## **Table of Contents**

**State/Territory Name:** New York

State Plan Amendment (SPA) #: 14-0039

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 AND HUMAN SERVICES Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop S2-26-12 Baltimore, MD 21244-1850



### **Financial Management Group**

APR 18 2016

Jason A. Helgerson
State Medicaid Director
Deputy Commissioner
Office of Health Insurance Programs
NYS Department of Health
Corning Tower (OCP – 1211)
Albany, NY 12237

RE: State Plan Amendment (SPA) TN 14-0039

Dear Mr. Helgerson:

We have reviewed the proposed amendment to Attachment 4.19-D of your Medicaid State Plan submitted under transmittal number (TN) 14-0039. Effective January 1, 2015 this amendment revises temporary Vital Access Provider / Safety Net Provider (VAP/SNP) enhanced payments for eight nursing homes and adds new payments for 47 additional facilities.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(2), 1902(a)(13), 1902(a)(30) and 1903(a) of the Social Security Act and the implementing Federal regulations at 42 CFR Part 447. This is to inform you that New York 14-0039 is approved effective January 1, 2015 and have enclosed the CMS-179 and approved plan pages.

If you have any questions, please contact Betsy Pinho at 518-396-3810.

Sincerely,

Kristin Fan Director

**Enclosures** 

TRANSMITTAL AND NOTICE OF APPROVAL OF		OMB NO. 0938-
STATE PLAN MATERIAL	1. TRANSMITTAL NUMBER:	2. STATE
STATE FLAN MATERIAL	14-0039	
FOR HEALTH CADE FINANCING ADMINISTRA		New York
FOR: HEALTH CARE FINANCING ADMINISTRATION	3. PROGRAM IDENTIFICATION: TI	TLE XIX OF THE
	SOCIAL SECURITY ACT (MEDI	CAID)
TO: REGIONAL ADMINISTRATOR		
HEALTH CARE FINANCING ADMINISTRATION	4. PROPOSED EFFECTIVE DATE	
DEPARTMENT OF HEALTH AND THEALTH	January 1, 2015	
DEPARTMENT OF HEALTH AND HUMAN SERVICES		
5. TYPE OF PLAN MATERIAL (Check One):		
The state of the s		
□ NEW STATE PLAN □ AMENDMENT TO BE CONS	IDERED AS NEW PLAN	AMENDMENT
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMEND	MENT (Separate Transmittal for each on	andmont)
VI IDELAND STATUTE ACCUMATION CITATION:	7. FEDERAL BUDGET IMPACT: (in	tenument)
§1902(a) of the Social Security Act, and 42 CFR 447		
	a. FFY 1/01/15-09/30/15 \$ 29,644 b. FFY 10/01/15-09/30/16 \$ 0	.59
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	0 PACE NUMBER OF THE CHAPTER	
The state of the s	9. PAGE NUMBER OF THE SUPERS	EDED PLAN
Att 4.19-D - Part I Page 47(aa)(4); 47(aa)(5); 47(aa)(6); 47(aa)(7);	SECTION OR ATTACHMENT (If App	olicable):
47(aa)(8)	44440 0 0	
	Att 4.19-D - Part I Page 47(aa)(4); 47	(aa)(5)
10 CINTER OF A CONTRACTOR		
10. SUBJECT OF AMENDMENT:		
Safety Net VAP/LTC - CINERGY; Neurodegenerative Groups		
(FMAP = 50%)		Edd Chairman
11. GOVERNOR'S REVIEW (Check One):		
GOVERNOR'S OFFICE REPORTED NO COMMENT		
COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	☐ OTHER, AS SPECI	FIED:
MO DEDLY DECEMBER WITHIN AS DAMES OF STREET		****
☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL		
12. SIGNAT		
12. SIGNAT	16. RETURN TO:	
	New York State Department of Health	
13. TYPED NAME: Jason A. Helgerson	Division of Finance & Rate Setting	
	99 Washington Ave - One Commerce	Plaza
14. TITLE: Medicaid Director	Suite 1460	
Department of Health	Albany, NY 12210	
15. DATE SUBMITTED: MAR 0 2 2015		
· · · · · · · · · · · · · · · · · · ·		
FOR REGIONAL OFFIC	E USE ONLY	
17. DATE RECEIVED:	18. DATE APPROVED: APR 18 20	186
	AFR 18 20	110
PLAN APPROVED – ONE C	OPY ATTACHED	
19. EFFECTIVE DATE OF APPROVED MATERIAL:	20. SIGNATURE OF REGIONAL OFF	TOTAT .
JAN 0 1 2015	20. SIGNATORE OF REALISMAL OFF	CIAL:
21. TYPED NAME:	22. TITLE	
Must w LAN	Director, PMC	0
23. REMARKS:	Director, Fiva	2
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## New York 47(aa)(4)

# Temporary Rate Adjustments for Mergers, Acquisitions, Consolidations, Restructurings, and Closures – Nursing Homes

A temporary rate adjustment will be provided to eligible residential health care providers that are subject to or impacted by the closure, merger, and acquisition, consolidation or restructuring of a health care provider. The rate adjustment is intended to:

- Protect or enhance access to care;
- Protect or enhance quality of care; or
- Improve the cost effectiveness.

Eligible residential health care providers, the amount of the temporary rate adjustment, and the duration of each rate adjustment period shall be listed in the table which follows. The total adjustment amount for each period shown below will be paid quarterly during each period in equal installments. The temporary payment made under this section will be an add-on to services payments made under this Attachment to such facilities during the quarter.

To remain eligible, providers must submit benchmarks and goals acceptable to the Commissioner and must submit periodic reports, as requested by the Commissioner, concerning the achievement of such benchmarks and goals. Failure to achieve satisfactory progress in accomplishing such benchmarks and goals will result in termination of the provider's temporary rate adjustment prior to the end of the specified timeframe. Once a provider's temporary rate adjustment ends, the provider will be reimbursed in accordance with the otherwise applicable rate-setting methodology as set forth in this Attachment.

Temporary rate adjustments have been approved for the following providers in the amounts and for the effective periods listed.

#### **Nursing Homes:**

Provider Name	Gross Medicaid Rate Adjustment	Rate Period Effective
Adirondack Medical Center - Mercy	\$6,694	01/01/2014 - 03/31/2014
Living Center	\$723,872	04/01/2014 - 03/31/2015
* diameter & Admitted Combon   Life   alian	\$2,273,884	01/01/2014 - 03/31/2014
Adirondack Medical Center - Uihlein	\$2,359,369	04/01/2014 - 03/31/2015
Living Center	\$821,793	04/01/2015 - 03/31/2016
	v i saa viis saa	
Adirondack Tri-County Nursing &	\$225,680	01/01/2014 - 03/31/2014
Rehabilitation Center, Inc.	\$1,369,690	04/01/2014 - 03/31/2015
Amsterdam Nursing Home Corp (Amsterdam House)*	<u>\$1,430,938</u>	01/01/2015 - 03/31/2015
	a em grago e e e	
Beth Abraham Health Services*	<u>\$2,460,249</u>	01/01/2015 - 03/31/2015
*Denotes provider is part of CINERGY Co	ollaborative,	•

TN	i #14-0	039	Approval Date	APR 18 2016
Sun	ersedes TN	#14-0012	Effective Date	JAN 0 1 2015

# New York 47(aa)(5)

## **Nursing Homes (Continued):**

Provider Name	Gross Medicaid Rate Adjustment	Rate Period Effective
Bronx Lebanon Special Care Center*	<u>\$788,294</u>	01/01/2015 - 03/31/2015
Brooklyn United Methodist Church	\$702,169	01/01/2015 - 03/31/2015
Home*		
Buena Vida Continuing Care & Rehab		
Ctr.*	<u>\$970,765</u>	01/01/2015 – 03/31/2015
		in constitution of the second
Cabrini Center for Nursing*	<u>\$1,130,860</u>	01/01/2015 - 03/31/2015
Carmel Richmond Healthcare and	<u>\$1,084,185</u>	01/01/2015 - 03/31/2015
Rehabilitation Center*		
Center For Nursing & Rehabilitation		564
Inc.*	<u>\$1,179,939</u>	01/01/2015 - 03/31/2015
· · · · · · · · · · · · · · · · · · ·	Constitution of the Consti	10.00
Chapin Home for the Aging*	<u>\$771,403</u>	01/01/2015 - 03/31/2015
		7381
Charles T. Sitrin Health Care Center Inc.	<u>2,000,000</u>	01/01/2015 - 03/31/2015
ATTC:		1994 Maria
	\$645,000	01/01/2014 - 03/31/2014
Crouse Community Center	\$710,000	04/01/2014 - 03/31/2015
	\$65,000	04/01/2015 - 03/31/2016
E Hall Command Rehabilitation		
Eger Health Care and Rehabilitation Center*	<u>\$1,463,808</u>	<u>01/01/2015 – 03/31/2015</u>
<u>Ceriter</u>		
Elizabeth Seton Pediatric Center*	\$927,714	01/01/2015 - 03/31/2015
The state of the s	100	
Ferncliff Nursing Home Co Inc.*	<u>\$3,029,944</u>	01/01/2015 - 03/31/2015
7. C. 1996	4F34 F00	04/01/2012 02/21/2012
Field Home - Holy Comforter	\$534,500 \$534,500	04/01/2012 - 03/31/2013 04/01/2013 - 03/31/2014
	μοτισου	O I VALEDIO OU OU DE LE COLO
Gurwin Jewish Nursing and	£1 770 000	01/01/2015 - 02/21/2015
Rehabilitation Center*	\$1,778,009	01/01/2015 - 03/31/2015
	+070.010	01/01/2014 02/21/2014
Heritage Commons Residential Health	\$976,816 \$834,744	01/01/2014 - 03/31/2014 04/01/2014 - 03/31/2015
Care	ן סטיי,/דד	07/01/2017 - 03/31/2013

\*Denotes provider is part of CINERGY Collaborative.

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## New York 47(aa)(6)

## **Nursing Homes (Continued):**

Provider Name	Gross Medicaid Rate	Rate Period Effective
Isabella Geriatric Center Inc.*	<b>Adjustment</b> \$2,902,269	01/01/2015 - 03/31/2015
Island Nursing and Rehab Center*	<u>\$903,195</u>	<u>01/01/2015 – 03/31/2015</u>
Jamaica Hospital Nursing Home Co	· · · · · · · · · · · · · · · · · · ·	
Inc.*	<u>\$764,892</u>	<u>01/01/2015 – 03/31/2015</u>
Jewish Home Lifecare Henry and Jeanette Weinberg Campus Bronx*	<u>\$2,939,255</u>	<u>01/01/2015 – 03/31/2015</u>
Scarification of the second of		in the second second second
Jewish Home LifeCare Manhattan*	\$1,947,662	01/01/2015 - 03/31/2015
2-deb Name LifeCore Court Name		and the second s
<u>Jewish Home LifeCare Sarah Neuman</u> Center*	<u>\$1,169,410</u>	<u>01/01/2015 – 03/31/2015</u>
Served		
Lutheran Augustana Center for	\$1,016,961	01/01/2015 - 03/31/2015
Extended Care & Rehab*	<u> </u>	
Margaret Tietz Center For Nursing	+700 077	04/04/0045 00/04/0045
Care Inc.*	\$700,877	01/01/2015 - 03/31/2015
Mary Manning Walsh Nursing Home	Tarangan da ang ang ang ang ang ang ang ang ang an	
Co Inc.*	<u>\$1,453,160</u>	01/01/2015 - 03/31/2015
		Totaline APP Security
Menorah Home And Hospital For	\$1,210,053	01/01/2015 - 03/31/2015
Rehabilitation and Nursing*		75554 (iii.
Methodist Home for Nursing and	\$441,177	01/01/2015 - 03/31/2015
Rehabilitation*	3771,177	01/01/2013 - 03/31/2013
New York Congregational Nursing	indistra	
Center Inc.*	<u>\$717,376</u>	01/01/2015 - 03/31/2015
		The second secon
	\$5,597,952	04/01/2012 - 03/31/2013
Northeast Center for Special Care	\$3,885,888 \$5,312,562	04/01/2013 - 12/31/2013 01/01/2014 - 03/31/2014
Trockings Comer for Special Suit	\$5,027,984	04/01/2014 - 03/31/2015
	\$815,934	04/01/2015 - 03/31/2016
Police de Numina Universario	e e e e e e e e e e e e e e e e e e e	Salata Salat
Palisade Nursing Home Company Inc.*	<u>\$977,614</u>	01/01/2015 - 03/31/2015

\*Denotes provider is part of CINERGY Collaborative.

TN .	#14-0039	Approval Date_	APR 1 8 2016
Sup	ersedes TN <u>NEW</u>	Effective Date _	JAN 0 1 2015

## New York 47(aa)(7)

## **Nursing Homes (Continued):**

Provider Name	Gross Medicaid Rate Adjustment	Rate Period Effective
Parker Jewish Institute for Health Care and Rehabilitation*	<u>\$1,929,819</u>	01/01/2015 - 03/31/2015
Providence Rest*	<u>\$693,647</u>	01/01/2015 - 03/31/2015
Rebekah Rehabilitation & Extended Care Center Inc*	<u>\$387,029</u>	01/01/2015 - 03/31/2015
Riverdale Nursing Home*	\$1,858,017	01/01/2015 - 03/31/2015
Rutland Nursing Home Co Inc.*	\$2,234,772	01/01/2015 - 03/31/2015
Saints Joachim & Anne Nursing and Rehabilitation Center*	<u>\$644,472</u>	01/01/2015 - 03/31/2015
Samaritan Keep Nursing Home Inc.	\$4,500,000 \$4,500,000	02/01/2014 - 03/31/2014 04/01/2014 - 03/31/2015
Schaffer Extended Care System*	\$441,290	01/01/2015 - 03/31/2015
Schervier Nursing Care Center*	\$1,421,550	01/01/2015 - 03/31/2015
Schnurmacher Center for Rehabilitation and Nursing*	<u>\$539,168</u>	01/01/2015 - 03/31/2015
Schulman and Schachne Institute for Nursing and Rehabilitation*	<u>\$1,852,978</u>	01/01/2015 - 03/31/2015
Silvercrest*	\$1,293,304	01/01/2015 - 03/31/2015
St. Mary's Hospital for Children Inc.*	\$1,777,136	01/01/2015 - 03/31/2015
St Vincent Depaul Residence*	\$417,641	01/01/2015 - 03/31/2015
Terence Cardinal Cooke Health Care Ctr*	\$3,130,256	01/01/2015 - 03/31/2015

*Denotes provider is part of CINERGY Collaborative.
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Supersedes TN <u>NEW</u>	Effective Date	JAN 01 2015

## New York 47(aa)(8)

## **Nursing Homes (Continued):**

Provider Name	Gross Medicald Rate Adjustment	Rate Period Effective
The Wartburg Home*	\$1,020,64 <del>4</del>	<u>01/01/2015 - 03/31/2015</u>
	The state of the s	
United Hebrew Geriatric Center*	<u>\$1,152,635</u>	01/01/2015 - 03/31/2015
	Alignings of the city are	
<u>Victoria Home</u>	<u>\$500,000</u>	01/01/2015 - 03/31/2015
VillageCare Rehabilitation and Nursing Center*	\$1,132,647	01/01/2015 - 03/31/2015
	3	

<sup>\*</sup>Denotes provider is part of CINERGY Collaborative.

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Supersedes TN <u>NEW</u>	Effective Date	JAN 01 2015