



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

NEWSLETTER

Volume 12 No. 05

February 2002

TO: Home Health Agencies and Homemaker Agencies Providing Personal Care Assistant (PCA) and Homemaker Services

SUBJECT: Rate Increase for PCA and Homemaker Services, State Plan, and Waiver Programs

EFFECTIVE: For PCA and Homemaker Service Dates on or after July 1, 2001

PURPOSE: This Newsletter announces an increase in Medicaid rates.

BACKGROUND: The State Fiscal Year (SFY) 2002 Appropriations Act (P.L. 2001, c.130) appropriated funds to support an increase in Medicaid (traditional and waivers) and NJ FamilyCare Plan A, fee-for-service (FFS) reimbursement for PCA and homemaker services.

ACTION: The Division is increasing Medicaid maximum fee allowances for eleven covered home care services. These fee increases are effective for claims with service dates on or after July 1, 2001 for procedure codes used when billing for beneficiaries served through: (1) the traditional Medicaid and the NJ FamilyCare Plan A fee-for-service programs; (2) the Home and Community-Based Services Waiver for medically fragile children under supervision of the Division of Youth and Family Services (the ABC Waiver); (3) the AIDS Community Care Alternatives Program (the ACCAP Waiver); (4) the Community Care Program for the Elderly and Disabled (CCPED)/Home Care Expansion Program (HCEP)/Caregiver Assistance Program (CAP) (which is part of the Enhanced Community Options (ECO) Waiver); and (5) the Home and Community-Based Services Waiver for survivors of traumatic brain injuries (the TBI Waiver).

The Division reprocessed claims that were submitted and paid prior to September 20, 2001, for any PCA or Homemaker provider who billed their usual and customary (U&C) charges if those unit charges equaled or exceeded the new unit rates that became effective July 1, 2001.

Those providers who submitted claims with U&C unit charges which are less than the new unit rates will have to manually resubmit those claims on an MMIS Claim Adjustment Form (FD-999) in order to receive the difference for what was billed and the new Medicaid rates. This process will also require that the provider explain why the amounts previously billed are not, in fact, U&C charges.

Procedure Code	Description	Maximum Allowable
Y7334	Individual Homemaker (ABC) per hour/weekday	\$15.50
Z1200	Individual Homemaker (CCPED/HCEP or CAP) per hour/weekday	\$15.50
Y7444	Individual Personal Care (TBI) per hour/weekday	\$15.50
Z1820	Individual Personal Care (ACCAP) per hour/weekday	\$15.50
Z1821	Individual Personal Care (ACCAP) per half-hour/weekday	\$ 7.75
Z1600	Individual Personal Care, per hour/weekday	\$15.50
Z1611	Individual Personal Care, per half-hour/weekday	\$ 7.75
Z1605	Group Personal Care, hour/weekday	\$11.76
Z1612	Group Personal Care, half-hour/weekday	\$ 5.88
Z1824	Group Personal Care (ACCAP), hour/weekday	\$11.76
Z1825	Group Personal Care (ACCAP), half-hour/weekday	\$ 5.88

If you have any questions regarding this Newsletter as it relates to the traditional Medicaid and NJ FamilyCare Plan A fee-for-service programs or waiver PCA services, please contact Donald Hartz at (609) 588-2621. Any questions concerning homemaker services through CCPED/HCEP or CAP, please contact the Department of Health and Senior Services (DHSS), Office of Waiver and Program Administration at (609) 584-4984.

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