

## **Table of Contents**

**State/Territory Name: NY**

**State Plan Amendment (SPA): NY-23-0020**

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 Page

**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**

June 21, 2023

Amir Bassiri  
New York State  
Department of Health (DOH)  
Acting Medicaid Director  
99 Washington Ave-One Commerce Plaza Suite 1432  
Albany, NY 12210

**RE: New York Plan Amendment (SPA) Transmittal Number 23-0020**

Dear Director Bassiri:

We have reviewed the proposed New York State Plan Amendment (SPA) to Attachment 4.19-B submitted under TN-23-0020, which was submitted to the Centers for Medicare & Medicaid Services (CMS) on March 30<sup>th</sup>, 2023. This plan provides supplemental payments to support Adult Day Health Care and AIDS Adult Day Health Care program sites.

Based upon the information provided by the State, we have approved the amendment with an effective date of February 1<sup>st</sup>, 2023. We are enclosing the approved CMS-179 and a copy of the new state plan page.

If you have any additional questions or need further assistance, please contact Jerica Bennett at 1-410-786-1167 or [jerica.bennett@cms.hhs.gov](mailto:jerica.bennett@cms.hhs.gov).

Sincerely,

A solid black rectangular box redacting the signature of Todd McMillion.

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 <u>2 3</u> — <u>0 0 2 0</u>	2. STATE <u>NY</u>
3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT <input checked="" type="radio"/> XIX <input type="radio"/> XXI	

TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE <b>February 1, 2023</b>
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5. FEDERAL STATUTE/REGULATION CITATION <u>§ 1905(a)(22) Home and Community Care Health Care Services</u> <del>1905(a)(7) Home Health Care Services</del>	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY <u>02/01/23-09/30/23</u> \$ <u>3,000,000</u> b. FFY <u>10/01/23-09/30/24</u> \$ <u>0</u>
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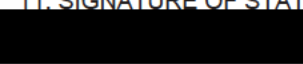
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT <u>Attachment 4.19-B: Pages 2(b.1.1), <del>7(b)(iii)(1)</del></u>	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) <b>NEW</b>
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9. SUBJECT OF AMENDMENT  
**ARPA HCBS Supplemental ADH Medical Model Payment**

10. GOVERNOR'S REVIEW (Check One)

GOVERNOR'S OFFICE REPORTED NO COMMENT  
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED  
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL


OTHER, AS SPECIFIED:

11. SIGNATURE OF STATE AGENCY OFFICIAL 	15. 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
12. TYPED NAME <b>Amir Bassiri</b>	
13. TITLE <b>Medicaid Director</b>	
14. DATE SUBMITTED <b>March 30, 2023</b>	

**FOR CMS USE ONLY**

16. DATE RECEIVED <b>03/30/2023</b>	17. DATE APPROVED <b>June 21, 2023</b>
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**PLAN APPROVED - ONE COPY ATTACHED**

18. EFFECTIVE DATE OF APPROVED MATERIAL <b>02/01/2023</b>	19. SIGNATURE OF APPROVING OFFICIAL 
20. TYPED NAME OF APPROVING OFFICIAL <b>Todd McMillion</b>	21. TITLE OF APPROVING OFFICIAL <b>Director, Division of Reimbursement Review</b>

22. REMARKS Pen and ink changes

Box 5 Federal Statute/Regulation Citation  
§ 1905(a)(7) Home Health Care Services

Box 7 Page Number of the Plan Section or Attachment  
Attachment 4.19-B: Page 2(b.1.1)

**New York  
2(b.1.1)**

**1905(a)(7) Home Health Care Services**

Effective February 1, 2023, the State will distribute \$6 million to eligible Adult Day and AIDS Adult Day Health Centers in State Fiscal Year 2023 through a one-time supplemental payment. These funds have been made available through the American Rescue Act Plan Section 9817 as described in the New York State Spending Plan for Implementation of American Rescue Plan Act of 2021, Support for Adult Day Health Centers (ADHCs) and Social Adult Day Centers (SADCs) Reopening Initiative. The purpose of this supplemental payment is to support sites impacted by the COVID-19 pandemic. New York State will distribute these funds based on site spot capacity through a one-time lump sum payment on or before September 30, 2023. This distribution methodology will result in proportionate payments, such as sites with higher capacity will receive a proportionally higher supplemental payment. Site spot capacity will be measured as the number of participants an open and operating site can serve on and after August 1, 2023.

Sites will be able to use these funds to support the following: workforce, transportation, effective person-centered care management strategies, community integration and emergency preparedness. Funding may not be used to supplant the level of State funds expended for Home and Community-Based Services (HCBS) for eligible individuals through programs in effect as of April 1, 2021.

To be eligible, sites must hold a valid operating certificate and be actively working toward or confirm their compliance to the HCBS Settings Rule and programmatic regulations as stated in the HCBS Final Rule Statewide Transition Plan. Sites must also submit an attestation of their intended use of funds and confirm funding will not be used for capital investments.

Excluded sites:

- Sites which are closed.
  - Closed sites include those which do not have appropriate staff and are not planning to provide Adult Day Health Services under the Medical Model.
- Open sites are defined as those with the appropriate staff and are either actively providing services or have planned open date confirmed by August 1, 2023.
  - Sites that are not open before August 1, 2023 will not be eligible for supplemental payments.
  - Sites must also be open at the time which payments are distributed on or before September 30<sup>th</sup> 2023.
- Sites which do not have a valid Operating Certificate
- Sites which do not provide HCBS through the medical model of Adult Day Care Services.
- Sites which only provide the social model of Adult Day Care Services.
- Sites which do not submit an accepted attestation of their intended use of funds.
- Sites which do not confirm funds will not be used for capital investments.

**TN**           #23-0020                                **Approval Date**           June 21, 2023          

**Supersedes TN**           #NEW                                **Effective Date**           February 1, 2023