

Workforce Recruitment And Retention

Effective for dates of service beginning on April 1, 2002 and ending on March 31, 2008, medical assistance rates of payment shall be adjusted for comprehensive freestanding diagnostic and treatment centers that qualify for distributions under the state's comprehensive diagnostic and treatment centers indigent care program or indicate on the cost reports submitted to the state that they receive funding under section three hundred thirty-three of the Federal Public Health Services Act for health care for the homeless, freestanding clinics that provide services to clients with developmental disabilities as their principal mission, licensed facilities authorized to provide dental services and sponsored by a university or dental school, licensed freestanding family planning clinics, and freestanding diagnostic and treatment centers operating an approved program under the prenatal care assistance program to include costs associated with the recruitment and retention of non-supervisory workers or any worker with direct patient care responsibility. For the period April 1, 2002 through December 31, 2002, the aggregate amount of thirteen million dollars will be available for this purpose. The aggregate amount of thirteen million dollars will also be available each year for the periods January 1, 2003 through December 31, 2006. For the period January 1, 2007 through June 30, 2007 the aggregate amount of six million five hundred thousand dollars will be available for this purpose. For the period July 1, 2007 through March 31, 2008, nine million seven hundred fifty thousand dollars will be available. For the period April 1, 2008 through March 31, 2009, thirteen million dollars will be available. For the period April 1, 2009 through March 31, 2010, thirteen million dollars will be available. For the period April 1, 2010 through March 31, 2011, thirteen million dollars will be available. Payments will be made as adjustments to the rates of payment allocated proportionately based upon each diagnostic and treatment center's total annual gross salary and fringe benefit costs as reported in their 1999 cost report submitted to the Department of Health prior to November 21, 2001. These amounts shall be included as a reimbursable cost add-on to medical assistance fee-for-service rates of payment established pursuant to this section, based on Medicaid utilization data in each facility's annual cost report submitted two years prior to the rate year or projected Medicaid utilization data for those facilities that have not submitted an annual cost report for the period two years prior to the rate year. Such amounts shall not be reconciled to reflect changes in medical assistance utilization between the year two years prior to the rate year and the rate year. For the periods on and after July 1, 2007, payments will be made as adjustments to the rates of payment and the available funding allocated proportionately based upon each diagnostic and treatment center's total reported Medicaid visits as reported in their 2004 cost report submitted to the Department of Health prior to January 31, 2007, to the total of such Medicaid visits for all diagnostic and treatment centers.

The Commissioner of Health shall increase medical assistance rates of payment [for eligible diagnostic and treatment centers] by three percent for services provided on and after December first, two thousand two for purposes of improving recruitment and retention of non-supervisory

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workers or any worker with direct patient care responsibility for[. Eligible diagnostic and treatment center shall mean a] voluntary, not-for-profit diagnostic and treatment centers that received medical assistance rates of payment reflecting assignment to (1) limited primary care or (2) drug free peer groups and that provides primary health care services to a patient population primarily comprised of substance abuse patients and that [is] are ineligible for an adjustment to medical assistance rates of payment under the first paragraph of this section of the plan.

Diagnostic and treatment centers which have their rates adjusted for this purpose shall use such funds solely for the purposes of recruitment and retention of non-supervisory workers or any worker with direct patient care responsibility and are prohibited from using such funds for any other purpose. The commissioner is authorized to audit each such diagnostic and treatment center to ensure compliance with this purpose and shall recoup any funds determined to have been used for purposes other than recruitment and retention of non-supervisory workers or any worker with direct patient care responsibility.

The Commissioner shall increase medical assistance rates of payment by three percent for services provided on and after December first, two thousand two by freestanding methadone maintenance service and program providers; subject to provisions of the following paragraph. Freestanding methadone maintenance services and program providers which are eligible for rate adjustments pursuant to this paragraph and which are also eligible for rate adjustments pursuant to the first paragraph of this section of the plan shall, on or before July first, two thousand two, submit, amendments to their 1999 AHCF-1 cost report segregating wages and fringe benefit costs associated with methadone maintenance services, for the purpose of excluding such wages and fringe benefits from awards determined on and after January 1, 2003, pursuant to the first paragraph of this section of the plan titled Workforce Recruitment And Retention.

Freestanding methadone maintenance service and program providers which have their rates adjusted in accordance with the above shall use such funds solely for the purpose of recruitment and retention of non-supervisory workers or any worker with direct patient care responsibility and are prohibited from using such funds for any other purpose. The Commissioner is authorized to audit each freestanding methadone maintenance services and program provider to ensure compliance with this purpose and shall recoup any funds determined to have been used for purposes other than recruitment and retention of non-supervisory workers or any worker with direct patient care responsibility.

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