

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

Assisted Living Facility Rates

TAKE NOTICE the New Jersey Department of Human Services (DHS), Division of Medical Assistance and Health Services (DMAHS) intends to seek any required approval from the United States Department of Health and Human Services (HHS), Centers for Medicare and Medicaid Services (CMS), to implement budget provisions approved in the New Jersey Fiscal Year 2027 Appropriations Act.

Notwithstanding the provisions of any law or regulation to the contrary and subject to any required federal approval, residents of an assisted living residence or a comprehensive personal care home who are Medicaid beneficiaries and enrolled in the Program of All-Inclusive Care for the Elderly shall be included in the facilities' Medicaid occupancy calculation for the purpose of determining the facilities' increased Medicaid per diem rate based on the percentage of residents who are Medicaid beneficiaries pursuant to P.L. 2023, c.80 (C.30:4D-7mm). The Director of the Division of Medical Assistance and Health Services may require facilities to provide any information necessary to document and claim for services provided. Further, assisted living facilities, comprehensive personal care homes, and assisted living programs, shall receive a per diem rate of no less than \$91.10, \$81.10, and \$71.10, respectively, as reimbursement for each NJ FamilyCare beneficiary under their care. This is a base rate update. The tiered rate enhancements based on Medicaid volume will remain unchanged.

Upon implementation of the aforementioned rate changes, New Jersey will remain within its budget neutrality limits as set forth in its approved 1115 Demonstration Waiver.

The fee schedules will be published on the Department's fiscal agent's website at <https://www.njmmis.com> under "rate and code information" when available.

This Notice is intended to satisfy the requirements of Federal statutes and regulations, specifically 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:

<https://www.nj.gov/humanservices/notices/grants/public-notices/>.

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

Division of Medical Assistance and Health Services
Office of Legal & Regulatory Affairs
Attention: Margaret Rose
P.O. Box 712, Mail Code #26
Trenton, New Jersey 08625-0712
Fax: 609-588-7343
E-mail: Margaret.Rose@dhs.nj.gov