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

NEWSLETTER

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TO: Providers of Youth Carceral Services and Community Based Targeted Case Management (TCM) Services **- For Action**

Other Providers, Managed Care Organizations **- For Information Only**

SUBJECT: Juvenile Re-Entry Program**: The NJ Pathway to Reintegration**

EFFECTIVE: Claims with service dates on or after July 1, 2026

PURPOSE: To advise providers of the 2023 Consolidated Appropriations Act (CAA) requirements. The CAA mandates that two services be provided for eligible incarcerated juveniles: (1) an Early and Periodic Screening, Diagnostic and Treatment (EPSDT) evaluation within the 30 days prior to release and (2) targeted case management services within the 30 days prior to and after release. Eligible juveniles include all post-adjudicated youth, under 21 years of age, and former foster care individuals, aged 21 to 26 years of age, who are currently enrolled in NJ Family Care and are within 30 days of their scheduled date of their release from incarceration

BACKGROUND: Section 5121 of CAA mandates state Medicaid/NJ FamilyCare coverage of pre-release EPSDT screenings, related EPSDT services, and pre and post release targeted case management services for incarcerated juveniles and certain former foster youth. This newsletter describes how Youth Justice Commission (YJC) employed providers and Division of Mental Health and Addiction Services contracted Integrated Case Management (ICMS) providers can provide and bill for services mandated under Section 5121 of CAA

ACTION: Effective for claims with service dates on or after July 1, 2026, the Division of Medical Assistance and Health Services (DMAHS) will reimburse carceral settings for an Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) physical evaluation, including behavioral health screening, during the 30 days prior to release. DMAHS will also cover any service need identified during the EPSDT evaluation that requires further diagnosis or treatment, provided within or outside of the carceral setting. In addition, DMAHS will reimburse Targeted Case Management (TCM) services intended to address any needs identified during the pre-release EPSDT evaluation. These services will be covered during the 30 days prior to release, as well as up to 30 days following release.

Youth re-entry TCM services are services furnished to assist Medicaid/NJ FamilyCare-enrolled individuals under the age of 21, or under 26 with a history of foster care involvement, to return to a community setting, regaining access to medical, social, educational, and other services identified as medically necessary in an EPSDT examination. YJC employed social workers will, as part of their transition team, connect members qualifying for Care Management Organization (CMO) care management (aimed at youth <19 with qualifying mental health diagnoses) with CMO care managers. If individuals have had previous engagement with a CMO, they will be reconnected; if individuals have not previously been connected with a CMO, but have been identified as potential candidates, they will be assisted by a YJC social worker in that application process.

All eligible youth will receive re-entry TCM services provided under 42 CFR § 440.169 by YJC staff and/or Division of Mental Health and Addiction Services contracted ICMS providers additionally enrolled in NJ FamilyCare as youth re-reentry case management providers. Re-entry TCM case managers will assist eligible individuals in obtaining services including:

1) Comprehensive assessment of individual needs including medical, educational, social, or other services. These assessment activities shall include the following:

(i) Taking client history.

(ii) Identifying the individual's needs and completing related documentation.

(iii) Gathering information from other sources, such as family members, medical providers or social workers to form a complete assessment of the eligible individual.

(2) Development of a specific care plan based on the information collected through the assessment, that includes the following:

(i) Creating a plan to address needs identified in the EPSDT exam provided prior to release. The care plan should include input from medical, social, or family sources.

(ii) Planned interventions involving the active participation of the eligible individual or the individual's authorized health care decision maker.

(3) Referral and related activities to help the eligible individual obtain needed services, including activities that link the individual with medical, social, legal or other services identified in their care plan.

(4) Monitoring and follow-up activities, including contacts, that are necessary to ensure that the care plan is effectively implemented and adequately addresses the needs of the eligible individual. Follow-up activities may be conducted with the individual, family members, service providers, or other entities as frequently as necessary and should address whether:

(i) Services are being furnished in accordance with the individual's care plan.

(ii) Services in the care plan are adequate.

(iii) Necessary adjustments are being made to the care plan and service arrangements with providers.

(iv) Case managers have provided a warm hand-off to any programs to which the individual may be transferred prior to the end of the required 30-day period.

Case management services may be provided telephonically, in-person or via interactive video communications. Face-to-face contact is preferred, especially for initial assessments and complex situations, but TCM can be delivered through other means as determined by the members' needs, the complexity and nature of the situation, travel distances and/or staff availability.

Case management may include contacts with non-eligible individuals that are directly related to the identification of the eligible individual's needs and care, for purposes of helping the eligible individual access services, identifying needs and supports, providing case managers with useful feedback, and alerting case managers to changes in the eligible individual's needs.

The Youth Justice Commission (YJC) can bill for and receive payments for providing EPSDT-covered services (using Current Procedural Terminology (CPT) billing codes) or targeted case management services under the Juvenile Re-Entry Program. Re-Entry TCM services can also be provided by any Division of Mental Health and Addiction Services' (DMHAS') contracted ICMS provider who is also enrolled as a Juvenile Re-Entry case management provider.

Any ICMS provider who wishes to participate in this Juvenile Re-Entry Program will need to enroll their designated ICMS re-entry staff as Juvenile Re-Entry Case Managers. ICMS providers will need to complete a provider enrollment application found at www.njmmis.com. Each provider will require a National Provider Identifier (NPI) number which can be obtained by applying online at https://nppes.cms.hhs.gov. It typically takes approximately 10 days to receive your NPI.

Services provided for individuals who are still incarcerated are billed utilizing:

T1017EP	TCM services
99384 QJU1	EPSDT evaluation low intensity (12-17 years of age) - Evaluation & management, 25-min visit) with health record review and anticipatory guidance
99384 QJU2	EPSDT evaluation moderate intensity (12-17 years of age)- Evaluation & management (40-min visit) with sensory screenings, behavioral screenings, STI testing
99384 QJU3	EPSDT evaluation high intensity (12-17 years of age)- 40-minute visit with sensory screenings, behavioral screenings, STI testing. immunizations, specialized procedures or screenings and/or additional dental care
99385 QJU1	EPSDT evaluation (18-26 years of age) – 25-minute visit with health record review and anticipatory guidance

99385 QJU2	EPSDT evaluation (18-26 years of age) – 40-minute visit with sensory screenings, behavioral screenings, STI testing
99385 QJU3	EPSDT evaluation (18-26 years of age) – 40-minute visit with sensory screenings, behavioral screenings, STI testing, immunizations, specialized procedures and/or additional dental care

Services provided for up to 30 days post release are billed utilizing:

T1017EP	TCM services
Standard billing codes	Any Medicaid/NJ FamilyCare covered service provided

If you have any questions concerning this Newsletter, please contact the Division of Medical Assistance and Health Services at 609-297-9745.

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