NJ HRSN Payment Methodologies and Fee Schedule: Medically Indicated Meals Pilot

Background: In accordance with the state's Section 1115 Demonstration Special Terms and Conditions (STCs), all rate and/or payment methodologies for authorized HRSN services outlined in the STCs must be submitted to CMS for review and approval prior to implementation, including but not limited to FFS payment as well as non-risk payments and capitation rates in managed care delivery systems, as required by Section 10.14. NJ must submit all documentation requested by CMS, including but not limited to the payment rate methodology, as well as other documentation and supporting information (e.g., state responses to Medicaid non-federal share financing questions). The state must also comply with the Public Notice Procedures set forth in 42 CFR 447.205 for changes in statewide methods and standards for setting FFS payment rates.

1 Health-Related Social Need (HRSN) Service Fee Schedule: Medically Indicated Meals Pilot

Service	Procedure code	Expected Unit Cost	Service unit	Service description	Methodology DMAHS used to develop rate/cap/range
Medically Indicated Meal	S5170 SC	\$15	Per Meal	Prepared, medically- indicated meal	State derived cost-based payment amount by comparison to existing (non-medically indicated) meal delivery reimbursement in NJ and other Medicaid programs offering medically-indicated meal benefits. NJ compared rates to peer

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					state
					benchmarks
					including
					Oregon Health
					Plan; North
					Carolina
					Health
					Opportunities
					Pilot; New
					York's
					Medicaid
					Redesign
					Team;
					Michigan's
Additional	S5170 UK	\$8	Per Meal	Prepared	Additional
nutrition				meal	nutrition
support					support
(provided in					(provided in
the form of					the form of
meals, need					meals, need not
not be a					be a medically
medically					indicated meal)
indicated					ŕ
meal)					