Table of Contents

State/Territory Name: NJ

State Plan Amendment (SPA) #: 22-0015

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services Center for Medicaid & CHIP Services 233 North Michigan Ave., Suite 600 Chicago, Illinois 60601



Financial Management Group

December 15, 2022

Carole Johnson
Commissioner
Medical Assistance and Health Services
Department of Human Services
CN 12 Quakerbridge Plaza
Trenton, New Jersey 08625-0712

RE: NJ 22-0015

Dear Ms Johnson,

We have reviewed the proposed amendment to Attachment 4.19-D of your Medicaid State Plan submitted under transmittal number (TN) 22-0015. This SPA provides add on payments and incentives for long-term care facilities.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(2), 1902(a)(13), 1902(a)(30) and 1903(a) of the Social Security Act and the implementing Federal regulations at 42 CFR Part 447. This letter is to inform you that New Jersey 22-0015 is approved effective July 1, 2022. The CMS-179 and approved plan pages are enclosed.

If you have any additional questions or need further assistance, please contact Douglas Spitler at Douglas.Spitler@cms.hhs.gov

Sincerely,

Rory Howe Director

Financial Management Group

Enclosures

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES 5. FEDERAL STATUTE/REGULATION CITATION Social Security Act 1902(a)(13) 7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT Attachment 4.19-D Pages 41-44 Attachment 4.19-D Page 1	1. TRANSMITTAL NUMBER 2 2 — 0 0 1 5 N J 3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT XIX XXI 4. PROPOSED EFFECTIVE DATE July 1, 2022 6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a FFY 2022 \$ 11,250,000 b. FFY 2023 \$ 33,750,000 8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable) new same	
9. SUBJECT OF AMENDMENT SFY 2023 Nursing Facility Reimbursement 10. GOVERNOR'S REVIEW (Check One) GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED:		
O COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL 11. SIGNATURE OF STATE AGENCY OFFICIAL	15. RETURN TO	
by Sarah Adelman 6 17:17:32 -04'00'	Jennifer Langer Jacobs, Assistant Commissioner Division of Medical Assistance and Health Services P.O. Box 712, Mail Code #26	
13. TITLE Commissioner, Department of Human Services 14. DATE SUBMITTED	Trenton, NJ 08625-0712	
9/19/22 FOR CMS U	SF ONLY	
16. DATE RECEIVED 9/19/2022	17. DATE APPROVED December 15, 2022	
PLAN APPROVED - ON		
	19. SIGNATURE OF APPROVING OFFICIAL	
July 1, 2022 20. TYPED NAME OF APPROVING OFFICIAL	21. TITLE OF APPROVING OFFICIAL	
Rory Howe	Director, FMG	
22. REMARKS		

State: New Jersey Attachment 4.19-D
Page 1

NURSING FACILITY REIMBURSEMENT COST REPORT, RATE CALCULATION AND REPORTING SYSTEM FOR LONG-TERM CARE FACILITIES

NURSING FACILITY REIMBURSEMENT

The State has in place a public process which complies with the requirements of Section 1902(a)(13)(A) of the Social Security Act

CONTENTS

Section 1	Purpose and scope	Page 2
Section 2	Cost report preparation and timing of submission	2
Section 3	Rate classes	4
Section 4	Resident rosters and case mix index calculation	4
Section 5	Fringed costs	6
Section 6	Inflation	7
Section 7	Case mix rate components	7
Section 8	Limit and price database	10
Section 9	Limit and price calculation	11
Section 10	Direct care and operating and administrative rate component	13
Section 11	Fair rental value rate allowance	14
Section 12	Adjustments and pass-throughs	17
Section 13	Total adjusted case mix rate	17
Section 14	Full cost rates	21
Section 15	Special Care Nursing Facility (SCNF) rates	24
Section 16	Phase in of case mix rates	25
Section 17	Appeals process	25
Section 18	Transfer of ownership and new facilities	26
Section 19	Effect of Federal rules incorporated by reference	27
Section 20	Final audited rate calculation	27
Section 21	Payment Limitations	28
Section 22	Payments for Medical Assistance Recipients	29-44

22-0015-MA (NJ)
TN: 22-0015 Effective Date: July 1, 2022

Supersedes TN: 21-0013 Approval Date: December 15, 2022

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT NURSING HOME REIMBURSEMENT

STATE: New Jersey

Section 22 cont'd. Payments for Medical Assistance Recipients

Payments for Medical Assistance Recipients - Nursing facilities for the period of July 1, 2022, through June 30, 2023, are subject to the following conditions:

- (1) Class I (private), Class II (county), and Class III (special care) nursing facilities being paid on a fee-for-service basis shall be reimbursed at a per diem rate no less than the rate received on June 30, 2020, plus 10 percent, plus \$3.60, minus the first provider tax add-on and any performance add-on amounts, subject to the condition that Class III (special care) facilities shall be reimbursed the greater of this rate plus five percent or \$450 per diem;
- (2) monies designated pursuant to subsection c. of section 6 of P.L.2003, c.105 (C.26:2H-97) for distribution to nursing facilities, less the portion of those funds to be paid as pass-through payments in accordance with paragraph (1) of subsection d. of section 6 of P.L.2003, c.105 (C.26:2H-97) and less the actual amounts expended during fiscal year 2022 on performance add-ons and expenditures to establish a minimum per diem of \$188.35, shall be combined with amounts hereinabove appropriated for the General Medical Services program classification for the purpose of calculating NJ FamilyCare reimbursements for nursing facilities;
- (3) for the purposes of this paragraph, a nursing facility's per diem reimbursement rate or negotiated rate shall not include, if the nursing facility is eligible for reimbursement, the difference between the full calculated provider tax add-on and the quality-of-care portion of the provider tax add-on, which difference shall be payable as an allowable cost pursuant to subsection d. of section 6 of P.L.2003, c.105 (C.26:2H-97);
- (4) the add-ons used for fiscal year 2022 shall be applied from July 1, 2022, through September 30, 2022 and the first add-on as calculated in section 2 above shall be applied to fee-for-service per diem reimbursement rates effective October 1, 2022;

Approval Date: December 15, 2022

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT NURSING HOME REIMBURSEMENT

STATE: New Jersey

Section 22 cont'd. Payments for Medical Assistance Recipients

- (5) each Class I, Class II, and Class III nursing facility that has, not later than December 1, 2021, submitted to the Department of Human Services (DHS) the DHS Fiscal Year 2023 CoreQ Long-Stay Survey Sample Size Calculation Grid with affirmative answers, as defined by the Department, to validated Hospital Utilization Tracking system use, CoreQ vendor intent, and completion of the CoreQ Long-Stay Survey sample size calculation and, if eligible for CoreQ, not later than December 10, 2021, submitted demographics to the CoreQ vendor to initiate the CoreQ survey process, and, during calendar year 2021, has not been included on the Centers for Medicare and Medicaid Services (CMS) Special Focus Facility Lists A, B, E or F, ranked as a one-star facility by the CMS Five-Star Quality Rating System, or cited by the Department of Health for two or more Level G licensing violations
- (a) shall receive a performance add-on of \$1.80 for each of the following CMS nursing home long stay quality measures where the nursing facility has not failed to report data for any of the reporting periods Q3 2020, Q4 2020, Q1 2021 and Q2 2021, and the simple average of the quarters, as calculated by the Department with available data, is at or below the lower of the New Jersey or national average, as calculated by CMS, for the percentage of long stay residents who are: physically restrained, receiving antipsychotic medication, experiencing one or more falls with major injury, and high risk residents with a pressure ulcer,
- (b) shall receive a performance add-on of \$1.80 for the following CMS nursing home long stay quality measures where the nursing facility has not failed to report data for any of the reporting periods Q2 2020, Q3 2020, Q4 2020 and Q1 2021, and the simple average of the quarters, as calculated by the Department with available data, is at or below the lower of the New Jersey or national average, as calculated by CMS, for the number of hospitalizations per 1,000 long-stay resident days,

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT NURSING HOME REIMBURSEMENT

STATE: New Jersey

Section 22 cont'd. Payments for Medical Assistance Recipients

- (c) shall receive a performance add-on of \$1.80 if the percentage of long-stay residents who are assessed and/or given, appropriately, the influenza vaccination is at or above the higher of the New Jersey or national average for the CMS reporting influenza season ending Q2 2021, and
- (d) shall receive a performance add-on of \$1.80 if the nursing facility has been deemed eligible to participate in the CoreQ survey process as determined by the Department and received a composite score of 75 percent or greater, as calculated by the DHS vendor, on the CoreQ Resident and Family Experience Survey for the fiscal year 2023 survey period; and
- (6) each nursing facility shall receive a per diem adjustment that shall be calculated based upon an additional \$15,000,000 in State and \$15,000,000 in federal appropriations (amount includes fee-for-service and managed care).
- (7) LTC-Behavioral Health nursing facilities approved pursuant to the Department of Health's expedited certificate of need being paid on a fee-for-service basis for custodial care shall be reimbursed at a per diem rate equal to eighty-five percent of the simple average of the four Class III (special care) LTC-Specialized Behavior Modification nursing facility rates minus any performance add-on amounts;
- (a) for the purposes of this paragraph, a nursing facility's per diem reimbursement rate or negotiated rate shall not include, if the nursing facility is eligible for reimbursement, the difference between the full calculated provider tax add-on and the quality-of-care portion of the provider tax add-on, which difference shall be payable as an allowable cost pursuant to subsection d. of section 6 of P.L.2003, c.105 (C.26:2H-97); and

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT NURSING HOME REIMBURSEMENT

STATE: New Jersey

Section 22 cont'd. Payments for Medical Assistance Recipients

(b) the add-ons used for fiscal year 2022 shall be applied from July 1, 2022, through September 30, 2022 and the first add-on as calculated in section 2 above shall be applied to both MCO and fee-for-service per diem reimbursement rates effective October 1, 2022.
