

## **Table of Contents**

**State/Territory Name: New York**

**State Plan Amendment (SPA) #: 20-0036**

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

**DEPARTMENT OF HEALTH & HUMAN SERVICES**

Centers for Medicare & Medicaid Services  
Center for Medicaid & CHIP Services  
233 North Michigan Ave., Suite 600  
Chicago, Illinois 60601



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**Financial Management Group**

September 1, 2020

Donna Frescatore  
Medicaid Director  
New York State Department of Health  
One Commerce Plaza, Suite 1211  
Albany, NY 12210

RE: NY-20-0036

Dear Ms. Frescatore:

We have reviewed the proposed amendment to Attachment 4.19-B of your Medicaid State plan submitted under transmittal number 20-0036. This amendment proposes to continue the 11 percent enhanced transition rate for certain services under the Children and Family Treatment and Support Services.

Based upon the information provided by New York, we have approved the amendment with an effective date of April 2, 2020. We are enclosing the approved CMS-179 and a copy of the new state plan pages.

If you have any additional questions or need further assistance, please contact Division of Reimbursement Review analyst Yvette Moore at (646) 694-0915 or [Yvette.Moore@cms.hhs.gov](mailto:Yvette.Moore@cms.hhs.gov)

Sincerely,

[Redacted Signature]

Todd McMillion  
Director  
Division of Reimbursement Review

Enclosures

**TRANSMITTAL AND NOTICE OF APPROVAL OF  
STATE PLAN MATERIAL  
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER

2 0 — 0 0 3 6

2. STATE

New York

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 2, 2020

5. TYPE OF PLAN MATERIAL (*Check One*)☐ NEW STATE PLAN☐ AMENDMENT TO BE CONSIDERED AS NEW PLAN☒ AMENDMENTCOMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (*Separate transmittal for each amendment*)

6. FEDERAL STATUTE/REGULATION CITATION

§1902(r)(5) of the Social Security Act, and 42 CFR 447

7. FEDERAL BUDGET IMPACT

a. FFY 04/02/20-09/30/20 \$ 850,000.00b. FFY 10/01/20-09/30/21 \$ 1,700,000.00

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Attachment: 4.19-B Page(s): 1(a)(i), 1(a)(iii)

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION  
OR ATTACHMENT (*If Applicable*)

Attachment: 4.19-B Page(s): 1(a)(i), 1(a)(iii)

10. SUBJECT OF AMENDMENT

Children and Family Treatment and Support Services (CFTSS)  
(FMAP=50%)11. GOVERNOR'S REVIEW (*Check One*)☒ GOVERNOR'S OFFICE REPORTED NO COMMENT☐ OTHER, AS SPECIFIED☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL

13. TYPED NAME

Donna Frescatore

14. TITLE

Medicaid Director, Department of Health

15. DATE SUBMITTED

June 30, 2020

16. RETURN TO

New York State Department of Health  
Division of Finance and Rate Setting  
99 Washington Ave – One Commerce Plaza  
Suite 1432  
Albany, NY 12210**FOR REGIONAL OFFICE USE ONLY**

17. DATE RECEIVED

18. DATE APPROVED

9/1/2020

**PLAN APPROVED - ONE COPY ATTACHED**

19. EFFECTIVE DATE OF APPROVED MATERIAL

4/2/2020

20. SIGNATURE OF REGIONAL OFFICIAL

21. TYPED NAME

Todd McMillion

22. TITLE

Director, Division of Reimbursement Review

23. REMARKS

**CLARIFICATION:** BLOCK#7 - Represents actual dollars instead of being reported in thousands

BLOCK #6 - 1902(r)(5) does not exist - the correct reference is 1902(a)

## Page 1(a)(i)

## STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE: New York

## METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES – OTHER TYPES OF CARE

**Non-Physician Licensed Behavioral Health Practitioner Services (EPSDT only)**

Reimbursement for EPSDT NP-LBHP as outlined in Item 6.d(i). per Attachment 3.1-A, are paid based upon Medicaid rates established by the State of New York.

Except as otherwise noted in the State Plan, the State-developed rates are the same for both governmental and private providers. The provider agency's rates were set as of January 1, 2019 for Other Licensed Practitioner, Community Psychiatric Support and Treatment, and Psychosocial Rehabilitation Supports, and are effective for these services provided on or after that date. Provider agency's rates were set as of July 1, 2019 for Family Peer Support Services and are effective for these services provided on or after that date. Additionally, the agency's rates were set as of January 1, 2020 for Crisis Intervention and Youth Peer Supports and Training are effective for these services provided on or after that date.

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of Other Licensed Practitioner, Psychosocial Rehabilitation Supports, Family Peer Support Services, Crisis Intervention, Youth Peer Supports and Training. The agency's fee schedule rate was set as of 4/2/2020 and is effective for services provided on or after that date.

All rates are published on the Department of Health website:

Crisis Intervention Rates:

[[https://www.health.ny.gov/health\\_care/medicaid/redesign/behavioral\\_health/children/docs/2019-12-19\\_child-family\\_rate\\_summary.pdf](https://www.health.ny.gov/health_care/medicaid/redesign/behavioral_health/children/docs/2019-12-19_child-family_rate_summary.pdf)]  
[https://www.health.ny.gov/health\\_care/medicaid/redesign/behavioral\\_health/children/child-family\\_rate\\_summary.htm](https://www.health.ny.gov/health_care/medicaid/redesign/behavioral_health/children/child-family_rate_summary.htm)

Family Peer Supports Services and Youth Peer Supports Rates:

[[https://www.health.ny.gov/health\\_care/medicaid/redesign/behavioral\\_health/children/docs/fpss\\_bh\\_kids\\_ffs\\_rates.pdf](https://www.health.ny.gov/health_care/medicaid/redesign/behavioral_health/children/docs/fpss_bh_kids_ffs_rates.pdf)]  
[https://www.health.ny.gov/health\\_care/medicaid/redesign/behavioral\\_health/children/fpss\\_bh\\_kids\\_ffs\\_rates.htm](https://www.health.ny.gov/health_care/medicaid/redesign/behavioral_health/children/fpss_bh_kids_ffs_rates.htm)

Other Licensed Practitioner, Community Psychiatric Support and Treatment, and Psychosocial Rehabilitation Supports Rates:

[[https://www.health.ny.gov/health\\_care/medicaid/redesign/behavioral\\_health/children/docs/bh\\_kids\\_ffs\\_rates.pdf](https://www.health.ny.gov/health_care/medicaid/redesign/behavioral_health/children/docs/bh_kids_ffs_rates.pdf)]  
[https://www.health.ny.gov/health\\_care/medicaid/redesign/behavioral\\_health/children/bh\\_kids\\_ffs\\_rate\\_s.htm](https://www.health.ny.gov/health_care/medicaid/redesign/behavioral_health/children/bh_kids_ffs_rate_s.htm)

TN # #20-0036

Approval Date September 1, 2020

Supersedes TN # 20-0001

Effective Date April 2, 2020

## Page 1(a)(iii)

**STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT**  
**STATE: New York**  
**METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES – OTHER TYPES OF CARE**

**Rehabilitative Services (EPSDT only)**

Reimbursement for EPSDT Rehabilitative Services as outlined in item 13.d per Attachment 3.1-A, are paid based upon Medicaid rates established by the State of New York.

Except as otherwise noted in the State Plan, the State-developed rates are the same for both governmental and private providers. The provider agency's rates were set as of January 1, 2019 for Other Licensed Practitioner, Community Psychiatric Support and Treatment, and Psychosocial Rehabilitation Supports, and are effective for these services provided on or after that date.

Provider agency's rates were set as of July 1, 2019 for Family Peer Support Services and are effective for these services provided on or after that date. Additionally, the agency's rates were set as of January 1, 2020 for Crisis Intervention and Youth Peer Supports and Training and are effective for these services provided on or after that date.

Except as otherwise noted in the plan, state-developed fee schedule rates are the same for both governmental and private providers of Other Licensed Practitioner, Psychosocial Rehabilitation Supports, Family Peer Support Services, Crisis Intervention, Youth Peer Supports and Training. The agency's fee schedule rate was set as of 4/2/2020 and is effective for services provided on or after that date.

All rates are published on the Department of Health website:

Crisis Intervention Rates:

[[https://www.health.ny.gov/health\\_care/medicaid/redesign/behavioral\\_health/children/docs/2019-12-19\\_child-family\\_rate\\_summary.pdf](https://www.health.ny.gov/health_care/medicaid/redesign/behavioral_health/children/docs/2019-12-19_child-family_rate_summary.pdf)]

[https://www.health.ny.gov/health\\_care/medicaid/redesign/behavioral\\_health/children/child-family\\_rate\\_summary.htm](https://www.health.ny.gov/health_care/medicaid/redesign/behavioral_health/children/child-family_rate_summary.htm)

Family Peer Supports Services and Youth Peer supports Rates:

[[https://www.health.ny.gov/health\\_care/medicaid/redesign/behavioral\\_health/children/docs/fpssbh\\_kids\\_ffs\\_rates.pdf](https://www.health.ny.gov/health_care/medicaid/redesign/behavioral_health/children/docs/fpssbh_kids_ffs_rates.pdf)]

[https://www.health.ny.gov/health\\_care/medicaid/redesign/behavioral\\_health/children/fpss\\_bh\\_kids\\_ffs\\_rates.htm](https://www.health.ny.gov/health_care/medicaid/redesign/behavioral_health/children/fpss_bh_kids_ffs_rates.htm)

Other Licensed Practitioner, Community Psychiatric Support and Treatment, and Psychosocial Rehabilitation Supports Rates:

[https://www.health.ny.gov/health\\_care/medicaid/redesign/behavioral\\_health/children/bh\\_kids\\_ffs\\_rates.htm](https://www.health.ny.gov/health_care/medicaid/redesign/behavioral_health/children/bh_kids_ffs_rates.htm)

The rate development methodology will primarily be composed of provider cost modeling, through New York provider compensation studies and cost data. Rates from similar State Medicaid programs may be considered, as well. The following list outlines the major components of the cost model to be used in rate development.

- Staffing assumptions and staff wages.
- Employee-related expenses — benefits, employer taxes (e.g., Federal Insurance Contributions Act (FICA), unemployment, and workers compensation).
- Program-related expenses (e.g., supplies).
- Provider overhead expenses.
- Program billable units.

The rates will be developed as the ratio of total annual modeled provider costs to the estimated annual billable units.

**TN #** #20-0036

**Approval Date** September 1, 2020

**Supersedes TN #** 20-0001

**Effective Date** April 2, 2020