Advance Notice of Proposed Rulemaking:

Notice of Proposed Readoption with Amendments: N.J.A.C. 10:75 Psychiatric Residential Treatment Facility (PRTF) Services for Individuals Under Age 21

To whom it may concern:

Pursuant to N.J.S.A. 52:14B-5.1, N.J.A.C. 10:75, the Psychiatric Residential Treatment Facility (PRTF) Services for Individuals Under Age 21 chapter, will expire on November 30, 2023. The chapter contains requirements for providers who render PRTF services to Department of Human Services' Medicaid/NJ FamilyCare beneficiaries and to clients of the Department of Children and Families. The Departments have reviewed the chapter and find that the rules should be readopted, with amendments, because they are necessary, reasonable, adequate, efficient, and responsive to the purposes for which they were originally promulgated.

This communication provides advance notice that the Department of Human Services (DHS) and the Department of Children and Families (DCF) (collectively, the Departments) propose to jointly readopt the chapter, with minor amendments.

The chapter contains five subchapters:

Subchapter 1, General Provisions, describes the purpose and scope of the rules, contains the definitions used in the chapter, the rules related to program participation, beneficiary eligibility, recordkeeping and reporting requirements related to serious occurrences.

Subchapter 2, Program Requirements, contains general program requirements, rules related to certification of need for services, authorization of services, individual treatment plans and treatment teams, utilization review of services, and temporary absences from the facility.

Subchapter 3, Emergency Safety Interventions, contains rules related to the use of emergency safety interventions such as the restraint or seclusion of the individual. This subchapter discusses the scope of the rules, applicable definitions, general principles regarding the use of the intervention, communications regarding the use of the interventions, required staff training and certification, timelines for the use of the interventions, types of restraint (mechanical, drug, or personal), use of seclusion, monitoring of the resident, notification of the parent or legal guardian of the resident, evaluation and any needed medical treatment after the use of the intervention and the debriefing of the staff members involved.

Subchapter 4, Reimbursement, contains the rules related to the basis of reimbursement and describes the billing procedures.

Subchapter 5, Healthcare Common Procedure Coding System (HCPCS), contains the billing codes and related information to be used when submitting claims for the provision of PRTF services.

The significant proposed amendments to this regulation will:

- 1. Require the use of a National Provider Identifier (NPI) and appropriate providerspecific taxonomy codes;
- 2. Clarify provider enrollment procedures;
- 3. Update the list of agencies recognized by DCF to provide accreditations for PRTFs:
- 4. Clarify procedures related to documenting and reporting serious occurrences in the PRTF setting; and
- 5. Update billing codes.

Additional technical amendments to update contact information of any program, agency, or other resource provided in the chapter; correct grammar, spelling, and punctuation; correct codification errors and/or cross-references; eliminate unnecessary, duplicative, and superseded text; and/or clarify existing program rules will also be included in the proposed rulemaking.

The text of N.J.A.C. 10:75 can be found at http://www.lexisnexis.com/hottopics/njcode.

This notice provides you with an opportunity to comment on the upcoming readoption with amendments by **August 18, 2023**.

NOTE: You will be notified of the publication date of the proposed rulemaking once the date is finalized by the Office of Administrative Law, which will include a 60-day public comment period during which formal comments will be accepted.

Please send any comments that you have regarding this advance notice of the upcoming proposed rulemaking by the date indicated above to:

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General feedback or comments on any Medicaid/NJ FamilyCare rule or program is always welcome and can be submitted in the manner described above for consideration and possible inclusion in future rulemakings.

Thank you for your interest in the Medicaid/NJ FamilyCare program.