SENATE, No. 3495 STATE OF NEW JERSEY 220th LEGISLATURE

INTRODUCED JANUARY 19, 2023

Sponsored by: Senator JOSEPH F. VITALE District 19 (Middlesex) Senator GORDON M. JOHNSON District 37 (Bergen)

Co-Sponsored by: Senators Gill, Diegnan, Singer, Stanfield, Thompson, Turner and Ruiz

SYNOPSIS

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

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 5/11/2023)

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

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

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

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

d. An individual granted presumptive eligibility pursuant to
this section shall be required to submit a completed application for
Medicaid and any applicable Medicaid waiver program offering
home and community-based services no later than the end of the
month following the month in which presumptive eligibility is
granted.

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

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

46 g. As used in this section:

47 "Commissioner" means the Commissioner of Human Services.

48 "Department" means Department of Human Services.

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"Eligibility determination" means the administrative process by which the Division of Medical Assistance and Health Services in the Department of Human Services or a county welfare agency reviews a beneficiary's income, financial resources, and circumstances relating to the beneficiary's application for benefits received under Medicaid or any applicable Medicaid waiver program offering home and community-based services.

8 "Medicaid" means the Medicaid program established pursuant to
9 P.L.1968, c.413 (C.30:4D-1 et seq.).

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11 2. The Commissioner of Human Services, in accordance with 12 the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-13 1 et seq.), shall adopt such rules and regulations as the 14 commissioner deems necessary to carry out the provisions of this 15 act.

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3. This act shall take effect immediately.

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STATEMENT

22 This bill requires the Department of Human Services 23 (department) to provide for the presumptive eligibility for home and 24 community-based services under Medicaid for an individual who is: 25 seeking home and community-based services; awaiting an 26 eligibility determination for Medicaid and any applicable Medicaid 27 waiver program offering home and community-based services; and 28 likely to be financially and clinically eligible for Medicaid and any 29 applicable Medicaid waiver program offering home and 30 community-based services, as determined by the department.

The department will provide Medicaid coverage for eligible home and community-based services to an individual who is granted presumptive eligibility. Coverage will begin upon the receipt of an individual's request for services and will end if the individual is determined clinically or financially ineligible for home and community-based services under Medicaid during the eligibility determination process.

38 An individual seeking presumptive eligibility for home and 39 community-based services under Medicaid will be required to submit a request to the department in a manner and form as 40 41 determined by the Commissioner of Human Services 42 (commissioner). The individual granted presumptive eligibility will 43 be required to submit a completed application for Medicaid and any 44 applicable Medicaid waiver program offering home and 45 community-based services no later than the end of the month 46 following the month in which presumptive eligibility is granted. 47 The department will provide each individual granted presumptive 48 eligibility pursuant to this bill a written notice explaining the terms

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- and conditions of presumptive eligibility and the home and
 community-based services the individual will be eligible to receive.
- 3 The commissioner will apply for such State plan amendments or
- 4 waivers as may be necessary to implement the provisions of this bill
- 5 and to secure federal financial participation for State Medicaid
- 6 expenditures under the federal Medicaid program.