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# State/Territory Name: New York

# State Plan Amendment (SPA) #: 20-0029MA

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages



#### **Financial Management Group**

August 28, 2020

Ms. Donna Frescatore State Medicaid Director Office of Health Insurance Programs NYS Department of Health One Commerce Plaza, Suite 1211 Albany, NY 12210

RE: State Plan Amendment (SPA) TN 20-0029MA

Dear Ms. Frescatore:

We have reviewed the proposed amendment to Attachment 4.19-D of your Medicaid State Plan submitted under transmittal number (TN) 20-0029MA. Effective April 1, 2020 this amendment provides temporary Vital Access Provider / Safety Net Provider (VAP/SNP) enhanced payments to nursing home facilities.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(2), 1902(a)(13), 1902(a)(30)and 1903(a) of the Social Security Act and the implementing Federal regulations at 42 CFR Part 447. This letter is to inform you that New York 20-0029MA is approved effective April 1, 2020. The CMS-179 and approved plan pages are enclosed.

If you have any questions, please contact Charlene Holzbaur at 609-882-4796.

Sincerely,

For Karen Shields Acting Director

Enclosures

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL	1. TRANSMITTAL NUMBER MA <u>2</u> 0 — 0 0 2 9 New York	
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID) TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE April 1, 2020	
5. TYPE OF PLAN MATERIAL (Check One)		
	IDERED AS NEW PLAN	
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AME	NDMENT (Separate transmittal for each amendment)	
6. FEDERAL STATUTE/REGULATION CITATION	7. FEDERAL BUDGET IMPACT a. FFY 04/01/20-09/30/20 \$ 7,500,000.00	
§1902(r)(5) of the Social Security Act, and 42 CFR 447	a. FFY 04/01/20-09/30/20     \$ 7,500,000.00       b. FFY 10/01/20-09/30/21     \$ 15,000,000.00	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)	
Attachment: 4.19-D Page(s): 47(aa)(5), 47(aa)(5.1), 47(aa)(6), 47(aa)(6.1), 47(aa) (6.2), 47(aa)(7), 47(aa)(7.1), 47(aa)(8), 47(aa)(8.1), 47(aa)(9), 47(aa)(9.1), 47(aa) (10), 47(aa)(10.1) 47(aa)(4)		
10. SUBJECT OF AMENDMENT		
CINERGY (FMAP=50%)		
11. GOVERNOR'S REVIEW (Check One)		
<ul> <li>GOVERNOR'S OFFICE REPORTED NO COMMENT</li> <li>COMMENTS OF GOVERNOR'S OFFICE ENCLOSED</li> <li>NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL</li> </ul>	OTHER, AS SPECIFIED	
	16. RETURN TO New York State Department of Health	
13. TYPED NAME	Division of Finance and Rate Setting 99 Washington Ave – One Commerce Plaza	
Donna Frescatore	Suite 1432	
Medicaid Director, Department of Health	Albany, NY 12210	
15. DATE SUBMITTED June 30, 2020		
FOR REGIONAL OFFICE USE ONLY		
17. DATE RECEIVED June 30,2020	18. DATE APPROVED 8/28/20	
PLAN APPROVED - OF	NE COPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL	20. SIGNATURE OF REGIONAL OFFICIAL	
April 1, 2020		
21. TYPED NAME Karen Shields	22. TITLE Acting Director, FMG	
23. REMARKS		
State requested pen and ink change to Box 1 to 20-002 and pen and ink changes to Boxes 8 and 9 to inc		

#### New York 47(aa)(4)

# Temporary Rate Adjustments for Mergers, Acquisitions, Consolidations, Restructurings, and Closures – Nursing Homes

A temporary rate adjustment will be provided to eligible residential health care providers that [are] <u>may be</u> subject to or impacted by the closure, merger, and acquisition, consolidation or restructuring of a health care provider. The rate adjustment is intended to:

- Protect or enhance access to care;
- Protect or enhance quality of care; or
- Improve the cost effectiveness.

Eligible residential health care providers, the amount of the temporary rate adjustment, and the duration of each rate adjustment period shall be listed in the table which follows. The total adjustment amount for each period shown below will be paid quarterly during each period in equal installments. The temporary payment made under this section will be an add-on to services payments made under this Attachment to such facilities during the quarter.

To remain eligible, providers must submit benchmarks and goals acceptable to the Commissioner and must submit periodic reports, as requested by the Commissioner, concerning the achievement of such benchmarks and goals. Failure to achieve satisfactory progress in accomplishing such benchmarks and goals will result in termination of the provider's temporary rate adjustment prior to the end of the specified timeframe. Once a provider's temporary rate adjustment ends, the provider will be reimbursed in accordance with the otherwise applicable rate-setting methodology as set forth in this Attachment.

Temporary rate adjustments have been approved for the following providers in the amounts and for the effective periods listed.

Provider Name	Gross Medicaid Rate Adjustment	Rate Period Effective
Adiyondool: Madical Conton Mayor	\$6,694	01/01/2014 - 03/31/2014
Adirondack Medical Center - Mercy	\$723,872	04/01/2014 - 03/31/2015
Living Center	\$918,544	06/16/2016 - 03/31/2017
	\$2,273,884	01/01/2014 - 03/31/2014
Adirondack Medical Center - Uihlein	\$2,359,369	04/01/2014 - 03/31/2015
Living Center	\$821,793	04/01/2015 - 03/31/2016
-	\$1,274,864	06/16/2016 - 03/31/2017
Adirondack Tri-County Nursing &	\$225,680	01/01/2014 - 03/31/2014
Rehabilitation Center, Inc.	\$1,369,690	04/01/2014 - 03/31/2015
	\$1,049,423	06/16/2016 - 03/31/2017

#### Nursing Homes:

TN <u>#20-0029-MA</u>	Approval Date <u>8/28/20</u>
Supersedes TN <u>#16-0027</u>	Effective Date <u>April 1, 2020</u>

# New York 47(aa)(5)

## Nursing Homes (Continued):

Provider Name	<u>Gross Medicaid Rate</u> <u>Adjustment</u>	Rate Period Effective
	<u>\$1,430,938</u>	<u>01/01/2015 – 03/31/2015</u>
Amsterdam Nursing Home Corp	<u>\$1,450,213</u>	<u>04/01/2015 – 03/31/2016</u>
<u>(Amsterdam House)*</u>	<u>\$1,447,006</u>	<u>04/01/2016 – 03/31/2017</u>
	<u>\$847,377</u>	<u>04/01/2020 – 03/31/2021</u>
	<u>\$847,377</u>	<u>04/01/2021 – 03/31/2022</u>
	<u>\$935,000</u>	<u>10/01/2018 - 03/31/2019</u>
Baptist Nursing and Rehabilitation	<u>\$910,000</u>	<u>04/01/2019 - 03/31/2020</u>
	<u>\$347,500</u>	<u>04/01/2020 – 03/31/2021</u>
	<u>\$2,460,249</u>	<u>01/01/2015 – 03/31/2015</u>
Beth Abraham Health Services*	<u>\$2,493,389</u>	<u>04/01/2015 – 03/31/2016</u>
	<u>\$2,487,874</u>	<u>04/01/2016 – 03/31/2017</u>
	<u>\$788,294</u>	<u>01/01/2015 – 03/31/2015</u>
	<u>\$798,912</u>	<u>04/01/2015 – 03/31/2016</u>
Bronx-Lebanon Special Care Center*	<u>\$797,146</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$521,445</u>	<u>04/01/2020 – 03/31/2021</u>
	<u>\$521,445</u>	<u>04/01/2021 – 03/31/2022</u>
*Denotes provider is part of CINEDCV Co		

\*Denotes provider is part of CINERGY Collaborative.

TN <u>#20-0029-MA</u>

Approval Date 8/28/20 Effective Date April 1, 2020

Supersedes TN <u>#18-0062</u>

# New York 47(aa)(5.1)

## Nursing Homes (Continued):

Provider Name	Gross Medicaid Rate	Rate Period Effective
<u>Provider Name</u>	<u>Adjustment</u>	Rate Period Effective
Bus alders Units of Matheadist Chausels	<u>\$702,169</u>	<u>01/01/2015 - 03/31/2015</u>
	<u>\$707,212</u>	<u>04/01/2015 - 03/31/2016</u>
Brooklyn United Methodist Church Home*	<u>\$706,273</u>	<u>04/01/2016 - 03/31/2017</u>
<u>nome</u>	<u>\$384,919</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$384,919</u>	<u>04/01/2021 - 03/31/2022</u>
	<u>\$970,765</u>	<u>01/01/2015 - 03/31/2015</u>
Buena Vida Continuing Care & Rehab	<u>\$983,841</u>	<u>04/01/2015 - 03/31/2016</u>
<u>Ctr*</u>	<u>\$981,665</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$642,147</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$642,147</u>	<u>04/01/2021 - 03/31/2022</u>
	<u>\$1,130,860</u>	<u>01/01/2015 - 03/31/2015</u>
Cabrini Center for Nursing*	<u>\$1,146,093</u>	<u>04/01/2015 - 03/31/2016</u>
	<u>\$1,143,558</u>	04/01/2016 - 03/31/2017
	<u>\$1,084,185</u>	<u>01/01/2015 - 03/31/2015</u>
Conneal Diskussend Llooltheory and	<u>\$1,098,790</u>	<u>04/01/2015 - 03/31/2016</u>
Carmel Richmond Healthcare and	<u>\$1,096,359</u>	<u>04/01/2016 - 03/31/2017</u>
Rehabilitation Center*	<u>\$632,161</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$632,161</u>	<u>04/01/2021 - 03/31/2022</u>
	<u>\$1,179,939</u>	<u>01/01/2015 - 03/31/2015</u>
	<u>\$1,195,833</u>	<u>04/01/2015 - 03/31/2016</u>
Center For Nursing & Rehabilitation	<u>\$1,193,189</u>	<u>04/01/2016 - 03/31/2017</u>
Inc*	<u>\$746,693</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$746,693</u>	<u>04/01/2021 - 03/31/2022</u>
Chapin Home for the Aging*	<u>\$771,403</u>	<u>01/01/2015 – 03/31/2015</u>
	<u>\$781,794</u>	04/01/2015 - 03/31/2016
	<u>\$780,065</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$487,868</u>	<u>04/01/2020 – 03/31/2021</u>
	\$487,868	<u>04/01/2021 - 03/31/2022</u>

\*Denotes provider is part of CINERGY Collaborative.

TN	#20-0029-MA

Supersedes TN <u>#NEW</u>

Approval Date 8/28/20 Effective Date April 1, 2020

## New York 47(aa)(6)

# Nursing Homes (Continued):

Provider Name	<u>Gross Medicaid Rate</u> <u>Adjustment</u>	Rate Period Effective
Charles T. Sitrin Health Care Center	<u>\$2,000,000</u>	<u>01/01/2015 – 03/31/2015</u>
Inc.	<u>\$591,984</u>	<u>06/16/2016 - 03/31/2017</u>
	<u>\$25,817</u>	<u>04/01/2017 – 03/31/2018</u>
Cobble Hill Health Center*	<u>\$400,000</u>	<u>04/01/2020 – 03/31/2021</u>
	<u>\$400,000</u>	<u>04/01/2021 - 03/31/2022</u>
	<u>\$2,011,962</u>	<u>10/01/2018 - 03/31/2019</u>
Concord Nursing Home*	<u>\$2,011,962</u>	<u>04/01/2019 - 03/31/2020</u>
	<u>\$250,000</u>	<u>04/01/2020 – 03/31/2021</u>
	<u>\$250,000</u>	<u>04/01/2021 - 03/31/2022</u>
	<u>\$645,000</u>	<u>01/01/2014 - 03/31/2014</u>
Crouse Community Center	<u>\$710,000</u>	<u>04/01/2014 - 03/31/2015</u>
	<u>\$65,000</u>	<u>04/01/2015 - 03/31/2016</u>
	<u>\$1,463,808</u>	<u>01/01/2015 – 03/31/2015</u>
Eger Health Care and Rehabilitation	<u>\$1,483,526</u>	<u>04/01/2015 - 03/31/2016</u>
<u>Center*</u>	<u>\$1,480,245</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$968,289</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$968,289</u>	<u>04/01/2021 - 03/31/2022</u>

TN	#20-0029-MA	
Sup	ersedes TN	#18-0062

Approval Date _	8/28/20
	April 1, 2020

## New York 47(aa)(6.1)

# Nursing Homes (Continued):

	Gross Medicaid Rate	
Provider Name	Adjustment	Rate Period Effective
	<u>\$2,434,828</u>	<u>04/01/2018 - 03/31/2019</u>
Elderwood at North Creek	<u>\$1,129,788</u>	<u>04/01/2019 - 03/31/2020</u>
	<u>\$ 435,384</u>	<u>04/01/2020 - 03/31/2021</u>
Elizabeth Seton Pediatric Center*	<u>\$927,714</u>	<u>01/01/2015 - 03/31/2015</u>
	<u>\$940,211</u>	<u>04/01/2015 - 03/31/2016</u>
	<u>\$938,131</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$613,670</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$613,670</u>	<u>04/01/2021 - 03/31/2022</u>
	<u>\$3,029,944</u>	<u>01/01/2015 - 03/31/2015</u>
	<u>\$1,043,818</u>	<u>04/01/2015 - 03/31/2016</u>
	<u>\$1,341,809</u>	<u>06/16/2016 - 03/31/2017</u>
Ferncliff Nursing Home Co Inc.*	<u>\$1,041,509</u>	<u>10/01/2016 - 03/31/2017</u>
Fericin Nursing Home Co Inc.	<u>\$ 684,373</u>	<u>04/01/2017 - 03/31/2018</u>
	<u>\$ 18,529</u>	<u>04/01/2018 - 03/31/2019</u>
	<u>\$681,294</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$681,294</u>	<u>04/01/2021 - 03/31/2022</u>
Field Home – Holy Comforter	<u>\$534,500</u>	<u>04/01/2012 - 03/31/2013</u>
	<u>\$534,500</u>	<u>04/01/2013 - 03/31/2014</u>
Good Samaritan Nursing Home*	<u>\$371,698</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$371,698</u>	<u>04/01/2021 - 03/31/2022</u>
	<u>\$1,778,009</u>	<u>01/01/2015 – 03/31/2015</u>
Gurwin Jewish Nursing and	<u>\$1,801,960</u>	<u>04/01/2015 - 03/31/2016</u>
Rehabilitation Center*	<u>\$1,797,975</u>	<u>04/01/2016 - 03/31/2017</u>
Kenabilitation Center	<u>\$1,110,754</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$1,110,754</u>	<u>04/01/2021 – 03/31/2022</u>
Hebrew Home for the Aged at	<u>\$1,875,731</u>	<u>04/01/2020 – 03/31/2021</u>
<u>Riverdale*</u>	<u>\$1,875,731</u>	<u>04/01/2021 – 03/31/2022</u>

TN	#20-00	)29-MA
Sup	ersedes TN	NEW

Approval Date	8/28/20	
Effective Date	<u>April 1, 2020</u>	

## New York 47(aa)(6.2)

# Nursing Homes (Continued):

Provider Name	<u>Gross Medicaid Rate</u> <u>Adjustment</u>	Rate Period Effective
Haritaga Commons Desidential Health	<u>\$976,816</u>	<u>01/01/2014 - 03/31/2014</u>
Heritage Commons Residential Health	<u>\$834,744</u>	<u>04/01/2014 - 03/31/2015</u>
Care	<u>\$1,055,223</u>	<u>06/16/2016 - 03/31/2017</u>
	<u>\$2,902,269</u>	<u>01/01/2015 – 03/31/2015</u>
	<u>\$2,941,364</u>	<u>04/01/2015 - 03/31/2016</u>
Isabella Geriatric Center Inc*	<u>\$2,934,859</u>	<u>04/01/2016 - 03/31/2017</u>
	\$1,633,648	04/01/2020 - 03/31/2020
	<u>\$1,633,648</u>	<u>04/01/2021 - 03/31/2022</u>
	<u>\$903,195</u>	01/01/2015 - 03/31/2015
	<u>\$909,966</u>	<u>04/01/2015 - 03/31/2016</u>
Island Nursing and Rehab Center*	<u>\$908,716</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$495,250</u>	04/01/2020 - 03/31/2021
	\$495,250	04/01/2021 - 03/31/2022

TΝ	#20-0029-MA	
Sup	ersedes TN	NEW

Approval Date	8/28/20
Effective Date	

#### New York 47(aa)(7)

## Nursing Homes (Continued):

Provider Name	<u>Gross Medicaid Rate</u> Adjustment	Rate Period Effective
Island Nursing and Rehab	\$3,375,000	12/13/2019 - 03/31/2020
	\$4,200,000	04/01/2020 - 03/31/2021
	<u>\$4,275,000</u>	<u>04/01/2021 - 03/31/2022</u>
Jamaica Hospital Nursing Home Co	<u>\$764,892</u>	<u>01/01/2015 – 03/31/2015</u>
Inc*	<u>\$775,195</u>	<u>04/01/2015 - 03/31/2016</u>
	<u>\$773,481</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$505,965</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$505,965</u>	<u>04/01/2021 - 03/31/2022</u>
Jefferson's Ferry*	<u>\$324,023</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$324,023</u>	<u>04/01/2021- 03/31/2022</u>
Jewish Home Lifecare Henry and	<u>\$2,939,255</u>	<u>01/01/2015 - 03/31/2015</u>
Jeanette Weinberg Campus Bronx*	<u>\$2,978,848</u>	<u>04/01/2015 - 03/31/2016</u>
	<u>\$2,972,260</u>	<u>04/01/2016 - 03/31/2017</u>
Jewish Home LifeCare Manhattan*	\$1,947,662	<u>01/01/2015 - 03/31/2015</u>
	<u>\$1,973,898</u>	<u>04/01/2015 - 03/31/2016</u>
	\$1,969,532	04/01/2016 - 03/31/2017

TN <u>#20-00</u>	029-MA	Approval Date	8/28/20
Supersedes TN	#19-0055	Effective Date	<u>April 1, 2020</u>

#### New York 47(aa)(7.1)

# Nursing Homes (Continued):

Provider Name	Gross Medicaid Rate	Rate Period Effective
	Adjustment	
Jewish Home LifeCare Sarah	<u>\$1,169,410</u>	<u>01/01/2015 – 03/31/2015</u>
Neuman Center*	<u>\$1,185,162</u>	<u>04/01/2015 – 03/31/2016</u>
<u></u>	<u>\$1,182,541</u>	<u>04/01/2016 – 03/31/2017</u>
Lutheran Augustana Conter for	<u>\$1,016,961</u>	<u>01/01/2015 – 03/31/2015</u>
Lutheran Augustana Center for Extended Care & Rehab*	<u>\$1,030,660</u>	<u>04/01/2015 - 03/31/2016</u>
Extended Care & Renab*	<u>\$1,028,381</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$700,877</u>	<u>01/01/2015 – 03/31/2015</u>
Margaret Tietz Center For Nursing	<u>\$710,318</u>	<u>04/01/2015 - 03/31/2016</u>
Care Inc*	<u>\$708,747</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$463,620</u>	<u>04/01/2020 - 03/31/2021</u>
	\$463,620	04/01/2021 - 03/31/2022
	<u>\$1,453,160</u>	<u>01/01/2015 - 03/31/2015</u>
Man ( Manajara ) Malah Nuwajara	\$1,472,735	04/01/2015 - 03-31-2016
Mary Manning Walsh Nursing	\$1,469,478	04/01/2016 - 03-31-2017
Home Co Inc*	\$861,601	04/01/2020 - 03-31-2021
	\$861,601	04/01/2021 - 03-31-2022
	<u>\$1,210,053</u>	01/01/2015 - 03/31/2015
Menorah Home And Hospital For	\$1,226,353	04/01/2015 - 03/31/2016
Rehabilitation and Nursing*	<u>\$1,223,641</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$800,433</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$800,433</u>	<u>04/01/2021 – 03/31/2022</u>
	<u>\$441,177</u>	<u>01/01/2015 – 03/31/2015</u>
Mathadist Homo for Nursing and	<u>\$447,120</u>	<u>04/01/2015 - 03/31/2016</u>
Methodist Home for Nursing and Rehabilitation*	<u>\$446,131</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$291,832</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$291,832</u>	<u>04/01/2021 - 03/31/2022</u>

\*Denotes provider is part of CINERGY Collaborative.

TN	#20-0029-MA

Approval Date 8/28/20

Supersedes TN <u>#NEW</u>

Effective Date <u>April 1, 2020</u>

#### New York 47(aa)(8)

#### Nursing Homes (Continued):

Provider Name	<u>Gross Medicaid Rate</u> <u>Adiustment</u>	Rate Period Effective
New York Congregational Nursing	<u>\$717,376</u>	<u>01/01/2015 – 03/31/2015</u>
New York Congregational Nursing	<u>\$727,040</u>	<u>04/01/2015 - 03/31/2016</u>
<u>Center Inc*</u>	<u>\$725,432</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$5,597,952</u>	<u>04/01/2012 - 03/31/2013</u>
	<u>\$3,885,888</u>	<u>04/01/2013 - 12/31/2013</u>
Northeast Center for Special Care	<u>\$5,312,562</u>	<u>01/01/2014 - 03/31/2014</u>
	<u>\$5,027,984</u>	<u>04/01/2014 - 03/31/2015</u>
	<u>\$815,934</u>	<u>04/01/2015 – 03/31/2016</u>
	<u>\$977,614</u>	<u>01/01/2015 - 03/31/2015</u>
Palisade Nursing Home Company Inc*	<u>\$990,783</u>	<u>04/01/2015 - 03/31/2016</u>
	<u>\$988,592</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$1,929,819</u>	<u>01/01/2015 - 03/31/2015</u>
Darkar Jawish Institute for Health	<u>\$1,955,814</u>	<u>04/01/2015 - 03/31/2016</u>
Parker Jewish Institute for Health Care and Rehabilitation*	<u>\$1,951,489</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$1,276,548</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$1,276,548</u>	<u>04/01/2021 - 03/31/2022</u>

\*Denotes provider is part of CINERGY Collaborative.

TN <u>#20-0029-MA</u> Approval Date <u>8/28/20</u>

Supersedes TN <u>#15-0030</u>

Effective Date <u>April 1, 2020</u>

#### New York 47(aa)(8.1)

#### Nursing Homes (Continued):

Provider Name	<u>Gross Medicaid Rate</u> <u>Adjustment</u>	Rate Period Effective
	<u>\$693,647</u>	<u>01/01/2015 - 03/31/2015</u>
	<u>\$702,990</u>	<u>04/01/2015 - 03/31/2016</u>
Providence Rest*	<u>\$701,435</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$458,838</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$458,838</u>	<u>04/01/2021 - 03/31/2022</u>
	<u>\$387,029</u>	01/01/2015 - 03/31/2015
Debelieh Debehilitetien 8	<u>\$392,242</u>	<u>04/01/2015 - 03/31/2016</u>
Rebekah Rehabilitation & Extended Care Center Inc*	<u>\$510,122</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$282,288</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$282,288</u>	<u>04/01/2021 - 03/31/2022</u>
	\$1,858,017	<u>01/01/2015 - 03/31/2015</u>
Riverdale Nursing Home*	<u>\$1,883,045</u>	<u>04/01/2015 - 03/31/2016</u>
	<u>\$1,878,881</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$2,234,772</u>	<u>01/01/2015 - 03/31/2015</u>
	<u>\$2,264,875</u>	<u>04/01/2015 - 03/31/2016</u>
Rutland Nursing Home Co Inc.*	<u>\$2,259,866</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$1,289,994</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$1,289,994</u>	<u>04/01/2021 - 03/31/2022</u>
Cointo Josephine & Anno Nurreing	<u>\$644,472</u>	<u>01/01/2015 - 03/31/2015</u>
	<u>\$653,154</u>	<u>04/01/2015 – 03/31/2016</u>
Saints Joachim & Anne Nursing and Rehabilitation Center*	<u>\$651,709</u>	<u>04/01/2016 – 03/31/2017</u>
and Kenabilitation Center"	<u>\$426,310</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$426,310</u>	<u>04/01/2021 – 03/31/2022</u>

\*Denotes provider is part of CINERGY Collaborative.

TN <u>#20-0029-MA</u> Approval Date <u>8/28/20</u>

Supersedes TN <u>#NEW</u>

Effective Date <u>April 1, 2020</u>

# New York 47(aa)(9)

## Nursing Homes (Continued):

Provider Name	<u>Gross Medicaid Rate</u> <u>Adjustment</u>	Rate Period Effective
	<u>\$4,500,000</u>	<u>02/01/2014 - 03/31/2014</u>
Samaritan Keep Nursing Home Inc.	<u>\$4,500,000</u>	<u>04/01/2014 - 03/31/2015</u>
Samantan Keep Nursing Home Inc.	<u>\$6,754,384</u>	<u>01/01/2017 - 03/31/2017</u>
	<u>\$6,716,384</u>	<u>04/01/2017 - 03/31/2018</u>
Sarah Neuman Center for Healthcare*	<u>\$773,173</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$773,173</u>	<u>04/01/2021 - 03/31/2022</u>
	<u>\$441,290</u>	<u>01/01/2015 - 03/31/2015</u>
	\$447,234	<u>04/01/2015 - 03/31/2016</u>
Schaffer Extended Care System*	<u>\$446,245</u>	<u>04/01/2016 - 03/31/2017</u>
	\$291,907	<u>04/01/2020 - 03/31/2021</u>
	<u>\$291,907</u>	<u>04/01/2021 - 03/31/2022</u>
	<u>\$1,421,550</u>	<u>01/01/2015 - 03/31/2015</u>
Schervier Nursing Care Center*	<u>\$1,440,698</u>	04/01/2015 - 03/31/2016
	\$1,437,512	<u>04/01/2016 - 03/31/2017</u>
Schnurmacher Center for	<u>\$539,168</u>	<u>01/01/2015 - 03/31/2015</u>
Schnurmacher Center for	\$546,431	<u>04/01/2015 - 03/31/2016</u>
Rehabilitation and Nursing*	\$545,222	04/01/2016 - 03/31/2017

\*Denotes provider is part of CINERGY Collaborative.

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Approval Date 8/28/20 Effective Date April 1, 2020

Supersedes TN <u>#17-0023</u>

# New York 47(aa)(9.1)

# Nursing Homes (Continued):

Provider Name	<u>Gross Medicaid Rate</u> <u>Adjustment</u>	Rate Period Effective
	<u>\$1,852,978</u>	<u>01/01/2015 - 03/31/2015</u>
Schulman and Schachne	<u>\$1,877,938</u>	<u>04/01/2015 - 03/31/2016</u>
Institute for Nursing and	<u>\$1,873,785</u>	<u>04/01/2016 - 03/31/2017</u>
Rehabilitation*	<u>\$1,225,719</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$1,225,719</u>	<u>04/01/2021 - 03/31/2022</u>
	<u>\$1,293,304</u>	<u>01/01/2015 - 03/31/2015</u>
	<u>\$1,310,725</u>	<u>04/01/2015 - 03/31/2016</u>
<u>Silvercrest*</u>	<u>\$1,307,827</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$833,785</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$833,785</u>	<u>04/01/2021 - 03/31/2022</u>
St Cabrini Nursing Homo*	<u>\$748,048</u>	<u>04/01/2020 - 03/31/2021</u>
St Cabrini Nursing Home*	<u>\$748,048</u>	04/01/2021 - 03/31/2022
	<u>\$400,000</u>	<u>04/01/2020 - 03/31/2021</u>
St Johnland Nursing Center*	<u>\$400,000</u>	<u>04/01/2021 - 03/31/2022</u>
	<u>\$1,777,136</u>	<u>01/01/2015 – 03/31/2015</u>
Ct. Man /a Heapital for	<u>\$1,795,679</u>	<u>04/01/2015 - 03/31/2016</u>
<u>St. Mary's Hospital for</u> Children Inc.*	<u>\$1,792,470</u>	<u>04/01/2016 - 03/31/2017</u>
<u>crindren Inc. ·</u>	<u>\$1,053,645</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$1,053,645</u>	<u>04/01/2021 - 03/31/2022</u>
	<u>\$417,641</u>	<u>01/01/2015 - 03/31/2015</u>
	<u>\$423,266</u>	<u>04/01/2015 - 03/31/2016</u>
St Vincent Depaul Residence*	\$422,330	04/01/2016 - 03/31/2017
	\$276,263	04/01/2020 - 03/31/2021
	<u>\$276,263</u>	04/01/2021 - 03/31/2022

TN <u>#20-0029-MA</u>	Approval Date	8/28/20
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#### New York 47(aa)(10)

# Nursing Homes (Continued):

Provider Name	Gross Medicaid Rate	Rate Period Effective
	Adjustment	
	\$3,130,256	01/01/2015 - 03/31/2015
	\$2,665,687	04/01/2015 - 03/31/2016
Terence Cardinal Cooke Health Care	\$1,013,227	06/16/2016 - 03/31/2017
Ctr*	\$2,659,791	10/01/2016 - 03/31/2017
	<u>\$1,449,586</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$1,449,586</u>	<u>04/01/2021 - 03/31/2022</u>
The Jewish Home Hospital*	<u>\$1,248,092</u>	<u>04/01/2020 - 03/31/2021</u>
	\$1,248,092	04/01/2021 - 03/31/2022
The Wartburg Home*	\$1,020,644	01/01/2015 - 03/31/2015
_	\$1,034,392	04/01/2015 - 03/31/2016
	\$1,032,104	04/01/2016 - 03/31/2017
	\$671,170	04/01/2020 - 03/31/2021
	\$671,170	04/01/2021 - 03/31/2022
	\$ 938,910	10/05/2017 - 03/31/2018
Trustees Festern Charlell and Llanes	\$1,530,028	04/01/2018 - 03/31/2019
Trustees Eastern Star Hall and Home	\$ 760,607	04/01/2019 - 03/31/2020
	\$ 754,650	04/01/2020 - 09/30/2020
	• •	
United Hebrew Geriatric Center*	\$1,152,635	01/01/2015 - 03/31/2015
	\$1,168,162	04/01/2015 - 03/31/2016
	\$1,165,578	04/01/2016 - 03/31/2017
	\$762,452	04/01/2020 - 03/31/2021
	\$762,452	04/01/2021 - 03/31/2022
[Victoria Home	\$500,000	01/01/2015 - 03/31/2015
VillageCare Rehabilitation and Nursing Center*	\$1,132,647	01/01/2015 - 03/31/2015
	\$1,142,631	04/01/2015 - 03/31/2016
	\$1,140,849	04/01/2016 - 03/31/2017]

\*Denotes provider is part of CINERGY Collaborative.

TN <u>#20-0029-MA</u>

Approval Date \_\_\_\_\_8/28/20

Supersedes TN <u>#17-0064</u>

Effective Date \_\_\_\_\_ April 1, 2020

# New York 47(aa)(10.1)

# Nursing Homes (Continued):

Provider Name	<u>Gross Medicaid Rate</u> <u>Adjustment</u>	Rate Period Effective
Victoria Home	<u>\$500,000</u>	<u>01/01/2015 - 03/31/2015</u>
<u>VillageCare Rehabilitation and</u> <u>Nursing Center*</u>	<u>\$1,132,647</u>	<u>01/01/2015 - 03/31/2015</u>
	<u>\$1,142,631</u>	<u>04/01/2015 - 03/31/2016</u>
	<u>\$1,140,849</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$621,763</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$621,763</u>	<u>04/01/2021 - 03/31/2022</u>

TN <u>#20-0029-MA</u>	Approval Date	8/28/20
Supersedes TN <u>#New</u>	Effective Date	April 1, 2020