

2004-05 Executive Budget
30-DAY AMENDMENTS

**Amendments to Senate 6058, Assembly 9558
(Health and Mental Hygiene Article VII Bill)**

Part A, relating to public health and mental hygiene initiatives, is amended to:

- Correct language that reduces Elderly Pharmaceutical Insurance Coverage (EPIC) reimbursement for non-generic drugs to Average Wholesale Price (AWP) minus 15 percent.
- Clarify that the proposed Early Intervention (EI) provider registration fee will be assessed on a triennial basis.
- Make technical changes to the Early Intervention provider certification process.
- Make a technical change regarding section numbers.
- Clarify that Early Intervention services (excluding federally mandated evaluations and service coordination) will be discontinued for children whose parents refuse to pay the required family fee.

Part D, relating to authorizing HCRA and other health care programs, is amended to:

- Modify the Family Health Plus language such that clinic services will require a co-payment similar to other office visits.
- Amend the allocations for Family Health Plus to be consistent with projected spending.
- Amend the Adult Home language to allow funds to be used for non-Medicaid as well as Medicaid eligible Adult Home residents.

Part G, relating to authorizing and restructuring the Medicaid program and containing Medicaid costs, is amended to:

- Allow the exemption of Upper Payment Limit (UPL) payments from the hospital assessments, consistent with the practice for the nursing home assessments.
- Make a technical correction to the language for capital debt refinancing for AIDS nursing homes to ensure that nursing homes refinance their capital mortgages within 120 days (or 4 months) of the enactment of the Budget and to ensure that Financial Plan savings are achieved in 2004-05.
- Modify language to eliminate local government authority to impose sanctions on non-compliant Managed Care Plans, to be consistent with other provisions that centralize contracting authority under the State instead of local districts.

- Clarify that "other practitioner" services are not eliminated from Article 16 (OMRDD), Article 31 (OMH) and Article 32 (OASAS) clinics.
- Modify language relating to Intergovernmental Transfer (IGT) payments for non-public hospitals and nursing homes, such that the hospital operated by the Erie County Medical Corporation is still authorized to receive IGT payments, consistent with existing statutory provisions that allow such payments to hospitals operated by public benefit corporations in Westchester and Nassau counties.
- Change the effective date of the pharmacy co-payment provisions from April 1, 2004 to July 1, 2004 to allow time for adequate recipient and provider notification and to be consistent with Financial Plan estimates.