November 18, 2016

Sandra Phelps
Project Officer
Centers for Medicare & Medicaid Services
Center for Medicaid & CHIP Services
7500 Security Blvd., Mail Stop S2-01-16
Baltimore, MD 21244-1850

RE: NJ 1115 Comprehensive Waiver Amendment

Dear Ms. Phelps,

This letter is official written notice that the Division of Medical Assistance and Health Services (DMAHS) requests to amend the Special Terms and Conditions (STCs) of the 1115 New Jersey Comprehensive Waiver (demonstration) as it pertains to the Managed Long Term Services and Supports (MLTSS) Program.

The amendment request is to define the level of care requirements in STC 69 for adults and children seeking enrollment in MLTSS. When the 1915c waivers were consolidated into the demonstration, it was intended that the level of care requirements for adults and children would continue as they stood under the previous programs. However, when the STCs were finalized, the level of care requirement allowed for an adult’s definition of NF LoC to be used for a child, thus enabling children whose families have a higher income and who may not be appropriate for MLTSS services to enter the program. There are currently less than 100 children who would not meet the requirements requested through this amendment. As part of this request, the state will grandfather all children who were enrolled under the current level of care requirements, so long as they continue to meet those requirements during the assessment process. The state will ensure that these children are adequately assessed according to the standards as required by the STCs, state and federal regulations.

As a requirement for enrollment into MLTSS, the state wishes to define the level of care required for adults as:

An adult (ages 21 and older) individual shall be clinically eligible for MLTSS services when the individual’s standardized assessment demonstrates that the individual satisfies any one or more of the following three criteria:

1) The individual:
a. Requires limited assistance or greater with three or more activities of daily living; and/or
b. Exhibits problems with short-term memory and is minimally impaired or greater with decision making ability and requires supervision or greater with three or more activities of daily living; or
c. Is minimally impaired or greater with decision making and, in making himself or herself understood, is usually understood or greater and requires supervision or greater with three or more activities of daily living.

The level of care requirement for children (ages birth through 20) to be eligible for enrollment in MLTSS is:

The child exhibits functional limitations, identified in terms of developmental delay or functional limitations in specific age-appropriate activities of daily living, requiring nursing care over and above routine parenting and meets one of the following nursing care criteria:

1) Medical and/or intense therapeutic services for the medically complex child who exhibits a severe illness that requires complex skilled nursing interventions 24 hours per day, seven days per week.
   a. Skilled Nursing Services shall be based upon, but not limited to, at least one of the following:
      i. Dependence on mechanical ventilation
      ii. The presence of an active tracheostomy and the need for deep suctioning
      iii. The need for around-the-clock nebulizer treatments with chest physiotherapy
      iv. Gastrostomy feeding when complicated by frequent regurgitation and/or aspiration
      v. A seizure disorder manifested by frequent prolonged seizures requiring emergency administration of anticonvulsant medication; or

2) Medical and/or intense therapeutic services for the technology dependent child who requires a medical device that the Federal Food and Drug Administration has classified pursuant to 21 C.F.R. 860.3, as amended and supplemented, as a life-supporting or life-sustaining device that is essential to, or that yields information that is essential to, the restoration or continuation of a bodily function important to the continuation of human life.
   a. These services shall be provided if the life-supporting or life-sustaining device is necessary to compensate for the loss of a vital function, to avert death or further disability, and if the use of the device requires ongoing skilled nursing intervention.
Phelps
November 2016
Page 3

The state held a public comment period from July 13, 2016 through August 13, 2016. One comment was received. This comment stated that this request is different than what was required under the former waivers. The state reviewed the requirements and determined that the requirements are the same and is moving forward with the request.

There is no impact to budget neutrality for this request. The original budget neutrality calculations were based on the level of care requirements that are now proposed and therefore will show savings for the state when reporting the actual expenditures.

The Waiver Evaluation already includes this group in its current evaluation parameters and does not need to be revised.

Please contact me at 609-588-2600 if you have any questions or need additional information.

Sincerely,

[Redacted]

Meghan Davey
Director

MD:sdm

c: Elizabeth Connolly
   Carol Grant
   Nancy Day
   Michael Melendez