



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

NEWSLETTER

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TO: Managed Care Organizations – **For Action**
Licensed Pediatric Day Care Facilities, Hospitals – **For Action**

SUBJECT: **Pediatric Medical Day Care Service Reopening**

EFFECTIVE: Effective May 1, 2022

PURPOSE: To notify Pediatric Medical Day Care providers of service delivery guidelines for Medicaid enrolled members

BACKGROUND: The Department of Health (DOH) issued orders closing Pediatric Medical Day Care facilities in March 2020. At that time, DMAHS issued guidelines for telephonic and in-home services to support vulnerable Medicaid/NJ FamilyCare beneficiaries during the closure. The guidelines were provided in a [Medicaid Newsletter \(Vol.30 No.4\)](#) and followed by [policy guidance](#) that answered detailed questions from providers.

On January 10, 2022, the DOH issued Executive Directive NO. 22-001-COVID 19 Related Health and Safety Requirements for the Reopening of New Jersey Pediatric Medical Day Care Facilities. Refer to link below for details regarding reopening protocols <https://www.state.nj.us/health/legal/documents/PDMCED.pdf>.

ACTION: As of May 1, 2022, NJ FamilyCare members authorized for Pediatric Medical Day Care may attend in person and/or may continue with remote services based on the plan authorization and medical needs.

COORDINATION BETWEEN PEDIATRIC MEDICAL DAY PROVIDERS AND MANAGED CARE ORGANIZATIONS (MCOs):

Providers are expected to notify MCOs and parents/caregivers for whom the provider holds an active authorization of the date they intend to resume on-site services. Providers are expected to work directly with the parent/caregiver regarding member's schedule. Provider will bill individual service days based on on-site or remote services received by the member. The total billed should not exceed the weekly authorization issued by the MCO.

Important information about claims for on-site services:

On-site Pediatric Medical Day services should be billed with each MCO's established code for this service **and a U1 modifier when services are provided on-site. The U1 modifier** must be billed so that DMAHS is able to track the progress of reopening. Claims are billed per diem. Providers may not bill for both on-site and remote service on the same day.

Important information about claims for remote services:

Each claim for remote service delivery requires appropriate documentation of: a) telephonic contact with the parent/caregiver, b) delivery of meal or supplies as requested by parent/caregiver, and c) face-to-face visit as requested by the parent/caregiver.

Provider may not bill for service unless affirmative contact is made with the parent/caregiver, and providers must discontinue outreach if requested to do so by the parent/caregiver or if advised that alternate home-based services have been authorized by the MCO. For program, integrity purposes, this service will be reviewed post-payment.

Remote Pediatric Medical Day services should be billed with each MCO's established code for this service, and that code will represent services delivered both telephonically and directly to the home, rather than in the usual site of service. Claims are billed per diem. Providers may not bill for both on-site and remote service on the same day.

Provider closure notification:

In the event that a provider needs to return fully to remote status due to closure of the site, the provider must immediately notify MCO care management departments of impacted members. This is critical to ensure that MCOs can coordinate any needed services. MCOs shall immediately begin outreach, prioritizing members with the highest level of need.

If you have any questions concerning this Newsletter, please contact Gainwell Technologies Provider Services at 800-776-6334 or email the DMAHS Provider Relations Resource account with specific questions at mahs.provider-inquiries@dhs.nj.gov

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