

State of New Jersey



NJ DEPARTMENT OF HUMAN SERVICES

DIVISION OF DEVELOPMENTAL DISABILITIES

Division Update for Individuals, Families, and Providers

February 23, 2023

Agenda

- Upcoming Webinars
- COVID-19 Statistics
- Unwinding of the Public Health Emergency Rules for Medicaid
- Supplemental Nutrition Assistance Program (SNAP)
- Community Care Program and Supports Program Manual Updates
- Reminders for Service Providers on the HCBS Settings Final Rule
- Resources

Next DDD Update Webinar

- March Update Webinar:
 - Thursday, March 23, 2023 – 10:30 am.
 - [Register for the March Webinar.](#)
- Additional 2023 dates and registration information can be found on the Division's [Public Update Meetings](#) website.

New Jersey COVID-19 Current Statistics*



State of New Jersey	
Positive	2,540,342
Deaths	32,824

**This update is as of February 23, 2023.*

For regular updates: <https://covid19.nj.gov/>.

Consider downloading COVID Alert NJ on your Apple or Android smartphone: <https://covid19.nj.gov/pages/app>.

DDD Specific COVID-19 Statistics*



	Community		Developmental Centers	Total
	Licensed	Own Home		
Positive	5,494	3,110	941	9,545
Deaths	137	90	44	271

**DDD-specific statistics are updated monthly. Community data includes individuals actively under DDD services in settings such as group homes, supervised apartments, out of state, and own-home settings.*

Unwinding of the COVID-19 Public Health Emergency Rules for Medicaid

- Since March of 2020, Medicaid has followed special rules because of the Public Health Emergency (PHE). This has allowed most Medicaid members to keep their health coverage if they no longer qualified.
- On December 29, 2022, President Biden signed the 2023 Consolidated Appropriations Act into law.
- This means that while the PHE continues, all States (Including New Jersey) are now required to resume their Medicaid Eligibility Processes beginning April 1, 2023. This process is also referred to as *Unwinding*.



Unwinding of the COVID-19 Public Health Emergency Rules for Medicaid

- Preparing for the *Unwinding*:
 - Call 1-800-701-0710 (TTY: 711) to update contact information. This is especially important if you have moved in the last 3 years.
 - Watch for mail related to NJ FamilyCare/Medicaid **and** make sure to reply on time.
 - Continue to ensure income and resources are below the limits for the Medicaid Program in which you are enrolled.
 - Additional information can be found on the DMAHS website:
 - <https://nj.gov/humanservices/dmahs/staycoverednj/>
 - <https://nj.gov/humanservices/dmahs/staycoverednj/unwinding/>
 - https://nj.gov/humanservices/dmahs/staycoverednj/documents/StayCoveredNJ_Toolkit.pdf



Unwinding of the COVID-19 Public Health Emergency Rules for Medicaid

- What DDD Has Been Doing to Prepare for the *Unwinding*:
 - DDD Waiver Unit/Medicaid Eligibility Helpdesk staff have reviewed monthly reports of individuals enrolled on DDD waivers whose Medicaid is scheduled to terminate.
 - Waiver Unit/Medicaid Eligibility Helpdesk staff have been contacting Support Coordination Agencies (SCAs) and/or legal guardians to inform them of eligibility issues and providing instructions on how to resolve, such as:
 - RFI packets being sent out by Waiver Unit for individuals who are enrolled on a DDD waiver but facing an upcoming termination due to a loss of SSI.
 - Direction to follow up with appropriate entity such as Social Security Administration and/or County Board of Social Services directly to rectify an eligibility issue (suspensions, non-pay status, etc.)



Unwinding of the COVID-19 Public Health Emergency Rules for Medicaid

- What DDD Has Been Doing to Prepare for the *Unwinding*:
 - DDD Waiver codes have been reopened for individuals who have maintained Medicaid under the PHE to ensure no lapse in waiver coverage.
 - Throughout the PHE, DDD has encouraged individuals to comply with any/all requests to avoid loss of Medicaid during the unwinding. This would include requests such as renewals, RFI packets, etc. coming from DDD or Medicaid directly.
 - The Medicaid Eligibility Helpdesk has continued to respond to Medicaid eligibility questions from SCA staff, families, etc. Individual cases have been reviewed and instruction provided to maintain Medicaid eligibility.

Unwinding of the COVID-19 Public Health Emergency Rules for Medicaid

- DDD Will Continue to Assist during the *Unwinding*:
 - DDD is working closely with DMAHS and will be receiving updated lists monthly of everyone enrolled on a DDD Waiver who is scheduled to go through Medicaid eligibility redetermination.
 - Additional lists from DMAHS will include those scheduled for monthly renewals as well as those scheduled for termination within that month.
 - Individuals who are terminated due to failure to respond to a renewal/RFI will be able to submit documentation up to 90 days after a termination. In this scenario, the individual would be considered for a retroactive reinstatement if found to be eligible during this timeframe.



Unwinding of the COVID-19 Public Health Emergency Rules for Medicaid

- DDD Will Continue to Assist during the *Unwinding*:
 - DDD Waiver/Medicaid Eligibility Helpdesk staff will be reaching out to Support Coordinators and/or the individual's legal guardian with more information as we receive it.
 - Please feel free to reach out to the DDD Medicaid Eligibility Helpdesk with any questions:

DDD.MediEligHelpdesk@dhs.nj.gov



Supplemental Nutrition Assistance Program (SNAP)

- Temporary Emergency Supplemental Food Assistance Benefits
 - February 2023 is the last month households receiving SNAP Emergency Assistance (EA), which will decrease their monthly benefit.
 - SNAP recipients will receive a notification in the mail in mid-February letting them know about the change and reminding them of their regular SNAP benefit amount.
 - Starting in March 2023, SNAP recipients will only receive their regular monthly benefit amount.



Supplemental Nutrition Assistance Program (SNAP)



- Additionally, starting in March 2023, all households eligible for SNAP will receive a minimum \$95 monthly benefit. That means if your approved monthly benefit is less than \$50, you will receive a supplemental payment to equal \$95.
- SNAP recipients can check your benefits, change their PIN, report a lost, stolen or damaged card and see transaction history quickly and securely online at www.njfamiliesfirst.com or on the ConnectEBT app. The ConnectEBT app is free and available in English and Spanish. You can download it in the [Apple App Store](#) or the [Google Play Store](#).

Supplemental Nutrition Assistance Program (SNAP)



- SNAP recipients can also call customer service at 1-800-997-3333. Call centers may be experiencing higher call volumes, so please be patient when calling. It is requested that balance not be checked at the grocery store where cashiers may be very busy.
- If a SNAP recipient is worried about this reduction in benefits, they should find out what other food assistance programs they may be eligible for including WIC for women and children under 5, free or reduced school meals, or the commodity supplemental food program for adults 60 years of age and over.
- Visit www.nj211.org/njsnap to find more information and resources.

Community Care Program and Supports Program Manual

- The Division is pleased to provide updated [Community Care Program](#) and [Supports Program](#) Policy and Procedure Manuals.
- Page two of each manual describes what has been updated in the respective manual.
- An overview of the updates is as follows:



Community Care Program and Supports Program Manual

- Updated language to reflect that New Jersey has received *Final Approval* of it's Statewide Transition Plan from CMS.
- Updated rates and up-to budget amounts to reflect the January 1, 2023 DSP and Supervisor Rate Increase.
- Clarified that the Addressing Enhanced Needs Form (Used for persons with an acuity) is required to be updated annually, and more often during the plan year as needed and that the individual/guardian shall have the opportunity to be involved in the process.

Community Care Program and Supports Program Manual

- Clarified that annual physical and dental exams are required for licensed residential settings. Day programs may require them but that is not a DDD requirement.
- Clarified circumstances when a Support Coordinator is to discuss available resources around legal challenges an assigned individual may be experiencing.
- Updated how the Division is to be notified of a Support Coordinator being unable to meet deliverables due to an inability to meet with an assigned individual.

Community Care Program and Supports Program Manual

- Added two new sections to the manual related to Self-Directed Employee (SDE) Wage Ranges.
 - The Division offers the choice for individuals to utilize SDEs for several services. Some of these services (i.e. Community Based Supports, Individual Supports and Respite) are provided as a discreet service by Direct Support Professionals (DSPs) employed by service providers. These services are denoted in Appendix H of the respective manual with the caption *DSP Service Applies*.
 - The Division supports comparable wages between SDEs and DSPs performing these services and uses data from the *National Core Indicators Staff Stability Survey* and the *U.S. Bureau of Labor Statistics* to inform this process.

Community Care Program and Supports Program Manual



- Section 8.3.2.0.1 describes the parameters for SDE wages for Community Based Supports (Supports Program), Individual Supports (Community Care Program), and Respite (Both Programs).
 - The Reasonable and Customary (R & C) wage range (not requiring additional DDD approval) for an SDE is the prevailing minimum wage up to \$25 per hour.
 - If an individual has an enhanced medical or behavioral care need requiring SDEs to possess a higher level of education (i.e. Licensed Practical Nurse or education related to behavioral disorders) the Enhanced R & C wage range for an SDE is the prevailing minimum wage up to \$35 per hour.
 - If an individual has an enhanced medical or behavioral care need requiring SDEs to possess a higher level of education (i.e. Registered Nurse) the Enhanced R & C wage range for an SDE is the prevailing minimum wage up to \$48 per hour.

Community Care Program and Supports Program Manual



- The Enhanced R&C wage range may be granted in the following circumstances:
 - The individual has a documented enhanced medical care and/or enhanced behavioral care need; and
 - The individual requires care provided by an SDE whose education is closely related to the documented enhanced medical and/or enhanced behavioral care need of the individual.

Community Care Program and Supports Program Manual



- Enhanced Medical Care Need(s):
 - Care need that, as determined by the Division, cannot be supported without SDE possessing higher level of education.
 - Documentation must include any of the following:
 - Information within Addressing Enhanced Needs Form (AENF);
 - SDE shift notes/service documentation of medical care;
 - Support Coordination Monitoring Tools that contain discussion/documentation of care need;
 - As applicable, documentation (including but not limited to) of:
 - Medically based hospitalizations;
 - Significant increase/change in medical need;
 - Whether the individual has been assessed for medical needs that require skilled nursing care;
 - Other information specific to the individual circumstance.

Community Care Program and Supports Program Manual



- Enhanced Behavioral Care Need(s):
 - Care need that, as determined by the Division, cannot be supported without the SDE possessing a higher level of education.
 - Documentation must include any of the following that apply:
 - Information within the Addressing Enhanced Needs Form (AENF);
 - SDE shift notes/service documentation documenting the care provided to an individual;
 - Support Coordination Monitoring Tools that contain discussion/documentation of care need;
 - As applicable, documentation (Including but not limited to) of:
 - Emergency Room/Mental Health Screening;
 - Hospitalization(s) for reasons related to their behavioral health needs;
 - Aggression towards self/others, including staff, resulting in injury;
 - Elopement by the individual;
 - Legal involvement.
 - Other information specific to the individual circumstance.

Community Care Program and Supports Program Manual



- Establishing Enhanced R&C Wage
 - Eligibility for the Enhanced R&C wage must be determined by the Division before it can be offered to an SDE. This entails:
 - The Division verifying that there is documentation of an enhanced medical and/or behavioral need; and
 - The Division determining that the SDE meets the required Education/Credentialing Factors as described in this section.
- Individuals/guardians who believe their identified SDE meets the criteria for an enhanced wage should work with their Support Coordinator to submit the [Enhanced Reasonable and Customary Wage Request Form](#). They should indicate *Combined Approval* as the request type in Section 1 and complete the entire form.

Community Care Program and Supports Program Manual



- The Division recognizes that there may be instances where approval for the Enhanced R&C wage range may be needed in order to identify an SDE. In these circumstances, please indicate *Pre-Approval* as the request type in Section 1 and follow the corresponding instructions completing sections 1, 2 and 3.
- Once *Pre-Approval* is obtained, the individual/guardian may then solicit an SDE using the Enhanced R&C wage range and assume the Enhanced R&C wage will be granted contingent on the selected SDE meeting the SDE Education requirements as determined by the Division.

Community Care Program and Supports Program Manual



- Upon selection of an SDE, re-submission of the [Enhanced Reasonable and Customary Wage Request Form](#) for *Final Approval* will need to occur so that the Division can verify that SDE possesses the required education. Upon receipt of a sufficiently detailed submission, the Division will review and render an expedited determination in this regard.
- Salary Increases:
 - Salary increases above the maximum standard(s) provided will not be granted. For this reason, it is recommended that individuals/families not establish an hourly wage at the maximum amount so that they have the ability to provide pay increases over time within the established wage range.

Community Care Program and Supports Program Manual



- Section 8.3.2.0.2 describes the parameters for SDE wages for Interpreter Services, Supports Brokerage, and Transportation.
 - The services of Interpreter Services, Supports Brokerage, and Transportation are not provided as a discreet service by Direct Support Professionals (DSPs) employed by service providers. For these services, the following shall be used to establish the hourly wage for the corresponding service:

Community Care Program and Supports Program Manual



- **Interpreter Services**
 - This service has an established rate for American Sign Language (ASL) and Other – Non-ASL (Please see Interpreter Services Definition and Appendix H).
 - This service has an established rate and is not provided as a discreet service by a DSP. Therefore, the SDE wage may be lower than or equal to, but shall not exceed, the established rate.

Community Care Program and Supports Program Manual



- Supports Brokerage
 - This service has an established base rate (Please see Supports Brokerage Service Definition and Appendix H).
 - This service has an established rate and is not provided as a discreet service by a DSP. Therefore, the SDE wage may be lower than or equal to, but shall not exceed, the established rate.

Community Care Program and Supports Program Manual



- Transportation
 - This service, when used for an SDE, reimburses the SDE for their time providing transportation as well as mileage (Please see Transportation Service Definition and Appendix H).
 - It is not offered in the same way to DSPs as they are reimbursed for mileage only. Therefore, the SDE wage shall be negotiated on a case by case basis taking into consideration that the service being provided is Transportation and that the approved wage may be lower than the established SDE wage for a another service as a result.

Community Care Program and Supports Program Manual

- Added the option of a telephone number where non-compliance with the HCBS Settings Rule can be reported.
- Added section 15.5.3 - Human Rights Committee (HRC).
- Added detail that in circumstances where a Support Coordination Agency is closing that the Division will assist individuals/families with the selection of new SCA.

Community Care Program and Supports Program Manual

- Aligned Support Coordinator Responsibilities to match the changes referenced in Section 6.
- Added need for Human Rights Committee (HRC) review section to Behavioral Supports service definition.
- Updated Appendix E with detail on required Support Coordinator Trainings.
- Updated Appendix J with current MOU between CBVI, DDD and DVRS.

Community Care Program and Supports Program Manual

- Added additional detail to Supports Brokerage definition.
 - Entities rendering Division funded Supports Brokerage services are prohibited from:
 - Providing another waiver service to an individual they are providing Supports Brokerage. In circumstances where another service is to be provided by the same provider there must be at least a six-month gap between the provision of Supports Brokerage and the start of the alternate service.
 - Facilitate placements/moves from any provider-managed licensed setting without the full documented agreement of the individual/guardian and awareness of pertinent team members including the residential provider and Support Coordinator.
 - Find and connect individuals with community resources on behalf of a provider agency (such as day habilitation providers, individual/community-based supports provider agencies, etc.).

Community Care Program and Supports Program Manual

- The Supports Broker responsibilities include, but are not limited, to:
 - Assisting individuals who self-direct some, or all, of their services in a manner that supplements, but does not duplicate, the Support Coordination Service.
 - Operating and communicating under the instruction of the individual in collaboration with members of the their circle of support as directed by them.

Community Care Program and Supports Program Manual



- Assist individual in managing employer-related tasks:
 - Recruitment, interviewing, and hiring;
 - Determining pay rates for SDEs;
 - Training for SDEs;
 - Writing of Job Descriptions;
 - Developing materials to help SDEs understand their role with listening and supporting individual to live independently, be included in the community, and provide support in needed and preferred ways;
 - Assist individual with communicating support needs/preferences;
 - Scheduling SDEs;
 - Supervising SDEs;
 - Reviewing safety issues;
 - Understanding employer-related duties/responsibilities;
 - Identification/remediate of problems with SDEs that are directly related to participant needs as per job description.

Community Care Program and Supports Program Manual



- Securing resources and completing paperwork necessary to maintain independent living and self-direction:
 - Identify areas of support to promote success with self-direction;
 - Community Mapping to identify informal networks within the community;
 - Develop, expand, and facilitate a circle of support;
 - Locating and securing a place to live (apartment, condo, etc.).

Community Care Program and Supports Program Manual

- Added additional detail to the Day Habilitation definition related to transportation.
 - Specifically, that Transportation can only be billed for when it is beyond the program's established catchment area.



HCBS Settings Final Rule

- March 2023 remains the deadline for compliance with Home and Community Based Services (HCBS) Settings Final Rule.
- The Division of Medical Assistance and Health Services (DMAHS) submitted [Addendum #3](#) of the Statewide Transition Plan (STP) to CMS on November 30, 2022.
- CMS issued Final Approval of the STP on January 20, 2023.
- The Notice of Approval and all Addendums of the STP can be found on the [DMAHS STP Website](#).

HCBS Settings Final Rule

- DDD is in the process of reviewing the Corrective Action Plans submitted by providers. Upon completion of the DDD review, providers will receive an email communication that will indicate whether the Corrective Action Plan is:
 - Approved;
 - Approved Pending Heightened Scrutiny Review; or
 - Rejected/further action needed.
- Settings that are pending Heightened Scrutiny review will be contacted when more information is available from CMS.

HCBS Settings Final Rule

- **Support Coordinators:**
 - Assist individuals to choose their services and supports, and who provides them.
 - Communicate settings options to the individual, minimally at the annual Planning Team Meeting, including opportunities for a non-disability specific setting and the option for a private unit in a residential setting. The setting options must be identified and documented in the person-centered service plan and based on the individual's needs, preferences, and, for residential settings, resources available for room and board.
 - As applicable, ensure that for an individual residing in a group home, supervised apartment or attending a day habilitation program, prevocational program, or group supported employment program have any restriction supported by a specific assessed need and justified in the person-centered service plan (i.e. ISP).

Reminders for Service Providers on the HCBS Settings Final Rule

- Documentation for HCBS Modifications must include:
 - Identification of the specific and individualized assessed need; That positive interventions/less intrusive methods have been tried without success; That the description of the modification is clear and directly proportionate to the assessed need; That it is required to keep the individual safe; That there is regular collection/review of data to measure the effectiveness of the modification; That the need for continued use of the modification is regularly reviewed; That the individual/guardian is included in the process.
- Please see section 11.7 *Home and Community Based Services (HCBS) Settings Compliance* in the CCP or SP Manual for more detail.

Reminders for Service Providers on the HCBS Settings Final Rule

- Helpful information for Service Providers:
 - [A Provider's Guide to the Home and Community Based Services Final Settings Rule](#)
 - This guide assists service providers with information, best practices, and examples to assist in HCBS compliance.
- Helpful information for individuals and families:
 - [Community Life Video Series](#)
 - The Boggs Center's Community Life Video Series highlights why community life and aspects of the Rule that support it are important to people with disabilities.
 - [DDD's NJ Statewide Transition Plan "At a Glance"](#)
- Additional information can be found at:
 - [Division of Medical Assistance and Health Services Statewide Transition Plan Website](#)
 - [Division's HCBS Statewide Transition Plan Website.](#)

Important Resources

- [Disability Rights New Jersey](#)
 - 1-800-922-7233 (toll-free in New Jersey only)
- [Ombudsman for Individuals with Developmental Disabilities and their Families](#)
 - 1-609-984-7764
- [New Jersey Council on Developmental Disabilities](#)
 - 1-800-792-8858
- [The Boggs Center](#)
 - 1-732-235-9300



Important Resources

- For assistance during this time:
 - For issues, call the Division Community Services office for your county or 1 (800) 832-9173.
 - For routine questions: DDD.FeeForService@dhs.nj.gov
 - For COVID-related questions: DDD.COVID-19@dhs.nj.gov
 - To report suspected abuse, neglect or exploitation: call 1 (800) 832-9173, then press 1.