

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
7500 Security Boulevard, Mail Stop S2-26-12  
Baltimore, Maryland 21244-1850



**Center for Medicaid and State Operations, CMSO**

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Deborah Bachrach  
Deputy Commissioner  
New York State Department of Health  
Corning Tower  
Empire State Plaza  
Albany, New York 12237

SEP 11 2009

RE: TN 09-20

Dear Ms. Bachrach:

We have reviewed the proposed amendment to Attachment 4.19-A of your Medicaid State plan submitted under transmittal number (TN) 09-20. Effective April 1, 2009, this amendment provides for Disproportionate Share Hospital (DSH) payments to state hospitals through March 31, 2011.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(2) 1902(a)(13), 1902(a)(30), 1903(a), and 1923 of the Social Security Act and the regulations at 42 CFR 447 Subpart C. I am pleased to inform you that New York 09-20 is approved effective April 1, 2009 and have enclosed the HCFA-179 and the approved plan page.

If you have any questions, please contact Tom Brady at 518-396-3810 or Rob Weaver at 410-786-5914.

Sincerely,

A solid black rectangular box redacting the signature of the sender.

Cindy Mann  
Director  
Center for Medicaid and State Operations (CMSO)

Enclosures

<b>TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL</b>  <b>FOR: HEALTH CARE FINANCING ADMINISTRATION</b>	1. TRANSMITTAL NUMBER:  <b>09-20</b>	2. STATE  <b>New York</b>
	3. PROGRAM IDENTIFICATION: <b>TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)</b>	
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE <b>April 1, 2009</b>	

5. TYPE OF PLAN MATERIAL (Check One):

NEW STATE PLAN       AMENDMENT TO BE CONSIDERED AS NEW PLAN       AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)


6. FEDERAL STATUTE/REGULATION CITATION: <b>Section 1902(a) of the Social Security Act, and 42 CFR 447 Subpart C</b>	7. FEDERAL BUDGET IMPACT: a. FFY 04/01/09-9/30/09 \$45.55 million b. FFY 10/01/09-9/30/10 \$91.10 million
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8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: <b>Attachment 4.19-A, pages 248(a) &amp; 248(a)(1)</b>	9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): <b>Attachment 4.19-A, Page 248(a)</b>
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10. SUBJECT OF AMENDMENT:  
**IGT/DSH for State & SUNY Hospitals**

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 	16. RETURN TO: <b>New York State Department of Health Corning Tower Empire State Plaza Albany, New York 12237</b>
13. TYPED NAME: <b>Deborah Bachrach, EP</b>	
14. TITLE: <b>Deputy Commissioner Department of Health</b>	
15. DATE SUBMITTED: <b>June 26, 2009</b>	

**FOR REGIONAL OFFICE USE ONLY**

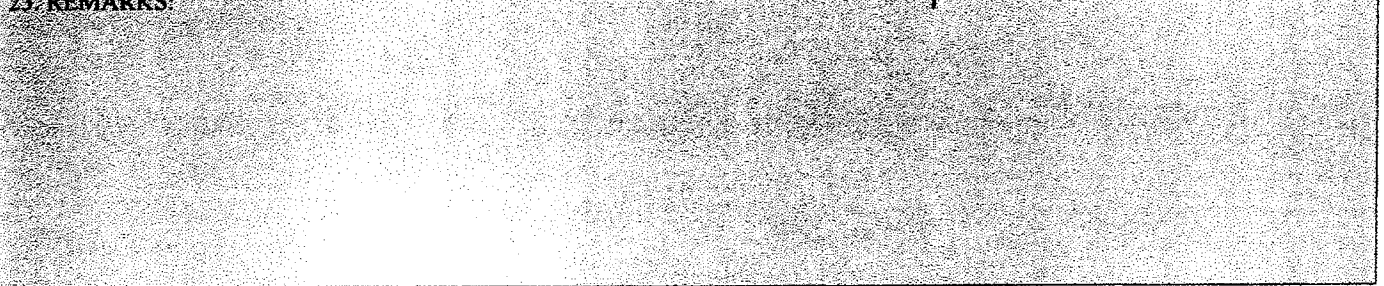
17. DATE RECEIVED:	18. DATE APPROVED: <b>9-16-09</b>
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PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL:  
**APR - 1 2009** 

21. TYPED NAME: <b>William Lasowski</b>	22. TITLE: <b>Deputy Director, CMSO</b>
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23. REMARKS:



**New York  
248(a)**

**Attachment 4.19-A  
(04/09)**

Public hospital disproportionate share payments will be made to increase reimbursement to hospitals operated by the State of New York, the State University of New York or by county governments. To be eligible, hospitals must be operating at the time the payments are made. The payments are subject to the payment limits established in §86-1.87 of this plan.

1. Public general hospitals operated by the State of New York or the State University of New York shall receive additional payments effective April 1, 1997 for the period April 1, 1997 through March 31, 1998, April 1, 1998 for the period April 1, 1998 through March 31, 1999, August 1, 1999 for the period April 1, 1999 through March 31, 2000, April 1, 2000 for the period April 1, 2000 through March 31, 2001, April 1, 2001 for the period April 1, 2001 through March 31, 2002, April 1, 2002 for the period April 1, 2002 through March 31, 2003, for the state fiscal year beginning April 1, 2005 through March 31, 2006, for the state fiscal year beginning April 1, 2006 through March 31, 2007 and April 1, 2007 through March 31, 2009, and for the state fiscal years beginning April 1, 2009 through March 31, 2011, subject to the limits established pursuant to §86-1.87 of this plan. Such payments shall be established based on medical assistance and uninsured patient losses for 1996, 1997, 1998, 1999, 2000, 2001 and 2002 after considering all other medical assistance based initially for 1996 on 1994 reconciled data as further reconciled to actual reported 1996 reconciled data, for 1997 based initially on reported 1995 reconciled data as further reconciled to actual reported 1997 reconciled data, for 1998 based initially on reported 1995 reconciled data, as further reconciled to actual reported 1998 reconciled data, for 1999 based initially on reported 1995 reconciled data as further reconciled to actual reported 1999 reconciled data, for 2000 based initially on reported 1995 reconciled data, as further reconciled to actual reported 2000 reconciled data, for 2001 based initially on reported 1995 reconciled data, as further reconciled to actual reported 2001 reconciled data, for 2002 based initially on reported 2000 reconciled data as further reconciled to actual reported 2002 reconciled data, for the state fiscal year beginning on April 1, 2005, based initially on up to one hundred percent of reported 2000 reconciled data as further reconciled to up to one hundred percent of actual reported data for 2005, and for the state fiscal year beginning on April 1, 2006, based initially on up to one hundred percent of reported 2000 reconciled data as further reconciled to up to one hundred percent of actual reported data for 2006.

TN     #09-20    

Approval Date     SEP 11 2009    

Supersedes TN     #07-07B    

Effective Date     APR - 1 2009

**New York  
248(a)(1)**

**Attachment 4.19-A  
(04/09)**

Such payments shall continue to be established for periods beginning on April 1, 2007, through March 31, 2008, based initially on [up to] 100% of reported 2000 reconciled data [as] and further reconciled to [up to] 100% of actual reported data for 2007. For periods beginning April 1, 2008, through March 31, 2009, such payments shall be based initially on 100% of reported 2000 reconciled data and further reconciled to 100% of actual reported data for 2008. [and to actual reported data for each respective succeeding year.] The payments may be added to rates of payment or made as aggregate payments to eligible public general hospitals.

For periods beginning April 1, 2009 through March 31, 2011, such payments shall be established based initially on reported 2007 reconciled data, as adjusted for statutorily authorized Medicaid rate changes impacting this applicable payment year, and further reconciled to actual reported data for 2009, and to actual reported data for each respective succeeding year. The payments may be added to rates of payment or made as aggregate payments to eligible public general hospitals.

TN #09-20

Approval Date SEP 11 2009

Supersedes New

Effective Date APR - 1 2009