



KATHY HOCHUL
Governor

Department of Health

JAMES V. McDONALD, M.D., M.P.H.
Acting Commissioner

MEGAN E. BALDWIN
Acting Executive Deputy Commissioner

May 9, 2023

Dear Administrator:

**RE: Revised 2022 Initial Rates for:
Licensed Home Care Service Agencies (LHCSA – Personal Care) and
Consumer Directed Personal Care Assistance Program/ Fiscal Intermediary (CDPAP – FI)**

Effective May 8, 2023, the revised 2022 Medicaid rate sheets for LHCSA and CDPAP-FIs for the periods January 2022, April 2022 and October 2022 through December 31, 2022 are now available on the Health Commerce System (HCS).

These Medicaid Fee-for-Service rates were developed based on the data submitted in the 2020 Home Care Cost Reports and are all-inclusive. As noted in the May 2nd Webinar, the minimum wage increases are now being captured within the LHCSA and CDPAP-FI rates as a final add-on (Attachment A to this letter has the historical minimum wage information and Attachment B has copies of the revised January 2022 rate sheet templates).

In accordance with regulations, appeals for the 2022 rates must be submitted within 90 days. To appeal and/or certify your 2022 rates, log into the 2020 web-based Home Care Tool and click the rate certification tab to certify or file an adjusted cost report reflecting changes in either schedule 3, 4, 5 and 7 data. The corrections must be electronically certified by either the Operator or Chief Executive Officer of the Agency (Attachment C provides instructions on how to submit the rate certification and Adjusted Cost Report within the 2020 Tool). No certifications or appeals will be accepted from accountants or consultants. Any appeals and submission of adjusted cost reports must be completed within the 90 day appeal period. The deadline to file an appeal in the Tool is the end of business, **August 8, 2023**. The Tool can be found by clicking on the following link:

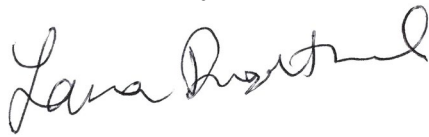
<https://desoto.certisphere.com/doh/HomeCareDashboard.html>

In an effort to support providers that either have minimal or no changes, providers may access the Tool and certify that they have no changes, or appeal within the first 30 days. The Department will draw down the first group of appeals and/or certifications after 30 days (**June 8, 2023**). These adjusted submissions will then be used to calculate rates. The rates will then go through the standard approval process before being loaded into eMedNY. Providers who haven't certified their initial rates within 30 days will have until the deadline of **August 8, 2023** to certify. If no appeals/adjustments to the 2020 Home Care Cost Report are made during the 90-day period, the rates that are currently posted on the HCS will take effect in eMedNY as calculated based on the original submission. Attachment D provides instructions on how to access the revised rate sheets on the HCS.

For those agencies that did not submit their 2020 Home Care Cost Report, the Department is not able to calculate a 2022 rate until the cost report(s) are submitted. Failure to comply with the reporting requirements of Title 10, Parts 86-1.2, 1.3, 1.6 and 1.7 may result in the implementation of penalties pursuant to Part 86-1.2(c) and Section 12-d of the Public Health Law.

If you have any questions regarding the information contained in this correspondence contact the Bureau of Nursing Home and Long Term Care Rate Setting email inboxes as follows: for CHHAs CHHA-Rates@health.ny.gov or LHCSAs and FIs PersonalCare-Rates@health.ny.gov.

Sincerely,

A handwritten signature in black ink, appearing to read "Laura Rosenthal". The signature is fluid and cursive, written in a professional style.

Laura Rosenthal, Director
Bureau of Nursing Home and
Long Term Care Rate Setting
Division of Finance and Rate Setting
Office of Health Insurance Programs

Enclosures:

- Attachment A – Historical Minimum Wage Information
- Attachment B – January 1, 2022 Rate Sheet Templates
- Attachment C – Home Care Cost Report Rate Certification
- Attachment D – Instructions Accessing the 2022 Initial Rates in the Health Commerce System

Attachment A – Historical Minimum Wage Information

Minimum Wage Adjustment

The Department identified that the direct care regional ceilings did not enable the growth from minimum wage increases to be captured within the previously shared Personal Care and Consumer Directed rates. Therefore, a below-the-line minimum wage adjustment was incorporated to capture minimum wage increases through FY 2022. The below tables provide detail regarding the FY 2022 minimum wage adjustment applied on the Downstate (except NYC) and Upstate regions respectively:

| | | 2022 | 2021 | 2020 | 2019 | 2018 | 2017 |
|--|---|-----------------|-----------------|-----------------|-----------------|-----------------|-----------------|
| (1) Base Rate Increase | Downstate | \$1.0000 | \$1.0000 | \$1.0000 | \$1.0000 | \$1.0000 | \$0.0000 |
| | Upstate | \$0.7000 | \$0.7000 | \$0.7000 | \$0.7000 | \$0.7000 | \$0.7000 |
| | (2) Fringe Benefits (% of base rate) | | | | | | |
| | Downstate | 17.55% | 17.55% | 17.55% | 17.55% | 28.00% | 28.00% |
| | Upstate | 17.29% | 17.29% | 17.29% | 17.29% | 28.00% | 28.00% |
| (3) Fringe Benefits = (1) * (2) | Downstate | \$0.1755 | \$0.1755 | \$0.1755 | \$0.1755 | \$0.2800 | \$0.0000 |
| | Upstate | \$0.1210 | \$0.1210 | \$0.1210 | \$0.1210 | \$0.1960 | \$0.1960 |
| | (4) MW Increase = (1) + (3) | | | | | | |
| | Downstate (Base Rate + Fringe) | \$1.1755 | \$1.1755 | \$1.1755 | \$1.1755 | \$1.2800 | \$0.0000 |
| | Upstate (Base Rate + Fringe) | \$0.8210 | \$0.8210 | \$0.8210 | \$0.8210 | \$0.8960 | \$0.8960 |

| MW Adjustment* | Live-in (13 hours) | Other Hourly Personal Care and Consumer Directed Services |
|----------------|--------------------|---|
| Downstate | \$77.7660 | \$5.9820 |
| Upstate | \$65.9896 | \$5.0761 |

*Minimum wage calculations within the provider rate sheet are rounded to 2 decimal points

Please see the Department of Labor website (linked below) for more information on NYS Minimum Wage.

<https://dol.ny.gov/history-minimum-wage-new-york-state>

ATTACHMENT B – January 1, 2022 Rate Sheet Templates

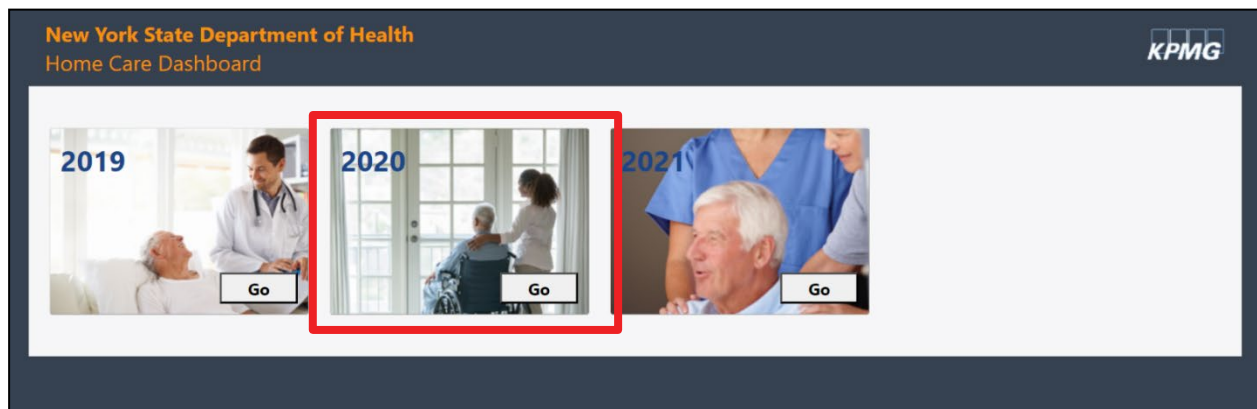
(Included as separate PDF copies to this letter)

ATTACHMENT C – HOME CARE COST REPORT RATE CERTIFICATION

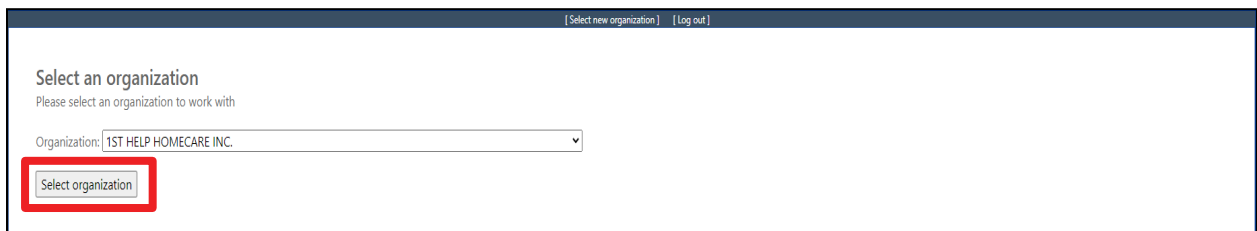
Steps to appeal or accept the Medicaid rates in the 2020 Home Care Cost Report Tool:

Step 1: Navigate to the Home Care web-based Tool page at the following link: <https://desoto.certisphere.com/doh/HomeCareDashboard.html>. Once you enter the link, please select the “2020” option (shown below) and click “Go.”

Step 2: Enter your username (email address) and password to log in to the Tool. If you forgot your password, please click the “Forgot Password?” link on the Web-based Tool log-in page. You will then receive an email containing the steps to reset your password. If you have any other difficulties logging in, please send an inquiry to the KPMG Home Care Cost Report mailbox at us-advrisknyshc@kpmg.com.



Step 3: Once you have successfully logged in, you will be prompted to select your agency using the drop-down menu as shown below. Click the drop-down option, select the applicable agency, and click “Select organization.”



Step 4: Navigate to the “Rate Certification” tab pictured below. Please review the information within this tab carefully. Then, enter the name, title, and email address of the executive-level individual completing the certification and use the multiple-choice options to accept or appeal the 2022 Medicaid reimbursement rate(s) calculated by the Department. You may include an explanation for your acceptance or appeal within the text box provided.

| | | | | | | | | | | | | | |
|--------------|----------------------------------|---------------------|-----------------------|-----------------------|------------------------|------------------------|------------|---------------------|-----------------------|-------------------|---------------------|---------------------------|-----------|
| Instructions | Frequently Asked Questions (FAQ) | Reporting Hierarchy | Cost Report Schedules | General Questionnaire | Cost Report Submission | Documentation Requests | Extensions | Contact Information | Agency Representation | Audit / Questions | Data Representation | Rate Certification | Reporting |
|--------------|----------------------------------|---------------------|-----------------------|-----------------------|------------------------|------------------------|------------|---------------------|-----------------------|-------------------|---------------------|---------------------------|-----------|

Rate Certification

The New York State Department of Health communicated the initial 2022 Medicaid rates within a Dear Administrator Letter sent to Test Organization via email on 4/17/23. These rates were calculated using the data submitted within the 2020 Home Care Cost Report. Please review the rate(s) communicated to you by the Department. If you have not received this communication, or have questions regarding the rate calculation, please send an inquiry with the subject line "2022 rate calculation" to CHHA-Rates@health.ny.gov (for CHHA related questions) or PersonalCare-Rates@health.ny.gov (for LHCSA and FI questions). Please note that rate-related questions should not be sent to us-advisknyshc@kpmg.com.

Using the options below, please indicate whether you accept the 2022 rate(s), or would like to appeal the rate(s). If you choose to appeal the 2022 rates communicated by the Department, you will have 90 calendar days from receipt of the Dear Administrator Letter (by 7/09/23) to refile Schedules 3, 4, 5, and 7 of the 2020 cost report, within the "Adjusted Cost Report Schedules" tab in the Tool. If you chose to appeal your 2022 rate, once you select the submit button below, you will be directed to the "Adjusted Cost Report Schedules" tab of the Tool, where you will be required to complete and submit updated cost report data for Schedules 3, 4, 5, and 7. If the appeal submission is not accompanied by an adjusted cost report submission, the appeal will not be considered. If the Adjusted Cost Report is submitted, the adjusted cost report data will be used by the Department to calculate new 2022 rates. If the Adjusted Cost Report is not submitted within the 90 days allotted, the original 2020 Cost Report and the current 2022 rate(s) will be considered final.

The Department requires that the rate certification process should be completed by an officer of the home care agency or a member of the home care agency's senior management team. It is strongly recommended that this individual be the agency's CEO, CFO, VP of Finance, or equivalent.

Please provide the name and title of the official certifying the 2022 Medicaid reimbursement rate(s) communicated by the Department.

Name: Title: Email Address:

I accept the 2022 Medicaid rates calculated by the Department

I would like to appeal the 2022 Medicaid rates calculated by the Department and refile the 2020 cost report within 90 days of receipt of the 2022 Notice Rate Dear Administrator Letter

Explanation

Step 5: Submit your acceptance or appeal by clicking the "Submit" button.

Please respond accordingly and submit

I accept the 2022 Medicaid rates calculated by the Department

I would like to appeal the 2022 Medicaid rates calculated by the Department and refile the 2020 cost report within 90 days of receipt of the 2022 Notice Rate Dear Administrator Letter

Explanation

Step 6 (Optional): If you would like to specify the specific rate(s) for which you agree or disagree to retain as a reference within the cost report web-based tool, you may complete the table(s) below in the bottom of the tab. Note that one table will appear for each entity type (CHHA, LHCSA, FI) that your agency operates. For example, if your agency operates LHCSA and FI entities, two tables will appear (one for LHCSA rates and one for FI rates).

The following section is optional. If your agency would like to further specify the rate(s) it agrees or disagrees with as a reference to retain in the Cost Report web-based tool, you may complete the following section.

In the chart below, please fill out the requested rate information for each CHHA rate received. Using the drop-down options, select the operating certificate and service type for the rate(s) received. Then, please enter the Medicaid rate dollar value communicated by DOH for that county and service type. Lastly, please select "agree" or "disagree."
If you operate multiple entities and service types, please use the "Add row" feature to the right of the chart to add a row for each rate received.

| Operating Certificate | Service Type | Notice rate communicated by DOH | Agree/Disagree with the notice rate | Comments |
|-----------------------|---------------------------|---------------------------------|---|----------|
| | --Select a Service Type-- | 0 | <input checked="" type="radio"/> Agree <input type="radio"/> Disagree | xx |
| | --Select a Service Type-- | 0 | <input type="radio"/> Agree <input checked="" type="radio"/> Disagree | x |
| | --Select a Service Type-- | 0 | <input checked="" type="radio"/> Agree <input type="radio"/> Disagree | |
| | --Select a Service Type-- | | <input type="radio"/> Agree <input type="radio"/> Disagree | |

Add row

Step 7 (for agencies that appeal their rate): After the rate appeal has been submitted, you must navigate to the "Adjusted Cost Report Schedules" tab in the Tool (see image on the following page). This tab will be unlocked for your agency to make changes to Schedules 3, 4, 5, and 7. Note that the information from your agency's original cost report submission will be copied into this tab, so that you can efficiently execute the adjustments to your original submission. For further information on the rate calculation and specific cost report inputs that impact the rate, please review the informational webinar hosted by the Department on May 2nd and posted on the DOH website.

Once edits are complete, you will need to review the certification at the top of tab to verify the accuracy and completeness of the adjusted data, enter the name and title of the individual certifying and submitting the adjusted cost report, and click the "Submit Adjustments" button (shown in image on following page). Note that the Adjusted Cost Report is required to be certified and submitted by an officer of the agency or member of the agency's senior management team.

If the adjusted cost report was successfully submitted, you will see a "submitted" stamp in place of the previous "submit adjustments" button. The adjusted cost report data will be used by the Department to calculate new 2022 rate(s). Please note that the adjusted cost report must be submitted within 90 days of receiving the "Dear Administrator Letter" from the Department. If the Adjusted Cost Report is not submitted within these 90 days, the original 2020 Cost Report and the current 2022 rate(s) will be considered final.

Attachment D – Instructions Accessing the 2022 Initial Rates in the Health Commerce System

Health Commerce System (HCS) Instructions:

- 1) Login to HCS: https://commerce.health.state.ny.us/public/hcs_login.html;
- 2) Under “My Applications”, select **Healthcare Finance Data Gateway** (or go to “My Content” from the top line menu, then All Applications to search for the application under “C” for CHHA or “P” for Personal Care);
- 3) Click on the **Publications** section of this new application;
- 4) Under **Organization Type**, select either “**Home Health Agency**” or “**Personal Care**” from the drop down menu;
- 5) Under **Collection**, select either of the following “**Jan, April or Oct 2022 Rates**” from the drop down menu;
- 6) Under **Package**, select “**Jan, April or Oct 2022 Rates**” from the drop down menu and
- 7) Under **Organization**, select your agency, then select **Search**.
- 8) Next select **Download**.

Please note:

If you have problems accessing your HCS account due to the expiration of your password, please contact the Commerce Accounts Management Unit (CAMU) at 1-866-529-1890.