



The PsychU Guide To The New York Mental Health System

This resource is provided for informational purposes only and is not intended as reimbursement or legal advice.

You should seek independent, qualified professional advice to ensure that your organization is in compliance with the complex legal and regulatory requirements governing health care services, and that treatment decisions are made consistent with the applicable standards of care.

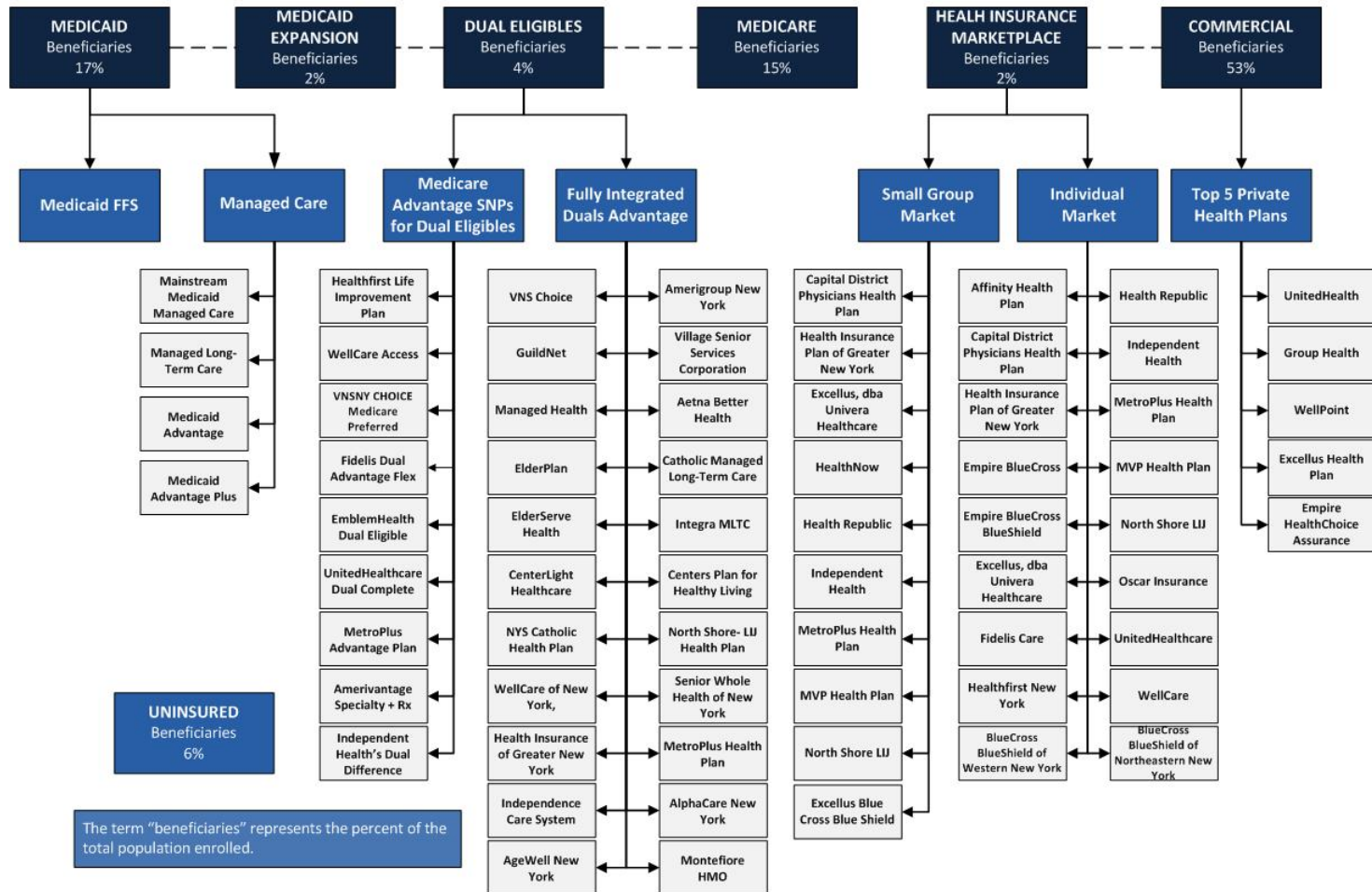
Except where otherwise indicated, the information provided is accurate to the best of Otsuka's knowledge as of December 2014.

The PsychU Guide To Mental Health Payers In New York - Contents

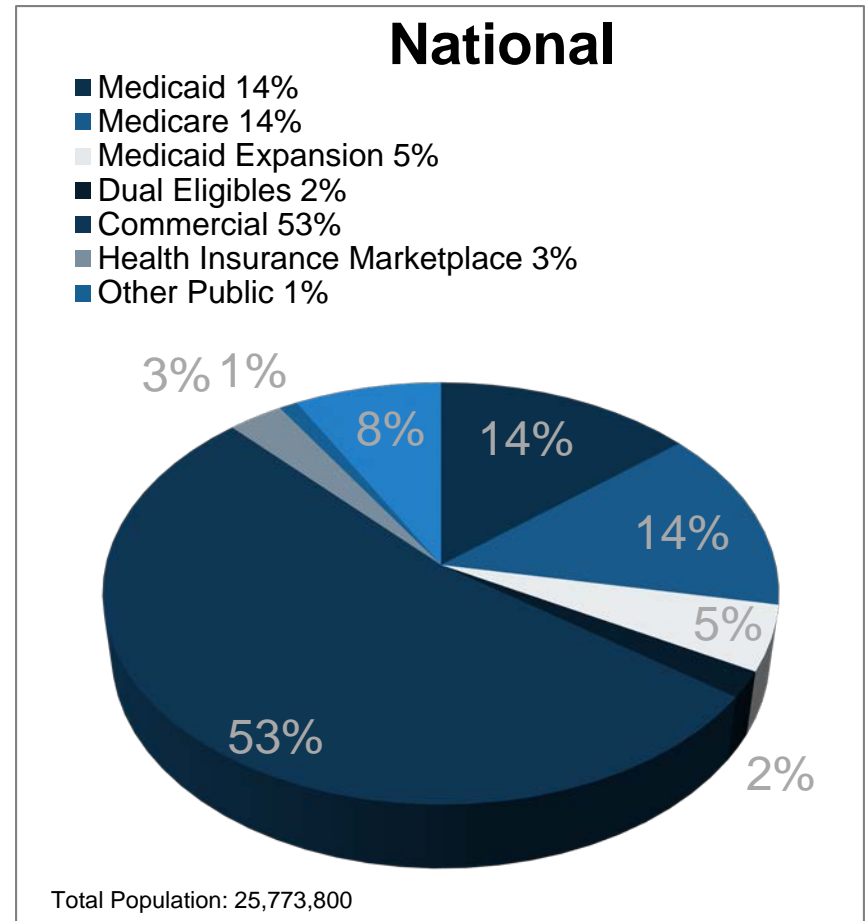
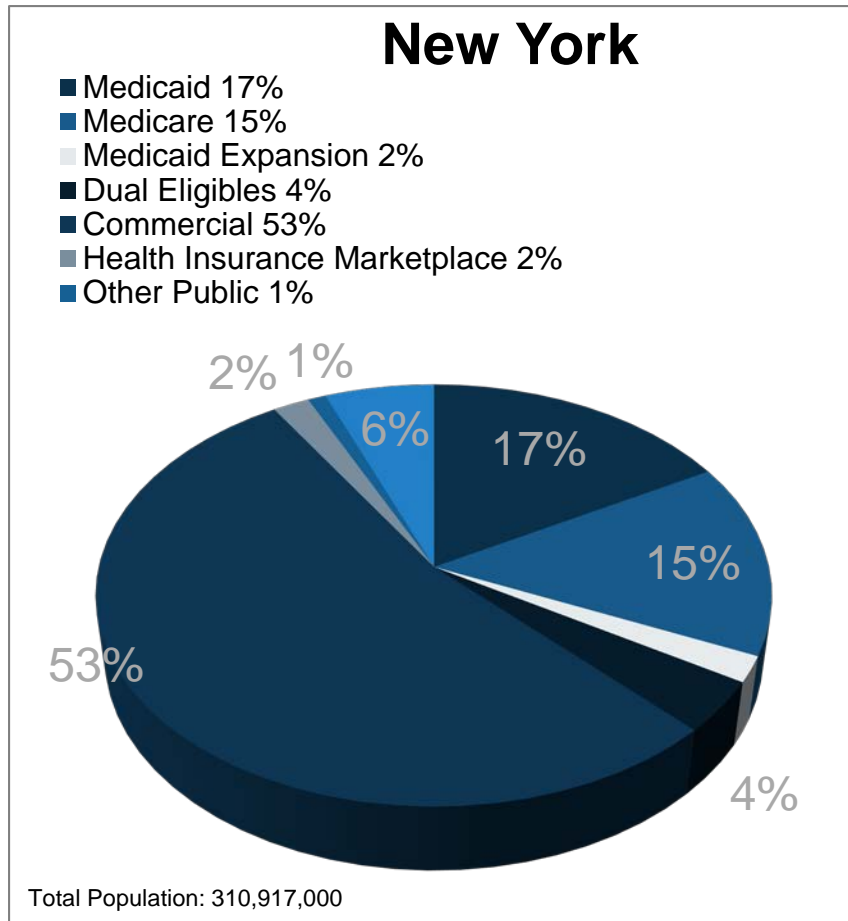
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Health Care Coverage Map Of New York

Total Population: 19,518,100
 SMI Population: 616,997



2. Population Distribution By Payer: National vs. State



*Based on 2011-2012 data

3. Largest Health Plans In New York By Enrollment

Plan Name	Plan Type	Enrollment*
UnitedHealth	Commercial Administrative Services Only (ASO)	4,220,315
Group Health, Inc.	Commercial	1,919,520
Medicare Fee-For-Service (FFS)	Medicare	1,877,165
WellPoint	Commercial ASO	1,611,200
Excellus Health Plan, Inc.	Commercial	1,422,322
Medicaid FFS	Medicaid	1,354,525
Empire HealthChoice Assurance, Inc.	Commercial	1,293,108
UnitedHealthcare Insurance Company of New York	Commercial	1,003,976
Oxford Health Insurance, Inc.	Commercial	833,882
Cigna	Commercial ASO	805,503

*Based on enrollment as of fourth quarter 2013

4. Largest Health Plans in New York By SMI Enrollment

Plan Name	Plan Type	Enrollment*	Estimated SMI Enrollment
Medicare FFS	Medicare	1,877,165	163,313
Medicaid FFS	Medicaid	1,354,525	67,726
NYS Catholic Health Plan	Medicaid	764,216	38,211
Health First PSHP	Medicaid	658,950	32,948
UnitedHealth	Commercial ASO	4,220,315	29,542
Metroplus Health Plan	Medicaid	324,050	16,203
Amerigroup	Medicaid	317,355	15,868
UnitedHealthcare Plan of New York	Medicaid	312,516	15,626
Group Health, Inc.	Commercial	1,919,520	13,437
WellPoint	Commercial ASO	1,611,200	11,278

*Based on enrollment as of fourth quarter 2013

5. New York Medicaid System Overview

Medicaid System Governance

State Medicaid Director	Jason A. Helgeson
State Medicaid Director reports to	Howard Zucker, M.D., Acting Commissioner of Health

Medicaid Financial Delivery System

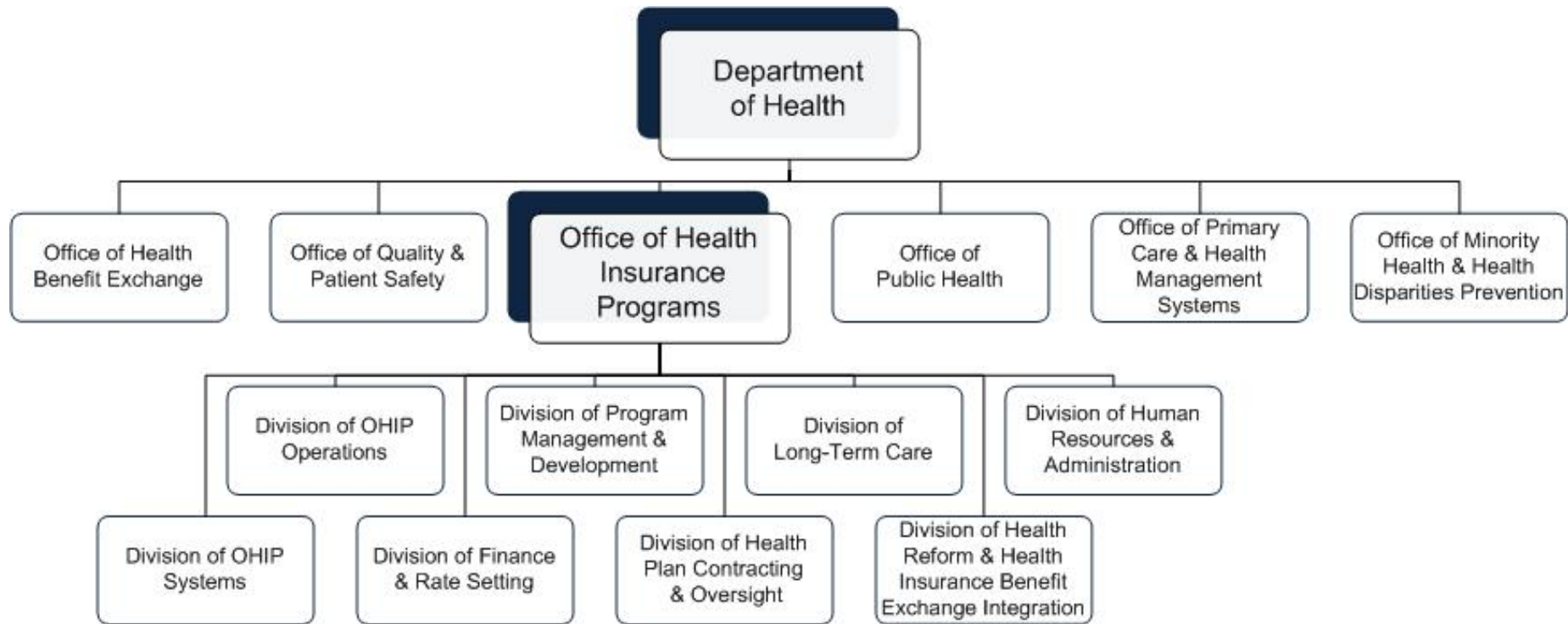
State participating in Medicaid expansion?	Yes
Is managed care mandatory for populations with SMI?	Yes
Is managed care mandatory for dual eligibles?	Yes
Total Medicaid population distribution	24.5% in FFS 75.5% in Managed Care
Medicaid beneficiaries with SMI: Primary service system	Because the SMI population must enroll in managed care unless they meet one of the FFS qualifications, the majority of the SMI population is served by managed care.

5. New York Medicaid System Overview

Medicaid Financing & Risk Arrangements: Behavioral Health

Traditional Behavioral Health Services	<ul style="list-style-type: none">• Mainstream Medicaid Managed Care Program (MMMC): Included in the MCO's capitation rate• Managed Long-Term Care (MLTC): Excluded from the MCO's capitation rate and provided FFS by the state• Population Receiving Supplemental Security Income (SSI): All behavioral health services are provided FFS and excluded from the MCO's capitation rate.
Specialty Behavioral Health Services	<ul style="list-style-type: none">• MMMC and MLTC: Excluded from the MCO's capitation rate and provided FFS by the state• SSI Population: All behavioral health services are provided FFS and excluded from the MCO's capitation rate.
Pharmaceuticals	<ul style="list-style-type: none">• MMMC: Included in the MCO's capitation rate• MLTC: Excluded from the MCO's capitation rate and provided FFS by the state• SSI Population: Some antipsychotics excluded from the MCO's capitation rate and provided FFS by the state. All other prescribed drugs included in the MCO's capitation rate.

6. New York Medicaid Governance



6. New York Medicaid Governance

Name	Position	Department
Howard Zucker, M.D.	Acting Commissioner of Health	Department of Health
Jason A. Helgerson	Medicaid Director	Office of Health Insurance Programs
Elizabeth J. Misa	Medicaid Deputy Director	Office of Health Insurance Programs
John Ulberg	Director	Division of Health Care Financing
Vallencia Lloyd	Director	Division of Health Plan Contracting and Oversight
Judith A. Arnold	Director	Division of Health Reform and Health Insurance Exchange
Mark L. Kissinger	Director	Division of Long Term Care
Vacant	Director	Division of OHIP Operations
Gregory Allen	Director	Division of Program Development and Management
Christine Hall-Finney	Director	Division of OHIP Systems

7. New York Medicaid System Benefits

Federally Mandated Services

1. Inpatient hospital services other than services in an institution for mental disease
2. Outpatient hospital services
3. Rural Health Clinic services
4. Federally Qualified Health Center services
5. Laboratory and X-ray services
6. Nursing facilities for individuals 21 and over
7. Early and Periodic Screening and Diagnosis and Treatment (EPSDT)
8. Family planning services and supplies for individuals of child-bearing age
9. Physician services
10. Medical and surgical services of a dentist
11. Home health services
12. Nurse midwife services
13. Nurse practitioner services
14. Pregnancy services, including tobacco cessation programs
15. Free standing birth centers
16. Non-emergency transportation to medical care

New York's Optional Services

1. Dental services
2. Physical, occupational, speech, hearing, and language therapy
3. Prescription drugs, over-the-counter drugs, and medical supplies
4. Durable medical equipment, including prosthetic and orthotic devices, hearing aids, and prescription shoes
5. Vision care services, including eyeglasses
6. Intermediate care facilities for the mentally retarded (ICF/DD)
7. Personal care services
8. Case management services
9. Hospice care services
10. Tuberculosis-related services
11. Inpatient and outpatient behavioral health services
12. Adult day care
13. Personal Emergency Response Services (PERS)
14. Renal dialysis
15. Home and community based services waivers (HCBS)
16. Care at Home Program (OPWDD)
17. Experimental or investigational treatment (covered on a case-by-case basis)

8. New York Medicaid Financing & Service Delivery

Medicaid System Characteristics		
Characteristics	Medicaid Fee-For-Service (FFS)	Medicaid Managed Care (MC)
Enrollment	1,354,525	4,178,416
SMI Enrollment	Because the SMI population must enroll in managed care unless they meet one of the FFS qualifications, the majority of the SMI population is served by managed care.	
Management	Department of Health	Mainstream Medicaid Managed Care Program (MMMMC): Full-risk MCOs Managed Long-Term Care (MLTC): Partially capitated MCOs
Payment Model	Fee-for-service	MMMMC: Capitated rate MLTC: Capitated rate for LTSS and some state plan services. All other services (including mental health) are FFS
Geographic Service Area	Statewide	MMMMC: Statewide MLTC: Will be statewide by February 2015

Total Medicaid 5,532,941 | Total Medicaid With SMI 276,647

9. New York Medicaid Fee-For-Service

Fee-for-service enrollment as of September 2014 was 1,354,525.

Mandatory Enrollment In FFS (excluded from managed care)

1. Individuals eligible for spend down
2. Individuals in state psychiatric facilities or state Office of Mental Health facility
3. Individuals in residential health care facilities
4. Foster care children in placement of a voluntary agency
5. Individuals expected to be Medicaid eligible for less than six months
6. Individuals receiving hospice
7. Youth in the care and custody of the commissioner of the Office of Family and Children Services
8. Individuals eligible for emergency Medicaid
9. Individuals in a state treatment facility run by the Office of People with Developmental Disabilities (OPWDD)

Optional Enrollment In FFS

1. Individuals residing in: Allegany, Cortland, Dutchess, Fulton, Montgomery, Putnam, Orange, Otsego, Schenectady, Seneca, Sullivan, Ulster, Washington, and Yates counties
2. Native Americans
3. Individuals in an alcohol substance abuse long-term residential program
4. HCBS waiver recipients
5. Individuals participating in OPWDD programs
6. Medicaid-Medicare Dual Eligibles who do not need 120 days or more of home and community based services

9. New York Medicaid Fee-For-Service

FFS Behavioral Health Benefits:

- Inpatient mental health services
- Outpatient mental health services
- Detoxification services
- Chemical dependence inpatient rehabilitation and treatment services
- Outpatient chemical dependency services
- Intensive psychiatric rehabilitation treatment programs
- Day treatment and continuing day treatment
- Case management
- Partial hospitalization
- Assertive community treatment (ACT)
- Personalized recovery oriented services (PROS)
- Licensed community residences

10. New York Medicaid Managed Care

- Managed care enrollment as of September 2014 was 4,178,416.
- New York has two managed care programs:
 - Mainstream Medicaid Managed Care Program (MMMC): Full-risk MCOs provide physical and behavioral benefits to families and adults who qualify under health care reform, who do not need long-term services and supports (LTSS).
 - Managed Long-Term Care (MLTC): Partially capitated MCOs provide physical health services and LTSS to individuals, including dual eligibles, needing 120 days or more of home and community based services.
- MMMC is available statewide, although for individuals residing in certain counties the program is optional. MLTC became available statewide in February 2015.
- Plans are available regionally and individuals are able to pick the plan that best fits their needs.

New York Medicaid Managed Care

- MLTC: All behavioral health benefits are covered by the state on a fee-for-services basis.
- MMMC: Outpatient chemical dependency services and specialty mental health services are excluded from the MCO's capitation rate. They are provided by the state on a FFS basis.
- Individuals Receiving Supplemental Security Income (SSI): All traditional and specialty mental health services, as well as some antipsychotics, are excluded from the MCO's capitation rate. These services are provided by the state on a FFS basis.

New York Medicaid Managed Care Program: Health & Recovery Plans (HARP)

Key Features

Target Population	<ul style="list-style-type: none"> Individuals over the age of 21 with a diagnosis of SMI (approximately 140,000 individuals) Excludes: <ul style="list-style-type: none"> Dual eligibles Individuals participating in a OPWDD program
Geographic Service Area	Statewide
Enrollment Model	<ul style="list-style-type: none"> Passive enrollment with the ability to opt-out for individuals already enrolled in a MCO that will offer a HARP plan Opt-in enrollment for individuals enrolled in a MCO that will not offer a HARP plan or not currently enrolled in managed care.
Care Delivery Model	Plans will be required to contract with health homes to deliver services
Summary of Covered Benefits	<ul style="list-style-type: none"> Physical health services Behavioral health services Enhanced behavioral health services (see next slide)
Services Excluded	<ul style="list-style-type: none"> Enhanced behavioral health services will be excluded from the capitation rate for the first two years of the contract Health home services will also be excluded from the capitation rate for two years
Payment Model	Full-risk capitated rate after the first two years of operation
Evaluation (Quality Measures)	Year two will have a quality withhold of 1%, year three a quality withhold of 2%

New York Medicaid Managed Program: Enhanced HARP Benefits

- Psychosocial rehabilitation
- Community psychiatric support and treatment (CPST)
- Crisis intervention
- Peer supports
 - Habilitation
 - Residential supports in community settings
 - Short-term crisis respite
 - Intensive crisis respite
- Non-medical transportation
- Family support and training
- Employment supports
 - Pre-vocational
 - Transitional employment
 - Intensive supported employment
 - On-going supported employment
- Education support services
- Supports for self-directed care
 - Information and assistance in
 - Support of participation direction
 - Financial management services
- Rehabilitation services for residential SUD treatment supports (new service for MCO enrollees as well)

New York Medicaid Managed Care Program: Potential HARP Enrollment by MCO

MCO	New York City	Rest Of State	Total	MCO	New York City	Rest Of State	Total
NYS Catholic Health Plan	9,457	16,856	26,313	HealthNow New York	N/A	2,035	2,035
Health First	19,759	1,609	21,368	Today's Options	N/A	1,733	1,733
MetroPlus Health Plan	13,224	N/A	13,224	Univera	N/A	1,678	1,678
HIP (Emblem)	5,771	2,118	7,889	VNS Choice SNP	1,362	10	1,372
Excelsius	N/A	7,801	7,801	Amida Care SNP	1,303	N/A	1,303
United Healthcare of New York	4,213	3,514	7,727	WellCare of New York	737	390	1,127
Amerigroup of New York	7,246	317	7,563	MVP Health Plan	N/A	1,108	1,108
Affinity Health Plan	4,952	2,053	7,005	MetroPlus Partnership Care SNP	925	N/A	925
Hudson Health Plan	N/A	4,091	4,091	Neighborhood Health Provider	512	128	640
Capital District Physical Health Plan	N/A	3,321	3,321	Fee-For-Service	12,577	11,538	24,115
Independent Health Association	N/A	2,407	2,407	All MLTC Plans	3,000	389	3,389

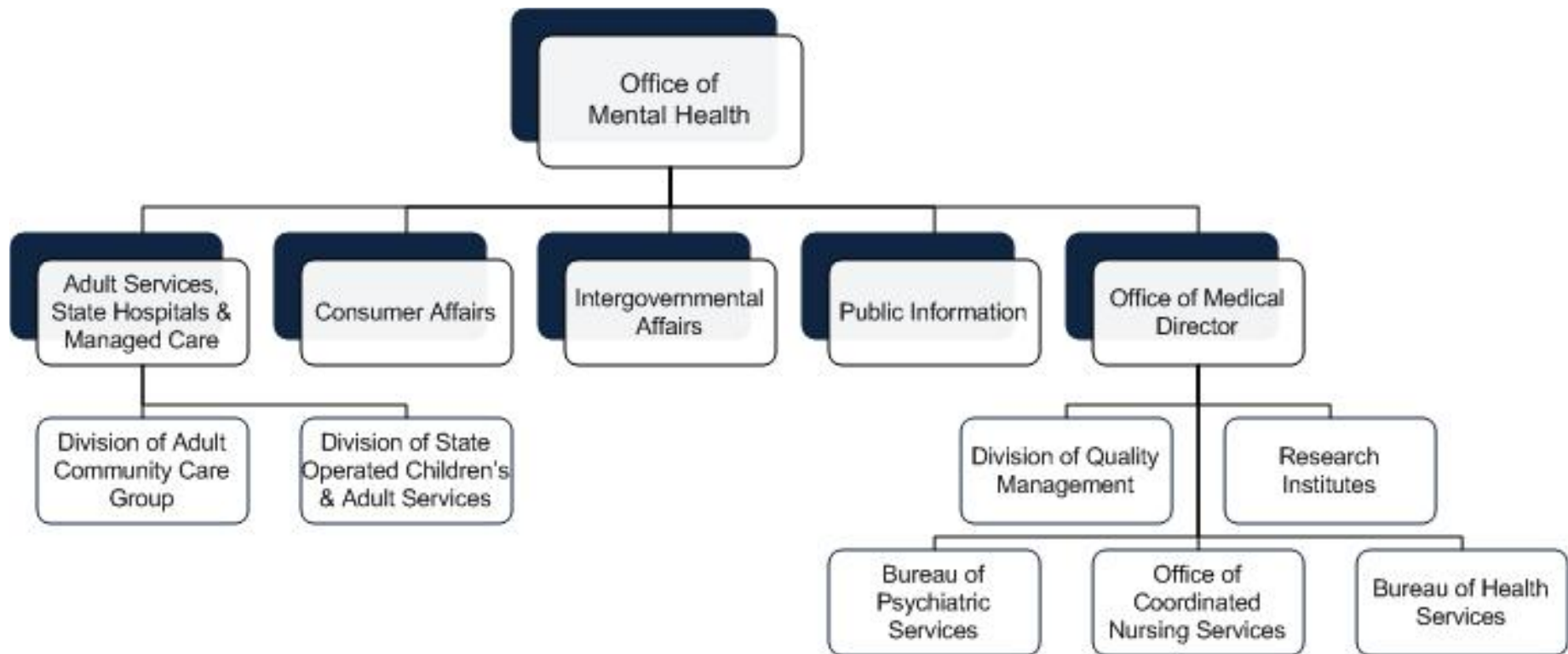
New York City Total 85,038 | Rest Of State Total 63,096 | Total 148,134

11. New York Medicaid Medical & Health Home Initiatives

New York Health Home Overview

Target Population	<p>Individuals (including dual eligibles) with:</p> <ul style="list-style-type: none"> • Serious mental illness (substance use disorder does not qualify unless an individual has another chronic condition) • Two chronic conditions • HIV/AIDs and at risk for another chronic condition <p>Note: Individuals with one chronic condition and at-risk for another are not eligible to participate in health homes in New York.</p>
Care Delivery Model	<ul style="list-style-type: none"> • Multidisciplinary team led by a care manager • Development of a single plan of care • Will provide services to future HARP enrollees
Enrollment Model	<ul style="list-style-type: none"> • Passive enrollment with the ability to opt-out or select another health home • Approximately 185,000 individuals enrolled as of March 2014
Geographic Service Area	Statewide
Payment Model	<p>Per member per month (PMPM) case management fee dependent upon the region and case mix</p> <ul style="list-style-type: none"> • Health homes will receive a reduced case (80% of active care management PMPM) finding fee for the first three months when attempting outreach and engagement of participants
Practice Performance & Improvement	<ul style="list-style-type: none"> • Educational opportunities • HEDIS and state specific quality measures

12. New York State Office of Mental Health: Organization Chart



12. New York State Mental Health & Addiction Treatment: Organization Chart



13. New York State Mental Health & Addiction Treatment Department Governance

Name	Position	Department
Anne Marie T. Sullivan, MD	Commissioner	Office of Mental Health
John Allen	Special Assistant to the Commissioner	Consumer Affairs
Leesa Rademacher	Director	Intergovernmental Relations
Benjamin Rosen	Director	Public Information
Lloyd Sederer, MD	Chief Medical Officer	Office of Medical Director
Robert Myers, PhD	Senior Deputy Commissioner and Division Director	Adult Services, State Hospitals, and Managed Care
Henry Fernandez	Associate Commissioner	Division of Adult Community Care Group
Jayne Van Bramer	Senior Associated Commissioner and Deputy Director	Division of State-Operated Children's and Adult Services

13. New York State Mental Health & Addiction Treatment Department Governance

Name	Position	Department
Arlene Gonzalez-Sanchez	Commissioner	Office of Alcoholism and Substance Abuse Services
Mary Ann DiChristopher	Acting Associate Commissioner	Division of Prevention, Housing, and Management Services
Steve Hanson	Associate Commissioner	Division of Treatment and Practice Innovation
William F. Hogan	Acting Associate Commissioner	Division of Outcome Management and System Information
Charles W. Monson	Associate Commissioner	Division of Quality Assurance and Performance Improvement
P. David Sawicki	Director of Financial Administration	Division of Financial Administration

14. New York State Psychiatric Institutions

Institution Name	Type	Location	Beds
Binghamton Psychiatric Center	Civil	Binghamton	60
Bronx Psychiatric Center	Civil	Bronx	156
Buffalo Psychiatric Center	Civil	Buffalo	158
Capital District Psychiatric Center	Civil	Albany	136
Creedmoor Psychiatric Center	Civil	Queens Village	344
Elmira Psychiatric Center	Civil	Elmira	48
Hutchings Psychiatric Center	Civil	Syracuse	119
Kingsboro Psychiatric Center	Civil	Brooklyn	165
Manhattan Psychiatric Center	Civil	Ward's Island	178
Mohawk Valley Psychiatric Center	Civil	Utica	Not Available
Pilgrim Psychiatric Center	Civil	West Brentwood	335
Rochester Psychiatric Center	Civil/Forensic	Rochester	145
Rockland Psychiatric Center	Civil	Orangeburg	405
South Beach Psychiatric Center	Civil	Staten Island	300
St. Lawrence Psychiatric Center	Civil	Ogdensburg	40
Central New York Psychiatric Center	Forensic	Marcy	220
Kirby Forensic Psychiatric Center	Forensic	Ward's Island	Not Available
Mid-Hudson Forensic Psychiatric Center	Forensic	New Hampton	Not Available
Total			2,772

15. New York Accountable Care Organizations (ACOs)

Medicare Shared Savings Program

1. Accountable Care Coalition of Greater New York, LLC
2. Accountable Care Coalition of Mount Kisco, LLC
3. Accountable Care Coalition of Syracuse, LLC
4. Accountable Care Coalition of the North Country, LLC
5. Aledade Primary Care ACO, LLC
6. Asian American Accountable Care Organization
7. Balance ACO
8. Bassett Accountable Care Partners, LLC
9. Beacon Health Partners, LLP
10. Bon Secours Good Helpcare, LLC
11. Catholic Medical Partners-Accountable Care IPA, Inc.
12. Chautauqua Region Associated Medical Partners, LLC
13. CMG ACO, LLC
14. Crystal Run Healthcare ACO, LLC
15. FamilyHealth ACO ,LLC
16. Good Help ACO
17. Healthcare Partners of the North Country, LLC
18. Healthcare Provider ACO, Inc.
19. HHC ACO, Inc.
20. Independent Physicians ACO (also known as Balance Accountable Care Network)
21. Innovative Health Alliance of New York, LLC
21. Keystone ACO
22. Mount Sinai Care, LLC
23. New York State Elite (NYSE) Accountable Care Organization (ACO), Inc.
24. NewYork Quality Care
25. Northeast Medical Group ACO, LLC
26. Orange Accountable Care of New York
27. Primary PartnerCare Associates IPA, Inc.
28. ProHEALTH Accountable Care Medical Group, PLLC
29. Richmond Quality, LLC
30. Rochester General Health System ACO
31. Saint Vincent Healthcare Partners
32. WCHN ACO
33. WESTMED Medical Group PC

Pioneer ACO Model

1. Montefiore ACO

15. New York Accountable Care Organizations (ACOs)

Commercial ACOs	
ACO	Commercial Insurer
Mt. Kisco Medical Group	Cigna
Weill Cornell Physician Organization Collaborative Accountable Care	Cigna
WESTMED Medical Group Collaborative Accountable Care	Cigna
WESTMED Medical Group	UnitedHealthcare

16. New York Health Care Reform Initiatives

Medicaid Expansion	
Choose to participate in expansion?	Yes
Medicaid Eligibility Income Limit for Childless Adults	133% of FPL Note: The PPACA requires that 5% of income be disregarded with determining eligibility
Specific Legislation Enacted	Bill S2606D-2013

Health Insurance Marketplace	
Type of Marketplace	State
Individual Enrollment Contact	https://nystateofhealth.ny.gov/individual
	1-855-355-5777
Small Business Enrollment Contact	https://nystateofhealth.ny.gov/employer?lang=en
	1-855-355-5777

17. New York Health Insurance Marketplace Plans

Individual Market

1. Affinity Health Plan
2. Capital District Physicians Health Plan
3. Health Insurance Plan of Greater New York (EmblemHealth)
4. Empire BlueCross
5. Empire BlueCross Blue Shield
6. Excellus, dba Univera Healthcare
7. Fidelis Care
8. Healthfirst New York
9. HealthNow, dba BlueShield of Northeastern New York
10. HealthNow, dba BlueCross BlueShield of Western New York
11. Health Republic
12. Independent Health
13. MetroPlus Health Plan
14. MVP Health Plan
15. North Shore LIJ
16. Oscar Insurance
17. UnitedHealthcare
18. WellCare

Small Group Market

1. Capital District Physicians Health Plan
2. Health Insurance Plan of Greater New York (EmblemHealth)
3. Excellus, dba Univera Healthcare
4. Excellus Blue Cross Blue Shield
5. HealthNow, dba BlueCross Blue Shield of Western New York
6. Health Republic
7. Independent Health
8. MetroPlus Health Plan
9. MVP Health Plan
10. North Shore LIJ

18. New York Essential Health Benefit Benchmark Plan

Plan Type	Plan from largest small group product, Exclusive Provider Organization
Issuer Name	Oxford Health Insurance, Inc.
Plan Name	Oxford EPO
Supplemented Categories (Supplementary Plan Type)	<ul style="list-style-type: none"> • Pediatric Oral (State CHIP) • Pediatric Vision (State CHIP)
Habilitative Services Defined by State	<p>Yes: New York will set habilitative services at modified parity with rehabilitative services. The intent is to set the habilitative benefit at parity with the rehabilitative services benefit in the outpatient setting only. Further, in New York's Base Benchmark Plan, the rehabilitative services benefit is covered only if the services are provided on a post-hospitalization or post-surgical basis. By setting habilitative services at parity with rehabilitative services, New York will require the same types of services and the same number of covered days for both benefits, but New York does not consider the post-hospitalization and post-surgical requirements for rehabilitative services to be requirements for habilitative services.</p>
Biologically Based Mental Illness	Covered the same as any other medical benefit as described in the 2008 Mental Health Parity and Addiction Equity Act

18. New York Essential Health Benefit Benchmark Plan

Benefit	Limit on Service	Exclusions	
Non-Biologically Based Mental Illness	Mental/Behavioral Health Outpatient Services	30 visits per year	Benefit limits include office visit and outpatient visits combined. Biologically based service visits will count toward this limit.
	Mental/Behavioral Health Inpatient Services	30 visits per year	Members may choose to exchange one inpatient day for two visits of partial hospitalization. Visits for biologically based services will count towards this limit.
	Substance Abuse Disorder Outpatient Services	60 days per year	Benefit limits include office visit and outpatient visits combined. Up to 20 of the visits may be used by the member's family.
	Substance Abuse Disorder Inpatient Services	<ul style="list-style-type: none"> • 7 days per year for inpatient detoxification • Other services 30 days per year 	None

Sources

1. New York Health Care Coverage Map

1. The Centers for Medicare and Medicaid Services. (2014, November). Special Needs Plan (SNP) Data. Retrieved December 5, 2014 from <http://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/MCRAAdvPartDENrolData/Special-Needs-Plan-SNP-Data.html>
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3. Thierer, C. (2014, June 20). QHP Landscape Individual Market Medical. Retrieved December 5, 2014 from <https://data.healthcare.gov/dataset/QHP-Landscape-Individual-Market-Medical/b8in-sz6k>
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2. New York Population Distribution By Payer: National vs. State

1. Centers for Medicare and Medicaid Services. (2013, February). Data Analysis Brief Medicare-Medicaid Dual Enrollment from 2006 through 2011. Retrieved December 5, 2014 from http://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/Downloads/Dual_Enrollment_2006-2011_Final_Document.pdf
2. The Henry J. Kaiser Foundation. (2012). State Health Facts: Health Insurance Coverage of the Total Population. Retrieved December 5, 2014 from <http://kff.org/other/state-indicator/total-population/>
3. New York Department of Health. (2012, May 25). New York State Department of Health's Demonstration to Integrate Care for Dual Eligible Individuals. Retrieved December 5, 2014 from <http://www.cms.gov/Medicare-Medicaid-Coordination/Medicare-and-Medicaid-Coordination/Medicare-Medicaid-Coordination-Office/FinancialAlignmentInitiative/Downloads/NYProposal.pdf>
4. The Kaiser Foundation definition for Medicaid includes dual eligible individuals. To avoid double counting, the number of dual eligibles was subtracted from the total number of Medicaid enrollees.
5. Other Public refers to military and Veteran's Administration coverage.

Sources

3. Largest Health Plans In New York By Enrollment

1. Centers for Medicare and Medicaid Services. (2012). Medicare Geographic Variation State/County Table- All Beneficiaries. Retrieved December 5, 2014 from http://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Medicare-Geographic-Variation/GV_PUF.html
2. Health Plans USA. (2013). Subscription Database. Available from <http://www.markfarrah.com/products/health-plans-usa.aspx>
3. New York Department of Health. (2013). Number of Medicaid Enrollees by Category of Eligibility by Social Service District - Calendar Year 2013. Retrieved December 5, 2014 from http://www.health.ny.gov/statistics/health_care/medicaid/eligible_expenditures/el2013/2013-cy_enrollees.htm
4. New York Department of Health. (2014, September). 2014 Monthly Medicaid Managed Care Enrollment. Retrieved December 5, 2014 from http://www.health.ny.gov/health_care/managed_care/reports/enrollment/monthly/2014/docs/en09_14.pdf
5. The FFS number was calculated by subtracting the total managed care enrollment number from the total number of Medicaid eligibles.

4. Largest Health Plans in New York By SMI Enrollment

1. Centers for Medicare and Medicaid Services. (2012). Medicare Geographic Variation State/County Table- All Beneficiaries. Retrieved December 5, 2014 from http://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Medicare-Geographic-Variation/GV_PUF.html
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3. New York Department of Health. (2013). Number of Medicaid Enrollees by Category of Eligibility by Social Service District - Calendar Year 2013. Retrieved December 5, 2014 from http://www.health.ny.gov/statistics/health_care/medicaid/eligible_expenditures/el2013/2013-cy_enrollees.htm
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5. New York Medicaid System Overview

1. Developed from sources found throughout the profile.

Sources

6. New York Medicaid Governance

1. New York Department of Health. (2014, October 24). NY-13-0056-MM4 This SPA incorporates the Single State Agency SPA into New York's Medicaid state plan in accordance with the Affordable Care Act.. Retrieved December 5, 2014 from <http://www.medicaid.gov/State-resource-center/Medicaid-State-Plan-Amendments/Downloads/NY/2014/NY-13-0056-MM4.pdf>
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