Who is covered in New Jersey’s Medicaid Program?

**ELIGIBILITY GROUPS**

**FFS**
- Incarcerated
- Undocumented Immigrants
- Children (0-18 years)
- Current & Former Foster Care Children
- Parents and other Caretaker Relatives
- Pregnant Women
- Aged, Blind, and Disabled Adults
- Dual Eligibles
- Disabled Children
- Newly Eligible Adults
- Qualified Non-Citizens
- American Indians/Alaskan Natives
- Intellectual and Developmental Disabilities

**MCO**
- Incarcerated
- Undocumented Immigrants
- Children (0-18 years)
- Current & Former Foster Care Children
- Parents and other Caretaker Relatives
- Pregnant Women
- Aged, Blind, and Disabled Adults
- Dual Eligibles
- Disabled Children
- Newly Eligible Adults
- Qualified Non-Citizens
- American Indians/Alaskan Natives
- Intellectual and Developmental Disabilities

* Inpatient hospital services only.
** Qualified non-citizens are subject to a 5-year waiting requirement, except for children under 18 years of age and pregnant women.
+ Emergency Medicaid services only.

**Important News**

February 2013 - The governor accepted federal funding for full Medicaid expansion on the provision that the state would continue to offer expanded Medicaid if the federal government maintains its promise to pay at least 90 percent of the cost of covering the population eligible under the expansion guidelines.

November 2016 - New Jersey releases a new MCO contract with amendments to members of MLTSS. Included in the changes: MCOs must now reimburse members for dental care when they transition from fee-for-service to an MCO, substance use disorders can only be treated for individuals who qualify for MLTSS, MCOs may now have 45 days to determine a plan of care for new members, and MLTSS members may withdraw at any time.

March 2017 - New Jersey Department of Human Services declares that it intends to spend an additional $89.7 million on the Division of Developmental Disabilities in FY18.

May 2017 - New Jersey lawmakers are supportive of S1016/A320 to implement a minimum reimbursement rate for personal care services to Medicaid enrollees. The proposed rate is $18/hour, the same as the Medicaid fee-for-service program. It’s estimated that the change would lead to $16 million in Medicaid funding (half of which would come from federal matching funds).

**Medicaid Medical Director’s Network**

The State of New Jersey is planning to integrate the physical and behavioral health delivery systems.

**Do Medicaid health plans provide coverage?**

- Aetna Better Health of New Jersey
- Amerigroup NJ
- Horizon NJ Health
- UnitedHealthcare Community Plan of New Jersey
- WellCare

*Excludes ACO options.

**How has New Jersey’s Medicaid program engaged in Managed Care?**

The New Jersey Comprehensive Waiver was created to combine existing waivers and expand managed care programs to include long-term services and supports (LTSS) as well as home and community-based services (HCBS). The waiver also provides coverage for newly eligible adults ages 18-65 with an income of 25%-100% of the federal poverty level (FPL) who otherwise are ineligible for Medicaid.

**SECTION 1115 WAIVERS**

- APPROVAL: 9/14/2011
- EFFECTIVE: 10/2/2012
- EXPIRATION: 6/30/2022

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Value-Based Healthcare Initiatives
New Jersey’s Behavioral Health Homes (BHHs) serves individuals with severe mental illness, those with a substance use disorder and a chronic medical condition, and those with a substance use disorder and risk of a chronic medical condition. Services are also targeted to individuals who are high utilizers of medical and behavioral health care services.12,13

Oral Health
Services for children:19
- Cleanings
- Fluoride treatments (with fluoride varnishes)
- Sealants
- Space maintainers
- X-rays: bitewing, full mouth, panoramic
- Diagnostic services: oral health screening or assessment, dental examinations, and assessment or risk for tooth decay
- Fillings: silver amalgam and tooth-colored composite
- Crowns/tooth caps: stainless steel crowns
- Root canals on baby teeth
- Oral surgery: simple extractions, surgical extractions, care of abscesses, cleft palate treatment, cancer treatment, and treatment of fractures
- Emergency Room services
- Inpatient hospital services
- Non-intravenous conscious sedation
- Analgesia (nitrous oxide)

Services for adults:19
- Oral evaluation twice a year
- Emergency exams/evaluations – as needed to treat problems
- Radiographs (X rays) or digital images to check for cavities and other oral diseases
- Cleaning twice a year
- Fluoride treatments
- Restorations (fillings)
- Crowns**
- Periodontal treatment**
- Endodontic treatment (root canals)**
- Extractions
- Complete and partial dentures**

**These services may need to be approved by the health plan before being provided.

Family Planning
Specific family planning services vary depending on the selected health plan. Covered services may include:

Aetna Better Health of New Jersey:14
- Annual exams and pap tests
- Pregnancy and other lab tests
- Prescription and over-the-counter birth control medication and devices
- Birth control medical visits
- Education and counseling
- Treatment of problems related to the use of birth control, including emergency services

WellCare:15
- Advice and/or prescriptions for birth control
- HIV/AIDS testing
- Breast cancer exams
- Pelvic exams
- Genetic testing and counseling
- Pregnancy tests

Amerigroup NJ:16
- Services needed to delay or prevent pregnancy
- Pregnancy testing
- Genetic testing and counseling
- Contraceptives (including oral)
- Follow-up care for problems linked with birth control methods issued by the FP provider
- Sterilizations
- Pap smears and other preventive services

UnitedHealthcare Community Plan:17
- Services that help manage the timing of pregnancies, including birth control products and procedures

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**Mental Health and Substance Abuse Disorder**

Depending on the plan that the enrollee is covered by, services may be carved in or carved out. Children above 142% (plans B, C, and D) have more limited coverage than the services listed below. All plans have a 24-hour behavioral health hotline.

Enrollees using Asta Better Health of New Jersey have coverage for mental health and substance abuse services from Medicaid-approved providers. Members who are within the Division of Developmental Disabilities (DDD) or MLTSS also have coverage for psychotherapy and psychological counseling. Other services include:
- Adult rehabilitation
- Atypical antipsychotic drugs within the specific therapeutic drug classes
- Inpatient psychiatric hospital services for individuals under 21 years of age, or age 65 and older
- Inpatient substance abuse treatment
- Intermediate care facilities/intellectual disability
- Outpatient mental health
- Outpatient substance abuse

Enrollees covered under UnitedHealthcare Community Plan may receive the following services:
- Adult mental health rehabilitation (in a supervised residential group home)
- Atypical antipsychotic drugs
- Inpatient psychiatric hospital services for individuals under 21 years of age or age 65 and older
- Inpatient substance use
- Intermediate care facilities/intellectual disability
- Behavioral health inpatient-acute care hospital
- Outpatient substance use treatment
- Outpatient behavioral health
- Partial care for behavioral health
- Acute partial hospitalization

Members of AmeriGroup NJ are covered for these services:
- Intake evaluation
- Off-site crisis intervention
- Family therapy
- Family meetings
- Psychological testing
- Drug management
- Detoxification in an acute care inpatient setting
- Inpatient hospital (includes rehabilitation hospitals and special hospitals)
- Acute psychiatric hospital stays
- Targeted Case Management
- Community support services
- Behavioral health homes
- Psychiatric emergency rehabilitation services
- Mental health outpatient
- Substance use disorder outpatient
- Adult mental health rehabilitation
- Inpatient psychiatric services
- Opioid treatment services
- Psychiatrist, psychologist
- Partial hospitalization

Members of WellCare have coverage for the following services:
- Inpatient hospital
- Outpatient services
- Home health

Medicaid enrollees have coverage for the following drug therapies under all health plans: methadone, naltrexone, naloxone, acamprosate, disulfiram

**Women’s Health**

Covered services for pregnant women include:
- All services provided in the office, clinic, or other medical facility, including perinatal care
- Laboratory services

The New Jersey Cancer Education and Early Detection (NJCEED) Program provides services for breast, cervical, colorectal, and prostate cancers to low-income, underinsured or uninsured individuals. Services provided by NJCEED include:
- Education
- Outreach
- Screening
- Case Management
- Tracking
- Follow-up
- Facilitation into Treatment

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**Federal**

- President Johnson signs Social Security Amendments of 1965, creating Medicaid as public health program for the poor.
- Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) services are a requirement for children enrolled in Medicaid.
- Supplemental Security Income (SSI) program becomes Medicaid eligibility category for the elderly and persons with disabilities.
- Home and Community-Based Services (HCBS) waivers created for Long-Term Care (LTC) and Disproportional Share Hospital (DSH) payments.
- Children and pregnant women become mandatory Medicaid eligibility groups.
- Children up to age 6 and pregnant women up to 133 percent of the federal poverty level (FPL) become eligible; EPSDT benefit expanded. Mandatory eligibility extended to children ages 6 to 18 years in families up to 100 percent FPL; eligibility phased in from 1990 through 2002.
- Balanced Budget Act of 1997 allows Medicaid to be delivered through managed care organizations; State Children’s Health Insurance Program (CHIP) created; states now have option to provide coverage for uninsured children in low-income families above FPL.
- Olmstead decision allows expanded HCBS coverage for persons with disabilities.
- Affordable Care Act (ACA) expands Medicaid eligibility to adults with incomes up to 138 percent FPL.
- ACA implementation begins.
- 31 states and the District of Columbia (DC) have expanded Medicaid since passage of the ACA.

**New Jersey**

- New Jersey adopts the Medicaid program.  
- New Jersey begins transitioning Medicaid enrollees into managed care. Children are moved through the KidCare program.
- New Jersey expands KidCare to parents and some childless adults under NJ FamilyCare.
- Long-term services and supports (LTSS) are provided through a fee-for-service (FFS) arrangement.  
- New Jersey provides Medicaid coverage for childless adults with incomes up to 23% of the federal poverty level (FPL).  
- Governor Christie signs a law to begin a 3-year experimental state Medicaid Accountable Care Organization (ACO) program.  
- New Jersey expands existing managed care programs to include long-term services and supports and behavioral health services, and will extend home and community-based services (HCBS) to additional populations, while also transitioning many from fee-for-service into managed care.
- New Jersey authorizes Medicaid expansion to cover eligible adults up to 138% of the FPL.
- Three ACO’s begin operation in Camden, Trenton and Newark. The ACO’s work with existing MCOs, but currently only cover 8% of the Medicaid population.
- New Jersey creates the State Targeted Opioid Response Initiative (STORI), a fee-for-service treatment initiative, to address the opioid crisis. The services include assessment, detox, short-term residential, outpatient/ intensive outpatient, and methadone outpatient/ intensive outpatient.