

## State of New Jersey

DEPARTMENT OF HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES
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Reissued June 23, 2011

Age of required evaluations corrected; please disregard previous issuance

MEDICAID COMMUNICATION NO. 11-04 DATE: June 23, 2011

**TO:** County Welfare Agency Directors

**SUBJECT:** New Jersey Childless Adults Demonstration

The Division of Medical Assistance and Health Services (DMAHS) was recently approved for a section 1115(a) Medicaid Demonstration known as the New Jersey Childless Adults Demonstration that allows for Federal matching of comprehensive health care benefits for individuals enrolled in the Work First New Jersey General Assistance (WFNJ-GA) program.

This Demonstration extends eligibility to adults ages 19 through 64 years old who are not otherwise eligible under the Medicaid State plan, do not have other health insurance coverage, are residents of New Jersey, are citizens or eligible aliens, have limited assets, and either are 1) cooperating with applicable work requirements and have countable monthly incomes up to \$140 for a childless adult and \$193 for a childless adult couple; or 2) have medical deferral from applicable work requirements and have countable monthly household incomes up to \$210 for a childless adult and \$289 for a childless adult couple. This Federal matching is for all individuals qualified for WFNJ-GA under the provisions of N.J.A.C. 10:90 and the aforementioned requirements.

Eligibility will continue to be evaluated at either the County Welfare Agencies or designated municipal welfare offices. Individuals applying for WFNJ-GA who are **under 21 years old <u>must</u>** be evaluated for Medicaid eligibility prior to being eligible for the coverage offered by the Demonstration. The service package for these individuals will continue to be Plan "G", but will additionally cover physician services at the hospital, Adult Mental Health Rehab, and Program of Assertive Community Treatment (PACT). See attached.

Individuals applying for WFNJ-GA who are 65 years old or older **should** be evaluated for Federally matched **Medicaid** eligibility for the aged prior to becoming a WFNJ-GA medical assistant participant payable with State funds only.

By extending this eligibility, New Jersey will be able to study and demonstrate trends with the childless adult population to better prepare for 2014 when additional populations become eligible for Medicaid through the components of the 2010 Affordable Care Act (ACA).

If you have any questions regarding this Medicaid Communication, please refer them to the Division's Office of Eligibility Policy field service staff for your agency at 609-588-2556.

Sincerely,

Valerie Harr Director

Valerie Hars

VH:M Attachment

c: Jennifer Velez, Commissioner Department of Human Services

Kevin Martone, Deputy Commissioner Department of Human Services

Joseph Amoroso, Director Division of Disability Services

Jeanette Page-Hawkins, Director Division of Family Development

Dawn Apgar, Deputy Commissioner Division of Developmental Disabilities

Allison Blake, Commissioner Department of Children and Families

Mary E. O'Dowd, Commissioner Kathleen M. Mason, Assistant Commissioner Department of Health and Senior Services

## Benefits:

GA beneficiaries receive a comprehensive benefit package with the exception of an inpatient and outpatient hospital benefit. Hospitals receive compensation for inpatient and outpatient hospital through the Charity Care component of New Jersey's Disproportionate Share Program.

We are proposing that GA beneficiaries remain enrolled in the Plan G benefit package listed below:

Service Type	NJFC PLAN "G" Proposed Package (Medicaid-like package for our current General Assistance Beneficiaries)
Abortion	YES
Acupuncture	YES
Adult Mental Health Rehabilitation	YES
Aids Drugs Distribution Program Covered Anti-	YES
Retroviral Drugs	
Ambulatory Surgery	YES
Blood & Blood Plasma	YES
Blood Processing Admin. Cost	YES
Case Management - Chronic mental illness	YES
Certified Nurse Practitioner/Clinical Nurse Specialist	YES
Chiropractic Services	YES <sup>1</sup>
Clinic Services (Free standing) - Ambulatory	YES
Clinic Services (Free standing) - End Stage Renal Disease	YES
Clinic Services (Free standing) - Family Planning	YES
Clinic Services (Free standing) - Mental Health	YES
Dental Services	YES
Diabetic Supplies/Equipment	YES
Durable Medical Equipment	YES
Emergency Room	CHARITY CARE <sup>2</sup>
EPSDT	YES
Family Planning Services	YES
Federally Qualified Health Centers (FQHC) Encounters	YES
Hearing Aid Services	YES
Home Health Agency Services	YES
Home Health Care Rehabilitative Services	YES
Hospice Services - non-Nursing Facility based	YES
Impatient Hospital – not behavioral Health	CHARITY CARE <sup>2</sup>
Impatient Hospital - behavioral health	CHARITY CARE <sup>2</sup>
Laboratory Services	YES
Medical Supplies	YES
Methadone Maintenance	YES
Nurse Midwifery - Nonmaternity	YES
Optical Appliances	YES
Optometric Services	YES
Orthotic Devices	YES
Outpatient Hospital – not Behavioral Health	CHARITY CARE <sup>2</sup>
Outpatient Hospital - Behavioral Health	CHARITY CARE <sup>2</sup>
Outpatient Rehabilitative Services (i.e. Speech, Occupational, Physical Therapy)	YES

Program of Assertive Community Treatment (PACT)	YES
Partial Hospitalization	CHARITY CARE <sup>2</sup>
Personal Care Assistant	YES
Physician Services	YES
Podiatric Services	YES <sup>3</sup>
Prescription Drugs	YES
Prosthetic Devices	YES
Psychological Services	YES
Radiological Services	YES
Substance Abuse Services	ONLY WHEN PROVIDED THROUGH THE
	SUBSTANCE ABUSE INITIATIVE <sup>4</sup>
Targeted Case Management - Chronically Mentally III	YES
Temporomandibular Joint (TMJ) Treatment	YES
Thermograms and Thermography	YES
<u>TRANSPORTATION SERVICES:</u>	
1. Ambulance - Emergency	YES
2. Ambulance - Nonemergency	YES
3. Mobility Assistance Vehicle	YES
4. Lower Mode	YES <sup>5</sup>

<sup>&</sup>lt;sup>1</sup> Spinal manipulation only.

<sup>&</sup>lt;sup>2</sup> Charity Care – For more than 30 years, New Jersey State Law has required hospitals to admit and provide appropriate services regardless of the patient's ability to pay or source of payment. See N.J.S.A. 26:2H-18.64. New Jersey Hospital Care Payment Assistance Program provides care to patients who receive inpatient and outpatient services at acute care hospitals throughout New Jersey. For people with gross annual income below 200% FPL there is **no** cost for care.

<sup>&</sup>lt;sup>3</sup> No routine care.

<sup>&</sup>lt;sup>4</sup> The Substance Abuse Initiative (SAI) is in operation Statewide. It has two key components: (1) A managed care model of assessment and case management services, and (2) prior authorization fee-for-service treatment offered by providers in the SAI provider network.

<sup>&</sup>lt;sup>5</sup> Out-of-plan services. The CWA/Municipal Agency or transportation broker shall authorize payment for travel costs necessary for the receipt of health services. NOTE: This is an administrative payment to CWA for Plan A from DMAHS and for Plan G from DFD. This is not FFS or an HMO covered service.