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State/Territory Name: **New York**

State Plan Amendment (SPA) #: **23-0089**

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
601 E. 12th St., Room 355
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

December 19, 2023

Amir Bassiri
Medicaid Director
Office of Health Insurance Programs
New York State Department of Health
One Commerce Plaza Rm. 1605
Albany, NY 12237

Re: New York State Plan Amendment (SPA) 23-0089

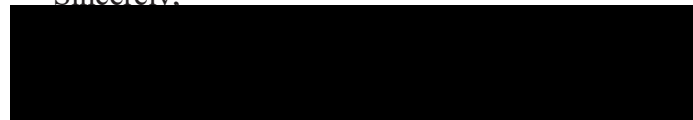
Dear Director Bassiri:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) NY-23-0089. This amendment proposes to cover the Chronic Disease Self-Management Program (CDSMP) for Arthritis for dates of service on or after October 1, 2023.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act. This letter is to inform you that New York Medicaid SPA 23-0089 was approved on December 18, 2023, with an effective date of October 1, 2023.

If you have any questions, please contact Melvina Harrison at 212-616-2247 or via email at Melvina.Harrison@cms.hhs.gov.

Sincerely,



James G. Scott, Director
Division of Program Operations

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

1. TRANSMITTAL NUMBER <u>2</u> <u>3</u> — <u>0</u> <u>0</u> <u>8</u> <u>9</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 October 1, 2023
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5. FEDERAL STATUTE/REGULATION CITATION § 1905(a)(13) Other Diagnostic, Screening, Prev., and Rehab Svc	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY <u>10/01/23-09/30/24</u> \$ <u>675,630</u> b. FFY <u>10/01/24-09/30/25</u> \$ <u>675,630</u>
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7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 3.1-A Supplement: Page 2(c.1.9) Attachment 3.1-B Supplement: Page 2(c.1.9) Attachment 4.19-B: Page 20	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) NEW
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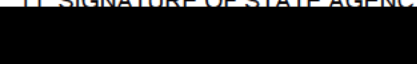
9. SUBJECT OF AMENDMENT

Chronic Disease Self-Management Program (CDSMP) for Arthritis

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 Amir Bassiri	
13. TITLE Medicaid Director	
14. DATE SUBMITTED September 29, 2023	

FOR CMS USE ONLY

16. DATE RECEIVED 09/29/2023	17. DATE APPROVED 12/18/2023
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PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL 10/01/2023	19. SIGNATURE OF APPROVING OFFICIAL 
20. TYPED NAME OF APPROVING OFFICIAL James G. Scott	21. TITLE OF APPROVING OFFICIAL Director, Division of Program Operations

22. REMARKS

**New York
2(c.1.9)**

1905(a)(13) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

Chronic Disease Self-Management Program (CDSMP) for Arthritis

New York State Medicaid covers the Chronic Disease Self-Management Program (CDSMP) as outlined by the Self-Management Resource Center (SMRC) for Medicaid members diagnosed with arthritis. CDSMP is an evidence-based, self-management interactive program for adults that focuses on disease management skills including decision-making, problem-solving, and action planning to prolong life and promote the health of the Medicaid member. CDSMP services are provided as preventive services pursuant to 42 C.F.R. Section 440.130(c) and must be ordered by a physician or other licensed practitioner acting within their scope of practice under state law.

The SMRC only grants programmatic recognition to organizational entities. Therefore, only organizations that have achieved SMRC recognition can be enrolled in Medicaid for the purpose of rendering CDSMP services to Medicaid members.

CDSMP services must be delivered by teams of two trained leaders. Leaders must have received formal training on an SMRC-approved curriculum, successfully completed four days of in-person leader training or 12 sessions of virtual training, and successfully facilitated a workshop within the initial 12 months after training. The SMRC-recognized organization will supervise the SMRC-trained providers providing CDSMP services on behalf of the organization.

Providers will work with Medicaid members to provide them with a practical understanding of the positive impacts of learning and practicing techniques to adapt to their condition, gain confidence and control over their lives, and build an arthritis self-management program specific to their needs by assisting members. Specific services include:

- Counseling to manage the physical and psychological effects of arthritis.
- Health coaching to promote an understanding of the disease, to teach beneficiaries how to identify and access services, to help beneficiaries understand the importance of diet and exercise; and to identify and adapt other strategies to prevent disease progression.

TN #23-0089

Supersedes TN #NEW

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New York
20

1905(a)(13) Other Diagnostic, Screening, Preventive, and Rehabilitative Services

Chronic Disease Self-Management Program (CDSMP) for Arthritis

Effective for services provided on or after October 1, 2023, payments for Chronic Disease Self-Management Program (CDSMP) for arthritis are made in accordance with a fee schedule developed by the Department of Health and approved by the Division of Budget. The fee schedule, and any annual/periodic adjustments made, are published on the official eMedNY web page, titled "New York State Free Standing or Hospital Based Ordered Ambulatory Manual," available at:

https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fwww.emedny.org%2FProviderManuals%2FOrderedAmbulatory%2FPDFS%2FOrderedAmbulatory_Fee_Schedule.xls&wdOrigin=BROWSELINK

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