### **Table of Contents**

# **State/Territory Name: New York**

## State Plan Amendment (SPA) #: 24-0027

This file contains the following documents in the order listed:

Approval Letter
 CMS 179 Form/Summary Form (with 179-like data)
 Approved SPA Pages

### **DEPARTMENT OF HEALTH & HUMAN SERVICES**

Centers for Medicare & Medicaid Services 7500 Security Boulevard, Mail Stop S3-14-28 Baltimore, Maryland 21244-1850



#### **Financial Management Group**

July 9, 2025

Amir Bassiri Medicaid Director New York State Department of Health 99 Washington Ave – One Commerce Plaza Suite 1432 Albany, NY 12210

RE: TN 24-0027

Dear Medicaid Director:

The Centers for Medicare & Medicaid Services (CMS) has reviewed the proposed New York state plan amendment (SPA) to Attachment 4.19-D NY 24-0027, which was submitted to CMS on March 29, 2024. This plan amendment updates the minimum wage for all regions of the State to account for increased labor costs resulting from statutorily required increases in the New York State minimum wage.

We reviewed your SPA submission for compliance with statutory requirements, including in sections 1902(a)(2), 1902(a)(13), 1902(a)(30), 1903 as it relates to the identification of an adequate source for the non-federal share of expenditures under the plan, as required by 1902(a)(2) of the Social Security Act and the applicable implementing Federal regulations.

Based upon the information provided by the state, we have approved the amendment with an effective date of January 1, 2024. We are enclosing the approved CMS-179 and a copy of the new state plan pages.

If you have any additional questions or need further assistance, please contact Kristina Mack at 617-565-1225 or via email at Kristina.Mack-Webb@cms.hhs.gov.

Sincerely,

Rory Howe

Director Financial Management Group

Enclosures

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES 5. FEDERAL STATUTE/REGULATION CITATION § 1905(a)(4)(A) Nursing Facility Services 7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 4.19-D Part I - Page: 110(d)(28.1)	$\frac{2}{2} \frac{4}{4} = 0 \frac{0}{2} \frac{2}{7} \frac{N}{1} \frac{1}{7}$		
9. SUBJECT OF AMENDMENT	-		
Nursing Home Minimum Wage 2024			
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	O OTHER, AS SPECIFIED:		
11. SIGNATURE STALE AGENCY OFFICIAL	5. RETURN TO lew York State Department of Health		
12. TYPED NAME Amir Bassiri	ivision of Finance and Rate Setting 9 Washington Ave – One Commerce Plaza		
13. TITLE Medicaid Director	suite 1432 Ibany, NY 12210		
14. DATE SUBMITTED March 29, 2024			
FOR CMS USE ONLY			
16. DATE RECEIVED March 29, 2024	17. DATE APPROVED July 9, 2025		
PLAN APPROVED - O			
18. EFFECTIVE DATE OF APPROVED MATERIAL January 1, 2024	19 SIGNATURE OF APPROVING OFFICIAL		
20. TYPED NAME OF APPROVING OFFICIAL	21. TITLE OF APPROVING OFFICIAL		
Rory Howe	Director, Financial Management Group		

22. REMARKS

### New York 110(d)(28.1)

#### 1905(a)(4)(A) Nursing Facility Services

**Adjustment for Minimum Wage Increases.** Effective January 1, 2024, and every January 1 thereafter until the minimum wage reaches the state statutorily described per hour wage as shown below, a minimum wage add-on will be developed and applied to the specialty and non-specialty Nursing Home rate. The methodology remains consistent with the minimum wage methodology outlined in SPA.

Minimum Wage Region	January 1, 2024	January 1, 2025	January 1, 2026
New York City	\$16.00	\$16.50	\$17.00
Nassau, Suffolk & Westchester	\$16.00	\$16.50	\$17.00
Remainder of State	\$15.00	<b>\$15.50</b>	\$16.00

For January 1, 2027, and each January 1 thereafter, the adjusted minimum wage rate will be determined by increasing the then current year's minimum wage rate by the rate of change in the average of the three most recent consecutive twelve-month periods between the first of August and the thirty-first of July, each over their preceding twelve-month periods published by the United States department of labor nonseasonally adjusted consumer price index or northeast region urban wage earners and clerical workers (CPI-W) or any successor index as calculated by the United States department of labor, plus applicable fringe, with the result rounded to the nearest five cents.

However, effective January 1, 2027, no increase in minimum wage will be effectuated if any of the following conditions are met:

- Rate of change in the average of the most recent period of the first of August to the 31<sup>st</sup> of July
  over the preceding period of the 1<sup>st</sup> of August to the 31<sup>st</sup> of July published by the US Department of
  Labor non-seasonally adjusted consumer price index for the northeast region urban wage earners
  and clerical workers (CPI-W) or any successor index as calculated by the US Department of Labor is
  negative.
- 3 month moving average of the seasonally adjusted NYS unemployment rate as determined by the U-3 measure of labor underutilization for the most recent period ending 31<sup>st</sup> of July as calculated by the US Department of Labor rises by ½ percentage point or more relative to its low during the previous 12 months.
- Seasonally adjusted, total non-farm employment for NYS in July, calculated by the US Department
  of Labor, decreased from the seasonally adjusted total non-farm employment for NYS in July,
  calculated by the US Department of Labor decreased from the seasonally adjusted total non-farm
  employment for NYS in January.

Rates of payments to Nursing Home programs are available at:

https://www.health.ny.gov/facilities/long\_term\_care/reimbursement/nhr/

TN <u>#24-0027</u>	Approval Date July 9, 2025
Supersedes TN <u>NEW</u>	Effective Date <u>January 1, 2024</u>