HEALTH CARE REFORM ACT – PUBLIC GOODS POOL

Mr. Jerome Alaimo, Pool Administrator
Office of Pool Administration
Excellus BlueCross BlueShield
Central New York Region
P.O. Box 4757
Syracuse, New York 13221-4757

Dear Mr. Alaimo:

Re: New York State Health Care Reform Act (HCRA) Medicaid Surcharge Payments

Pursuant to Section 2807-j(5-a)(b) of the Public Health Law (PHL), the facility listed below elects to have the Department of Health withhold HCRA surcharge payments from medical assistance payments (Medicaid) made directly by the State, pursuant to Section 2807-j of the PHL on behalf of patients eligible for medical assistance pursuant to Title 11 of Article 5 of the Social Services Law, and to forward said funds directly to the Office of Pool Administration on behalf of such provider.

This election, once processed, becomes effective immediately and will remain in effect (pursuant to authorizing statute) unless written revocation is received by the Office of Pool Administration postmarked no later than December 1 in the year immediately preceding the next calendar year.

_________________________________________  __________________________
Signature - CFO/Controller                    Date

FEDERAL TAX IDENTIFICATION #: ____________________ OPERATING CERTIFICATE #: ____________________
IDENTIFICATION #: ____________________
PROVIDER ID: ____________________ (Medicaid Provider ID)
NPI: ____________________ (Entity National Provider Identifier)
FACILITY NAME: ________________________________________________________________
ADDRESS: ________________________________________________________________
CONTACT PERSON: ___________________________________________________________
PHONE#: ____________________
EMAIL ADDRESS: ____________________________________________________________