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State/Territory Name: New Jersey

State Plan Amendment (SPA) #: 19-0022

This file contains the following documents in the order listed:

- 1) Approval Letter
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- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services
601 East 12th Street, Suite 0300
Kansas City, Missouri 64106-2898



Medicaid and CHIP Operations Group

March 25, 2020

Jennifer Langer Jacobs
State Medicaid Director
NJ Department of Human Services
Division of Medical Assistance and Health Services
P.O. Box 712
Trenton, NJ 08625-0712

RE: SPA #19-0022

Dear Ms. Langer Jacobs:

This is to notify you that New Jersey's State Plan Amendment (SPA) #19-0022, "Family Planning and Family Planning Related Services," was approved March 10, 2020, for adoption into the State Medicaid Plan, with an effective date of October 1, 2019. This SPA is a companion to New Jersey SPA #19-0021, State Eligibility Option for Family Planning Services.

If you have any questions or wish to discuss this SPA further, please contact Michael Cutler of this office. Mr. Cutler may be reached at (212) 616-2421.

Sincerely,


James G. Scott, Director
Division of Program Operations

Enclosure

cc:
Nicole McKnight
Mike Cutler

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES		1. TRANSMITTAL NUMBER: 19-0022 MA	2. STATE New Jersey
		3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR CENTERS FOR MEDICARE & MEDICAID SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES		4. PROPOSED EFFECTIVE DATE October 1, 2019	
5. TYPE OF PLAN MATERIAL (Check One):			
<input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> AMENDMENT COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)			
6. FEDERAL STATUTE/REGULATION CITATION: Social Security Act 1905(a)(4)(C) and 1902(a)(10)(A)(ii)(XXI); 42 CFR 435.214		7. FEDERAL BUDGET IMPACT: a. FFY 2020 \$21,400,000 b. FFY 2020 \$21,400,000	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 3.1-A Page 2.1-2.3		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): New	
10. SUBJECT OF AMENDMENT: Family Planning and Family Planning Related Services under the State Eligibility Option for Family Planning Services (companion SPA to NJ 19-0021 State Eligibility Option for Family Planning Services)			
11. GOVERNOR'S REVIEW (Check One):			
<input type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL		<input checked="" type="checkbox"/> OTHER, AS SPECIFIED: Not required, pursuant to 7.4 of the Plan	
12. SIGNATURE OF STATE AGENCY OFFICIAL 		16. RETURN TO: Jennifer Langer Jacobs, Assistant Commissioner Division of Medical Assistance and Health Services P.O. Box 712, Mail Code #26 Trenton, NJ 08625-0712	
13. TYPED NAME: Carole Johnson			
14. TITLE: Commissioner, Department of Human Services			
15. DATE SUBMITTED: 12/26/19			
FOR REGIONAL OFFICE USE ONLY			
17. DATE RECEIVED: 12/26/2019		18. DATE APPROVED: 03/10/2020	
PLAN APPROVED - ONE COPY ATTACHED			
19. EFFECTIVE DATE OF APPROVED MATERIAL: 10/01/2019			
21. TYPED NAME: James G. Scott		22. TITLE: Director, Division of Program Operations	
23. REMARKS:			

Revision:

ATTACHMENT 3.1-A

Page 2.1

OMB NO.:

State/Territory New Jersey

Citation

Family Planning Benefits

1905(a)(4)(C)

4.C Family planning services and supplies for individuals of child-bearing age.

Provided: No Limitations With Limitations

These services include outpatient Family planning services and supplies such as:

- Comprehensive family planning services for women and men including all FDA-approved forms of contraception, emergency oral contraception (such as Plan B®, Ella®), pregnancy testing, Family Planning counseling, sterilization, blood counts HIV and STD screenings
- Consultations for the purpose of discussing and prescribing a treatment plan for managing family development, including birth control, sterilization (abortion and hysterectomy services are not covered).
- Consultations for the purpose of educating regarding birth control and sexually-transmitted disease.
- Prescribing FDA-approved contraception, both orally and by medical device, including birth control pills, condoms, diaphragms, Long-Acting Reversible Contraception (LARC).
- Family planning laboratory testing, including but not limited to, STD/HIV screenings, PAP smears, urine, blood counts, mammography, Hepatitis B testing, and Human Papilloma Vaccinations.
- Vasectomies covered for men 21 years of age or older

Please describe any limitations: Outpatient Only

TN No. 19-0021

Approval Date 03/10/2020

Effective Date 10/01/2019

Supersedes TN No. New

Revision:

ATTACHMENT 3.1-A

Page 2.2

OMB NO.:

State/Territory New Jersey

Citation

Family Planning Benefits

4.c.(i) Individuals eligible under 1902(a)(10)(A)(ii)(XXI). Family Planning services available to the general Medicaid population (4.C) should be the same as those provided to this group.

4.c.(ii) Family planning-related services provided under the State Eligibility Option

Provided: No Limitations With Limitations

These services include:

Outpatient services that were provided as part of, or as follow-up to, the family planning visit such as:

- Resolving unintended medical consequences following the insertion/removal of a medical device.
- Treating incidental findings discovered during examination of reproductive system, including treatment of lower genital tract and genital skin infections/disorders, urinary tract infections.
- Perform Breast mammography or tomosynthesis due to a finding during an initial family planning visit.
- Surgical removal and pathology of lesions related to sexually transmitted infections discovered during the examination.

Please describe any limitations: Outpatient only.

TN No. 19-0021

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