

NEW JERSEY DEPARTMENT OF HUMAN SERVICES

Meeting of the Medical Assistance Advisory Council

July 12, 2022





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Agenda

- Welcome and Call to Order Dr. Deborah Spitalnik
- Approval of Minutes MAAC Members
- Commissioner's Comments Sarah Adelman
 - Introduction of Deputy Commissioner Asare
 - SFY 23 Budget Updates
- NJ FamilyCare Membership Greg Woods
- Policy Implementation Greg Woods/Lynda Grajeda
 - Expanding eligibility for WorkAbility
 - 1115 Comprehensive Waiver Demonstration
 - Nurture NJ: 12 Months Postpartum Coverage
 - Ensuring Access to Pediatric Primary and Specialty Care
- Transition from FFS to Managed Care for NF Residents – Lynda Grajeda

- Cover All Kids Updates Carol Grant
- Transportation Broker Accountability Jennifer Langer Jacobs
- End of the Federal Public Health Emergency (PHE)
 - -Greg Woods and Jennifer Langer Jacobs
 - Redetermination Planning
 - Flexibilities from CMS
 - Member Address Updates from MCOs
 - Unwinding Communications Planning
- Planning for the Next Meeting Dr. Deborah
 Spitalnik





Commissioner's Comments



New budget delivers affordability

 The \$50.6 billion budget signed by Governor Murphy last month builds on the significant progress made over the last four years – providing more tax relief to families, promoting economic growth through historic investments, and restoring New Jersey's fiscal integrity.

 The new budget reflects our values and invests in our future, featuring billions of dollars in tax relief to make our state more affordable for middle class families and older adults, and key investments to continue spurring economic growth and support the state's ongoing recovery from the pandemic.



FY 2023 Statewide Budget at a Glance

\$50.6 Billion budget prioritizing affordability, while delivering record tax relief and making transformative one-time investments.



- A record \$6.8 billion surplus, which is 13.4 percent of budgeted appropriations, roughly three times the surplus proposed in last year's budget.
- An additional \$5.15 billion deposit into the Debt Defeasance and Prevention Fund to support capital construction on a pay-as-yougo basis and avoid future debt issuances.
- Allocates \$2.13 billion in federal American Rescue Plan (ARP) funds for critical investments across the state, leaving over \$1 billion remaining to be allocated in FY2024.
- ANCHOR Property Tax Relief Program providing \$2 billion in relief to homeowners and renters.



Investing in Human Services

- We're excited that the budget prioritizes initiatives at Human Services that support New Jerseyans in every stage of life.
- It includes investments, both new and ongoing, in services, supports, and opportunities for individuals with disabilities, older adults, families in need of affordable child and health care, individuals with substance use and mental health conditions, youth mental health, and New Americans.





Critical Wage Enhancements

The new state budget includes critical wage enhancements for the vital workforce that helps Human Services serve individuals in need.



Direct Support Professionals



Mental Health & Substance Use Disorder Staff



Personal Care Assistants



Nursing Home Workers



Child Care Workers



Homeless Shelter Workers



Private Duty Nursing



JACC Home Health Aides



Personal Assistance Service Program Workers

Youth Mental Health

The budget signed by the Governor provides more than \$55 million in **American Rescue Plan funds to** address youth mental health needs throughout New Jersey. This funding will be spread across DHS, DCF, DOE, and the Office of the Secretary of Higher Ed to strengthen the youth mental support system for children, adolescents, and young adults.

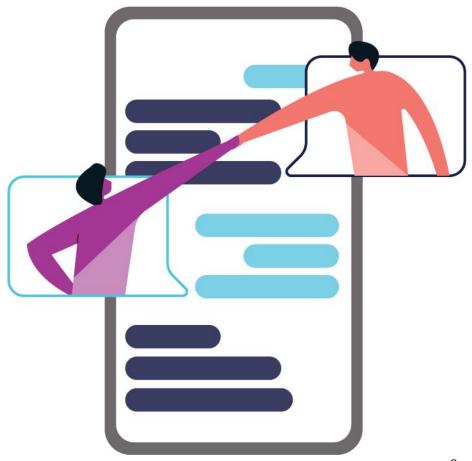




988 & Mental Health Care

- The Federal Communications Commission recently approved a new 3-digit dialing code – 988 – for mental health crisis and suicide prevention.
- Starting on July 16, 2022, the 988 line will be available for calls, texts, and chat. It will be 24/7, 7 days a week.
- To support 988, the budget includes nearly \$29 million for call line infrastructure and services some callers may be connected to when they call.
- The budget also increases the rates for providers that provide diversion beds for individuals with mental health conditions at risk of hospitalization to up to \$745 per day. This \$1.17 million increase is vital to maintaining the availability of these beds.







Investing in Maternal Health

- The Department is committed to the First Lady's goal of making New Jersey the safest state in the nation to give birth, and the budget signed by the Governor gets us one step closer to that mission.
- The budget increases state Medicaid spending by \$15 million to raise the Medicaid rates for maternity care providers for the first time in decades.
- This funding will increase physician reimbursement rates for labor and delivery, and pre- and postpartum services, to 100 percent of the Medicare rates for these services, which in turn will increase reimbursements for midwives and doulas.
- The investment will also bring in \$15 million in new federal funding.



Cover All Kids

 The budget provides nearly \$11 million more to continue our Cover All Kids work to ensure every child in New Jersey has access to healthcare.

 This investment will fund coverage expansion for children who are currently ineligible due to immigration status, but would otherwise be incomeeligible for the program.

 Human Services has already eliminated waiting periods and premiums in the Children's Health Insurance Program, increased community and broader marketing efforts for NJ FamilyCare, and created an outreach and enrollment working group.





Child Care

As part of the Administration's continued focus on child care and in addition to wage enhancements for child care workers, the budget provides \$48 million in federal American Rescue Plan funding to continue enrollment-based payments for child care providers. This will help ensure stable funding for childcare providers as they continue to deal with the pandemic's impact.



Investing in Children's Health

- The budget provides \$1.7 million for rate parity between pediatric and adult outpatient services, including psychiatric evaluation, outpatient therapy, and partial care. With federal funding, this investment rises to \$4.6 million.
- It also appropriates \$2.5 million to continue and expand the Integrated Care for Kids program, which aims to improve the quality of care for children under 21 through prevention; early identification; and treatment of behavioral, social, and physical health needs. With federal funding included, this will be a \$5 million increase.



Ending the AIDS Epidemic

 The state last year released a strategic plan to end the HIV epidemic by 2025.

 As part of this effort, the budget includes \$3 million to increase access to treatment so people living with HIV/AIDS can achieve and maintain viral suppression.

 Under this plan, FamilyCare will eliminate the use of step therapy and prior authorization for HIV treatment medication.





Serving Individuals with Disabilities



The budget includes resources to create a new disability information hub, informed by individuals with disabilities, to help individuals with disabilities better plan for their future by providing up-to-date, consumer-friendly, and accessible information about disability services in a central location.



It also includes more than \$9 million to continue last year's day program rate increases for a full fiscal year, \$8.2 million for a rate increase to support individuals with complex needs receiving care out of state, and \$7.5 million to increase residential rates for providers of individuals with intellectual and developmental disabilities.



These investments will also bring in \$16.5 million in new federal funding.



Assisting Older Adults

The budget includes a \$6.94 million increase to account for a full year of the January 1 PAAD income limit increase. The budget also uses \$4 million in federal money for Area Agencies on Aging to support older adults applying for services such as SNAP. And, it provides \$1.4 million to bolster rates for Assisted Living and Personal Care Homes, along with a \$25 million rate increase for nursing homes.









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Combating the Opioid Epidemic

The overall budget maintains the government-wide funding for the Governor's array of **substance use disorder programs**, which will be supplemented by more than \$640 million over the next 18 years through settlement funds from opioid manufacturers and wholesalers.





Welcoming New Americans

- This budget includes resources to boost capacity in the Office of New Americans, and – importantly – boosts the Legal Services for Unaccompanied Minors and Youth program by \$1.5 million.
- The budget also highlights additional investments made to the Excluded New Jerseyans Fund to ensure necessary funding is available for eligible applications received. The program's application period closed at the end of February, and it received over 35,000 applications.





Emergency Housing Assistance

 Along with the wage enhancements for homeless shelters and ongoing investments to support last year's shelter rate increase, the budget includes about \$2.9 million to increase the daily hotel/motel rate to ensure we continue to assist those receiving emergency assistance who need temporary emergency housing.

This is the first increase to these rates since 2003.



Funeral and Burial Assistance

 New Jersey provides funeral and burial reimbursements to help cover the costs of these services for deceased individuals who were receiving Temporary Assistance for Needy Families, General Assistance or Supplemental Security Income clients.

 Governor Murphy signed legislation raising these reimbursement rates for funeral homes by \$1,000 effective January 18. The budget includes \$8 million to continue to support these increases.



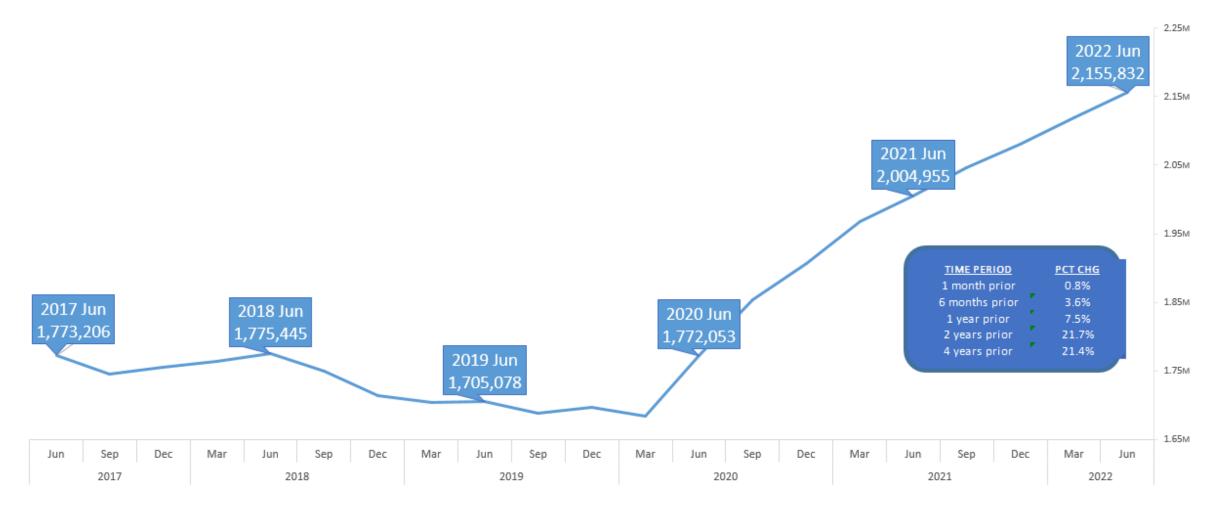




NJ FamilyCare Membership



NJ FamilyCare Enrollment







Policy Implementation



Expanding Eligibility for WorkAbility

- NJ WorkAbility provides Medicaid eligibility to working individuals with disabilities who otherwise would not qualify.
- Legislation enacted earlier this year (Senate Bill 3455) expanded access to NJ
 WorkAbility to individuals previously ineligible due to income, resources, or age.
- Key tasks already in motion:
 - Developing premium schedule that holds existing members harmless, complies with federal requirements, and avoids "cliffs"
 - Building systems to calculate and collect premiums
 - Reworking eligibility system logic
 - Seeking federal authority for proposed program design



1115 Comprehensive Waiver Demonstration

- Current five-year demonstration period was scheduled to expire June 30th, 2022.
- New Jersey submitted <u>renewal application</u> in February 2022.
 - Proposed to extend demonstration additional five years, while adding key new elements to address social determinants of health, promote integrated care, expand access to care, and improve program operations.
- On June 7th, CMS <u>temporarily extended</u> existing demonstration period six months through the end of CY 2022.
 - Intended to allow more time for New Jersey and CMS to negotiate full renewal.
- Substantive discussions with CMS on renewal are active and ongoing.
- New projected renewal timeline:
 - CMS approval in late CY 2022.
 - Renewal period begins in January 2023.



Nurture NJ: 12 Months Postpartum Coverage

- In October 2021, CMS approved an amendment to New Jersey's 1115 demonstration to extend automatic NJ FamilyCare coverage from 60 days to a full year postpartum following the end of the pregnancy.
- DMAHS is developing and implementing systems changes to ensure extended postpartum coverage is fully in place when the public health emergency ends.
- Systems build has two phases:
 - Phase 1 (Complete): Extending coverage end date of members who qualify for NJ FamilyCare based on pregnancy status from 60 days postpartum to 12 months postpartum
 - Phase 2 (Implementation Ongoing): Using claims data (e.g. labor and delivery claim) to identify other members who were pregnant and extend coverage to 12 months postpartum.
- Continuous eligibility remains in place for our members until a full redetermination has been completed.

Phase 1 –

Anna applied and became eligible for NJ FamilyCare due to pregnancy, or she was already covered and notified NJ FamilyCare that she was pregnant. The system will now extend her to 12 months, rather than 60 days, after her baby is born.

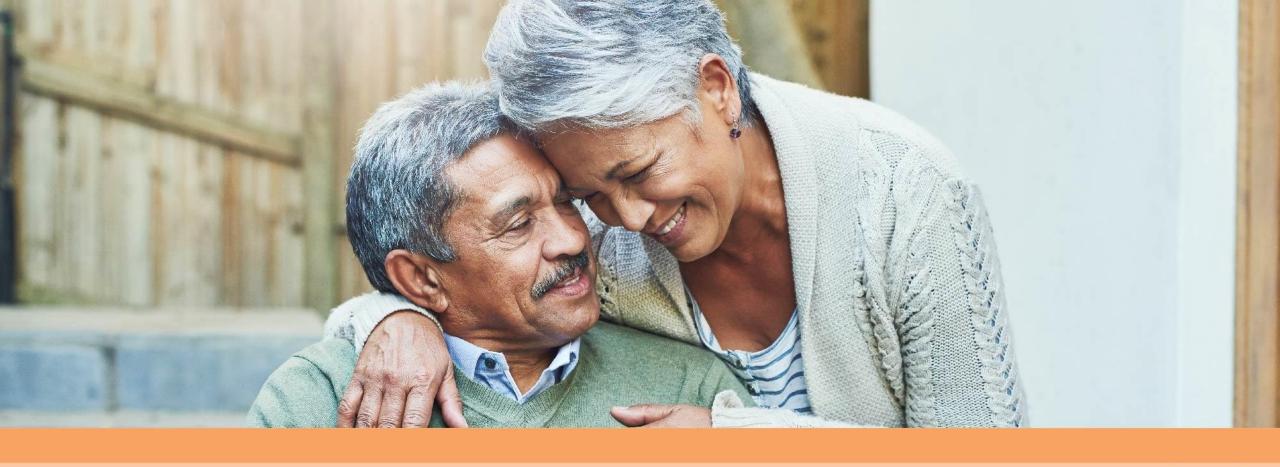
Phase 2 –

Alex was already covered by NJ FamilyCare when they became pregnant. Alex did <u>not</u> notify NJ FamilyCare of their pregnancy, but the system will use claims data to identify that the pregnancy occurred and extend their eligibility to 12 months postpartum.



Ensuring Access to Pediatric Primary and Specialty Care

- Senate Bill 3000 codifies and enhances existing network adequacy standards and the monitoring of access to pediatric care in NJ MCO networks within NJ FamilyCare.
- New and modified NJ FamilyCare/Medicaid contract language went into effect on July 1, 2022 including:
 - Updated pediatric specialty standards
 - Grievance reporting requirements and timeframes
 - Sanctions for deficiencies
 - "Good faith" waiver request guidelines
 - Non-participating provider single case agreement guidance
- Additional actions taken, including:
 - Updated network certification requirements
 - Updated county geographical designations
 - Ongoing monitoring of adherence to new standards
 - Enhanced requirements and process for MCO quarterly network analysis
- July 1 MCO Contract will be posted <u>online</u> as soon as final approval has been received from CMS.





Transition from Fee-for-Service to Managed Care for Nursing Facility Residents



Transition from Fee-for-Service (FFS) to Managed Care for Nursing Facility Residents

- Effective July 1 2022, FFS beneficiaries residing in a nursing home (approximately 2,200 people) have been enrolled in MLTSS and will receive Medicaid benefits through the MCO of their choice.
- Beneficiaries were asked to choose an MCO; if they did not make a choice, an MCO was assigned. MLTSS members can change their MCO at any time.
- This change will allow for better coordination of healthcare services and supports, including behavioral healthcare.
- Care Managers will be reaching out to members and their caregivers to schedule an initial visit for person-centered care planning.

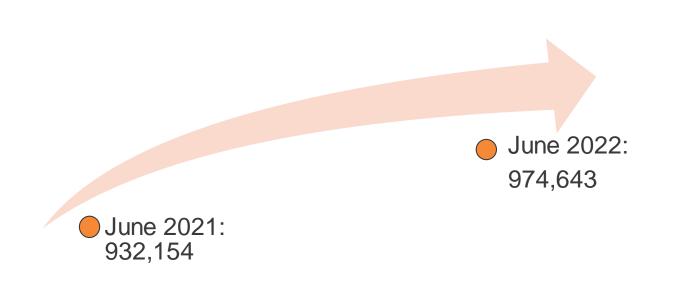




Cover All Kids Updates



Enrollment growth (members under age 21) since enactment of Cover All Kids legislation



42,489

members under 21 years
old have enrolled in
NJ FamilyCare since
enactment of Cover All Kids
legislation in
July 2021

4,830 increase since last month

Based on June 2022 Public Stats



Cover All Kids – Recent Updates

- Systems requirements for Phase 2 have been fully vetted and approved, and the technical build is underway.
- The fifth meeting of the CAK Working Group, held on June 23, 2022, included discussion of "best practice" outreach and enrollment efforts from other states, led by the Center for Health Care Strategies. The featured presentation was a review of Oregon's Communication Toolkit as a possible model for NJ.
- The Working Group will be on hiatus over the summer, while two smaller task groups will continue to meet on development of a communications toolkit and on stepped-up efforts for outreach in the fall.



Outreach Events – Summer Months

July

- Cumberland County Fair, July 5th 9th
- Ocean County Fair, July 13th 17th
- YMCA Healthy Kids Day, July 16th
- Burlington County Farm Fair, July 19th 23rd
- Morris County 4-H Fair, July 21st 24th
- Cape May County 4-H Fair, July 21st 23rd
- Monmouth County Fair, July 27th 31st
- Gloucester County 4-H Fair, July 28th 31st

August

- Warren County Farmers Fair, July 30th August 6th
- Middlesex County Fair, August 1st 7th
- Sussex County NJ State Fair, August 5th –
 13th
- Salem County Fair, August 9th 12th
- Atlantic County 4-H Fair, August 12th 13th
- Hunterdon County 4-H & Agricultural Fair,
 August 24th 28th





Transportation Broker Accountability



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Improving the Transportation Benefit

- At NJ FamilyCare, we see transportation as an important social driver of health, with impact on health equity and outcomes. It is important for members to be able to get to their preventive and specialty care visits on time and then get home again reliably.
- Due to many aspects of transportation industry economics, Non-Emergency Medical Transportation is one of the most challenging benefits administered by State Medicaid Programs.
- Like many states, New Jersey has a contractor, Modivcare, that is responsible for building a network of transportation providers, arranging rides for members to and from their appointments, and addressing concerns in real-time.
- Members' concerns vary over time and by region, especially during the pandemic, but complaints have consistently included:
 - Late pick-ups,
 - Missed or cancelled rides, and
 - Lack of timeliness of transport to dialysis centers for high-risk beneficiaries.



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Transportation Vendor Contract Amendments

- In order to serve people the best way possible in this challenging space, DMAHS discussed higher expectations with the vendor, Modivcare.
- We have agreed to new contract provisions that raise standards and strengthen penalties in order to improve on-time performance and root cause accountability.
- With a focus on making the system work better for the people we serve, we are also continuing to explore best practices and innovations from other states.

For our NJ FamilyCare Members:



To schedule a ride to a health care appointment

call 1-866-527-9933



If your ride is late or you want to request a "will call" ride

call 1-866-527-9934



If you need to file a complaint

call 1-866-333-1735

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End of the Federal Public Health Emergency (PHE)



"Unwinding" the federal Public Health Emergency

Since March 2020, NJ FamilyCare members have remained enrolled due to federal "maintenance of effort" requirements during the Public Health Emergency (PHE).

The PHE will be extended again after July 15, 2022, at which time standard redetermination activity is expected to resume.

CMS has given states 12 months after the PHE ends to reprocess eligibility for all Medicaid beneficiaries – this includes 2 million NJ FamilyCare members.

This "unwinding" represents the single largest redetermination exercise in the history of New Jersey's Medicaid program. Our preparedness for this exercise is a top priority at DMAHS.

What we will talk about today

- ✓ Hypothetical Timeline of Unwinding
- ✓ Redetermination Order Planning
- ✓ Federal Flexibilities
- Member Address Updates from MCOs
- Communications from DMAHS to members

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Hypothetical Timeline for PHE Unwinding

4/18/22

Ambassador call center went live

5/15/22

CMS announced that the federal PHE will not be extended

10/15/22

Federal PHE ends

States have 12 months to redetermine eligibility for all members

1/1/23

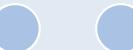
First disenrollments occur (cases from November mailing if no appeal)

11/1/23

All pending renewals from PHE period have been sent by DMAHS

Post 1/1/24

Likely ongoing "good faith" cases and fair hearings























5/1/22

MCO member outreach kicked off: priority on members who have not responded to recent mailings

Summer '22

Outreach continues Communications campaign underway

Counties prepare to manage volume

11/1/22

First renewal mailings that may result in disenrollment are sent

2022-2023

Continuing high volume of outreach. redetermination. and fair hearing activity

12/31/23

All determinations from the PHE are complete, per federal requirements

All dates are hypothetical pending federal guidance



Redetermination Order Planning

- DMAHS is actively planning spacing of redeterminations during the twelvemonth period after the public health emergency ends.
- Key principles:
 - Members who have successfully remained on schedule (e.g. completed redeterminations on a timely basis during the PHE) will keep their existing redetermination timeline.
 - Members who are overdue will be spaced as evenly as possible across the twelvemonth period after the end of the public health emergency.
- More detailed guidance will be issued prior to the end of the public health emergency.



Federal Flexibilities

- In Spring 2020, New Jersey requested and received authority from CMS to waive or modify certain program requirements during the COVID-19 public health emergency.
- Examples:
 - Telehealth
 - Prior Authorization
 - Alternative Settings of Care
- CMS has recently issued or updated <u>extensive</u> <u>guidance</u> on unwinding of flexibilities at the end of the PHE.
- DMAHS is intensively preparing for sunsetting of emergency flexibilities, working with state SMEs, and conducting outreach to affected stakeholders.

Flexibility Type	Unwinding Status
Section 1135 (Maintain access to care during emergency)	 Flexibilities end at the end of the PHE: no possibility of extensions. Most flexibilities are not being actively used / are no longer necessary.
Emergency Medicaid State Plan Amendment	 DMAHS is identifying flexibilities (e.g. telehealth) that should be preserved after the public health emergency. DMAHS will request short-term (one year) extensions while implementing permanent state plan changes.
1115 Appendix K (HCBS)	DMAHS has pending request that CMS extend certain still-needed flexibilities through 6 months after the end of the PHE.

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Member Address Updates from MCOs

- For the first time, as part of preparation for unwinding, CMS has allowed DMAHS to accept member address changes from MCOs.
 - Special unwinding waiver authority was approved in April.
 - Previously, DMAHS was required by federal rules to independently confirm any address change reported to the MCO.
- Between January and May 2022, we have address updates for about
 58,000 members based on changes members have reported to their MCO.
- Note: Members who qualify for Medicare must also update their contact info with the Social Security Administration



Member Address Updates from MCOs – Member Impact

Jo-Jo

- Jo-Jo became an NJ FamilyCare member in 2019. She moved in with a friend during the pandemic.
- She recently received a <u>text message</u> from her MCO asking her to update her address. She <u>called the MCO</u> to provide her new address.
- The MCO made the change in their system and notified NJ FamilyCare to update Jo-Jo's address.

Byron

- Byron and his two sons are all eligible for NJ FamilyCare.
- Byron called his MCO to request a new member ID card. While on the phone, the MCO call center asked him to verify his address. He said the family had moved, and he provided a new address.
- The MCO updated Byron's address in their system and notified NJ FamilyCare to update the address of all members of the household.



Members who
qualify for
Medicare must
also update their
contact info with
the Social Security
Administration

With permission from CMS, NJ FamilyCare is now able to accept the updated address that each member gave to their MCO.



Getting the Message Out About Unwinding

- DMAHS has prepared materials to inform members and providers about the upcoming unwinding.
- Until the Public Health Emergency ends, we have two key messages:
 - Call NJ FamilyCare at 1-800-701-0710 (TTY: 711) to update your contact information.
 - Watch for mail from NJ FamilyCare, and make sure to reply on time to avoid a gap in your NJ FamilyCare coverage.
- Paper and digital information will be shared with members directly and through our partners, including providers and communitybased organizations.
- The online landing page for unwinding information is in the final stages of preparation. It will go live in the coming days.





Help us spread the word! Community Promotion





















Help us spread the word! #StayCoveredNJ













Planning for the Next Meeting – October 27, 2022