

# **HEALTH & MENTAL HYGIENE**

**By Agency**

## OFFICE FOR THE AGING

	Adjusted Appropriation 2012-13	Executive Request 2013-14	Legislative Appropriation 2013-14	Change
<b>STATE OPERATIONS</b>				
General Fund	2,722,600	1,608,000	1,608,000	0
Special Revenue-Other	250,000	250,000	250,000	0
Special Revenue-Federal	10,987,000	10,987,000	10,987,000	0
Enterprise	100,000	100,000	100,000	0
<b>Total for STATE OPERATIONS</b>	<b>14,059,600</b>	<b>12,945,000</b>	<b>12,945,000</b>	<b>0</b>
<b>AID TO LOCALITIES</b>				
General Fund	113,904,500	112,769,500	114,069,500	1,300,000
Special Revenue-Other	980,000	980,000	980,000	0
Special Revenue-Federal	114,985,000	114,985,000	114,985,000	0
<b>Total for AID TO LOCALITIES</b>	<b>229,869,500</b>	<b>228,734,500</b>	<b>230,034,500</b>	<b>1,300,000</b>

### LEGISLATIVE ACTION

The Legislature appropriates \$242.98 million on an All Funds basis, an increase of \$1.3 million over the Executive's budget submission.

#### Legislative Changes

The Legislature provides an increase of \$500,000 for the Elderly Abuse Education and Outreach program, \$200,000 for the Social Model Adult Day Services program; \$200,000 for additional transportation operating support to Local Area Agencies on Aging; \$200,000 for Lifespan's Elder Abuse Prevention Program; and \$200,000 for the Council of Senior Centers and Services of New York City, to support the older adult Supplemental Nutrition Assistance Program (SNAP) initiative.

#### Article VII

The Legislature amends proposed Article VII legislation that would have permanently extended the existing social work and mental health licensure exemption and instead extends the exemption for three years, requires exempted agencies to report on activities performed by non-licensees, and clarifies certain activities that are not within scope of practice.

## Legislative Additions

The Legislature provides funding for the following:

PROGRAM	APPROPRIATION
ELDERLY ABUSE EDUCATION AND OUTREACH PROGRAM	\$500,000
LIFESPAN - ELDER ABUSE PROGRAM	\$200,000
COUNCIL OF SENIOR CENTERS OF NYC	\$200,000
SOCIAL MODEL ADULT DAY SERVICES	\$200,000
TRANSPORTATION SERVICES	\$200,000

## DEVELOPMENTAL DISABILITIES PLANNING COUNCIL

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	Adjusted Appropriation 2012-13	Executive Request 2013-14	Legislative Appropriation 2013-14	Change
STATE OPERATIONS				
Special Revenue-Federal	4,750,000	4,750,000	4,750,000	0
Enterprise	10,000	10,000	10,000	0
Total for STATE OPERATIONS	4,760,000	4,760,000	4,760,000	0

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### LEGISLATIVE ACTION

The Legislature concurs with the Executive's recommendation.

## DEPARTMENT OF HEALTH

	Adjusted Appropriation 2012-13	Executive Request 2013-14	Legislative Appropriation 2013-14	Change
<b>STATE OPERATIONS</b>				
General Fund	238,359,000	579,704,000	579,704,000	0
Special Revenue-Other	510,639,100	388,703,400	388,703,400	0
Special Revenue-Federal	1,475,010,000	2,099,290,000	2,099,290,000	0
<b>Total for STATE OPERATIONS</b>	<b>2,224,008,100</b>	<b>3,067,697,400</b>	<b>3,067,697,400</b>	<b>0</b>
<b>AID TO LOCALITIES</b>				
General Fund	32,199,870,715	33,621,830,500	33,868,372,754	246,542,254
Special Revenue-Other	12,291,732,000	11,972,446,000	11,910,932,400	(61,513,600)
Special Revenue-Federal	62,222,157,000	70,237,869,000	70,259,869,000	22,000,000
<b>Total for AID TO LOCALITIES</b>	<b>106,713,759,715</b>	<b>115,832,145,500</b>	<b>116,039,174,154</b>	<b>207,028,654</b>
<b>CAPITAL PROJECTS</b>				
Capital Projects Fund	15,600,000	15,600,000	15,600,000	0
Federal Capital Projects Fund	24,146,000	70,000,000	70,000,000	0
<b>Total for CAPITAL PROJECTS</b>	<b>39,746,000</b>	<b>85,600,000</b>	<b>85,600,000</b>	<b>0</b>

### LEGISLATIVE ACTION

The Legislature appropriates \$119.19 billion on an All Funds basis, an increase of \$207.03 million over the Executive's budget submission. The budget appropriates funding for the Medical Assistance (Medicaid) program in a two-year interval for State Fiscal Years (SFY) 2013-14 and SFY 2014-15, and continues to limit year-to-year spending increases in Medicaid to the 10-year rolling average of the medical component of the Consumer Price Index.

#### Legislative Reductions

The Legislature includes \$56.23 million in state share spending re-estimates to the Medicaid program, including: \$31.23 million related to a re-estimate of Medicaid Redesign Team (MRT) initiative savings; \$20 million in general Medicaid spending re-estimates; and \$5 million related to a re-estimate of supportive housing initiative expenditures.

The Legislature reduces Child Health Plus (CHP) expenditures by \$1.21 million to deny the Executive proposal that would have required CHP plans to provide coverage for Early Intervention (EI) program services.

## Legislative Changes

Total state share Medicaid expenditures in the SFY 2013-14 Enacted Budget are unchanged from the Executive's budget submission. The Legislature provides a state share restoration of \$56.23 million to the Medicaid program which is fully supported by the Medicaid program re-estimates detailed above. Specifically, the Legislature restores:

- \$34.30 million to reject the Executive proposal to eliminate spousal refusal provisions;
- \$9.38 million related to reinstating prescriber prevails for atypical antipsychotic drugs in managed care;
- \$6.09 million related to reinstating prescriber prevails for anti-retrovirals, anti-rejection drugs, anti-depressants, seizures/epilepsy drugs, endocrine agents, hematologic agents, and immunologic agents;
- \$2.10 million to ensure that Medicaid recipients can obtain their prescription drugs at a pharmacy of their choice, whether by retail sale or through mail order;
- \$1.8 million to reject the Executive proposal to reduce fee-for-service pharmacy reimbursement rate from average wholesale price (AWP) less 17 percent to AWP less 17.6 percent;
- \$1.04 million related to reinstating prescriber prevails for all classes of drugs in fee-for-service Medicaid;
- \$480,000 to reject all Executive proposals related to the Early Intervention program;
- \$450,000 related to rejecting the proposal to allow DOH to establish minimum supplemental rebates for fee-for-service drugs;
- \$400,000 to reject the Executive proposal to prohibit, beginning January 1, 2014, new enrollment of adults with children between 138 percent and 150 percent of the federal poverty level in the Family Health Plus program;
- \$180,000 to reject the Executive proposal to eliminate summary posting requirements for pharmacy and therapeutics committee meetings; and

- \$20,000 related to reinstating prescriber prevails for opioids in excess of four prescriptions in a 30-day period.

The Legislature provides discrete appropriations for the Vital Access Provider program and the Essential Community Provider Network, and accepts the Executive proposal to provide \$182 million in funding for these programs, which includes \$30 million specifically allocated for nursing home projects.

The Legislature denies the consolidation of 89 public health programs into six competitive public health program pools and restores discrete appropriations for each of these programs. In addition, the Legislature provides a proportionate \$18 million of the \$40 million in proposed reductions to these programs, a 4.4 percent restoration.

The Legislature denies the proposal to transfer the CHP rate setting process from the Department of Financial Services to the Department of Health (DOH) and provides \$16.2 million for this purpose.

The Legislature provides a restoration of \$12.7 million to the Physician Excess Medical Malpractice Program and denies the Executive proposal to create a risk-based allocation methodology for program funding.

The Legislature provides a restoration of \$418,000 to support a denial of all Early Intervention program changes proposed by the Executive, including proposals that would have required EI providers to enter into contractual agreements with insurance plans and that would have modified the screening process for EI eligibility determinations.

The Legislature provides \$19.8 million in support for various other public health programs, including:

- \$6 million for Home and Personal Care worker benefits;
- \$5 million to support health coverage for certain retired or vested employees of the New York City Off-Track Betting Corporation;
- \$2 million for Spinal Cord Injury Research;
- \$1 million in additional funding for infertility programs;
- \$750,000 for Family Planning Services;
- \$557,000 for School Based Health Centers;
- \$550,000 for Women's Health Initiatives;
- \$525,000 for HIV/AIDS Community Service Programs (CSP);

- \$525,000 for HIV/AIDS Multi Service Agencies (MSA);
- \$500,000 for the Upstate Poison Control Center;
- \$400,000 for the Primary Care Development Corporation;
- \$300,000 in additional funding for the Physician Practice Support Program;
- \$250,000 for the Maternity and Early Childhood Foundation;
- \$250,000 for the Center for Disabilities Services-Women’s Special Health Network;
- \$209,000 for the Finger Lakes Health Systems Agency;
- \$200,000 for the Endometriosis Foundation of America;
- \$150,000 for the Richfield Springs School Based Health Center;
- \$120,000 for Comprehensive Care Centers for Eating Disorders;
- \$110,000 for Adrenoleukodystrophy (ALD) Screening;
- \$100,000 for the Chautauqua County ARC Demonstration;
- \$100,000 in additional funding for the Physician Loan Repayment Program;
- \$75,000 for the Coalition of Institutionalized Aged and Disabled (CIAD);
- \$50,000 for the Breast Cancer Network; and
- \$39,000 for the Coalition for School Based Health Centers.

**The Legislature denies the Executive proposal to consolidate or co-locate certain lab functions currently operated by the Department of Health, Department of Environmental Conservation, and Department of Agriculture and Markets.**



## Article VII

### Part A – Medicaid

The Legislature accepts proposed Article VII legislation to:

- allow for the inclusion of the operational costs of the Office of Health Insurance Programs under the Medicaid Spending Cap and to provide that such costs shall not be subject to annual consumer price index adjustments;
- extend the Medicaid spending cap for one additional year, through SFY 2014-15, and modify the cap to allow flexibility in the event of a declared emergency and to add additional reporting requirements;
- extend the two percent across the board reduction of Medicaid payments for two years, and allow DOH to restore these reductions if sufficient funds are available;
- make certain changes to the False Claims Act in order to comply with federal law;
- authorize the Commissioner of Health (COH) to invest up to \$15 million in health home infrastructure development;
- authorize additional funding to promote the delivery of integrated mental health, substance abuse, and physical health services in a single location;
- allow DOH to set the cutoff date for monthly enrollment in a managed long term care plan;
- authorize the COH to implement an incontinence supply management program;
- authorize capital debt reimbursement for certain adult homes which convert to assisted living programs and add assisted living beds to accommodate such transition;
- authorize special needs managed care plans and comprehensive HIV special needs plans to provide comprehensive health services on a full capitation basis;
- extend certain income disregards related to costs for eligible adult home residents who transition into managed long term care plans; and
- require managed care plans to provide access to certified chemical dependence treatment services.

The Legislature amends proposed Article VII legislation to:

- permanently continue the elimination of trend factor adjustments in Medicaid provider reimbursement rates to provide an extension of the elimination only through March 31, 2015;
- merge the Pharmacy and Therapeutics Committee with the Drug Utilization Review Board to maintain consumer representation;
- allow OPWDD to perform a Fully Integrated Duals Advantage pilot program and establish Developmental Disability Individual Support and Care Coordination Organizations to enhance protections for enrollees;
- eliminate Medicaid coverage related to emergency care and assistance to clarify the current enrollment and eligibility process;
- allow DOH to amend certain existing contracts that implement actions recommended by the Medicaid Redesign Team without competitive bid to limit the scope of the contracts that may be modified;
- sunset payments for financially disadvantaged nursing homes effective December 31, 2012 to ensure these funds are transferred to the Vital Access Provider program only upon federal approval of such funds;
- authorize enrollment of previously excluded populations in mandatory managed care and Managed Long Term Care (MLTC) plans when plan features and rates are available;
- allow reimbursement rates for children's hospital outpatient services to be established by regulation to ensure that, prior to the establishment of such rates, providers are paid an adequate rate for services rendered; and
- authorize DOH to perform Fully Integrated Duals Advantage program to clarify that enrollees may opt out of the program.

The Legislature denies proposed Article VII legislation to:

- authorize Medicaid reimbursement of individual psychotherapy services provided by certified social workers for children and for those requiring such services as a result of pregnancy or childbirth;
- authorize DOH to require prior authorization for the refill of a prescription drug when the patient should still have more than a six-day supply of the previously dispensed amount remaining, based on normal use;

- **require counties which implemented mandatory managed care to use the enrollment counseling and enrollment services for which DOH has contracted;**
- **develop a pricing reimbursement methodology for specialty nursing home facilities;**
- **eliminate prescriber prevails provisions in fee-for-service Medicaid and for certain prescription drugs in Medicaid Managed Care;**
- **allow DOH to deny prior authorization for opioid prescriptions in excess of four prescriptions in a 30-day period under certain circumstances;**
- **reduce the Medicaid fee-for-service pharmacy brand reimbursement rate, from average wholesale price (AWP) less 17 percent to AWP less 17.6 percent;**
- **require prior authorization of drugs eligible for reimbursement by state public health plans unless the pharmaceutical manufacturers agree to provide minimum supplemental rebates;**
- **establish wage standards for nursing homes under contract with a managed long term care plan;**
- **enact several reimbursement rate modifications through regulation for hospitals and nursing homes;**
- **provide for the transition of rate setting for the Child Health Plus program from DFS to DOH;**
- **eliminate the cap on the maximum number of managed long-term care plans that can be authorized; and**
- **eliminate spousal refusal protections for community-based long-term care and managed long-term care enrollees.**

**The Legislature provides Article VII legislation to:**

- **accelerate the local benefit of the enhanced federal Medicaid reimbursement under federal Affordable Care Act (ACA) to allow counties to realize a benefit beginning April 1, 2013;**
- **clarify a Medicaid recipients' right to obtain prescription drugs at a pharmacy of their choice, whether by retail sale or through mail order;**
- **expands prescriber prevails protections to additional drug classes in Medicaid Managed Care;**
- **allow individuals that elect to receive hospice care to remain in their MLTC plan;**

- require timely payments to home care and Consumer Directed Personal Assistance Program providers;
- establish a workgroup to examine aligning state and federal regulatory requirements for certain home care providers;
- require the Commissioners of DOH, Office of Alcoholism and Substance Abuse Services (OASAS), and Office of Mental Health (OMH) to provide a report to the Governor and Legislature regarding the transition of complex behavioral health services into managed care plans; and
- require the Commissioners of DOH, OASAS, and OMH to ensure network adequacy and to provide other patient protections.

#### Part B – Expiring Laws/ Cost Containment Actions

The Legislature amends proposed Article VII legislation related to expiring laws and cost containment actions to extend certain permanent extenders for a limited period of time.

#### Part C – Hospital Indigent Care Pool

The Legislature accepts proposed Article VII legislation to:

- establish a new indigent care distribution methodology from January 1, 2013 through December 31, 2015, including an annual distribution of \$139.4 million to major public general hospitals and \$994.9 million to private hospitals, allocated according to each facility's level of uncompensated care;
- establish a transition pool to ensure that no facility has reduced indigent care payments greater than set percentages specified in statute, as compared to the average distribution that each such facility received for the three prior calendar years;
- provide that one percent of the funds available for distribution would be reserved and set aside in a Financial Assistance Compliance Pool and released to individual hospitals based on their substantial compliance with regulations implementing the Financial Assistance Law;
- reduce Hospital Outpatient Ambulatory Patient Group payments by an aggregate of \$25 million annually to support Indigent Care Transition Pool Payments; and
- authorize the distribution of an additional \$25 million as Upper Payment Limit payments instead of Disproportionate Share Hospital payments.

The Legislature provides Article VII legislation to require DOH to annually report on Indigent Care Pool distributions to the Governor and the Legislature.

## Part D – Federal Patient Protection and Affordable Care Act (ACA) Compliance

The legislature accepts Article VII legislation to:

- identify the updated Medicaid eligibility categories that will exist as of January 1, 2014, when the Medicaid requirements of the ACA take effect and to identify the categories of individuals who will have their financial eligibility determined based on their modified adjusted gross income (MAGI), and the categories of individuals whose financial eligibility will be determined under the current rules;
- specify which eligible individuals will receive the current Medicaid benefit package, and which will receive benchmark coverage under the new federal requirements;
- define the Medicaid benchmark benefit as the current Medicaid benefit package, with the exception of institutional long term care services, plus any additional federally required benefits;
- allow online and telephonic Medicaid applications and increase the extent to which Medicaid applications may be submitted to and processed by the DOH or its agent;
- require DOH to recertify Medicaid eligibility based on reliable information possessed or available to DOH and to eliminate documentation requirements that are inconsistent with federal ACA provisions requiring self-attestation of certain information used to determine Medicaid eligibility; and
- define household income for purposes of determining eligibility for Child Health Plus (CHP), require the Enrollment Center to review all information of CHP program applicants for the purpose of making eligibility determinations, eliminate temporary enrollment in CHP, modify CHP program eligibility categories to conform to MAGI, and remove the necessity of personal interviews for recertification of CHP eligibility.

The Legislature amends Article VII language to:

- eliminate Family Health Plus (FHP) and provide a cost sharing assistance to former FHP enrollees by limiting the assistance to premiums and extending such assistance to all individuals who would have been eligible for FHP;
- clarify that navigators are not insurance producers and to clarify the roles and responsibilities of navigators;
- regulate student health policies, including a requirement that such policies take corrective action if they do not meet the minimum medical loss ratio (MLR) requirements;

- conform individual and small group policies with the requirements of the ACA;
- allow enrollees who currently have individual policies with out-of-network benefits to transition to ACA compliant policies with out-of-network benefits;
- eliminate the Healthy NY program for individuals and require Healthy NY coverage for small employers to be ACA compliant;
- expand the definition of small group, on January 1, 2016, to groups that have one to 100 members, in compliance with the ACA;
- establish a temporary procedure for insurers to discontinue policies that are not ACA compliant;
- allow the Superintendent of Financial Services to set premium tiers and rating relativities; and
- require the Superintendent of Financial Services to set rating regions.

The Legislature denies Article VII legislation that would rate health insurance coverage provided by professional employer organizations as small businesses in the small group market.

The Legislature provides Article VII language to:

- establish a workgroup to consider issues pertaining to the federal option to establish a Basic Health Program; and
- require the COH to issue a readiness report detailing the status of the health benefit exchange.

#### Part E – Early Intervention, Public Health and Other Program Changes

The Legislature accepts Article VII language to:

- increase the state base grant amount for the General Public Health Works (GPHW) program, currently the greater of \$550,000 or 55 cents per capita, to the greater of \$650,000 or 65 cents per capita;
- establish a new statewide incentive performance program for GPHW activities and provide up to \$1 million in annual funding; and
- update provisions regarding sexually transmitted diseases (STD) to conform to current clinical practice, and to authorize counties to seek third party coverage or indemnification for STD diagnosis and treatment services rendered, where appropriate.

The Legislature amends Article VII language to:

- allow the COH to establish a temporary operator of certain facilities to limit the duration that a temporary operator may operate a facility;
- change the GPHW program regarding the provision of core public health services to provide limited reimbursement for primary and preventative services and to restore funding for fringe benefits for municipality contractors; and
- amend radiologic technologist misconduct provisions, to clarify that they may be professionally disciplined for criminal activity, which includes all felonies and misdemeanors that have a direct relationship to his or her license or if he or she poses an unreasonable risk to public safety.

The Legislature denies Article VII language to:

- modify the EI program, including proposals that would require EI providers to enter into contractual agreements with insurance plans and would modify the EI screening process;
- create a risk-based allocation of Physician Excess Medical Malpractice Program funds to maintain the existing program and to allow up to 1,000 new physicians to access the program;
- create a new Outcome Based Health Planning program that would consolidate public health programs, establish outcome based contracting, and authorize the COH to make grants, awards and disbursements on a competitive basis, pursuant to request for proposal;
- streamline the Certificate of Need planning process and modify standards used by the Public Health and Health Planning Council provisions in considering prospective facility operators;
- reform the overall planning process for emergency medical services by merging the State Emergency Medical Services Council, the State Emergency Medical Advisory Committee, the State Trauma Advisory Committee and the Emergency Medical Services for Children Council into the single State Emergency Medical Services Advisory Board;
- allow certain home health aides to provide medication administration services and to establish an advanced home health aide certification;
- allow for the establishment of retail clinics; and
- authorize the COH to establish a pilot in two regions of the state to require a business corporation to operate a health care facility, and to affiliate with academic medical centers.

## Part Q – State University of New York (SUNY) Health Science Centers

The Legislature provides Article VII language to:

- ensure the continuation of SUNY Health Science Center at Brooklyn (SUNY Downstate) as a public institution and preserve its academic mission as a teaching hospital;
- assist SUNY Downstate in maintaining its financial viability by requiring the Chancellor to adopt a sustainability plan by June 15, 2013;
- provide contracting flexibility for SUNY Downstate to allow for an expedited procurement of certain goods and services under certain circumstances; and
- authorize public hospitals, including SUNY Downstate, to utilize new federal funds under the federal Delivery System Reform Incentive Payments (DSRIPS) program to support facility restructuring activities.

### ELFA – Scope of Practice

The Legislature accepts Article VII language to:

- increase the number of physician assistants that may be supervised by a physician in certain settings; and
- authorize a dental hygienist to sign dental health certificates that are required for public school students.

The Legislature amends proposed Article VII legislation that would have permanently extended the existing social work and mental health licensure exemption and instead extends the exemption for three years, requires exempted agencies to report on activities performed by non-licensees, and clarifies certain activities that are not within scope of practice.

### **Legislative Additions**

The Legislature provides funding for the following:

<b>PROGRAM</b>	<b>APPROPRIATION</b>
<b>RESTORE ITEMIZED FUNDING TO THE CENTER FOR COMMUNITY HEALTH PROGRAM</b>	<b>\$195,203,354</b>
<b>REJECT THE ELIMINATION OF SPOUSAL REFUSAL</b>	<b>\$102,800,000</b>
<b>RESTORE ITEMIZED AIDS INSTITUTE FUNDING</b>	<b>\$97,996,100</b>
<b>OTHER MEDICAID ADJUSTMENTS</b>	<b>\$94,432,000</b>
<b>RESTORE ITEMIZED FUNDING FOR THE HEALTH CARE REFORM ACT PROGRAM</b>	<b>\$59,166,400</b>



PRESCRIBER PREVAILS PROVISION	\$24,300,000
MOVE CHILD HEALTH PLUS RATE MAKING AUTHORITY	\$22,000,000
RESTORE ITEMIZED FUNDING FOR THE OFFICE OF HEALTH SYSTEMS MANAGEMENT	\$19,518,000
MOVE CHILD HEALTH PLUS RATE MAKING AUTHORITY	\$16,200,000
REJECT PROPOSAL TO ELIMINATE PRESCRIBER PREVAILS	\$14,210,000
RESTORE ITEMIZED FUNDING FOR THE OFFICE OF HEALTH INSURANCE PROGRAMS	\$13,973,400
REJECT EXCESS MEDICAL MALPRACTICE POOL REFORM	\$12,740,000
RESTORE ITEMIZED FUNDING FOR THE ENVIRONMENTAL HEALTH PROGRAM	\$11,611,100
REJECT MAIL ORDER PHARMACY	\$6,300,000
OTB HEALTH INSURANCE RETIREES	\$5,000,000
REJECT PHARMACY PROPOSAL-AWP REIMBURSEMENT RATE	\$4,200,000
HOME CARE WORKER BENEFITS	\$3,000,000
HOME CARE WORKER BENEFITS	\$3,000,000
REJECT EARLY INTERVENTION PROPOSAL-MEDICAID	\$2,375,000
SPINAL CORD INJURY RESEARCH	\$2,000,000
REJECT PHARMACY PROPOSAL-MINIMUM SUPPLEMENTAL REBATES	\$1,340,000
FUNDING FOR IMPROVED ACCESS TO INFERTILITY SERVICES	\$1,000,000
RESTORE ITEMIZED FUNDING FOR THE WADSWORTH CENTER FOR LABORATORIES AND RESEARCH PROGRAM	\$822,400
FAMILY PLANNING SERVICES	\$750,000
SCHOOL BASED HEALTH CLINICS	\$557,000
WOMEN'S HEALTH AND WELLNESS PROGRAM	\$550,000
AIDS: HIV/AIDS-COMMUNITY SERVICE PROGRAM (CSP)	\$525,000
AIDS: HIV/AIDS-MULTI SERVICE AGENCIES (MSA)	\$525,000
UPSTATE POISON CONTROL CENTER	\$500,000
REJECT EARLY INTERVENTION SCREENING PROPOSALS	\$418,000
PRIMARY CARE DEVELOPMENT INITIATIVES	\$400,000
REJECT PHARMACY PROPOSAL-ELIMINATE SUMMARY POSTING REQUIREMENT	\$320,000
RESTORE ITEMIZED FUNDING FOR THE HEALTH CARE FINANCING PROGRAM	\$307,400
PHYSICIAN PRACTICE SUPPORT PROGRAM	\$300,000
MATERNITY AND EARLY CHILDHOOD FOUNDATION	\$250,000
CENTER FOR DISABILITIES SERVICES	\$250,000
FINGER LAKES HEALTH SYSTEMS AGENCY	\$209,000
ENDOMETRIOSIS FOUNDATION OF AMERICA	\$200,000
SCHOOL BASED HEALTH CENTER - RICHFIELD SPRINGS	\$150,000
COMPREHENSIVE CARE CENTERS FOR EATING DISORDERS	\$120,000
ADRENOLEUKODYSTROPHY (ALD) SCREENING	\$110,000
ARC DEMONSTRATION - CHAUTAUQUA COUNTY	\$100,000
PHYSICIAN LOAN REPAYMENT PROGRAM	\$100,000
COALITION OF INSTITUTIONALIZED AGED AND DISABLED	\$75,000
BREAST CANCER - SUPPORT AND EDUCATION SERVICES	\$50,000
COALITION OF SCHOOL BASED HEALTH CENTERS	\$39,000

## OFFICE OF THE MEDICAID INSPECTOR GENERAL

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	Adjusted Appropriation 2012-13	Executive Request 2013-14	Legislative Appropriation 2013-14	Change
STATE OPERATIONS				
General Fund	27,365,000	23,915,000	23,915,000	0
Special Revenue-Other	3,700,000	0	0	0
Special Revenue-Federal	43,726,000	42,619,000	42,619,000	0
Total for STATE OPERATIONS	74,791,000	66,534,000	66,534,000	0

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### LEGISLATIVE ACTION

The Legislature concurs with the Executive's recommendation.

#### Article VII

The Legislature provides Article VII language to:

- allow the Commissioner of Health to approve local social services district demonstration projects under which localities would be eligible to receive up to 20 percent of any Medicaid recoveries;
- require the Office of the Medicaid Inspector General (OMIG) to provide quarterly briefings to the Legislature on its activities;
- require OMIG to meet quarterly with representatives of social services districts to discuss the status of ongoing cooperative efforts between OMIG and the districts;
- require OMIG to develop training materials on audit standards and criteria for identifying fraud or waste; and
- require the Department of Health to report on its activities efforts to mitigate fraud, waste, and abuse as part of its annual report.

## DEPARTMENT OF MENTAL HYGIENE

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	Adjusted Appropriation 2012-13	Executive Request 2013-14	Legislative Appropriation 2013-14	Change
STATE OPERATIONS				
Special Revenue-Other	600,000,000	600,000,000	600,000,000	0
Total for STATE OPERATIONS	600,000,000	600,000,000	600,000,000	0

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### LEGISLATIVE ACTION

The Legislature concurs with the Executive's recommendation.

## OFFICE OF ALCOHOLISM AND SUBSTANCE ABUSE SERVICES

	Adjusted Appropriation 2012-13	Executive Request 2013-14	Legislative Appropriation 2013-14	Change
<b>STATE OPERATIONS</b>				
Special Revenue-Other	110,421,000	111,696,000	111,696,000	0
Special Revenue-Federal	6,530,000	6,170,000	6,170,000	0
<b>Total for STATE OPERATIONS</b>	<b>116,951,000</b>	<b>117,866,000</b>	<b>117,866,000</b>	<b>0</b>
<b>AID TO LOCALITIES</b>				
General Fund	25,523,000	25,523,000	25,523,000	0
Special Revenue-Other	296,973,000	296,973,000	297,173,000	200,000
Special Revenue-Federal	135,000,000	135,000,000	135,000,000	0
<b>Total for AID TO LOCALITIES</b>	<b>457,496,000</b>	<b>457,496,000</b>	<b>457,696,000</b>	<b>200,000</b>
<b>CAPITAL PROJECTS</b>				
Capital Projects Fund	9,560,000	9,560,000	9,560,000	0
Mental Hygiene Capital Improvement Fund-389	88,046,000	88,046,000	88,046,000	0
<b>Total for CAPITAL PROJECTS</b>	<b>97,606,000</b>	<b>97,606,000</b>	<b>97,606,000</b>	<b>0</b>

### LEGISLATIVE ACTION

The Legislature appropriates \$673.2 million, an increase of \$200,000 over the Executive's budget submission.

#### Legislative Changes

The Legislature includes appropriation language to specify that \$14.9 million of the \$42.6 million that supports the continuation of prior year contracts for entities providing services for problem gambling and chemical dependency prevention and treatment services shall be made available to the New York City Department of Education.

The Legislature provides \$200,000 in funding for the Queen's Village Committee for Mental Health for J-CAP, Inc.

## Article VII

The Legislature amends proposed Article VII language to:

- require that the existing methadone registry include accurate patient dosage information by providing that such provisions do not result in increased costs or fees to providers;
- conform statute to current practice with regard to funding for substance abuse programs by including compulsive gambling programs;
- limit the percentage of state aid that may be reduced for a voluntary agency if a local governmental unit reduces its tax levy support;
- limit the circumstances under which state aid may be reduced and require notification prior to any reduction of funding in order to allow a voluntary agency or a local governmental unit to submit a corrective action plan;
- limit the situations in which the Commissioner of the Office of Alcoholism and Substance Abuse Services (OASAS) can appoint a temporary operator to manage a facility;
- transition OASAS provider reimbursement rates to a negotiated rate model under Medicaid Managed Care by delaying the transition for one year and requiring the Department of Health, the Office of Mental Health, and OASAS to conduct a study regarding the ability of clients to access services and the adequacy of rate setting; and
- extend the existing social work and mental health licensure exemption for three years only, require exempted agencies to report on activities performed by non-licensees, and clarify that certain activities are not within scope of practice.

The Legislature accepts the Executive proposal to defer the human services Cost of Living Adjustment (COLA) for designated human services programs for the 2013-14 fiscal year, and extends the sunset of the COLA one year to March 31, 2017.

## Legislative Additions

The Legislature provides funding for the following:

PROGRAM	APPROPRIATION
J-CAP, INC.	\$200,000

## OFFICE OF MENTAL HEALTH

	Adjusted Appropriation 2012-13	Executive Request 2013-14	Legislative Appropriation 2013-14	Change
<b>STATE OPERATIONS</b>				
General Fund	796,000	796,000	796,000	0
Special Revenue-Other	2,063,493,000	2,063,593,000	2,088,593,000	25,000,000
Special Revenue-Federal	2,038,000	1,538,000	1,538,000	0
Enterprise	8,606,000	8,606,000	8,606,000	0
Internal Service Fund	2,597,000	2,597,000	2,597,000	0
<b>Total for STATE OPERATIONS</b>	<b>2,077,530,000</b>	<b>2,077,130,000</b>	<b>2,102,130,000</b>	<b>25,000,000</b>
<b>AID TO LOCALITIES</b>				
General Fund	420,982,000	393,982,000	393,982,000	0
Special Revenue-Other	828,238,000	861,393,000	860,203,000	(1,190,000)
Special Revenue-Federal	51,414,000	43,059,000	43,059,000	0
<b>Total for AID TO LOCALITIES</b>	<b>1,300,634,000</b>	<b>1,298,434,000</b>	<b>1,297,244,000</b>	<b>(1,190,000)</b>
<b>CAPITAL PROJECTS</b>				
Capital Projects Fund	42,750,000	42,750,000	42,750,000	0
Mental Hygiene Capital Improvement Fund-389	146,915,000	154,205,000	154,205,000	0
<b>Total for CAPITAL PROJECTS</b>	<b>189,665,000</b>	<b>196,955,000</b>	<b>196,955,000</b>	<b>0</b>

### LEGISLATIVE ACTION

The Legislature appropriates \$3.6 billion on an All Funds basis, an increase of \$23.8 million over the Executive's budget submission.

#### Legislative Reductions

The Legislature rejects the closure and restructuring of state-operated psychiatric centers and, as such, eliminates a \$5 million appropriation for a community reinvestment program that would have been funded through these closures.

## Legislative Changes

The Legislature provides:

- \$25 million to reject the elimination of the one-year notification requirement and reinvestment provisions related to closures, mergers and/or consolidations of state-operated psychiatric centers;
- \$2.3 million for veterans' peer-to-peer pilot programs;
- \$350,000 for demonstration programs for counties impacted by facility closures in State Fiscal Year (SFY) 2011-12;
- \$300,000 for FarmNet;
- \$300,000 for the NLP Research and Recognition Project;
- \$175,000 for the Nathan S. Kline Institute for Psychiatric Research;
- \$150,000 for Unlimited Potential, Inc.;
- \$100,000 for the North Country Behavioral Health Network;
- \$100,000 for the Warrior Salute program; and
- \$50,000 for the Mental Health Association in New York State, Inc.

## Article VII

The Legislature denies the proposed Article VII legislation to:

- permanently authorize the Commissioner of the Office of Mental Health (OMH) to close, consolidate, reduce services or redesign the state-operated system of care without the statutorily required 12-month notification process;
- notwithstanding the Community Mental Health Support and Workforce Reinvestment Program for one year; and
- make technical amendments to the Sex Offender Management Treatment Act.

The Legislature amends Article VII legislation to:

- authorize recovery of exempt income by allowing for such recoveries for one year, instead of the permanent authorization proposed by the Executive;
- extend the Community Mental Health Support and Workforce Reinvestment Program for two years until March 31, 2015, instead of the one year extension proposed by the Executive;
- require the Commissioner of OMH to preserve labor and collective bargaining agreements, civil service law and layoff unit structures when appointing and removing certain employees at state-operated psychiatric centers;
- authorize the Commissioner of OMH to establish Mental Health Incident Review Panels by allowing local government units to request the establishment of a panel, requiring that the final report of a panel be provided to the Legislature, requiring that annual cumulative reports to the Executive and Legislature include information on the measures that have been implemented and an evaluation of the impact of these recommendations, providing liability protections for panel members, specifying confidentiality provisions, and limiting panel membership to eliminate potential conflicts of interest;
- eliminate redundant reports by OMH by amending the OMH five-year plan to include descriptions of community support and emergency services, which shall include comprehensive psychiatric emergency programs;
- extend the existing social work and mental health licensure exemption for three years only, require exempted agencies to report on activities performed by non-licensees, and clarify that certain activities are not within scope of practice; and
- transition OMH provider reimbursement rates to a negotiated rate model under Medicaid Managed Care by delaying the transition for one year and requiring the Department of Health, the Office of Alcoholism and Substance Abuse Services, and OMH to conduct a study regarding the ability of clients to access services and the adequacy of rate setting.

The Legislature accepts the Executive proposal to defer the human services Cost of Living Adjustment (COLA) for designated human services programs for the 2013-14 fiscal year, and extends the sunset of the COLA for one year to March 31, 2017.



## Legislative Additions

The Legislature provides funding for the following:

PROGRAM	APPROPRIATION
REJECT CLOSURE OF STATE OPERATED FACILITIES	\$25,000,000
VETERAN PEER-TO-PEER PILOT PROGRAMS	\$2,285,000
PILOT PROGRAMS FOR COUNTIES IMPACTED BY FACILITY CLOSURES	\$350,000
NLP RESEARCH AND RECOGNITION PROJECT	\$300,000
FARM NET	\$300,000
NATHAN KLINE INSTITUTE FOR PSYCHIATRIC RESEARCH	\$175,000
UNLIMITED POTENTIAL, INC.	\$150,000
NORTH COUNTRY BEHAVIORAL HEALTH NETWORK	\$100,000
WARRIOR SALUTE PROGRAM	\$100,000
MENTAL HEALTH ASSOCIATION OF NEW YORK STATE (MHANYS)	\$50,000

## OFFICE FOR PEOPLE WITH DEVELOPMENTAL DISABILITIES

	Adjusted Appropriation 2012-13	Executive Request 2013-14	Legislative Appropriation 2013-14	Change
<b>STATE OPERATIONS</b>				
Special Revenue-Other	2,141,151,000	2,080,000,000	2,080,000,000	0
Special Revenue-Federal	751,000	751,000	751,000	0
Enterprise	2,657,000	2,657,000	2,657,000	0
Internal Service Fund	348,000	348,000	348,000	0
<b>Total for STATE OPERATIONS</b>	<b>2,144,907,000</b>	<b>2,083,756,000</b>	<b>2,083,756,000</b>	<b>0</b>
<b>AID TO LOCALITIES</b>				
General Fund	1,662,830,000	1,777,803,000	1,807,803,000	30,000,000
Special Revenue-Other	816,311,000	582,288,000	582,338,000	50,000
<b>Total for AID TO LOCALITIES</b>	<b>2,479,141,000</b>	<b>2,360,091,000</b>	<b>2,390,141,000</b>	<b>30,050,000</b>
<b>CAPITAL PROJECTS</b>				
Capital Projects Fund	63,930,000	65,550,000	65,550,000	0
Mental Hygiene Capital Improvement Fund-389	99,610,000	103,400,000	103,400,000	0
<b>Total for CAPITAL PROJECTS</b>	<b>163,540,000</b>	<b>168,950,000</b>	<b>168,950,000</b>	<b>0</b>

### LEGISLATIVE ACTION

The Legislature appropriates \$4.6 billion on an All Funds basis, an increase of \$30.05 million over the Executive's budget submission.

#### Legislative Changes

The Legislature provides \$30 million to support a partial restoration of the Executive's proposed Medicaid rate reductions for non-state operated residential and non-residential developmental disability providers.

The Legislature includes appropriation language to specify that any Medicaid rate reductions be implemented pursuant to a savings plan that would be developed by the Commissioner of the Office for People with Developmental Disabilities (OPWDD) in consultation with a workgroup consisting of individuals with developmental disabilities, service providers, advocates and family members. The workgroup would develop a series of recommendations for actions to mitigate the potential impact of

any funding reductions on the individuals receiving services, including the identification of administrative efficiencies and the exploration of alternative service delivery and funding mechanisms.

The Legislature provides \$50,000 for the Epilepsy Foundation of Northeastern New York.

## Article VII

The Legislature modifies proposed Article VII legislation to:

- establish Fully Integrated Duals Advantage (FIDA) programs for individuals who receive Medicaid and Medicare, by requiring a competitive process for FIDA applicants and by specifying that recipient enrollment is voluntary;
- create managed care programs for individuals with developmental disabilities called Developmental Disabilities Individual Support and Care Coordination Organizations, by providing due process protections for enrollees, establishing a quality assessment tool, and requiring that covered services include habilitation services and are provided in the most-integrated setting possible; and
- extend the existing social work and mental health licensure exemption permanently, and instead extend the exemption for three years, requires exempted agencies to report on activities performed by non-licensees, and clarifies certain activities that are not within scope of practice.

The Legislature accepts the Executive proposal to defer the human services Cost of Living Adjustment (COLA) for designated human services programs for fiscal year 2013-14, and extends the sunset of the COLA by one year, to March 31, 2017.

The Legislature accepts the Executive proposal to eliminate certain reporting requirements for OPWDD related to annual reporting activities at family care homes and other community residences.

## Legislative Additions

The Legislature provides funding for the following:

PROGRAM	APPROPRIATION
PARTIAL RESTORATION FOR NON-PROFIT PROVIDERS	\$30,000,000
EPILEPSY FOUNDATION OF NORTHEASTERN NEW YORK	\$50,000

**COMMISSION ON QUALITY OF CARE AND ADVOCACY FOR PERSONS WITH DISABILITIES**

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	Adjusted Appropriation 2012-13	Executive Request 2013-14	Legislative Appropriation 2013-14	Change
<b>STATE OPERATIONS</b>				
General Fund	6,154,000	1,379,000	1,379,000	0
Special Revenue-Other	4,185,000	1,009,000	1,009,000	0
Special Revenue-Federal	8,345,000	8,345,000	8,345,000	0
Enterprise	45,000	12,000	12,000	0
Total for STATE OPERATIONS	18,729,000	10,745,000	10,745,000	0
<b>AID TO LOCALITIES</b>				
General Fund	170,000	42,000	42,000	0
Special Revenue-Other	478,000	120,000	120,000	0
Total for AID TO LOCALITIES	648,000	162,000	162,000	0

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**LEGISLATIVE ACTION**

**The Legislature concurs with the Executive's recommendation.**

## JUSTICE CENTER FOR THE PROTECTION OF PEOPLE WITH SPECIAL NEEDS

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	Adjusted Appropriation 2012-13	Executive Request 2013-14	Legislative Appropriation 2013-14	Change
<b>STATE OPERATIONS</b>				
General Fund	0	35,306,000	35,306,000	0
Special Revenue-Other	0	8,351,000	8,351,000	0
Special Revenue-Federal	0	834,000	834,000	0
Enterprise	0	35,000	35,000	0
Total for STATE OPERATIONS	0	44,526,000	44,526,000	0
<b>AID TO LOCALITIES</b>				
General Fund	0	128,000	128,000	0
Special Revenue-Other	0	359,000	359,000	0
Total for AID TO LOCALITIES	0	487,000	487,000	0

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### LEGISLATIVE ACTION

The Legislature concurs with the Executive's recommendation.