

and should be readopted. Therefore, pursuant to N.J.S.A. 52:14B-5.1.c(1), N.J.A.C. 8:50 is readopted and shall continue in effect for seven years.

HUMAN SERVICES

(a)

DIVISION OF MENTAL HEALTH AND ADDICTION SERVICES

Notice of Readoption Community Support Services for Adults with Serious Mental Illnesses

Readoption with Technical Changes: N.J.A.C. 10:37B

Authority: N.J.S.A. 30:1-12, 30:9A-10, and 30:9A-21; and Reorganization Plan 001-2018.

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

Effective Date: June 26, 2023, Readoption;
August 7, 2023, Technical Changes.

New Expiration Date: June 26, 2030.

Take notice that pursuant to N.J.S.A. 52:14B-5.1, the rules at N.J.A.C. 10:37B, Community Support Services for Adults with Serious Mental Illnesses, were scheduled to expire on August 15, 2023.

This chapter sets forth the program standards required of providers of community support services for adults with serious mental illnesses in New Jersey. N.J.A.C. 10:37B is comprised of 11 subchapters. Subchapter 1, General Provisions, describes the scope and purpose of the chapter, defines words and terms used throughout the chapter, and delineates wellness and recovery principles. Subchapter 2, Accessing Community Support Services, describes the process through which a consumer is found eligible, enrolled, and provided with community support services, and sets out the initial tasks required of the provider upon admission. Subchapter 3, Consumer Service Agreement, sets forth standards, provisions, and procedures for consumer service agreements. Subchapter 4, Services, describes services and supports for consumers, coordination and management of services, and the provision of services identified in an individualized rehabilitation plan. Subchapter 5, Staff Qualifications, Responsibilities, and Training, sets forth staffing requirements, including credentials, responsibilities, and training. Subchapter 6, Licensing Community Support Services Programs, describes the licensure process for programs. Subchapter 7, Termination of Services, describes permissible reasons for termination from services, and notifications and procedures related to the termination of services. Subchapter 8, Continuous Quality Improvement, sets forth the standards for a continuous quality improvement program. Subchapter 9, Hearing, Appeals, Complaints, delineates requirements related to complaint, hearing, and appeal procedures. Subchapter 10, Recordkeeping, sets forth the requirements for a consumer's clinical record, progress notes, termination summary, and financial records. Subchapter 11, Policies and Procedures Manual, describes the standards related to the development, implementation, maintenance, and revision of a written policies and procedures manual, and the contents of the manual.

In addition to readopting the existing rules, the Department of Human Services (Department) is proposing technical changes throughout N.J.A.C. 10:37B, including changes to correct regulatory cross-references and update a mailing address. Also, the changes include updates consistent with Reorganization Plan No. 001-2018, under which the Division of Mental Health and Addiction Services retained responsibility for program services on transfer to the Department, while licensing of mental health programs remained with the New Jersey Department of Health (DOH). With respect to the retention of licensing by the DOH, the technical changes address the recodification and readoption of N.J.A.C. 10:190, Licensure of Mental Health Programs, as N.J.A.C. 8:121, Licensure Standards for Mental Health Programs, by the DOH.

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 substantial 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

10:37B-1.2 Definitions

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

... **“DOH” means the New Jersey Department of Health.**

... **“Provider agency” or “PA” is an entity licensed by the [Department] DOH to provide mental health services that has a contract or affiliation agreement (if the requirement for a contract has been waived by the Division) with the Division to provide those services.**

SUBCHAPTER 3. CONSUMER SERVICE AGREEMENT

10:37B-3.1 Standard consumer service agreement for all consumers

(a) The PA shall develop and submit for approval to the Division, prior to use, a consumer service agreement that meets the specifications of this subchapter. In addition, the PA shall obtain written approval from the Department before deleting, adding, or revising in any way the requirements of the consumer service agreement. The initial consumer service agreement and any subsequent revisions shall be submitted for approval to:

New Jersey Department of Human Services
[Office of Licensing] **Division of Mental Health and Addiction Services**

PO Box [707] **362**

Trenton, NJ [08625-0707] **08625-0362**

(b)-(c) (No change.)

SUBCHAPTER 5. STAFF QUALIFICATIONS, RESPONSIBILITIES, AND TRAINING

10:37B-5.2 Staffing credentials and responsibilities

(a) The PA may employ licensed physicians, psychiatrists, psychologists, advance practice nurses, or registered nurses who shall be licensed by the applicable State professional boards. Staff employed [under] **pursuant to** this subsection shall be eligible to provide clinical and/or administration supervision and shall be eligible to deliver the following specified services, provided that staff is authorized to perform that service under their professional licensure, certification, or credentialing standards:

1.-4. (No change.)

5. Perform crisis intervention pursuant to N.J.A.C. 10:37B-4.4[(a)24] **(b)24**; and

6. (No change.)

(b)-(h) (No change.)

SUBCHAPTER 6. LICENSING COMMUNITY SUPPORT SERVICES PROGRAMS

10:37B-6.1 Licensure process

(a) The licensure processes and fees specified [in] **at** N.J.A.C. [10:190] **8:121, Licensure Standards for Mental Health Programs**, shall apply to community support services.

(b) (No change.)

SUBCHAPTER 7. TERMINATION OF SERVICES

10:37B-7.3 Termination by the community support services program
 (a) If the consumer is terminated pursuant to N.J.A.C. 10:37B-7.1(a)5 or 6, the PA shall notify the Division of the reasons for the termination and shall notify the consumer of his or her right to file a complaint pursuant to N.J.A.C. 10:37-[4.5]4.6. The PA shall submit to the Division, upon its request, any records relating to the services provided to the consumer, and copies of any rule, policy, notifications, attempts to contact or engage the consumer, or any other writing that documents the circumstances that led to the termination of services.
 (b) The Division shall notify the Department of the rule violated in any termination pursuant to N.J.A.C. 10:37B-9.1(a)[5], and at the time of the next licensure review, the Department shall [assure] **ensure** that the rule was agreed to by all consumers who have signed a consumer service agreement and is reasonable, both on its face and as applied.

SUBCHAPTER 9. HEARINGS, APPEALS, COMPLAINTS

10:37B-9.1 Development and communication of complaint procedures
 (a) All PAs shall establish internal complaint procedures, which will be subject to [the Department's] **DOH** review and approval at the time of initial licensing and licensing renewal. Complaint procedures shall allow for a consumer, or his or her designee, to report a grievance to an identified administrator of the PA regarding services provided or which failed to be provided, to seek appropriate redress related thereto, and to have corrective action taken as might be warranted.
 (b)-(d) (No change.)

SUBCHAPTER 11. POLICIES AND PROCEDURES MANUAL

10:37B-11.2 Content of the policies and procedures manual
 (a)-(f) (No change.)
 (g) Safety. The manual shall set forth rules and procedures that will promote and assure the safety of consumers, staff, visitors, and the general public, including, but not limited to:
 1. (No change.)
 2. Providing, as needed, emergency response services in accordance with N.J.A.C. 10:37B-4.4[(a)25]**(b)25**; and
 3. (No change.)
 (h)-(l) (No change.)

(a)

**DIVISION OF FAMILY DEVELOPMENT
 Notice of Administrative Changes
 Increases to Work First New Jersey Benefit
 Schedules and Emergency Assistance Hotel and
 Motel Per Diem Rates**

N.J.A.C. 10:90-3.3, 3.5, 3.6, 3.18, and 6.7

Effective Date: July 10, 2023.

Take notice that, the State Fiscal Year (FY) 2023 appropriations act, P.L. 2022, c. 49, increased the Work First New Jersey (WFNJ) benefit levels by 20 percent above the amounts in effect during FY 2019. Therefore, the Division of Family Development (DFD) is changing the WFNJ Temporary Assistance for Needy Families (TANF) and General Assistance (GA) initial maximum allowable income and maximum benefit payment level schedules at N.J.A.C. 10:90-3 to codify the statutorily proscribed amounts required pursuant to P.L. 2022, c. 49.

Take further notice that P.L. 2022, c. 49, requires DFD to increase the Emergency Assistance Program per diem reimbursement rate for hotels and motels by \$12.00 greater than the rates in effect during FY 2022. The changes at N.J.A.C. 10:90-6.7 reflect these increased reimbursement rates.

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

SUBCHAPTER 3. FINANCIAL ELIGIBILITY-INCOME, RESOURCES, BENEFITS

10:90-3.3 WFNJ/TANF-initial allowable maximum income and maximum benefit payment levels (Schedules I and II)
 (a) (No change.)
 (b) Schedule II below identifies the WFNJ/TANF maximum allowable benefit payment levels for the appropriate assistance unit size that shall be used for families with dependent children. As long as the assistance unit's countable income is less than the applicable benefit level, WFNJ/TANF financial eligibility exists. When the total countable income equals or exceeds the applicable benefit level, the assistance unit is no longer eligible for WFNJ/TANF benefits except for cases with earned income that are subject to six-month reporting requirements. Such cases need not report changes in earned income until such time as the assistance unit's total income exceeds 130 percent of the Federal Poverty Level (FPL). However, if the assistance unit does report a change, the county/municipal agency shall act on that change.

WFNJ/TANF Schedules I and II

WFNJ/TANF Initial Maximum Allowable Income Levels and Maximum Benefit Payment Levels

Families with Dependent Children

Schedule I		Schedule II
Initial Maximum Allowable <u>Income Levels</u>	Number in <u>Assistance Unit</u>	Maximum Benefit <u>Payment Levels</u>
[243] \$321	1	[\$162] \$214
[483] \$638	2	[322] \$425
[636] \$839	3	[424] \$559
[732] \$966	4	[488] \$644
[828] \$1,092	5	[552] \$728
[924] \$1,221	6	[616] \$814
[1,015] \$1,341	7	[677] \$894
[1,092] \$1,442	8	[728] \$961
Add [\$75] \$99 for each additional person	More than 8	Add [\$50] \$66 for each additional person

10:90-3.5 WFNJ/GA employable, initial allowable maximum income, and maximum benefit payment levels (Schedules III and IV)
 (a) (No change.)

(b) Schedule IV below identifies the WFNJ/GA maximum allowable benefit payment levels for the appropriate assistance unit size that shall be used for employable single adults and couples without dependent children. As long as the assistance unit's countable income is less than the applicable benefit level, WFNJ/GA financial eligibility exists. When the countable income equals or exceeds the applicable benefit level, the assistance unit is no longer eligible for WFNJ/GA benefits except for cases with earned income that are subject to six-month reporting requirements. Such cases need not report changes in earned income until such time as the assistance unit's total income exceeds 130 percent of the Federal Poverty Level (FPL). However, if the assistance unit does report a change, the county/municipal agency shall act on that change.