



State of New Jersey  
Department of Human Services  
Division of Medical Assistance & Health Services

# NEWSLETTER

Volume 10 No. 75

October 2000

**TO:** CEOs/Directors/Managers of Billing Offices  
Acute Care Hospitals  
Federally Qualified Health Centers

**SUBJECT:** NJ FamilyCare Presumptive Eligibility program

**EFFECTIVE:** Immediately

**BACKGROUND:** The Division of Medical Assistance and Health Services is pleased to announce that the NJ FamilyCare Presumptive Eligibility Program was implemented on September 1, 2000.

The intent of this program is provide healthcare benefits to parents and caretakers, single adults, couples without dependent children, and certain children who were ineligible for Medicaid/NJ KidCare because of their immigrant status, who appear to meet the eligibility requirements for NJ FamilyCare, based on a preliminary and unverified eligibility screening done by a certified Presumptive Eligibility Provider. This process will provide immediate access to medical services while the applicant(s) is awaiting a full determination of eligibility for NJ FamilyCare benefits.

Any adult found presumptively eligible under NJ FamilyCare is limited to only one lifetime continuous period of presumptive eligibility. Any child found presumptively eligible under NJ FamilyCare is limited to one continuous period of presumptive eligibility in any 12-month cycle.

Although State rules make it possible for every acute care hospital or Federally Qualified Health Center to become a Presumptive Eligibility Provider, the rules allow only those who have participated in a NJ FamilyCare Presumptive Eligibility Training Workshop, conducted by the Division of Medical Assistance and Health Services, to be certified to perform Presumptive Eligibility determinations for the NJ FamilyCare Program.

As of September 1, 2000, **certified** Presumptive Eligibility Providers were permitted to begin determining presumptive eligibility for any individual who presents at their facility for medical care and who appears to meet the eligibility requirements for the program. Certification to perform presumptive eligibility for other programs does not qualify as "certification" for the purposes of NJ FamilyCare.

Initially, once an adult has been determined presumptively eligible for the NJ FamilyCare Program, he or she is limited to receive only those services which are provided by acute care hospitals and Federally Qualified Health Centers during his/her presumptive eligibility period. **Pharmacy services will be available to those adults found presumptively eligible for NJ FamilyCare on or after October 1, 2000.**

Any child determined presumptively eligible for NJ FamilyCare is eligible to receive those services that are available under the NJ KidCare Plan related to his or her family income. Children are eligible to receive services from any Medicaid/NJ FamilyCare participating provider during their presumptive eligibility period.

Certifications of Presumptive Eligibility (FD-399) completed by certified Presumptive Eligibility Providers should be forwarded to the Division of Medical Assistance and Health Services for processing as soon as possible after the provider has made a determination of presumptive eligibility.

Any eligible child whose name appears on a Certification of Presumptive Eligibility will be processed for presumptive eligibility and added to the Medicaid Eligibility File in the usual manner. However, because the Medicaid Eligibility System will not be fully operational for the adult group of eligible individuals under NJ FamilyCare, an adult beneficiary's presumptive eligibility will not appear on the Medicaid Eligibility File until the beginning of October, and therefore, it will appear that he/she has no eligibility until that time.

In the interim, and until the modifications to the Medicaid Eligibility File have been completed, if there is a question about an individual's eligibility, or if it becomes necessary for a provider to verify presumptive eligibility, the provider may call the Presumptive Eligibility Unit at (609) 588-2911 for information regarding an individual's eligibility. For adults who are determined ineligible for NJ FamilyCare Presumptive Eligibility, the provider will be advised in writing as soon as possible so that other billing options may be explored.

In addition, due to the temporary delay in adding an adult's presumptive eligibility to the Medicaid Eligibility File, the Division is recommending that all claims for services, provided to any NJ FamilyCare presumptively eligible adult during the month of September, be held and submitted to the fiscal agent at the beginning of October. This will ensure prompt reimbursement for services provided, and will avoid the need for the provider to resubmit claims that have been rejected because of the delay in establishing an eligibility record.

Please be advised that any payments made to hospitals for services provided to presumptively eligible individuals who are ultimately determined ineligible for NJ FamilyCare will be recovered by the Division of Medical Assistance and Health Services. These cases should be converted to charity care, provided all the requirements under that program are met.

As of September 1, 2000, all current WFNJ/GA beneficiaries were eligible for hospital services under NJ FamilyCare. However, any hospital claims submitted for this

population during the month of September 2000 will be placed in a pending status until the system is capable of generating payment for these claims. This is expected to occur during the first week of October 2000.

Any questions concerning this Medicaid Newsletter should be directed to the Presumptive Eligibility Unit at (609) 588-2911.

**RETAIN THIS NEWSLETTER NUMERICALLY BEHIND THE NEWSLETTER TAB  
(BLUE TAB MARKED "5")**