



Department of Health

ANDREW M. CUOMO
Governor

HOWARD A. ZUCKER, M.D., J.D.
Commissioner

SALLY DRESLIN, M.S., R.N.
Executive Deputy Commissioner

August 30, 2019

Dear Provider:

This letter provides information regarding changes to administrative reimbursement for Fiscal Intermediaries (FIs) providing services as set forth in State law under the Consumer Directed Personal Assistance Program (CDPAP). Effective September 1, 2019, the Department will implement a three-tier Per Member Per Month (PMPM) rate structure for reimbursement of the administrative services component for CDPAP-. The three tiers will be based on the number of direct care hours authorized per member per month. The Tiers are as follows:

Tier	Number of Direct Care Hours Authorized Per Month Per Consumer	FI PMPM Reimbursement
1	1 – 159 hours	\$64
2	160 – 479 hours	\$164
3	480 hours and above	\$522

The provider-specific direct care medical services component of the rate will be modified to remove the FI administrative costs consistent with the changes above and will be available next week. The guidelines for billing and reimbursement of administrative services are set forth in Attachment A and eMedNY billing will be updated consistent with these changes.

If you have any questions regarding the above information, please send an email to PersonalCare-Rates@health.ny.gov for questions on the rates or ConsumerDirected@health.ny.gov for questions on the policy, and the Department will respond to your inquires.

Sincerely,

Laura Rosenthal
Director
Bureau of Residential Health Care Reimbursement
Division of Finance and Rate Setting
Office of Health Insurance Program

Attachments

ATTACHMENT A

CDPAP Fiscal Intermediary Reimbursement Effective September 1, 2019

- Current Reimbursement for Consumer Directed Personal Assistance Program (CDPAP) administrative services is included in the Total Final Rate and billed through Medicaid rate codes. Effective September 1, 2019, the Department will remove the administrative component for CDPAP rates for FFS.
- Effective September 1, 2019, the Department will implement a three-tier Per Member Per Month (PMPM) rate structure for Fiscal Intermediary (FI) services as defined in state law for FI services provided to Medicaid recipients enrolled in CDPAP. The CDPAP Administrative Claim will require prior Approval/Authorization by the Local Departments of Social Services (LDSS) for each member based on hours.
- FIs will bill a separate rate code for each Approved/Authorized consumer for each month the FI is providing service to that consumer based on the number of direct care hours authorized by the LDSS. The rate structure and billing codes for administrative reimbursement will be active in eMedNY next week and will be as follows:

Tier	Number of Direct Care Hours Authorized Per Month Per Consumer	FI PMPM Reimbursement Amounts	Rate Codes
1	1 – 159 hours	\$64	8400
2	160 – 479 hours	\$164	8401
3	480 hours and above	\$522	8402

- FIs will bill the new administrative PMPM once per month based on the LDSS authorized number of direct care medical service hours. In the instance where the number of hours authorized by the LDSS either increases or decreases mid-month, the FI will adjust the initial claim submitted to eMedNY to correspond with the tier that matches the newly authorized hours.
- Providers shall continue to utilize current provider-specific CDPAP rate codes for the direct care medical services component as they have in the past.