

NEW YORK
state department of
HEALTH

Nirav R. Shah, M.D., M.P.H.
Commissioner

Sue Kelly
Executive Deputy Commissioner

September 25, 2013

Mr. Michael Melendez
Associate Regional Administrator
Department of Health & Human Services
Centers for Medicare & Medicaid Services
New York Regional Office
Division of Medicaid and Children's Health Operations
26 Federal Plaza - Room 37-100 North
New York, New York 10278

RE: SPA #13-10
Non-Institutional Services

Dear Mr. Melendez:

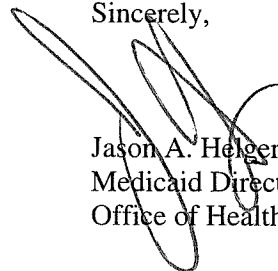
The State requests approval of the enclosed amendment #13-10 to the Title XIX (Medicaid) State Plan for non-institutional services to be effective October 1, 2013 (Appendix I). This amendment is being submitted based on the implementation of section 4107 of the Patient Protection and Affordable Care Act. A summary of the plan amendment is provided in Appendix II.

The State of New York reimburses these services through the use of rates that are consistent with and promote efficiency, economy, and quality of care and are sufficient to enlist enough providers so that care and services are available under the plan at least to the extent that such care and services are available to the general population in the geographic area as required by §1902(a)(30) of the Social Security Act and 42 CFR §447.204.

Copies of pertinent sections of the State Statute - Social Services Law, paragraph (s) of subdivision 2 of section 365-a are enclosed for your information (Appendix III). A copy of the public notice of this plan amendment, which was given in the New York State Register on September 4, 2013, is also enclosed for your information (Appendix IV).

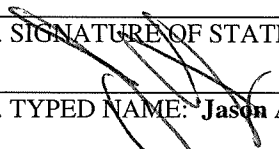
If you have any questions regarding this State Plan submission, please do not hesitate to contact John E. Ulberg, Jr., Medicaid Chief Financial Officer, Division of Finance and Rate Setting at (518) 474-6350.

Sincerely,



Jason A. Helgerson
Medicaid Director
Office of Health Insurance Programs

Enclosures

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: HEALTH CARE FINANCING ADMINISTRATION		1. TRANSMITTAL NUMBER: 13-10	2. STATE New York
		3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES		4. PROPOSED EFFECTIVE DATE October 1, 2013	
5. TYPE OF PLAN MATERIAL (Check One): <input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> AMENDMENT COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)			
6. FEDERAL STATUTE/REGULATION CITATION: Section 365-a(2)(s) of the Social Services Law & Section 4107 of the Affordable Care Act		7. FEDERAL BUDGET IMPACT: a. FFY 10/01/13-09/30/14 \$ 0 b. FFY 10/01/14-09/30/15 \$ 0	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 3.1-A: Pages 2, 2.1 Attachment 3.1-A Supplement: Pages 2, 2.1 Attachment 3.1-B: Page 2a Attachment 3.1-B Supplement: Pages 2, 2.1		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Attachment 3.1-A: Page 2 Attachment 3.1-A Supplement: Pages 2, 2.1 Attachment 3.1-B: Page 2a Attachment 3.1-B Supplement: Pages 2, 2.1	
10. SUBJECT OF AMENDMENT: Tobacco Cessation for Pregnant Women (FMAP = 50%)			
11. GOVERNOR'S REVIEW (Check One): <input checked="" type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input type="checkbox"/> OTHER, AS SPECIFIED: <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL			
12. SIGNATURE OF STATE AGENCY OFFICIAL: 		16. RETURN TO: New York State Department of Health Bureau of Federal Relations & Provider Assessments 99 Washington Ave – One Commerce Plaza Suite 1430 Albany, NY 12210	
13. TYPED NAME: Jason A. Helgerson			
14. TITLE: Medicaid Director Department of Health			
15. DATE SUBMITTED: September 25, 2013			
FOR REGIONAL OFFICE USE ONLY			
17. DATE RECEIVED:		18. DATE APPROVED:	
PLAN APPROVED – ONE COPY ATTACHED			
19. EFFECTIVE DATE OF APPROVED MATERIAL:		20. SIGNATURE OF REGIONAL OFFICIAL:	
21. TYPED NAME:		22. TITLE:	
23. REMARKS:			

Appendix I
2013 Title XIX State Plan
Third Quarter Amendment
Non-Institutional Services
Amended SPA Pages

New York
[Page] 2

AMOUNT, DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY

4.a. Nursing facility services (other than services in an institution for mental diseases) for individuals 21 years of age or older.
 Provided: No limitations With limitations* Not provided

4.b. Early and periodic screening, diagnostic and treatment services for individuals under 21 years of age, and treatment of conditions found. (Limited to federal requirements under 1905(a) per section 1905(r) per PM 90-2.)

4.c.i. Family planning services and supplies for individuals of child-bearing age and for individuals eligible pursuant to Attachments 2.2-A and 2.2-B, if this eligibility option is elected by the State.
 Provided: No limitations With limitations* Not provided

4.c.ii. Family planning-related services provided under the above State Eligibility Option.
 Provided: No limitations With limitations*

4.d.1. **Face-to-Face Counseling Services provided:**

- (i) By or under supervision of a physician;
- (ii) By any other health care professional who is legally authorized to furnish such services under State law and who is authorized to provide Medicaid coverable services other than tobacco cessation services; or
- (iii) Any other health care professional legally authorized to provide tobacco cessation services under State law and who is specifically designated by the Secretary in regulations. (none are designated at this time)

4.d.2. **Face-to-Face Tobacco Cessation Counseling Services for Pregnant Women**

Provided: No limitations With limitations*

*Any benefit package that consists of less than four (4) counseling sessions per quit attempt, with a minimum of two (2) quit attempts per 12 month period should be explained below.

All Medicaid recipients, including pregnant women, receiving tobacco cessation counseling services can receive these services without any limitation as stated above.

Please describe any limitations:

* Description provided on attachment.

TN #13-10

Approval Date _____

Supersedes TN #12-12

Effective Date _____

**New York
2.1**

AMOUNT, DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND SERVICES PROVIDED TO THE CATEGORICALLY NEEDY

- 5.a. Physicians' services whether furnished in the office, the patient's home, a hospital, a nursing facility or elsewhere.
 Provided: No limitations With limitations* Not provided
- i. Lactation counseling services.
 Provided: No limitations With limitations* Not provided
- 5.b. Medical and surgical services furnished by a dentist (in accordance with section 1905(a) (5)(B) of the Act).
 Provided: No limitations With limitations* Not provided
6. Medical care and any other type of remedial care recognized under State law, furnished by licensed practitioners within the scope of their practice as defined by State law.
- a. Podiatrists' services.
 Provided: No limitations With limitations* Not provided

* Description provided on attachment.

TN #13-10 _____

Approval Date _____

Supersedes TN NEW _____

Effective Date _____

New York
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- 4a. Prior approval is required for all out-of-state placements at Specialized Care Facilities for difficult to place individuals or High level Care facilities for the head injured.

Medicaid payments shall not be authorized for nursing facilities which are not certified or have not applied for certification to participate in Medicare.

Care days in nursing facilities is reimbursed for Medicaid patients requiring and receiving medically necessary lower level of care services. Medical Assistance is provided until such time as the appropriate level of care becomes available.

4d.i. **Face-to-Face Counseling Services**

4d.ii. **Face-to-Face Tobacco Cessation Counseling Services for Pregnant Women**

Effective October 1, 2013, Medicaid coverage of comprehensive counseling and pharmacotherapy for cessation of tobacco use by all Medicaid eligible recipients, including pregnant women, will be provided. Such services will be provided face-to-face, by or under the supervision of a physician and no cost sharing (co-pays) will apply. In accordance with section 4107 of the Patient Protection and Affordable Care Act, current coverage of smoking cessation services for all Medicaid recipients, including pregnant women, will be modified to include a maximum of two quit attempts per 12 months, which will include a maximum of four face-to-face counseling sessions per quit attempt.

5. Prior approval is required for certain procedures which may be considered cosmetic or experimental. Physicians are informed of the specific prior approval requirements in the MMIS Physician Provider Manual.
- 5a. **Lactation consultant services:** effective September 1, 2012, reimbursement will be provided to physicians for breastfeeding health education and counseling services. Physicians must be currently registered and licensed by the State in accordance with 42 CFR 440.60(a) and also International Board Certified Lactation Consultants (IBCLC). Date of implementation will occur on the first day of the month following 30 days after Federal approval of this provision of the State Plan.
6. Care and services will be provided only if they are in accordance with regulations of the Department of Health.

TN#: 13-10

Approval Date: _____

Supersedes TN#: 12-16

Effective Date: _____

**New York
[Page] 2.1**

6a. Medicaid does not cover routine hygienic care of the feet in the absence of pathology.

Payment for podiatry services will be made for services provided to Medicaid eligibles under twenty-one years of age under the EPSDT program and only by written referral from a physician, physician assistant, nurse practitioner or certified nurse midwife. Effective September 1, 2012, payment for podiatry services will include services provided to Medicaid recipients age 21 and older with a diagnosis of diabetes mellitus and only with a written referral from a physician, physician assistant, nurse practitioner or certified nurse midwife. Date of implementation will occur on the first day of the month following 30 days after Federal approval of this provision in the State Plan.

Only a qualified podiatrist, per 18 NYCRR Section 505.12(a)(1), who is licensed and currently registered to practice podiatry in New York State by the State Education Department, can provide podiatry services.

Such podiatry care and services may only be provided upon written referral by a physician, physician's assistant, nurse practitioner or nurse midwife, per their individual scope of practice consistent with New York State Education Law and the rules of the Commissioner of Education.

Nursing facilities, Intermediate Care Facilities for Individuals with Intellectual Disabilities, and Article 28 or Article 31 inpatient facilities and certified clinics which include foot care services in the rate established for medical care for Medicaid recipients will continue to receive payments for these services through their rates. Additionally, Medicaid will continue to pay for medically necessary items and supplies (e.g., prescription drugs) for all recipients when ordered by a private practicing podiatrist.

In the office setting, a podiatrist may only provide a limited number of clinical laboratory tests. Podiatrists are informed of the specific clinical laboratory tests they may perform, in their office setting, in the MIS Podiatrists Manual. A podiatrist may only provide radiological services which are within the scope of podiatric practice. Amputation and bunion surgery may be performed by a podiatrist in a hospital setting.

TN#: 13-10

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Supersedes TN#: 12-16

Effective Date: _____

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[Page] 2a

**AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED
TO THE MEDICALLY NEEDY**

4.d.1. **Face-to-Face Counseling Services provided:**

- (i) By or under supervision of a physician;
- (ii) By any other health care professional who is legally authorized to furnish such services under State law and who is authorized to provide Medicaid coverable services other than tobacco cessation services; or
- (iii) Any other health care professional legally authorized to provide tobacco cessation services under State law and who is specifically *designated* by the Secretary in regulations. (none are designated at this time)

4.d.2. **Face-to-Face Tobacco Cessation Counseling Services for Pregnant Women**

- Provided: No limitations With limitations*

*Any benefit package that consists of less than four (4) counseling sessions per quit attempt, with a minimum of two (2) quit attempts per 12 month period should be explained below.

All Medicaid recipients, including pregnant women, receiving tobacco cessation counseling services can receive these services without any limitation as stated above.

Please describe any limitations:

5.a. Physicians' services whether furnished in the office, the patient's home, a hospital, a nursing facility or elsewhere.

- Provided: No limitations With limitations* Not provided

i. Lactation counseling services.

- Provided: No limitations With limitations* Not provided

b. Medical and surgical services furnished by a dentist (in accordance with section 1905(a) (5)(B) of the Act).

- Provided: No limitations With limitations* Not provided

* Description provided on attachment

TN #13-10 _____

Approval Date _____

Supersedes TN #12-16 _____

Effective Date _____

New York
[Page] 2

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5. Prior approval is required for certain procedures which may be considered cosmetic or experimental. Physicians are informed of the specific prior approval requirements in the MMIS Physician Provider Manual.
- 5a. **Lactation consultant services:** effective September 1, 2012, reimbursement will be provided to physicians for breastfeeding health education and counseling services. Physicians must be currently registered and licensed by the State in accordance with 42 CFR 440.60(a) and also International Board Certified Lactation Consultants (IBCLC). Date of implementation will occur on the first day of the month following 30 days after Federal approval of this provision of the State Plan.
6. Care and services will be provided only if they are in accordance with regulations of the Department of Health.

TN#: 13-10

Approval Date: _____

Supersedes TN#: 12-16

Effective Date: _____

**New York
[Page] 2.1**

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Only a qualified podiatrist, per 18 NYCRR Section 505.12(a)(1), who is licensed and currently registered to practice podiatry in New York State by the State Education Department, can provide podiatry services.

Such podiatry care and services may only be provided upon written referral by a physician, physician's assistant, nurse practitioner or nurse midwife, per their individual scope of practice consistent with New York State Education Law and the rules of the Commissioner of Education.

Nursing facilities, Intermediate Care Facilities for Individuals with Intellectual Disabilities, and Article 28 or Article 31 inpatient facilities and certified clinics which include foot care services in the rate established for medical care for Medicaid recipients will continue to receive payments for these services through their rates. Additionally, Medicaid will continue to pay for medically necessary items and supplies (e.g., prescription drugs) for all recipients when ordered by a private practicing podiatrist.

In the office setting, a podiatrist may only provide a limited number of clinical laboratory tests. Podiatrists are informed of the specific clinical laboratory tests they may perform, in their office setting, in the MIS Podiatrists Manual. A podiatrist may only provide radiological services which are within the scope of podiatric practice. Amputation and bunion surgery may be performed by a podiatrist in a hospital setting.

TN#: 13-10

Approval Date: _____

Supersedes TN#: 12-16

Effective Date: _____

Appendix II
2013 Title XIX State Plan
Third Quarter Amendment
Non-Institutional Services
Summary

SUMMARY
SPA #13-10

This State Plan Amendment (SPA) proposes to change the service limits for comprehensive tobacco cessation services provided to pregnant women, including both counseling and pharmacotherapy, without cost sharing. New York State Medicaid has been providing comprehensive counseling and pharmacotherapy for cessation of tobacco use by all Medicaid eligible recipients including pregnant women since January 1, 2009. In accordance with Section 4107 of the Patient Protection and Affordable Care Act, this SPA will modify current coverage of smoking cessation counseling (SCC) services for all Medicaid recipients, including pregnant women, to include up to two quit attempts per 12 months, which will include up to 4 face-to-face counseling sessions per quit attempt; thus increasing the limits on counseling sessions from 6 to 8 per 12 months.

Assessment of utilization data shows that Medicaid recipients receive an average of 3 SCC visits in a 12 month period. Therefore, increasing the limit from 6 to 8 SCC visits in a 12 month period will not result in any additional cost to support this expanded service limit.

Appendix III
2013 Title XIX State Plan
Third Quarter Amendment
Non-Institutional Services
Authorizing Provisions

SPA 13-10

Social Services Law, paragraph (s) of subdivision 2 of section 365-a below quotes added.

"(s) smoking cessation counseling services; provided, however, that the provisions of this paragraph shall not take effect unless all necessary approvals under federal law and regulation have been obtained to receive federal financial participation in the costs of such services."

SPA 13-10

Section 4107 of the Patient Protection and Affordable Care Act

4107. COVERAGE OF COMPREHENSIVE TOBACCO CESSATION SERVICES FOR PREGNANT WOMEN IN MEDICAID.

(a) REQUIRING COVERAGE OF COUNSELING AND PHARMACOTHERAPY FOR CESSATION OF TOBACCO USE BY PREGNANT WOMEN.—Section 1905 of the Social Security Act (42 U.S.C. 1396d), as amended by sections 2001(a)(3)(B) and 2303, is further amended—

(1) in subsection (a)(4)— (A) by striking “and” before “(C)”; and (B) by inserting before the semicolon at the end the following new subparagraph: “; and (D) counseling and pharmacotherapy for cessation of tobacco use by pregnant women (as defined in subsection (bb))”; and

(2) by adding at the end the following: “(bb)(1) For purposes of this title, the term ‘counseling and pharmacotherapy for cessation of tobacco use by pregnant women’ means diagnostic, therapy, and counseling services and pharmacotherapy (including the coverage of prescription and nonprescription tobacco cessation agents approved by the Food and Drug Administration) for cessation of tobacco use by pregnant women who use tobacco products or who are being treated for tobacco use that is furnished—

“(A) by or under the supervision of a physician; or

“(B) by any other health care professional who—

“(i) is legally authorized to furnish such services under State law (or the State regulatory mechanism provided by State law) of the State in which the services are furnished; and

“(ii) is authorized to receive payment for other services under this title or is designated by the Secretary for this purpose.

“(2) Subject to paragraph (3), such term is limited to—

“(A) services recommended with respect to pregnant women in ‘Treating Tobacco Use and Dependence: 2008 Update: A Clinical Practice Guideline’, published by the Public Health Service in May 2008, or any subsequent modification of such Guideline; and

“(B) such other services that the Secretary recognizes to be effective for cessation of tobacco use by pregnant women.

“(3) Such term shall not include coverage for drugs or biologicals that are not otherwise covered under this title.”.

(b) EXCEPTION FROM OPTIONAL RESTRICTION UNDER MEDICAID PRESCRIPTION DRUG COVERAGE.—Section 1927(d)(2)(F) of the Social Security Act (42 U.S.C. 1396r–8(d)(2)(F)), as redesignated by section 2502(a), is amended by inserting before the period at the end the following: “, except, in the case of pregnant women when recommended in accordance with the Guideline referred to in section 1905(bb)(2)(A), agents approved by the Food and Drug Administration under the over-the-counter monograph process for purposes of promoting, and when used to promote, tobacco cessation”.

(c) REMOVAL OF COST-SHARING FOR COUNSELING AND PHARMACOTHERAPY FOR CESSATION OF TOBACCO USE BY PREGNANT WOMEN.—

(1) GENERAL COST-SHARING LIMITATIONS.—Section 1916 of the Social Security Act (42 U.S.C.1396o) is amended in each of subsections (a)(2)(B) and (b)(2)(B) by inserting “, and counseling and pharmacotherapy for cessation of tobacco use by pregnant women (as defined in section 1905(bb)) and covered outpatient drugs (as defined in subsection (k)(2) of section 1927 and including nonprescription drugs described in subsection (d)(2) of such section) that are prescribed for purposes of promoting, and when used to promote, tobacco cessation by pregnant women in accordance with the Guideline referred to in section 1905(bb)(2)(A)” after “complicate the pregnancy”.

(2) APPLICATION TO ALTERNATIVE COST-SHARING.—Section 1916A(b)(3)(B)(iii) of such Act (42U.S.C. 1396o–1(b)(3)(B)(iii)) is amended by inserting “; and counseling and pharmacotherapy for cessation of tobacco use by pregnant women (as defined in section 1905(bb))” after “complicate the pregnancy”.

(d) EFFECTIVE DATE.—The amendments made by this section shall take effect on October 1, 2010.

Appendix IV
2013 Title XIX State Plan
Third Quarter Amendment
Non-Institutional Services
Public Notice

MISCELLANEOUS NOTICES/HEARINGS

Notice of Abandoned Property Received by the State Comptroller

Pursuant to provisions of the Abandoned Property Law and related laws, the Office of the State Comptroller receives unclaimed monies and other property deemed abandoned. A list of the names and last known addresses of the entitled owners of this abandoned property is maintained by the office in accordance with Section 1401 of the Abandoned Property Law. Interested parties may inquire if they appear on the Abandoned Property Listing by contacting the Office of Unclaimed Funds, Monday through Friday from 8:00 a.m. to 4:30 p.m., at:

1-800-221-9311
or visit our web site at:
www.osc.state.ny.us

Claims for abandoned property must be filed with the New York State Comptroller's Office of Unclaimed Funds as provided in Section 1406 of the Abandoned Property Law. For further information contact: Office of the State Comptroller, Office of Unclaimed Funds, 110 State St., Albany, NY 12236.

PUBLIC NOTICE Department of Health

Pursuant to 42 CFR Section 447.205, the Department of Health hereby gives public notice of the following:

In accordance with Section 4107 of the Patient Protection and Affordable Care Act, the Department of Health proposes to amend the Title XIX (Medicaid) State Plan for non-institutional services to acknowledge New York State Medicaid's coverage of comprehensive counseling and pharmacotherapy for cessation of tobacco use by all Medicaid eligible recipients including pregnant women. As per federal guidance, this service must be provided face-to-face, by or under the supervision of a physician and no cost sharing (co-pays) shall apply to this service. Pursuant to federal guidelines, current coverage of smoking cessation services for all Medicaid recipients, including pregnant women, will be modified to include up to two quit attempts per 12 months, which will include up to 4 face-to-face counseling sessions per quit attempt.

The public is invited to review and comment on this proposed state plan amendment, which will be available for public review on the Department's website at http://www.health.ny.gov/regulations/state_plans/status.

Copies of the proposed State Plan amendment will be on file in each local (county) social services district and available for public review.

For the New York City district, copies will be available at the following places:

New York County
250 Church Street
New York, New York 10018

Queens County, Queens Center
3220 Northern Boulevard
Long Island City, New York 11101

Kings County, Fulton Center
114 Willoughby Street
Brooklyn, New York 11201

Bronx County, Tremont Center
1916 Monterey Avenue
Bronx, New York 10457

Richmond County, Richmond Center
95 Central Avenue, St. George
Staten Island, New York 10301

For further information and to review and comment, please contact:
Department of Health, Bureau of Federal Relations & Provider Assessments, 99 Washington Ave. – One Commerce Plaza, Suite 810, Albany, NY 12210, (518) 474-1673, (518) 473-8825 (FAX), e-mail: spa_inquiries@health.state.ny.us

PUBLIC NOTICE

Uniform Code Regional Boards of Review

Pursuant to 19 NYCRR 1205, the petitions below have been received by the Department of State for action by the Uniform Code Regional Boards of Review. Unless otherwise indicated, they involve requests for relief from provisions of the New York State Uniform Fire Prevention and Building Code. Persons wishing to review any petitions, provide comments, or receive actual notices of any subsequent proceeding may contact Brian Tollens, Codes Division, Department of State, One Commerce Plaza, 99 Washington Ave., Albany, NY 12231, (518) 474-4073 to make appropriate arrangements.

2013-0279 Matter of Gary J. Bruno, R.A., 1225 Locust Avenue, Bohemia, NY 11716, for a variance concerning requirements for minimum toilet facilities.

Involved is the construction of a new indoor amusement facility, known as Sky Zone, of an A (Assembly) occupancy, one story in height, approximately 40,000 square feet in area and of type IIB construction, located at, 111 Rodeo Drive, Brentwood, Town of Islip, Suffolk County, State of New York.

2013-0341 Matter of Rebecca Lengyal, 67 Ridgedale Avenue, Farmingville, NY 11738, for a variance concerning requirements for minimum ceiling height requirements for habitable space created in a basement.

Involved is alterations to a basement for an existing one-family dwelling, two stories in height and of type VB construction, located at, 67 Ridgedale Avenue, Farmingville, Town of Brookhaven, Suffolk County, State of New York.

2013-0340 Matter of Susan Rassekh, YMCA of Long Island, 200 West Main Street, Bayshore, NY 11706, for a variance concerning fire-safety requirements with the installation of a temporary tent structure without the required distance separation from buildings and required 12 foot fire break passageway.

Involved is a temporary tent structure to be used for an A-3 occupancy (Assembly), of approximately 3,374 square feet in area, one story in height of type VB construction, to be located at, 37 West Main Street, Bayshore, Town of Islip, Suffolk County, State of New York.

2013-0373 Matter of Emedco, Inc., 265 Mt. Arter Loop, Lander, Wyoming 82520 for a variance concerning requirements for illumination of exit signs.

Involved is the alterations to an existing one-story building of ordinary construction in use as a business occupancy building, located at 2491 Wehrle Drive, Town of Amherst, County of Erie, State of New York.

2013-0376 Matter of University at Buffalo, 200 First Federal Plaza, Rochester, NY 14620 for a variance concerning requirements for guards for roof edge protection.

Involved is the alterations to an existing four-story building of ordinary construction in use as a business occupancy building, located at Hayes Hall, University at Buffalo South Campus, 3435 Main street, City of Buffalo, County of Erie, State of New York.

2013-0380 Matter of Robert Simonelli, SWBR Architects for Loretto Health and Rehabilitation Center, attn: David Mooney, 700 East Brighton Ave., Syracuse, NY 13039 for a variance concerning fire safety and building code requirements including the requirement to omit a Type I exhaust hood for residential appliances used for commercial purposes and, to omit positive latching devices for closet doors opening into a corridor.

Involved is the construction of 12 buildings to be occupied as a skilled nursing facility, known as "Mandorla Gardens - Rosewood Height Health Center" located at Cicero Commons, Town of Cicero, Onondaga County, State of New York.