

ADOPTIONS SECTION

HEALTH

INTEGRATED HEALTH BRANCH

Notice of Readoption

Pre-Placement Program

Readoption with Technical Changes and Recodification: N.J.A.C. 10:38A as 8:134

Authority: N.J.S.A. 30:1-12; and Reorganization Plan Nos. 001-2017 and 001-2018.

Authorized By: Judith M. Persichilli, R.N., B.S.N., M.A., Commissioner, Department of Health.

Effective Dates: February 17, 2023, Readoption;
March 20, 2023, Technical Changes and Recodification.

New Expiration Date: February 17, 2030.

Take notice that, pursuant to N.J.S.A. 30:4-27.19, the Commissioner of the Department of Health (Department) hereby readopts N.J.A.C. 10:38A, Pre-Placement Program, with technical changes, and with an administrative recodification as N.J.A.C. 8:134.

Pursuant to Reorganization Plan No. 001-2017, A Plan for the Transfer of Mental Health and Addiction Functions From the Department of Human Services to the Department of Health (Governor Christie, filed June 29, 2017, and effective August 28, 2017), at § 1, and Reorganization Plan No. 001-2018, A Plan for the Transfer of Certain Mental Health and Addiction Functions From the Department of Health to the Department of Human Services (Governor Murphy, issued June 21, 2018, effective August 20, 2018), at §3, the functions, powers, and duties exercised by the Division of

Mental Health and Addiction Services (DMHAS) within the Department of Human Services (DHS) with regard to the operation and administration of the State psychiatric hospitals were transferred to the Department. 50 N.J.R. 1517(a).

N.J.A.C. 10:38A, Pre-Placement Program, establishes the eligibility and standards for the pre-placement program for patients in State psychiatric hospitals, which enables patients to test available community placements prior to discharge from a State hospital. The DHS originally adopted N.J.A.C. 10:38A in 1993. 24 N.J.R. 4326(a), 25 N.J.R. 3213(a). The DHS readopted N.J.A.C. 10:38A in 1998, 30 N.J.R. 1367(a), 2646(a); in 2003, 35 N.J.R. 1822(a), 4082(b); in 2009, 40 N.J.R. 4487(a), 41 N.J.R. 236(a), and in 2016, 48 N.J.R. 104(a), 1301(a). The chapter was scheduled to expire on May 16, 2023.

Subchapter 1, General Provisions, establishes the scope of, and definitions of terms used in, the chapter.

Subchapter 2, Eligibility Requirements, establishes the patient eligibility requirements for participating in the pre-placement program.

Subchapter 3, Program Standards and Requirements, establishes the standards for participating in the pre-placement program, including the allowable length of time for participation, and requirements for program approval and completion.

The Department has reviewed N.J.A.C. 10:38A and determined that the existing chapter remains necessary, proper, reasonable, efficient, understandable, and responsive to the purposes for which the DHS originally promulgated it, as amended and supplemented over time, and should be readopted with technical changes, and

recodified from Title 10 of the New Jersey Administrative Code to Title 8, as N.J.A.C. 8:134.

In addition to readopting and recodifying the existing rules, the Department is making technical changes throughout N.J.A.C. 8:134 to correct grammar and update references throughout the chapter to the licensing authority by:

1. Deleting references to the “Department of Human Services” and “Division of Mental Health and Addiction Services” and adding in place thereof, references to the “Department of Health” or the “Department”; and
2. Correcting cross-references.

Therefore, pursuant to N.J.S.A. 52:14B-5.1.c(1), N.J.A.C. 10:38A is readopted and recodified as N.J.A.C. 8:134, and shall continue in effect for seven years.

Full text of the existing rules being recodified as N.J.A.C. 8:134 can be found in the New Jersey Administrative Code at N.J.A.C. 10:38A, through the publication of the 03-20-23 Code Update.

Full text of the technical changes follows (additions indicated in boldface **thus**; deletions indicated in brackets [thus]):

CHAPTER [38A] **134**

PRE-PLACEMENT PROGRAM

SUBCHAPTER 1. GENERAL PROVISIONS

[10:38A]**8:134**-1.1 Scope and purpose

(a) The [Pre-Placement Program shall be] **pre-placement program is** available to all eligible patients [(as defined herein at N.J.A.C. 10:38A-2.1)] at each of the State

psychiatric hospitals operated by the [Division] **Department**. Community providers eligible to receive [Pre-Placement Program] **pre-placement program** payments from [the] a State psychiatric hospital for the cost of pre-placement care [shall] include, but **are** not [be] limited to, licensed boarding homes, residential care facilities, and other residential providers approved by hospital staff.

(b) Certain patients at State psychiatric hospitals have received the maximum available benefit from their inpatient psychiatric hospitalization in the judgment of their treatment team, but have not had an opportunity to explore the suitability of or to demonstrate their ability to adjust to certain alternative available community placements. The purpose of the [Pre-Placement Program] **pre-placement program** is to provide such patients with the opportunity to test [out], prior to discharge, a possible community setting and to serve those patients whose psychiatric history and hospital behavior threaten their ability to succeed at these placements unless it is financially and programmatically supported. Additionally, community service providers would receive authorization to ensure payment from the hospital's [Interim Assistance Program] **interim assistance program** for [their] room and board services [provided to the client] **that they provide a patient** during [the] a pre-placement visit, but prior to an eligible [client's] **patient's** receipt of either [Interim Assistance] **interim assistance** or Supplemental Security Income benefits. [Where] **if** a [client] **patient** is ineligible for [Interim Assistance] **interim assistance** due to independent, sufficient, and recurring income or benefits, [payment to] **the patient shall pay** the provider for room and board services [shall be made by the client].

[10:38A]8:134-1.2 Definitions

The following words and terms, as used in this chapter, shall have the following meanings, unless the context clearly indicates otherwise:

“CEO” means the [Chief Executive Officer] **chief executive officer** of a State psychiatric hospital.

“Conditional [Extension Pending Placement] **extension pending placement**” or “CEPP” means, as delineated at R. 4:74-7(h)2, the legal status of a patient who is otherwise entitled to discharge, but who cannot be [immediately] discharged **immediately** due to the unavailability of an appropriate placement.

1. CEPP status is evidenced by a court order which conditionally extends the patient’s hospitalization and schedules a placement review hearing 60 days thereafter.

2. Any subsequent placement review hearings are held at intervals [not greater] **of no longer** than six months if the patient is not discharged earlier.

“Department” [shall] means the Department of [Human Services] **Health**.

[“Division” shall mean the New Jersey Division of Mental Health and Addiction Services.]

“Interdisciplinary [Treatment Team] **treatment team**” means the organized group of clinical staff who are responsible for the treatment of a specific patient who has been admitted to an adult psychiatric hospital.

1. Members of [the] **an interdisciplinary treatment** team meet to share their expertise with one another; [to] develop and implement treatment plans; [to] monitor patient progress; [to] reassess and make adjustments in treatment plans,

as needed; and [to] plan [discharge/aftercare] **discharge and/or aftercare.**

[Patients are also]

2. Each patient is a member[s] of [their specific] **the patient's interdisciplinary** treatment team[s] and participates in the development of the **patient's** treatment plan to the extent that [their] **the patient's** clinical condition permits.

3. Family members and significant others are encouraged to be part of the treatment planning process. [Treatment]

4. Interdisciplinary treatment team members shall include, at a minimum, a psychiatrist, a registered nurse, and a social worker. [The]

i. An interdisciplinary treatment team shall request the participation of whatever other unit or community liaison staff is necessary for the treatment and responsible discharge of the patient.

“Interim [Assistance] **assistance**” means the payment procedure developed by the State of New Jersey and the Social Security Administration that permits a patient who has been released from a State psychiatric hospital and who has applied for Federal Supplemental Security Income (SSI) benefits to receive [State loaned] **State-loaned** funding at a level consistent with the anticipated SSI benefit while [his or her] **the patient's** SSI claim is being evaluated. (See N.J.A.C. [10:38] **8:133.**)

SUBCHAPTER 2. ELIGIBILITY REQUIREMENTS

[10:38A]8:134-2.1 Program eligibility

(a) To be eligible for the [Pre-Placement Program] **pre-placement program**, including the supporting payments to community and other residential providers approved by hospital staff, the patient must:

1.-2. (No change.)

3. Have been evaluated by [their Interdisciplinary Treatment Team] **the patient's interdisciplinary treatment team** as:

i.-iii. (No change.)

4. (No change.)

5. Indicate [his or her] willingness to apply for both Interim Assistance and Supplemental Security Income, when appropriate.

SUBCHAPTER 3. PROGRAM STANDARDS

[10:38A]8:134-3.1 Program standards and requirements

(a) Each eligible patient may participate in the [Pre-Placement Program] **pre-placement program** for any number of days, not to exceed a maximum of 14 calendar days.

1. The [Interdisciplinary Treatment Team] **interdisciplinary treatment team** shall determine how long the placement period will be prior to the placement.

2. (No change.)

3. The [Interdisciplinary Treatment Team] **interdisciplinary treatment team** shall discuss and consider the input received from the patient regarding the appropriate length of the placement.

4. The [Interdisciplinary Treatment Team] **interdisciplinary treatment team** shall reach an agreement with the residential provider to make an adjustment to the placement period.

(b) Any hospital patient or any interested party on behalf of a hospital patient may initiate a [Pre-Placement Program] **pre-placement program** request to the patient's [Interdisciplinary Treatment Team] **interdisciplinary treatment team**.

(c) Each patient who has been approved as appropriate for the [Pre-Placement Program] **pre-placement program** by the [Interdisciplinary Treatment Team] **interdisciplinary treatment team** and who may be eligible for Supplemental Security Income shall be referred to the Discharge/Financial Coordinator or other hospital designee for Interim Assistance eligibility determination.

(d) Each [Chief Executive Officer (JCEO[)] shall designate a member of the patient's **interdisciplinary** treatment team or other appropriate person, if indicated in the hospital's policies and procedures manual, to monitor the patient's adjustment in the community and, depending on the particular placement, act as a liaison to the community providers or the patient's family for assistance regarding adjustment issues.

(e) If a patient requests [his or her] **to** return to the hospital, the hospital staff designated at (d) above shall review the placement situation and basis for the request and attempt to maintain the placement, if possible, and in the client's best interests. If these efforts do not succeed, and the patient continues to request [his or her] **to** return during **the** pre-placement period, the patient shall be returned to the hospital.

(f) A patient may be returned to the hospital when [his or her Interdisciplinary Treatment Team has concluded] **the patient's interdisciplinary treatment team concludes** that

[he or she] **the patient** and the provider have inadequately adjusted to each other so that conditions supporting the likelihood of a successful discharge and placement to the provider are not well-established.

1. Before making its decision, the [Interdisciplinary Treatment Team] **interdisciplinary treatment team** should discuss the situation with, and consider the input received from, the patient, and the provider.

2. The patient shall be given an opportunity to object to the team obtaining input from the patient's family and any other interested party with relevant information, and if there is no objection, information from those sources may [also] be considered.

(g) (No change.)

(h) Patients **who are** adjudicated as [Conditional Extension Pending Placement] **CEPP** may participate in the **pre-placement** program.

1. Hospital staff shall notify the committing court of [the]:

i. **The** patient's participation in the program, which shall be in accordance with court directives[. The hospital shall notify the committing court in the event of the]; **and**

ii. **The** patient's return to hospitalization [due to] **if the patient's adjustment to the placement is** unsuccessful [adjustment].

2. Patients who are involuntarily committed may [also] participate in the **pre-placement** program.

(i) (No change.)

(j) Whenever a patient successfully completes a [Pre-Placement] **pre-placement program** with a provider, [he or she] **the patient** shall be removed from [that] **pre-**

placement program status and, upon the **interdisciplinary** treatment team's approval, shall be discharged from the hospital and no longer subject to return to the hospital according to the standard [contained] in these rules (see (e) above). [Patients]

1. A patient who [have completed] **completes** the [Pre-Placement Program] **pre-placement program** and [have been] **is** discharged from the hospital [and] whose subsequent behavior indicates that [they] **the patient** requires psychiatric hospitalization must be screened in accordance with the procedures and standards [contained] in the Mental Health Screening Law (N.J.S.A. 30:4-27.1 et seq.).

(k) [Whenever a] **A patient who is** without sufficient independent resources **and** successfully completes a [Pre-Placement] **pre-placement program** with a provider[,] **must secure** an alternative financial source, such as Supplemental Security Income, for any continued cost of community care [must be secured by the patient], with assistance from hospital staff, as needed, [in order] to maintain ongoing placement with that provider.

APPENDIX

(No change.)