Amend Senate S.58, Assembly A.158, A BUDGET BILL, AN ACT to amend the public health law, the state finance law, the education law and the insurance law...

| Page | Line | Amendment |
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| Page 4 | Unnumbered line 44 (AN ACT CLAUSE), | After "(Part O);" strike out "and" |
| Page 4 | Unnumbered Line 48 (AN ACT CLAUSE), | After "(Part P)" insert "; to amend the mental hygiene law, in relation to the operating certificate of chemical dependence services providers (Part Q), and to amend the social services law, in relation to the recertification for medical assistance for a recipient of medical waiver services authorized by the office of mental retardation and developmental disabilities (Part R)" |
| Page 5 | Line 1, | After "through" strike out "P" and insert "R" |
| Page 27, | Line 1, | After "children" strike out " <u>screened</u> " and insert " <u>tested</u> " |
| Page 27, | Line 2, | After "age-specific" strike out " <u>screening</u> " and insert " <u>testing</u> " |
| Page 54, | Between Lines 39 and 40, | Insert "§1-b. Subparagraph (ii) of paragraph (a) of subdivision 33 of section 2807-c of the public health law, as added by section 12 of part C of chapter 58 of the laws of 2008, is amended to read as follows: (ii) for the period April first, two thousand nine through March thirty-first, two thousand ten, such rates shall be revised pursuant to a chapter of the laws of two thousand nine and as reflecting the findings and recommendations of the commissioner as issued pursuant to the provisions of paragraph (b) of this subdivision, provided, however, that such revisions shall reflect an aggregate reduction in such rates of no less than one hundred fifty-four million five hundred thousand dollars, provided further, however, that, as determined by the commissioner, to the extent that a chapter of the laws of two thousand nine is not enacted resulting in such a aggregate reduction of no less than one hundred fifty-four million five hundred thousand dollars in such rates, the commissioner shall implement a uniform reduction of such rates in accordance with the methodology described in subparagraph (i) of this paragraph to the extent necessary, as determined by the commissioner, to achieve such an aggregate reduction in such rates |

| | | for the state fiscal year beginning April first, two thousand nine; and" |
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| Page 56, | Lines 34 and 35, | After " <u>through</u> " strike out " <u>June thirtieth</u> " and insert " <u>March thirty-first</u> " |
| Page 56, | Line 36, | After " <u>period</u> " strike out " <u>July</u> " and insert " <u>April</u> " |
| Page 56, | Lines 36 and 37, | After " <u>through</u> " strike out " <u>June thirtieth</u> " and insert " <u>March thirty-first</u> " |
| Page 56, | Line 38, | After " <u>period</u> " strike out " <u>July</u> " and insert " <u>April</u> " |
| Page 56, | Lines 38 and 39, | After " <u>through</u> " strike out " <u>June thirtieth</u> " and insert " <u>March thirty-first</u> " |
| Page 56, | Line 40, | After " <u>period</u> " strike out " <u>July</u> " and insert " <u>April</u> " |
| Page 56, | Lines 40 and 41, | After " <u>through</u> " strike out " <u>June thirtieth</u> " and insert " <u>March thirty-first</u> " |
| Page 57, | Line 10, | After " <u>hundred</u> " strike out " <u>twenty-five</u> " and insert " <u>seventy-eight</u> " |
| Page 63, | Line 29, | After "period" insert "[" and after "nine" insert "]" and insert "December first, two thousand eight" |
| Page 65, | Line 5, | After " <u>up to</u> " strike out " <u>thirty-four</u> " and insert " <u>twenty-five</u> " |
| Page 74, | Between Lines 14 and 15 | Insert "§28-a. Notwithstanding any contrary provision of section 14 of part B of chapter 1 of the laws of 2002 or any other contrary provision of law, distributions made pursuant to section 14 of part B of chapter 1 of the laws of 2002, shall be based on each eligible hospital's proportionate share of the sum of all Medicaid outpatient visits for all eligible hospitals in the base year two years prior to the rate year." |
| Page 99, | Line 7, | After "attains" insert "[" and after "six" insert "]" and insert " <u>nineteen</u> " |
| Page 99, | Between Lines 10 and 11 | Insert "§ 65-a. Subparagraph 1 of paragraph (m) of subdivision 4 of section 366 of the social services law, as added by Chapter 584 of the laws of 1989, is amended to read as follows: |

| (1) Pregnant women and infants |
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| younger than one year of age who are not |
| otherwise eligible for medical assistance |
| and whose families have <u>net</u> incomes equal |
| to or less than one hundred percent of the |
| [comparable] federal [income official] |
| poverty line (as defined and annually |
| revised by the [federal office of |
| management and budget] United State |
| department of health and human services) |
| for families of the same size <u>shall be</u> |
| eligible for medical assistance as provided |
| in subparagraph three of this paragraph. |
| Subject to the approval of the federal |
| Centers for Medicare and Medicaid Services, |
| financial eligibility pursuant to this |
| paragraph may be determined using an |
| equivalent methodology based on the |
| family's gross income. |
| § 65-b. Subparagraph 1 of paragraph |
| (n) of subdivision 4 of section 366 of the |
| social services law, as amended by section |
| 2 of part D of chapter 57 of the laws of |
| 2000, is amended to read as follows: |
| (1) Infants younger than one year who |
| are not otherwise eligible for medical |
| assistance and whose families have: (i) |
| subject to the approval of the federal |
| Centers for Medicare and Medicaid Services, |
| gross incomes not in excess of two hundred |
| thirty percent of the federal poverty line |
| (as defined and annually revised by the |
| United States department of health and |
| human services) for a family of the same |
| size as the families that include the |
| children or (ii) in the absence of such |
| approval, net incomes equal to or less than |
| two hundred percent of the federal [income |
| official] poverty line (as defined and |
| annually revised by the United States |
| department of health and human services) |
| for a family of the same size as the |
| families that include the infants, shall be |
| eligible for medical assistance as provided |
| in subparagraph three of this paragraph. |
| For purposes of this paragraph, family |
| income shall be determined by use of the |
| same methodology used to determine |
| eligibility for the aid to dependent |
| children program as it existed on the |
| sixteenth day of July, nineteen hundred |
| ninety-six. |
| § 65-c. Subparagraph 1 of paragraph |
| (o) of subdivision 4 of section 366 of the |
| social services law, as amended by section |
| 3 of part D of chapter 57 of the laws of |
| 2000, is amended to read as follows: |
| (1) Pregnant women who are not otherwise |
| eligible for medical assistance [are |
| eligible for services provided under the |
| prenatal care assistance program |
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| | | <pre>established pursuant to title two of article twenty-five of the public health law if the income of the family that includes the pregnant woman does not exceed] and whose families have: (i) subject to the approval of the federal Centers for Medicare and Medicaid Services, gross incomes not in excess of two hundred thirty percent of the federal poverty line (as defined and annually revised by the United States department of health and human services) for a family of the same size as the families that include the children or (ii) in the absence of such approval, net incomes equal to or less than two hundred percent of the [comparable] federal [income official] poverty line (as defined and annually revised by the United States department of health and human services) for families of the same size, shall be eligible for coverage of prenatal care services as provided in subparagraph three of this paragraph. § 65-d. Paragraph (a) of subdivision 2 of section 2529 of the public health law is amended to read as follows: 2. (a) Any inconsistent provision of law notwithstanding, a pregnant woman shall be presumed to be an eligible service recipient beginning on the date that a qualified provider determines, on the basis of preliminary information, that the pregnant woman's <u>net</u> household income does not exceed the applicable income level of eligibility. Subject to the approval of the federal Centers for Medicare and Medicaid Services, financial eligibility pursuant to this subdivision may be determined using an equivalent methodology based on the family's gross income."</pre> |
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| Page 113, | Line 34, | After " <u>dollars</u> " insert " <u>on an annual basis</u> " |
| Page 113, | Lines 34 and 35, | Strike out " <u>period</u> " and insert " <u>periods</u> " |
| Page 123, | Lines 46, | After " <u>claims</u> " insert " <u>or administers the</u> <u>payment of claims</u> " |
| Page 125 | Line 2, | After " <u>adjusts</u> " insert " <u>, pays</u> " |
| Page 125 | Line 2, | After " <u>or</u> " strike out " <u>pays</u> " and insert "administers the payment" |
| Page 125 | Line 2, | After " <u>in</u> " strike out " <u>this</u> " and insert " <u>New York</u> " |
| Page 129, | Between Lines 47 and 48, | Insert "§ 125-d. Clause (i) of subparagraph 7 of paragraph (a) subdivision 2 of section 366 of the social services law, as added by section 47 of part C of |

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| | | chapter 58 of the laws of 2008, is amended to read as follows: |
| | | (i) The amounts for one and two person households and families shall be equal to twelve times the standard of monthly need <u>in effect on May thirty-</u> <u>first, two thousand nine or such higher</u> <u>standard as may be established</u> for determining eligibility for and the amount of additional state payments for aged, blind and disabled persons pursuant to section two hundred nine of this article rounded up to the next highest one hundred dollars for eligible individuals and couples living alone, respectively." |
| Page 142, | Line 1, | |
| | | Before "§ 15" Insert "§ 14-a. Paragraph (a) of subdivision 6 of section 3614 of the public health law, as added by chapter 165 of the Laws of 1991 and amended by chapter 645 of the Laws of 2003, is amended to read as follows: |
| | | (a) The commissioner shall, subject to the approval of the state director of the budget, establish capitated rates of payment for services provided by assisted living programs as defined by paragraph (a) of subdivision one of section four hundred sixty-one-1 of the social services law. Such rates of payment shall be related to costs incurred by residential health care facilities. The rates shall reflect the wage equalization factor established by the commissioner for residential health care facilities in the region in which the assisted living program is provided and real property capital construction costs associated with the construction of a free- standing assisted living program such rate shall include a payment equal to the cost of interest owed and depreciation costs of such construction. The rates shall also reflect the efficient provision of a quality and quantity of services to patients in such residential health care facilities, with needs comparable to the needs of residents served in such assisted living programs. Such rates of payment shall be equal to fifty percent of the amounts which otherwise would have been expended, based upon the mean prices for the first of July, nineteen hundred ninety- two (utilizing nineteen hundred ninety- two (utilizing nineteen hundred eighty- three costs) for freestanding, low intensity residential health care facilities with less than three hundred beds, and for years subsequent to nineteen hundred ninety-two, adjusted for inflation |

| | | in accordance with the provisions of |
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| | | subdivision ten of section twenty-eight hundred seven - c of this chapter, to provide the appropriate level of care for such residents in residential health care facilities in the applicable wage equalization factor regions plus an amount equal to capital construction costs associated with the construction of an assisted living program facility as provided for in this subdivision." |
| Page 142, | Between lines 23 and 24, | <pre>Insert "§16-a. Subparagraph (iii) of paragraph (a) of subdivision 23 of section 2808 of the public health law, as added by section 29 of part C of chapter 109 of the laws of 2006, is amended to read as follows:</pre> |
| | | ninety percent or greater for a calendar year prior to April first, two thousand seven, the operating component of the rate of payment established pursuant to this article shall be calculated utilizing allowable costs reported in the first calendar year after two thousand six in which such a program achieves an occupancy percentage of ninety percent or greater |
| | | effective January first of such calendar year except for calendar year two thousand seven, effective no earlier than April first of such year, provided, however, that effective January first, two thousand nine, for programs that have not achieved an occupancy percentage of ninety percent or greater for a calendar year prior to January first, two thousand nine, the |
| | | operating component of the rate of payment established pursuant to this article shall be calculated utilizing allowable costs reported in the two thousand nine cost report filed by the sponsoring residential health care facility divided by visits imputed at actual or ninety percent occupancy, whichever is greater. This subparagraph shall also apply to programs |
| | | which achieved an occupancy percentage of ninety percent or greater prior to calendar year two thousand four but in such year had an approved capacity that was not the same as in calendar year two thousand four. § 16-b. Paragraph (e-1) of subdivision 12 |
| | | of section 2808 of the public health law, as amended by section 64 of part C of chapter 58 of the laws of 2007, is amended to read as follows: (e-1) Notwithstanding any inconsistent |

| | | provision of law or regulation, the commissioner shall provide, in addition to payments established pursuant to this article prior to application of this section, additional payments under the medical assistance program pursuant to title eleven of article five of the social services law for non-state operated public residential health care facilities, including public residential health care facilities located in the county of Nassau and the county of Westchester, but excluding public residential health care facilities operated by a town or city within a county, in aggregate annual amounts of up to one hundred fifty million dollars in additional payments for the state fiscal year beginning April first, two thousand six and for the state fiscal year beginning April first, two thousand seven and for the state fiscal year beginning April first, two thousand eight and <u>of up to three hundred million dollars</u> in such aggregate annual additional <u>payments</u> for the state fiscal year beginning April first, two thousand nine. The amount allocated to each eligible public residential health care facility for this period shall be computed in accordance with the provisions of paragraph (f) of this subdivision, provided, however, that patient days shall be utilized for such computation reflecting the actual reported data for two thousand three and each respective succeeding year as applicable." |
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| Page 144, | Between lines 30 and 31, | Insert "§19-a. Paragraphs (e) and (f) of subdivision 9 of section 3614 of the public health law, as amended by section 22-e of part B of chapter 58 of the laws of 2008, are amended to read as follows: (e) for the period April first, two thousand nine through March thirty-first, two thousand ten, up to [one hundred] <u>ninety</u> million <u>seven hundred fifty</u> thousand dollars, <u>provided</u> , however, that up to <u>twenty-seven million seven hundred fifty</u> thousand dollars of such amount shall be <u>reserved</u> and distributed to certified home health agencies for the period April first, two thousand nine through December thirty- first, two thousand nine in accordance with the provisions of subdivision ten of this section, and further provided that the remaining funds shall be distributed to eligible providers that are not certified home health agencies and further provided that on and after January first, two thousand ten certified home health agencies shall not be eligible for distributions |

| | | pursuant to this subdivision and |
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| | | subdivision ten; |
| | | (f) for the period April first, two thousand ten through March thirty-first, two thousand eleven, up to [one hundred] <u>sixty-three</u> million dollars." |
| Page 165 | Line 1, | Before "§ 2." insert "New Part Q (LBD 71021-02-9)" |
| Page 165 | Line 1, | Before "§ 2." insert "New Part R (LBD 71022-03-9)" |
| Page 165 | Line 11, | After "through" strike out "P" and insert "R" |