

**Questions regarding the Request for Applications (RFA) for
Establishment of New or Expansion of Existing Certified Home Health Agencies in New York State**

1. Will the Department be issuing a second RFA for areas of the state other than NYC, or at least staging the review process to ensure that the need for CHHAs is addressed in a deliberate manner throughout the state?
2. The last paragraph of the introduction states that certificate of need (CON) applications for changes of ownership of existing CHHAs will be given priority status for reviews to “ensure access to services for patients currently receiving home health services.”
 - a. How does this advance the Medicaid Redesign Initiatives, which the preceding paragraph indicates is the highest priority of the RFA?
 - b. Will applications from existing long term home health care programs (LTHHCPs) and special needs CHHAs that are already serving patients be given this same level of processing priority to “ensure access”?
3. One of the Medicaid Redesign tenets is to ensure continuity of care. Will continuity of care be among the criteria used to evaluate applications?
4. Medicaid redesign contemplates initiatives aimed at integrating care for the dually eligible population. Will experience in serving dually eligible patients be among the criteria used to evaluate applications?
5. Page 6 (under “Background”) refers to a “limited expansion of public need.” Please indicate how the Department defines “limited” and whether there are any pre-determined limitations on how many new CHHAs and geographic service area/population expansions will be recommended for approval through this process.
6. If an entity that has previously submitted a CON application for CHHA establishment or expansion and is now required to withdraw that application (see Section III), will the Department also be waiving the requirement for the entity to pay another CON application fee?
7. Please specify the law and/or regulation underlying the Department’s interpretation that a LTHHCP sponsored by an Article 28 entity is not considered a general purpose CHHA in NYS.
8. When will RFA awards be announced? Will this occur sufficiently in advance of the April 20, 2012 deadline to submit a CON application?
9. Why are there two dates, one for submitting an application to the RFA (Cover sheet) and a different date for the CON (page 7)?
10. If a successful RFA applicant is denied CON approval, will other previously unsuccessful RFA applications be considered for the geographic service area/population in question?
11. Under “Project Description,” the RFA indicates that preference will be given to applications that advance Medicaid redesign in areas of the state that have the highest number of Medicaid home health recipients. Is this a preference in RFA scoring, or a timing priority? The NYC metropolitan area has the highest absolute numbers of Medicaid home health recipients; however, other areas of the state may have high proportions of Medicaid recipients who may currently be underserved.
12. The last bullet under “Project Description” indicates that applicants that are proposing to purchase a CHHA should denote that in the RFA. However, the bullet goes on to say that the

RFA process is “not intended to supersede, undermine or interfere with the existing change of ownership process.” Does that mean that any such prospective purchaser will automatically be recommended for approval through the RFA process?

13. Would an existing LTHHCP be required to undergo full or limited CON review to become a general purpose CHHA?
14. Page 9 – will the Department be providing prospective applicants with data needed to apply such as: (1) normative criteria for age and sex specific utilization rates; (2) a comparison of actual utilization to capacity; and (3) patterns of in and out migration? The Department developed these criteria, and is in a far better position than applicants to have access to such data.
15. Page 11 – will the Department post a sample detailed workplan?
16. Page 12 – what is the scoring weight for the 6 evaluation components?
17. If a LTHHCP is the applicant for a CHHA, please advise as to the completion of Section 1 Basic Information pages 6-7 of the CMS 855 A. Would the LTHHCP be voluntarily terminating its current Medicare number and getting a new number? Would the applicant surrender the other Medicare provider number at the same time?
18. How should a current LTHHCP, which is already certified by Medicare as a CHHA, complete the CON regarding their Medicare number?
19. Can the LTHHCP Medicare provider number be transferred to the CHHA? Would it be the same number?
20. Will the LTHHCP applying to become a CHHA have to follow the 855a – ***“All HHAs and HHA sub-units enrolling in the Medicare program must complete this section. HHAs and HHA sub-units initially enrolling in Medicare, Medicaid, or both programs on or after January 1, 1998 are required to provide documentation supporting that they have sufficient initial reserve operating funds (capitalization) to operate for the first three months in the Medicare and/or Medicaid program(s).”***
21. If a LTHHCP applies for CHHA establishment, what happens to the licensure status of the LTHHCP; is it surrendered? What happens with the Medicare and Medicaid provider numbers? Does the LTHHCP then have to apply for a new Medicaid provider number as a CHHA as well, or can the number be retained?
22. Does a CMS 855A enrollment form have to be submitted at the same time as the CON CHHA?

