Table of Contents

State/Territory Name: NY

State Plan Amendment (SPA) #: 22-0046

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 Center for Medicaid & CHIP Services 233 North Michigan Ave., Suite 600 Chicago, Illinois 60601



Financial Management Group

June 27, 2022

Amir Bassiri Acting Medicaid Director 99 Washington Ave – One Commerce Plaza Suite 1432 Albany, NY 12210

RE: TN 22-0046

Dear Mr. Amir Bassiri:

We have reviewed the proposed New York State Plan Amendment (SPA) to Attachment 4.19-B NY 22-0046, which was submitted to the Centers for Medicare & Medicaid Services (CMS) on March 31, 2022. This plan amendment provides a temporary rate increase of 11.5 percent through New York's American Rescue Plan Act of 2021 for Outpatient Mental Health (OMH) Rehabilitative Services for workforce recruitment and retention activities.

Based upon the information provided by the State, we have approved the amendment with an effective date of February 1, 2022. 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-Webb at 617-565-1225 or <u>Kristina.Mack-Webb@cms.hhs.gov.</u>

Sincerely,

Todd McMillion Director Division of Reimbursement Review

Enclosures

TO: CENTERS FOR MEDICARE & MEDICAID SERVICES TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES 5. FEDERAL STATUTE/REGULATION CITATION \$ 1902(a) of the Social Security Act and 42 CFR 447 7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 4.19-B Page: 8(b) S. SUBJECT OF AMENDMENT OMH Outpatient Rehab ARPA Workforce Recruitment and Retention Rate Increase (11.5%) 10. GOVERNOR'S REVIEW (Check One) GOVERNOR'S REVIEW (Check One) GOVERNOR'S REVIEW (Check One) GOVERNOR'S REVIEW (Check One) GOVERNOR'S OFFICIAL 11. SIGNATURE OF STATE AGENCY OFFICIAL 12. TYPED NAME Brett R. Friedman 13. TITLE Acting Medicaid Director 14. DATE SUBMITTED March 31, 2022 PLAN APPROVED - ONE COPY ATTACHED 15. SIGNATURE OF APPROVING OFFICIAL 16. DATE RECEIVED March 31, 2022 PLAN APPROVED - ONE COPY ATTACHED 17. DATE APPROVED March 31, 2022 PLAN APPROVED - ONE COPY ATTACHED 18. EFFECTIVE DATE OF APPROVING OFFICIAL Todd McMillion Director, Division of Reimbursement Review 17. Director, Division of Reimbursement Review 22. REMARKS	TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	
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New York 8(b)

1905(a)(13) Rehabilitative Services

Rehabilitative Services (42 CFR 440.130(d)): OMH outpatient mental health services-Reimbursement Methodology continued

American Rescue Plan Act Section 9817 for Home and Community-Based Services:

The agency increases payment for providers of services referenced in New York's American Rescue Plan Act Home and Community Based Services Enhanced Funding Spending Plan. Providers are Social Security Act Section 1905(a) Rehabilitative Services providers listed in Appendix B of the American Rescue Plan Act, State Medicaid Director Letter, SMD# 21-003 Implementation of American Rescue Plan Act of 2021 Section 9817.

The time-limited rate increases described in this section will be used to expand, enhance or strengthen mental health rehabilitative services programs consistent with New York's American Rescue Plan Act Home and Community Based Services Enhanced Funding Spending Plan. Rate increases will not extend beyond September 30, 2022.

The rates were updated for the period February 1, 2022, through September 30, 2022.

All rates are published on the Office of Mental Health website at:

https://omh.ny.gov/omhweb/medicaid_reimbursement/excel/apg-peer-group-base-rate.xlsx

TN	#22-0046	Approval Date June 27, 2022
Supersed	es TN <u># NEW</u>	Effective Date February 1, 2022