



DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare &
Medicaid Services

Refer to DMCH: SJ

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

July 19, 2010

Donna Frescatore
Deputy Commissioner
New York State Department of Health
Corning Tower, Empire State Plaza
Albany, New York 12237

Dear Commissioner Frescatore:

This is to notify you that New York State Plan Amendment (SPA) #09-56-C has been approved for adoption into the State Medicaid Plan with an effective date of December 1, 2009. The SPA provides that certain free-standing clinics in the upper northeastern region of New York State will seek to become certified as health care homes in order to improve health outcomes and efficiency through patient care continuity and coordination of health services (the Adirondack Health Care Home Multipayor Program), and that these facilities will be eligible for enhanced payments for services provided to recipients.

This SPA approval consists of 2 Pages. As New York has requested, we are approving the Attachment 4.19B-Page 1(c)(i)(G) and 1(c)(i)(H), which were submitted with the State's June 9, 2010 electronic submission to the CMS SPA Mailbox. In that letter, New York requested that the original SPA 09-56 submission of December 31, 2009 be split into four separate SPAs: 09-56-A, 09-56-B, 09-56-C and 09-56-D. This approval is for SPA 09-56-C; we will advise you about the other SPAs in other correspondence.

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 09-56-C and HCFA-179 form, as approved.

If you have any questions or wish to discuss this SPA further, please contact Michael Melendez or Shing Jew of this office. Mr. Melendez may be reached at (212) 616-2430, and Mr. Jew's telephone number is (212) 616-2426.

Sincerely,

/s/

Sue Kelly
Associate Regional Administrator
Division of Medicaid and Children's Health

Enclosure: SPA #09-56-C
HCFA-179 Form

CC: JUlberg
PMossman
SUrwin
SGaskins
LTavener
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MSamuel
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