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State/Territory Name: NY

State Plan Amendment (SPA) #: 23-0042

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 7500 Security Boulevard, Mail Stop S3-14-28 Baltimore, Maryland 21244-1850



Financial Management Group

September 24, 2024

Amir Bassiri Medicaid Director New York State Department of Health 99 Washington Ave – One Commerce Plaza Suite 1432 Albany, NY 12210

RE: TN 23-0042

Dear Medicaid Director:

The Centers for Medicare & Medicaid Services (CMS) has reviewed the proposed New York state plan amendment (SPA) to Attachment 4.19-D NY 23-0042, which was submitted to CMS on (June 30, 2023). This plan amendment provides a seven and a half percent rate increase to nursing homes.

We reviewed your SPA submission for compliance with statutory requirements, including in sections 1902(a)(2), 1902(a)(13), 1902(a)(30), 1903 as it relates to the identification of an adequate source for the non-federal share of expenditures under the plan, as required by 1902(a)(2) of the Social Security Act and the applicable implementing Federal regulations.

Based upon the information provided by the state, we have approved the amendment with an effective date of April 1, 2023. 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 Kristina Mack at 617-565-1225 or via email at Kristina.Mack-Webb@cms.hhs.gov.

Sincerely,

Rory Howe Director Financial Management Group

Enclosures

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES 5. FEDERAL STATUTE/REGULATION CITATION § 1905(a)(4)(A) Nursing Facility Services 7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 4.19-D Part I Page: A(a.1)	<u>2 3 — 0 0 4 2 N 1</u>
9. SUBJECT OF AMENDMENT Nursing Home 7.5% ATB 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	
11. SIGNATURE OF STATE AGENCY OFFICIAL	15. RETURN TO New York State Department of Health Division of Finance and Rate Setting
12. TYPED NAME Amir Bassiri	99 Washington Ave – One Commerce Plaza Suite 1432
13. TITLE Medicaid Director	Albany, NY 12210
14. DATE SUBMITTED June 30, 2023	
FOR CMS	USE ONLY
16. DATE RECEIVED	17. DATE APPROVED September 24, 2024
June 30, 2023 PLAN APPROVED - ONE COPY ATTACHED	
18. EFFECTIVE DATE OF APPROVED MATERIAL	19. SIGNATURE OF APPROVING OFFICIAL
April 1, 2023	
20. TYPED NAME OF APPROVING OFFICIAL	21. TITLE OF APPROVING OFFICIAL
Rory Howe 22. REMARKS	Director, Financial Management Group
EE. INCHARAC	

New York A(a.1)

1905(a)(4)(A) Nursing Facility Services

Across the Board Increase

For dates of service on and after April 1, 2023, the operating component of the rates of reimbursement for Article 28 nursing homes, will be adjusted to reflect an across-the-board increase of seven and a half percent (7.5%).

- a. Sections subjected to the seven and a half percent (7.5%) increase are as follows:
 - i. Nursing Home Reimbursement
 - ii. Specialty care facilities
- b. The capital component of the rates is not subject to the seven and a half percent (7.5%) increase.

ΓN <u>#23-0042</u>	Approval Date September 24, 2024
Supersedes TN <u>NEW</u>	Effective DateApril 1, 2023