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State Territory Name: NEW JERSEY

State Plan Amendment (SPA) #: 24-0013

This file contains the following documents in the order

listed:) 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 230 South Dearborn Chicago, Illinois 60604



Financial Management Group

October 29, 2024

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

RE: TN 24-0013

Dear Director Jacobs:

The Centers for Medicare & Medicaid Services (CMS) has reviewed the proposed New Jersey state plan amendment (SPA) to Attachment 4.19-B 24-0013, which was submitted to CMS on September 18, 2024. This plan amendment updates rates for Personal Care Services.

We reviewed your SPA submission for compliance with statutory requirements including in sections 1902(a)(2), 1902(a)(13), 1902(a)(30), and 1903 as it relates to the identification of an adequate source for the non-federal share of expenditures under the plan, as required by 1902(a) (2), of the Social Security Act and the applicable implementing Federal regulations.

Based upon the information provided by the state, we have approved the amendment with an effective date of July 1, 2024. We are enclosing the approved CMS-179 and a copy of the new state plan page.

If you have any additional questions or need further assistance, please contact Debi Benson at 312-886-0360 or via email at Deborah.Benson@cms.hhs.gov.

Sincerely,

Todd McMillion
Director

Division of Reimbursement Review

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 42 U.S. C. 1396a(a)(30)(A) 7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT	3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT XIX XXI 4. PROPOSED EFFECTIVE DATE July 1, 2024 6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars) a FFY 2024 \$ 2.598 b. FFY 2025 \$ 10,389 8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
9. SUBJECT OF AMENDMENT	OR ATTACHMENT (If Applicable) same
Personal Care Assistant (PCA) Rate Increase	
10. GOVERNOR'S REVIEW (Check One) GOVERNOR'S OFFICE REPORTED NO COMMENT COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	
11. SIGNATURE OF STATE AGENCY OFFICIAL 12. TYPED NAME	15. RETURN TO Gregory Woods, Assistant Commissioner Division of Medical Assistance and Health Services
Sarah Adelman 13. TITLE Commissioner, Department of Human Services 14. DATE SUBMITTED	P.O. Box 712, Mail Code #26 Trenton, NJ 08625-0712
9/18/24 FOR CMS USE ONLY	
16. DATE RECEIVED	17. DATE APPROVED
September 18, 2024	October 29, 2024
PLAN APPROVED - ONE COPY ATTACHED	
18. EFFECTIVE DATE OF APPROVED MATERIAL July 1, 2024	19. SIGNATURE OF APPROVING OFFICIAL
20. TYPED NAME OF APPROVING OFFICIAL	21. TITLE OF APPROVING OFFICIAL
Todd McMillion	Director, Division of Reimbursement Review
22. REMARKS	

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT STATE OF NEW JERSEY

METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES FOR NON INSTITUTIONAL SERVICES

PERSONAL CARE SERVICES

Effective July 1, 2024, weekday and weekend hourly rates for fee-for-service (FFS) personal care assistant (PCA) services have been set at \$26.68 per hour.

The effective date of the applicable fee schedules for all other Personal Care Services outside of this flat rate as well as a link to their electronic publication can be found on page 36 (See Medicaid Fee Schedules) of Attachment 4.19-B of the State Plan.

24-0013 MA (NJ)

TN: <u>24-0013 MA (NJ)</u> Approval Date: October 29, 2024

SUPERCEDES: TN: 23-0012 MA (NJ) Effective Date: July 1, 2024