MEDICAID COMMUNICATION NO. 22-03    DATE: March 25, 2022

TO:     NJ FamilyCare Eligibility Determining Agencies and Presumptive Eligibility Providers

SUBJECT:  Processing of New Jersey Supplemental Prenatal and Contraceptive Program (NJSPCP) (Formerly known as the New Jersey Supplemental Prenatal Care Program)

The purpose of the New Jersey Supplemental Prenatal and Contraceptive Program (NJSPCP) is to provide fee-for-service (FFS) prenatal medical care and family planning services for all individuals who would have otherwise qualified for NJ FamilyCare, if not for their immigration status. NJSPCP provides funding for independent clinics, FQHCs, outpatient hospitals, and family planning clinics (newly added) to meet this need.

Effective July 1, 2021, the NJ State budget provided funding to continue and expand NJSPCP for SFY 2022. The program, which previously provided only prenatal care, is now called NJ Supplemental Prenatal and Contraceptive Program and has expanded to include the family planning benefits covered under the Plan First Program. NJSPCP is not a federal entitlement; it is funded and provided by the State of New Jersey.

Eligibility Requirements:

- Individuals who can become pregnant with household income up to 205% FPL.
- Meets all other qualifications for NJ FamilyCare, except for immigration status.

Eligibility Processing:

- Individuals will apply for NJSPCP through a certified Presumptive Eligibility Provider.
- Coverage for this program will terminate each year on June 30, the end of the NJ Fiscal Year, because the funding must be renewed annually in the NJ state budget.
- If funding is approved, all eligible individuals must reapply after July 1 of each year to renew their benefits.
- These individuals will be identified in the Medicaid Eligibility System (MES) with the Program Status Code 391.
- NJSPCP does not provide labor and delivery or postpartum care. Pregnant individuals can apply for the Medical Emergency Payment Program (MEPP) on the NJSPCP application, or the hospital may submit an application within 3 months after the birth. In either case, the County Welfare Agency (CWA) will determine eligibility for MEPP for labor and delivery services.

If you have any questions regarding this Medicaid Communication, please refer them to the Division’s Office of Eligibility field service staff member for your agency at 609-588-2556.
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