STATE OF NEW YORK
OFFICE OF THE MEDICAID INSPECTOR GENERAL
800 North Pearl Street
Albany, New York 12204

DAVID A. PATERSON
GOVERNOR

JAMES G. SHEEHAN
MEDICAID INSPECTOR GENERAL

December 9, 2010

[redacted]
Meadowbrook Healthcare
154 Prospect Avenue
Plattsburgh, New York 12901-1302

Re: Notice of Rate Changes #10-4222
NPI Number: [redacted]
Provider Number: [redacted]

Dear [redacted]

The Department of Health conducted an audit of Meadowbrook Healthcare's (the "Facility") costs for base year July 1, 1995 through June 30, 1996 (audit #99-A04-1072). This audit resulted in downward adjustments of the Facility's July 1, 1995 through December 31, 1998 rates.

Previously issued Notices of Rate Changes have addressed overpayments through December 31, 2007. However, the July 1, 1995 through June 30, 1996 base year is also used to calculate the operating portion of the January 1, 2008 through March 31, 2009 rates. Based on the enclosed audited rates calculated by the Bureau of Long Term Care Reimbursement, the Medicaid overpayment currently due is $49,592. This overpayment is subject to Department of Health (the "DOH") and Division of Budget (the "DOB") final approval. While not anticipated, any difference between the calculated overpayment and the final DOH and DOB approved amount will be resolved with the Facility by the OMIG Bureau of Collections Management.

Enclosed are the appropriate rate sheets to support the amount due. The rate sheets reflect only the carry forward of the base period operating expense adjustments. All other components of the January 1, 2008 through March 31, 2009 rates may be subject to future audit. The revised rates and Medicaid impact are as follows.

Rate Period	Issued Rates	Final Rates	Rate Decrease	Medicaid Days	Medicaid Overpayment
01/01/08-03/31/08	$162.08/162.07	$161.23/161.22	$0.85	12,192	$10,363
04/01/08-06/30/08	159.04/159.03	158.20/158.19	0.84	11,272	9,468
07/01/08-12/31/08	162.30/162.29	161.46/161.45	0.84	23,776	19,972
01/01/09-03/31/09	159.07/159.06	158.21/158.20	0.86	11,383	9,789
TOTAL MEDICAID OVERPAYMENT					**$49,592**

In accordance with terms pertaining to the Stipulation of Settlement for audit #99-A04-1072, the OMIG will suspend collection of audit #10-4222 until appeal #A710852 is processed by the Bureau of Long Term Care Reimbursement.

If you have any questions regarding the above, please call at

Sincerely

Coordinator Medical Facilities Audit
Division of Medicaid Audit
Audit Management and Development
Office of the Medicaid Inspector General

CERTIFIED MAIL#
RETURN RECEIPT REQUESTED