to state plan payment methodologies:

2. X The agency increases payment rates for the following services:

Please list all that apply.

Additional Supplemental Payments will be made the following providers to address the critical Direct Support Professional (DSP) shortage stemming from the COVID-19 emergency

- Crisis Services for Individuals with Intellectual and/or Developmental Disabilities (CSIDD)
- Intermediate Care Facilities for Individuals with Intellectual and/or Developmental Disabilities (ICF/IID)
- Day Services, including Day Treatment and Vocational Services, for Individuals Residing in an ICF/IID
- Rehabilitation Agencies (known as Article 16 Clinics under State Law)
- OPWDD-certified Specialty Hospital

These payments are in addition to the amount billed by the provider for the underlying Medicaid services. OPWDD is implementing three supplemental payments for eligible providers.

a. Payment increases are targeted based on the following criteria:

Please describe criteria.

b. Payments are increased through:

i. X A supplemental payment or add-on within applicable upper payment limits:

Please describe Supplemental Payments for Workforce Stabilization

A supplemental payment will be made to qualifying provider agencies based upon the number of DSPs who qualify for employee incentives. The value of the supplemental payment will be based on provider survey data or Consolidated Fiscal Reporting (CFR) as described below. The full value of the provider's supplemental payment will be paid to qualified workers.

For the purposes of these payments, DSPs are defined as those who are reported in the position as a Title Code 200 Series in the New York State CFR Manual. These payments are mutually exclusive, meaning that staff are eligible for all three payments if the established criteria are met. The parameters for the employee incentives are:

1. **Employee service during the COVID emergency.** A payment of \$1,000 per full-time employee who served in the capacity of a DSP during the period of the first payroll that occurred on or after March 17, 2020 to the first payroll that occurs on or after September 1, 2021 for at least 90 days and continues to be employed by the provider agency. The \$1,000 is approximately 3% of the statewide average salary for DSPs in NYS and payments will be available as follows:
 - a. A payment of \$1,000 per employee who is employed on a full-time basis
 - b. A payment of \$500 per employee who is employed at least, but not less than 20 hours/week, and
 - c. A payment of \$250 per employee who is employed less than 20 hours/week.

NYS's intent is to provide a 'flat' payment rate for the COVID service payment, with the understanding that the longevity and retention payments will be sensitive to the employee's base salary and therefore will result in higher payments for employees with longer tenure and resulting in higher base wages. These payments are intended to recognize that DSPs worked during the pandemic and should be recognized and rewarded for their service.

2. **Longevity and Retention Payment.** A payment that is available to qualified workers who are employed by an eligible, OPWDD-certified provider in a DSP capacity. To bolster a more sustainable workforce, supplemental payments include a Longevity Bonus and Retention Bonus. For non-profit provider agencies employing DSPs, each bonus will be equal to 20% of the provider's payroll expenditures for DSPs, adjusted for salary-sensitive fringe benefit costs, as reported in the CFR for the period ending December 31, 2019 for Calendar Year CFR filers and the period ending June 30, 2019 (for Fiscal Year CFR filers).
 - a. The Longevity Bonus will be retroactive and cover the period from April 1, 2020 to March 31, 2021. Longevity payments will be made for DSP staff who worked during this prior period and remain on the agency's payroll through the first complete payroll that ends on or after September 1, 2021.
 - b. The Retention Bonus will be prospective and cover the period from April 1, 2021 to March 31, 2022. Retention payments will be made for DSP staff who worked during this period and remain on the agency's last complete payroll that ends on or prior to March 31, 2022. The bonus will be paid at the end of the retention period. The end date of the retention period is the end of the period of the Presidential and Secretarial emergency declarations related to the COVID-19 outbreak (or any renewals thereof) not to exceed March 31, 2022.

3. **Vaccination Incentive Payment.** A payment that is available to qualified workers who are employed by an eligible, OPWDD-certified provider in a DSP capacity and who have completed the COVID-19 vaccination regimen as of the first complete payroll that ends on or after January 14, 2022. The vaccination payment is established at approximately 1.4% of the statewide average salary for DSPs in NYS. Payments will be available as follows:
- a. A payment of \$500 per employee who is employed on a full-time basis
 - b. A payment of \$250 per employee who is employed at least, but not less than 20 hours/week, and
 - c. A payment of \$125 for part-time employees who are employed less than 20 hours/week

Agencies qualify for the supplemental payments described above if the provider agency was active in the delivery of services during the period between March 2020 and September 2021.

Providers eligible to receive the supplemental payment retain 100% of the total computable expenditure claimed by the Medicaid agency to CMS. The provider subsequently must make all funds available directly to qualified DSPs, net of any salary-sensitive fringe benefits costs attributable to these supplemental payments.

The flow of funds for these supplemental payments will differ from other State Plan services, which are adjudicated through eMedNY as service payments tied to individual service recipients. These supplemental rate payments will be made as lump-sum payments using eMedNY. The issuance of supplemental payments will be based on CFR data or a survey issued by NYS and completed by the provider agency and returned to NYS. The provider agency's Executive Director and Board Chair must sign an attestation verifying the accuracy of the number of qualified employees for each category of incentive payment that is reported in the survey, as well as confirm that these supplemental payments, net of any salary-sensitive fringe benefits, will be made available and paid to eligible staff. OPWDD will then calculate the total supplemental payment due the provider agency and establish the appropriate, provider specific rates in eMedNY. Supplemental payments will only be made to providers operating under fee for service. The value of the supplemental payment will then be reported to CMS on the CMS-64. Supplemental payments will be subject to audit and review to ensure program compliance.

State/Territory: New York

- ii. An increase to rates as described below.

Rates are increased:

 Uniformly by the following percentage:

 Through a modification to published fee schedules –

Effective date (enter date of change):

Location (list published location):

 Up to the Medicare payments for equivalent services.

 By the following factors:

Please describe.

Payment for services delivered via telehealth:

- 3. For the duration of the emergency, the state authorizes payments for telehealth services that:
 - a. Are not otherwise paid under the Medicaid state plan;
 - b. Differ from payments for the same services when provided face to face;
 - c. Differ from current state plan provisions governing reimbursement for telehealth;

Describe telehealth payment variation.

- d. Include payment for ancillary costs associated with the delivery of covered services via telehealth, (if applicable), as follows:
 - i. Ancillary cost associated with the originating site for telehealth is incorporated into fee-for-service rates.
 - ii. Ancillary cost associated with the originating site for telehealth is separately reimbursed as an administrative cost by the state when a Medicaid service is delivered.

State/Territory: New York

Other:

4. Other payment changes:

Please describe.

Section F – Post-Eligibility Treatment of Income

1. The state elects to modify the basic personal needs allowance for institutionalized individuals. The basic personal needs allowance is equal to one of the following amounts:
- a. The individual’s total income
 - b. 300 percent of the SSI federal benefit rate
 - c. Other reasonable amount:
2. The state elects a new variance to the basic personal needs allowance. (Note: Election of this option is not dependent on a state electing the option described the option in F.1. above.)

The state protects amounts exceeding the basic personal needs allowance for individuals who have the following greater personal needs:

Please describe the group or groups of individuals with greater needs and the amount(s) protected for each group or groups.

Section G – Other Policies and Procedures Differing from Approved Medicaid State Plan /Additional Information

PRA Disclosure Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1148 (Expires 03/31/2021). The time required to complete this information collection is estimated to average 1 to 2 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. Your response is required to receive a waiver under Section 1135 of the Social Security Act. All responses are public and will be made available on the CMS web site. If you have

TN: 22-0012
Supersedes TN: NEW

Approval Date:
Effective Date: January 1, 2022

SUMMARY
SPA #22-0014

This State Plan Amendment proposes to increase rates for Outpatient Mental Health Rehabilitative Services by five percent, effective February 1, 2022.

DRAFT

**New York
2(s.3)**

1905(a)(9) Clinic Services

VII. Off-Site Visits Provided By OMH Licensed Clinics to Homeless Individuals.

Medicaid will only claim expenditures for off-site clinic services when the services meet the exception in 42 CFR 440.90(b) that permits Medicaid payment for services furnished outside of the clinic by clinic personnel under the direction of a physician to an eligible individual who does not reside in a permanent dwelling or does not have a fixed home or mailing address. Off-site services provided by OMH licensed clinics to other than homeless individuals will be reimbursed with State-only funding and federal financial participation will not be claimed.

VIII. Quality Improvement (QI) Program

An enhanced APG peer group base rate is available for [providers] participating in the OMH quality improvement program. To become eligible for this enhancement, providers must complete a Memorandum of Agreement agreeing to the terms and conditions under which the enhanced APG peer group base rate will be paid, develop and submit a quality improvement plan that is subsequently approved by the OMH, identify the process or outcome indicators that will be monitored, and submit the QI findings and results to the OMH.

Providers that discontinue their involvement in the QI program will revert to the APG peer group base rate for their region that does not include the enhancement.

IX. APG Peer Group Base Rates for all OMH-Licensed Freestanding Mental Health Clinics

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of OMH outpatient mental health services providers. The agency's fee schedule rate was set as of [July 1, 2021] February 1, 2022, and is effective for services provided on or after that date. All rates are published on the State's website at: https://omh.ny.gov/omhweb/medicaid_reimbursement/excel/apg-peer-group-base-rate.xlsx

TN 22-0014

Approval Date _____

Supersedes TN #21-0044

Effective Date February 1, 2022

**New York
8a**

1905(a)(13) Rehabilitative Services

Rehabilitative Services (42 CFR 440.130(d)): OMH outpatient mental health services - Reimbursement Methodology continued

I. Definitions: The list of definitions in the “Ambulatory Patient Group System - freestanding clinic” section of this attachment will also apply to the methodology for OMH outpatient mental health services except as follows:

- **After hours** means outside the time period 8:00 am – 6:00 pm on weekdays or any time during weekends.

II. Quality Improvement (QI) Program

An enhanced APG peer group base rate is available for [providers] participating in the OMH quality improvement program. To become eligible for this enhancement, providers must complete a Memorandum of Agreement agreeing to the terms and conditions under which the enhanced APG peer group base rate will be paid, develop and submit a quality improvement plan that is subsequently approved by the OMH, identify the process or outcome indicators that will be monitored, and submit the QI finding and results to the OMH.

Providers that discontinue their involvement in the QI program will revert to the APG peer group base rate for their region that does not include the enhancement.

III. Minimum Wage Increases

The minimum wage methodology described in the “Minimum Wage Rate Increases for Non-State-operated Freestanding OMH-Licensed Mental Health Clinics” section of this attachment will also apply to the minimum wage methodology for OMH outpatient community-based mental health rehabilitative services.

IV. Reimbursement Rates: Effective for dates of service on or after February 1, 2022, the state sets APG peer group base rates for all OMH outpatient mental health services providers, including base rates for providing participating in the OMH Quality Improvement program[,]. Base rates are published on the State’s website at:

https://omh.ny.gov/omhweb/medicaid_reimbursement/excel/apg-peer-group-base-rate.xlsx

TN #22-0014

Approval Date _____

Supersedes TN #21-0007

Effective Date February 1, 2022

13. Project Sponsor: Hampden Township. Project Facility: Armitage Golf Club, Hampden Township, Cumberland County, Pa. Application for renewal of consumptive use of up to 0.290 mgd (peak day) (Docket No. 19920101).

14. Project Sponsor and Facility: Millersburg Area Authority, Upper Paxton Township, Dauphin County, Pa. Application for renewal of groundwater withdrawal of up to 0.117 mgd (30-day average) from Well 14 (Docket No. 19930301).

15. Project Sponsor and Facility: Municipal Authority of the Township of East Hempfield dba Hempfield Water Authority, East Hempfield Township, Lancaster County, Pa. Applications for renewal of groundwater withdrawals (30 day averages) of up to 0.353 mgd from Well 6, 0.145 mgd from Well 7, 1.447 mgd from Well 8, and 1.800 mgd from Well 11, and Commission-initiated modification to Docket No. 20120906, which approves withdrawals from Wells 1, 2, 3, 4, and 5 and Spring S-1 (Docket Nos. 19870306, 19890503, 19930101, and 20120906).

16. Project Sponsor and Facility: Repsol Oil & Gas USA, LLC (Sugar Creek), West Burlington Township, Bradford County, Pa. Application for renewal of surface water withdrawal of up to 0.750 mgd (peak day) (Docket No. 20170308).

Project Scheduled for Action Involving a Diversion:

17. Project Sponsor and Facility: Chester Water Authority, New Garden Township, Chester County, Pa. Applications for renewal of consumptive use and for an out-of-basin diversion of up to 3.000 mgd (30-day average) (Docket No. 19961104).

Opportunity to Appear and Comment:

Interested parties may call into the hearing to offer comments to the Commission on any business listed above required to be the subject of a public hearing. Given the nature of the meeting, the Commission strongly encourages those members of the public wishing to provide oral comments to pre-register with the Commission by e-mailing Jason Oyler at joyler@srbc.net prior to the hearing date. The presiding officer reserves the right to limit oral statements in the interest of time and to otherwise control the course of the hearing. Access to the hearing via telephone will begin at 6:15 p.m. Guidelines for the public hearing are posted on the Commission's website, www.srbc.net, prior to the hearing for review. The presiding officer reserves the right to modify or supplement such guidelines at the hearing. Written comments on any business listed above required to be the subject of a public hearing may also be mailed to Mr. Jason Oyler, Secretary to the Commission, Susquehanna River Basin Commission, 4423 North Front Street, Harrisburg, Pa. 17110-1788, or submitted electronically through <https://www.srbc.net/regulatory/public-comment/>. Comments mailed or electronically submitted must be received by the Commission on or before February 14, 2021, to be considered.

Authority: Pub. L. 91-575, 84 Stat. 1509 et seq., 18 CFR Parts 806, 807, and 808.

Dated: January 6, 2022

Jason E. Oyler,

General Counsel and Secretary to the Commission

PUBLIC NOTICE

Department of Civil Service

PURSUANT to the Open Meetings Law, the New York State Civil Service Commission hereby gives public notice of the following:

Please take notice that the regular monthly meeting of the State Civil Service Commission for February 2022 will be conducted on February 9 and February 10 commencing at 10:00 a.m. This meeting will be conducted at NYS Media Services Center, Suite 146, South Concourse, Empire State Plaza, Albany, NY with live coverage available at <https://www.cs.ny.gov/commission/>.

For further information, contact: Office of Commission Operations, Department of Civil Service, Empire State Plaza, Agency Bldg. One, Albany, NY 12239, (518) 473-6598

PUBLIC NOTICE

Division of Criminal Justice Services
DNA Subcommittee

Pursuant to Public Officers Law section 104, the Division of Criminal Justice Services gives notice of a meeting of the New York State DNA Subcommittee to be held on:

Date: February 4, 2022

Time: 10:00 a.m. - 12:00 p.m.

Primary Video Conference Site:

Division of Criminal Justice Services
Alfred E. Smith Office Building
CrimeStat Room 118
80 South Swan Street
Albany, NY

Web Streaming information: The webcast information for this meeting will be posted on the Division of Criminal Justice website under the Newsroom, Open Meeting/Webcasts.

<https://www.criminaljustice.ny.gov/pio/openmeetings.htm>

PUBLIC NOTICE

Deferred Compensation Board

- Pursuant to the provisions of 9 NYCRR, Section 9003.2, authorized by Section 5 of the State Finance Law, the New York State Deferred Compensation Board, beginning Friday, January 28, 2022, is soliciting proposals from financial organizations to provide Active Fixed Income investment management services benchmarked to the Bloomberg Aggregate Index.

- One or more financial organizations may be selected for purposes of investing a portion of the New York State Deferred Compensation Plan's Stable Income Fund in the above fixed income strategies. Assets will be held in the Stable Income Fund's custodial account and will be wrapped by a benefit responsive contract that is selected separately by the Stable Income Fund structure manager. The Stable Income Fund is offered as an investment option under the Deferred Compensation Plan for Employees of the State of New York and Other Participating Public Jurisdictions, a plan meeting the requirements of Section 457 of the Internal Revenue Code and Section 5 of the State Finance Law, including all rules and regulations issued pursuant thereto. A copy of the request for proposals will be posted on Callan LLC's website: www.callan.com and on the Board's web site: deferredcompboard.ny.gov

- Proposals must be received no later than the close of business on Friday, March 18, 2022.

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 to enhance, and increase access to, Home and Community Based Services (HCBS) in accordance with the federal statutory provisions of Section 9817 of the American Rescue Plan Act of 2021 (ARP) which, subject to approval of the State's spending plan, New York State quarterly reports and narrative (Spending Plan) by the Centers for Medicare and Medicaid Services (CMS), provides a ten percent increase in Federal Medical Assistance Percentage (FMAP) to state Medicaid programs from April 1, 2021 to March 31, 2022 to supplement existing state expenditures on HCBS. The following changes are proposed:

Non-Institutional Services

Contingent upon CMS approval of the Spending Plan submitted by the State, this notice proposes to increase reimbursement rates, as follows:

1) Rates for state-plan approved Outpatient Mental Health Rehabilitative Services will be increased by 5.0 percent, effective February 1,

2022. This enhancement will allow providers to supplement the implementation of one or more activities to enhance, expand or strengthen HCBS under the Medicaid program, including strengthening the response to the COVID-19 Public Health Emergency, executing peer support service provision, expanding offsite service delivery, implementing electronic health record (EHR) changes, and strengthening provider staffing resources. The estimated annual net aggregate increase in gross Medicaid expenditures as a result of the proposed increase for Outpatient Mental Health Rehabilitative Services is \$5,300,000 in State Fiscal Year 2022 growing to \$31,700,000 annually.

2) Rates for state-plan approved Outpatient Mental Health Rehabilitative Services will be increased by an additional 11.5 percent for the period February 1, 2022 – September 30, 2022. This enhancement will allow providers to increase recruitment and retention of experienced and dedicated direct care and other staff through measures including, but not limited to, targeted loan forgiveness, tuition reimbursement, hiring and signing bonuses, longevity payments, expanded student placements, shift differential pay and retirement contributions.

The estimated annual net aggregate increase in gross Medicaid expenditures as a result of this proposed increase for Outpatient Mental Health Rehabilitative Services is \$12,200,000 in State Fiscal Year 2022 and \$36,500,000 in State Fiscal Year 2023.

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 institutional services. The following changes are proposed:

Institutional Services

Effective on or after February 1, 2022, Residential Treatment Facilities (RTF) rates may be adjusted to consist of a percentage increase on the clinical/direct care (C/DC) rate component to include additional

funds appropriate to maintain the required level of care that are not reflected in the base year.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2022/2023 is \$6,000,000.

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 State

F-2021-0962

Date of Issuance – January 26, 2022

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 (CZMA) of 1972, as amended.

The applicant has certified that the proposed activities comply with and will be conducted in a manner consistent with the federally approved New York State Coastal Management Program (NYSCMP). The applicant's consistency certification and accompanying public information and data 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.

In F-2021-0962, Niagara Mohawk Power Corporation is proposing the installation of a submarine cable (1.5") (7.6kV) to extend from the shore of Welcome Island to Knobby Island. Cable to extend from property owned by Peter R Lembo and Jodette Magari-Lembo, along the natural bottom of the St. Lawrence River, to the point of land on Knobby Island, owned by A. John and Beverly Merola, Alexandria Bay, NY 13607 for approximately 550' in length.

The applicant's consistency certification and supporting information are available for review at: <https://dos.ny.gov/system/files/documents/2022/01/f-2021-0962knobbyisland.pdf> or at <https://dos.ny.gov/public-notices>

Any interested parties and/or agencies desiring to express their views concerning any of the above proposed activities may do so by

SUMMARY
SPA #22-0015

This State Plan Amendment proposes a continuation of minimum wage adjustments through current Medicaid reimbursement methodologies until all regions have reached an hourly wage of \$15.00 per hour consistent with enacted legislation.

DRAFT

**New York
105(b)**

1905(a)(1) Inpatient Hospital Services

24. *Minimum wage costs* will mean the additional costs incurred by a hospital beginning January 1, 2017, and thereafter, as a result of New York state statutory increases to minimum wage. The following regions' minimum wage will be increased on and after the stated periods as follows:

	December 31, 2016	December 31, 2017	December 31, 2018	December 31, 2019	December 31, 2020	December 31, 2021
New York City	\$11.00	\$13.00	\$15.00	\$15.00	\$15.00	\$15.00
Nassau, Suffolk, & Westchester counties	\$10.00	\$11.00	\$12.00	\$13.00	\$14.00	\$15.00
Remainder of the State	\$9.70	\$10.40	\$11.10	\$11.80	\$12.50	[\$12.50] <u>\$13.20</u>

- a. For purposes of reimbursement the minimum wage in effect on January 1, 2017 and January 1st of each year thereafter, will be utilized in the calculation of the additional costs due to minimum wage increases until all regions of the State reach \$15.00 per hour.
- b. Minimum wage costs will be developed using collected survey data submitted and attested to by the hospital. If a hospital fails to submit a survey, the hospital's minimum wage costs will default to an average wage calculation based on the latest available institutional cost report (ICR) data.
 - i. Minimum wage cost development based on survey data collected.
 1. Survey data will be collected for hospital specific wage data.
 2. Hospitals will report by specified wage bands, the total count of FTEs and total hours paid of employees earning less than the statutory minimum wage applicable for the region.
 3. Hospitals will report an average fringe benefit percentage of the reported employees.
4. The minimum wage costs are calculated by multiplying the total hours paid by the difference between the statutory minimum wage and the midpoint of each wage band where the hospital has reported total hours paid. To this result, the hospital's average fringe benefit percentage is applied and added to the costs resulting in total minimum wage costs.

TN #22-0015 _____

Approval Date _____

Supersedes TN #17-0011 _____

Effective Date January 1, 2022

Public Notice **NYS 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 all services to comply with enacted statutory provisions. The following changes are proposed:

Institutional Services

The following is a clarification to the December 29th, 2021 noticed proposal to adjust Residential Treatment Facility (RTF) rates for providers to consider increased labor costs resulting from increases in the New York State minimum wage in the Remainder of State region. With clarification below, ***this increase includes rates for providers of all services.***

All Services

The Department of Health will adjust rates to take into account increased labor costs resulting from statutorily required increases in the New York State minimum wage. Under the statute, increases in the minimum wage will be phased in over a number of years until the minimum wage is \$15 per hour in the Remainder of State region, and Medicaid rates will be adjusted in those years to account for such increases.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal years 2021/2022 and 2022/2023 is \$3,078,116 and \$12,312,459, respectively.

Providers:	SFY 2021-2022 (1/1/2022 - 3/31/2022)	SFY 2022-2023 (4/1/2022 - 3/31/2023)
Article 16 Freestanding Clinics	\$8,267	\$33,069
Article 28 Freestanding Clinics & Ambulatory Surgery Centers	\$3,475	\$13,900
Assisted Living Programs	\$150,000	\$600,000
Certified Home Health Agencies	\$927	\$3,706
Article 28 Federally Qualified Health Centers (Freestanding Clinics)	\$437	\$1,748
Hospice	\$37,500	\$150,000
Hospital Inpatient	\$10,700	\$42,800
Intermediate Care Facilities	\$626,697	\$2,506,788
Nursing Homes	\$367,516	\$1,470,062
Personal Care	\$1,868,497	\$7,473,986
Residential Treatment Facilities	\$4,100	\$16,400
Totals:	\$3,078,116	\$12,312,459

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:

New York State Department of Health
Division of Finance and Rate Setting
99 Washington Ave – One Commerce Plaza
Suite 1432
Albany, New York 12210
spa_inquiries@health.ny.gov

DRAFT

The Department of Health proposes to amend the Title XIX (Medicaid) State Plan for non-institutional services to comply with enacted statutory provisions. The following changes are proposed:

Non-Institutional Services

Effective on or after January 1, 2022, the Department of Health will adjust the reimbursement rate for Ambulatory Services in Facilities Certified Under Article 16 of the Mental Health Law Clinic Day Treatment program to remove the providers that no longer offer the service and update the reimbursements for the remaining providers based on more current cost data.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2022 is \$300,000.

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 long term care services to comply with sections 2803, 2895-b, and 2828 of the Public Health Law. The following changes are proposed:

Long Term Care Services

Effective on or after January 1, 2022, the Department of Health will adjust rates for residential health care facilities meeting the requirements set forth in section 2828 of the Public Health Law and implementing regulations. This rate adjustment will support increases in resident-facing staffing services provided by registered nurses, licensed practical nurses, certified nurse aides, and nurse aides in accordance with standards set forth in section 2895-b of the Public Health Law and implementing regulations, which shall be sufficient to attain the highest practicable physical, mental, and psychological well-being of the residents of such residential health care facilities.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to the residential health care facility rate

adjustment is \$128 million as appropriated in the budget for state fiscal year 2021/2022.

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 institutional services to comply with enacted statutory provisions. The following changes are proposed:

Institutional Services

Effective on or after December 31, 2021, the Department of Health will adjust Residential Treatment Facility (RTF) rates for providers to consider increased labor costs resulting from increases in the New York State minimum wage in the Remainder of State region.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2021/2022 is \$16,000.

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

The Department of Health proposes to amend the Traumatic Brain Injury (TBI) (waiver number NY.0269.R04.04) and Nursing Home Transition and Diversion (NHTD) (waiver number NY.0444.R02.01) 1915c Waiver Programs in order to implement planned minimum wage-related rate increases pursuant to New York State Minimum Wage regulations effective January 1, 2017. This minimum wage bill stipulates that wages will be increased gradually through 2021. This increase specifically impacts all counties except for all New York City boroughs, Nassau, Suffolk, and Westchester.

Drafts of the proposed amendments to the TBI and NHTD waivers are available for review at: https://health.ny.gov/health_care/medicaid/redesign/mrt90/policy_docs.htm

As of December 31, 2016, the first in a series of wage increases went into effect in New York State. Rates differ based on region and industry to allow for a phase-in of new salaries. Changes take effect on the last day of the year. Annual increases for Upstate New York will continue until the rate reaches a \$15 minimum wage. The annual increases are published by the Commissioner of Labor by October 1. They are based on percentage increases determined by the Director of the Division of Budget, based on economic indices, including the Consumer Price Index. The rate for the “remainder of state” will be \$13.20 per hour effective December 31, 2021. This wage adjustment will require a rate increase of \$.90 per hour for waiver service: Home and Community Support Services (HCSS) for both the Nursing Home Transition and Diversion (NHTD) and Traumatic Brain Injury (TBI) 1915 (c) Medicaid Waivers. The anticipated change to projected gross Medicaid expenditures as a result of this proposed amendment is an increase of \$11.8 million for the remainder of the 5 year waiver cycles.

The public is invited to review and comment on this initiative. Comments may be filed electronically at: waivertransition@health.ny.gov, or mailed to: Department of Health, Office of Health Insurance Programs, Division of Long Term Care, Bureau of Community Integration and Alzheimer’s Disease, One Commerce Plaza, Suite 1605, Albany, NY 12210. All comments must be postmarked or emailed by 30 days of the date of this notice. Include “TBI and NHTD Waiver Amendments” in the subject line and indicate your name and affiliation. Individuals without internet access may contact the Waiver Unit at: (518) 474-5271 to receive additional information.

PUBLIC NOTICE

Department of State

F-2021-0654

Date of Issuance – December 29, 2021

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 (CZMA) of 1972, as amended.

The applicant has certified that the proposed activities comply with and will be conducted in a manner consistent with the federally approved New York State Coastal Management Program (NYSCMP). The applicant’s consistency certification and accompanying public in-

formation and data 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.

In F-2021-0654 the applicant, Village Marine of Westhampton LTD, is proposing to install 552 linear feet of new low sill bulkhead; replace existing 4 feet wide x 464 linear feet fixed docks with floating docks; and dredge 949 cubic yards of sediment to -4’ MLW within existing West and East boat basins. This project is located at 33 Library Avenue, Village of Southampton, Suffolk County, Moneybogue Bay.

The applicant’s consistency certification and supporting information are available for review at: <https://dos.ny.gov/system/files/documents/2021/12/f-2021-0654app.pdf> or at <https://dos.ny.gov/public-notices>

The proposed activity would be located within or has the potential to affect the following Special Management or Regulated Area(s):

- Moriches Bay Significant Coastal Fish and Wildlife Habitats:

https://dos.ny.gov/system/files/documents/2020/03/moriches_bay.pdf

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., 15 days from the date of publication of this notice or January 13, 2022.

Comments should be addressed to: Department of State, Office of Planning and Development and Community Infrastructure, Consistency Review Unit, One Commerce Plaza, Suite 1010, 99 Washington Ave., Albany, NY 12231, (518) 474-6000. 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-2021-0695

Date of Issuance – December 29, 2021

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-2021-0695, Vincent Rovitelli, is proposing to excavate/remove two land peninsulas from an existing marina basin. The peninsula measures 17’-4” wide by 185’-2” long and 10’-1” long by 214’-5” long. The peninsulas would be excavated down to an elevation of 243.5’ IGLD. The project would result in the excavation of up to 1,207 cubic yards of materials (765 from below the plane of Ordinary High Water). A boulder located within the marina basin would also be removed. Dewatering of material would be completed at an upland on-site location with off-site disposal at an approved upland location. Sheet pile would be placed at the landward extent of the each of the excavated peninsulas. In addition, 65 linear feet of sheet pile where the seawall is missing A turbidity curtain would be paced within the channel that separates the marina from Sandy Creek during excavation. The applicant was previously approved to replace existing fixed docks with floating docks throughout the marina basin. Various upland improvements to the site are also proposed.

The proposal is for the Sandy Creek Marina located off of Sandy Creek at Eight Lake Road East Fork in the Town of Hamlin, Monroe County.

The stated purpose of the proposed action is to “Improve the usage and safety of our existing marina.”

The applicant’s consistency certification and supporting information are available for review at: <https://dos.ny.gov/system/files/documents/2021/12/f-2021-0695publicnotice.pdf> or at <https://dos.ny.gov/public-notices>

Original copies of public information and data submitted by the ap-

SUMMARY
SPA #22-0016

This State Plan Amendment proposes to revise the Medically Needy income levels, effective January 1, 2022. For Medically Needy households of 1 and 2, levels are calculated using the SSI standards. To arrive at uniform levels for households of 3 and higher, 15% per additional household member is added to the standard for a household of 2. Thus, the standard for a household of 3 would be 115% of the standard for a household of 2; the standard for a household of 4 would be 130% of the standard for a household of 2, etc.

DRAFT

NY - Submission Package - NY2022MS0001D - Eligibility

[Summary](#) [Reviewable Units](#) [News](#) [Related Actions](#)

CMS-10434 OMB 0938-1188

Package Information

Package ID	NY2022MS0001D	Submission Type	Draft
Program Name	N/A	State	NY
Version Number	1	Region	New York, NY
		Package Status	Pending

DRAFT

Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | NY2022MS0001D

Package Header

Package ID	NY2022MS0001D	SPA ID	N/A
Submission Type	Draft	Initial Submission Date	N/A
Approval Date	N/A	Effective Date	N/A
Superseded SPA ID	N/A		

State Information

State/Territory Name: New York

Medicaid Agency Name: Department of Health

Submission Component

- State Plan Amendment
- Medicaid
- CHIP

DRAFT

Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | NY2022MS0001D

Package Header

Package ID	NY2022MS0001D	SPA ID	N/A
Submission Type	Draft	Initial Submission Date	N/A
Approval Date	N/A	Effective Date	N/A
Superseded SPA ID	N/A		

Executive Summary

Summary Description Including Goals and Objectives This State Plan Amendment revises the Medically Needy Income Levels, effective January 1, 2022. For Medically Needy households of 1 and 2, levels are calculated using the SSI standards. To arrive at uniform levels for households of 3 and higher, 15% per additional household member is added to the standard for a household of 2. Thus, the standard for a household of 3 would be 115% of the standard for a household of 2; the standard for a household of 4 would be 130% of the standard of for a household of 2, etc.

Federal Budget Impact and Statute/Regulation Citation




Federal Budget Impact

	Federal Fiscal Year	Amount
First	2022	\$8790337
Second	2023	\$27543056

Federal Statute / Regulation Citation

1902(a)(10)(C)(ii)
1902(r)(2)
1905(w)

Supporting documentation of budget impact is uploaded (optional).

Name	Date Created	
Authorizing Provisions (22-0016) (1-3-22)	2/11/2022 9:56 AM EST	
Fiscal Calculations (22-0016) (2-11-22)	2/11/2022 10:03 AM EST	
Fiscal Calculation Backup (22-016) (2-11-22)	2/11/2022 10:29 AM EST	

Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | NY2022MS0001D

Package Header

Package ID	NY2022MS0001D	SPA ID	N/A
Submission Type	Draft	Initial Submission Date	N/A
Approval Date	N/A	Effective Date	N/A
Superseded SPA ID	N/A		

Governor's Office Review

- No comment
- Comments received
- No response within 45 days
- Other

DRAFT

Submission - Medicaid State Plan

MEDICAID | Medicaid State Plan | Eligibility | NY2022MS0001D

CMS-10434 OMB 0938-1188

The submission includes the following:

Administration

Eligibility

Income/Resource Methodologies

Income/Resource Standards

AFDC Income Standards

Medically Needy Income Level

Reviewable Unit Name	Included in Another Source Type Submission Package
Medically Needy Income Level	APPROVED

Handling of Excess Income (Spenddown)

Medically Needy Resource Level

Reviewable Unit Name	Included in Another Source Type Submission Package
Medically Needy Resource Level	APPROVED

Mandatory Eligibility Groups

Optional Eligibility Groups

Non-Financial Eligibility

Eligibility and Enrollment Processes

Benefits and Payments

Submission - Public Comment

MEDICAID | Medicaid State Plan | Eligibility | NY2022MS0001D

Package Header

Package ID	NY2022MS0001D	SPA ID	N/A
Submission Type	Draft	Initial Submission Date	N/A
Approval Date	N/A	Effective Date	N/A
Superseded SPA ID	N/A		

Indicate whether public comment was solicited with respect to this submission.

- Public notice was not federally required and comment was not solicited
- Public notice was not federally required, but comment was solicited
- Public notice was federally required and comment was solicited

DRAFT

Submission - Tribal Input

MEDICAID | Medicaid State Plan | Eligibility | NY2022MS0001D

Package Header

Package ID	NY2022MS0001D	SPA ID	N/A
Submission Type	Draft	Initial Submission Date	N/A
Approval Date	N/A	Effective Date	N/A
Superseded SPA ID	N/A		

One or more Indian Health Programs or Urban Indian Organizations furnish health care services in this state

- Yes
 No

This state plan amendment is likely to have a direct effect on Indians, Indian Health Programs or Urban Indian Organizations, as described in the state consultation plan.

- Yes
 No

The state has solicited advice from Indian Health Programs and/or Urban Indian Organizations, as required by section 1902(a)(73) of the Social Security Act, and in accordance with the state consultation plan, prior to submission of this SPA.

Complete the following information regarding any solicitation of advice and/or tribal consultation conducted with respect to this submission:

Solicitation of advice and/or Tribal consultation was conducted in the following manner:

All Indian Health Programs

Date of solicitation/consultation:	Method of solicitation/consultation:

All Urban Indian Organizations

Date of solicitation/consultation:	Method of solicitation/consultation:

States are not required to consult with Indian tribal governments, but if such consultation was conducted voluntarily, provide information about such consultation below:

All Indian Tribes

Date of consultation:	Method of consultation:

The state must upload copies of documents that support the solicitation of advice in accordance with statutory requirements, including any notices sent to Indian Health Programs and/or Urban Indian Organizations, as well as attendee lists if face-to-face meetings were held. Also upload documents with comments received from Indian Health Programs or Urban Indian Organizations and the state's responses to any issues raised. Alternatively indicate the key issues and summarize any comments received below and describe how the state incorporated them into the design of its program.

Name	Date Created
No items available	

Indicate the key issues raised (optional)

- Access
 Quality

- Cost
- Payment methodology
- Eligibility
- Benefits
- Service delivery
- Other issue

DRAFT

Medicaid State Plan Eligibility

Income/Resource Standards

Medically Needy Income Level

MEDICAID | Medicaid State Plan | Eligibility | NY2022MS0001D

Package Header

Package ID	NY2022MS0001D	SPA ID	N/A
Submission Type	Draft	Initial Submission Date	N/A
Approval Date	N/A	Effective Date	N/A
Superseded SPA ID	NY-21-0016		
	System-Derived		

A. Income Level Used

1. The state employs a single income level for the medically needy.
2. The income level varies based on differences between shelter costs in urban and rural areas.

- Yes
 No

3. The level used is:

Household size	Standard
1	\$11200.00
2	\$16400.00
3	\$18860.00
4	\$21320.00
5	\$23780.00
6	\$26240.00
7	\$28700.00
8	\$31160.00
9	\$33620.00
10	\$36080.00

The state uses an additional incremental amount for larger household sizes.

- Yes
 No

Incremental Amount:
\$2460.00

The dollar amounts increase automatically each year

- Yes
 No

Medically Needy Income Level

MEDICAID | Medicaid State Plan | Eligibility | NY2022MS0001D

Package Header

Package ID	NY2022MS0001D	SPA ID	N/A
Submission Type	Draft	Initial Submission Date	N/A
Approval Date	N/A	Effective Date	N/A
Superseded SPA ID	NY-21-0016		
	System-Derived		

B. Basis for Income Level

1. Minimum Income Level

The minimum income level for this eligibility group is the lower of the state's July 1996 AFDC payment standard or the state's income standard for the Parents and Other Caretaker Relatives eligibility group.

2. Maximum Income Level

The maximum income level for this eligibility group is 133 1/3 percent of the higher of the state's 1996 AFDC payment standard or the state's income standard for the Parents and Other Caretaker Relatives eligibility group.

DRAFT

Medically Needy Income Level

MEDICAID | Medicaid State Plan | Eligibility | NY2022MS0001D

Package Header

Package ID	NY2022MS0001D	SPA ID	N/A
Submission Type	Draft	Initial Submission Date	N/A
Approval Date	N/A	Effective Date	N/A
Superseded SPA ID	NY-21-0016		
	System-Derived		

C. Additional Information (optional)

The income levels used by the State and listed in this State Plan Reviewable Unit are annual income amount.

DRAFT

Medicaid State Plan Eligibility

Income/Resource Standards

Medically Needy Resource Level

MEDICAID | Medicaid State Plan | Eligibility | NY2022MS0001D

Package Header

Package ID	NY2022MS0001D	SPA ID	N/A
Submission Type	Draft	Initial Submission Date	N/A
Approval Date	N/A	Effective Date	N/A
Superseded SPA ID	NY-21-0016		
	System-Derived		

A. Medically Needy Resource Level Structure

1. The state employs a single resource level for the medically needy.
2. The resource level is equal to or higher than the lowest resource standard used under the most closely related cash assistance program.

DRAFT

Medically Needy Resource Level

MEDICAID | Medicaid State Plan | Eligibility | NY2022MS0001D

Package Header

Package ID	NY2022MS0001D	SPA ID	N/A
Submission Type	Draft	Initial Submission Date	N/A
Approval Date	N/A	Effective Date	N/A
Superseded SPA ID	NY-21-0016		
	System-Derived		

B. Resource Level Used

The level used is:

Household size	Standard
2	\$24600.00
1	\$16800.00

The state uses an additional incremental amount for larger household sizes.

- Yes
- No

DRAFT

Medically Needy Resource Level

MEDICAID | Medicaid State Plan | Eligibility | NY2022MS0001D

Package Header

Package ID	NY2022MS0001D	SPA ID	N/A
Submission Type	Draft	Initial Submission Date	N/A
Approval Date	N/A	Effective Date	N/A
Superseded SPA ID	NY-21-0016 System-Derived		

C. Additional Information (optional)

DRAFT

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

This view was generated on 3/8/2022 1:02 PM EST

DRAFT

SUMMARY
SPA #22-0017

This State Plan Amendment proposes a continuation of minimum wage adjustments through current Medicaid reimbursement methodologies until all regions have reached an hourly wage of \$15.00 per hour consistent with enacted legislation.

DRAFT

**New York
22(c)**

1905(a)(15) ICF/IID

- c. Minimum Wage Adjustment - Effective January 1, 2017, and every January 1 thereafter until the minimum wage reaches the state statutorily described per hour wage as shown below, a minimum wage add-on will be developed and applied to all ICF/IID rates.

Minimum Wage Region	31-Dec-16	31-Dec-17	31-Dec-18	31-Dec-19	31-Dec-20	31-Dec-21
New York City	\$11.00	\$13.00	\$15.00	\$15.00	\$15.00	\$15.00
Nassau, Suffolk & Westchester	\$10.00	\$11.00	\$12.00	\$13.00	\$14.00	\$15.00
Remainder of State	\$9.70	\$10.40	\$11.10	\$11.80	\$12.50	\$13.20

The minimum wage adjustment will be developed and implemented as follows:

1. Minimum wage costs will mean the additional costs incurred beginning January 1, 2017 and thereafter, as a result of New York State statutory increases to minimum wages until all regions of the State reach \$15.00 per hour.
2. The 2017 facility specific minimum wage add-on will be developed based on collected survey data received and attested to by ICF/IID providers. If a facility does not submit a survey, the minimum wage add-on will be calculated based on the facility's Consolidated Fiscal Report wage data from the 2014 ICF/IID cost report data. In the subsequent year, the Department will survey providers, utilizing the methodology employed in year one. Once the costs are included in a CFR utilized in a base year, such reimbursement will be excluded from the add-on. If a facility fails to submit both the attested survey and the CFR cost report, the facility's minimum wage add-on will not be calculated.
 - a. Minimum wage cost development based on survey data collected.
 - i. Survey data will be collected for facility specific wage data.
 - ii. Facilities will report by wage bands, the total count of FTEs and total hours paid to all employees (contracted and non-contracted staff) earning less than the statutory minimum wage applicable for each region.
 - iii. Facilities will report an average fringe benefit percentage for the employees directly affected by the minimum wage increase.
 - iv. The minimum wage costs are calculated by multiplying the total hours paid by the difference between the statutory minimum wage and the midpoint of each wage band where the facility has reported total hours paid. To this result, the facility's average fringe benefit percentage is applied and added to the costs.
 - b. Minimum wage cost development based on the CFR cost report data.
 - i. The average hourly wages of employees where the reported average hourly wage is below the regional statutory minimum wage are identified.
 - ii. The total payroll hours of the employees identified are then multiplied by the regional statutory minimum wage resulting in a projected payroll. The actual payroll as reported in the cost report is then subtracted from the projected payroll resulting in the expected wage costs increase.
 - iii. The facility's fringe benefit costs directly affected by the wage increase are identified, and the average fringe benefit percentage is calculated.
 - iv. The fringe benefit percentage is applied to the increased wage costs and added resulting in the minimum wage costs.

TN #22-0017 **Approval Date** _____

Supersedes TN #17-0015 **Effective Date** January 1, 2022

Public Notice **NYS 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 all services to comply with enacted statutory provisions. The following changes are proposed:

Institutional Services

The following is a clarification to the December 29th, 2021 noticed proposal to adjust Residential Treatment Facility (RTF) rates for providers to consider increased labor costs resulting from increases in the New York State minimum wage in the Remainder of State region. With clarification below, ***this increase includes rates for providers of all services.***

All Services

The Department of Health will adjust rates to take into account increased labor costs resulting from statutorily required increases in the New York State minimum wage. Under the statute, increases in the minimum wage will be phased in over a number of years until the minimum wage is \$15 per hour in the Remainder of State region, and Medicaid rates will be adjusted in those years to account for such increases.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal years 2021/2022 and 2022/2023 is \$3,078,116 and \$12,312,459, respectively.

Providers:	SFY 2021-2022 (1/1/2022 - 3/31/2022)	SFY 2022-2023 (4/1/2022 - 3/31/2023)
Article 16 Freestanding Clinics	\$8,267	\$33,069
Article 28 Freestanding Clinics & Ambulatory Surgery Centers	\$3,475	\$13,900
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Hospice	\$37,500	\$150,000
Hospital Inpatient	\$10,700	\$42,800
Intermediate Care Facilities	\$626,697	\$2,506,788
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Personal Care	\$1,868,497	\$7,473,986
Residential Treatment Facilities	\$4,100	\$16,400
Totals:	\$3,078,116	\$12,312,459

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:

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For further information and to review and comment, please contact:

New York State Department of Health
Division of Finance and Rate Setting
99 Washington Ave – One Commerce Plaza
Suite 1432
Albany, New York 12210
spa_inquiries@health.ny.gov

DRAFT

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Non-Institutional Services

Effective on or after January 1, 2022, the Department of Health will adjust the reimbursement rate for Ambulatory Services in Facilities Certified Under Article 16 of the Mental Health Law Clinic Day Treatment program to remove the providers that no longer offer the service and update the reimbursements for the remaining providers based on more current cost data.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2022 is \$300,000.

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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 long term care services to comply with sections 2803, 2895-b, and 2828 of the Public Health Law. The following changes are proposed:

Long Term Care Services

Effective on or after January 1, 2022, the Department of Health will adjust rates for residential health care facilities meeting the requirements set forth in section 2828 of the Public Health Law and implementing regulations. This rate adjustment will support increases in resident-facing staffing services provided by registered nurses, licensed practical nurses, certified nurse aides, and nurse aides in accordance with standards set forth in section 2895-b of the Public Health Law and implementing regulations, which shall be sufficient to attain the highest practicable physical, mental, and psychological well-being of the residents of such residential health care facilities.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to the residential health care facility rate

adjustment is \$128 million as appropriated in the budget for state fiscal year 2021/2022.

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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 institutional services to comply with enacted statutory provisions. The following changes are proposed:

Institutional Services

Effective on or after December 31, 2021, the Department of Health will adjust Residential Treatment Facility (RTF) rates for providers to consider increased labor costs resulting from increases in the New York State minimum wage in the Remainder of State region.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2021/2022 is \$16,000.

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.

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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

The Department of Health proposes to amend the Traumatic Brain Injury (TBI) (waiver number NY.0269.R04.04) and Nursing Home Transition and Diversion (NHTD) (waiver number NY.0444.R02.01) 1915c Waiver Programs in order to implement planned minimum wage-related rate increases pursuant to New York State Minimum Wage regulations effective January 1, 2017. This minimum wage bill stipulates that wages will be increased gradually through 2021. This increase specifically impacts all counties except for all New York City boroughs, Nassau, Suffolk, and Westchester.

Drafts of the proposed amendments to the TBI and NHTD waivers are available for review at: https://health.ny.gov/health_care/medicaid/redesign/mrt90/policy_docs.htm

As of December 31, 2016, the first in a series of wage increases went into effect in New York State. Rates differ based on region and industry to allow for a phase-in of new salaries. Changes take effect on the last day of the year. Annual increases for Upstate New York will continue until the rate reaches a \$15 minimum wage. The annual increases are published by the Commissioner of Labor by October 1. They are based on percentage increases determined by the Director of the Division of Budget, based on economic indices, including the Consumer Price Index. The rate for the “remainder of state” will be \$13.20 per hour effective December 31, 2021. This wage adjustment will require a rate increase of \$.90 per hour for waiver service: Home and Community Support Services (HCSS) for both the Nursing Home Transition and Diversion (NHTD) and Traumatic Brain Injury (TBI) 1915 (c) Medicaid Waivers. The anticipated change to projected gross Medicaid expenditures as a result of this proposed amendment is an increase of \$11.8 million for the remainder of the 5 year waiver cycles.

The public is invited to review and comment on this initiative. Comments may be filed electronically at: waivertransition@health.ny.gov, or mailed to: Department of Health, Office of Health Insurance Programs, Division of Long Term Care, Bureau of Community Integration and Alzheimer’s Disease, One Commerce Plaza, Suite 1605, Albany, NY 12210. All comments must be postmarked or emailed by 30 days of the date of this notice. Include “TBI and NHTD Waiver Amendments” in the subject line and indicate your name and affiliation. Individuals without internet access may contact the Waiver Unit at: (518) 474-5271 to receive additional information.

PUBLIC NOTICE

Department of State

F-2021-0654

Date of Issuance – December 29, 2021

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 (CZMA) of 1972, as amended.

The applicant has certified that the proposed activities comply with and will be conducted in a manner consistent with the federally approved New York State Coastal Management Program (NYSCMP). The applicant’s consistency certification and accompanying public in-

formation and data 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.

In F-2021-0654 the applicant, Village Marine of Westhampton LTD, is proposing to install 552 linear feet of new low sill bulkhead; replace existing 4 feet wide x 464 linear feet fixed docks with floating docks; and dredge 949 cubic yards of sediment to -4’ MLW within existing West and East boat basins. This project is located at 33 Library Avenue, Village of Southampton, Suffolk County, Moneybogue Bay.

The applicant’s consistency certification and supporting information are available for review at: <https://dos.ny.gov/system/files/documents/2021/12/f-2021-0654app.pdf> or at <https://dos.ny.gov/public-notices>

The proposed activity would be located within or has the potential to affect the following Special Management or Regulated Area(s):

- Moriches Bay Significant Coastal Fish and Wildlife Habitats:

https://dos.ny.gov/system/files/documents/2020/03/moriches_bay.pdf

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., 15 days from the date of publication of this notice or January 13, 2022.

Comments should be addressed to: Department of State, Office of Planning and Development and Community Infrastructure, Consistency Review Unit, One Commerce Plaza, Suite 1010, 99 Washington Ave., Albany, NY 12231, (518) 474-6000. 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-2021-0695

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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-2021-0695, Vincent Rovitelli, is proposing to excavate/remove two land peninsulas from an existing marina basin. The peninsula measures 17’-4” wide by 185’-2” long and 10’-1” long by 214’-5” long. The peninsulas would be excavated down to an elevation of 243.5’ IGLD. The project would result in the excavation of up to 1,207 cubic yards of materials (765 from below the plane of Ordinary High Water). A boulder located within the marina basin would also be removed. Dewatering of material would be completed at an upland on-site location with off-site disposal at an approved upland location. Sheet pile would be placed at the landward extent of the each of the excavated peninsulas. In addition, 65 linear feet of sheet pile where the seawall is missing A turbidity curtain would be paced within the channel that separates the marina from Sandy Creek during excavation. The applicant was previously approved to replace existing fixed docks with floating docks throughout the marina basin. Various upland improvements to the site are also proposed.

The proposal is for the Sandy Creek Marina located off of Sandy Creek at Eight Lake Road East Fork in the Town of Hamlin, Monroe County.

The stated purpose of the proposed action is to “Improve the usage and safety of our existing marina.”

The applicant’s consistency certification and supporting information are available for review at: <https://dos.ny.gov/system/files/documents/2021/12/f-2021-0695publicnotice.pdf> or at <https://dos.ny.gov/public-notices>

Original copies of public information and data submitted by the ap-

SUMMARY
SPA #22-0018

This amendment proposes a continuation of minimum wage adjustments through current Medicaid reimbursement methodologies until all regions have reached an hourly wage of \$15.00 per hour consistent with enacted legislation.

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1905(a)(9)Clinic Services
Minimum Wage – OPWDD-licensed Article 16 Clinics

Effective January 1, 2018, and every January 1 thereafter until the minimum wage reaches the state statutorily described per hour wage as shown below, a minimum wage add-on will be developed and applied to the Ambulatory Patient Group (APG) rate for OPWDD licensed Article 16 clinics.

Minimum Wage (MW) Region	12/31/2017	12/31/2018	12/31/2019	12/31/2020	12/31/2021
New York City (Large employers)	\$13.00	\$15.00	\$15.00	\$15.00	\$15.00
New York City (Small employers)	\$12.00	\$13.50	\$15.00	\$15.00	\$15.00
Nassau, Suffolk, & Westchester counties	\$11.00	\$12.00	\$13.00	\$14.00	\$15.00
Remainder of the State	\$10.40	\$11.10	\$11.80	\$12.50	[\$12.50]13.20

The APG capital rate that is adjusted for the minimum wage add-on will be posted to the Mental Hygiene Services Rates webpage.

https://www.health.ny.gov/health_care/medicaid/rates/mental_hygiene/apg/capital_add_on.htm

The minimum wage add-on will be developed and implemented as follows:

- a. Minimum wage costs will mean the additional costs incurred beginning January 1, 2018, and thereafter, as a result of New York state statutory increases to minimum wage until all regions of the State reach \$15.00 per hour.
 - i. Minimum wage cost development based on survey data collected.
 - 1. Survey data will be collected for facility specific wage data.
 - 2. Facilities will report, by specified wage bands, the total count of FTEs and total hours paid to employees earning less than the statutory minimum wage applicable for each MW Region.
 - 3. Facilities will report an average fringe benefit percentage for the employees directly affected by the minimum wage increase.
 - 4. The minimum wage costs are calculated by multiplying the total hours paid by the difference between the statutory minimum wage and the midpoint of each wage band where the facility has reported total hours paid. To this result, the facility's average fringe benefit percentage is applied and added to the costs.
 - ii. Minimum wage cost development based on the 2016 Consolidated Fiscal Report (CFR) cost report data.
 - 1. The average hourly wages of employees in occupational titles where the reported average hourly wage is below the regional statutory minimum wage are identified.
 - 2. The total payroll hours of the titles identified are then multiplied by the regional statutory minimum wage resulting in a projected payroll. The actual payroll as reported in the CFR cost report is then subtracted from the projected payroll resulting in the expected wage costs increase.

TN #22-0018

Approval Date _____

Supersedes TN #18-0007

Effective Date January 1, 2022

Public Notice **NYS 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 all services to comply with enacted statutory provisions. The following changes are proposed:

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PUBLIC NOTICE

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Long Term Care Services

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PUBLIC NOTICE

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The Department of Health proposes to amend the Traumatic Brain Injury (TBI) (waiver number NY.0269.R04.04) and Nursing Home Transition and Diversion (NHTD) (waiver number NY.0444.R02.01) 1915c Waiver Programs in order to implement planned minimum wage-related rate increases pursuant to New York State Minimum Wage regulations effective January 1, 2017. This minimum wage bill stipulates that wages will be increased gradually through 2021. This increase specifically impacts all counties except for all New York City boroughs, Nassau, Suffolk, and Westchester.

Drafts of the proposed amendments to the TBI and NHTD waivers are available for review at: https://health.ny.gov/health_care/medicaid/redesign/mrt90/policy_docs.htm

As of December 31, 2016, the first in a series of wage increases went into effect in New York State. Rates differ based on region and industry to allow for a phase-in of new salaries. Changes take effect on the last day of the year. Annual increases for Upstate New York will continue until the rate reaches a \$15 minimum wage. The annual increases are published by the Commissioner of Labor by October 1. They are based on percentage increases determined by the Director of the Division of Budget, based on economic indices, including the Consumer Price Index. The rate for the “remainder of state” will be \$13.20 per hour effective December 31, 2021. This wage adjustment will require a rate increase of \$.90 per hour for waiver service: Home and Community Support Services (HCSS) for both the Nursing Home Transition and Diversion (NHTD) and Traumatic Brain Injury (TBI) 1915 (c) Medicaid Waivers. The anticipated change to projected gross Medicaid expenditures as a result of this proposed amendment is an increase of \$11.8 million for the remainder of the 5 year waiver cycles.

The public is invited to review and comment on this initiative. Comments may be filed electronically at: waivertransition@health.ny.gov, or mailed to: Department of Health, Office of Health Insurance Programs, Division of Long Term Care, Bureau of Community Integration and Alzheimer’s Disease, One Commerce Plaza, Suite 1605, Albany, NY 12210. All comments must be postmarked or emailed by 30 days of the date of this notice. Include “TBI and NHTD Waiver Amendments” in the subject line and indicate your name and affiliation. Individuals without internet access may contact the Waiver Unit at: (518) 474-5271 to receive additional information.

PUBLIC NOTICE

Department of State

F-2021-0654

Date of Issuance – December 29, 2021

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 (CZMA) of 1972, as amended.

The applicant has certified that the proposed activities comply with and will be conducted in a manner consistent with the federally approved New York State Coastal Management Program (NYSCMP). The applicant’s consistency certification and accompanying public in-

formation and data 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.

In F-2021-0654 the applicant, Village Marine of Westhampton LTD, is proposing to install 552 linear feet of new low sill bulkhead; replace existing 4 feet wide x 464 linear feet fixed docks with floating docks; and dredge 949 cubic yards of sediment to -4’ MLW within existing West and East boat basins. This project is located at 33 Library Avenue, Village of Southampton, Suffolk County, Moneybogue Bay.

The applicant’s consistency certification and supporting information are available for review at: <https://dos.ny.gov/system/files/documents/2021/12/f-2021-0654app.pdf> or at <https://dos.ny.gov/public-notices>

The proposed activity would be located within or has the potential to affect the following Special Management or Regulated Area(s):

- Moriches Bay Significant Coastal Fish and Wildlife Habitats:

https://dos.ny.gov/system/files/documents/2020/03/moriches_bay.pdf

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., 15 days from the date of publication of this notice or January 13, 2022.

Comments should be addressed to: Department of State, Office of Planning and Development and Community Infrastructure, Consistency Review Unit, One Commerce Plaza, Suite 1010, 99 Washington Ave., Albany, NY 12231, (518) 474-6000. 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

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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-2021-0695, Vincent Rovitelli, is proposing to excavate/remove two land peninsulas from an existing marina basin. The peninsula measures 17’-4” wide by 185’-2” long and 10’-1” long by 214’-5” long. The peninsulas would be excavated down to an elevation of 243.5’ IGLD. The project would result in the excavation of up to 1,207 cubic yards of materials (765 from below the plane of Ordinary High Water). A boulder located within the marina basin would also be removed. Dewatering of material would be completed at an upland on-site location with off-site disposal at an approved upland location. Sheet pile would be placed at the landward extent of the each of the excavated peninsulas. In addition, 65 linear feet of sheet pile where the seawall is missing A turbidity curtain would be paced within the channel that separates the marina from Sandy Creek during excavation. The applicant was previously approved to replace existing fixed docks with floating docks throughout the marina basin. Various upland improvements to the site are also proposed.

The proposal is for the Sandy Creek Marina located off of Sandy Creek at Eight Lake Road East Fork in the Town of Hamlin, Monroe County.

The stated purpose of the proposed action is to “Improve the usage and safety of our existing marina.”

The applicant’s consistency certification and supporting information are available for review at: <https://dos.ny.gov/system/files/documents/2021/12/f-2021-0695publicnotice.pdf> or at <https://dos.ny.gov/public-notices>

Original copies of public information and data submitted by the ap-

SUMMARY
SPA #22-0019

This State Plan Amendment proposes a continuation of minimum wage adjustments through current Medicaid reimbursement methodologies until all regions have reached an hourly wage of \$15.00 per hour consistent with enacted legislation.

DRAFT

**New York
2(p)(ii)**

1905(a)(9) Clinic Services

Minimum Wage – Article 28 Freestanding Clinics

Effective January 1, 2017, and every January 1 thereafter until the minimum wage reaches [the state statutorily described per hour wage as shown below] \$15.00 per hour for all regions of the State, a minimum wage add-on will be developed and applied to the Ambulatory Patient Group (APG) rate for freestanding clinics and ambulatory surgery centers under Article 28.

Minimum Wage (MW) Region	12/31/2016	12/31/2017	12/31/2018	12/31/2019	12/31/2020	12/31/2021
New York City (Large employers)	\$11.00	\$13.00	\$15.00	\$15.00	\$15.00	\$15.00
New York City (Small employers)	\$10.50	\$12.00	\$13.50	\$15.00	\$15.00	\$15.00
Nassau, Suffolk, & Westchester counties	\$10.00	\$11.00	\$12.00	\$13.00	\$14.00	\$15.00
Remainder of the State	\$9.70	\$10.40	\$11.10	\$11.80	\$12.50	[\$12.50] \$13.20

The minimum wage add-on and the adjusted APG rate will be posted to Health Commerce System (HCS: https://commerce.health.state.ny.us/public/hcs_login.html). The minimum wage add-on will be developed and implemented as follows;

- a. Minimum wage costs will mean the additional costs incurred beginning January 1, 2017, and thereafter, as a result of New York state statutory increases to minimum wage.
 - i. Minimum wage cost development based on survey data collected.
 1. Survey data will be collected for facility specific wage data.
 2. Facilities will report by specified wage bands, the total count of FTEs and total hours paid to employees earning less than the statutory minimum wage applicable for each MW Region.
 3. Facilities will report an average fringe benefit percentage for the employees directly affected by the minimum wage increase.
 4. The minimum wage costs are calculated by multiplying the total hours paid by the difference between the statutory minimum wage and the midpoint of each wage band where the facility has reported total hours paid. To this result, the facility's average fringe benefit percentage is applied and added to the costs.
 - ii. Minimum wage cost development based on the AHCF cost report data.
 1. The average hourly wages of employees in occupational titles where the reported average hourly wage is below the regional statutory minimum wage are identified.
 2. The total payroll hours of the titles identified are then multiplied by the regional statutory minimum wage resulting in a projected payroll. The actual payroll as reported in the AHCF cost report is then subtracted from the projected payroll resulting in the expected wage costs increase.
 3. The facility's fringe benefit costs directly affected by the wage increase are identified, and the average fringe benefit percentage is calculated.
 4. The fringe benefit percentage is applied to the increased wage costs and added resulting in the minimum wage costs.

TN #22-0019

Approval Date _____

Supersedes TN #17-0012

Effective Date January 1, 2022

Public Notice **NYS 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 all services to comply with enacted statutory provisions. The following changes are proposed:

Institutional Services

The following is a clarification to the December 29th, 2021 noticed proposal to adjust Residential Treatment Facility (RTF) rates for providers to consider increased labor costs resulting from increases in the New York State minimum wage in the Remainder of State region. With clarification below, ***this increase includes rates for providers of all services.***

All Services

The Department of Health will adjust rates to take into account increased labor costs resulting from statutorily required increases in the New York State minimum wage. Under the statute, increases in the minimum wage will be phased in over a number of years until the minimum wage is \$15 per hour in the Remainder of State region, and Medicaid rates will be adjusted in those years to account for such increases.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal years 2021/2022 and 2022/2023 is \$3,078,116 and \$12,312,459, respectively.

Providers:	SFY 2021- 2022 (1/1/2022 - 3/31/2022)	SFY 2022- 2023 (4/1/2022 - 3/31/2023)
Article 16 Freestanding Clinics	\$8,267	\$33,069
Article 28 Freestanding Clinics & Ambulatory Surgery Centers	\$3,475	\$13,900
Assisted Living Programs	\$150,000	\$600,000
Certified Home Health Agencies	\$927	\$3,706
Article 28 Federally Qualified Health Centers (Freestanding Clinics)	\$437	\$1,748
Hospice	\$37,500	\$150,000
Hospital Inpatient	\$10,700	\$42,800
Intermediate Care Facilities	\$626,697	\$2,506,788
Nursing Homes	\$367,516	\$1,470,062
Personal Care	\$1,868,497	\$7,473,986
Residential Treatment Facilities	\$4,100	\$16,400
Totals:	\$3,078,116	\$12,312,459

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:

New York State Department of Health
Division of Finance and Rate Setting
99 Washington Ave – One Commerce Plaza
Suite 1432
Albany, New York 12210
spa_inquiries@health.ny.gov

DRAFT

The Department of Health proposes to amend the Title XIX (Medicaid) State Plan for non-institutional services to comply with enacted statutory provisions. The following changes are proposed:

Non-Institutional Services

Effective on or after January 1, 2022, the Department of Health will adjust the reimbursement rate for Ambulatory Services in Facilities Certified Under Article 16 of the Mental Health Law Clinic Day Treatment program to remove the providers that no longer offer the service and update the reimbursements for the remaining providers based on more current cost data.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2022 is \$300,000.

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.

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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 long term care services to comply with sections 2803, 2895-b, and 2828 of the Public Health Law. The following changes are proposed:

Long Term Care Services

Effective on or after January 1, 2022, the Department of Health will adjust rates for residential health care facilities meeting the requirements set forth in section 2828 of the Public Health Law and implementing regulations. This rate adjustment will support increases in resident-facing staffing services provided by registered nurses, licensed practical nurses, certified nurse aides, and nurse aides in accordance with standards set forth in section 2895-b of the Public Health Law and implementing regulations, which shall be sufficient to attain the highest practicable physical, mental, and psychological well-being of the residents of such residential health care facilities.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to the residential health care facility rate

adjustment is \$128 million as appropriated in the budget for state fiscal year 2021/2022.

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.

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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 institutional services to comply with enacted statutory provisions. The following changes are proposed:

Institutional Services

Effective on or after December 31, 2021, the Department of Health will adjust Residential Treatment Facility (RTF) rates for providers to consider increased labor costs resulting from increases in the New York State minimum wage in the Remainder of State region.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2021/2022 is \$16,000.

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.

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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

The Department of Health proposes to amend the Traumatic Brain Injury (TBI) (waiver number NY.0269.R04.04) and Nursing Home Transition and Diversion (NHTD) (waiver number NY.0444.R02.01) 1915c Waiver Programs in order to implement planned minimum wage-related rate increases pursuant to New York State Minimum Wage regulations effective January 1, 2017. This minimum wage bill stipulates that wages will be increased gradually through 2021. This increase specifically impacts all counties except for all New York City boroughs, Nassau, Suffolk, and Westchester.

Drafts of the proposed amendments to the TBI and NHTD waivers are available for review at: https://health.ny.gov/health_care/medicaid/redesign/mrt90/policy_docs.htm

As of December 31, 2016, the first in a series of wage increases went into effect in New York State. Rates differ based on region and industry to allow for a phase-in of new salaries. Changes take effect on the last day of the year. Annual increases for Upstate New York will continue until the rate reaches a \$15 minimum wage. The annual increases are published by the Commissioner of Labor by October 1. They are based on percentage increases determined by the Director of the Division of Budget, based on economic indices, including the Consumer Price Index. The rate for the “remainder of state” will be \$13.20 per hour effective December 31, 2021. This wage adjustment will require a rate increase of \$.90 per hour for waiver service: Home and Community Support Services (HCSS) for both the Nursing Home Transition and Diversion (NHTD) and Traumatic Brain Injury (TBI) 1915 (c) Medicaid Waivers. The anticipated change to projected gross Medicaid expenditures as a result of this proposed amendment is an increase of \$11.8 million for the remainder of the 5 year waiver cycles.

The public is invited to review and comment on this initiative. Comments may be filed electronically at: waivertransition@health.ny.gov, or mailed to: Department of Health, Office of Health Insurance Programs, Division of Long Term Care, Bureau of Community Integration and Alzheimer’s Disease, One Commerce Plaza, Suite 1605, Albany, NY 12210. All comments must be postmarked or emailed by 30 days of the date of this notice. Include “TBI and NHTD Waiver Amendments” in the subject line and indicate your name and affiliation. Individuals without internet access may contact the Waiver Unit at: (518) 474-5271 to receive additional information.

PUBLIC NOTICE

Department of State

F-2021-0654

Date of Issuance – December 29, 2021

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 (CZMA) of 1972, as amended.

The applicant has certified that the proposed activities comply with and will be conducted in a manner consistent with the federally approved New York State Coastal Management Program (NYSCMP). The applicant’s consistency certification and accompanying public in-

formation and data 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.

In F-2021-0654 the applicant, Village Marine of Westhampton LTD, is proposing to install 552 linear feet of new low sill bulkhead; replace existing 4 feet wide x 464 linear feet fixed docks with floating docks; and dredge 949 cubic yards of sediment to -4’ MLW within existing West and East boat basins. This project is located at 33 Library Avenue, Village of Southampton, Suffolk County, Moneybogue Bay.

The applicant’s consistency certification and supporting information are available for review at: <https://dos.ny.gov/system/files/documents/2021/12/f-2021-0654app.pdf> or at <https://dos.ny.gov/public-notices>

The proposed activity would be located within or has the potential to affect the following Special Management or Regulated Area(s):

- Moriches Bay Significant Coastal Fish and Wildlife Habitats:

https://dos.ny.gov/system/files/documents/2020/03/moriches_bay.pdf

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., 15 days from the date of publication of this notice or January 13, 2022.

Comments should be addressed to: Department of State, Office of Planning and Development and Community Infrastructure, Consistency Review Unit, One Commerce Plaza, Suite 1010, 99 Washington Ave., Albany, NY 12231, (518) 474-6000. 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-2021-0695

Date of Issuance – December 29, 2021

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-2021-0695, Vincent Rovitelli, is proposing to excavate/remove two land peninsulas from an existing marina basin. The peninsula measures 17’-4” wide by 185’-2” long and 10’-1” long by 214’-5” long. The peninsulas would be excavated down to an elevation of 243.5’ IGLD. The project would result in the excavation of up to 1,207 cubic yards of materials (765 from below the plane of Ordinary High Water). A boulder located within the marina basin would also be removed. Dewatering of material would be completed at an upland on-site location with off-site disposal at an approved upland location. Sheet pile would be placed at the landward extent of the each of the excavated peninsulas. In addition, 65 linear feet of sheet pile where the seawall is missing A turbidity curtain would be paced within the channel that separates the marina from Sandy Creek during excavation. The applicant was previously approved to replace existing fixed docks with floating docks throughout the marina basin. Various upland improvements to the site are also proposed.

The proposal is for the Sandy Creek Marina located off of Sandy Creek at Eight Lake Road East Fork in the Town of Hamlin, Monroe County.

The stated purpose of the proposed action is to “Improve the usage and safety of our existing marina.”

The applicant’s consistency certification and supporting information are available for review at: <https://dos.ny.gov/system/files/documents/2021/12/f-2021-0695publicnotice.pdf> or at <https://dos.ny.gov/public-notices>

Original copies of public information and data submitted by the ap-

SUMMARY
SPA #22-0020

This State Plan Amendment proposes a continuation of minimum wage adjustments through current Medicaid reimbursement methodologies until all regions have reached an hourly wage of \$15.00 per hour consistent with enacted legislation.

DRAFT

**New York
2(c)(iv)(c)**

1905(a)(9) Clinic Services**Minimum Wage – Article 28 FQHCs**

Effective January 1, 2017, and every January 1, thereafter until the minimum wage reaches [the statutorily described per hour wage as shown below] \$15.00 per hour for all regions of the State, a minimum wage add-on will be developed and used to adjust Article 28 freestanding FQHC rate as an alternative payment method (APM) rate.

Minimum Wage (MW) Region	12/31/2016	12/31/2017	12/31/2018	12/31/2019	12/31/2020	12/31/2021
New York City (Large employers)	\$11.00	\$13.00	\$15.00	\$15.00	\$15.00	\$15.00
New York City (Small employers)	\$10.50	\$12.00	\$13.50	\$15.00	\$15.00	\$15.00
Nassau, Suffolk, & Westchester counties	\$10.00	\$11.00	\$12.00	\$13.00	\$14.00	\$15.00
Remainder of the State	\$9.70	\$10.40	\$11.10	\$11.80	\$12.50	[\$12.50] \$13.20

The minimum wage add-on and the APM rate will be posted to Health Commerce System (HCS: https://commerce.health.state.ny.us/public/hcs_login.html). An Article 28 FQHC's PPS threshold rate will be adjusted by a minimum wage add-on based on the following:

- a. Minimum wage costs will mean the additional costs incurred beginning January 1, 2017, and thereafter, as a result of New York state statutory increases to minimum wage.
 - i. Minimum wage cost development based on survey data collected.
 1. Survey data will be collected for Article 28 FQHC specific wage data.
 2. Article 28 FQHCs will report by specified wage bands, the total count of FTEs and total hours paid to employees earning less than the statutory minimum wage applicable for each MW Region.
 3. Article 28 FQHCs will report an average fringe benefit percentage for the employees directly affected by the minimum wage increase.
 4. The minimum wage costs are calculated by multiplying the total hours paid by the difference between the statutory minimum wage and the midpoint of each wage band where the Article 28 FQHC has reported total hours paid. To this result, the Article 28 FQHC's average fringe benefit percentage is applied and added to the costs.
 - ii. Minimum wage cost development based on the AHCF cost report data.
 1. The average hourly wages of employees in occupational titles where the reported average hourly wage is below the regional statutory minimum wage are identified.
 2. The total payroll hours of the titles identified are then multiplied by the regional statutory minimum wage resulting in a projected payroll. The actual payroll as reported in the AHCF cost report is then subtracted from the projected payroll resulting in the expected wage costs increase.

TN #22-0020Supersedes TN #17-0013

Approval Date _____

Effective Date January 1, 2022

Public Notice **NYS 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 all services to comply with enacted statutory provisions. The following changes are proposed:

Institutional Services

The following is a clarification to the December 29th, 2021 noticed proposal to adjust Residential Treatment Facility (RTF) rates for providers to consider increased labor costs resulting from increases in the New York State minimum wage in the Remainder of State region. With clarification below, ***this increase includes rates for providers of all services.***

All Services

The Department of Health will adjust rates to take into account increased labor costs resulting from statutorily required increases in the New York State minimum wage. Under the statute, increases in the minimum wage will be phased in over a number of years until the minimum wage is \$15 per hour in the Remainder of State region, and Medicaid rates will be adjusted in those years to account for such increases.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal years 2021/2022 and 2022/2023 is \$3,078,116 and \$12,312,459, respectively.

Providers:	SFY 2021-2022 (1/1/2022 - 3/31/2022)	SFY 2022-2023 (4/1/2022 - 3/31/2023)
Article 16 Freestanding Clinics	\$8,267	\$33,069
Article 28 Freestanding Clinics & Ambulatory Surgery Centers	\$3,475	\$13,900
Assisted Living Programs	\$150,000	\$600,000
Certified Home Health Agencies	\$927	\$3,706
Article 28 Federally Qualified Health Centers (Freestanding Clinics)	\$437	\$1,748
Hospice	\$37,500	\$150,000
Hospital Inpatient	\$10,700	\$42,800
Intermediate Care Facilities	\$626,697	\$2,506,788
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Personal Care	\$1,868,497	\$7,473,986
Residential Treatment Facilities	\$4,100	\$16,400
Totals:	\$3,078,116	\$12,312,459

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

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For further information and to review and comment, please contact:

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Division of Finance and Rate Setting
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DRAFT

The Department of Health proposes to amend the Title XIX (Medicaid) State Plan for non-institutional services to comply with enacted statutory provisions. The following changes are proposed:

Non-Institutional Services

Effective on or after January 1, 2022, the Department of Health will adjust the reimbursement rate for Ambulatory Services in Facilities Certified Under Article 16 of the Mental Health Law Clinic Day Treatment program to remove the providers that no longer offer the service and update the reimbursements for the remaining providers based on more current cost data.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2022 is \$300,000.

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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 long term care services to comply with sections 2803, 2895-b, and 2828 of the Public Health Law. The following changes are proposed:

Long Term Care Services

Effective on or after January 1, 2022, the Department of Health will adjust rates for residential health care facilities meeting the requirements set forth in section 2828 of the Public Health Law and implementing regulations. This rate adjustment will support increases in resident-facing staffing services provided by registered nurses, licensed practical nurses, certified nurse aides, and nurse aides in accordance with standards set forth in section 2895-b of the Public Health Law and implementing regulations, which shall be sufficient to attain the highest practicable physical, mental, and psychological well-being of the residents of such residential health care facilities.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to the residential health care facility rate

adjustment is \$128 million as appropriated in the budget for state fiscal year 2021/2022.

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.

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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 institutional services to comply with enacted statutory provisions. The following changes are proposed:

Institutional Services

Effective on or after December 31, 2021, the Department of Health will adjust Residential Treatment Facility (RTF) rates for providers to consider increased labor costs resulting from increases in the New York State minimum wage in the Remainder of State region.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2021/2022 is \$16,000.

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.

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PUBLIC NOTICE

Department of Health

The Department of Health proposes to amend the Traumatic Brain Injury (TBI) (waiver number NY.0269.R04.04) and Nursing Home Transition and Diversion (NHTD) (waiver number NY.0444.R02.01) 1915c Waiver Programs in order to implement planned minimum wage-related rate increases pursuant to New York State Minimum Wage regulations effective January 1, 2017. This minimum wage bill stipulates that wages will be increased gradually through 2021. This increase specifically impacts all counties except for all New York City boroughs, Nassau, Suffolk, and Westchester.

Drafts of the proposed amendments to the TBI and NHTD waivers are available for review at: https://health.ny.gov/health_care/medicaid/redesign/mrt90/policy_docs.htm

As of December 31, 2016, the first in a series of wage increases went into effect in New York State. Rates differ based on region and industry to allow for a phase-in of new salaries. Changes take effect on the last day of the year. Annual increases for Upstate New York will continue until the rate reaches a \$15 minimum wage. The annual increases are published by the Commissioner of Labor by October 1. They are based on percentage increases determined by the Director of the Division of Budget, based on economic indices, including the Consumer Price Index. The rate for the “remainder of state” will be \$13.20 per hour effective December 31, 2021. This wage adjustment will require a rate increase of \$.90 per hour for waiver service: Home and Community Support Services (HCSS) for both the Nursing Home Transition and Diversion (NHTD) and Traumatic Brain Injury (TBI) 1915 (c) Medicaid Waivers. The anticipated change to projected gross Medicaid expenditures as a result of this proposed amendment is an increase of \$11.8 million for the remainder of the 5 year waiver cycles.

The public is invited to review and comment on this initiative. Comments may be filed electronically at: waivertransition@health.ny.gov, or mailed to: Department of Health, Office of Health Insurance Programs, Division of Long Term Care, Bureau of Community Integration and Alzheimer’s Disease, One Commerce Plaza, Suite 1605, Albany, NY 12210. All comments must be postmarked or emailed by 30 days of the date of this notice. Include “TBI and NHTD Waiver Amendments” in the subject line and indicate your name and affiliation. Individuals without internet access may contact the Waiver Unit at: (518) 474-5271 to receive additional information.

PUBLIC NOTICE

Department of State

F-2021-0654

Date of Issuance – December 29, 2021

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 (CZMA) of 1972, as amended.

The applicant has certified that the proposed activities comply with and will be conducted in a manner consistent with the federally approved New York State Coastal Management Program (NYSCMP). The applicant’s consistency certification and accompanying public in-

formation and data 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.

In F-2021-0654 the applicant, Village Marine of Westhampton LTD, is proposing to install 552 linear feet of new low sill bulkhead; replace existing 4 feet wide x 464 linear feet fixed docks with floating docks; and dredge 949 cubic yards of sediment to -4’ MLW within existing West and East boat basins. This project is located at 33 Library Avenue, Village of Southampton, Suffolk County, Moneybogue Bay.

The applicant’s consistency certification and supporting information are available for review at: <https://dos.ny.gov/system/files/documents/2021/12/f-2021-0654app.pdf> or at <https://dos.ny.gov/public-notices>

The proposed activity would be located within or has the potential to affect the following Special Management or Regulated Area(s):

- Moriches Bay Significant Coastal Fish and Wildlife Habitats:

https://dos.ny.gov/system/files/documents/2020/03/moriches_bay.pdf

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., 15 days from the date of publication of this notice or January 13, 2022.

Comments should be addressed to: Department of State, Office of Planning and Development and Community Infrastructure, Consistency Review Unit, One Commerce Plaza, Suite 1010, 99 Washington Ave., Albany, NY 12231, (518) 474-6000. 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-2021-0695

Date of Issuance – December 29, 2021

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-2021-0695, Vincent Rovitelli, is proposing to excavate/remove two land peninsulas from an existing marina basin. The peninsula measures 17’-4” wide by 185’-2” long and 10’-1” long by 214’-5” long. The peninsulas would be excavated down to an elevation of 243.5’ IGLD. The project would result in the excavation of up to 1,207 cubic yards of materials (765 from below the plane of Ordinary High Water). A boulder located within the marina basin would also be removed. Dewatering of material would be completed at an upland on-site location with off-site disposal at an approved upland location. Sheet pile would be placed at the landward extent of the each of the excavated peninsulas. In addition, 65 linear feet of sheet pile where the seawall is missing A turbidity curtain would be paced within the channel that separates the marina from Sandy Creek during excavation. The applicant was previously approved to replace existing fixed docks with floating docks throughout the marina basin. Various upland improvements to the site are also proposed.

The proposal is for the Sandy Creek Marina located off of Sandy Creek at Eight Lake Road East Fork in the Town of Hamlin, Monroe County.

The stated purpose of the proposed action is to “Improve the usage and safety of our existing marina.”

The applicant’s consistency certification and supporting information are available for review at: <https://dos.ny.gov/system/files/documents/2021/12/f-2021-0695publicnotice.pdf> or at <https://dos.ny.gov/public-notices>

Original copies of public information and data submitted by the ap-

SUMMARY
SPA #22-0021

This State Plan Amendment proposes a continuation of minimum wage adjustments through current Medicaid reimbursement methodologies until all regions have reached an hourly wage of \$15.00 per hour consistent with enacted legislation.

DRAFT

Public Notice **NYS 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 all services to comply with enacted statutory provisions. The following changes are proposed:

Institutional Services

The following is a clarification to the December 29th, 2021 noticed proposal to adjust Residential Treatment Facility (RTF) rates for providers to consider increased labor costs resulting from increases in the New York State minimum wage in the Remainder of State region. With clarification below, ***this increase includes rates for providers of all services.***

All Services

The Department of Health will adjust rates to take into account increased labor costs resulting from statutorily required increases in the New York State minimum wage. Under the statute, increases in the minimum wage will be phased in over a number of years until the minimum wage is \$15 per hour in the Remainder of State region, and Medicaid rates will be adjusted in those years to account for such increases.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal years 2021/2022 and 2022/2023 is \$3,078,116 and \$12,312,459, respectively.

Providers:	SFY 2021-2022 (1/1/2022 - 3/31/2022)	SFY 2022-2023 (4/1/2022 - 3/31/2023)
Article 16 Freestanding Clinics	\$8,267	\$33,069
Article 28 Freestanding Clinics & Ambulatory Surgery Centers	\$3,475	\$13,900
Assisted Living Programs	\$150,000	\$600,000
Certified Home Health Agencies	\$927	\$3,706
Article 28 Federally Qualified Health Centers (Freestanding Clinics)	\$437	\$1,748
Hospice	\$37,500	\$150,000
Hospital Inpatient	\$10,700	\$42,800
Intermediate Care Facilities	\$626,697	\$2,506,788
Nursing Homes	\$367,516	\$1,470,062
Personal Care	\$1,868,497	\$7,473,986
Residential Treatment Facilities	\$4,100	\$16,400
Totals:	\$3,078,116	\$12,312,459

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:

New York State Department of Health
Division of Finance and Rate Setting
99 Washington Ave – One Commerce Plaza
Suite 1432
Albany, New York 12210
spa_inquiries@health.ny.gov

DRAFT

The Department of Health proposes to amend the Title XIX (Medicaid) State Plan for non-institutional services to comply with enacted statutory provisions. The following changes are proposed:

Non-Institutional Services

Effective on or after January 1, 2022, the Department of Health will adjust the reimbursement rate for Ambulatory Services in Facilities Certified Under Article 16 of the Mental Health Law Clinic Day Treatment program to remove the providers that no longer offer the service and update the reimbursements for the remaining providers based on more current cost data.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2022 is \$300,000.

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.

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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 long term care services to comply with sections 2803, 2895-b, and 2828 of the Public Health Law. The following changes are proposed:

Long Term Care Services

Effective on or after January 1, 2022, the Department of Health will adjust rates for residential health care facilities meeting the requirements set forth in section 2828 of the Public Health Law and implementing regulations. This rate adjustment will support increases in resident-facing staffing services provided by registered nurses, licensed practical nurses, certified nurse aides, and nurse aides in accordance with standards set forth in section 2895-b of the Public Health Law and implementing regulations, which shall be sufficient to attain the highest practicable physical, mental, and psychological well-being of the residents of such residential health care facilities.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to the residential health care facility rate

adjustment is \$128 million as appropriated in the budget for state fiscal year 2021/2022.

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
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Long Island City, New York 11101

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114 Willoughby Street
Brooklyn, New York 11201

Bronx County, Tremont Center
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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 institutional services to comply with enacted statutory provisions. The following changes are proposed:

Institutional Services

Effective on or after December 31, 2021, the Department of Health will adjust Residential Treatment Facility (RTF) rates for providers to consider increased labor costs resulting from increases in the New York State minimum wage in the Remainder of State region.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2021/2022 is \$16,000.

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
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Long Island City, New York 11101

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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

The Department of Health proposes to amend the Traumatic Brain Injury (TBI) (waiver number NY.0269.R04.04) and Nursing Home Transition and Diversion (NHTD) (waiver number NY.0444.R02.01) 1915c Waiver Programs in order to implement planned minimum wage-related rate increases pursuant to New York State Minimum Wage regulations effective January 1, 2017. This minimum wage bill stipulates that wages will be increased gradually through 2021. This increase specifically impacts all counties except for all New York City boroughs, Nassau, Suffolk, and Westchester.

Drafts of the proposed amendments to the TBI and NHTD waivers are available for review at: https://health.ny.gov/health_care/medicaid/redesign/mrt90/policy_docs.htm

As of December 31, 2016, the first in a series of wage increases went into effect in New York State. Rates differ based on region and industry to allow for a phase-in of new salaries. Changes take effect on the last day of the year. Annual increases for Upstate New York will continue until the rate reaches a \$15 minimum wage. The annual increases are published by the Commissioner of Labor by October 1. They are based on percentage increases determined by the Director of the Division of Budget, based on economic indices, including the Consumer Price Index. The rate for the “remainder of state” will be \$13.20 per hour effective December 31, 2021. This wage adjustment will require a rate increase of \$.90 per hour for waiver service: Home and Community Support Services (HCSS) for both the Nursing Home Transition and Diversion (NHTD) and Traumatic Brain Injury (TBI) 1915 (c) Medicaid Waivers. The anticipated change to projected gross Medicaid expenditures as a result of this proposed amendment is an increase of \$11.8 million for the remainder of the 5 year waiver cycles.

The public is invited to review and comment on this initiative. Comments may be filed electronically at: waivertransition@health.ny.gov, or mailed to: Department of Health, Office of Health Insurance Programs, Division of Long Term Care, Bureau of Community Integration and Alzheimer’s Disease, One Commerce Plaza, Suite 1605, Albany, NY 12210. All comments must be postmarked or emailed by 30 days of the date of this notice. Include “TBI and NHTD Waiver Amendments” in the subject line and indicate your name and affiliation. Individuals without internet access may contact the Waiver Unit at: (518) 474-5271 to receive additional information.

PUBLIC NOTICE

Department of State

F-2021-0654

Date of Issuance – December 29, 2021

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 (CZMA) of 1972, as amended.

The applicant has certified that the proposed activities comply with and will be conducted in a manner consistent with the federally approved New York State Coastal Management Program (NYSCMP). The applicant’s consistency certification and accompanying public in-

formation and data 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.

In F-2021-0654 the applicant, Village Marine of Westhampton LTD, is proposing to install 552 linear feet of new low sill bulkhead; replace existing 4 feet wide x 464 linear feet fixed docks with floating docks; and dredge 949 cubic yards of sediment to -4’ MLW within existing West and East boat basins. This project is located at 33 Library Avenue, Village of Southampton, Suffolk County, Moneybogue Bay.

The applicant’s consistency certification and supporting information are available for review at: <https://dos.ny.gov/system/files/documents/2021/12/f-2021-0654app.pdf> or at <https://dos.ny.gov/public-notices>

The proposed activity would be located within or has the potential to affect the following Special Management or Regulated Area(s):

- Moriches Bay Significant Coastal Fish and Wildlife Habitats:

https://dos.ny.gov/system/files/documents/2020/03/moriches_bay.pdf

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., 15 days from the date of publication of this notice or January 13, 2022.

Comments should be addressed to: Department of State, Office of Planning and Development and Community Infrastructure, Consistency Review Unit, One Commerce Plaza, Suite 1010, 99 Washington Ave., Albany, NY 12231, (518) 474-6000. 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-2021-0695

Date of Issuance – December 29, 2021

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-2021-0695, Vincent Rovitelli, is proposing to excavate/remove two land peninsulas from an existing marina basin. The peninsula measures 17’-4” wide by 185’-2” long and 10’-1” long by 214’-5” long. The peninsulas would be excavated down to an elevation of 243.5’ IGLD. The project would result in the excavation of up to 1,207 cubic yards of materials (765 from below the plane of Ordinary High Water). A boulder located within the marina basin would also be removed. Dewatering of material would be completed at an upland on-site location with off-site disposal at an approved upland location. Sheet pile would be placed at the landward extent of the each of the excavated peninsulas. In addition, 65 linear feet of sheet pile where the seawall is missing A turbidity curtain would be paced within the channel that separates the marina from Sandy Creek during excavation. The applicant was previously approved to replace existing fixed docks with floating docks throughout the marina basin. Various upland improvements to the site are also proposed.

The proposal is for the Sandy Creek Marina located off of Sandy Creek at Eight Lake Road East Fork in the Town of Hamlin, Monroe County.

The stated purpose of the proposed action is to “Improve the usage and safety of our existing marina.”

The applicant’s consistency certification and supporting information are available for review at: <https://dos.ny.gov/system/files/documents/2021/12/f-2021-0695publicnotice.pdf> or at <https://dos.ny.gov/public-notices>

Original copies of public information and data submitted by the ap-

SUMMARY
SPA #22-0022

This State Plan Amendment proposes a continuation of minimum wage adjustments through current Medicaid reimbursement methodologies until all regions have reached an hourly wage of \$15.00 per hour consistent with enacted legislation.

DRAFT

**New York
4(8)(1)**

1905(a)(7): Home Health Care Services

Adjustment for Minimum Wage Increases. Effective January 1, 2017, and every January 1, thereafter until the minimum wage reaches the state statutorily described per hour wage as shown below, a minimum wage add-on will be developed and applied to Certified Home Health Agency (CHHA) Rate.

Minimum Wage (MW) Region	12/31/2016	12/31/2017	12/31/2018	12/31/2019	12/31/2020	12/31/2021
New York City (Large Employers)	\$11.00	\$13.00	\$15.00	\$15.00	\$15.00	\$15.00
New York City (Small employers)	\$10.50	\$12.00	\$13.50	\$15.00	\$15.00	\$15.00
Nassau, Suffolk, & Westchester counties	\$10.00	\$11.00	\$12.00	\$13.00	\$14.00	\$15.00
Remainder of the State	\$9.70	\$10.40	\$11.10	\$11.80	\$12.50	[\$12.50] \$13.20

The minimum wage adjustment will be developed and implemented as follows:

1. Minimum wage costs will mean the additional costs incurred beginning January 1, 2017 and thereafter, as a result of New York State statutory increases to minimum wages until all regions of the State reach \$15.00 per hour.
2. The 2017 facility specific minimum wage add-on will be developed based on collected survey data received and attested to by CHHA providers. If a provider does not submit a survey, the minimum wage add-on will be calculated based on the Provider's cost report wage data from two years prior to the period being calculated. If a facility fails to submit both the attested survey and the cost report, the facility's minimum wage add-on will not be calculated.
 - i. Minimum wage cost development based on survey data collected.
 1. Survey data will be collected for facility specific wage data.
 2. Facilities will report by wage bands, the total count of FTEs and total hours paid to all employees (contracted and non-contracted staff) earning less than the statutory minimum wage applicable for each region.
 3. Facilities will report an average fringe benefit percentage for the employees directly affected by the minimum wage increase.
 4. The minimum wage costs are calculated by multiplying the total hours paid by the difference between the statutory minimum wage and the midpoint of each wage band where the facility has reported total hours paid. To this result, the facility's average fringe benefit percentage is applied and added to the costs.
 - ii. Minimum wage cost development based on the cost report data.
 - a. The average hourly wages of employees where the reported average hourly wage is below the regional statutory minimum wage are identified.
 - b. The total payroll hours of the employees identified are then multiplied by the regional statutory minimum wage resulting in a projected payroll. The actual payroll as reported in the cost report is then subtracted from the projected payroll resulting in the expected wage costs increase.
 - c. The facility's fringe benefit costs directly affected by the wage increase are identified, and the average fringe benefit percentage is calculated.
 - d. The fringe benefit percentage is applied to the increased wage costs and added resulting in the minimum wage costs.

Public Notice **NYS 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 all services to comply with enacted statutory provisions. The following changes are proposed:

Institutional Services

The following is a clarification to the December 29th, 2021 noticed proposal to adjust Residential Treatment Facility (RTF) rates for providers to consider increased labor costs resulting from increases in the New York State minimum wage in the Remainder of State region. With clarification below, ***this increase includes rates for providers of all services.***

All Services

The Department of Health will adjust rates to take into account increased labor costs resulting from statutorily required increases in the New York State minimum wage. Under the statute, increases in the minimum wage will be phased in over a number of years until the minimum wage is \$15 per hour in the Remainder of State region, and Medicaid rates will be adjusted in those years to account for such increases.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal years 2021/2022 and 2022/2023 is \$3,078,116 and \$12,312,459, respectively.

Providers:	SFY 2021-2022 (1/1/2022 - 3/31/2022)	SFY 2022-2023 (4/1/2022 - 3/31/2023)
Article 16 Freestanding Clinics	\$8,267	\$33,069
Article 28 Freestanding Clinics & Ambulatory Surgery Centers	\$3,475	\$13,900
Assisted Living Programs	\$150,000	\$600,000
Certified Home Health Agencies	\$927	\$3,706
Article 28 Federally Qualified Health Centers (Freestanding Clinics)	\$437	\$1,748
Hospice	\$37,500	\$150,000
Hospital Inpatient	\$10,700	\$42,800
Intermediate Care Facilities	\$626,697	\$2,506,788
Nursing Homes	\$367,516	\$1,470,062
Personal Care	\$1,868,497	\$7,473,986
Residential Treatment Facilities	\$4,100	\$16,400
Totals:	\$3,078,116	\$12,312,459

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
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Richmond County, Richmond Center
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For further information and to review and comment, please contact:

New York State Department of Health
Division of Finance and Rate Setting
99 Washington Ave – One Commerce Plaza
Suite 1432
Albany, New York 12210
spa_inquiries@health.ny.gov

DRAFT

The Department of Health proposes to amend the Title XIX (Medicaid) State Plan for non-institutional services to comply with enacted statutory provisions. The following changes are proposed:

Non-Institutional Services

Effective on or after January 1, 2022, the Department of Health will adjust the reimbursement rate for Ambulatory Services in Facilities Certified Under Article 16 of the Mental Health Law Clinic Day Treatment program to remove the providers that no longer offer the service and update the reimbursements for the remaining providers based on more current cost data.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2022 is \$300,000.

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.

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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 long term care services to comply with sections 2803, 2895-b, and 2828 of the Public Health Law. The following changes are proposed:

Long Term Care Services

Effective on or after January 1, 2022, the Department of Health will adjust rates for residential health care facilities meeting the requirements set forth in section 2828 of the Public Health Law and implementing regulations. This rate adjustment will support increases in resident-facing staffing services provided by registered nurses, licensed practical nurses, certified nurse aides, and nurse aides in accordance with standards set forth in section 2895-b of the Public Health Law and implementing regulations, which shall be sufficient to attain the highest practicable physical, mental, and psychological well-being of the residents of such residential health care facilities.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to the residential health care facility rate

adjustment is \$128 million as appropriated in the budget for state fiscal year 2021/2022.

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:

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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 institutional services to comply with enacted statutory provisions. The following changes are proposed:

Institutional Services

Effective on or after December 31, 2021, the Department of Health will adjust Residential Treatment Facility (RTF) rates for providers to consider increased labor costs resulting from increases in the New York State minimum wage in the Remainder of State region.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2021/2022 is \$16,000.

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

The Department of Health proposes to amend the Traumatic Brain Injury (TBI) (waiver number NY.0269.R04.04) and Nursing Home Transition and Diversion (NHTD) (waiver number NY.0444.R02.01) 1915c Waiver Programs in order to implement planned minimum wage-related rate increases pursuant to New York State Minimum Wage regulations effective January 1, 2017. This minimum wage bill stipulates that wages will be increased gradually through 2021. This increase specifically impacts all counties except for all New York City boroughs, Nassau, Suffolk, and Westchester.

Drafts of the proposed amendments to the TBI and NHTD waivers are available for review at: https://health.ny.gov/health_care/medicaid/redesign/mrt90/policy_docs.htm

As of December 31, 2016, the first in a series of wage increases went into effect in New York State. Rates differ based on region and industry to allow for a phase-in of new salaries. Changes take effect on the last day of the year. Annual increases for Upstate New York will continue until the rate reaches a \$15 minimum wage. The annual increases are published by the Commissioner of Labor by October 1. They are based on percentage increases determined by the Director of the Division of Budget, based on economic indices, including the Consumer Price Index. The rate for the “remainder of state” will be \$13.20 per hour effective December 31, 2021. This wage adjustment will require a rate increase of \$.90 per hour for waiver service: Home and Community Support Services (HCSS) for both the Nursing Home Transition and Diversion (NHTD) and Traumatic Brain Injury (TBI) 1915 (c) Medicaid Waivers. The anticipated change to projected gross Medicaid expenditures as a result of this proposed amendment is an increase of \$11.8 million for the remainder of the 5 year waiver cycles.

The public is invited to review and comment on this initiative. Comments may be filed electronically at: waivertransition@health.ny.gov, or mailed to: Department of Health, Office of Health Insurance Programs, Division of Long Term Care, Bureau of Community Integration and Alzheimer’s Disease, One Commerce Plaza, Suite 1605, Albany, NY 12210. All comments must be postmarked or emailed by 30 days of the date of this notice. Include “TBI and NHTD Waiver Amendments” in the subject line and indicate your name and affiliation. Individuals without internet access may contact the Waiver Unit at: (518) 474-5271 to receive additional information.

PUBLIC NOTICE

Department of State

F-2021-0654

Date of Issuance – December 29, 2021

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 (CZMA) of 1972, as amended.

The applicant has certified that the proposed activities comply with and will be conducted in a manner consistent with the federally approved New York State Coastal Management Program (NYSCMP). The applicant’s consistency certification and accompanying public in-

formation and data 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.

In F-2021-0654 the applicant, Village Marine of Westhampton LTD, is proposing to install 552 linear feet of new low sill bulkhead; replace existing 4 feet wide x 464 linear feet fixed docks with floating docks; and dredge 949 cubic yards of sediment to -4’ MLW within existing West and East boat basins. This project is located at 33 Library Avenue, Village of Southampton, Suffolk County, Moneybogue Bay.

The applicant’s consistency certification and supporting information are available for review at: <https://dos.ny.gov/system/files/documents/2021/12/f-2021-0654app.pdf> or at <https://dos.ny.gov/public-notices>

The proposed activity would be located within or has the potential to affect the following Special Management or Regulated Area(s):

- Moriches Bay Significant Coastal Fish and Wildlife Habitats:

https://dos.ny.gov/system/files/documents/2020/03/moriches_bay.pdf

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., 15 days from the date of publication of this notice or January 13, 2022.

Comments should be addressed to: Department of State, Office of Planning and Development and Community Infrastructure, Consistency Review Unit, One Commerce Plaza, Suite 1010, 99 Washington Ave., Albany, NY 12231, (518) 474-6000. 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-2021-0695

Date of Issuance – December 29, 2021

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-2021-0695, Vincent Rovitelli, is proposing to excavate/remove two land peninsulas from an existing marina basin. The peninsula measures 17’-4” wide by 185’-2” long and 10’-1” long by 214’-5” long. The peninsulas would be excavated down to an elevation of 243.5’ IGLD. The project would result in the excavation of up to 1,207 cubic yards of materials (765 from below the plane of Ordinary High Water). A boulder located within the marina basin would also be removed. Dewatering of material would be completed at an upland on-site location with off-site disposal at an approved upland location. Sheet pile would be placed at the landward extent of the each of the excavated peninsulas. In addition, 65 linear feet of sheet pile where the seawall is missing A turbidity curtain would be paced within the channel that separates the marina from Sandy Creek during excavation. The applicant was previously approved to replace existing fixed docks with floating docks throughout the marina basin. Various upland improvements to the site are also proposed.

The proposal is for the Sandy Creek Marina located off of Sandy Creek at Eight Lake Road East Fork in the Town of Hamlin, Monroe County.

The stated purpose of the proposed action is to “Improve the usage and safety of our existing marina.”

The applicant’s consistency certification and supporting information are available for review at: <https://dos.ny.gov/system/files/documents/2021/12/f-2021-0695publicnotice.pdf> or at <https://dos.ny.gov/public-notices>

Original copies of public information and data submitted by the ap-

SUMMARY
SPA #22-0023

This State Plan Amendment proposes a continuation of minimum wage adjustments through current Medicaid reimbursement methodologies until all regions have reached an hourly wage of \$15.00 per hour consistent with enacted legislation.

DRAFT

Public Notice **NYS 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 all services to comply with enacted statutory provisions. The following changes are proposed:

Institutional Services

The following is a clarification to the December 29th, 2021 noticed proposal to adjust Residential Treatment Facility (RTF) rates for providers to consider increased labor costs resulting from increases in the New York State minimum wage in the Remainder of State region. With clarification below, ***this increase includes rates for providers of all services.***

All Services

The Department of Health will adjust rates to take into account increased labor costs resulting from statutorily required increases in the New York State minimum wage. Under the statute, increases in the minimum wage will be phased in over a number of years until the minimum wage is \$15 per hour in the Remainder of State region, and Medicaid rates will be adjusted in those years to account for such increases.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal years 2021/2022 and 2022/2023 is \$3,078,116 and \$12,312,459, respectively.

Providers:	SFY 2021- 2022 (1/1/2022 - 3/31/2022)	SFY 2022- 2023 (4/1/2022 - 3/31/2023)
Article 16 Freestanding Clinics	\$8,267	\$33,069
Article 28 Freestanding Clinics & Ambulatory Surgery Centers	\$3,475	\$13,900
Assisted Living Programs	\$150,000	\$600,000
Certified Home Health Agencies	\$927	\$3,706
Article 28 Federally Qualified Health Centers (Freestanding Clinics)	\$437	\$1,748
Hospice	\$37,500	\$150,000
Hospital Inpatient	\$10,700	\$42,800
Intermediate Care Facilities	\$626,697	\$2,506,788
Nursing Homes	\$367,516	\$1,470,062
Personal Care	\$1,868,497	\$7,473,986
Residential Treatment Facilities	\$4,100	\$16,400
Totals:	\$3,078,116	\$12,312,459

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.

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For further information and to review and comment, please contact:

New York State Department of Health
Division of Finance and Rate Setting
99 Washington Ave – One Commerce Plaza
Suite 1432
Albany, New York 12210
spa_inquiries@health.ny.gov

DRAFT

The Department of Health proposes to amend the Title XIX (Medicaid) State Plan for non-institutional services to comply with enacted statutory provisions. The following changes are proposed:

Non-Institutional Services

Effective on or after January 1, 2022, the Department of Health will adjust the reimbursement rate for Ambulatory Services in Facilities Certified Under Article 16 of the Mental Health Law Clinic Day Treatment program to remove the providers that no longer offer the service and update the reimbursements for the remaining providers based on more current cost data.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2022 is \$300,000.

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.

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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 long term care services to comply with sections 2803, 2895-b, and 2828 of the Public Health Law. The following changes are proposed:

Long Term Care Services

Effective on or after January 1, 2022, the Department of Health will adjust rates for residential health care facilities meeting the requirements set forth in section 2828 of the Public Health Law and implementing regulations. This rate adjustment will support increases in resident-facing staffing services provided by registered nurses, licensed practical nurses, certified nurse aides, and nurse aides in accordance with standards set forth in section 2895-b of the Public Health Law and implementing regulations, which shall be sufficient to attain the highest practicable physical, mental, and psychological well-being of the residents of such residential health care facilities.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to the residential health care facility rate

adjustment is \$128 million as appropriated in the budget for state fiscal year 2021/2022.

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.

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Institutional Services

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The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2021/2022 is \$16,000.

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PUBLIC NOTICE

Department of Health

The Department of Health proposes to amend the Traumatic Brain Injury (TBI) (waiver number NY.0269.R04.04) and Nursing Home Transition and Diversion (NHTD) (waiver number NY.0444.R02.01) 1915c Waiver Programs in order to implement planned minimum wage-related rate increases pursuant to New York State Minimum Wage regulations effective January 1, 2017. This minimum wage bill stipulates that wages will be increased gradually through 2021. This increase specifically impacts all counties except for all New York City boroughs, Nassau, Suffolk, and Westchester.

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As of December 31, 2016, the first in a series of wage increases went into effect in New York State. Rates differ based on region and industry to allow for a phase-in of new salaries. Changes take effect on the last day of the year. Annual increases for Upstate New York will continue until the rate reaches a \$15 minimum wage. The annual increases are published by the Commissioner of Labor by October 1. They are based on percentage increases determined by the Director of the Division of Budget, based on economic indices, including the Consumer Price Index. The rate for the “remainder of state” will be \$13.20 per hour effective December 31, 2021. This wage adjustment will require a rate increase of \$.90 per hour for waiver service: Home and Community Support Services (HCSS) for both the Nursing Home Transition and Diversion (NHTD) and Traumatic Brain Injury (TBI) 1915 (c) Medicaid Waivers. The anticipated change to projected gross Medicaid expenditures as a result of this proposed amendment is an increase of \$11.8 million for the remainder of the 5 year waiver cycles.

The public is invited to review and comment on this initiative. Comments may be filed electronically at: waivertransition@health.ny.gov, or mailed to: Department of Health, Office of Health Insurance Programs, Division of Long Term Care, Bureau of Community Integration and Alzheimer’s Disease, One Commerce Plaza, Suite 1605, Albany, NY 12210. All comments must be postmarked or emailed by 30 days of the date of this notice. Include “TBI and NHTD Waiver Amendments” in the subject line and indicate your name and affiliation. Individuals without internet access may contact the Waiver Unit at: (518) 474-5271 to receive additional information.

PUBLIC NOTICE

Department of State

F-2021-0654

Date of Issuance – December 29, 2021

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 (CZMA) of 1972, as amended.

The applicant has certified that the proposed activities comply with and will be conducted in a manner consistent with the federally approved New York State Coastal Management Program (NYSCMP). The applicant’s consistency certification and accompanying public in-

formation and data 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.

In F-2021-0654 the applicant, Village Marine of Westhampton LTD, is proposing to install 552 linear feet of new low sill bulkhead; replace existing 4 feet wide x 464 linear feet fixed docks with floating docks; and dredge 949 cubic yards of sediment to -4’ MLW within existing West and East boat basins. This project is located at 33 Library Avenue, Village of Southampton, Suffolk County, Moneybogue Bay.

The applicant’s consistency certification and supporting information are available for review at: <https://dos.ny.gov/system/files/documents/2021/12/f-2021-0654app.pdf> or at <https://dos.ny.gov/public-notices>

The proposed activity would be located within or has the potential to affect the following Special Management or Regulated Area(s):

- Moriches Bay Significant Coastal Fish and Wildlife Habitats:

https://dos.ny.gov/system/files/documents/2020/03/moriches_bay.pdf

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., 15 days from the date of publication of this notice or January 13, 2022.

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

PUBLIC NOTICE

Department of State

F-2021-0695

Date of Issuance – December 29, 2021

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-2021-0695, Vincent Rovitelli, is proposing to excavate/remove two land peninsulas from an existing marina basin. The peninsula measures 17’-4” wide by 185’-2” long and 10’-1” long by 214’-5” long. The peninsulas would be excavated down to an elevation of 243.5’ IGLD. The project would result in the excavation of up to 1,207 cubic yards of materials (765 from below the plane of Ordinary High Water). A boulder located within the marina basin would also be removed. Dewatering of material would be completed at an upland on-site location with off-site disposal at an approved upland location. Sheet pile would be placed at the landward extent of the each of the excavated peninsulas. In addition, 65 linear feet of sheet pile where the seawall is missing A turbidity curtain would be paced within the channel that separates the marina from Sandy Creek during excavation. The applicant was previously approved to replace existing fixed docks with floating docks throughout the marina basin. Various upland improvements to the site are also proposed.

The proposal is for the Sandy Creek Marina located off of Sandy Creek at Eight Lake Road East Fork in the Town of Hamlin, Monroe County.

The stated purpose of the proposed action is to “Improve the usage and safety of our existing marina.”

The applicant’s consistency certification and supporting information are available for review at: <https://dos.ny.gov/system/files/documents/2021/12/f-2021-0695publicnotice.pdf> or at <https://dos.ny.gov/public-notices>

Original copies of public information and data submitted by the ap-

SUMMARY
SPA #22-0024

This State Plan Amendment proposes a continuation of minimum wage adjustments through current Medicaid reimbursement methodologies until all regions have reached an hourly wage of \$15.00 per hour consistent with enacted legislation.

DRAFT

**New York
6(a)(2)**

1905(a)(24) Personal Care Services

Such rates of payment [shall] will be further adjusted to reflect costs associated with the recruitment and retention of non-supervisory workers. For programs providing services in local social service districts which include a city with a population of over one million persons, such rate adjustments will be calculated by allocating the total dollars available for the applicable rate period to each individual provider proportionally based on total claimed hours of services for personal care services provided in the district to recipients of medical assistance. The allocated dollars will be included as a reimbursable cost add-on to the Medicaid rates of payment based on the Medicaid utilization data as adjudicated through the Medicaid Management Information System (MMIS), or any successor entity, utilizing the most recently available total claimed hours of Medicaid services data, as agreed to by New York State and the district.

For payment periods January 1, 2017, and thereafter, the Commissioner of Health will increase the rates of payment for services provided by all Personal Care providers in accordance with the wage chart shown below to address cost increases resulting from increases to the minimum wage in New York State. Final rates for providers can be found on the Department of Health website:

For New York City Personal Care:

http://www1.nyc.gov/assets/hra/downloads/pdf/services/micsa/rate_chart.pdf

For non New York City Personal Care:

https://www.health.ny.gov/facilities/long_term_care/reimbursement/pcr/

Minimum Wage Chart

Minimum Wage (MW) Region	12/31/2016	12/31/2017	12/31/2018	12/31/2019	12/31/2020	12/31/2021
New York City (Large employers)	\$11.00	\$13.00	\$15.00	\$15.00	\$15.00	\$15.00
New York City (Small employers)	\$10.50	\$12.00	\$13.50	\$15.00	\$15.00	\$15.00
Nassau, Suffolk, & Westchester counties	\$10.00	\$11.00	\$12.00	\$13.00	\$14.00	\$15.00
Remainder of the State	\$9.70	\$10.40	\$11.10	\$11.80	\$12.50	[\$12.50] \$13.20

Minimum wage costs will mean the additional costs incurred beginning January 1, 2017, and thereafter, as a result of New York state statutory increases to minimum wage until all regions of the State reach \$15.00 per hour. Minimum wage cost development will be based on survey data collected.

1. Survey data will be collected for facility specific wage data.

TN #22-0024 **Approval Date** _____
Supersedes TN #17-0026 **Effective Date** January 1, 2022

Public Notice **NYS 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 all services to comply with enacted statutory provisions. The following changes are proposed:

Institutional Services

The following is a clarification to the December 29th, 2021 noticed proposal to adjust Residential Treatment Facility (RTF) rates for providers to consider increased labor costs resulting from increases in the New York State minimum wage in the Remainder of State region. With clarification below, ***this increase includes rates for providers of all services.***

All Services

The Department of Health will adjust rates to take into account increased labor costs resulting from statutorily required increases in the New York State minimum wage. Under the statute, increases in the minimum wage will be phased in over a number of years until the minimum wage is \$15 per hour in the Remainder of State region, and Medicaid rates will be adjusted in those years to account for such increases.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal years 2021/2022 and 2022/2023 is \$3,078,116 and \$12,312,459, respectively.

Providers:	SFY 2021-2022 (1/1/2022 - 3/31/2022)	SFY 2022-2023 (4/1/2022 - 3/31/2023)
Article 16 Freestanding Clinics	\$8,267	\$33,069
Article 28 Freestanding Clinics & Ambulatory Surgery Centers	\$3,475	\$13,900
Assisted Living Programs	\$150,000	\$600,000
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Totals:	\$3,078,116	\$12,312,459

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.

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DRAFT

The Department of Health proposes to amend the Title XIX (Medicaid) State Plan for non-institutional services to comply with enacted statutory provisions. The following changes are proposed:

Non-Institutional Services

Effective on or after January 1, 2022, the Department of Health will adjust the reimbursement rate for Ambulatory Services in Facilities Certified Under Article 16 of the Mental Health Law Clinic Day Treatment program to remove the providers that no longer offer the service and update the reimbursements for the remaining providers based on more current cost data.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2022 is \$300,000.

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.

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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 long term care services to comply with sections 2803, 2895-b, and 2828 of the Public Health Law. The following changes are proposed:

Long Term Care Services

Effective on or after January 1, 2022, the Department of Health will adjust rates for residential health care facilities meeting the requirements set forth in section 2828 of the Public Health Law and implementing regulations. This rate adjustment will support increases in resident-facing staffing services provided by registered nurses, licensed practical nurses, certified nurse aides, and nurse aides in accordance with standards set forth in section 2895-b of the Public Health Law and implementing regulations, which shall be sufficient to attain the highest practicable physical, mental, and psychological well-being of the residents of such residential health care facilities.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to the residential health care facility rate

adjustment is \$128 million as appropriated in the budget for state fiscal year 2021/2022.

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 institutional services to comply with enacted statutory provisions. The following changes are proposed:

Institutional Services

Effective on or after December 31, 2021, the Department of Health will adjust Residential Treatment Facility (RTF) rates for providers to consider increased labor costs resulting from increases in the New York State minimum wage in the Remainder of State region.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2021/2022 is \$16,000.

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.

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PUBLIC NOTICE

Department of Health

The Department of Health proposes to amend the Traumatic Brain Injury (TBI) (waiver number NY.0269.R04.04) and Nursing Home Transition and Diversion (NHTD) (waiver number NY.0444.R02.01) 1915c Waiver Programs in order to implement planned minimum wage-related rate increases pursuant to New York State Minimum Wage regulations effective January 1, 2017. This minimum wage bill stipulates that wages will be increased gradually through 2021. This increase specifically impacts all counties except for all New York City boroughs, Nassau, Suffolk, and Westchester.

Drafts of the proposed amendments to the TBI and NHTD waivers are available for review at: https://health.ny.gov/health_care/medicaid/redesign/mrt90/policy_docs.htm

As of December 31, 2016, the first in a series of wage increases went into effect in New York State. Rates differ based on region and industry to allow for a phase-in of new salaries. Changes take effect on the last day of the year. Annual increases for Upstate New York will continue until the rate reaches a \$15 minimum wage. The annual increases are published by the Commissioner of Labor by October 1. They are based on percentage increases determined by the Director of the Division of Budget, based on economic indices, including the Consumer Price Index. The rate for the “remainder of state” will be \$13.20 per hour effective December 31, 2021. This wage adjustment will require a rate increase of \$.90 per hour for waiver service: Home and Community Support Services (HCSS) for both the Nursing Home Transition and Diversion (NHTD) and Traumatic Brain Injury (TBI) 1915 (c) Medicaid Waivers. The anticipated change to projected gross Medicaid expenditures as a result of this proposed amendment is an increase of \$11.8 million for the remainder of the 5 year waiver cycles.

The public is invited to review and comment on this initiative. Comments may be filed electronically at: waivertransition@health.ny.gov, or mailed to: Department of Health, Office of Health Insurance Programs, Division of Long Term Care, Bureau of Community Integration and Alzheimer’s Disease, One Commerce Plaza, Suite 1605, Albany, NY 12210. All comments must be postmarked or emailed by 30 days of the date of this notice. Include “TBI and NHTD Waiver Amendments” in the subject line and indicate your name and affiliation. Individuals without internet access may contact the Waiver Unit at: (518) 474-5271 to receive additional information.

PUBLIC NOTICE

Department of State

F-2021-0654

Date of Issuance – December 29, 2021

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 (CZMA) of 1972, as amended.

The applicant has certified that the proposed activities comply with and will be conducted in a manner consistent with the federally approved New York State Coastal Management Program (NYSCMP). The applicant’s consistency certification and accompanying public in-

formation and data 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.

In F-2021-0654 the applicant, Village Marine of Westhampton LTD, is proposing to install 552 linear feet of new low sill bulkhead; replace existing 4 feet wide x 464 linear feet fixed docks with floating docks; and dredge 949 cubic yards of sediment to -4’ MLW within existing West and East boat basins. This project is located at 33 Library Avenue, Village of Southampton, Suffolk County, Moneybogue Bay.

The applicant’s consistency certification and supporting information are available for review at: <https://dos.ny.gov/system/files/documents/2021/12/f-2021-0654app.pdf> or at <https://dos.ny.gov/public-notices>

The proposed activity would be located within or has the potential to affect the following Special Management or Regulated Area(s):

- Moriches Bay Significant Coastal Fish and Wildlife Habitats:

https://dos.ny.gov/system/files/documents/2020/03/moriches_bay.pdf

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., 15 days from the date of publication of this notice or January 13, 2022.

Comments should be addressed to: Department of State, Office of Planning and Development and Community Infrastructure, Consistency Review Unit, One Commerce Plaza, Suite 1010, 99 Washington Ave., Albany, NY 12231, (518) 474-6000. 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-2021-0695

Date of Issuance – December 29, 2021

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-2021-0695, Vincent Rovitelli, is proposing to excavate/remove two land peninsulas from an existing marina basin. The peninsula measures 17’-4” wide by 185’-2” long and 10’-1” long by 214’-5” long. The peninsulas would be excavated down to an elevation of 243.5’ IGLD. The project would result in the excavation of up to 1,207 cubic yards of materials (765 from below the plane of Ordinary High Water). A boulder located within the marina basin would also be removed. Dewatering of material would be completed at an upland on-site location with off-site disposal at an approved upland location. Sheet pile would be placed at the landward extent of the each of the excavated peninsulas. In addition, 65 linear feet of sheet pile where the seawall is missing A turbidity curtain would be paced within the channel that separates the marina from Sandy Creek during excavation. The applicant was previously approved to replace existing fixed docks with floating docks throughout the marina basin. Various upland improvements to the site are also proposed.

The proposal is for the Sandy Creek Marina located off of Sandy Creek at Eight Lake Road East Fork in the Town of Hamlin, Monroe County.

The stated purpose of the proposed action is to “Improve the usage and safety of our existing marina.”

The applicant’s consistency certification and supporting information are available for review at: <https://dos.ny.gov/system/files/documents/2021/12/f-2021-0695publicnotice.pdf> or at <https://dos.ny.gov/public-notices>

Original copies of public information and data submitted by the ap-

SUMMARY
SPA #22-0025

This State Plan Amendment proposes a continuation of minimum wage adjustments through current Medicaid reimbursement methodologies until all regions have reached an hourly wage of \$15.00 per hour consistent with enacted legislation.

DRAFT

SPA 22-0025
Attachment A
Annotated Pages

Annotated Page: Page 110(d)(27)

DRAFT

**New York
110(d)(27)**

[Adjustment for Minimum Wage Increases. Effective January 1, 2017, and every January 1, thereafter until the minimum wage reaches the state statutorily described per hour wage as shown below, a minimum wage add-on will be developed and applied to the specialty and non-specialty Nursing Home rate.

Minimum Wage (MW) Region	12/31/2016	12/31/2017	12/31/2018	12/31/2019	12/31/2020	12/31/2021
New York City	\$11.00	\$13.00	\$15.00	\$15.00	\$15.00	\$15.00
Nassau, Suffolk, & Westchester counties	\$10.00	\$11.00	\$12.00	\$13.00	\$14.00	\$15.00
Remainder of the State	\$9.70	\$10.40	\$11.10	\$11.80	\$12.50	\$12.50

The minimum wage adjustment will be developed and implemented as follows:

1. Minimum wage costs will mean the additional costs incurred beginning January 1, 2017 and thereafter, as a result of New York State statutory increases to minimum wages.
2. The 2017 facility specific minimum wage add-on will be developed based on collected survey data received and attested to by nursing facility providers. If a facility does not submit a survey, the minimum wage add-on will be calculated based on the facility's Residential Health Care Facility (RHCF) cost report wage data from two years prior to the period being calculated. If a facility fails to submit both the attested survey and the cost report, the facility's minimum wage add-on will not be calculated.
 - i. Minimum wage cost development based on survey data collected.
 - a. Survey data will be collected for facility specific wage data.
 - b. Facilities will report by wage bands, the total count of FTEs and total hours paid to all employees (contracted and non-contracted staff) earning less than the statutory minimum wage applicable for each region.
 - c. Facilities will report an average fringe benefit percentage for the employees directly affected by the minimum wage increase.
 - d. The minimum wage costs are calculated by multiplying the total hours paid by the difference between the statutory minimum wage and the midpoint of each wage band where the facility has reported total hours paid. To this result, the facility's average fringe benefit percentage is applied and added to the costs.
 - ii. Minimum wage cost development based on the RHCF cost report data.
 - a. The average hourly wages of employees where the reported average hourly wage is below the regional statutory minimum wage are identified.
 - b. The total payroll hours of the employees identified are then multiplied by the regional statutory minimum wage resulting in a projected payroll. The actual payroll as reported in the cost report is then subtracted from the projected payroll resulting in the expected wage costs increase.
 - c. The facility's fringe benefit costs directly affected by the wage increase are identified, and the average fringe benefit percentage is calculated.
 - d. The fringe benefit percentage is applied to the increased wage costs and added resulting in the minimum wage costs.]

TN #22-0025

Approval Date _____

Supersedes TN #17-0007

Effective Date January 1, 2022

**New York
110(d)(27)**

1905(a)(4)(A) Nursing Facility Services

Adjustment for Minimum Wage Increases. Effective January 1, 2017, and every January 1, thereafter until the minimum wage reaches the state statutorily described per hour wage as shown below, a minimum wage add-on will be developed and applied to the specialty and non-specialty Nursing Home rate.

<u>Minimum Wage (MW) Region</u>	<u>12/31/2016</u>	<u>12/31/2017</u>	<u>12/31/2018</u>	<u>12/31/2019</u>	<u>12/31/2020</u>	<u>12/31/2021</u>
<u>New York City</u>	<u>\$11.00</u>	<u>\$13.00</u>	<u>\$15.00</u>	<u>\$15.00</u>	<u>\$15.00</u>	<u>\$15.00</u>
<u>Nassau, Suffolk, & Westchester counties</u>	<u>\$10.00</u>	<u>\$11.00</u>	<u>\$12.00</u>	<u>\$13.00</u>	<u>\$14.00</u>	<u>\$15.00</u>
<u>Remainder of the State</u>	<u>\$9.70</u>	<u>\$10.40</u>	<u>\$11.10</u>	<u>\$11.80</u>	<u>\$12.50</u>	<u>\$12.50*</u>

*Effective January 1, 2022, the minimum wage value for the Remainder of the State shall be \$13.20.

On December 31, 2022 and each December 31 thereafter, a wage published by the commissioner on or before October first, based on the then current minimum wage increased by a percentage determined by the director of the budget in consultation with the commissioner, with the result rounded to the nearest five cents, totaling no more than fifteen dollars, where the percentage increase shall be based on indices including, but not limited to, (i) the rate of inflation for the most recent twelve month period ending June of that year based on the consumer price index for all urban consumers on a national and seasonally unadjusted basis (CPI-U), for a successor index as calculated by the United States department of labor, (ii) the rate of state personal income growth for the prior calendar year, or a successor index, published by the bureau of economic analysis of the United States department of commerce, or (iii) wage growth; or, if greater, such other wage as may be established by federal law pursuant to 29 U.S.C section 206 or its successors or such other wage as may be established.

The minimum wage adjustment will be developed and implemented as follows:

1. Minimum wage costs will mean the additional costs incurred beginning January 1, 2017 and thereafter, as a result of New York State statutory increases to minimum wages until all regions of the state reach \$15.00 per hour.
2. The 2017 facility specific minimum wage add-on will be developed based on collected survey data received and attested to by nursing facility providers. If a facility does not submit a survey, the minimum wage add-on will be calculated based on the facility's Residential Health Care Facility (RHCF) cost report wage data from two years prior to the period being calculated. If a facility fails to submit both the attested survey and the cost report, the facility's minimum wage add-on will not be calculated.
 - i. Minimum wage cost development based on survey data collected.
 - a. Survey data will be collected for facility specific wage data.
 - b. Facilities will report by wage bands, the total count of FTEs and total hours paid to all employees (contracted and non-contracted staff) earning less than the statutory minimum wage applicable for each region.
 - c. Facilities will report an average fringe benefit percentage for the employees directly affected by the minimum wage increase.
 - d. The minimum wage costs are calculated by multiplying the total hours paid by the difference between the statutory minimum wage and the midpoint of each wage band where the facility has reported total hours paid. To this result, the facility's average fringe benefit percentage is applied and added to the costs.

TN #22-0025

Approval Date

Supersedes TN #17-0007

Effective Date January 1, 2022

New York
110(d)(27.1)

1905(a)(4)(A) Nursing Facility Services

Adjustment for Minimum Wage Increases (continued)

- ii. Minimum wage cost development based on the RHCF cost report data.
 - a. The average hourly wages of employees where the reported average hourly wage is below the regional statutory minimum wage are identified.
 - b. The total payroll hours of the employees identified are then multiplied by the regional statutory minimum wage resulting in a projected payroll. The actual payroll as reported in the cost report is then subtracted from the projected payroll resulting in the expected wage costs increase.
 - c. The facility's fringe benefit costs directly affected by the wage increase are identified, and the average fringe benefit percentage is calculated.
 - d. The fringe benefit percentage is applied to the increased wage costs and added resulting in the minimum wage costs.

DRAFT

Public Notice **NYS 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 all services to comply with enacted statutory provisions. The following changes are proposed:

Institutional Services

The following is a clarification to the December 29th, 2021 noticed proposal to adjust Residential Treatment Facility (RTF) rates for providers to consider increased labor costs resulting from increases in the New York State minimum wage in the Remainder of State region. With clarification below, ***this increase includes rates for providers of all services.***

All Services

The Department of Health will adjust rates to take into account increased labor costs resulting from statutorily required increases in the New York State minimum wage. Under the statute, increases in the minimum wage will be phased in over a number of years until the minimum wage is \$15 per hour in the Remainder of State region, and Medicaid rates will be adjusted in those years to account for such increases.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal years 2021/2022 and 2022/2023 is \$3,078,116 and \$12,312,459, respectively.

Providers:	SFY 2021-2022 (1/1/2022 - 3/31/2022)	SFY 2022-2023 (4/1/2022 - 3/31/2023)
Article 16 Freestanding Clinics	\$8,267	\$33,069
Article 28 Freestanding Clinics & Ambulatory Surgery Centers	\$3,475	\$13,900
Assisted Living Programs	\$150,000	\$600,000
Certified Home Health Agencies	\$927	\$3,706
Article 28 Federally Qualified Health Centers (Freestanding Clinics)	\$437	\$1,748
Hospice	\$37,500	\$150,000
Hospital Inpatient	\$10,700	\$42,800
Intermediate Care Facilities	\$626,697	\$2,506,788
Nursing Homes	\$367,516	\$1,470,062
Personal Care	\$1,868,497	\$7,473,986
Residential Treatment Facilities	\$4,100	\$16,400
Totals:	\$3,078,116	\$12,312,459

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:

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Bronx, New York 10457

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Staten Island, New York 10301

For further information and to review and comment, please contact:

New York State Department of Health
Division of Finance and Rate Setting
99 Washington Ave – One Commerce Plaza
Suite 1432
Albany, New York 12210
spa_inquiries@health.ny.gov

DRAFT

The Department of Health proposes to amend the Title XIX (Medicaid) State Plan for non-institutional services to comply with enacted statutory provisions. The following changes are proposed:

Non-Institutional Services

Effective on or after January 1, 2022, the Department of Health will adjust the reimbursement rate for Ambulatory Services in Facilities Certified Under Article 16 of the Mental Health Law Clinic Day Treatment program to remove the providers that no longer offer the service and update the reimbursements for the remaining providers based on more current cost data.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2022 is \$300,000.

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.

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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 long term care services to comply with sections 2803, 2895-b, and 2828 of the Public Health Law. The following changes are proposed:

Long Term Care Services

Effective on or after January 1, 2022, the Department of Health will adjust rates for residential health care facilities meeting the requirements set forth in section 2828 of the Public Health Law and implementing regulations. This rate adjustment will support increases in resident-facing staffing services provided by registered nurses, licensed practical nurses, certified nurse aides, and nurse aides in accordance with standards set forth in section 2895-b of the Public Health Law and implementing regulations, which shall be sufficient to attain the highest practicable physical, mental, and psychological well-being of the residents of such residential health care facilities.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to the residential health care facility rate

adjustment is \$128 million as appropriated in the budget for state fiscal year 2021/2022.

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.

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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

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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 institutional services to comply with enacted statutory provisions. The following changes are proposed:

Institutional Services

Effective on or after December 31, 2021, the Department of Health will adjust Residential Treatment Facility (RTF) rates for providers to consider increased labor costs resulting from increases in the New York State minimum wage in the Remainder of State region.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2021/2022 is \$16,000.

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.

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Drafts of the proposed amendments to the TBI and NHTD waivers are available for review at: https://health.ny.gov/health_care/medicaid/redesign/mrt90/policy_docs.htm

As of December 31, 2016, the first in a series of wage increases went into effect in New York State. Rates differ based on region and industry to allow for a phase-in of new salaries. Changes take effect on the last day of the year. Annual increases for Upstate New York will continue until the rate reaches a \$15 minimum wage. The annual increases are published by the Commissioner of Labor by October 1. They are based on percentage increases determined by the Director of the Division of Budget, based on economic indices, including the Consumer Price Index. The rate for the “remainder of state” will be \$13.20 per hour effective December 31, 2021. This wage adjustment will require a rate increase of \$.90 per hour for waiver service: Home and Community Support Services (HCSS) for both the Nursing Home Transition and Diversion (NHTD) and Traumatic Brain Injury (TBI) 1915 (c) Medicaid Waivers. The anticipated change to projected gross Medicaid expenditures as a result of this proposed amendment is an increase of \$11.8 million for the remainder of the 5 year waiver cycles.

The public is invited to review and comment on this initiative. Comments may be filed electronically at: waivertransition@health.ny.gov, or mailed to: Department of Health, Office of Health Insurance Programs, Division of Long Term Care, Bureau of Community Integration and Alzheimer’s Disease, One Commerce Plaza, Suite 1605, Albany, NY 12210. All comments must be postmarked or emailed by 30 days of the date of this notice. Include “TBI and NHTD Waiver Amendments” in the subject line and indicate your name and affiliation. Individuals without internet access may contact the Waiver Unit at: (518) 474-5271 to receive additional information.

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Department of State

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The applicant has certified that the proposed activities comply with and will be conducted in a manner consistent with the federally approved New York State Coastal Management Program (NYSCMP). The applicant’s consistency certification and accompanying public in-

formation and data 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.

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In F-2021-0695, Vincent Rovitelli, is proposing to excavate/remove two land peninsulas from an existing marina basin. The peninsula measures 17’-4” wide by 185’-2” long and 10’-1” long by 214’-5” long. The peninsulas would be excavated down to an elevation of 243.5’ IGLD. The project would result in the excavation of up to 1,207 cubic yards of materials (765 from below the plane of Ordinary High Water). A boulder located within the marina basin would also be removed. Dewatering of material would be completed at an upland on-site location with off-site disposal at an approved upland location. Sheet pile would be placed at the landward extent of the each of the excavated peninsulas. In addition, 65 linear feet of sheet pile where the seawall is missing A turbidity curtain would be paced within the channel that separates the marina from Sandy Creek during excavation. The applicant was previously approved to replace existing fixed docks with floating docks throughout the marina basin. Various upland improvements to the site are also proposed.

The proposal is for the Sandy Creek Marina located off of Sandy Creek at Eight Lake Road East Fork in the Town of Hamlin, Monroe County.

The stated purpose of the proposed action is to “Improve the usage and safety of our existing marina.”

The applicant’s consistency certification and supporting information are available for review at: <https://dos.ny.gov/system/files/documents/2021/12/f-2021-0695publicnotice.pdf> or at <https://dos.ny.gov/public-notices>

Original copies of public information and data submitted by the ap-

SUMMARY
SPA #22-0031

This State Plan Amendment proposes to assist hospitals by providing a temporary rate adjustment under the closure, merger, consolidation, acquisition, or restructuring of a health care provider.

DRAFT

SPA 22-0031
Attachment A
Annotated Pages

Annotated Pages: 136(c),136(c.1), 136(c.2), 136(c.3)

DRAFT

**New York
136(c)**

[Hospitals (Continued):

Provider Name	Gross Medicaid Rate Adjustment	Rate Period Effective
HealthAlliance Mary's Ave Campus Benedictine Hospital	\$2,500,000	01/01/2014 – 03/31/2014
Interfaith Medical Center	\$12,900,000	11/01/2013 – 03/31/2014
	\$11,110,190	07/01/2018 – 03/31/2019
	\$13,505,285	04/01/2019 – 03/31/2020
	\$13,384,525	04/01/2020 – 03/31/2021
Jamaica Hospital Medical Center	\$8,365,000	07/01/2018 – 03/31/2019
Kingsbrook Jewish Medical Center	\$1,480,000	11/01/2013 – 12/31/2013
	\$2,320,000	01/01/2014 – 03/31/2014
Kings County Hospital Center	\$1,000,000	01/01/2014 – 03/31/2014
Lewis County General Hospital*	\$65,564	01/01/2014 – 03/31/2014
	\$262,257	04/01/2014 – 03/31/2015
	\$262,257	04/01/2015 – 03/31/2016
Lincoln Medical Center	\$963,687	04/01/2012 – 03/31/2013
	\$963,687	04/01/2013 – 03/31/2014
Little Falls Hospital*	\$21,672	01/01/2014 – 03/31/2014
	\$86,688	04/01/2014 – 03/31/2015
	\$86,688	04/01/2015 – 03/31/2016
Long Island Jewish Medical Center	\$1,000,000	04/01/2020 – 03/31/2021
Maimonides Medical Center	\$2,500,000	11/01/2014 – 03/31/2015
Mercy Hospital of Buffalo	\$1,800,000	08/19/2021 – 09/30/2021
	\$1,800,000	10/01/2021 – 12/31/2021
	\$1,800,000	01/01/2022 – 03/31/2022
	\$1,350,000	04/01/2022 – 06/30/2022
	\$1,350,000	07/01/2022 – 09/30/2022
	\$1,350,000	10/01/2022 – 12/31/2022
	\$1,350,000	01/01/2023 – 03/31/2023

*Denotes this provider is a Critical Access Hospital (CAH)]

**New York
136(c.2)**

[Hospitals (Continued):]

Provider Name	Gross Medicaid Rate Adjustment	Rate Period Effective
Richmond University Medical Center	\$8,897,955	01/01/2013 – 03/31/2013
	\$2,355,167	04/01/2013 – 03/31/2014
	\$1,634,311	04/01/2014 – 03/31/2015
	\$9,966,329	07/01/2018 – 03/31/2019
	\$9,869,000	04/01/2019 – 03/31/2020
	\$9,711,500	04/01/2020 – 03/31/2021
St. Barnabas Hospital	\$ 2,588,278	01/01/2013 – 03/31/2013
	\$ 1,876,759	04/01/2013 – 03/31/2014
	\$ 1,322,597	04/01/2014 – 03/31/2015
	\$ 2,500,000	01/01/2017 – 03/31/2017
	\$10,000,000	04/01/2017 – 03/31/2018
	\$10,000,000	04/01/2018 – 03/31/2019
	\$ 7,500,000	04/01/2019 – 12/31/2019
	\$12,000,000	07/01/2018 – 03/31/2019
	\$12,000,000	10/03/2019 – 03/31/2020
	\$12,000,000	04/01/2020 – 03/31/2021
	\$12,000,000	04/01/2021 – 03/31/2022
St. John's Riverside-St. John's Division	\$1,800,000	07/01/2018 – 03/31/2019
	\$ 700,000	04/01/2019 – 03/31/2020
	\$ 500,000	04/01/2020 – 03/31/2021
	\$1,500,000	04/01/2021 – 03/31/2022
St. Joseph's Hospital Health Center	\$4,000,000	04/01/2020 – 03/31/2021
St. Joseph's Medical Center	\$1,500,000	04/01/2021 – 03/31/2022
Soldiers & Sailors Memorial Hospital	\$ 19,625	02/01/2014 – 03/31/2014
	\$ 117,252	04/01/2014 – 03/31/2015
	\$ 134,923	04/01/2015 – 03/31/2016
South Nassau Communities Hospital	\$3,000,000	11/01/2014 – 03/31/2015
	\$1,000,000	04/01/2015 – 03/31/2016
	\$4,000,000	07/01/2018 – 03/31/2019
	\$4,000,000	04/01/2019 – 03/31/2020
	\$4,000,000	04/01/2020 – 03/31/2021

*Denotes this provider is a Critical Access Hospital (CAH).]

New York
136(c.3)

[Hospitals (Continued):

Provider Name	Gross Medicaid Rate Adjustment	Rate Period Effective
Strong Memorial Hospital	\$4,163,227	04/01/2018 – 03/31/2019
	\$4,594,780	04/01/2019 – 03/31/2020
	\$4,370,030	04/01/2020 – 03/31/2021
	\$1,153,579	01/01/2020 - 03/31/2020
	\$2,588,381	04/01/2020 - 03/31/2021
	\$2,235,555	04/01/2021 – 03/31/2022
Wyckoff Heights Medical Center	\$1,321,800	01/01/2014 – 03/31/2014
	\$1,314,158	04/01/2014 – 03/31/2015
	\$1,344,505	04/01/2015 – 03/31/2016

*Denotes this provider is a Critical Access Hospital (CAH)]

DRAFT

New York
136(c)**Hospitals (Continued):**

<u>Provider Name</u>	<u>Gross Medicaid Rate Adjustment</u>	<u>Rate Period Effective</u>
<u>HealthAlliance Mary's Ave Campus Benedictine Hospital</u>	<u>\$2,500,000</u>	<u>01/01/2014 – 03/31/2014</u>
<u>Interfaith Medical Center</u>	<u>\$12,900,000</u>	<u>11/01/2013 – 03/31/2014</u>
	<u>\$11,110,190</u>	<u>07/01/2018 – 03/31/2019</u>
	<u>\$13,505,285</u>	<u>04/01/2019 – 03/31/2020</u>
	<u>\$13,384,525</u>	<u>04/01/2020 – 03/31/2021</u>
<u>Jamaica Hospital Medical Center</u>	<u>\$8,365,000</u>	<u>07/01/2018 – 03/31/2019</u>
	<u>\$2,600,000</u>	<u>03/01/2022 – 03/31/2022</u>
	<u>\$ 650,000</u>	<u>04/01/2022 – 06/30/2022</u>
	<u>\$ 650,000</u>	<u>07/01/2022 – 09/30/2022</u>
	<u>\$ 650,000</u>	<u>10/01/2022 – 12/31/2022</u>
	<u>\$ 650,000</u>	<u>01/01/2023 – 03/31/2023</u>
<u>Kingsbrook Jewish Medical Center</u>	<u>\$1,480,000</u>	<u>11/01/2013 – 12/31/2013</u>
	<u>\$2,320,000</u>	<u>01/01/2014 – 03/31/2014</u>
<u>Kings County Hospital Center</u>	<u>\$1,000,000</u>	<u>01/01/2014 – 03/31/2014</u>
<u>Lewis County General Hospital*</u>	<u>\$65,564</u>	<u>01/01/2014 – 03/31/2014</u>
	<u>\$262,257</u>	<u>04/01/2014 – 03/31/2015</u>
	<u>\$262,257</u>	<u>04/01/2015 – 03/31/2016</u>
<u>Lincoln Medical Center</u>	<u>\$963,687</u>	<u>04/01/2012 – 03/31/2013</u>
	<u>\$963,687</u>	<u>04/01/2013 – 03/31/2014</u>
<u>Little Falls Hospital*</u>	<u>\$21,672</u>	<u>01/01/2014 – 03/31/2014</u>
	<u>\$86,688</u>	<u>04/01/2014 – 03/31/2015</u>
	<u>\$86,688</u>	<u>04/01/2015 – 03/31/2016</u>
<u>Long Island Jewish Medical Center</u>	<u>\$1,000,000</u>	<u>04/01/2020 – 03/31/2021</u>
<u>Maimonides Medical Center</u>	<u>\$2,500,000</u>	<u>11/01/2014 – 03/31/2015</u>
	<u>\$4,387,492</u>	<u>03/01/2022 – 03/31/2022</u>
	<u>\$ 780,702</u>	<u>04/01/2022 – 06/30/2022</u>
	<u>\$ 780,702</u>	<u>07/01/2022 – 09/30/2022</u>
	<u>\$ 780,703</u>	<u>10/01/2022 – 12/31/2022</u>
	<u>\$ 780,703</u>	<u>01/01/2023 – 03/31/2023</u>
	<u>\$ 459,881</u>	<u>04/01/2023 – 06/30/2023</u>
	<u>\$ 459,881</u>	<u>07/01/2023 – 09/30/2023</u>
	<u>\$ 459,881</u>	<u>10/01/2023 – 12/31/2023</u>
	<u>\$ 459,881</u>	<u>01/01/2024 – 03/31/2024</u>

*Denotes this provider is a Critical Access Hospital (CAH)

**New York
136(c.2)**

Hospitals (Continued):

<u>Provider Name</u>	<u>Gross Medicaid Rate Adjustment</u>	<u>Rate Period Effective</u>
<u>Richmond University Medical Center</u>	<u>\$8,897,955</u>	<u>01/01/2013 – 03/31/2013</u>
	<u>\$2,355,167</u>	<u>04/01/2013 – 03/31/2014</u>
	<u>\$1,634,311</u>	<u>04/01/2014 – 03/31/2015</u>
	<u>\$9,966,329</u>	<u>07/01/2018 – 03/31/2019</u>
	<u>\$9,869,000</u>	<u>04/01/2019 – 03/31/2020</u>
	<u>\$9,711,500</u>	<u>04/01/2020 – 03/31/2021</u>
<u>St. Barnabas Hospital</u>	<u>\$ 2,588,278</u>	<u>01/01/2013 – 03/31/2013</u>
	<u>\$ 1,876,759</u>	<u>04/01/2013 – 03/31/2014</u>
	<u>\$ 1,322,597</u>	<u>04/01/2014 – 03/31/2015</u>
	<u>\$ 2,500,000</u>	<u>01/01/2017 – 03/31/2017</u>
	<u>\$10,000,000</u>	<u>04/01/2017 – 03/31/2018</u>
	<u>\$10,000,000</u>	<u>04/01/2018 – 03/31/2019</u>
	<u>\$ 7,500,000</u>	<u>04/01/2019 – 12/31/2019</u>
	<u>\$12,000,000</u>	<u>07/01/2018 – 03/31/2019</u>
	<u>\$12,000,000</u>	<u>10/03/2019 – 03/31/2020</u>
	<u>\$12,000,000</u>	<u>04/01/2020 – 03/31/2021</u>
	<u>\$12,000,000</u>	<u>04/01/2021 – 03/31/2022</u>
<u>St. John’s Episcopal Health-South</u>	<u>\$1,022,650</u>	<u>03/01/2022 – 03/31/2022</u>
<u>St. John’s Riverside-St. John’s Division</u>	<u>\$1,800,000</u>	<u>07/01/2018 – 03/31/2019</u>
	<u>\$ 700,000</u>	<u>04/01/2019 – 03/31/2020</u>
	<u>\$ 500,000</u>	<u>04/01/2020 – 03/31/2021</u>
	<u>\$1,500,000</u>	<u>04/01/2021 – 03/31/2022</u>
	<u>\$1,298,171</u>	<u>03/01/2022 – 03/31/2022</u>
	<u>\$1,467,957</u>	<u>04/01/2022 – 06/30/2022</u>
	<u>\$1,467,957</u>	<u>07/01/2022 – 09/30/2022</u>
	<u>\$1,467,957</u>	<u>10/01/2022 – 12/31/2022</u>
<u>\$1,467,958</u>	<u>01/01/2023 – 03/31/2023</u>	
<u>St. Joseph’s Hospital Health Center</u>	<u>\$4,000,000</u>	<u>04/01/2020 – 03/31/2021</u>
<u>St. Joseph’s Medical Center</u>	<u>\$1,500,000</u>	<u>04/01/2021 – 03/31/2022</u>
	<u>\$ 300,000</u>	<u>03/01/2022 – 03/31/2022</u>
	<u>\$ 300,000</u>	<u>04/01/2022 – 06/30/2022</u>
	<u>\$ 300,000</u>	<u>07/01/2022 – 09/30/2022</u>
	<u>\$ 300,000</u>	<u>10/01/2022 – 12/31/2022</u>
	<u>\$ 300,000</u>	<u>01/01/2023 – 03/31/2023</u>

*Denotes this provider is a Critical Access Hospital (CAH)

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.

NOTICE OF PUBLIC HEARING Hudson River Park Trust

Pursuant to Section 7(6) of the Hudson River Park Act for a proposed Significant Action affecting Hudson River Park, the Hudson River Park Trust hereby gives notice of a public hearing and comment period to consider a proposed new 34-year-term lease agreement (with the option to extend for one additional 10-year period) between the Trust and Chelsea Piers L.P. and North River Operating Company L.P. for the premises located at Piers 59, 60, 61 and Headhouse for sports and recreation, studios, restaurant, retail, office, maritime and other permitted uses.

A virtual public hearing will be held on March 22, 2022 from 4:30 pm to 6:30 pm via Zoom or the public to provide comments on the Proposed Lease.

A copy of the Proposed Lease, a detailed public notice and instructions for accessing the virtual hearing is available at <https://hudsonriverpark.org/locations/chelsea-piers/>

For further information, contact: Robert Nguyen, Hudson River Park Trust, Pier 40, 353 West Street, Room 201, New York, NY 10014, (212) 627-2020, rnguyen@hrpt.ny.gov

PUBLIC NOTICE Brighton Fire District

The Brighton Fire District is soliciting proposals from administrative service agencies relating to trust service, and administration and/or funding of a Deferred Compensation Plan for the employees of Brighton Fire District. They must meet the requirements of section 457 of the Internal Revenue Code and Section 5 of the State Finance Law, including all rules and regulations issued pursuant thereto.

A copy of the proposal questionnaire may be obtained from: Brighton Fire District, Lawrence M. Howk, Treasurer, 3100 East Ave., Rochester, NY 14610, (585) 389-1551

All proposals must be received no later than 30 days from the date of publication in the *State Register*.

PUBLIC NOTICE Department of Civil Service

PURSUANT to the Open Meetings Law, the New York State Civil Service Commission hereby gives public notice of the following:

Please take notice that the regular monthly meeting of the State Civil Service Commission for March 2022 will be conducted on March 9 and March 10 commencing at 10:00 a.m. This meeting will be conducted at NYS Media Services Center, Suite 146, South Concourse, Empire State Plaza, Albany, NY with live coverage available at <https://www.cs.ny.gov/commission/>.

For further information, contact: Office of Commission Operations, Department of Civil Service, Empire State Plaza, Agency Bldg. One, Albany, NY 12239, (518) 473-6598

PUBLIC NOTICE Division of Criminal Justice Services Commission on Forensic Science

Pursuant to Public Officers Law section 104, the Division of Criminal Justice Services gives notice of a meeting of the New York State Commission on Forensic Science to be held on:

Date: March 4, 2022
Time: 9:00 a.m. - 1:00 p.m.

Primary Conference Site:

Division of Criminal Justice Services
Alfred E. Smith Office Bldg.
CrimeStat Rm. 118
80 S. Swan St.
Albany, NY

Secondary Conference Site:

Empire State Development Corporation
(ESDC)
633 3rd Ave.
37th Fl./Conference Rm.
New York, NY

*Identification and sign-in required

Web Streaming information: The webcast information for this meeting will be posted on the Division of Criminal Justice website under the Newsroom, Open Meeting/Webcasts.

<https://www.criminaljustice.ny.gov/pio/openmeetings.htm>

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 Institutional Services as authorized by § 2826 of New York Public Health Law. The following changes are proposed:

Institutional Services

Temporary rate adjustments have been approved for services related to providers that are undergoing closure, merger, consolidation, acquisition or restructuring themselves or other health care providers. The temporary rate adjustments have been reviewed and approved for the following six Hospitals:

- St. Joseph's Medical Center with aggregate payment amounts totaling up to \$300,000 for the period March 1, 2022, through March 31, 2022, and \$1,200,000 for the period April 1, 2022, through March 31, 2023.

- St. John's Riverside with aggregate payment amounts totaling up to \$1,298,171 for the period March 1, 2022, through March 31, 2022, and \$5,871,829 for the period April 1, 2022, through March 31, 2023.

- Jamaica Hospital Medical Center with aggregate payment amounts totaling up to \$2,600,000 for the period March 1, 2022, through March 31, 2022, and \$2,600,000 for the period April 1, 2022, through March 31, 2023.

- Maimonides Medical Center with aggregate payment amounts totaling up to \$4,387,492 for the period March 1, 2022, through March 31, 2022, \$3,122,810 for the period April 1, 2022, through March 31, 2023, and \$1,839,524 for the period April 1, 2023, through March 31, 2024.

- St. John's Episcopal Health – South Shore with aggregate payment amounts totaling up to \$1,022,650 for the period March 1, 2022, through March 31, 2022.

- Wyckoff Heights Medical Center with aggregate payment amounts totaling up to \$970,000 for the period March 1, 2022, through March 31, 2022 and \$3,880,000 for the period April 1, 2022 through March 31, 2023.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2021/2022 is \$10,578,313. The Medicaid expenditures attributable to state fiscal year 2022/2023 and state fiscal year 2023/2024 are \$16,674,639 and \$1,839,524, respectively.

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 State
F-2022-0039

Date of Issuance – February 23, 2022

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 (CZMA) of 1972, as amended.

The applicant has certified that the proposed activities comply with and will be conducted in a manner consistent with the federally approved New York State Coastal Management Program (NYSCMP). The applicant's consistency certification and accompanying public information and data 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.

In F-2022-0039 the applicant, Jonathan Flood, is proposing to install a 16' x 16' boatlift supported by (4) 12" x 35' pressure treated timber pilings within an existing bulkhead cut out and install a 4' x 6' cantilever, 2' x 12' ramp, and 6' x 24' mooring float parallel to the existing bulkhead along the Creek. The purpose of this project is to provide additional mooring of two vessels. This project is located at 126 Peninsula Drive, Town of Babylon, Suffolk County, Fosters Creek.

The applicant's consistency certification and supporting information are available for review at: <https://dos.ny.gov/system/files/documents/2022/02/f-2022-0039app.pdf> or at <https://dos.ny.gov/public-notices>

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 March 25, 2022.

Comments should be addressed to: Department of State, Office of Planning and Development and Community Infrastructure, Consistency Review Unit, One Commerce Plaza, Suite 1010, 99 Washington Ave., Albany, NY 12231, (518) 474-6000. 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

Uniform Code Variance/Appeal Petitions

Pursuant to 19 NYCRR Part 1205, the variance and appeal petitions below have been received by the Department of State. Unless otherwise indicated, they involve requests for relief from provisions of the New York State Uniform Fire Prevention and Building Code. Persons wishing to review any petitions, provide comments, or receive actual notices of any subsequent proceeding may contact Brian Tollisen or Neil Collier, Building Standards and Codes, Department of State, One Commerce Plaza, 99 Washington Ave., Albany, NY 12231, (518) 474-4073 to make appropriate arrangements.

2022-0058 Matter of JL Drafting Inc., John Lagoudes, 707 Route 110, Farmingdale, NY 11735, for a variance concerning safety requirements, including the ceiling height and the height under a girder/soffit. Involved is an existing one-family dwelling located at 525 N. Queens Avenue; Inc. Village of Lindenhurst, NY 11757, County of Suffolk, State of New York.

2022-0060 Matter of Hugh Schaefer, 174 West Merrick Road, Merrick, NY 11566, for a variance concerning safety requirements, including the ceiling height and the height under a girder/soffit. Involved is an existing one-family dwelling located at 119 Willow Avenue; Village Of Hempstead, NY 11550, County of Nassau, State of New York.

2022-0061 Matter of Woodhull Expediting, Amy Devito, 1031 Main Street, Port Jefferson, NY 11777, for a variance concerning safety requirements, including an egress windowsill that will be higher than the required maximum of 44 inches in a finished basement. Involved is an existing one-family dwelling located at 11 Whitford Road; Stony Brook, Town of Brookhaven, NY 11790, County of Suffolk, State of New York.

SUMMARY
SPA #22-0046

This State Plan Amendment proposes to revise the State Plan to provide a temporary rate increase of 11.5 percent to base rates for Outpatient Mental Health Rehabilitative Services for workforce recruitment and retention activities consistent with New York State's approved American Rescue Plan Act of 2021 Section 9817 spending plan. This increase is effective for dates of services from February 1, 2022 through September 30, 2022.

DRAFT

New York
8(b)

1905(a)(13) Rehabilitative Services

**Rehabilitative Services (42 CFR 440.130(d)): OMH outpatient mental health services-
Reimbursement Methodology continued**

**American Rescue Plan Act Section 9817 temporary increased FMAP for Home and
Community-Based Services:**

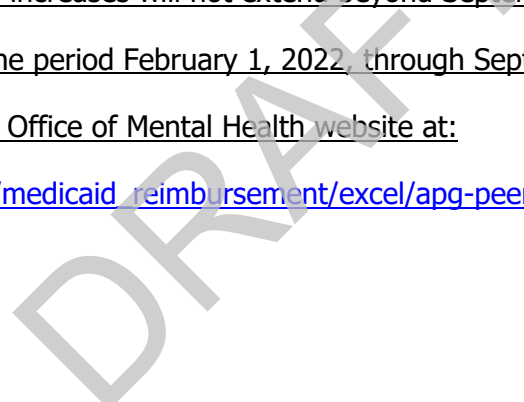
The agency increases payment for providers of services referenced in New York’s American Rescue Plan Act Home and Community Based Services Enhanced Funding Spending Plan. Providers are Social Security Act Section 1905(a) Rehabilitative Services providers listed in Appendix B of the American Rescue Plan Act, State Medicaid Director Letter, SMD# 21-003 Implementation of American Rescue Plan Act of 2021 Section 9817.

The time-limited rate increases described in this section will be used to expand, enhance or strengthen mental health rehabilitative services programs through workforce recruitment and retention strategies consistent with New York’s American Rescue Plan Act Home and Community Based Services Enhanced Funding Spending Plan. Rate increases will not extend beyond September 30, 2022.

The rates were updated for the period February 1, 2022, through September 30, 2022.

All rates are published on the Office of Mental Health website at:

https://omh.ny.gov/omhweb/medicaid_reimbursement/excel/apg-peergroup-base-rate.xlsx



TN 22-0046

Approval Date _____

Supersedes TN NEW

Effective Date February 1, 2022

13. Project Sponsor: Hampden Township. Project Facility: Armitage Golf Club, Hampden Township, Cumberland County, Pa. Application for renewal of consumptive use of up to 0.290 mgd (peak day) (Docket No. 19920101).

14. Project Sponsor and Facility: Millersburg Area Authority, Upper Paxton Township, Dauphin County, Pa. Application for renewal of groundwater withdrawal of up to 0.117 mgd (30-day average) from Well 14 (Docket No. 19930301).

15. Project Sponsor and Facility: Municipal Authority of the Township of East Hempfield dba Hempfield Water Authority, East Hempfield Township, Lancaster County, Pa. Applications for renewal of groundwater withdrawals (30 day averages) of up to 0.353 mgd from Well 6, 0.145 mgd from Well 7, 1.447 mgd from Well 8, and 1.800 mgd from Well 11, and Commission-initiated modification to Docket No. 20120906, which approves withdrawals from Wells 1, 2, 3, 4, and 5 and Spring S-1 (Docket Nos. 19870306, 19890503, 19930101, and 20120906).

16. Project Sponsor and Facility: Repsol Oil & Gas USA, LLC (Sugar Creek), West Burlington Township, Bradford County, Pa. Application for renewal of surface water withdrawal of up to 0.750 mgd (peak day) (Docket No. 20170308).

Project Scheduled for Action Involving a Diversion:

17. Project Sponsor and Facility: Chester Water Authority, New Garden Township, Chester County, Pa. Applications for renewal of consumptive use and for an out-of-basin diversion of up to 3.000 mgd (30-day average) (Docket No. 19961104).

Opportunity to Appear and Comment:

Interested parties may call into the hearing to offer comments to the Commission on any business listed above required to be the subject of a public hearing. Given the nature of the meeting, the Commission strongly encourages those members of the public wishing to provide oral comments to pre-register with the Commission by e-mailing Jason Oyler at joyler@srbc.net prior to the hearing date. The presiding officer reserves the right to limit oral statements in the interest of time and to otherwise control the course of the hearing. Access to the hearing via telephone will begin at 6:15 p.m. Guidelines for the public hearing are posted on the Commission's website, www.srbc.net, prior to the hearing for review. The presiding officer reserves the right to modify or supplement such guidelines at the hearing. Written comments on any business listed above required to be the subject of a public hearing may also be mailed to Mr. Jason Oyler, Secretary to the Commission, Susquehanna River Basin Commission, 4423 North Front Street, Harrisburg, Pa. 17110-1788, or submitted electronically through <https://www.srbc.net/regulatory/public-comment/>. Comments mailed or electronically submitted must be received by the Commission on or before February 14, 2021, to be considered.

Authority: Pub. L. 91-575, 84 Stat. 1509 et seq., 18 CFR Parts 806, 807, and 808.

Dated: January 6, 2022

Jason E. Oyler,

General Counsel and Secretary to the Commission

PUBLIC NOTICE

Department of Civil Service

PURSUANT to the Open Meetings Law, the New York State Civil Service Commission hereby gives public notice of the following:

Please take notice that the regular monthly meeting of the State Civil Service Commission for February 2022 will be conducted on February 9 and February 10 commencing at 10:00 a.m. This meeting will be conducted at NYS Media Services Center, Suite 146, South Concourse, Empire State Plaza, Albany, NY with live coverage available at <https://www.cs.ny.gov/commission/>.

For further information, contact: Office of Commission Operations, Department of Civil Service, Empire State Plaza, Agency Bldg. One, Albany, NY 12239, (518) 473-6598

PUBLIC NOTICE

Division of Criminal Justice Services
DNA Subcommittee

Pursuant to Public Officers Law section 104, the Division of Criminal Justice Services gives notice of a meeting of the New York State DNA Subcommittee to be held on:

Date: February 4, 2022

Time: 10:00 a.m. - 12:00 p.m.

Primary Video Conference Site:

Division of Criminal Justice Services
Alfred E. Smith Office Building
CrimeStat Room 118
80 South Swan Street
Albany, NY

Web Streaming information: The webcast information for this meeting will be posted on the Division of Criminal Justice website under the Newsroom, Open Meeting/Webcasts.

<https://www.criminaljustice.ny.gov/pio/openmeetings.htm>

PUBLIC NOTICE

Deferred Compensation Board

- Pursuant to the provisions of 9 NYCRR, Section 9003.2, authorized by Section 5 of the State Finance Law, the New York State Deferred Compensation Board, beginning Friday, January 28, 2022, is soliciting proposals from financial organizations to provide Active Fixed Income investment management services benchmarked to the Bloomberg Aggregate Index.

- One or more financial organizations may be selected for purposes of investing a portion of the New York State Deferred Compensation Plan's Stable Income Fund in the above fixed income strategies. Assets will be held in the Stable Income Fund's custodial account and will be wrapped by a benefit responsive contract that is selected separately by the Stable Income Fund structure manager. The Stable Income Fund is offered as an investment option under the Deferred Compensation Plan for Employees of the State of New York and Other Participating Public Jurisdictions, a plan meeting the requirements of Section 457 of the Internal Revenue Code and Section 5 of the State Finance Law, including all rules and regulations issued pursuant thereto. A copy of the request for proposals will be posted on Callan LLC's website: www.callan.com and on the Board's web site: deferredcompboard.ny.gov

- Proposals must be received no later than the close of business on Friday, March 18, 2022.

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 to enhance, and increase access to, Home and Community Based Services (HCBS) in accordance with the federal statutory provisions of Section 9817 of the American Rescue Plan Act of 2021 (ARP) which, subject to approval of the State's spending plan, New York State quarterly reports and narrative (Spending Plan) by the Centers for Medicare and Medicaid Services (CMS), provides a ten percent increase in Federal Medical Assistance Percentage (FMAP) to state Medicaid programs from April 1, 2021 to March 31, 2022 to supplement existing state expenditures on HCBS. The following changes are proposed:

Non-Institutional Services

Contingent upon CMS approval of the Spending Plan submitted by the State, this notice proposes to increase reimbursement rates, as follows:

1) Rates for state-plan approved Outpatient Mental Health Rehabilitative Services will be increased by 5.0 percent, effective February 1,

2022. This enhancement will allow providers to supplement the implementation of one or more activities to enhance, expand or strengthen HCBS under the Medicaid program, including strengthening the response to the COVID-19 Public Health Emergency, executing peer support service provision, expanding offsite service delivery, implementing electronic health record (EHR) changes, and strengthening provider staffing resources. The estimated annual net aggregate increase in gross Medicaid expenditures as a result of the proposed increase for Outpatient Mental Health Rehabilitative Services is \$5,300,000 in State Fiscal Year 2022 growing to \$31,700,000 annually.

2) Rates for state-plan approved Outpatient Mental Health Rehabilitative Services will be increased by an additional 11.5 percent for the period February 1, 2022 – September 30, 2022. This enhancement will allow providers to increase recruitment and retention of experienced and dedicated direct care and other staff through measures including, but not limited to, targeted loan forgiveness, tuition reimbursement, hiring and signing bonuses, longevity payments, expanded student placements, shift differential pay and retirement contributions.

The estimated annual net aggregate increase in gross Medicaid expenditures as a result of this proposed increase for Outpatient Mental Health Rehabilitative Services is \$12,200,000 in State Fiscal Year 2022 and \$36,500,000 in State Fiscal Year 2023.

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 institutional services. The following changes are proposed:

Institutional Services

Effective on or after February 1, 2022, Residential Treatment Facilities (RTF) rates may be adjusted to consist of a percentage increase on the clinical/direct care (C/DC) rate component to include additional

funds appropriate to maintain the required level of care that are not reflected in the base year.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2022/2023 is \$6,000,000.

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 State

F-2021-0962

Date of Issuance – January 26, 2022

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 (CZMA) of 1972, as amended.

The applicant has certified that the proposed activities comply with and will be conducted in a manner consistent with the federally approved New York State Coastal Management Program (NYSCMP). The applicant's consistency certification and accompanying public information and data 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.

In F-2021-0962, Niagara Mohawk Power Corporation is proposing the installation of a submarine cable (1.5") (7.6kV) to extend from the shore of Welcome Island to Knobby Island. Cable to extend from property owned by Peter R Lembo and Jodette Magari-Lembo, along the natural bottom of the St. Lawrence River, to the point of land on Knobby Island, owned by A. John and Beverly Merola, Alexandria Bay, NY 13607 for approximately 550' in length.

The applicant's consistency certification and supporting information are available for review at: <https://dos.ny.gov/system/files/documents/2022/01/f-2021-0962knobbyisland.pdf> or at <https://dos.ny.gov/public-notices>

Any interested parties and/or agencies desiring to express their views concerning any of the above proposed activities may do so by