



## Department of Health

**KATHY HOCHUL**  
Governor

**JAMES V. McDONALD, M.D., M.P.H.**  
Commissioner

**JOHANNE E. MORNE, M.S.**  
Acting Executive Deputy Commissioner

September 14, 2023

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/](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/

Amir Bassiri  
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 #23-0072**

This State Plan Amendment proposes to continue certified public expenditures (CPEs) reimbursement methodology for School Supportive Health Services. The Department also proposes to expand the Preschool/School Supportive Health Services Program (SSHSP) to include services provided to Medicaid-enrolled students without Individualized Education Plans (IEPs) under 'free care' option (ref. SMD letter 14-0006).

DRAFT

New York  
2(xii)(A)

~~1905(a)(4)(b): Early and Periodic Screening, Diagnostic and Treatment~~  
~~services (EPSDT).~~

School Supportive Health Services and Pre-School Supportive Health Services

School Supportive Health Services (SSHS) and Pre-School Supportive Health Services (PSSHS) are services provided by or through a school district, a county in the State, or New York City to children with disabilities, who attend public or State Education Department approved schools or preschools. The services must be:

- medically necessary and included in a Medicaid covered category in accordance with 1905(a), 1905(r)(5), 1903(c) of the Social Security Act;
- ordered or prescribed by a physician or other licensed practitioner acting within his or her scope of practice under New York State Law;
- included in the child's Individualized Education Program (IEP) (psychological evaluations and counseling do not need to be recommended in an IEP);
- provided by qualified professionals under contract with or employed by a school district or a county in the State or the City of New York;
- furnished in accordance with all requirements of the State Medicaid Program and other pertinent state and federal laws and regulations, including those for provider qualifications, comparability of services, and the amount, duration and scope provisions; and
- included in the state's plan or available under Early Periodic Screening, Diagnostic and Treatment (EPSDT) services.

Effective September 1, 2009, the services covered by the SSHS and PSSHS Program for Medicaid eligible children under the age of 21 who are eligible for Early and Periodic Screening, Diagnostic and Treatment services (EPSDT) include medically necessary physical therapy services, occupational therapy services, speech therapy services, psychological counseling, skilled nursing services, psychological evaluations, medical evaluations, medical specialist evaluations, audiological evaluations, and special transportation within the limits of EPSDT services. A school district, a county in the State, and New York City must be enrolled as a Medicaid provider in order to bill Medicaid.

### 1. Physical Therapy Services

**Definition:** Physical therapy services outlined in this section of the State Plan are available to Medicaid eligible beneficiaries under 21 years of age, who are eligible for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services and for whom services are medically necessary. These services are provided in accordance with 42 CFR 440.110(a).

TN #23-0072

Approval Date \_\_\_\_\_

Supersedes TN #17-0057

Effective Date July 1, 2023





New York  
2(xii)(L)

**1905(a)(4)(b) Early and Periodic Screening, Diagnostic and Treatment services**

Services ~~may~~ will be provided by:

- a New York State licensed and registered psychiatrist, qualified in accordance with 42 CFR Section 440.50(a) and other applicable state and federal law or regulations, acting within his or her scope of practice under NYS law; or
- a New York State licensed and registered psychologist, qualified in accordance with 42 CFR Section 440.60(a) and other applicable state and federal law or regulations, acting within his or her scope of practice under NYS law.

Services ~~may~~ will be rendered in ~~the settings in which the child's IEP will be implemented,~~ including but not limited to Article 28 facilities, Board of Cooperative Educational Services (BOCES) programs, approved preschool programs, public schools, approved private schools, Section 4201 schools, state operated schools, in private practitioner's offices, and/or in community based settings.

**7. Medical Evaluations**

**Definition:** Medical evaluations outlined in this section of the State Plan are available to Medicaid-eligible beneficiaries under 21 years of age, who are eligible for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) services and for whom services are medically necessary. These services are provided in accordance with 42CFR Section 440.50(a), 440.60(a), and 440.166(a).

**Services:** Medically necessary EPSDT services are health care, diagnostic services, treatments, and other measures to correct or ameliorate physical defects, mental illnesses, and other disabilities.

Medical evaluations provided by or through: a school district; a county in the State or the City of New York must be performed by a physician, physician assistant, or nurse practitioner acting within the scope of his or her practice under New York State law. A medical evaluation must be included in the IEP as recommended by the Committee on Preschool Special Education (CPSE) or Committee on Special Education (CSE). If a medical evaluation is used to identify a child's health related needs as part of the IEP process, the evaluation is eligible for Medicaid coverage once the evaluation is reflected in the child's IEP.

A medical evaluation is the recording of:

- chief complaints;
- present illness;

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Effective Date July 1, 2023







New York  
2(xii)(K)

1905(a)(4)(b) Early and Periodic Screening, Diagnostic and Treatment services

programs, approved preschool programs, public schools, approved private schools, Section 4201 schools, state operated schools, in private practitioner's offices, and/or in community based settings.

**6. Psychological Evaluations**

**Definition:** Psychological evaluations outlined in this section of the State Plan are available to Medicaid-eligible beneficiaries under 21 years of age, who are eligible for Early and Periodic Screening, Diagnostic and Treatment (EPSDT) services and for whom services are medically necessary. These services are provided in accordance with 42CFR Section 440.50(a) and 42CFR Section 440.60(a).

Psychological evaluations provided by or through a school district; a county in the State or the City of New York must have a referral from a physician, physician assistant, or a nurse practitioner acting within his or her scope of practice under New York State law or an appropriate school official or other voluntary health or social agency and must be provided to a child by a qualified practitioner. ~~Psychological evaluations must be included in the IEP as recommended by the Committee on Preschool Special Education (CPSE) or Committee on Special Education (CSE). If a psychological evaluation is used to identify a child's health-related needs as part of the IEP process, the evaluation is eligible for Medicaid coverage once the evaluation is reflected in the child's IEP.~~

**Services:** Medically necessary EPSDT services are health care, diagnostic services, treatments, and other measures to correct or ameliorate physical defects, mental illnesses, and other disabilities.

Psychological evaluations include but are not limited to:

- Administering psychological tests and other assessment procedures;
- Interpreting testing and assessment results, and
- Evaluating a Medicaid recipient for the purpose of determining the needs for specific psychological, health or related services.

**Providers:** Psychological evaluations must be provided by a qualified provider who meets the requirements of 42 CFR Section 440.60 or 42 CFR Section 440.50(a) and other applicable state and federal laws and regulations. Psychological evaluation services ~~may will~~ only be provided by a professional whose credentials are comparable to those of providers who are able to provide psychological evaluation services in the community.

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**New York  
17(I)**

**1905(a)(4)(b) Early and Periodic Screening, Diagnostic and Treatment services**

*a. Direct Medical Services*

Non-federal cost pool for allowable providers consists of:

- i. Salaries;
- ii. Benefits (employer paid);
- iii. Medically-related purchased services; and
- iv. Medically-related supplies and materials.

*b. Contracted Service Costs*

Contracted service costs represent the costs incurred by the Local Education Agency (LEA) for IEP direct medical services rendered by a contracted service provider. Total contracted service costs are inclusive of only those costs for the provision of IEP direct medical services.

Total contracted service costs are reduced for any federal fund or other reduction, including revenue offsets, and further reduced by the application of the LEA IEP Ratio in order to determine the Medicaid IEP direct medical service contract costs. Contracted service costs are not eligible for the application of the unrestricted indirect cost rate.

*c. Tuition Costs*

~~Tuition costs represent the costs incurred by the LEA for a student placed in an out-of-district (private school, §4201 school) or preschool agency setting. Tuition costs will be reflective of only those costs related to the provision of IEP direct medical services and are not eligible for the application of the unrestricted indirect cost rate. The health related portion of the tuition costs will be determined through the application of a health related tuition percentage to the annual tuition costs reported by the school district. The health related tuition percentage will be specific to each out-of-district provider and will be calculated annually based on annual financial reports, the CFR, submitted to the New York State Education Department (SED). The CFRs used in calculating the health related tuition percentage will be those from the most current, complete year available. For example, for the cost reports covering October 1, 2011 – June 30, 2012, the CFRs from the 2009-2010 school year were used in calculating the health related tuition percentages. The methodology used to calculate health related tuition percentages is currently available on the Department of Health website at:~~

~~[https://www.health.ny.gov/health\\_care/medicaid/program/psshsp/](https://www.health.ny.gov/health_care/medicaid/program/psshsp/)~~

~~and the State Education Department website at:~~

~~<http://www.oms.nysed.gov/medicaid/CPEs/home.html>~~

~~The methodology is also found in the approved Cost Reporting Guide and on the Dashboard of the web-based cost reporting tool.~~

~~**NOTE:** Effective with the cost reporting period beginning on July 1, 2013 a health related portion of tuition payments related to the provision of IEP direct medical services for students in §4201 schools may be included in the cost report for the school district of residence. Effective July 1, 2013 §4201 schools are not eligible to bill for Medicaid services.~~

TN   #23-0072  

Approval Date \_\_\_\_\_

Supersedes TN   #11-0039-A  

Effective Date   July 1, 2023







**New York  
17(l)(iii)(1)**

**1905(a)(4)(b) Early and Periodic Screening, Diagnostic and Treatment services**

**3. Time Study (continued):**

*Direct Medical Service Therapy RMTS Percentage*

- a. Fee-For-Service RMTS Percentage
  - i. Direct Medical Service Therapy Cost Pool (IEP): Apply the Direct Medical Service percentage from the Random Moment Time Study (Activity Code 4.b.). The direct medical service costs and time study results must be aligned to assure appropriate cost allocation.
  - ii. Direct Medical Service Therapy Cost Pool: Apply the Direct Medical Service percentage from the Random Moment Time Study (Activity Code 4.c.). The direct medical service costs and time study results must be aligned to assure appropriate cost allocation.
  
- b. General Administrative Percentage Allocation
  - i. Direct Medical Service Therapy Cost Pool: Apply the General Administrative time applicable to the Direct Medical Services percentage from the Random Moment Time Study (Activity Code 10). The direct medical services costs and time study results must be aligned to assure appropriate cost allocation.

*Direct Medical Service All Other RMTS Percentage*

- a. Fee-For-Service RMTS Percentage
  - i. Direct Medical Service All Other Cost Pool (IEP): Apply the Direct Medical Service percentage from the Random Moment Time Study (Activity Code 4.b.). The direct medical service costs and time study results must be aligned to assure appropriate cost allocation.
  - ii. Direct Medical Service All Other Cost Pool: Apply the Direct Medical Service percentage from the Random Moment Time Study (Activity Code 4.c.). The direct medical service costs and time study results must be aligned to assure appropriate cost allocation.

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Approval Date                     

Supersedes TN     NEW    

Effective Date     July 1, 2023

New York  
17(m)

**1905(a)(4)(b) Early and Periodic Screening, Diagnostic and Treatment services**

b.General Administrative Percentage Allocation

- i. Direct Medical Service All Other Cost Pool: Apply the General Administrative time applicable to the Direct Medical Services percentage from the Random Moment Time Study (Activity Code 10). The direct medical services costs and time study results must be aligned to assure appropriate cost allocation.

The formula below details the Direct Medical Percentage (Activity Code 4.b) with the applicable portion of General Administration (Activity Code 10) reallocated to it. The same calculation is completed for the Direct Medical Service Therapy and Direct Medical Service All Other cost pools.

- A = All Codes
- D = IEP Direct Medical Services (Activity Code 4.b)
- R = Redistributed Activities (Activity Code 10)
- U = Unallowable (Activity Code 11)

$$D + \left( \frac{D}{A - R - U} * R \right) / A$$

*Direct Medical Service Percentage =*

4. **IEP Medicaid Eligibility Ratio:** A district-specific IEP Ratio will be established for each participating school-district. When applied, this IEP Ratio will discount the Direct Medical cost pool by the percentage of IEP Medicaid students. The IEP ratio will be based on child count reporting of students that had a direct medical service in an IEP during the school year for which the report is completed. *For example*, for the cost reporting period covering July 1, 2012 through June 30, 2013, the IEP Ratio will be based on the count of students with an IEP at any time during the July 1, 2012 through June 30, 2013 school year. The numerator will be the number of Medicaid eligible IEP students in the LEA for whom at least one claim was processed through the MMIS for the year for which the report is completed. The denominator will be the total number of students in the LEA with an IEP with a direct medical service as outlined in their IEP at any time during the school year reporting period. Direct medical services are those services billable under the SSHA program.

The IEP Medicaid Eligibility Ratio will be calculated on an annual basis using student counts, as described above, and MMIS data for the fiscal year for which the cost report is completed.

Medicaid Enrollment Ratio for non-IEP Other Medical Plans of Care (for example, including Individual Health Care Plans, Behavioral Health Care Plans, 504 Plans, etc.). The Medicaid Enrollment Ratio for Other Plans of Care will be used in the calculation of the Medicaid Direct Medical Service costs pursuant to medical plans of care other than an IEP/IFSP. The numerator of this rate will be Medicaid eligible non-IEP students in the LEA for whom at least one claim was processed through the MMIS for the year for which the report is completed and the denominator will be the total number of students. This ratio will be calculated for each LEA on an annual basis.

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Supersedes TN   #16-0019  

Effective Date   July 1, 2023



New York  
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1905(a)(4)(b) Early and Periodic Screening, Diagnostic, and Treatment ~~S~~services

**H. Cost Reconciliation Process**

Once all interim claims (CPT/HCPCS claims) are paid, the State will calculate the final reconciliation and settlement. There will be separate settlements for every Medicaid provider. The cost reconciliation process will be completed after the reporting period covered by the annual SSHSP Cost Report. The total CMS-approved, Medicaid allowable scope of costs based on CMS-approved cost allocation methodology procedures is compared to the provider's Medicaid interim payments for school health services delivered during the reporting period as documented in the MMIS and CMS-64 form, resulting in cost reconciliation.

For the purposes of cost reconciliation, the State ~~may~~ will not modify the CMS-approved scope of costs, the CMS-approved cost allocation methodology procedures, or its CMS-approved time study for cost-reporting purposes. CMS approval will be sought prior to any modification to the scope of cost, cost allocation methodology procedures, or time study for cost-reporting purposes.

**I. Cost Settlement Process**

For services delivered for a period covering July 1st through June 30th the annual SSHSP Cost Report is due on or before December 31st of the same year. The final reconciliation will occur prior to the 24th month following the end of the fiscal period to ensure all claims are paid through MMIS for the dates of service in the reporting period.

As part of the final cost reconciliation and cost settlement DOH will conduct an analysis of the Medicaid payments to ensure compliance with the requirements for efficiency and economy as outlined in the Social Security Act section 1902(a)(30)(A) and LEAs found to be out of compliance ~~may~~ will be subjected to a corrective action plan.

If final reconciled settlement payments exceed the actual, certified costs of the provider for SSHSP services to Medicaid clients, an amount equal to the overpayment will be returned. Overpayments will be recouped within one year from the date that the overpayment was discovered.

If actual, certified costs of a provider for SSHSP services exceed the interim claiming, the DOH and the providers will share in the retention of the incremental payment. The final settlement will be an accounting adjustment that is made off-line for each provider. The State will report the final settlement that is paid to each provider on the CMS-64 form for the quarter corresponding to the date of payment.

**J. Sunset Date**

Effective for dates of service on or after July 1, 202~~0~~3 through June 30, 202~~3~~6; the State will be able to process cost reconciliations and cost settlements on all cost reports completed for the fiscal years covering dates of service through June 30, 202~~3~~6.

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Approval Date   

Supersedes TN         #20-0059        

Effective Date         July 1, 2023

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

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

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

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

### PUBLIC NOTICE

#### Department of Health

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

The Department of Health proposes to amend the Title XIX (Medicaid) State Plan for non-institutional services to comply with Sections 368-d and 368-e of the Social Services Law. The following changes are proposed:

#### Non-Institutional Services

Effective on or after July 1, 2023, the Department of Health proposes to request federal approval to extend utilization of certified public expenditures (CPEs) reimbursement methodology for School Supportive Health Services. The Department also intends to request federal approval to include coverage of medical services under the Medicaid School Supportive Health Services Program (SSHSP) for all Medicaid-enrolled students, including those without an Individualized Education Plan.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2023-2024 is \$25 million.

The public is invited to review and comment on this proposed State Plan Amendment, a copy of which will be available for public review on the Department's website at [http://www.health.ny.gov/regulations/state\\_plans/status](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  
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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

#### New York City Deferred Compensation Plan and NYCE IRA

The New York City Deferred Compensation Plan & NYCE IRA (the "Plan") is seeking proposals from qualified vendors to provide Investment Consulting Services for the City of New York Deferred Compensation Plan. The Request for Proposals ("RFP") will be available beginning on Monday, June 12, 2023. Responses are due no later than 4:30 p.m. Eastern Time on Friday, June 30, 2023. To obtain a copy of the RFP, please visit the Plan's website at [www1.nyc.gov/site/olr/about/about-rfp.page](http://www1.nyc.gov/site/olr/about/about-rfp.page) and download and review the applicable documents.

*If you have any questions, please email them to:* Georgette Gestely, Director, at [RFPMail@nyceplans.org](mailto:RFPMail@nyceplans.org)

Consistent with the policies expressed by the City, proposals from certified minority-owned and/or women-owned businesses or proposals that include partnering arrangements with certified minority-owned and/or women-owned firms are encouraged. Additionally, proposals from small and New York City-based businesses are also encouraged.

### PUBLIC NOTICE

#### Department of State

F-2023-0357

Date of Issuance – June 28, 2023

The New York State Department of State (DOS) is required by Federal regulations to provide timely public notice for the activities described below, which are subject to the consistency provisions of the Federal Coastal Zone Management Act (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-2023-0357, the applicant, Gina Yannucci, is proposing to remove existing fixed dock and floats and install a new 4' x 120' open grate catwalk leading to seasonal 3' x 30' ramp, 5' x 40' float, 15' x 15' float, and 6' x 12' jet ski float. Catwalk to be elevated 4' over tidal vegetation, supported by (22) 10" diameter piles, and floats will be chocked 24" off bottom. This project is located at 98 Old Field Road, Village of Old Field, Suffolk County, Conscience Bay

The applicant's consistency certification and supporting information are available for review at: <https://dos.ny.gov/system/files/documents/2023/06/f-2023-0357.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):

- Conscience Bay, Little Bay, & Setauket Harbor Significant Coastal Fish and Wildlife Habitat: [https://dos.ny.gov/system/files/documents/2020/03/conscience\\_bay\\_little\\_bay\\_setauket\\_harbor.pdf](https://dos.ny.gov/system/files/documents/2020/03/conscience_bay_little_bay_setauket_harbor.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., 30 days from the date of publication of this notice or July 28, 2023.

*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](mailto:CR@dos.ny.gov)

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

**SUMMARY**  
**SPA #23-0073**

This State Plan Amendment proposes to expand Applied Behavior Analysis services provided by New York State Licensed Behavior Analysts to all Medicaid eligible individuals, regardless of age. The current State Plan limits Applied Behavior Analysis services to individuals under 21 years of age.

DRAFT



New York  
2(xv)(2)

**1905(a)(6) Medical care, or Any Other Type of Remedial Care**

**6.d(i). Other Licensed Practitioners (EPSDT-only)**

**Applied Behavior Analysis**

In accordance with 42 CFR 440.60(a), the following licensed providers are covered within their scope of practice as defined by state law: Licensed Behavior Analyst (LBA). Effective on or after October 1, 2019, Medical assistance ~~shall~~will include applied behavior analysis where such service is provided by a Licensed Behavior Analyst (LBA), or under the supervision of an LBA. Effective on or after July 1, 2023, Medical assistance will include applied behavior analysis where such service is provided by a Licensed Behavior Analyst (LBA), or under the supervision of an LBA, for all individuals regardless of age, removing the EPSDT under 21 age limitation.

DRAFT

TN     #23-0073    

Approval Date                                 

Supersedes TN     #19-0046    

Effective Date     July 1, 2023

# 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](http://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 July 2023 will be conducted on July 19 and July 20 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

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 in accordance with the Public Health Law § 2807(2-a)(e). The following changes are proposed:

### Non-Institutional Services

Effective on or after July 1, 2023, the Ambulatory Patient Group (APG) reimbursement methodology is revised to include recalculated weight and component updates in order to update reimbursement for APG payments.

The estimated annual aggregate increase in gross Medicaid expenditures as a result of this proposed amendment is \$4 Million.

The public is invited to review and comment on this proposed State Plan Amendment, a copy of which will be available for public review on the Department's website at <http://www.health.ny.gov/regulations/>

state\_plans/status. Individuals without Internet access may view the State Plan Amendments at any local (county) social services district.

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Brooklyn, New York 11201

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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](mailto:spa_inquiries@health.ny.gov)

## PUBLIC NOTICE

Department of Health

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

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

### Non - Institutional Services

Effective on or after July 1, 2023, pursuant to Social Services Law § 365-a(2)(jj), as added by section 1 of chapter 733 of the laws of 2022, applied behavior analysis provided by a person licensed, certified, or otherwise authorized to provide applied behavior analysis under article one hundred sixty-seven of the New York State Education Law will be added to Medicaid standard coverage for all enrollees when medically necessary.

The estimated net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2023-2024 is \$117 million.

The public is invited to review and comment on this proposed State Plan Amendment, a copy of which will be available for public review on the Department's website at [http://www.health.ny.gov/regulations/state\\_plans/status](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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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 the New York Public Health Law. The following changes are proposed:

#### Long Term Care Services

Effective on or after July 1, 2023, the Department of Health proposes to amend the Title XIX (Medicaid) State Plan for institutional services related to temporary rate adjustments to long term care providers that are undergoing closure, merger, consolidation, acquisition or restructuring themselves or other health care providers. These payments are authorized by current State statutory and regulatory provisions. The temporary rate adjustments will be reviewed and approved by the CINERGY Collaborative.

The estimated net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2023-2024 is \$30 million.

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

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

New York County  
250 Church Street  
New York, New York 10018

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

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

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

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

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

## PUBLIC NOTICE

### Department of Health

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

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

#### Non-Institutional Services

Effective on or after July 1, 2023, this notice proposes to establish Medical Assistance coverage and rates of payment for Coordinated Specialty Care (CSC), an evidence-based practice model for the treatment of young people experiencing a first episode of psychosis (FEP). CSC services are intended to benefit adolescents and young adults with the recent onset of a psychotic disorder, helping to prevent acute service use, reduce disability, and help young people with early psychosis stay on track with their goals for school, work, and relationships.

The estimated aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2024 is \$4.8 million and \$6.4 million for state fiscal year 2025.

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](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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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

**SUMMARY**  
**SPA #23-0075**

This State Plan Amendment proposes to establish Medical Assistance coverage and rates of payment for Coordinated Specialty Care (CSC), an evidence-based practice model for the treatment of young people experiencing a first episode of psychosis (FEP).

DRAFT



New York  
3b-79

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

**13.d Rehabilitative Services**  
**Coordinated Specialty Care Services**

**Assurances:**

The State assures that all rehabilitative services are provided to, or directed exclusively toward the treatment of the Medicaid-eligible individual in accordance with section 1902(a)(10)(A)(i) of the Act.

The State assures that rehabilitative services do not include and FFP is not available for any of the following in accordance with section 1905(a)(13) of the Act:

- A. educational, vocational and job training services;
- B. room and board;
- C. habilitation services;
- D. services to inmates in public institutions as defined in 42 CFR §435.1010;
- E. services to individuals residing in institutions for mental diseases as described in 42 CFR §435.1010;
- F. recreational and social activities; and-
- G. services that must be covered elsewhere in the state Medicaid plan.

**Description:**

Coordinated Specialty Care (CSC) is an evidence-based practice service model recognized by the Substance Abuse and Mental Health Services Administration of the U.S. Department of Health and Human Services for the treatment of young people experiencing a first episode of psychosis (FEP). CSC services are services for adolescents and young adults with the recent onset of a psychotic disorder that are designed to reduce disability, restore functionality, and reduce acute service use.

CSC services are provided by a team of specialists who work with the beneficiary and their family to create a personalized treatment plan. CSC principles of care include shared decision-making, youth-friendly and welcoming environments, equity and inclusion, and flexible and accessible services to minimize barriers for young people who have difficulties engaging in treatment during initial psychosis symptom onset.

CSC Services are recommended by a licensed practitioner of the healing arts acting within the scope of their professional license and applicable New York State law, including licensed Physicians, Physician Assistants, Nurse Practitioners, Registered Professional Nurses, Psychologists, Licensed Clinical Social Workers (LCSW), Licensed Master Social Workers (LMSW) under the supervision of a LCSW, licensed psychologist or psychiatrist, Licensed Mental Health Counselors (LMHC), Licensed Marriage and Family Therapists (LMFT), Licensed Creative Arts Therapists (LCAT), and Psychoanalysts.

**Provider Qualifications:**

CSC services are provided by a multidisciplinary team of professional and paraprofessional staff under the supervision of professional staff.

TN #23-0075

Approval Date \_\_\_\_\_

Supersedes TN #New

Effective Date July 1, 2023

New York  
3b-80

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

Professional staff include the following licensed, permitted, or otherwise authorized individuals acting within NYS scope of practice laws: Physicians; Psychiatrists; Physician Assistants, Nurse Practitioners; Psychiatric Nurse Practitioners; Registered Professional Nurses; Licensed Practical Nurses; Psychologists, including Psychologists who have obtained a Master's degree in Psychology while under the supervision of a Licensed Psychologist; Licensed Clinical Social Workers; Licensed Master Social Workers; Social Workers who have obtained a Master's Degree in Social Work while under the supervision of a Licensed Clinical Social Worker, Licensed Psychologist, or Psychiatrist; Licensed Mental Health Counselors; Mental Health Counselors who have obtained a Master's Degree required for licensure and are supervised by a Psychologist, Licensed Clinical Social Worker, or a Licensed Mental Health Counselor; Licensed Marriage and Family Therapists; Licensed Creative Arts Therapists; and Licensed Occupational Therapists who meet the qualifications set forth in 42 CFR § 440.110(b)(2).

Professional staff also include Psychiatric Rehabilitation Practitioners certified by the Certification Commission of the Psychiatric Rehabilitation Association; Rehabilitation Counselors who have obtained a master's degree in rehabilitation counseling or are certified by the Commission on Rehabilitation Counselor Certification; and Therapeutic Recreation Specialists who have obtained a master's degree in therapeutic recreation or are certified by the National Council for Therapeutic Recreation Certification.

Paraprofessional staff must have obtained a bachelor's degree or have attained at least 18 years of age and a high-school diploma or equivalent.

CSC services are also provided by peer specialists, who are individuals who have lived experience with mental health challenges. Peer specialists must have attained at least 18 years of age, a high-school diploma or equivalent, and possess a New York State Peer Specialist certification or provisional certification or a New York State Youth Peer Advocate credential or provisional credential. The New York State Peer Specialist certification and Youth Peer Advocate credential requires the completion of specific training and ongoing training to maintain the certificate/credential. Peer specialists are supervised by competent mental health professionals, who are defined as a professional staff above.

**Staff Supervision and Training Requirements**

Professional staff provide supervision to the CSC team members in the provision of CSC Services. Professional staff supervision for paraprofessional staff occurs both formally, through direct supervision and consultation, as well as informally through regular team meetings, which are a hallmark of the CSC evidence-based practice model. All CSC providers, including professionals, paraprofessionals and peer specialists, are required to complete training in the CSC model and role-specific training.

**Services**

CSC services will be provided based upon the assessment of an individual's mental, physical and behavioral condition and history, which will be the basis for establishing a Person-centered Treatment Plan. CSC services will also be provided to collaterals, including family, and others significant in the individual's life, for the direct benefit of the beneficiary and in accordance with the individual's Treatment Plan.

TN #23-0075

Approval Date \_\_\_\_\_

Supersedes TN #New

Effective Date July 1, 2023

New York  
3b-81

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

**Medically Necessary CSC Services include:**

- a. **Screening and Assessment Services:** Screening services are assessment services provided by professional staff to determine whether a beneficiary is experiencing first episode psychosis. Assessment services include a multi-disciplinary, continuous process of identifying an individual's strengths, barriers to achieving goals, and service needs, through the observation and evaluation of the individual's current mental, physical and behavioral health condition and history. Assessment services also include risk and safety assessments for suicide prevention and assessment of trauma and for any symptoms of post-traumatic stress disorder.

Practitioner Qualifications: Screening and Assessment services are provided by professional staff.

- b. **Person-centered Planning Services:** Person-centered Planning Services is a continuous process that engages each individual as an active partner in developing, reviewing, and modifying a course of treatment that supports the individual's progress toward recovery and accomplishing the individual's rehabilitation goals. Services also include safety planning for suicide prevention.

Practitioner Qualifications: Person-centered Planning services are provided by professional staff or paraprofessional staff under the supervision of professional staff.

- c. **Crisis Intervention Services:** Crisis Intervention Services are assessment, therapeutic, and rehabilitative services, including a safety assessment, safety planning, medication therapy, and counseling services to address acute distress and associated behaviors to ameliorate a mental health crisis.

Practitioner Qualifications: Crisis Intervention Services are provided by professional staff or paraprofessional staff under the supervision of professional staff. Medication therapy services delivered in a crisis visit are provided by a Physician, Psychiatrist, Physician Assistant, Nurse Practitioner, or Registered Professional Nurse.

- d. **Health Monitoring:** Health Monitoring is a diagnostic and therapeutic service involving the continued measurement of specific health indicators associated with increased risk of medical illness and early death. These indicators include, but are not limited to, blood pressure, body mass index (BMI), activity/ exercise level, substance use, and tobacco use.

Practitioner Qualifications: Health Monitoring services are provided by a Psychiatrist, Physician, Nurse practitioner, Psychiatric nurse practitioner, Physician Assistant, Registered nurse or Licensed practical nurse.

- e. **Medication Management Services:** Medication Management Services include a full range of medication services including supporting medication decision making using a shared decision making framework, prescribing and administering medication, evaluating the appropriateness of the individual's existing medication regimen, medication education, monitoring the effects of medication on the individual's mental and physical health, and counseling and skill development to support individuals in obtaining and self-administering medications and recognizing and coping with the side-effects of the medication(s).

TN #23-0075

Approval Date \_\_\_\_\_

Supersedes TN #New

Effective Date July 1, 2023

New York  
3b-82

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

Practitioner Qualifications: Medication evaluation, prescription, administration, and education services are provided by a Physician or a Nurse Practitioner. Medication administration and education services are provided by a Physician, Nurse Practitioner, Physician Assistant, Registered Professional Nurse, or Licensed Practical Nurse. Counseling and skill development regarding medications are provided by professional or paraprofessional staff under the supervision of professional staff.

- f. **Psychoeducation, including Family Psychoeducation Services:** Psychoeducation is a psychosocial education service to assist individuals and their families or other identified collaterals recognize the onset of psychiatric symptoms and prevent, manage, or reduce such symptoms.

Practitioner Qualifications: Psychoeducation services are provided by professional staff or paraprofessional staff under the supervision of professional staff.

- g. **Integrated Dual Disorder Treatment:** Integrated Dual Disorder Treatment is a counseling service using an evidence-based practice model for integrating treatment of substance use disorder and mental health conditions. Services provide motivational interviewing, stage-wise interventions, cognitive-behavioral therapy, harm reduction techniques, and linkage to community support groups, to restore functionality and promote recovery for individuals with dual recovery substance use disorder and mental illness.

Practitioner Qualifications: Integrated Dual Disorder Treatment services are provided by professional staff.

- h. **Individual, Group, and Family Counseling/Therapy:** Counseling/Therapy services are problem-specific and goal-oriented therapeutic services using evidence-based and evidence-informed practices, such as cognitive-behavioral therapy, for the purpose of alleviating symptoms or dysfunction associated with an individual's mental health condition, reversing or changing maladaptive patterns of behavior, encouraging personal growth and development, and supporting the individual's capacity to restore age-appropriate developmental milestones. Services include tobacco use disorder treatment services. Collateral contact is permitted as needed to address the therapeutic goals of the beneficiary.

Practitioner Qualifications: Individual, Group and/or Family Counseling/Therapy Services are provided by professional staff.

- i. **Psychosocial Rehabilitation Services:** Psychosocial Rehabilitation services to develop and enhance an individual's stability and promote capacity for activities of daily living; maximize independence in self-care and wellness to maintain physical and mental health; restore or develop age-appropriate communication, social, and financial management skills; maintain housing stability; and improve familial and educational relationships. Psychosocial Rehabilitation services include skills training and relapse prevention training, which includes structured protocols, such as role-playing, for restoring or building age-appropriate skills which were lost or delayed due to the symptoms of FEP.

TN #23-0075

Approval Date \_\_\_\_\_

Supersedes TN #New

Effective Date July 1, 2023

New York  
3b-83

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

Practitioner Qualifications: Psychosocial Rehabilitation Services are provided by professional staff or paraprofessional staff under the supervision of professional staff.

- j. **Vocational and Educational Support Services:** Vocational and Educational Support services are psychosocial rehabilitation services to assist individuals manage the symptoms of mental illness in school or workplace settings, develop strategies to resolve issues in such settings, and maintain functional skills necessary to achieve employment or educational goals. Services do not include vocational or educational placement or job training services.

Practitioner Qualifications: Vocational and Educational Support services are provided by professional staff or paraprofessional staff under the supervision of professional staff.

- k. **Peer Support Services:** Peer Support Services include person-centered goal planning, co-creating tools to support wellness, offering hope and support around the possibility of recovery, and facilitating community connections to support participants in achieving their goals and increase engagement in rehabilitative services. Services are provided in individual or group settings to promote recovery, self-advocacy, and the development of natural supports and community living skills. Services are directed toward achievement of the specific, individualized, and result-oriented goals contained in an individual's treatment plan.

Practitioner Qualifications: Peer Support Services are provided by certified, credentialed, or provisionally certified or credentialed peer support specialists under supervision as provided in this section.

- l. **Community Integration and Re-integration Services:** Community Integration and Re-integration services engage and assist individuals in the restoration of social, interpersonal, and basic living skills impacted by or lost as a result of mental illness which hinder an individual's ability to live in an integrated community setting. It is an active process that includes coordination of services and supports, assisting in the transition from a hospital setting, and identification or modification of supports, to promote community tenure and manage behavioral and physical health needs. Services include the development of individualized discharge plans with the active participation of individuals and families to ensure that follow-up services are identified, in place, and occur as planned, based on the needs and preferences of participants and their families.

Practitioner Qualifications: Community Integration and Re-integration services are provided by professional staff or paraprofessional staff under supervision of professional staff.

- m. **Complex Care Management:** Complex care management services are time-limited, medically necessary interventions to restore functioning and address the symptoms of mental illness. This includes skill building to help the beneficiary to identify solutions to problems that threaten recovery and care coordination services to help beneficiaries to connect with medical or remedial services. Services will involve contacts with collaterals identified by the beneficiary for the direct benefit of the beneficiary.

Practitioners: Complex Care Management Services are provided by Professional staff and Paraprofessionals under supervision of Professional staff.

TN #23-0075

Approval Date \_\_\_\_\_

Supersedes TN #New

Effective Date July 1, 2023

New York  
3b-79

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

**13.d Rehabilitative Services**  
**Coordinated Specialty Care Services**

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Approval Date \_\_\_\_\_

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Effective Date July 1, 2023

New York  
3b-80

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Approval Date \_\_\_\_\_

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

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Practitioner Qualifications: Screening and Assessment services are provided by professional staff.

- b. **Person-centered Planning Services:** Person-centered Planning Services is a continuous process that engages each individual as an active partner in developing, reviewing, and modifying a course of treatment that supports the individual's progress toward recovery and accomplishing the individual's rehabilitation goals. Services also include safety planning for suicide prevention.

Practitioner Qualifications: Person-centered Planning services are provided by professional staff or paraprofessional staff under the supervision of professional staff.

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Practitioner Qualifications: Health Monitoring services are provided by a Psychiatrist, Physician, Nurse practitioner, Psychiatric nurse practitioner, Physician Assistant, Registered nurse or Licensed practical nurse.

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TN #23-0075

Approval Date \_\_\_\_\_

Supersedes TN #New

Effective Date July 1, 2023



New York  
3b-82

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

Practitioner Qualifications: Medication evaluation, prescription, administration, and education services are provided by a Physician or a Nurse Practitioner. Medication administration and education services are provided by a Physician, Nurse Practitioner, Physician Assistant, Registered Professional Nurse, or Licensed Practical Nurse. Counseling and skill development regarding medications are provided by professional or paraprofessional staff under the supervision of professional staff.

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Practitioner Qualifications: Psychoeducation services are provided by professional staff or paraprofessional staff under the supervision of professional staff.

- g. **Integrated Dual Disorder Treatment:** Integrated Dual Disorder Treatment is a counseling service using an evidence-based practice model for integrating treatment of substance use disorder and mental health conditions. Services provide motivational interviewing, stage-wise interventions, cognitive-behavioral therapy, harm reduction techniques, and linkage to community support groups, to restore functionality and promote recovery for individuals with dual recovery substance use disorder and mental illness.

Practitioner Qualifications: Integrated Dual Disorder Treatment services are provided by professional staff.

- h. **Individual, Group, and Family Counseling/Therapy:** Counseling/Therapy services are problem-specific and goal-oriented therapeutic services using evidence-based and evidence-informed practices, such as cognitive-behavioral therapy, for the purpose of alleviating symptoms or dysfunction associated with an individual's mental health condition, reversing or changing maladaptive patterns of behavior, encouraging personal growth and development, and supporting the individual's capacity to restore age-appropriate developmental milestones. Services include tobacco use disorder treatment services. Collateral contact is permitted as needed to address the therapeutic goals of the beneficiary.

Practitioner Qualifications: Individual, Group and/or Family Counseling/Therapy Services are provided by professional staff.

- i. **Psychosocial Rehabilitation Services:** Psychosocial Rehabilitation services to develop and enhance an individual's stability and promote capacity for activities of daily living; maximize independence in self-care and wellness to maintain physical and mental health; restore or develop age-appropriate communication, social, and financial management skills; maintain housing stability; and improve familial and educational relationships. Psychosocial Rehabilitation services include skills training and relapse prevention training, which includes structured protocols, such as role-playing, for restoring or building age-appropriate skills which were lost or delayed due to the symptoms of FEP.

TN #23-0075

Approval Date \_\_\_\_\_

Supersedes TN #New

Effective Date July 1, 2023

New York  
3b-83

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

Practitioner Qualifications: Psychosocial Rehabilitation Services are provided by professional staff or paraprofessional staff under the supervision of professional staff.

- j. **Vocational and Educational Support Services:** Vocational and Educational Support services are psychosocial rehabilitation services to assist individuals manage the symptoms of mental illness in school or workplace settings, develop strategies to resolve issues in such settings, and maintain functional skills necessary to achieve employment or educational goals. Services do not include vocational or educational placement or job training services.

Practitioner Qualifications: Vocational and Educational Support services are provided by professional staff or paraprofessional staff under the supervision of professional staff.

- k. **Peer Support Services:** Peer Support Services include person-centered goal planning, co-creating tools to support wellness, offering hope and support around the possibility of recovery, and facilitating community connections to support participants in achieving their goals and increase engagement in rehabilitative services. Services are provided in individual or group settings to promote recovery, self-advocacy, and the development of natural supports and community living skills. Services are directed toward achievement of the specific, individualized, and result-oriented goals contained in an individual's treatment plan.

Practitioner Qualifications: Peer Support Services are provided by certified, credentialed, or provisionally certified or credentialed peer support specialists under supervision as provided in this section.

- l. **Community Integration and Re-integration Services:** Community Integration and Re-integration services engage and assist individuals in the restoration of social, interpersonal, and basic living skills impacted by or lost as a result of mental illness which hinder an individual's ability to live in an integrated community setting. It is an active process that includes coordination of services and supports, assisting in the transition from a hospital setting, and identification or modification of supports, to promote community tenure and manage behavioral and physical health needs. Services include the development of individualized discharge plans with the active participation of individuals and families to ensure that follow-up services are identified, in place, and occur as planned, based on the needs and preferences of participants and their families.

Practitioner Qualifications: Community Integration and Re-integration services are provided by professional staff or paraprofessional staff under supervision of professional staff.

- m. **Complex Care Management:** Complex care management services are time-limited, medically necessary interventions to restore functioning and address the symptoms of mental illness. This includes skill building to help the beneficiary to identify solutions to problems that threaten recovery and care coordination services to help beneficiaries to connect with medical or remedial services. Services will involve contacts with collaterals identified by the beneficiary for the direct benefit of the beneficiary.

Practitioners: Complex Care Management Services are provided by Professional staff and Paraprofessionals under supervision of Professional staff.

TN #23-0075

Approval Date \_\_\_\_\_

Supersedes TN #New

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

#### Long Term Care Services

Effective on or after July 1, 2023, the Department of Health proposes to amend the Title XIX (Medicaid) State Plan for institutional services related to temporary rate adjustments to long term care providers that are undergoing closure, merger, consolidation, acquisition or restructuring themselves or other health care providers. These payments are authorized by current State statutory and regulatory provisions. The temporary rate adjustments will be reviewed and approved by the CINERGY Collaborative.

The estimated net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2023-2024 is \$30 million.

The public is invited to review and comment on this proposed State Plan Amendment, a copy of which will be available for public review on the Department's website at [http://www.health.ny.gov/regulations/state\\_plans/status](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

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. The following changes are proposed:

#### Non-Institutional Services

Effective on or after July 1, 2023, this notice proposes to establish Medical Assistance coverage and rates of payment for Coordinated Specialty Care (CSC), an evidence-based practice model for the treatment of young people experiencing a first episode of psychosis (FEP). CSC services are intended to benefit adolescents and young adults with the recent onset of a psychotic disorder, helping to prevent acute service use, reduce disability, and help young people with early psychosis stay on track with their goals for school, work, and relationships.

The estimated aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2024 is \$4.8 million and \$6.4 million for state fiscal year 2025.

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](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

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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

**SUMMARY**  
**SPA #23-0076**

This State Plan Amendment proposes to implement a 25% increase to the reimbursement fees for NYS Office of Mental Health Day Treatment Services for Children, effective July 1, 2023.

DRAFT





**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 July 1, 2023, the Department of Health will adjust rates statewide to reflect a twenty-five percent rate increase for Day Treatment for Children services licensed by the Office of Mental Health.

The estimated net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2024 is \$3.3 million and for state fiscal year 2025 is \$4.4 million.

The public is invited to review and comment on this proposed State Plan Amendment, a copy of which will be available for public review on the Department's website at [http://www.health.ny.gov/regulations/state\\_plans/status](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](mailto:spa_inquiries@health.ny.gov)

**PUBLIC NOTICE**

**Department of Health**

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

The Department of Health proposes to amend the Title XIX (Medicaid) State Plan for non-institutional services to comply with PHL 2999-DD and SSL § 367-u. The following changes are proposed:

**Non-Institutional Services**

Effective on or after July 1, 2023, the State proposes to establish a fee to allow freestanding clinics, also known as diagnostic and treatment centers (DTCs), to be reimbursed when there is no on-site presence at the DTC. The State will reimburse DTCs for services furnished via telehealth when neither the provider nor the Medicaid member is on-site.

The estimated net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the 2023-2024 budget is \$0.29 million.

The public is invited to review and comment on this proposed State Plan Amendment, a copy of which will be available for public review on the Department's website at [http://www.health.ny.gov/regulations/state\\_plans/status](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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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](mailto:spa_inquiries@health.ny.gov)

**PUBLIC NOTICE**

**Department of Health**

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

The Department of Health proposes to amend the Title XIX (Medicaid) State Plan for non-institutional services as authorized by § 2826 of New York Public Health Law. The following changes are proposed:

**Non-Institutional Services**

Effective on or after July 1, 2023, 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 Hospital:

- Mount St. Mary's Hospital with payment amounts totaling up to \$13,500,000 for the period July 1, 2023, through September 30, 2023.

The estimated net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2023-2024 is \$13.5 Million.

The public is invited to review and comment on this proposed State Plan Amendment, a copy of which will be available for public review on the Department's website at [http://www.health.ny.gov/regulations/state\\_plans/status](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



**SUMMARY**  
**SPA #23-0077**

This State Plan Amendment proposes to allow for the Central New York's community members continued access to emergency /crisis evaluations, treatment, and observation services. For those adults needing further stabilization and treatment, inpatient services will be maintained at St. Joseph's Health. These 2 programs are vital components of St. Joseph's Health's continuum of care. Additionally, Comprehensive Psychiatric Emergency Program's (CPEP's) mobile crisis outreach services provide additional community access to crisis care and follow-up services with the goal of reducing Comprehensive Psychiatric Emergency Program (CPEP) utilization, Emergency Room utilization and inpatient level of care.

DRAFT



Non-Institutional Services

The following is a clarification to the March 29, 2023, noticed provision, to allow for reimbursement of Medicaid covered services provided by pharmacists and pharmacy interns within their lawful scope of practice. With clarification, based on the enacted budget, the fiscal impact for this proposal has been revised to zero.

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](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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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](mailto:spa_inquiries@health.ny.gov)

**PUBLIC NOTICE**  
**Department of Health**

Pursuant to 42 CFR Section 447.205, the Office of Mental Health and the Department of Health hereby give 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 the New York Public Health Law. The following changes are proposed:

**Institutional Services**

Effective on or after July 1, 2023, this proposal relates to temporary rate adjustments to Article 28 Hospitals that are undergoing a closure, merger, consolidation, acquisition or restructuring of themselves or other health care providers.

Additional temporary rate adjustments have been reviewed and approved for the following hospitals:

- **Saint Joseph’s Health**

The aggregate payment amounts total up to \$2,897,078 for the period July 1, 2023, through March 31, 2024.

The aggregate payment amounts total up to \$2,843,460 for the period April 1, 2024, through March 31, 2025.

The aggregate payment amounts total up to \$2,162,669 for the period April 1, 2025, through March 31, 2026.

The public is invited to review and comment on this proposed State Plan Amendment. Copies of which will be available for public review on the Department of Health’s website at [http://www.health.ny.gov/regulations/state\\_plans/status](http://www.health.ny.gov/regulations/state_plans/status).

Copies of the proposed State Plan Amendments will be on file in each local (county) social services district and available for public review.

For the New York City district, copies will also 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

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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 1460, Albany, NY 12210, [spa\\_inquiries@health.ny.gov](mailto:spa_inquiries@health.ny.gov)

**PUBLIC NOTICE**  
**Department of Health**

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

The Department of Health proposes to amend the Title XIX (Medicaid) State Plan for non-institutional services in accordance with Section 2559 of the New York State Public Health Law. The following changes are proposed:

**Non-Institutional Services**

Effective on or after July 1, 2023, all claiming for transportation will be on a fee-for-service basis for each one-way trip. The EI Program transportation rates will be revised from the current Preschool Supportive Health Services Program (PSSHS) one-way trip rates from 2009 to the new rates developed pursuant to a 2021 Cost Study of Early Intervention (EI) Transportation services conducted by Public Consulting Group. Municipalities may continue to use existing transportation vendors paid at the contractual rate, however, the municipalities will receive state share reimbursement at the EIP established rates.

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

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](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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Long Island City, New York 11101

**SUMMARY**  
**SPA #23-0080**

This State Plan Amendment proposes to establish a methodology to fund uncompensated care for Certified Community Behavioral Health Clinics providing Medicaid demonstration services provided pursuant to section 223 of the Protecting Access to Medicare Act of 2014.

DRAFT



New York  
8(d)

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

- e. The distribution method applied to a new provider that qualifies to be included in the distribution based on paragraph (3) of this section will be in accordance with the distribution method for other providers in this section.
- f. The distribution for a provider that qualifies based on paragraph (3) of this section will be included in the total safety net distribution amount as described in this section.
4. For each Eligible Medicaid Safety Net CCBHC, a per visit safety net payment will be calculated by dividing the applicable available funding amount by the sum of the total number of uninsured and Medicaid fee-for-service visits for all Eligible Medicaid Safety Net CCBHCs reported on the base year certified cost reports. The per visit safety payment amount will then be multiplied by the sum of each Eligible Medicaid Safety Net CCBHC's uninsured and Medicaid fee-for-service visits reported on their base year certified cost report to determine the CCBHC's total distribution, however, the total distribution to a CCBHC will not exceed the value of the CCBHC's losses attributed to uninsured visits.
5. Payments made pursuant to this section will be made annually for the period ending March 31, 2024, and no more frequently than quarterly thereafter. Payments to eligible CCBHCs will not be subject to subsequent adjustment or reconciliation.

TN #23-0080

Approval Date \_\_\_\_\_

Supersedes TN # NEW

Effective Date November 3, 2023

# 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](http://www.osc.state.ny.us)

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

## PUBLIC NOTICE Department of Health

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

The Department of Health proposes to amend the Title XIX (Medicaid) State Plan for non-institutional services to comply with section 1 of part HH of Chapter 57(2023) for Certified Community Behavioral Health Clinics (CCBHCs). The following changes are proposed:

### Non-Institutional Services

Effective on or after November 3, 2023, the State proposes to adopt a methodology to fund uncompensated care for CCBHCs providing Medicaid demonstration services provided pursuant to section 223 of P.L. 113-93, as amended.

The estimated net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2023-2024 is \$23 million and for state fiscal year 2024-2025, \$42 million.

The public is invited to review and comment on this proposed State Plan Amendment, a copy of which will be available for public review on the Department's website at [http://www.health.ny.gov/regulations/state\\_plans/status](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](mailto:spa_inquiries@health.ny.gov)

## PUBLIC NOTICE Department of Health

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

The Department of Health proposes to amend the Title XIX (Medicaid) State Plan for non-institutional services as authorized by § 2826 of New York Public Health Law. The following changes are proposed:

### Non-Institutional Services

The following is a clarification to the February 25, 2022, noticed provision to provide temporary rate adjustments for providers that are undergoing closure, merger, consolidation, acquisition or restructuring themselves or other health care providers. With clarification, this revises the category to "Non-Institutional Services". There is no change to the previously noticed fiscals.

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](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 non-institutional services as authorized by § 2826 of New York Public Health Law. The following changes are proposed:

### Non-Institutional Services

The following is a clarification to the August 31, 2022, noticed provision to provide temporary rate adjustments for providers that are undergoing closure, merger, consolidation, acquisition or restructuring themselves or other health care providers. With clarification, this revises the category to “Non-Institutional Services”. There is no change to the previously noticed fiscals.

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](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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Washington Ave., One Commerce Plaza, Suite 1432, Albany, NY  
12210, spa\_inquiries@health.ny.gov

## PUBLIC NOTICE

Department of Health

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

The Department of Health proposes to amend the Title XIX (Medicaid) State Plan for non-institutional services as authorized by § 2826 of New York Public Health Law. The following changes are proposed:

### Non-Institutional Services

The following is a clarification to the November 9, 2022, noticed provision to provide temporary rate adjustments for providers that are undergoing closure, merger, consolidation, acquisition or restructuring themselves or other health care providers. With clarification, this revises the category to “Non-Institutional Services”. There is no change to the previously noticed fiscals.

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](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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Washington Ave., One Commerce Plaza, Suite 1432, Albany, NY  
12210, spa\_inquiries@health.ny.gov

## PUBLIC NOTICE

Department of Health

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

The Department of Health proposes to amend the Title XIX (Medicaid) State Plan for non-institutional services as authorized by § 2826 of New York Public Health Law. The following changes are proposed:

### Non-Institutional Services

The following is a clarification to the November 30, 2022, noticed provision to provide temporary rate adjustments for providers that are undergoing closure, merger, consolidation, acquisition or restructuring themselves or other health care providers. With clarification, this revises the category to “Non-Institutional Services”. There is no change to the previously noticed fiscals.

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](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



**SUMMARY**  
**SPA #23-0081**

This State Plan Amendment proposes to provide temporary rate adjustments to long term care providers that are undergoing closure, merger, consolidation, acquisition or restructuring themselves or other health care providers. These payments are authorized by current State statutory and regulatory provisions. The temporary rate adjustments will be reviewed and approved by the CINERGY Collaborative.

DRAFT

New York  
47(aa)(5)

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

## Nursing Homes (continued):

Provider Name	Gross Medicaid Rate Adjustment	Rate Period Effective
Amsterdam Nursing Home Corp (Amsterdam House)*	<del>\$847,377</del>	<del>04/01/2020 – 03/31/2021</del>
	\$847,377	04/01/2021 – 03/31/2022
	(\$11,859)	10/01/2021 – 03/31/2022
	\$799,375	04/01/2022 – 03/31/2023
	\$759,406	07/01/2023 – 03/31/2024
<del>Baptist Nursing and Rehabilitation</del>	<del>\$347,500</del>	<del>04/01/2020 – 03/31/2021</del>
Bronx-Lebanon Special Care Center*	<del>\$521,445</del>	<del>04/01/2020 – 03/31/2021</del>
	\$521,445	04/01/2021 – 03/31/2022
	(\$9,201)	10/01/2021 – 03/31/2022
	\$551,640	04/01/2022 – 03/31/2023
	\$522,747	07/01/2023 – 03/31/2024

\*Denotes provider is part of CINERGY Collaborative.

TN #23-0081Superseding TN #22-0049

Approval Date \_\_\_\_\_

Effective Date July 1, 2023

**New York  
47(aa)(5.1)**

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

<b>Provider Name</b>	<b>Gross Medicaid Rate Adjustment</b>	<b>Rate Period Effective</b>
Brooklyn United Methodist Church Home*	<del>\$384,919</del>	<del>04/01/2020 – 03/31/2021</del>
	\$384,919	04/01/2021 – 03/31/2022
	\$8,741	10/01/2021 – 03/31/2022
	\$369,825	04/01/2022 – 03/31/2023
	<u>\$394,421</u>	<u>07/01/2023 – 03/31/2024</u>
Buena Vida Continuing Care & Rehab Ctr	<del>\$642,147</del>	<del>04/01/2020 – 03/31/2021</del>
	\$642,147	04/01/2021 – 03/31/2022
	(\$321,073)	10/01/2021 – 03/31/2022
Carmel Richmond Healthcare and Rehabilitation Center*	<del>\$632,161</del>	<del>04/01/2020 – 03/31/2021</del>
	\$632,161	04/01/2021 – 03/31/2022
	(\$8,847)	10/01/2021 – 03/31/2022
	\$615,961	04/01/2022 – 03/31/2023
	<u>\$636,012</u>	<u>07/01/2023 – 03/31/2024</u>
Center For Nursing & Rehabilitation Inc	<del>\$746,693</del>	<del>04/01/2020 – 03/31/2021</del>
	\$746,693	04/01/2021 – 03/31/2022
	(\$373,347)	10/01/2021 – 03/31/2022
Chapin Home for the Aging*	<del>\$487,968</del>	<del>04/01/2020 – 03/31/2021</del>
	\$487,868	04/01/2021 – 03/31/2022
	(\$6,828)	10/01/2021 – 03/31/2022
	\$460,231	04/01/2022 – 03/31/2023
	<u>\$437,219</u>	<u>07/01/2023 – 03/31/2024</u>

\*Denotes provider is part of the CINERGY Collaborative  
**Nursing Homes (continued):**

TN #23-0081

Approval Date \_\_\_\_\_

Superseding TN #22-0049Effective Date July 1, 2023

New York  
47(aa)(6)

1905(4)(a) Nursing Facility Services

Nursing Homes (continued):

Provider Name	Gross Medicaid Rate Adjustment	Rate Period Effective
Cobble Hill Health Center*	<del>\$400,000</del>	<del>04/01/2020 – 03/31/2021</del>
	\$400,000	04/01/2021 – 03/31/2022
	\$120,596	10/01/2021 – 03/31/2022
	\$495,826	04/01/2022 – 03/31/2023
	\$527,480	07/01/2023 – 03/31/2024
Concord Nursing Home*	<del>\$250,000</del>	<del>04/01/2020 – 03/31/2021</del>
	\$250,000	04/01/2021 – 03/31/2022
	\$190,447	10/01/2021 – 03/31/2022
	\$371,870	04/01/2022 – 03/31/2023
	\$395,610	07/01/2023 – 03/31/2024
Eger Health Care and Rehabilitation Center*	<del>\$968,289</del>	<del>04/01/2020 – 03/31/2021</del>
	\$968,289	04/01/2021 – 03/31/2022
	(\$11,517)	10/01/2021 – 03/31/2022
	\$914,404	04/01/2022 – 03/31/2023
	\$909,294	07/01/2023 – 03/31/2024

\*Denotes provider is part of CINERGY Collaborative.

New York  
47(aa)(6.1)

1905(4)(a) Nursing Facility Services

Nursing Homes (continued):

Provider Name	Gross Medicaid Rate Adjustment	Rate Period Effective
<del>Elderwood at North Creek</del>	<del>\$435,384</del>	<del>04/01/2020 – 03/31/2021</del>
Elizabeth Seton Pediatric Center*	<del>\$613,670</del>	<del>04/01/2020 – 03/31/2021</del>
	\$613,670	04/01/2021 – 03/31/2022
	\$2,085,707	10/01/2021 – 03/31/2022
	\$ 747,671	04/01/2022 – 03/31/2023
	\$795,402	07/01/2023 – 03/31/2024
Ferncliff Nursing Home Co Inc.*	<del>\$681,294</del>	<del>04/01/2020 – 03/31/2021</del>
	\$681,294	04/01/2021 – 03/31/2022
	\$36,050	10/01/2021 – 03/31/2022
	\$747,118	04/01/2022 – 03/31/2023
	\$794,814	07/01/2023 – 03/31/2024
Fort Hudson Nursing Center	\$1,129,968	01/01/2022 – 03/31/2022
	\$118,982	04/01/2022 – 06/30/2022
	\$118,982	07/01/2022 – 09/30/2022
	\$118,983	10/01/2022 – 12/31/2022
	\$118,983	01/01/2023 – 03/31/2023
	\$137,943	04/01/2023 – 06/30/2023
	\$137,943	07/01/2023 – 09/30/2023
	\$137,943	10/01/2023 – 12/31/2023
\$137,943	01/01/2024 – 03/31/2024	

\*Denotes provider is part of CINERGY Collaborative.

New York  
47(aa)(6.1.a)

1905(4)(a) Nursing Facility Services

Nursing Homes (continued):

Provider Name	Gross Medicaid Rate Adjustment	Rate Period Effective
Good Samaritan Nursing Home*	<del>\$371,698</del>	<del>04/01/2020 – 03/31/2021</del>
	\$371,698	04/01/2021 – 03/31/2022
	\$304	10/01/2021 – 03/31/2022
	\$353,258	04/01/2022 – 03/31/2023
	<u>\$364,063</u>	<u>07/01/2023 – 03/31/2024</u>
Greenfield Health and Rehabilitation Center	\$695,000	01/01/2022 – 03/31/2022
	\$411,875	04/01/2022 – 06/30/2022
	\$411,875	07/01/2022 – 09/30/2022
	\$411,875	10/01/2022 – 12/31/2022
	\$411,875	01/01/2023 – 03/31/2023
	\$155,000	04/01/2023 – 06/30/2023
	\$155,000	07/01/2023 – 09/30/2023
	\$155,000	10/01/2023 – 12/31/2023
\$155,000	01/01/2024 – 03/31/2024	
Gurwin Jewish Nursing and Rehabilitation Center*	<del>\$1,110,754</del>	<del>04/01/2020 – 03/31/2021</del>
	\$1,110,754	04/01/2021 – 03/31/2022
	\$288,490	10/01/2021 – 03/31/2022
	\$1,351,867	04/01/2022 – 03/31/2023
	<u>\$1,438,170</u>	<u>07/01/2023 – 03/31/2024</u>
Hebrew Home for the Aged at Riverdale*	<del>\$1,875,731</del>	<del>04/01/2020 – 03/31/2021</del>
	\$1,875,731	04/01/2021 – 03/31/2022
	\$382,779	10/01/2021 – 03/31/2022
	\$1,971,361	04/01/2022 – 03/31/2023
	<u>\$1,883,465</u>	<u>07/01/2023 – 03/31/2024</u>

\*Denotes provider is part of CINERGY Collaborative.

New York  
47(aa)(6.2)

1905(4)(a) Nursing Facility Services

Nursing Homes (continued):

Provider Name	Gross Medicaid Rate Adjustment	Rate Period Effective
Incarnation Children's Center	\$224,255	10/01/2021 – 03/31/2022
Isabella Geriatric Center Inc*	<del>\$1,633,648</del>	<del>04/01/2020 – 03/31/2020</del>
	\$1,633,648	04/01/2021 – 03/31/2022
	\$397,615	10/01/2021 – 03/31/2022
	\$1,749,498	04/01/2022 – 03/31/2023
	<u>\$1,662,023</u>	<u>07/01/2023 – 03/31/2024</u>
Island Nursing and Rehab Center*	<del>\$495,250</del>	<del>04/01/2020 – 03/31/2021</del>
	\$495,250	04/01/2021 – 03/31/2022
	\$11,248	10/01/2021 – 03/31/2022
	\$475,830	04/01/2022 – 03/31/2023
	<u>\$452,039</u>	<u>07/01/2023 – 03/31/2024</u>

\*Denotes provider is part of CINERGY Collaborative.

TN #23-0081

Superseding TN #22-0049

Approval Date \_\_\_\_\_

Effective Date July 1, 2023

New York  
47(aa)(7)

1905(4)(a) Nursing Facility Services

Nursing Homes (continued):

Provider Name	Gross Medicaid Rate Adjustment	Rate Period Effective
Island Nursing and Rehab	<del>\$4,200,000</del>	<del>04/01/2020 – 03/31/2021</del>
	\$4,275,000	04/01/2021 – 03/31/2022
Jamaica Hospital Nursing Home Co Inc*	<del>\$505,965</del>	<del>04/01/2020 – 03/31/2021</del>
	\$505,965	04/01/2021 – 03/31/2022
	(\$6,017)	10/01/2021 – 03/31/2022
	\$479,225	04/01/2022 – 03/31/2023
	\$453,918	07/01/2023 – 03/31/2024
Jefferson’s Ferry	<del>\$324,023</del>	<del>04/01/2020 – 03/31/2021</del>
	\$324,023	04/01/2021 – 03/31/2022
	\$37,788	10/01/2021 – 03/31/2022

\*Denotes provider is part of CINERGY Collaborative.



New York  
47(aa)(7.1.a)

1905(4)(a) Nursing Facility Services

Provider Name	Gross Medicaid Rate Adjustment	Rate Period Effective
Mary Manning Walsh Nursing Home Co Inc*	<del>\$861,601</del>	<del>04/01/2020 – 03/31/2021</del>
	\$861,601	04/01/2021 – 03/31/2022
	(\$12,059)	10/01/2021 – 03/31/2022
	\$895,415	04/01/2022 – 03/31/2023
	<u>\$948,383</u>	<u>07/01/2023 – 03/31/2024</u>
Menorah Home And Hospital For Rehabilitation and Nursing*	<del>\$800,433</del>	<del>04/01/2020 – 03/31/2021</del>
	\$800,433	04/01/2021 – 03/31/2022
	(\$9,519)	10/01/2021 – 03/31/2022
	\$755,890	04/01/2022 – 03/31/2023
	<u>\$745,518</u>	<u>07/01/2023 – 03/31/2024</u>
Methodist Home for Nursing and Rehabilitation*	<del>\$291,832</del>	<del>04/01/2020 – 03/31/2021</del>
	\$291,832	04/01/2021 – 03/31/2022
	\$275,592	04/01/2022 – 03/31/2023
	<u>\$293,921</u>	<u>07/01/2023 – 03/31/2024</u>

Nursing Homes (continued):

\*Denotes provider is part of CINERGY Collaborative.

New York  
47(aa)(8)

1905(4)(a) Nursing Facility Services

Nursing Homes (continued):

Provider Name	Gross Medicaid Rate Adjustment	Rate Period Effective
Parker Jewish Institute for Health Care and Rehabilitation*	<del>\$1,276,548</del>	<del>04/01/2020 – 03/31/2021</del>
	\$1,276,548	04/01/2021 – 03/31/2022
	\$334,605	10/01/2021 – 03/31/2022
	\$1,555,295	04/01/2022 – 03/31/2023
	<u>\$1,654,585</u>	<u>07/01/2023 – 03/31/2024</u>

\*Denotes provider is part of CINERGY Collaborative.

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TN #23-0081

Superseding TN #22-0049

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Effective Date July 1, 2023

New York  
47(aa)(8.1)

1905(4)(a) Nursing Facility Services

Nursing Homes (continued):

Provider Name	Gross Medicaid Rate Adjustment	Rate Period Effective
Providence Rest*	<del>\$458,838</del>	<del>04/01/2020 – 03/31/2021</del>
	\$458,838	04/01/2021 – 03/31/2022
	\$6,393	10/01/2021 – 03/31/2022
	\$493,614	04/01/2022 – 03/31/2023
	<u>\$525,127</u>	<u>07/01/2023 – 03/31/2024</u>
Rebekah Rehabilitation & Extended Care Center Inc*	<del>\$282,288</del>	<del>04/01/2020 – 03/31/2021</del>
	\$282,288	04/01/2021 – 03/31/2022
	\$73,992	10/01/2021 – 03/31/2022
	\$343,928	04/01/2022 – 03/31/2023
	<u>\$331,686</u>	<u>07/01/2023 – 03/31/2024</u>
Rutland Nursing Home Co Inc.*	<del>\$1,289,994</del>	<del>04/01/2020 – 03/31/2021</del>
	\$1,289,994	04/01/2021 – 03/31/2022
	(\$18,055)	10/01/2021 – 03/31/2022
	\$1,216,918	04/01/2022 – 03/31/2023
	<u>\$1,166,928</u>	<u>07/01/2023 – 03/31/2024</u>
Saints Joachim & Anne Nursing and Rehabilitation Center*	<del>\$426,310</del>	<del>04/01/2020 – 03/31/2021</del>
	\$426,310	04/01/2021 – 03/31/2022
	(\$5,070)	10/01/2021 – 03/31/2022
	\$402,586	04/01/2022 – 03/31/2023
	<u>\$382,456</u>	<u>07/01/2023 – 03/31/2024</u>

\*Denotes provider is part of CINERGY Collaborative.

New York  
47(aa)(9)

1905(4)(a) Nursing Facility Services

Nursing Homes (continued):

Provider Name	Gross Medicaid Rate Adjustment	Rate Period Effective
Sarah Neuman Center for Healthcare*	<del>\$773,173</del>	<del>04/01/2020 – 03/31/2021</del>
	\$773,173	04/01/2021 – 03/31/2022
	\$3,393	10/01/2021 – 03/31/2022
	\$827,832	04/01/2022 – 03/31/2023
	<u>\$842,992</u>	<u>07/01/2023 – 03/31/2024</u>
Schaffer Extended Care System*	<del>\$291,907</del>	<del>04/01/2020 – 03/31/2021</del>
	\$291,907	04/01/2021 – 03/31/2022
	(\$3,471)	10/01/2021 – 03/31/2022
	\$308,810	04/01/2022 - 03/31/2023
	<u>\$292,636</u>	<u>07/01/2023 – 03/31/2024</u>

\*Denotes provider is part of CINERGY Collaborative.

TN #23-0081

Superseding TN #22-0049

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Effective Date July 1, 2023

**New York  
47(aa)(9.2)**

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

**Nursing Homes (continued):**

Provider Name	Gross Medicaid Rate Adjustment	Rate Period Effective
Schulman and Schachne Institute for Nursing and Rehabilitation*	<del>\$1,225,719</del>	<del>04/01/2020 – 03/31/2021</del>
	\$1,225,719	04/01/2021 – 03/31/2022
	(\$14,577)	10/01/2021 – 03/31/2022
	\$1,204,270	04/01/2022 – 03/31/2023
	<u>\$1,136,170</u>	<u>07/01/2023 – 03/31/2024</u>
Silvercrest*	<del>\$833,785</del>	<del>04/01/2020 – 03/31/2021</del>
	\$833,785	04/01/2021 – 03/31/2022
	(\$11,670)	10/01/2021 – 03/31/2022
	\$798,351	04/01/2022 – 03/31/2023
	<u>\$770,721</u>	<u>07/01/2023 – 03/31/2024</u>
St Cabrini Nursing Home*	<del>\$748,048</del>	<del>04/01/2020 – 03/31/2021</del>
	\$748,048	04/01/2021 – 03/31/2022
	\$10,327	10/01/2021 – 03/31/2022
	\$788,645	04/01/2022 – 03/31/2023
	<u>\$761,351</u>	<u>07/01/2023 – 03/31/2024</u>

\*Denotes provider is part of CINERGY Collaborative.

TN #23-0081  
Superseding TN #22-0049

Approval Date \_\_\_\_\_  
Effective Date July 1, 2023

New York  
47(aa)(9.3)

1905(4)(a) Nursing Facility Services

Nursing Homes (continued):

Provider Name	Gross Medicaid Rate Adjustment	Rate Period Effective
St Johnland Nursing Center*	<del>\$400,000</del>	<del>04/01/2020 – 03/31/2021</del>
	\$400,000	04/01/2021 – 03/31/2022
	\$120,596	10/01/2021 – 03/31/2022
	\$495,826	04/01/2022 – 03/31/2023
	<u>\$527,480</u>	<u>07/01/2023 – 03/31/2024</u>
St. Mary's Hospital for Children Inc.*	<del>\$1,053,645</del>	<del>04/01/2020 – 03/31/2021</del>
	\$1,053,645	04/01/2021 – 03/31/2022
	(\$9,241)	10/01/2021 – 03/31/2022
	\$1,052,354	04/01/2022 – 03/31/2023
	<u>\$1,114,606</u>	<u>07/01/2023 – 03/31/2024</u>
St. Patrick's Home*	\$920,596	10/01/2021 – 03/31/2022
	\$486,674	04/01/2022 – 03/31/2023
	<u>\$459,153</u>	<u>07/01/2023 – 03/31/2024</u>
St Vincent Depaul Residence*	\$276,263	04/01/2021 – 09/30/2021
	\$276,263	04/01/2021 – 03/31/2022
	\$72,414	10/01/2021 – 03/31/2022
	\$3,681,188	01/01/2022 – 03/31/2022
	\$384,746	04/01/2022 – 06/30/2022
	\$384,746	07/01/2022 – 09/30/2022
	\$384,747	10/01/2022 – 12/31/2022
	\$384,747	01/01/2023 – 03/31/2023
	\$336,588	04/01/2022 – 03/31/2023
<u>\$337,197</u>	<u>07/01/2023 – 03/31/2024</u>	

\*Denotes provider is part of CINERGY Collaborative.

New York  
47(aa)(10)

1905(4)(a) Nursing Facility Services

Nursing Homes (continued):

Provider Name	Gross Medicaid Rate Adjustment	Rate Period Effective
Terence Cardinal Cooke Health Care Ctr*	<del>\$1,449,586</del>	<del>04/01/2020 – 03/31/2021</del>
	\$1,449,586	04/01/2021 – 03/31/2022
	\$147,364	10/01/2021 – 03/31/2022
	\$1,452,702	04/01/2022 – 03/31/2023
	\$1,380,067	07/01/2023 – 03/31/2024
The Jewish Home Hospital*	<del>\$1,248,092</del>	<del>04/01/2020 – 03/31/2021</del>
	\$1,248,092	04/01/2021 – 03/31/2022
	\$271,207	10/01/2021 – 03/31/2022
	\$1,451,106	04/01/2022 – 03/31/2023
	\$1,572,645	07/01/2023 – 03/31/2024
The Wartburg Home*	<del>\$671,170</del>	<del>04/01/2020 – 03/31/2021</del>
	\$671,170	04/01/2021 – 03/31/2022
	\$159,719	10/01/2021 – 03/31/2022
	\$769,740	04/01/2022 – 03/31/2023
	\$736,907	07/01/2023 – 03/31/2024
Trustees Eastern Star Hall and Home	\$ 869,050	01/01/2022 – 03/31/2022
United Hebrew Geriatric Center*	<del>\$762,452</del>	<del>04/01/2020 – 03/31/2021</del>
	\$762,452	04/01/2021 – 03/31/2022
	(\$9,068)	10/01/2021 – 03/31/2022
	\$776,512	04/01/2022 – 03/31/2023
	\$749,638	07/01/2023 – 03/31/2024

\*Denotes provider is part of CINERGY Collaborative.

New York  
47(aa)(10.1)

1905(4)(a) Nursing Facility Services

Nursing Homes (continued):

Provider Name	Gross Medicaid Rate Adjustment	Rate Period Effective
VillageCare Rehabilitation and Nursing Center	<del>\$621,763</del>	<del>04/01/2020 – 03/31/2021</del>
	\$621,763	04/01/2021 – 03/31/2022
	\$14,120	10/01/2021 – 03/31/2022
	\$597,382	04/01/2022 – 03/31/2023
	<u>\$567,513</u>	<u>07/01/2023 – 03/31/2024</u>
St. Mary's Center*	\$259,009	04/01/2022 – 03/31/2023
	<u>\$276,235</u>	<u>07/01/2023 – 03/31/2024</u>

\*Denotes provider is part of CINERGY Collaborative.

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

#### Long Term Care Services

Effective on or after July 1, 2023, the Department of Health proposes to amend the Title XIX (Medicaid) State Plan for institutional services related to temporary rate adjustments to long term care providers that are undergoing closure, merger, consolidation, acquisition or restructuring themselves or other health care providers. These payments are authorized by current State statutory and regulatory provisions. The temporary rate adjustments will be reviewed and approved by the CINERGY Collaborative.

The estimated net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2023-2024 is \$30 million.

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

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

New York County  
250 Church Street  
New York, New York 10018

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

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

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

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

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

### PUBLIC NOTICE

#### Department of Health

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

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

#### Non-Institutional Services

Effective on or after July 1, 2023, this notice proposes to establish Medical Assistance coverage and rates of payment for Coordinated Specialty Care (CSC), an evidence-based practice model for the treatment of young people experiencing a first episode of psychosis (FEP). CSC services are intended to benefit adolescents and young adults with the recent onset of a psychotic disorder, helping to prevent acute service use, reduce disability, and help young people with early psychosis stay on track with their goals for school, work, and relationships.

The estimated aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2024 is \$4.8 million and \$6.4 million for state fiscal year 2025.

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](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

**SUMMARY**  
**SPA #23-0082**

This State Plan Amendment proposes to update the Ambulatory Patient Group (APG) payment methodology for hospital-based clinic and ambulatory surgery services, including emergency room services, to reflect the recalculated weight and component updates that will become effective on or after July 1, 2023.

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**New York  
1(e)(2)**

**1905(a)(2)(A) Outpatient Hospital Services**

**APG Reimbursement Methodology – Hospital Outpatient**

The following links direct users to the various definitions and factors that comprise the APG reimbursement methodology, which can also be found in aggregate on the APG website at [http://www.health.ny.gov/health\\_care/medicaid/rates/apg/index.htm](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](http://www.health.ny.gov/health_care/medicaid/rates/apg/index.htm) Click on “Contacts.”

**3M APG Crosswalk, version 3.18; updated as of ~~01/01/23 and 04/01/23~~ 07/01/23 and 10/01/23:**

[http://www.health.ny.gov/health\\_care/medicaid/rates/crosswalk/index.htm](http://www.health.ny.gov/health_care/medicaid/rates/crosswalk/index.htm)

<http://www.emedny.org/Crosswalk/> Click on “Accept” at bottom of page to gain access.

**APG Alternative Payment Fee Schedule; updated as of 07/01/22:**

[http://www.health.ny.gov/health\\_care/medicaid/rates/methodology/index.htm](http://www.health.ny.gov/health_care/medicaid/rates/methodology/index.htm) Click on “Alternative Payment Fee Schedule.”

**APG Consolidation Logic; logic is from the version of 4/01/08, updated as of ~~01/01/23 and 04/01/23~~ 07/01/23 and 10/01/23:**

[http://www.health.ny.gov/health\\_care/medicaid/rates/bundling/](http://www.health.ny.gov/health_care/medicaid/rates/bundling/) Click on “2023”

**APG 3M Definitions Manual Versions; updated as of ~~01/01/23 and 04/01/23~~ 07/01/23 and 10/01/23:**

[http://www.health.ny.gov/health\\_care/medicaid/rates/crosswalk/index.htm](http://www.health.ny.gov/health_care/medicaid/rates/crosswalk/index.htm)

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

[http://www.health.ny.gov/health\\_care/medicaid/rates/methodology/index.htm](http://www.health.ny.gov/health_care/medicaid/rates/methodology/index.htm) Click on “Investments by Rate Period.”

**APG Relative Weights; updated as of ~~01/01/23~~ 07/01/23:**

[http://www.health.ny.gov/health\\_care/medicaid/rates/methodology/index.htm](http://www.health.ny.gov/health_care/medicaid/rates/methodology/index.htm) Click on “Weights, Proc Weights, and APG Fee Schedule Amounts” file.

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

[http://www.health.ny.gov/health\\_care/medicaid/rates/apg/index.htm](http://www.health.ny.gov/health_care/medicaid/rates/apg/index.htm) Click on “Ancillary Policy.”

TN #23-0082 Approval Date: \_\_\_\_\_

Supersedes TN #23-0018 Effective Date: July 1, 2023

New York  
1(e)(2.1)

**1905(a)(2)(A) Outpatient Hospital Services**

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

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

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

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

**If Stand Alone, Do Not Pay APGs; updated as of 01/01/15:**

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

**If Stand Alone, Do Not Pay Procedures; updated as of 07/01/22:**

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

**Modifiers; updated as of ~~01/01/23~~ 07/01/23:**

[http://www.health.ny.gov/health\\_care/medicaid/rates/methodology/index.htm](http://www.health.ny.gov/health_care/medicaid/rates/methodology/index.htm) Click on "Modifiers."

**Never Pay APGs; updated as of 07/01/21:**

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

**Never Pay Procedures; updated as of ~~01/01/23~~ 07/01/23:**

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

**No-Blend APGs; updated as of 01/01/20:**

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

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

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

TN #23-0082 Approval Date \_\_\_\_\_

Supersedes TN #23-0018 Effective Date July 1, 2023

# 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](http://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 July 2023 will be conducted on July 19 and July 20 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

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 in accordance with the Public Health Law § 2807(2-a)(e). The following changes are proposed:

### Non-Institutional Services

Effective on or after July 1, 2023, the Ambulatory Patient Group (APG) reimbursement methodology is revised to include recalculated weight and component updates in order to update reimbursement for APG payments.

The estimated annual aggregate increase in gross Medicaid expenditures as a result of this proposed amendment is \$4 Million.

The public is invited to review and comment on this proposed State Plan Amendment, a copy of which will be available for public review on the Department's website at <http://www.health.ny.gov/regulations/>

[state\\_plans/status](#). Individuals without Internet access may view the State Plan Amendments at any local (county) social services district.

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

**New York County**  
250 Church Street  
New York, New York 10018

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

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

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

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

*For further information and to review and comment, please contact:* Department of Health, Division of Finance and Rate Setting, 99 Washington Ave., One Commerce Plaza, Suite 1432, Albany, NY 12210, [spa\\_inquiries@health.ny.gov](mailto:spa_inquiries@health.ny.gov)

## PUBLIC NOTICE

Department of Health

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

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

### Non - Institutional Services

Effective on or after July 1, 2023, pursuant to Social Services Law § 365-a(2)(jj), as added by section 1 of chapter 733 of the laws of 2022, applied behavior analysis provided by a person licensed, certified, or otherwise authorized to provide applied behavior analysis under article one hundred sixty-seven of the New York State Education Law will be added to Medicaid standard coverage for all enrollees when medically necessary.

The estimated net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2023-2024 is \$117 million.

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

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

#### Long Term Care Services

Effective on or after July 1, 2023, the Department of Health proposes to amend the Title XIX (Medicaid) State Plan for institutional services related to temporary rate adjustments to long term care providers that are undergoing closure, merger, consolidation, acquisition or restructuring themselves or other health care providers. These payments are authorized by current State statutory and regulatory provisions. The temporary rate adjustments will be reviewed and approved by the CINERGY Collaborative.

The estimated net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2023-2024 is \$30 million.

The public is invited to review and comment on this proposed State Plan Amendment, a copy of which will be available for public review on the Department's website at [http://www.health.ny.gov/regulations/state\\_plans/status](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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Washington Ave., One Commerce Plaza, Suite 1432, Albany, NY  
12210, spa\_inquiries@health.ny.gov

## PUBLIC NOTICE

### Department of Health

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

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

#### Non-Institutional Services

Effective on or after July 1, 2023, this notice proposes to establish Medical Assistance coverage and rates of payment for Coordinated Specialty Care (CSC), an evidence-based practice model for the treatment of young people experiencing a first episode of psychosis (FEP). CSC services are intended to benefit adolescents and young adults with the recent onset of a psychotic disorder, helping to prevent acute service use, reduce disability, and help young people with early psychosis stay on track with their goals for school, work, and relationships.

The estimated aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2024 is \$4.8 million and \$6.4 million for state fiscal year 2025.

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](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

**SUMMARY**  
**SPA #23-0083**

This State Plan Amendment proposes to update the Ambulatory Patient Group (APG) payment methodology for freestanding clinic and ambulatory surgery center services to reflect the recalculated weight and component updates that will become effective on or after July 1, 2023.

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](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](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](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 07/01/22:**

[http://www.health.ny.gov/health\\_care/medicaid/rates/methodology/index.htm](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 ~~3.18.23.1 and 3.18.23.2~~ 3.18.23.3 and 3.18.23.4, updated as of ~~01/01/23 and 04/01/23~~ 07/01/23 and 10/01/23:**

[http://www.health.ny.gov/health\\_care/medicaid/rates/bundling/](http://www.health.ny.gov/health_care/medicaid/rates/bundling/) Click on "2023"

**APG 3M Definitions Manual; version 3.18 updated as of ~~and 01/01/23 and 04/01/23~~ 07/01/23 and 10/01/23:**

[http://www.health.ny.gov/health\\_care/medicaid/rates/methodology/index.htm](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](http://www.health.ny.gov/health_care/medicaid/rates/methodology/index.htm) Click on "Investments by Rate Period."

**APG Relative Weights; updated as of ~~01/01/23~~ 07/01/23:**

[http://www.health.ny.gov/health\\_care/medicaid/rates/methodology/index.htm](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](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 #23-0083 Approval Date \_\_\_\_\_

Supersedes TN #23-0019 Effective Date July 1, 2023



New York  
2(g)(3)

**1905(a)(9) Clinic Services**

**Carve-outs; updated as of 10/01/12. The full list of carve-outs is contained in Never Pay APGs and Never Pay Procedures:**

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

**Coding Improvement Factors (CIF); updated as of 04/01/12 and 07/01/12:**

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

**If Stand Alone, Do Not Pay APGs; updated 01/01/15:**

[http://www.health.ny.gov/health\\_care/medicaid/rates/methodology/index.htm](http://www.health.ny.gov/health_care/medicaid/rates/methodology/index.htm) Click on "If Stand Alone, Do Not Pay APGs."

**If Stand Alone, Do Not Pay Procedures; updated 07/01/22:**

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

**Modifiers; updated as of ~~01/01/23~~ 07/01/23:**

[http://www.health.ny.gov/health\\_care/medicaid/rates/methodology/index.htm](http://www.health.ny.gov/health_care/medicaid/rates/methodology/index.htm) Click on "Modifiers."

**Never Pay APGs; updated as of 07/01/21:**

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

**Never Pay Procedures; updated as of ~~01/01/23~~ 07/01/23:**

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

**No-Blend APGs; updated as of 01/01/20:**

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

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

[http://www.health.ny.gov/health\\_care/medicaid/rates/methodology/index.htm](http://www.health.ny.gov/health_care/medicaid/rates/methodology/index.htm) Click on "No-Blend Procedures."

**No Capital Add-on APGs; updated as of 01/01/20:**

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

TN #23-0083 Approval Date \_\_\_\_\_

Supersedes TN #23-0019 Effective Date July 1, 2023

# 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](http://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 July 2023 will be conducted on July 19 and July 20 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

Department of Health

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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 in accordance with the Public Health Law § 2807(2-a)(e). The following changes are proposed:

### Non-Institutional Services

Effective on or after July 1, 2023, the Ambulatory Patient Group (APG) reimbursement methodology is revised to include recalculated weight and component updates in order to update reimbursement for APG payments.

The estimated annual aggregate increase in gross Medicaid expenditures as a result of this proposed amendment is \$4 Million.

The public is invited to review and comment on this proposed State Plan Amendment, a copy of which will be available for public review on the Department's website at <http://www.health.ny.gov/regulations/>

[state\\_plans/status](#). Individuals without Internet access may view the State Plan Amendments at any local (county) social services district.

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

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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](mailto:spa_inquiries@health.ny.gov)

## PUBLIC NOTICE

Department of Health

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Effective on or after July 1, 2023, pursuant to Social Services Law § 365-a(2)(jj), as added by section 1 of chapter 733 of the laws of 2022, applied behavior analysis provided by a person licensed, certified, or otherwise authorized to provide applied behavior analysis under article one hundred sixty-seven of the New York State Education Law will be added to Medicaid standard coverage for all enrollees when medically necessary.

The estimated net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2023-2024 is \$117 million.

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Department of Health, Division of Finance and Rate Setting, 99  
Washington Ave., One Commerce Plaza, Suite 1432, Albany, NY  
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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 the New York Public Health Law. The following changes are proposed:

#### Long Term Care Services

Effective on or after July 1, 2023, the Department of Health proposes to amend the Title XIX (Medicaid) State Plan for institutional services related to temporary rate adjustments to long term care providers that are undergoing closure, merger, consolidation, acquisition or restructuring themselves or other health care providers. These payments are authorized by current State statutory and regulatory provisions. The temporary rate adjustments will be reviewed and approved by the CINERGY Collaborative.

The estimated net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2023-2024 is \$30 million.

The public is invited to review and comment on this proposed State Plan Amendment, a copy of which will be available for public review on the Department's website at [http://www.health.ny.gov/regulations/state\\_plans/status](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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#### Non-Institutional Services

Effective on or after July 1, 2023, this notice proposes to establish Medical Assistance coverage and rates of payment for Coordinated Specialty Care (CSC), an evidence-based practice model for the treatment of young people experiencing a first episode of psychosis (FEP). CSC services are intended to benefit adolescents and young adults with the recent onset of a psychotic disorder, helping to prevent acute service use, reduce disability, and help young people with early psychosis stay on track with their goals for school, work, and relationships.

The estimated aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2024 is \$4.8 million and \$6.4 million for state fiscal year 2025.

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12210, spa\_inquiries@health.ny.gov

**SUMMARY**  
**SPA #23-0087**

This State Plan Amendment proposes to revise the State Plan to increase the reimbursement rates for EI transportation service one-way trips to authorized EI services. Rates for EI transportation services have not been increased since 2009.

DRAFT



Non-Institutional Services

The following is a clarification to the March 29, 2023, noticed provision, to allow for reimbursement of Medicaid covered services provided by pharmacists and pharmacy interns within their lawful scope of practice. With clarification, based on the enacted budget, the fiscal impact for this proposal has been revised to zero.

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](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](mailto:spa_inquiries@health.ny.gov)

**PUBLIC NOTICE**  
Department of Health

Pursuant to 42 CFR Section 447.205, the Office of Mental Health and the Department of Health hereby give 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 the New York Public Health Law. The following changes are proposed:

Institutional Services

Effective on or after July 1, 2023, this proposal relates to temporary rate adjustments to Article 28 Hospitals that are undergoing a closure, merger, consolidation, acquisition or restructuring of themselves or other health care providers.

Additional temporary rate adjustments have been reviewed and approved for the following hospitals:

- Saint Joseph’s Health

The aggregate payment amounts total up to \$2,897,078 for the period July 1, 2023, through March 31, 2024.

The aggregate payment amounts total up to \$2,843,460 for the period April 1, 2024, through March 31, 2025.

The aggregate payment amounts total up to \$2,162,669 for the period April 1, 2025, through March 31, 2026.

The public is invited to review and comment on this proposed State Plan Amendment. Copies of which will be available for public review on the Department of Health’s website at [http://www.health.ny.gov/regulations/state\\_plans/status](http://www.health.ny.gov/regulations/state_plans/status).

Copies of the proposed State Plan Amendments will be on file in each local (county) social services district and available for public review.

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

New York County  
250 Church Street  
New York, New York 10018

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Long Island City, New York 11101

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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 1460, Albany, NY 12210, [spa\\_inquiries@health.ny.gov](mailto:spa_inquiries@health.ny.gov)

**PUBLIC NOTICE**  
Department of Health

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

The Department of Health proposes to amend the Title XIX (Medicaid) State Plan for non-institutional services in accordance with Section 2559 of the New York State Public Health Law. The following changes are proposed:

Non-Institutional Services

Effective on or after July 1, 2023, all claiming for transportation will be on a fee-for-service basis for each one-way trip. The EI Program transportation rates will be revised from the current Preschool Supportive Health Services Program (PSSHS) one-way trip rates from 2009 to the new rates developed pursuant to a 2021 Cost Study of Early Intervention (EI) Transportation services conducted by Public Consulting Group. Municipalities may continue to use existing transportation vendors paid at the contractual rate, however, the municipalities will receive state share reimbursement at the EIP established rates.

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

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](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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Richmond County, Richmond Center  
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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 non-institutional services to comply with Sections 368-d and 368-e of the Social Services Law. The following changes are proposed:

#### Non-Institutional Services

Effective on or after July 1, 2023, the Department of Health proposes to request federal approval to extend utilization of certified public expenditures (CPEs) reimbursement methodology for School Supportive Health Services. The Department also intends to request federal approval to include coverage of medical services under the Medicaid School Supportive Health Services Program (SSHSP) for all Medicaid-enrolled students, including those without an Individualized Education Plan.

The estimated annual net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2023-2024 is \$25 million.

The public is invited to review and comment on this proposed State Plan Amendment, a copy of which will be available for public review on the Department's website at [http://www.health.ny.gov/regulations/state\\_plans/status](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

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

#### New York City Deferred Compensation Plan and NYCE IRA

The New York City Deferred Compensation Plan & NYCE IRA (the "Plan") is seeking proposals from qualified vendors to provide Investment Consulting Services for the City of New York Deferred Compensation Plan. The Request for Proposals ("RFP") will be available beginning on Monday, June 12, 2023. Responses are due no later than 4:30 p.m. Eastern Time on Friday, June 30, 2023. To obtain a copy of the RFP, please visit the Plan's website at [www1.nyc.gov/site/olr/about/about-rfp.page](http://www1.nyc.gov/site/olr/about/about-rfp.page) and download and review the applicable documents.

*If you have any questions, please email them to:* Georgette Gestely, Director, at [RFPMail@nyceplans.org](mailto:RFPMail@nyceplans.org)

Consistent with the policies expressed by the City, proposals from certified minority-owned and/or women-owned businesses or proposals that include partnering arrangements with certified minority-owned and/or women-owned firms are encouraged. Additionally, proposals from small and New York City-based businesses are also encouraged.

### PUBLIC NOTICE

#### Department of State F-2023-0357

Date of Issuance – June 28, 2023

The New York State Department of State (DOS) is required by Federal regulations to provide timely public notice for the activities described below, which are subject to the consistency provisions of the Federal Coastal Zone Management Act (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-2023-0357, the applicant, Gina Yannucci, is proposing to remove existing fixed dock and floats and install a new 4' x 120' open grate catwalk leading to seasonal 3' x 30' ramp, 5' x 40' float, 15' x 15' float, and 6' x 12' jet ski float. Catwalk to be elevated 4' over tidal vegetation, supported by (22) 10" diameter piles, and floats will be chocked 24" off bottom. This project is located at 98 Old Field Road, Village of Old Field, Suffolk County, Conscience Bay

The applicant's consistency certification and supporting information are available for review at: <https://dos.ny.gov/system/files/documents/2023/06/f-2023-0357.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):

- Conscience Bay, Little Bay, & Setauket Harbor Significant Coastal Fish and Wildlife Habitat: [https://dos.ny.gov/system/files/documents/2020/03/conscience\\_bay\\_little\\_bay\\_setauket\\_harbor.pdf](https://dos.ny.gov/system/files/documents/2020/03/conscience_bay_little_bay_setauket_harbor.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., 30 days from the date of publication of this notice or July 28, 2023.

*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](mailto:CR@dos.ny.gov)

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

**SUMMARY**  
**SPA #23-0089**

This State Plan Amendment proposes to cover the Chronic Disease Self-Management Program (CDSMP) for Arthritis for dates of service on or after October 1, 2023. CDSMP is an evidence-based, self-management interactive program for adults that focuses on disease management skills including decision-making, problem-solving, and action planning to prolong life and promote the health of the Medicaid member.

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 non-institutional services to comply with NYS Social Services Law Section 365-a (2)(II), as added by section 1 of Part R of Chapter 57 of the Laws of 2023. The following changes are proposed:

### **Non-Institutional Services**

Effective on or after October 1, 2023, NYS Medicaid will begin covering the Chronic Disease Self-Management Program (CDSMP) for Arthritis. CDSMP is an interactive workshop for adults that focuses on disease management skills including decision making, problem-solving, and action planning. Its purpose is to increase confidence, physical and psychological well-being, knowledge to manage chronic conditions, and the motivation to manage challenges associated with chronic diseases including arthritis. CDSMP has been shown to improve disease management skills, mental well-being, quality of life, and patient-physician relationships, in addition to reducing healthcare expenditures.

The estimated net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2023-2024 is \$1.4 million.

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

website at [http://www.health.ny.gov/regulations/state\\_plans/status](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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Brooklyn, New York 11201

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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](mailto:spa_inquiries@health.ny.gov)

**SUMMARY**  
**SPA #23-0093**

This State Plan Amendment proposes to reimburse nursing home bed hold days for hospitalization for the five New York State Veteran's nursing homes in accordance with Chapter 586 of the Laws of 2022.

DRAFT



McHenry Township, Lycoming County, Pa. Application for renewal of surface water withdrawal of up to 0.499 mgd (peak day) (Docket No. 20180901).

10. Project Sponsor and Facility: Indian Hills Golf and Tennis Club, Shamokin Township, Northumberland County, Pa. Application for renewal of consumptive use of up to 0.099 mgd (30-day average) (Docket No. 19980504).

11. Project Sponsor and Facility: Inflection Energy (PA) LLC (Loyalsock Creek), Upper Fairfield Township, Lycoming County, Pa. Application for renewal of surface water withdrawal of up to 1.700 mgd (peak day) (Docket No. 20221214).

12. Project Sponsor: Lucky Bear, LLC. Project Facility: Liberty Forge Golf Course (Yellow Breeches Creek), Lower and Upper Allen Townships, Cumberland County, Pa. Applications for renewal of surface water withdrawal of up to 0.432 mgd (peak day) and consumptive use of up to 0.375 mgd (peak day) (Docket No. 19980906).

13. Project Sponsor and Facility: Montgomery Water Authority, Clinton Township, Lycoming County, Pa. Modification to increase groundwater withdrawal (30-day average) from Well 3 by an additional 0.098 mgd, for a total groundwater withdrawal of up to 0.318 mgd, and increase the total system withdrawal limit (30-day average) from 0.492 mgd to 0.730 mgd from Wells 1, 3, and 4 (Docket No. 20210304).

14. Project Sponsor and Facility: Nicholas Meat, LLC, Greene Township, Clinton County, Pa. Applications for groundwater withdrawals (30-day averages) of up to 0.288 mgd from Well WS-1, 0.173 mgd from Well WS-3, and 0.144 mgd from Well WS-4.

15. Project Sponsor and Facility: Repsol Oil & Gas USA, LLC (Susquehanna River), Terry Township, Bradford County, Pa. Application for renewal of surface water withdrawal of up to 1.500 mgd (peak day) (Docket No. 20180909).

16. Project Sponsor and Facility: Repsol Oil & Gas USA, LLC (Wappasening Creek), Windham Township, Bradford County, Pa. Application for renewal of surface water withdrawal of up to 0.999 mgd (peak day) (Docket No. 20070910).

17. Project Sponsor and Facility: Seneca Resources Company, LLC (Crooked Creek), Middlebury Township, Tioga County, Pa. Application for surface water withdrawal of up to 3.000 mgd (peak day).

18. Project Sponsor: South Slope Development Corporation. Project Facility: Song Mountain Ski Resort, Town of Preble, Cortland County, N.Y. Applications for renewal of surface water withdrawal of up to 0.999 mgd (30-day average) from an unnamed tributary to Crooked Lake, consumptive use of up to 0.249 mgd (30-day average), and groundwater withdrawal of up to 0.960 mgd (30-day average) from Well MW-3 (Docket No. 20070901).

19. Project Sponsor and Facility: S.T.L. Resources, LLC (Pine Creek), Pike Township, Potter County, Pa. Application for surface water withdrawal of up to 3.000 mgd (peak day).

20. Project Sponsor: T & C Mobile Home & Construction Services, LLC. Project Facility: Glezen Mine, Town of Lisle, Broome County, N.Y. Application for consumptive use of up to 0.099 mgd (30-day average).

21. Project Sponsor and Facility: Village of Hamilton, Town of Hamilton, Madison County, N.Y. Applications for renewal of groundwater withdrawals (30-day averages) of up to 1.730 mgd from Payne Brook Well 1 and 1.500 mgd from Payne Brook Well 2 (Docket Nos. 19871101 and 19970706).

22. Project Sponsor and Facility: Village of Sidney, Town of Sidney, Delaware County, N.Y. Modification to extend the approval term of the groundwater withdrawal approval (Docket No. 19860201) to provide time for development of a replacement source for existing Well 2 88.

#### 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](mailto:joyler@srbc.net) before the hearing date. The presiding officer

reserves the right to limit oral statements in the interest of time and to control the course of the hearing otherwise. 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](http://www.srbc.net), before 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 Monday, August 21, 2023, to be considered.

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

Dated: July 6, 2023.

Jason E. Oyler,

General Counsel and Secretary to the Commission

## 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 Chapter 586 of the Laws of 2022. The following changes are proposed:

#### Long Term Care Services

Effective on or after August 1, 2023, the Department of Health will reimburse nursing home bed hold days for hospitalization for the five New York State Veteran's nursing homes, at fifty percent of the Medicaid rate otherwise payable to the facility for services in certain situations.

The estimated net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2023-2024 is \$416,000.

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](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  
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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](mailto:spa_inquiries@health.ny.gov)