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State/Territory Name: New York

State Plan Amendment (SPA) NY: 22-0080

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 29, 2023
Amir Bassiri
New York State
Department of Health (DOH)
Acting Medicaid Director
99 Washington Ave-One Commerce Plaza Suite 1432
Albany, NY 12210

RE: New York Plan Amendment (SPA) Transmittal Number 22-0080

Dear Director Bassiri:

We have reviewed the proposed New York State Plan Amendment (SPA) to Attachment 4.19-B submitted under TN-22-0080, which was submitted to the Centers for Medicare & Medicaid Services (CMS) on September 30th, 2022. This State Plan Amendment proposes to increase Comprehensive Psychiatric Emergency Program (CPEP) reimbursement rates for triage and referral, and full emergency visits.

Based upon the information provided by the State, we have approved the amendment with an effective date of July 1, 2022. We are enclosing the approved CMS-179 and a copy of the new state plan page.

If you have any additional questions or need further assistance, please contact Jerica Bennett at 1-410-786-1167 or jerica.bennett@cms.hhs.gov.

Sincerely,



Todd McMillion
Director
Division of Reimbursement Review

Enclosures

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER <u>2 2</u> — <u>0 0 8 0</u>	2. STATE <u>NY</u>
3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT <input checked="" type="radio"/> XIX <input type="radio"/> XXI	

TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE July 1, 2022
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5. FEDERAL STATUTE/REGULATION CITATION § 1905(a)(30) Other Medical Care 1905(a)(2)(A) Outpatient Hospital Services	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a. FFY <u>07/01/22-09/30/22</u> \$ 2,934,095 2,846,595 b. FFY <u>10/01/22-09/30/23</u> \$ 11,736,380 11,386,380
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7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 3.1-A Supplement: Pages 3(d)(B) Attachment 3.1-B Supplement: Pages 3(d)(B) Attachment 4.19-B: Page 5(b) Page 2(ao)	8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) Attachment 4.19-B: Page 5(b) NEW
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9. SUBJECT OF AMENDMENT
Comprehensive Psychiatric Emergency Program (CPEP) Rate Increase
Comprehensive Psychiatric Emergency Program (CPEP) Rate Increases for CPEP Emergency Visits

10. GOVERNOR'S REVIEW (Check One)

GOVERNOR'S OFFICE REPORTED NO COMMENT
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

OTHER, AS SPECIFIED:

12. TYPED NAME Amir Bassiri	13. TITLE Medicaid Director	14. DATE SUBMITTED September 30, 2022	15. RETURN TO New York State Department of Health Division of Finance and Rate Setting 99 Washington Ave – One Commerce Plaza Suite 1432 Albany, NY 12210
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FOR CMS USE ONLY

16. DATE RECEIVED September 30, 2022	17. DATE APPROVED June 29, 2023
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PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL July 1, 2022	19. SIGNATURE OF APPROVING OFFICIAL [Redacted]
20. TYPED NAME OF APPROVING OFFICIAL Todd McMillion	21. TITLE OF APPROVING OFFICIAL Director, Division of Reimbursement Review

22. REMARKS

The State authorizes the following pen and ink changes: Box 5: Federal Statute/Regulation Citation: § 1905(a)(2)(A) Outpatient Hospital Services

Box 6: Federal Budget Impact. a. FFY 07/01/22 – 09/30/22 \$ 2,846,595
b. FFY 10/01/22 – 09/30/23 \$11,386,380

Box 7: Page Number of Plan Section or Attachment: Attachment 4.19-B: Page 2(ao)
 Box 8: Page Number of the Plan Section or Attachment: **NEW**
 Box 9: Subject of Amendment: Comprehensive Psychiatric Emergency Program (CPEP) Rate Increases for CPEP Emergency Visits

**New York
2(ao)**

1905(a)(2)(A) Outpatient Hospital Services

42 C.F.R. § 440.20

Comprehensive Psychiatric Emergency Program (CPEP) hospital outpatient services are reimbursed on a daily basis. A CPEP provider may receive reimbursement for one Triage and Referral visit or one Full Emergency visit service in one calendar day.

Effective July 1, 2022, statewide fees for Comprehensive Psychiatric Emergency Program Services are available at the following Office of Mental Health website link:

https://omh.ny.gov/omhweb/medicaid_reimbursement/excel/cpep.xlsx

TN # 22-0080

Approval Date June 29, 2023

Supersedes TN # New

Effective Date July 1, 2022