#### DEPARTMENT OF HEALTH AND HUMAN SERVICES Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop S2-26-12 Baltimore, MD 21244-1850



#### **Financial Management Group**

August 28, 2020

Ms. Donna Frescatore State Medicaid Director Office of Health Insurance Programs NYS Department of Health One Commerce Plaza, Suite 1211 Albany, NY 12210

RE: State Plan Amendment (SPA) TN 20-0029MA

Dear Ms. Frescatore:

We have reviewed the proposed amendment to Attachment 4.19-D of your Medicaid State Plan submitted under transmittal number (TN) 20-0029MA. Effective April 1, 2020 this amendment provides temporary Vital Access Provider / Safety Net Provider (VAP/SNP) enhanced payments to nursing home facilities.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(2), 1902(a)(13), 1902(a)(30) and 1903(a) of the Social Security Act and the implementing Federal regulations at 42 CFR Part 447. This letter is to inform you that New York 20-0029MA is approved effective April 1, 2020. The CMS-179 and approved plan pages are enclosed.

If you have any questions, please contact Charlene Holzbaur at 609-882-4796.

Sincerely,

For Karen Shields Acting Director

Enclosures

CENTERS FOR MEDICARE & MEDICAID SERVICES	OMB No. 0938-0193	
TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES	1. TRANSMITTAL NUMBER MA 2. STATE  2 0 — 0 0 2 9 New York  3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)  TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE April 1, 2020	
5. TYPE OF PLAN MATERIAL (Check One)		
☐ NEW STATE PLAN ☐ AMENDMENT TO BE CONSI	<del></del>	
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMEN		
6. FEDERAL STATUTE/REGULATION CITATION §1902(r)(5) of the Social Security Act, and 42 CFR 447	7. FEDERAL BUDGET IMPACT a. FFY 04/01/20-09/30/20 \$ 7,500,000.00 b. FFY 10/01/20-09/30/21 \$ 15,000,000.00	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	PAGE NUMBER OF THE SUPERSEDED PLAN SECTION     OR ATTACHMENT (If Applicable)	
Attachment: 4.19-D Page(s): 47(aa)(5), 47(aa)(5.1), 47(aa)(6), 47(aa)(6.1), 47(aa)(6.2), 47(aa)(7), 47(aa)(7.1), 47(aa)(8), 47(aa)(8.1), 47(aa)(9), 47(aa)(9.1), 47(aa)(10), 47(aa)(10.1)  47(aa)(4)	Attachment: 4.19-D Page(s): 47(aa)(5), 47(aa)(6), 47(aa)(7), 47(aa)(8), 47 (aa)(9), 47(aa)(10) 47(aa)(4)	
10. SUBJECT OF AMENDMENT CINERGY (FMAP=50%)		
11. 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	
1	16. RETURN TO  New York State Department of Health	
12 TVDED NAME	Division of Finance and Rate Setting 99 Washington Ave – One Commerce Plaza	
44 777 5	uite 1432 bany, NY 12210	
15. DATE SUBMITTED June 30, 2020		
FOR REGIONAL OF	FICE USE ONLY	
17. DATE RECEIVED  June 30,2020	18. DATE APPROVED 8/28/20	
PLAN APPROVED - ON		
19. EFFECTIVE DATE OF APPROVED MATERIAL  April 1, 2020	20. SIGNATURE OF REGIONAL OFFICIAL	
21. TYPED NAME Karen Shields	22. TITLE Acting Director, FMG	
23. REMARKS  State requested pen and ink change to Box 1 to 20-0029 and pen and ink changes to Boxes 8 and 9 to incl		

# New York 47(aa)(4)

## Temporary Rate Adjustments for Mergers, Acquisitions, Consolidations, Restructurings, and Closures – Nursing Homes

A temporary rate adjustment will be provided to eligible residential health care providers that [are] <u>may be</u> subject to or impacted by the closure, merger, and acquisition, consolidation or restructuring of a health care provider. The rate adjustment is intended to:

- · Protect or enhance access to care;
- Protect or enhance quality of care; or
- Improve the cost effectiveness.

Eligible residential health care providers, the amount of the temporary rate adjustment, and the duration of each rate adjustment period shall be listed in the table which follows. The total adjustment amount for each period shown below will be paid quarterly during each period in equal installments. The temporary payment made under this section will be an add-on to services payments made under this Attachment to such facilities during the quarter.

To remain eligible, providers must submit benchmarks and goals acceptable to the Commissioner and must submit periodic reports, as requested by the Commissioner, concerning the achievement of such benchmarks and goals. Failure to achieve satisfactory progress in accomplishing such benchmarks and goals will result in termination of the provider's temporary rate adjustment prior to the end of the specified timeframe. Once a provider's temporary rate adjustment ends, the provider will be reimbursed in accordance with the otherwise applicable rate-setting methodology as set forth in this Attachment.

Temporary rate adjustments have been approved for the following providers in the amounts and for the effective periods listed.

#### **Nursing Homes:**

Gross Medicaid Rate Adjustment	Rate Period Effective
\$6,694	01/01/2014 - 03/31/2014
\$723,872	04/01/2014 - 03/31/2015
\$918,5 <del>44</del>	06/16/2016 - 03/31/2017
\$2,273,884	01/01/2014 - 03/31/2014
\$2,359,369	04/01/2014 - 03/31/2015
\$821,793	04/01/2015 - 03/31/2016
\$1,274,864	06/16/2016 - 03/31/2017
\$225,680	01/01/2014 - 03/31/2014
\$1,369,690	04/01/2014 - 03/31/2015
\$1,049,423	06/16/2016 - 03/31/2017
	\$6,694 \$723,872 \$918,544 \$2,273,884 \$2,359,369 \$821,793 \$1,274,864 \$225,680 \$1,369,690

<sup>\*</sup>Denotes provider is part of CINERGY Collaborative.

TN	#20-00	29-MA	Approval Date	8/28/20
Supersed	les TN	#16-0027	Effective Date	April 1, 2020

<u>Provider Name</u>	Gross Medicaid Rate Adjustment	Rate Period Effective
	\$1,430,938	01/01/2015 - 03/31/2015
Amsterdam Nursing Home Corp	<u>\$1,450,213</u>	<u>04/01/2015 - 03/31/2016</u>
(Amsterdam House)*	<u>\$1,447,006</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$847,377</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$847,377</u>	<u>04/01/2021 - 03/31/2022</u>
	<u>\$935,000</u>	<u>10/01/2018 - 03/31/2019</u>
Baptist Nursing and Rehabilitation	<u>\$910,000</u>	<u>04/01/2019 - 03/31/2020</u>
	<u>\$347,500</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$2,460,249</u>	<u>01/01/2015 - 03/31/2015</u>
Beth Abraham Health Services*	<u>\$2,493,389</u>	<u>04/01/2015 - 03/31/2016</u>
	<u>\$2,487,874</u>	<u>04/01/2016 – 03/31/2017</u>
	<u>\$788,294</u>	<u>01/01/2015 - 03/31/2015</u>
	<u>\$798,912</u>	<u>04/01/2015 – 03/31/2016</u>
Bronx-Lebanon Special Care Center*	<u>\$797,146</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$521,445</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$521,445</u>	<u>04/01/2021 - 03/31/2022</u>

<sup>\*</sup>Denotes provider is part of CINERGY Collaborative.

TN <u>#20-0029-MA</u>	Approval Date
Supersedes TN #18-0062	Effective Date April 1, 2020

## New York 47(aa)(5.1)

<u>Provider Name</u>	Gross Medicaid Rate Adjustment	Rate Period Effective
	\$702,169	01/01/2015 - 03/31/2015
Due alsk on Huite of Matha diet Channels	\$707,212	04/01/2015 - 03/31/2016
Brooklyn United Methodist Church	\$706,273	04/01/2016 - 03/31/2017
Home*	\$384,919	04/01/2020 - 03/31/2021
	\$384,919	04/01/2021 - 03/31/2022
	\$970,765	01/01/2015 - 03/31/2015
Buena Vida Continuing Care & Rehab	\$983,841	04/01/2015 - 03/31/2016
Ctr*	\$981,665	04/01/2016 - 03/31/2017
	\$642,147	04/01/2020 - 03/31/2021
	\$642,147	04/01/2021 - 03/31/2022
	\$1,130,860	01/01/2015 - 03/31/2015
Cabrini Center for Nursing*	\$1,146,093	04/01/2015 - 03/31/2016
	\$1,143,558	04/01/2016 - 03/31/2017
	\$1,084,18 <u>5</u>	01/01/2015 - 03/31/2015
Coursel Dishusoud Haalth cours and	\$1,098,790	04/01/2015 - 03/31/2016
Carmel Richmond Healthcare and	\$1,096,359	04/01/2016 - 03/31/2017
Rehabilitation Center*	<u>\$632,161</u>	<u>04/01/2020 - 03/31/2021</u>
	\$632,161	04/01/2021 - 03/31/2022
	<u>\$1,179,939</u>	01/01/2015 - 03/31/2015
	<u>\$1,195,833</u>	<u>04/01/2015 - 03/31/2016</u>
Center For Nursing & Rehabilitation	<u>\$1,193,189</u>	04/01/2016 - 03/31/2017
Inc*	\$746,693	04/01/2020 - 03/31/2021
	<u>\$746,693</u>	04/01/2021 - 03/31/2022
	<u>\$771,403</u>	<u>01/01/2015 - 03/31/2015</u>
	<u>\$781,794</u>	04/01/2015 - 03/31/2016
Chapin Home for the Aging*	<u>\$780,065</u>	<u>04/01/2016 – 03/31/2017</u>
	<u>\$487,868</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$487,868</u>	04/01/2021 - 03/31/2022

<sup>\*</sup>Denotes provider is part of CINERGY Collaborative.

TN <u>#20-0029-MA</u>	Approval Date
Supersedes TN #NEW	Effective Date April 1, 2020

#### **Nursing Homes (Continued):**

<u>Provider Name</u>	Gross Medicaid Rate Adjustment	Rate Period Effective
Charles T. Sitrin Health Care Center	\$2,000,000	<u>01/01/2015 - 03/31/2015</u>
Inc.	<u>\$591,984</u>	<u>06/16/2016 – 03/31/2017</u>
	<u>\$25,817</u>	<u>04/01/2017 - 03/31/2018</u>
Cobble Hill Health Center*	<u>\$400,000</u>	<u>04/01/2020 – 03/31/2021</u>
	<u>\$400,000</u>	<u>04/01/2021 – 03/31/2022</u>
	<u>\$2,011,962</u>	<u>10/01/2018 – 03/31/2019</u>
Concord Nursing Home*	<u>\$2,011,962</u>	<u>04/01/2019 – 03/31/2020</u>
	<u>\$250,000</u>	<u>04/01/2020 – 03/31/2021</u>
	<u>\$250,000</u>	<u>04/01/2021 – 03/31/2022</u>
	<u>\$645,000</u>	<u>01/01/2014 – 03/31/2014</u>
Crouse Community Center	<u>\$710,000</u>	<u>04/01/2014 – 03/31/2015</u>
	<u>\$65,000</u>	<u>04/01/2015 - 03/31/2016</u>
	<u>\$1,463,808</u>	<u>01/01/2015 - 03/31/2015</u>
Eger Health Care and Rehabilitation	<u>\$1,483,526</u>	<u>04/01/2015 – 03/31/2016</u>
Center*	<u>\$1,480,245</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$968,289</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$968,289</u>	<u>04/01/2021 - 03/31/2022</u>

<sup>\*</sup>Denotes provider is part of CINERGY Collaborative.

TN <u>#20-0029-MA</u> Supersedes TN <u>#18-0062</u> Approval Date 8/28/20
Effective Date April 1, 2020

#### New York 47(aa)(6.1)

Provider Name	Gross Medicaid Rate Adjustment	Rate Period Effective
	\$2,434,828	04/01/2018 - 03/31/2019
Elderwood at North Creek	\$1,129,788	04/01/2019 - 03/31/2019
<u>Liderwood de Nordr Creek</u>	\$ 435,384	04/01/2020 - 03/31/2021
	<u> </u>	01/01/2020 03/31/2021
Elizabeth Seton Pediatric Center*	\$927,714	01/01/2015 - 03/31/2015
	\$940,211	04/01/2015 - 03/31/2016
	\$938,131	04/01/2016 - 03/31/2017
	\$613,670	04/01/2020 - 03/31/2021
	\$613,670	04/01/2021 - 03/31/2022
	122722	
	\$3,029,944	01/01/2015 - 03/31/2015
	\$1,043,818	04/01/2015 - 03/31/2016
	\$1,341,809	06/16/2016 - 03/31/2017
Famaliff Namaina Hama Ca Ina *	\$1,041,509	10/01/2016 - 03/31/2017
Ferncliff Nursing Home Co Inc.*	\$ 684,373	04/01/2017 - 03/31/2018
	\$ 18,529	04/01/2018 - 03/31/2019
	<u>\$681,294</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$681,294</u>	04/01/2021 - 03/31/2022
Field Home – Holy Comforter	<u>\$534,500</u>	<u>04/01/2012 - 03/31/2013</u>
Tield Horne - Hory Corniorter	<u>\$534,500</u>	<u>04/01/2013 - 03/31/2014</u>
Good Samaritan Nursing Home*	<u>\$371,698</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$371,698</u>	<u>04/01/2021 - 03/31/2022</u>
	<u>\$1,778,009</u>	<u>01/01/2015 – 03/31/2015</u>
Gurwin Jewish Nursing and	<u>\$1,801,960</u>	<u>04/01/2015 – 03/31/2016</u>
Rehabilitation Center*	<u>\$1,797,975</u>	<u>04/01/2016 – 03/31/2017</u>
Terrapilitation center	<u>\$1,110,754</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$1,110,754</u>	04/01/2021 - 03/31/2022
Hebrew Home for the Aged at	<u>\$1,875,731</u>	<u>04/01/2020 – 03/31/2021</u>
<u>Riverdale*</u>	<u>\$1,875,731</u>	<u>04/01/2021 – 03/31/2022</u>

<sup>\*</sup>Denotes provider is part of CINERGY Collaborative.

	ersedes TN	NEW	Effective Date	April 1, 2020	_
ΓN	#20-00	)29-MA	Approval Date	8/28/20	

#### New York 47(aa)(6.2)

#### **Nursing Homes (Continued):**

<u>Provider Name</u>	<u>Gross Medicaid Rate</u> <u>Adjustment</u>	Rate Period Effective
Heritage Commons Residential Health	<u>\$976,816</u>	<u>01/01/2014 – 03/31/2014</u>
Care	<u>\$834,744</u>	<u>04/01/2014 - 03/31/2015</u>
Care	<u>\$1,055,223</u>	<u>06/16/2016 – 03/31/2017</u>
	<u>\$2,902,269</u>	<u>01/01/2015 - 03/31/2015</u>
	<u>\$2,941,364</u>	<u>04/01/2015 – 03/31/2016</u>
<u>Isabella Geriatric Center Inc*</u>	<u>\$2,934,859</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$1,633,648</u>	<u>04/01/2020 - 03/31/2020</u>
	<u>\$1,633,648</u>	<u>04/01/2021 - 03/31/2022</u>
	<u>\$903,195</u>	<u>01/01/2015 - 03/31/2015</u>
Island Nursing and Rehab Center*	<u>\$909,966</u>	<u>04/01/2015 - 03/31/2016</u>
	<u>\$908,716</u>	04/01/2016 - 03/31/2017
	<u>\$495,250</u>	<u>04/01/2020 - 03/31/2021</u>
	\$495,250	04/01/2021 - 03/31/2022

<sup>\*</sup>Denotes provider is part of CINERGY Collaborative.

TN <u>#20-0029-MA</u> Approval Date <u>8/28/20</u>
Supersedes TN <u>NEW</u> Effective Date <u>April 1, 2020</u>

#### New York 47(aa)(7)

<u>Provider Name</u>	Gross Medicaid Rate Adjustment	Rate Period Effective
<u>Island Nursing and Rehab</u>	<u>\$3,375,000</u>	<u>12/13/2019 - 03/31/2020</u>
	<u>\$4,200,000</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$4,275,000</u>	<u>04/01/2021 - 03/31/2022</u>
Jamaica Hospital Nursing Home Co	<u>\$764,892</u>	<u>01/01/2015 - 03/31/2015</u>
Inc*	<u>\$775,195</u>	<u>04/01/2015 - 03/31/2016</u>
	<u>\$773,481</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$505,965</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$505,965</u>	04/01/2021 - 03/31/2022
Jefferson's Ferry*	<u>\$324,023</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$324,023</u>	<u>04/01/2021 – 03/31/2022</u>
Jewish Home Lifecare Henry and	<u>\$2,939,255</u>	01/01/2015 - 03/31/2015
Jeanette Weinberg Campus Bronx*	<u>\$2,978,848</u>	<u>04/01/2015 - 03/31/2016</u>
	<u>\$2,972,260</u>	<u>04/01/2016 - 03/31/2017</u>
Jewish Home LifeCare Manhattan*	<u>\$1,947,662</u>	01/01/2015 - 03/31/2015
	<u>\$1,973,898</u>	<u>04/01/2015 - 03/31/2016</u>
	\$1,969,532	04/01/2016 - 03/31/2017

<sup>\*</sup>Denotes provider is part of CINERGY Collaborative.

TN <u>#20-0029-MA</u>		Approval Date <u>8/28/20</u>	
Supersedes TN	#19-0055	Effective Date	April 1, 2020

#### New York 47(aa)(7.1)

<u>Provider Name</u>	<u>Gross Medicaid Rate</u> <u>Adjustment</u>	Rate Period Effective
Jawish Hama LifeCara Sarah	<u>\$1,169,410</u>	<u>01/01/2015 - 03/31/2015</u>
Jewish Home LifeCare Sarah Neuman Center*	\$1,185,162	04/01/2015 - 03/31/2016
Neuman Center	\$1,182,541	<u>04/01/2016 – 03/31/2017</u>
Lutheran Augustana Center for	<u>\$1,016,961</u>	<u>01/01/2015 - 03/31/2015</u>
<u>Lutheran Augustana Center for</u> Extended Care & Rehab*	<u>\$1,030,660</u>	<u>04/01/2015 - 03/31/2016</u>
Exterided Care & Reliab	<u>\$1,028,381</u>	<u>04/01/2016 – 03/31/2017</u>
	<u>\$700,877</u>	01/01/2015 - 03/31/2015
Margaret Tietz Center For Nursing	<u>\$710,318</u>	<u>04/01/2015 – 03/31/2016</u>
Care Inc*	<u>\$708,747</u>	04/01/2016 - 03/31/2017
	<u>\$463,620</u>	<u>04/01/2020 – 03/31/2021</u>
	<u>\$463,620</u>	<u>04/01/2021 – 03/31/2022</u>
	1==	
	\$1,453,160	01/01/2015 - 03/31/2015
Mary Manning Walsh Nursing	\$1,472,735	04/01/2015 - 03-31-2016
Home Co Inc*	\$1,469,478	04/01/2016 - 03-31-2017
	\$861,601	<u>04/01/2020 - 03-31-2021</u>
	<u>\$861,601</u>	<u>04/01/2021 – 03-31-2022</u>
	#1 210 0F2	01/01/2015 02/21/2015
Manarah Hama And Haspital For	\$1,210,053	<u>01/01/2015 - 03/31/2015</u>
Menorah Home And Hospital For Rehabilitation and Nursing*	\$1,226,353 \$1,223,641	<u>04/01/2015 - 03/31/2016</u>
Reliabilitation and Nursing	\$1,223,641 \$200,433	04/01/2016 - 03/31/2017 04/01/2020 - 03/31/2021
	\$800,433 \$800,433	04/01/2020 = 03/31/2021 04/01/2021 = 03/31/2022
	\$800, <del>1</del> 33	<u>04/01/2021 = 03/31/2022</u>
	\$441,177	01/01/2015 - 03/31/2015
	\$447,120	04/01/2015 - 03/31/2016
Methodist Home for Nursing and	\$446,131	04/01/2016 - 03/31/2017
Rehabilitation*	\$291,832	04/01/2020 - 03/31/2021
	\$291,832	04/01/2021 - 03/31/2022
	<del>4===/===</del>	

<sup>\*</sup>Denotes provider is part of CINERGY Collaborative.

TN #20-0029-MA		Approval Date _	8/28/20
Company de a TN	#NIF14/		
Supersedes TN	#NEW	Effective Date	Abril 1, 2020

#### New York 47(aa)(8)

<u>Provider Name</u>	Gross Medicaid Rate Adjustment	Rate Period Effective
	\$717,376	01/01/2015 - 03/31/2015
New York Congregational Nursing	\$727,040	04/01/2015 - 03/31/2016
Center Inc*	\$725,432	04/01/2016 - 03/31/2017
	1	
	\$5,597,952	04/01/2012 - 03/31/2013
	\$3,885,888	04/01/2013 - 12/31/2013
Northeast Center for Special Care	\$5,312,562	01/01/2014 - 03/31/2014
	\$5,027,984	04/01/2014 - 03/31/2015
	\$815,934	04/01/2015 - 03/31/2016
	<u>\$977,614</u>	<u>01/01/2015 - 03/31/2015</u>
Palisade Nursing Home Company Inc*	<u>\$990,783</u>	<u>04/01/2015 - 03/31/2016</u>
	<u>\$988,592</u>	<u>04/01/2016 - 03/31/2017</u>
	<u>\$1,929,819</u>	<u>01/01/2015 - 03/31/2015</u>
Parker Jawish Institute for Health	<u>\$1,955,814</u>	<u>04/01/2015 - 03/31/2016</u>
Parker Jewish Institute for Health Care and Rehabilitation*	<u>\$1,951,489</u>	<u>04/01/2016 – 03/31/2017</u>
Care and Renabilitation	<u>\$1,276,548</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$1,276,548</u>	<u>04/01/2021 - 03/31/2022</u>

<sup>\*</sup>Denotes provider is part of CINERGY Collaborative.

TN #20-002	29-MA	Approval Date	8/28/20
Supersedes TN	#15-0030	Effective Date	April 1, 2020

#### New York 47(aa)(8.1)

<u>Provider Name</u>	Gross Medicaid Rate Adjustment	Rate Period Effective
	<u>\$693,647</u>	<u>01/01/2015 – 03/31/2015</u>
	<u>\$702,990</u>	<u>04/01/2015 – 03/31/2016</u>
Providence Rest*	<u>\$701,435</u>	<u>04/01/2016 – 03/31/2017</u>
	<u>\$458,838</u>	<u>04/01/2020 – 03/31/2021</u>
	<u>\$458,838</u>	<u>04/01/2021 – 03/31/2022</u>
	<u>\$387,029</u>	<u>01/01/2015 – 03/31/2015</u>
Debakah Debahilitation 9	<u>\$392,242</u>	<u>04/01/2015 - 03/31/2016</u>
Rebekah Rehabilitation & Extended Care Center Inc*	<u>\$510,122</u>	<u>04/01/2016 – 03/31/2017</u>
Extended Care Center The	<u>\$282,288</u>	04/01/2020 - 03/31/2021
	<u>\$282,288</u>	04/01/2021 - 03/31/2022
	\$1,858,017	01/01/2015 - 03/31/2015
Riverdale Nursing Home*	<u>\$1,883,045</u>	<u>04/01/2015 - 03/31/2016</u>
	\$1,878,881	<u>04/01/2016 – 03/31/2017</u>
	<u>\$2,234,772</u>	01/01/2015 - 03/31/2015
	<u>\$2,264,875</u>	<u>04/01/2015 - 03/31/2016</u>
Rutland Nursing Home Co Inc.*	<u>\$2,259,866</u>	<u>04/01/2016 – 03/31/2017</u>
	<u>\$1,289,994</u>	<u>04/01/2020 – 03/31/2021</u>
	<u>\$1,289,994</u>	04/01/2021 - 03/31/2022
Saints Joachim & Anne Nursing	<u>\$644,472</u>	01/01/2015 - 03/31/2015
	<u>\$653,154</u>	04/01/2015 - 03/31/2016
	<u>\$651,709</u>	04/01/2016 - 03/31/2017
and Rehabilitation Center*	<u>\$426,310</u>	04/01/2020 - 03/31/2021
	<u>\$426,310</u>	04/01/2021 - 03/31/2022

<sup>\*</sup>Denotes provider is part of CINERGY Collaborative.

TN <u>#20-</u>	0029-MA	Approval Date _	8/28/20
Supersedes TN	I #NEW	Effective Date	April 1. 2020

## New York 47(aa)(9)

<u>Provider Name</u>	Gross Medicaid Rate Adjustment	Rate Period Effective
	<u>\$4,500,000</u>	<u>02/01/2014 – 03/31/2014</u>
Comprison Koon Nursing Home Inc	<u>\$4,500,000</u>	<u>04/01/2014 - 03/31/2015</u>
Samaritan Keep Nursing Home Inc.	<u>\$6,754,384</u>	<u>01/01/2017 - 03/31/2017</u>
	<u>\$6,716,384</u>	<u>04/01/2017 - 03/31/2018</u>
Sarah Neuman Center for Healthcare*	<u>\$773,173</u>	04/01/2020 - 03/31/2021
	\$773,173	04/01/2021 - 03/31/2022
	\$441,290	01/01/2015 - 03/31/2015
	\$447,234	04/01/2015 - 03/31/2016
Schaffer Extended Care System*	\$446,245	04/01/2016 - 03/31/2017
	\$291,907	04/01/2020 - 03/31/2021
	\$291,907	04/01/2021 - 03/31/2022
	\$1,421,550	01/01/2015 - 03/31/2015
Schervier Nursing Care Center*	\$1,440,698	04/01/2015 - 03/31/2016
	\$1,437,512	04/01/2016 - 03/31/2017
Calamana ah an Camban fan	\$539,168	01/01/2015 - 03/31/2015
Schnurmacher Center for	\$546,431	04/01/2015 - 03/31/2016
Rehabilitation and Nursing*	\$545,222	04/01/2016 - 03/31/2017

<sup>\*</sup>Denotes provider is part of CINERGY Collaborative.

TN <u>#20-0029-MA</u>	Approval Date	8/28/20
Supersedes TN #17-0023	Effective Date	April 1, 2020

## New York 47(aa)(9.1)

<u>Provider Name</u>	<u>Gross Medicaid Rate</u> <u>Adjustment</u>	Rate Period Effective
	<u>\$1,852,978</u>	01/01/2015 - 03/31/2015
Schulman and Schachne	<u>\$1,877,938</u>	04/01/2015 - 03/31/2016
Institute for Nursing and	\$1,873,785	04/01/2016 - 03/31/2017
Rehabilitation*	\$1,225,719	04/01/2020 - 03/31/2021
	\$1,225,719	04/01/2021 - 03/31/2022
	\$1,293,304	01/01/2015 - 03/31/2015
	\$1,310,725	04/01/2015 - 03/31/2016
Silvercrest*	\$1,307,827	04/01/2016 - 03/31/2017
	<u>\$833,785</u>	04/01/2020 - 03/31/2021
	\$833,785	04/01/2021 - 03/31/2022
Ct Cabrini Numaina Hamak	<u>\$748,048</u>	04/01/2020 - 03/31/2021
St Cabrini Nursing Home*	\$748,048	04/01/2021 - 03/31/2022
	\$400,000	04/01/2020 - 03/31/2021
St Johnland Nursing Center*	\$400,000	04/01/2021 - 03/31/2022
	<u>\$1,777,136</u>	01/01/2015 - 03/31/2015
Ch. Mara /a I la anita l farr	\$1,795,679	04/01/2015 - 03/31/2016
St. Mary's Hospital for	\$1,792,470	04/01/2016 - 03/31/2017
Children Inc.*	\$1,053,645	04/01/2020 - 03/31/2021
	\$1,053,645	04/01/2021 - 03/31/2022
St Vincent Depaul Residence*	<u>\$417,641</u>	<u>01/01/2015 - 03/31/2015</u>
	<u>\$423,266</u>	04/01/2015 - 03/31/2016
	\$422,330	04/01/2016 - 03/31/2017
	\$276,263	04/01/2020 - 03/31/2021
	\$276,263	04/01/2021 - 03/31/2022

<sup>\*</sup>Denotes provider is part of CINERGY Collaborative.

TN <u>#20-0029-MA</u>	Approval Date 8/28/20
Supersedes TN #New	Effective Date April 1, 2020

### New York 47(aa)(10)

	Gross Medicaid Rate	D . D . LEG .:
Provider Name	Adjustment	Rate Period Effective
	\$3,130,256	01/01/2015 - 03/31/2015
	\$2,665,687	04/01/2015 - 03/31/2016
Terence Cardinal Cooke Health Care	\$1,013,227	06/16/2016 - 03/31/2017
Ctr*	\$2,659,791	10/01/2016 - 03/31/2017
	<u>\$1,449,586</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$1,449,586</u>	<u>04/01/2021 – 03/31/2022</u>
The Jewish Home Hospital*	<u>\$1,248,092</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$1,248,092</u>	<u>04/01/2021 - 03/31/2022</u>
The Wartburg Home*	\$1,020,6 <del>44</del>	01/01/2015 - 03/31/2015
	\$1,034,392	04/01/2015 - 03/31/2016
	\$1,032,104	04/01/2016 - 03/31/2017
	<u>\$671,170</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$671,170</u>	<u>04/01/2021 – 03/31/2022</u>
	\$ 938,910	10/05/2017 - 03/31/2018
Trustees Eastern Star Hall and Home	\$1,530,028	04/01/2018 - 03/31/2019
Trustees Eastern Star Flair and Florine	\$ 760,607	04/01/2019 - 03/31/2020
	\$ 754,650	04/01/2020 - 09/30/2020
	\$1,152,635	01/01/2015 - 03/31/2015
	\$1,168,162	04/01/2015 - 03/31/2016
United Hebrew Geriatric Center*	\$1,165,578	04/01/2016 - 03/31/2017
	<u>\$762,452</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$762,452</u>	<u>04/01/2021 – 03/31/2022</u>
[Victoria Home	\$500,000	01/01/2015 - 03/31/2015
	\$1,132,647	01/01/2015 - 03/31/2015
VillageCare Rehabilitation and Nursing	\$1,142,631	04/01/2015 - 03/31/2016
Center*	\$1,140,849	04/01/2016 – 03/31/2017]

<sup>\*</sup>Denotes provider is part of CINERGY Collaborative.

TN	#20-0029-MA	Approval Date	8/28/20
Supersedes	TN <u>#17-0064</u>	Effective Date	April 1, 2020

#### New York 47(aa)(10.1)

<u>Provider Name</u>	<u>Gross Medicaid Rate</u> <u>Adjustment</u>	Rate Period Effective
<u>Victoria Home</u>	<u>\$500,000</u>	<u>01/01/2015 - 03/31/2015</u>
	<u>\$1,132,647</u>	<u>01/01/2015 - 03/31/2015</u>
Villaga Caya Dahahilitatian and	<u>\$1,142,631</u>	04/01/2015 - 03/31/2016
VillageCare Rehabilitation and Nursing Center*	<u>\$1,140,849</u>	<u>04/01/2016 - 03/31/2017</u>
Nuising Center	<u>\$621,763</u>	<u>04/01/2020 - 03/31/2021</u>
	<u>\$621,763</u>	04/01/2021 - 03/31/2022

<sup>\*</sup>Denotes provider is part of CINERGY Collaborative.

TN #20-0029-MA	Approval Date 8/28/20
Supersedes TN #New	Effective Date April 1, 2020