

## CHAPTER 77

## REHABILITATIVE SERVICES

## Authority

N.J.S.A. 30:4D-1 et seq. and 30:4D-7.

## Source and Effective Date

R.1998 d.143, effective March 16, 1998.  
See: 29 N.J.R. 543(a), 30 N.J.R. 1081(a).

## Executive Order No. 66(1978) Expiration Date

Chapter 77, Rehabilitative Services, expires on March 16, 2003.

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## SUBCHAPTER 1. GENERAL PROVISIONS

## 10:77-1.1 Purpose and scope

(a) This chapter is concerned with the provision of, and reimbursement for, medically necessary Medicaid-covered and NJ KidCare fee-for-service covered rehabilitative services, rendered by a provider other than an independent

clinic, a hospital, a long term care facility, a home health agency, or a physician/practitioner office, in accordance with the New Jersey Medicaid and NJ KidCare fee-for-service program rules.

(b) Medically necessary services shall meet all applicable State and Federal Medicaid and NJ KidCare laws, and all applicable rules as specified in the appropriate provider services manual of the New Jersey Medicaid/NJ KidCare program.

(c) The chapter is divided into four subchapters and an appendix, as follows:

1. N.J.A.C. 10:77-1 contains general provisions to rehabilitative services, including introductory general provisions and general definitions;

2. N.J.A.C. 10:77-2 contains definitions, provisions for provider participation, basis for reimbursement, policies and procedures, and recordkeeping requirements pertaining to the specific Medicaid-covered rehabilitative service: environmental lead inspection service;

3. N.J.A.C. 10:77-3 contains definitions, provisions for provider participation, basis for reimbursement, policies and procedures, and recordkeeping requirements pertaining to the specific Medicaid-covered and NJ KidCare Plan A-covered mental health rehabilitation services for children;

4. N.J.A.C. 10:77-4 pertains to the Health Care Financing Administration (HCFA) Common Procedure Coding System (HCPCS). The HCPCS contain procedure codes and maximum fee allowances corresponding to the Medicaid/NJ KidCare-reimbursable services of this chapter; and

5. The chapter Appendix pertains to the Fiscal Agent Billing Supplement. The Fiscal Agent Billing Supplement contains billing instructions and samples of forms (claim forms, prior authorization forms, and consent forms) used in the billing process.

Amended by R.2001 d.144, effective May 7, 2001.

See: 32 N.J.R. 4387(a), 33 N.J.R. 1378(b).

Rewrote section.

## 10:77-1.2 General definitions

The following words and terms, when used in this chapter, shall have the following meanings unless the context clearly indicates otherwise.

“Child” means a Medicaid beneficiary under 21 years of age.

“Division” means the Division of Medical Assistance and Health Services (DMAHS) within the New Jersey Department of Human Services.

“Rehabilitative service” is an optional service which a state may define to include (pursuant to 42 C.F.R. 440.130) medical or remedial services recommended by a physician or other licensed practitioner within the scope of practice under State law.

## SUBCHAPTER 2. ENVIRONMENTAL LEAD INSPECTION SERVICES

### 10:77-2.1 Scope of services

This subchapter describes the New Jersey Medicaid program's provisions specifically pertaining to the rehabilitative service: environmental lead inspection service.

### 10:77-2.2 Environmental lead inspection service definitions

The following words and terms, as used in this subchapter, shall have the following meanings, unless the context clearly indicates otherwise.

"Certified lead inspector/risk assessor" means one who is hired by the local health department and certified by the State Department of Health and Senior Services in accordance with N.J.A.C. 8:62 to conduct an epidemiologic investigation in order to find lead sources.

"Elevated blood lead level" means an excess of lead in the bloodstream as defined in N.J.A.C. 8:44 and 8:44A.

"Environmental lead inspection service" means an epidemiologic investigation by a certified lead inspector/risk assessor in order to identify lead sources in the primary residence of a child who is a Medicaid beneficiary and who is determined to have an elevated blood lead level.

"High risk" means a child whose history is positive for one or more of the following criteria in assessing his or her risk of high-dose exposure to lead:

1. Lives in a house built before 1960 with peeling or chipping paint;
2. Lives in a house built before 1960 with recent, ongoing, or planned renovation or remodeling;
3. Has a brother, sister, or housemate being followed or treated for lead poisoning (that is, blood lead >15 Sg/dL); and/or
4. Lives with an adult whose occupation or hobby involves exposure to lead.

"Local health department" (LHD) means the board of health of any municipality or the boards, bodies or officers in such municipality lawfully exercising any of the powers of a local board of health under the laws governing such municipality, and includes any consolidated local board of health or county local board of health created and established pursuant to N.J.S.A. 26:1A-1.

"Screening" means applying detection techniques and performing tests to assess the origins and extent of lead sources in the child's primary residence.

### 10:77-2.3 Provider participation requirements

(a) Requirements for a provider to participate in environmental lead inspection services shall be as follows:

1. An applicant shall be a local health department (LHD);
2. Local health departments (LHD) shall enroll and be approved by the New Jersey Medicaid program specifically for reimbursement for this service, including LHDs previously approved as Medicaid independent clinic providers;
3. Local health departments wishing to enroll as a Medicaid-participating provider for environmental lead inspection services shall complete and submit a provider application packet pursuant to N.J.A.C. 10:49-3.2;

- i. The completed application packet shall be submitted to:

Division of Medical Assistance and Health Services  
Office of Provider Enrollment  
Mail Code #9  
PO Box 712  
Trenton, New Jersey 08625-0712

- ii. The applicant shall receive written notification of approval or disapproval of its provider status. If approved, the applicant shall be assigned a Medicaid Provider Number and shall receive a packet which contains a Medicaid Provider Manual (N.J.A.C. 10:77) and the Fiscal Agent Billing Supplement (FABS);

- iii. Upon approval as a Medicaid provider, the LHD will also conform to all the provisions of N.J.A.C. 10:49.

### 10:77-2.4 Environmental lead inspection services

(a) All Medicaid beneficiaries up to six years of age and older children who are considered as "high risk" for lead poisoning, shall be screened for such through venous or capillary blood tests. When the initial test is a capillary blood test indicating an elevated blood lead level, the findings shall be confirmed by a venous sample.

1. Pursuant to N.J.A.C. 8:44-2.11, clinical laboratories are required to report to the New Jersey Department of Health and Senior Services (DHSS) the results of certain lead screenings.
2. The DHSS, in turn, through the "Environmental Investigation and Abatement Report Form" (AP-6), will notify the appropriate LHD of the need to conduct an environmental lead inspection of the child's primary residence;
3. The LHD shall have a certified lead inspector/risk assessor conduct an epidemiologic investigation of the Medicaid beneficiary's primary residence in order to locate existing lead sources.