



State of New Jersey  
DEPARTMENT OF HUMAN SERVICES  
DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

CHRISTINE TODD WHITMAN  
*Governor*

MICHELE K. GUHL  
*Commissioner*  
MARGARET A. MURRAY  
*Director*

**MEDICAID COMMUNICATION NO. 99-16**

**DATE: October 1, 1999**

**TO:** County Welfare Agency Directors

**SUBJECT:** New Jersey Supplementary Prenatal Care Program

This is to clarify the eligibility process for the New Jersey Supplementary Prenatal Care Program (NJSPCP). Medicaid Communication No. 99-11 stated that this program will provide limited state-funded prenatal care services to legally admitted immigrant women who were rendered ineligible for Medicaid due to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. To be more specific as to who meets the criteria "**legally admitted immigrant women,**" the following immigrants may be eligible for NJSPCP:

- \*Legal permanent resident ("green card" holder)
- \*Alien who has been granted parole for at least one year by the Immigration and Naturalization Service pursuant to section 212(d)(5) of the Immigration and Nationality Act
- \*Alien granted conditional entry pursuant to section 203(a)(7) of the immigration law in effect before April 1, 1980
- \*Certain legal aliens who are victims of domestic violence and when there is a substantial connection between the battery or cruelty suffered by an alien and his or her need for Medicaid benefits, subject to certain conditions
- Spouses or children of US citizens whose petition has been approved and who have a pending application for adjustment of status
- Asylum or withholding of deportation applicants who have been granted employment authorization, or who are under 14 and have had their application pending for at least 180 days.

As was stated in Medicaid Communication No. 99-11, this program provides no labor and delivery services or postpartum care. Therefore, eligibility for the Medical Emergency Payment Program for Aliens should be established by the

\*Entered the United States on or after 8/22/1996

county board of social services (CBOSS) during the third trimester. The eligibility for emergency services **will not** require a new application. A pregnant woman, after eligibility has been established, remains eligible for the duration of her pregnancy, regardless of her income or change in circumstances. Therefore, an emergency (whether or not relating to pregnancy) that occurs during her period of eligibility for NJSPCP can be covered by the Emergency Medical Payment Program for Aliens. The hospital where the emergency occurred can send a PA-1C or call the CBOSS to request activation of a Medicaid number for the Emergency Medical Payment Program for Aliens. The emergency services Medicaid number should be activated for **all** women enrolled in the NJSPCP at the start of the third trimester of pregnancy. These cases should be tickled for activation at that time. A termination date and termination of the Special Program Code shall be entered in the Medicaid Eligibility File effective the last day of the month after the month that the due date falls.

Questions regarding this communication may be directed to the Bureau of Eligibility Policy, at (609) 588-2556.

Sincerely,

A handwritten signature in black ink, appearing to read 'Margaret A. Murray', with a long, sweeping line extending from the bottom right of the signature.

Margaret A. Murray  
Director

MAM:G

c: Christine Grant, Commissioner  
Susan C. Reinhard, Ph.D., Deputy Commissioner  
Department of Health and Senior Services

David C. Heins, Director  
Division of Family Development

Charles Venti, Director  
Division of Youth and Family Services