

NEW JERSEY DEPARTMENT OF HUMAN SERVICES

Meeting of the Medical Assistance Advisory Council

April 26, 2023





Agenda

- Welcome and Call to Order Dr.
 Deborah Spitalnik
- Approval of Minutes MAAC Members
- Medicaid Eligibility
 Checks Resumed April 1, 2023 –
 Greg Woods and Jennifer Langer
 Jacobs
- Cover All Kids Carol Grant

- WorkAbility Expansion Becky Thomas
- Self-Directed Services Jennifer
 Langer Jacobs and Becky Thomas
- 1115 Comprehensive Waiver Greg Woods and Jon Tew
- Planning for the Next Meeting Dr.
 Deborah Spitalnik





Medicaid Eligibility Checks Resumed April 1, 2023



Restarting Eligibility Renewals

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

In December 2022, Congress enacted legislation that required states to resume Medicaid eligibility processes, starting on **April 1, 2023**. The COVID-19 PHE is still in effect.

States have 12 months after the April 1 re-start date to initiate eligibility renewals for all Medicaid beneficiaries – this includes more than 2 million NJ FamilyCare members. There are also new rules from Congress about eligibility and outreach.

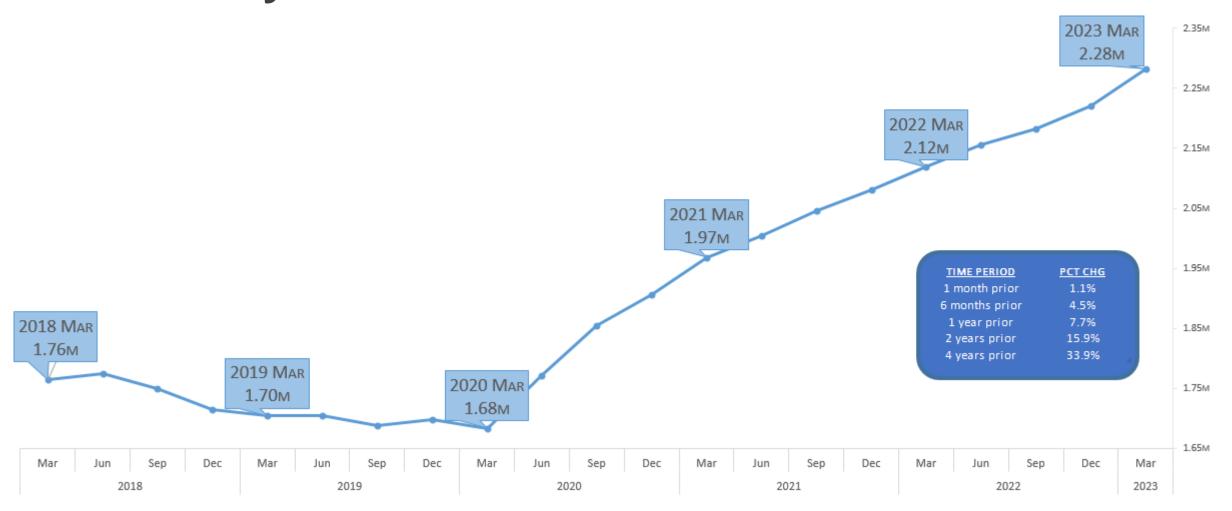
This "unwinding" represents the single largest renewal exercise in the history of New Jersey's Medicaid program. DMAHS is focused on doing this work the best way possible.

What members need to do:

- Make sure NJ FamilyCare/Medicaid has your correct mailing address
 - Members can confirm or update their contact information by calling NJ FamilyCare at 1-800-701-0710 (TTY: 711). NJ FamilyCare will use this information to communicate with members about their healthcare coverage.
- ✓ Respond to mail from NJ FamilyCare/Medicaid
 - ✓ Members need to look for and respond to mail from the State of New Jersey or their local County Board of Social Services. If NJ FamilyCare requests information, they need to respond right away to avoid a gap in their NJ FamilyCare coverage.



NJ FamilyCare Enrollment





North Star Principles for Returning to Regular Renewals

Serve people the best way possible.	We will resume Medicaid eligibility renewals as required by federal rules, with a focus on the quality of our work and support for our members.
Communicate with clarity and concern.	We will emphasize shared understanding as we manage broad technical systems and very unique individual circumstances.
Experiment with new ways to solve problems.	We will collaborate in new ways with our operational partners – and we will consider how we can use those new approaches to improve our program for the long-term.
Work closely with our stakeholders.	We will collaborate with our community stakeholders to raise awareness and provide support, with a shared commitment to equity, inclusion, and synergy.
Show people we care.	We will make empathy, positive energy, and collaborative focus our hallmark, internally and externally.



Timeline for Eligibility Unwinding

2022

Outreach began Communications campaign underway

12/29/22

H.R. 2617 is enacted; requires states to restart renewals by 4/1/23

4/1/23

Eligibility reviews resume

States have 12 months to initiate eligibility processes for all members

5/31/2023

Initial disenrollments occur (handful of cases from April mailing if no appeal)

4/1/24

All pending renewals from PHE period have been sent by DMAHS

Post 6/1/24

Likely ongoing "good faith" cases and fair hearings























May 2022

MCO member outreach kicked off: Priority on members who did not respond to recent mailings

Early 2023

Preparation for April 1 resumption of eligibility activities

Implementation of omnibus requirements

April 2023

Ex-parte processes First renewal

mailings that may result in disenrollment are sent

2023-2024

Continuing high volume of outreach, renewal, and fair hearing activity

5/31/24

All renewals from the PHE are complete, per federal requirements

NJ FamilyCare will send 1/12 of renewal mailings each month



Eligibility Unwinding - Special Populations

- The details of renewing eligibility will be different for different categories of NJ FamilyCare members.
- Some eligibility groups may require additional or different documentation.
- DMAHS will work with community and state partners to provide targeted outreach and information to specific eligibility groups, including:
 - Aged, Blind, or Disabled (ABD) members
 - Members receiving services from the Division of Developmental Disabilities or the Children's System of Care
 - Members who receive long-term care through the Managed Long-Term Services and Supports (MLTSS) program
 - Members who have recently become eligible for Medicare
- All members should:
 - Make sure Medicaid has your correct mailing address by calling 1-800-701-0710 (TTY: 711)
 - Respond promptly to all mail from NJ FamilyCare



Public Service Announcements

StayCoveredNJ in English:
https://www.youtube.com/watch?v=P-99QcalPSY



StayCoveredNJ in Spanish: https://www.youtube.com/watch?v=rAiY_OO fyVc





Postcard Outreach: Start of Mailing Month

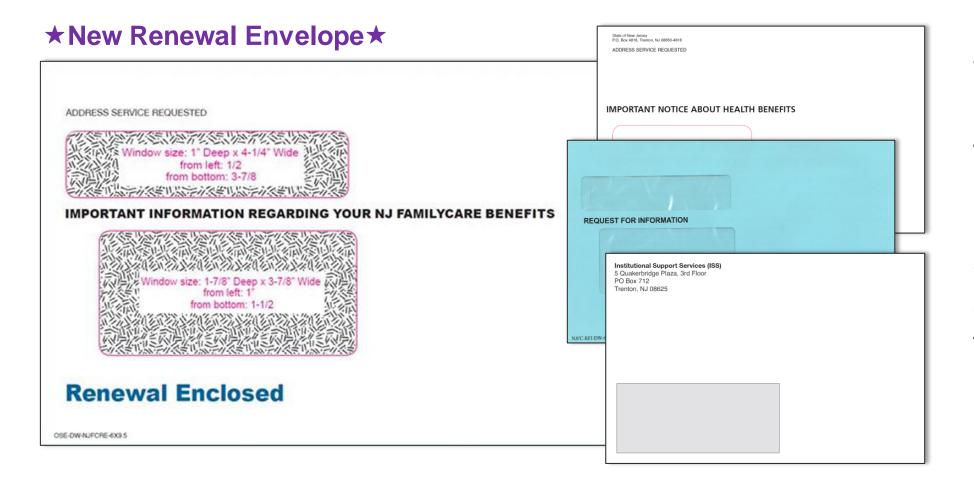
If you receive a postcard from your health plan, it means your NJ FamilyCare renewal mail is coming this month!



NJ FamilyCare will send 1/12 of renewal mailings each month



Examples of NJ FamilyCare Envelopes

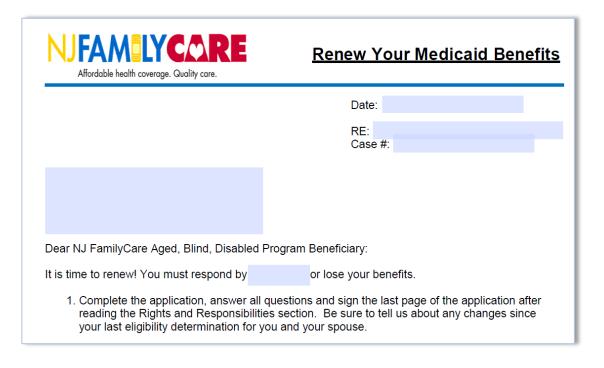


Whenever you receive mail from NJ FamilyCare, make sure you open it right away and follow instructions inside.

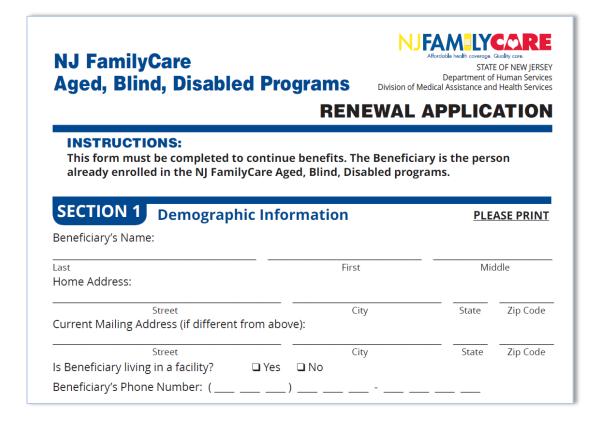


Example of NJ FamilyCare Renewal Application

Cover letter



Application





Phone/Text/Email Outreach: End of Mailing Month

End of month text message from health plan:

By now you should have received your NJ FamilyCare renewal mail. Please open it and follow instructions right away. Questions? 1-800-701-0710 TTY 711. Reply STOP to cancel.

Phone and Email messages are on the same theme, just slightly longer





Scam Awareness

- Other states are reporting that members have received illegitimate/scam text messages
- NJ FamilyCare and our health plans will <u>never</u>:
 - Ask for money in a text message
 - Pressure you for personal or bank account information
 - Make threats about legal action or demand secrecy
- Do not share your personal or banking information with anyone who claims to represent NJ FamilyCare or your health plan
- Call 1-800-701-0710 (TTY 711) if you have any questions

Beware of renewal scams. Other states are reporting that members have received illegitimate messages claiming to be from their Medicaid agency. Scammers may pretend to be from a legitimate organization or a government agency using phone, text or email – but their goal is to steal from you. NJ FamilyCare and its health plans send text messages to members, but we will never: Charge or ask for money from individuals to enroll or re-enroll. Threaten legal action or to seize your bank account.

Require payment by gift card, prepaid debit

card. Internet currency or mailed cash.

Pressure anyone for personal information or demand secrecy.

Do not share banking or credit card information with anyone that calls you claiming to represent NJ FamilyCare, the Department of Human Services, the Division of Medical Assistance and Health Services or your NJ FamilyCare health plan.

Don't hesitate to call us at **1-800-701-0710 (TTY: 711)** or visit **www.njfamilycare.org** for assistance.









Health Plan Support: Risk of Coverage Loss

Before loss of eligibility

- Health Plan Care Managers will call "High Risk" members who have not responded to their renewal mail within 30 days. These members are actively using their healthcare coverage. Examples of "High Risk" cases:
 - Pregnant
 - Chemotherapy
 - Dialysis
 - Methadone
 - MLTSS
 - Personal Care Assistant (including self-directed services)
 - Private Duty Nursing

After loss of eligibility

- If members ultimately lose Medicaid eligibility, they will receive a letter from their health plan in addition to the NJ FamilyCare termination notice.
- That letter will include information about:
 - Returning to Medicaid if the renewal was not submitted
 - Accessing GetCoveredNJ for affordable coverage through the State Health Insurance Marketplace



Examples of Medicaid Eligibility Renewal

Halima

- Called the Ambassador line to provide an <u>updated address</u> to NJ FamilyCare (or didn't)
- Received and responded to eligibility mailing
- Determined eligible
- Halima's eligibility continues

Hector

- Responded to eligibility mailing (or didn't)
- Hector <u>does not want to</u> remain enrolled
- Determined ineligible based on the information he provided or his non-response
- Hector's eligibility ends

Samuel

- Responded to eligibility mailing
- Determined <u>ineligible</u> due to income/assets
- Received disenrollment notice; account transfer to GetCoveredNJ
- Samuel wants to remain enrolled

Sofía

- <u>Did not respond</u> to eligibility mailing
- Determined ineligible due to non-response
- Received disenrollment notice, which includes GetCoveredNJ information
- Sofía wants to remain enrolled

Rapid response, informal resolution, and Fair Hearings will support these members



What happens next for Samuel?



Samuel

- Responded to eligibility mailing
- Determined <u>ineligible</u> due to income/assets
- Received disenrollment notice; account transfer to GetCoveredNJ
- Samuel wants to remain enrolled



Prior to the termination notice, Samuel received a request for information from the eligibility agency saying that they had verified his income at a level above the eligibility threshold.

Samuel provided additional information, but later received a termination notice. He disagrees with the decision.

His notice included <u>fair hearing</u> <u>rights</u>. He must request a fair hearing within 20 days of his termination notice.



The Medicaid legal office will review Samuel's fair hearing request and submit the request to the administrative courts.

Based on information provided, we may also notify the eligibility agency that the hearing was requested. If possible, the eligibility agency will try to resolve the fair hearing issue prior to the court date.



Meanwhile, when the Medicaid system processed Samuel's case, it immediately transferred his information to GetCoveredNJ.

GetCoveredNJ will reach out to Samuel to assist him in finding out if he is qualified for premium assistance or tax credits in purchasing an affordable health plan.



What happens next for Sofía?



Sofía

- <u>Did not respond</u> to eligibility mailing
- Determined ineligible due to non-response
- Received disenrollment notice, which includes GetCoveredNJ information
- Sofía wants to remain enrolled



Sofía's letter tells her that her NJ FamilyCare coverage will end because she did not provide needed information to complete her eligibility renewal.

The notice includes instructions for submitting needed information for reconsideration within 90 days and also includes fair hearing rights that she can exercise.



Sofía should respond to the renewal as soon as possible (online if applicable or by mail).

Once her renewal response is received, her information will be reviewed. If she is eligible, her coverage will be retroactively reinstated with the same health plan without a gap.

If Sofía does not complete the renewal within 90 days of her termination, a new application will be required.



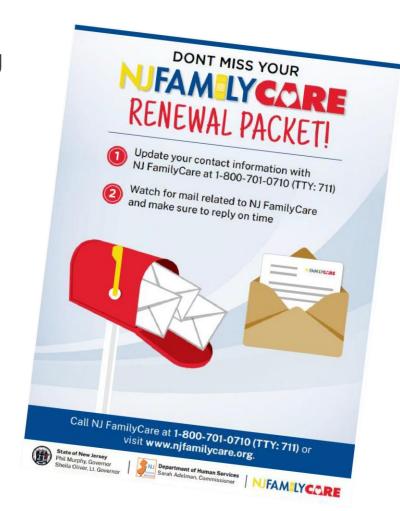
If Sofía has questions about her renewal status, she can call **1-800-701-0710 (TTY: 711)** to speak with a NJ FamilyCare representative.

If Sofía is not eligible for continued coverage after responding to her renewal, she may apply for coverage, including premium assistance, through GetCoveredNJ.



Community Support: Getting the Message Out

- Please visit <u>nj.gov/staycoverednj</u> for NJ FamilyCare unwinding materials including:
 - Full color, multi-lingual materials and
 - Messages for community organizations to use to help raise awareness about the return to Medicaid renewals.
- Informational packets and posters have already been sent to 6,012 community organizations.
- If your organization would like to assist community members in completing their NJ FamilyCare paperwork, please email MAHS.NJFamilyCare@dhs.nj.gov.



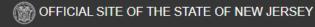






State of New Jersey

Human Services



Department of Human Services



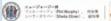
আপনার স্বাস্থ্যসেবা কভারেজ রাখুন। MANTENGA SU COBERTURA MÉDICA.

ОЖИДАЙТЕ ПРИБЫТИЯ ПАКЕТА ДЛЯ ПРОДЛЕНИЯ **FAM LYCCRE** ВАШЕГО МЕДИЦИНСКОГО СТРАХОВАНИЯ!

• Уточните свой адрес, позвонив по телефону 1-800-701-0710 (телетайп: 711). Это особенно важно, если вы недавно переехали.

• Следите за почтой, относящейся к программе NJ FamilyCare, и не забудьте дать своевременный ответ.

NJ FamilyCare にお電話ください (電話1-800-701-0710 (TTY: 711) または 詳細は、ウェブサイト www.njfamilycare.org にアクセスしてください。







به مراقبت فاميلي NJ در شماره (TTY: 711) 0710-701-800-1 زنگ بزنيد یا برای معلومات بیشتر از وبسایت www.njfamilcare.orgدیدن کنید.









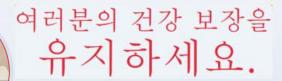
Keep Your Healthcare Coverage Keep Your Healthcare Coverage (EN) Keep Your Healthcare Coverage (SP)

	More languages	
		عربی - Arabic
	Don't Miss	Bengali - বাংলা
		Chinese - 中国人
	Don't Miss Your	Creole - Kreyòl
	Don't Miss Your	دری - Dari
		French - Français
	More language	Gujarati - ગુજરાતી
		Hindi - हिन्दी
		Italian - Italiano
	Social Med	Japanese - 日本
	Don't Miss Your	Korean - 한국어
١	No Pierda Su P	پښتو - Pashto
	Renewal Packe	
	Llegan los Paqu	Portuguese - Português
		Russian - русский
		Tagalog - Tagalog
	Other Reso	Turkish - Türk
	County Board o	اردو - Urdu
	NJ FamilyCare	Vietnamese - Tiếng Việt

Connecting NJ - Health and Social Resources Hub

GetCoveredNJ

KEEP YOUR HEALTHCARE COVERAGE.



ترقب وصول NFAM LYC△RE مجموعة التجديد!

﴾ قم بتحديث عنوانك بالاتصال بالرقم (TTY: 711) 0710-701-080. هذا مهم خاصة إذا كنت قد انتقلت مؤخرًا.

> · ترقب البريد المتعلق بـ NJ FamilyCare و تأكد من الرد في الوقت المحدد

致电NJ FamilyCare, 电话号码是1-800-701-0710 (TTY: 711) 或 访问www.njfamilycare.org了解详情。







NJ FamilyCare نه يو (117: 711) 1-800-701-0710 (نگ ووهي يا د نورو مالوماتو دياره www.njfamilycare.org وگورئ











Important Messages to Share with our Communities

- Key messages to our communities today...
 - Call 1-800-701-0710 (TTY: 711) to make sure NJ FamilyCare has your current address
 - Respond to any mail you receive from NJ FamilyCare
- Additional messaging for people who lose eligibility...
 - If you believe your eligibility was incorrectly terminated, you have <u>appeal rights</u>. These rights are explained in the mail you receive. If you do not have the letter or you have questions, you can call NJ FamilyCare at 1-800-701-0710 (TTY: 711).
 - If you lost eligibility because you did not provide all the information that was needed, you can provide the information within 90 days to have your renewal application reconsidered.
 - If you are ineligible for NJ FamilyCare due to your income level, you can apply for coverage through <u>GetCoveredNJ</u>.

Community partners include...

- Healthcare providers and payers
- Community leaders and organizations
- Aging and disability advocates
- Medical Assistance Advisory Council (MAAC) and Cover All Kids workgroup members
- Regional Health Hubs
- Sister agencies, including DOBI navigators





Stay in touch and #StayCoveredNJ





@NJDHS





@NJDHS





@NJDeptOfHumanServices

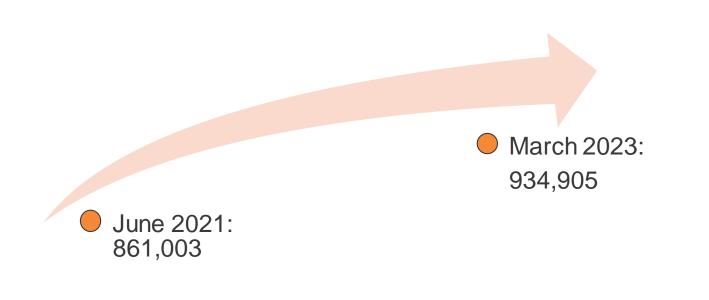




Cover All Kids Updates



Enrollment growth (members under age 19) since enactment of Cover All Kids legislation



73,902

members under 19 years
old have enrolled in
NJ FamilyCare since
enactment of Cover All Kids
legislation in
July 2021

Based on March 2023 Public Stats



Phase 2 Enrollment Update

Since January 1st, we have enrolled **11,135** children who previously did not qualify due to their immigration status.



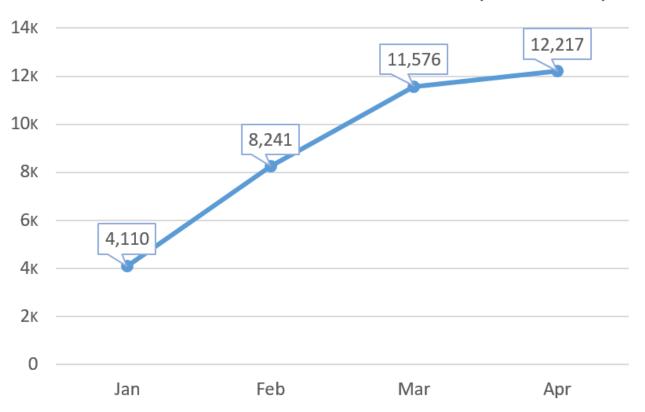
New Jersey Department of Human Services

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Phase 2 Enrollment Update

Cover All Kids Phase 2 Enrollment (2023 YTD)



Since January 1st, we have enrolled 12,217 children who previously did not qualify due to their immigration status.



March Outreach Events

- Hunterdon County: Reading Fleming Intermediate School, School Event
- Essex County: Newark Public Library, Outreach Event
- Bergen County: Hackensack High School, School Event
- Essex County: Ironbound Early Learning Center, School Event
- Cumberland County: Food Distribution, Forrest Lakes
 Family Success Center, Outreach Event
- Passaic County: Paterson Public School, School Event
- Passaic County: Frank Lautenberg School, School Event
- Middlesex County: Community Job Fair, AULCS Main Campus, Outreach Event
- Essex County: Van Buren Public Library, Outreach Event

- Atlantic County: Ventnor Elementary School, School Event
- Atlantic County: Special Education Parent Advisory Group, Mullica Twp. Elementary, School Event
- Passaic County: Black Family Wiliness Expo, Outreach Event
- Mercer County: US-Latino Affairs, Enrollment Event
- Essex County: La Casa de Don Pedro, Enrollment Event
- Essex County: Nourishing Newark, Outreach Event
- Mercer County: St. Anthony Padua/Penn Medicine,
 Outreach Event
- Hudson County: Mahatma K. Gandhi School, School Event



March Outreach Events, Cont.

- Essex County: La Casa de Don Pedro Saint Francis School, School Event
- Camden County: Orchards Family Success Center, Outreach Event
- Mercer County: New Jersey State School Nurses Association Conference, Outreach Event
- Cumberland County: Spring Fling Commercial Twp. School, Outreach Event
- Essex County: Newark Public Library, Springfield Branch, Outreach Event
- Essex County: Our Lady of Good Council (Councilman Ramos), Press Conference/Outreach Event
- Monmouth County: Ironbound Early Learning Center, Outreach Event

- Essex County: International Women's History Month, Outreach Event
- Passaic County: John F. Kennedy High School, School Event
- Essex County: Ironbound Community Corporation, Outreach Event
- Middlesex County: Perth Amboy YMCA Health Fair, Outreach Event
- Morris County: Navigating Hope Mobile Unit, Netcong Board of Education, School Event
- Middlesex County: Middlesex County Office of Health Services, Virtual Presentation





Additional March Outreach

- Outreach letters were sent to uninsured families via data received from Taxation
- Office of Faith-based initiatives shared information regarding Renewals and Cover All Kids with their Facebook/Instagram followers and Constant Contact List
- Cover All Kids and Renewal information was shared with NJ Conference of Mayors via their Friday Mayors Update
- Childcare centers (3,650) were sent flyers and information about the Cover All Kids Website
- New Jersey Department of Education was outreached to broadcast Cover All Kids and Renewal information to NJ School Districts



Visit nj.gov/CoverAllKids to learn more and apply



Use your smartphone camera to scan here

With questions, comments, and agenda items, email MAHS-CoverAllKids@dhs.nj.gov





WorkAbility Expansion



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NJ WorkAbility Expansion

NJ WorkAbility offers people with disabilities who are working, and whose income would otherwise make them ineligible for Medicaid, the opportunity to receive full Medicaid coverage. Recently enacted <u>legislation</u> expanded who can qualify for NJ Workability.

- Phase 1 expansion launched April 1, 2023. The program is now:
 - Open to all people over age 16 who received a disability determination prior to age 65;
 - Free from spousal deeming requirements;
 - Free from asset limits; and
 - Available to enrolled members for 12 months after a job loss that happens through no fault of their own.
- Phase 2 focus is expanding eligibility for higher income levels. Policy and system implementation activities are underway for Fall 2023 go-live.



NJ WorkAbility Community Collaboration

In 2023, DMAHS added a *subgroup for communications strategy* to our existing WorkAbility community workgroup:

- The communications strategy subgroup is made up of advocates with lived experience, community advocates, and family members. It is facilitated by the Center for Health Care Strategies.
- The subgroup met February 13, 2023 and March 27, 2023 to provide real-time feedback regarding effective communication opportunities about NJ WorkAbility expansion.
- The subgroup is providing collaboration and guidance for communication initiatives through:
 - Updates to the current NJ WorkAbility web page for Phase 1 launch on April 1, 2023
 - Messaging and strategy for reaching a broad audience of current and potential WorkAbility members
 - Social media posts and YouTube videos in both English and Spanish
 - Design of a new WorkAbility site (format similar to Cover All Kids and StayCoveredNJ)

The full workgroup will meet again in early May.

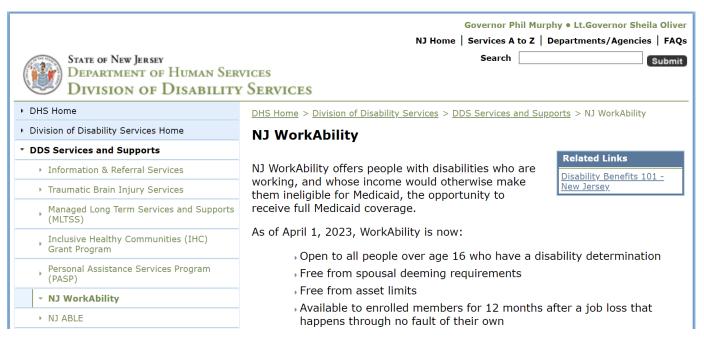




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NJ WorkAbility Communications and Outreach

Updates for Phase 1 are live on the existing WorkAbility page, and social media content is live on DHS platforms.



Department of Human Services | NJ WorkAbility (state.nj.us)





Public Service Announcements

WorkAbility in English: https://www.youtube.com/watch?v=_ZQiIFx



WorkAbility in Spanish: https://www.youtube.com/watch?v=ZJORzG kszqw







Self-Directed Services



Self-Directed Services: Fiscal Intermediary Update

In 2016, the Department of Human Services (DHS) contracted with Public Partnerships, LLC (PPL) to provide fiscal intermediary services for three self-directed programs.

These programs previously had separate contracts and vendors.

- Division of Medical Assistance & Health Services Personal Preference Program (PPP)
- Division of Developmental Disabilities Self-Directed Vendor Fiscal/Employer Agent Model
- Division of Aging Services Jersey Assistance for Community Caregiving (JACC)

The current fiscal intermediary contract ends in November 2023.



Fiscal Intermediary Path Forward

- After reviewing operation of the consolidated contract, DHS has determined that program needs are best served through a different procurement approach.
- The Department will be procuring these services in three ways:

DMAHS/Medicaid

Personal Preference Program

- Fiscal intermediary will shift to managed care organizations, consistent with DMAHS's ongoing commitment to better coordinate care management and ensure vendor accountability.
- Each MCO will provide or contract for fiscal intermediary services according to specific requirements defined and monitored by DMAHS.

Division of Developmental Disabilities (DDD)

Vendor Fiscal/Employer Agent

- DHS will issue a Request For Proposal (RFP) for the operation of this program.
- Note: This is <u>not</u> for the Easterseals Agency with Choice program.

Division of Aging Services (DoAS)

Jersey Assistance for Community Caregiving (JACC)

 DHS will issue a Request For Proposal (RFP) for the operation of this program.



National Lessons and Best Practice: Future Improvements for New Jersey

- Community partnership and collaborative engagement to ensure a smooth transition
 - Similar to our EVV Self-Direction workgroup which has been noted as a national model
- User-friendly tools for members, caregivers, and workers
- High quality care and training opportunities
- Customer service focus with member satisfaction targets
- Flexibility/agility to adopt best practices

Did you know?

As of March 2023, New Jersey's Personal Preference Program has more than **28,000** members who are selfdirecting their services!





1115 Comprehensive Medicaid Demonstration



New Jersey FamilyCare Comprehensive 1115 Demonstration

- New Jersey FamilyCare operates a Section 1115 demonstration (also known as a "waiver")
 - First approved in 2011, consolidating several older demonstration programs.
 - Provides state with federal authority to operate major elements of NJ FamilyCare program.
 - Must be renewed with federal government on (approximately) 5 year intervals
 - First renewal 2017
 - Process for second renewal has been underway since 2020
- CMS approved the second <u>renewal</u> of New Jersey's 1115 demonstration on March 30, 2023



North Star Principles for the 1115 Renewal

Maintain momentum	on
existing demonstration	n
elements.	

We will **continue improvements in quality of care and efficiency** associated with managed care; improve access to critical services in the community through Managed Long Term Services and Supports (MLTSS) and other home and community based services programs; and create innovative service delivery models to address substance use disorders.

We will **update existing demonstration terms and conditions** to address implementation challenges, and accurately capture how the delivery system has evolved in New Jersey over the past several years.

Expand our ability to better serve the whole person.

We will **test new approaches** to addressing the social determinants of health, with a particular emphasis on housing-related issues.

We will **encourage greater integration** of behavioral and physical health, and continued availability of appropriate behavioral health services for all Medicaid beneficiaries.

Serve our communities the best way possible.

We will **address known gaps** and improve quality of care in maternal and child health.

We will **expand health equity analyses** to support better access and outcomes for communities of color and people with disabilities, while also seeking to improve the experience of other historically marginalized groups where data may not be available for analysis (e.g. LGBTQ identity).



NJ FamilyCare Policy Levers

State Plan

- Defines eligibility, benefits, and other key features of NJ FamilyCare
- Includes program
 elements that are
 permitted under federal
 law and regulation, and
 do not require special
 flexibility or permission
- Modified frequently through State Plan Amendments (SPAs)

1115 Demonstration

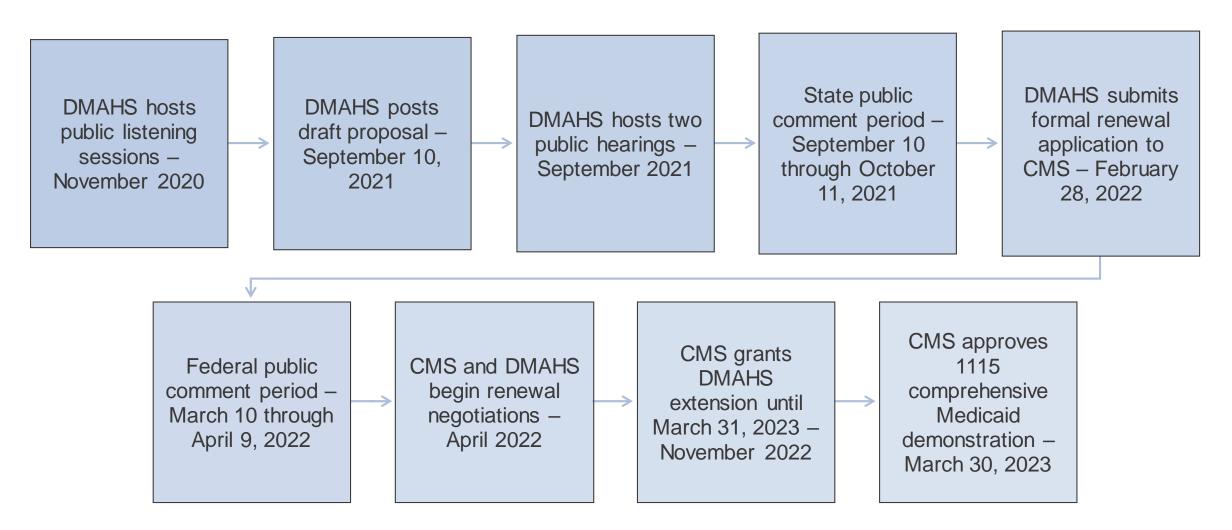
- Allows State to test policies that are not allowable under ordinary Medicaid rules
- Can include waivers of certain provisions of federal law and regulations
- Is approved for limited time (typically 5 years) – must be renewed regularly

Other Policy Mechanisms

- State laws and regulations
- MCO Contract
- Sub-regulatory policy guidance (e.g. provider newsletters)
- Infrastructure and Capacity (operations)
- Quality Strategy



The Road to the 1115 Renewal





1115 Renewal – Major Provisions

- Approved Enhancements to Existing Programs
 - Enhanced MLTSS benefits, to support members in community and better support caregivers
 - Adjustments to Community Care Program and Supports Program to allow greater flexibility and better support members receiving services.
 - Expansion and extension of authority for New Jersey Home Visiting pilot
 - Clarification of eligibility flexibilities for Children's System of Care (CSOC) Programs for Youth with Serious Emotional Disturbance (SED) and/or Intellectual/Developmental Disabilities (I/DD)
 - Continuation of 12 months of Postpartum Continuous Coverage
 - Authority to further integrate provision of physical and behavioral health services, based on input from stakeholders



1115 Renewal – Major Provisions

- Approved New Initiatives
 - A multifaceted, integrated housing strategy for Medicaid beneficiaries, including Medicaid coverage of housing-related services
 - Increased coverage of nutritional services, including a medically indicated meal pilot for individuals at risk of gestational diabetes
 - Community Health Worker pilot program, to test innovative new approaches to delivering services
 - New incentives for Medicaid behavioral health providers who adopt new HIT functionality
 - A new Autism Adjunct Services pilot program
 - 12 months of continuous eligibility for adults in certain income-based eligibility categories
- Planning for these elements is underway and will include extensive stakeholder engagement as well as further post-approval coordination with CMS.



1115 Renewal – Items Not Approved as Proposed

- Pre-release behavioral health services for incarcerated individuals
 - Recent CMS guidance for states (April 2023) gives pathway forward
 - Conversations between New Jersey and CMS are ongoing on this topic
- Initiatives where CMS partially approved and/or identified alternative pathways to federal authority:
 - Integrated Care for Kids (InCK) model
 - Medicaid coverage of Supportive Visitation Services (Child Protection and Permanency)
 - Updates to Certified Community Behavioral Health Clinics (CCBHCs) program
 - Expanded scope for Regional Health Hub initiatives
- Federal funding for sub-acute behavioral health rehabilitation beds



1115 Renewal Implementation: Next Steps for 2023/24

Deliverables to CMS

Community and Stakeholder Engagement

Operational Milestones

- Implementation Plan(s)
- Program Protocols
- Rates / Fiscal Documentation
- Targeted engagement, including:
 - Behavioral Health Integration
 - Housing Initiatives
 - Community Health Worker Pilot
- Managed Care Contract Modifications
- IT Systems Changes, including:
 - Provider Enrollment
 - Eligibility





Planning for the Next Meeting – July 19, 2023