

shall include, but not be limited to, providing the beneficiary with opportunities to seek employment, work in competitive integrated settings, engage in community life, control personal resources, and receive services in the community to the same degree of access as persons not receiving Medicaid/NJ FamilyCare.

(b) The beneficiary must have the ability to select their community residence from options including, but not limited to, assisted living residences and comprehensive personal care homes. Beneficiaries in publicly subsidized housing, where the housing authority has contracted with a licensed assisted living program provider, shall have the option to consider assisted living programs. The setting options must be identified and documented in the beneficiary’s person-centered service plans and based on the person’s needs, preferences, and resources available for room and board.

(c) The assisted living residences, comprehensive personal care homes, and assisted living programs must ensure the beneficiary’s rights of privacy, dignity, respect, as well as freedom from coercion and restraint. This shall include, at a minimum, the requirements at N.J.A.C. 8:36-4.1(a).

(d) The assisted living residences, comprehensive personal care homes, and assisted living programs must optimize, but not regiment, individual initiative, autonomy, and independence in making life choices. This includes, but is not limited to, daily activities, physical environment, and personal interactions.

(e) The assisted living residences, comprehensive personal care homes, and assisted living programs must facilitate individual choice regarding services and supports, and who provides them.

10:53-2.3 Facility setting

(a) In addition to the requirements at N.J.A.C. 8:36, assisted living residences and comprehensive personal care homes must meet the following criteria for HCBS Medicaid/NJ Family Care reimbursement:

1. The unit or dwelling must be a specific physical place that can be rented or occupied pursuant to a legally enforceable lease agreement by the beneficiary that, at a minimum, must provide protections that address eviction processes and appeals comparable to those provided pursuant to applicable landlord/tenant law. If a residential lease is not utilized, the facility must enter into a residency agreement or other written agreement with the beneficiary and such agreement must have the same responsibilities and protections from eviction that tenants have pursuant to State, county, and municipal landlord/tenant laws.

2. The beneficiary must have privacy in his or her sleeping or living unit.

i. The unit must have entrance door(s) lockable by the beneficiary, with only appropriate staff having keys to doors;

ii. Beneficiaries sharing units must have a choice of roommates in that residence;

iii. The beneficiary must have the freedom to furnish and decorate his or her sleeping or living unit within the lease or other agreement;

3. The beneficiary must have the freedom and support to control his or her own schedules and activities;

4. The beneficiary must have access to food at any time;

5. The beneficiary must be able to have visitors of his or her choosing at any time;

6. The residence must be physically accessible to the beneficiary; and

7. The residential setting must not have the qualities of an institution and must have the qualities of a home and community-based setting.

(b) If any of the above requirements cannot be met, any limitations must be approved through a person-centered planning process and documented in the beneficiary’s person-centered plan.

SUBCHAPTER 3. REQUIRED NOTICES

10:53-3.1 Licenses

(a) In addition to the notice requirements at N.J.A.C. 8:36, the assisted living residence or comprehensive personal care home must post its license from the Department of Health in a conspicuous location near the main entrance or office of the facility.

(b) The assisted living program must conspicuously post a notice that its license is available to beneficiaries and the public at the program site

and at the assisted living program provider’s main office, in accordance with N.J.A.C. 8:36-23.6.

10:53-3.2 Inspection and survey reports

(a) The assisted living residence or comprehensive personal care home must conspicuously post the most recent inspection report from the Department of Health in the entry or another equally prominent location in the building and, upon request, shall provide a copy of the report to each beneficiary or their legal guardian.

(b) The assisted living residence or comprehensive personal care home shall inform each beneficiary that he or she may review a copy of the survey report and a list of deficiencies, if applicable, from the last annual licensure inspection from the Department of Health and from any valid complaint investigation during the past 12 months.

(c) The assisted living program provider and each program site must conspicuously post notice that a copy of the last annual licensure inspection survey report and the list of deficiencies from any valid complaint investigation during the past 12 months is available for review.

10:53-3.3 Required contact information

(a) Assisted living residences and comprehensive personal care homes must post the following contact information in a conspicuous location in the facility:

1. “911” for the police department and the fire department that serve the municipality in which the facility is located;

2. The complaint hotline of the New Jersey Department of Health (1-800-792-9770); and

3. The toll-free number for the office of the New Jersey Long-Term Care Ombudsman (1-877-582-6995).

(b) The assisted living program provider and each program site shall conspicuously post a notice that the information listed at (a) above is available to residents and the public at the program site and at the assisted living program provider’s main office.

(a)

DIVISION OF MENTAL HEALTH AND ADDICTION SERVICES

Notice of Readoption Programs of Assertive Community Treatment Readoption with Technical Changes: N.J.A.C. 10:37J

Authority: N.J.S.A. 30:1-12, 30:9A-1, and 9A-10; and Reorganization Plan 001-2018.

Authorized By: Sarah Adelman, Commissioner, Department of Human Services.

Effective Dates: November 21, 2022, Readoption; December 19, 2022, Technical Changes.

New Expiration Date: November 21, 2029.

Take notice that pursuant to N.J.S.A. 52:14B-5.1.c, the rules at N.J.A.C. 10:37J, Programs of Assertive Community Treatment, were scheduled to expire on January 25, 2023.

This chapter applies to all Programs of Assertive Community Treatment (PACT). PACT provide comprehensive, integrated rehabilitation treatment, and support services to individuals with serious and persistent mental illness through a multi-disciplinary service delivery team. N.J.A.C. 10:37J is comprised of two subchapters. Subchapter 1, General Provisions, describes the scope and purpose of the rules and defines words and terms used throughout the chapter. Subchapter 2, Program Operation, specifies requirements regarding written policies and procedures, licensing, eligibility, program intensity, services to be provided and service coordination, assessment, recovery planning, progress notes, terminations and discharges, staff requirements and training, PACT team office space, records, and continuous quality improvement activities.

In addition to readopting the existing rules, the Department of Human Services (Department) is making technical changes throughout N.J.A.C.

10:37J. The changes reflect the recodification and readoption of N.J.A.C. 10:190, Licensure of Mental Health Programs, as N.J.A.C. 8:121, and licensing of such programs by the New Jersey Department of Health pursuant to Reorganization Plans Nos. 001-2017 and 001-2018 and update references to the Division of Mental Health and Addiction Services from the Division of Mental Health Services.

While the Department is readopting these rules with technical changes, it recognizes that further rulemaking may be necessary to update these rules to reflect current practices. Thus, the Department will continue to review the rules and may consider making substantive amendments prior to the next scheduled expiration.

The Department has reviewed the rules and has determined them to be necessary, reasonable, and proper for the purpose for which they were originally promulgated. Therefore, pursuant to N.J.S.A. 30:1-12 and 30:4-27.8-10, and in accordance with N.J.S.A. 52:14B-5.1.c(1), these rules are readopted and shall continue in effect for a seven-year period.

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

SUBCHAPTER 1. GENERAL PROVISIONS

10:37J-1.2 Definitions

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

...
 “Division” or “DMHAS” means the Division of Mental Health and Addiction Services within the Department of Human Services.

...
 “Level I standards” means those standards with which mental health programs must be in full compliance in order to be granted or to continue to receive a full Department of Health license. Level I standards include those standards that relate most directly to consumer rights, safety, and staffing. With specific reference to the PACT program, Level I standards are: all standards [in] at N.J.A.C. 10:37J-2.4, Program intensity, except subsection (e); N.J.A.C. 10:37J-2.5(c), (d)1, (e), (h), and (l), services to be provided and service coordination; and N.J.A.C. 10:37J-2.8(a), (b), (c) (except for paragraphs (c)1 through 8), (d), and (i), staff requirements.

SUBCHAPTER 2. PROGRAM OPERATION

10:37J-2.2 Licensing

In accordance with Department of Health licensing rules applicable to community mental health programs (N.J.A.C. [10:190] **8:121**), each PA shall obtain a license before implementing a PACT program.

10:37J-2.8 Staff requirements

(a)-(c) (No change.)

(d) Each PACT team shall, at a minimum, consist of the following staff. All staff shall be full time, unless otherwise noted below:

1.-3. (No change.)

4. At least one dual disorder specialist who shall hold a bachelor’s degree in a behavioral health field and have a minimum of two years of experience providing dual disorder services to individuals with co-occurring serious and persistent mental illness and substance abuse.

i. A dual disorder specialist shall hold the professional credentials required by the Alcohol and Drug **Counselor** Licensing and Certification Act, N.J.S.A. 45:2D-1 et seq.

ii. (No change.)

5.-7. (No change.)

(e)-(j) (No change.)

10:37J-2.12 Continuous quality improvement activities

(a) (No change.)

(b) The PA shall also:

1. (No change.)

2. Submit initial and follow-up community incident reports for unusual incidents involving PACT consumers within required time frames pursuant to N.J.A.C. 10:37-6[,] **and** [10:37-9.9[,] and the [DMHS]

DMHAS Community Incident Reporting Procedures, pursuant to N.J.A.C. 10:37-6.108;

3.-4. (No change.)

(a)

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

Notice of Readoption

Hospice Services

Readoption: N.J.A.C. 10:53A

Authority: N.J.S.A. 30:4D-1 et seq. and 30:4J-8 et seq.

Authorized By: Sarah Adelman, Commissioner, Department of Human Services.

Agency Control Number: 22-A-01.

Effective Date: November 17, 2022.

Expiration Date: November 17, 2029.

Take notice that pursuant to N.J.S.A. 52:14B-5.1.c, the rules at N.J.A.C. 10:53A, Hospice Services, were scheduled to expire on December 21, 2022. This chapter describes the requirements of the New Jersey Medicaid/NJ FamilyCare fee-for-service programs pertaining to the provision of, and reimbursement for, medically necessary hospice services to eligible beneficiaries, including providers’ and beneficiaries’ requirements and basis of payments for provider and physician services.

N.J.A.C. 10:53A includes five subchapters and two appendices, as described below.

N.J.A.C. 10:53A-1 includes general provisions regarding hospice services, including introductory general provisions, definitions, and information regarding contracting with physicians.

N.J.A.C. 10:53A-2 includes provider requirements regarding enrollment and billing procedures, changing from one hospice agency to another, physician certification and recertification, staffing standards, the administrative policy for admission and discharge from room and board services in a nursing facility, recordkeeping requirements, monitoring requirements, fair hearings, and advance directives.

N.J.A.C. 10:53A-3 includes beneficiary requirements regarding eligibility, the application procedure for medical and financial eligibility, benefit periods, covered hospice services, services unrelated to terminal illness, the plan of care, and fair hearings.

N.J.A.C. 10:53A-4 includes provisions related to the basis of payment including the post-eligibility treatment of the beneficiary’s income, basis of payment for hospice providers and physicians, limitations on reimbursement for hospice services, and claims submission.

N.J.A.C. 10:53A-5 includes provisions regarding the Common Procedure Coding System, including an introduction to procedure codes for hospice services.

The Department of Human Services has reviewed the rules and has determined them to be necessary, reasonable, and proper for the purpose for which they were originally promulgated. Therefore, pursuant to N.J.S.A. 30:4D-1 et seq., and 30:4J-8 et seq., and in accordance with N.J.S.A. 52:14B-5.1.c(1), these rules are readopted and shall continue in effect for a seven-year period.

(b)

DIVISION OF FAMILY DEVELOPMENT

Notice of Readoption

New Jersey Supplemental Nutrition Assistance Program (NJ SNAP)

Readoption: N.J.A.C. 10:87

Authority: N.J.S.A. 30:1-12.

Authorized by Sarah Adelman, Commissioner, Department of Human Services.