

# NJ FamilyCare Updates

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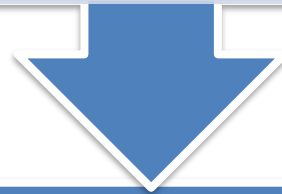
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American Rescue Plan  
Enhanced Federal Match and  
Reinvestment for Home and Community  
Based Services

# American Rescue Plan: HCBS Reinvestment

Through the American Rescue Plan, Congress provided a 10% increase in the federal matching rate (aka FMAP) on Home and Community-Based Services.

Eligible HCBS expenditures from April 1, 2021 to March 31, 2022 are given a 10% increase in their federal match rate.



The resulting funding may be spent through March 31, 2024 on eligible Home and Community-Based Services.

Spending must “supplement not supplant” state dollars and must enhance, strengthen or expand HCBS.

# HCBS Reinvestment: Stakeholder Process

Stakeholders and the general public played a crucial role in our efforts to craft this initial spending plan.

- For this initiative, several targeted small group calls were held, each focusing on a distinct subset of HCBS services. Over 50 organizations and individuals participated in these open discussions with DHS leadership.
- In addition, an open public listening session was held on June 4, 2021 following a posted public notice on the DMAHS website. Over 230 individuals attended the session where open comments were given to leadership representing the Governor's Office, the NJ Department of Human Services (NJ DHS) and the NJ Department of Children and Families (NJ DCF).
- Finally, an email inbox was provided for any written submissions and over 90 written submissions from the public were received and reviewed as this spending plan was constructed.



# HCBS Reinvestment: Initial Spend Plan

In developing this spend plan, New Jersey has focused on supporting independence, community options, and person-centered care through a system that serves people the best way possible.

- When crafting the spend plan, we relied on stakeholder input to determine the universe of potential investments.
- Stakeholders spoke to us extensively about workforce development, provider access, independent living, and transition support needs.
- Important considerations in the development of the plan included:
  - whether an investment had a short or long-term horizon,
  - the number of beneficiaries that would be served by such an investment,
  - the presence of other funding in a given investment area, and
  - the state funding gap that could remain after the enhanced funding opportunity ends.

# HCBS Reinvestment: Initial Spend Plan

## Key elements of the plan:

- Sustaining the recently enacted increase and further increasing the Personal Care Assistant service rate to \$23 per hour.
- Increasing the Personal Preference Program rate to \$19 per hour to help recipients who directly hire and manage someone to provide home care services.
- Sustaining recently enacted Assisted Living rates and boosting rates for facilities that serve a high percentage of Medicaid beneficiaries.
- Enhancing New Jersey's "No Wrong Door" system for accessing HCBS.
- Increasing rates to help maintain a strong workforce in the Jersey Assistance for Community Caregiving program which supports independence as people approach Medicaid eligibility.
- Creating incentives to recruit more and retain existing homecare workers.
- Creating new mechanisms to help transition individuals from nursing homes to home and community-based settings.

# HCBS Reinvestment: Initial Spend Plan

## Key elements of the plan (continued):

- Building capacity in person-centered planning.
- Increasing reimbursement for Applied Behavior Analysis services for children with autism spectrum disorders.
- Helping traumatic brain injury care providers offset costs associated with COVID-19 health and safety protocols.
- Implementing a new program to assist youth with intensive intellectual and developmental disabilities and/or co-occurring behavioral health needs.
- Incentivizing interoperability of electronic health records for behavioral health providers
- Increasing rates for support coordinators who work as case managers for Medicaid recipients with intellectual and developmental disabilities.
- Developing new Healthy Homes as deed-restricted, subsidized and accessible rental units for Medicaid beneficiaries across the state.

# 1115 Comprehensive Medicaid Waiver Demonstration Renewal



# 1115 Renewal Update

- DMAHS has received extension from CMS for submission of 1115 renewal application.
  - Extension is being used to address certain outstanding technical/budgetary issues
- DMAHS expects to post draft proposal for public comment soon; will be followed by 30 day state public comment period
  - DMAHS will hold two public hearings during comment period, one of which will be special MAAC meeting
- At conclusion of comment period, DMAHS will integrate feedback and submit formal renewal application to CMS.

# 1115 Renewal - Preview

- 1115 renewal proposal will likely preserve core programmatic elements under 1115 authority (managed care delivery system, existing HCBS programs, enhanced SUD services, etc.)
- Major new initiatives/policy changes contemplated as part of 1115 renewal proposal include:
  - Improving Maternal/Child Health outcomes
    - 12 months of post-partum coverage (amendment is currently under review by CMS, to allow implementation before renewal)
    - Medically indicated meals pilot for gestational diabetes
    - Integrated Care for Kids (InCK) model
    - Enhanced authority for home visiting pilot
    - Supportive Visitation Services for families in child welfare system
  - Addressing Social Determinants of Health
    - New housing transition and tenancy support services, with new DMAHS and MCO infrastructure to support implementation
    - Community Health Worker pilots
    - Additional flexibility for Regional Health Hubs

# 1115 Renewal – Preview

- Major new initiatives/policy changes contemplated as part of 1115 renewal proposal (cont.):
  - Better coordinating Behavioral Health needs
    - Stakeholder process to improve coordination of medical and behavioral health care
    - Updating of CCBHC program under 1115 authority
    - Coverage of pre-release transitional behavioral health services for incarcerated Medicaid beneficiaries
    - Enhanced federal support for diversion beds
    - Additional federal support for HIT incentives for behavioral health providers
  - Supporting independence, community options, and person-centered care
    - New MLTSS nursing home diversion services – nutrition, caregiver respite and support
    - Potential enhanced access to Medicaid services for certain pediatric populations
    - Program changes to reduce churning between DDD waiver programs and MLTSS
    - Technical fixes and updates to DDD authorities

# Thank you!

