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State/Territory Name: **New Jersey**

State Plan Amendment (SPA) #: **21-0015**

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
601 E. 12th St., Room 355
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

April 5, 2022

Jennifer Langer Jacobs
Assistant Commissioner
NJ Department of Human Services
Division of Medical Assistance and Health Services
PO Box 712
Trenton, NJ 08625-0712

Re: New Jersey State Plan Amendment (SPA) #NJ-21-0015

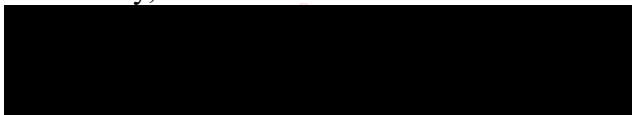
Dear Ms. Jacobs:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) #NJ-21-0015. This amendment incorporated additions to the benefits and reimbursement state plan pages in order to implement the Center for Medicare & Medicaid Innovation's (CMMI) Integrated Care for Kids (InCK) Model, a child-centered local service delivery and state payment model that utilizes CMMI waiver authority in section 1115A(d)(1) of the Social Security Act.

During a quality review of the approved SPA, it was discovered that the original approval package sent to New Jersey included an incorrect transmittal number on one of the SPA pages. CMS is re-issuing the approval package with the corrected transmittal number on page 13(c)(2b1) of the Addendum to Attachment 3.1-B. This SPA was approved on March 24, 2022 with an effective date of January 1, 2022. The enclosed corrected package contains the original signed letter, CMS-179 and all of the SPA pages that should have been included in the earlier package.

If you have any questions, please contact Terri Fraser at (410) 786-5573, or via email at Terri.Fraser@cms.hhs.gov.

Sincerely,



James G. Scott, Director
Division of Program Operations

Enclosures

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
601 E. 12th St., Room 355
Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

March 24, 2022

Jennifer Langer Jacobs
Assistant Commissioner
NJ Department of Human Services
Division of Medical Assistance and Health Services
PO Box 712
Trenton, NJ 08625-0712

Re: New Jersey State Plan Amendment (SPA) #NJ-21-0015

Dear Ms. Jacobs:

The Centers for Medicare & Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) submitted under transmittal number (TN) #NJ-21-0015. This amendment proposes to incorporate additions to the benefits and payment state plan pages in order to implement the Center for Medicare & Medicaid Innovation's (CMMI) Integrated Care for Kids (InCK) Model, a child-centered local service delivery and state payment model. The state will limit implementation of the InCK Model to two counties in the state utilizing CMMI waiver authority in section 1115A(d)(1) of the Social Security Act. The CMMI waiver authority is applicable only while the New Jersey InCK Model is implemented in accordance with the InCK Model's Terms and Conditions of Award.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations at 42 C.F.R. §§440 and 447. This letter is to inform you that New Jersey Medicaid SPA #NJ-21-0015 was approved on March 24, 2022 with an effective date of January 1, 2022.

If you have any questions, please contact Terri Fraser at 410-786-5573 or via email at Terri.Fraser@cms.hhs.gov.

Sincerely,



James G. Scott, Director
Division of Program Operations

cc: Nicole McKnight

Terri Fraser

Deborah Steinbach

Deborah Benson

Asher Mikow

Arlene Reich

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER

2 1 — 0 0 1 5

2. STATE

NJ

3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT

XIX XXI

TO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

January 1, 2022

5. FEDERAL STATUTE/REGULATION CITATION

42 U.S. C. 1396a(a)(30)(A); 42 USC 1396d(a)(13)

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 2022 \$ 671,534
b. FFY 2023 \$ 0

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Addendum to Attachment 3.1A Pages 13(c)(2b1)-(2b4)

Addendum to Attachment 3.1B Page 13(c)(2b1)

Attachment 4.19B Page 28.1 (P&I Attachment 4.19-B Pages 28.3 & 28.4)

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)

New
New
New

9. SUBJECT OF AMENDMENT

NJ Integrated Care for Kids (InCK)

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

OTHER, AS SPECIFIED:

11. SIGNATURE OF STATE AGENCY OFFICIAL

[Redacted Signature]

15. 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

12. TYPED NAME
Sarah Adelman

13. TITLE
Acting Commissioner, Department of Human Services

14. DATE SUBMITTED
12/27/21

FOR CMS USE ONLY

16. DATE RECEIVED
12/27/2021

17. DATE APPROVED
03/24/2022

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL
01/01/2022

19. SIGNATURE OF APPROVING OFFICIAL

[Redacted Signature]

20. TYPED NAME OF APPROVING OFFICIAL
James G. Scott

21. TITLE OF APPROVING OFFICIAL
Director, Division of Program Operations

22. REMARKS

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
Limitations on Amount, Duration and Scope of Services Provided to the
Categorically Needy

13(c) Preventive Services: NJ-Integrated Care for Kids (NJ InCK) Services

General Description:

Pursuant to 42 C.F.R. Section 440.130(c), NJ InCK services are provided to prevent adverse health outcomes and promote physical and mental health and efficiency. Services must be recommended by a physician or other licensed practitioner of the healing arts within her or his scope of practice under state law to promote the physical and mental health of the beneficiary.

Assurances

Services involving family members or other collaterals will be delivered for the sake of the beneficiary.

Beneficiaries under the age of 21 are eligible to receive all medically necessary Medicaid services needed to correct and ameliorate health conditions that are coverable under section 1905(a) Medicaid authority pursuant to the Early Periodic Screening, Diagnostic and Treatment (EPSDT) requirements.

21-0015-MA (NJ)

TN: 21-0015-MA

Approval Date: **03/24/2022**

Supersedes: NEW

Effective Date: **01/01/2022**

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Limitations on Amount, Duration and Scope of Services Provided to the Categorically Needy

13(c) Preventive Services: NJ-Integrated Care for Kids (NJ InCK) Services (cont'd)

Service Description:

Comprehensive Needs Assessment:

The assessment is based on the comprehensive NJ InCK Needs Assessment Tool. The Tool includes developmental screening, psychosocial/behavioral health screening, trauma screening, and questions relevant to the caregiver(s) when for the direct benefit of the child. The Tool meets the screening requirements of the American Academy of Pediatrics' Bright Futures Recommendations for Preventive Pediatric Health Care.

NJ InCK Needs Assessment is self-administered by beneficiary and/or caregiver and is interpreted by primary care provider.

Preventive Care Coordination Services:

Preventive care coordination services are intended to address needs identified in the assessment, to prevent adverse outcomes, and to promote physical and mental health and efficiency. Services vary in intensity based on the assessment results and medical necessity. Those in Tier 1 have no identified need for preventive care coordination. Those in Tier 2 have moderate to high risks for adverse outcomes, and those in Tier 3 have high and complex risks. Tier 2 and 3 members are NJ InCK-eligible members for preventive care coordination.

Preventive care coordination services are delivered through an integrated care team and include the following components:

- Prevention planning entails the development of a shared prevention plan that identifies services and resources needed to address the child's risks. Prevention plans are reviewed and updated with family and the interdisciplinary team.

21-0015-MA (NJ)

TN: 21-0015-MA

Approval Date: **03/24/2022**

Supersedes: NEW

Effective Date: **01/01/2022**

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

**Limitations on Amount, Duration and Scope of Services Provided to the
Categorically Needy**

13(c) Preventive Services: NJ-Integrated Care for Kids (NJ InCK) Services (cont'd)

- Care coordination entails the coordination of services with family, community-based service providers, and the primary care team. This may include referrals to core child services, including follow through to ensure services are delivered.

Once a beneficiary/family initiates Tier 2 or Tier 3 care coordination services, they are eligible to continue to receive those services for twelve months without a new re-assessment with the NJ InCK Needs Assessment Tool—as long as beneficiary/family continues to choose to receive those services and any re-assessment during the calendar year has not changed the beneficiary's identified Tier.

Qualified Provider Specifications:

Provider qualifications for interpretation of the completed NJ InCK Needs Assessment Tool:

- Licensed primary care providers

Provider qualifications for NJ InCK for Preventive Care Coordination:

- Preventive care coordination services provided by:
 - Licensed Social Worker, who is also responsible for direct supervision of the team
 - Community Health Worker, who has completed the New Jersey-Department of Health Colette Lamothe-Galette Community Healthworker Institute training
 - Family Service Specialist, who has completed NJ's SPAN Parent Advocacy network's Family Service Specialist training
 - Child Life Specialist, who has active Child Life Certification from the Association of Child Life Professionals
- Each Social Worker leading a team will be directly supervised by a NJ InCK Care Integration Manager, who must either hold a RN/BSN, be a licensed

21-0015-MA (NJ)

TN: 21-0015-MA

Approval Date: **03/24/2022**

Supersedes: **NEW**

Effective Date: **01/01/2022**

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
Limitations on Amount, Duration and Scope of Services Provided to the
Categorically Needy

13(c) Preventive Services: NJ-Integrated Care for Kids (NJ InCK) Services (cont'd)

Social Worker, or have a Master's degree in health, education, or human services.

21-0015-MA (NJ)

TN: 21-0015-MA

Approval Date: **03/24/2022**

Supersedes: NEW

Effective Date: **01/01/2022**

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
Limitations on Amount, Duration and Scope of Services
Provided to Medically Needy Groups
PREGNANT WOMEN, DEPENDENT CHILDREN, AND THE AGED, BLIND, OR
DISABLED

13(c) Preventive Services: NJ-Integrated Care for Kids (NJ InCK) Services

NJ Integrated Care for Kids (NJ InCK) Services for Medically Needy Groups are identical to InCK Services for the Categorically Needy, as set forth in Addendum to Attachment 3.1-A (13)(c)(2b1) through (2b4).

20-0015-MA (NJ)

TN: 21-0015-MA

Approval Date: 03/24/2022

Supersedes: NEW

Effective Date: 01/01/2022

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES FOR NON
INSTITUTIONAL SERVICES

Reimbursement for Preventive Services: NJ-Integrated Care for Kids (NJ InCK) Services

Reimbursement for NJ InCK services is made to providers serving beneficiaries residing in Ocean and Monmouth counties.

Reimbursement of Comprehensive Needs Assessment service:

Primary care providers will receive one (1) \$29 reimbursement for interpretation of a completed NJ InCK Assessment Tool. Interpretation includes reviewing and discussing answers with beneficiary/family/NJ InCK Care Integration Manager and documentation for actions to address identified needs in the patient's medical record and in the dedicated NJ InCK care coordination platform. Service must be co-billed with another office visit, like an annual well-visit or E&M visit.

Primary care providers may receive additional reimbursements during the year if a reassessment is determined as medically necessary to monitor changes in the beneficiary's progress. Providers may receive one additional reimbursement, up to (2) services per calendar year, for the following beneficiaries without independent determination of medical necessity:

- Beneficiaries younger than 36 months old
- Beneficiaries assigned to Tier 3. For definition of Tiers, see Addendum to Attachment 3.1A page 13(c)(2b2).

21-0015-MA (NJ)

TN: 21-0015-MA

Approval Date: 03/24/2022

Supersedes: NEW

Effective Date: 01/01/2022

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES FOR NON
INSTITUTIONAL SERVICES

Reimbursement for Preventive Services: NJ-Integrated Care for Kids (NJ InCK)
Services (con't)

Reimbursement of Preventive Care Coordination Service:

Qualified providers participating in the CMMI NJ InCK Model and delivering preventive care coordination will receive a per-member per-month payment. In order to receive reimbursement, the NJ InCK-eligible member must have received services in that month and the provider must submit a claim every month. Tier 3 services will be paid at a higher monthly rate (\$110) than Tier 2 services (\$65) to reflect the increased intensity of care coordination services provided.

The effective date, the applicable fee schedules, and link to their electronic publication, can be found on page 36 of Attachment 4.19-B of the State Plan. The rates are the same for both governmental and private providers. All applicable procedure code listings and/or rates are published on the State's website at www.njmmis.com under the link for "Rates and Code Information" and Medicaid fee for services sections.

21-0015-MA (NJ)

TN: 21-0015-MA

Approval Date: 03/24/2022

Supersedes: NEW

Effective Date: 01/01/2022