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Region II
Federal Building
26 Federal Plaza
New York, N.Y. 10278

August 25, 2011

Jason A. Helgeson
Deputy Commissioner
New York State Department of Health
Corning Tower, Empire State Plaza
Albany, New York 12237

Dear Commissioner Helgeson:

This is to notify you that New York State Plan Amendment (SPA) #09-10 has been approved for adoption into the State Medicaid Plan with an effective date of April 1, 2009. The SPA continues hospital outpatient payment adjustments that increase the operating cost components of rates of payment for hospital outpatient and emergency department services for public general hospitals, other than those operated by the State of New York or the State University of New York that are located in a city with a population of over one million people, for the period April 1, 2009 through March 31, 2010.

This SPA approval consists of 1 Page. We are approving the following Page which was submitted with the State's August 9, 2011 electronic submission to the CMS SPA Mailbox: Attachment 4.19-B-Page 2(c)(v). This page replaces the various copies of the pages which had been submitted earlier by the State for SPA 09-10. In addition, we are using the revised HCFA-179 which was submitted by the State on August 9, 2011.

This amendment satisfies all of the statutory requirements at sections 1902(a)(13) and (a)(30) of the Social Security Act, and the implementing regulations at 42 CFR 447.250 and 447.272. Enclosed are copies of SPA #09-10 and the HCFA-179 form, as approved.

If you have any questions or wish to discuss this SPA further, please contact Ricardo Holligan or Shing Jew of this office. Mr. Holligan may be reached at (212) 616-2424, and Mr. Jew's telephone number is (212) 616-2426.

Sincerely,

/s/

Michael Melendez
Associate Regional Administrator
Division of Medicaid and Children's Health

Enclosure: SPA #09-10
HCFA-179 Form

CC: JUlberg
PMossman
KKnuth
RWeaver
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SJew