

Office of Temporary and Disability Assistance

ANDREW M. CUOMO Governor **SAMUEL D. ROBERTS** Commissioner **SHARON DEVINE** Executive Deputy Commissioner

Local Commissioners Memorandum

Section 1	
Transmittal:	15-LCM-12
To:	Local District Commissioners
Issuing	
Division/Office:	Office of Budget, Finance and Data Management (OBFDM)
Date:	July 16, 2015
Subject:	Claiming Deadlines for Federal and State Reimbursement
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Attachment Available Online:	

Section 2

I. Purpose

This Local Commissioners Memorandum (LCM) notifies social services districts (SSDs) of the implementation of claiming deadlines for certain expenditure claims consistent with State Fiscal Year (SFY) 15-16 State budget provisions.

II. Background

Pursuant to Chapter 53 of the Laws of 2015, SFY 15-16 appropriation authority is available for federal and State reimbursement of eligible public assistance and adult shelter expenditure claims, provided the SFY 15-16 claiming deadlines are met.

Pursuant to Section 4 of Part F of Chapter 56 of the Laws of 2012, the federal and nonfederal shares of SSDs' Medical Assistance Administration expenditures for SFY 12-13 and thereafter have been capped. SSDs were notified of their respective non-federal caps in letters from the Department of Health (DOH) dated July 18, 2012.

Pursuant to the Enacted Budget Bill for Aid to Localities Appropriations for SFY 2015-16 to the extent that the Statewide amount of the non-federal share of SSDs' Medicaid administrative expenditures is less than the Statewide cap, DOH is authorized to allocate up to \$23.0 million from the Medical Assistance Administration Program State

Local District Administration appropriation, for the purpose of reimbursing certain SSDs for administrative expenses in excess of such districts' cap amounts as established in the DOH letter dated July 18, 2012.

III. Program Implications

Subject to the above provision, in order to obtain federal and State share reimbursement, federal and State reimbursement claims for eligible public assistance program expenditures paid from January 1, 2015, through December 31, 2015, must be final accepted on the Automated Claiming System (ACS) by **March 1, 2016**.

For New York City only, adult shelter claims for January 1, 2015, through December 31, 2015, must be final accepted on the ACS by **March 31, 2016,** in order to receive State reimbursement.

Positive claims for these programs final accepted after the above deadlines will not be paid. SSDs will see a reversal of such claims on the monthly RF2/2A settlement as a bottom line adjustment. SSDs should not submit a negative or reversal claim in the ACS as a result of these unpaid claims submitted after the deadline. If an SSD must submit a claim correcting an erroneously submitted claim and the initial claim was not paid because it was submitted after the deadline, then these claims should be identified in the comment field as Correction to Unpaid Claim S_{--} .

Public Assistance Deadline March 1, 2016, for Calendar Year 2015

• Schedule A Expenditures for Family Assistance (LDSS-187)

Line 4 – Federal Share Line 6 - State Share Column 2 – Grand Total

• Schedule C Expenditures for Safety Net Assistance (LDSS-1040)

Line 4 – Federal Share Line 6 - State Share Column 2 – Grand Total

 Schedule F Schedule of Costs for Emergency Assistance to Needy Families with Children (LDSS-1285)

> Line 4 – Federal Share Line 6 - State Share Column 2 – Total

• Schedule N TANF Funded Services (LDSS-5045)

Column 4 – Federal Share Line 17 – Total Expenditures

Adult Shelter Deadline March 31, 2016 for Calendar Year 2015 – NYC Only

• Schedule B Claiming for Adult Care, EAA and Guide/Service Dogs (LDSS-4744)

Column 3 - Private Institutions Column 4 - Public Homes Column 5 – Adult Shelters Line 4 - State Share

Monthly claims for certified Tier II shelters are included in the time limitation noted in the Public Assistance section above. However, certified Tier II shelters are also subject to the deadline in Part 900 of Social Services Regulations.

Reimbursement amounts should not be recorded as due from New York for claims accepted after the deadlines noted above. The total federal TANF expenditure amounts otherwise eligible for reimbursement had claims been received prior to the deadline and total Safety Net Assistance (SNA) FNP Maintenance of Effort (MOE) expenditures will count towards the TANF Maintenance of Effort.

Instructions for completing Schedules A, B, C, F, and N are found in the Fiscal Reference Manual (FRM) Volume 2, chapter 3 available at: <u>http://otda.state.nyenet/bfdm/finance/docs/vol02.pdf.</u>

Medicaid Admin Claiming Limitations After March 31, 2013

Effective April 1, 2013, in accordance with provisions established by Section 4 of Part F of Chapter 58 of the Laws of 2012, there will be no reimbursement made for administrative expenditures in excess of each SSD's cap amount. However, if the Statewide amount of the non-federal share of SSD's administrative expenditures is less than the Statewide cap, the reserve, up to \$23 million, may be utilized to cover SSD's expenditures in excess of their respective administrative caps. The administrative cap amounts established for each SSD for CY 2012 will remain in effect for CY 2015.

Medicaid Admin Deadline February 1, 2016 for Calendar Year 2015 and prior periods

 Schedule D-4 Calculation of Medical Assistance Eligibility Determination/Authorization/Payments Cost Shares (LDSS-2347-B2)

Section I – Calculation of Federal, State and Local Shares

Line 8 – Federal Share

- Column 2 Title XIX MA Eligibility
- Column 3 Title XIX Family Planning
- Column 4 Title XIX Personal Care
- Column 6 Working Disabled

Line 12 – State Share

Column 2 - Title XIX MA Eligibility

Column 3 - Title XIX Family Planning

Column 4 - Title XIX Personal Care

Column 6 - Working Disabled

Line 13 – Local Share Column 2 - Title XIX MA Eligibility Column 3 - Title XIX Family Planning Column 4 - Title XIX Personal Care

Section II – A-87 Costs Line 8 – Federal Share Column 2 - Title XIX MA Eligibility Column 3 - Title XIX Family Planning Column 4 - Title XIX Personal Care Column 6 - Working Disabled Line 10 – Total Local Share Column 2 - Title XIX MA Eligibility Column 3 - Title XIX Family Planning Column 4 - Title XIX Personal Care Column 6 - Working Disabled

 Schedule D-5 Calculation of Medical Assistance Policy Planning/Administration Cost Shares (LDSS-2347-B3)

Section 1 – Calculation of Federal, State, and Local Shares of Administrative Costs

Line 8 – Total Federal Share Column 2 – Family Planning Column 3 – Planning/Administration Line 10 – State Share Column 2 – Family Planning Column 3 – Planning/Administration Line 11 – Local Share Column 2 – Family Planning Column 3 – Planning/Administration Section 2 – Calculation of A-87 Costs Line 4 – Federal Share Column 2 – Family Planning Column 3 – Planning/Administration Line 5 – Local Share Column 2 – Family Planning Column 3 – Planning/Administration

• Schedule D-10 Claiming of Fraud & Abuse Administration Costs (LDSS 2347F)

Section 1 – Calculation of Shares of Administrative Costs Line 7 – Federal Share Column 5 – Medical Assistance Line 9 – State Share Column 5 – Medical Assistance Line 10 – Local Share Column 5 – Medical Assistance Section 2 – Calculation of Shares for A-87 Costs Line 7 – Federal Share Column 5 – Medical Assistance Line 8 – Local Share Column 5 – Medical Assistance

• Schedule D-6 Reimbursement Claim for Training (LDSS 2347-C)

Section 2 – Computation of Federal – State – Local Shares Line 12 – Federal Share Column 7 – Title XIX – MA-E/A Column 8 – Title XIX – MA-PROF/Policy/ADM. Line 17 – Total State Share Column 7 – Title XIX – MA-E/A Column 8 – Title XIX – MA-PROF/Policy/ADM. Line 18 – Local Share Column 7 – Title XIX – MA-E/A Column 8 – Title XIX – MA-PROF/Policy/ADM. Section 3 – Computation of A-87 Federal Share Line 3 – Federal Share Column 7 - Title XIX - MA-E/A Column 8 – Title XIX – MA-PROF/Policy/ADM. Line 4 – Local Share Column 7 – Title XIX – MA-E/A Column 8 – Title XIX – MA-PROF/Policy/ADM.

In order to be counted against the SFY 15-16 ceiling, original and supplemental claims for Medical Assistance administrative expenditures for effective dates of January 1 through December 31, 2015, and prior period claims, must be accepted by **February 1**, **2016**. Claims accepted after this date will be counted against the SFY 16-17 ceiling.

The deadline for claiming SFY 14-15 State Medical Assistance administrative expenditures was extended from February 2, 2015 to February 9, 2015. Therefore, State Medical Assistance Administrative claims for SFY 15-16 shall be those accepted beginning **February 10, 2015**.

Instructions for completing Schedules D-4, D-5, D-10 and D-6 are found in the Fiscal Reference Manual (FRM) Volume 3, chapters 11, 12, 16 and 13 available at: http://otda.state.nyenet/bfdm/finance/docs/vol03.pdf

Based on the claims submitted for payment through February 1, 2016, DOH will establish final expenditure totals for the federal and non-federal share of SSD administrative costs for each SSD for SFY 2015-16.

The New York State Division of the Budget shall finalize the cap amounts, and authorize payment for any amounts owed from the supplemental funding by March 1, 2016.

Issued By Name: Nancy Maney Title: Director Division/Office: Office of Budget, Finance & Data Management