

# STATE OF NEW YORK

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S. 2007--B

A. 3007--B

## SENATE - ASSEMBLY

January 23, 2017

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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 recommitted 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 italics (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 law, in relation to health care initiative pool distributions; to 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 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 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-for-profits 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); to amend the social services law, in relation to health homes; 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, including 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.

PART A

Intentionally Omitted

PART B

Intentionally Omitted

PART C

Intentionally Omitted

PART D

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 program to manage drug costs in a manner that ensures patient access while providing financial stability for the state and participating providers. Since two thousand eleven, the state has taken significant steps to contain costs in the Medicaid program by imposing a statutory limit on annual growth. Drug expenditures, however, continually outpace other cost components causing significant pressure on the state, providers, and patient access operating under the Medicaid global cap. It is therefore intended that the department establish a Medicaid drug cap as a separate component within the Medicaid global cap as part of a focused and sustained effort to balance the growth of drug expenditures with the growth of total Medicaid expenditures.

2. The commissioner shall establish a year to year department of health state-funds Medicaid drug spending growth target as follows:

(a) for state fiscal year two thousand seventeen--two thousand eighteen, be limited to the ten-year rolling average of the medical component of the consumer price index plus five percent and minus a pharmacy savings target of fifty-five million dollars; and

(b) for state fiscal year two thousand eighteen--two thousand nineteen, be limited to the ten-year rolling average of the medical component of the consumer price index plus four percent and minus a pharmacy savings target of eighty-five million dollars.

3. The department and the division of the budget shall assess on a quarterly basis the projected total amount to be expended in the year on

1 a cash basis by the Medicaid program for each drug, and the projected  
2 annual amount of drug expenditures for all drugs, which shall be a  
3 component of the projected department of health state funds Medicaid  
4 expenditures calculated for purposes of sections ninety-one and ninety-  
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 rebate targets.

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 recommenda-  
19 tion as to whether a target supplemental Medicaid rebate should be paid  
20 by the manufacturer of the drug to the department and the target amount  
21 of the rebate.

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 depart-  
24 ment shall notify the manufacturer of such drug and shall attempt to  
25 reach agreement with the manufacturer on a rebate for the drug prior to  
26 referring the drug to the drug utilization review board for review.

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  
30 section three hundred sixty-seven-a of the social services law, the drug  
31 shall not be referred to the drug utilization review board for any  
32 further supplemental rebate for the duration of the previous rebate  
33 agreement.

34 (d) The department shall consider a drug's actual cost to the state,  
35 including current rebate amounts, prior to seeking an additional rebate  
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  
56 require a supplemental rebate to be paid by the drug's manufacturer in

1 an amount not to exceed such target rebate amount. With respect to a  
2 rebate required in state fiscal year two thousand seventeen--two thou-  
3 sand eighteen, the rebate requirement shall apply beginning with the  
4 month of April, two thousand seventeen, without regard to the date the  
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.

11 (c) If the drug utilization review board recommends a target rebate  
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  
18 social services law with respect to such drug; however, this waiver  
19 shall not be implemented in situations where it would prevent access by  
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  
26 rebate agreements entered into by the manufacturer with respect to the  
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 provid-  
29 er's agents, including but not limited to any pharmacy benefit manager,  
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:

33 (i) publicly available information relevant to the pricing of the  
34 drug;

35 (ii) information supplied by the department relevant to the pricing of  
36 the drug;

37 (iii) information relating to value-based pricing;

38 (iv) the seriousness and prevalence of the disease or condition that  
39 is treated by the drug;

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  
54 of the drug and/or the therapeutic benefit of the drug, or that is  
55 otherwise pertinent to the manufacturer's pricing decision; any such  
56 information provided shall be considered confidential and shall not be

1 disclosed by the drug utilization review board in a form that identifies  
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  
5 amount and the department is unsuccessful in entering into a rebate  
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  
54 necessary in the fourth quarter of a fiscal year to prevent total Medi-  
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.

3 (b) The commissioner shall be authorized to take the actions described  
4 in paragraph (a) of this subdivision only so long as total Medicaid drug  
5 expenditures are projected to exceed the annual growth limitation  
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  
9 or the provisions of subdivisions twenty-five and twenty-five-a of  
10 section three hundred sixty-four-j of the social services law, except as  
11 allowed by paragraph (c) of subdivision five of this section; provided  
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~~] twenty-three-member drug utilization review  
19 board is hereby created in the department. The board is responsible for  
20 the establishment and implementation of medical standards and criteria  
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:

26 (a) Six persons licensed and actively engaged in the practice of medi-  
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  
29 selected based on input from professional associations and/or advocacy  
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.

34 (c) Two persons with expertise in drug utilization review who are  
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.

48 § 3. Paragraphs (g), (h), and (i) of subdivision 8 of section 369-bb  
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  
54 with the standards established in such section.

55 § 4. Intentionally omitted.

56 § 5. Intentionally omitted.



1 § 6. Intentionally omitted.

2 § 7. The opening paragraph and subparagraphs (i) and (ii) of paragraph  
3 (b) and paragraph (d) of subdivision 9 of section 367-a of the social  
4 services law, the opening paragraph and paragraph (d) as amended by  
5 chapter 19 of the laws of 1998, subparagraphs (i) and (ii) of paragraph  
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  
8 of chapter 59 of the laws of 2011 and subparagraph (ii) of paragraph (d)  
9 as amended by section 48 of part C of chapter 58 of the laws of 2009,  
10 are amended to read as follows:

11 Notwithstanding any inconsistent provision of law or regulation to the  
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~~  
23 ~~and medicaid services, the lower of: (A) an amount equal to the specific~~  
24 ~~upper limit set by such federal agency for the multiple source~~  
25 ~~prescription drug; (B) the estimated acquisition cost of such drug to~~  
26 ~~pharmacies which, for purposes of this subparagraph, shall mean the~~  
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 maxi-~~  
30 ~~mum acquisition cost, if any, established pursuant to paragraph (e) of~~  
31 ~~this subdivision, provided that the methodology used by the department~~  
32 ~~to establish a maximum acquisition cost shall not include average acqui-~~  
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 is 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,

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

(ii) if the drug dispensed is ~~[a multiple source prescription drug or]~~ a brand-name prescription drug ~~[for which no specific upper limit has been set by such federal agency]~~, the lower of ~~[the estimated acquisition cost of such drug to pharmacies or the dispensing pharmacy's usual and customary price charged to the general public. For sole and multiple source brand name drugs, estimated acquisition cost means the average wholesale price of a prescription drug based upon the package size dispensed from, as reported by the prescription drug pricing service used by the department, less seventeen percent thereof or the wholesale acquisition cost of a prescription drug based upon package size dispensed from, as reported by the prescription drug pricing service used by the department, minus zero and forty one hundredths percent thereof, and updated monthly by the department. For multiple source generic drugs, estimated acquisition cost means the lower of the average wholesale price of a prescription drug based on the package size dispensed from, as reported by the prescription drug pricing service used by the department, less twenty five percent thereof, or the maximum acquisition cost, if any, established pursuant to paragraph (c) of this subdivision, provided that the methodology used by the department to establish a maximum acquisition cost shall not include average acquisition 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

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

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

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

§ 8. It shall be an unacceptable practice in the Medicaid program 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  
3 violation of any other applicable law limiting or restricting the  
4 prescribing of opioids, and/or contrary to recommendations issued by the  
5 drug utilization review board established by section 369-bb of the  
6 social services law, and such practice may result in the provider being  
7 excluded from participation in the Medicaid program. No exclusion or  
8 other sanction of a Medicaid provider pursuant to this section shall be  
9 imposed except in accordance with the requirements of parts 515, 517 and  
10 519 of title 18 of the codes, rules and regulations of the State of New  
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  
30 when more than a ten day supply of the previously dispensed amount  
31 should remain were the product used as normally indicated, or in the  
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;

48 § 10. Intentionally omitted.

49 § 11. Intentionally omitted.

50 § 12. Intentionally omitted.

51 § 13. Intentionally omitted.

52 § 14. Intentionally omitted.

53 § 15. Intentionally omitted.

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

(iii) Notwithstanding any other provision of this paragraph, co-payments charged for each generic prescription drug dispensed shall be one dollar and for each brand name prescription drug dispensed shall be ~~[three dollars]~~ two dollars and fifty cents; provided, however, that the co-payments charged for ~~[each brand name prescription drug on the preferred drug list established pursuant to section two hundred seventy-two of the public health law or, for managed care providers operating 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 such provider has designated as a preferred drug, and the co-payments charged for]~~ each brand name prescription drug reimbursed pursuant to subparagraph (ii) of paragraph (a-1) of subdivision four of section three hundred sixty-five-a of this title shall be one dollar.

§ 17. Subparagraphs 1 and 5 of paragraph (f) of subdivision 7 of section 367-a of the social services law, as added by section 11 of part B of chapter 59 of the laws of 2016, are amended to read as follows:

(1) The department may require manufacturers of drugs other than single source drugs and innovator multiple source drugs, as such terms are defined in 42 U.S.C. § 1396r-8(k), to provide rebates to the department for any drug that has increased more than three hundred percent of its state maximum acquisition cost (SMAC) ~~[, on or after]~~ during the period April 1, 2016 through March thirty-first, two thousand seventeen, 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 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 drug exceeds ~~[three hundred percent]~~ the applicable percentage of the SMAC for the same drug at any time during the course of the preceding twelve months. Such rebates shall be in addition to any rebates payable to the department pursuant to any other provision of federal or state law. Nothing herein shall affect the department's obligation to reimburse for covered outpatient drugs pursuant to paragraph (d) of this 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 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 comparison to the total drug spend on generic drugs during two thousand fourteen ~~[and]~~, two thousand fifteen, and two thousand sixteen.

§ 18. Severability. If any clause, sentence, paragraph, or subdivision of this section shall be adjudged by any court of competent jurisdiction to be invalid, such judgment shall not affect, impair, or invalidate the remainder thereof, but shall be confined in its operation to the clause, sentence, paragraph, or subdivision directly involved in the controversy in which such judgment shall have been rendered. It is hereby declared to be the intent of the legislature that this section would have been enacted even if such invalid provisions had not been included herein.

§ 19. This act shall take effect immediately and shall be deemed to have been in full force and effect on and after April 1, 2017; provided, however, that sections nine, sixteen, and seventeen of this act shall take effect July 1, 2017; provided, further, that the amendments to paragraph (c) of subdivision 6 of section 367-a of the social services law made by section sixteen of this act shall not affect the repeal of such paragraph and shall be deemed repealed therewith; provided, further, that the amendments to paragraph (f) of subdivision 7 of section 367-a of the social services law made by section seventeen of this act shall not affect the repeal of such paragraph and shall be deemed repealed therewith; and provided, further, that the amendments to subdivision 9 of section 367-a of the social services law made by section seven of this act shall not affect the expiration of such subdivision and shall be deemed to expire therewith.

#### PART E

Section 1. Section 365-f of the social services law is amended by adding two new subdivisions 4-a and 4-b to read as follows:

4-a. Fiscal intermediary services. (a) For the purposes of this section:

(i) "Fiscal intermediary" means an entity that provides fiscal intermediary services and has a contract for providing such services with:

(A) a local department of social services;

(B) an organization licensed under article forty-four of the public health law; or

(C) an accountable care organization certified under article twenty-nine-E of the public health law or an integrated delivery system composed primarily of health care providers recognized by the department as a performing provider system under the delivery system reform incentive payment program.

(ii) Fiscal intermediary services shall include the following services, performed on behalf of the consumer to facilitate his or her role as the employer:

(A) wage and benefit processing for consumer directed personal assistants;

(B) processing all income tax and other required wage withholdings;

(C) complying with workers' compensation, disability and unemployment requirements;

(D) maintaining personnel records for each consumer directed personal assistant, including time sheets and other documentation needed for wages and benefit processing and a copy of the medical documentation required pursuant to regulations established by the commissioner;

(E) ensuring that the health status of each consumer directed personal assistant is assessed prior to service delivery pursuant to regulations issued by the commissioner;

(F) maintaining records of service authorizations or reauthorizations;



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  
4 any circumstance that may affect the consumer's or, if applicable, the  
5 designated representative's ability to fulfill such responsibilities;

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  
10 with the consumer that describes the parties' responsibilities under  
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  
18 sufficient number of individuals who meet the definition of consumer  
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  
24 assistant competently and safely performs the personal care services,  
25 home health aide services and skilled nursing tasks that are included on  
26 the consumer's plan of care. A fiscal intermediary shall exercise  
27 reasonable care in properly carrying out its responsibilities under the  
28 program.

29 (b) No entity shall provide, directly or through contract, fiscal  
30 intermediary services without an authorization as a fiscal intermediary  
31 issued by the commissioner in accordance with this subdivision.

32 (c) An application for authorization as a fiscal intermediary shall be  
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:

36 (i) the name and employer identification number, of the entity,  
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  
48 with outside agencies that may influence in any way the ability of the  
49 organization to provide fiscal intermediary services consistent with the  
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 interme-  
54 diary's consumers, staff, personal assistants and other interested  
55 parties which may be charged with roles including, but not limited to,  
56 quality assurance review, referral, program monitoring or development or



1 establishing and responding to community needs; such input may be in the  
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  
4 must be from individual consumers and consumer advocates of the fiscal  
5 intermediary;

6 (vii) the organization's plan to address the needs of consumers and  
7 their personal assistants in a timely manner, regardless of where they  
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  
22 fit and adequate, and that the fiscal intermediary services will be  
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  
26 knowledge, expertise and experience possessing extensive knowledge of  
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 mediary.

32 (g) Neither public need, tax status nor profit-making status shall be  
33 a criterion for authorization under this subdivision. Status as a  
34 licensed home care services agency or other health provider shall not  
35 positively or negatively affect an application for authorization under  
36 this subdivision. An organization authorized pursuant to article  
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  
48 continued authorization of the fiscal intermediary, the commissioner may  
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:

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

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

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

(ii) [~~payment to a facility for reserved bed days provided on behalf of 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~~] therapeutic 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.~~

~~(iii) No later than thirty days after promulgation of such regulations, the commissioner shall advise the chairs of the senate and assembly finance and health committees of the projected reductions expected to be achieved under the methodology set forth in such regulations.~~

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

§ 3. Intentionally omitted.

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

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

§ 5. Intentionally omitted.

§ 6. Intentionally omitted.

§ 7. This act shall take effect immediately and shall be deemed to have been in full force and effect on and after April 1, 2017.

## PART F

Intentionally Omitted

## PART G

Section 1. Subdivision 1 of section 92 of 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, as separately amended by section 1 of part JJ of chapter 54 and section 18 of part B of chapter 59 of the laws of 2016, is amended to read as follows:

1. For state fiscal years 2011-12 through [~~2017-18~~] 2018-19, the director of the budget, in consultation with the commissioner of health referenced as "commissioner" for purposes of this section, shall assess on a monthly basis, as reflected in monthly reports pursuant to subdivision five of this section known and projected department of health state funds medicaid expenditures by category of service and by geographic regions, as defined by the commissioner, and if the director of the budget determines that such expenditures are expected to cause medicaid disbursements for such period to exceed the projected department of health medicaid state funds disbursements in the enacted budget financial plan pursuant to subdivision 3 of section 23 of the state finance law, the commissioner of health, in consultation with the director of the budget, shall develop a medicaid savings allocation plan to limit such spending to the aggregate limit level specified in the enacted budget financial plan, provided, however, such projections may be adjusted by the director of the budget to account for any changes in the New York state federal medical assistance percentage amount established pursuant to the federal social security act, changes in provider revenues, reductions to local social services district medical assistance administration, minimum wage increases, and beginning April 1, 2012 the operational costs of the New York state medical indemnity fund and state costs or savings from the basic health plan. Such projections may be adjusted by the director of the budget to account for increased or expected department of health state funds medicaid expenditures as a result of a natural or other type of disaster, including a governmental declaration of emergency.

§ 2. Intentionally omitted.

§ 3. Intentionally omitted.

§ 4. This act shall take effect immediately and shall be deemed to have been in full force and effect on and after April 1, 2017.

## PART H

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

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

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  
18 surcharges established pursuant to sections 2807-c, 2807-j, 2807-s and  
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  
23 provided before December 31, ~~[2017]~~ 2020, and continued expenditure of  
24 funds authorized for programs and grants until the exhaustion of funds  
25 therefor;

26 § 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 twenty, 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]~~ twenty;

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]~~ nineteen, and

44 (v) one hundred ninety-one million two hundred fifty thousand dollars  
45 of the funds accumulated for the period January first, two thousand  
46 ~~[seventeen]~~ twenty through March thirty-first, two thousand ~~[seventeen]~~  
47 twenty.

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

15 (ii) For periods on and after January first, two thousand nine,  
16 supplemental distributions pursuant to subdivision five of this section  
17 and in accordance with section 86-1.89 of title 10 of the codes, rules  
18 and regulations of the state of New York shall no longer be made and the  
19 provisions of section 86-1.89 of title 10 of the codes, rules and regu-  
20 lations 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  
25 the period January first, two thousand eleven, through March thirty-  
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  
30 for the period April first, two thousand fourteen through March thirty-  
31 first, two thousand seventeen, and up to eight million six hundred  
32 twelve thousand dollars each state fiscal year for the period April  
33 first, two thousand seventeen through March thirty-first, two thousand  
34 twenty, shall be set aside and reserved by the commissioner from the  
35 regional pools established pursuant to subdivision two of this section  
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:

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

8 (C) If the dollar amount for the total number of clinical research  
9 positions in the region calculated pursuant to clause (B) of this  
10 subparagraph exceeds the total amount appropriated for purposes of this  
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  
26 in funding will be effective for the duration of the award. No clinical  
27 research positions that continue from and were funded in prior distrib-  
28 ution periods shall be eliminated or reduced by such methodology.

29 (D) Each consortium or teaching general hospital shall receive its  
30 annual distribution amount in accordance with the following:

31 (I) Each consortium or teaching general hospital with a one-year ECRIP  
32 award shall receive its annual distribution amount in full upon  
33 completion of the requirements set forth in items (I) and (II) of clause  
34 (G) of this subparagraph. The requirements set forth in items (IV) and  
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 gener-  
48 al hospital to be eligible to apply for ECRIP funding in any subsequent  
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  
7 the commissioner by July first of each distribution period, the follow-  
8 ing data and information on a hospital-specific basis. Such data and  
9 information shall be certified as to accuracy and completeness by the  
10 chief executive officer, chief financial officer or chair of the consor-  
11 tium governing body of each consortium or teaching general hospital and  
12 shall be maintained by each consortium and teaching general hospital for  
13 five years from the date of submission:

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 meet-  
18 ing sponsored by the department, the name of a principal contact person  
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 er that all the requirements of the clinical research training objec-  
23 tives set forth in this subparagraph shall be met. Such certification  
24 shall be provided by July first of each distribution period;

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

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

33 (IV) A final report detailing training experiences, accomplishments,  
34 activities and performance of the clinical researcher, and data, meth-  
35 ods, results and analyses of the clinical research plan shall be  
36 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.

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

48 (1) provide that ECRIP grant awards shall be made with the objective  
49 of securing federal funding for biomedical research, training clinical  
50 researchers, recruiting national leaders as faculty to act as mentors,  
51 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;

1 (3) provide that applications for ECRIP grant awards shall be based on  
2 such information requested by the commissioner, which shall include but  
3 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  
9 dollars for the period January first, two thousand eight through Decem-  
10 ber thirty-first, two thousand eight, four million nine hundred thousand  
11 dollars for the period January first, two thousand nine through December  
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  
18 first, two thousand eleven through March thirty-first, two thousand  
19 fourteen, ~~and~~ up to four million sixty thousand dollars each state  
20 fiscal year for the period April first, two thousand fourteen through  
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  
24 set aside and reserved by the commissioner from the regional pools  
25 established pursuant to subdivision two of this section and shall be  
26 available for distributions to sponsoring institutions to be directed to  
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  
30 two-thirds of the available funding going to New York city and one-third  
31 of the available funding going to the rest of the state and shall be  
32 distributed to sponsoring institutions in each region pursuant to a  
33 request for application or request for proposal process with preference  
34 being given to sponsoring institutions which provide training in sites  
35 located in underserved rural or inner-city areas and those that include  
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 thou-  
48 sand fourteen, ~~and~~ up to one million seven hundred five thousand  
49 dollars each state fiscal year for the period April first, two thousand  
50 fourteen through March thirty-first, two thousand seventeen, and up to  
51 one million seven hundred five thousand dollars each state fiscal year  
52 for the period April first, two thousand seventeen through March thir-  
53 ty-first, two thousand twenty, shall be set aside and reserved by the  
54 commissioner from the regional pools established pursuant to subdivision  
55 two of this section and shall be available for purposes of physician  
56 loan repayment in accordance with subdivision ten of this section.

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

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

18 (iii) In no case shall less than fifty percent of the funds available  
19 pursuant to this paragraph be distributed in accordance with subpara-  
20 graphs (i) and (ii) of this paragraph to physicians identified by gener-  
21 al hospitals.

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

26 (v) In addition to the funds allocated under this paragraph, for the  
27 period April first, two thousand sixteen through March thirty-first, two  
28 thousand seventeen, two million dollars shall be available for the  
29 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  
36 dollars for the period January first, two thousand eight through Decem-  
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  
48 year for the period April first, two thousand seventeen through March  
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  
53 section, sections one hundred twelve and one hundred sixty-three of the  
54 state finance law, or any other contrary provision of law, such funding  
55 shall be allocated regionally with one-third of available funds going to  
56 New York city and two-thirds of available funds going to the rest of the

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:

4 (i) Preference in funding shall first be accorded to teaching general  
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.

9 (ii) After distributions in accordance with subparagraph (i) of this  
10 paragraph, all remaining funds shall be awarded to physicians to support  
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  
17 accordance with subparagraphs (i) and (ii) of this paragraph.

18 (e-1) Work group. For funding available pursuant to paragraphs (d) and  
19 (e) of this subdivision:

20 (i) The department shall appoint a work group from recommendations  
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  
26 applicants to facilitate their completion of applications. An applicant  
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 Decem-  
34 ber thirty-first, two thousand ten, one hundred forty-eight thousand  
35 dollars for the period January first, two thousand eleven through March  
36 thirty-first, two thousand eleven, five hundred sixteen thousand dollars  
37 each state fiscal year for the period April first, two thousand eleven  
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  
48 projected physician workforce and community needs. The commissioner  
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  
3 April first, two thousand eleven through March thirty-first, two thou-  
4 sand fourteen, [~~and~~] up to one million six hundred five thousand dollars  
5 each state fiscal year for the period April first, two thousand fourteen  
6 through March thirty-first, two thousand seventeen, and up to one  
7 million six hundred five thousand dollars each state fiscal year for the  
8 period April first, two thousand seventeen through March thirty-first,  
9 two thousand twenty, shall be set aside and reserved by the commissioner  
10 from the regional pools established pursuant to subdivision two of this  
11 section and shall be available for distributions to the Associated  
12 Medical Schools of New York to fund its diversity program including  
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.

19 (h) In the event there are undistributed funds within amounts made  
20 available for distributions pursuant to this subdivision, such funds may  
21 be reallocated and distributed in current or subsequent distribution  
22 periods in a manner determined by the commissioner for any purpose set  
23 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  
26 law, up to one million dollars for the period January first, two thou-  
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  
30 million five hundred thousand dollars annually for the periods January  
31 first, two thousand nine through December thirty-first, two thousand  
32 ten, three hundred seventy-five thousand dollars for the period January  
33 first, two thousand eleven through March thirty-first, two thousand  
34 eleven, one million three hundred twenty thousand dollars each state  
35 fiscal year for the period April first, two thousand eleven through  
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 thou-  
48 sand ten, two hundred fifty thousand dollars for the period January  
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  
53 commissioner from the regional pools established pursuant to subdivision  
54 two of this section and shall be available for distributions to the New  
55 York state area health education center program for the purpose of post-  
56 secondary training of health care professionals who will achieve specif-



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

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

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

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

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

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

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

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



~~report to the governor and the legislature detailing the objective, impact, design and computation of any pilot reimbursement program established pursuant to this act, on or before March 31, 1994 and annually thereafter. Such report shall include an assessment of the financial impact of such payment system on providers, as well as the impact of such system on access to care] 2020.~~

§ 10. Paragraph (i) of subdivision (b) of section 1 of 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, as amended by section 12 of part B of chapter 60 of the laws of 2014, is amended to read as follows:

(i) oversight and evaluation of the inpatient financing system in place for 1988 through March 31, ~~2017~~ 2020, and the appropriateness and effectiveness of the bad debt and charity care financing provisions;

§ 11. Paragraph (l) of subdivision 9 of section 3614 of the public health law, as added by section 13 of part B of chapter 60 of the laws of 2014, is amended and three new paragraphs (m), (n) and (o) are added to read as follows:

(l) for the period April first, two thousand sixteen through March thirty-first, two thousand seventeen, up to one hundred million dollars[+];

(m) for the period April first, two thousand seventeen through March thirty-first, two thousand eighteen, up to one hundred million dollars;

(n) for the period April first, two thousand eighteen through March thirty-first, two thousand nineteen, up to one hundred million dollars;

(o) for the period April first, two thousand nineteen through March thirty-first, two thousand twenty, up to one hundred million dollars.

§ 12. Paragraph (p) of subdivision 1 of section 367-q of the social services law, as added by section 14 of part B of chapter 60 of the laws of 2014, is amended and three new paragraphs (q), (r) and (s) are added to read as follows:

(p) for the period April first, two thousand sixteen through March thirty-first, two thousand seventeen, up to twenty-eight million five hundred thousand dollars[+];

(q) for the period April first, two thousand seventeen through March thirty-first, two thousand eighteen, up to twenty-eight million five hundred thousand dollars;

(r) for the period April first, two thousand eighteen through March thirty-first, two thousand nineteen, twenty-eight million five hundred thousand dollars;

(s) for the period April first, two thousand nineteen through March thirty-first, two thousand twenty, twenty-eight million five hundred thousand dollars.

§ 13. Subdivision 4-c of section 2807-p of the public health law, as amended by section 16 of part B of chapter 60 of the laws of 2014, is amended to read as follows:

4-c. Notwithstanding any provision of law to the contrary, the commissioner shall make additional payments for uncompensated care to voluntary non-profit diagnostic and treatment centers that are eligible for distributions under subdivision four of this section in the following amounts: for the period June first, two thousand six through December thirty-first, two thousand six, in the amount of seven million five hundred thousand dollars, for the period January first, two thousand seven through December thirty-first, two thousand seven, seven million five hundred thousand dollars, for the period January first, two thousand eight through December thirty-first, two thousand eight, seven

1 million five hundred thousand dollars, for the period January first, two  
2 thousand nine through December thirty-first, two thousand nine, fifteen  
3 million five hundred thousand dollars, for the period January first, two  
4 thousand ten through December thirty-first, two thousand ten, seven  
5 million five hundred thousand dollars, for the period January first, two  
6 thousand eleven through December thirty-first, two thousand eleven, seven  
7 million five hundred thousand dollars, for the period January first, two  
8 thousand twelve through December thirty-first, two thousand twelve,  
9 seven million five hundred thousand dollars, for the period January  
10 first, two thousand thirteen through December thirty-first, two thousand  
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  
20 five hundred thousand dollars, for the period January first, two thou-  
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 para-  
31 graph (g) of subdivision four of this section. In the event that federal  
32 financial participation is available for rate adjustments pursuant to  
33 this section, the commissioner shall make such payments as additional  
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 of this section if federal financial participation is available.  
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~~] 2020,

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

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  
20 and from assessments pursuant to section 2807-t of the public health law  
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.

25 (3) Notwithstanding any inconsistent provision of law, rule or regu-  
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  
30 paragraph (a) of subdivision 1 of section 2807-l of the public health  
31 law for the purposes of payment for administrative costs of the depart-  
32 ment of health related to the child health insurance plan program  
33 authorized pursuant to title 1-A of article 25 of the public health law  
34 into the special revenue funds - other, health care reform act (HCRA)  
35 resources fund - 061, child health insurance account, established within  
36 the department of health.

37 (4) Notwithstanding any inconsistent provision of law, rule or regu-  
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-l 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,  
48 health care reform act (HCRA) resources fund - 061, health occupation  
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~~] 2020, 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 regu-  
6 lation and effective April 1, 2008 through March 31, [~~2017~~] 2020, the  
7 commissioner of health is authorized to transfer and the comptroller is  
8 authorized to deposit, within amounts appropriated each year, the funds  
9 authorized for distribution in accordance with the provisions of section  
10 2807-l of the public health law for the purposes of payment for adminis-  
11 trative costs of the department of health related to the programs funded  
12 pursuant to section 2807-l 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 regu-  
17 lation and effective April 1, 2008 through March 31, [~~2017~~] 2020, the  
18 commissioner of health is authorized to transfer and the comptroller is  
19 authorized to deposit, within amounts appropriated each year, those  
20 funds authorized for distribution in accordance with the provisions of  
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  
26 funds authorized for distribution in accordance with the provisions of  
27 section 2807-l 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-l of the public health law into the special  
30 revenue funds - other, health care reform act (HCRA) resources fund -  
31 061, primary care initiatives account, established within the department  
32 of health.

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

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:

8 (a) The superintendent of financial services and the commissioner of  
9 health or their designee shall, from funds available in the hospital  
10 excess liability pool created pursuant to subdivision 5 of this section,  
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 equiv-  
18 alent excess coverage in accordance with section 19 of chapter 294 of  
19 the laws of 1985, for medical or dental malpractice occurrences between  
20 July 1, 1986 and June 30, 1987, between July 1, 1987 and June 30, 1988,  
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  
24 1, 1993 and June 30, 1994, between July 1, 1994 and June 30, 1995,  
25 between July 1, 1995 and June 30, 1996, between July 1, 1996 and June  
26 30, 1997, between July 1, 1997 and June 30, 1998, between July 1, 1998  
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,  
29 between July 1, 2002 and June 30, 2003, between July 1, 2003 and June  
30 30, 2004, between July 1, 2004 and June 30, 2005, between July 1, 2005  
31 and June 30, 2006, between July 1, 2006 and June 30, 2007, between July  
32 1, 2007 and June 30, 2008, between July 1, 2008 and June 30, 2009,  
33 between July 1, 2009 and June 30, 2010, between July 1, 2010 and June  
34 30, 2011, between July 1, 2011 and June 30, 2012, between July 1, 2012  
35 and June 30, 2013, between July 1, 2013 and June 30, 2014, between July  
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 1, 1990 and June 30, 1991, between July 1, 1991 and June 30, 1992,  
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 1, 1997 and June 30, 1998, between July 1, 1998 and June 30, 1999,  
48 between July 1, 1999 and June 30, 2000, between July 1, 2000 and June  
49 30, 2001, between July 1, 2001 and June 30, 2002, between July 1, 2002  
50 and June 30, 2003, between July 1, 2003 and June 30, 2004, between July  
51 1, 2004 and June 30, 2005, between July 1, 2005 and June 30, 2006,  
52 between July 1, 2006 and June 30, 2007, between July 1, 2007 and June  
53 30, 2008, between July 1, 2008 and June 30, 2009, between July 1, 2009  
54 and June 30, 2010, between July 1, 2010 and June 30, 2011, between July  
55 1, 2011 and June 30, 2012, between July 1, 2012 and June 30, 2013,  
56 between July 1, 2013 and June 30, 2014, between July 1, 2014 and June



1 30, 2015, between July 1, 2015 and June 30, 2016, [~~and~~] between July 1,  
2 2016 and June 30, 2017, and between July 1, 2017 and June 30, 2018 for  
3 physicians or dentists certified as eligible for each such period or  
4 periods pursuant to subdivision 2 of this section by a general hospital  
5 licensed pursuant to article 28 of the public health law; provided that  
6 no single insurer shall write more than fifty percent of the total  
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,  
9 from an insurer licensed in this state of primary malpractice insurance  
10 coverage in amounts of no less than one million three hundred thousand  
11 dollars for each claimant and three million nine hundred thousand  
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  
26 million dollars, but below the excess medical malpractice insurance  
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  
31 at nine percent per annum; the required level of such coverage for all  
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 cover-  
34 age, when combined with such primary malpractice insurance coverage,  
35 shall increase the aggregate level for each claimant by one million  
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  
50 occurrences between July 1, 1986 and June 30, 1987, between July 1, 1988  
51 and June 30, 1989, between July 1, 1989 and June 30, 1990, between July  
52 1, 1990 and June 30, 1991, between July 1, 1991 and June 30, 1992,  
53 between July 1, 1992 and June 30, 1993, between July 1, 1993 and June  
54 30, 1994, between July 1, 1994 and June 30, 1995, between July 1, 1995  
55 and June 30, 1996, between July 1, 1996 and June 30, 1997, between July  
56 1, 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  
2 30, 2001, between July 1, 2001 and June 30, 2002, between July 1, 2002  
3 and June 30, 2003, between July 1, 2003 and June 30, 2004, between July  
4 1, 2004 and June 30, 2005, between July 1, 2005 and June 30, 2006,  
5 between July 1, 2006 and June 30, 2007, between July 1, 2007 and June  
6 30, 2008, between July 1, 2008 and June 30, 2009, between July 1, 2009  
7 and June 30, 2010, between July 1, 2010 and June 30, 2011, between July  
8 1, 2011 and June 30, 2012, between July 1, 2012 and June 30, 2013, and  
9 between July 1, 2013 and June 30, 2014, between July 1, 2014 and June  
10 30, 2015, between July 1, 2015 and June 30, 2016, and between July 1,  
11 2016 and June 30, 2017, and between July 1, 2017 and June 30, 2018 allo-  
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  
18 cost of excess malpractice insurance or equivalent excess coverage for  
19 medical or dental malpractice occurrences between July 1, 1987 and June  
20 30, 1988, between July 1, 1988 and June 30, 1989, between July 1, 1989  
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,  
23 between July 1, 1993 and June 30, 1994, between July 1, 1994 and June  
24 30, 1995, between July 1, 1995 and June 30, 1996, between July 1, 1996  
25 and June 30, 1997, between July 1, 1997 and June 30, 1998, between July  
26 1, 1998 and June 30, 1999, between July 1, 1999 and June 30, 2000,  
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  
30 1, 2005 and June 30, 2006, between July 1, 2006 and June 30, 2007,  
31 between July 1, 2007 and June 30, 2008, between July 1, 2008 and June  
32 30, 2009, between July 1, 2009 and June 30, 2010, between July 1, 2010  
33 and June 30, 2011, between July 1, 2011 and June 30, 2012, between July  
34 1, 2012 and June 30, 2013, between July 1, 2013 and June 30, 2014,  
35 between July 1, 2014 and June 30, 2015, between July 1, 2015 and June  
36 30, 2016, and between July 1, 2016 and June 30, 2017, and between July  
37 1, 2017 and June 30, 2018 allocable to each general hospital for physi-  
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,  
48 1990, to the period July 1, 1990 to December 31, 1990, to the period  
49 January 1, 1991 to June 30, 1991, to the period July 1, 1991 to December  
50 31, 1991, to the period January 1, 1992 to June 30, 1992, to the period  
51 July 1, 1992 to December 31, 1992, to the period January 1, 1993 to June  
52 30, 1993, to the period July 1, 1993 to December 31, 1993, to the period  
53 January 1, 1994 to June 30, 1994, to the period July 1, 1994 to December  
54 31, 1994, to the period January 1, 1995 to June 30, 1995, to the period  
55 July 1, 1995 to December 31, 1995, to the period January 1, 1996 to June  
56 30, 1996, to the period July 1, 1996 to December 31, 1996, to the period

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  
3 July 1, 1998 to December 31, 1998, to the period January 1, 1999 to June  
4 30, 1999, to the period July 1, 1999 to December 31, 1999, to the period  
5 January 1, 2000 to June 30, 2000, to the period July 1, 2000 to December  
6 31, 2000, to the period January 1, 2001 to June 30, 2001, to the period  
7 July 1, 2001 to June 30, 2002, to the period July 1, 2002 to June 30,  
8 2003, to the period July 1, 2003 to June 30, 2004, to the period July 1,  
9 2004 to June 30, 2005, to the period July 1, 2005 and June 30, 2006, to  
10 the period July 1, 2006 and June 30, 2007, to the period July 1, 2007  
11 and June 30, 2008, to the period July 1, 2008 and June 30, 2009, to the  
12 period July 1, 2009 and June 30, 2010, to the period July 1, 2010 and  
13 June 30, 2011, to the period July 1, 2011 and June 30, 2012, to the  
14 period July 1, 2012 and June 30, 2013, to the period July 1, 2013 and  
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  
24 pool pursuant to subdivision 5 of this section as amended, and pursuant  
25 to section 6 of part J of chapter 63 of the laws of 2001, as may from  
26 time to time be amended, which amended this subdivision, are insuffi-  
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  
30 the period July 1, 1994 to June 30, 1995, during the period July 1, 1995  
31 to June 30, 1996, during the period July 1, 1996 to June 30, 1997,  
32 during the period July 1, 1997 to June 30, 1998, during the period July  
33 1, 1998 to June 30, 1999, during the period July 1, 1999 to June 30,  
34 2000, during the period July 1, 2000 to June 30, 2001, during the period  
35 July 1, 2001 to October 29, 2001, during the period April 1, 2002 to  
36 June 30, 2002, during the period July 1, 2002 to June 30, 2003, during  
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  
48 accordance with paragraph (a) of subdivision 4-a of this section to  
49 rates of payment applicable to state governmental agencies, each physi-  
50 cian or dentist for whom a policy for excess insurance coverage or  
51 equivalent excess coverage is purchased for such period shall be respon-  
52 sible for payment to the provider of excess insurance coverage or equiv-  
53 alent excess coverage of an allocable share of such insufficiency, based  
54 on the ratio of the total cost of such coverage for such physician to  
55 the sum of the total cost of such coverage for all physicians applied to  
56 such insufficiency.

(b) Each provider of excess insurance coverage or equivalent excess 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, 1994 to June 30, 1995, or covering the period July 1, 1995 to June 30, 1996, or covering the period July 1, 1996 to June 30, 1997, or covering the period July 1, 1997 to June 30, 1998, or covering the period July 1, 1998 to June 30, 1999, or covering the period July 1, 1999 to June 30, 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 April 1, 2002 to June 30, 2002, or covering the period 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 covering the period July 1, 2005 to June 30, 2006, or covering the period 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 covering the period 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 covering the period July 1, 2012 to June 30, 2013, or covering the period 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 covering the period July 1, 2016 to June 30, 2017, or covering the period July 1, 2017 to June 30, 2018 shall notify a covered physician or dentist by mail, mailed to the address shown on the last application for excess insurance coverage or equivalent excess coverage, of the amount due to such provider from such physician or dentist for such coverage period determined in accordance with paragraph (a) of this subdivision. Such amount shall be due from such physician or dentist to such provider of excess insurance coverage or equivalent excess coverage in a time and manner determined by the superintendent of financial services.

(c) If a physician or dentist liable for payment of a portion of the costs of excess insurance coverage or equivalent excess 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, 1994 to June 30, 1995, or covering the period July 1, 1995 to June 30, 1996, or covering the period July 1, 1996 to June 30, 1997, or covering the period July 1, 1997 to June 30, 1998, or covering the period July 1, 1998 to June 30, 1999, or covering the period July 1, 1999 to June 30, 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 April 1, 2002 to June 30, 2002, or covering the period 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 covering the period July 1, 2005 to June 30, 2006, or covering the period 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 covering the period 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 covering the period July 1, 2012 to June 30, 2013, or covering the period 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 covering the period July 1, 2016 to June 30, 2017, or covering the period July 1, 2017 to June 30, 2018 determined in accordance with paragraph (a) of this subdivision fails, refuses or neglects to make payment to the provider of excess insurance coverage or equivalent excess coverage in such time and manner as determined by the superintendent of financial services pursuant to paragraph (b) of this subdivision, excess insurance

1 coverage or equivalent excess coverage purchased for such physician or  
2 dentist in accordance with this section for such coverage period shall  
3 be cancelled and shall be null and void as of the first day on or after  
4 the commencement of a policy period where the liability for payment  
5 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  
8 commissioner of health or their designee of each physician and dentist  
9 eligible for purchase of a policy for excess insurance coverage or  
10 equivalent excess coverage covering the period July 1, 1992 to June 30,  
11 1993, or covering the period July 1, 1993 to June 30, 1994, or covering  
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 cover-  
18 ing the period April 1, 2002 to June 30, 2002, or covering the period  
19 July 1, 2002 to June 30, 2003, or covering the period July 1, 2003 to  
20 June 30, 2004, or covering the period July 1, 2004 to June 30, 2005, or  
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  
23 June 30, 2008, or covering the period July 1, 2008 to June 30, 2009, or  
24 covering the period July 1, 2009 to June 30, 2010, or covering the peri-  
25 od July 1, 2010 to June 30, 2011, or covering the period July 1, 2011 to  
26 June 30, 2012, or covering the period July 1, 2012 to June 30, 2013, or  
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  
30 covering the period July 1, 2017 to June 30, 2018 that has made payment  
31 to such provider of excess insurance coverage or equivalent excess  
32 coverage in accordance with paragraph (b) of this subdivision and of  
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  
48 30, 2007, and to the period July 1, 2007 to June 30, 2008, and to the  
49 period July 1, 2008 to June 30, 2009, and to the period July 1, 2009 to  
50 June 30, 2010, and to the period July 1, 2010 to June 30, 2011, and to  
51 the period July 1, 2011 to June 30, 2012, and to the period July 1, 2012  
52 to June 30, 2013, and to the period July 1, 2013 to June 30, 2014, and  
53 to the period July 1, 2014 to June 30, 2015, and to the period July 1,  
54 2015 to June 30, 2016, ~~and~~ and to the period July 1, 2016 to June 30,  
55 2017, and to the period July 1, 2017 to June 30, 2018 received from the  
56 hospital excess liability pool for purchase of excess insurance coverage

1 or equivalent excess coverage covering the period July 1, 1992 to June  
2 30, 1993, and covering the period July 1, 1993 to June 30, 1994, and  
3 covering the period July 1, 1994 to June 30, 1995, and covering the  
4 period July 1, 1995 to June 30, 1996, and covering the period July 1,  
5 1996 to June 30, 1997, and covering the period July 1, 1997 to June 30,  
6 1998, and covering the period July 1, 1998 to June 30, 1999, and cover-  
7 ing the period July 1, 1999 to June 30, 2000, and covering the period  
8 July 1, 2000 to June 30, 2001, and covering the period July 1, 2001 to  
9 October 29, 2001, and covering the period April 1, 2002 to June 30,  
10 2002, and covering the period July 1, 2002 to June 30, 2003, and cover-  
11 ing the period July 1, 2003 to June 30, 2004, and covering the period  
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,  
17 2011, and covering the period July 1, 2011 to June 30, 2012, and cover-  
18 ing the period July 1, 2012 to June 30, 2013, and covering the period  
19 July 1, 2013 to June 30, 2014, and covering the period July 1, 2014 to  
20 June 30, 2015, and covering the period July 1, 2015 to June 30, 2016,  
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  
23 such excess insurance coverage or equivalent excess coverage is  
24 cancelled in accordance with paragraph (c) of this subdivision.

25 § 18. Section 40 of chapter 266 of the laws of 1986, amending the  
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  
31 malpractice for the periods commencing July 1, 1985 and ending June 30,  
32 ~~[2017]~~ 2018; provided, however, that notwithstanding any other provision  
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  
48 to satisfy such deficiency. The superintendent shall not impose such  
49 surcharge during the period commencing July 1, 2009 and ending June 30,  
50 2010. On and after July 1, 1989, the surcharge prescribed by this  
51 section shall be retained by insurers to the extent that they insured  
52 physicians and surgeons during the July 1, 1985 through June 30, ~~[2017]~~  
53 2018 policy periods; in the event and to the extent physicians and  
54 surgeons were insured by another insurer during such periods, all or a  
55 pro rata share of the surcharge, as the case may be, shall be remitted  
56 to such other insurer in accordance with rules and regulations to be



1 promulgated by the superintendent. Surcharges collected from physicians  
2 and surgeons who were not insured during such policy periods shall be  
3 apportioned among all insurers in proportion to the premium written by  
4 each insurer during such policy periods; if a physician or surgeon was  
5 insured by an insurer subject to rates established by the superintendent  
6 during such policy periods, and at any time thereafter a hospital,  
7 health maintenance organization, employer or institution is responsible  
8 for responding in damages for liability arising out of such physician's  
9 or surgeon's practice of medicine, such responsible entity shall also  
10 remit to such prior insurer the equivalent amount that would then be  
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  
31 annual surcharges to be imposed for a reasonable period of time whether  
32 or not any such annual surcharge has been actually imposed as of the  
33 establishment of such rates.

34 § 19. Section 5 and subdivisions (a) and (e) of section 6 of part J of  
35 chapter 63 of the laws of 2001, amending chapter 266 of the laws of  
36 1986, amending the civil practice law and rules and other laws relating  
37 to malpractice and professional medical conduct, as amended by section 6  
38 of part C of chapter 59 of the laws of 2016, are amended to read as  
39 follows:

40 § 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  
48 purchasing excess insurance coverage for eligible participating physi-  
49 cians and dentists during the period July 1, 2001 to June 30, 2002, or  
50 July 1, 2002 to June 30, 2003, or July 1, 2003 to June 30, 2004, or July  
51 1, 2004 to June 30, 2005, or July 1, 2005 to June 30, 2006, or July 1,  
52 2006 to June 30, 2007, or July 1, 2007 to June 30, 2008, or July 1, 2008  
53 to June 30, 2009, or July 1, 2009 to June 30, 2010, or July 1, 2010 to  
54 June 30, 2011, or July 1, 2011 to June 30, 2012, or July 1, 2012 to June  
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.

3 (a) This section shall be effective only upon a determination, pursu-  
4 ant to section five of this act, by the superintendent of financial  
5 services and the commissioner of health, and a certification of such  
6 determination to the state director of the budget, the chair of the  
7 senate committee on finance and the chair of the assembly committee on  
8 ways and means, that the amount of funds in the hospital excess liabil-  
9 ity pool, created pursuant to section 18 of chapter 266 of the laws of  
10 1986, is insufficient for purposes of purchasing excess insurance cover-  
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,  
18 2014, or July 1, 2014 to June 30, 2015, or July 1, 2015 to June 30,  
19 2016, or July 1, 2016 to June 30, 2017, or July 1, 2017 to June 30, 2018  
20 as applicable.

21 (e) The commissioner of health shall transfer for deposit to the  
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  
25 coverage for eligible participating physicians and dentists for the  
26 policy year July 1, 2001 to June 30, 2002, or July 1, 2002 to June 30,  
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  
31 established in chapter 266 of the laws of 1986, as amended, no later  
32 than June 15, 2002, June 15, 2003, June 15, 2004, June 15, 2005, June  
33 15, 2006, June 15, 2007, June 15, 2008, June 15, 2009, June 15, 2010,  
34 June 15, 2011, June 15, 2012, June 15, 2013, June 15, 2014, June 15,  
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  
48 exceeds the total number of physicians or dentists certified as eligible  
49 for the coverage period beginning the first of July, two thousand seven-  
50 teen, then the general hospitals may certify additional eligible physi-  
51 cians or dentists in a number equal to such general hospital's propor-  
52 tional share of the total number of physicians or dentists for whom  
53 excess coverage or equivalent excess coverage was purchased with funds  
54 available in the hospital excess liability pool as of the thirtieth of  
55 June, two thousand seventeen, as applied to the difference between the  
56 number of eligible physicians or dentists for whom a policy for excess

1 coverage or equivalent excess coverage was purchased for the coverage  
2 period ending the thirtieth of June, two thousand seventeen and the  
3 number of such eligible physicians or dentists who have applied for  
4 excess coverage or equivalent excess coverage for the coverage period  
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:

9 § 2807-1. Health care initiatives pool distributions. 1. Funds accumu-  
10 lated in the health care initiatives pools pursuant to paragraph (b) of  
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,  
26 up to one hundred twenty million six hundred thousand dollars;

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 (iii) from the pool for the period January first, nineteen hundred  
32 ninety-nine through December thirty-first, nineteen hundred ninety-nine,  
33 up to one hundred eighty-one million dollars;

34 (iv) from the pool for the period January first, two thousand through  
35 December thirty-first, two thousand, two hundred seven million dollars;

36 (v) from the pool for the period January first, two thousand one  
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;

48 (ix) from the pool or the health care reform act (HCRA) resources  
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  
53 period January first, two thousand six through December thirty-first,  
54 two thousand six, up to three hundred twenty-five million four hundred  
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,  
3 two thousand seven, up to four hundred twenty-eight million fifty-nine  
4 thousand dollars;

5 (xii) from the health care reform act (HCRA) resources fund for the  
6 period January first, two thousand eight through December thirty-first,  
7 two thousand ten, up to four hundred fifty-three million six hundred  
8 seventy-four thousand dollars annually;

9 (xiii) from the health care reform act (HCRA) resources fund for the  
10 period January first, two thousand eleven, through March thirty-first,  
11 two thousand eleven, up to one hundred thirteen million four hundred  
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 (xv) from the health care reform act (HCRA) resources fund for the  
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 (xvi) from the health care reform act (HCRA) resources fund for the  
22 period April first, two thousand thirteen, through March thirty-first,  
23 two thousand fourteen, up to three hundred seventy million six hundred  
24 ninety-five thousand dollars; and

25 (xvii) from the health care reform act (HCRA) resources fund for each  
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  
30 of distributions for health insurance programs under the individual  
31 subsidy programs established pursuant to the expanded health care cover-  
32 age act of nineteen hundred eighty-eight as amended, and for evaluation  
33 of such programs from the respective health care initiatives pools or  
34 the health care reform act (HCRA) resources fund, whichever is applica-  
35 ble, established for the following periods in the following amounts:

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  
48 thousand four; up to six hundred seventy thousand dollars for the period  
49 January first, two thousand five through June thirtieth, two thousand  
50 five; up to one million three hundred thousand dollars for the period  
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  
53 the period April first, two thousand seven through March thirty-first,  
54 two thousand nine, shall be allocated to individual subsidy programs;  
55 and

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

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

(c) Up to seventy-eight million dollars shall be reserved and accumulated from year to year from the pool for the period January first, nineteen hundred ninety-seven through December thirty-first, nineteen hundred ninety-seven, for purposes of public health programs, up to seventy-six million dollars shall be reserved and accumulated from year to year from the pools for the periods January first, nineteen hundred ninety-eight through December thirty-first, nineteen hundred ninety-eight and January first, nineteen hundred ninety-nine through December thirty-first, nineteen hundred ninety-nine, up to eighty-four million dollars shall be reserved and accumulated from year to year from the pools for the period January first, two thousand through December thirty-first, two thousand, up to eighty-five million dollars shall be reserved and accumulated from year to year from the pools for the period January first, two thousand one through December thirty-first, two thousand one, up to eighty-six million dollars shall be reserved and accumulated from year to year from the pools for the period January first, two thousand two through December thirty-first, two thousand two, up to eighty-six million one hundred fifty thousand dollars shall be reserved and accumulated from year to year from the pools for the period January first, two thousand three through December thirty-first, two thousand three, up to fifty-eight million seven hundred eighty thousand dollars shall be reserved and accumulated from year to year from the pools for the period January first, two thousand four through December thirty-first, two thousand four, up to sixty-eight million seven hundred thirty thousand dollars shall be reserved and accumulated from year to year from the pools or the health care reform act (HCRA) resources fund, whichever is applicable, for the period January first, two thousand five through December thirty-first, two thousand five, up to ninety-four million three hundred fifty thousand dollars shall be reserved and accu-

1 mulated from year to year from the health care reform act (HCRA)  
2 resources fund for the period January first, two thousand six through  
3 December thirty-first, two thousand six, up to seventy million nine  
4 hundred thirty-nine thousand dollars shall be reserved and accumulated  
5 from year to year from the health care reform act (HCRA) resources fund  
6 for the period January first, two thousand seven through December thir-  
7 ty-first, two thousand seven, up to fifty-five million six hundred  
8 eighty-nine thousand dollars annually shall be reserved and accumulated  
9 from year to year from the health care reform act (HCRA) resources fund  
10 for the period January first, two thousand eight through December thir-  
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  
25 hundred ninety-seven pool, nineteen hundred ninety-eight pool, nineteen  
26 hundred ninety-nine pool, two thousand pool, two thousand one pool and  
27 two thousand two pool, respectively, up to twenty-two million dollars  
28 from the two thousand three pool, up to ten million dollars for the  
29 period January first, two thousand four through December thirty-first,  
30 two thousand four, up to eleven million dollars for the period January  
31 first, two thousand five through December thirty-first, two thousand  
32 five, up to twenty-two million dollars for the period January first, two  
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  
36 thousand ten, up to five million five hundred twenty-four thousand  
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  
50 periods January first, nineteen hundred ninety-seven through December  
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  
54 January first, two thousand one through December thirty-first, two thou-  
55 sand one, up to twenty-two million dollars for the period January first,  
56 two thousand two through December thirty-first, two thousand two, up to



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  
4 for the period January first, two thousand four through December thir-  
5 ty-first, two thousand four, up to twelve million one hundred thirty  
6 thousand dollars for the period January first, two thousand five through  
7 December thirty-first, two thousand five, up to twenty-four million two  
8 hundred fifty thousand dollars for the period January first, two thou-  
9 sand six through December thirty-first, two thousand six, up to twenty  
10 million four hundred ninety-two thousand dollars annually for the period  
11 January first, two thousand seven through December thirty-first, two  
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  
20 April first, two thousand thirteen through March thirty-first, two thou-  
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  
30 six, up to eighteen million two hundred fifty thousand dollars for the  
31 period January first, two thousand seven through December thirty-first,  
32 two thousand seven, up to three million dollars annually for the period  
33 January first, two thousand eight through December thirty-first, two  
34 thousand ten, up to seven hundred fifty thousand dollars for the period  
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  
48 first, two thousand five through December thirty-first, two thousand  
49 six, and up to seven million five hundred thousand dollars for the peri-  
50 od January first, two thousand seven through March thirty-first, two  
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,  
3 two thousand seven through June thirtieth, two thousand seven, and for  
4 the purposes outlined in such memorandum upon the recommendation of the  
5 speaker of the assembly, up to eight million five hundred thousand  
6 dollars annually for the periods January first, two thousand through  
7 December thirty-first, two thousand six, and up to four million two  
8 hundred fifty thousand dollars for the period January first, two thou-  
9 sand seven through June thirtieth, two thousand seven; and

10 (C) for services and expenses, including grants, related to emergency  
11 assistance distributions as designated by the commissioner. Notwith-  
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  
20 April first, two thousand seven through March thirty-first, two thousand  
21 eleven, up to two million nine hundred thousand dollars each state  
22 fiscal year for the period April first, two thousand eleven through  
23 March thirty-first, two thousand fourteen, ~~and~~ up to two million nine  
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  
30 ranking minority member of the senate finance committee, the assembly  
31 ways and means committee, the senate committee on health, and the assem-  
32 bly committee on health;

33 (iv) distributions by the commissioner related to poison control  
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  
48 through December thirty-first, two thousand nine, up to three million  
49 six hundred thousand dollars for the period January first, two thousand  
50 ten through December thirty-first, two thousand ten, up to seven hundred  
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  
54 period April first, two thousand eleven through March thirty-first, two  
55 thousand fourteen, ~~and~~ up to three million dollars each state fiscal  
56 year for the period April first, two thousand fourteen through March

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

(v) deposit by the commissioner, within amounts appropriated, and the state comptroller is hereby authorized and directed to receive for deposit to, to the credit of the department of health's special revenue fund - other, miscellaneous special revenue fund - 339 maternal and child HIV services account or the health care reform act (HCRA) resources fund, whichever is applicable, for purposes of a special program for HIV services for women and children, including adolescents pursuant to section twenty-five hundred-f-one of this chapter, up to five million dollars annually for the periods January first, two thousand through December thirty-first, two thousand two, up to five million dollars for the period January first, two thousand three through December thirty-first, two thousand three, up to two million five hundred thousand dollars for the period January first, two thousand four through December thirty-first, two thousand four, up to two million five hundred thousand dollars for the period January first, two thousand five through December thirty-first, two thousand five, up to five million dollars for the period January first, two thousand six through December thirty-first, two thousand six, up to five million dollars annually for the period January first, two thousand seven through December thirty-first, two thousand ten, up to one million two hundred fifty thousand dollars for the period January first, two thousand eleven through March thirty-first, two thousand eleven, and up to five million dollars each state fiscal year for the period April first, two thousand eleven through March thirty-first, two thousand fourteen;

(d) (i) An amount of up to twenty million dollars annually for the period January first, two thousand through December thirty-first, two thousand six, up to ten million dollars for the period January first, two thousand seven through June thirtieth, two thousand seven, up to twenty million dollars annually for the period January first, two thousand eight through December thirty-first, two thousand ten, up to five million dollars for the period January first, two thousand eleven through March thirty-first, two thousand eleven, up to nineteen million six hundred thousand dollars each state fiscal year for the period April first, two thousand eleven through March thirty-first, two thousand fourteen, and up to nineteen million six hundred thousand dollars each state fiscal year for the period April first, two thousand fourteen through March thirty-first, two thousand seventeen, and up to nineteen million six hundred thousand dollars each state fiscal year for the period of April first, two thousand seventeen through March thirty-first, two thousand twenty, shall be transferred to the health facility restructuring pool established pursuant to section twenty-eight hundred 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,  
2 whichever is applicable, during the period January first, nineteen  
3 hundred ninety-seven through December thirty-first, nineteen hundred  
4 ninety-nine, up to fifty million dollars on an annualized basis, up to  
5 thirty million dollars for the period January first, two thousand  
6 through December thirty-first, two thousand, up to forty million dollars  
7 for the period January first, two thousand one through December thirty-  
8 first, two thousand one, up to fifty million dollars for the period  
9 January first, two thousand two through December thirty-first, two thou-  
10 sand two, up to forty-one million one hundred fifty thousand dollars for  
11 the period January first, two thousand three through December thirty-  
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 annu-  
20 ally for the period January first, two thousand seven through December  
21 thirty-first, two thousand ten, up to eight million eight hundred fifty  
22 thousand dollars for the period January first, two thousand eleven  
23 through March thirty-first, two thousand eleven, up to twenty-eight  
24 million four hundred thousand dollars each state fiscal year for the  
25 period April first, two thousand eleven through March thirty-first, two  
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  
29 seventeen, and up to twenty-six million eight hundred seventeen thousand  
30 dollars each state fiscal year for the period April first, two thousand  
31 seventeen through March thirty-first, two thousand twenty, less the  
32 amount of funds available for allocations for rate adjustments for work-  
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;

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

49 (iii) from the pool for the period January first, nineteen hundred  
50 ninety-nine through December thirty-first, nineteen hundred ninety-nine,  
51 eighty-two million dollars shall be transferred and deposited and cred-  
52 ited to the credit of the state general fund medical assistance local  
53 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  
3 million dollars, and for the period January first, two thousand six  
4 through December thirty-first, two thousand six, eighty-two million  
5 dollars, and for the period January first, two thousand seven through  
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  
9 dollars shall be deposited by the commissioner, and the state comp-  
10 troller is hereby authorized and directed to receive for deposit to the  
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  
18 million one hundred thousand dollars, for the period January first, two  
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  
26 fund, medical assistance account.

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

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

37 (ii) from the pool for the period January first, nineteen hundred  
38 ninety-eight through December thirty-first, nineteen hundred ninety-  
39 eight, 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  
48 amounts of funds remaining after allocations in accordance with para-  
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:

52 (A) from the pool for the period January first, nineteen hundred nine-  
53 ty-seven through December thirty-first, nineteen hundred ninety-seven,  
54 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

4 (C) from the pool for the period January first, nineteen hundred nine-  
5 ty-nine through December thirty-first, nineteen hundred ninety-nine, six  
6 and forty-five-hundredths percent;

7 (ii) funds shall be available for distributions including income from  
8 invested funds as follows:

9 (A) for purposes of the primary care physician loan repayment program  
10 in accordance with section nine hundred three of this chapter, up to  
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  
26 care delivery development and rural health care access development,  
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  
30 remaining after allocations in accordance with paragraphs (a) through  
31 (f) of this subdivision, and for periods on and after January first, two  
32 thousand, in the following amounts:

33 (i) from the pool for the period January first, nineteen hundred nine-  
34 ty-seven through December thirty-first, nineteen hundred ninety-seven,  
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,  
48 whichever is applicable, for the period January first, two thousand four  
49 through December thirty-first, two thousand four, up to fifteen million  
50 eight hundred fifty thousand dollars, for the period January first, two  
51 thousand five through December thirty-first, two thousand five, up to  
52 nineteen million two hundred thousand dollars, for the period January  
53 first, two thousand six through December thirty-first, two thousand six,  
54 up to nineteen million two hundred thousand dollars, for the period  
55 January first, two thousand seven through December thirty-first, two  
56 thousand ten, up to eighteen million one hundred fifty thousand dollars

1 annually, for the period January first, two thousand eleven through  
2 March thirty-first, two thousand eleven, up to four million five hundred  
3 thirty-eight thousand dollars, for each state fiscal year for the period  
4 April first, two thousand eleven through March thirty-first, two thou-  
5 sand fourteen, up to sixteen million two hundred thousand dollars, [and]  
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  
9 hundred thousand dollars each state fiscal year for the period April  
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;

23 (ii) from the pool for the period January first, nineteen hundred  
24 ninety-eight through December thirty-first, nineteen hundred ninety-  
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  
30 shall be available, including income from invested funds, for allo-  
31 cations and distributions in accordance with section twenty-eight  
32 hundred seven-p of this article for diagnostic and treatment center  
33 uncompensated care from the respective health care initiatives pools or  
34 the health care reform act (HCRA) resources fund, whichever is applica-  
35 ble, for the following periods in the following percentage amounts of  
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  
50 annually, and for the period January first, two thousand three through  
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  
54 three through December thirty-first, two thousand three, up to six  
55 million dollars, for the period January first, two thousand four through  
56 December thirty-first, two thousand six, up to twelve million dollars

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

10 (B) from the health care reform act (HCRA) resources fund for the  
11 period January first, two thousand six through December thirty-first,  
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

26 (vi) funds reserved and accumulated pursuant to this paragraph for  
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  
30 credit of the state special revenue funds - other, HCRA transfer fund,  
31 medical assistance account, for purposes of funding the state share of  
32 rate adjustments made pursuant to section twenty-eight hundred seven-p  
33 of this article, provided, however, that in the event federal financial  
34 participation is not available for rate adjustments made pursuant to  
35 paragraph (b) of subdivision one of section twenty-eight hundred seven-p  
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  
42 funds, for transfer to and allocation for services and expenses for the  
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 follow-  
48 ing percentage amounts of funds remaining after 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:

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

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

(iii) from the pool for the period January first, nineteen hundred ninety-nine and December thirty-first, nineteen hundred ninety-nine, nine and sixty-eight-hundredths percent;

(iv) from the pool for the periods January first, two thousand through December thirty-first, two thousand two, up to twelve million dollars annually, and for the period January first, two thousand three through December thirty-first, two thousand three, up to forty million dollars; and

(v) from the pool or the health care reform act (HCRA) resources fund, whichever is applicable, for the periods January first, two thousand four through December thirty-first, two thousand four, up to fifty-six million dollars, for the period January first, two thousand five through December thirty-first, two thousand six, up to sixty million dollars annually, for the period January first, two thousand seven through December thirty-first, two thousand ten, up to sixty million dollars annually, for the period January first, two thousand eleven through March thirty-first, two thousand eleven, up to fifteen million dollars, each state fiscal year for the period April first, two thousand eleven through March thirty-first, two thousand fourteen, up to forty-two million three hundred thousand dollars and up to forty-one million fifty thousand dollars each state fiscal year for the period April first, two thousand fourteen through March thirty-first, two thousand ~~seventeen~~ twenty.

(m) Funds shall be reserved and accumulated from year to year and shall be available, including income from invested funds, for purposes of distributions pursuant to section twenty-eight hundred seven-r of this article for cancer related services from the respective health care initiatives pools or the health care reform act (HCRA) resources fund, whichever is applicable, established for the following periods in the following percentage amounts of funds remaining after allocations in accordance with paragraphs (a) through (f) of this subdivision, and for periods on and after January first, two thousand, in the following amounts:

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

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

(iii) from the pool for the period January first, nineteen hundred ninety-nine and December thirty-first, nineteen hundred ninety-nine, six and forty-five-hundredths percent;

(iv) from the pool for the period January first, two thousand through December thirty-first, two thousand two, up to ten million dollars on an annual basis;

(v) from the pool for the period January first, two thousand three through December thirty-first, two thousand four, up to eight million nine hundred fifty thousand dollars on an annual basis;

(vi) from the pool or the health care reform act (HCRA) resources fund, whichever is applicable, for the period January first, two thousand five through December thirty-first, two thousand six, up to ten million fifty thousand dollars on an annual basis, for the period January first, two thousand seven through December thirty-first, two thou-

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.

4 (n) Funds shall be accumulated and transferred from the health care  
5 reform act (HCRA) resources fund as follows: for the period April first,  
6 two thousand seven through March thirty-first, two thousand eight, and  
7 on an annual basis for the periods April first, two thousand eight  
8 through November thirtieth, two thousand nine, funds within amounts  
9 appropriated shall be transferred and deposited and credited to the  
10 credit of the state special revenue funds - other, HCRA transfer fund,  
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  
18 hundred seven-j of this article, as a result of surcharges, assessments  
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  
26 account, for purposes of distributions to implement the child health  
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  
30 and accumulated for priority distributions pursuant to subparagraph  
31 (iii) of paragraph (c) of subdivision one of this section shall not be  
32 transferred and deposited into such account pursuant to this subdivi-  
33 sion; and provided further, however, that any unused or uncommitted pool  
34 funds accumulated and allocated pursuant to paragraph (j) of subdivision  
35 one of this section shall be distributed for purposes of the health  
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:



(a) Funds shall be deposited by the commissioner, within amounts appropriated, and the state comptroller is hereby authorized and directed to receive for deposit to the credit of the state special revenue funds - other, HCRA transfer fund, medicaid fraud hotline and medicaid administration account, or any successor fund or account, for purposes of services and expenses related to the toll-free medicaid fraud hotline established pursuant to section one hundred eight of chapter one of the laws of nineteen hundred ninety-nine from the tobacco control and insurance initiatives pool established for the following periods in the following amounts: four hundred thousand dollars annually for the periods January first, two thousand through December thirty-first, two thousand two, up to four hundred thousand dollars for the period January first, two thousand three through December thirty-first, two thousand three, up to four hundred thousand dollars for the period January first, two thousand four through December thirty-first, two thousand four, up to four hundred thousand dollars for the period January first, two thousand five through December thirty-first, two thousand five, up to four hundred thousand dollars for the period January first, two thousand six through December thirty-first, two thousand six, up to four hundred thousand dollars for the period January first, two thousand seven through December thirty-first, two thousand seven, up to four hundred thousand dollars for the period January first, two thousand eight through December thirty-first, two thousand eight, up to four hundred thousand dollars for the period January first, two thousand nine through December thirty-first, two thousand nine, up to four hundred thousand dollars for the period January first, two thousand ten through December thirty-first, two thousand ten, up to one hundred thousand dollars for the period January first, two thousand eleven through March thirty-first, two thousand eleven and within amounts appropriated on and after April first, two thousand eleven.

(b) Funds shall be reserved and accumulated from year to year and shall be available, including income from invested funds, for purposes of payment of audits or audit contracts necessary to determine payor and provider compliance with requirements set forth in sections twenty-eight hundred seven-j, twenty-eight hundred seven-s and twenty-eight hundred seven-t of this article from the tobacco control and insurance initiatives pool established for the following periods in the following amounts: five million six hundred thousand dollars annually for the periods January first, two thousand through December thirty-first, two thousand two, up to five million dollars for the period January first, two thousand three through December thirty-first, two thousand three, up to five million dollars for the period January first, two thousand four through December thirty-first, two thousand four, up to five million dollars for the period January first, two thousand five through December thirty first, two thousand five, up to five million dollars for the period January first, two thousand six through December thirty-first, two thousand six, up to seven million eight hundred thousand dollars for the period January first, two thousand seven through December thirty-first, two thousand seven, and up to eight million three hundred twenty-five thousand dollars for the period January first, two thousand eight through December thirty-first, two thousand eight, up to eight million five hundred thousand dollars for the period January first, two thousand nine through December thirty-first, two thousand nine, up to eight million five hundred thousand dollars for the period January first, two thousand ten through December thirty-first, two thousand ten, up to two million one hundred twenty-five thousand dollars for the peri-

od January first, two thousand eleven through March thirty-first, two thousand eleven, up to fourteen million seven hundred thousand dollars each state fiscal year for the period April first, two thousand eleven through March thirty-first, two thousand fourteen, ~~and~~ up to eleven million one hundred thousand dollars each state fiscal year for the period April first, two thousand fourteen through March thirty-first, two thousand seventeen, and up to eleven million one hundred thousand dollars each state fiscal year for the period April first, two thousand seventeen through March thirty-first, two thousand twenty.

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

(vii) 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 six, and pursuant to former section twenty-seven hundred ninety-nine-1 of this chapter, for the period January first, two thousand six through December thirty-first, two thousand six;

(viii) eighty-six million four hundred thousand 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 seven and pursuant to the former section twenty-seven hundred ninety-nine-1 of this chapter, for the period January first, two thousand seven through December thirty-first, two thousand seven; and

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

(d) Funds shall be deposited by the commissioner, within amounts appropriated, and the state comptroller is hereby authorized and directed to receive for deposit to the credit of the state special revenue funds - other, HCRA transfer fund, medical assistance account, or any successor fund or account, for purposes of funding the state share of services and expenses related to the family health plus program including up to two and one-half million dollars annually for the period January first, two thousand through December thirty-first, two thousand two, for administration and marketing costs associated with such program established pursuant to clause (A) of subparagraph (v) of paragraph (a) of subdivision two of section three hundred sixty-nine-ee of the social services law from the tobacco control and insurance initiatives pool established for the following periods in the following amounts:

(i) three million five hundred thousand dollars for the period January first, two thousand through December thirty-first, two thousand;

(ii) twenty-seven million dollars for the period January first, two thousand one through December thirty-first, two thousand one; and

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

(e) Funds shall be deposited by the commissioner, within amounts appropriated, and the state comptroller is hereby authorized and directed to receive for deposit to the credit of the state special revenue funds - other, HCRA transfer fund, medical assistance account, or any successor fund or account, for purposes of funding the state share of services and expenses related to the family health plus program including up to two and one-half million dollars annually for the period January first, two thousand through December thirty-first, two thousand two for administration and marketing costs associated with such program established pursuant to clause (B) of subparagraph (v) of paragraph (a) of subdivision two of section three hundred sixty-nine-ee of the social services law from the tobacco control and insurance initiatives pool established for the following periods in the following amounts:

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

(ii) thirty million five hundred thousand dollars for the period January first, two thousand one through December thirty-first, two thousand one; and

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

(f) Funds shall be deposited by the commissioner, within amounts appropriated, and the state comptroller is hereby authorized and directed to receive for deposit to the credit of the state special revenue funds - other, HCRA transfer fund, medicaid fraud hotline and medicaid administration account, or any successor fund or account, for purposes of payment of administrative expenses of the department related to the family health plus program established pursuant to section three hundred sixty-nine-ee of the social services law from the tobacco control and insurance initiatives pool established for the following periods in the following amounts: five hundred thousand dollars on an annual basis for the periods January first, two thousand through December thirty-first, two thousand six, five hundred thousand dollars for the period January first, two thousand seven through December thirty-first, two thousand seven, and five hundred thousand dollars for the period January first, two thousand eight through December thirty-first, two thousand eight, five hundred thousand dollars for the period January first, two thousand nine through December thirty-first, two thousand nine, five hundred thousand dollars for the period January first, two thousand ten through December thirty-first, two thousand ten, one hundred twenty-five thousand dollars for the period January first, two thousand eleven through March thirty-first, two thousand eleven and within amounts appropriated on and after April first, two thousand eleven.

(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;

(iv) up to forty million dollars for the period January first, two thousand three through December thirty-first, two thousand three 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;

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;

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

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

26 (ix) up to forty million dollars for the period January first, two  
27 thousand eight through December thirty-first, two thousand eight of  
28 which fifty per centum shall be allocated to the program pursuant to  
29 section four thousand three hundred twenty-one-a of the insurance law  
30 and fifty per centum shall be allocated to the program pursuant to  
31 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;

49 (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

4 (viii) up to one hundred three million seven hundred fifty thousand  
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  
9 of services and expenses related to the healthy New York group program  
10 established pursuant to sections four thousand three hundred twenty-six  
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,  
26 two thousand five;

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;

30 (vii) up to sixty-one million seven hundred thousand dollars for the  
31 period January first, two thousand seven through December thirty-first,  
32 two thousand seven; and

33 (viii) up to one hundred three million seven hundred fifty thousand  
34 dollars for the period January first, two thousand eight through Decem-  
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  
39 first, two thousand four through December thirty-first, two thousand  
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  
44 otherwise available for distribution under such paragraphs for the  
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  
48 hundred thousand dollars annually for the periods January first, two  
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  
53 in subsection (c) of section one thousand one hundred twenty-two of the  
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 nine-  
3 ty-nine-ii and thirteen hundred ninety-nine-jj of this chapter, from the  
4 tobacco control and insurance initiatives pool established for the  
5 following periods in the following amounts:

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  
9 thousand one through December thirty-first, two thousand one;

10 (iii) up to forty million dollars for the period January first, two  
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,  
23 two thousand six, provided, however, that within amounts appropriated, a  
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 (ix) up to ninety-four million one hundred fifty thousand dollars for  
33 the period January first, two thousand eight through December thirty-  
34 first, two thousand eight;

35 (x) up to ninety-four million one hundred fifty thousand dollars for  
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  
48 April first, two thousand fourteen through March thirty-first, two thou-  
49 sand seventeen~~[-]; and~~

50 (xv) up to six million dollars each state fiscal year for the period  
51 April first, two thousand seventeen through March thirty-first, two  
52 thousand twenty.

53 (k) Funds shall be deposited by the commissioner, within amounts  
54 appropriated, and the state comptroller is hereby authorized and  
55 directed to receive for deposit to the credit of the state special  
56 revenue fund - other, HCRA transfer fund, health care services account,

1 or any successor fund or account, for purposes of services and expenses  
2 related to public health programs, including comprehensive care centers  
3 for eating disorders pursuant to the former section twenty-seven hundred  
4 ninety-nine-1 of this chapter, provided however that, for such centers,  
5 funds in the amount of five hundred thousand dollars on an annualized  
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  
9 March thirty-first, two thousand eleven, from the tobacco control and  
10 insurance initiatives pool established for the following periods in the  
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;

18 (iv) one hundred twenty-two million five hundred thousand dollars for  
19 the period January first, two thousand three through December thirty-  
20 first, two thousand three;

21 (v) one hundred eight million five hundred seventy-five thousand  
22 dollars, plus an additional five hundred thousand dollars, for the peri-  
23 od January first, two thousand four through December thirty-first, two  
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;

31 (viii) one hundred fifty-one million four hundred thousand dollars,  
32 plus an additional five hundred thousand dollars, for the period January  
33 first, two thousand seven through December thirty-first, two thousand  
34 seven;

35 (ix) one hundred sixteen million nine hundred forty-nine thousand  
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 (x) one hundred sixteen million nine hundred forty-nine thousand  
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 (xii) twenty-nine million two hundred thirty-seven thousand two  
48 hundred fifty dollars, plus an additional one hundred twenty-five thou-  
49 sand dollars, for the period January first, two thousand eleven through  
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  
56 through March thirty-first, two thousand fourteen.

(1) Funds shall be deposited by the commissioner, within amounts appropriated, and the state comptroller is hereby authorized and directed to receive for deposit to the credit of the state special revenue funds - other, HCRA transfer fund, medical assistance account, or any successor fund or account, for purposes of funding the state share of the personal care and certified home health agency rate or fee increases established pursuant to subdivision three of section three hundred sixty-seven-o of the social services law from the tobacco control and insurance initiatives pool established for the following periods in the following amounts:

(i) twenty-three million two hundred thousand dollars for the period January first, two thousand through December thirty-first, two thousand;

(ii) twenty-three million two hundred thousand dollars for the period January first, two thousand one through December thirty-first, two thousand one;

(iii) twenty-three million two hundred thousand dollars for the period January first, two thousand two through December thirty-first, two thousand two;

(iv) up to sixty-five million two hundred thousand dollars for the period January first, two thousand three through December thirty-first, two thousand three;

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

(vi) up to sixty-five million two hundred thousand dollars for the period January first, two thousand five through December thirty-first, two thousand five;

(vii) up to sixty-five million two hundred thousand dollars for the period January first, two thousand six through December thirty-first, two thousand six;

(viii) up to sixty-five million two hundred thousand dollars for the period January first, two thousand seven through December thirty-first, two thousand seven; and

(ix) up to sixteen million three hundred thousand dollars for the period January first, two thousand eight through March thirty-first, two thousand eight.

(m) Funds shall be deposited by the commissioner, within amounts appropriated, and the state comptroller is hereby authorized and directed to receive for deposit to the credit of the state special revenue funds - other, HCRA transfer fund, medical assistance account, or any successor fund or account, for purposes of funding the state share of services and expenses related to home care workers insurance pilot demonstration programs established pursuant to subdivision two of section three hundred sixty-seven-o of the social services law from the tobacco control and insurance initiatives pool established for the following periods in the following amounts:

(i) three million eight hundred thousand dollars for the period January first, two thousand through December thirty-first, two thousand;

(ii) three million eight hundred thousand dollars for the period January first, two thousand one through December thirty-first, two thousand one;

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

4 (v) up to three million eight hundred thousand dollars for the period  
5 January first, two thousand four through December thirty-first, two  
6 thousand four;

7 (vi) up to three million eight hundred thousand dollars for the period  
8 January first, two thousand five through December thirty-first, two  
9 thousand five;

10 (vii) up to three million eight hundred thousand dollars for the peri-  
11 od January first, two thousand six through December thirty-first, two  
12 thousand six;

13 (viii) 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  
23 three of article two of the elder law, or any successor fund or account,  
24 for funding state expenses relating to the program from the tobacco  
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;

31 (iii) three hundred twenty-two million seven hundred thousand dollars  
32 for the period January first, two thousand two through December thirty-  
33 first, two thousand two;

34 (iv) four hundred thirty-three million three hundred thousand dollars  
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;

43 (vii) six hundred three million one hundred fifty thousand dollars for  
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 thou-  
53 sand dollars for the period January first, two thousand nine through  
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;

4 (xii) eighty-seven million seven hundred eighty-eight thousand dollars  
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  
9 thirty-first, two thousand twelve;

10 (xiv) one hundred twenty million nine hundred fifty thousand dollars  
11 for the period April first, two thousand twelve through March thirty-  
12 first, two thousand thirteen;

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  
18 fourteen through March thirty-first, two thousand seventeen[-]; and

19 (xvii) one hundred twenty-seven million four hundred sixteen thousand  
20 dollars each state fiscal year for the period April first, two thousand  
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:

26 (i) up to ninety million dollars for the period January first, two  
27 thousand through December thirty-first, two thousand;

28 (ii) up to sixty million dollars for the period January first, two  
29 thousand one through December thirty-first, two thousand one;

30 (iii) up to eighty-five million dollars for the period January first,  
31 two thousand two through December thirty-first, two thousand two;

32 (iv) eighty-five million two hundred fifty thousand dollars for the  
33 period January first, two thousand three through December thirty-first,  
34 two thousand three;

35 (v) seventy-eight million dollars for the period January first, 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 (ix) seventy-eight million dollars for the period January first, two  
44 thousand eight through December thirty-first, two thousand eight;

45 (x) seventy-eight million dollars for the period January first, two  
46 thousand nine through December thirty-first, two thousand nine;

47 (xi) seventy-eight million dollars for the period January first, two  
48 thousand ten through December thirty-first, two thousand ten;

49 (xii) nineteen million five hundred thousand dollars for the period  
50 January first, two thousand eleven through March thirty-first, two thou-  
51 sand eleven;

52 (xiii) sixty-nine million eight hundred forty thousand dollars each  
53 state fiscal year for the period April first, two thousand eleven  
54 through March thirty-first, two thousand fourteen; [and]

(xiv) up to ninety-six million six hundred thousand dollars each state fiscal year for the period April first, two thousand fourteen through March thirty-first, two thousand seventeen[-]; and

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

(p) Funds shall be deposited by the commissioner, within amounts appropriated, and the state comptroller is hereby authorized and directed to receive for deposit to the credit of the state special revenue funds - other, indigent care fund - 068, indigent care account, or any successor fund or account, for purposes of providing a medicaid disproportionate share payment from the high need indigent care adjustment pool established pursuant to section twenty-eight hundred seven-w of this article, from the tobacco control and insurance initiatives pool established for the following periods in the following amounts:

(i) eighty-two million dollars annually for the periods January first, two thousand through December thirty-first, two thousand two;

(ii) up to eighty-two million dollars for the period January first, two thousand three through December thirty-first, two thousand three;

(iii) up to eighty-two million dollars for the period January first, two thousand four through December thirty-first, two thousand four;

(iv) up to eighty-two million dollars for the period January first, two thousand five through December thirty-first, two thousand five;

(v) up to eighty-two million dollars for the period January first, two thousand six through December thirty-first, two thousand six;

(vi) up to eighty-two million dollars for the period January first, two thousand seven through December thirty-first, two thousand seven;

(vii) up to eighty-two million dollars for the period January first, two thousand eight through December thirty-first, two thousand eight;

(viii) up to eighty-two million dollars for the period January first, two thousand nine through December thirty-first, two thousand nine;

(ix) up to eighty-two million dollars for the period January first, two thousand ten through December thirty-first, two thousand ten;

(x) up to twenty million five hundred thousand dollars for the period January first, two thousand eleven through March thirty-first, two thousand eleven; and

(xi) up to eighty-two million dollars each state fiscal year for the period April first, two thousand eleven through March thirty-first, two thousand fourteen.

(q) Funds shall be reserved and accumulated from year to year and shall be available, including income from invested funds, for purposes of providing distributions to eligible school based health centers established pursuant to section eighty-eight of chapter one of the laws of nineteen hundred ninety-nine, from the tobacco control and insurance initiatives pool established for the following periods in the following amounts:

(i) seven million dollars annually for the period January first, two thousand through December thirty-first, two thousand two;

(ii) up to seven million dollars for the period January first, two thousand three through December thirty-first, two thousand three;

(iii) up to seven million dollars for the period January first, two thousand four through December thirty-first, two thousand four;

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

(v) up to seven million dollars for the period January first, two thousand six through December thirty-first, two thousand six;



1 (vi) up to seven million dollars for the period January first, two  
2 thousand seven through December thirty-first, two thousand seven;

3 (vii) up to seven million dollars for the period January first, two  
4 thousand eight through December thirty-first, two thousand eight;

5 (viii) up to seven million dollars for the period January first, two  
6 thousand nine through December thirty-first, two thousand nine;

7 (ix) up to seven million dollars for the period January first, two  
8 thousand ten through December thirty-first, two thousand ten;

9 (x) up to one million seven hundred fifty thousand dollars for the  
10 period January first, two thousand eleven through March thirty-first,  
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-eight 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 seven-  
20 teen through March thirty-first, two thousand twenty.

21 (r) Funds shall be deposited by the commissioner within amounts appro-  
22 priated, and the state comptroller is hereby authorized and directed to  
23 receive for deposit to the credit of the state special revenue funds -  
24 other, HCRA transfer fund, medical assistance account, or any successor  
25 fund or account, for purposes of providing distributions for supplemen-  
26 tary medical insurance for Medicare part B premiums, physicians  
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:

30 (i) forty-three million dollars for the period January first, two  
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;

34 (iii) sixty-five million dollars for the period January first, two  
35 thousand two through December thirty-first, two thousand two;

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 (v) sixty-eight million dollars for the period January first, two  
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 (vii) sixty-eight million dollars for the period January first, two  
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;

48 (ix) sixty-eight million dollars for the period January first, two  
49 thousand eight through December thirty-first, two thousand eight;

50 (x) sixty-eight million dollars for the period January first, two  
51 thousand nine through December thirty-first, two thousand nine;

52 (xi) sixty-eight million dollars for the period January first, two  
53 thousand ten through December thirty-first, two thousand ten;

54 (xii) seventeen million dollars for the period January first, two  
55 thousand eleven through March thirty-first, two thousand eleven; and

(xiii) sixty-eight million dollars each state fiscal year for the period April first, two thousand eleven through March thirty-first, two thousand fourteen.

(s) Funds shall be deposited by the commissioner within amounts appropriated, and the state comptroller is hereby authorized and directed to receive for deposit to the credit of the state special revenue funds - other, HCRA transfer fund, medical assistance account, or any successor fund or account, for purposes of providing distributions pursuant to paragraphs (s-5), (s-6), (s-7) and (s-8) of subdivision eleven of section twenty-eight hundred seven-c of this article from the tobacco control and insurance initiatives pool established for the following periods in the following amounts:

(i) eighteen million dollars for the period January first, two thousand through December thirty-first, two thousand;

(ii) twenty-four million dollars annually for the periods January first, two thousand one through December thirty-first, two thousand two;

(iii) up to twenty-four million dollars for the period January first, two thousand three through December thirty-first, two thousand three;

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

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

(vi) up to twenty-four million dollars for the period January first, two thousand six through December thirty-first, two thousand six;

(vii) up to twenty-four million dollars for the period January first, two thousand seven through December thirty-first, two thousand seven;

(viii) up to twenty-four million dollars for the period January first, two thousand eight through December thirty-first, two thousand eight; and

(ix) up to twenty-two million dollars for the period January first, two thousand nine through November thirtieth, two thousand nine.

(t) Funds shall be reserved and accumulated from year to year by the commissioner and shall be made available, including income from invested funds:

(i) For the purpose of making grants to a state owned and operated medical school which does not have a state owned and operated hospital on site and available for teaching purposes. Notwithstanding sections 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 dollars for the period January first, two thousand through December thirty-first, two thousand;

(ii) For the purpose of making grants to medical schools pursuant to section eighty-six-a of chapter one of the laws of nineteen hundred ninety-nine in the sum of up to four million dollars for the period January first, two thousand through December thirty-first, two thousand; and

(iii) The funds disbursed pursuant to subparagraphs (i) and (ii) of this paragraph from the tobacco control and insurance initiatives pool are contingent upon meeting all funding amounts established pursuant to paragraphs (a), (b), (c), (d), (e), (f), (l), (m), (n), (p), (q), (r) and (s) of this subdivision, paragraph (a) of subdivision nine of section twenty-eight hundred seven-j of this article, and paragraphs (a), (i) and (k) of subdivision one of section twenty-eight hundred seven-l of this article.

(u) Funds shall be deposited by the commissioner, within amounts appropriated, and the state comptroller is hereby authorized and

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  
4 share of services and expenses related to the nursing home quality  
5 improvement demonstration program established pursuant to section twen-  
6 ty-eight hundred eight-d of this article from the tobacco control and  
7 insurance initiatives pool established for the following periods in the  
8 following amounts:

9 (i) up to twenty-five million dollars for the period beginning April  
10 first, two thousand two and ending December thirty-first, two thousand  
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.

20 (v) Funds shall be transferred by the commissioner and shall be depos-  
21 ited to the credit of the hospital excess liability pool created pursu-  
22 ant to section eighteen of chapter two hundred sixty-six of the laws of  
23 nineteen hundred eighty-six, or any successor fund or account, for  
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  
30 as may be amended from time to time, from the tobacco control and insur-  
31 ance initiatives pool established for the following periods in the  
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 first, two thousand seven through December thirty-first, two thousand  
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  
53 first, two thousand nine through December thirty-first, two thousand  
54 nine;

55 (ix) up to one hundred thirty million dollars for the period January  
56 first, two thousand ten through December thirty-first, two thousand ten;

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

(xi) up to one hundred twenty-seven million four hundred thousand dollars each state fiscal year for the period April first, two thousand eleven through March thirty-first, two thousand fourteen; ~~[and]~~

(xii) up to one hundred twenty-seven million four hundred thousand dollars each state fiscal year for the period April first, two thousand fourteen through March thirty-first, two thousand seventeen~~[-]~~; and

(xiii) up to one hundred twenty-seven million four hundred thousand dollars each state fiscal year for the period April first, two thousand seventeen through March thirty-first, two thousand twenty.

(w) Funds shall be deposited by the commissioner, within amounts appropriated, and the state comptroller is hereby authorized and directed to receive for deposit to the credit of the state special revenue funds - other, HCRA transfer fund, medical assistance account, or any successor fund or account, for purposes of funding the state share of the treatment of breast and cervical cancer pursuant to paragraph (v) of subdivision four of section three hundred sixty-six of the social services law, from the tobacco control and insurance initiatives pool established for the following periods in the following amounts:

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

(ii) up to two million one hundred thousand dollars for the period January first, two thousand three through December thirty-first, two thousand three;

(iii) up to two million one hundred thousand dollars for the period January first, two thousand four through December thirty-first, two thousand four;

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

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

(vi) up to two million one hundred thousand dollars for the period January first, two thousand seven through December thirty-first, two thousand seven;

(vii) up to two million one hundred thousand dollars for the period January first, two thousand eight through December thirty-first, two thousand eight;

(viii) up to two million one hundred thousand dollars for the period January first, two thousand nine through December thirty-first, two thousand nine;

(ix) up to two million one hundred thousand dollars for the period January first, two thousand ten through December thirty-first, two thousand ten;

(x) up to five hundred twenty-five thousand dollars for the period January first, two thousand eleven through March thirty-first, two thousand eleven;

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

(xii) up to two million one hundred thousand dollars each state fiscal year for the period April first, two thousand fourteen through March thirty-first, two thousand seventeen~~[-]~~; and

1 (xiii) up to two million one hundred thousand dollars each state  
2 fiscal year for the period April first, two thousand seventeen through  
3 March thirty-first, two thousand twenty.

4 (x) Funds shall be deposited by the commissioner, within amounts  
5 appropriated, and the state comptroller is hereby authorized and  
6 directed to receive for deposit to the credit of the state special  
7 revenue funds - other, HCRA transfer fund, medical assistance account,  
8 or any successor fund or account, for purposes of funding the state  
9 share of the non-public general hospital rates increases for recruitment  
10 and retention of health care workers from the tobacco control and insur-  
11 ance initiatives pool established for the following periods in the  
12 following amounts:

13 (i) twenty-seven million one hundred thousand dollars on an annualized  
14 basis for the period January first, two thousand two through December  
15 thirty-first, two thousand two;

16 (ii) fifty million eight hundred thousand dollars on an annualized  
17 basis for the period January first, two thousand three through December  
18 thirty-first, two thousand three;

19 (iii) sixty-nine million three hundred thousand dollars on an annual-  
20 ized basis for the period January first, two thousand four through  
21 December thirty-first, two thousand four;

22 (iv) sixty-nine million three hundred thousand dollars for the period  
23 January first, two thousand five through December thirty-first, two  
24 thousand five;

25 (v) sixty-nine million three hundred thousand dollars for the period  
26 January first, two thousand six through December thirty-first, two thou-  
27 sand six;

28 (vi) sixty-five million three hundred thousand dollars for the period  
29 January first, two thousand seven through December thirty-first, two  
30 thousand seven;

31 (vii) sixty-one million one hundred fifty thousand dollars for the  
32 period January first, two thousand eight through December thirty-first,  
33 two thousand eight; and

34 (viii) forty-eight million seven hundred twenty-one thousand dollars  
35 for the period January first, two thousand nine through November thirti-  
36 eth, two thousand nine.

37 (y) Funds shall be reserved and accumulated from year to year and  
38 shall be available, including income from invested funds, for purposes  
39 of grants to public general hospitals for recruitment and retention of  
40 health care workers pursuant to paragraph (b) of subdivision thirty of  
41 section twenty-eight hundred seven-c of this article from the tobacco  
42 control and insurance initiatives pool established for the following  
43 periods in the following amounts:

44 (i) eighteen million five hundred thousand dollars on an annualized  
45 basis for the period January first, two thousand two through December  
46 thirty-first, two thousand two;

47 (ii) thirty-seven million four hundred thousand dollars on an annual-  
48 ized basis for the period January first, two thousand three through  
49 December thirty-first, two thousand three;

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

53 (iv) fifty-two million two hundred thousand dollars for the period  
54 January first, two thousand five through December thirty-first, two  
55 thousand five;

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;

4 (vi) forty-nine million dollars for the period January first, two  
5 thousand seven through December thirty-first, two thousand seven;

6 (vii) forty-nine million dollars for the period January first, two  
7 thousand eight through December thirty-first, two thousand eight; and

8 (viii) twelve million two hundred fifty thousand dollars for the peri-  
9 od January first, two thousand nine through March thirty-first, two  
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  
17 appropriated, and the state comptroller is hereby authorized and  
18 directed to receive for deposit to the credit of the state special  
19 revenue funds - other, HCRA transfer fund, medical assistance account,  
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 para-  
23 graph (a) of subdivision eighteen of section twenty-eight hundred eight  
24 of this article from the tobacco control and insurance initiatives pool  
25 established for the following periods in the following amounts:

26 (i) twenty-one million five hundred thousand dollars on an annualized  
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  
31 December thirty-first, two thousand three;

32 (iii) forty-six million three hundred thousand dollars on an annual-  
33 ized basis for the period January first, two thousand four through  
34 December thirty-first, two thousand four;

35 (iv) forty-six million three hundred thousand dollars for the period  
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 (viii) twelve million three hundred seventy-five thousand dollars for  
48 the period January first, two thousand nine through December thirty-  
49 first, two thousand nine;

50 (ix) nine million three hundred thousand dollars for the period Janu-  
51 ary first, two thousand ten through December thirty-first, two thousand  
52 ten; and

53 (x) two million three hundred twenty-five thousand dollars for the  
54 period January first, two thousand eleven through March thirty-first,  
55 two thousand eleven.



(aa) Funds shall be reserved and accumulated from year to year and shall be available, including income from invested funds, for purposes of grants to public residential health care facilities for recruitment and retention of health care workers pursuant to paragraph (b) of subdivision eighteen of section twenty-eight hundred eight of this article from the tobacco control and insurance initiatives pool established for the following periods in the following amounts:

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

(ii) eleven million seven hundred thousand dollars on an annualized basis for the period January first, two thousand three through December thirty-first, two thousand three;

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

(iv) sixteen million two hundred thousand dollars for the period January first, two thousand five through December thirty-first, two thousand five;

(v) sixteen million two hundred thousand dollars for the period January first, two thousand six through December thirty-first, two thousand six;

(vi) ten million eight hundred thousand dollars for the period January first, two thousand seven through December thirty-first, two thousand seven;

(vii) six million seven hundred fifty thousand dollars for the period January first, two thousand eight through December thirty-first, two thousand eight; and

(viii) one million three hundred fifty thousand dollars for the period January first, two thousand nine through December thirty-first, two thousand nine.

(bb)(i) Funds shall be deposited by the commissioner, within amounts appropriated, and subject to the availability of federal financial participation, and the state comptroller is hereby authorized and directed to receive for deposit to the credit of the state special revenue funds - other, HCRA transfer fund, medical assistance account, or any successor fund or account, for the purpose of supporting the state share of adjustments to Medicaid rates of payment for personal care services provided pursuant to paragraph (e) of subdivision two of section three hundred sixty-five-a of the social services law, for local social service districts which include a city with a population of over one million persons and computed and distributed in accordance with memorandums of understanding to be entered into between the state of New York and such local social service districts for the purpose of supporting the recruitment and retention of personal care service workers or any worker with direct patient care responsibility, from the tobacco control and insurance initiatives pool established for the following periods and the following amounts:

(A) forty-four million dollars, on an annualized basis, for the period April first, two thousand two through December thirty-first, two thousand two;

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

4 (D) one hundred thirty-six million dollars, on an annualized basis,  
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;

10 (F) one hundred thirty-six million dollars for the period January  
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  
20 first, two thousand ten through December thirty-first, two thousand ten;

21 (J) thirty-four million dollars for the period January first, two  
22 thousand eleven through March thirty-first, two thousand eleven;

23 (K) up to one hundred thirty-six million dollars each state fiscal  
24 year for the period April first, two thousand eleven through March thir-  
25 ty-first, two thousand fourteen; ~~and~~

26 (L) up to one hundred thirty-six million dollars each state fiscal  
27 year for the period March thirty-first, two thousand fourteen through  
28 April first, two thousand seventeen~~[-]~~; and

29 (M) up to one hundred thirty-six million dollars each state fiscal  
30 year for the period April first, two thousand seventeen through March  
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:

35 (A) for the period April first, two thousand two through December  
36 thirty-first, two thousand two, one hundred ten million dollars;

37 (B) for the period January first, two thousand three through December  
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;

48 (G) for the period January first, two thousand eight through December  
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  
53 thirty-first, two thousand ten, three hundred forty million dollars;

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~~

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.

10 (iii) Personal care service providers which have their rates adjusted  
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 author-  
20 ized to audit each such provider to ensure compliance with the written  
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.

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

40 (i) two million eight hundred thousand dollars for the period April  
41 first, two thousand two through December thirty-first, two thousand two;

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

45 (iii) eight million four hundred thousand dollars, on an annualized  
46 basis, for the period January first, two thousand four through December  
47 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;

54 (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;

4 (viii) eleven million two hundred thousand dollars for the period  
5 January first, two thousand nine through December thirty-first, two  
6 thousand nine;

7 (ix) eleven million two hundred thousand dollars for the period Janu-  
8 ary first, two thousand ten through December thirty-first, two thousand  
9 ten;

10 (x) two million eight hundred thousand dollars for the period January  
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  
18 March thirty-first, two thousand seventeen~~[-]; and~~

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  
23 appropriated, and the state comptroller is hereby authorized and  
24 directed to receive for deposit to the credit of the state special  
25 revenue fund - other, HCRA transfer fund, medical assistance account, or  
26 any successor fund or account, for purposes of funding the state share  
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:

30 (i) up to fifty-two million dollars for the period January first, two  
31 thousand two through December thirty-first, two thousand two;

32 (ii) eighty-one million two hundred thousand dollars for the period  
33 January first, two thousand three through December thirty-first, two  
34 thousand three;

35 (iii) eighty-five million two hundred thousand dollars for the period  
36 January first, two thousand four through December thirty-first, two  
37 thousand four;

38 (iv) eighty-five million two hundred thousand dollars for the period  
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  
48 January first, two thousand eight through December thirty-first, two  
49 thousand eight;

50 (viii) eighty-five million two hundred thousand dollars for the period  
51 January first, two thousand nine through December thirty-first, two  
52 thousand nine;

53 (ix) eighty-five million two hundred thousand dollars for the period  
54 January first, two thousand ten through December thirty-first, two thou-  
55 sand ten;

(x) twenty-one million three hundred thousand dollars for the period January first, two thousand eleven through March thirty-first, two thousand eleven; and

(xi) eighty-five million two hundred thousand dollars each state fiscal year for the period April first, two thousand eleven through March thirty-first, two thousand fourteen.

(ee) Funds shall be deposited by the commissioner, within amounts appropriated, and the state comptroller is hereby authorized and directed to receive for deposit to the credit of the state special revenue fund - other, HCRA transfer fund, medical assistance account, or any successor fund or account, for purposes of funding the state share of the free-standing diagnostic and treatment center rate increases for recruitment and retention of health care workers pursuant to subdivision seventeen of section twenty-eight hundred seven of this article from the tobacco control and insurance initiatives pool established for the following periods in the following amounts:

(i) three million two hundred fifty thousand dollars for the period April first, two thousand two through December thirty-first, two thousand two;

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

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

(iv) three million two hundred fifty thousand dollars for the period January first, two thousand five through December thirty-first, two thousand five;

(v) three million two hundred fifty thousand dollars for the period January first, two thousand six through December thirty-first, two thousand six;

(vi) three million two hundred fifty thousand dollars for the period January first, two thousand seven through December thirty-first, two thousand seven;

(vii) three million four hundred thirty-eight thousand dollars for the period January first, two thousand eight through December thirty-first, two thousand eight;

(viii) two million four hundred fifty thousand dollars for the period January first, two thousand nine through December thirty-first, two thousand nine;

(ix) one million five hundred thousand dollars for the period January first, two thousand ten through December thirty-first, two thousand ten; and

(x) three hundred twenty-five thousand dollars for the period January first, two thousand eleven through March thirty-first, two thousand eleven.

(ff) Funds shall be deposited by the commissioner, within amounts appropriated, and the state comptroller is hereby authorized and directed to receive for deposit to the credit of the state special revenue fund - other, HCRA transfer fund, medical assistance account, or any successor fund or account, for purposes of funding the state share of Medicaid expenditures for disabled persons as authorized pursuant to former subparagraphs twelve and thirteen of paragraph (a) of subdivision one of section three hundred sixty-six of the social services law from the tobacco control and insurance initiatives pool established for the following periods in the following amounts:

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  
4 basis for the period January first, two thousand three through December  
5 thirty-first, two thousand three;

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

9 (iv) thirty million six hundred thousand dollars for the period Janu-  
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 (vii) fifteen million dollars for the period January first, two thou-  
18 sand eight through December thirty-first, two thousand eight;

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;

23 (x) three million seven hundred fifty thousand dollars for the period  
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.

35 (gg) Funds shall be reserved and accumulated from year to year and  
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  
49 thirty-first, two thousand four;

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

53 (v) up to eight million six hundred thousand dollars on an annualized  
54 basis for the period January first, two thousand six through December  
55 thirty-first, two thousand six;



(vi) up to two million six hundred thousand dollars for the period January first, two thousand seven through December thirty-first, two thousand seven;

(vii) up to two million six hundred thousand dollars for the period January first, two thousand eight through December thirty-first, two thousand eight;

(viii) up to two million six hundred thousand dollars for the period January first, two thousand nine through December thirty-first, two thousand nine;

(ix) up to two million six hundred thousand dollars for the period January first, two thousand ten through December thirty-first, two thousand ten; and

(x) up to six hundred fifty thousand dollars for the period January first, two thousand eleven through March thirty-first, two thousand eleven.

(hh) Funds shall be deposited by the commissioner, within amounts appropriated, and the state comptroller is hereby authorized and directed to receive for deposit to the credit of the special revenue fund - other, HCRA transfer fund, medical assistance account for purposes of providing financial assistance to residential health care facilities pursuant to subdivisions nineteen and twenty-one of section twenty-eight hundred eight of this article, from the tobacco control and insurance initiatives pool established for the following periods in the following amounts:

(i) for the period April first, two thousand two through December thirty-first, two thousand two, ten million dollars;

(ii) for the period January first, two thousand three through December thirty-first, two thousand three, nine million four hundred fifty thousand dollars;

(iii) for the period January first, two thousand four through December thirty-first, two thousand four, nine million three hundred fifty thousand dollars;

(iv) up to fifteen million dollars for the period January first, two thousand five through December thirty-first, two thousand five;

(v) up to fifteen million dollars for the period January first, two thousand six through December thirty-first, two thousand six;

(vi) up to fifteen million dollars for the period January first, two thousand seven through December thirty-first, two thousand seven;

(vii) up to fifteen million dollars for the period January first, two thousand eight through December thirty-first, two thousand eight;

(viii) up to fifteen million dollars for the period January first, two thousand nine through December thirty-first, two thousand nine;

(ix) up to fifteen million dollars for the period January first, two thousand ten through December thirty-first, two thousand ten;

(x) up to three million seven hundred fifty thousand dollars for the period January first, two thousand eleven through March thirty-first, two thousand eleven; and

(xi) fifteen million dollars each state fiscal year for the period April first, two thousand eleven through March thirty-first, two thousand fourteen.

(ii) Funds shall be deposited by the commissioner, within amounts appropriated, and the state comptroller is hereby authorized and directed to receive for deposit to the credit of the state special revenue funds - other, HCRA transfer fund, medical assistance account, or any successor fund or account, for the purpose of supporting the state share of Medicaid expenditures for disabled persons as authorized

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:

4 (i) six million four hundred thousand dollars for the period April  
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;

9 (iii) eight million five hundred thousand dollars for the period Janu-  
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;

20 (vii) eight million five hundred thousand dollars for the period Janu-  
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 January first, two thousand nine through December thirty-first, two  
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 (xi) eight million five hundred thousand dollars each state fiscal  
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  
37 thirty-first, two thousand seventeen[+]; and

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,  
44 treatments and procedures, from the tobacco control and insurance initi-  
45 atives pool established for the period January first, two thousand two  
46 through December thirty-first, two thousand two in the amount of nine  
47 million one hundred seventy-five thousand dollars, for the period April  
48 first, two thousand six through March thirty-first, two thousand seven  
49 in the amount of five million dollars, for the period April first, two  
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  
53 five million dollars, and for the period April first, two thousand nine  
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  
2 eleven through March thirty-first, two thousand twelve up to one million  
3 one hundred thousand dollars.

4 (kk) Funds shall be deposited by the commissioner, within amounts  
5 appropriated, and the state comptroller is hereby authorized and  
6 directed to receive for deposit to the credit of the state special  
7 revenue funds -- other, HCRA transfer fund, medical assistance account,  
8 or any successor fund or account, for purposes of funding the state  
9 share of Medical Assistance Program expenditures from the tobacco  
10 control and insurance initiatives pool established for the following  
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;

23 (v) up to eight hundred sixty-six million three hundred thousand  
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  
31 through December thirty-first, two thousand eight; and

32 (viii) within amounts appropriated on and after January first, two  
33 thousand nine.

34 (ll) 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  
37 revenue funds -- other, HCRA transfer fund, medical assistance account,  
38 or any successor fund or account, for purposes of funding the state  
39 share of Medicaid expenditures related to the city of New York from the  
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;

48 (iii) one hundred twenty-four million seven hundred thousand dollars  
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  
55 the period January first, two thousand six through December thirty-  
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;

4 (vii) one hundred twenty-four million seven hundred thousand dollars  
5 for the period January first, two thousand eight through December thir-  
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;

10 (ix) one hundred twenty-four million seven hundred thousand dollars  
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  
18 through March thirty-first, two thousand fourteen.

19 (mm) Funds shall be deposited by the commissioner, within amounts  
20 appropriated, and the state comptroller is hereby authorized and  
21 directed to receive for deposit to the credit of the state special  
22 revenue funds - other, HCRA transfer fund, medical assistance account,  
23 or any successor fund or account, for purposes of funding specified  
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[7]

32 (C) for periods beginning on and after January first, two thousand  
33 six, fifty percent of the state share.

34 (ii) Funding for the family health plus program will include up to  
35 five million dollars annually for the period January first, two thousand  
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  
45 one million eight hundred thousand dollars for the period January first,  
46 two thousand eleven through March thirty-first, two thousand eleven, up  
47 to six million forty-nine thousand dollars for the period April first,  
48 two thousand eleven through March thirty-first, two thousand twelve, up  
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  
56 section three hundred sixty-nine-ee of the social services law from the

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  
4 period January first, two thousand three through December thirty-first,  
5 two thousand three;

6 (B) three hundred seventy-four million dollars for the period January  
7 first, two thousand four through December thirty-first, two thousand  
8 four;

9 (C) five hundred thirty-eight million four hundred thousand dollars  
10 for the period January first, two thousand five through December thir-  
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;

30 (J) six hundred twenty-eight million four hundred thousand dollars for  
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  
34 period April first, two thousand twelve through March thirty-first, two  
35 thousand thirteen;

36 (L) six hundred fifty million four hundred thousand dollars for the  
37 period April first, two thousand thirteen through March thirty-first,  
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  
48 licensed pursuant to section four hundred sixty-b of the social services  
49 law from the tobacco control and insurance initiatives pool established  
50 for the following periods in the following amounts:

51 (i) up to four million dollars for the period January first, two thou-  
52 sand three through December thirty-first, two thousand three;

53 (ii) up to six million dollars for the period January first, two thou-  
54 sand four through December thirty-first, two thousand four;

55 (iii) up to eight million dollars for the period January first, two  
56 thousand five through December thirty-first, two thousand five,

1 provided, however, that up to five million two hundred fifty thousand  
2 dollars of such funds shall be received by the comptroller and deposited  
3 to the credit of the special revenue fund - other / aid to localities,  
4 HCRA transfer fund - 061, enhanced community services account - 05, or  
5 any successor fund or account, for the purposes set forth in this para-  
6 graph;

7 (iv) up to eight million dollars for the period January first, two  
8 thousand six through December thirty-first, two thousand six, provided,  
9 however, that up to five million two hundred fifty thousand dollars of  
10 such funds shall be received by the comptroller and deposited to the  
11 credit of the special revenue fund - other / aid to localities, HCRA  
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  
18 to the credit of the special revenue fund - other / aid to localities,  
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.

34 (oo) Funds shall be reserved and accumulated from year to year and  
35 shall be available, including income from invested funds, for purposes  
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 (iv) up to five million dollars for the period January first, two  
48 thousand seven through December thirty-first, two thousand seven;

49 (v) up to five million dollars for the period January first, two thou-  
50 sand eight through December thirty-first, two thousand eight;

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.

4 (pp) Funds shall be reserved and accumulated from year to year and  
5 shall be available, including income from invested funds, for the  
6 purpose of supporting the provision of tax credits for long term care  
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  
9 hundred ten of such law, subsection (aa) of section six hundred six of  
10 such law, paragraph one of subsection (k) of section fourteen hundred  
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 (qq) Funds shall be reserved and accumulated from year to year and  
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:

26 (i) up to five million dollars for the period January first, two thou-  
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  
30 and administering the long-term care insurance education and outreach  
31 program and three million fifty thousand dollars shall be deposited by  
32 the commissioner, within amounts appropriated, and the comptroller is  
33 hereby authorized and directed to receive for deposit to the credit of  
34 the special revenue funds - other, HCRA transfer fund, long term care  
35 insurance resource center account of the state office for the aging or  
36 any future account designated for the purpose of implementing the long  
37 term care insurance education and outreach program and providing the  
38 long term care insurance resource centers with the necessary resources  
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  
48 the special revenue funds - other, HCRA transfer fund, long term care  
49 insurance resource center account of the state office for the aging or  
50 any future account designated for the purpose of implementing the long  
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;

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

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

40 (rr) Funds shall be reserved and accumulated from the tobacco control  
41 and insurance initiatives pool and shall be available, including income  
42 from invested funds, for the purpose of supporting expenses related to  
43 implementation of the provisions of title III of article twenty-nine-D  
44 of this chapter, for the following periods and in the following amounts:

45 (i) up to ten million dollars for the period January first, two thou-  
46 sand 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.

4 (ss) Funds shall be reserved and accumulated from the tobacco control  
5 and insurance initiatives pool and used for a health care stabilization  
6 program established by the commissioner for the purposes of stabilizing  
7 critical health care providers and health care programs whose ability to  
8 continue to provide appropriate services are threatened by financial or  
9 other challenges, in the amount of up to twenty-eight million dollars  
10 for the period July first, two thousand four through June thirtieth, two  
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,  
26 alternative sources of funding, including other sources of government  
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  
29 or program has an appropriate plan to improve its financial condition;  
30 and (viii) whether additional funding would permit the provider or  
31 program to consolidate, relocate, or close programs or services where  
32 such actions would result in greater stability and efficiency in the  
33 delivery of needed health care services or programs.

34 (tt) Funds shall be reserved and accumulated from year to year and  
35 shall be available, including income from invested funds, for purposes  
36 of providing grants for two long term care demonstration projects  
37 designed to test new models for the delivery of long term care services  
38 established pursuant to section twenty-eight hundred seven-x of this  
39 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;

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

46 (iv) up to one million dollars for the period January first, two thou-  
47 sand 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  
3 million dollars shall be available for disease management demonstration  
4 programs and two million dollars shall be available for telemedicine  
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  
9 programs and two million dollars shall be available for telemedicine  
10 demonstration programs;

11 (iii) nine million five hundred thousand dollars for the period Janu-  
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  
18 seven, of which seven million five hundred thousand dollars shall be  
19 available for disease management demonstration programs and one million  
20 dollars shall be available for telemedicine demonstration programs;

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  
25 dollars shall be available for telemedicine demonstration programs;

26 (vi) seven million eight hundred thirty-three thousand three hundred  
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  
30 demonstration programs and three hundred thirty-three thousand three  
31 hundred thirty-three dollars shall be available for telemedicine demon-  
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:

48 (i) sixty million five hundred thousand dollars for the period January  
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.

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

1 revenue funds - other, HCRA transfer fund, medical assistance account,  
2 or any successor fund or account, for purposes of funding the state  
3 share of the general hospital rates increases for rural hospitals pursu-  
4 ant to subdivision thirty-two of section twenty-eight hundred seven-c of  
5 this article from the tobacco control and insurance initiatives pool  
6 established for the following periods in the following amounts:

7 (i) three million five hundred thousand dollars for the period January  
8 first, two thousand five through December thirty-first, two thousand  
9 five;

10 (ii) three million five hundred thousand dollars for the period Janu-  
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  
24 section one hundred twelve of the state finance law and any other  
25 contrary provision of law, for the purpose of supporting grants not to  
26 exceed five million dollars to be made by the commissioner without a  
27 competitive bid or request for proposal process, in support of the  
28 delivery of critically needed health care services, to health care  
29 providers located in the counties of Erie and Niagara which executed a  
30 memorandum of closing and conducted a merger closing in escrow on Novem-  
31 ber twenty-fourth, nineteen hundred ninety-seven and which entered into  
32 a settlement dated December thirtieth, two thousand four for a loss on  
33 disposal of assets under the provisions of title XVIII of the federal  
34 social security act applicable to mergers occurring prior to December  
35 first, nineteen hundred ninety-seven.

36 (zz) Funds shall be reserved and accumulated from year to year and  
37 shall be available, within amounts appropriated, for the purpose of  
38 supporting expenditures authorized pursuant to section twenty-eight  
39 hundred eighteen of this article from the tobacco control and insurance  
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 (ii) one hundred eight million three hundred thousand dollars for the  
46 period January first, two thousand six through December thirty-first,  
47 two thousand six, provided, however, that within amounts appropriated in  
48 the two thousand six through two thousand seven state fiscal year, a  
49 portion of such funds may be transferred to the Roswell Park Cancer  
50 Institute Corporation to fund capital costs;

51 (iii) one hundred seventy-one million dollars for the period January  
52 first, two thousand seven through December thirty-first, two thousand  
53 seven, provided, however, that within amounts appropriated in the two  
54 thousand six through two thousand seven state fiscal year, a portion of  
55 such funds may be transferred to the Roswell Park Cancer Institute  
56 Corporation to fund capital costs;

(iv) one hundred seventy-one million five hundred thousand dollars for the period January first, two thousand eight through December thirty-first, two thousand eight;

(v) one hundred twenty-eight million seven hundred fifty thousand dollars for the period January first, two thousand nine through December thirty-first, two thousand nine;

(vi) one hundred thirty-one million three hundred seventy-five thousand dollars for the period January first, two thousand ten through December thirty-first, two thousand ten;

(vii) thirty-four million two hundred fifty thousand dollars for the period January first, two thousand eleven through March thirty-first, two thousand eleven;

(viii) four hundred thirty-three million three hundred sixty-six thousand dollars for the period April first, two thousand eleven through March thirty-first, two thousand twelve;

(ix) one hundred fifty million eight hundred six thousand dollars for the period April first, two thousand twelve through March thirty-first, two thousand thirteen;

(x) seventy-eight million seventy-one thousand dollars for the period April first, two thousand thirteen through March thirty-first, two thousand fourteen.

(aaa) Funds shall be reserved and accumulated from year to year and shall be available, including income from invested funds, for services and expenses related to school based health centers, in an amount up to three million five hundred thousand dollars for the period April first, two thousand six through March thirty-first, two thousand seven, up to three million five hundred thousand dollars for the period April first, two thousand seven through March thirty-first, two thousand eight, up to three million five hundred thousand dollars for the period April first, two thousand eight through March thirty-first, two thousand nine, up to three million five hundred thousand dollars for the period April first, two thousand nine through March thirty-first, two thousand ten, up to three million five hundred thousand dollars for the period April first, two thousand ten through March thirty-first, two thousand eleven, up to two million eight hundred thousand dollars each state fiscal year for the period April first, two thousand eleven through March thirty-first, two thousand fourteen, ~~and~~ up to two million six hundred forty-four thousand dollars each state fiscal year for the period April first, two thousand fourteen through March thirty-first, two thousand seventeen, and up to two million six hundred forty-four thousand dollars each state fiscal year for the period April first, two thousand seventeen through March thirty-first, two thousand twenty. The total amount of funds provided herein shall be distributed as grants based on the ratio of each provider's total enrollment for all sites to the total enrollment of all providers. This formula shall be applied to the total amount provided herein.

(bbb) Funds shall be reserved and accumulated from year to year and shall be available, including income from invested funds, for purposes of awarding grants to operators of adult homes, enriched housing programs and residences through the enhancing abilities and life experience (EnAbLe) program to provide for the installation, operation and maintenance of air conditioning in resident rooms, consistent with this paragraph, in an amount up to two million dollars for the period April first, two thousand six through March thirty-first, two thousand seven, up to three million eight hundred thousand dollars for the period April first, two thousand seven through March thirty-first, two thousand



eight, up to three million eight hundred thousand dollars for the period April first, two thousand eight through March thirty-first, two thousand nine, up to three million eight hundred thousand dollars for the period April first, two thousand nine through March thirty-first, two thousand ten, and up to three million eight hundred thousand dollars for the period April first, two thousand ten through March thirty-first, two thousand eleven. Residents shall not be charged utility cost for the use of air conditioners supplied under the EnAbLe program. All such air conditioners must be operated in occupied resident rooms consistent with requirements applicable to common areas.

(ccc) Funds shall be deposited by the commissioner, within amounts appropriated, and the state comptroller is hereby authorized and directed to receive for the deposit to the credit of the state special revenue funds - other, HCRA transfer fund, medical assistance account, or any successor fund or account, for purposes of funding the state share of increases in the rates for certified home health agencies, long term home health care programs, AIDS home care programs, hospice programs and managed long term care plans and approved managed long term care operating demonstrations as defined in section forty-four hundred three-f of this chapter for recruitment and retention of health care workers pursuant to subdivisions nine and ten of section thirty-six hundred fourteen of this chapter from the tobacco control and insurance initiatives pool established for the following periods in the following amounts:

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

(ii) fifty million dollars for the period January first, two thousand seven 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;

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

(v) fifty million dollars for the period January first, two thousand ten 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~~

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

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

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

3 (eee) Funds shall be reserved and accumulated from year to year and  
4 shall be available, including income from invested funds, to the Center  
5 for Functional Genomics at the State University of New York at Albany,  
6 for the purposes of the Adirondack network for cancer education and  
7 research in rural communities grant program to improve access to health  
8 care and shall be made available from the tobacco control and insurance  
9 initiatives pool established for the following period in the amount of  
10 up to five million dollars for the period January first, 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  
18 directed to receive for deposit to the credit of the state special  
19 revenue fund - other, HCRA transfer fund, medical assistance account, or  
20 any successor fund or account, for the purpose of supporting the state  
21 share of Medicaid expenditures for hospital translation services as  
22 authorized pursuant to paragraph (k) of subdivision one of section twen-  
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  
32 appropriated, and the state comptroller is hereby authorized and  
33 directed to receive for deposit to the credit of the state special  
34 revenue fund - other, HCRA transfer fund, medical assistance account, or  
35 any successor fund or account, for the purpose of supporting the state  
36 share of Medicaid expenditures for adjustments to inpatient rates of  
37 payment for general hospitals located in the counties of Nassau and  
38 Suffolk as authorized pursuant to paragraph (l) 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

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

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

5 2. (a) For periods prior to January first, two thousand five, the  
6 commissioner is authorized to contract with the article forty-three  
7 insurance law plans, or such other contractors as the commissioner shall  
8 designate, to receive and distribute funds from the tobacco control and  
9 insurance initiatives pool established pursuant to this section. In the  
10 event contracts with the article forty-three insurance law plans or  
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  
20 request for proposal process, contracts in effect for administration of  
21 pools established pursuant to sections twenty-eight hundred seven-k,  
22 twenty-eight hundred seven-l and twenty-eight hundred seven-m of this  
23 article for the period January first, nineteen hundred ninety-nine  
24 through December thirty-first, nineteen hundred ninety-nine may be  
25 extended to provide for administration pursuant to this section and may  
26 be amended as may be necessary.

27 § 23. This act shall take effect immediately; provided, however, that:

28 (a) the amendments made to sections 2807-s and 2807-j of the public  
29 health law made by sections three, four and five of this act shall not  
30 affect the expiration of such sections and shall expire therewith; and

31 (b) the amendments to subdivision 6 of section 2807-t of the public  
32 health law made by section eight of this act shall not affect the expi-  
33 ration of such section and shall be deemed to expire therewith; and

34 (c) the amendments to paragraph (i-1) of subdivision 1 of section  
35 2807-v of the public health law made by section twenty-two of this act  
36 shall not affect the repeal of such paragraph and shall be deemed  
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~~] 2019,  
47 and

48 (c) provided that the amendment to section 2807-b of the public health  
49 law by section two of this act shall not affect the expiration of such  
50 section 2807-b as otherwise provided by law and shall be deemed to  
51 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:

3 4-a. section twenty-two of this act shall take effect April 1, 2014,  
4 and shall be deemed expired January 1, [~~2018~~] 2019;

5 § 3. Subparagraph (vi) of paragraph (b) of subdivision 2 of section  
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  
9 other provision of law or regulation to the contrary, for residential  
10 health care facilities the assessment shall be six percent of each resi-  
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  
18 assessment; provided, however, that for all such gross receipts received  
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  
31 gross receipts received on or after April first, two thousand fifteen  
32 through March thirty-first, two thousand seventeen such assessment shall  
33 be six percent, and further provided that for all such gross receipts  
34 received on or after April first, two thousand seventeen through March  
35 thirty-first, two thousand nineteen such assessment shall be six  
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 residen-  
39 tial health care facilities, as amended by section 5 of part D of chap-  
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  
48 1, 1999 through March 31, 2000 and on and after April 1, 2000 through  
49 March 31, 2003 and on and after April 1, 2003 through March 31, 2007 and  
50 on and after April 1, 2007 through March 31, 2009 and on and after April  
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,  
53 and on and after April 1, 2015 through March 31, 2017, and on and after  
54 April 1, 2017 through March 31, 2019 shall reflect no trend factor  
55 projections or adjustments for the period April 1, 1996, through March  
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 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 regulation to the contrary, in determining rates of payments by state governmental agencies effective for services provided beginning April 1, 2006, through 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 April 1, 2013 through March 31, 2015, and on and after April 1, 2015 through March 31, 2017, and on and after April 1, 2017 through March 31, 2019 for inpatient and outpatient services provided by general hospitals and for inpatient services and outpatient adult day health care services provided by residential health care facilities pursuant to article 28 of the public health law, the commissioner of health shall apply a trend factor projection of two and twenty-five hundredths percent attributable to the period January 1, 2006 through December 31, 2006, and on and after January 1, 2007, provided, however, that on reconciliation of such trend factor for the period January 1, 2006 through December 31, 2006 pursuant to paragraph (c) of subdivision 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 published by the US Department of Labor, Bureau of Labor Statistics less twenty-five hundredths of a percentage point.

§ 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:

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 and on and after July 1, 1999 through March 31, 2000 and on and after April 1, 2000 through 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 1, 2009 through March 31, 2011, and on and after April 1, 2011 through 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 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:

§ 64-b. Notwithstanding any inconsistent provision of law, the provisions of subdivision 7 of section 3614 of the public health law, as amended, shall remain and be in full force and effect on April 1, 1995 through March 31, 1999 and on July 1, 1999 through March 31, 2000 and on and after April 1, 2000 through 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 1, 2009 through March 31, 2011, and on and after April 1, 2011 through 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 April 1, 2017 through March 31, 2019.

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

(a) sections two, three, three-a, three-b, three-c, three-d, three-e and twenty-one of this act shall take effect July 1, 2010; sections fifteen, sixteen, seventeen, eighteen and nineteen of this act shall 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 contract entered into pursuant to section 365-h of the social services law, as amended by section twenty of this act, is executed; provided that the commissioner of health shall notify the legislative bill drafting commission upon the execution of the contract entered into pursuant to section 367-h of the social services law in order that the commission may maintain an accurate and timely effective data base of the official text of the laws of the state of New York in furtherance of effectuating the provisions of section 44 of the legislative law and section 70-b of the public officers law;

§ 9. Section 4-a of part A of 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, as amended by section 29 of part D of chapter 57 of the laws of 2015, is amended to read as follows:

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

§ 10. Subdivisions 3 and 5 of section 47 of chapter 2 of the laws of 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;  
4 provided, however, that subparagraph (iii) of paragraph (c) of subdivi-  
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  
9 2511 of the public health law, as added by such section, shall expire on  
10 July 1, [~~2017~~] 2019;

11 § 11. Section 4 of chapter 19 of the laws of 1998, amending the social  
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  
26 health care facilities located in the county of Nassau, the county of  
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  
30 additional payments for the state fiscal year beginning April first, two  
31 thousand six and for the state fiscal year beginning April first, two  
32 thousand seven and for the state fiscal year beginning April first, two  
33 thousand eight and of up to three hundred million dollars in such aggre-  
34 gate annual additional payments for the state fiscal year beginning  
35 April first, two thousand nine, and for the state fiscal year beginning  
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  
48 of paragraph (f) of this subdivision, provided, however, that patient  
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 thirty-  
54 two million dollars may be allocated in accordance with paragraph (f-1)  
55 of this subdivision.

1     § 13. Section 18 of chapter 904 of the laws of 1984, amending the  
2 public health law and the social services law relating to encouraging  
3 comprehensive health services, as amended by section 67-c of part C of  
4 chapter 60 of the laws of 2014, is amended to read as follows:

5     § 18. This act shall take effect immediately, except that sections  
6 six, nine, ten and eleven of this act shall take effect on the sixtieth  
7 day after it shall have become a law, sections two, three, four and nine  
8 of this act shall expire and be of no further force or effect on or  
9 after March 31, [~~2017~~] 2020, section two of this act shall take effect  
10 on April 1, 1985 or seventy-five days following the submission of the  
11 report required by section one of this act, whichever is later, and  
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  
18 section 4-b of part A of chapter 57 of the laws of 2015, is amended to  
19 read as follows:

20     § 4. This act shall take effect immediately; provided that the  
21 provisions of section one of this act shall be deemed to have been in  
22 full force and effect on and after April 1, 2003, and shall expire March  
23 31, [~~2017~~] 2020 when upon such date the provisions of such section shall  
24 be deemed repealed.

25     § 15. Subdivision (o) of section 111 of part H of chapter 59 of the  
26 laws of 2011, amending the public health law relating to the statewide  
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  
32 and be deemed repealed March 31, [~~2017~~] 2020;

33     § 16. Section 32 of part A of chapter 58 of the laws of 2008, amending  
34 the elder law and other laws relating to reimbursement to participating  
35 provider pharmacies and prescription drug coverage, as amended by  
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  
45 section 1 of chapter 281 of the laws of 2007 takes effect; provided  
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-  
48 seven of this act shall take effect January 1, 2009; and provided  
49 further, that section twenty-seven of this act shall expire and be  
50 deemed repealed March 31, [~~2017~~] 2020; and provided, further, however,  
51 that the amendments to subdivision 1 of section 241 of the education law  
52 made by section twenty-nine of this act shall not affect the expiration  
53 of such subdivision and shall be deemed to expire therewith and provided  
54 that the amendments to section 272 of the public health law made by  
55 section thirty of this act shall not affect the repeal of such section  
56 and shall be deemed repealed therewith.

§ 17. Subdivision 3 of section 2999-p of the public health law, as amended by chapter 461 of the laws of 2012, is amended to read as follows:

3. The commissioner may issue a certificate of authority to an entity that meets conditions for ACO certification as set forth in regulations made by the commissioner pursuant to section twenty-nine hundred ninety-nine-q of this article. The commissioner shall not issue any new certificate under this article after December thirty-first, two thousand [sixteen] twenty.

§ 18. Subdivision 2 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 2 of part D of chapter 57 of the laws of 2015, is amended to read as follows:

2. Sections five, seven through nine, twelve through fourteen, and eighteen of this act shall be deemed to have been in full force and effect on and after April 1, 1995 through March 31, 1999 and on and after July 1, 1999 through March 31, 2000 and on and after April 1, 2000 through March 31, 2003 and on and after April 1, 2003 through March 31, 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, 2009 through March 31, 2011 and sections twelve, thirteen and fourteen 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 through March 31, 2017 and on and after April 1, 2017 through March 31, 2019;

§ 19. This act shall take effect immediately and shall be deemed to have been in full force and effect on and after April 1, 2017.

#### PART J

Intentionally Omitted

#### PART K

Intentionally Omitted

#### PART L

Intentionally Omitted

#### PART M

Section 1. The public health law is amended by adding a new section 1112 to read as follows:

§ 1112. Emerging contaminant monitoring. 1. Industry and modern technology have created thousands of new chemicals that would not otherwise exist in nature. Although some of these chemicals have proven benefits, the effect of many such chemicals on human health is unknown or not fully understood. Furthermore, with the advance of science and technology, public health scientists and experts are able to identify naturally occurring contaminants that pose previously unknown hazards to human health. Where these chemicals or contaminants, collectively referred to as "emerging contaminants," enter drinking water supplies, they can present unknown but potentially serious risks to public health. New Yorkers served by public water supplies have the right to know when

1 potentially hazardous substances contaminate their drinking water and  
2 the department must be equipped to monitor and protect the public from  
3 these emerging contaminants.

4 2. a. "Emerging contaminants" shall mean any physical, chemical,  
5 microbiological or radiological substance listed as an emerging contam-  
6 inant pursuant to subdivision three of this section.

7 b. "Notification level" means the concentration level of an emerging  
8 contaminant in drinking water that the commissioner has determined,  
9 based on available scientific information, warrants public notification  
10 and may require actions, which may include enhanced monitoring and  
11 activities to reduce exposure, pursuant to this section.

12 c. "Covered public water system" shall mean: (i) a public water  
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 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 list substances as emerging contaminants that meet the following crite-  
20 ria:

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 (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 results electronically to the department, to any other health department  
55 with jurisdiction over the covered public water system, and to the

1 covered public water system, in the manner prescribed pursuant to  
2 section five hundred two of this chapter.

3 6. The commissioner shall promulgate regulations establishing notifi-  
4 cation levels for any emerging contaminant listed pursuant to subdivi-  
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 notifica-  
10 tion levels based upon the available scientific information, and may  
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  
16 radiological substance to the list of emerging contaminants established  
17 pursuant to subdivision three of this section, establish a notification  
18 level, and require testing for such substance, if the commissioner  
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  
23 appears to be prejudicial to the interests of the people to delay action  
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  
30 declaration issued pursuant to this subdivision.

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  
54 twelve of article twenty-seven of the environmental conservation law.

55 9. The commissioner shall work in consultation with the commissioner  
56 of the department of environmental conservation to develop educational



1 materials, and may take into consideration recommendations of the drink-  
2 ing water quality council established pursuant to section eleven hundred  
3 thirteen of this title. Such educational materials shall be made avail-  
4 able to the covered public water system and the general public, relating  
5 to methodologies for reducing exposure to emerging contaminants and  
6 potential actions that may be taken to mitigate or remediate emerging  
7 contaminants. The commissioner shall also provide the covered public  
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.

30 § 2. Section 502 of the public health law is amended by adding a new  
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.

35 § 3. This act shall take effect immediately.

36 PART N

37 Intentionally Omitted

38 PART O

39 Intentionally Omitted

40 PART P

41 Section 1. Section 48-a of part A of chapter 56 of the laws of 2013  
42 amending chapter 59 of the laws of 2011 amending the public health law  
43 and other laws relating to general hospital reimbursement for annual  
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:

47 § 48-a. 1. Notwithstanding any contrary provision of law, the commis-  
48 sioners of the office of alcoholism and substance abuse services and the  
49 office of mental health are authorized, subject to the approval of the  
50 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  
2 payments under the medicaid program to managed care organizations  
3 licensed under article 44 of the public health law or under article 43  
4 of the insurance law. Such managed care organizations shall utilize such  
5 funds for the purpose of reimbursing providers licensed pursuant to  
6 article 28 of the public health law or article 31 or 32 of the mental  
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  
10 office of mental health, provided to medicaid ~~[eligible]~~ enrolled outpa-  
11 tients and for all other behavioral health services except inpatient  
12 included in New York state's Medicaid redesign waiver approved by the  
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  
23 consultation with the commissioner of alcoholism and substance abuse  
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  
26 increase of such ambulatory behavioral health fees to providers avail-  
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  
30 city of New York, for all rate periods on and after the effective date  
31 of section [~~1~~] 29 of part [~~C~~] B of chapter [~~57~~] 59 of the laws of [~~2015~~]  
32 2016 through [~~June 30, 2018~~] March 31, 2020 for patients outside the  
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  
49 the commissioner, suffer a financial hardship as a consequence of such  
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  
54 basis. Further, such conditions may be waived, as the commissioner  
55 determines necessary, to comply with federal rules or regulations  
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  
3 above, subject to the approval of the department of health. The depart-  
4 ment of health shall consult with the office of alcoholism and substance  
5 abuse services and the office of mental health in determining whether  
6 such alternative rates shall be approved. The commissioner of health  
7 may, in consultation with the commissioner of alcoholism and substance  
8 abuse services and the commissioner of the office of mental health,  
9 promulgate regulations, including emergency regulations promulgated  
10 prior to October 1, 2015 to establish rates for ambulatory behavioral  
11 health services, as are necessary to implement the provisions of this  
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  
19 services provided to patients enrolled in the child health insurance  
20 program pursuant to title one-A of article 25 of the public health law,  
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  
24 pursuant to the Medicaid state plan. The commissioner of health shall  
25 consult with the commissioner of alcoholism and substance abuse services  
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 ~~30, 2018~~] March 31, 2020, provided, however, that managed care organiza-  
31 tions and providers may negotiate different rates and methods of payment  
32 during such periods described above, subject to the approval of the  
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.

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

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

1 the commissioner of health in consultation with the commissioner of  
2 mental health and commissioner of alcoholism and substance abuse  
3 services, provided to medicaid ~~[eligible]~~ enrolled outpatients and for  
4 all other behavioral health services except inpatient included in New  
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)  
9 rate-setting methodology as utilized by the department of health or by  
10 the office of mental health or office of alcoholism and substance abuse  
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  
20 rate periods on and after the effective date of section ~~[2]~~ 30 of part  
21 ~~[E]~~ B of chapter ~~[57]~~ 59 of the laws of ~~[2015]~~ 2016 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 ~~[E]~~ B of chap-  
24 ter ~~[57]~~ 59 of the laws of ~~[2015]~~ 2016 through ~~[June 30, 2018]~~ March 31,  
25 2020 for patients outside the city of New York, and for all rate periods  
26 on and after the effective date of section ~~[2]~~ 30 of part ~~[E]~~ 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~~  
30 ~~to achieve quality and efficiency objectives and engage in shared~~  
31 ~~savings]~~ the commissioner of health, in consultation with the commis-  
32 sioner of alcoholism and substance abuse services and the commissioner  
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 require-  
36 ments as set forth in attachment I of the New York state medicaid  
37 section one thousand one hundred fifteen medicaid redesign team waiver  
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  
48 determines necessary, to comply with federal rules or regulations  
49 governing these payment methodologies. Nothing in this section shall  
50 prohibit managed care organizations and providers from negotiating  
51 different rates and methods of payment during such periods described,  
52 subject to the approval of the department of health. The department of  
53 health shall consult with the office of alcoholism and substance abuse  
54 services and the office of mental health in determining whether such  
55 alternative rates shall be approved. The commissioner of health may, in  
56 consultation with the commissioners of mental health and alcoholism and

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  
9 health law or under article 43 of the insurance law, to providers  
10 licensed pursuant to article 28 of the public health law or article 31  
11 or 32 of the mental hygiene law, for ambulatory behavioral health  
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  
19 services and establishing such fees. Such ambulatory behavioral health  
20 fees to providers available under this section shall be for all rate  
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  
25 department of health. The department of health shall consult with the  
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  
30 enrolled in the child health insurance program pursuant to title one-A  
31 of article 25 of the public health law in its examination on the transi-  
32 tion of behavioral health services into managed care.

33 § 3. This act shall take effect immediately and shall be deemed to  
34 have been in full force and effect on and after April 1, 2017; provided,  
35 however, that the amendments to section 48-a of part A of chapter 56 of  
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  
48 April 1, 2009 and ending March 31, 2016 and beginning April 1, 2017 and  
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  
52 people with developmental disabilities, the office of mental health, and  
53 the office of alcoholism and substance abuse services shall not include  
54 a COLA beginning April 1, 2017 and ending March 31, 2019.

3-c. Notwithstanding any inconsistent provision of law, beginning 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 price index for all urban consumers (CPI-U) published by the United States department of labor, bureau of labor statistics for the twelve month period ending in July of the budget year prior to such state fiscal year, for the purpose of establishing rates of payments, contracts or any other form of reimbursement.

§ 2. Section 1 of part C of chapter 57 of the laws of 2006, relating to establishing a cost of living adjustment for designated human service programs, is amended by adding a new subdivision 3-e to read as follows:

3-e. (i) Notwithstanding the provisions of subdivision 3-b of this section or any other inconsistent provision of law, and subject to the availability of the appropriation therefor, for the programs listed in paragraphs (i), (ii), and (iii) of subdivision 4 of this section, the commissioners shall provide funding to support (1) an overall average three and one-quarter percent (3.25%) increase to total salaries for direct care staff, direct support professionals for each eligible state-funded program beginning January 1, 2018; and (2) an overall average three and one-quarter percent (3.25%) increase to total salaries for direct care staff and direct support professionals, and clinical staff for each eligible state-funded program beginning April 1, 2018. For the purpose of this funding increase, direct support professionals are individuals employed in consolidated fiscal reporting position title codes ranging from 100 to 199; direct care staff are individuals employed in consolidated fiscal reporting position title codes ranging from 200 to 299; and clinical staff are individuals employed in consolidated fiscal reporting position title codes ranging from 300 to 399.

(ii) The funding made available pursuant to paragraph (i) of this subdivision shall be used: (1) to help alleviate the recruitment and retention challenges of direct care staff, direct support professionals and clinical staff employed in eligible programs; and (2) to continue and to expand efforts to support the professionalism of the direct care workforce. Each local government unit or direct contract provider receiving such funding shall have flexibility in allocating such funding to support salary increases to particular job titles to best address the needs of its direct care staff, direct support professionals and clinical staff. Each local government unit or direct contract provider receiving such funding shall also submit a written certification, in such form and at such time as each commissioner shall prescribe, attesting to how such funding will be or was used for purposes eligible under this section. Further, providers shall submit a resolution from their governing body to the appropriate commissioner, attesting that the funding received will be used solely to support salary and salary-related fringe benefit increases for direct care staff, direct support professionals and clinical staff, pursuant to paragraph (i) of this subdivision. Salary increases that take effect on and after April 1, 2017 may be used to demonstrate compliance with the January 1, 2018 funding increase authorized by this section, except for salary increases necessary to comply with state minimum wage requirements. Such commissioners shall be authorized to recoup any funds as appropriated herein determined to have been used in a manner inconsistent with such standards or inconsistent with the provisions of this subdivision, and such commissioners shall be authorized to employ any legal mechanism to recoup such funds, including an offset of other funds that are owed to such local governmental unit or provider.



(iii) Where appropriate, transfers to the department of health shall be made as reimbursement for the state share of medical assistance.

§ 3. This act shall take effect immediately and shall be deemed to have been in full force and effect on and after April 1, 2017; provided, however, that the amendments to section 1 of part C of chapter 57 of the laws of 2006 made by sections one and two of this act shall not affect the repeal of such section and shall be deemed repealed therewith.

## PART R

Section 1. The public health law is amended by adding a new section 1113 to read as follows:

§ 1113. Drinking water quality council; established. 1. There shall be established, within the department, the drinking water quality council. Such council shall be composed of twelve members as follows:

(a) the commissioner, or the commissioner's designee, who shall be the chair of the council;

(b) the commissioner of environmental conservation or designee;

(c) a designee of the commissioner of environmental conservation with expertise in water resources;

(d) a designee of the commissioner with expertise in drinking water; and

(e) eight members appointed by the governor, two of whom shall be recommended by the temporary president of the senate, and two by the speaker of the assembly.

2. (a) Of the four members appointed to the drinking water quality council and recommended by the temporary president of the senate and the speaker of the assembly, the temporary president of the senate and the speaker of the assembly shall each recommend:

(i) one member who represents water purveyors; and

(ii) one member representing the public, who has a background or expertise in toxicology or health risk assessment.

(b) Of the four additional members appointed to the drinking water quality council, the governor shall appoint:

(i) one member who represents water purveyors;

(ii) one member who has a background or expertise in toxicology or health risk assessment;

(iii) one member who has a background or expertise in microbiology; and

(iv) one member who has a background or expertise in environmental engineering.

(c) The members of such council appointed pursuant to paragraph (e) of subdivision one of this section shall serve terms of two years.

(d) The members appointed pursuant to paragraph (e) of subdivision one of this section shall each serve his or her term of office or until his or her successor is appointed; provided that any vacancy in the position of an appointed member shall be filled in the same manner as the original appointment and only for the unexpired term of the vacancy.

3. The members of the drinking water quality council shall receive no compensation for their services, but shall be allowed their actual and necessary expenses incurred in the performance of their duties pursuant to this title.

4. The drinking water quality council shall meet at such times and places as may be determined by its chair. The council shall meet at a minimum of two times per year. All meetings shall be open to the public 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  
2 business. Action may be taken, and motions and resolutions adopted, at  
3 any meeting by the affirmative vote of a majority of the full membership  
4 of the council.

5 5. The council shall make recommendations to the department relating  
6 to:

7 (a) those contaminants, which the department may list as emerging  
8 contaminants pursuant to section one thousand one hundred twelve of this  
9 title.

10 (i) In determining what substances shall be recommended as emerging  
11 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 B. substances that require regulation or monitoring when present in  
15 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 ended 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 cleanup projects occur in a timely manner;

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



1 purposes of such council, including but not limited to all water infor-  
2 mation and annual reports the department has relating to both public and  
3 private water supplies.

4 7. Before the council advances any recommendation to the department,  
5 the council shall provide an opportunity for public and stakeholder  
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.

9 § 2. This act shall take effect immediately.

10 PART S

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 2. In addition to payments made for health home services pursuant to  
15 subdivision one of this section, the commissioner is authorized to pay  
16 additional amounts to providers of health home services that meet proc-  
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  
21 new subdivision 33 to read as follows:

22 33. For services under this title provided by residential health care  
23 facilities under article twenty-eight of the public health law, the  
24 commissioner shall direct managed care organizations licensed under  
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  
28 section twenty-eight hundred eight of the public health law. The bench-  
29 mark fee-for-service rate shall continue to be paid by such managed care  
30 organizations for all services provided by residential healthcare facil-  
31 ities from the effective date of this subdivision at least until Decem-  
32 ber thirty-first, two thousand twenty. The commissioner may require, as  
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  
43 residential health care facility services; such waiver may be applied on  
44 a provider-specific or industry-wide basis. Further, such requirements  
45 may be waived, as the commissioner determines necessary, to comply with  
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 phys-  
52 ically unable to receive maternal breast milk or participate in breast  
53 feeding or whose mother is medically or physically unable to produce  
54 maternal breast milk at all or in sufficient quantities or participate

1 in breast feeding despite optimal lactation support. Such infant shall:  
2 (i) have a documented birth weight of less than one thousand five  
3 hundred grams; or (ii) have a congenital or acquired condition that  
4 places the infant at a high risk for development of necrotizing entero-  
5 colitis; or (iii) have a congenital or acquired condition that may bene-  
6 fit from the use of donor breast milk as determined by the commissioner  
7 of health or his or her designee.

8 § 4. Subdivision 2 of section 365-a of the social services law is  
9 amended by adding a new paragraph (ee) to read as follows:

10 (ee) Medical assistance shall include the coverage of a set of  
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 subdivi-  
22 sion 3 as amended by section 2 of part E of chapter 73 of the laws of  
23 2016, is amended to read as follows:

24 § 3614-c. Home care worker wage parity. 1. As used in this section,  
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.

30 (b) "Total compensation" means all wages and other direct compensation  
31 paid to or provided on behalf of the employee including, but not limited  
32 to, wages, health, education or pension benefits, supplements in lieu of  
33 benefits and compensated time off, except that it does not include  
34 employer taxes or employer portion of payments for statutory benefits,  
35 including but not limited to FICA, disability insurance, unemployment  
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 agree-  
42 ments in such city with substantially the same terms and conditions  
43 relating to total compensation shall be considered as a single collec-  
44 tively bargained agreement.

45 (d) "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  
48 the social services law, or other licensed or unlicensed person whose  
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  
52 include any individual (i) working on a casual basis, or (ii) (except  
53 for a person employed under the consumer directed personal assistance  
54 program under section three hundred sixty-five-f of the social services  
55 law) who is a relative through blood, marriage or adoption of: (1) the  
56 employer; or (2) the person for whom the worker is delivering services,

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  
4 or demonstration covering personal care or home health aide services,  
5 and which receives premiums funded, in whole or in part, by the New York  
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~~] aide 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.

20 (h) "Benefit portion of the minimum rate of home care aide total  
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  
23 differentials, supplements in lieu of benefits and compensated time off,  
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  
30 home health agencies, long term home health care programs [~~ex~~], managed  
31 care plans, or the consumer directed personal assistance program under  
32 section three hundred sixty-five-f of the social services law, for any  
33 episode of care furnished, in whole or in part, by any home care aide  
34 who is compensated at amounts less than the applicable minimum rate of  
35 home care aide total compensation established pursuant to this section.

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;

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

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

55 (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  
4 thousand thirteen of a city with a population of a million or more;

5 (ii) for the period March first, two thousand fourteen through Febru-  
6 ary twenty-eighth, two thousand fifteen, ninety-five percent of the  
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;

10 (iii) for the period March first, two thousand fifteen, through Febru-  
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  
18 (b) of subdivision one of section six hundred fifty-two of the labor  
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  
31 plans, or the consumer directed personal assistance program under  
32 section three hundred sixty-five-f of the social services law, for any  
33 episode of care without the certified home health agency, long term home  
34 health care program, [~~or~~] managed care plan or the consumer directed  
35 personal assistance program having delivered prior written certification  
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  
48 with the department of labor, which attests to the licensed home care  
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  
54 parties necessary to verify compliance with the terms of this section.  
55 Such certifications and the information exchanged pursuant to them shall  
56 be retained by all certified home health agencies, long term home health

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.

4 7. The commissioner shall distribute to all certified home health  
5 agencies, long term home health care programs, ~~and~~ managed care plans,  
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  
9 at least one hundred twenty days prior to the effective date of each  
10 minimum rate for each social services district covered by the terms of  
11 this section.

12 8. The commissioner is authorized to promulgate regulations, and may  
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  
17 health care programs, ~~or~~ managed care plans, or consumer directed  
18 personal assistance program under section three hundred sixty-five-f of  
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 sixty-  
24 five-f of the social services law shall be liable for recoupment of  
25 payments for services provided through a licensed home care services  
26 agency or other third party with which the certified home health agency,  
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  
30 term home health care program, ~~or~~ managed care plan, or fiscal inter-  
31 mediary has reasonably and in good faith collected certifications and  
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  
35 health is authorized to sell accounts receivable balances owed to the  
36 state by Medicaid providers to financial institutions; provided that no  
37 such sale of accounts receivable balances shall include any state  
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  
48 the accounts receivable balances shall be deposited to the Medicaid  
49 escrow fund and be used to offset Medicaid costs under the Medicaid  
50 global spending cap. The commissioner shall provide the legislature with  
51 a description of the terms of any such sale, including a list of the  
52 impacted Medicaid providers, at least thirty days prior to the sale.

53 § 7. This act shall take effect immediately; provided, however that:

54 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;



b. sections three and five of this act shall take effect July 1, 2017;  
and

c. section six of this act shall expire April 1, 2019; however, such  
expiration shall not invalidate or otherwise impact any sale of accounts  
receivable effected pursuant to such section prior to its expiration.

#### PART T

Section 1. This act shall be known and may be cited as the "clean  
water infrastructure act of 2017".

§ 2. Article 15 of the environmental conservation law is amended by  
adding a new title 33 to read as follows:

### TITLE 33

#### SOURCE WATER PROTECTION PROJECTS

##### Section 15-3301. Definitions.

15-3303. Land acquisition projects for source water protection.

15-3305. Approval and execution of projects.

##### § 15-3301. Definitions.

As used in this title the following terms shall mean:

1. "Land acquisition projects" means open space acquisition projects  
undertaken with willing sellers including, but not limited to, the  
purchase of conservation easements, undertaken by a municipality, a  
not-for-profit corporation, or purchase of conservation easements by a  
soil and water conservation district.

2. "Municipality" means the same as such term as defined in section  
56-0101 of this chapter.

3. "Not-for-profit corporation" means a corporation formed pursuant to  
the not-for-profit corporation law and qualified for tax-exempt status  
under the federal internal revenue code.

4. "Soil and water conservation district" means the same as such term  
as defined in section three of the soil and water conservation districts  
law.

5. "State assistance payment" means payment of the state share of the  
cost of projects authorized by this title to preserve, enhance, restore  
and improve the quality of the state's environment.

##### § 15-3303. Land acquisition projects for source water protection.

1. The commissioner is authorized to provide state assistance to muni-  
cipalities, not-for-profit corporations and soil and water conservation  
districts to undertake land acquisition projects for source water  
protection, in cooperation with willing sellers. Land acquisition  
projects for source water protection shall support, expand or enhance  
drinking water quality protection, including but not limited to aqui-  
fers, watersheds, reservoirs, lakes, rivers and streams.

2. a. Any buffer encumbered by a conservation easement acquired pursu-  
ant to this section that encumbers lands used in agricultural production  
as defined in section three hundred one of the agriculture and markets  
law in a county designated state certified agricultural district created  
under section three hundred three of the agriculture and markets law may  
allow agricultural activity that qualifies such lands, provided such  
activity on such lands does not impair drinking water and complies with  
an agricultural environmental management program plan developed by the  
state soil and water conservation committee, in partnership with the  
department.

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.

4 3. In evaluating land acquisition projects for source water protection  
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  
23 drinking water quality protection, including but not limited to aqui-  
24 fers, watersheds, reservoirs, lakes, rivers and streams. Such committee  
25 shall give priority to projects which establish buffers from waters  
26 which serves as or are tributaries to drinking water supplies for such  
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  
30 funds made available pursuant to this title shall not be sold, leased,  
31 exchanged, donated or otherwise disposed of or used for other than the  
32 public purposes of this title without the express authority of an act of  
33 the legislature, which shall provide for the substitution of other lands  
34 of equal environmental value and fair market value and reasonably equiv-  
35 alent usefulness and location to those to be discontinued, sold or  
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  
39 a municipality or not-for-profit with funds made available pursuant to  
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 c. financial need or hardship.

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  
25 source water protection project. Such a project shall be recommended to  
26 the commissioner by the governing body of a not-for-profit corporation  
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 The department may request that such municipalities provide such  
45 documentation as the department may require to confirm award eligibil-  
46 ity.

47 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 § 27-1201. Definitions.

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 required to ensure the availability of safe drinking water, including  
31 public water systems and individual onsite water supply systems neces-  
32 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

1 systems, including resource recovery facilities or other facilities for  
2 reducing solid waste volume, sanitary landfills, regulated facilities  
3 for the disposal of construction and demolition debris, regulated plants  
4 and facilities for compacting, composting or pyrolyzation of solid  
5 wastes, regulated mulch facilities, landspreading and soil amending  
6 operations, and incinerators.

7 § 27-1203. Mitigation and remediation of solid waste sites.

8 1. 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  
23 at the direction of the department, shall have the authority to enter  
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  
30 health, two days' written notice shall be sufficient. Any inspection of  
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  
39 limited to, subsurface borings and any analyses or tests of samples  
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  
48 accordance with the provisions of subdivision twelve of section 27-1205  
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.

4 5. If the department or the department of health, as appropriate,  
5 determines that a solid waste site poses a significant threat to the  
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  
11 solid waste site is causing or substantially contributing to contam-  
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 stand-  
18 ards, including maximum contaminant levels, notification levels, maximum  
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  
29 section eleven hundred twelve of the public health law, the department  
30 in conjunction with the department of health, may, pursuant to the Clean  
31 Water Infrastructure Act of 2017 and within the up to one hundred thirty  
32 million dollars appropriated for such purposes, undertake all reasonable  
33 and necessary additional mitigation measures in any area of the state in  
34 which contamination is known to be present. The department shall employ  
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  
48 threat to the public health or environment from a hazardous waste, the  
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  
54 constitutes an actual or potential threat to public health based on the  
55 best available scientific information pursuant to section eleven hundred  
56 twelve of the public health law:

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 meas-  
4 ures of drinking water contamination, as approved by the department of  
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  
18 in the event the commissioner of health shall issue an order pursuant to  
19 subdivision three of section one thousand three hundred eighty-nine-b of  
20 the public health law, such order of the commissioner of health shall  
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  
30 title; provided, however, that this subdivision shall not limit the  
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  
34 for the disposal of such contaminant, including liability for the cost  
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

39 b. the threat makes it prejudicial to the public interest to delay  
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  
48 levels or action levels established by the department of health. Find-  
49 ings required pursuant to this subdivision shall be in writing and may  
50 be made by the commissioner of health on an ex parte 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  
54 hearing is provided to persons who may be the subject of such order.  
55 The commissioner or the commissioner of health shall determine which  
56 persons are responsible pursuant to said subdivision according to appli-



1 cable principles of statutory or common law liability. Such persons  
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  
4 shall have the same force and effect at such hearings as they would have  
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  
10 commissioner of health may request the participation of the attorney  
11 general in such hearings.

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  
18 a drinking water contamination site, determined pursuant to subdivision  
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 munici-  
23 pality, develops and implements such remediation, the commissioner  
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  
30 the federal government.

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 this title.

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  
49 person relating to the ongoing investigation of a drinking water contam-  
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.

55 c. When the department has substantial evidence that such drinking  
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 desig-  
3 nated officer or employee of the department, or of any state agency, and  
4 any agent, consultant, contractor, or other person, including an employ-  
5 ee, agent, consultant, or contractor of a responsible person acting at  
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  
10 authorized person may utilize or cause to be utilized such sampling  
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  
24 shall take place at reasonable times and shall be commenced and  
25 completed with reasonable promptness. If any officer, employee, agent,  
26 consultant, contractor, or other person so authorized in writing by the  
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  
29 obtained and, if requested, a portion of such sample equal in volume or  
30 weight to the portion retained. If any analysis is made of such samples,  
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  
34 removed, all equipment and well machinery and return the ground surface  
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  
55 consent to an earlier date; and (b) the department has substantial  
56 evidence that such drinking water contamination site is causing or



1 substantially contributing to the contamination of drinking water. In  
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.

5 § 27-1207. Use and reporting of the solid waste mitigation account and  
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;  
18 b. investigation and environmental characterization of solid waste  
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 defenses.

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 drink-  
48 ing water supplies or a drinking water contamination site pursuant to  
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  
53 paragraph (j) of subdivision 3 as added by section 4 of part I of chap-  
54 ter 1 of the laws of 2003, subdivision 2 as amended by section 5 of part  
55 X of chapter 58 of the laws of 2015, paragraph (i) of subdivision 3 as  
56 amended by section 1 of part R of chapter 59 of the laws of 2007, subdi-

vision 6 as amended by chapter 38 of the laws of 1985, are amended and two new paragraphs (k) and (l) are added to subdivision 3 to read as follows:

1. There is hereby established in the custody of the state comptroller a nonlapsing revolving fund to be known as the "hazardous waste remedial fund", which shall consist of a "site investigation and construction account", an "industry fee transfer account", an "environmental restoration project account", "hazardous waste cleanup account", ~~[and]~~ a "hazardous waste remediation oversight and assistance account" , a "solid waste mitigation account", and a "drinking water response account".

2. Such fund shall consist of all of the following:

(a) moneys appropriated for transfer to the fund's site investigation and construction account; (b) all fines and other sums accumulated in the fund prior to April first, nineteen hundred eighty-eight pursuant to section 71-2725 of the environmental conservation law for deposit in the fund's site investigation and construction account; (c) all moneys collected or received by the department of taxation and finance pursuant 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 fund pursuant to section 72-0201 of the environmental conservation law which shall be deposited in the fund's industry fee transfer account; (e) all moneys paid into the fund pursuant to paragraph (b) of subdivision one of section one hundred eighty-six of the navigation law which 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 the environmental conservation law into the fund's environmental restoration project account; (g) all fees paid into the fund pursuant to section 72-0402 of the environmental conservation law which shall be deposited in the fund's industry fee transfer account; (h) payments received for all state costs incurred in negotiating and overseeing the implementation of brownfield site cleanup agreements pursuant to title fourteen of article twenty-seven of the environmental conservation law shall be deposited in the hazardous waste remediation oversight and assistance account; (i) all moneys recovered pursuant to title twelve of article twenty-seven of the environmental conservation law into the fund's drinking water response account; and ~~[(i)]~~ (j) other moneys credited or transferred thereto from any other fund or source for deposit in the fund's site investigation and construction account.

(i) with respect to moneys in the hazardous waste remediation oversight and assistance account, non-bondable costs associated with hazardous waste remediation projects. Such costs shall be limited to agency staff costs associated with the administration of state assistance for brownfield opportunity areas pursuant to section nine hundred seventy-r of the general municipal law, agency staff costs associated with the administration of technical assistance grants pursuant to titles thirteen and fourteen of article twenty-seven of the environmental conservation law, and costs of the department of environmental conservation related to the geographic information system required by section 3-0315 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~~[-]~~;

(k) with respect to moneys in the solid waste mitigation account, when 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  
3 waste site pursuant to title twelve of article twenty-seven of the envi-  
4 ronmental conservation law which indicates that conditions on such prop-  
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  
10 conservation, and to the department of health, to undertake mitigation  
11 and remediation as the departments may determine necessary related to a  
12 drinking water contamination site pursuant to title twelve of article  
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)  
20 of subdivision three of this section through litigation or cooperative  
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.

25 § 6. 1. This section shall be known and be cited as the "New York  
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  
30 law or "eligible project" as defined in paragraphs (a), (b), (c) and (e)  
31 of subdivision 4 of section 1160 of the public health law.

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

35 (ii) for eligible projects, the same meaning as defined in section  
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  
43 empowered to construct and operate a water quality infrastructure  
44 project, or any two or more of the foregoing which are acting jointly in  
45 connection with a water quality infrastructure project.

46 3. a. The environmental facilities corporation shall undertake and  
47 provide state financial assistance payments, from funds appropriated for  
48 such purpose, to municipalities in support of water quality infrastruc-  
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:

54 (i) replacement or repair of infrastructure; or

55 (ii) compliance with environmental and public health laws and regu-  
56 lations related to water quality.

b. Any state financial assistance payment awarded pursuant to this act shall not exceed seventy-five percent of the project cost.

c. A municipality may make an application for such state financial assistance payment, in a manner, form and timeframe and containing such information as the environmental facilities corporation may require provided however, such requirements shall not include a requirement for prior listing on the intended use plan.

d. A municipality shall not be required to accept environmental facilities corporation loan financing in order to obtain a state financial assistance payment pursuant to this act if it can provide proof of having obtained similarly low cost financing or other funding from another source.

e. In awarding such financial assistance payments, the corporation shall be prohibited from requiring as a condition of receipt, or otherwise giving preference to, applicants who agree to participate in the design, creation, or implementation of a municipal consolidation plan.

f. In awarding such state financial assistance payments, the environmental facilities corporation shall consider and give preference to municipalities that meet the hardship criteria established by the environmental facilities corporation pursuant to section 1285-m of the public authorities law and projects that result in the greatest water quality improvement or greatest reduction in serious risk to public health. For the purposes of this act, the hardship criteria of section 1285-m of the public authorities law shall also apply to sewage treatment works as defined in section 17-1903 of the environmental conservation law.

g. Water quality infrastructure projects financed with state financial assistance made available pursuant to this section shall be subject to 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 all applicable minority- and women-owned business mandates including, but not limited to article 15-A of the executive law.

§ 7. The public authorities law is amended by adding a new section 1285-s to read as follows:

§ 1285-s. New York state intermunicipal water infrastructure grants program. 1. For purposes of this section:

(a) "water quality infrastructure project" shall mean "sewage treatment works" as defined in section 17-1903 of the environmental conservation law or "eligible project" as defined in paragraphs (a), (b), (c) and (e) of subdivision four of section eleven hundred sixty of the public health law.

(b) "construction" shall mean:

(i) for sewage treatment works, the same meaning as defined in section 17-1903 of the environmental conservation law; and

(ii) for eligible projects, the same meaning as defined in section one thousand one hundred sixty of the public health law.

(c) "municipality" shall mean any county, city, town, village, district corporation, county or town improvement district, school district, Indian nation or tribe recognized by the state or the United States with a reservation wholly or partly within the boundaries of New York state, any public benefit corporation or public authority established pursuant to the laws of New York or any agency of New York state which is empowered to construct and operate an intermunicipal water quality infrastructure project, or any two or more of the foregoing which are acting jointly in connection with an intermunicipal water quality infrastructure project.

2. (a) The environmental facilities corporation shall undertake and provide state financial assistance payments, from funds appropriated for such purpose, to municipalities in support of intermunicipal water quality infrastructure projects provided, however, in any such year that funds are appropriated for such purpose, each project shall receive an award of up to ten million dollars of appropriated funds; provided that such monies shall not exceed sixty percent of the total project cost; and provided further that the total state financial assistance payment for the project does not represent a disproportionate share of the total amount of available funding in any given year.

(b) Intermunicipal water quality infrastructure projects shall serve multiple municipalities and may include a shared water quality infrastructure project or interconnection of multiple municipal water quality infrastructure projects and shall be awarded only to water quality infrastructure projects for:

(i) construction, replacement or repair of infrastructure provided, however, that such assistance shall not be awarded for construction to exclusively support residential or commercial development; or

(ii) compliance with environmental and public health laws and regulations related to water quality.

(c) Cooperating municipalities may make an application for an intermunicipal water infrastructure grant, in a manner, form and timeframe and containing such information as the environmental facilities corporation may require provided however, such requirements shall not include a requirement for prior listing on the intended use plan.

(d) Cooperating municipalities shall not be required to accept environmental facilities corporation loan financing in order to obtain a state financial assistance payment pursuant to this section if it can provide proof of having obtained similarly low cost financing or other funding from another source.

(e) In awarding financial assistance payments, the corporation shall be prohibited from requiring as a condition of receipt, or otherwise giving preference to, applicants who agree to participate in the design, creation, or implementation of a municipal consolidation plan.

3. Intermunicipal water quality infrastructure projects financed with state financial assistance made available pursuant to this section shall be subject to the requirements of article eight of the labor law, the requirements of article seventeen-B of the executive law and the requirements and provisions of all applicable minority- and women-owned business mandates including, but not limited to article fifteen-A of the executive law.

§ 8. The public authorities law is amended by adding a new section 1285-t to read as follows:

§ 1285-t. Water infrastructure emergency financial assistance. 1. For purposes of this section, "municipality" means any county, city, town, village, district corporation, county or town improvement district, school district, Indian nation or tribe recognized by the state or the United States with a reservation wholly or partly within the boundaries of New York state, any public benefit corporation or public authority established pursuant to the laws of New York or any agency of New York state which is empowered to construct and operate a wastewater or drinking water infrastructure project, or any two or more of the foregoing which are acting jointly in connection with such a project.

2. Upon a municipality's formal declaration of an emergency, the municipality shall provide the department of environmental conservation or 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  
4 department determines the state of the infrastructure is resulting or  
5 may result in imminent hazard to the public health or welfare, or to the  
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. The corporation and the municipality shall enter into an agreement  
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  
18 such determination. The municipality shall submit an itemized cost esti-  
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  
29 emergency financial assistance the full amount of such assistance  
30 provided to it under this section. The corporation may extend the time  
31 to repay for up to one additional year if the corporation determines in  
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  
48 purposes of this section:

49 (a) "Cesspool" means a drywell that receives untreated sanitary waste  
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.

4 (d) "Septic system" means a system that provides for the treatment  
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 treat-  
11 ment technologies, including an advanced nitrogen removal system, to  
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 (f) "Small business" means any business which is resident in this  
17 state, independently owned and operated, not dominant in its field, and  
18 employing not more than one hundred individuals.

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  
26 shall not include costs associated with routine maintenance such as a  
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  
30 of participating counties establish priority geographic areas and, in  
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 ipating counties in which priority areas have been identified, shall  
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  
48 for that purpose, to participating counties to administer a septic  
49 system replacement program to support septic system projects within  
50 their municipal boundaries undertaken by property owners within their  
51 municipal boundaries. Where such project is located in a priority  
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  
4 within its municipal boundaries for septic system projects within its  
5 municipal boundaries that are eligible for reimbursement from the fund.

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  
20 form provided by the corporation.

21 (c) Property owners in participating counties must have signed a prop-  
22 erty owner participation agreement with the county before the start of  
23 the design phase to be eligible for reimbursement from the fund. The  
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;

31 (ii) a completed reimbursement application form substantially in the  
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  
39 to property owners from financial assistance payments made to the county  
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 ther-  
48 eafter, the corporation shall submit to the governor, the temporary  
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.

§ 10. Subdivision 4 of section 11-b of the soil and water conservation districts law, as amended by chapter 538 of the laws of 1996, is amended to read as follows:

4. Eligible costs that may be funded pursuant to this section are architectural and engineering services, plans and specifications, including watershed based or individual agricultural nonpoint source pollution assessments, consultant and legal services, conservation easements and associated transaction costs specific to title thirty-three of article fifteen of the environmental conservation law and other direct expenses related to project implementation.

§ 11. Report on integrated database of infrastructure projects. The environmental facilities corporation shall, in cooperation with the departments of health and environmental conservation, study and prepare a report to the legislature by January 30, 2018, on the feasibility of establishing, an integrated database or platform incorporating past, present, and ongoing infrastructure projects that have been applied for, as well as those which have been funded through grant and loan programs administered by the department of environmental conservation, the department of health, and the environmental facilities corporation relating to water quality infrastructure for the purpose of informing ongoing and future policy and funding initiatives.

§ 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 2003, is amended to read as follows:

1. The department in conjunction with the commissioner of health shall create ~~[or modify an existing]~~ and maintain a geographic information system, ~~[and maintain such system]~~ and associated data storage and analytical systems for purposes of collecting, streamlining, and visualizing integrated data, permits, and relevant sites about drinking water quality including, but not limited to, incorporating ~~[information from remedial programs under its jurisdiction, and]~~ supply well and monitoring well data, emerging contaminant data, water quality monitoring data, pertinent data from remediation and landfill sites, permitted discharge locations and other potential contamination risks to water supplies. Such system shall also incorporate information from the source water assessment program collected by the department of health, data from annual water supply statements prepared pursuant to section eleven hundred fifty-one of the public health law, information from the database pursuant to title fourteen of article twenty-seven of this chapter, and any other existing data regarding soil and groundwater contamination currently gathered by the department, as well as data on contamination that is readily available from the United States geological survey and other sources determined appropriate by the department. In addition to facilitating interagency coordination and predictive analysis to protect water quality, such system shall provide state agency information to the public through a website, within reasonable limitations to ensure confidentiality and security.

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

§ 14. This act shall take effect immediately; provided, however, that emergency financial assistance will not be available under section 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.

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