

**STATE OF NEW JERSEY
DEPARTMENT OF HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES**

**TEMPORARY EXTENSION OF CERTAIN DISASTER RELIEF SPA PROVISIONS
BEYOND THE END OF THE PUBLIC HEALTH EMERGENCY (PHE)**

TAKE NOTICE the New Jersey Department of Human Services (DHS), Division of Medical Assistance and Health Services (DMAHS), intends to seek approval from the United States Department of Health and Human Services (HHS), Centers for Medicare and Medicaid Services (CMS), for an amendment to the New Jersey Medicaid (Title XIX) State Plan to temporarily extend certain provisions in section 7.4 of the State Plan enacted as a result of the COVID-19 Public Health Emergency (PHE). Effective the day after the end of the PHE, for one year from that date, the agency is requesting approval from CMS to temporarily extend certain elections of the Disaster Relief SPA NJ-20-0003 which was approved on 7/23/20. This extension of benefits applies to individuals receiving services under the Alternative Benefit Plan (ABP) as well.

Specifically, New Jersey is requesting an extension of the temporary suspension of minimum staffing ratios impacted by COVID-19 for Children's System of Care (CSOC) providers (namely the ratio of one supervisor for each 10 care coordinators). New Jersey is also requesting to temporarily extend the suspension of the State Plan requirement that the behavioral health home (BHH) team accompany youth to admission appointments for inpatient or other out of home setting.

Additionally, NJ seeks to extend the temporary telehealth provision which provides as follows: to the extent permitted by state law and regulations (including all state Executive Orders and waivers), Medicaid will reimburse for any service provided via telehealth and associated telecommunication at the same rate that would be paid had the service been provided in-person. No specific prior authorization is required based on telehealth modality. Documentation requirements and licensure standards remain unchanged. Services provided via telehealth and telecommunication shall be required to meet all requirements in state or federal statutes or regulations for the provision of telehealth and telecommunication as well as the service being provided. In the absence of a statute or regulation pertaining to specific provisions for telehealth or telecommunication, services are provided following all applicable laws and regulations for the base service being provided.

Finally, although Medicaid does not pay for non-FDA approved, investigational, cosmetic, experimental or clinical trial products, New Jersey is requesting a temporary extension of the current exception that may be made at the State's discretion during the COVID-19 emergency for investigational products for the specific purpose of COVID-19 treatment.

There is no anticipated fiscal impact for temporarily extending the aforementioned provisions.

The ABP was established in accordance with the Patient Protection and Affordable Care Act (ACA) when New Jersey expanded Medicaid effective January 1, 2014 to parents and caretaker relatives and childless adults with income up to and including 133% of the federal poverty level. The ACA requires the establishment of an Alternative Benefit package for the Medicaid Expansion populations. The ABP must cover 10 Essential Health Benefits as described in section 1302(b) of the ACA and the State assures that there will be full access to EPSDT services for people under 21 years of age. A list of services can be found on the DHS website at the site listed below. This Notice is intended to satisfy the requirements of Federal law and regulations, specifically 42 C.F.R. 440.386, 42 CFR 447.205, and 42 U.S.C. 1396a(a)(13). A copy of this Notice is available for public review at the Medical Assistance Customer Centers, County Welfare Agencies, and the Department's website at:

<http://www.state.nj.us/humanservices/providers/grants/public/index.html>.

Comments or inquiries must be submitted in writing within 30 days of the date of this notice to:

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