

New York
6(a)(i)

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**Attachment 4.19-B
(4/08)**

For programs providing services in local social services districts which do not include a city with a population of over one million persons, adjustments to Medicaid rates of payment will be calculated by allocating the total dollars available for the applicable rate period to each individual provider proportionally based on each personal care service provider's total annual hours of personal care service provided to recipients of medical assistance to the total annual hours for all providers in this category. The allocated dollars will be included as a reimbursable cost add-on to the Medicaid rates of payment based on the Medicaid utilization data reported in each provider's annual cost report for the period two year[']s prior to the rate year.

Adjustments to Medicaid rates of payment will, in aggregate, not exceed the following amounts for the following periods.

For programs providing services in local social service districts which include a city with a population of more than one million persons:

- For the period April 1, 2002 through December 31, 2002, one hundred ten million dollars.
- For the period January 1, 2003 through December 31, 2003, one hundred eighty five million dollars.
- For the period January 1, 2004 through December 31, 2004, two hundred sixty million dollars.
- For the period January 1, 2005 through December 31, 2006, three hundred forty million dollars annually.
- For the period January 1, 2007 through December 31, 2007, three hundred forty million dollars.
- For the period January 1, 2008 through [March] December 31, 2008, [eighty-five] three hundred forty million dollars.
- For the period January 1, 2009 through December 31, 2009, three hundred forty million dollars.
- For the period January 1, 2010 through December 31, 2010, three hundred forty million dollars.
- For the period January 1, 2011 through March 31, 2011, eighty-five million dollars.

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For programs providing services in local social service districts which do not include a city with a population of over one million persons:

- For the period April 1, 2002 through December 31, 2002, seven million dollars.
- For the period January 1, 2003 through December 31, 2003, fourteen million dollars.
- For the period January 1, 2004 through December 31, 2004, twenty-one million dollars.
- For the period January 1, 2005 through December 31, 2006, twenty-seven million dollars annually; for the period August 17, 2006 through December 31, 2006, an additional aggregate amount of four million dollars.
- For the period January 1, 2007 through June 30, 2007, thirteen million five hundred thousand dollars.
- For the period July 1, 2007 through March 31, 2008, twenty-six million two hundred fifty thousand dollars.
- For the period April 1, 2008 through March 31, 2009, twenty-eight million five hundred thousand dollars.
- For the period April 1, 2009 through March 31, 2010, twenty-eight million five hundred thousand dollars.
- For the period April 1, 2010 through March 31, 2011, twenty-eight million five hundred thousand dollars.

Revisions to rates made for such recruitment and retention costs shall not be subject to subsequent adjustment or reconciliation.

The final rate is payment-in-full for all personal care services provided during the applicable rate year, subject to any revisions made in accordance with rate revision or audit procedures.

[For personal care services provided by or under arrangements with individual providers, payment is made directly to the individual provider at a rate approved by the Department and the Director of the Budget.]

For personal care services provided directly by social services district staff, payment is made according to a salary schedule established by the social services district. Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers. The agency's fee schedule rate was set as of January 1, 2009 and is effective for services provided on or after that date. All rates are published on the New York State Department of Health website at:

www.health.ny.gov/facilities/long_term_care/reimbursement/#-cr1

[For personal care services provided in family care home certified or operated by the Office of Mental Health (OMH), payment is made in accordance with a fee schedule developed by OMH and approved by the Department and the Director of the Budget.] The Office of Mental Health (OMH) established the rate of payment to family care providers approved to provide personal care services to family care residents. The agency's fee schedule rate was set as of April 1, 2008 and is published at www.omh.ny.gov.

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Personal Care Services (limited)

The Commissioner of Health, subject to the approval of the Director of the Budget, establishes reimbursement rates for certain personal care services provided to eligible residents by a certified operator of an adult home or enriched housing program that has been issued a limited license by the Department. A limited license may be issued to the certified operator of an adult home or enriched housing program and allows such operator to directly provide certain personal care and nursing services to residents of the adult home or enriched housing program governed by the terms of the limited license. The personal care services for which reimbursement shall be provided are Level II personal care services, including related nursing supervision, as authorized by the Commissioner, provided however, that the services provided are not personal care services that must otherwise be provided to residents of adult homes or enriched housing programs and, provided further, that reimbursement for Level II personal care services shall not include reimbursement for Level I nutritional and environmental support functions. Regional quarter hour rates are established utilizing weighted average Level II personal care rates for the respective regions for direct care and training, capital, and criminal checks, plus no more than fifteen percent of such rates for administrative expenses.

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