

[First Reprint]

ASSEMBLY, No. 4049

STATE OF NEW JERSEY

220th LEGISLATURE

INTRODUCED MAY 19, 2022

Sponsored by:

Assemblywoman ANGELA V. MCKNIGHT

District 31 (Hudson)

Assemblywoman VERLINA REYNOLDS-JACKSON

District 15 (Hunterdon and Mercer)

Assemblyman DANIEL R. BENSON

District 14 (Mercer and Middlesex)

Co-Sponsored by:

**Assemblymen Danielsen, Verrelli, Assemblywomen Jaffer, Jimenez and
Assemblyman Guardian**

SYNOPSIS

Provides for presumptive eligibility for home and community-based services under Medicaid.

CURRENT VERSION OF TEXT

As reported by the Assembly Aging and Senior Services Committee on June 2, 2022, with amendments.



(Sponsorship Updated As Of: 11/14/2022)

1 AN ACT concerning presumptive eligibility for Medicaid home and
2 community-based services and supplementing Title 30 of the
3 Revised Statutes.

4

5 **BE IT ENACTED** *by the Senate and General Assembly of the State*
6 *of New Jersey:*

7

8 1. a. The Department of Human Services shall provide for the
9 presumptive eligibility for home and community-based services
10 under Medicaid for an individual who is: seeking home and
11 community-based services; awaiting an eligibility determination for
12 Medicaid and any applicable Medicaid waiver program offering
13 home and community-based services; and likely to be financially
14 and clinically eligible for Medicaid and any applicable Medicaid
15 waiver program offering home and community-based services, as
16 determined by the department.

17 b. The department shall provide Medicaid coverage for eligible
18 home and community-based services to an individual who is
19 granted ¹**["presumptively"] presumptive**¹ eligibility pursuant to this
20 section. Coverage provided under this subsection shall begin upon
21 the receipt of an individual's request for services, pursuant to
22 subsection c of this section, and shall be terminated if the individual
23 is determined clinically or financially ineligible for home and
24 community-based services under Medicaid during the eligibility
25 determination process.

26 c. An individual seeking presumptive eligibility for home and
27 community-based services under Medicaid shall submit a request to
28 the department in a manner and form as determined by the
29 commissioner.

30 d. ¹**["The"] An**¹ individual granted presumptive eligibility
31 pursuant to this section shall be required to submit a completed
32 application for Medicaid and any applicable Medicaid waiver
33 program offering home and community-based services no later than
34 the end of the month following the month in which presumptive
35 eligibility is granted.

36 e. The department shall provide each individual granted
37 presumptive eligibility pursuant to this section a written notice
38 explaining the terms and conditions of presumptive eligibility and
39 the home and community-based services the individual will be
40 eligible to receive.

41 f. The commissioner shall apply for such State plan amendments
42 or waivers as may be necessary to implement the provisions of this
43 section and to secure federal financial participation for State
44 Medicaid expenditures under the federal Medicaid program.

EXPLANATION – Matter enclosed in bold-faced brackets **["thus"]** in the above bill is
not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

¹Assembly ASE committee amendments adopted June 2, 2022.

- 1 g. As used in this section:
- 2 “Commissioner” means the Commissioner of Human Services.
- 3 “Department” means Department of Human Services.
- 4 “Eligibility determination” means the administrative process by
- 5 which the Division of Medical Assistance and Health Services in
- 6 the Department of Human Services or a county welfare agency
- 7 reviews a beneficiary’s income, financial resources, and
- 8 circumstances relating to the beneficiary’s application for benefits
- 9 received under Medicaid or any applicable Medicaid waiver
- 10 program offering home and community-based services.
- 11 “Medicaid” means the Medicaid program established pursuant to
- 12 P.L.1968, c.413 (C.30:4D-1 et seq.).
- 13
- 14 2. The Commissioner of Human Services, in accordance with
- 15 the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-
- 16 1 et seq.), shall adopt such rules and regulations as the
- 17 commissioner deems necessary to carry out the provisions of this
- 18 act.
- 19
- 20 3. This act shall take effect immediately.