STATE OF NEW YORK

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A. 3007--B

SENATE - ASSEMBLY

January 23, 2017

- IN SENATE -- A BUDGET BILL, submitted by the Governor pursuant to article seven of the Constitution -- read twice and ordered printed, and when printed to be committed to the Committee on Finance -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee
- IN ASSEMBLY -- A BUDGET BILL, submitted by the Governor pursuant to article seven of the Constitution -- read once and referred to the Committee on Ways and Means -- committee discharged, bill amended, ordered reprinted as amended and recommitted to said committee -again reported from said committee with amendments, ordered reprinted as amended and recommittee to said committee
- AN ACT intentionally omitted (Part A); intentionally omitted (Part B); intentionally omitted (Part C); to amend the public health law, in relation to controlling drug costs; to amend the social services law, in relation to the drug utilization review board; to amend the social services law, in relation to Medicaid reimbursement of covered outpatient drugs; to authorize the suspension of a provider's Medicaid enrollment for inappropriate prescribing of opioids; to amend the social services law, in relation to refills of controlled substances; to amend the social services law, in relation to reducing Medicaid coverage and increasing copayments for non-prescription drugs, to aligning pharmacy copayment requirements with federal regulations, and to adjusting consumer price index penalties for generic drugs (Part D); to amend the social services law, in relation to fiscal intermediary certification under the consumer directed personal assistance program; and to amend the public health law, in relation to reserved bed days and establishing a prospective per diem adjustment for certain nursing homes (Part E); intentionally omitted (Part F); to amend part H of chapter 59 of the laws of 2011, amending the public health law and other laws relating to known and projected department of health state fund medicaid expenditures, in relation to extending the Medicaid global cap (Part G); to amend the New York Health Care Reform Act of 1996, in relation to extending certain provisions relating thereto; to amend the New York Health Care Reform Act of 2000, in relation to extending the effectiveness of provisions thereof; to

EXPLANATION--Matter in <u>italics</u> (underscored) is new; matter in brackets
[] is old law to be omitted.

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amend the public health law, in relation to the distribution of pool allocations and graduate medical education; to amend the public health in relation to health care initiative pool distributions; to law, amend the social services law, in relation to extending payment provisions for general hospitals; to amend the public health law, in relation to the assessments on covered lives; to amend chapter 600 of the laws of 1986 amending the public health law relating to the development of pilot reimbursement programs for ambulatory care services, in relation to the effectiveness thereof; to amend chapter 520 of the laws of 1978 relating to providing for a comprehensive survey of health care financing, education and illness prevention and creating councils for the conduct thereof, in relation to the effectiveness thereof; to amend the public health law and the social services law, in relation to rates of payment for personal care services workers; to amend the public health law, in relation to the comprehensive diagnostic and treatment centers indigent care program; to amend chapter 62 of the laws of 2003 amending the general business law and other laws relating to enacting major components necessary to implement the state fiscal plan for the 2003-04 state fiscal year, in relation to the deposit of certain funds; to amend chapter 266 of the laws of 1986, amending the civil practice law and rules and other laws relating to malpractice and professional medical conduct, in relation to apportioning premium for certain policies; to amend part J of chapter 63 of the laws of 2001 amending chapter 266 of the laws of 1986, amending the civil practice law and rules and other laws relating to malpractice and professional medical conduct, in relation to extending certain provisions concerning the hospital excess liability pool; and to amend the public health law, in relation to tobacco control and insurance initiatives pool distributions (Part H); to amend chapter 884 of the laws of 1990, amending the public health law relating to authorizing bad debt and charity care allowances for certified home health agencies, in relation to the effectiveness thereof; to amend chapter 60 of the laws of 2014 amending the social services law relating to eliminating prescriber prevails for brand name drugs with generic equivalents, in relation to the effectiveness thereof; to amend the public health law, in relation to extending the nursing home cash assessment; to amend chapter 474 of the laws of 1996, amending the education law and other laws relating to rates for residential health care facilities, in relation to the effectiveness thereof; to amend chapter 58 of the laws of 2007, amending the social services law and other laws relating to enacting the major components of legislation necessary to implement the health and mental hygiene budget for the 2007-2008 state fiscal year, in relation to delay of certain administrative cost; to amend chapter 81 of the laws of 1995, amending the public health law and other laws relating to medical reimbursement and welfare reform, in relation to the effectiveness thereof; to amend chapter 109 of the laws of 2010, amending the social services law relating to transportation costs, in relation to the effectiveness thereof; to amend chapter 56 of the laws of 2013 amending chapter 59 the laws of 2011, amending the public health law and other laws of relating to general hospital reimbursement for annual rates relating to the cap on local Medicaid expenditures, in relation to the effectiveness thereof; to amend chapter 2 of the laws of 1998, amending the public health law and other laws relating to expanding the child health insurance plan, in relation to the effectiveness thereof; to amend chapter 19 of the laws of 1998, amending the social services law



relating to limiting the method of payment for prescription drugs under the medical assistance program, in relation to the effectiveness thereof; to amend the public health law, in relation to continuing nursing home upper payment limit payments; to amend chapter 904 of the laws of 1984, amending the public health law and the social services law relating to encouraging comprehensive health services, in relation to the effectiveness thereof; to amend chapter 62 of the laws of 2003, amending the public health law relating to allowing for the use of funds of the office of professional medical conduct for activities of the patient health information and quality improvement act of 2000, in relation to extending the provisions thereof; to amend chapter 59 of the laws of 2011, amending the public health law relating to the statewide health information network of New York and the statewide planning and research cooperative system and general powers and duties, in relation to the effectiveness thereof; to amend chapter 58 of the laws of 2008, amending the elder law and other laws relating to reimbursement to participating provider pharmacies and prescription drug coverage, in relation to extending the expiration of certain provisions thereof; and to amend the public health law, in relation to issuance of certificates of authority to accountable care organizations (Part I); intentionally omitted (Part J); intentionally omitted (Part K); intentionally omitted (Part L); to amend the public health law, in relation to emerging contaminant monitoring (Part M); intentionally omitted (Part N); intentionally omitted (Part O); to amend chapter 56 of the laws of 2013 amending chapter 59 of the laws of 2011 amending the public health law and other laws relating to general hospital reimbursement for annual rates relating to the cap on local Medicaid expenditures, in relation to extending government rates for behavioral services and adding an alternative payment methodology requirement; and to amend chapter 111 of the laws of 2010 relating to increasing Medicaid payments to providers through managed care organizations and providing equivalent fees through an ambulatory patient group methodology, in relation to extending government rates for behavioral services and adding an alternative payment methodology requirement (Part P); to amend part C of chapter 57 of the laws of 2006, relating to establishing a cost of living adjustment for designated human services programs, in relation to providing funding to increase salaries and related fringe benefits to direct care workers, direct support professionals and clinical workers employed by not-forprofits funded by the office for people with developmental disabilities, the office of mental health and the office of alcoholism and substance abuse services (Part Q); to amend the public health law, in relation to establishing the drinking water quality council (Part R); amend the social services law, in relation to health homes; to to amend the social services law, in relation to managed care programs; to amend the social services law, in relation to pasteurized donor human milk and ovulation enhancing drugs; to amend the public health law, in relation to home care worker wage parity; in relation to authorizing the commissioner of health to sell accounts receivables balances owed to the state by Medicaid providers to financial institutions; and providing for the expiration of certain provisions (Part S); and to amend the environmental conservation law, the public health law, the public authorities law, the state finance law and the soil and water conservation districts law, in relation to the implementation of the "clean water infrastructure act of 2017" (Part T)



The People of the State of New York, represented in Senate and Assembly, do enact as follows:

Section 1. This act enacts into law major components of legislation which are necessary to implement the state fiscal plan for the 2017-2018 state fiscal year. Each component is wholly contained within a Part identified as Parts A through T. The effective date for each particular provision contained within such Part is set forth in the last section of such Part. Any provision in any section contained within a Part, includ-ing the effective date of the Part, which makes a reference to a section "of this act", when used in connection with that particular component, shall be deemed to mean and refer to the corresponding section of the Part in which it is found. Section three of this act sets forth the general effective date of this act.

12	PART A
13	Intentionally Omitted
14	PART B
15	Intentionally Omitted
16	PART C
17	Intentionally Omitted
18	PART D
19 20 21 22	Section 1. The public health law is amended by adding a new section 280 to read as follows: § 280. Medicaid drug cap. 1. The legislature hereby finds and declares that there is a significant public interest for the Medicaid
23	program to manage drug costs in a manner that ensures patient access
24	while providing financial stability for the state and participating
25	providers. Since two thousand eleven, the state has taken significant
26	steps to contain costs in the Medicaid program by imposing a statutory
27	limit on annual growth. Drug expenditures, however, continually outpace
28	other cost components causing significant pressure on the state, provid-
29	ers, and patient access operating under the Medicaid global cap. It is
30	therefore intended that the department establish a Medicaid drug cap as
31	a separate component within the Medicaid global cap as part of a focused
32	and sustained effort to balance the growth of drug expenditures with the
33	growth of total Medicaid expenditures.
34	2. The commissioner shall establish a year to year department of
35	health state-funds Medicaid drug spending growth target as follows:
36	(a) for state fiscal year two thousand seventeen two thousand eigh-
37	teen, be limited to the ten-year rolling average of the medical compo-
38	nent of the consumer price index plus five percent and minus a pharmacy
39	savings target of fifty-five million dollars; and
40	(b) for state fiscal year two thousand eighteentwo thousand nine- teen, be limited to the ten-year rolling average of the medical compo-
41 42	nent of the consumer price index plus four percent and minus a pharmacy
42 43	savings target of eighty-five million dollars.
43 44	3. The department and the division of the budget shall assess on a
45	quarterly basis the projected total amount to be expended in the year on



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a cash basis by the Medicaid program for each drug, and the projected 1 2 annual amount of drug expenditures for all drugs, which shall be a 3 component of the projected department of health state funds Medicaid expenditures calculated for purposes of sections ninety-one and ninety-4 5 two of part H of chapter fifty-nine of the laws of two thousand eleven. 6 For purposes of this section, state funds Medicaid drug expenditures 7 include amounts expended for drugs in both the Medicaid fee-for-service 8 and Medicaid managed care programs, minus the amount of any drug rebates 9 or supplemental drug rebates received by the department, including 10 rebates pursuant to subdivision five of this section with respect to 11 <u>rebate targets.</u> 12 (a) In the event the director of the budget determines, based on Medi-13 caid drug expenditures for the previous quarter or other relevant infor-14 mation, that the total department of health state funds Medicaid drug 15 expenditure is projected to exceed the annual growth limitation imposed 16 by subdivision two of this section, the commissioner may identify and 17 refer drugs to the drug utilization review board established by section 18 three hundred sixty-nine-bb of the social services law for a recommendation as to whether a target supplemental Medicaid rebate should be paid 19 20 by the manufacturer of the drug to the department and the target amount 21 <u>of the rebate.</u> 22 (b) If the department intends to refer a drug to the drug utilization 23 review board pursuant to paragraph (a) of this subdivision, the department shall notify the manufacturer of such drug and shall attempt to 24 25 reach agreement with the manufacturer on a rebate for the drug prior to referring the drug to the drug utilization review board for review. 26 27 (c) In the event that the commissioner and the manufacturer have 28 previously agreed to a supplemental rebate for a drug pursuant to para-29 graph (b) of this subdivision or paragraph (e) of subdivision seven of section three hundred sixty-seven-a of the social services law, the drug 30 shall not be referred to the drug utilization review board for any 31 32 further supplemental rebate for the duration of the previous rebate 33 agreement. (d) The department shall consider a drug's actual cost to the state, 34 including current rebate amounts, prior to seeking an additional rebate 35 36 pursuant to paragraph (b) or (c) of this subdivision and shall take into 37 consideration whether the manufacturer of the drug is providing signif-38 icant discounts relative to other drugs covered by the Medicaid program. 39 (e) The commissioner shall be authorized to take the actions described 40 in this section only so long as total Medicaid drug expenditures are 41 projected to exceed the annual growth limitation imposed by subdivision 42 two of this section. 43 4. In determining whether to recommend a target supplemental rebate 44 for a drug, the drug utilization review board shall consider the actual 45 cost of the drug to the Medicaid program, including federal and state 46 rebates, and may consider, among other things: 47 (a) the drug's impact on the Medicaid drug spending growth target and 48 the adequacy of capitation rates of participating Medicaid managed care 49 plans, and the drug's affordability and value to the Medicaid program; 50 or 51 (b) significant and unjustified increases in the price of the drug; or 52 (c) whether the drug may be priced disproportionately to its therapeu-53 tic benefits. 54 5. (a) If the drug utilization review board recommends a target rebate 55 amount on a drug referred by the commissioner, the commissioner shall require a supplemental rebate to be paid by the drug's manufacturer in 56



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an amount not to exceed such target rebate amount. With respect to a 1 2 rebate required in state fiscal year two thousand seventeen -- two thou-3 sand eighteen, the rebate requirement shall apply beginning with the month of April, two thousand seventeen, without regard to the date the 4 5 department enters into the rebate agreement with the manufacturer. 6 (b) The supplemental rebate required by paragraph (a) of this subdivi-7 sion shall apply to drugs dispensed to enrollees of managed care provid-8 ers pursuant to section three hundred sixty-four-j of the social 9 services law and to drugs dispensed to Medicaid recipients who are not 10 enrollees of such providers. (c) If the drug utilization review board recommends a target rebate 11 12 amount for a drug and the department is unable to negotiate a rebate 13 from the manufacturer in an amount that is at least seventy-five percent 14 of the target rebate amount, the commissioner is authorized to waive the 15 provisions of paragraph (b) of subdivision three of section two hundred 16 seventy-three of this article and the provisions of subdivisions twen-17 ty-five and twenty-five-a of section three hundred sixty-four-j of the social services law with respect to such drug; however, this waiver 18 shall not be implemented in situations where it would prevent access by 19 20 a Medicaid recipient to a drug which is the only treatment for a partic-21 ular disease or condition. Under no circumstances shall the commission-22 er be authorized to waive such provisions with respect to more than two 23 drugs in a given time. 24 (d) Where the department and a manufacturer enter into a rebate agree-25 ment pursuant to this section, which may be in addition to existing rebate agreements entered into by the manufacturer with respect to the 26 27 same drug, no additional rebates shall be required to be paid by the 28 manufacturer to a managed care provider or any of a managed care provider's agents, including but not limited to any pharmacy benefit manager, 29 30 while the department is collecting the rebate pursuant to this section. 31 (e) In formulating a recommendation concerning a target rebate amount 32 for a drug, the drug utilization review board may consider: (i) publicly available information relevant to the pricing of the 33 34 <u>drug;</u> (ii) information supplied by the department relevant to the pricing of 35 36 the drug; 37 (iii) information relating to value-based pricing; 38 (iv) the seriousness and prevalence of the disease or condition that is treated by the drug; 39 40 (v) the extent of utilization of the drug; 41 (vi) the effectiveness of the drug in treating the conditions for 42 which it is prescribed, or in improving a patient's health, quality of 43 life, or overall health outcomes; 44 (vii) the likelihood that use of the drug will reduce the need for 45 other medical care, including hospitalization; 46 (viii) the average wholesale price, wholesale acquisition cost, retail 47 price of the drug, and the cost of the drug to the Medicaid program 48 minus rebates received by the state; 49 (ix) in the case of generic drugs, the number of pharmaceutical 50 manufacturers that produce the drug; 51 (x) whether there are pharmaceutical equivalents to the drug; and 52 (xi) information supplied by the manufacturer, if any, explaining the 53 relationship between the pricing of the drug and the cost of development of the drug and/or the therapeutic benefit of the drug, or that is 54 otherwise pertinent to the manufacturer's pricing decision; any such 55 information provided shall be considered confidential and shall not be 56



disclosed by the drug utilization review board in a form that identifies 1 2 a specific manufacturer or prices charged for drugs by such manufactur-3 er. 4 6. (a) If the drug utilization review board recommends a target rebate amount and the department is unsuccessful in entering into a rebate 5 6 agreement with the manufacturer of the drug satisfactory to the depart-7 ment, the drug manufacturer shall in that event be required to provide 8 to the department, on a standard reporting form developed by the depart-9 ment, the following information: 10 (i) the actual cost of developing, manufacturing, producing (including 11 the cost per dose of production), and distributing the drug; 12 (ii) research and development costs of the drug, including payments to 13 predecessor entities conducting research and development, such as 14 biotechnology companies, universities and medical schools, and private 15 research institutions; 16 (iii) administrative, marketing, and advertising costs for the drug, 17 apportioned by marketing activities that are directed to consumers, 18 marketing activities that are directed to prescribers, and the total 19 cost of all marketing and advertising that is directed primarily to 20 consumers and prescribers in New York, including but not limited to 21 prescriber detailing, copayment discount programs, and direct-to-consum-22 er marketing; 23 (iv) the extent of utilization of the drug; 24 (v) prices for the drug that are charged to purchasers outside the 25 United States; 26 (vi) prices charged to typical purchasers in the state, including but 27 not limited to pharmacies, pharmacy chains, pharmacy wholesalers, or 28 other direct purchasers; 29 (vii) the average rebates and discounts provided per payer type in the 30 State; and 31 (viii) the average profit margin of each drug over the prior five-year 32 period and the projected profit margin anticipated for such drug. 33 (b) All information disclosed pursuant to paragraph (a) of this subdi-34 vision shall be considered confidential and shall not be disclosed by 35 the department in a form that identifies a specific manufacturer or 36 prices charged for drugs by such manufacturer. 37 7. (a) If, after taking into account all rebates and supplemental 38 rebates received by the department, including rebates received to date 39 pursuant to this section, total Medicaid drug expenditures are still 40 projected to exceed the annual growth limitation imposed by subdivision 41 two of this section, the commissioner of health may: subject drugs to 42 prior approval in accordance with existing processes and procedures, 43 which may include all drugs of a manufacturer that has not entered into 44 a supplemental rebate agreement required by this section; directing 45 managed care plans to remove from their Medicaid formularies those drugs 46 with respect to which a manufacturer has failed to enter into a rebate 47 agreement required by this section; promoting the use of cost effective 48 and clinically appropriate drugs other than those of a manufacturer who 49 has failed to enter into a rebate agreement required by this section; 50 allowing manufacturers to accelerate rebate payments under existing 51 rebate contracts; and such other actions as authorized by law. The 52 commissioner shall provide written notice to the legislature thirty days 53 prior to taking action pursuant to this paragraph, unless action is necessary in the fourth quarter of a fiscal year to prevent total Medi-54 55 caid drug expenditures from exceeding the limitation imposed by subdivi-



1 sion two of this section, in which case such notice to the legislature 2 may be less than thirty days. (b) The commissioner shall be authorized to take the actions described 3 in paragraph (a) of this subdivision only so long as total Medicaid drug 4 expenditures are projected to exceed the annual growth limitation 5 6 imposed by subdivision two of this section. In addition, no such 7 actions shall be deemed to supersede the provisions of paragraph (b) of 8 subdivision three of section two hundred seventy-three of this article or the provisions of subdivisions twenty-five and twenty-five-a of 9 section three hundred sixty-four-j of the social services law, except as 10 allowed by paragraph (c) of subdivision five of this section; provided 11 12 further that nothing in this section shall prevent access by a Medicaid 13 recipient to a drug which is the only treatment for a particular disease 14 or condition. 15 § 2. Subdivisions 1 and 2 of section 369-bb of the social services 16 law, as amended by section 20 of part A of chapter 56 of the laws of 17 2013, are amended to read as follows: 18 1. A [nineteen-member] <u>twenty-three-member</u> drug utilization review 19 board is hereby created in the department. The board is responsible for the establishment and implementation of medical standards and criteria 20 21 for the retrospective and prospective DUR program. 22 2. The members of the DUR board shall be appointed by the commissioner 23 and shall serve a three-year term. Members may be reappointed upon the 24 completion of other terms. The membership shall be comprised of the 25 following: (a) Six persons licensed and actively engaged in the practice of medi-26 27 cine in the state, with expertise in the areas of mental health, 28 HIV/AIDS, geriatrics, pediatrics or internal medicine and who may be selected based on input from professional associations and/or advocacy 29 30 groups in New York state. 31 (b) Six persons licensed and actively practicing in pharmacy in the 32 state who may be selected based on input from professional associations 33 and/or advocacy groups in New York state. (c) Two persons with expertise in drug utilization review who are 34 35 health care professionals licensed under Title VIII of the education law 36 at least one of whom is a pharmacologist. 37 (d) Three persons that are consumers or consumer representatives of 38 organizations with a regional or statewide constituency and who have 39 been involved in activities related to health care consumer advocacy, 40 including issues affecting Medicaid or EPIC recipients. 41 (e) One person licensed and actively practicing as a nurse practition-42 er or midwife. 43 (f) Two persons who are health care economists. 44 (g) One person who is an actuary. 45 (h) One person representing the department of financial services. 46 (i) The commissioner shall designate a person from the department to 47 serve as chairperson of the board. § 3. Paragraphs (g), (h), and (i) of subdivision 8 of section 369-bb 48 49 of the social services law are relettered paragraphs (h), (i), and (j) 50 and a new paragraph (g) is added to read as follows: 51 (g) The evaluation of specific drugs submitted to the board for review 52 pursuant to section two hundred eighty of the public health law, and the 53 formulation of recommended target supplemental rebates, in accordance with the standards established in such section. 54 55 § 4. Intentionally omitted.

56 § 5. Intentionally omitted.



1 § 6. Intentionally omitted. 2 § 7. The opening paragraph and subparagraphs (i) and (ii) of paragraph (b) and paragraph (d) of subdivision 9 of section 367-a of the social 3 services law, the opening paragraph and paragraph (d) as amended by 4 chapter 19 of the laws of 1998, subparagraphs (i) and (ii) of paragraph 5 6 (b) as amended by section 2 of part C of chapter 60 of the laws of 2014, 7 subparagraph (i) of paragraph (d) as amended by section 10-a of part H of chapter 59 of the laws of 2011 and subparagraph (ii) of paragraph (d) 8 as amended by section 48 of part C of chapter 58 of the laws of 2009, 9 10 are amended to read as follows: Notwithstanding any inconsistent provision of law or regulation to the 11 12 contrary, for those drugs which may not be dispensed without a 13 prescription as required by section sixty-eight hundred ten of the 14 education law and for which payment is authorized pursuant to paragraph 15 (g) of subdivision two of section three hundred sixty-five-a of this 16 title, and for those drugs that are available without a prescription as 17 required by section sixty-eight hundred ten of the education law but are 18 reimbursed as items of medical assistance pursuant to paragraph (a) of 19 subdivision four of section three hundred sixty-five-a of this title, 20 payments under this title shall be made at the following amounts: 21 (i) [if the drug dispensed is a multiple source prescription drug for 22 which an upper limit has been set by the federal centers for medicare and medicaid services, the lower of: (A) an amount equal to the specific 23 upper limit set by such federal agency for the multiple source 24 prescription drug; (B) the estimated acquisition cost of such drug to 25 pharmacies which, for purposes of this subparagraph, shall mean the 26 27 average wholesale price of a prescription drug based on the package size 28 dispensed from, as reported by the prescription drug pricing service 29 used by the department, less twenty-five percent thereof; (C) the maximum acquisition cost, if any, established pursuant to paragraph (e) of 30 subdivision, provided that the methodology used by the department 31 this to establish a maximum acquisition cost shall not include average acqui-32 33 sition cost as determined by department surveys; or (D) the dispensing 34 pharmacy's usual and customary price charged to the general public; and] 35 (A) if the drug dispensed is a generic prescription drug, the lower of: 36 (1) an amount equal to the national average drug acquisition cost set by 37 the federal centers for medicare and medicaid services for the drug, if 38 any, or if such amount if not available, the wholesale acquisition cost 39 of the drug based on the package size dispensed from, as reported by the 40 prescription drug pricing service used by the department, less seventeen 41 and one-half percent thereof; (2) the federal upper limit, if any, 42 established by the federal centers for medicare and medicaid services; 43 (3) the state maximum acquisition cost, if any, established pursuant to 44 paragraph (e) of this subdivision; or (4) the dispensing pharmacy's 45 usual and customary price charged to the general public; (B) if the drug 46 dispensed is available without a prescription as required by section 47 sixty-eight hundred ten of the education law but is reimbursed as an 48 item of medical assistance pursuant to paragraph (a) of subdivision four 49 of section three hundred sixty-five-a of this title, the lower of (1) an 50 amount equal to the national average drug acquisition cost set by the 51 federal centers for medicare and medicaid services for the drug, if any, 52 or if such amount is not available, the wholesale acquisition cost of 53 the drug based on the package size dispensed from, as reported by the 54 prescription drug pricing service used by the department, (2) the feder-55 al upper limit, if any, established by the federal centers for medicare 56 and medicaid services; (3) the state maximum acquisition cost if any,



1 established pursuant to paragraph (e) of this subdivision; or (4) the 2 dispensing pharmacy's usual and customary price charged to the general 3 public;

4 (ii) if the drug dispensed is [a multiple source prescription drug or] a brand-name prescription drug [for which no specific upper limit has 5 been set by such federal agency], the lower of [the estimated acquisi-6 7 tion cost of such drug to pharmacies or the dispensing pharmacy's usual 8 and customary price charged to the general public. For sole and multiple source brand name drugs, estimated acquisition cost means the average 9 wholesale price of a prescription drug based upon the package size 10 dispensed from, as reported by the prescription drug pricing service 11 12 used by the department, less seventeen percent thereof or the wholesale 13 acquisition cost of a prescription drug based upon package size 14 dispensed from, as reported by the prescription drug pricing service 15 used by the department, minus zero and forty-one hundredths percent 16 thereof, and updated monthly by the department. For multiple source 17 generic drugs, estimated acquisition cost means the lower of the average 18 wholesale price of a prescription drug based on the package size 19 dispensed from, as reported by the prescription drug pricing service 20 used by the department, less twenty-five percent thereof, or the maximum 21 acquisition cost, if any, established pursuant to paragraph (e) of this 22 subdivision, provided that the methodology used by the department to 23 establish a maximum acquisition cost shall not include average acquisi-24 tion cost as determined by department surveys.]:

(A) an amount equal to the national average drug acquisition cost set by the federal centers for medicare and medicaid services for the drug, if any, or if such amount is not available, the wholesale acquisition cost of the drug based on the package size dispensed from, as reported by the prescription drug pricing service used by the department, less three and three-tenths percent thereof; or (B) the dispensing pharmacy's usual and customary price charged to the general public; and

32 (d) In addition to the amounts paid pursuant to paragraph (b) of this 33 subdivision [to pharmacies for those drugs which may not be dispensed 34 without a prescription, as required by section sixty-eight hundred ten 35 of the education law and for which payment is authorized pursuant to paragraph (g) of subdivision two of section three hundred sixty-five-a 36 of this title], the department shall pay a professional pharmacy 37 38 dispensing fee for each such [prescription] drug dispensed[, which 39 dispensing fee shall not be less than the following amounts:

40 (i) for prescription drugs categorized as generic by the prescription 41 drug pricing service used by the department, three dollars and fifty 42 cents per prescription; and

43 (ii) for prescription drugs categorized as brand-name prescription 44 drugs by the prescription drug pricing service used by the department, 45 three dollars and fifty cents per prescription, provided, however, that 46 for brand name prescription drugs reimbursed pursuant to subparagraph 47 of paragraph (a-1) of subdivision four of section three hundred (ii) sixty-five-a of this title, the dispensing fee shall be four dollars and 48 49 fifty cents per prescription] in the amount of ten dollars per prescription or written order of a practitioner; provided, however that 50 51 this professional dispensing fee will not apply to drugs that are avail-52 able without a prescription as required by section sixty-eight hundred 53 ten of the education law but do not meet the definition of a covered 54 outpatient drug pursuant to Section 1927K of the Social Security Act.

55 § 8. It shall be an unacceptable practice in the Medicaid program 56 established pursuant to title 11 of article 5 of the social services law



1 for a provider to prescribe opioids in violation of the requirements of 2 paragraph (g-1) of subdivision 2 of section 365-a of such law, in violation of any other applicable law limiting or restricting the 3 prescribing of opioids, and/or contrary to recommendations issued by the 4 drug utilization review board established by section 369-bb of the 5 social services law, and such practice may result in the provider being 6 7 excluded from participation in the Medicaid program. No exclusion or 8 other sanction of a Medicaid provider pursuant to this section shall be imposed except in accordance with the requirements of parts 515, 517 and 9 of title 18 of the codes, rules and regulations of the State of New 10 519 11 York (NYCRR), and nothing herein shall be construed as limiting the due 12 process rights or legal remedies that would otherwise be available to 13 such a provider.

14 § 9. Paragraph (g-1) of subdivision 2 of section 365-a of the social 15 services law, as amended by section 5 of part C of chapter 60 of the 16 laws of 2014, is amended to read as follows:

17 (g-1) drugs provided on an in-patient basis, those drugs contained on 18 the list established by regulation of the commissioner of health pursu-19 ant to subdivision four of this section, and those drugs which may not 20 be dispensed without a prescription as required by section sixty-eight 21 hundred ten of the education law and which the commissioner of health 22 shall determine to be reimbursable based upon such factors as the avail-23 ability of such drugs or alternatives at low cost if purchased by a 24 medicaid recipient, or the essential nature of such drugs as described 25 by such commissioner in regulations, provided, however, that such drugs, 26 exclusive of long-term maintenance drugs, shall be dispensed in quanti-27 ties no greater than a thirty day supply or one hundred doses, whichever 28 is greater; provided further that the commissioner of health is author-29 ized to require prior authorization for any refill of a prescription when more than a ten day supply of the previously dispensed amount 30 should remain were the product used as normally indicated, or in the 31 32 case of a controlled substance, as defined in section thirty-three 33 hundred two of the public health law, when more than a seven day supply 34 of the previously dispensed amount should remain were the product used 35 as normally indicated; provided further that the commissioner of health 36 is authorized to require prior authorization of prescriptions of opioid 37 analgesics in excess of four prescriptions in a thirty-day period in 38 accordance with section two hundred seventy-three of the public health 39 law; medical assistance shall not include any drug provided on other 40 than an in-patient basis for which a recipient is charged or a claim is 41 made in the case of a prescription drug, in excess of the maximum reim-42 bursable amounts to be established by department regulations in accord-43 ance with standards established by the secretary of the United States 44 department of health and human services, or, in the case of a drug not 45 requiring a prescription, in excess of the maximum reimbursable amount 46 established by the commissioner of health pursuant to paragraph (a) of 47 subdivision four of this section;

- § 10. Intentionally omitted. 48
- 49 § 11. Intentionally omitted.
- 50 § 12. Intentionally omitted.
- 51
- § 13. Intentionally omitted.
- 52 § 14. Intentionally omitted.
- 53 § 15. Intentionally omitted.

§ 16. Subparagraph (iii) of paragraph (c) of subdivision 6 of section 54 367-a of the social services law, as amended by section 9 of part C of 55 chapter 60 of the laws of 2014, is amended to read as follows: 56



1 (iii) Notwithstanding any other provision of this paragraph, co-pay-2 ments charged for each generic prescription drug dispensed shall be one dollar and for each brand name prescription drug dispensed shall be 3 [three dollars] two dollars and fifty cents; provided, however, that the 4 co-payments charged for [each brand name prescription drug on the 5 preferred drug list established pursuant to section two hundred seven-6 7 ty-two of the public health law or, for managed care providers operating 8 pursuant to section three hundred sixty-four-j of this title, for each brand name prescription drug on a managed care provider's formulary that 9 such provider has designated as a preferred drug, and the co-payments 10 11 charged for] each brand name prescription drug reimbursed pursuant to 12 subparagraph (ii) of paragraph (a-1) of subdivision four of section 13 three hundred sixty-five-a of this title shall be one dollar. 14 § 17. Subparagraphs 1 and 5 of paragraph (f) of subdivision 7 of 15 section 367-a of the social services law, as added by section 11 of part 16 B of chapter 59 of the laws of 2016, are amended to read as follows: 17 (1) The department may require manufacturers of drugs other than 18 single source drugs and innovator multiple source drugs, as such terms 19 are defined in 42 U.S.C. § 1396r-8(k), to provide rebates to the depart-20 ment for any drug that has increased more than three hundred percent of 21 its state maximum acquisition cost (SMAC) [, on or after] during the 22 period April 1, 2016 through March thirty-first, two thousand seventeen, 23 or that has increased more than seventy-five percent of its SMAC on or after April first, two thousand seventeen, in comparison to its SMAC at 24 25 any time during the course of the preceding twelve months. The required rebate shall be limited to the amount by which the current SMAC for the 26 27 drug exceeds [three hundred percent] the applicable percentage of the 28 SMAC for the same drug at any time during the course of the preceding 29 twelve months. Such rebates shall be in addition to any rebates payable to the department pursuant to any other provision of federal or state 30 law. Nothing herein shall affect the department's obligation to reim-31 32 burse for covered outpatient drugs pursuant to paragraph (d) of this 33 subdivision.

(5) Beginning in two thousand seventeen, the department shall provide an annual report to the legislature no later than February first setting forth:

(i) The number of drugs that exceeded the ceiling price established in
this paragraph during the preceding year in comparison to the number of
drugs that experienced at least a three hundred percent price increase
during two thousand fourteen and two thousand fifteen, or at least a
seventy-five percent price increase during two thousand fifteen and two
thousand sixteen;

(ii) The average percent amount above the ceiling price of drugs that exceeded the ceiling price in the preceding year in comparison to the number of drugs that experienced a price increase more than three hundred percent during two thousand fourteen and two thousand fifteen, or at least a seventy-five percent price increase during two thousand fifteen and two thousand sixteen;

(iii) The number of generic drugs available to enrollees in Medicaid for fee for service or Medicaid managed care, by fiscal quarter, in the preceding year in comparison to the drugs available, by fiscal quarter, during two thousand fourteen [and], two thousand fifteen, and two thousand sixteen; and

(iv) The total drug spend on generic drugs for the preceding year in 55 comparison to the total drug spend on generic drugs during two thousand 56 fourteen [and], two thousand fifteen, and two thousand sixteen.



24

1 § 18. Severability. If any clause, sentence, paragraph, or subdivi-2 sion of this section shall be adjudged by any court of competent jurisdiction to be invalid, such judgment shall not affect, impair, or inval-3 idate the remainder thereof, but shall be confined in its operation to 4 5 the clause, sentence, paragraph, or subdivision directly involved in the controversy in which such judgment shall have been rendered. It is here-6 by declared to be the intent of the legislature that this section would 7 8 have been enacted even if such invalid provisions had not been included 9 herein.

This act shall take effect immediately and shall be deemed to 10 S 19. 11 have been in full force and effect on and after April 1, 2017; provided, 12 however, that sections nine, sixteen, and seventeen of this act shall 13 take effect July 1, 2017; provided, further, that the amendments to 14 paragraph (c) of subdivision 6 of section 367-a of the social services 15 law made by section sixteen of this act shall not affect the repeal of 16 such paragraph and shall be deemed repealed therewith; provided, further, that the amendments to paragraph (f) of subdivision 7 of 17 18 section 367-a of the social services law made by section seventeen of 19 this act shall not affect the repeal of such paragraph and shall be deemed repealed therewith; and provided, further, that the amendments to 20 21 subdivision 9 of section 367-a of the social services law made by 22 section seven of this act shall not affect the expiration of such subdi-23 vision and shall be deemed to expire therewith.

PART E

25 Section 1. Section 365-f of the social services law is amended by 26 adding two new subdivisions 4-a and 4-b to read as follows: 27 4-a. Fiscal intermediary services. (a) For the purposes of this 28 section: 29 (i) "Fiscal intermediary" means an entity that provides fiscal intermediary services and has a contract for providing such services with: 30 31 (A) a local department of social services; 32 (B) an organization licensed under article forty-four of the public 33 health law; or 34 (C) an accountable care organization certified under article twenty-35 nine-E of the public health law or an integrated delivery system 36 composed primarily of health care providers recognized by the department as a performing provider system under the delivery system reform incen-37 38 tive payment program. 39 (ii) Fiscal intermediary services shall include the following 40 services, performed on behalf of the consumer to facilitate his or her 41 role as the employer: 42 (A) wage and benefit processing for consumer directed personal assist-43 <u>ants;</u> 44 (B) processing all income tax and other required wage withholdings; 45 (C) complying with workers' compensation, disability and unemployment 46 requirements; 47 (D) maintaining personnel records for each consumer directed personal 48 assistant, including time sheets and other documentation needed for wages and benefit processing and a copy of the medical documentation 49 50 required pursuant to regulations established by the commissioner; 51 (E) ensuring that the health status of each consumer directed personal 52 assistant is assessed prior to service delivery pursuant to regulations 53 issued by the commissioner;

^{54 (}F) maintaining records of service authorizations or reauthorizations;



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1 (G) monitoring the consumer's or, if applicable, the designated repre-2 sentative's continuing ability to fulfill the consumer's responsibil-3 ities under the program and promptly notifying the authorizing entity of any circumstance that may affect the consumer's or, if applicable, the 4 designated representative's ability to fulfill such responsibilities; 5 6 (H) complying with regulations established by the commissioner speci-7 fying the responsibilities of fiscal intermediaries providing services 8 under this title; and 9 (I) entering into a department approved memorandum of understanding with the consumer that describes the parties' responsibilities under 10 11 this program. 12 (iii) Fiscal intermediaries are not responsible for, and fiscal inter-13 mediary services shall not include, fulfillment of the responsibilities 14 of the consumer or, if applicable, the consumer's designated represen-15 tative as established by the commissioner. A fiscal intermediary's 16 responsibilities shall not include, and a fiscal intermediary shall not 17 engage in: managing the plan of care including recruiting and hiring a sufficient number of individuals who meet the definition of consumer 18 19 directed personal assistant, as such term is defined by the commission-20 er, to provide authorized services that are included on the consumer's 21 plan of care; training, supervising and scheduling each consumer 22 directed personal assistant; terminating the consumer directed personal 23 assistant's employment; or assuring that each consumer directed personal assistant competently and safely performs the personal care services, 24 25 home health aide services and skilled nursing tasks that are included on the consumer's plan of care. A fiscal intermediary shall exercise 26 27 reasonable care in properly carrying out its responsibilities under the 28 program. 29 (b) No entity shall provide, directly or through contract, fiscal intermediary services without an authorization as a fiscal intermediary 30 31 issued by the commissioner in accordance with this subdivision. (c) An application for authorization as a fiscal intermediary shall be 32 33 filed with the commissioner, together with such other forms and informa-34 tion as shall be prescribed by, or acceptable to the commissioner. Such 35 information shall include, but not be limited to: (i) the name and employer identification number, of the entity, 36 37 including any subsidiary corporations, if applicable, and any name under 38 which the entity does business; 39 (ii) all addresses at which the organization operates; 40 (iii) the names, titles and contact information of all officers and 41 directors in a not-for-profit company or business, or managers in a 42 limited liability company, as well as the name and employment history of 43 the individual ultimately accountable for operation of the fiscal inter-44 mediary; and for a not-for-profit entity, the number of director posi-45 tions set by the company's by-laws, and how many are currently filled; 46 (iv) a history of the organization, along with an overview of the 47 organization and all services it offers, including any relationships with outside agencies that may influence in any way the ability of the 48 organization to provide fiscal intermediary services consistent with the 49 50 manner described in its application; 51 (v) all policies and procedures of the fiscal intermediary, including 52 any contracts or other documents used in communications with consumers; 53 (vi) plans to solicit and consider input from the fiscal intermediary's consumers, staff, personal assistants and other interested 54 parties which may be charged with roles including, but not limited to, 55 quality assurance review, referral, program monitoring or development or 56



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establishing and responding to community needs; such input may be in the 1 2 form of a board of directors, committee, survey, or other mechanism, 3 provided that the majority of input obtained as part of this process must be from individual consumers and consumer advocates of the fiscal 4 5 intermediary; 6 (vii) the organization's plan to address the needs of consumers and their personal assistants in a timely manner, regardless of where they 7 8 live, including, but not limited to, input from consumers, obtaining 9 physicals and other health information from personal assistants, obtain-10 ing time records for payroll, and timely processing of payroll; and 11 (viii) a written sworn statement by an officer of the entity disclos-12 ing any pending litigation, unsatisfied judgments or penalties, 13 convictions for fraud or sanctions imposed by government authorities. 14 (d) The entity shall reasonably promptly notify the department of any 15 change in the information submitted to the department for authorization 16 under this subdivision. 17 (e) The commissioner shall not approve an application for authori-18 zation unless he or she is satisfied as to the character, competence and 19 standing in the community of the applicant's incorporators, directors, 20 sponsors, stockholders or operators and finds that the personnel, rules, 21 consumer contracts or agreements, and fiscal intermediary services are fit and adequate, and that the fiscal intermediary services will be 22 23 provided in the manner required by this subdivision and the rules and 24 regulations hereunder, in a manner determined by the commissioner. 25 (f) The commissioner may contract with an entity with appropriate knowledge, expertise and experience possessing extensive knowledge of 26 27 consumer directed personal assistance fiscal intermediary services and 28 which has a history of providing similar services in relation to a self-29 directed program to develop and to assist the commissioner in evaluating 30 applicants for authorizations or readiness reviews to be a fiscal inter-31 <u>mediary.</u> 32 (g) Neither public need, tax status nor profit-making status shall be a criterion for authorization under this subdivision. Status as a 33 34 licensed home care services agency or other health provider shall not 35 positively or negatively affect an application for authorization under this subdivision. An organization authorized pursuant to article 36 37 forty-four of the public health law shall not be a fiscal intermediary. 38 (h) An authorization under this subdivision shall last for a period of 39 five years. Upon application for a renewal, the fiscal intermediary 40 shall submit up to date information to the commissioner. 41 4-b. Actions involving the authorization of a fiscal intermediary. 42 (a) A fiscal intermediary's authorization may be revoked, suspended, 43 limited or annulled upon thirty day's written notice to the fiscal 44 intermediary, if the commissioner finds that the fiscal intermediary has 45 failed to comply with the provisions of this subdivision or regulations 46 promulgated hereunder. Notwithstanding the foregoing, upon determining 47 that the public health or safety would be imminently endangered by the continued authorization of the fiscal intermediary, the commissioner may 48 49 revoke, suspend, limit or annul the fiscal intermediary's authorization 50 immediately. 51 (b) All orders or determinations under this subdivision shall be 52 subject to review as provided in article seventy-eight of the civil

53 practice law and rules.

54 § 2. Subdivision 25 of section 2808 of the public health law, as 55 amended by section 34 of part D of chapter 56 of the laws of 2012, is 56 amended to read as follows:



1 25. Reserved bed days. (a) For purposes of this subdivision, a 2 "reserved bed day" is a day for which a governmental agency pays a resi-3 dential health care facility to reserve a bed for a person eligible for 4 medical assistance pursuant to title eleven of article five of the 5 social services law while he or she is [temporarily hospitalized or] on 6 therapeutic leave of absence from the facility.

7 (b) Notwithstanding any other provisions of this section or any other 8 law or regulation to the contrary, for reserved bed days provided on 9 behalf of persons twenty-one years of age or older:

10 (i) payments for reserved bed days shall be made at ninety-five 11 percent of the Medicaid rate otherwise payable to the facility for 12 services provided on behalf of such person; and

(ii) [payment to a facility for reserved bed days provided on behalf for such person for temporary hospitalizations may not exceed fourteen days in any twelve month period;

(iii)] payment to a facility for reserved bed days provided on behalf of such person for [non-hospitalization] <u>therapeutic</u> leaves of absence may not exceed ten days in any twelve month period.

[(c)(i) Notwithstanding any contrary provision of this subdivision or any other law and subject to the availability of federal financial participation, with regard to services provided to residential health care facility residents twenty-one years of age and older, the commissioner shall promulgate regulations, and may promulgate emergency regulations, effective for periods on and after July first, two thousand twelve, establishing reimbursement rates for reserved bed days.

(ii) Such regulations shall, for each Medicaid patient for any twelve month period, provide for reimbursement for reserved bed days for: (A) up to an aggregate of fourteen days for hospitalizations and for other therapeutic leave of absences consistent with a plan of care ordered by such patient's treating health care professional; and (B) up to an aggregate of ten days of other leaves of absence.

32 (iii) No later than thirty days after promulgation of such regu-33 lations, the commissioner shall advise the chairs of the senate and 34 assembly finance and health committees of the projected reductions 35 expected to be achieved under the methodology set forth in such regu-36 lations.

37 (iv) In the event the commissioner determines, in consultation with 38 the director of the budget, that the regulations promulgated pursuant to 39 subparagraph (i) of this paragraph shall achieve projected aggregate 40 Medicaid savings, as determined by the commissioner, of less than forty 41 million dollars for the state fiscal year beginning April first, two 42 thousand twelve, and each state fiscal year thereafter, the commissioner 43 shall establish a prospective per diem rate adjustment for all nursing 44 homes, other than nursing homes providing services primarily to children 45 under the age of twenty-one, sufficient to achieve such forty million 46 dollars in savings for each such state fiscal year.]

47 § 3. Intentionally omitted.

48 § 4. Subdivision 2-c of section 2808 of the public health law is 49 amended by adding a new paragraph (f) to read as follows:

50 (f) The commissioner shall establish a prospective per diem adjustment 51 for all nursing homes, other than nursing homes providing services 52 primarily to children under the age of twenty-one, beginning April 53 first, two thousand seventeen and each year thereafter sufficient to 54 achieve eighteen million dollars in savings in each state fiscal year.

55 § 5. Intentionally omitted.

56 § 6. Intentionally omitted.



1 § 7. This act shall take effect immediately and shall be deemed to 2 have been in full force and effect on and after April 1, 2017. 3 PART F 4 Intentionally Omitted 5 PART G Section 1. Subdivision 1 of section 92 of part H of chapter 59 of the 6 7 laws of 2011, amending the public health law and other laws relating to 8 known and projected department of health state fund medicaid expendi-9 tures, as separately amended by section 1 of part JJ of chapter 54 and 10 section 18 of part B of chapter 59 of the laws of 2016, is amended to 11 read as follows: 12 For state fiscal years 2011-12 through [2017-18] 2018-19, the 1. 13 director of the budget, in consultation with the commissioner of health 14 referenced as "commissioner" for purposes of this section, shall assess 15 on a monthly basis, as reflected in monthly reports pursuant to subdivision five of this section known and projected department of health state 16 17 funds medicaid expenditures by category of service and by geographic 18 regions, as defined by the commissioner, and if the director of the 19 budget determines that such expenditures are expected to cause medicaid 20 disbursements for such period to exceed the projected department of health medicaid state funds disbursements in the enacted budget finan-21 cial plan pursuant to subdivision 3 of section 23 of the state finance 22 23 law, the commissioner of health, in consultation with the director of 24 the budget, shall develop a medicaid savings allocation plan to limit 25 such spending to the aggregate limit level specified in the enacted budget financial plan, provided, however, such projections may be 26 27 adjusted by the director of the budget to account for any changes in the New York state federal medical assistance percentage amount established 28 29 pursuant to the federal social security act, changes in provider revenues, reductions to local social services district medical assistance 30 administration, minimum wage increases, and beginning April 1, 2012 the 31 32 operational costs of the New York state medical indemnity fund and state 33 costs or savings from the basic health plan. Such projections may be 34 adjusted by the director of the budget to account for increased or expe-35 dited department of health state funds medicaid expenditures as a result 36 of a natural or other type of disaster, including a governmental decla-37 ration of emergency. 38 § 2. Intentionally omitted. 39 § 3. Intentionally omitted. 40 § 4. This act shall take effect immediately and shall be deemed to 41 have been in full force and effect on and after April 1, 2017. 42 PART H 43 Section 1. Subdivision 5 of section 168 of chapter 639 of the laws of

43 Section 1. Subdivision 5 of section 168 of chapter 639 of the laws of 44 1996, constituting the New York Health Care Reform Act of 1996, as 45 amended by section 1 of part B of chapter 60 of the laws of 2014, is 46 amended to read as follows:

5. sections 2807-c, 2807-j, 2807-s and 2807-t of the public health kalaw, as amended or as added by this act, shall expire on December 31, 2017] 2020, and shall be thereafter effective only in respect to any act done on or before such date or action or proceeding arising out of



1 such act including continued collections of funds from assessments and allowances and surcharges established pursuant to sections 2807-c, 2 2807-j, 2807-s and 2807-t of the public health law, and administration 3 and distributions of funds from pools established pursuant to sections 4 2807-c, 2807-j, 2807-k, 2807-l, 2807-m, 2807-s and 2807-t of the public 5 health law related to patient services provided before December 31, 6 7 [2017] 2020, and continued expenditure of funds authorized for programs and grants until the exhaustion of funds therefor; 8

9 § 2. Subdivision 1 of section 138 of chapter 1 of the laws of 1999, 10 constituting the New York Health Care Reform Act of 2000, as amended by 11 section 2 of part B of chapter 60 of the laws of 2014, is amended to 12 read as follows:

13 1. sections 2807-c, 2807-j, 2807-s, and 2807-t of the public health 14 law, as amended by this act, shall expire on December 31, [2017] 2020, 15 and shall be thereafter effective only in respect to any act done before 16 such date or action or proceeding arising out of such act including 17 continued collections of funds from assessments and allowances and surcharges established pursuant to sections 2807-c, 2807-j, 2807-s and 18 19 2807-t of the public health law, and administration and distributions of 20 funds from pools established pursuant to sections 2807-c, 2807-j, 21 2807-k, 2807-l, 2807-m, 2807-s, 2807-t, 2807-v and 2807-w of the public 22 health law, as amended or added by this act, related to patient services provided before December 31, [2017] 2020, and continued expenditure of 23 24 funds authorized for programs and grants until the exhaustion of funds 25 therefor;

S 3. Subparagraph (xv) of paragraph (a) of subdivision 6 of section 27 2807-s of the public health law, as amended by section 3 of part B of 28 chapter 60 of the laws of 2014, is amended to read as follows:

29 (xv) A gross annual statewide amount for the period January first, two 30 thousand fifteen through December thirty-first, two thousand [seventeen] 31 <u>twenty</u>, shall be one billion forty-five million dollars.

32 § 4. Subparagraph (xiii) of paragraph (a) of subdivision 7 of section 33 2807-s of the public health law, as amended by section 4 of part B of 34 chapter 60 of the laws of 2014, is amended to read as follows:

35 (xiii) twenty-three million eight hundred thirty-six thousand dollars 36 each state fiscal year for the period April first, two thousand twelve 37 through March thirty-first, two thousand [seventeen] <u>twenty;</u>

38 § 5. Subparagraphs (iv) and (v) of paragraph (a) of subdivision 9 of 39 section 2807-j of the public health law, as amended by section 5 of part 40 B of chapter 60 of the laws of 2014, are amended to read as follows:

41 (iv) seven hundred sixty-five million dollars annually of the funds 42 accumulated for the periods January first, two thousand through December 43 thirty-first, two thousand [sixteen] <u>nineteen</u>, and

(v) one hundred ninety-one million two hundred fifty thousand dollars
of the funds accumulated for the period January first, two thousand
[seventeen] twenty through March thirty-first, two thousand [seventeen]
<u>twenty</u>.

48 § 6. Subdivisions 5-a and 7 of section 2807-m of the public health 49 law, as amended by section 9 of part B of chapter 60 of the laws of 50 2014, subparagraphs (iv), (v) and (vi) of paragraph (d) of subdivision 51 5-a as added by section 4 of part W of chapter 57 of the laws of 2015, 52 are amended to read as follows:

53 5-a. Graduate medical education innovations pool. (a) Supplemental 54 distributions. (i) Thirty-one million dollars for the period January 55 first, two thousand eight through December thirty-first, two thousand 56 eight, shall be set aside and reserved by the commissioner from the



1 regional pools established pursuant to subdivision two of this section and shall be available for distributions pursuant to subdivision five of 2 this section and in accordance with section 86-1.89 of title 10 of the 3 codes, rules and regulations of the state of New York as in effect on 4 January first, two thousand eight; provided, however, for purposes of 5 6 funding the empire clinical research investigation program (ECRIP) in accordance with paragraph eight of subdivision (e) and paragraph two of 7 subdivision (f) of section 86-1.89 of title 10 of the codes, rules and 8 regulations of the state of New York, distributions shall be made using 9 two regions defined as New York city and the rest of the state and the 10 dollar amount set forth in subparagraph (i) of paragraph two of subdivi-11 12 sion (f) of section 86-1.89 of title 10 of the codes, rules and regu-13 lations of the state of New York shall be increased from sixty thousand 14 dollars to seventy-five thousand dollars.

(ii) For periods on and after January first, two thousand nine, supplemental distributions pursuant to subdivision five of this section and in accordance with section 86-1.89 of title 10 of the codes, rules and regulations of the state of New York shall no longer be made and the provisions of section 86-1.89 of title 10 of the codes, rules and regulations of the state of New York shall be null and void.

21 (b) Empire clinical research investigator program (ECRIP). Nine 22 million one hundred twenty thousand dollars annually for the period 23 January first, two thousand nine through December thirty-first, two 24 thousand ten, and two million two hundred eighty thousand dollars for the period January first, two thousand eleven, through March thirty-25 26 first, two thousand eleven, nine million one hundred twenty thousand 27 dollars each state fiscal year for the period April first, two thousand 28 eleven through March thirty-first, two thousand fourteen, [and] up to 29 eight million six hundred twelve thousand dollars each state fiscal year for the period April first, two thousand fourteen through March thirty-30 first, two thousand seventeen, and up to eight million six hundred 31 twelve thousand dollars each state fiscal year for the period April 32 33 first, two thousand seventeen through March thirty-first, two thousand twenty, shall be set aside and reserved by the commissioner from the 34 regional pools established pursuant to subdivision two of this section 35 36 to be allocated regionally with two-thirds of the available funding 37 going to New York city and one-third of the available funding going to 38 the rest of the state and shall be available for distribution as 39 follows:

40 Distributions shall first be made to consortia and teaching general 41 hospitals for the empire clinical research investigator program (ECRIP) 42 to help secure federal funding for biomedical research, train clinical 43 researchers, recruit national leaders as faculty to act as mentors, and 44 train residents and fellows in biomedical research skills based on 45 hospital-specific data submitted to the commissioner by consortia and 46 teaching general hospitals in accordance with clause (G) of this subpar-47 agraph. Such distributions shall be made in accordance with the follow-48 ing methodology:

(A) The greatest number of clinical research positions for which a consortium or teaching general hospital may be funded pursuant to this subparagraph shall be one percent of the total number of residents training at the consortium or teaching general hospital on July first, two thousand eight for the period January first, two thousand nine through December thirty-first, two thousand nine rounded up to the nearest one position.



1 (B) Distributions made to a consortium or teaching general hospital 2 shall equal the product of the total number of clinical research posi-3 tions submitted by a consortium or teaching general hospital and 4 accepted by the commissioner as meeting the criteria set forth in para-5 graph (b) of subdivision one of this section, subject to the reduction 6 calculation set forth in clause (C) of this subparagraph, times one 7 hundred ten thousand dollars.

If the dollar amount for the total number of clinical research 8 (C) positions in the region calculated pursuant to clause (B) of this 9 subparagraph exceeds the total amount appropriated for purposes of this 10 11 paragraph, including clinical research positions that continue from and 12 were funded in prior distribution periods, the commissioner shall elimi-13 nate one-half of the clinical research positions submitted by each 14 consortium or teaching general hospital rounded down to the nearest one 15 position. Such reduction shall be repeated until the dollar amount for 16 the total number of clinical research positions in the region does not 17 exceed the total amount appropriated for purposes of this paragraph. If 18 the repeated reduction of the total number of clinical research posi-19 tions in the region by one-half does not render a total funding amount 20 that is equal to or less than the total amount reserved for that region 21 within the appropriation, the funding for each clinical research posi-22 tion in that region shall be reduced proportionally in one thousand 23 dollar increments until the total dollar amount for the total number of 24 clinical research positions in that region does not exceed the total 25 amount reserved for that region within the appropriation. Any reduction in funding will be effective for the duration of the award. No clinical 26 27 research positions that continue from and were funded in prior distrib-28 ution periods shall be eliminated or reduced by such methodology.

(D) Each consortium or teaching general hospital shall receive itsannual distribution amount in accordance with the following:

31 (I) Each consortium or teaching general hospital with a one-year ECRIP award shall receive its annual distribution amount in full upon 32 completion of the requirements set forth in items (I) and (II) of clause 33 (G) of this subparagraph. The requirements set forth in items (IV) 34 anđ 35 (V) of clause (G) of this subparagraph must be completed by the consor-36 tium or teaching general hospital in order for the consortium or teach-37 ing general hospital to be eligible to apply for ECRIP funding in any 38 subsequent funding cycle.

39 (II) Each consortium or teaching general hospital with a two-year 40 ECRIP award shall receive its first annual distribution amount in full 41 upon completion of the requirements set forth in items (I) and (II) of 42 clause (G) of this subparagraph. Each consortium or teaching general 43 hospital will receive its second annual distribution amount in full upon 44 completion of the requirements set forth in item (III) of clause (G) of 45 this subparagraph. The requirements set forth in items (IV) and (V) of 46 clause (G) of this subparagraph must be completed by the consortium or 47 teaching general hospital in order for the consortium or teaching general hospital to be eligible to apply for ECRIP funding in any subsequent 48 49 funding cycle.

50 (E) Each consortium or teaching general hospital receiving distrib-51 utions pursuant to this subparagraph shall reserve seventy-five thousand 52 dollars to primarily fund salary and fringe benefits of the clinical 53 research position with the remainder going to fund the development of 54 faculty who are involved in biomedical research, training and clinical 55 care.



1 (F) Undistributed or returned funds available to fund clinical 2 research positions pursuant to this paragraph for a distribution period 3 shall be available to fund clinical research positions in a subsequent 4 distribution period.

5 (G) In order to be eligible for distributions pursuant to this subpar-6 agraph, each consortium and teaching general hospital shall provide to the commissioner by July first of each distribution period, the follow-7 8 ing data and information on a hospital-specific basis. Such data and information shall be certified as to accuracy and completeness by the 9 chief executive officer, chief financial officer or chair of the consor-10 11 tium governing body of each consortium or teaching general hospital and 12 shall be maintained by each consortium and teaching general hospital for five years from the date of submission: 13

14 (I) For each clinical research position, information on the type, 15 scope, training objectives, institutional support, clinical research 16 experience of the sponsor-mentor, plans for submitting research outcomes 17 to peer reviewed journals and at scientific meetings, including a meeting sponsored by the department, the name of a principal contact person 18 19 responsible for tracking the career development of researchers placed in 20 clinical research positions, as defined in paragraph (c) of subdivision 21 one of this section, and who is authorized to certify to the commission-22 that all the requirements of the clinical research training objecer 23 tives set forth in this subparagraph shall be met. Such certification 24 shall be provided by July first of each distribution period;

(II) For each clinical research position, information on the name, citizenship status, medical education and training, and medical license number of the researcher, if applicable, shall be provided by December thirty-first of the calendar year following the distribution period;

(III) Information on the status of the clinical research plan, accomplishments, changes in research activities, progress, and performance of the researcher shall be provided upon completion of one-half of the award term;

(IV) A final report detailing training experiences, accomplishments, activities and performance of the clinical researcher, and data, methods, results and analyses of the clinical research plan shall be provided three months after the clinical research position ends; and

37 (V) Tracking information concerning past researchers, including but 38 not limited to (A) background information, (B) employment history, (C) 39 research status, (D) current research activities, (E) publications and 40 presentations, (F) research support, and (G) any other information 41 necessary to track the researcher; and

42 (VI) Any other data or information required by the commissioner to 43 implement this subparagraph.

(H) Notwithstanding any inconsistent provision of this subdivision,
for periods on and after April first, two thousand thirteen, ECRIP grant
awards shall be made in accordance with rules and regulations promulgated by the commissioner. Such regulations shall, at a minimum:

(1) provide that ECRIP grant awards shall be made with the objective
of securing federal funding for biomedical research, training clinical
researchers, recruiting national leaders as faculty to act as mentors,
and training residents and fellows in biomedical research skills;

52 (2) provide that ECRIP grant applicants may include interdisciplinary 53 research teams comprised of teaching general hospitals acting in collab-54 oration with entities including but not limited to medical centers, 55 hospitals, universities and local health departments;



(3) provide that applications for ECRIP grant awards shall be based on
 such information requested by the commissioner, which shall include but
 not be limited to hospital-specific data;

4 (4) establish the qualifications for investigators and other staff 5 required for grant projects eligible for ECRIP grant awards; and

6 (5) establish a methodology for the distribution of funds under ECRIP 7 grant awards.

8 (c) Ambulatory care training. Four million nine hundred thousand dollars for the period January first, two thousand eight through Decem-9 ber thirty-first, two thousand eight, four million nine hundred thousand 10 dollars for the period January first, two thousand nine through December 11 12 thirty-first, two thousand nine, four million nine hundred thousand 13 dollars for the period January first, two thousand ten through December 14 thirty-first, two thousand ten, one million two hundred twenty-five 15 thousand dollars for the period January first, two thousand eleven 16 through March thirty-first, two thousand eleven, four million three 17 hundred thousand dollars each state fiscal year for the period April first, two thousand eleven through March thirty-first, two thousand 18 19 fourteen, [and] up to four million sixty thousand dollars each state fiscal year for the period April first, two thousand fourteen through 20 21 March thirty-first, two thousand seventeen, and up to four million sixty 22 thousand dollars each fiscal year for the period April first, two thou-23 sand seventeen through March thirty-first, two thousand twenty, shall be set aside and reserved by the commissioner from the regional pools 24 established pursuant to subdivision two of this section and shall be 25 available for distributions to sponsoring institutions to be directed to 26 27 support clinical training of medical students and residents in free-28 standing ambulatory care settings, including community health centers 29 and private practices. Such funding shall be allocated regionally with two-thirds of the available funding going to New York city and one-third 30 of the available funding going to the rest of the state and shall be 31 distributed to sponsoring institutions in each region pursuant to a 32 33 request for application or request for proposal process with preference being given to sponsoring institutions which provide training in sites 34 located in underserved rural or inner-city areas and those that include 35 36 medical students in such training.

37 (d) Physician loan repayment program. One million nine hundred sixty 38 thousand dollars for the period January first, two thousand eight 39 through December thirty-first, two thousand eight, one million nine 40 hundred sixty thousand dollars for the period January first, two thou-41 sand nine through December thirty-first, two thousand nine, one million 42 nine hundred sixty thousand dollars for the period January first, two 43 thousand ten through December thirty-first, two thousand ten, four 44 hundred ninety thousand dollars for the period January first, two thou-45 sand eleven through March thirty-first, two thousand eleven, one million 46 seven hundred thousand dollars each state fiscal year for the period 47 April first, two thousand eleven through March thirty-first, two thousand fourteen, [and] up to one million seven hundred five thousand 48 49 dollars each state fiscal year for the period April first, two thousand fourteen through March thirty-first, two thousand seventeen, and up to 50 51 one million seven hundred five thousand dollars each state fiscal year 52 for the period April first, two thousand seventeen through March thirty-first, two thousand twenty, shall be set aside and reserved by the 53 commissioner from the regional pools established pursuant to subdivision 54 55 two of this section and shall be available for purposes of physician loan repayment in accordance with subdivision ten of this section. 56



Notwithstanding any contrary provision of this section, sections one 1 hundred twelve and one hundred sixty-three of the state finance law, 2 or any other contrary provision of law, such funding shall be allocated 3 regionally with one-third of available funds going to New York city and 4 5 two-thirds of available funds going to the rest of the state and shall distributed in a manner to be determined by the commissioner without 6 be 7 a competitive bid or request for proposal process as follows:

8 (i) Funding shall first be awarded to repay loans of up to twenty-five 9 physicians who train in primary care or specialty tracks in teaching 10 general hospitals, and who enter and remain in primary care or specialty 11 practices in underserved communities, as determined by the commissioner.

(ii) After distributions in accordance with subparagraph (i) of this paragraph, all remaining funds shall be awarded to repay loans of physicians who enter and remain in primary care or specialty practices in underserved communities, as determined by the commissioner, including but not limited to physicians working in general hospitals, or other health care facilities.

(iii) In no case shall less than fifty percent of the funds available pursuant to this paragraph be distributed in accordance with subparagraphs (i) and (ii) of this paragraph to physicians identified by general hospitals.

(iv) In addition to the funds allocated under this paragraph, for the period April first, two thousand fifteen through March thirty-first, two thousand sixteen, two million dollars shall be available for the purposes described in subdivision ten of this section;

(v) In addition to the funds allocated under this paragraph, for the period April first, two thousand sixteen through March thirty-first, two thousand seventeen, two million dollars shall be available for the purposes described in subdivision ten of this section;

30 (vi) Notwithstanding any provision of law to the contrary, and subject 31 to the extension of the Health Care Reform Act of 1996, sufficient funds 32 shall be available for the purposes described in subdivision ten of this 33 section in amounts necessary to fund the remaining year commitments for 34 awards made pursuant to subparagraphs (iv) and (v) of this paragraph.

35 (e) Physician practice support. Four million nine hundred thousand dollars for the period January first, two thousand eight through Decem-36 37 ber thirty-first, two thousand eight, four million nine hundred thousand 38 dollars annually for the period January first, two thousand nine through 39 December thirty-first, two thousand ten, one million two hundred twen-40 ty-five thousand dollars for the period January first, two thousand 41 eleven through March thirty-first, two thousand eleven, four million 42 three hundred thousand dollars each state fiscal year for the period 43 April first, two thousand eleven through March thirty-first, two thou-44 sand fourteen, [and] up to four million three hundred sixty thousand 45 dollars each state fiscal year for the period April first, two thousand 46 fourteen through March thirty-first, two thousand seventeen, and up to 47 four million three hundred sixty thousand dollars for each state fiscal year for the period April first, two thousand seventeen through March 48 49 thirty-first, two thousand twenty, shall be set aside and reserved by 50 the commissioner from the regional pools established pursuant to subdi-51 vision two of this section and shall be available for purposes of physi-52 cian practice support. Notwithstanding any contrary provision of this section, sections one hundred twelve and one hundred sixty-three of the 53 state finance law, or any other contrary provision of law, such funding 54 55 shall be allocated regionally with one-third of available funds going to New York city and two-thirds of available funds going to the rest of the 56



1 state and shall be distributed in a manner to be determined by the 2 commissioner without a competitive bid or request for proposal process 3 as follows: Preference in funding shall first be accorded to teaching general 4 (i) 5 hospitals for up to twenty-five awards, to support costs incurred by 6 physicians trained in primary or specialty tracks who thereafter estab-7 lish or join practices in underserved communities, as determined by the 8 commissioner. After distributions in accordance with subparagraph (i) of this 9 (ii) paragraph, all remaining funds shall be awarded to physicians to support 10 11 the cost of establishing or joining practices in underserved communi-12 ties, as determined by the commissioner, and to hospitals and other 13 health care providers to recruit new physicians to provide services in 14 underserved communities, as determined by the commissioner. 15 (iii) In no case shall less than fifty percent of the funds available 16 pursuant to this paragraph be distributed to general hospitals in accordance with subparagraphs (i) and (ii) of this paragraph. 17 18 (e-1) Work group. For funding available pursuant to paragraphs (d) and 19 (e) of this subdivision: 20 The department shall appoint a work group from recommendations (i) 21 made by associations representing physicians, general hospitals and 22 other health care facilities to develop a streamlined application proc-23 ess by June first, two thousand twelve. 24 (ii) Subject to available funding, applications shall be accepted on a 25 continuous basis. The department shall provide technical assistance to applicants to facilitate their completion of applications. An applicant 26 27 shall be notified in writing by the department within ten days of 28 receipt of an application as to whether the application is complete and 29 if the application is incomplete, what information is outstanding. The 30 department shall act on an application within thirty days of receipt of 31 a complete application. 32 (f) Study on physician workforce. Five hundred ninety thousand dollars 33 annually for the period January first, two thousand eight through December thirty-first, two thousand ten, one hundred forty-eight thousand 34 dollars for the period January first, two thousand eleven through March 35 36 thirty-first, two thousand eleven, five hundred sixteen thousand dollars each state fiscal year for the period April first, two thousand eleven 37 38 through March thirty-first, two thousand fourteen, [and] up to four 39 hundred eighty-seven thousand dollars each state fiscal year for the 40 period April first, two thousand fourteen through March thirty-first, 41 two thousand seventeen, and up to four hundred eighty-seven thousand 42 dollars for each state fiscal year for the period April first, two thou-43 sand seventeen through March thirty-first, two thousand twenty, shall be 44 set aside and reserved by the commissioner from the regional pools 45 established pursuant to subdivision two of this section and shall be 46 available to fund a study of physician workforce needs and solutions 47 including, but not limited to, an analysis of residency programs and projected physician workforce and community needs. The commissioner 48 49 shall enter into agreements with one or more organizations to conduct 50 such study based on a request for proposal process. 51 (g) Diversity in medicine/post-baccalaureate program. Notwithstanding

52 any inconsistent provision of section one hundred twelve or one hundred 53 sixty-three of the state finance law or any other law, one million nine 54 hundred sixty thousand dollars annually for the period January first, 55 two thousand eight through December thirty-first, two thousand ten, four 56 hundred ninety thousand dollars for the period January first, two thou-



1 sand eleven through March thirty-first, two thousand eleven, one million 2 seven hundred thousand dollars each state fiscal year for the period April first, two thousand eleven through March thirty-first, two thou-3 sand fourteen, [and] up to one million six hundred five thousand dollars 4 each state fiscal year for the period April first, two thousand fourteen 5 through March thirty-first, two thousand seventeen, and up to one 6 7 million six hundred five thousand dollars each state fiscal year for the 8 period April first, two thousand seventeen through March thirty-first, two thousand twenty, shall be set aside and reserved by the commissioner 9 from the regional pools established pursuant to subdivision two of this 10 11 section and shall be available for distributions to the Associated Medical Schools of New York to fund its diversity program including 12 13 existing and new post-baccalaureate programs for minority and econom-14 ically disadvantaged students and encourage participation from all 15 medical schools in New York. The associated medical schools of New York 16 shall report to the commissioner on an annual basis regarding the use of 17 funds for such purpose in such form and manner as specified by the 18 commissioner.

(h) In the event there are undistributed funds within amounts made available for distributions pursuant to this subdivision, such funds may be reallocated and distributed in current or subsequent distribution periods in a manner determined by the commissioner for any purpose set forth in this subdivision.

24 7. Notwithstanding any inconsistent provision of section one hundred 25 twelve or one hundred sixty-three of the state finance law or any other law, up to one million dollars for the period January first, two thou-26 27 sand through December thirty-first, two thousand, one million six 28 hundred thousand dollars annually for the periods January first, two 29 thousand one through December thirty-first, two thousand eight, one million five hundred thousand dollars annually for the periods January 30 first, two thousand nine through December thirty-first, two thousand 31 three hundred seventy-five thousand dollars for the period January 32 ten, first, two thousand eleven through March thirty-first, two thousand 33 eleven, one million three hundred twenty thousand dollars each state 34 fiscal year for the period April first, two thousand eleven through 35 36 March thirty-first, two thousand fourteen, [and] up to two million 37 seventy-seven thousand dollars each state fiscal year for the period 38 April first, two thousand fourteen through March thirty-first, two thou-39 sand seventeen, and up to two million seventy-seven thousand dollars for 40 each state fiscal year for the period April first, two thousand seven-41 teen through March thirty-first, two thousand twenty, shall be set aside 42 and reserved by the commissioner from the regional pools established 43 pursuant to subdivision two of this section and shall be available for 44 distributions to the New York state area health education center program 45 for the purpose of expanding community-based training of medical 46 students. In addition, one million dollars annually for the period Janu-47 ary first, two thousand eight through December thirty-first, two thousand ten, two hundred fifty thousand dollars for the period January 48 49 first, two thousand eleven through March thirty-first, two thousand 50 eleven, and eight hundred eighty thousand dollars each state fiscal year 51 for the period April first, two thousand eleven through March thirty-52 first, two thousand fourteen, shall be set aside and reserved by the commissioner from the regional pools established pursuant to subdivision 53 two of this section and shall be available for distributions to the New 54 55 York state area health education center program for the purpose of postsecondary training of health care professionals who will achieve specif-56



1 ic program outcomes within the New York state area health education 2 center program. The New York state area health education center program 3 shall report to the commissioner on an annual basis regarding the use of 4 funds for each purpose in such form and manner as specified by the 5 commissioner.

6 § 7. Paragraph (a) of subdivision 12 of section 367-b of the social 7 services law, as amended by section 10 of part B of chapter 60 of the 8 laws of 2014, is amended to read as follows:

9 (a) For the purpose of regulating cash flow for general hospitals, the 10 department shall develop and implement a payment methodology to provide 11 for timely payments for inpatient hospital services eligible for case 12 based payments per discharge based on diagnosis-related groups provided 13 during the period January first, nineteen hundred eighty-eight through 14 March thirty-first two thousand [seventeen] <u>twenty</u>, by such hospitals 15 which elect to participate in the system.

16 § 8. Subdivision 6 of section 2807-t of the public health law, as 17 amended by section 15 of part B of chapter 60 of the laws of 2014, is 18 amended to read as follows:

19 6. Prospective adjustments. (a) The commissioner shall annually reconcile the sum of the actual payments made to the commissioner or the 20 21 commissioner's designee for each region pursuant to section twenty-eight 22 hundred seven-s of this article and pursuant to this section for the prior year with the regional allocation of the gross annual statewide 23 24 amount specified in subdivision six of section twenty-eight hundred 25 seven-s of this article for such prior year. The difference between the actual amount raised for a region and the regional allocation of the 26 27 specified gross annual amount for such prior year shall be applied as a 28 prospective adjustment to the regional allocation of the specified gross 29 annual payment amount for such region for the year next following the calculation of the reconciliation. The authorized dollar value of the 30 adjustments shall be the same as if calculated retrospectively. 31

(b) Notwithstanding the provisions of paragraph (a) of this subdivi-32 33 sion, for covered lives assessment rate periods on and after January 34 first, two thousand fifteen through December thirty-first, two thousand [seventeen] twenty, for amounts collected in the aggregate in excess of 35 36 one billion forty-five million dollars on an annual basis, prospective 37 adjustments shall be suspended if the annual reconciliation calculation 38 from the prior year would otherwise result in a decrease to the regional 39 allocation of the specified gross annual payment amount for that region, 40 provided, however, that such suspension shall be lifted upon a determi-41 nation by the commissioner, in consultation with the director of the 42 budget, that sixty-five million dollars in aggregate collections on an 43 annual basis over and above one billion forty-five million dollars on an 44 annual basis have been reserved and set aside for deposit in the HCRA 45 resources fund. Any amounts collected in the aggregate at or below one 46 billion forty-five million dollars on an annual basis, shall be subject 47 to regional adjustments reconciling any decreases or increases to the regional allocation in accordance with paragraph (a) of this subdivi-48 49 sion.

50 § 9. Section 2 of chapter 600 of the laws of 1986 amending the public 51 health law relating to the development of pilot reimbursement programs 52 for ambulatory care services, as amended by section 11 of part B of 53 chapter 60 of the laws of 2014, is amended to read as follows:

54 § 2. This act shall take effect immediately, except that this act 55 shall expire and be of no further force and effect on and after April 1, 56 [2017; provided, however, that the commissioner of health shall submit a



1 report to the governor and the legislature detailing the objective, impact, design and computation of any pilot reimbursement program estab-2 lished pursuant to this act, on or before March 31, 1994 and annually 3 thereafter. Such report shall include an assessment of the financial 4 5 impact of such payment system on providers, as well as the impact of 6 such system on access to care] 2020. 7 10. Paragraph (i) of subdivision (b) of section 1 of chapter 520 of § 8 the laws of 1978 relating to providing for a comprehensive survey of health care financing, education and illness prevention and creating 9 councils for the conduct thereof, as amended by section 12 of part B of 10 11 chapter 60 of the laws of 2014, is amended to read as follows: 12 (i) oversight and evaluation of the inpatient financing system in 13 place for 1988 through March 31, [2017] 2020, and the appropriateness 14 and effectiveness of the bad debt and charity care financing provisions; 15 § 11. Paragraph (1) of subdivision 9 of section 3614 of the public 16 health law, as added by section 13 of part B of chapter 60 of the laws 17 2014, is amended and three new paragraphs (m), (n) and (o) are added of to read as follows: 18 19 (1) for the period April first, two thousand sixteen through March 20 thirty-first, two thousand seventeen, up to one hundred million 21 dollars[.]; 22 (m) for the period April first, two thousand seventeen through March thirty-first, two thousand eighteen, up to one hundred million dollars; 23 24 (n) for the period April first, two thousand eighteen through March 25 thirty-first, two thousand nineteen, up to one hundred million dollars; 26 (o) for the period April first, two thousand nineteen through March 27 thirty-first, two thousand twenty, up to one hundred million dollars. 28 § 12. Paragraph (p) of subdivision 1 of section 367-q of the social 29 services law, as added by section 14 of part B of chapter 60 of the laws 30 of 2014, is amended and three new paragraphs (q), (r) and (s) are added 31 to read as follows: 32 for the period April first, two thousand sixteen through March (p) 33 thirty-first, two thousand seventeen, up to twenty-eight million five 34 hundred thousand dollars[.]; 35 (q) for the period April first, two thousand seventeen through March 36 thirty-first, two thousand eighteen, up to twenty-eight million five 37 hundred thousand dollars; 38 (r) for the period April first, two thousand eighteen through March 39 thirty-first, two thousand nineteen, twenty-eight million five hundred 40 thousand dollars; 41 (s) for the period April first, two thousand nineteen through March 42 thirty-first, two thousand twenty, twenty-eight million five hundred 43 thousand dollars. 44 § 13. Subdivision 4-c of section 2807-p of the public health law, as 45 amended by section 16 of part B of chapter 60 of the laws of 2014, is 46 amended to read as follows: 47 4-c. Notwithstanding any provision of law to the contrary, the commissioner shall make additional payments for uncompensated care to volun-48 49 tary non-profit diagnostic and treatment centers that are eligible for distributions under subdivision four of this section in the following 50 amounts: for the period June first, two thousand six through December 51 52 thirty-first, two thousand six, in the amount of seven million five hundred thousand dollars, for the period January first, two thousand 53 seven through December thirty-first, two thousand seven, seven million 54 55 five hundred thousand dollars, for the period January first, two thousand eight through December thirty-first, two thousand eight, seven 56



1 million five hundred thousand dollars, for the period January first, two 2 thousand nine through December thirty-first, two thousand nine, fifteen million five hundred thousand dollars, for the period January first, two 3 thousand ten through December thirty-first, two thousand ten, seven 4 million five hundred thousand dollars, for the period January first, two 5 thousand eleven though December thirty-first, two thousand eleven, seven 6 million five hundred thousand dollars, for the period January first, two 7 thousand twelve through December thirty-first, two thousand twelve, 8 seven million five hundred thousand dollars, for the period January 9 first, two thousand thirteen through December thirty-first, two thousand 10 11 thirteen, seven million five hundred thousand dollars, for the period 12 January first, two thousand fourteen through December thirty-first, two 13 thousand fourteen, seven million five hundred thousand dollars, for the 14 period January first, two thousand fifteen through December thirty-15 first, two thousand fifteen, seven million five hundred thousand 16 dollars, for the period January first two thousand sixteen through 17 December thirty-first, two thousand sixteen, seven million five hundred 18 thousand dollars, for the period January first, two thousand seventeen 19 through December thirty-first, two thousand seventeen, seven million five hundred thousand dollars, for the period January first, two thou-20 21 sand eighteen through December thirty-first, two thousand eighteen, 22 seven million five hundred thousand dollars, for the period January 23 first, two thousand nineteen through December thirty-first, two thousand 24 nineteen, seven million five hundred thousand dollars, and for the peri-25 od January first, two thousand [seventeen] twenty through March thirty-26 first, two thousand [seventeen] twenty, in the amount of one million six 27 hundred thousand dollars, provided, however, that for periods on and 28 after January first, two thousand eight, such additional payments shall 29 be distributed to voluntary, non-profit diagnostic and treatment centers 30 and to public diagnostic and treatment centers in accordance with paragraph (g) of subdivision four of this section. In the event that federal 31 financial participation is available for rate adjustments pursuant to 32 33 section, the commissioner shall make such payments as additional this 34 adjustments to rates of payment for voluntary non-profit diagnostic and 35 treatment centers that are eligible for distributions under subdivision 36 four-a of this section in the following amounts: for the period June 37 first, two thousand six through December thirty-first, two thousand six, 38 fifteen million dollars in the aggregate, and for the period January 39 first, two thousand seven through June thirtieth, two thousand seven, 40 seven million five hundred thousand dollars in the aggregate. The 41 amounts allocated pursuant to this paragraph shall be aggregated with 42 and distributed pursuant to the same methodology applicable to the 43 amounts allocated to such diagnostic and treatment centers for such 44 periods pursuant to subdivision four of this section if federal finan-45 cial participation is not available, or pursuant to subdivision four-a 46 this section if federal financial participation is available. of 47 Notwithstanding section three hundred sixty-eight-a of the social 48 services law, there shall be no local share in a medical assistance 49 payment adjustment under this subdivision.

50 § 14. Section 34 of part A3 of chapter 62 of the laws of 2003 amending 51 the general business law and other laws relating to enacting major 52 components necessary to implement the state fiscal plan for the 2003-04 53 state fiscal year, as amended by section 6 of part B of chapter 60 of 54 the laws of 2014, is amended to read as follows:

55 § 34. (1) Notwithstanding any inconsistent provision of law, rule or 56 regulation and effective April 1, 2008 through March 31, [2017] <u>2020</u>,



1 the commissioner of health is authorized to transfer and the state comptroller is authorized and directed to receive for deposit to the credit 2 of the department of health's special revenue fund - other, health care 3 reform act (HCRA) resources fund - 061, provider collection monitoring 4 account, within amounts appropriated each year, those funds collected 5 and accumulated pursuant to section 2807-v of the public health law, 6 including income from invested funds, for the purpose of payment for 7 administrative costs of the department of health related to adminis-8 tration of statutory duties for the collections and distributions 9 authorized by section 2807-v of the public health law. 10

11 (2) Notwithstanding any inconsistent provision of law, rule or regu-12 lation and effective April 1, 2008 through March 31, [2017] 2020, the 13 commissioner of health is authorized to transfer and the state comp-14 troller is authorized and directed to receive for deposit to the credit 15 of the department of health's special revenue fund - other, health care 16 reform act (HCRA) resources fund - 061, provider collection monitoring 17 account, within amounts appropriated each year, those funds collected 18 and accumulated and interest earned through surcharges on payments for 19 health care services pursuant to section 2807-s of the public health law and from assessments pursuant to section 2807-t of the public health law 20 21 for the purpose of payment for administrative costs of the department of 22 health related to administration of statutory duties for the collections 23 and distributions authorized by sections 2807-s, 2807-t, and 2807-m of 24 the public health law.

(3) Notwithstanding any inconsistent provision of law, rule or regu-25 26 lation and effective April 1, 2008 through March 31, [2017] 2020, the 27 commissioner of health is authorized to transfer and the comptroller is 28 authorized to deposit, within amounts appropriated each year, those 29 funds authorized for distribution in accordance with the provisions of paragraph (a) of subdivision 1 of section 2807-1 of the public health 30 law for the purposes of payment for administrative costs of the depart-31 ment of health related to the child health insurance plan program 32 authorized pursuant to title 1-A of article 25 of the public health law 33 the special revenue funds - other, health care reform act (HCRA) 34 into resources fund - 061, child health insurance account, established within 35 36 the department of health.

(4) Notwithstanding any inconsistent provision of law, rule or regu-37 38 lation and effective April 1, 2008 through March 31, [2017] 2020, the 39 commissioner of health is authorized to transfer and the comptroller is 40 authorized to deposit, within amounts appropriated each year, those 41 funds authorized for distribution in accordance with the provisions of 42 paragraph (e) of subdivision 1 of section 2807-1 of the public health 43 law for the purpose of payment for administrative costs of the depart-44 ment of health related to the health occupation development and work-45 place demonstration program established pursuant to section 2807-h and 46 the health workforce retraining program established pursuant to section 47 2807-g of the public health law into the special revenue funds - other, health care reform act (HCRA) resources fund - 061, health occupation 48 49 development and workplace demonstration program account, established 50 within the department of health.

51 (5) Notwithstanding any inconsistent provision of law, rule or regu-52 lation and effective April 1, 2008 through March 31, [2017] <u>2020</u>, the 53 commissioner of health is authorized to transfer and the comptroller is 54 authorized to deposit, within amounts appropriated each year, those 55 funds allocated pursuant to paragraph (j) of subdivision 1 of section 56 2807-v of the public health law for the purpose of payment for adminis-



1 trative costs of the department of health related to administration of 2 the state's tobacco control programs and cancer services provided pursu-3 ant to sections 2807-r and 1399-ii of the public health law into such 4 accounts established within the department of health for such purposes.

5 (6) Notwithstanding any inconsistent provision of law, rule or regulation and effective April 1, 2008 through March 31, 6 [2017] <u>2020</u>, the 7 commissioner of health is authorized to transfer and the comptroller is 8 authorized to deposit, within amounts appropriated each year, the funds authorized for distribution in accordance with the provisions of section 9 2807-1 of the public health law for the purposes of payment for adminis-10 11 trative costs of the department of health related to the programs funded 12 pursuant to section 2807-1 of the public health law into the special 13 revenue funds - other, health care reform act (HCRA) resources fund 14 061, pilot health insurance account, established within the department 15 of health.

16 (7) Notwithstanding any inconsistent provision of law, rule or regulation and effective April 1, 2008 through March 31, [2017] 2020, the 17 commissioner of health is authorized to transfer and the comptroller is 18 19 authorized to deposit, within amounts appropriated each year, those funds authorized for distribution in accordance with the provisions of 20 21 subparagraph (ii) of paragraph (f) of subdivision 19 of section 2807-c 22 of the public health law from monies accumulated and interest earned in 23 the bad debt and charity care and capital statewide pools through an 24 assessment charged to general hospitals pursuant to the provisions of 25 subdivision 18 of section 2807-c of the public health law and those funds authorized for distribution in accordance with the provisions of 26 27 section 2807-1 of the public health law for the purposes of payment for 28 administrative costs of the department of health related to programs 29 funded under section 2807-1 of the public health law into the special revenue funds - other, health care reform act (HCRA) resources fund -30 061, primary care initiatives account, established within the department 31 32 of health.

33 Notwithstanding any inconsistent provision of law, rule or regu-(8) lation and effective April 1, 2008 through March 31, [2017] 2020, the 34 commissioner of health is authorized to transfer and the comptroller is 35 36 authorized to deposit, within amounts appropriated each year, those 37 funds authorized for distribution in accordance with section 2807-1 of 38 the public health law for the purposes of payment for administrative 39 costs of the department of health related to programs funded under 40 section 2807-1 of the public health law into the special revenue funds -41 other, health care reform act (HCRA) resources fund - 061, health care 42 delivery administration account, established within the department of 43 health.

44 (9) Notwithstanding any inconsistent provision of law, rule or regu-45 lation and effective April 1, 2008 through March 31, [2017] 2020, the 46 commissioner of health is authorized to transfer and the comptroller is 47 authorized to deposit, within amounts appropriated each year, those funds authorized pursuant to sections 2807-d, 3614-a and 3614-b of the 48 49 public health law and section 367-i of the social services law and for distribution in accordance with the provisions of subdivision 9 50 of section 2807-j of the public health law for the purpose of payment for 51 52 administration of statutory duties for the collections and distributions authorized by sections 2807-c, 2807-d, 2807-j, 2807-k, 2807-l, 3614-a 53 and 3614-b of the public health law and section 367-i of the social 54 services law into the special revenue funds - other, health care reform 55



1 act (HCRA) resources fund - 061, provider collection monitoring account, 2 established within the department of health.

3 § 15. Paragraph (a) of subdivision 1 of section 18 of chapter 266 of 4 the laws of 1986, amending the civil practice law and rules and other 5 laws relating to malpractice and professional medical conduct, as 6 amended by section 2 of part C of chapter 59 of the laws of 2016, is 7 amended to read as follows:

The superintendent of financial services and the commissioner of 8 (a) health or their designee shall, from funds available in the hospital 9 excess liability pool created pursuant to subdivision 5 of this section, 10 11 purchase a policy or policies for excess insurance coverage, as author-12 ized by paragraph 1 of subsection (e) of section 5502 of the insurance 13 law; or from an insurer, other than an insurer described in section 5502 14 of the insurance law, duly authorized to write such coverage and actual-15 ly writing medical malpractice insurance in this state; or shall 16 purchase equivalent excess coverage in a form previously approved by the 17 superintendent of financial services for purposes of providing equivalent excess coverage in accordance with section 19 of chapter 294 of 18 19 the laws of 1985, for medical or dental malpractice occurrences between July 1, 1986 and June 30, 1987, between July 1, 1987 and June 30, 1988, 20 21 between July 1, 1988 and June 30, 1989, between July 1, 1989 and June 22 30, 1990, between July 1, 1990 and June 30, 1991, between July 1, 1991 23 and June 30, 1992, between July 1, 1992 and June 30, 1993, between July 1, 1993 and June 30, 1994, between July 1, 1994 and June 30, 1995, 24 between July 1, 1995 and June 30, 1996, between July 1, 1996 and June 25 30, 1997, between July 1, 1997 and June 30, 1998, between July 1, 1998 26 27 and June 30, 1999, between July 1, 1999 and June 30, 2000, between July 28 1, 2000 and June 30, 2001, between July 1, 2001 and June 30, 2002, between July 1, 2002 and June 30, 2003, between July 1, 2003 and June 29 30, 2004, between July 1, 2004 and June 30, 2005, between July 1, 2005 30 and June 30, 2006, between July 1, 2006 and June 30, 2007, between July 31 2007 and June 30, 2008, between July 1, 2008 and June 30, 2009, 32 1, 33 between July 1, 2009 and June 30, 2010, between July 1, 2010 and June 2011, between July 1, 2011 and June 30, 2012, between July 1, 2012 34 30, and June 30, 2013, between July 1, 2013 and June 30, 2014, between July 35 36 1, 2014 and June 30, 2015, between July 1, 2015 and June 30, 2016, [and] 37 between July 1, 2016 and June 30, 2017, and between July 1, 2017 and 38 June 30, 2018 or reimburse the hospital where the hospital purchases 39 equivalent excess coverage as defined in subparagraph (i) of paragraph 40 (a) of subdivision 1-a of this section for medical or dental malpractice 41 occurrences between July 1, 1987 and June 30, 1988, between July 1, 1988 42 and June 30, 1989, between July 1, 1989 and June 30, 1990, between July 43 1990 and June 30, 1991, between July 1, 1991 and June 30, 1992, 1, 44 between July 1, 1992 and June 30, 1993, between July 1, 1993 and June 45 30, 1994, between July 1, 1994 and June 30, 1995, between July 1, 1995 46 and June 30, 1996, between July 1, 1996 and June 30, 1997, between July 47 1997 and June 30, 1998, between July 1, 1998 and June 30, 1999, 1, between July 1, 1999 and June 30, 2000, between July 1, 2000 and June 48 30, 2001, between July 1, 2001 and June 30, 2002, between July 1, 2002 49 and June 30, 2003, between July 1, 2003 and June 30, 2004, between July 50 2004 and June 30, 2005, between July 1, 2005 and June 30, 2006, 51 1, between July 1, 2006 and June 30, 2007, between July 1, 2007 and June 52 30, 2008, between July 1, 2008 and June 30, 2009, between July 1, 2009 53 and June 30, 2010, between July 1, 2010 and June 30, 2011, between July 54 2011 and June 30, 2012, between July 1, 2012 and June 30, 2013, 55 1, between July 1, 2013 and June 30, 2014, between July 1, 2014 and June 56



1 30, 2015, between July 1, 2015 and June 30, 2016, [and] between July 1, 2016 and June 30, 2017, and between July 1, 2017 and June 30, 2018 for 2 physicians or dentists certified as eligible for each such period or 3 periods pursuant to subdivision 2 of this section by a general hospital 4 licensed pursuant to article 28 of the public health law; provided that 5 single insurer shall write more than fifty percent of the total 6 no 7 excess premium for a given policy year; and provided, however, that such 8 eligible physicians or dentists must have in force an individual policy, from an insurer licensed in this state of primary malpractice insurance 9 coverage in amounts of no less than one million three hundred thousand 10 dollars for each claimant and three million nine hundred thousand 11 12 dollars for all claimants under that policy during the period of such 13 excess coverage for such occurrences or be endorsed as additional 14 insureds under a hospital professional liability policy which is offered 15 through a voluntary attending physician ("channeling") program previous-16 ly permitted by the superintendent of financial services during the 17 period of such excess coverage for such occurrences. During such period, 18 such policy for excess coverage or such equivalent excess coverage 19 shall, when combined with the physician's or dentist's primary malprac-20 tice insurance coverage or coverage provided through a voluntary attend-21 ing physician ("channeling") program, total an aggregate level of two 22 million three hundred thousand dollars for each claimant and six million 23 nine hundred thousand dollars for all claimants from all such policies 24 with respect to occurrences in each of such years provided, however, if 25 the cost of primary malpractice insurance coverage in excess of one million dollars, but below the excess medical malpractice insurance 26 27 coverage provided pursuant to this act, exceeds the rate of nine percent 28 per annum, then the required level of primary malpractice insurance 29 coverage in excess of one million dollars for each claimant shall be in 30 an amount of not less than the dollar amount of such coverage available at nine percent per annum; the required level of such coverage for all 31 32 claimants under that policy shall be in an amount not less than three 33 times the dollar amount of coverage for each claimant; and excess coverage, when combined with such primary malpractice insurance coverage, 34 shall increase the aggregate level for each claimant by one million 35 36 dollars and three million dollars for all claimants; and provided 37 further, that, with respect to policies of primary medical malpractice 38 coverage that include occurrences between April 1, 2002 and June 30, 39 2002, such requirement that coverage be in amounts no less than one 40 million three hundred thousand dollars for each claimant and three 41 million nine hundred thousand dollars for all claimants for such occur-42 rences shall be effective April 1, 2002. 43 § 16. Subdivision 3 of section 18 of chapter 266 of the laws of 1986, 44 amending the civil practice law and rules and other laws relating to

45 malpractice and professional medical conduct, as amended by section 3 of 46 part C of chapter 59 of the laws of 2016, is amended to read as follows: 47 (3) (a) The superintendent of financial services shall determine and 48 certify to each general hospital and to the commissioner of health the 49 cost of excess malpractice insurance for medical or dental malpractice occurrences between July 1, 1986 and June 30, 1987, between July 1, 1988 50 and June 30, 1989, between July 1, 1989 and June 30, 1990, between July 51 1, 1990 and June 30, 1991, between July 1, 1991 and June 30, 1992, 52 between July 1, 1992 and June 30, 1993, between July 1, 1993 and June 53 30, 1994, between July 1, 1994 and June 30, 1995, between July 1, 54 1995 and June 30, 1996, between July 1, 1996 and June 30, 1997, between July 55 1, 1997 and June 30, 1998, between July 1, 1998 and June 30, 1999, 56



between July 1, 1999 and June 30, 2000, between July 1, 2000 and June 1 30, 2001, between July 1, 2001 and June 30, 2002, between July 1, 2002 2 and June 30, 2003, between July 1, 2003 and June 30, 2004, between July 3 2004 and June 30, 2005, between July 1, 2005 and June 30, 2006, 4 1, between July 1, 2006 and June 30, 2007, between July 1, 2007 and June 5 2008, between July 1, 2008 and June 30, 2009, between July 1, 2009 6 30, and June 30, 2010, between July 1, 2010 and June 30, 2011, between July 7 2011 and June 30, 2012, between July 1, 2012 and June 30, 2013, and 8 1, between July 1, 2013 and June 30, 2014, between July 1, 2014 and June 9 30, 2015, between July 1, 2015 and June 30, 2016, and between July 1, 10 2016 and June 30, 2017, and between July 1, 2017 and June 30, 2018 allo-11 12 cable to each general hospital for physicians or dentists certified as 13 eligible for purchase of a policy for excess insurance coverage by such 14 general hospital in accordance with subdivision 2 of this section, and 15 may amend such determination and certification as necessary.

16 (b) The superintendent of financial services shall determine and 17 certify to each general hospital and to the commissioner of health the cost of excess malpractice insurance or equivalent excess coverage for 18 19 medical or dental malpractice occurrences between July 1, 1987 and June 30, 1988, between July 1, 1988 and June 30, 1989, between July 1, 1989 20 21 and June 30, 1990, between July 1, 1990 and June 30, 1991, between July 22 1, 1991 and June 30, 1992, between July 1, 1992 and June 30, 1993, between July 1, 1993 and June 30, 1994, between July 1, 1994 and June 23 30, 1995, between July 1, 1995 and June 30, 1996, between July 1, 1996 24 and June 30, 1997, between July 1, 1997 and June 30, 1998, between July 25 1, 1998 and June 30, 1999, between July 1, 1999 and June 30, 2000, 26 27 between July 1, 2000 and June 30, 2001, between July 1, 2001 and June 28 30, 2002, between July 1, 2002 and June 30, 2003, between July 1, 2003 29 and June 30, 2004, between July 1, 2004 and June 30, 2005, between July 2005 and June 30, 2006, between July 1, 2006 and June 30, 2007, 30 1, between July 1, 2007 and June 30, 2008, between July 1, 2008 and June 31 30, 2009, between July 1, 2009 and June 30, 2010, between July 1, 2010 32 33 and June 30, 2011, between July 1, 2011 and June 30, 2012, between July 1, 2012 and June 30, 2013, between July 1, 2013 and June 30, 2014, 34 between July 1, 2014 and June 30, 2015, between July 1, 2015 and June 35 36 30, 2016, and between July 1, 2016 and June 30, 2017, and between July 1, 2017 and June 30, 2018 allocable to each general hospital for physi-37 38 cians or dentists certified as eligible for purchase of a policy for 39 excess insurance coverage or equivalent excess coverage by such general 40 hospital in accordance with subdivision 2 of this section, and may amend 41 such determination and certification as necessary. The superintendent of 42 financial services shall determine and certify to each general hospital 43 and to the commissioner of health the ratable share of such cost alloca-44 ble to the period July 1, 1987 to December 31, 1987, to the period Janu-45 ary 1, 1988 to June 30, 1988, to the period July 1, 1988 to December 31, 46 1988, to the period January 1, 1989 to June 30, 1989, to the period July 47 1, 1989 to December 31, 1989, to the period January 1, 1990 to June 30, 1990, to the period July 1, 1990 to December 31, 1990, to the period 48 January 1, 1991 to June 30, 1991, to the period July 1, 1991 to December 49 31, 1991, to the period January 1, 1992 to June 30, 1992, to the period 50 July 1, 1992 to December 31, 1992, to the period January 1, 1993 to June 51 30, 1993, to the period July 1, 1993 to December 31, 1993, to the period 52 January 1, 1994 to June 30, 1994, to the period July 1, 1994 to December 53 31, 1994, to the period January 1, 1995 to June 30, 1995, to the period 54 July 1, 1995 to December 31, 1995, to the period January 1, 1996 to June 55 30, 1996, to the period July 1, 1996 to December 31, 1996, to the period 56



1 January 1, 1997 to June 30, 1997, to the period July 1, 1997 to December 2 31, 1997, to the period January 1, 1998 to June 30, 1998, to the period July 1, 1998 to December 31, 1998, to the period January 1, 1999 to June 3 30, 1999, to the period July 1, 1999 to December 31, 1999, to the period 4 January 1, 2000 to June 30, 2000, to the period July 1, 2000 to December 5 31, 2000, to the period January 1, 2001 to June 30, 2001, to the period 6 July 1, 2001 to June 30, 2002, to the period July 1, 2002 to June 30, 7 2003, to the period July 1, 2003 to June 30, 2004, to the period July 1, 8 2004 to June 30, 2005, to the period July 1, 2005 and June 30, 2006, to 9 the period July 1, 2006 and June 30, 2007, to the period July 1, 2007 10 and June 30, 2008, to the period July 1, 2008 and June 30, 2009, to the 11 12 period July 1, 2009 and June 30, 2010, to the period July 1, 2010 and June 30, 2011, to the period July 1, 2011 and June 30, 2012, to the 13 period July 1, 2012 and June 30, 2013, to the period July 1, 2013 and 14 15 June 30, 2014, to the period July 1, 2014 and June 30, 2015, to the 16 period July 1, 2015 and June 30, 2016, and between July 1, 2016 and June 17 30, 2017, and to the period July 1, 2017 and June 30, 2018.

18 § 17. Paragraphs (a), (b), (c), (d) and (e) of subdivision 8 of 19 section 18 of chapter 266 of the laws of 1986, amending the civil prac-20 tice law and rules and other laws relating to malpractice and profes-21 sional medical conduct, as amended by section 4 of part C of chapter 59 22 of the laws of 2016, are amended to read as follows:

23 (a) To the extent funds available to the hospital excess liability pool pursuant to subdivision 5 of this section as amended, and pursuant 24 to section 6 of part J of chapter 63 of the laws of 2001, as may from 25 time to time be amended, which amended this subdivision, are insuffi-26 27 cient to meet the costs of excess insurance coverage or equivalent 28 excess coverage for coverage periods during the period July 1, 1992 to 29 June 30, 1993, during the period July 1, 1993 to June 30, 1994, during the period July 1, 1994 to June 30, 1995, during the period July 1, 1995 30 to June 30, 1996, during the period July 1, 1996 to June 30, 1997, 31 during the period July 1, 1997 to June 30, 1998, during the period July 32 33 1998 to June 30, 1999, during the period July 1, 1999 to June 30, 1, 2000, during the period July 1, 2000 to June 30, 2001, during the period 34 July 1, 2001 to October 29, 2001, during the period April 1, 2002 to 35 June 30, 2002, during the period July 1, 2002 to June 30, 2003, during 36 37 the period July 1, 2003 to June 30, 2004, during the period July 1, 2004 38 to June 30, 2005, during the period July 1, 2005 to June 30, 2006, 39 during the period July 1, 2006 to June 30, 2007, during the period July 40 1, 2007 to June 30, 2008, during the period July 1, 2008 to June 30, 41 2009, during the period July 1, 2009 to June 30, 2010, during the period 42 July 1, 2010 to June 30, 2011, during the period July 1, 2011 to June 43 30, 2012, during the period July 1, 2012 to June 30, 2013, during the 44 period July 1, 2013 to June 30, 2014, during the period July 1, 2014 to 45 June 30, 2015, during the period July 1, 2015 and June 30, 2016, [and 46 between] during the period July 1, 2016 and June 30, 2017, and during 47 the period July 1, 2017 and June 30, 2018 allocated or reallocated in accordance with paragraph (a) of subdivision 4-a of this section to 48 49 rates of payment applicable to state governmental agencies, each physician or dentist for whom a policy for excess insurance coverage or 50 equivalent excess coverage is purchased for such period shall be respon-51 52 sible for payment to the provider of excess insurance coverage or equivalent excess coverage of an allocable share of such insufficiency, based 53 on the ratio of the total cost of such coverage for such physician to 54 55 the sum of the total cost of such coverage for all physicians applied to such insufficiency. 56



1 (b) Each provider of excess insurance coverage or equivalent excess 2 coverage covering the period July 1, 1992 to June 30, 1993, or covering the period July 1, 1993 to June 30, 1994, or covering the period July 1, 3 1994 to June 30, 1995, or covering the period July 1, 1995 to June 30, 4 1996, or covering the period July 1, 1996 to June 30, 1997, or covering 5 the period July 1, 1997 to June 30, 1998, or covering the period July 1, 6 7 1998 to June 30, 1999, or covering the period July 1, 1999 to June 30, 8 2000, or covering the period July 1, 2000 to June 30, 2001, or covering the period July 1, 2001 to October 29, 2001, or covering the period 9 April 1, 2002 to June 30, 2002, or covering the period July 1, 2002 to 10 June 30, 2003, or covering the period July 1, 2003 to June 30, 2004, or 11 12 covering the period July 1, 2004 to June 30, 2005, or covering the peri-13 od July 1, 2005 to June 30, 2006, or covering the period July 1, 2006 to 14 June 30, 2007, or covering the period July 1, 2007 to June 30, 2008, or 15 covering the period July 1, 2008 to June 30, 2009, or covering the peri-16 od July 1, 2009 to June 30, 2010, or covering the period July 1, 2010 to June 30, 2011, or covering the period July 1, 2011 to June 30, 2012, or 17 18 covering the period July 1, 2012 to June 30, 2013, or covering the peri-19 od July 1, 2013 to June 30, 2014, or covering the period July 1, 2014 to June 30, 2015, or covering the period July 1, 2015 to June 30, 2016, or 20 21 covering the period July 1, 2016 to June 30, 2017, or covering the peri-22 od July 1, 2017 to June 30, 2018 shall notify a covered physician or 23 dentist by mail, mailed to the address shown on the last application for 24 excess insurance coverage or equivalent excess coverage, of the amount 25 due to such provider from such physician or dentist for such coverage period determined in accordance with paragraph (a) of this subdivision. 26 27 Such amount shall be due from such physician or dentist to such provider 28 of excess insurance coverage or equivalent excess coverage in a time and 29 manner determined by the superintendent of financial services. 30 (c) If a physician or dentist liable for payment of a portion of the costs of excess insurance coverage or equivalent excess coverage cover-31 ing the period July 1, 1992 to June 30, 1993, or covering the period 32 July 1, 1993 to June 30, 1994, or covering the period July 1, 1994 to 33 June 30, 1995, or covering the period July 1, 1995 to June 30, 1996, or 34 covering the period July 1, 1996 to June 30, 1997, or covering the peri-35 od July 1, 1997 to June 30, 1998, or covering the period July 1, 1998 to 36 37 June 30, 1999, or covering the period July 1, 1999 to June 30, 2000, or 38 covering the period July 1, 2000 to June 30, 2001, or covering the period July 1, 2001 to October 29, 2001, or covering the period April 1, 39 40 2002 to June 30, 2002, or covering the period July 1, 2002 to June 30, 41 2003, or covering the period July 1, 2003 to June 30, 2004, or covering 42 the period July 1, 2004 to June 30, 2005, or covering the period July 1, 43 2005 to June 30, 2006, or covering the period July 1, 2006 to June 30, 44 2007, or covering the period July 1, 2007 to June 30, 2008, or covering 45 the period July 1, 2008 to June 30, 2009, or covering the period July 1, 46 2009 to June 30, 2010, or covering the period July 1, 2010 to June 30, 47 2011, or covering the period July 1, 2011 to June 30, 2012, or covering the period July 1, 2012 to June 30, 2013, or covering the period July 1, 48 49 2013 to June 30, 2014, or covering the period July 1, 2014 to June 30, 2015, or covering the period July 1, 2015 to June 30, 2016, or covering 50 the period July 1, 2016 to June 30, 2017, or covering the period July 1, 51 52 2017 to June 30, 2018 determined in accordance with paragraph (a) of 53 this subdivision fails, refuses or neglects to make payment to the 54 provider of excess insurance coverage or equivalent excess coverage in 55 such time and manner as determined by the superintendent of financial services pursuant to paragraph (b) of this subdivision, excess insurance 56



coverage or equivalent excess coverage purchased for such physician or
 dentist in accordance with this section for such coverage period shall
 be cancelled and shall be null and void as of the first day on or after
 the commencement of a policy period where the liability for payment
 pursuant to this subdivision has not been met.

6 (d) Each provider of excess insurance coverage or equivalent excess 7 coverage shall notify the superintendent of financial services and the commissioner of health or their designee of each physician and dentist 8 eligible for purchase of a policy for excess insurance coverage or 9 equivalent excess coverage covering the period July 1, 1992 to June 30, 10 1993, or covering the period July 1, 1993 to June 30, 1994, or covering 11 12 the period July 1, 1994 to June 30, 1995, or covering the period July 1, 13 1995 to June 30, 1996, or covering the period July 1, 1996 to June 30, 14 1997, or covering the period July 1, 1997 to June 30, 1998, or covering 15 the period July 1, 1998 to June 30, 1999, or covering the period July 1, 16 1999 to June 30, 2000, or covering the period July 1, 2000 to June 30, 17 2001, or covering the period July 1, 2001 to October 29, 2001, or covering the period April 1, 2002 to June 30, 2002, or covering the period 18 19 July 1, 2002 to June 30, 2003, or covering the period July 1, 2003 to June 30, 2004, or covering the period July 1, 2004 to June 30, 2005, or 20 21 covering the period July 1, 2005 to June 30, 2006, or covering the peri-22 od July 1, 2006 to June 30, 2007, or covering the period July 1, 2007 to June 30, 2008, or covering the period July 1, 2008 to June 30, 2009, or 23 covering the period July 1, 2009 to June 30, 2010, or covering the peri-24 od July 1, 2010 to June 30, 2011, or covering the period July 1, 2011 to 25 June 30, 2012, or covering the period July 1, 2012 to June 30, 2013, or 26 27 covering the period July 1, 2013 to June 30, 2014, or covering the peri-28 od July 1, 2014 to June 30, 2015, or covering the period July 1, 2015 to 29 June 30, 2016, or covering the period July 1, 2016 to June 30, 2017, or covering the period July 1, 2017 to June 30, 2018 that has made payment 30 to such provider of excess insurance coverage or equivalent excess 31 coverage in accordance with paragraph (b) of this subdivision and of 32 33 each physician and dentist who has failed, refused or neglected to make 34 such payment.

35 (e) A provider of excess insurance coverage or equivalent excess 36 coverage shall refund to the hospital excess liability pool any amount 37 allocable to the period July 1, 1992 to June 30, 1993, and to the period 38 July 1, 1993 to June 30, 1994, and to the period July 1, 1994 to June 39 30, 1995, and to the period July 1, 1995 to June 30, 1996, and to the 40 period July 1, 1996 to June 30, 1997, and to the period July 1, 1997 to 41 June 30, 1998, and to the period July 1, 1998 to June 30, 1999, and to 42 the period July 1, 1999 to June 30, 2000, and to the period July 1, 2000 43 to June 30, 2001, and to the period July 1, 2001 to October 29, 2001, 44 and to the period April 1, 2002 to June 30, 2002, and to the period July 45 1, 2002 to June 30, 2003, and to the period July 1, 2003 to June 30, 46 2004, and to the period July 1, 2004 to June 30, 2005, and to the period 47 July 1, 2005 to June 30, 2006, and to the period July 1, 2006 to June 30, 2007, and to the period July 1, 2007 to June 30, 2008, and to the 48 period July 1, 2008 to June 30, 2009, and to the period July 1, 2009 to 49 June 30, 2010, and to the period July 1, 2010 to June 30, 2011, and to 50 the period July 1, 2011 to June 30, 2012, and to the period July 1, 2012 51 52 to June 30, 2013, and to the period July 1, 2013 to June 30, 2014, and to the period July 1, 2014 to June 30, 2015, and to the period July 1, 53 2015 to June 30, 2016, [and] to the period July 1, 2016 to June 30, 54 55 2017, and to the period July 1, 2017 to June 30, 2018 received from the hospital excess liability pool for purchase of excess insurance coverage 56


1 or equivalent excess coverage covering the period July 1, 1992 to June 30, 1993, and covering the period July 1, 1993 to June 30, 1994, and 2 covering the period July 1, 1994 to June 30, 1995, and covering the 3 period July 1, 1995 to June 30, 1996, and covering the period July 1, 4 1996 to June 30, 1997, and covering the period July 1, 1997 to June 30, 5 1998, and covering the period July 1, 1998 to June 30, 1999, and cover-6 ing the period July 1, 1999 to June 30, 2000, and covering the period 7 July 1, 2000 to June 30, 2001, and covering the period July 1, 2001 to 8 October 29, 2001, and covering the period April 1, 2002 to June 30, 9 2002, and covering the period July 1, 2002 to June 30, 2003, and cover-10 ing the period July 1, 2003 to June 30, 2004, and covering the period 11 12 July 1, 2004 to June 30, 2005, and covering the period July 1, 2005 to 13 June 30, 2006, and covering the period July 1, 2006 to June 30, 2007, 14 and covering the period July 1, 2007 to June 30, 2008, and covering the 15 period July 1, 2008 to June 30, 2009, and covering the period July 1, 16 2009 to June 30, 2010, and covering the period July 1, 2010 to June 30, 2011, and covering the period July 1, 2011 to June 30, 2012, and cover-17 ing the period July 1, 2012 to June 30, 2013, and covering the period 18 19 July 1, 2013 to June 30, 2014, and covering the period July 1, 2014 to June 30, 2015, and covering the period July 1, 2015 to June 30, 2016, 20 21 and covering the period July 1, 2016 to June 30, 2017, and covering the 22 period July 1, 2017 to June 30, 2018 for a physician or dentist where such excess insurance coverage or equivalent excess coverage 23 is cancelled in accordance with paragraph (c) of this subdivision. 24 Section 40 of chapter 266 of the laws of 1986, amending the 25 § 18. 26 civil practice law and rules and other laws relating to malpractice and 27 professional medical conduct, as amended by section 5 of part C of chap-28 ter 59 of the laws of 2016, is amended to read as follows: 29 § 40. The superintendent of financial services shall establish rates 30 for policies providing coverage for physicians and surgeons medical malpractice for the periods commencing July 1, 1985 and ending June 30, 31

[2017] 2018; provided, however, that notwithstanding any other provision 32 33 of law, the superintendent shall not establish or approve any increase 34 in rates for the period commencing July 1, 2009 and ending June 30, 35 2010. The superintendent shall direct insurers to establish segregated 36 accounts for premiums, payments, reserves and investment income attrib-37 utable to such premium periods and shall require periodic reports by the 38 insurers regarding claims and expenses attributable to such periods to 39 monitor whether such accounts will be sufficient to meet incurred claims 40 and expenses. On or after July 1, 1989, the superintendent shall impose 41 a surcharge on premiums to satisfy a projected deficiency that is 42 attributable to the premium levels established pursuant to this section 43 for such periods; provided, however, that such annual surcharge shall 44 not exceed eight percent of the established rate until July 1, [2017] 45 2018, at which time and thereafter such surcharge shall not exceed twen-46 ty-five percent of the approved adequate rate, and that such annual 47 surcharges shall continue for such period of time as shall be sufficient to satisfy such deficiency. The superintendent shall not impose such 48 49 surcharge during the period commencing July 1, 2009 and ending June 30, 2010. On and after July 1, 1989, the surcharge prescribed by this 50 51 section shall be retained by insurers to the extent that they insured physicians and surgeons during the July 1, 1985 through June 30, [2017] 52 2018 policy periods; in the event and to the extent physicians and 53 surgeons were insured by another insurer during such periods, all or a 54 55 pro rata share of the surcharge, as the case may be, shall be remitted to such other insurer in accordance with rules and regulations to be 56



promulgated by the superintendent. Surcharges collected from physicians 1 2 and surgeons who were not insured during such policy periods shall be apportioned among all insurers in proportion to the premium written by 3 each insurer during such policy periods; if a physician or surgeon was 4 5 insured by an insurer subject to rates established by the superintendent during such policy periods, and at any time thereafter a hospital, 6 7 health maintenance organization, employer or institution is responsible 8 for responding in damages for liability arising out of such physician's or surgeon's practice of medicine, such responsible entity shall also 9 remit to such prior insurer the equivalent amount that would then be 10 11 collected as a surcharge if the physician or surgeon had continued to 12 remain insured by such prior insurer. In the event any insurer that 13 provided coverage during such policy periods is in liquidation, the 14 property/casualty insurance security fund shall receive the portion of 15 surcharges to which the insurer in liquidation would have been entitled. 16 The surcharges authorized herein shall be deemed to be income earned for 17 the purposes of section 2303 of the insurance law. The superintendent, 18 in establishing adequate rates and in determining any projected defi-19 ciency pursuant to the requirements of this section and the insurance 20 law, shall give substantial weight, determined in his discretion and 21 judgment, to the prospective anticipated effect of any regulations 22 promulgated and laws enacted and the public benefit of stabilizing 23 malpractice rates and minimizing rate level fluctuation during the peri-24 od of time necessary for the development of more reliable statistical 25 experience as to the efficacy of such laws and regulations affecting 26 medical, dental or podiatric malpractice enacted or promulgated in 1985, 27 1986, by this act and at any other time. Notwithstanding any provision 28 of the insurance law, rates already established and to be established by 29 the superintendent pursuant to this section are deemed adequate if such 30 rates would be adequate when taken together with the maximum authorized annual surcharges to be imposed for a reasonable period of time whether 31 32 or not any such annual surcharge has been actually imposed as of the 33 establishment of such rates.

§ 19. Section 5 and subdivisions (a) and (e) of section 6 of part J of chapter 63 of the laws of 2001, amending chapter 266 of the laws of 1986, amending the civil practice law and rules and other laws relating to malpractice and professional medical conduct, as amended by section 6 of part C of chapter 59 of the laws of 2016, are amended to read as follows:

40 S 5. The superintendent of financial services and the commissioner of 41 health shall determine, no later than June 15, 2002, June 15, 2003, June 42 15, 2004, June 15, 2005, June 15, 2006, June 15, 2007, June 15, 2008, 43 June 15, 2009, June 15, 2010, June 15, 2011, June 15, 2012, June 15, 44 2013, June 15, 2014, June 15, 2015, June 15, 2016, [and] June 15, 2017, 45 and June 15, 2018 the amount of funds available in the hospital excess 46 liability pool, created pursuant to section 18 of chapter 266 of the 47 laws of 1986, and whether such funds are sufficient for purposes of purchasing excess insurance coverage for eligible participating physi-48 49 cians and dentists during the period July 1, 2001 to June 30, 2002, or July 1, 2002 to June 30, 2003, or July 1, 2003 to June 30, 2004, or July 50 1, 2004 to June 30, 2005, or July 1, 2005 to June 30, 2006, or July 1, 51 2006 to June 30, 2007, or July 1, 2007 to June 30, 2008, or July 1, 2008 52 to June 30, 2009, or July 1, 2009 to June 30, 2010, or July 1, 2010 to 53 June 30, 2011, or July 1, 2011 to June 30, 2012, or July 1, 2012 to June 54 55 30, 2013, or July 1, 2013 to June 30, 2014, or July 1, 2014 to June 30,



1 2015, or July 1, 2015 to June 30, 2016, or July 1, 2016 to June 30, 2 2017, or to July 1, 2017 to June 30, 2018 as applicable.

(a) This section shall be effective only upon a determination, pursu-3 ant to section five of this act, by the superintendent of financial 4 services and the commissioner of health, and a certification of such 5 determination to the state director of the budget, the chair of the 6 7 senate committee on finance and the chair of the assembly committee on ways and means, that the amount of funds in the hospital excess liabil-8 ity pool, created pursuant to section 18 of chapter 266 of the laws of 9 1986, is insufficient for purposes of purchasing excess insurance cover-10 11 age for eligible participating physicians and dentists during the period 12 July 1, 2001 to June 30, 2002, or July 1, 2002 to June 30, 2003, or July 13 1, 2003 to June 30, 2004, or July 1, 2004 to June 30, 2005, or July 1, 14 2005 to June 30, 2006, or July 1, 2006 to June 30, 2007, or July 1, 2007 15 to June 30, 2008, or July 1, 2008 to June 30, 2009, or July 1, 2009 to 16 June 30, 2010, or July 1, 2010 to June 30, 2011, or July 1, 2011 to June 17 30, 2012, or July 1, 2012 to June 30, 2013, or July 1, 2013 to June 30, 2014, or July 1, 2014 to June 30, 2015, or July 1, 2015 to June 30, 2016, or July 1, 2016 to June 30, 2017, or July 1, 2017 to June 30, 2018 18 19 20 as applicable.

(e) The commissioner of health shall transfer for deposit to the 21 22 hospital excess liability pool created pursuant to section 18 of chapter 23 266 of the laws of 1986 such amounts as directed by the superintendent 24 of financial services for the purchase of excess liability insurance coverage for eligible participating physicians and dentists for the 25 policy year July 1, 2001 to June 30, 2002, or July 1, 2002 to June 30, 26 27 2003, or July 1, 2003 to June 30, 2004, or July 1, 2004 to June 30, 28 2005, or July 1, 2005 to June 30, 2006, or July 1, 2006 to June 30, 29 2007, as applicable, and the cost of administering the hospital excess 30 liability pool for such applicable policy year, pursuant to the program established in chapter 266 of the laws of 1986, as amended, no later 31 than June 15, 2002, June 15, 2003, June 15, 2004, June 15, 2005, June 32 15, 2006, June 15, 2007, June 15, 2008, June 15, 2009, June 15, 2010, 33 June 15, 2011, June 15, 2012, June 15, 2013, June 15, 2014, June 15, 34 35 2015, June 15, 2016, [and] June 15, 2017, and June 15, 2018 as applica-36 ble.

37 § 20. Notwithstanding any law, rule or regulation to the contrary, 38 only physicians or dentists who were eligible, and for whom the super-39 intendent of financial services and the commissioner of health, or their 40 designee, purchased, with funds available in the hospital excess liabil-41 ity pool, a full or partial policy for excess coverage or equivalent 42 excess coverage for the coverage period ending the thirtieth of June, 43 two thousand seventeen, shall be eligible to apply for such coverage for 44 the coverage period beginning the first of July, two thousand seventeen; 45 provided, however, if the total number of physicians or dentists for 46 whom such excess coverage or equivalent excess coverage was purchased 47 for the policy year ending the thirtieth of June, two thousand seventeen exceeds the total number of physicians or dentists certified as eligible 48 49 for the coverage period beginning the first of July, two thousand seven-50 teen, then the general hospitals may certify additional eligible physicians or dentists in a number equal to such general hospital's propor-51 52 tional share of the total number of physicians or dentists for whom excess coverage or equivalent excess coverage was purchased with funds 53 54 available in the hospital excess liability pool as of the thirtieth of June, two thousand seventeen, as applied to the difference between the 55 number of eligible physicians or dentists for whom a policy for excess 56



coverage or equivalent excess coverage was purchased for the coverage 1 2 period ending the thirtieth of June, two thousand seventeen and the number of such eligible physicians or dentists who have applied for 3 excess coverage or equivalent excess coverage for the coverage period 4 5 beginning the first of July, two thousand seventeen. 6 § 21. Section 2807-1 of the public health law, as amended by section 7 7 of part B of chapter 60 of the laws of 2014, is amended to read as 8 follows: § 2807-1. Health care initiatives pool distributions. 1. Funds accumu-9 lated in the health care initiatives pools pursuant to paragraph (b) of 10 11 subdivision nine of section twenty-eight hundred seven-j of this arti-12 cle, or the health care reform act (HCRA) resources fund established 13 pursuant to section ninety-two-dd of the state finance law, whichever is 14 applicable, including income from invested funds, shall be distributed 15 or retained by the commissioner or by the state comptroller, as applica-16 ble, in accordance with the following. 17 (a) Funds shall be reserved and accumulated from year to year and 18 shall be available, including income from invested funds, for purposes 19 of distributions to programs to provide health care coverage for unin-20 sured or underinsured children pursuant to sections twenty-five hundred 21 ten and twenty-five hundred eleven of this chapter from the respective 22 health care initiatives pools established for the following periods in 23 the following amounts: 24 (i) from the pool for the period January first, nineteen hundred nine-25 ty-seven through December thirty-first, nineteen hundred ninety-seven, up to one hundred twenty million six hundred thousand dollars; 26 27 (ii) from the pool for the period January first, nineteen hundred 28 ninety-eight through December thirty-first, nineteen hundred ninety-29 eight, up to one hundred sixty-four million five hundred thousand 30 dollars; 31 from the pool for the period January first, nineteen hundred (iii) ninety-nine through December thirty-first, nineteen hundred ninety-nine, 32 33 up to one hundred eighty-one million dollars; (iv) from the pool for the period January first, two thousand through 34 35 December thirty-first, two thousand, two hundred seven million dollars; (v) from the pool for the period January first, two thousand one 36 37 through December thirty-first, two thousand one, two hundred thirty-five 38 million dollars; 39 (vi) from the pool for the period January first, two thousand two 40 through December thirty-first, two thousand two, three hundred twenty-41 four million dollars; 42 (vii) from the pool for the period January first, two thousand three 43 through December thirty-first, two thousand three, up to four hundred 44 fifty million three hundred thousand dollars; 45 (viii) from the pool for the period January first, two thousand four 46 through December thirty-first, two thousand four, up to four hundred 47 sixty million nine hundred thousand dollars; (ix) from the pool or the health care reform act (HCRA) resources 48 49 fund, whichever is applicable, for the period January first, two thou-50 sand five through December thirty-first, two thousand five, up to one 51 hundred fifty-three million eight hundred thousand dollars; 52 (x) from the health care reform act (HCRA) resources fund for the period January first, two thousand six through December thirty-first, 53 two thousand six, up to three hundred twenty-five million four hundred 54 55 thousand dollars;

1 (xi) from the health care reform act (HCRA) resources fund for the 2 period January first, two thousand seven through December thirty-first, two thousand seven, up to four hundred twenty-eight million fifty-nine 3 thousand dollars; 4 from the health care reform act (HCRA) resources fund for the 5 (xii) period January first, two thousand eight through December thirty-first, 6 two thousand ten, up to four hundred fifty-three million six hundred 7 seventy-four thousand dollars annually; 8 (xiii) from the health care reform act (HCRA) resources fund for the 9 period January first, two thousand eleven, through March thirty-first, 10 two thousand eleven, up to one hundred thirteen million four hundred 11 12 eighteen thousand dollars; 13 (xiv) from the health care reform act (HCRA) resources fund for the 14 period April first, two thousand eleven, through March thirty-first, two 15 thousand twelve, up to three hundred twenty-four million seven hundred 16 forty-four thousand dollars; 17 from the health care reform act (HCRA) resources fund for the (xv) 18 period April first, two thousand twelve, through March thirty-first, two 19 thousand thirteen, up to three hundred forty-six million four hundred 20 forty-four thousand dollars; 21 from the health care reform act (HCRA) resources fund for the (xvi) period April first, two thousand thirteen, through March thirty-first, 22 two thousand fourteen, up to three hundred seventy million six hundred 23 24 ninety-five thousand dollars; and (xvii) from the health care reform act (HCRA) resources fund for each 25 26 state fiscal year for periods on and after April first, two thousand 27 fourteen, within amounts appropriated. 28 (b) Funds shall be reserved and accumulated from year to year and 29 shall be available, including income from invested funds, for purposes of distributions for health insurance programs under the individual 30 subsidy programs established pursuant to the expanded health care cover-31 age act of nineteen hundred eighty-eight as amended, and for evaluation 32 of such programs from the respective health care initiatives pools or 33 the health care reform act (HCRA) resources fund, whichever is applica-34 ble, established for the following periods in the following amounts: 35 36 (i) (A) an amount not to exceed six million dollars on an annualized 37 basis for the periods January first, nineteen hundred ninety-seven 38 through December thirty-first, nineteen hundred ninety-nine; up to six 39 million dollars for the period January first, two thousand through 40 December thirty-first, two thousand; up to five million dollars for the 41 period January first, two thousand one through December thirty-first, 42 two thousand one; up to four million dollars for the period January 43 first, two thousand two through December thirty-first, two thousand two; 44 up to two million six hundred thousand dollars for the period January 45 first, two thousand three through December thirty-first, two thousand 46 three; up to one million three hundred thousand dollars for the period 47 January first, two thousand four through December thirty-first, two thousand four; up to six hundred seventy thousand dollars for the period 48 49 January first, two thousand five through June thirtieth, two thousand five; up to one million three hundred thousand dollars for the period 50 51 April first, two thousand six through March thirty-first, two thousand 52 seven; and up to one million three hundred thousand dollars annually for the period April first, two thousand seven through March thirty-first, 53 two thousand nine, shall be allocated to individual subsidy programs; 54 55 and



1 (B) an amount not to exceed seven million dollars on an annualized 2 basis for the periods during the period January first, nineteen hundred ninety-seven through December thirty-first, nineteen hundred ninety-nine 3 and four million dollars annually for the periods January first, two 4 5 thousand through December thirty-first, two thousand two, and three million dollars for the period January first, two thousand three through 6 December thirty-first, two thousand three, and two million dollars for 7 the period January first, two thousand four through December thirty-8 first, two thousand four, and two million dollars for the period January 9 first, two thousand five through June thirtieth, two thousand five shall 10 11 be allocated to the catastrophic health care expense program.

12 (ii) Notwithstanding any law to the contrary, the characterizations of 13 the New York state small business health insurance partnership program 14 as in effect prior to June thirtieth, two thousand three, voucher 15 program as in effect prior to December thirty-first, two thousand one, 16 individual subsidy program as in effect prior to June thirtieth, two thousand five, and catastrophic health care expense program, as in 17 18 effect prior to June thirtieth, two thousand five, may, for the purposes 19 identifying matching funds for the community health care conversion of 20 demonstration project described in a waiver of the provisions of title 21 XIX of the federal social security act granted to the state of New York 22 and dated July fifteenth, nineteen hundred ninety-seven, may continue to 23 be used to characterize the insurance programs in sections four thousand 24 three hundred twenty-one-a, four thousand three hundred twenty-two-a, 25 four thousand three hundred twenty-six and four thousand three hundred 26 twenty-seven of the insurance law, which are successor programs to these 27 programs.

28 (c) Up to seventy-eight million dollars shall be reserved and accumu-29 lated from year to year from the pool for the period January first, nineteen hundred ninety-seven through December thirty-first, nineteen 30 hundred ninety-seven, for purposes of public health programs, up to 31 seventy-six million dollars shall be reserved and accumulated from year 32 33 to year from the pools for the periods January first, nineteen hundred ninety-eight through December thirty-first, nineteen hundred ninety-34 eight and January first, nineteen hundred ninety-nine through December 35 36 thirty-first, nineteen hundred ninety-nine, up to eighty-four million 37 dollars shall be reserved and accumulated from year to year from the 38 pools for the period January first, two thousand through December thir-39 ty-first, two thousand, up to eighty-five million dollars shall be 40 reserved and accumulated from year to year from the pools for the period 41 January first, two thousand one through December thirty-first, two thou-42 sand one, up to eighty-six million dollars shall be reserved and accumu-43 lated from year to year from the pools for the period January first, two 44 thousand two through December thirty-first, two thousand two, up to 45 eighty-six million one hundred fifty thousand dollars shall be reserved 46 and accumulated from year to year from the pools for the period January 47 first, two thousand three through December thirty-first, two thousand three, up to fifty-eight million seven hundred eighty thousand dollars 48 49 shall be reserved and accumulated from year to year from the pools for the period January first, two thousand four through December thirty-50 51 first, two thousand four, up to sixty-eight million seven hundred thirty 52 thousand dollars shall be reserved and accumulated from year to year from the pools or the health care reform act (HCRA) resources fund, 53 whichever is applicable, for the period January first, two thousand five 54 through December thirty-first, two thousand five, up to ninety-four 55 million three hundred fifty thousand dollars shall be reserved and accu-56



1 mulated from year to year from the health care reform act (HCRA) resources fund for the period January first, two thousand six through 2 December thirty-first, two thousand six, up to seventy million nine 3 hundred thirty-nine thousand dollars shall be reserved and accumulated 4 5 from year to year from the health care reform act (HCRA) resources fund for the period January first, two thousand seven through December thir-6 ty-first, two thousand seven, up to fifty-five million six hundred 7 8 eighty-nine thousand dollars annually shall be reserved and accumulated from year to year from the health care reform act (HCRA) resources fund 9 for the period January first, two thousand eight through December thir-10 11 ty-first, two thousand ten, up to thirteen million nine hundred twenty-12 two thousand dollars shall be reserved and accumulated from year to year 13 from the health care reform act (HCRA) resources fund for the period 14 January first, two thousand eleven through March thirty-first, two thou-15 sand eleven, and for periods on and after April first, two thousand 16 eleven, up to funding amounts specified below and shall be available, 17 including income from invested funds, for:

18 (i) deposit by the commissioner, within amounts appropriated, and the 19 state comptroller is hereby authorized and directed to receive for 20 deposit to, to the credit of the department of health's special revenue 21 fund - other, hospital based grants program account or the health care 22 reform act (HCRA) resources fund, whichever is applicable, for purposes 23 of services and expenses related to general hospital based grant 24 programs, up to twenty-two million dollars annually from the nineteen hundred ninety-seven pool, nineteen hundred ninety-eight pool, nineteen 25 hundred ninety-nine pool, two thousand pool, two thousand one pool and 26 27 two thousand two pool, respectively, up to twenty-two million dollars from the two thousand three pool, up to ten million dollars for the 28 29 period January first, two thousand four through December thirty-first, two thousand four, up to eleven million dollars for the period January 30 two thousand five through December thirty-first, two thousand 31 first, five, up to twenty-two million dollars for the period January first, two 32 33 thousand six through December thirty-first, two thousand six, up to 34 twenty-two million ninety-seven thousand dollars annually for the period 35 January first, two thousand seven through December thirty-first, two thousand ten, up to five million five hundred twenty-four thousand 36 37 dollars for the period January first, two thousand eleven through March 38 thirty-first, two thousand eleven, up to thirteen million four hundred 39 forty-five thousand dollars for the period April first, two thousand 40 eleven through March thirty-first, two thousand twelve, and up to thir-41 teen million three hundred seventy-five thousand dollars each state 42 fiscal year for the period April first, two thousand twelve through 43 March thirty-first, two thousand fourteen;

44 (ii) deposit by the commissioner, within amounts appropriated, and the 45 state comptroller is hereby authorized and directed to receive for 46 deposit to, to the credit of the emergency medical services training 47 account established in section ninety-seven-q of the state finance law 48 or the health care reform act (HCRA) resources fund, whichever is appli-49 cable, up to sixteen million dollars on an annualized basis for the periods January first, nineteen hundred ninety-seven through December 50 51 thirty-first, nineteen hundred ninety-nine, up to twenty million dollars 52 for the period January first, two thousand through December thirty-53 first, two thousand, up to twenty-one million dollars for the period January first, two thousand one through December thirty-first, two thou-54 55 sand one, up to twenty-two million dollars for the period January first, two thousand two through December thirty-first, two thousand two, up to 56



1 twenty-two million five hundred fifty thousand dollars for the period 2 January first, two thousand three through December thirty-first, two 3 thousand three, up to nine million six hundred eighty thousand dollars for the period January first, two thousand four through December thir-4 ty-first, two thousand four, up to twelve million one hundred thirty 5 thousand dollars for the period January first, two thousand five through 6 December thirty-first, two thousand five, up to twenty-four million two 7 8 hundred fifty thousand dollars for the period January first, two thousand six through December thirty-first, two thousand six, up to twenty 9 million four hundred ninety-two thousand dollars annually for the period 10 January first, two thousand seven through December thirty-first, two 11 12 thousand ten, up to five million one hundred twenty-three thousand 13 dollars for the period January first, two thousand eleven through March 14 thirty-first, two thousand eleven, up to eighteen million three hundred 15 fifty thousand dollars for the period April first, two thousand eleven 16 through March thirty-first, two thousand twelve, up to eighteen million 17 nine hundred fifty thousand dollars for the period April first, two 18 thousand twelve through March thirty-first, two thousand thirteen, up to 19 nineteen million four hundred nineteen thousand dollars for the period April first, two thousand thirteen through March thirty-first, two thou-20 21 sand fourteen, and up to nineteen million six hundred fifty-nine thou-22 sand seven hundred dollars each state fiscal year for the period of 23 April first, two thousand fourteen through March thirty-first, two thou-24 sand [seventeen] twenty;

25 (iii) priority distributions by the commissioner up to thirty-two 26 million dollars on an annualized basis for the period January first, two 27 thousand through December thirty-first, two thousand four, up to thir-28 ty-eight million dollars on an annualized basis for the period January 29 first, two thousand five through December thirty-first, two thousand six, up to eighteen million two hundred fifty thousand dollars for the 30 period January first, two thousand seven through December thirty-first, 31 two thousand seven, up to three million dollars annually for the period 32 33 January first, two thousand eight through December thirty-first, two thousand ten, up to seven hundred fifty thousand dollars for the period 34 35 January first, two thousand eleven through March thirty-first, two thou-36 sand eleven, up to two million nine hundred thousand dollars each state 37 fiscal year for the period April first, two thousand eleven through 38 March thirty-first, two thousand fourteen, and up to two million nine 39 hundred thousand dollars each state fiscal year for the period April 40 first, two thousand fourteen through March thirty-first, two thousand 41 [seventeen] twenty to be allocated (A) for the purposes established 42 pursuant to subparagraph (ii) of paragraph (f) of subdivision nineteen 43 of section twenty-eight hundred seven-c of this article as in effect on 44 December thirty-first, nineteen hundred ninety-six and as may thereafter 45 be amended, up to fifteen million dollars annually for the periods Janu-46 ary first, two thousand through December thirty-first, two thousand 47 four, up to twenty-one million dollars annually for the period January first, two thousand five through December thirty-first, two thousand 48 49 six, and up to seven million five hundred thousand dollars for the period January first, two thousand seven through March thirty-first, two 50 51 thousand seven;

52 (B) pursuant to a memorandum of understanding entered into by the 53 commissioner, the majority leader of the senate and the speaker of the 54 assembly, for the purposes outlined in such memorandum upon the recom-55 mendation of the majority leader of the senate, up to eight million 56 five hundred thousand dollars annually for the period January first, two



1 thousand through December thirty-first, two thousand six, and up to four 2 million two hundred fifty thousand dollars for the period January first, two thousand seven through June thirtieth, two thousand seven, and for 3 the purposes outlined in such memorandum upon the recommendation of the 4 speaker of the assembly, up to eight million five hundred thousand 5 dollars annually for the periods January first, two thousand through 6 7 December thirty-first, two thousand six, and up to four million two hundred fifty thousand dollars for the period January first, two thou-8 sand seven through June thirtieth, two thousand seven; and 9

(C) for services and expenses, including grants, related to emergency 10 assistance distributions as designated by the commissioner. Notwith-11 12 standing section one hundred twelve or one hundred sixty-three of the 13 state finance law or any other contrary provision of law, such distrib-14 utions shall be limited to providers or programs where, as determined by 15 the commissioner, emergency assistance is vital to protect the life or 16 safety of patients, to ensure the retention of facility caregivers or 17 other staff, or in instances where health facility operations are jeop-18 ardized, or where the public health is jeopardized or other emergency 19 situations exist, up to three million dollars annually for the period April first, two thousand seven through March thirty-first, two thousand 20 21 eleven, up to two million nine hundred thousand dollars each state 22 fiscal year for the period April first, two thousand eleven through March thirty-first, two thousand fourteen, [and] up to two million nine 23 24 hundred thousand dollars each state fiscal year for the period April 25 first, two thousand fourteen through March thirty-first, two thousand 26 seventeen, and up to two million nine hundred thousand dollars each 27 state fiscal year for the period April first, two thousand seventeen 28 through March thirty-first, two thousand twenty. Upon any distribution 29 of such funds, the commissioner shall immediately notify the chair and ranking minority member of the senate finance committee, the assembly 30 ways and means committee, the senate committee on health, and the assem-31 32 bly committee on health;

33 distributions by the commissioner related to poison control (iv) 34 centers pursuant to subdivision seven of section twenty-five hundred-d 35 of this chapter, up to five million dollars for the period January 36 first, nineteen hundred ninety-seven through December thirty-first, 37 nineteen hundred ninety-seven, up to three million dollars on an annual-38 ized basis for the periods during the period January first, nineteen 39 hundred ninety-eight through December thirty-first, nineteen hundred 40 ninety-nine, up to five million dollars annually for the periods January 41 first, two thousand through December thirty-first, two thousand two, up 42 to four million six hundred thousand dollars annually for the periods 43 January first, two thousand three through December thirty-first, two 44 thousand four, up to five million one hundred thousand dollars for the 45 period January first, two thousand five through December thirty-first, 46 two thousand six annually, up to five million one hundred thousand 47 dollars annually for the period January first, two thousand seven through December thirty-first, two thousand nine, up to three million 48 49 six hundred thousand dollars for the period January first, two thousand ten through December thirty-first, two thousand ten, up to seven hundred 50 51 seventy-five thousand dollars for the period January first, two thousand 52 eleven through March thirty-first, two thousand eleven, up to two 53 million five hundred thousand dollars each state fiscal year for the period April first, two thousand eleven through March thirty-first, 54 two 55 thousand fourteen, [and] up to three million dollars each state fiscal year for the period April first, two thousand fourteen through March 56



1 thirty-first, two thousand seventeen, and up to three million dollars
2 each state fiscal year for the period April first, two thousand seven3 teen through March thirty-first, two thousand twenty; and

4 (v) deposit by the commissioner, within amounts appropriated, and the 5 state comptroller is hereby authorized and directed to receive for deposit to, to the credit of the department of health's special revenue 6 7 fund - other, miscellaneous special revenue fund - 339 maternal and 8 child HIV services account or the health care reform act (HCRA) resources fund, whichever is applicable, for purposes of a special 9 program for HIV services for women and children, including adolescents 10 pursuant to section twenty-five hundred-f-one of this chapter, up to 11 12 five million dollars annually for the periods January first, two thou-13 sand through December thirty-first, two thousand two, up to five million 14 dollars for the period January first, two thousand three through Decem-15 ber thirty-first, two thousand three, up to two million five hundred 16 thousand dollars for the period January first, two thousand four through 17 December thirty-first, two thousand four, up to two million five hundred 18 thousand dollars for the period January first, two thousand five through 19 December thirty-first, two thousand five, up to five million dollars for the period January first, two thousand six through December thirty-20 21 first, two thousand six, up to five million dollars annually for the 22 period January first, two thousand seven through December thirty-first, 23 two thousand ten, up to one million two hundred fifty thousand dollars for the period January first, two thousand eleven through March thirty-24 first, two thousand eleven, and up to five million dollars each state 25 26 fiscal year for the period April first, two thousand eleven through 27 March thirty-first, two thousand fourteen;

28 (d) (i) An amount of up to twenty million dollars annually for the 29 period January first, two thousand through December thirty-first, two thousand six, up to ten million dollars for the period January first, 30 two thousand seven through June thirtieth, two thousand seven, up to 31 twenty million dollars annually for the period January first, two thou-32 33 sand eight through December thirty-first, two thousand ten, up to five million dollars for the period January first, two thousand eleven 34 35 through March thirty-first, two thousand eleven, up to nineteen million 36 six hundred thousand dollars each state fiscal year for the period April 37 first, two thousand eleven through March thirty-first, two thousand 38 fourteen, [and] up to nineteen million six hundred thousand dollars each 39 state fiscal year for the period April first, two thousand fourteen 40 through March thirty-first, two thousand seventeen, and up to nineteen 41 million six hundred thousand dollars each state fiscal year for the 42 period of April first, two thousand seventeen through March thirty-43 first, two thousand twenty, shall be transferred to the health facility 44 restructuring pool established pursuant to section twenty-eight hundred 45 fifteen of this article;

(ii) provided, however, amounts transferred pursuant to subparagraph (i) of this paragraph may be reduced in an amount to be approved by the director of the budget to reflect the amount received from the federal government under the state's 1115 waiver which is directed under its terms and conditions to the health facility restructuring program.

(e) Funds shall be reserved and accumulated from year to year and shall be available, including income from invested funds, for purposes of distributions to organizations to support the health workforce retraining program established pursuant to section twenty-eight hundred seven-g of this article from the respective health care initiatives pools established for the following periods in the following amounts



1 from the pools or the health care reform act (HCRA) resources fund, whichever is applicable, during the period January first, nineteen 2 hundred ninety-seven through December thirty-first, nineteen hundred 3 ninety-nine, up to fifty million dollars on an annualized basis, up to 4 thirty million dollars for the period January first, two thousand 5 through December thirty-first, two thousand, up to forty million dollars 6 for the period January first, two thousand one through December thirty-7 8 first, two thousand one, up to fifty million dollars for the period January first, two thousand two through December thirty-first, two thou-9 sand two, up to forty-one million one hundred fifty thousand dollars for 10 the period January first, two thousand three through December thirty-11 12 first, two thousand three, up to forty-one million one hundred fifty 13 thousand dollars for the period January first, two thousand four through 14 December thirty-first, two thousand four, up to fifty-eight million 15 three hundred sixty thousand dollars for the period January first, two 16 thousand five through December thirty-first, two thousand five, up to 17 fifty-two million three hundred sixty thousand dollars for the period 18 January first, two thousand six through December thirty-first, two thou-19 sand six, up to thirty-five million four hundred thousand dollars annually for the period January first, two thousand seven through December 20 21 thirty-first, two thousand ten, up to eight million eight hundred fifty thousand dollars for the period January first, two thousand eleven 22 23 through March thirty-first, two thousand eleven, up to twenty-eight million four hundred thousand dollars each state fiscal year for the 24 period April first, two thousand eleven through March thirty-first, two 25 26 thousand fourteen, [and] up to twenty-six million eight hundred seven-27 teen thousand dollars each state fiscal year for the period April first, 28 two thousand fourteen through March thirty-first, two thousand seventeen, and up to twenty-six million eight hundred seventeen thousand 29 dollars each state fiscal year for the period April first, two thousand 30 31 seventeen through March thirty-first, two thousand twenty, less the amount of funds available for allocations for rate adjustments for work-32 33 force training programs for payments by state governmental agencies for 34 inpatient hospital services.

35 (f) Funds shall be accumulated and transferred from as follows:

36 (i) from the pool for the period January first, nineteen hundred nine-37 ty-seven through December thirty-first, nineteen hundred ninety-seven, 38 (A) thirty-four million six hundred thousand dollars shall be trans-39 ferred to funds reserved and accumulated pursuant to paragraph (b) of 40 subdivision nineteen of section twenty-eight hundred seven-c of this 41 article, and (B) eighty-two million dollars shall be transferred and 42 deposited and credited to the credit of the state general fund medical 43 assistance local assistance account;

(ii) from the pool for the period January first, nineteen hundred ninety-eight through December thirty-first, nineteen hundred ninetyeight, eighty-two million dollars shall be transferred and deposited and credited to the credit of the state general fund medical assistance local assistance account;

(iii) from the pool for the period January first, nineteen hundred ninety-nine through December thirty-first, nineteen hundred ninety-nine, eighty-two million dollars shall be transferred and deposited and credited to the credit of the state general fund medical assistance local assistance account;

54 (iv) from the pool or the health care reform act (HCRA) resources 55 fund, whichever is applicable, for the period January first, two thou-56 sand through December thirty-first, two thousand four, eighty-two



1 million dollars annually, and for the period January first, two thousand 2 five through December thirty-first, two thousand five, eighty-two and for the period January first, two thousand six 3 million dollars, through December thirty-first, two thousand six, eighty-two million 4 dollars, and for the period January first, two thousand seven through 5 6 December thirty-first, two thousand seven, eighty-two million dollars, 7 and for the period January first, two thousand eight through December 8 thirty-first, two thousand eight, ninety million seven hundred thousand dollars shall be deposited by the commissioner, and the state comp-9 troller is hereby authorized and directed to receive for deposit to the 10 11 credit of the state special revenue fund - other, HCRA transfer fund, 12 medical assistance account;

13 (v) from the health care reform act (HCRA) resources fund for the 14 period January first, two thousand nine through December thirty-first, 15 two thousand nine, one hundred eight million nine hundred seventy-five 16 thousand dollars, and for the period January first, two thousand ten 17 through December thirty-first, two thousand ten, one hundred twenty-six million one hundred thousand dollars, for the period January first, two 18 19 thousand eleven through March thirty-first, two thousand eleven, twenty 20 million five hundred thousand dollars, and for each state fiscal year 21 for the period April first, two thousand eleven through March thirty-22 first, two thousand fourteen, one hundred forty-six million four hundred 23 thousand dollars, shall be deposited by the commissioner, and the state 24 comptroller is hereby authorized and directed to receive for deposit, to 25 the credit of the state special revenue fund - other, HCRA transfer fund, medical assistance account. 26

(g) Funds shall be transferred to primary health care services pools created by the commissioner, and shall be available, including income from invested funds, for distributions in accordance with former section twenty-eight hundred seven-bb of this article from the respective health care initiatives pools for the following periods in the following percentage amounts of funds remaining after allocations in accordance with paragraphs (a) through (f) of this subdivision:

(i) from the pool for the period January first, nineteen hundred nine ty-seven through December thirty-first, nineteen hundred ninety-seven,
 fifteen and eighty-seven-hundredths percent;

(ii) from the pool for the period January first, nineteen hundred
ninety-eight through December thirty-first, nineteen hundred ninetyeight, fifteen and eighty-seven-hundredths percent; and

40 (iii) from the pool for the period January first, nineteen hundred 41 ninety-nine through December thirty-first, nineteen hundred ninety-nine, 42 sixteen and thirteen-hundredths percent.

43 (h) Funds shall be reserved and accumulated from year to year by the 44 commissioner and shall be available, including income from invested 45 funds, for purposes of primary care education and training pursuant to 46 article nine of this chapter from the respective health care initiatives 47 pools established for the following periods in the following percentage amounts of funds remaining after allocations in accordance with para-48 49 graphs (a) through (f) of this subdivision and shall be available for 50 distributions as follows:

51 (i) funds shall be reserved and accumulated:

(A) from the pool for the period January first, nineteen hundred ninety-seven through December thirty-first, nineteen hundred ninety-seven,
six and thirty-five-hundredths percent;



1 (B) from the pool for the period January first, nineteen hundred nine-2 ty-eight through December thirty-first, nineteen hundred ninety-eight, 3 six and thirty-five-hundredths percent; and (C) from the pool for the period January first, nineteen hundred nine-4 5 ty-nine through December thirty-first, nineteen hundred ninety-nine, six 6 and forty-five-hundredths percent; 7 funds shall be available for distributions including income from (ii) 8 invested funds as follows: (A) for purposes of the primary care physician loan repayment program 9 in accordance with section nine hundred three of this chapter, up to 10 11 five million dollars on an annualized basis; 12 (B) for purposes of the primary care practitioner scholarship program 13 in accordance with section nine hundred four of this chapter, up to two 14 million dollars on an annualized basis; 15 (C) for purposes of minority participation in medical education grants 16 in accordance with section nine hundred six of this chapter, up to one 17 million dollars on an annualized basis; and 18 (D) provided, however, that the commissioner may reallocate any funds 19 remaining or unallocated for distributions for the primary care practi-20 tioner scholarship program in accordance with section nine hundred four 21 of this chapter. 22 (i) Funds shall be reserved and accumulated from year to year and 23 shall be available, including income from invested funds, for distrib-24 utions in accordance with section twenty-nine hundred fifty-two and 25 section twenty-nine hundred fifty-eight of this chapter for rural health care delivery development and rural health care access development, 26 27 respectively, from the respective health care initiatives pools or the 28 health care reform act (HCRA) resources fund, whichever is applicable, 29 for the following periods in the following percentage amounts of funds remaining after allocations in accordance with paragraphs (a) through 30 (f) of this subdivision, and for periods on and after January first, two 31 32 thousand, in the following amounts: 33 (i) from the pool for the period January first, nineteen hundred ninety-seven through December thirty-first, nineteen hundred ninety-seven, 34 35 thirteen and forty-nine-hundredths percent; 36 (ii) from the pool for the period January first, nineteen hundred 37 ninety-eight through December thirty-first, nineteen hundred ninety-38 eight, thirteen and forty-nine-hundredths percent; 39 (iii) from the pool for the period January first, nineteen hundred 40 ninety-nine through December thirty-first, nineteen hundred ninety-nine, 41 thirteen and seventy-one-hundredths percent; 42 (iv) from the pool for the periods January first, two thousand through 43 December thirty-first, two thousand two, seventeen million dollars annu-44 ally, and for the period January first, two thousand three through 45 December thirty-first, two thousand three, up to fifteen million eight 46 hundred fifty thousand dollars; 47 (v) from the pool or the health care reform act (HCRA) resources fund, whichever is applicable, for the period January first, two thousand four 48 49 through December thirty-first, two thousand four, up to fifteen million eight hundred fifty thousand dollars, for the period January first, two 50 thousand five through December thirty-first, two thousand five, up to 51 52 nineteen million two hundred thousand dollars, for the period January first, two thousand six through December thirty-first, two thousand six, 53 up to nineteen million two hundred thousand dollars, for the period 54 January first, two thousand seven through December thirty-first, two 55 thousand ten, up to eighteen million one hundred fifty thousand dollars 56



1 annually, for the period January first, two thousand eleven through 2 March thirty-first, two thousand eleven, up to four million five hundred thirty-eight thousand dollars, for each state fiscal year for the period 3 April first, two thousand eleven through March thirty-first, two thou-4 sand fourteen, up to sixteen million two hundred thousand dollars, [and] 5 6 up to sixteen million two hundred thousand dollars each state fiscal 7 year for the period April first, two thousand fourteen through March 8 thirty-first, two thousand seventeen, and up to sixteen million two hundred thousand dollars each state fiscal year for the period April 9 10 first, two thousand seventeen through March thirty-first, two thousand 11 twenty. 12 (j) Funds shall be reserved and accumulated from year to year and 13 shall be available, including income from invested funds, for purposes 14 of distributions related to health information and health care quality 15 improvement pursuant to former section twenty-eight hundred seven-n of 16 this article from the respective health care initiatives pools estab-17 lished for the following periods in the following percentage amounts of 18 funds remaining after allocations in accordance with paragraphs (a) 19 through (f) of this subdivision: 20 (i) from the pool for the period January first, nineteen hundred nine-21 ty-seven through December thirty-first, nineteen hundred ninety-seven, 22 six and thirty-five-hundredths percent; (ii) from the pool for the period January first, nineteen hundred 23 ninety-eight through December thirty-first, nineteen hundred ninety-24 25 eight, six and thirty-five-hundredths percent; and 26 (iii) from the pool for the period January first, nineteen hundred 27 ninety-nine through December thirty-first, nineteen hundred ninety-nine, 28 six and forty-five-hundredths percent. 29 (k) Funds shall be reserved and accumulated from year to year and shall be available, including income from invested funds, for allo-30 cations and distributions in accordance with section twenty-eight 31 hundred seven-p of this article for diagnostic and treatment center 32 uncompensated care from the respective health care initiatives pools or 33 the health care reform act (HCRA) resources fund, whichever is applica-34 ble, for the following periods in the following percentage amounts of 35 36 funds remaining after allocations in accordance with paragraphs (a) 37 through (f) of this subdivision, and for periods on and after January 38 first, two thousand, in the following amounts: 39 (i) from the pool for the period January first, nineteen hundred nine-40 ty-seven through December thirty-first, nineteen hundred ninety-seven, 41 thirty-eight and one-tenth percent; 42 (ii) from the pool for the period January first, nineteen hundred 43 ninety-eight through December thirty-first, nineteen hundred ninety-44 eight, thirty-eight and one-tenth percent; 45 (iii) from the pool for the period January first, nineteen hundred 46 ninety-nine through December thirty-first, nineteen hundred ninety-nine, 47 thirty-eight and seventy-one-hundredths percent; 48 (iv) from the pool for the periods January first, two thousand through 49 December thirty-first, two thousand two, forty-eight million dollars annually, and for the period January first, two thousand three through 50 51 June thirtieth, two thousand three, twenty-four million dollars; 52 (v) (A) from the pool or the health care reform act (HCRA) resources 53 fund, whichever is applicable, for the period July first, two thousand three through December thirty-first, two thousand three, up to six 54 55 million dollars, for the period January first, two thousand four through December thirty-first, two thousand six, up to twelve million dollars 56



1 annually, for the period January first, two thousand seven through 2 December thirty-first, two thousand thirteen, up to forty-eight million dollars annually, for the period January first, two thousand fourteen 3 through March thirty-first, two thousand fourteen, up to twelve million 4 dollars [and] for the period April first, two thousand fourteen through 5 March thirty-first, two thousand seventeen, up to forty-eight million 6 dollars annually, and for the period April first, two thousand seventeen 7 8 through March thirty-first, two thousand twenty, up to forty-eight 9 million dollars annually;

(B) from the health care reform act (HCRA) resources fund for the 10 period January first, two thousand six through December thirty-first, 11 12 two thousand six, an additional seven million five hundred thousand 13 dollars, for the period January first, two thousand seven through Decem-14 ber thirty-first, two thousand thirteen, an additional seven million 15 five hundred thousand dollars annually, for the period January first, 16 two thousand fourteen through March thirty-first, two thousand fourteen, 17 an additional one million eight hundred seventy-five thousand dollars, 18 [and] for the period April first, two thousand fourteen through March 19 thirty-first, two thousand seventeen, an additional seven million five 20 hundred thousand dollars annually, and for the period April first, two 21 thousand seventeen through March thirty-first, two thousand twenty, an 22 additional seven million five hundred thousand dollars annually for 23 voluntary non-profit diagnostic and treatment center uncompensated care 24 in accordance with subdivision four-c of section twenty-eight hundred 25 seven-p of this article; and

(vi) funds reserved and accumulated pursuant to this paragraph for 26 27 periods on and after July first, two thousand three, shall be deposited 28 by the commissioner, within amounts appropriated, and the state comp-29 troller is hereby authorized and directed to receive for deposit to the credit of the state special revenue funds - other, HCRA transfer fund, 30 medical assistance account, for purposes of funding the state share of 31 32 rate adjustments made pursuant to section twenty-eight hundred seven-p 33 of this article, provided, however, that in the event federal financial participation is not available for rate adjustments made pursuant to 34 paragraph (b) of subdivision one of section twenty-eight hundred seven-p 35 36 of this article, funds shall be distributed pursuant to paragraph (a) of 37 subdivision one of section twenty-eight hundred seven-p of this article 38 from the respective health care initiatives pools or the health care 39 reform act (HCRA) resources fund, whichever is applicable.

40 (1) Funds shall be reserved and accumulated from year to year by the 41 commissioner and shall be available, including income from invested funds, for transfer to and allocation for services and expenses for the 42 43 payment of benefits to recipients of drugs under the AIDS drug assist-44 ance program (ADAP) - HIV uninsured care program as administered by 45 Health Research Incorporated from the respective health care initi-46 atives pools or the health care reform act (HCRA) resources fund, which-47 ever is applicable, established for the following periods in the following percentage amounts of funds remaining after 48 allocations in 49 accordance with paragraphs (a) through (f) of this subdivision, and for 50 periods on and after January first, two thousand, in the following 51 amounts:

(i) from the pool for the period January first, nineteen hundred ninety-seven through December thirty-first, nineteen hundred ninety-seven,
nine and fifty-two-hundredths percent;



1 (ii) from the pool for the period January first, nineteen hundred ninety-eight through December thirty-first, nineteen hundred ninety-2 eight, nine and fifty-two-hundredths percent; 3 (iii) from the pool for the period January first, nineteen hundred 4 ninety-nine and December thirty-first, nineteen hundred ninety-nine, 5 nine and sixty-eight-hundredths percent; 6 7 (iv) from the pool for the periods January first, two thousand through 8 December thirty-first, two thousand two, up to twelve million dollars annually, and for the period January first, two thousand three through 9 December thirty-first, two thousand three, up to forty million dollars; 10 11 and 12 (v) from the pool or the health care reform act (HCRA) resources fund, 13 whichever is applicable, for the periods January first, two thousand 14 four through December thirty-first, two thousand four, up to fifty-six 15 million dollars, for the period January first, two thousand five through 16 December thirty-first, two thousand six, up to sixty million dollars 17 annually, for the period January first, two thousand seven through 18 December thirty-first, two thousand ten, up to sixty million dollars 19 annually, for the period January first, two thousand eleven through March thirty-first, two thousand eleven, up to fifteen million dollars, 20 21 each state fiscal year for the period April first, two thousand eleven 22 through March thirty-first, two thousand fourteen, up to forty-two 23 million three hundred thousand dollars and up to forty-one million fifty 24 thousand dollars each state fiscal year for the period April first, two thousand fourteen through March thirty-first, two thousand [seventeen] 25 26 twenty. 27 (m) Funds shall be reserved and accumulated from year to year and 28 shall be available, including income from invested funds, for purposes 29 of distributions pursuant to section twenty-eight hundred seven-r of this article for cancer related services from the respective health care 30 initiatives pools or the health care reform act (HCRA) resources fund, 31 whichever is applicable, established for the following periods in the 32 33 following percentage amounts of funds remaining after allocations in accordance with paragraphs (a) through (f) of this subdivision, and for 34 periods on and after January first, two thousand, in the following 35 36 amounts: 37 (i) from the pool for the period January first, nineteen hundred nine-38 ty-seven through December thirty-first, nineteen hundred ninety-seven, 39 seven and ninety-four-hundredths percent; 40 (ii) from the pool for the period January first, nineteen hundred 41 ninety-eight through December thirty-first, nineteen hundred ninety-42 eight, seven and ninety-four-hundredths percent; 43 (iii) from the pool for the period January first, nineteen hundred 44 ninety-nine and December thirty-first, nineteen hundred ninety-nine, six 45 and forty-five-hundredths percent; 46 (iv) from the pool for the period January first, two thousand through 47 December thirty-first, two thousand two, up to ten million dollars on an 48 annual basis; 49 (v) from the pool for the period January first, two thousand three through December thirty-first, two thousand four, up to eight million 50 51 nine hundred fifty thousand dollars on an annual basis; 52 (vi) from the pool or the health care reform act (HCRA) resources 53 fund, whichever is applicable, for the period January first, two thousand five through December thirty-first, two thousand six, up to ten 54 million fifty thousand dollars on an annual basis, for the period Janu-55 ary first, two thousand seven through December thirty-first, two thou-56



1 sand ten, up to nineteen million dollars annually, and for the period 2 January first, two thousand eleven through March thirty-first, two thou-3 sand eleven, up to four million seven hundred fifty thousand dollars.

(n) Funds shall be accumulated and transferred from the health care 4 5 reform act (HCRA) resources fund as follows: for the period April first, two thousand seven through March thirty-first, two thousand eight, and 6 7 on an annual basis for the periods April first, two thousand eight 8 through November thirtieth, two thousand nine, funds within amounts appropriated shall be transferred and deposited and credited to the 9 credit of the state special revenue funds - other, HCRA transfer fund, 10 11 medical assistance account, for purposes of funding the state share of 12 rate adjustments made to public and voluntary hospitals in accordance 13 with paragraphs (i) and (j) of subdivision one of section twenty-eight 14 hundred seven-c of this article.

15 2. Notwithstanding any inconsistent provision of law, rule or regu-16 lation, any funds accumulated in the health care initiatives pools 17 pursuant to paragraph (b) of subdivision nine of section twenty-eight hundred seven-j of this article, as a result of surcharges, assessments 18 19 or other obligations during the periods January first, nineteen hundred 20 ninety-seven through December thirty-first, nineteen hundred ninety-21 nine, which are unused or uncommitted for distributions pursuant to this 22 section shall be reserved and accumulated from year to year by the 23 commissioner and, within amounts appropriated, transferred and deposited 24 into the special revenue funds - other, miscellaneous special revenue 25 fund - 339, child health insurance account or any successor fund or account, for purposes of distributions to implement the child health 26 27 insurance program established pursuant to sections twenty-five hundred 28 ten and twenty-five hundred eleven of this chapter for periods on and 29 after January first, two thousand one; provided, however, funds reserved and accumulated for priority distributions pursuant to subparagraph 30 (iii) of paragraph (c) of subdivision one of this section shall not be 31 transferred and deposited into such account pursuant to this subdivi-32 33 sion; and provided further, however, that any unused or uncommitted pool funds accumulated and allocated pursuant to paragraph (j) of subdivision 34 one of this section shall be distributed for purposes of the health 35 36 information and quality improvement act of 2000.

37 3. Revenue from distributions pursuant to this section shall not be 38 included in gross revenue received for purposes of the assessments 39 pursuant to subdivision eighteen of section twenty-eight hundred seven-c 40 of this article, subject to the provisions of paragraph (e) of subdivi-41 sion eighteen of section twenty-eight hundred seven-c of this article, 42 and shall not be included in gross revenue received for purposes of the 43 assessments pursuant to section twenty-eight hundred seven-d of this 44 article, subject to the provisions of subdivision twelve of section 45 twenty-eight hundred seven-d of this article.

46 § 22. Section 2807-v of the public health law, as amended by section 8 47 of part B of chapter 60 of the laws of 2014, is amended to read as 48 follows:

49 § 2807-v. Tobacco control and insurance initiatives pool distrib-50 utions. 1. Funds accumulated in the tobacco control and insurance 51 initiatives pool or in the health care reform act (HCRA) resources fund 52 established pursuant to section ninety-two-dd of the state finance law, 53 whichever is applicable, including income from invested funds, shall be 54 distributed or retained by the commissioner or by the state comptroller, 55 as applicable, in accordance with the following:



1 (a) Funds shall be deposited by the commissioner, within amounts appropriated, and the state comptroller is hereby authorized and 2 directed to receive for deposit to the credit of the state special 3 revenue funds - other, HCRA transfer fund, medicaid fraud hotline and 4 medicaid administration account, or any successor fund or account, for 5 purposes of services and expenses related to the toll-free medicaid 6 7 fraud hotline established pursuant to section one hundred eight of chapter one of the laws of nineteen hundred ninety-nine from the tobacco 8 control and insurance initiatives pool established for the following 9 periods in the following amounts: four hundred thousand dollars annually 10 for the periods January first, two thousand through December thirty-11 12 first, two thousand two, up to four hundred thousand dollars for the 13 period January first, two thousand three through December thirty-first, 14 two thousand three, up to four hundred thousand dollars for the period 15 January first, two thousand four through December thirty-first, two 16 thousand four, up to four hundred thousand dollars for the period Janu-17 ary first, two thousand five through December thirty-first, two thousand 18 five, up to four hundred thousand dollars for the period January first, 19 two thousand six through December thirty-first, two thousand six, up to four hundred thousand dollars for the period January first, two thousand 20 21 seven through December thirty-first, two thousand seven, up to four 22 hundred thousand dollars for the period January first, two thousand eight through December thirty-first, two thousand eight, up to four 23 hundred thousand dollars for the period January first, two thousand nine 24 through December thirty-first, two thousand nine, up to four hundred 25 26 thousand dollars for the period January first, two thousand ten through 27 December thirty-first, two thousand ten, up to one hundred thousand 28 dollars for the period January first, two thousand eleven through March 29 thirty-first, two thousand eleven and within amounts appropriated on and 30 after April first, two thousand eleven.

31 (b) Funds shall be reserved and accumulated from year to year and 32 shall be available, including income from invested funds, for purposes 33 of payment of audits or audit contracts necessary to determine payor and 34 provider compliance with requirements set forth in sections twenty-eight 35 hundred seven-j, twenty-eight hundred seven-s and twenty-eight hundred 36 seven-t of this article from the tobacco control and insurance initi-37 atives pool established for the following periods in the following 38 amounts: five million six hundred thousand dollars annually for the 39 periods January first, two thousand through December thirty-first, two 40 thousand two, up to five million dollars for the period January first, 41 two thousand three through December thirty-first, two thousand three, up 42 to five million dollars for the period January first, two thousand four 43 through December thirty-first, two thousand four, up to five million 44 dollars for the period January first, two thousand five through December 45 thirty first, two thousand five, up to five million dollars for the 46 period January first, two thousand six through December thirty-first, 47 two thousand six, up to seven million eight hundred thousand dollars for the period January first, two thousand seven through December thirty-48 49 first, two thousand seven, and up to eight million three hundred twenty-five thousand dollars for the period January first, 50 two thousand 51 eight through December thirty-first, two thousand eight, up to eight million five hundred thousand dollars for the period January first, two 52 thousand nine through December thirty-first, two thousand nine, up to 53 eight million five hundred thousand dollars for the period January 54 55 first, two thousand ten through December thirty-first, two thousand ten, up to two million one hundred twenty-five thousand dollars for the peri-56



1 od January first, two thousand eleven through March thirty-first, two 2 thousand eleven, up to fourteen million seven hundred thousand dollars 3 each state fiscal year for the period April first, two thousand eleven through March thirty-first, two thousand fourteen, [and] up to eleven 4 5 million one hundred thousand dollars each state fiscal year for the period April first, two thousand fourteen through March thirty-first, 6 7 two thousand seventeen, and up to eleven million one hundred thousand 8 dollars each state fiscal year for the period April first, two thousand 9 seventeen through March thirty-first, two thousand twenty.

(c) Funds shall be deposited by the commissioner, within amounts 10 appropriated, and the state comptroller is hereby authorized and 11 12 directed to receive for deposit to the credit of the state special 13 revenue funds - other, HCRA transfer fund, enhanced community services 14 account, or any successor fund or account, for mental health services 15 programs for case management services for adults and children; supported 16 housing; home and community based waiver services; family based treatment; family support services; mobile mental health teams; transitional 17 housing; and community oversight, established pursuant to articles seven 18 19 and forty-one of the mental hygiene law and subdivision nine of section 20 three hundred sixty-six of the social services law; and for comprehen-21 sive care centers for eating disorders pursuant to the former section twenty-seven hundred ninety-nine-1 of this chapter, provided however 22 that, for such centers, funds in the amount of five hundred thousand 23 24 dollars on an annualized basis shall be transferred from the enhanced 25 community services account, or any successor fund or account, and deposited into the fund established by section ninety-five-e of the state 26 27 finance law; from the tobacco control and insurance initiatives pool 28 established for the following periods in the following amounts:

(i) forty-eight million dollars to be reserved, to be retained or for distribution pursuant to a chapter of the laws of two thousand, for the period January first, two thousand through December thirty-first, two thousand;

(ii) eighty-seven million dollars to be reserved, to be retained or for distribution pursuant to a chapter of the laws of two thousand one, for the period January first, two thousand one through December thirtyfirst, two thousand one;

(iii) eighty-seven million dollars to be reserved, to be retained or for distribution pursuant to a chapter of the laws of two thousand two, for the period January first, two thousand two through December thirtyfirst, two thousand two;

(iv) eighty-eight million dollars to be reserved, to be retained or for distribution pursuant to a chapter of the laws of two thousand three, for the period January first, two thousand three through December thirty-first, two thousand three;

(v) eighty-eight million dollars, plus five hundred thousand dollars, to be reserved, to be retained or for distribution pursuant to a chapter of the laws of two thousand four, and pursuant to the former section twenty-seven hundred ninety-nine-1 of this chapter, for the period January first, two thousand four through December thirty-first, two thousand four;

(vi) eighty-eight million dollars, plus five hundred thousand dollars, to be reserved, to be retained or for distribution pursuant to a chapter of the laws of two thousand five, and pursuant to the former section twenty-seven hundred ninety-nine-1 of this chapter, for the period January first, two thousand five through December thirty-first, two thousand five;



1 eighty-eight million dollars, plus five hundred thousand (vii) 2 dollars, to be reserved, to be retained or for distribution pursuant to a chapter of the laws of two thousand six, and pursuant to former 3 section twenty-seven hundred ninety-nine-1 of this chapter, for the 4 5 period January first, two thousand six through December thirty-first, 6 two thousand six; (viii) eighty-six million four hundred thousand dollars, plus five 7 8 hundred thousand dollars, to be reserved, to be retained or for distribution pursuant to a chapter of the laws of two thousand seven and pursu-9 ant to the former section twenty-seven hundred ninety-nine-1 of this 10 11 chapter, for the period January first, two thousand seven through December thirty-first, two thousand seven; and 12 13 (ix) twenty-two million nine hundred thirteen thousand dollars, plus 14 one hundred twenty-five thousand dollars, to be reserved, to be retained 15 or for distribution pursuant to a chapter of the laws of two thousand 16 eight and pursuant to the former section twenty-seven hundred ninety-17 nine-1 of this chapter, for the period January first, two thousand eight 18 through March thirty-first, two thousand eight. 19 Funds shall be deposited by the commissioner, within amounts (đ) 20 appropriated, and the state comptroller is hereby authorized and 21 directed to receive for deposit to the credit of the state special revenue funds - other, HCRA transfer fund, medical assistance account, 22 23 or any successor fund or account, for purposes of funding the state 24 share of services and expenses related to the family health plus program 25 including up to two and one-half million dollars annually for the period January first, two thousand through December thirty-first, two thousand 26 27 two, for administration and marketing costs associated with such program 28 established pursuant to clause (A) of subparagraph (v) of paragraph (a) 29 of subdivision two of section three hundred sixty-nine-ee of the social 30 services law from the tobacco control and insurance initiatives pool established for the following periods in the following amounts: 31 32 (i) three million five hundred thousand dollars for the period January 33 first, two thousand through December thirty-first, two thousand; 34 (ii) twenty-seven million dollars for the period January first, two 35 thousand one through December thirty-first, two thousand one; and fifty-seven million dollars for the period January first, two 36 (iii) 37 thousand two through December thirty-first, two thousand two. 38 (e) Funds shall be deposited by the commissioner, within amounts 39 appropriated, and the state comptroller is hereby authorized and 40 directed to receive for deposit to the credit of the state special 41 revenue funds - other, HCRA transfer fund, medical assistance account, 42 or any successor fund or account, for purposes of funding the state 43 share of services and expenses related to the family health plus program 44 including up to two and one-half million dollars annually for the period 45 January first, two thousand through December thirty-first, two thousand 46 two for administration and marketing costs associated with such program 47 established pursuant to clause (B) of subparagraph (v) of paragraph (a) of subdivision two of section three hundred sixty-nine-ee of the social 48 49 services law from the tobacco control and insurance initiatives pool established for the following periods in the following amounts: 50 51 (i) two million five hundred thousand dollars for the period January 52 first, two thousand through December thirty-first, two thousand; 53 (ii) thirty million five hundred thousand dollars for the period Janu-54 ary first, two thousand one through December thirty-first, two thousand

55 one; and



(iii) sixty-six million dollars for the period January first, two
 thousand two through December thirty-first, two thousand two.

Funds shall be deposited by the commissioner, within amounts 3 (f) appropriated, and the state comptroller is hereby authorized and 4 directed to receive for deposit to the credit of the state special 5 revenue funds - other, HCRA transfer fund, medicaid fraud hotline and 6 medicaid administration account, or any successor fund or account, for 7 purposes of payment of administrative expenses of the department related 8 to the family health plus program established pursuant to section three 9 hundred sixty-nine-ee of the social services law from the tobacco 10 control and insurance initiatives pool established for the following 11 12 periods in the following amounts: five hundred thousand dollars on an 13 annual basis for the periods January first, two thousand through Decem-14 ber thirty-first, two thousand six, five hundred thousand dollars for 15 the period January first, two thousand seven through December thirty-16 first, two thousand seven, and five hundred thousand dollars for the 17 period January first, two thousand eight through December thirty-first, two thousand eight, five hundred thousand dollars for the period January 18 19 two thousand nine through December thirty-first, two thousand first, nine, five hundred thousand dollars for the period January first, two 20 21 thousand ten through December thirty-first, two thousand ten, one 22 hundred twenty-five thousand dollars for the period January first, two 23 thousand eleven through March thirty-first, two thousand eleven and 24 within amounts appropriated on and after April first, two thousand elev-25 en.

(g) Funds shall be reserved and accumulated from year to year and shall be available, including income from invested funds, for purposes of services and expenses related to the health maintenance organization direct pay market program established pursuant to sections forty-three hundred twenty-one-a and forty-three hundred twenty-two-a of the insurance law from the tobacco control and insurance initiatives pool established for the following periods in the following amounts:

(i) up to thirty-five million dollars for the period January first, two thousand through December thirty-first, two thousand of which fifty percentum shall be allocated to the program pursuant to section four thousand three hundred twenty-one-a of the insurance law and fifty percentum to the program pursuant to section four thousand three hundred twenty-two-a of the insurance law;

(ii) up to thirty-six million dollars for the period January first, two thousand one through December thirty-first, two thousand one of which fifty percentum shall be allocated to the program pursuant to section four thousand three hundred twenty-one-a of the insurance law and fifty percentum to the program pursuant to section four thousand three hundred twenty-two-a of the insurance law;

(iii) up to thirty-nine million dollars for the period January first, two thousand two through December thirty-first, two thousand two of which fifty percentum shall be allocated to the program pursuant to section four thousand three hundred twenty-one-a of the insurance law and fifty percentum to the program pursuant to section four thousand three hundred twenty-two-a of the insurance law;

51 (iv) up to forty million dollars for the period January first, two 52 thousand three through December thirty-first, two thousand three of 53 which fifty percentum shall be allocated to the program pursuant to 54 section four thousand three hundred twenty-one-a of the insurance law 55 and fifty percentum to the program pursuant to section four thousand 56 three hundred twenty-two-a of the insurance law;



1 (v) up to forty million dollars for the period January first, two 2 thousand four through December thirty-first, two thousand four of which 3 fifty percentum shall be allocated to the program pursuant to section 4 four thousand three hundred twenty-one-a of the insurance law and fifty 5 percentum to the program pursuant to section four thousand three hundred 6 twenty-two-a of the insurance law;

7 (vi) up to forty million dollars for the period January first, two 8 thousand five through December thirty-first, two thousand five of which 9 fifty percentum shall be allocated to the program pursuant to section 10 four thousand three hundred twenty-one-a of the insurance law and fifty 11 percentum to the program pursuant to section four thousand three hundred 12 twenty-two-a of the insurance law;

(vii) up to forty million dollars for the period January first, two thousand six through December thirty-first, two thousand six of which fifty percentum shall be allocated to the program pursuant to section four thousand three hundred twenty-one-a of the insurance law and fifty percentum shall be allocated to the program pursuant to section four thousand three hundred twenty-two-a of the insurance law;

(viii) up to forty million dollars for the period January first, two thousand seven through December thirty-first, two thousand seven of which fifty percentum shall be allocated to the program pursuant to section four thousand three hundred twenty-one-a of the insurance law and fifty percentum shall be allocated to the program pursuant to section four thousand three hundred twenty-two-a of the insurance law; and

(ix) up to forty million dollars for the period January first, two thousand eight through December thirty-first, two thousand eight of which fifty per centum shall be allocated to the program pursuant to section four thousand three hundred twenty-one-a of the insurance law and fifty per centum shall be allocated to the program pursuant to section four thousand three hundred twenty-two-a of the insurance law.

32 (h) Funds shall be reserved and accumulated from year to year and 33 shall be available, including income from invested funds, for purposes 34 of services and expenses related to the healthy New York individual 35 program established pursuant to sections four thousand three hundred 36 twenty-six and four thousand three hundred twenty-seven of the insurance 37 law from the tobacco control and insurance initiatives pool established 38 for the following periods in the following amounts:

39 (i) up to six million dollars for the period January first, two thou-40 sand one through December thirty-first, two thousand one;

41 (ii) up to twenty-nine million dollars for the period January first,42 two thousand two through December thirty-first, two thousand two;

43 (iii) up to five million one hundred thousand dollars for the period 44 January first, two thousand three through December thirty-first, two 45 thousand three;

46 (iv) up to twenty-four million six hundred thousand dollars for the 47 period January first, two thousand four through December thirty-first, 48 two thousand four;

(v) up to thirty-four million six hundred thousand dollars for the 50 period January first, two thousand five through December thirty-first, 51 two thousand five;

52 (vi) up to fifty-four million eight hundred thousand dollars for the 53 period January first, two thousand six through December thirty-first, 54 two thousand six;



1 (vii) up to sixty-one million seven hundred thousand dollars for the 2 period January first, two thousand seven through December thirty-first, 3 two thousand seven; and (viii) up to one hundred three million seven hundred fifty thousand 4 5 dollars for the period January first, two thousand eight through Decem-6 ber thirty-first, two thousand eight. 7 (i) Funds shall be reserved and accumulated from year to year and 8 shall be available, including income from invested funds, for purposes services and expenses related to the healthy New York group program 9 of established pursuant to sections four thousand three hundred twenty-six 10 11 and four thousand three hundred twenty-seven of the insurance law from 12 the tobacco control and insurance initiatives pool established for the 13 following periods in the following amounts: 14 (i) up to thirty-four million dollars for the period January first, 15 two thousand one through December thirty-first, two thousand one; 16 (ii) up to seventy-seven million dollars for the period January first, 17 two thousand two through December thirty-first, two thousand two; 18 (iii) up to ten million five hundred thousand dollars for the period 19 January first, two thousand three through December thirty-first, two 20 thousand three; 21 (iv) up to twenty-four million six hundred thousand dollars for the 22 period January first, two thousand four through December thirty-first, 23 two thousand four; 24 (v) up to thirty-four million six hundred thousand dollars for the 25 period January first, two thousand five through December thirty-first, two thousand five; 26 27 (vi) up to fifty-four million eight hundred thousand dollars for the 28 period January first, two thousand six through December thirty-first, 29 two thousand six; (vii) up to sixty-one million seven hundred thousand dollars for the 30 period January first, two thousand seven through December thirty-first, 31 32 two thousand seven; and 33 (viii) up to one hundred three million seven hundred fifty thousand dollars for the period January first, two thousand eight through Decem-34 35 ber thirty-first, two thousand eight. 36 (i-1) Notwithstanding the provisions of paragraphs (h) and (i) of this 37 subdivision, the commissioner shall reserve and accumulate up to two 38 million five hundred thousand dollars annually for the periods January first, two thousand four through December thirty-first, two thousand 39 40 six, one million four hundred thousand dollars for the period January 41 first, two thousand seven through December thirty-first, two thousand 42 seven, two million dollars for the period January first, two thousand 43 eight through December thirty-first, two thousand eight, from funds otherwise available for distribution under such paragraphs for the 44 45 services and expenses related to the pilot program for entertainment 46 industry employees included in subsection (b) of section one thousand 47 one hundred twenty-two of the insurance law, and an additional seven hundred thousand dollars annually for the periods January first, two 48 49 thousand four through December thirty-first, two thousand six, an addi-50 tional three hundred thousand dollars for the period January first, two 51 thousand seven through June thirtieth, two thousand seven for services 52 and expenses related to the pilot program for displaced workers included in subsection (c) of section one thousand one hundred twenty-two of the 53 54 insurance law. 55 (j) Funds shall be reserved and accumulated from year to year and

56 shall be available, including income from invested funds, for purposes



1 of services and expenses related to the tobacco use prevention and 2 control program established pursuant to sections thirteen hundred ninety-nine-ii and thirteen hundred ninety-nine-jj of this chapter, from the 3 tobacco control and insurance initiatives pool established for the 4 following periods in the following amounts: 5 6 (i) up to thirty million dollars for the period January first, two 7 thousand through December thirty-first, two thousand; 8 (ii) up to forty million dollars for the period January first, two thousand one through December thirty-first, two thousand one; 9 (iii) up to forty million dollars for the period January first, two 10 11 thousand two through December thirty-first, two thousand two; 12 (iv) up to thirty-six million nine hundred fifty thousand dollars for 13 the period January first, two thousand three through December thirty-14 first, two thousand three; 15 (v) up to thirty-six million nine hundred fifty thousand dollars for 16 the period January first, two thousand four through December thirty-17 first, two thousand four; 18 (vi) up to forty million six hundred thousand dollars for the period 19 January first, two thousand five through December thirty-first, two 20 thousand five; 21 (vii) up to eighty-one million nine hundred thousand dollars for the 22 period January first, two thousand six through December thirty-first, two thousand six, provided, however, that within amounts appropriated, a 23 24 portion of such funds may be transferred to the Roswell Park Cancer 25 Institute Corporation to support costs associated with cancer research; 26 (viii) up to ninety-four million one hundred fifty thousand dollars 27 for the period January first, two thousand seven through December thir-28 ty-first, two thousand seven, provided, however, that within amounts 29 appropriated, a portion of such funds may be transferred to the Roswell 30 Park Cancer Institute Corporation to support costs associated with 31 cancer research; 32 up to ninety-four million one hundred fifty thousand dollars for (ix) 33 the period January first, two thousand eight through December thirty-34 first, two thousand eight; (x) up to ninety-four million one hundred fifty thousand dollars for 35 36 the period January first, two thousand nine through December thirty-37 first, two thousand nine; 38 (xi) up to eighty-seven million seven hundred seventy-five thousand 39 dollars for the period January first, two thousand ten through December 40 thirty-first, two thousand ten; 41 (xii) up to twenty-one million four hundred twelve thousand dollars 42 for the period January first, two thousand eleven through March thirty-43 first, two thousand eleven; 44 (xiii) up to fifty-two million one hundred thousand dollars each state 45 fiscal year for the period April first, two thousand eleven through 46 March thirty-first, two thousand fourteen; [and] 47 (xiv) up to six million dollars each state fiscal year for the period April first, two thousand fourteen through March thirty-first, two thou-48 49 sand seventeen[.]; and (xv) up to six million dollars each state fiscal year for the period 50 51 April first, two thousand seventeen through March thirty-first, two 52 thousand twenty. 53 Funds shall be deposited by the commissioner, within amounts (k) appropriated, and the state comptroller is hereby authorized and 54 55 directed to receive for deposit to the credit of the state special revenue fund - other, HCRA transfer fund, health care services account, 56



or any successor fund or account, for purposes of services and expenses 1 2 related to public health programs, including comprehensive care centers for eating disorders pursuant to the former section twenty-seven hundred 3 ninety-nine-1 of this chapter, provided however that, for such centers, 4 funds in the amount of five hundred thousand dollars on an annualized 5 6 basis shall be transferred from the health care services account, or any 7 successor fund or account, and deposited into the fund established by 8 section ninety-five-e of the state finance law for periods prior to March thirty-first, two thousand eleven, from the tobacco control and 9 insurance initiatives pool established for the following periods in the 10 11 following amounts: 12 (i) up to thirty-one million dollars for the period January first, two 13 thousand through December thirty-first, two thousand; 14 (ii) up to forty-one million dollars for the period January first, two 15 thousand one through December thirty-first, two thousand one; 16 (iii) up to eighty-one million dollars for the period January first, 17 two thousand two through December thirty-first, two thousand two; (iv) one hundred twenty-two million five hundred thousand dollars for 18 19 the period January first, two thousand three through December thirtyfirst, two thousand three; 20 21 (v) one hundred eight million five hundred seventy-five thousand 22 dollars, plus an additional five hundred thousand dollars, for the period January first, two thousand four through December thirty-first, two 23 24 thousand four; 25 (vi) ninety-one million eight hundred thousand dollars, plus an addi-26 tional five hundred thousand dollars, for the period January first, two 27 thousand five through December thirty-first, two thousand five; 28 (vii) one hundred fifty-six million six hundred thousand dollars, plus 29 an additional five hundred thousand dollars, for the period January 30 first, two thousand six through December thirty-first, two thousand six; (viii) one hundred fifty-one million four hundred thousand dollars, 31 32 plus an additional five hundred thousand dollars, for the period January first, two thousand seven through December thirty-first, two thousand 33 34 seven; 35 one hundred sixteen million nine hundred forty-nine thousand (ix) 36 dollars, plus an additional five hundred thousand dollars, for the peri-37 od January first, two thousand eight through December thirty-first, two 38 thousand eight; 39 one hundred sixteen million nine hundred forty-nine thousand (x) 40 dollars, plus an additional five hundred thousand dollars, for the peri-41 od January first, two thousand nine through December thirty-first, two 42 thousand nine; 43 (xi) one hundred sixteen million nine hundred forty-nine thousand 44 dollars, plus an additional five hundred thousand dollars, for the peri-45 od January first, two thousand ten through December thirty-first, two 46 thousand ten; 47 twenty-nine million two hundred thirty-seven thousand two (xii) hundred fifty dollars, plus an additional one hundred twenty-five thou-48 sand dollars, for the period January first, two thousand eleven through 49 50 March thirty-first, two thousand eleven; 51 (xiii) one hundred twenty million thirty-eight thousand dollars for 52 the period April first, two thousand eleven through March thirty-first, 53 two thousand twelve; and 54 (xiv) one hundred nineteen million four hundred seven thousand dollars 55 each state fiscal year for the period April first, two thousand twelve through March thirty-first, two thousand fourteen. 56



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1 (1) Funds shall be deposited by the commissioner, within amounts 2 appropriated, and the state comptroller is hereby authorized and 3 directed to receive for deposit to the credit of the state special revenue funds - other, HCRA transfer fund, medical assistance account, 4 or any successor fund or account, for purposes of funding the state 5 share of the personal care and certified home health agency rate or fee 6 increases established pursuant to subdivision three of section three 7 8 hundred sixty-seven-o of the social services law from the tobacco control and insurance initiatives pool established for the following 9 10 periods in the following amounts: 11 (i) twenty-three million two hundred thousand dollars for the period 12 January first, two thousand through December thirty-first, two thousand; 13 (ii) twenty-three million two hundred thousand dollars for the period 14 January first, two thousand one through December thirty-first, two thou-15 sand one; 16 (iii) twenty-three million two hundred thousand dollars for the period 17 January first, two thousand two through December thirty-first, two thou-18 sand two; 19 (iv) up to sixty-five million two hundred thousand dollars for the 20 period January first, two thousand three through December thirty-first, 21 two thousand three; 22 (v) up to sixty-five million two hundred thousand dollars for the period January first, two thousand four through December thirty-first, 23 24 two thousand four; 25 (vi) up to sixty-five million two hundred thousand dollars for the period January first, two thousand five through December thirty-first, 26 27 two thousand five; 28 (vii) up to sixty-five million two hundred thousand dollars for the 29 period January first, two thousand six through December thirty-first, 30 two thousand six; (viii) up to sixty-five million two hundred thousand dollars for the 31 32 period January first, two thousand seven through December thirty-first, 33 two thousand seven; and (ix) up to sixteen million three hundred thousand dollars for the 34 period January first, two thousand eight through March thirty-first, two 35 36 thousand eight. 37 (m) Funds shall be deposited by the commissioner, within amounts 38 appropriated, and the state comptroller is hereby authorized and directed to receive for deposit to the credit of the state special 39 40 revenue funds - other, HCRA transfer fund, medical assistance account, 41 or any successor fund or account, for purposes of funding the state 42 share of services and expenses related to home care workers insurance pilot demonstration programs established pursuant to subdivision two of 43 44 section three hundred sixty-seven-o of the social services law from the 45 tobacco control and insurance initiatives pool established for the 46 following periods in the following amounts: 47 (i) three million eight hundred thousand dollars for the period January first, two thousand through December thirty-first, two thousand; 48 49 (ii) three million eight hundred thousand dollars for the period Janu-50 ary first, two thousand one through December thirty-first, two thousand 51 one; 52 (iii) three million eight hundred thousand dollars for the period January first, two thousand two through December thirty-first, two thou-53 54 sand two;

1 (iv) up to three million eight hundred thousand dollars for the period 2 January first, two thousand three through December thirty-first, two 3 thousand three; (v) up to three million eight hundred thousand dollars for the period 4 January first, two thousand four through December thirty-first, two 5 thousand four; 6 7 (vi) up to three million eight hundred thousand dollars for the period 8 January first, two thousand five through December thirty-first, two thousand five; 9 (vii) up to three million eight hundred thousand dollars for the peri-10 11 od January first, two thousand six through December thirty-first, two 12 thousand six; (viii) 13 up to three million eight hundred thousand dollars for the 14 period January first, two thousand seven through December thirty-first, 15 two thousand seven; and 16 (ix) up to nine hundred fifty thousand dollars for the period January 17 first, two thousand eight through March thirty-first, two thousand 18 eight. 19 (n) Funds shall be transferred by the commissioner and shall be depos-20 ited to the credit of the special revenue funds - other, miscellaneous 21 special revenue fund - 339, elderly pharmaceutical insurance coverage 22 program premium account authorized pursuant to the provisions of title three of article two of the elder law, or any successor fund or account, 23 for funding state expenses relating to the program from the tobacco 24 25 control and insurance initiatives pool established for the following 26 periods in the following amounts: 27 (i) one hundred seven million dollars for the period January first, 28 two thousand through December thirty-first, two thousand; 29 (ii) one hundred sixty-four million dollars for the period January 30 first, two thousand one through December thirty-first, two thousand one; (iii) three hundred twenty-two million seven hundred thousand dollars 31 32 for the period January first, two thousand two through December thirty-33 first, two thousand two; (iv) four hundred thirty-three million three hundred thousand dollars 34 35 for the period January first, two thousand three through December thir-36 ty-first, two thousand three; 37 (v) five hundred four million one hundred fifty thousand dollars for 38 the period January first, two thousand four through December thirty-39 first, two thousand four; 40 (vi) five hundred sixty-six million eight hundred thousand dollars for 41 the period January first, two thousand five through December thirty-42 first, two thousand five; (vii) six hundred three million one hundred fifty thousand dollars for 43 44 the period January first, two thousand six through December thirty-45 first, two thousand six; 46 (viii) six hundred sixty million eight hundred thousand dollars for 47 the period January first, two thousand seven through December thirty-48 first, two thousand seven; 49 (ix) three hundred sixty-seven million four hundred sixty-three thou-50 sand dollars for the period January first, two thousand eight through 51 December thirty-first, two thousand eight; 52 (x) three hundred thirty-four million eight hundred twenty-five thousand dollars for the period January first, two thousand nine through 53 54 December thirty-first, two thousand nine;



1 (xi) three hundred forty-four million nine hundred thousand dollars 2 for the period January first, two thousand ten through December thirty-3 first, two thousand ten; (xii) eighty-seven million seven hundred eighty-eight thousand dollars 4 5 for the period January first, two thousand eleven through March thirty-6 first, two thousand eleven; 7 (xiii) one hundred forty-three million one hundred fifty thousand 8 dollars for the period April first, two thousand eleven through March thirty-first, two thousand twelve; 9 (xiv) one hundred twenty million nine hundred fifty thousand dollars 10 11 for the period April first, two thousand twelve through March thirtyfirst, two thousand thirteen; 12 13 (xv) one hundred twenty-eight million eight hundred fifty thousand 14 dollars for the period April first, two thousand thirteen through March 15 thirty-first, two thousand fourteen; [and] 16 (xvi) one hundred twenty-seven million four hundred sixteen thousand 17 dollars each state fiscal year for the period April first, two thousand fourteen through March thirty-first, two thousand seventeen[.]; and 18 19 (xvii) one hundred twenty-seven million four hundred sixteen thousand dollars each state fiscal year for the period April first, two thousand 20 21 seventeen through March thirty-first, two thousand twenty. 22 (o) Funds shall be reserved and accumulated and shall be transferred 23 to the Roswell Park Cancer Institute Corporation, from the tobacco 24 control and insurance initiatives pool established for the following 25 periods in the following amounts: up to ninety million dollars for the period January first, two 26 (i) 27 thousand through December thirty-first, two thousand; 28 (ii) up to sixty million dollars for the period January first, two thousand one through December thirty-first, two thousand one; 29 (iii) up to eighty-five million dollars for the period January first, 30 two thousand two through December thirty-first, two thousand two; 31 (iv) eighty-five million two hundred fifty thousand dollars for the 32 33 period January first, two thousand three through December thirty-first, 34 two thousand three; (v) seventy-eight million dollars for the period January first, 35 two 36 thousand four through December thirty-first, two thousand four; 37 (vi) seventy-eight million dollars for the period January first, two 38 thousand five through December thirty-first, two thousand five; 39 (vii) ninety-one million dollars for the period January first, two 40 thousand six through December thirty-first, two thousand six; 41 (viii) seventy-eight million dollars for the period January first, two 42 thousand seven through December thirty-first, two thousand seven; 43 seventy-eight million dollars for the period January first, two (ix) thousand eight through December thirty-first, two thousand eight; 44 45 (x) seventy-eight million dollars for the period January first, two 46 thousand nine through December thirty-first, two thousand nine; 47 seventy-eight million dollars for the period January first, two (xi) thousand ten through December thirty-first, two thousand ten; 48 49 (xii) nineteen million five hundred thousand dollars for the period January first, two thousand eleven through March thirty-first, two thou-50 51 sand eleven; sixty-nine million eight hundred forty thousand dollars each 52 (xiii) 53 state fiscal year for the period April first, two thousand eleven through March thirty-first, two thousand fourteen; [and] 54



1 (xiv) up to ninety-six million six hundred thousand dollars each state 2 fiscal year for the period April first, two thousand fourteen through March thirty-first, two thousand seventeen[.]; and 3 (xv) up to ninety-six million six hundred thousand dollars each state 4 fiscal year for the period April first, two thousand seventeen through 5 6 March thirty-first, two thousand twenty. (p) Funds shall be deposited by the commissioner, within amounts 7 8 appropriated, and the state comptroller is hereby authorized and directed to receive for deposit to the credit of the state special 9 revenue funds - other, indigent care fund - 068, indigent care account, 10 11 or any successor fund or account, for purposes of providing a medicaid 12 disproportionate share payment from the high need indigent care adjust-13 ment pool established pursuant to section twenty-eight hundred seven-w 14 of this article, from the tobacco control and insurance initiatives pool 15 established for the following periods in the following amounts: 16 (i) eighty-two million dollars annually for the periods January first, 17 two thousand through December thirty-first, two thousand two; 18 (ii) up to eighty-two million dollars for the period January first, 19 two thousand three through December thirty-first, two thousand three; up to eighty-two million dollars for the period January first, 20 (iii) 21 two thousand four through December thirty-first, two thousand four; 22 (iv) up to eighty-two million dollars for the period January first, 23 two thousand five through December thirty-first, two thousand five; 24 (v) up to eighty-two million dollars for the period January first, two thousand six through December thirty-first, two thousand six; 25 (vi) up to eighty-two million dollars for the period January first, 26 27 two thousand seven through December thirty-first, two thousand seven; 28 (vii) up to eighty-two million dollars for the period January first, 29 two thousand eight through December thirty-first, two thousand eight; (viii) up to eighty-two million dollars for the period January first, 30 two thousand nine through December thirty-first, two thousand nine; 31 32 (ix) up to eighty-two million dollars for the period January first, 33 two thousand ten through December thirty-first, two thousand ten; up to twenty million five hundred thousand dollars for the period 34 (x) January first, two thousand eleven through March thirty-first, two thou-35 36 sand eleven; and 37 (xi) up to eighty-two million dollars each state fiscal year for the 38 period April first, two thousand eleven through March thirty-first, two 39 thousand fourteen. 40 (q) Funds shall be reserved and accumulated from year to year and 41 shall be available, including income from invested funds, for purposes 42 of providing distributions to eligible school based health centers 43 established pursuant to section eighty-eight of chapter one of the laws 44 of nineteen hundred ninety-nine, from the tobacco control and insurance 45 initiatives pool established for the following periods in the following 46 amounts: 47 (i) seven million dollars annually for the period January first, two thousand through December thirty-first, two thousand two; 48 49 (ii) up to seven million dollars for the period January first, two thousand three through December thirty-first, two thousand three; 50 51 (iii) up to seven million dollars for the period January first, two 52 thousand four through December thirty-first, two thousand four; 53 (iv) up to seven million dollars for the period January first, two thousand five through December thirty-first, two thousand five; 54 55 (v) up to seven million dollars for the period January first, two thousand six through December thirty-first, two thousand six; 56



1 (vi) up to seven million dollars for the period January first, two 2 thousand seven through December thirty-first, two thousand seven; (vii) up to seven million dollars for the period January first, two 3 thousand eight through December thirty-first, two thousand eight; 4 5 (viii) up to seven million dollars for the period January first, two thousand nine through December thirty-first, two thousand nine; 6 7 (ix) up to seven million dollars for the period January first, two 8 thousand ten through December thirty-first, two thousand ten; (x) up to one million seven hundred fifty thousand dollars for the 9 period January first, two thousand eleven through March thirty-first, 10 11 two thousand eleven; 12 (xi) up to five million six hundred thousand dollars each state fiscal 13 year for the period April first, two thousand eleven through March thir-14 ty-first, two thousand fourteen; [and] 15 (xii) up to five million two hundred eighty-eighty thousand dollars 16 each state fiscal year for the period April first, two thousand fourteen 17 through March thirty-first, two thousand seventeen[.]; and 18 (xiii) up to five million two hundred eighty-eight thousand dollars 19 each state fiscal year for the period April first, two thousand seventeen through March thirty-first, two thousand twenty. 20 21 (r) Funds shall be deposited by the commissioner within amounts appro-22 priated, and the state comptroller is hereby authorized and directed to receive for deposit to the credit of the state special revenue funds 23 24 other, HCRA transfer fund, medical assistance account, or any successor 25 fund or account, for purposes of providing distributions for supplemenmedical insurance for Medicare part B premiums, physicians 26 tary 27 services, outpatient services, medical equipment, supplies and other 28 health services, from the tobacco control and insurance initiatives pool 29 established for the following periods in the following amounts: forty-three million dollars for the period January first, two 30 (i) 31 thousand through December thirty-first, two thousand; 32 (ii) sixty-one million dollars for the period January first, two thou-33 sand one through December thirty-first, two thousand one; (iii) sixty-five million dollars for the period January first, two 34 thousand two through December thirty-first, two thousand two; 35 36 (iv) sixty-seven million five hundred thousand dollars for the period 37 January first, two thousand three through December thirty-first, two 38 thousand three; 39 sixty-eight million dollars for the period January first, two (v) 40 thousand four through December thirty-first, two thousand four; 41 (vi) sixty-eight million dollars for the period January first, two 42 thousand five through December thirty-first, two thousand five; 43 sixty-eight million dollars for the period January first, two (vii) 44 thousand six through December thirty-first, two thousand six; 45 (viii) seventeen million five hundred thousand dollars for the period 46 January first, two thousand seven through December thirty-first, two 47 thousand seven; (ix) sixty-eight million dollars for the period January first, 48 two 49 thousand eight through December thirty-first, two thousand eight; (x) sixty-eight million dollars for the period January first, two 50 51 thousand nine through December thirty-first, two thousand nine; 52 (xi) sixty-eight million dollars for the period January first, two thousand ten through December thirty-first, two thousand ten; 53 (xii) seventeen million dollars for the period January first, two 54 thousand eleven through March thirty-first, two thousand eleven; and 55



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1 (xiii) sixty-eight million dollars each state fiscal year for the 2 period April first, two thousand eleven through March thirty-first, two 3 thousand fourteen. (s) Funds shall be deposited by the commissioner within amounts appro-4 5 priated, and the state comptroller is hereby authorized and directed to 6 receive for deposit to the credit of the state special revenue funds 7 other, HCRA transfer fund, medical assistance account, or any successor 8 fund or account, for purposes of providing distributions pursuant to paragraphs (s-5), (s-6), (s-7) and (s-8) of subdivision eleven of 9 section twenty-eight hundred seven-c of this article from the tobacco 10 11 control and insurance initiatives pool established for the following 12 periods in the following amounts: 13 (i) eighteen million dollars for the period January first, two thou-14 sand through December thirty-first, two thousand; 15 (ii) twenty-four million dollars annually for the periods January 16 first, two thousand one through December thirty-first, two thousand two; 17 (iii) up to twenty-four million dollars for the period January first, 18 two thousand three through December thirty-first, two thousand three; 19 up to twenty-four million dollars for the period January first, (iv) two thousand four through December thirty-first, two thousand four; 20 21 (v) up to twenty-four million dollars for the period January first, 22 two thousand five through December thirty-first, two thousand five; 23 (vi) up to twenty-four million dollars for the period January first, 24 two thousand six through December thirty-first, two thousand six; 25 (vii) up to twenty-four million dollars for the period January first, two thousand seven through December thirty-first, two thousand seven; 26 27 (viii) up to twenty-four million dollars for the period January first, 28 two thousand eight through December thirty-first, two thousand eight; 29 and (ix) up to twenty-two million dollars for the period January first, 30 two thousand nine through November thirtieth, two thousand nine. 31 Funds shall be reserved and accumulated from year to year by the 32 (t) 33 commissioner and shall be made available, including income from invested 34 funds: 35 (i) For the purpose of making grants to a state owned and operated 36 medical school which does not have a state owned and operated hospital 37 on site and available for teaching purposes. Notwithstanding sections 38 one hundred twelve and one hundred sixty-three of the state finance law, such grants shall be made in the amount of up to five hundred thousand 39 40 dollars for the period January first, two thousand through December 41 thirty-first, two thousand; 42 (ii) For the purpose of making grants to medical schools pursuant to 43 section eighty-six-a of chapter one of the laws of nineteen hundred 44 ninety-nine in the sum of up to four million dollars for the period 45 January first, two thousand through December thirty-first, two thousand; 46 and 47 (iii) The funds disbursed pursuant to subparagraphs (i) and (ii) of 48 this paragraph from the tobacco control and insurance initiatives pool 49 are contingent upon meeting all funding amounts established pursuant to 50 paragraphs (a), (b), (c), (d), (e), (f), (l), (m), (n), (p), (q), (r) 51 and (s) of this subdivision, paragraph (a) of subdivision nine of 52 section twenty-eight hundred seven-j of this article, and paragraphs (a), (i) and (k) of subdivision one of section twenty-eight hundred 53 54 seven-1 of this article. (u) Funds shall be deposited by the commissioner, within amounts 55 56 appropriated, and the state comptroller is hereby authorized and

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1 directed to receive for deposit to the credit of the state special 2 revenue funds - other, HCRA transfer fund, medical assistance account, 3 or any successor fund or account, for purposes of funding the state share of services and expenses related to the nursing home quality 4 5 improvement demonstration program established pursuant to section twenty-eight hundred eight-d of this article from the tobacco control and 6 7 insurance initiatives pool established for the following periods in the 8 following amounts: (i) up to twenty-five million dollars for the period beginning April 9 first, two thousand two and ending December thirty-first, two thousand 10 11 two, and on an annualized basis, for each annual period thereafter 12 beginning January first, two thousand three and ending December thirty-13 first, two thousand four; 14 (ii) up to eighteen million seven hundred fifty thousand dollars for 15 the period January first, two thousand five through December thirty-16 first, two thousand five; and 17 (iii) up to fifty-six million five hundred thousand dollars for the 18 period January first, two thousand six through December thirty-first, 19 two thousand six. (v) Funds shall be transferred by the commissioner and shall be depos-20 21 ited to the credit of the hospital excess liability pool created pursuant to section eighteen of chapter two hundred sixty-six of the laws of 22 nineteen hundred eighty-six, or any successor fund or account, for 23 24 purposes of expenses related to the purchase of excess medical malprac-25 tice insurance and the cost of administrating the pool, including costs 26 associated with the risk management program established pursuant to 27 section forty-two of part A of chapter one of the laws of two thousand 28 two required by paragraph (a) of subdivision one of section eighteen of 29 chapter two hundred sixty-six of the laws of nineteen hundred eighty-six as may be amended from time to time, from the tobacco control and insur-30 ance initiatives pool established for the following periods in the 31 32 following amounts: 33 (i) up to fifty million dollars or so much as is needed for the period 34 January first, two thousand two through December thirty-first, two thou-35 sand two; 36 (ii) up to seventy-six million seven hundred thousand dollars for the 37 period January first, two thousand three through December thirty-first, 38 two thousand three; 39 (iii) up to sixty-five million dollars for the period January first, 40 two thousand four through December thirty-first, two thousand four; 41 (iv) up to sixty-five million dollars for the period January first, 42 two thousand five through December thirty-first, two thousand five; 43 (v) up to one hundred thirteen million eight hundred thousand dollars 44 for the period January first, two thousand six through December thirty-45 first, two thousand six; 46 (vi) up to one hundred thirty million dollars for the period January 47 two thousand seven through December thirty-first, two thousand first, 48 seven; 49 (vii) up to one hundred thirty million dollars for the period January 50 first, two thousand eight through December thirty-first, two thousand 51 eight; 52 (viii) up to one hundred thirty million dollars for the period January first, two thousand nine through December thirty-first, two thousand 53 54 nine; (ix) up to one hundred thirty million dollars for the period January 55 first, two thousand ten through December thirty-first, two thousand ten; 56



1 (x) up to thirty-two million five hundred thousand dollars for the 2 period January first, two thousand eleven through March thirty-first, 3 two thousand eleven; (xi) up to one hundred twenty-seven million four hundred thousand 4 5 dollars each state fiscal year for the period April first, two thousand eleven through March thirty-first, two thousand fourteen; [and] 6 7 (xii) up to one hundred twenty-seven million four hundred thousand 8 dollars each state fiscal year for the period April first, two thousand fourteen through March thirty-first, two thousand seventeen[.]; and 9 10 (xiii) up to one hundred twenty-seven million four hundred thousand 11 dollars each state fiscal year for the period April first, two thousand 12 seventeen through March thirty-first, two thousand twenty. 13 (w) Funds shall be deposited by the commissioner, within amounts 14 appropriated, and the state comptroller is hereby authorized and 15 directed to receive for deposit to the credit of the state special 16 revenue funds - other, HCRA transfer fund, medical assistance account, or any successor fund or account, for purposes of funding the state 17 share of the treatment of breast and cervical cancer pursuant to para-18 19 graph (v) of subdivision four of section three hundred sixty-six of the social services law, from the tobacco control and insurance initiatives 20 21 pool established for the following periods in the following amounts: 22 (i) up to four hundred fifty thousand dollars for the period January 23 first, two thousand two through December thirty-first, two thousand two; 24 (ii) up to two million one hundred thousand dollars for the period 25 January first, two thousand three through December thirty-first, two thousand three; 26 27 (iii) up to two million one hundred thousand dollars for the period 28 January first, two thousand four through December thirty-first, two 29 thousand four; (iv) up to two million one hundred thousand dollars for the period 30 31 January first, two thousand five through December thirty-first, two 32 thousand five; 33 (v) up to two million one hundred thousand dollars for the period January first, two thousand six through December thirty-first, two thou-34 35 sand six; 36 (vi) up to two million one hundred thousand dollars for the period 37 January first, two thousand seven through December thirty-first, two 38 thousand seven; 39 (vii) up to two million one hundred thousand dollars for the period 40 January first, two thousand eight through December thirty-first, two 41 thousand eight; 42 (viii) up to two million one hundred thousand dollars for the period 43 January first, two thousand nine through December thirty-first, two 44 thousand nine; 45 (ix) up to two million one hundred thousand dollars for the period 46 January first, two thousand ten through December thirty-first, two thou-47 sand ten; (x) up to five hundred twenty-five thousand dollars for the period 48 49 January first, two thousand eleven through March thirty-first, two thou-50 sand eleven; 51 (xi) up to two million one hundred thousand dollars each state fiscal 52 year for the period April first, two thousand eleven through March thir-53 ty-first, two thousand fourteen; [and] 54 (xii) up to two million one hundred thousand dollars each state fiscal 55 year for the period April first, two thousand fourteen through March thirty-first, two thousand seventeen[.]; and 56



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1 (v) fifty-two million two hundred thousand dollars for the period 2 January first, two thousand six through December thirty-first, two thou-3 sand six; (vi) forty-nine million dollars for the period January first, two 4 5 thousand seven through December thirty-first, two thousand seven; (vii) forty-nine million dollars for the period January first, two 6 thousand eight through December thirty-first, two thousand eight; and 7 8 (viii) twelve million two hundred fifty thousand dollars for the period January first, two thousand nine through March thirty-first, two 9 10 thousand nine. 11 Provided, however, amounts pursuant to this paragraph may be reduced 12 in an amount to be approved by the director of the budget to reflect 13 amounts received from the federal government under the state's 1115 14 waiver which are directed under its terms and conditions to the health 15 workforce recruitment and retention program. 16 (z) Funds shall be deposited by the commissioner, within amounts appropriated, and the state comptroller is hereby authorized and 17 directed to receive for deposit to the credit of the state special 18 revenue funds - other, HCRA transfer fund, medical assistance account, 19 20 or any successor fund or account, for purposes of funding the state 21 share of the non-public residential health care facility rate increases 22 for recruitment and retention of health care workers pursuant to paragraph (a) of subdivision eighteen of section twenty-eight hundred eight 23 24 of this article from the tobacco control and insurance initiatives pool 25 established for the following periods in the following amounts: twenty-one million five hundred thousand dollars on an annualized 26 (i) 27 basis for the period January first, two thousand two through December 28 thirty-first, two thousand two; 29 (ii) thirty-three million three hundred thousand dollars on an annual-30 ized basis for the period January first, two thousand three through December thirty-first, two thousand three; 31 32 (iii) forty-six million three hundred thousand dollars on an annual-33 ized basis for the period January first, two thousand four through December thirty-first, two thousand four; 34 (iv) forty-six million three hundred thousand dollars for the period 35 36 January first, two thousand five through December thirty-first, two 37 thousand five; 38 (v) forty-six million three hundred thousand dollars for the period 39 January first, two thousand six through December thirty-first, two thou-40 sand six; 41 (vi) thirty million nine hundred thousand dollars for the period Janu-42 ary first, two thousand seven through December thirty-first, two thou-43 sand seven; 44 (vii) twenty-four million seven hundred thousand dollars for the peri-45 od January first, two thousand eight through December thirty-first, two 46 thousand eight; 47 twelve million three hundred seventy-five thousand dollars for (viii) the period January first, two thousand nine through December thirty-48 first, two thousand nine; 49 (ix) nine million three hundred thousand dollars for the period Janu-50 51 ary first, two thousand ten through December thirty-first, two thousand 52 ten; and 53 two million three hundred twenty-five thousand dollars for the (x) period January first, two thousand eleven through March thirty-first, 54 55 two thousand eleven.



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1 (aa) Funds shall be reserved and accumulated from year to year and 2 shall be available, including income from invested funds, for purposes of grants to public residential health care facilities for recruitment 3 and retention of health care workers pursuant to paragraph (b) of subdi-4 5 vision eighteen of section twenty-eight hundred eight of this article 6 from the tobacco control and insurance initiatives pool established for 7 the following periods in the following amounts: 8 (i) seven million five hundred thousand dollars on an annualized basis 9 for the period January first, two thousand two through December thirty-10 first, two thousand two; 11 (ii) eleven million seven hundred thousand dollars on an annualized 12 basis for the period January first, two thousand three through December 13 thirty-first, two thousand three; 14 (iii) sixteen million two hundred thousand dollars on an annualized 15 basis for the period January first, two thousand four through December 16 thirty-first, two thousand four; 17 (iv) sixteen million two hundred thousand dollars for the period Janu-18 ary first, two thousand five through December thirty-first, two thousand 19 five; 20 (v) sixteen million two hundred thousand dollars for the period Janu-21 ary first, two thousand six through December thirty-first, two thousand 22 six: 23 (vi) ten million eight hundred thousand dollars for the period January 24 first, two thousand seven through December thirty-first, two thousand 25 seven; 26 (vii) six million seven hundred fifty thousand dollars for the period 27 January first, two thousand eight through December thirty-first, two 28 thousand eight; and 29 (viii) one million three hundred fifty thousand dollars for the period 30 January first, two thousand nine through December thirty-first, two 31 thousand nine. (bb) (i) Funds shall be deposited by the commissioner, within amounts 32 33 appropriated, and subject to the availability of federal financial participation, and the state comptroller is hereby authorized and 34 directed to receive for deposit to the credit of the state special 35 revenue funds - other, HCRA transfer fund, medical assistance account, 36 37 or any successor fund or account, for the purpose of supporting the 38 state share of adjustments to Medicaid rates of payment for personal care services provided pursuant to paragraph (e) of subdivision two of 39 40 section three hundred sixty-five-a of the social services law, for local 41 social service districts which include a city with a population of over 42 one million persons and computed and distributed in accordance with memorandums of understanding to be entered into between the state of New 43 44 York and such local social service districts for the purpose of support-45 ing the recruitment and retention of personal care service workers or 46 any worker with direct patient care responsibility, from the tobacco 47 control and insurance initiatives pool established for the following 48 periods and the following amounts: 49 (A) forty-four million dollars, on an annualized basis, for the period 50 April first, two thousand two through December thirty-first, two thou-51 sand two;

52 (B) seventy-four million dollars, on an annualized basis, for the 53 period January first, two thousand three through December thirty-first, 54 two thousand three;


1 (C) one hundred four million dollars, on an annualized basis, for the 2 period January first, two thousand four through December thirty-first, 3 two thousand four; (D) one hundred thirty-six million dollars, on an annualized basis, 4 5 for the period January first, two thousand five through December thir-6 ty-first, two thousand five; 7 (E) one hundred thirty-six million dollars, on an annualized basis, 8 for the period January first, two thousand six through December thirty-9 first, two thousand six; (F) one hundred thirty-six million dollars for the period January 10 11 first, two thousand seven through December thirty-first, two thousand 12 seven; 13 (G) one hundred thirty-six million dollars for the period January 14 first, two thousand eight through December thirty-first, two thousand 15 eight; 16 (H) one hundred thirty-six million dollars for the period January 17 first, two thousand nine through December thirty-first, two thousand 18 nine; 19 (I) one hundred thirty-six million dollars for the period January first, two thousand ten through December thirty-first, two thousand ten; 20 21 (J) thirty-four million dollars for the period January first, two 22 thousand eleven through March thirty-first, two thousand eleven; 23 up to one hundred thirty-six million dollars each state fiscal (K) 24 year for the period April first, two thousand eleven through March thir-25 ty-first, two thousand fourteen; [and] (L) up to one hundred thirty-six million dollars each state fiscal 26 27 year for the period March thirty-first, two thousand fourteen through 28 April first, two thousand seventeen[.]; and (M) up to one hundred thirty-six million dollars each state fiscal 29 year for the period April first, two thousand seventeen through March 30 31 thirty-first, two thousand twenty. 32 (ii) Adjustments to Medicaid rates made pursuant to this paragraph 33 shall not, in aggregate, exceed the following amounts for the following 34 periods: (A) for the period April first, two thousand two through December 35 36 thirty-first, two thousand two, one hundred ten million dollars; (B) for the period January first, two thousand three through December 37 38 thirty-first, two thousand three, one hundred eighty-five million 39 dollars; 40 (C) for the period January first, two thousand four through December 41 thirty-first, two thousand four, two hundred sixty million dollars; 42 (D) for the period January first, two thousand five through December 43 thirty-first, two thousand five, three hundred forty million dollars; 44 (E) for the period January first, two thousand six through December 45 thirty-first, two thousand six, three hundred forty million dollars; 46 (F) for the period January first, two thousand seven through December 47 thirty-first, two thousand seven, three hundred forty million dollars; (G) for the period January first, two thousand eight through December 48 49 thirty-first, two thousand eight, three hundred forty million dollars; 50 (H) for the period January first, two thousand nine through December 51 thirty-first, two thousand nine, three hundred forty million dollars; 52 (I) for the period January first, two thousand ten through December thirty-first, two thousand ten, three hundred forty million dollars; 53 54 (J) for the period January first, two thousand eleven through March 55 thirty-first, two thousand eleven, eighty-five million dollars;



1 (K) for each state fiscal year within the period April first, two 2 thousand eleven through March thirty-first, two thousand fourteen, three 3 hundred forty million dollars; [and]

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4 (L) for each state fiscal year within the period April first, two
5 thousand fourteen through March thirty-first, two thousand seventeen,
6 three hundred forty million dollars[.]; and

7 (M) for each state fiscal year within the period April first, two
8 thousand seventeen through March thirty-first, two thousand twenty,
9 three hundred forty million dollars.

(iii) Personal care service providers which have their rates adjusted 10 11 pursuant to this paragraph shall use such funds for the purpose of 12 recruitment and retention of non-supervisory personal care services 13 workers or any worker with direct patient care responsibility only and 14 are prohibited from using such funds for any other purpose. Each such 15 personal care services provider shall submit, at a time and in a manner 16 to be determined by the commissioner, a written certification attesting 17 that such funds will be used solely for the purpose of recruitment and 18 retention of non-supervisory personal care services workers or any work-19 er with direct patient care responsibility. The commissioner is authorized to audit each such provider to ensure compliance with the written 20 21 certification required by this subdivision and shall recoup any funds 22 determined to have been used for purposes other than recruitment and 23 retention of non-supervisory personal care services workers or any work-24 er with direct patient care responsibility. Such recoupment shall be in 25 addition to any other penalties provided by law.

(cc) Funds shall be deposited by the commissioner, within amounts 26 27 appropriated, and the state comptroller is hereby authorized and directed to receive for deposit to the credit of the state special 28 29 revenue funds - other, HCRA transfer fund, medical assistance account, or any successor fund or account, for the purpose of supporting the 30 state share of adjustments to Medicaid rates of payment for personal 31 care services provided pursuant to paragraph (e) of subdivision two of 32 33 section three hundred sixty-five-a of the social services law, for local social service districts which shall not include a city with a popu-34 lation of over one million persons for the purpose of supporting the 35 personal care services worker recruitment and retention program as 36 37 established pursuant to section three hundred sixty-seven-q of the 38 social services law, from the tobacco control and insurance initiatives 39 pool established for the following periods and the following amounts:

(i) two million eight hundred thousand dollars for the period April
first, two thousand two through December thirty-first, two thousand two;
(ii) five million six hundred thousand dollars, on an annualized
basis, for the period January first, two thousand three through December
thirty-first, two thousand three;

(iii) eight million four hundred thousand dollars, on an annualized basis, for the period January first, two thousand four through December thirty-first, two thousand four;

48 (iv) ten million eight hundred thousand dollars, on an annualized 49 basis, for the period January first, two thousand five through December 50 thirty-first, two thousand five;

51 (v) ten million eight hundred thousand dollars, on an annualized 52 basis, for the period January first, two thousand six through December 53 thirty-first, two thousand six;

(vi) eleven million two hundred thousand dollars for the period Janu-55 ary first, two thousand seven through December thirty-first, two thou-56 sand seven;



1 (vii) eleven million two hundred thousand dollars for the period Janu-2 ary first, two thousand eight through December thirty-first, two thou-3 sand eight; (viii) eleven million two hundred thousand dollars for the period 4 5 January first, two thousand nine through December thirty-first, two 6 thousand nine; 7 eleven million two hundred thousand dollars for the period Janu-(ix) 8 ary first, two thousand ten through December thirty-first, two thousand 9 ten; two million eight hundred thousand dollars for the period January 10 (x) 11 first, two thousand eleven through March thirty-first, two thousand 12 eleven; 13 (xi) up to eleven million two hundred thousand dollars each state 14 fiscal year for the period April first, two thousand eleven through 15 March thirty-first, two thousand fourteen; [and] 16 (xii) up to eleven million two hundred thousand dollars each state 17 fiscal year for the period April first, two thousand fourteen through March thirty-first, two thousand seventeen [.]; and 18 19 (xiii) up to eleven million two hundred thousand dollars each state 20 fiscal year for the period April first, two thousand seventeen through 21 March thirty-first, two thousand twenty. 22 (dd) Funds shall be deposited by the commissioner, within amounts appropriated, and the state comptroller is hereby authorized and 23 24 directed to receive for deposit to the credit of the state special revenue fund - other, HCRA transfer fund, medical assistance account, or 25 any successor fund or account, for purposes of funding the state share 26 27 of Medicaid expenditures for physician services from the tobacco control 28 and insurance initiatives pool established for the following periods in 29 the following amounts: (i) up to fifty-two million dollars for the period January first, two 30 thousand two through December thirty-first, two thousand two; 31 (ii) eighty-one million two hundred thousand dollars for the period 32 33 January first, two thousand three through December thirty-first, two 34 thousand three; eighty-five million two hundred thousand dollars for the period 35 (iii) 36 January first, two thousand four through December thirty-first, two 37 thousand four; (iv) eighty-five million two hundred thousand dollars for the period 38 39 January first, two thousand five through December thirty-first, two 40 thousand five; 41 (v) eighty-five million two hundred thousand dollars for the period 42 January first, two thousand six through December thirty-first, two thou-43 sand six; 44 (vi) eighty-five million two hundred thousand dollars for the period 45 January first, two thousand seven through December thirty-first, two 46 thousand seven; 47 (vii) eighty-five million two hundred thousand dollars for the period January first, two thousand eight through December thirty-first, two 48 thousand eight; 49 (viii) eighty-five million two hundred thousand dollars for the period 50 January first, two thousand nine through December thirty-first, two 51 52 thousand nine; (ix) eighty-five million two hundred thousand dollars for the period 53 54 January first, two thousand ten through December thirty-first, two thou-55 sand ten;



1 (x) twenty-one million three hundred thousand dollars for the period 2 January first, two thousand eleven through March thirty-first, two thou-3 sand eleven; and (xi) eighty-five million two hundred thousand dollars each state 4 fiscal year for the period April first, two thousand eleven through 5 6 March thirty-first, two thousand fourteen. (ee) Funds shall be deposited by the commissioner, within amounts 7 8 appropriated, and the state comptroller is hereby authorized and directed to receive for deposit to the credit of the state special 9 revenue fund - other, HCRA transfer fund, medical assistance account, or 10 11 any successor fund or account, for purposes of funding the state share 12 of the free-standing diagnostic and treatment center rate increases for 13 recruitment and retention of health care workers pursuant to subdivision 14 seventeen of section twenty-eight hundred seven of this article from the 15 tobacco control and insurance initiatives pool established for the 16 following periods in the following amounts: 17 three million two hundred fifty thousand dollars for the period (i) 18 April first, two thousand two through December thirty-first, two thou-19 sand two; 20 (ii) three million two hundred fifty thousand dollars on an annualized 21 basis for the period January first, two thousand three through December thirty-first, two thousand three; 22 23 (iii) three million two hundred fifty thousand dollars on an annual-24 ized basis for the period January first, two thousand four through 25 December thirty-first, two thousand four; (iv) three million two hundred fifty thousand dollars for the period 26 27 January first, two thousand five through December thirty-first, two 28 thousand five; 29 (v) three million two hundred fifty thousand dollars for the period 30 January first, two thousand six through December thirty-first, two thou-31 sand six; 32 (vi) three million two hundred fifty thousand dollars for the period 33 January first, two thousand seven through December thirty-first, two 34 thousand seven; (vii) three million four hundred thirty-eight thousand dollars for the 35 36 period January first, two thousand eight through December thirty-first, 37 two thousand eight; 38 (viii) two million four hundred fifty thousand dollars for the period 39 January first, two thousand nine through December thirty-first, two 40 thousand nine; 41 (ix) one million five hundred thousand dollars for the period January 42 first, two thousand ten through December thirty-first, two thousand ten; 43 and 44 three hundred twenty-five thousand dollars for the period January (x) 45 first, two thousand eleven through March thirty-first, two thousand 46 eleven. 47 (ff) Funds shall be deposited by the commissioner, within amounts appropriated, and the state comptroller is hereby authorized and 48 directed to receive for deposit to the credit of the state special 49 revenue fund - other, HCRA transfer fund, medical assistance account, or 50 51 any successor fund or account, for purposes of funding the state share 52 of Medicaid expenditures for disabled persons as authorized pursuant to 53 former subparagraphs twelve and thirteen of paragraph (a) of subdivision one of section three hundred sixty-six of the social services law from 54 55 the tobacco control and insurance initiatives pool established for the following periods in the following amounts: 56



1 (i) one million eight hundred thousand dollars for the period April 2 first, two thousand two through December thirty-first, two thousand two; 3 (ii) sixteen million four hundred thousand dollars on an annualized basis for the period January first, two thousand three through December 4 5 thirty-first, two thousand three; (iii) eighteen million seven hundred thousand dollars on an annualized 6 7 basis for the period January first, two thousand four through December 8 thirty-first, two thousand four; (iv) thirty million six hundred thousand dollars for the period Janu-9 10 ary first, two thousand five through December thirty-first, two thousand 11 five; 12 (v) thirty million six hundred thousand dollars for the period January 13 first, two thousand six through December thirty-first, two thousand six; 14 (vi) thirty million six hundred thousand dollars for the period Janu-15 ary first, two thousand seven through December thirty-first, two thou-16 sand seven; 17 fifteen million dollars for the period January first, two thou-(vii) sand eight through December thirty-first, two thousand eight; 18 19 (viii) fifteen million dollars for the period January first, two thou-20 sand nine through December thirty-first, two thousand nine; 21 (ix) fifteen million dollars for the period January first, two thou-22 sand ten through December thirty-first, two thousand ten; three million seven hundred fifty thousand dollars for the period 23 (x) 24 January first, two thousand eleven through March thirty-first, two thou-25 sand eleven; 26 (xi) fifteen million dollars each state fiscal year for the period 27 April first, two thousand eleven through March thirty-first, two thou-28 sand fourteen; [and] 29 (xii) fifteen million dollars each state fiscal year for the period 30 April first, two thousand fourteen through March thirty-first, two thou-31 sand seventeen[.]; and 32 (xiii) fifteen million dollars each state fiscal year for the period 33 April first, two thousand seventeen through March thirty-first, two 34 thousand twenty. (gg) Funds shall be reserved and accumulated from year to year and 35 36 shall be available, including income from invested funds, for purposes 37 of grants to non-public general hospitals pursuant to paragraph (c) of 38 subdivision thirty of section twenty-eight hundred seven-c of this arti-39 cle from the tobacco control and insurance initiatives pool established 40 for the following periods in the following amounts: 41 (i) up to one million three hundred thousand dollars on an annualized 42 basis for the period January first, two thousand two through December 43 thirty-first, two thousand two; 44 (ii) up to three million two hundred thousand dollars on an annualized 45 basis for the period January first, two thousand three through December 46 thirty-first, two thousand three; 47 (iii) up to five million six hundred thousand dollars on an annualized 48 basis for the period January first, two thousand four through December thirty-first, two thousand four; 49 (iv) up to eight million six hundred thousand dollars for the period 50 51 January first, two thousand five through December thirty-first, two 52 thousand five; (v) up to eight million six hundred thousand dollars on an annualized 53 54 basis for the period January first, two thousand six through December 55 thirty-first, two thousand six;



1 (vi) up to two million six hundred thousand dollars for the period 2 January first, two thousand seven through December thirty-first, two 3 thousand seven; (vii) up to two million six hundred thousand dollars for the period 4 January first, two thousand eight through December thirty-first, two 5 6 thousand eight; 7 (viii) up to two million six hundred thousand dollars for the period 8 January first, two thousand nine through December thirty-first, two 9 thousand nine; (ix) up to two million six hundred thousand dollars for the period 10 11 January first, two thousand ten through December thirty-first, two thou-12 sand ten; and 13 (x) up to six hundred fifty thousand dollars for the period January 14 first, two thousand eleven through March thirty-first, two thousand 15 eleven. 16 (hh) Funds shall be deposited by the commissioner, within amounts 17 appropriated, and the state comptroller is hereby authorized and directed to receive for deposit to the credit of the special revenue 18 19 fund - other, HCRA transfer fund, medical assistance account for purposes of providing financial assistance to residential health care 20 21 facilities pursuant to subdivisions nineteen and twenty-one of section 22 twenty-eight hundred eight of this article, from the tobacco control and insurance initiatives pool established for the following periods in the 23 24 following amounts: 25 (i) for the period April first, two thousand two through December 26 thirty-first, two thousand two, ten million dollars; 27 (ii) for the period January first, two thousand three through December 28 thirty-first, two thousand three, nine million four hundred fifty thou-29 sand dollars; (iii) for the period January first, two thousand four through December 30 31 thirty-first, two thousand four, nine million three hundred fifty thou-32 sand dollars; 33 (iv) up to fifteen million dollars for the period January first, two thousand five through December thirty-first, two thousand five; 34 up to fifteen million dollars for the period January first, two 35 (v) 36 thousand six through December thirty-first, two thousand six; (vi) up to fifteen million dollars for the period January first, 37 two 38 thousand seven through December thirty-first, two thousand seven; 39 (vii) up to fifteen million dollars for the period January first, two 40 thousand eight through December thirty-first, two thousand eight; 41 (viii) up to fifteen million dollars for the period January first, two 42 thousand nine through December thirty-first, two thousand nine; 43 (ix) up to fifteen million dollars for the period January first, two thousand ten through December thirty-first, two thousand ten; 44 45 up to three million seven hundred fifty thousand dollars for the (x) 46 period January first, two thousand eleven through March thirty-first, 47 two thousand eleven; and fifteen million dollars each state fiscal year for the period 48 (xi) 49 April first, two thousand eleven through March thirty-first, two thou-50 sand fourteen. 51 Funds shall be deposited by the commissioner, within amounts (ii) 52 appropriated, and the state comptroller is hereby authorized and directed to receive for deposit to the credit of the state special 53 revenue funds - other, HCRA transfer fund, medical assistance account, 54 55 or any successor fund or account, for the purpose of supporting the state share of Medicaid expenditures for disabled persons as authorized 56



1 by sections 1619 (a) and (b) of the federal social security act pursuant 2 to the tobacco control and insurance initiatives pool established for 3 the following periods in the following amounts: (i) six million four hundred thousand dollars for the period April 4 5 first, two thousand two through December thirty-first, two thousand two; 6 (ii) eight million five hundred thousand dollars, for the period Janu-7 ary first, two thousand three through December thirty-first, two thou-8 sand three; (iii) eight million five hundred thousand dollars for the period Janu-9 10 ary first, two thousand four through December thirty-first, two thousand 11 four; 12 (iv) eight million five hundred thousand dollars for the period Janu-13 ary first, two thousand five through December thirty-first, two thousand 14 five; 15 (v) eight million five hundred thousand dollars for the period January 16 first, two thousand six through December thirty-first, two thousand six; 17 (vi) eight million six hundred thousand dollars for the period January 18 first, two thousand seven through December thirty-first, two thousand 19 seven; (vii) eight million five hundred thousand dollars for the period Janu-20 21 ary first, two thousand eight through December thirty-first, two thou-22 sand eight; 23 (viii) eight million five hundred thousand dollars for the period 24 two thousand nine through December thirty-first, two January first, 25 thousand nine; 26 (ix) eight million five hundred thousand dollars for the period Janu-27 ary first, two thousand ten through December thirty-first, two thousand 28 ten: 29 (x) two million one hundred twenty-five thousand dollars for the peri-30 od January first, two thousand eleven through March thirty-first, two 31 thousand eleven; 32 eight million five hundred thousand dollars each state fiscal (xi) 33 year for the period April first, two thousand eleven through March thir-34 ty-first, two thousand fourteen; [and] 35 (xii) eight million five hundred thousand dollars each state fiscal 36 year for the period April first, two thousand fourteen through March thirty-first, two thousand seventeen[.]; and 37 38 (xiii) eight million five hundred thousand dollars each state fiscal 39 year for the period April first, two thousand seventeen through March 40 thirty-first, two thousand twenty. 41 (jj) Funds shall be reserved and accumulated from year to year and 42 shall be available, including income from invested funds, for the 43 purposes of a grant program to improve access to infertility services, treatments and procedures, from the tobacco control and insurance initi-44 atives pool established for the period January first, two thousand two 45 through December thirty-first, two thousand two in the amount of nine 46 47 million one hundred seventy-five thousand dollars, for the period April first, two thousand six through March thirty-first, two thousand seven 48 in the amount of five million dollars, for the period April first, two 49 50 thousand seven through March thirty-first, two thousand eight in the 51 amount of five million dollars, for the period April first, two thousand 52 eight through March thirty-first, two thousand nine in the amount of five million dollars, and for the period April first, two thousand nine 53 54 through March thirty-first, two thousand ten in the amount of five 55 million dollars, for the period April first, two thousand ten through 56 March thirty-first, two thousand eleven in the amount of two million two



1 hundred thousand dollars, and for the period April first, two thousand eleven through March thirty-first, two thousand twelve up to one million 2 3 one hundred thousand dollars. (kk) Funds shall be deposited by the commissioner, within amounts 4 appropriated, and the state comptroller is hereby authorized and 5 directed to receive for deposit to the credit of the state special 6 revenue funds -- other, HCRA transfer fund, medical assistance account, 7 8 or any successor fund or account, for purposes of funding the state share of Medical Assistance Program expenditures from the tobacco 9 control and insurance initiatives pool established for the following 10 11 periods in the following amounts: 12 (i) thirty-eight million eight hundred thousand dollars for the period 13 January first, two thousand two through December thirty-first, two thou-14 sand two; 15 (ii) up to two hundred ninety-five million dollars for the period 16 January first, two thousand three through December thirty-first, two 17 thousand three; 18 (iii) up to four hundred seventy-two million dollars for the period 19 January first, two thousand four through December thirty-first, two 20 thousand four; 21 (iv) up to nine hundred million dollars for the period January first, 22 two thousand five through December thirty-first, two thousand five; (v) up to eight hundred sixty-six million three hundred thousand 23 24 dollars for the period January first, two thousand six through December 25 thirty-first, two thousand six; 26 (vi) up to six hundred sixteen million seven hundred thousand dollars 27 for the period January first, two thousand seven through December thir-28 ty-first, two thousand seven; 29 (vii) up to five hundred seventy-eight million nine hundred twenty-30 five thousand dollars for the period January first, two thousand eight through December thirty-first, two thousand eight; and 31 (viii) 32 within amounts appropriated on and after January first, two 33 thousand nine. 34 (11) Funds shall be deposited by the commissioner, within amounts 35 appropriated, and the state comptroller is hereby authorized and 36 directed to receive for deposit to the credit of the state special revenue funds -- other, HCRA transfer fund, medical assistance account, 37 38 or any successor fund or account, for purposes of funding the state share of Medicaid expenditures related to the city of New York from the 39 40 tobacco control and insurance initiatives pool established for the 41 following periods in the following amounts: 42 (i) eighty-two million seven hundred thousand dollars for the period 43 January first, two thousand two through December thirty-first, two thou-44 sand two; 45 (ii) one hundred twenty-four million six hundred thousand dollars for 46 the period January first, two thousand three through December thirty-47 first, two thousand three; (iii) one hundred twenty-four million seven hundred thousand dollars 48 49 for the period January first, two thousand four through December thir-50 ty-first, two thousand four; 51 (iv) one hundred twenty-four million seven hundred thousand dollars 52 for the period January first, two thousand five through December thir-53 ty-first, two thousand five; 54 (v) one hundred twenty-four million seven hundred thousand dollars for the period January first, two thousand six through December thirty-55 56 first, two thousand six;



1 (vi) one hundred twenty-four million seven hundred thousand dollars 2 for the period January first, two thousand seven through December thir-3 ty-first, two thousand seven; (vii) one hundred twenty-four million seven hundred thousand dollars 4 for the period January first, two thousand eight through December thir-5 6 ty-first, two thousand eight; 7 (viii) one hundred twenty-four million seven hundred thousand dollars 8 for the period January first, two thousand nine through December thir-9 ty-first, two thousand nine; (ix) one hundred twenty-four million seven hundred thousand dollars 10 11 for the period January first, two thousand ten through December thirty-12 first, two thousand ten; 13 (x) thirty-one million one hundred seventy-five thousand dollars for 14 the period January first, two thousand eleven through March thirty-15 first, two thousand eleven; and 16 (xi) one hundred twenty-four million seven hundred thousand dollars 17 each state fiscal year for the period April first, two thousand eleven through March thirty-first, two thousand fourteen. 18 19 Funds shall be deposited by the commissioner, within amounts (mm) 20 appropriated, and the state comptroller is hereby authorized and 21 directed to receive for deposit to the credit of the state special revenue funds - other, HCRA transfer fund, medical assistance account, 22 or any successor fund or account, for purposes of funding specified 23 24 percentages of the state share of services and expenses related to the 25 family health plus program in accordance with the following schedule: 26 (i) (A) for the period January first, two thousand three through 27 December thirty-first, two thousand four, one hundred percent of the 28 state share; 29 (B) for the period January first, two thousand five through December 30 thirty-first, two thousand five, seventy-five percent of the state 31 share; and[,] 32 for periods beginning on and after January first, two thousand (C) 33 six, fifty percent of the state share. 34 (ii) Funding for the family health plus program will include up to five million dollars annually for the period January first, two thousand 35 36 three through December thirty-first, two thousand six, up to five 37 million dollars for the period January first, two thousand seven through 38 December thirty-first, two thousand seven, up to seven million two 39 hundred thousand dollars for the period January first, two thousand 40 eight through December thirty-first, two thousand eight, up to seven 41 million two hundred thousand dollars for the period January first, two 42 thousand nine through December thirty-first, two thousand nine, up to 43 seven million two hundred thousand dollars for the period January first, 44 two thousand ten through December thirty-first, two thousand ten, up to one million eight hundred thousand dollars for the period January first, 45 46 two thousand eleven through March thirty-first, two thousand eleven, up 47 six million forty-nine thousand dollars for the period April first, to two thousand eleven through March thirty-first, two thousand twelve, up 48 49 to six million two hundred eighty-nine thousand dollars for the period 50 April first, two thousand twelve through March thirty-first, two thou-51 sand thirteen, and up to six million four hundred sixty-one thousand 52 dollars for the period April first, two thousand thirteen through March 53 thirty-first, two thousand fourteen, for administration and marketing 54 costs associated with such program established pursuant to clauses (A) 55 and (B) of subparagraph (v) of paragraph (a) of subdivision two of section three hundred sixty-nine-ee of the social services law from the 56



1 tobacco control and insurance initiatives pool established for the 2 following periods in the following amounts: 3 (A) one hundred ninety million six hundred thousand dollars for the period January first, two thousand three through December thirty-first, 4 5 two thousand three; (B) three hundred seventy-four million dollars for the period January 6 7 first, two thousand four through December thirty-first, two thousand 8 four; five hundred thirty-eight million four hundred thousand dollars 9 (C) for the period January first, two thousand five through December thir-10 11 ty-first, two thousand five; 12 (D) three hundred eighteen million seven hundred seventy-five thousand 13 dollars for the period January first, two thousand six through December 14 thirty-first, two thousand six; 15 (E) four hundred eighty-two million eight hundred thousand dollars for 16 the period January first, two thousand seven through December thirty-17 first, two thousand seven; 18 (F) five hundred seventy million twenty-five thousand dollars for the 19 period January first, two thousand eight through December thirty-first, 20 two thousand eight; 21 (G) six hundred ten million seven hundred twenty-five thousand dollars 22 for the period January first, two thousand nine through December thir-23 ty-first, two thousand nine; 24 (H) six hundred twenty-seven million two hundred seventy-five thousand 25 dollars for the period January first, two thousand ten through December 26 thirty-first, two thousand ten; 27 (I) one hundred fifty-seven million eight hundred seventy-five thou-28 sand dollars for the period January first, two thousand eleven through 29 March thirty-first, two thousand eleven; (J) six hundred twenty-eight million four hundred thousand dollars for 30 31 the period April first, two thousand eleven through March thirty-first, 32 two thousand twelve; 33 (K) six hundred fifty million four hundred thousand dollars for the period April first, two thousand twelve through March thirty-first, two 34 35 thousand thirteen; 36 (L) six hundred fifty million four hundred thousand dollars for the period April first, two thousand thirteen through March thirty-first, 37 38 two thousand fourteen; and 39 (M) up to three hundred ten million five hundred ninety-five thousand 40 dollars for the period April first, two thousand fourteen through March 41 thirty-first, two thousand fifteen. 42 (nn) Funds shall be deposited by the commissioner, within amounts 43 appropriated, and the state comptroller is hereby authorized and 44 directed to receive for deposit to the credit of the state special 45 revenue fund - other, HCRA transfer fund, health care services account, 46 or any successor fund or account, for purposes related to adult home 47 initiatives for medicaid eligible residents of residential facilities licensed pursuant to section four hundred sixty-b of the social services 48 law from the tobacco control and insurance initiatives pool established 49 for the following periods in the following amounts: 50 51 (i) up to four million dollars for the period January first, two thou-52 sand three through December thirty-first, two thousand three; (ii) up to six million dollars for the period January first, two thou-53 sand four through December thirty-first, two thousand four; 54 55 (iii) up to eight million dollars for the period January first, two thousand five through December thirty-first, two 56 thousand five,



1 provided, however, that up to five million two hundred fifty thousand dollars of such funds shall be received by the comptroller and deposited 2 to the credit of the special revenue fund - other / aid to localities, 3 HCRA transfer fund - 061, enhanced community services account - 05, or 4 5 any successor fund or account, for the purposes set forth in this para-6 graph; 7 up to eight million dollars for the period January first, two (iv) 8 thousand six through December thirty-first, two thousand six, provided, however, that up to five million two hundred fifty thousand dollars of 9 such funds shall be received by the comptroller and deposited to the 10 credit of the special revenue fund - other / aid to localities, HCRA 11 12 transfer fund - 061, enhanced community services account - 05, or any 13 successor fund or account, for the purposes set forth in this paragraph; 14 (v) up to eight million dollars for the period January first, two 15 thousand seven through December thirty-first, two thousand seven, 16 provided, however, that up to five million two hundred fifty thousand 17 dollars of such funds shall be received by the comptroller and deposited to the credit of the special revenue fund - other / aid to localities, 18 19 HCRA transfer fund - 061, enhanced community services account - 05, or 20 any successor fund or account, for the purposes set forth in this para-21 graph; 22 (vi) up to two million seven hundred fifty thousand dollars for the 23 period January first, two thousand eight through December thirty-first, 24 two thousand eight; 25 (vii) up to two million seven hundred fifty thousand dollars for the 26 period January first, two thousand nine through December thirty-first, 27 two thousand nine; 28 (viii) up to two million seven hundred fifty thousand dollars for the 29 period January first, two thousand ten through December thirty-first, 30 two thousand ten; and 31 (ix) up to six hundred eighty-eight thousand dollars for the period 32 January first, two thousand eleven through March thirty-first, two thou-33 sand eleven. (oo) Funds shall be reserved and accumulated from year to year and 34 shall be available, including income from invested funds, for purposes 35 36 of grants to non-public general hospitals pursuant to paragraph (e) of 37 subdivision twenty-five of section twenty-eight hundred seven-c of this 38 article from the tobacco control and insurance initiatives pool estab-39 lished for the following periods in the following amounts: 40 (i) up to five million dollars on an annualized basis for the period 41 January first, two thousand four through December thirty-first, two 42 thousand four; 43 (ii) up to five million dollars for the period January first, two 44 thousand five through December thirty-first, two thousand five; 45 (iii) up to five million dollars for the period January first, two 46 thousand six through December thirty-first, two thousand six; 47 up to five million dollars for the period January first, two (iv) thousand seven through December thirty-first, two thousand seven; 48 49 (v) up to five million dollars for the period January first, two thousand eight through December thirty-first, two thousand eight; 50 51 (vi) up to five million dollars for the period January first, two 52 thousand nine through December thirty-first, two thousand nine; 53 (vii) up to five million dollars for the period January first, two 54 thousand ten through December thirty-first, two thousand ten; and



1 (viii) up to one million two hundred fifty thousand dollars for the 2 period January first, two thousand eleven through March thirty-first, 3 two thousand eleven. (pp) Funds shall be reserved and accumulated from year to year and 4 shall be available, including income from invested funds, for the 5 purpose of supporting the provision of tax credits for long term care 6 7 insurance pursuant to subdivision one of section one hundred ninety of 8 the tax law, paragraph (a) of subdivision twenty-five-a of section two hundred ten of such law, subsection (aa) of section six hundred six of 9 such law, paragraph one of subsection (k) of section fourteen hundred 10 11 fifty-six of such law and paragraph one of subdivision (m) of section 12 fifteen hundred eleven of such law, in the following amounts: 13 (i) ten million dollars for the period January first, two thousand 14 four through December thirty-first, two thousand four; 15 (ii) ten million dollars for the period January first, two thousand 16 five through December thirty-first, two thousand five; 17 (iii) ten million dollars for the period January first, two thousand 18 six through December thirty-first, two thousand six; and 19 (iv) five million dollars for the period January first, two thousand 20 seven through June thirtieth, two thousand seven. 21 Funds shall be reserved and accumulated from year to year and (qq) 22 shall be available, including income from invested funds, for the 23 purpose of supporting the long-term care insurance education and 24 outreach program established pursuant to section two hundred seventeen-a 25 of the elder law for the following periods in the following amounts: (i) up to five million dollars for the period January first, two thou-26 27 sand four through December thirty-first, two thousand four; of such 28 funds one million nine hundred fifty thousand dollars shall be made 29 available to the department for the purpose of developing, implementing and administering the long-term care insurance education and outreach 30 program and three million fifty thousand dollars shall be deposited by 31 the commissioner, within amounts appropriated, and the comptroller is 32 33 hereby authorized and directed to receive for deposit to the credit of the special revenue funds - other, HCRA transfer fund, long term care 34 insurance resource center account of the state office for the aging or 35 36 any future account designated for the purpose of implementing the long 37 term care insurance education and outreach program and providing the long term care insurance resource centers with the necessary resources 38 39 to carry out their operations; 40 (ii) up to five million dollars for the period January first, two 41 thousand five through December thirty-first, two thousand five; of such 42 funds one million nine hundred fifty thousand dollars shall be made 43 available to the department for the purpose of developing, implementing 44 and administering the long-term care insurance education and outreach 45 program and three million fifty thousand dollars shall be deposited by 46 the commissioner, within amounts appropriated, and the comptroller is 47 hereby authorized and directed to receive for deposit to the credit of the special revenue funds - other, HCRA transfer fund, long term care 48 49 insurance resource center account of the state office for the aging or any future account designated for the purpose of implementing the long 50 51 term care insurance education and outreach program and providing the 52 long term care insurance resource centers with the necessary resources 53 to carry out their operations;

54 (iii) up to five million dollars for the period January first, two 55 thousand six through December thirty-first, two thousand six; of such 56 funds one million nine hundred fifty thousand dollars shall be made



1 available to the department for the purpose of developing, implementing 2 and administering the long-term care insurance education and outreach 3 program and three million fifty thousand dollars shall be made available 4 to the office for the aging for the purpose of providing the long term 5 care insurance resource centers with the necessary resources to carry 6 out their operations;

(iv) up to five million dollars for the period January first, two 7 8 thousand seven through December thirty-first, two thousand seven; of such funds one million nine hundred fifty thousand dollars shall be made 9 available to the department for the purpose of developing, implementing 10 and administering the long-term care insurance education and outreach 11 12 program and three million fifty thousand dollars shall be made available 13 to the office for the aging for the purpose of providing the long term 14 care insurance resource centers with the necessary resources to carry 15 out their operations;

16 (v) up to five million dollars for the period January first, two thou-17 sand eight through December thirty-first, two thousand eight; of such funds one million nine hundred fifty thousand dollars shall be made 18 19 available to the department for the purpose of developing, implementing 20 and administering the long term care insurance education and outreach 21 program and three million fifty thousand dollars shall be made available 22 to the office for the aging for the purpose of providing the long term 23 care insurance resource centers with the necessary resources to carry 24 out their operations;

25 (vi) up to five million dollars for the period January first, two thousand nine through December thirty-first, two thousand nine; of such 26 27 funds one million nine hundred fifty thousand dollars shall be made 28 available to the department for the purpose of developing, implementing 29 and administering the long-term care insurance education and outreach 30 program and three million fifty thousand dollars shall be made available to the office for the aging for the purpose of providing the long-term 31 32 care insurance resource centers with the necessary resources to carry 33 out their operations;

(vii) up to four hundred eighty-eight thousand dollars for the period January first, two thousand ten through March thirty-first, two thousand ten; of such funds four hundred eighty-eight thousand dollars shall be made available to the department for the purpose of developing, implementing and administering the long-term care insurance education and outreach program.

(rr) Funds shall be reserved and accumulated from the tobacco control and insurance initiatives pool and shall be available, including income from invested funds, for the purpose of supporting expenses related to implementation of the provisions of title III of article twenty-nine-D of this chapter, for the following periods and in the following amounts: (i) up to ten million dollars for the period January first, two thousand six through December thirty-first, two thousand six;

47 (ii) up to ten million dollars for the period January first, two thou-48 sand seven through December thirty-first, two thousand seven;

49 (iii) up to ten million dollars for the period January first, two 50 thousand eight through December thirty-first, two thousand eight;

51 (iv) up to ten million dollars for the period January first, two thou-52 sand nine through December thirty-first, two thousand nine;

53 (v) up to ten million dollars for the period January first, two thou-54 sand ten through December thirty-first, two thousand ten; and



1 (vi) up to two million five hundred thousand dollars for the period 2 January first, two thousand eleven through March thirty-first, two thou-3 sand eleven.

(ss) Funds shall be reserved and accumulated from the tobacco control 4 5 and insurance initiatives pool and used for a health care stabilization program established by the commissioner for the purposes of stabilizing 6 7 critical health care providers and health care programs whose ability to 8 continue to provide appropriate services are threatened by financial or other challenges, in the amount of up to twenty-eight million dollars 9 for the period July first, two thousand four through June thirtieth, two 10 11 thousand five. Notwithstanding the provisions of section one hundred 12 twelve of the state finance law or any other inconsistent provision of 13 the state finance law or any other law, funds available for distribution 14 pursuant to this paragraph may be allocated and distributed by the 15 commissioner, or the state comptroller as applicable without a compet-16 itive bid or request for proposal process. Considerations relied upon by 17 the commissioner in determining the allocation and distribution of these 18 funds shall include, but not be limited to, the following: (i) the 19 importance of the provider or program in meeting critical health care 20 needs in the community in which it operates; (ii) the provider or 21 program provision of care to under-served populations; (iii) the quality 22 of the care or services the provider or program delivers; (iv) the abil-23 ity of the provider or program to continue to deliver an appropriate 24 level of care or services if additional funding is made available; (v) 25 the ability of the provider or program to access, in a timely manner, alternative sources of funding, including other sources of government 26 27 funding; (vi) the ability of other providers or programs in the communi-28 ty to meet the community health care needs; (vii) whether the provider or program has an appropriate plan to improve its financial condition; 29 and (viii) whether additional funding would permit the provider or 30 program to consolidate, relocate, or close programs or services where 31 such actions would result in greater stability and efficiency in the 32 33 delivery of needed health care services or programs.

(tt) Funds shall be reserved and accumulated from year to year and shall be available, including income from invested funds, for purposes of providing grants for two long term care demonstration projects designed to test new models for the delivery of long term care services established pursuant to section twenty-eight hundred seven-x of this chapter, for the following periods and in the following amounts:

40 (i) up to five hundred thousand dollars for the period January first,41 two thousand four through December thirty-first, two thousand four;

42 (ii) up to five hundred thousand dollars for the period January first,43 two thousand five through December thirty-first, two thousand five;

(iii) up to five hundred thousand dollars for the period January
first, two thousand six through December thirty-first, two thousand six;
(iv) up to one million dollars for the period January first, two thousand seven through December thirty-first, two thousand seven; and

48 (v) up to two hundred fifty thousand dollars for the period January 49 first, two thousand eight through March thirty-first, two thousand 50 eight.

51 (uu) Funds shall be reserved and accumulated from year to year and 52 shall be available, including income from invested funds, for the 53 purpose of supporting disease management and telemedicine demonstration 54 programs authorized pursuant to section twenty-one hundred eleven of 55 this chapter for the following periods in the following amounts:



1 (i) five million dollars for the period January first, two thousand 2 four through December thirty-first, two thousand four, of which three million dollars shall be available for disease management demonstration 3 programs and two million dollars shall be available for telemedicine 4 5 demonstration programs;

6 (ii) five million dollars for the period January first, two thousand 7 five through December thirty-first, two thousand five, of which three 8 million dollars shall be available for disease management demonstration programs and two million dollars shall be available for telemedicine 9 10 demonstration programs;

(iii) nine million five hundred thousand dollars for the period Janu-11 12 ary first, two thousand six through December thirty-first, two thousand 13 six, of which seven million five hundred thousand dollars shall be 14 available for disease management demonstration programs and two million 15 dollars shall be available for telemedicine demonstration programs;

16 (iv) nine million five hundred thousand dollars for the period January 17 first, two thousand seven through December thirty-first, two thousand seven, of which seven million five hundred thousand dollars shall be 18 19 available for disease management demonstration programs and one million dollars shall be available for telemedicine demonstration programs; 20

21 (v) nine million five hundred thousand dollars for the period January 22 first, two thousand eight through December thirty-first, two thousand 23 eight, of which seven million five hundred thousand dollars shall be 24 available for disease management demonstration programs and two million dollars shall be available for telemedicine demonstration programs; 25

(vi) seven million eight hundred thirty-three thousand three hundred 26 27 thirty-three dollars for the period January first, two thousand nine 28 through December thirty-first, two thousand nine, of which seven million 29 five hundred thousand dollars shall be available for disease management demonstration programs and three hundred thirty-three thousand three 30 hundred thirty-three dollars shall be available for telemedicine demon-31 32 stration programs for the period January first, two thousand nine 33 through March first, two thousand nine;

34 (vii) one million eight hundred seventy-five thousand dollars for the 35 period January first, two thousand ten through March thirty-first, two 36 thousand ten shall be available for disease management demonstration 37 programs.

38 (ww) Funds shall be deposited by the commissioner, within amounts 39 appropriated, and the state comptroller is hereby authorized and 40 directed to receive for the deposit to the credit of the state special 41 revenue funds - other, HCRA transfer fund, medical assistance account, 42 or any successor fund or account, for purposes of funding the state 43 share of the general hospital rates increases for recruitment and 44 retention of health care workers pursuant to paragraph (e) of subdivi-45 sion thirty of section twenty-eight hundred seven-c of this article from 46 the tobacco control and insurance initiatives pool established for the 47 following periods in the following amounts:

(i) sixty million five hundred thousand dollars for the period January 48 49 first, two thousand five through December thirty-first, two thousand 50 five; and

51 (ii) sixty million five hundred thousand dollars for the period Janu-52 ary first, two thousand six through December thirty-first, two thousand 53 six.

(xx) Funds shall be deposited by the commissioner, within amounts 54 appropriated, and the state comptroller is hereby authorized and 55 directed to receive for the deposit to the credit of the state special 56



1 revenue funds - other, HCRA transfer fund, medical assistance account, 2 or any successor fund or account, for purposes of funding the state share of the general hospital rates increases for rural hospitals pursu-3 ant to subdivision thirty-two of section twenty-eight hundred seven-c of 4 this article from the tobacco control and insurance initiatives pool 5 established for the following periods in the following amounts: 6 (i) three million five hundred thousand dollars for the period January 7 8 first, two thousand five through December thirty-first, two thousand 9 five; (ii) three million five hundred thousand dollars for the period Janu-10 11 ary first, two thousand six through December thirty-first, two thousand 12 six; 13 (iii) three million five hundred thousand dollars for the period Janu-14 ary first, two thousand seven through December thirty-first, two thou-15 sand seven; 16 (iv) three million five hundred thousand dollars for the period Janu-17 ary first, two thousand eight through December thirty-first, two thou-18 sand eight; and 19 (v) three million two hundred eight thousand dollars for the period 20 January first, two thousand nine through November thirtieth, two thou-21 sand nine. 22 (yy) Funds shall be reserved and accumulated from year to year and 23 shall be available, within amounts appropriated and notwithstanding section one hundred twelve of the state finance law and any other 24 contrary provision of law, for the purpose of supporting grants not to 25 exceed five million dollars to be made by the commissioner without a 26 27 competitive bid or request for proposal process, in support of the delivery of critically needed health care services, to health care 28 providers located in the counties of Erie and Niagara which executed a 29 memorandum of closing and conducted a merger closing in escrow on Novem-30 ber twenty-fourth, nineteen hundred ninety-seven and which entered into 31 a settlement dated December thirtieth, two thousand four for a loss on 32 33 disposal of assets under the provisions of title XVIII of the federal social security act applicable to mergers occurring prior to December 34 first, nineteen hundred ninety-seven. 35 (zz) Funds shall be reserved and accumulated from year to year and 36 shall be available, within amounts appropriated, for the purpose of 37 38 supporting expenditures authorized pursuant to section twenty-eight hundred eighteen of this article from the tobacco control and insurance 39 40 initiatives pool established for the following periods in the following 41 amounts: 42 (i) six million five hundred thousand dollars for the period January 43 first, two thousand five through December thirty-first, two thousand 44 five; 45 one hundred eight million three hundred thousand dollars for the (ii) 46 period January first, two thousand six through December thirty-first, 47 two thousand six, provided, however, that within amounts appropriated in the two thousand six through two thousand seven state fiscal year, a 48 portion of such funds may be transferred to the Roswell Park Cancer 49 50 Institute Corporation to fund capital costs; 51 one hundred seventy-one million dollars for the period January (iii) 52 first, two thousand seven through December thirty-first, two thousand seven, provided, however, that within amounts appropriated in the two 53 54 thousand six through two thousand seven state fiscal year, a portion of such funds may be transferred to the Roswell Park Cancer Institute 55 56 Corporation to fund capital costs;



1 (iv) one hundred seventy-one million five hundred thousand dollars for 2 the period January first, two thousand eight through December thirty-3 first, two thousand eight; (v) one hundred twenty-eight million seven hundred fifty thousand 4 5 dollars for the period January first, two thousand nine through December 6 thirty-first, two thousand nine; 7 (vi) one hundred thirty-one million three hundred seventy-five thou-8 sand dollars for the period January first, two thousand ten through 9 December thirty-first, two thousand ten; (vii) thirty-four million two hundred fifty thousand dollars for the 10 11 period January first, two thousand eleven through March thirty-first, 12 two thousand eleven; 13 (viii) four hundred thirty-three million three hundred sixty-six thou-14 sand dollars for the period April first, two thousand eleven through 15 March thirty-first, two thousand twelve; 16 (ix) one hundred fifty million eight hundred six thousand dollars for 17 the period April first, two thousand twelve through March thirty-first, 18 two thousand thirteen; 19 (x) seventy-eight million seventy-one thousand dollars for the period 20 April first, two thousand thirteen through March thirty-first, two thou-21 sand fourteen. 22 (aaa) Funds shall be reserved and accumulated from year to year and 23 shall be available, including income from invested funds, for services 24 and expenses related to school based health centers, in an amount up to 25 three million five hundred thousand dollars for the period April first, two thousand six through March thirty-first, two thousand seven, up to 26 27 three million five hundred thousand dollars for the period April first, 28 two thousand seven through March thirty-first, two thousand eight, up to 29 three million five hundred thousand dollars for the period April first, two thousand eight through March thirty-first, two thousand nine, up to 30 three million five hundred thousand dollars for the period April first, 31 thousand nine through March thirty-first, two thousand ten, up to 32 two 33 three million five hundred thousand dollars for the period April first, thousand ten through March thirty-first, two thousand eleven, up to 34 two two million eight hundred thousand dollars each state fiscal year for 35 36 the period April first, two thousand eleven through March thirty-first, 37 two thousand fourteen, [and] up to two million six hundred forty-four 38 thousand dollars each state fiscal year for the period April first, two 39 thousand fourteen through March thirty-first, two thousand seventeen, 40 and up to two million six hundred forty-four thousand dollars each state 41 fiscal year for the period April first, two thousand seventeen through 42 March thirty-first, two thousand twenty. The total amount of funds provided herein shall be distributed as grants based on the ratio of 43 44 each provider's total enrollment for all sites to the total enrollment 45 of all providers. This formula shall be applied to the total amount 46 provided herein. 47 (bbb) Funds shall be reserved and accumulated from year to year and shall be available, including income from invested funds, for purposes 48 49 of awarding grants to operators of adult homes, enriched housing 50 programs and residences through the enhancing abilities and life experi-51 ence (EnAbLe) program to provide for the installation, operation and 52 maintenance of air conditioning in resident rooms, consistent with this 53 paragraph, in an amount up to two million dollars for the period April 54 first, two thousand six through March thirty-first, two thousand seven, 55 up to three million eight hundred thousand dollars for the period April first, two thousand seven through March thirty-first, two thousand 56



1 eight, up to three million eight hundred thousand dollars for the period 2 April first, two thousand eight through March thirty-first, two thousand 3 nine, up to three million eight hundred thousand dollars for the period April first, two thousand nine through March thirty-first, two thousand 4 ten, and up to three million eight hundred thousand dollars for the 5 period April first, two thousand ten through March thirty-first, two 6 7 thousand eleven. Residents shall not be charged utility cost for the use 8 of air conditioners supplied under the EnAbLe program. All such air conditioners must be operated in occupied resident rooms consistent with 9 10 requirements applicable to common areas. 11 (ccc) Funds shall be deposited by the commissioner, within amounts

12 appropriated, and the state comptroller is hereby authorized and 13 directed to receive for the deposit to the credit of the state special 14 revenue funds - other, HCRA transfer fund, medical assistance account, 15 or any successor fund or account, for purposes of funding the state 16 share of increases in the rates for certified home health agencies, long 17 term home health care programs, AIDS home care programs, hospice programs and managed long term care plans and approved managed long term 18 19 care operating demonstrations as defined in section forty-four hundred three-f of this chapter for recruitment and retention of health care 20 21 workers pursuant to subdivisions nine and ten of section thirty-six 22 hundred fourteen of this chapter from the tobacco control and insurance initiatives pool established for the following periods in the following 23 24 amounts:

(i) twenty-five million dollars for the period June first, two thou-sand six through December thirty-first, two thousand six;

(ii) fifty million dollars for the period January first, two thousandseven through December thirty-first, two thousand seven;

(iii) fifty million dollars for the period January first, two thousand eight through December thirty-first, two thousand eight;

31 (iv) fifty million dollars for the period January first, two thousand 32 nine through December thirty-first, two thousand nine;

(v) fifty million dollars for the period January first, two thousandten through December thirty-first, two thousand ten;

(vi) twelve million five hundred thousand dollars for the period January first, two thousand eleven through March thirty-first, two thousand eleven;

(vii) up to fifty million dollars each state fiscal year for the period April first, two thousand eleven through March thirty-first, two thousand fourteen; [and]

41 (viii) up to fifty million dollars each state fiscal year for the 42 period April first, two thousand fourteen through March thirty-first, 43 two thousand seventeen[.]; and

(ix) up to fifty million dollars each state fiscal year for the period
April first, two thousand seventeen through March thirty-first, two
thousand twenty.

47 (ddd) Funds shall be deposited by the commissioner, within amounts appropriated, and the state comptroller is hereby authorized and 48 49 directed to receive for the deposit to the credit of the state special revenue funds - other, HCRA transfer fund, medical assistance account, 50 51 or any successor fund or account, for purposes of funding the state 52 share of increases in the medical assistance rates for providers for 53 purposes of enhancing the provision, quality and/or efficiency of home care services pursuant to subdivision eleven of section thirty-six 54 55 hundred fourteen of this chapter from the tobacco control and insurance initiatives pool established for the following period in the amount of 56



1 eight million dollars for the period April first, two thousand six 2 through December thirty-first, two thousand six.

(eee) Funds shall be reserved and accumulated from year to year and 3 shall be available, including income from invested funds, to the Center 4 for Functional Genomics at the State University of New York at Albany, 5 for the purposes of the Adirondack network for cancer education and 6 research in rural communities grant program to improve access to health 7 8 care and shall be made available from the tobacco control and insurance initiatives pool established for the following period in the amount of 9 up to five million dollars for the period January first, 10 two thousand 11 six through December thirty-first, two thousand six.

12 (fff) Funds shall be made available to the empire state stem cell fund 13 established by section ninety-nine-p of the state finance law within 14 amounts appropriated up to fifty million dollars annually and shall not 15 exceed five hundred million dollars in total.

16 (ggg) Funds shall be deposited by the commissioner, within amounts 17 appropriated, and the state comptroller is hereby authorized and directed to receive for deposit to the credit of the state special 18 19 revenue fund - other, HCRA transfer fund, medical assistance account, or any successor fund or account, for the purpose of supporting the state 20 21 share of Medicaid expenditures for hospital translation services as authorized pursuant to paragraph (k) of subdivision one of section twen-22 23 ty-eight hundred seven-c of this article from the tobacco control and 24 initiatives pool established for the following periods in the following 25 amounts:

26 (i) sixteen million dollars for the period July first, two thousand 27 eight through December thirty-first, two thousand eight; and

28 (ii) fourteen million seven hundred thousand dollars for the period 29 January first, two thousand nine through November thirtieth, two thou-30 sand nine.

31 (hhh) Funds shall be deposited by the commissioner, within amounts appropriated, and the state comptroller is hereby authorized and 32 33 directed to receive for deposit to the credit of the state special revenue fund - other, HCRA transfer fund, medical assistance account, or 34 any successor fund or account, for the purpose of supporting the state 35 share of Medicaid expenditures for adjustments to inpatient rates of 36 37 payment for general hospitals located in the counties of Nassau and 38 Suffolk as authorized pursuant to paragraph (1) of subdivision one of 39 section twenty-eight hundred seven-c of this article from the tobacco 40 control and initiatives pool established for the following periods in 41 the following amounts:

42 (i) two million five hundred thousand dollars for the period April 43 first, two thousand eight through December thirty-first, two thousand 44 eight; and

(ii) two million two hundred ninety-two thousand dollars for the peride od January first, two thousand nine through November thirtieth, two thousand nine.

(iii) Funds shall be reserved and set aside and accumulated from year 48 to year and shall be made available, including income from investment 49 funds, for the purpose of supporting the New York state medical indem-50 nity fund as authorized pursuant to title four of article twenty-nine-D 51 52 of this chapter, for the following periods and in the following amounts, provided, however, that the commissioner is authorized to seek waiver 53 authority from the federal centers for medicare and Medicaid for the 54 55 purpose of securing Medicaid federal financial participation for such



1 program, in which case the funding authorized pursuant to this paragraph 2 shall be utilized as the non-federal share for such payments:

3 Thirty million dollars for the period April first, two thousand eleven 4 through March thirty-first, two thousand twelve.

(a) For periods prior to January first, two thousand five, the 5 2. commissioner is authorized to contract with the article forty-three 6 insurance law plans, or such other contractors as the commissioner shall 7 8 designate, to receive and distribute funds from the tobacco control and insurance initiatives pool established pursuant to this section. In the 9 event contracts with the article forty-three insurance law plans or 10 11 other commissioner's designees are effectuated, the commissioner shall 12 conduct annual audits of the receipt and distribution of such funds. The 13 reasonable costs and expenses of an administrator as approved by the 14 commissioner, not to exceed for personnel services on an annual basis 15 five hundred thousand dollars, for collection and distribution of funds 16 pursuant to this section shall be paid from such funds.

17 (b) Notwithstanding any inconsistent provision of section one hundred 18 twelve or one hundred sixty-three of the state finance law or any other 19 law, at the discretion of the commissioner without a competitive bid or request for proposal process, contracts in effect for administration of 20 21 pools established pursuant to sections twenty-eight hundred seven-k, 22 twenty-eight hundred seven-1 and twenty-eight hundred seven-m of this article for the period January first, nineteen hundred ninety-nine 23 through December thirty-first, nineteen hundred ninety-nine may be 24 25 extended to provide for administration pursuant to this section and may be amended as may be necessary. 26

27 § 23. This act shall take effect immediately; provided, however, that: 28 the amendments made to sections 2807-s and 2807-j of the public (a) 29 health law made by sections three, four and five of this act shall not affect the expiration of such sections and shall expire therewith; and 30 31 (b) the amendments to subdivision 6 of section 2807-t of the public health law made by section eight of this act shall not affect the expi-32 33 ration of such section and shall be deemed to expire therewith; and the amendments to paragraph (i-1) of subdivision 1 of section 34 (c) 35 2807-v of the public health law made by section twenty-two of this act hall not affect the repeal of such paragraph and shall be deemed 36 37 repealed therewith.

38

PART I

39 Section 1. Section 11 of chapter 884 of the laws of 1990, amending the 40 public health law relating to authorizing bad debt and charity care 41 allowances for certified home health agencies, as amended by section 1 42 of part D of chapter 57 of the laws of 2015, is amended to read as 43 follows:

44 § 11. This act shall take effect immediately and:

45 (a) sections one and three shall expire on December 31, 1996,

46 (b) sections four through ten shall expire on June 30, [2017] <u>2019</u>, 47 and

(c) provided that the amendment to section 2807-b of the public health law by section two of this act shall not affect the expiration of such section 2807-b as otherwise provided by law and shall be deemed to expire therewith.

52 § 2. Subdivision 4-a of section 71 of part C of chapter 60 of the laws 53 of 2014 amending the social services law relating to eliminating pres-54 criber prevails for brand name drugs with generic equivalent, as amended



1 by section 6 of part D of chapter 59 of the laws of 2016, is amended to 2 read as follows: section twenty-two of this act shall take effect April 1, 2014, 3 4-a. and shall be deemed expired January 1, [2018] 2019; 4 § 3. Subparagraph (vi) of paragraph (b) of subdivision 2 of section 5 6 2807-d of the public health law, as amended by section 3 of part D of 7 chapter 57 of the laws of 2015, is amended to read as follows: 8 (vi) Notwithstanding any contrary provision of this paragraph or any other provision of law or regulation to the contrary, for residential 9 health care facilities the assessment shall be six percent of each resi-10 11 dential health care facility's gross receipts received from all patient 12 care services and other operating income on a cash basis for the period 13 April first, two thousand two through March thirty-first, two thousand 14 three for hospital or health-related services, including adult day 15 services; provided, however, that residential health care facilities' 16 gross receipts attributable to payments received pursuant to title XVIII 17 of the federal social security act (medicare) shall be excluded from the assessment; provided, however, that for all such gross receipts received 18 19 on or after April first, two thousand three through March thirty-first, 20 two thousand five, such assessment shall be five percent, and further 21 provided that for all such gross receipts received on or after April 22 first, two thousand five through March thirty-first, two thousand nine, 23 and on or after April first, two thousand nine through March thirty-24 first, two thousand eleven such assessment shall be six percent, and 25 further provided that for all such gross receipts received on or after 26 April first, two thousand eleven through March thirty-first, two thou-27 sand thirteen such assessment shall be six percent, and further provided 28 that for all such gross receipts received on or after April first, two 29 thousand thirteen through March thirty-first, two thousand fifteen such 30 assessment shall be six percent, and further provided that for all such gross receipts received on or after April first, two thousand fifteen 31 through March thirty-first, two thousand seventeen such assessment shall 32 33 be six percent, and further provided that for all such gross receipts received on or after April first, two thousand seventeen through March 34 thirty-first, two thousand nineteen such assessment shall be six 35 36 percent. 37 § 4. Subdivision 1 of section 194 of chapter 474 of the laws of 1996, 38 amending the education law and other laws relating to rates for residential health care facilities, as amended by section 5 of part D of chap-39 40 ter 57 of the laws of 2015, is amended to read as follows:

41 1. Notwithstanding any inconsistent provision of law or regulation, 42 the trend factors used to project reimbursable operating costs to the 43 rate period for purposes of determining rates of payment pursuant to 44 article 28 of the public health law for residential health care facili-45 ties for reimbursement of inpatient services provided to patients eligi-46 ble for payments made by state governmental agencies on and after April 47 1, 1996 through March 31, 1999 and for payments made on and after July 1, 1999 through March 31, 2000 and on and after April 1, 2000 through 48 49 March 31, 2003 and on and after April 1, 2003 through March 31, 2007 and on and after April 1, 2007 through March 31, 2009 and on and after April 50 51 1, 2009 through March 31, 2011 and on and after April 1, 2011 through 52 March 31, 2013 and on and after April 1, 2013 through March 31, 2015, and on and after April 1, 2015 through March 31, 2017, and on and after 53 April 1, 2017 through March 31, 2019 shall reflect no trend factor 54 projections or adjustments for the period April 1, 1996, through March 55 56 31, 1997.



\$ 5. Subdivision 1 of section 89-a of part C of chapter 58 of the laws of 2007, amending the social services law and other laws relating to enacting the major components of legislation necessary to implement the health and mental hygiene budget for the 2007-2008 state fiscal year, as amended by section 6 of part D of chapter 57 of the laws of 2015, is amended to read as follows:

1. Notwithstanding paragraph (c) of subdivision 10 of section 2807-c 7 8 of the public health law and section 21 of chapter 1 of the laws of 1999, as amended, and any other inconsistent provision of law or regu-9 lation to the contrary, in determining rates of payments by state 10 11 governmental agencies effective for services provided beginning April 1, 12 2006, through March 31, 2009, and on and after April 1, 2009 through 13 March 31, 2011, and on and after April 1, 2011 through March 31, 2013, 14 and on and after April 1, 2013 through March 31, 2015, and on and after 15 April 1, 2015 through March 31, 2017, and on and after April 1, 2017 16 through March 31, 2019 for inpatient and outpatient services provided by 17 general hospitals and for inpatient services and outpatient adult day health care services provided by residential health care facilities 18 19 pursuant to article 28 of the public health law, the commissioner of health shall apply a trend factor projection of two and twenty-five 20 21 hundredths percent attributable to the period January 1, 2006 through 22 December 31, 2006, and on and after January 1, 2007, provided, however, that on reconciliation of such trend factor for the period January 1, 23 24 2006 through December 31, 2006 pursuant to paragraph (c) of subdivision 25 10 of section 2807-c of the public health law, such trend factor shall be the final US Consumer Price Index (CPI) for all urban consumers, as 26 27 published by the US Department of Labor, Bureau of Labor Statistics less 28 twenty-five hundredths of a percentage point.

S 6. Subdivision 5-a of section 246 of chapter 81 of the laws of 1995, amending the public health law and other laws relating to medical reimbursement and welfare reform, as amended by section 11 of part D of chapter 57 of the laws of 2015, is amended to read as follows:

33 5-a. Section sixty-four-a of this act shall be deemed to have been in full force and effect on and after April 1, 1995 through March 31, 1999 34 and on and after July 1, 1999 through March 31, 2000 and on and after 35 1, 2000 through March 31, 2003 and on and after April 1, 2003 36 April through March 31, 2007, and on and after April 1, 2007 through March 31, 37 38 2009, and on and after April 1, 2009 through March 31, 2011, and on and 39 after April 1, 2011 through March 31, 2013, and on and after April 1, 40 2013 through March 31, 2015, and on and after April 1, 2015 through 41 March 31, 2017 and on and after April 1, 2017 through March 31, 2019;

§ 7. Section 64-b of chapter 81 of the laws of 1995, amending the public health law and other laws relating to medical reimbursement and welfare reform, as amended by section 12 of part D of chapter 57 of the laws of 2015, is amended to read as follows:

46 64-b. Notwithstanding any inconsistent provision of law, § the provisions of subdivision 7 of section 3614 of the public health law, as 47 amended, shall remain and be in full force and effect on April 1, 1995 48 through March 31, 1999 and on July 1, 1999 through March 31, 2000 and on 49 and after April 1, 2000 through March 31, 2003 and on and after April 1, 50 2003 through March 31, 2007, and on and after April 1, 2007 through 51 52 March 31, 2009, and on and after April 1, 2009 through March 31, 2011, and on and after April 1, 2011 through March 31, 2013, and on and after 53 April 1, 2013 through March 31, 2015, and on and after April 1, 2015 54 55 through March 31, 2017 and on and after April 1, 2017 through March 31, 56 <u>2019</u>.



1 § 8. Subdivision (a) of section 40 of part B of chapter 109 of the 2 laws of 2010, amending the social services law relating to transporta-3 tion costs, as amended by section 23 of part D of chapter 57 of the laws 4 of 2015, is amended to read as follows:

sections two, three, three-a, three-b, three-c, three-d, three-e 5 (a) and twenty-one of this act shall take effect July 1, 2010; sections 6 7 fifteen, sixteen, seventeen, eighteen and nineteen of this act shall 8 take effect January 1, 2011; and provided further that section twenty of this act shall be deemed repealed [six] eight years after the date the 9 contract entered into pursuant to section 365-h of the social services 10 law, as amended by section twenty of this act, is executed; provided 11 12 that the commissioner of health shall notify the legislative bill draft-13 ing commission upon the execution of the contract entered into pursuant 14 to section 367-h of the social services law in order that the commission 15 may maintain an accurate and timely effective data base of the official 16 text of the laws of the state of New York in furtherance of effectuating 17 the provisions of section 44 of the legislative law and section 70-b of 18 the public officers law;

19 § 9. Section 4-a of part A of chapter 56 of the laws of 2013 amending 20 chapter 59 of the laws of 2011 amending the public health law and other 21 laws relating to general hospital reimbursement for annual rates relat-22 ing to the cap on local Medicaid expenditures, as amended by section 29 23 of part D of chapter 57 of the laws of 2015, is amended to read as 24 follows:

25 § 4-a. Notwithstanding paragraph (c) of subdivision 10 of section 26 2807-c of the public health law, section 21 of chapter 1 of the laws of 27 1999, or any other contrary provision of law, in determining rates of 28 payments by state governmental agencies effective for services provided 29 on and after January 1, [2017] 2019 through March 31, [2017] 2019, for inpatient and outpatient services provided by general hospitals, for 30 inpatient services and adult day health care outpatient services 31 provided by residential health care facilities pursuant to article 28 of 32 33 the public health law, except for residential health care facilities or units of such facilities providing services primarily to children under 34 twenty-one years of age, for home health care services provided pursuant 35 36 to article 36 of the public health law by certified home health agen-37 cies, long term home health care programs and AIDS home care programs, 38 and for personal care services provided pursuant to section 365-a of the 39 social services law, the commissioner of health shall apply no greater 40 than zero trend factors attributable to the [2017] 2019 calendar year in 41 accordance with paragraph (c) of subdivision 10 of section 2807-c of the 42 public health law, provided, however, that such no greater than zero 43 trend factors attributable to such [2017] 2019 calendar year shall also 44 be applied to rates of payment provided on and after January 1, [2017] 45 2019 through March 31, [2017] 2019 for personal care services provided 46 in those local social services districts, including New York city, whose 47 rates of payment for such services are established by such local social services districts pursuant to a rate-setting exemption issued by the 48 49 commissioner of health to such local social services districts in 50 accordance with applicable regulations, and provided further, however, that for rates of payment for assisted living program services provided 51 on and after January 1, [2017] 2019 through March 31, [2017] 2019, 52 such trend factors attributable to the [2017] 2019 calendar year shall be 53 established at no greater than zero percent. 54

55 § 10. Subdivisions 3 and 5 of section 47 of chapter 2 of the laws of 56 1998, amending the public health law and other laws relating to expand-



1 ing the child health insurance plan, as amended by section 61 of part C 2 of chapter 60 of the laws of 2014, are amended to read as follows: 3 3. section six of this act shall take effect January 1, 1999; provided, however, that subparagraph (iii) of paragraph (c) of subdivi-4 5 sion 9 of section 2510 of the public health law, as added by this act, 6 shall expire on July 1, [2017] 2019; 7 5. section twelve of this act shall take effect January 1, 1999; 8 provided, however, paragraphs (g) and (h) of subdivision 2 of section 2511 of the public health law, as added by such section, shall expire on 9 10 July 1, [2017] <u>2019;</u> § 11. Section 4 of chapter 19 of the laws of 1998, amending the social 11 12 services law relating to limiting the method of payment for prescription 13 drugs under the medical assistance program, as amended by section 65 of 14 part C of chapter 60 of the laws of 2014, is amended to read as follows: 15 § 4. This act shall take effect 120 days after it shall have become a 16 law and shall expire and be deemed repealed March 31, [2017] 2020. 17 § 12. Paragraph (e-1) of subdivision 12 of section 2808 of the public 18 health law, as amended by section 66 of part C of chapter 60 of the laws 19 of 2014, is amended to read as follows: 20 (e-1) Notwithstanding any inconsistent provision of law or regulation, 21 the commissioner shall provide, in addition to payments established 22 pursuant to this article prior to application of this section, addi-23 tional payments under the medical assistance program pursuant to title 24 eleven of article five of the social services law for non-state operated 25 public residential health care facilities, including public residential health care facilities located in the county of Nassau, the county of 26 27 Westchester and the county of Erie, but excluding public residential 28 health care facilities operated by a town or city within a county, in 29 aggregate annual amounts of up to one hundred fifty million dollars in additional payments for the state fiscal year beginning April first, two 30 thousand six and for the state fiscal year beginning April first, two 31 thousand seven and for the state fiscal year beginning April first, two 32 33 thousand eight and of up to three hundred million dollars in such aggregate annual additional payments for the state fiscal year beginning 34 April first, two thousand nine, and for the state fiscal year beginning 35 36 April first, two thousand ten and for the state fiscal year beginning 37 April first, two thousand eleven, and for the state fiscal years begin-38 ning April first, two thousand twelve and April first, two thousand 39 thirteen, and of up to five hundred million dollars in such aggregate 40 annual additional payments for the state fiscal years beginning April 41 first, two thousand fourteen, April first, two thousand fifteen and 42 April first, two thousand sixteen and of up to five hundred million 43 dollars in such aggregate annual additional payments for the state 44 fiscal years beginning April first, two thousand seventeen, April first, 45 two thousand eighteen, and April first, two thousand nineteen. The 46 amount allocated to each eligible public residential health care facili-47 ty for this period shall be computed in accordance with the provisions of paragraph (f) of this subdivision, provided, however, that patient 48 49 days shall be utilized for such computation reflecting actual reported 50 data for two thousand three and each representative succeeding year as 51 applicable, and provided further, however, that, in consultation with 52 impacted providers, of the funds allocated for distribution in the state 53 fiscal year beginning April first, two thousand thirteen, up to thirtytwo million dollars may be allocated in accordance with paragraph (f-1) 54 55 of this subdivision.



1 § 13. Section 18 of chapter 904 of the laws of 1984, amending the public health law and the social services law relating to encouraging 2 comprehensive health services, as amended by section 67-c of part C of 3 chapter 60 of the laws of 2014, is amended to read as follows: 4 5 § 18. This act shall take effect immediately, except that sections six, nine, ten and eleven of this act shall take effect on the sixtieth 6 7 day after it shall have become a law, sections two, three, four and nine of this act shall expire and be of no further force or effect on or 8 after March 31, [2017] 2020, section two of this act shall take effect 9 on April 1, 1985 or seventy-five days following the submission of the 10 report required by section one of this act, whichever is later, and 11 12 sections eleven and thirteen of this act shall expire and be of no 13 further force or effect on or after March 31, 1988. 14 § 14. Section 4 of part X2 of chapter 62 of the laws of 2003, amending 15 the public health law relating to allowing for the use of funds of the 16 office of professional medical conduct for activities of the patient 17 health information and quality improvement act of 2000, as amended by section 4-b of part A of chapter 57 of the laws of 2015, is amended to 18 19 read as follows: § 4. This act shall take effect immediately; provided that the 20 21 provisions of section one of this act shall be deemed to have been in full force and effect on and after April 1, 2003, and shall expire March 22 31, [2017] 2020 when upon such date the provisions of such section shall 23 24 be deemed repealed. 25 § 15. Subdivision (o) of section 111 of part H of chapter 59 of the laws of 2011, amending the public health law relating to the statewide 26 27 health information network of New York and the statewide planning and 28 research cooperative system and general powers and duties, as amended by 29 section 28 of part D of chapter 57 of the laws of 2015, is amended to 30 read as follows: 31 (o) sections thirty-eight and thirty-eight-a of this act shall expire and be deemed repealed March 31, [2017] 2020; 32 33 § 16. Section 32 of part A of chapter 58 of the laws of 2008, amending the elder law and other laws relating to reimbursement to participating 34 provider pharmacies and prescription drug coverage, as amended by 35 36 section 13 of part A of chapter 57 of the laws of 2015, is amended to 37 read as follows: 38 § 32. This act shall take effect immediately and shall be deemed to 39 have been in full force and effect on and after April 1, 2008; provided 40 however, that sections one, six-a, nineteen, twenty, twenty-four, and 41 twenty-five of this act shall take effect July 1, 2008; provided however 42 that sections sixteen, seventeen and eighteen of this act shall expire 43 April 1, [2017] 2020; provided, however, that the amendments made by 44 section twenty-eight of this act shall take effect on the same date as section 1 of chapter 281 of the laws of 2007 takes effect; provided 45 46 further, that sections twenty-nine, thirty, and thirty-one of this act 47 shall take effect October 1, 2008; provided further, that section twenty-seven of this act shall take effect January 1, 2009; and provided 48 49 further, that section twenty-seven of this act shall expire and be deemed repealed March 31, [2017] 2020; and provided, further, however, 50 that the amendments to subdivision 1 of section 241 of the education law 51 52 made by section twenty-nine of this act shall not affect the expiration of such subdivision and shall be deemed to expire therewith and provided 53 that the amendments to section 272 of the public health law made by 54 55 section thirty of this act shall not affect the repeal of such section and shall be deemed repealed therewith. 56



1 § 17. Subdivision 3 of section 2999-p of the public health law, as 2 amended by chapter 461 of the laws of 2012, is amended to read as 3 follows: 3. The commissioner may issue a certificate of authority to an entity 4 that meets conditions for ACO certification as set forth in regulations 5 made by the commissioner pursuant to section twenty-nine hundred nine-6 ty-nine-q of this article. The commissioner shall not issue any new 7 8 certificate under this article after December thirty-first, two thousand 9 [sixteen] twenty. 18. Subdivision 2 of section 246 of chapter 81 of the laws of 1995, 10 S amending the public health law and other laws relating to medical 11 12 reimbursement and welfare reform, as amended by section 2 of part D of 13 chapter 57 of the laws of 2015, is amended to read as follows: 14 2. Sections five, seven through nine, twelve through fourteen, anđ 15 eighteen of this act shall be deemed to have been in full force and 16 effect on and after April 1, 1995 through March 31, 1999 and on and 17 after July 1, 1999 through March 31, 2000 and on and after April 1, 2000 18 through March 31, 2003 and on and after April 1, 2003 through March 31, 19 2006 and on and after April 1, 2006 through March 31, 2007 and on and after April 1, 2007 through March 31, 2009 and on and after April 1, 20 21 2009 through March 31, 2011 and sections twelve, thirteen and fourteen 22 of this act shall be deemed to be in full force and effect on and after April 1, 2011 through March 31, 2015 and on and after April 1, 2015 23 24 through March 31, 2017 and on and after April 1, 2017 through March 31, 25 2019; 26 § 19. This act shall take effect immediately and shall be deemed to 27 have been in full force and effect on and after April 1, 2017. 28 PART J 29 Intentionally Omitted 30 PART K 31 Intentionally Omitted 32 PART L 33 Intentionally Omitted 34 PART M 35 Section 1. The public health law is amended by adding a new section 36 1112 to read as follows: 37 § 1112. Emerging contaminant monitoring. 1. Industry and modern tech-38 nology have created thousands of new chemicals that would not otherwise exist in nature. Although some of these chemicals have proven benefits, 39 40 the effect of many such chemicals on human health is unknown or not 41 fully understood. Furthermore, with the advance of science and technolo-42 gy, public health scientists and experts are able to identify naturally 43 occurring contaminants that pose previously unknown hazards to human 44 health. Where these chemicals or contaminants, collectively referred to as "emerging contaminants," enter drinking water supplies, they can 45 46 present unknown but potentially serious risks to public health. New Yorkers served by public water supplies have the right to know when 47



1	potentially hazardous substances contaminate their drinking water and
2 3	the department must be equipped to monitor and protect the public from these emerging contaminants.
3 4	<u>2. a. "Emerging contaminants" shall mean any physical, chemical,</u>
5	microbiological or radiological substance listed as an emerging contam-
6	inant pursuant to subdivision three of this section.
0 7	b. "Notification level" means the concentration level of an emerging
	contaminant in drinking water that the commissioner has determined,
8 9	based on available scientific information, warrants public notification
9 10	and may require actions, which may include enhanced monitoring and
11	activities to reduce exposure, pursuant to this section.
12	<u>c. "Covered public water system" shall mean: (i) a public water</u>
13	system that serves at least five service connections used by year-round
14	residents or regularly serves at least twenty-five year-round residents;
15 16	or (ii) a public water system that regularly serves at least twenty-five
16	of the same people, four hours or more per day, for four or more days
17	per week, for twenty-six or more weeks per year.
18	3. a. The commissioner shall promulgate regulations to identify and
19 20	list substances as emerging contaminants that meet the following criteria:
20 21	(i) are not subject to any other substance-specific drinking water
22	regulation of the department that establishes a maximum contaminant
23	level, maximum residual disinfectant level, or action level;
24 24	(ii) are known or anticipated to occur in public water systems; and
25	(iii) because of their quantity, concentration, or physical, chemical
26	or infectious characteristics, may cause physical injury or illness, or
27	otherwise pose a potential hazard to human health when present in drink-
28	ing water.
29	b. In determining what substances shall be listed as emerging contam-
30	inants the commissioner shall, at a minimum, consider:
31	(i) unregulated contaminants monitored pursuant to the federal Safe
32	Drinking Water Act (42 U.S.C. § 300g-1) as amended from time to time;
33	(ii) substances that require regulation or monitoring when present in
34	drinking water in other jurisdictions outside the state of New York;
35	(iii) pesticide chemicals for which the United States environmental
36	protection agency has set human health benchmarks for drinking water;
37	(iv) substances found at sites in remedial programs located inside and
38	outside the state of New York, including but not limited to inactive
39	hazardous waste sites; and
40	(v) recommendations from the drinking water quality council estab-
41	lished pursuant to section eleven hundred thirteen of this title.
42	c. The commissioner shall, at a minimum, include the following chemi-
43	cals identified as emerging contaminants: 1,4-dioxane; perfluorooctane-
44	sulfonic acid; and perfluorooctanoic acid.
45	d. The commissioner shall by regulation remove any substance from the
46	list of emerging contaminants upon adopting a maximum contaminant level
47	for such substance.
48	4. Every covered public water system shall test drinking water for the
49	presence of emerging contaminants at least once every three years pursu-
50	ant to a schedule determined by the department through regulation.
51	5. Every test conducted in accordance with this section shall be
52	conducted by a laboratory certified by the department pursuant to
53	
	section five hundred two of this chapter. Laboratories shall submit such
54	



1 covered public water system, in the manner prescribed pursuant to 2 section five hundred two of this chapter. 6. The commissioner shall promulgate regulations establishing notifi-3 cation levels for any emerging contaminant listed pursuant to subdivi-4 5 sion three of this section. Any notification level established pursuant 6 to this subdivision shall be equal to or lower than any federal lifetime 7 health advisory level established pursuant to the federal Safe Drinking 8 Water Act (42 U.S.C. § 300g-1). If no federal lifetime health advisory 9 level has been established, the commissioner shall establish notification levels based upon the available scientific information, and may 10 11 take into consideration recommendations of the drinking water quality 12 council established pursuant to section eleven hundred thirteen of this 13 title. 14 7. Notwithstanding subdivision three of this section, the commissioner 15 may, by declaration, add any physical, chemical, microbiological or radiological substance to the list of emerging contaminants established 16 pursuant to subdivision three of this section, establish a notification 17 level, and require testing for such substance, if the commissioner 18 19 determines that: (i) such substance poses or has the potential to pose a 20 significant hazard to human health when present in drinking water; (ii) 21 such substance was recently detected in a public water system and has 22 the potential to be present in other public water systems; and (iii) it appears to be prejudicial to the interests of the people to delay action 23 24 by preparing and filing regulations. The commissioner shall, however, 25 promulgate regulations adding such new emerging contaminant or estab-26 lishing such notification level within one year of such declaration. 27 Such declaration shall clearly state where and the date by which such 28 testing must occur. After the commissioner promulgates regulations 29 adding such emerging contaminant, such regulations shall supersede the declaration issued pursuant to this subdivision. 30 31 8. Whenever one or more emerging contaminants is confirmed to be pres-32 ent in drinking water at concentrations at or above a notification level 33 established pursuant to this section: 34 a. the covered public water system shall notify the department within 35 twenty-four hours; 36 b. the covered public water system shall notify all owners of real 37 property served by the covered public water system in a time and manner 38 to be prescribed by the department, provided that in no event shall 39 notification occur more than ninety days after the presence of an emerg-40 ing contaminant at concentrations at or above a notification level 41 established pursuant to this section is confirmed; 42 c. the commissioner may directly notify such owners of real property 43 if it is determined that the public's interest would be best served by 44 such notification, or if the commissioner determines that the covered 45 public water system is not acting, or cannot act in a timely manner; 46 d. the commissioner may require that the covered public water system 47 take such actions as may be appropriate to reduce exposure to emerging 48 contaminants. If the commissioner determines that the concentration of 49 the emerging contaminant constitutes an actual or potential threat to 50 public health, based on the best available scientific information, the 51 commissioner shall consult with the commissioner of the department of 52 environmental conservation regarding any further action that may be 53 appropriate, including but not limited to actions pursuant to title twelve of article twenty-seven of the environmental conservation law. 54 55 9. The commissioner shall work in consultation with the commissioner

56 of the department of environmental conservation to develop educational



materials, and may take into consideration recommendations of the drink-1 2 ing water quality council established pursuant to section eleven hundred 3 thirteen of this title. Such educational materials shall be made available to the covered public water system and the general public, relating 4 to methodologies for reducing exposure to emerging contaminants and 5 6 potential actions that may be taken to mitigate or remediate emerging contaminants. The commissioner shall also provide the covered public 7 8 water system with information relating to potential funding sources 9 provided by the state and federal government for mitigation or remedial 10 activities, and to reduce the exposure to emerging contaminants. 11 10. Any owner of real property, including any owner's agent, to whom a 12 covered public water system has provided notification of the exceedance 13 of a notification level established pursuant to subdivision six of this 14 section, shall take all reasonable and necessary steps to provide, with-15 in ten days, any tenants with copies of the notification provided by the 16 covered public water system. 17 11. The commissioner may promulgate regulations pursuant to which the 18 department may provide financial assistance for compliance with the 19 testing requirements of this section, to any covered public water system 20 upon a showing that the costs associated with testing drinking water in 21 compliance with this section would impose a financial hardship. Such 22 regulations shall, when prioritizing public water systems for eligibil-23 ity for financial assistance, incorporate provisions that give prefer-24 ence to public water systems serving less than ten thousand individuals. 25 12. The commissioner shall periodically review substances that have 26 been identified as emerging contaminants pursuant to this section and 27 determine if the department should establish a maximum contaminant level 28 for the substance. Such review shall occur, at a minimum, once every 29 three years. § 2. Section 502 of the public health law is amended by adding a new 30 31 subdivision 10 to read as follows: 32 10. The department may require an environmental laboratory to report 33 laboratory test results to the department, or to any other health 34 department in an electronic manner prescribed by the department. § 3. This act shall take effect immediately. 35 36 PART N 37 Intentionally Omitted 38 PART O 39 Intentionally Omitted 40 PART P Section 1. Section 48-a of part A of chapter 56 of the laws of 2013 41 amending chapter 59 of the laws of 2011 amending the public health law 42 and other laws relating to general hospital reimbursement for annual 43 44 rates relating to the cap on local Medicaid expenditures, as amended by 45 section 29 of part B of chapter 59 of the laws of 2016, is amended to 46 read as follows:

§ 48-a. 1. Notwithstanding any contrary provision of law, the commissioners of the office of alcoholism and substance abuse services and the office of mental health are authorized, subject to the approval of the director of the budget, to transfer to the commissioner of health state



1 funds to be utilized as the state share for the purpose of increasing payments under the medicaid program to managed care organizations 2 licensed under article 44 of the public health law or under article 43 3 of the insurance law. Such managed care organizations shall utilize such 4 5 funds for the purpose of reimbursing providers licensed pursuant to article 28 of the public health law or article 31 or 32 of the mental 6 7 hygiene law for ambulatory behavioral health services, as determined by 8 the commissioner of health, in consultation with the commissioner of 9 alcoholism and substance abuse services and the commissioner of the office of mental health, provided to medicaid [eligible] enrolled outpa-10 tients and for all other behavioral health services except inpatient 11 included in New York state's Medicaid redesign waiver approved by the 12 13 centers for medicare and Medicaid services (CMS). Such reimbursement 14 shall be in the form of fees for such services which are equivalent to 15 the payments established for such services under the ambulatory patient 16 group (APG) rate-setting methodology as utilized by the department of 17 health, the office of alcoholism and substance abuse services, or the 18 office of mental health for rate-setting purposes or any such other fees 19 pursuant to the Medicaid state plan or otherwise approved by CMS in the 20 Medicaid redesign waiver; provided, however, that the increase to such 21 fees that shall result from the provisions of this section shall not, in 22 the aggregate and as determined by the commissioner of health, in consultation with the commissioner of alcoholism and substance abuse 23 24 services and the commissioner of the office of mental health, be greater 25 than the increased funds made available pursuant to this section. The increase of such ambulatory behavioral health fees to providers avail-26 27 able under this section shall be for all rate periods on and after the 28 effective date of section [1] 29 of part [C] B of chapter [57] 59 of the 29 laws of [2015] 2016 through March 31, [2018] 2020 for patients in the city of New York, for all rate periods on and after the effective date 30 of section [1] $\underline{29}$ of part [C] \underline{B} of chapter [57] $\underline{59}$ of the laws of [2015] 31 2016 through [June 30, 2018] March 31, 2020 for patients outside the 32 33 city of New York, and for all rate periods on and after the effective 34 date of such chapter through [June 30, 2018] March 31, 2020 for all 35 services provided to persons under the age of twenty-one; provided, 36 however, [eligible providers may work with managed care plans to achieve 37 quality and efficiency objectives and engage in shared savings] the 38 commissioner of health, in consultation with the commissioner of alco-39 holism and substance abuse services and the commissioner of mental 40 health, may require, as a condition of approval of such ambulatory 41 behavioral health fees, that aggregate managed care expenditures to 42 eligible providers meet the alternative payment methodology requirements 43 as set forth in attachment I of the New York state medicaid section one 44 thousand one hundred fifteen medicaid redesign team waiver as approved 45 by the centers for medicare and medicaid services. The commissioner of 46 health shall, in consultation with the commissioner of alcoholism and 47 substance abuse services and the commissioner of mental health, waive 48 such conditions if a sufficient number of providers, as determined by the commissioner, suffer a financial hardship as a consequence of such 49 50 alternative payment methodology requirements, or if he or she shall 51 determine that such alternative payment methodologies significantly 52 threaten individuals access to ambulatory behavioral health services. 53 Such waiver may be applied on a provider specific or industry wide basis. Further, such conditions may be waived, as the commissioner 54 determines necessary, to comply with federal rules or regulations 55 56 governing these payment methodologies. Nothing in this section shall



1 prohibit managed care organizations and providers from negotiating 2 different rates and methods of payment during such periods described above, subject to the approval of the department of health. The depart-3 ment of health shall consult with the office of alcoholism and substance 4 abuse services and the office of mental health in determining whether 5 6 such alternative rates shall be approved. The commissioner of health in consultation with the commissioner of alcoholism and substance 7 may, 8 abuse services and the commissioner of the office of mental health, promulgate regulations, including emergency regulations promulgated 9 prior to October 1, 2015 to establish rates for ambulatory behavioral 10 health services, as are necessary to implement the provisions of this 11 12 section. Rates promulgated under this section shall be included in the 13 report required under section 45-c of part A of this chapter.

14 2. Notwithstanding any contrary provision of law, the fees paid by 15 managed care organizations licensed under article 44 of the public 16 health law or under article 43 of the insurance law, to providers 17 licensed pursuant to article 28 of the public health law or article 31 18 or 32 of the mental hygiene law, for ambulatory behavioral health services provided to patients enrolled in the child health insurance 19 program pursuant to title one-A of article 25 of the public health law, 20 21 shall be in the form of fees for such services which are equivalent to 22 the payments established for such services under the ambulatory patient 23 group (APG) rate-setting methodology or any such other fees established pursuant to the Medicaid state plan. The commissioner of health shall 24 consult with the commissioner of alcoholism and substance abuse services 25 26 and the commissioner of the office of mental health in determining such 27 services and establishing such fees. Such ambulatory behavioral health 28 fees to providers available under this section shall be for all rate 29 periods on and after the effective date of this chapter through [June 30, 2018] March 31, 2020, provided, however, that managed care organiza-30 tions and providers may negotiate different rates and methods of payment 31 during such periods described above, subject to the approval of the 32 33 department of health. The department of health shall consult with the 34 office of alcoholism and substance abuse services and the office of 35 mental health in determining whether such alternative rates shall be 36 approved. The report required under section 16-a of part C of chapter 37 60 of the laws of 2014 shall also include the population of patients 38 enrolled in the child health insurance program pursuant to title one-A 39 of article 25 of the public health law in its examination on the transi-40 tion of behavioral health services into managed care.

§ 2. Section 1 of part H of chapter 111 of the laws of 2010 relating to increasing Medicaid payments to providers through managed care organizations and providing equivalent fees through an ambulatory patient group methodology, as amended by section 30 of part B of chapter 59 of the laws of 2016, is amended to read as follows:

46 Section 1. a. Notwithstanding any contrary provision of law, the commissioners of mental health and alcoholism and substance abuse 47 services are authorized, subject to the approval of the director of the 48 49 budget, to transfer to the commissioner of health state funds to be utilized as the state share for the purpose of increasing payments under 50 51 the medicaid program to managed care organizations licensed under arti-52 cle 44 of the public health law or under article 43 of the insurance law. Such managed care organizations shall utilize such funds for the 53 purpose of reimbursing providers licensed pursuant to article 28 of the 54 55 public health law, or pursuant to article 31 or article 32 of the mental hygiene law for ambulatory behavioral health services, as determined by 56



the commissioner of health in consultation with the commissioner of 1 2 mental health and commissioner of alcoholism and substance abuse services, provided to medicaid [eligible] enrolled outpatients and for 3 all other behavioral health services except inpatient included in New 4 5 York state's Medicaid redesign waiver approved by the centers for medi-6 care and Medicaid services (CMS). Such reimbursement shall be in the 7 form of fees for such services which are equivalent to the payments 8 established for such services under the ambulatory patient group (APG) rate-setting methodology as utilized by the department of health or by 9 the office of mental health or office of alcoholism and substance abuse 10 11 services for rate-setting purposes or any such other fees pursuant to 12 the Medicaid state plan or otherwise approved by CMS in the Medicaid 13 redesign waiver; provided, however, that the increase to such fees that 14 shall result from the provisions of this section shall not, in the 15 aggregate and as determined by the commissioner of health in consulta-16 tion with the commissioners of mental health and alcoholism and 17 substance abuse services, be greater than the increased funds made 18 available pursuant to this section. The increase of such behavioral 19 health fees to providers available under this section shall be for all rate periods on and after the effective date of section [2] 30 of part 20 21 [C] <u>B</u> of chapter [57] <u>59</u> of the laws of [2015] <u>2016</u> through March 31, 22 [2018] 2020 for patients in the city of New York, for all rate periods 23 on and after the effective date of section [2] 30 of part [C] B of chapter [57] 59 of the laws of [2015] 2016 through [June 30, 2018] March 31, 24 2020 for patients outside the city of New York, and for all rate periods 25 26 on and after the effective date of section [2] $\underline{30}$ of part [C] \underline{B} of chap-27 ter [57] 59 of the laws of [2015] 2016 through [June 30, 2018] March 31, 28 2020 for all services provided to persons under the age of twenty-one; 29 provided, however, [eligible providers may work with managed care plans to achieve quality and efficiency objectives and engage in shared 30 31 savings] the commissioner of health, in consultation with the commissioner of alcoholism and substance abuse services and the commissioner 32 33 of mental health, may require, as a condition of approval of such ambu-34 latory behavioral health fees, that aggregate managed care expenditures 35 to eligible providers meet the alternative payment methodology requirements as set forth in attachment I of the New York state medicaid 36 section one thousand one hundred fifteen medicaid redesign team waiver 37 38 as approved by the centers for medicare and medicaid services. The 39 commissioner of health shall, in consultation with the commissioner of 40 alcoholism and substance abuse services and the commissioner of mental 41 health, waive such conditions if a sufficient number of providers, as 42 determined by the commissioner, suffer a financial hardship as a conse-43 quence of such alternative payment methodology requirements, or if he or 44 she shall determine that such alternative payment methodologies signif-45 icantly threaten individuals access to ambulatory behavioral health 46 services. Such waiver may be applied on a provider specific or industry 47 wide basis. Further, such conditions may be waived, as the commissioner determines necessary, to comply with federal rules or regulations 48 governing these payment methodologies. Nothing in this section shall 49 prohibit managed care organizations and providers from negotiating 50 51 different rates and methods of payment during such periods described, 52 subject to the approval of the department of health. The department of health shall consult with the office of alcoholism and substance abuse 53 services and the office of mental health in determining whether such 54 alternative rates shall be approved. The commissioner of health may, in 55 consultation with the commissioners of mental health and alcoholism and 56



1 substance abuse services, promulgate regulations, including emergency 2 regulations promulgated prior to October 1, 2013 that establish rates 3 for behavioral health services, as are necessary to implement the 4 provisions of this section. Rates promulgated under this section shall 5 be included in the report required under section 45-c of part A of chap-6 ter 56 of the laws of 2013.

7 b. Notwithstanding any contrary provision of law, the fees paid by 8 managed care organizations licensed under article 44 of the public health law or under article 43 of the insurance law, to providers 9 licensed pursuant to article 28 of the public health law or article 31 10 or 32 of the mental hygiene law, for ambulatory behavioral health 11 12 services provided to patients enrolled in the child health insurance 13 program pursuant to title one-A of article 25 of the public health law, 14 shall be in the form of fees for such services which are equivalent to 15 the payments established for such services under the ambulatory patient 16 group (APG) rate-setting methodology. The commissioner of health shall 17 consult with the commissioner of alcoholism and substance abuse services 18 and the commissioner of the office of mental health in determining such services and establishing such fees. Such ambulatory behavioral health 19 fees to providers available under this section shall be for all rate 20 21 periods on and after the effective date of this chapter through [June 22 30, 2018] March 31, 2020, provided, however, that managed care organiza-23 tions and providers may negotiate different rates and methods of payment 24 during such periods described above, subject to the approval of the department of health. The department of health shall consult with the 25 26 office of alcoholism and substance abuse services and the office of 27 mental health in determining whether such alternative rates shall be 28 approved. The report required under section 16-a of part C of chapter 29 60 of the laws of 2014 shall also include the population of patients enrolled in the child health insurance program pursuant to title one-A 30 of article 25 of the public health law in its examination on the transi-31 tion of behavioral health services into managed care. 32

33 This act shall take effect immediately and shall be deemed to § з. have been in full force and effect on and after April 1, 2017; provided, 34 however, that the amendments to section 48-a of part A of chapter 56 of 35 36 the laws of 2013 made by section one of this act shall not affect the 37 repeal of such section and shall be deemed repealed therewith; provided 38 further, that the amendments to section 1 of part H of chapter 111 of 39 the laws of 2010 made by section two of this act shall not affect the 40 expiration of such section and shall be deemed to expire therewith.

41

PART Q

42 Section 1. Subdivisions 3-b and 3-c of section 1 of part C of chapter 43 57 of the laws of 2006, relating to establishing a cost of living 44 adjustment for designated human services programs, as amended by section 45 1 of part I of chapter 60 of the laws of 2014, are amended to read as 46 follows:

47 3-b. Notwithstanding any inconsistent provision of law, beginning April 1, 2009 and ending March 31, 2016 and beginning April 1, 2017 and 48 49 ending March 31, 2018, the commissioners shall not include a COLA for 50 the purpose of establishing rates of payments, contracts or any other 51 form of reimbursement, provided that the commissioners of the office for people with developmental disabilities, the office of mental health, and 52 the office of alcoholism and substance abuse services shall not include 53 54 a COLA beginning April 1, 2017 and ending March 31, 2019.



1 3-c. Notwithstanding any inconsistent provision of law, beginning 2 April 1, [2016] 2018 and ending March 31, [2019] 2021, the commissioners shall develop the COLA under this section using the actual U.S. consumer 3 price index for all urban consumers (CPI-U) published by the United 4 States department of labor, bureau of labor statistics for the twelve 5 month period ending in July of the budget year prior to such state 6 fiscal year, for the purpose of establishing rates of payments, 7 8 contracts or any other form of reimbursement.

§ 2. Section 1 of part C of chapter 57 of the laws of 2006, relating 9 to establishing a cost of living adjustment for designated human service 10 programs, is amended by adding a new subdivision 3-e to read as follows: 11 12 3-e. (i) Notwithstanding the provisions of subdivision 3-b of this 13 section or any other inconsistent provision of law, and subject to the 14 availability of the appropriation therefor, for the programs listed in 15 paragraphs (i), (ii), and (iii) of subdivision 4 of this section, the 16 commissioners shall provide funding to support (1) an overall average 17 three and one-quarter percent (3.25%) increase to total salaries for 18 direct care staff, direct support professionals for each eligible state-19 funded program beginning January 1, 2018; and (2) an overall average 20 three and one-quarter percent (3.25%) increase to total salaries for 21 direct care staff and direct support professionals, and clinical staff 22 for each eligible state-funded program beginning April 1, 2018. For the 23 purpose of this funding increase, direct support professionals are indi-24 viduals employed in consolidated fiscal reporting position title codes 25 ranging from 100 to 199; direct care staff are individuals employed in consolidated fiscal reporting position title codes ranging from 200 to 26 27 299; and clinical staff are individuals employed in consolidated fiscal 28 reporting position title codes ranging from 300 to 399.

(ii) The funding made available pursuant to paragraph (i) of this 29 subdivision shall be used: (1) to help alleviate the recruitment and 30 retention challenges of direct care staff, direct support professionals 31 32 and clinical staff employed in eligible programs; and (2) to continue 33 and to expand efforts to support the professionalism of the direct care 34 workforce. Each local government unit or direct contract provider 35 receiving such funding shall have flexibility in allocating such funding 36 to support salary increases to particular job titles to best address the 37 needs of its direct care staff, direct support professionals and clin-38 ical staff. Each local government unit or direct contract provider 39 receiving such funding shall also submit a written certification, in 40 such form and at such time as each commissioner shall prescribe, attest-41 ing to how such funding will be or was used for purposes eligible under 42 this section. Further, providers shall submit a resolution from their 43 governing body to the appropriate commissioner, attesting that the fund-44 ing received will be used solely to support salary and salary-related 45 fringe benefit increases for direct care staff, direct support profes-46 sionals and clinical staff, pursuant to paragraph (i) of this subdivi-47 sion. Salary increases that take effect on and after April 1, 2017 may be used to demonstrate compliance with the January 1, 2018 funding 48 49 increase authorized by this section, except for salary increases neces-50 sary to comply with state minimum wage requirements. Such commissioners 51 shall be authorized to recoup any funds as appropriated herein deter-52 mined to have been used in a manner inconsistent with such standards or 53 inconsistent with the provisions of this subdivision, and such commis-54 sioners shall be authorized to employ any legal mechanism to recoup such 55 funds, including an offset of other funds that are owed to such local governmental unit or provider. 56



1	(iii) Where appropriate, transfers to the department of health shall
2	be made as reimbursement for the state share of medical assistance.
3	§ 3. This act shall take effect immediately and shall be deemed to
4	have been in full force and effect on and after April 1, 2017; provided,
5	however, that the amendments to section 1 of part C of chapter 57 of the
6	laws of 2006 made by sections one and two of this act shall not affect
7	the repeal of such section and shall be deemed repealed therewith.
8	PART R
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9	Section 1. The public health law is amended by adding a new section
10	1113 to read as follows:
11	§ 1113. Drinking water quality council; established. 1. There shall be
12	established, within the department, the drinking water quality council.
13	Such council shall be composed of twelve members as follows:
14	(a) the commissioner, or the commissioner's designee, who shall be the
15	<pre>chair of the council;</pre>
16	(b) the commissioner of environmental conservation or designee;
17	(c) a designee of the commissioner of environmental conservation with
18	<u>expertise in water resources;</u> (d) a designee of the commissioner with expertise in drinking water;
19 20	and
20 21	(e) eight members appointed by the governor, two of whom shall be
21 22	recommended by the temporary president of the senate, and two by the
23	speaker of the assembly.
24 24	2. (a) Of the four members appointed to the drinking water quality
24 25	council and recommended by the temporary president of the senate and the
26	speaker of the assembly, the temporary president of the senate and the
20 27	speaker of the assembly shall each recommend:
28	(i) one member who represents water purveyors; and
29	(ii) one member representing the public, who has a background or
30	expertise in toxicology or health risk assessment.
31	(b) Of the four additional members appointed to the drinking water
32	quality council, the governor shall appoint:
33	(i) one member who represents water purveyors;
34	(ii) one member who has a background or expertise in toxicology or
35	health risk assessment;
36	(iii) one member who has a background or expertise in microbiology;
37	and
38	(iv) one member who has a background or expertise in environmental
39	engineering.
40	(c) The members of such council appointed pursuant to paragraph (e) of
41	subdivision one of this section shall serve terms of two years.
42	(d) The members appointed pursuant to paragraph (e) of subdivision one
43	of this section shall each serve his or her term of office or until his
44	or her successor is appointed; provided that any vacancy in the position
45	of an appointed member shall be filled in the same manner as the
46	original appointment and only for the unexpired term of the vacancy.
47	3. The members of the drinking water quality council shall receive no
48	compensation for their services, but shall be allowed their actual and
49	necessary expenses incurred in the performance of their duties pursuant
50	to this title.
51	4. The drinking water quality council shall meet at such times and
52	places as may be determined by its chair. The council shall meet at a
53	minimum of two times per year. All meetings shall be open to the public
54	pursuant to article seven of the public officers law. A majority of the



1	members of such council shall constitute a quorum for the transaction of business. Action may be taken, and motions and resolutions adopted, at
2 3	any meeting by the affirmative vote of a majority of the full membership
4 5	of the council. 5. The council shall make recommendations to the department relating
6 7	to: (a) those contaminants, which the department may list as emerging
	contaminants pursuant to section one thousand one hundred twelve of this
8 9	title.
10	
11	(i) In determining what substances shall be recommended as emerging contaminants the council shall, at a minimum, consider:
12	A. unregulated contaminants monitored pursuant to the federal Safe
13	Drinking Water Act (42 USC § 300g-1) as amended from time to time;
14	
14 15	B. substances that require regulation or monitoring when present in drinking water in other jurisdictions outside the state of New York;
16	
	C. pesticide chemicals for which the United States environmental
17	protection agency has set human health benchmarks for drinking water;
18	D. substances found at sites in remedial programs located inside and
19	outside the state of New York, including but not limited to inactive
20	hazardous waste sites; and
21	E. waterborne pathogens and microbiological contaminants.
22	(ii) The council shall recommend a notification level for each recom-
23	mended emerging contaminant.
24	(iii) The council shall recommend timeframes and frequencies in which
25	testing should be required for the recommended emerging contaminants,
26	allowing for variation based on circumstances such as the source of
27	water, the region and size of the water system.
28	(iv) The council shall provide the department with its first list of
29	recommended emerging contaminants and corresponding notification levels
30	for which testing shall be required no later than one year from the
31	initial meeting of the council, and the council shall update the list
32	and recommend notification levels annually thereafter;
33	(b) a review of substances identified as emerging contaminants pursu-
34	ant to section one thousand one hundred twelve of this title. Where
35	appropriate the council shall recommend either a maximum contaminant
36	level (MCL), or the removal of the substance from the list of emerging
37	contaminants, on the basis of available scientific evidence and any
38	other relevant factors;
39	(c) the form and content of public notifications issued pursuant to
40	section one thousand one hundred twelve of this title;
41	(d) working with other state agencies and the federal government to
42	ensure funds are available and accessible, parties known to be responsi-
43	ble for contamination are pursued, and mitigation, remediation, and
44	<u>cleanup projects occur in a timely manner;</u>
45	(e) the development of educational materials regarding private well
46	water testing;
47	(f) the appropriate use of, and methods and manner of conducting,
48	biomonitoring and biomonitoring studies;
49	(g) the inclusion of information on the online tracking and mapping
50	system established in section 3-0315 of the environmental conservation
51	law; and
52	(h) anything else the department or the department of environmental
53	conservation designates.
54	6. The drinking water quality council shall be entitled to request and
55	receive information from any state, municipal department, board, commis-
56	sion or agency that may be required or are deemed necessary for the


purposes of such council, including but not limited to all water infor-1 2 mation and annual reports the department has relating to both public and 3 private water supplies. 7. Before the council advances any recommendation to the department, 4 the council shall provide an opportunity for public and stakeholder 5 6 comments. Final recommendations of the council shall be posted on the 7 department's website within thirty days after the council adopts such 8 recommendations. § 2. This act shall take effect immediately. 9 PART S 10 11 Section 1. Subdivision 2 of section 365-1 of the social services law, 12 as added by section 37 of part H of chapter 59 of the laws of 2011, is 13 amended to read as follows: 14 In addition to payments made for health home services pursuant to 2. 15 subdivision one of this section, the commissioner is authorized to pay additional amounts to providers of health home services that meet proc-16 17 ess or outcome standards specified by the commissioner. Such additional 18 amounts may be paid with state funds only if federal financial partic-19 ipation for such payments is unavailable. 20 § 2. Section 364-j of the social services law is amended by adding a new subdivision 33 to read as follows: 21 22 For services under this title provided by residential health care 33. 23 facilities under article twenty-eight of the public health law, the commissioner shall direct managed care organizations licensed under 24 25 article forty-four of the public health law, article forty-three of the 26 insurance law, and this section, to continue to reimburse at a benchmark 27 rate which is to be the fee-for-service rate calculated pursuant to section twenty-eight hundred eight of the public health law. The bench-28 29 mark fee-for-service rate shall continue to be paid by such managed care 30 organizations for all services provided by residential healthcare facilities from the effective date of this subdivision at least until Decem-31 ber thirty-first, two thousand twenty. The commissioner may require, as 32 33 a condition of continuing to require payment at such benchmark rate that 34 aggregate managed care expenditures to residential health care facili-35 ties meet the alternative payment methodology requirements set forth in 36 attachment I of the New York State section 1115 medicaid redesign team 37 waiver as approved by the centers for medicare and medicaid services. 38 The commissioner of health shall waive such requirements if a sufficient 39 number of providers, as determined by the commissioner, suffer a finan-40 cial hardship as a consequence of such alternative payment methodology 41 requirements, or if the commissioner determines that such alternative 42 payment methodologies significantly threaten individuals' access to residential health care facility services; such waiver may be applied on 43 44 a provider-specific or industry-wide basis. Further, such requirements may be waived, as the commissioner determines necessary, to comply with 45 46 federal rules or regulations governing these payment methodologies. 47 § 3. Subdivision 2 of section 365-a of the social services law is 48 amended by adding a new paragraph (dd) to read as follows: 49 (dd) pasteurized donor human milk (PDHM), which may include fortifiers 50 as medically indicated, for inpatient use, for which a licensed medical 51 practitioner has issued an order for an infant who is medically or physically unable to receive maternal breast milk or participate in breast 52 53 feeding or whose mother is medically or physically unable to produce maternal breast milk at all or in sufficient quantities or participate 54



in breast feeding despite optimal lactation support. Such infant shall: 1 2 (i) have a documented birth weight of less than one thousand five hundred grams; or (ii) have a congenital or acquired condition that 3 places the infant at a high risk for development of necrotizing entero-4 colitis; or (iii) have a congenital or acquired condition that may bene-5 fit from the use of donor breast milk as determined by the commissioner 6 7 of health or his or her designee. 4. Subdivision 2 of section 365-a of the social services law is 8 S 9 amended by adding a new paragraph (ee) to read as follows: (ee) Medical assistance shall include the coverage of a set of 10 11 services to ensure improved outcomes of women who are in the process of 12 ovulation enhancing drugs, limited to the provision of such treatment, 13 office visits, hysterosalpingogram services, pelvic ultrasounds, and 14 blood testing; services shall be limited to those necessary to monitor 15 such treatment. In the event that ninety percent federal financial 16 participation for such services is not available, the state share of 17 appropriations related to these services shall be used for a grant 18 program intended to accomplish the purpose of this section. 19 § 5. Section 3614-c of the public health law, as amended by chapter 56 20 of the laws of 2016, subparagraph (iv) of paragraph (a) of subdivision 3 21 as amended by section 1 and subparagraph (iv) of paragraph (b) of subdi-22 vision 3 as amended by section 2 of part E of chapter 73 of the laws of 23 2016, is amended to read as follows: § 3614-c. Home care worker wage parity. 1. As used in this section, 24 25 the following terms shall have the following meaning: 26 (a) "Living wage law" means any law enacted by Nassau, Suffolk or 27 Westchester county or a city with a population of one million or more 28 which establishes a minimum wage for some or all employees who perform 29 work on contracts with such county or city. (b) "Total compensation" means all wages and other direct compensation 30 paid to or provided on behalf of the employee including, but not limited 31 to, wages, health, education or pension benefits, supplements in lieu of 32 benefits and compensated time off, except that it does not include 33 employer taxes or employer portion of payments for statutory benefits, 34 including but not limited to FICA, disability insurance, unemployment 35 36 insurance and workers' compensation. 37 (c) "Prevailing rate of total compensation" means the average hourly 38 amount of total compensation paid to all home care aides covered by 39 whatever collectively bargained agreement covers the greatest number of 40 home care aides in a city with a population of one million or more. For 41 purposes of this definition, any set of collectively bargained agreements in such city with substantially the same terms and conditions 42 43 relating to total compensation shall be considered as a single collec-44 tively bargained agreement. 45 (đ) "Home care aide" means a home health aide, personal care aide, 46 home attendant, personal assistant performing consumer directed personal 47 assistance services pursuant to section three hundred sixty-five-f of the social services law, or other licensed or unlicensed person whose 48 49 primary responsibility includes the provision of in-home assistance with 50 activities of daily living, instrumental activities of daily living or 51 health-related tasks; provided, however, that home care aide does not include any individual (i) working on a casual basis, or (ii) 52 (except 53 for a person employed under the consumer directed personal assistance program under section three hundred sixty-five-f of the social services 54 55 <u>law</u>) who is a relative through blood, marriage or adoption of: (1) the employer; or (2) the person for whom the worker is delivering services, 56



1 under a program funded or administered by federal, state or local 2 government. 3 (e) "Managed care plan" means any managed care program, organization or demonstration covering personal care or home health aide services, 4 and which receives premiums funded, in whole or in part, by the New York 5 6 state medical assistance program, including but not limited to all Medi-7 caid managed care, Medicaid managed long term care, Medicaid advantage, 8 and Medicaid advantage plus plans and all programs of all-inclusive care 9 for the elderly.

10 (f) "Episode of care" means any service unit reimbursed, in whole or 11 in part, by the New York state medical assistance program, whether 12 through direct reimbursement or covered by a premium payment, and which 13 covers, in whole or in part, any service provided by a home care aide, 14 including but not limited to all service units defined as visits, hours, 15 days, months or episodes.

16 (g) "Cash portion of the minimum rate of home care [aid] <u>aide</u> total 17 compensation" means the minimum amount of home care aide total compen-18 sation that may be paid in cash wages, as determined by the department 19 in consultation with the department of labor.

"Benefit portion of the minimum rate of home care aide total 20 (h) 21 compensation" means the portion of home care aide total compensation 22 that may be paid in cash or health, education or pension benefits, wage differentials, supplements in lieu of benefits and compensated time off, 23 24 as determined by the department in consultation with the department of 25 labor. Cash wages paid pursuant to increases in the state or federal 26 minimum wage cannot be used to satisfy the benefit portion of the mini-27 mum rate of home care aide total compensation.

28 2. Notwithstanding any inconsistent provision of law, rule or regu-29 lation, no payments by government agencies shall be made to certified home health agencies, long term home health care programs [or], managed 30 care plans, or the consumer directed personal assistance program under 31 section three hundred sixty-five-f of the social services law, for any 32 episode of care furnished, in whole or in part, by any home care aide 33 who is compensated at amounts less than the applicable minimum rate of 34 home care aide total compensation established pursuant to this section. 35

36 3. (a) The minimum rate of home care aide total compensation in a city 37 with a population of one million or more shall be:

38 (i) for the period March first, two thousand twelve through February 39 twenty-eighth, two thousand thirteen, ninety percent of the total 40 compensation mandated by the living wage law of such city;

41 (ii) for the period March first, two thousand thirteen through Febru-42 ary twenty-eighth, two thousand fourteen, ninety-five percent of the 43 total compensation mandated by the living wage law of such city;

(iii) for the period March first, two thousand fourteen through March thirty-first two thousand sixteen, no less than the prevailing rate of total compensation as of January first, two thousand eleven, or the total compensation mandated by the living wage law of such city, whichever is greater;

(iv) for all periods on or after April first, two thousand sixteen, the cash portion of the minimum rate of home care aide total compensation shall be ten dollars or the minimum wage as laid out in paragraph (a) of subdivision one of section six hundred fifty-two of the labor law, whichever is higher. The benefit portion of the minimum rate of home care aide total compensation shall be four dollars and nine cents. (b) The minimum rate of home care aide total compensation in the coun-

56 ties of Nassau, Suffolk and Westchester shall be:



1 (i) for the period March first, two thousand thirteen through February 2 twenty-eighth, two thousand fourteen, ninety percent of the total 3 compensation mandated by the living wage law as set on March first, two thousand thirteen of a city with a population of a million or more; 4 5 (ii) for the period March first, two thousand fourteen through February twenty-eighth, two thousand fifteen, ninety-five percent of the 6 7 total compensation mandated by the living wage law as set on March 8 first, two thousand fourteen of a city with a population of a million or 9 more; (iii) for the period March first, two thousand fifteen, through Febru-10 11 ary twenty-eighth, two thousand sixteen, one hundred percent of the 12 total compensation mandated by the living wage law as set on March 13 first, two thousand fifteen of a city with a population of a million or 14 more; 15 (iv) for all periods on or after March first, two thousand sixteen, 16 the cash portion of the minimum rate of home care aide total compen-17 sation shall be ten dollars or the minimum wage as laid out in paragraph (b) of subdivision one of section six hundred fifty-two of the labor 18 19 law, whichever is higher. The benefit portion of the minimum rate of 20 home care aide total compensation shall be three dollars and twenty-two 21 cents. 22 4. The terms of this section shall apply equally to services provided 23 by home care aides who work on episodes of care as direct employees of 24 certified home health agencies, long term home health care programs, or 25 managed care plans, or as employees of licensed home care services agen-26 cies, limited licensed home care services agencies, or the consumer 27 directed personal assistance program under section three hundred sixty-28 five-f of the social services law, or under any other arrangement. 29 5. No payments by government agencies shall be made to certified home 30 health agencies, long term home health care programs, [or] managed care plans, or the consumer directed personal assistance program under 31 section three hundred sixty-five-f of the social services law, for any 32 33 episode of care without the certified home health agency, long term home health care program, [or] managed care plan or the consumer directed 34 personal assistance program having delivered prior written certification 35 36 to the commissioner, on forms prepared by the department in consultation 37 with the department of labor, that all services provided under each 38 episode of care are in full compliance with the terms of this section 39 and any regulations promulgated pursuant to this section. 40 6. If a certified home health agency or long term home health care 41 program elects to provide home care aide services through contracts with 42 licensed home care services agencies or through other third parties, 43 provided that the episode of care on which the home care aide works is 44 covered under the terms of this section, the certified home health agen-45 cy, long term home health care program, or managed care plan must obtain 46 a written certification from the licensed home care services agency or 47 other third party, on forms prepared by the department in consultation with the department of labor, which attests to the licensed home care 48 49 services agency's or other third party's compliance with the terms of 50 this section. Such certifications shall also obligate the certified home 51 health agency, long term home health care program, or managed care plan 52 to obtain, on no less than a quarterly basis, all information from the 53 licensed home care services agency, fiscal intermediary or other third parties necessary to verify compliance with the terms of this section. 54 55 Such certifications and the information exchanged pursuant to them shall be retained by all certified home health agencies, long term home health 56



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1 care programs, or managed care plans, and all licensed home care 2 services agencies, or other third parties for a period of no less than 3 ten years, and made available to the department upon request. The commissioner shall distribute to all certified home health 4 7. agencies, long term home health care programs, [and] managed care plans, 5 6 and fiscal intermediaries in the consumer directed personal assistance 7 program under section three hundred sixty-five-f of the social services 8 law, official notice of the minimum rates of home care aide compensation at least one hundred twenty days prior to the effective date of each 9 minimum rate for each social services district covered by the terms of 10 11 this section. 8. The commissioner is authorized to promulgate regulations, and may 12 13 promulgate emergency regulations, to implement the provisions of this 14 section. 15 9. Nothing in this section should be construed as applicable to any 16 service provided by certified home health agencies, long term home health care programs, [or] managed care plans, or consumer directed 17 personal assistance program under section three hundred sixty-five-f of 18 19 the social services law except for all episodes of care reimbursed in 20 whole or in part by the New York Medicaid program. 21 10. No certified home health agency, managed care plan [or], long term 22 home health care program, or fiscal intermediary in the consumer 23 directed personal assistance program under section three hundred sixtyfive-f of the social services law shall be liable for recoupment of 24 payments for services provided through a licensed home care services 25 agency or other third party with which the certified home health agency, 26 27 long term home health care program, or managed care plan has a contract 28 because the licensed agency or other third party failed to comply with 29 the provisions of this section if the certified home health agency, long term home health care program, [or] managed care plan, or fiscal inter-30 mediary has reasonably and in good faith collected certifications and 31 32 all information required pursuant to subdivisions five and six of this 33 section. 34 § 6. Notwithstanding any other provision of law, the commissioner of health is authorized to sell accounts receivable balances owed to the 35 36 state by Medicaid providers to financial institutions; provided that no such sale of accounts receivable balances shall include any state 37 38 support, including a guarantee or contingent obligation of state funds 39 to mitigate the risk of nonpayment by providers owing on these account 40 receivable balances. The commissioner in consultation with the director 41 of the budget is authorized to determine the sale prices of any such 42 accounts receivable balances and shall include sale terms governing the 43 reasonable collection of such balances by the financial institution. 44 Following any such sale, providers owing on these accounts receivable 45 balances shall not include any additional cost, interest, or financing 46 charges solely as a result of such sale but shall be fully responsible 47 for paying the accounts receivable balances. Proceeds from the sale of the accounts receivable balances shall be deposited to the Medicaid 48 49 escrow fund and be used to offset Medicaid costs under the Medicaid 50 global spending cap. The commissioner shall provide the legislature with

52 impacted Medicaid providers, at least thirty days prior to the sale. 53 § 7. This act shall take effect immediately; provided, however that:

a description of the terms of any such sale, including a list of the

a. the amendments to section 364-j of the social services law made by 55 section two of this act shall not affect the repeal of such section and 56 shall be deemed to be repealed therewith;



1	b. sections three and five of this act shall take effect July 1, 2017;
2	and
3	c. section six of this act shall expire April 1, 2019; however, such
4	expiration shall not invalidate or otherwise impact any sale of accounts
5	receivable effected pursuant to such section prior to its expiration.
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6	PART T
7	Section 1. This act shall be known and may be cited as the "clean
8	water infrastructure act of 2017".
9	§ 2. Article 15 of the environmental conservation law is amended by
10	adding a new title 33 to read as follows:
11	TITLE 33
12	SOURCE WATER PROTECTION PROJECTS
13	Section 15-3301. Definitions.
14	15-3303. Land acquisition projects for source water protection.
15	15-3305. Approval and execution of projects.
16	§ 15-3301. Definitions.
17	As used in this title the following terms shall mean:
18	1. "Land acquisition projects" means open space acquisition projects
19	undertaken with willing sellers including, but not limited to, the
20	purchase of conservation easements, undertaken by a municipality, a
21	not-for-profit corporation, or purchase of conservation easements by a
22	soil and water conservation district.
23	2. "Municipality" means the same as such term as defined in section
24	56-0101 of this chapter.
25	3. "Not-for-profit corporation" means a corporation formed pursuant to
26	the not-for-profit corporation law and qualified for tax-exempt status
27	under the federal internal revenue code.
28	4. "Soil and water conservation district" means the same as such term
29	as defined in section three of the soil and water conservation districts
30	law.
31	5. "State assistance payment" means payment of the state share of the
32	cost of projects authorized by this title to preserve, enhance, restore
33	and improve the quality of the state's environment.
34	§ 15-3303. Land acquisition projects for source water protection. The commissioner is authorized to provide state assistance to muni-
35 36	cipalities, not-for-profit corporations and soil and water conservation
	districts to undertake land acquisition projects for source water
38	protection, in cooperation with willing sellers. Land acquisition
39	projects for source water protection shall support, expand or enhance
40	drinking water quality protection, including but not limited to aqui-
41	fers, watersheds, reservoirs, lakes, rivers and streams.
42	2. a. Any buffer encumbered by a conservation easement acquired pursu-
43	ant to this section that encumbers lands used in agricultural production
44	as defined in section three hundred one of the agriculture and markets
45	law in a county designated state certified agricultural district created
46	under section three hundred three of the agriculture and markets law may
47	allow agricultural activity that qualifies such lands, provided such
48	activity on such lands does not impair drinking water and complies with
49	an agricultural environmental management program plan developed by the
50	state soil and water conservation committee, in partnership with the
E 1	demonstrate

51 <u>department.</u>



1 b. Notwithstanding any limitations provided herein on lands acquired 2 pursuant to this title a license or easement may be granted by the owner 3 of such property to a public utility for a public purpose. 3. In evaluating land acquisition projects for source water protection 4 5 pursuant to this section, the department shall give priority to projects 6 which protect or recharge drinking water sources and watersheds includ-7 ing riparian buffers and wetlands. 8 4. a. No state assistance may be provided pursuant to this section to 9 fund any land acquisition project which is undertaken by eminent domain 10 unless such process is undertaken with a willing seller. 11 b. The department shall not provide funding pursuant to this title for 12 any land acquisition project for source water protection by a not-for-13 profit corporation, if any town, village or city within which such a 14 project is located, by resolution, within ninety days of notification by 15 such corporation of its interest in acquiring such projects, objects to 16 such acquisition. 17 5. Consistent with section eleven b of the soil and water conservation 18 districts law, the soil and water conservation committee in consultation 19 with the commissioner of agriculture and markets is authorized to 20 provide state assistance payments to county soil and water conservation 21 districts, within amounts appropriated, for land acquisition projects 22 for source water protection projects to support, expand or enhance drinking water quality protection, including but not limited to aqui-23 24 fers, watersheds, reservoirs, lakes, rivers and streams. Such committee 25 shall give priority to projects which establish buffers from waters which serves as or are tributaries to drinking water supplies for such 26 27 projects using state assistance pursuant to this section. 28 6. Real property acquired, developed, improved, restored or rehabili-29 tated by or through a municipality or not-for-profit corporation with funds made available pursuant to this title shall not be sold, leased, 30 31 exchanged, donated or otherwise disposed of or used for other than the public purposes of this title without the express authority of an act of 32 33 the legislature, which shall provide for the substitution of other lands of equal environmental value and fair market value and reasonably equiv-34 alent usefulness and location to those to be discontinued, sold or 35 36 disposed of, and such other requirements as shall be approved by the 37 commissioner. 38 7. If the state acquires a real property interest in land purchased by a municipality or not-for-profit with funds made available pursuant to 39 40 this title, the state shall pay the fair market value of such interest 41 less the amount of funding provided by the state pursuant to this 42 section. 43 8. To the fullest extent practicable, it is the policy of the state to 44 promote an equitable regional distribution of funds, consistent with the 45 purpose of this section. 46 § 15-3305. Approval and execution of projects. 47 1. Land acquisition projects for source water protection may be under-48 taken pursuant to the provisions of this article and other applicable 49 provisions of law only with the approval of the commissioner. 50 2. The commissioner shall review such project application and may 51 approve, disapprove or recommend modifications thereto consistent with 52 applicable law, criteria, standards or rules and regulations relative to 53 such projects. In reviewing applications for projects pursuant to this 54 section, the commissioner shall give due consideration to: 55 a. the project's contribution to the protection of drinking water 56

supplies;



1	b. the presence of a water plan, including a source water
2	assessment/protection plan or other similar plan which identifies meas-
3	ures to reduce threats to drinking water sources and priorities for land
4	acquisition projects; and,
5	<u>c. financial need or hardship.</u>
6	3. All land acquisition projects shall be undertaken in the state of
7	New York. The total amount of the state assistance payments toward the
8	cost of any such project shall be set forth in any request for proposal
9	issued to solicit projects and will in no event exceed seventy-five
10	percent of the cost.
11	For the purpose of determining the amount of the state assistance
12	payments, the cost of the project shall not be more than the amount set
13	forth in the application for state assistance payments approved by the
14	commissioner. The state assistance payments toward the cost of a project
15	shall be paid on audit and warrant of the state comptroller on a certif-
16	icate of availability of the director of the budget.
17	4. a. The commissioner and a municipality may enter into a contract
18	for the undertaking by the municipality of a source water protection
19	project. Such project shall be recommended to the commissioner by the
20	governing body of the municipality and, when approved by the commission-
21	er, may be undertaken by the municipality pursuant to this title and any
22	other applicable provision of law.
23	b. The commissioner and a not-for-profit corporation may enter into a
24	contract for the undertaking by the not-for-profit corporation of a source water protection project. Such a project shall be recommended to
25 26	the commissioner by the governing body of a not-for-profit corporation
20 27	which demonstrates to the satisfaction of the commissioner that it is
28	capable of operating and maintaining such property for the benefit of
29	drinking water and/or water quality protection. Upon approval by the
30	commissioner, such project may be undertaken pursuant to the provisions
31	of this title and any other applicable provision of law.
32	5. No monies shall be expended for source water protection land acqui-
33	sition projects except pursuant to an appropriation therefor.
34	§ 3. The public health law is amended by adding a new section 1114 to
35	read as follows:
36	§ 1114. Lead service line replacement grant program. 1. To the extent
37	practicable, the department shall allocate appropriated funds equitably
38	among regions of the state. Within each region, the department shall
39	give priority to municipalities that have a high percentage of elevated
40	childhood blood lead levels, based on the most recent available data. In
41	distributing the awards allocated for each region to such priority muni-
42	cipalities, the department shall also consider whether the community is
43	low income and the number of lead service lines in need of replacement.
44 45	The department may request that such municipalities provide such documentation as the department may require to confirm award eligibil-
45 46	
40 47	<u>ity.</u> 2. The department shall publish information, application forms, proce-
48	dures and guidelines relating to the program on its website and in a
49	manner that is accessible to the public and all potential award recipi-
50	ents.
51	§ 4. Article 27 of the environmental conservation law is amended by
52	adding a new title 12 to read as follows:
53	TITLE 12
54	MITIGATION AND REMEDIATION OF CERTAIN SOLID WASTE SITES AND
55	DRINKING WATER CONTAMINATION



1	Section 27-1201. Definitions.
2	27-1203. Mitigation and remediation of solid waste sites.
3	27-1205. Mitigation of contaminants in drinking water.
4	27-1207. Use and reporting of the solid waste mitigation account
5	and the drinking water response account.
6	27-1209. Rules and regulations.
7	27-1211. Protection against liability and liability exemptions
8	and defenses.
9	<u>§ 27-1201. Definitions.</u>
10	When used in this title:
11	1. "Contaminant" means emerging contaminants pursuant to section elev-
12	en hundred twelve of the public health law, and, for solid waste sites,
13	shall include parameters identified in regulations required to be tested
14	by landfills to ensure the protection of groundwater quality.
15	2. "Contamination" or "contaminated" means the presence of a contam-
16	inant in any environmental media, including soil, surface water, or
17	groundwater, sufficient to cause or substantially contribute to an
18	exceedance of standards, criteria, and guidance values established by
19	the department or drinking water standards, including maximum contam-
20	inant levels, notification levels, maximum residual disinfectant levels
21	or action levels established by the department of health.
22	3. "Drinking water contamination site" means any area or site that is
23	causing or substantially contributing to the contamination of one or
24	more public drinking water supplies.
25	4. "Drinking water response account" means the account established
26	pursuant to subdivision one of section ninety-seven-b of the state
27	finance law.
28	5. "Mitigation" means the investigation, sampling, management, or
29	treatment of a solid waste site or drinking water contamination site
30 21	required to ensure the availability of safe drinking water, including
31 32	public water systems and individual onsite water supply systems neces- sary to meet standards, criteria, and guidance values established by the
33	department or drinking water standards, including maximum contaminant
34	levels, notification levels, maximum residual disinfectant levels, or
35	action levels established by the department of health that can be
36	successfully carried out with available, implementable and cost-effec-
37	tive technology. "Mitigation" activities include but are not limited to
38	the installation of drinking water treatment systems, the provision of
39	alternative water supplies, or repair of a landfill cap. "Mitigation"
40	does not mean remediation.
41	6. "Solid waste site" means a site where (a) the department has a
42	reasonable basis to suspect that the illegal disposal of solid waste
43	occurred or, (b) a court of competent jurisdiction has determined that
44	an illegal disposal of solid waste occurred, or (c) the department knows
45	or has a reasonable basis to suspect that an inactive solid waste
46	management facility which does not have a current monitoring program is
47	impacting or contaminating one or more drinking water supplies. Solid
48	waste site shall not include a site which is currently subject to inves-
49	tigation or remediation pursuant to title thirteen or fourteen of this
50	article or any site which completed such programs and was either
51	delisted by or received a certificate of completion from the department.
52	7. "Solid waste mitigation account" means the account established
53	pursuant to subdivision one of section ninety-seven-b of the state
54	finance law.
55	8. "Solid waste management facility" means any facility employed for
56	solid waste collection, processing and disposal including processing

systems, including resource recovery facilities or other facilities for 1 2 reducing solid waste volume, sanitary landfills, regulated facilities 3 for the disposal of construction and demolition debris, regulated plants and facilities for compacting, composting or pyrolization of solid 4 wastes, regulated mulch facilities, landspreading and soil amending 5 6 operations, and incinerators. 7 § 27-1203. Mitigation and remediation of solid waste sites. 8 The solid waste site priority in this state is to mitigate and 9 remediate any solid waste site causing or substantially contributing to 10 impairments of drinking water quality which may impact public health. 11 2. The department shall, in conjunction with the department of health, 12 develop a system to select and prioritize sites for mitigation and reme-13 diation, considering the effects on the health of the state. 14 3. Beginning July first, two thousand nineteen and annually thereaft-15 er, the department shall prepare and submit to the governor and the 16 legislature a comprehensive plan designed to mitigate and remediate 17 solid waste sites. This plan shall establish a solid waste site miti-18 gation and remediation priority list. 19 4. The department is authorized to conduct preliminary investigations 20 to determine if a solid waste site is causing or substantially contrib-21 uting to imminent or documented drinking water source contamination. The 22 department, and any employee, agent, consultant or other person acting at the direction of the department, shall have the authority to enter 23 24 all solid waste sites for the purpose of preliminary investigation, 25 mitigation and remediation, provided that the department has made a 26 reasonable effort to identify the owner of such property to notify such 27 owner of the intent to enter the property at least ten days in advance. 28 In the event the commissioner of health makes a written determination 29 that such ten day notice will not be sufficient to protect public health, two days' written notice shall be sufficient. Any inspection of 30 31 the property and each taking of samples shall take place at reasonable 32 times and shall be commenced and completed with reasonable promptness. 33 Such preliminary investigation shall include: 34 a. conducting or causing to be conducted field investigations of high 35 priority sites identified in the plan established pursuant to subdivi-36 sion three of this section for the purpose of further defining necessary 37 mitigation and remediation, if any. To the maximum extent practicable, 38 the department shall utilize existing information including, but not limited to, subsurface borings and any analyses or tests of samples 39 40 taken from such sites by owners or operators, other responsible persons 41 and any federal or non-federal agencies; 42 b. making any subsurface borings and any analyses or tests of samples 43 taken as may be necessary or desirable to effectuate the field investi-44 gations of sites as required under this section subject to the require-45 ments of this title. If the owner of a solid waste site can be identi-46 fied, the department shall provide such owner with a minimum of ten 47 days' written notice of the intent to take such borings or samples in accordance with the provisions of subdivision twelve of section 27-1205 48 49 of this title. If any analysis is made of such samples, a copy of the 50 results of such analysis shall be furnished promptly to the owner or 51 operator. Upon the completion of all sampling activities, the department 52 or authorized person shall remove, or cause to be removed, all equipment 53 and well machinery and return the ground surface of the property to its 54 condition prior to such sampling, unless the department or authorized 55 person, and the owner of the property shall otherwise agree;



1 c. making any record searches or document reviews as may be necessary 2 or desirable to effectuate the purposes of this section subject to the 3 requirements of this title. 5. If the department or the department of health, as appropriate, 4 determines that a solid waste site poses a significant threat to the 5 6 public health or environment due to hazardous waste, the department 7 shall refer the site to the inactive hazardous waste disposal site reme-8 dial program pursuant to title thirteen of this article. 9 6. Where the department has determined through a preliminary investi-10 gation conducted pursuant to subdivision four of this section that a solid waste site is causing or substantially contributing to contam-11 12 ination of a public drinking water supply, the owner or operator of a 13 solid waste site shall, at the department's written request, cooperate 14 with any and all remedial measures deemed necessary and which shall be 15 undertaken by the department, in conjunction with the department of 16 health, for the mitigation and remediation of a solid waste site or area 17 which is necessary to ensure that drinking water meets applicable standards, including maximum contaminant levels, notification levels, maximum 18 19 residual disinfectant levels, or action levels established by the 20 department of health. The department may implement necessary measures to 21 mitigate and remediate the solid waste site within amounts appropriated 22 for such purposes from the solid waste mitigation account. 23 § 27-1205. Mitigation of contaminants in drinking water. 24 1. Whenever the commissioner of health has required a public water 25 system to take action to reduce exposure to an emerging contaminant or 26 emerging contaminants and has determined that the concentration of the 27 emerging contaminant constitutes an actual or potential threat to public 28 health based on the best available scientific information pursuant to section eleven hundred twelve of the public health law, the department 29 30 in conjunction with the department of health, may, pursuant to the Clean Water Infrastructure Act of 2017 and within the up to one hundred thirty 31 million dollars appropriated for such purposes, undertake all reasonable 32 33 and necessary additional mitigation measures in any area of the state in which contamination is known to be present. The department shall employ 34 35 feasible measures that can be successfully carried out with available, 36 implementable and cost effective technology. Such area shall include, at 37 a minimum, all properties served by the public water system, any indi-38 vidual onsite water supply systems impacted by the contamination, and 39 any land and any surface or underground water sources impacted by the 40 contamination. Such approved measures shall be protective of public 41 health and may include but not be limited to the installation of treat-42 ment systems or the provision of alternative water supply sources to 43 ensure that drinking water meets applicable standards, including maximum 44 contaminant levels, notification levels, maximum residual disinfectant 45 levels, or action levels established by the department of health. 46 2. If the department or the department of health, as applicable, 47 determines that a drinking water contamination site poses a significant threat to the public health or environment from a hazardous waste, the 48 49 department shall refer the site to the inactive hazardous waste disposal 50 site remedial program pursuant to title thirteen of this article. 51 3. Whenever the commissioner of health has required a public water 52 system to take action to reduce exposure to emerging contaminants and 53 has determined that the concentration of the emerging contaminant constitutes an actual or potential threat to public health based on the 54 55 best available scientific information pursuant to section eleven hundred twelve of the public health law: 56



1 a. the department shall have the authority to undertake directly in 2 conjunction with the department of health, the development and implemen-3 tation of all necessary and reasonable mitigation and remediation measures of drinking water contamination, as approved by the department of 4 5 health, to address emerging contaminants in public water supplies; 6 b. the commissioner may order, after notice and opportunity for a 7 hearing, the owner and/or operator of the drinking water contamination 8 site and/or any person responsible for such contamination to undertake 9 all reasonable and necessary mitigation and remediation, as approved by 10 the department of health, to ensure that drinking water meets applicable 11 standards, including maximum contaminant levels, notification levels, 12 maximum residual disinfectant levels, or action levels established by 13 the department of health, and employ feasible measures that can be 14 successfully carried out with available, implementable and cost effec-15 tive technology, subject to the approval of the department and the 16 department of health, at such site, and to implement such program within 17 reasonable time limits specified in the order. Provided, however, that in the event the commissioner of health shall issue an order pursuant to 18 19 subdivision three of section one thousand three hundred eighty-nine-b of the public health law, such order of the commissioner of health shall 20 21 supersede any order issued hereunder. 22 4. The department shall have the authority a. to delegate responsibil-23 ity for a specific drinking water contamination site to the municipality 24 in which such site is located and b. to contract with any other person 25 to perform necessary work in connection with such sites. 26 5. Section eight of the court of claims act or any other provision of 27 law to the contrary notwithstanding, the state shall be immune from 28 liability and action with respect to any act or omission done in the 29 discharge of the department's aforesaid responsibility pursuant to this title; provided, however, that this subdivision shall not limit the 30 31 liability which may otherwise exist for unlawful, willful, or malicious 32 acts or omissions on the part of the state, state agencies, or their 33 officers, employees or agents; or for the ownership or responsibility for the disposal of such contaminant, including liability for the cost 34 35 of remediation, pursuant to this section. 36 6. Whenever the commissioner of health, after investigation, finds: 37 a. that a public drinking water contamination site represents an actu-38 al or potential threat to the public health; and b. the threat makes it prejudicial to the public interest to delay 39 40 action until a hearing can be held pursuant to this title, the depart-41 ment may, pursuant to paragraph a of subdivision three of this section 42 and within the funds available to the department from the drinking water 43 response account, develop and implement, in conjunction with the depart-44 ment of health, all reasonable and necessary mitigation and remedial 45 measures to address drinking water contamination for such site to ensure 46 that drinking water meets applicable standards, including maximum 47 contaminant levels, notification levels, maximum residual disinfectant levels or action levels established by the department of health. Find-48 49 ings required pursuant to this subdivision shall be in writing and may 50 be made by the commissioner of health on an exparte basis subject to 51 judicial review. 52 7. Any order issued pursuant to paragraph b of subdivision three of 53 this section shall be issued only after notice and the opportunity for a hearing is provided to persons who may be the subject of such order. 54 The commissioner or the commissioner of health shall determine which 55

56 persons are responsible pursuant to said subdivision according to appli-



cable principles of statutory or common law liability. Such persons 1 2 shall be entitled to raise any defense set forth in section 27-1211 of 3 this title or common law defense at any such hearing and such defenses shall have the same force and effect at such hearings as they would have 4 5 in a court of law. In the event a hearing is held, no order shall be 6 issued by the commissioner under subdivision three of this section until 7 a final decision has been rendered. Any such order shall be reviewable 8 pursuant to article seventy-eight of the civil practice law and rules 9 within thirty days after service of such order. The commissioner or the commissioner of health may request the participation of the attorney 10 11 <u>general in such hearings.</u> 12 8. The commissioner shall make all reasonable efforts, in accordance 13 with the requirements of subdivision six of section ninety-seven-b of 14 the state finance law, to recover all mitigation costs incurred pursuant 15 to subdivisions one and three of this section from the owner and/or 16 operator of the drinking water contamination site. 17 9. When a municipality develops and implements remediation to address a drinking water contamination site, determined pursuant to subdivision 18 19 four of this section, and the plan is approved by the department, in 20 conjunction with the department of health, which is owned or has been 21 operated by such municipality or when the department, in conjunction 22 with the department of health, pursuant to an agreement with a municipality, develops and implements such remediation, the commissioner 23 24 shall, in the name of the state, agree in such agreement to provide from 25 the drinking water response account, within the limitations of appropri-26 ations therefor, seventy-five percent of the eligible design and 27 construction costs of such program for which such municipality is liable 28 solely because of its ownership and/or operation of such site and which 29 are not recovered from or reimbursed or paid by a responsible party or the federal government. 30 31 10. Nothing contained within this section shall be construed as 32 impairing or in any manner affecting the right or jurisdiction of the 33 attorney general to seek appropriate relief pursuant to his or her stat-34 utory or common law authority. 35 11. Moneys for actions taken or to be taken by the department, the 36 department of health or any other state agency pursuant to this title 37 shall be payable directly to such agencies from the drinking water 38 response account pursuant to section ninety-seven-b of the state finance 39 law. 40 12. a. Every person shall, upon the written request of the commission-41 er or a designee, permit a duly designated officer or employee of the 42 department at all reasonable times to have access to and to copy all 43 books, papers, documents and records pertinent to an ongoing investi-44 gation of drinking water contamination identified in section 27-1203 of 45 <u>this title.</u> 46 b. The commissioner may sign and issue subpoenas in the name of the 47 department requiring the production of books, papers, documents and 48 other records and may take testimony by depositions under oath of any person relating to the ongoing investigation of a drinking water contam-49 50 ination identified in this title. Such subpoenas and depositions shall 51 be regulated by the state of New York's civil practice law and rules. 52 The commissioner may invoke the powers of the supreme court of the state 53 of New York to compel compliance with any such subpoena or any request 54 to take such depositions. c. When the department has substantial evidence that such drinking 55

56 water contamination site is causing or substantially contributing to the



1 contamination of drinking water, and subject to the applicable notice 2 provisions set forth in paragraph d of this subdivision, any duly designated officer or employee of the department, or of any state agency, and 3 any agent, consultant, contractor, or other person, including an employ-4 ee, agent, consultant, or contractor of a responsible person acting at 5 6 the direction of the department, so authorized in writing by the commis-7 sioner, may enter any drinking water contamination site and areas near 8 such site and inspect and take samples of wastes, soil, air, surface 9 water, and groundwater. In order to take such samples, the department or authorized person may utilize or cause to be utilized such sampling 10 11 methods as it determines to be necessary including, but not limited to, 12 soil borings and monitoring wells. 13 d. The department or authorized person shall not take any samples 14 involving the substantial disturbance of the ground surface of any prop-15 erty unless it has made a reasonable effort to identify the owner of the 16 property and to notify such owner of the intent to take such samples. If 17 the owner can be identified, the department shall provide such owner 18 with a minimum of ten days' written notice of the intent, unless such 19 owners and occupants consent to an earlier date, to take such samples, 20 unless the commissioner makes a written determination that such ten day 21 notice will not allow the department to protect the environment or 22 public health, in which case two days' written notice shall be suffi-23 cient. Any inspection of the property and each such taking of samples shall take place at reasonable times and shall be commenced and 24 25 completed with reasonable promptness. If any officer, employee, agent, consultant, contractor, or other person so authorized in writing by the 26 27 commissioner obtains any samples prior to leaving the premises, he or 28 she shall give to the owner or operator a receipt describing the sample obtained and, if requested, a portion of such sample equal in volume or 29 weight to the portion retained. If any analysis is made of such samples, 30 31 a copy of the results of such analysis shall be furnished promptly to 32 the owner or operator. Upon the completion of all sampling activities, 33 the department or authorized person shall remove, or cause to be removed, all equipment and well machinery and return the ground surface 34 35 of the property to its condition prior to such sampling, unless the 36 department or authorized person, and the owner of the property shall 37 otherwise agree. 38 e. The expense of any such mitigation by the department or the depart-39 ment of health shall be paid by the drinking water response account, but 40 may be recovered from any responsible person in any action or proceeding 41 brought pursuant to the state finance law, this title, other state or 42 federal statute, or common law if the person so authorized in writing is 43 an employee, agent, consultant, or contractor of a responsible person 44 acting at the direction of the department, then the expense of any such 45 sampling and analysis shall be paid by the responsible person. 46 f. Any duly designated officer or employee of the department or any 47 other state agency, and any agent, consultant, contractor, or other 48 person acting at the direction of the department, authorized in writing 49 by the commissioner, may enter any drinking water contamination site and 50 areas near such site to undertake all reasonable and necessary miti-51 gation and remediation for such site, provided: (a) the commissioner has 52 sent a written notice to the owners of record or any known occupants of 53 such site or nearby areas of the intended entry and work at least ten 54 days prior to such initial entry unless such owners and occupants consent to an earlier date; and (b) the department has substantial 55 evidence that such drinking water contamination site is causing or 56



substantially contributing to the contamination of drinking water. In 1 2 the event the commissioner of health makes a written determination that 3 such ten day notice will not be sufficient to protect public health, two 4 days' written notice shall be sufficient. § 27-1207. Use and reporting of the solid waste mitigation account and 5 6 the drinking water response account. 7 1. Pursuant to the clean water infrastructure act of two thousand 8 seventeen and within the up to one hundred thirty million dollars appro-9 priated for such purposes, mitigation and remediation efforts to address 10 public drinking water contamination from emerging contaminants and solid 11 waste sites causing or substantially contributing to drinking water 12 impairment that impacts public health may be conducted in accordance 13 with this title. 14 2. The solid waste mitigation account shall be made available to the 15 department and the department of health, as applicable, for the follow-16 ing purposes: 17 a. enumeration and assessment of solid waste sites; b. investigation and environmental characterization of solid waste 18 19 sites, including environmental sampling; 20 c. mitigation and remediation of solid waste sites; 21 d. monitoring of solid waste sites; and 22 e. administration and enforcement of the requirements of section 23 27-1203 of this title. 24 3. The drinking water response account shall be made available to the 25 department and the department of health, as applicable, for the follow-26 ing purposes: 27 a. mitigation of drinking water contamination; 28 b. investigation of drinking water contamination; 29 c. remediation of drinking water contamination; and 30 d. administration and enforcement of the requirements of this title 31 except the provisions of section 27-1203. 32 4. On or before July first, two thousand nineteen and July first of 33 each succeeding year, the department shall report on the status of the 34 programs. 35 § 27-1209. Rules and regulations. 36 The department shall promulgate rules and regulations necessary and 37 appropriate to carry out the purposes of this title and shall at a mini-38 mum include such provisions for requisite due process and meaningful 39 public participation as are appropriate to any action undertaken pursu-40 ant to this title, taking into consideration the nature and degree of 41 any public health impacts and the urgency of any need for investigation 42 or remediation of contamination. 43 § 27-1211. Protection against liability and liability exemptions and 44 <u>defenses.</u> 45 In addition to common law defenses, the provisions of sections 27-1321 46 and 27-1323 of this article shall apply to a solid waste site that is 47 causing or substantially contributing to contamination of public drinking water supplies or a drinking water contamination site pursuant to 48 49 this title and shall apply to emerging contaminants in the same way 50 applicable to hazardous materials and hazardous wastes. 51 § 5. Subdivisions 1, 2 and 6 and paragraphs (i) and (j) of subdivision 52 3 of section 97-b of the state finance law, subdivision 1 as amended and paragraph (j) of subdivision 3 as added by section 4 of part I of chap-53 ter 1 of the laws of 2003, subdivision 2 as amended by section 5 of part 54 X of chapter 58 of the laws of 2015, paragraph (i) of subdivision 3 as 55 amended by section 1 of part R of chapter 59 of the laws of 2007, subdi-56



1 vision 6 as amended by chapter 38 of the laws of 1985, are amended and 2 two new paragraphs (k) and (l) are added to subdivision 3 to read as 3 follows: 1. There is hereby established in the custody of the state comptroller 4 5 a nonlapsing revolving fund to be known as the "hazardous waste remedial fund", which shall consist of a "site investigation and construction 6 account", an "industry fee transfer account", an "environmental restora-7 8 tion project account", "hazardous waste cleanup account", [and] a "hazardous waste remediation oversight and assistance account", a 9 "solid waste mitigation account", and a "drinking water response 10 11 account". 12 2. Such fund shall consist of all of the following: 13 (a) moneys appropriated for transfer to the fund's site investigation 14 and construction account; (b) all fines and other sums accumulated in 15 the fund prior to April first, nineteen hundred eighty-eight pursuant to 16 section 71-2725 of the environmental conservation law for deposit in the 17 fund's site investigation and construction account; (c) all moneys collected or received by the department of taxation and finance pursuant 18 19 to section 27-0923 of the environmental conservation law for deposit in the fund's industry fee transfer account; (d) all moneys paid into the 20 21 fund pursuant to section 72-0201 of the environmental conservation law 22 which shall be deposited in the fund's industry fee transfer account; 23 (e) all moneys paid into the fund pursuant to paragraph (b) of subdivi-24 sion one of section one hundred eighty-six of the navigation law which 25 shall be deposited in the fund's industry fee transfer account; (f) all [monies] moneys recovered under sections 56-0503, 56-0505 and 56-0507 of 26 27 the environmental conservation law into the fund's environmental resto-28 ration project account; (g) all fees paid into the fund pursuant to 29 section 72-0402 of the environmental conservation law which shall be deposited in the fund's industry fee transfer account; 30 (h) payments received for all state costs incurred in negotiating and overseeing the 31 implementation of brownfield site cleanup agreements pursuant to title 32 33 fourteen of article twenty-seven of the environmental conservation law shall be deposited in the hazardous waste remediation oversight and 34 assistance account; (i) all moneys recovered pursuant to title twelve of 35 36 article twenty-seven of the environmental conservation law into the 37 fund's drinking water response account; and [(i)] (j) other moneys cred-38 ited or transferred thereto from any other fund or source for deposit in 39 the fund's site investigation and construction account. 40 (i) with respect to moneys in the hazardous waste remediation over-41 sight and assistance account, non-bondable costs associated with hazard-42 ous waste remediation projects. Such costs shall be limited to agency 43 staff costs associated with the administration of state assistance for 44 brownfield opportunity areas pursuant to section nine hundred seventy-r 45 of the general municipal law, agency staff costs associated with the 46 administration of technical assistance grants pursuant to titles thir-

47 teen and fourteen of article twenty-seven of the environmental conserva-48 tion law, and costs of the department of environmental conservation 49 related to the geographic information system required by section 3-0315 50 of the environmental conservation law; [and]

(j) with respect to moneys in the hazardous waste remediation oversight and assistance account, technical assistance grants pursuant to titles thirteen and fourteen of article twenty-seven of the environmental conservation law[.];

55 (k) with respect to moneys in the solid waste mitigation account, when 56 allocated, shall be available to the department of environmental conser-



1 vation to undertake mitigation and remediation as the department of 2 environmental conservation may determine necessary related to a solid waste site pursuant to title twelve of article twenty-seven of the envi-3 ronmental conservation law which indicates that conditions on such prop-4 5 erty are impairing drinking water quality and to ensure the provision of 6 safe drinking water, provided however, that no more than five million 7 dollars will be available annually for such account; and 8 (1) with respect to moneys in the drinking water response account, 9 when allocated, shall be available to the department of environmental conservation, and to the department of health, to undertake mitigation 10 11 and remediation as the departments may determine necessary related to a drinking water contamination site pursuant to title twelve of article 12 13 twenty-seven of the environmental conservation law which indicates that 14 conditions on such property are impairing drinking water quality, 15 provided however, that no more than twenty million dollars will be 16 available annually for such account. 17 6. The commissioner of the department of environmental conservation 18 shall make all reasonable efforts to recover the full amount of any 19 funds expended from the fund pursuant to paragraph (a) and paragraph (1) of subdivision three of this section through litigation or cooperative 20 21 agreements with responsible persons. Any and all moneys recovered or 22 reimbursed pursuant to this section through voluntary agreements or 23 court orders shall be deposited with the comptroller and credited to the 24 account of such fund from which such expenditures were made. 1. This section shall be known and be cited as the "New York 25 § 6. 26 State water infrastructure improvement act of 2017". 27 2. For purposes of this act: 28 a. "water quality infrastructure project" shall mean "sewage treatment 29 works" as defined in section 17-1903 of the environmental conservation law or "eligible project" as defined in paragraphs (a), (b), (c) and (e) 30 of subdivision 4 of section 1160 of the public health law. 31 32 b. "construction" shall mean: 33 (i) for sewage treatment works, the same as defined in section 17-1903 34 of the environmental conservation law; and for eligible projects, the same meaning as defined in section 35 (ii) 36 1160 of the public health law. 37 c. "municipality" shall mean any county, city, town, village, district 38 corporation, county or town improvement district, school district, Indi-39 an nation or tribe recognized by the state or the United States with a 40 reservation wholly or partly within the boundaries of New York state, 41 any public benefit corporation or public authority established pursuant 42 to the laws of New York or any agency of New York state which is empowered to construct and operate a water quality infrastructure 43 44 project, or any two or more of the foregoing which are acting jointly in 45 connection with a water quality infrastructure project. 46 a. The environmental facilities corporation shall undertake and 3. 47 provide state financial assistance payments, from funds appropriated for such purpose, to municipalities in support of water quality infrastruc-48 49 ture projects provided, however, in any such year that funds are appro-50 priated for such purpose, no municipality shall receive more than five 51 million dollars of appropriated funds. Such state financial assistance 52 payments shall be awarded only to water quality infrastructure projects 53 for: (i) replacement or repair of infrastructure; or 54 55 (ii) compliance with environmental and public health laws and regulations related to water quality. 56



1 b. Any state financial assistance payment awarded pursuant to this act 2 shall not exceed seventy-five percent of the project cost. 3 c. A municipality may make an application for such state financial assistance payment, in a manner, form and timeframe and containing such 4 information as the environmental facilities corporation may require 5 provided however, such requirements shall not include a requirement for 6 7 prior listing on the intended use plan. 8 d. A municipality shall not be required to accept environmental facilities corporation loan financing in order to obtain a state financial 9 assistance payment pursuant to this act if it can provide proof of 10 having obtained similarly low cost financing or other funding from 11 12 another source. 13 e. In awarding such financial assistance payments, the corporation 14 shall be prohibited from requiring as a condition of receipt, or other-15 wise giving preference to, applicants who agree to participate in the 16 design, creation, or implementation of a municipal consolidation plan. 17 In awarding such state financial assistance payments, the environf. 18 mental facilities corporation shall consider and give preference to 19 municipalities that meet the hardship criteria established by the envi-20 ronmental facilities corporation pursuant to section 1285-m of the 21 public authorities law and projects that result in the greatest water 22 quality improvement or greatest reduction in serious risk to public 23 health. For the purposes of this act, the hardship criteria of section 24 1285-m of the public authorities law shall also apply to sewage treatment works as defined in section 17-1903 of the environmental conserva-25 tion law. 26 27 g. Water quality infrastructure projects financed with state financial 28 assistance made available pursuant to this section shall be subject to 29 the requirements of article 8 of the labor law, the requirements of article 17-B of the executive law and the requirements and provisions of 30 all applicable minority- and women-owned business mandates including, 31 but not limited to article 15-A of the executive law. 32 33 § 7. The public authorities law is amended by adding a new section 34 1285-s to read as follows: § 1285-s. New York state intermunicipal water infrastructure grants 35 36 program. 1. For purposes of this section: (a) "water quality infrastructure project" shall mean "sewage treat-37 38 ment works" as defined in section 17-1903 of the environmental conservation law or "eligible project" as defined in paragraphs (a), (b), (c) 39 40 and (e) of subdivision four of section eleven hundred sixty of the 41 public health law. 42 (b) "construction" shall mean: 43 (i) for sewage treatment works, the same meaning as defined in section 44 17-1903 of the environmental conservation law; and 45 (ii) for eligible projects, the same meaning as defined in section one 46 thousand one hundred sixty of the public health law. 47 <u>"municipality" shall mean any county, city, town, village,</u> (c) district corporation, county or town improvement district, school 48 district, Indian nation or tribe recognized by the state or the United 49 50 States with a reservation wholly or partly within the boundaries of New 51 York state, any public benefit corporation or public authority estab-52 lished pursuant to the laws of New York or any agency of New York state 53 which is empowered to construct and operate an intermunicipal water quality infrastructure project, or any two or more of the foregoing 54 55 which are acting jointly in connection with an intermunicipal water

56 <u>quality infrastructure project.</u>



1 2. (a) The environmental facilities corporation shall undertake and 2 provide state financial assistance payments, from funds appropriated for 3 such purpose, to municipalities in support of intermunicipal water quality infrastructure projects provided, however, in any such year that 4 funds are appropriated for such purpose, each project shall receive an 5 6 award of up to ten million dollars of appropriated funds; provided that 7 such monies shall not exceed sixty percent of the total project cost; 8 and provided further that the total state financial assistance payment 9 for the project does not represent a disproportionate share of the total 10 amount of available funding in any given year. Intermunicipal water quality infrastructure projects shall serve 11 (b) 12 multiple municipalities and may include a shared water quality infras-13 tructure project or interconnection of multiple municipal water quality 14 infrastructure projects and shall be awarded only to water quality 15 infrastructure projects for: 16 (i) construction, replacement or repair of infrastructure provided, 17 however, that such assistance shall not be awarded for construction to 18 exclusively support residential or commercial development; or 19 (ii) compliance with environmental and public health laws and regu-20 lations related to water quality. 21 (c) Cooperating municipalities may make an application for an intermu-22 nicipal water infrastructure grant, in a manner, form and timeframe and containing such information as the environmental facilities corporation 23 24 may require provided however, such requirements shall not include a 25 requirement for prior listing on the intended use plan. (d) Cooperating municipalities shall not be required to accept envi-26 27 ronmental facilities corporation loan financing in order to obtain a 28 state financial assistance payment pursuant to this section if it can 29 provide proof of having obtained similarly low cost financing or other 30 funding from another source. 31 (e) In awarding financial assistance payments, the corporation shall be prohibited from requiring as a condition of receipt, or otherwise 32 33 giving preference to, applicants who agree to participate in the design, 34 creation, or implementation of a municipal consolidation plan. 35 Intermunicipal water quality infrastructure projects financed with 3. 36 state financial assistance made available pursuant to this section shall 37 be subject to the requirements of article eight of the labor law, the 38 requirements of article seventeen-B of the executive law and the requirements and provisions of all applicable minority- and women-owned 39 40 business mandates including, but not limited to article fifteen-A of the 41 executive law. 42 § 8. The public authorities law is amended by adding a new section 43 1285-t to read as follows: 44 § 1285-t. Water infrastructure emergency financial assistance. 1. For 45 purposes of this section, "municipality" means any county, city, town, 46 village, district corporation, county or town improvement district, 47 school district, Indian nation or tribe recognized by the state or the United States with a reservation wholly or partly within the boundaries 48 of New York state, any public benefit corporation or public authority 49 50 established pursuant to the laws of New York or any agency of New York 51 state which is empowered to construct and operate a wastewater or drink-52 ing water infrastructure project, or any two or more of the foregoing 53 which are acting jointly in connection with such a project. 54 2. Upon a municipality's formal declaration of an emergency, the muni-55 cipality shall provide the department of environmental conservation or 56 the department of health, as appropriate, with information to assess any



1 situation in which the state of the municipality's wastewater or water 2 infrastructure is causing or may cause an imminent hazard to the public 3 health or welfare, or the environment. After its assessment, if either department determines the state of the infrastructure is resulting or 4 may result in imminent hazard to the public health or welfare, or to the 5 6 environment, the corporation shall provide temporary emergency assist-7 ance, within amounts appropriated, to the municipality in an amount not 8 to exceed reasonable costs for infrastructure construction, replacement, 9 or repair, and related engineering costs, that is immediately necessary 10 to eliminate or substantially reduce such hazard. 11 3. <u>The corporation and the municipality shall enter into an agreement</u> 12 signed by an officer duly authorized by the governing body of the muni-13 cipality pursuant to which the corporation shall transmit emergency 14 financial assistance in an amount determined by the department of envi-15 ronmental conservation or the department of health, as applicable, as 16 necessary to address the imminent hazard, and shall provide the assist-17 ance payment to the municipality within two business days of receipt of such determination. The municipality shall submit an itemized cost esti-18 19 mate from the municipality's engineer or engineering consultant to the 20 applicable department sufficient to make such determination. 21 4. No later than fourteen days after the cessation of the emergency, 22 the municipality shall provide to the corporation documentation for all 23 costs paid with the emergency assistance and refund to the corporation 24 any portion of the financial assistance not used or committed to pay for 25 the construction, replacement, or repair and related engineering costs 26 determined to be necessary under subdivision one of this section. 27 5. Subject to appropriation or duly authorized indebtedness, the muni-28 cipality shall repay the corporation within one year of its receipt of emergency financial assistance the full amount of such assistance 29 provided to it under this section. The corporation may extend the time 30 to repay for up to one additional year if the corporation determines in 31 32 its sole discretion that such an extension is warranted under the 33 circumstances. 34 6. Nothing in this section nullifies the eligibility of a municipality 35 for other infrastructure funding, including grant, which may be provided 36 by the state for water infrastructure directly related to the infras-37 tructure for which emergency financial assistance is awarded under this 38 section, including funding the municipality could use to repay the emer-39 gency financial assistance. If the municipality receives such other 40 funding from the state or any financial assistance from a third party 41 for the same infrastructure, the municipality shall within ten days 42 first repay the corporation the outstanding balance of the emergency 43 financial assistance before paying any remaining costs for the water 44 infrastructure. 45 § 9. The public authorities law is amended by adding a new section 46 1285-u to read as follows: 47 § 1285-u. Septic system replacement fund. 1. Definitions. For purposes of this section: 48 49 "Cesspool" means a drywell that receives untreated sanitary waste (a) 50 containing human excreta, which sometimes has an open bottom and/or 51 perforated sides. 52 (b) "Fund" means the state septic system replacement fund created by 53 this section. 54 (c) "Participating county" means a county that notifies the corpo-55 ration that it seeks authority to administer a septic system replacement 56 program within its municipal boundaries and agrees to abide by the



1 program's goals, guidelines, eligibility requirements and reimbursement 2 procedures and provide information to property owners regarding program 3 parameters including eligibility criteria. (d) "Septic system" means a system that provides for the treatment 4 5 and/or disposition of the combination of human and sanitary waste with 6 water not exceeding one thousand gallons per day, serving a single 7 parcel of land, including residences and small businesses. 8 (e) "Septic system project" means the replacement of a cesspool with a 9 septic system, the installation, replacement or upgrade of a septic 10 system or septic system components, or installation of enhanced treatment technologies, including an advanced nitrogen removal system, to 11 12 significantly and quantifiably reduce environmental and/or public health 13 impacts associated with effluent from a cesspool or septic system to 14 groundwater used as drinking water, or a threatened or an impaired 15 waterbody. 16 "Small business" means any business which is resident in this (f) 17 state, independently owned and operated, not dominant in its field, and employing not more than one hundred individuals. 18 19 2. (a) There is hereby created the state septic system replacement 20 fund, which shall be administered by the corporation to reimburse prop-21 erty owners for up to fifty percent of the eligible costs incurred for 22 eligible septic system projects, provided that no property owner shall 23 be reimbursed more than ten thousand dollars. 24 (b) Eligible costs include design and installation costs, and costs of 25 the system, system components, or enhanced treatment technologies, but shall not include costs associated with routine maintenance such as a 26 27 pump out of a septic tank. 28 (c) The department of environmental conservation, in consultation with 29 the department of health and participating counties, shall from the list of participating counties establish priority geographic areas and, in 30 31 the absence of county information, identify eligible septic system 32 projects, based on an area's vulnerability to contamination, including 33 the presence of a sole source aquifer, or known water quality impair-34 ment, population density, soils, hydrogeology, climate, and reasonable 35 ability for septic system projects to mitigate water quality impacts. 36 The department of environmental conservation may delegate to a partic-37 ipating county the identification of priority geographic areas. The 38 department of environmental conservation, in consultation with partic-39 <u>ipating counties in which priority areas have been identified, shall</u> 40 determine the amount of money from the fund to be provided to each 41 participating county based on density, demand for reimbursement from the 42 fund and the criteria used to establish the priority geographic areas. 43 The corporation shall publish information, application forms, procedures 44 and guidelines relating to the program on its website and in a manner 45 that is accessible to the public. 46 (d) The corporation shall provide state financial assistance payments 47 from the fund, from moneys appropriated by the legislature and available for that purpose, to participating counties to administer a septic 48 system replacement program to support septic system projects within 49 50 their municipal boundaries undertaken by property owners within their 51 <u>municipal boundaries. Where such project is located in a priority</u> 52 geographic area identified by the department of environmental conserva-53 tion as threatened or impaired by nitrogen, including groundwater used 54 as drinking water, such septic system project must reduce nitrogen

55 levels by at least thirty percent.



1 (e) The corporation shall make payments monthly to a participating 2 county upon the receipt by the corporation of a certification from the 3 participating county of the total costs incurred by property owners within its municipal boundaries for septic system projects within its 4 municipal boundaries that are eligible for reimbursement from the fund. 5 6 3. (a) A participating county shall notify property owners who may be 7 eligible to participate in the program. Determinations of eligibility 8 will be made by the participating county based on the published program 9 criteria and consideration of a property's location in relation to a 10 waterbody, impacts to groundwater used as drinking water, and the condi-11 tion of the property owner's current septic system as determined by: 12 (i) the county health department official; or 13 (ii) other designated authority having jurisdiction, pursuant to 14 septic inspections required by a municipal separate storm sewer system 15 permit; or 16 (iii) a septic contractor pursuant to the applicable county sanitary 17 code. 18 (b) An owner of property served by a septic system or cesspool may 19 apply to a participating county on an application substantially in the form provided by the corporation. 20 21 (c) Property owners in participating counties must have signed a prop-22 erty owner participation agreement with the county before the start of the design phase to be eligible for reimbursement from the fund. The 23 24 agreement must be substantially in the form provided by the corporation 25 and include, without limitation, the program's goals, guidelines, eligi-26 bility requirements and reimbursement procedures. 27 (d) A property owner may apply for reimbursement of eligible costs by 28 submitting to the participating county a reimbursement application, 29 which must include at least: 30 (i) a signed property owner participation agreement; (ii) a completed reimbursement application form substantially in the 31 32 form provided by the corporation; 33 (iii) any applicable design approval for the septic system project; 34 (iv) description of all work completed; and 35 (v) cost documentation and invoice or invoices for eligible costs. 36 (e) Participating counties will be responsible for reviewing their 37 property owners' applications and approving, modifying or denying the 38 reimbursement requests as appropriate and issuing reimbursement payments to property owners from financial assistance payments made to the county 39 40 from the fund. 41 (f) Participation in this program and the receipt of payments shall 42 not prevent participating counties from providing additional reimburse-43 ment to property owners. 44 (g) Subject to the limitations of paragraph (d) of this subdivision, 45 the county may set graduated incentive reimbursement rates for septic 46 system projects to maximize pollution reduction outcomes. 47 4. On or before March first, two thousand nineteen, and annually thereafter, the corporation shall submit to the governor, the temporary 48 49 president of the senate and the speaker of the assembly a report regard-50 ing the program. Such report shall include, but shall not be limited to, 51 the number and amount of grants provided, the number and amount of any 52 grants denied, geographic distribution of such projects and any other 53 information the corporation determines useful in evaluating the benefits

54 of the program.



1 § 10. Subdivision 4 of section 11-b of the soil and water conservation 2 districts law, as amended by chapter 538 of the laws of 1996, is amended 3 to read as follows: Eligible costs that may be funded pursuant to this section are 4 4. architectural and engineering services, plans and 5 specifications, including watershed based or individual agricultural nonpoint source 6 7 pollution assessments, consultant and legal services, conservation ease-8 ments and associated transaction costs specific to title thirty-three of article fifteen of the environmental conservation law and other direct 9 expenses related to project implementation. 10 11 § 11. Report on integrated database of infrastructure projects. The 12 environmental facilities corporation shall, in cooperation with the 13 departments of health and environmental conservation, study and prepare 14 a report to the legislature by January 30, 2018, on the feasibility of 15 establishing, an integrated database or platform incorporating past, 16 present, and ongoing infrastructure projects that have been applied for, 17 as well as those which have been funded through grant and loan programs 18 administered by the department of environmental conservation, the 19 department of health, and the environmental facilities corporation relating to water quality infrastructure for the purpose of informing 20 21 ongoing and future policy and funding initiatives. 22 § 12. Subdivision 1 of section 3-0315 of the environmental conservation law, as added by section 1 of part C of chapter 1 of the laws of 23 24 2003, is amended to read as follows: 25 1. The department in conjunction with the commissioner of health shall 26 create [or modify an existing] and maintain a geographic information 27 system, [and maintain such system] and associated data storage and 28 analytical systems for purposes of collecting, streamlining, and visual-29 izing integrated data, permits, and relevant sites about drinking water quality including, but not limited to, incorporating [information from 30 remedial programs under its jurisdiction, and] supply well and monitor-31 ing well data, emerging contaminant data, water quality monitoring data, 32 33 pertinent data from remediation and landfill sites, permitted discharge locations and other potential contamination risks to water supplies. 34 Such system shall also incorporate information from the source water 35 36 assessment program collected by the department of health, data from 37 annual water supply statements prepared pursuant to section eleven 38 hundred fifty-one of the public health law, information from the data-39 base pursuant to title fourteen of article twenty-seven of this chapter, 40 and any other existing data regarding soil and groundwater contamination 41 currently gathered by the department, as well as data on contamination 42 that is readily available from the United States geological survey and 43 other sources determined appropriate by the department. In addition to 44 facilitating interagency coordination and predictive analysis to protect 45 water quality, such system shall provide state agency information to the 46 public through a website, within reasonable limitations to ensure confi-47 dentiality and security. 48 § 13. If any clause, sentence, paragraph, section or part of this act

48 § 13. If any clause, sentence, paragraph, section of part of this act 49 shall be adjudged by any court of competent jurisdiction to be invalid, 50 such judgment shall not affect, impair or invalidate the remainder ther-51 eof, but shall be confined in its operation to the clause, sentence, 52 paragraph, section or part thereof directly involved in the controversy 53 in which such judgment shall have been rendered.

54 § 14. This act shall take effect immediately; provided, however, that 55 emergency financial assistance will not be available under section 56 1285-t of the public authorities law established pursuant to section



1 eight of this act until one hundred twenty days after this act shall
2 take effect; and provided further that the provisions of section nine of
3 this act shall take effect on the one hundred eightieth day after it
4 shall become a law.

§ 2. Severability clause. If any clause, sentence, paragraph, subdivi-5 sion, section or part of this act shall be adjudged by any court of 6 competent jurisdiction to be invalid, such judgment shall not affect, 7 8 impair, or invalidate the remainder thereof, but shall be confined in its operation to the clause, sentence, paragraph, subdivision, section 9 10 or part thereof directly involved in the controversy in which such judgment shall have been rendered. It is hereby declared to be the intent of 11 12 the legislature that this act would have been enacted even if such 13 invalid provisions had not been included herein.

14 § 3. This act shall take effect immediately provided, however, that 15 the applicable effective date of Parts A through T of this act shall be 16 as specifically set forth in the last section of such Parts.

