LEGAL NOTICE

STATE OF NEW JERSEY

DEPARTMENT OF HUMAN SERVICES

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

TAKE NOTICE that the New Jersey Department of Human Services (DHS), Division of Medical Assistance and Health Services (DMAHS) intends to seek approval from the United States Department of Health and Human Services (HHS), Centers for Medicare and Medicaid Services (CMS), for amendments to the New Jersey Medicaid (Title XIX) State Plan, in order to reflect that New Jersey Medicaid fee-for-service rates were updated with an effective date of January 1, 2014. The fee schedule is published on the Department's fiscal website at <u>https://www.njmmis.com</u> under "rate and code information."

The DMAHS budget accounts for routine, periodic adjustment of fees and the addition and/or deletion of procedure codes authorized by CMS to conform to Federal requirements. Therefore, there is no significant increase or decrease in expenditures anticipated for SFY 2014 as a result of the adjustment of the fee schedule.

This Notice is intended to satisfy the requirements of Federal law and regulations, specifically 42 CFR 447.205 and 42 U.S.C. 1396a(a)(13). A copy of this Notice is available for public review at the Medical Assistance Customer Centers, County Welfare Agencies, and the Department's website at:

http://www.state.nj.us/humanservices/providers/grants/public/index.html.

Comments or inquiries must be submitted in writing within 30 days of the date of this notice to:

Division of Medical Assistance and Health Services Office of Legal & Regulatory Affairs Attention: Margaret Rose P.O. Box 712, Mail Code #26 Trenton, New Jersey 08625-0712 Fax: 609-588-7343 E-mail: Margaret.Rose@dhs.state.nj.us