



STATE OF NEW YORK DEPARTMENT OF HEALTH

Corning Tower The Governor Nelson A. Rockefeller Empire State Plaza Albany, New York 12237

Richard F. Daines, M.D.
Commissioner

James W. Clyne, Jr.
Executive Deputy Commissioner

March 24, 2010

Dear Provider:

The purpose of this letter is to provide important information about Medicaid prenatal care and changes in the Medicaid Prenatal Care Program.

The New York State Department of Health (Department) recognizes the important role that Prenatal Care Assistance Program providers (PCAPs) have played in New York's perinatal health care system. Since its inception, PCAP providers have assured thousands of low income pregnant women access to timely, comprehensive, quality prenatal care. New legislation (Chapter 484 of 2009) was recently enacted to expand access to comprehensive, quality prenatal care to all pregnant women that qualify for Medicaid regardless of where or from whom they obtain care. The legislation eliminates the PCAP designation, certification and associated enhanced global reimbursement rates and transitions to a model of prenatal care designed to ensure that all low-income pregnant women qualifying for Medicaid, not just those served in PCAP clinics, receive comprehensive, high quality, prenatal and postpartum care. Please note that the Medicaid Obstetrical and Maternal Services (MOMS) Program and corresponding rate codes are unchanged.

As a result of these changes, the Department of Health's Bureau of Women's Health will no longer certify or approve PCAP programs. Facilities that are planning closures, openings or relocations of their prenatal clinic programs are no longer required to submit applications to the Bureau of Women's Health. Facilities should contact the Office of Health Systems Management (OHSM) to determine the appropriate approval process for changes to service sites. Please note that all facilities providing prenatal services must have prenatal services included on their operating certificates for all clinic sites offering prenatal care services. For further information, please contact Susan Berry, Certificate of Need Coordinator, New York State Department of Health, Division of Certification and Surveillance, Hedley Park Plaza, 433 River Street, Troy, NY 12180.

In addition, the nurses in the Department's regional offices will discontinue monitoring of prenatal care clinics which previously had PCAP designations. Any outstanding issues identified during previous site visits and requiring corrective action should be addressed in a timely manner. **Please note that the PCAP Annual Report for 2009 should be submitted to the Bureau of Women's Health as soon as possible.**

The Department's Office of Health Insurance Programs (OHIP), in conjunction with the Department's Office of Health Systems Management, will be responsible for oversight of the delivery of Medicaid prenatal care. The Office of Health Insurance Programs has provided information on the new Medicaid prenatal care standards, requirements for Article 28 prenatal care providers to perform presumptive eligibility determinations, and Medicaid coverage and payment policy.

Information regarding Medicaid prenatal care services will soon be posted on the Department's website. A link to the new Medicaid Prenatal Care Standards is below: http://www.health.ny.gov/health_care/medicaid/standards/prenatal_care/

A Special Edition of the Medicaid Update on Medicaid Prenatal Care has been issued that includes more information on Ambulatory Patient Groups (APGs), new primary care enhancements, the new Prenatal Care Standards, Presumptive Eligibility determinations, and Medicaid home health care visits for pregnant women. The website is: http://www.health.ny.gov/health_care/medicaid/program/update/2010/2010-02_special_edition.htm

Frequently asked Questions and Answers and billing guidance specific to prenatal care providers will be posted on the Department's APG web site. The web site is: http://www.health.ny.gov/health_care/medicaid/rates/apg/

Any questions regarding Medicaid Prenatal Care Standards should be directed to the OHIP's Office of the Medical Director at 518-486-6865; questions on Medicaid coverage and payment policy should be directed to OHIP's Division of Financial Planning and Policy at 518-473-2160; and, questions on presumptive eligibility requirements should be directed to OHIP's Division of Coverage and Enrollment at 518-474-8887.

These changes are designed to offer equitable provider reimbursement, increase access to presumptive eligibility and full Medicaid coverage, update clinical standards, and promote the delivery of services and benefits for all pregnant women that qualify for Medicaid.

The Department thanks you for your years of service for pregnant women across New York State and looks forward to your clinic's continued commitment to the delivery of comprehensive prenatal care to New York's most vulnerable women.

Sincerely,

Barbara L. McTague
Director
Division of Family Health