

Question #	Question	Answer
1	What payments are exempt from the 1% Across the Board (ATB) reduction in accordance with the statute?	Exempt payments are listed on the ATB homepage.
2	Will provider rates be revised to reflect the 1% ATB reduction?	No, Fee-For-Service provider rates of payment will not be revised. NYS statute requires that aggregate payments be uniformly reduced by the 1% ATB amount and this will be done through an aggregate reduction to provider remittances for those services subject to the ATB.  However, Managed Care premiums will be reduced to incorporate the 1% ATB reduction.
3	How will the 1% ATB reduction appear on remittances?	The reduction will be identified by Financial Reason Code "FC2" and the corresponding description of "State Mandated Payment Reduction".
4	Will this payment reduction be applied for Date of Payment or for Date of Service?	The payment reduction will be for dates of service on or after January 1, 2020.
5	If the primary insurer on a claim for clients with dual eligibility is Medicare or other third-party payer, which are exempt from the reduction, is the copay and/or deductible paid by Medicaid exempt as well?	All Medicaid payments including copays and deductibles are subject to the ATB reduction unless specifically listed as exemptions.
6	Are supplemental payments that are not paid through a service claim subject to the 1% ATB?	Yes. Supplemental payments not paid through a service claim are subject to the ATB unless specified on the exemptions list.
7	Will Medicaid administrative payments to local social services districts be reduced by the 1% ATB reduction?	No, payments to local districts are not subject to the 1% ATB reduction.
8	Will the 1099 tax form reflect the net pay or the actual check amount received because of the 1% ATB reductions?	The 1099 tax form will reflect the check amount (the net pay minus the 1% ATB reduction).
9	Will the 1% reduction apply to programs that operate under the State's Mental Hygiene agencies (OPWDD, OMH, OASAS) and Department of Health	Medicaid payments pursuant to Article 31, 32, and 16 are exempt.
<b>Other Items</b>		
1	Can the Department of Health issue guidance to Managed Care Organizations and Performing Provider Systems related to the Equity Pool reductions included in the FY 2020 Savings Plan?	Effective October 1, 2019, the Equity Infrastructure Program, Equity Performance Program and Additional High Performance Program, collectively known as the "Equity Programs," will no longer be funded through managed care premiums by the Department of Health. Absent any provisions in an agreement between the Medicaid Managed Care Organization (MCO) and Performing Provider System(s) to the contrary, MCOs will be able to recoup this funding through permitted recovery processes.