



# Department of Health

**KATHY HOCHUL**  
Governor

**JAMES V. McDONALD, MD, MPH**  
Commissioner

**JOHANNE E. MORNE, MS**  
Executive Deputy Commissioner

November 24, 2025

Dear Colleague:

Pursuant to our tribal consultation policy, enclosed please find a summary of each proposed amendment to the New York State Plan. We encourage you to review the enclosed information and use the link below to also view the plan pages and Federal Public Notices for each proposal. Please provide any comments or request a personal meeting to discuss the proposed changes within two weeks of the date of this letter.

[https://www.health.ny.gov/regulations/state\\_plans/tribal/](https://www.health.ny.gov/regulations/state_plans/tribal/)

We appreciate the opportunity to share this information with you and if there are any comments or concerns, please feel free to contact Regina Deyette, Medicaid State Plan Coordinator, Office of Health Insurance Programs at 518-473-3658.

Sincerely,

/S/

Amir Bassiri  
Medicaid Director  
Office of Health Insurance Programs

Enclosures

cc: Sean Hightower  
US Dept. of Health and Human Services

Barbara Prehmus  
CMS Native American Contact

**SUMMARY**  
**SPA #25-0030**

This State Plan Amendment proposes to convert Certified Community Behavioral Health Clinics (CCBHC), a federal demonstration program set to expire on September 30, 2025, to Certified Community Behavioral Health Centers (CCBHC) Medicaid State Plan services, effective October 1, 2025.

DRAFT

New York  
3b-39

**1905(a)(13) Rehabilitative Services**

**Rehabilitative Services (42 CFR 440.130(d)): Certified Community Behavioral Health Center (CCBHC) Services**

The State provides coverage for this benefit as defined at 42 CFR 440.130(d) and in this section.

**Assurances**

The State assures that rehabilitative services do not include, and Federal Financial Participation is not available for any of the following in accordance with section 1905(a)(13) of the Act.

- a. educational, vocational and job training services;
- b. room and board;
- c. habilitation services;
- d. services to inmates in public institutions as defined in 42 CFR §435.1010;
- e. services to individuals residing in institutions for mental diseases as described in 42 CFR §435.1010;
- f. recreational and social activities; and
- g. services that must be covered elsewhere in the state Medicaid plan.

**Certified Community Behavioral Health Center Service Description**

Certified Community Behavioral Health Center (CCBHC) services are a comprehensive set of outpatient community based behavioral health services which include a range of coordinated integrated care including person-centered, trauma-informed, and recovery-oriented integrated mental health, substance use, and other addiction disorder services, as well as rehabilitative services that are developmentally appropriate for recipients across their lifespan. They also provide physical health screening and monitoring. Services may also be provided to the recipient's collaterals, including but not limited to the recipient's family and significant others, for the benefit of the recipient. CCBHC services incorporate evidence-based or best practices to meet the needs of individuals, children/youth and family/caregivers. Except as otherwise noted, all services are for both children and adults. CCBHC services may be provided in various settings including but not limited to provider offices, homes, schools, or other places in the community consistent with guidance issued by the New York State Office of Mental Health (OMH) and the New York State Office of Addiction Services and Supports (OASAS), hereafter referred to as the "Offices." CCBHCs must be licensed, certified, designated, or approved to provide the CCBHC services referenced in the definition by the Offices or their designees.

CCBHCs are required to develop community and regional partnerships, based on the social system resources available, the population served, and the needs and preferences of people receiving services, to coordinate care for individuals receiving CCBHC services. CCBHCs are also required to enter into arrangements with entities under the authority of the Indian Health Service, an Indian tribe, or tribal or urban Indian organization within their geographic service area to assist in and inform the provision of services to tribal members, consistent with state and federal criteria for CCBHC services.

TN #25-0030

Approval Date \_\_\_\_\_

Supersedes TN NEW

Effective Date October 1, 2025







New York  
3b-39 (iv)

**1905(a)(13) Rehabilitative Services**

**Rehabilitative Services (42 CFR 440.130(d)): Certified Community Behavioral Health Center (CCBHC) (continued)**

**Supervision for All CCBHC Staff and Qualified Peers:**

Initial assessments and screenings and treatment plans for CCBHC recipients must be developed and documented under the supervision of CCBHC Professional Staff. Supervision for CCBHC Staff and Qualified Peers will occur formally, through direct supervision and clinical consultation availability, and informally through regular organizational and recovery planning meetings.

For mental health services, experienced Certified Peer Specialists, credentialed Family Peer Advocates and Credentialed Youth Peer Advocates, under the direction of an LPHA will provide in-discipline supervision to Certified Peer Specialists, Credentialed Family Peer Advocates, and Credentialed Youth Peer Advocates.

For addiction treatment services, Certified Recovery Peer Advocates will be supervised by CCBHC Professional Staff.

CCBHC Professional Staff will be available at all times to respond to questions from CCBHC Staff and Qualified Peers and address any issues related to quality of care in the provision of any CCBHC service components.

**Service Components**

CCBHC Services include:

**Assessments/Screenings** –Initial, immediate needs, risk, psychiatric, addiction disorder including substance use, gambling disorder, or problem gambling, functional/rehabilitative assessments, and health screenings, health physicals, as well as gathering or updating information concerning the individual's mental and physical health history and status in order to determine the appropriate diagnosis(es), assess the individual's functional limitations, strengths and goals, and inform the treatment planning process.

Health screenings and health physicals assess the need for referral to additional physical health services. Assessments may include interactions between the CCBHC Professional Staff and an individual's collateral supports to obtain information necessary for the benefit of the individual.

**Practitioners:** Initial, immediate needs, and risk assessments are provided by CCBHC Professional Staff or CCBHC Staff, consistent with state scope of practice laws, under the supervision of CCBHC Professional Staff. Functional/rehabilitative assessments are provided by CCBHC Professional Staff and CCBHC Staff under the supervision of CCBHC Professional Staff. Psychiatric assessments are provided by a Physician, Nurse Practitioner, Psychiatrist, Psychiatric Nurse Practitioner, or Physician's Assistant.

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New York  
3b-39

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# MISCELLANEOUS NOTICES/HEARINGS

## Notice of Abandoned Property Received by the State Comptroller

Pursuant to provisions of the Abandoned Property Law and related laws, the Office of the State Comptroller receives unclaimed monies and other property deemed abandoned. A list of the names and last known addresses of the entitled owners of this abandoned property is maintained by the office in accordance with Section 1401 of the Abandoned Property Law. Interested parties may inquire if they appear on the Abandoned Property Listing by contacting the Office of Unclaimed Funds, Monday through Friday from 8:00 a.m. to 4:30 p.m., at:

1-800-221-9311  
or visit our web site at:  
[www.osc.state.ny.us](http://www.osc.state.ny.us)

Claims for abandoned property must be filed with the New York State Comptroller's Office of Unclaimed Funds as provided in Section 1406 of the Abandoned Property Law. For further information contact: Office of the State Comptroller, Office of Unclaimed Funds, 110 State St., Albany, NY 12236.

## PUBLIC NOTICE Department of Agriculture and Markets

In the Matter of Considering the Continuation of the New York State Cabbage Research and Development Program Pursuant to Unconsolidated Laws section 6266-z and Title One of the Official Compilation of Codes, Rules and Regulations of the State of New York Section 205.12

### NOTICE OF REFERENDUM

To: New York State Cabbage Growers:

PLEASE TAKE NOTICE OF A REFERENDUM to be conducted by the President of the Empire State Development Corporation of the State of New York, pursuant to Unconsolidated Laws section 6266-z and Title One of the Official Compilation of Codes, Rules and Regulations of the State of New York (1 NYCRR) section 205.12, on whether the New York State Cabbage Research and Development Program should be continued. The continuation of the Program is subject to the approval of not less than 50 percent of all New York State cabbage growers participating in the referendum.

Any person who, in 2024, produced or caused to be produced cabbage in the State of New York for any market is a grower entitled to vote in this referendum. Each grower is entitled to one vote.

*Copies of the New York State Cabbage Research and Development Program (1 NYCRR Part 205), which is the subject of this referendum, will be provided upon request to:* Jonathan Marks, Marketing Order Administrator, Department of Agriculture and Markets, 10B Airline Dr., Albany, NY 12235; [Jonathan.Marks@agriculture.ny.gov](mailto:Jonathan.Marks@agriculture.ny.gov)

## PUBLIC NOTICE Department of Health

Pursuant to 42 CFR Section 447.205, the Department of Health hereby gives public notice of the following:

The Department of Health proposes to amend the Title XIX (Medicaid) State Plan for non-institutional services consistent with the end of New York State's Certified Community Behavioral Health Clinic (CCBHC) demonstration on September 30, 2025. The following changes are proposed:

### Non-Institutional Services

Effective on or after October 1, 2025, existing providers participating in the CCBHC demonstration will continue delivering and being reimbursed for comprehensive behavioral health services beyond the Federal demonstration period. CCBHCs provide a comprehensive range of ambulatory mental health or addiction disorder, including substance use disorder, gambling disorder, and problem gambling services to individuals throughout New York State, including:

- Crisis mental health services including 24-hour mobile crisis teams, emergency crisis intervention and crisis stabilization,
  - Outpatient mental health and addiction services, including gambling disorder, problem gambling, and substance use disorder with ancillary withdrawal services,
  - Screening, assessment, and diagnosis including risk management,
  - Physical health screening and monitoring,
  - Case management,
  - Psychiatric rehabilitation services,
  - Peer support, counseling services, and family support services,
- and
- Services for members of the armed services and veterans.

This amendment will allow New York State to maintain the CCBHC program model by ensuring all services in the program model are covered benefits in the State Plan, and that the reimbursement methodology that allows the CCBHC provider to utilize a Prospective Payment System (PPS), which is a provider-specific cost-based service rate developed in accordance with Federal standards contained in the Protecting Access to Medicare Act of 2014 (H.R. 4302) for reimbursement for a range of identified state plan services, will also continue.

There is no additional estimated annual change to gross Medicaid expenditures as a result of converting the CCBHC program model from the federal demonstration to the Medicaid State Plan.

Effective on or after October 1, 2025, this amendment will revise the Quality Bonus Payment (QBP) methodology consistent with federal guidance issued in February 2024, expanding the reporting of quality measurement indicators, and establishing performance measure thresholds and payments under the program.

The estimated net aggregate increase in gross Medicaid expenditures attributable to the QBP in the budget, beginning in state fiscal year 2027, is estimated to be \$15.3 million.

The public is invited to review and comment on this proposed State Plan Amendment, a copy of which will be available for public review on the department's website at: [http://www.health.ny.gov/regulations/state\\_plans/status](http://www.health.ny.gov/regulations/state_plans/status). Individuals without Internet access may view the State Plan Amendments at any local (county) social services district.

For the New York City district, copies will be available at the following places:

New York County

250 Church Street  
New York, New York 10018

Queens County, Queens Center  
3220 Northern Boulevard  
Long Island City, New York 11101

Kings County, Fulton Center  
114 Willoughby Street  
Brooklyn, New York 11201

Bronx County, Tremont Center  
1916 Monterey Avenue  
Bronx, New York 10457

Richmond County, Richmond Center  
95 Central Avenue, St. George  
Staten Island, New York 10301

*For further information and to review and comment, please contact:*  
Department of Health, Division of Finance and Rate Setting, 99  
Washington Ave., One Commerce Plaza, Suite 1432, Albany, NY  
12210, [spa-inquiries@health.ny.gov](mailto:spa-inquiries@health.ny.gov)

## PUBLIC NOTICE

### Department of Health

Pursuant to 42 CFR Section 447.205, the Department of Health hereby gives public notice of the following:

The Department of Health proposes to amend the Title XIX (Medicaid) State Plan for non-institutional services to comply with SSL § 365-a(2)(i). The following changes are proposed:

#### Non-Institutional Services

Effective on or after May 1, 2025, portable radiology providers can transport radiology equipment and deliver radiology services in the setting where a home-bound individual is located, including a long-term care setting, residential setting, or private home or dwelling of a patient. Expansion of the program to home-bound individuals is a cost-effective option that also provides patients an alternative mode of receiving care.

Coverage requirements and regulations will be updated consistent with Federal Regulation (42 CFR Part 486 Subpart C - Conditions for Coverage: Portable X-Ray Services), which provide that portable radiology providers be either the employee of a supervising physician; or require the supervising physician to certify annually that they periodically check the procedural manuals and observe the operator's performance, that they have verified that equipment and personnel meet applicable Federal, State, and local licensure and registration requirements and that safe operating procedures are used.

The estimated net aggregate decrease in gross Medicaid expenditures attributable to this initiative contained in the budget for state fiscal year 2025-2026 is (\$1.6 million).

The public is invited to review and comment on this proposed State Plan Amendment, a copy of which will be available for public review on the Department's website at [http://www.health.ny.gov/regulations/state\\_plans/status](http://www.health.ny.gov/regulations/state_plans/status). Individuals without Internet access may view the State Plan Amendments at any local (county) social services district.

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*For further information and to review and comment, please contact:*  
Department of Health, Division of Finance and Rate Setting, 99  
Washington Ave., One Commerce Plaza, Suite 1432, Albany, NY  
12210, [spa-inquiries@health.ny.gov](mailto:spa-inquiries@health.ny.gov)

## PUBLIC NOTICE

### Department of Health

Pursuant to 42 CFR Section 447.205, the Department of Health hereby gives public notice of the following:

The Department of Health proposes to amend the Title XIX (Medicaid) State Plan for Long Term Care Services as authorized by § 2826 of New York Public Health Law. The following changes are proposed:

#### Long Term Care Services

Effective on or after May 1, 2025, temporary rate adjustments have been approved for services related to providers that are undergoing closure, merger, consolidation, acquisition or restructuring themselves or other health care providers. The temporary rate adjustments have been reviewed and approved for the following Nursing Home:

- Highpointe On Michigan Health Care Facility with payment amounts totaling up to \$40,001,679 for the period May 1, 2025, through June 30, 2025.

The estimated net aggregate increase in gross Medicaid expenditures attributable to this initiative contained in the budget for SFY 2025-2026 is \$40,001,679.

The public is invited to review and comment on this proposed State Plan Amendment, a copy of which will be available for public review on the Department's website at [http://www.health.ny.gov/regulations/state\\_plans/status](http://www.health.ny.gov/regulations/state_plans/status). Individuals without Internet access may view the State Plan Amendments at any local (county) social services district.

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Bronx, New York 10457

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95 Central Avenue, St. George  
Staten Island, New York 10301

*For further information and to review and comment, please contact:*  
Department of Health, Division of Finance and Rate Setting, 99

**Public Notice**  
**NYS Department of Health**

Pursuant to 42 CFR Section 447.205, the Department of Health hereby gives public notice of the following:

The Department of Health proposes to amend the Title XIX (Medicaid) State Plan for non-institutional services consistent with the end of New York State's Certified Community Behavioral Health Clinic (CCBHC) demonstration on September 30, 2025. The following changes are proposed:

**Non-Institutional Services**

The following is a clarification to the April 30, 2025, noticed provision to continue delivering CCBHC comprehensive behavioral health services beyond the federal demonstration period.

With clarification, the projected annual aggregate in gross Medicaid expenditures transitioning from federal demonstration authority to the Medicaid State Plan, as a result of this proposed amendment is \$403 million.

The public is invited to review and comment on this proposed State Plan Amendment, a copy of which will be available for public review on the Department's website at [http://www.health.ny.gov/regulations/state\\_plans/status](http://www.health.ny.gov/regulations/state_plans/status). Individuals without Internet access may view the State Plan Amendments at any local (county) social services district.

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