DEFICIAL

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT State/Territory: <u>New Jersey</u>

In accordance with section 1902(a)(68) of the Social Security Act, the following describes the State's anticipated methodology of compliance oversight and the frequency with which the State, coordinated by the Medicaid Fraud Division (MFD) of the Office of the State Comptroller, will re-assess compliance on an ongoing basis with Section 6032 of the Deficit Reduction Act of 2005 ("Section 6032"):

- 1. Entities currently licensed or certified by, or receiving Title XIX payments in a program administered by, the New Jersey Department of Health and Senior Services (DHSS), now known as the Department of Health, including, but not limited to, nursing homes, hospitals, special hospitals and rehabilitation centers, non-State psychiatric hospitals, medical day care centers, independent clinics, home health agencies, ICFs/MR, hospices and other entities, will be required by MFD, with assistance from the Division of Medical Assistance and Health Services (DMAHS) within the Department of Human Services (DHS), to complete, certify the accuracy of, and submit to MFD a form once each year in which they answer questions about compliance with Section 6032. Initial certifications for calendar year 2007 will be mailed to providers and other entities subject to Section 6032 no later than October 1, 2007, with a deadline for submission of the completed forms to DHSS that will not be later than December 31, 2007. In addition, MFD, with assistance from DMAHS, will verify the accuracy of the answers in the certification form by requiring once each year that a sample of providers or other entities subject to Section 6032 submit to MFD documentation with the completed certification form that is referred to in or substantiates the answers in the certification form. The initial requests for submission of documentation will be mailed by DHSS with the certification form no later than October 1, 2007, with a deadline for submission of the documentation to DHSS that will not be later than December 31, 2007. Certifications for calendar year 2008 and subsequent years will be required annually.
- 2. Every managed care organization (MCO) will be required to complete, certify the accuracy of, and submit to MFD a form annually in which the MCO answers questions about compliance with Section 6032. Initial certifications for calendar year 2007 will be mailed to the MCOs by DMAHS no later than October 1, 2007, with a deadline for submission of the completed certification forms to DMAHS that will not be later than December 31, 2007. In addition, MCO compliance with Section 6032 will be verified by requesting documentation from all MCOs. The first annual verification of compliance with Section 6032 began as part of the annual assessment of MCO operations during the week of June 18, 2007, with the onsite review phase to start in early August, 2007. Verification of compliance will be concluded no later than December 31, 2007. Certifications and documentation for calendar year 2008 and subsequent years will be required annually.

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- 3. Except as noted below, retail and institutional pharmacy entities and medical supplier and durable medical equipment supplier entities will be required to complete, certify the accuracy of, and submit to MFD a form every year in which they answer questions about compliance with Section 6032. In addition, MFD, with assistance from DMAHS, will verify compliance with Section 6032 annually by requesting documentation from a sample of these entities that is referred to in or substantiates the answers in the certification form. Initial completion of the certification form will occur in calendar year 2007 and 2008. Forms completed in 2007 will certify compliance for 2007. Forms completed in 2008 will certify compliance for 2007 and 2008.
- 4. Registered accredited personal care assistance/homemaker and private duty nursing entities will be required to complete, certify the accuracy of, and submit to MFD a form annually in which they answer questions about compliance with Section 6032. In addition MFD, with assistance from DMAHS, will verify compliance with Section 6032 by requesting documentation from a sample of these entities that is referred to in or substantiates the answers in the certification form. Initial completion of the certification form for calendar years 2007 and 2008 and verification of compliance with Section 6032 will occur over a one-year period that will begin no later than October 1, 2007 and be concluded no later than September 30, 2008. Certifications for calendar year 2008 and subsequent years will be required annually.
- 5. State psychiatric hospitals and the Division of Developmental Disabilities (DDD) Community Care Waiver Unit will be required to complete, certify the accuracy of, and submit to MFD a form annually in which they answer questions about compliance with Section 6032. In addition, MFD, with assistance from DMAHS, will verify compliance with Section 6032 annually by requesting documentation from the DDD Community Care Waiver Unit and from a sample of state psychiatric hospitals that is referred to in or substantiates the answers in the certification form. Initial completion of the certification form for calendar years 2007 and 2008 and verification of compliance with Section 6032 will occur as part of the DHS Audit Plan over a one-year period that will begin no later than October 1, 2007 and be concluded no later than September 30, 2008. Certifications for calendar year 2008 and subsequent years will be required annually.
- 6. The DHSS Early Intervention System program will be required to complete, certify the accuracy of, and submit to MFD a form every year in which it answers questions about compliance with Section 6032. In addition, MFD, with assistance from DMAHS, will verify compliance with Section 6032 every year by requesting documentation that is referred to in or substantiates the answers in the certification form. Initial completion of the certification form for calendar year 2007 and verification of compliance with Section 6032 will begin no later than October 1, 2007 and be concluded no later than December 31, 2007. Certifications will be required every year.

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- 7. Residential treatment centers, home care entities, independent clinics and rehabilitation entities licensed by the Department of Children and Families (DCF) will be required to complete, certify the accuracy of, and submit to MFD a form once every year in which they answer questions about compliance with Section 6032. In addition, MFD, with assistance from DMAHS, will verify compliance with Section 6032 by these licensees once every year by requesting that documentation that is referred to in or substantiates the answers in the certification form be submitted by a sample of these licensees to MFD with the completed form. Requests for submission of the initial certification forms for calendar year 2007 and documentation will be mailed by DCF to licensees subject to Section 6032 no later than October 1, 2007, with a deadline for submission to DCF of the completed certification forms and documentation that will not be later than December 31, 2007. Certifications for subsequent years will be required every year.
- 8. Home care providers and independent clinics licensed for residential services by DHS/Mental Health Licensing (DHS/MHL) will be required to complete, certify the accuracy of, and submit to MFD a form every year in which they answer questions about compliance with Section 6032. In addition, a sample of these entities will verify compliance with Section 6032 by submitting to MFD documentation that is referred to in or substantiates the answers in the certification form. Initial completion of the certification form for calendar year 2007 and verification of compliance with Section 6032 will occur over a one-year period that will begin no later than October 1, 2007 and be concluded no later than September 30, 2008. Certifications for calendar year 2008 and subsequent years will be required annually.
- 9. Physician groups and other entities not covered under paragraphs 1 through 8 above will be required to complete, certify the accuracy of, and submit to MFD a form every year in which they answer questions about compliance with Section 6032. In addition, a sample of these entities will be requested to submit to MFD with the certification form every year documentation that is referred to in or substantiates the answers in the certification form in order to verify compliance with Section 6032. Initial completion of the certification form for calendar year 2007 and verification of compliance will begin no later than October 1, 2007 and be concluded no later than December 31, 2007. Certifications for calendar year 2008 and subsequent years will be required annually. Completion of the certification form and verification of compliance will be monitored by MFD, with assistance from DMAHS
- 10. Onsite verification of compliance with Section 6032 may be conducted by MFD as part of an MFD review, audit or investigation of any entity mentioned in paragraphs 1 through 9 above.

11. If a provider or other entity fails to comply with any of the requirements of Section 6032, it may be subject to sanctions, including but not limited to, the following:

(a) Termination of its existing provider agreement(s) and provider number(s);

(b) Denial of any future provider application(s), or denial of approval to merge with or acquire other providers, during the period of non-compliance or for another specific period of time;

(c) Prepayment monitoring under N.J.A.C. 10:49-8.2(a)1.ii;

(d) Full or partial suspension, debarment or disqualification under N.J.A.C. 10:49-11.1.

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