



State of New Jersey

DEPARTMENT OF HUMAN SERVICES

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

PO Box 712

TRENTON, NJ 08625-0712

PHILIP D. MURPHY
Governor

SHEILA Y. OLIVER
Lt. Governor

SARAH ADELMAN
Commissioner

JENNIFER LANGER JACOBS
Assistant Commissioner

NJ Statewide Transition Plan: State and Provider Compliance With the Home and Community Based Services (HCBS) Settings Rule

The Centers for Medicare and Medicaid Services requested that each state provide a description of State and provider compliance with the HCBS regulatory criteria that must be met by the end of the transition period on March 17, 2023. Areas the State is required to provide information on are below:

- A description of how the State's oversight systems (licensure and certification standards, provider manuals, person-centered plan monitoring by case managers, etc.) have been modified to embed the HCBS regulatory criteria;
- A description of how the state assesses providers for initial compliance and conducts ongoing monitoring; and
- A description of how beneficiaries can notify the state of a setting that demonstrates non-compliance.

To maintain compliance with the [HCBS Settings Rule](#), NJ has engaged in systemic modifications to ensure that beneficiaries have rights as outlined in [42 CFR 441.301](#) and are integrated in the community, with options and opportunities for community living based on their individualized, person centered plan.

Description of how the State's oversight systems (licensure and certification standards, provider manuals, person-centered plan monitoring by case managers, etc.) have been modified to embed the regulatory criteria into ongoing operations.

The Department of Human Services (DHS) reviewed the HCBS Settings Rule. Those requirements were then cross-walked with pertinent regulations, policies and procedures, etc. to identify areas where modification was needed to ensure compliance. DHS engaged with the responsible entities and stakeholders in public comment where applicable. Areas addressed include, but are not limited to:

- Updating of N.J.A.C. 10:44A-C governing Community Residences for Individuals with Developmental Disabilities, Community Care Residences, and Community Residences for Persons with Head Injuries
- Creation of N.J.A.C 10:53 governing Assisted Living Service Providers
- Updating of the Community Care Program Policies and Procedures Manual governing Division of Developmental Disabilities (DDD) services
- Updating of the Supports Program Policies and Procedures Manual governing DDD services
- Creation of a specific [website for DDD individuals, families and service providers](#) to provide HCBS Settings Rule information and training.
- Revision of the Managed Care Organization (MCO) contract, including provisions related to contracted health care providers.
- Creation of a specific [HCBS Settings Rule website](#) which contains all NJ Specific HCBS Settings Rule documents, including the Statewide Transition Plan.

Ongoing oversight of settings rule compliance has been embedded throughout the service system, not only through regulatory modifications and trainings, but also through the ongoing monitoring processes that are now in place. This includes monitoring through regular licensing inspections, provider credentialing and person centered care planning.

A more detailed outline of these systemic modifications can be found in the [Statewide Transition Plan Systemic Assessment/Remediation Grid](#).

Description of how the state assesses providers for initial compliance and conducts ongoing monitoring for continued compliance

As described in the [Statewide Transition Plan Addendum #3](#), the state initially assessed provider compliance through provider self-assessment, site visits and desk review. During on-site visits, a state reviewer conducted interviews with residents and staff, reviewed provider policies, and individual records to confirm whether the site met HCBS Settings Rule requirements. Settings which required heightened scrutiny were also assessed using the [HCBS Verification Tool](#) and the [Heightened Scrutiny Assessment Tool](#).

For ongoing compliance of HCBS settings:

- Residential settings will engage in ongoing monitoring through regular licensing inspections, provider credentialing and person centered care planning.
- Non-residential settings will engage in ongoing monitoring through regular provider credentialing and person centered care planning.

Description of a beneficiary's recourse to notify the state of setting non-compliance (grievance process, notification of case manager, etc.) and how the state will address beneficiary feedback.

Beneficiaries always have the option to contact the State directly through dedicated contact mechanisms either by phone number or email address.

The DHS offers two email addresses where HCBS settings rule compliance concerns may be directed.

- The Division of Medical Assistance and Health Services (DMAHS) at DMAHS.HCBS-Settings-Rule@dhs.nj.gov. All NJ FamilyCare/Medicaid beneficiaries, care managers and interested stakeholders may contact this helpdesk should an issue related to HCBS compliance arise. Medicaid members may also discuss concerns with their MCO care manager.
- DDD at DDD.HCBShelpdesk@dhs.nj.gov. All DDD beneficiaries, support coordinators and interested stakeholders may contact this helpdesk should an issue related to HCBS compliance arise. Concerns can also be reported to DDD at (800) 832-9173. Information on how to register a complaint about HCBS non-compliance is also found in both the [Community Care Program Policies and Procedures Manual](#) and [Supports Program Policies and Procedures Manual](#) in section 11.7 titled *Home and Community Based Services (HCBS) Settings Compliance*.

A beneficiary may also communicate with their assigned MCO care manager or DDD Support Coordinator to report provider non-compliance. MCO Care Managers and DDD Support Coordinators will contact the State to provide information as to provider non-compliance through the applicable helpdesk.

The state will investigate all reports of provider non-compliance and will use its internal and external resources to enforce compliance with the settings rule.