

LEGAL NOTICE

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

Medicaid Freestanding Birth Center Services and Reimbursement

TAKE NOTICE that 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 comply with Section 2301 of the Affordable Care Act (ACA) which amended Section 1905(a)(28) of the Social Security Act (42 U.S.C. § 1396d) to require States that recognize freestanding birth centers, and the services rendered by certain other professionals providing services in a freestanding birth center (to the extent the State licenses or otherwise recognizes such providers under the State law) cover the services provided by these centers and professionals as mandatory Medicaid services eligible for Federal Financial Participation (FFP). Section 2301 of ACA also specifies that a State must provide separate payments to providers administering prenatal labor and delivery or postpartum care in a freestanding birth center.

By definition, a freestanding birth center is not a hospital or an entity that is reviewed as part of a hospital accreditation or certification program. Such centers are licensed or otherwise approved by the State to provide medically necessary services during pregnancy, birth, and the immediate postpartum period to low-risk expectant mothers; and other ambulatory services included in the Medicaid State Plan to low-risk, uncomplicated maternity patients who are expected to deliver neonates of a weight greater than 2,499 grams, between 37 to 42 weeks gestational age, and who expect to require a stay of less than 24 hours after birth. A minimal state savings is anticipated for State Fiscal Years 2014 and 2015.

A copy of this Notice is available for public review at the local Medical Assistance Customer Centers, County Welfare Agencies, and on 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:

Margaret Rose, Division of Medical Assistance and Health Services
P.O. Box 712, Mail Code #26
Trenton, New Jersey 08625-0712
Fax: 609-588-7343
E-mail: Margaret.Rose@dhs.state.nj.us