



Department of Health

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Mainstream Managed Care (MCOs), Managed Long Term Care Organizations (MLTCPs) and Home Health Care (HHC) agencies operating within and serving the State of New York are required to comply with the following directives. For the purposes of this communication, a provider is identified as the following: Licensed Home Care Services Agencies (LHCSA), Certified Home Health Agencies (CHHA), Long Term Home Health Care Program (LTHHCP), and Fiscal Intermediaries (FI) for both Managed Care and Fee-for-Service.

To support plans and providers in complying with the Fair Labor Standards Act (FLSA), the Department has included FLSA funding in State Fiscal Year 2016-2017 Managed Long Term Care (MLTC) premium rates for the purposes of increasing the total per hour wage paid to home care workers. Adjustments were included in both the April 2016 and October 2016 MLTC premium rate packages with funds currently being paid to plans through their monthly capitation payments.

For fee-for-service providers, the per hour amount will be factored into rate adjustments, retroactive to October 13, 2015.

Both the managed care and fee for service payments are designed to provide funding for home care providers to continue meeting their obligations under the Federal Final Rule.

It is the Department's expectation that funds issued to plans will be passed through to providers in their entirety, consistent with previous guidance.

Funds paid directly to providers are subject to the same expectation. Providers are responsible for ensuring that funds received are applied to the home care worker's total wage.

To assure compliance with the requirements indicated above, the Department requires that both plans and providers sign and submit the attached attestation by May 5, 2017, appropriate for your line of business. All MCOs and providers are required to submit an attestation directly to the Department. Additionally, all providers are strongly encouraged to send their attestations to the MCOs with whom they have signed contracts or signed agreements. The submitted attestation confirms that funds received were disbursed in compliance with the above directive.

Plans are directed to distribute and obtain all signed attestations from their contracted providers and retain them for their records.

All Fee-for-Service providers should return signed attestations directly to the Department at the following address: FLSA@health.ny.gov.

Any questions should be directed to FLSA@health.ny.gov.