

CHAPTER 86

ADULT AND PEDIATRIC
DAY HEALTH SERVICES

Authority

N.J.S.A. 30:4D-6b(12), 6b(17), 7, 7a, 7b and 7c; 30:4D-12;
Reorganization Plan 001-1996; 42 U.S.C. § 1396a;
42 CFR § 440.90.

Source and Effective Date

R.2001 d.5, effective November 30, 2000.
See: 32 N.J.R. 3053(a), 33 N.J.R. 55(a).

Chapter Expiration Date

In accordance with N.J.S.A. 52:14B-5.1d, Chapter 86, Medical Daycare Services, was extended by gubernatorial directive from November 30, 2005 to November 30, 2006. See: 38 N.J.R. 294(c).

Chapter Historical Note

Chapter 86, Medical Day Care Services, originally codified in Title 10 as Chapter 65, Intermediate Care Standards. Chapter 65 was adopted as R.1973 d.132, effective July 1, 1973. See: 5 N.J.R. 10(a), 5 N.J.R. 190(a).

Chapter 65, Intermediate Care Standards, was repealed by R.1979 d.126, effective March 29, 1979. See: 10 N.J.R. 190(b), 11 N.J.R. 248(b).

Chapter 65, Medical Day Care Services Manual, was adopted as new rules by R.1979 d.325, effective August 16, 1979. See: 11 N.J.R. 280(a), 11 N.J.R. 448(e).

Pursuant to Executive Order No. 66(1978), Subchapter 1, General Provision, was readopted as R.1984 d.332, effective July 23, 1984. See: 16 N.J.R. 1443(a), 16 N.J.R. 2131(a).

Pursuant to Executive Order No. 66(1978), Subchapter 2, HCPCS Codes, was readopted as R.1984 d.508, effective November 15, 1984. See: 16 N.J.R. 2336(a), 16 N.J.R. 3031(b).

Pursuant to Executive Order No. 66(1978), Chapter 65, Medical Day Care Manual, was readopted as R.1989 d.504, effective August 25, 1989. See: 21 N.J.R. 1794(a), 21 N.J.R. 3005(a).

Chapter 65, Medical Day Care Manual, was repealed and Chapter 65, Medical Day Care Services Manual, was adopted as new rules by R.1991 d.87, effective February 19, 1991, operative March 1, 1991. See: 22 N.J.R. 3327(b), 23 N.J.R. 448(a).

Pursuant to Executive Order No. 66(1978), Chapter 65, Medical Day Care Services Manual, was readopted as R.1996 d.6, effective November 30, 1995. See: 27 N.J.R. 3540(a), 28 N.J.R. 184(b).

Pursuant to Executive Order No. 66(1978), Chapter 65, Medical Day Care Services, was readopted as R.2001 d.5, effective November 30, 2000, and Chapter 65 was recodified as N.J.A.C. 8:86 by R.2001 d.5, effective January 2, 2001. See: Source and Effective Date. See, also, section annotations.

Chapter 86, Medical Day Care Services, was renamed Adult and Pediatric Day Health Services; Subchapter 2, HCPCS Codes, was renamed Billing Codes; Appendices A, B, C, and D were repealed and adopted as new rules; Appendices E, F, and G were repealed; and Appendix H was recodified as Appendix E by R.2005 d.390, effective December 19, 2005 (operative February 1, 2006). See: 36 N.J.R. 5262(a), 37 N.J.R. 385(b), 4968(a).

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SUBCHAPTER 1. GENERAL PROVISIONS

8:86-1.1 Purpose and scope

(a) The Adult and Pediatric Day Health Services Program is concerned with the fulfillment of the health needs of eligible individuals who could benefit from a health services alternative to total institutionalization. Adult and Pediatric Day Health Services is a program that provides medically necessary services in an ambulatory care setting to individuals who are nonresidents of the facility, and who, due to their physical and/or cognitive impairment, require such services supportive to their community living. Pediatric day health services are available only for technology-dependent and/or medically unstable children who require continuous, rather than part-time or intermittent, care of a licensed practical or registered professional nurse in a developmentally appropriate environment.

(b) In order to be eligible for services through the Adult and Pediatric Day Health Services Program, an individual must have been determined to be eligible for one of the following: community Medicaid, New Jersey Care ... Special Medicaid Programs (including the medically needy segment), NJ FamilyCare-Plan A, fee-for-service, the Community Care Program for the Elderly and Disabled, the Caregiver Assistance Program, the Adult Family Care program, Model Waivers, the AIDS Community Care Alternatives Program, the Traumatic Brain Injury Program, or the ABC Program for medically fragile children. Individuals enrolled in the Home Care Expansion Program or the Jersey Assistance for Community Caregiving Program are likewise eligible for adult and pediatric day health services. In addition to being financially

eligible, an adult or pediatric day health services beneficiary must satisfy the clinical eligibility requirements at N.J.A.C. 8:86-1.5.

Amended by R.1994 d.427, effective August 15, 1994.

See: 26 N.J.R. 1427(a), 26 N.J.R. 3474(a).

Amended by R.2005 d.390, effective December 19, 2005 (operative February 1, 2006).

See: 36 N.J.R. 5262(a), 37 N.J.R. 385(b), 4968(a).

Rewrote the section.

8:86-1.2 Definitions

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

“ACCAP” means the AIDS Community Care Alternative Program created pursuant to the Omnibus Budget Reconciliation Act of 1981.

“ADL” or “ADLs” mean, respectively, activity of daily living or activities of daily living.

“Adult or pediatric day health services beneficiary” or “beneficiary” means an individual who is a Medicaid beneficiary, pursuant to N.J.A.C. 10:49, a HCEP participant, pursuant to N.J.A.C. 8:81, or a participant in the JACC, who is eligible for adult or pediatric day health services pursuant to N.J.A.C. 8:86-1.5. An adult beneficiary is at least 18 years of age. A pediatric beneficiary is from birth through five years of age.

“Adult or pediatric day health services facility” means an identifiable part of a nursing facility, or a hospital affiliated facility, or a freestanding ambulatory care facility, or such other facility that is licensed by the Department in accordance with its Standards for Licensure of Adult and Pediatric Day Health Services Facilities, N.J.A.C. 8:43F, and that possesses a valid and current provider agreement from the Department.

“Advanced practice nurse” means an individual so certified by the New Jersey State Board of Nursing in accordance with N.J.S.A. 45:11-23 et seq.

“AFC” means the Adult Family Care program created pursuant to the Omnibus Reconciliation Act of 1981.

“CAP” means the Caregiver Assistance Program, a Medicaid Home and Community Based Program under the Enhanced Community Options Waiver, pursuant to N.J.A.C. 10:60-10.2.

“Department” means the State of New Jersey Department of Health and Senior Services.

“HCEP” means the Home Care Expansion Program established pursuant to N.J.S.A. 30:4E-6.

“HIV adult day health services facility” means an adult day health services facility which provides additional services to

individuals with HIV infection in an identifiable and separate setting and which is licensed pursuant to N.J.A.C. 8:43A.

“JACC” means the Jersey Assistance for Community Caregiving Program, an ElderCare Initiative pursuant to the State of New Jersey Appropriations Act.

“Legally authorized representative” means a person or entity that is legally empowered by law, judicial order, power of attorney, or otherwise to make decisions on behalf of the beneficiary and includes a beneficiary’s spouse or immediate next-of-kin.

“Licensed practical nurse (LPN)” means an individual who is so licensed by the New Jersey State Board of Nursing, pursuant to N.J.S.A. 45:11-27.

“Limited assistance” means physical help in maneuvering of limbs or other non-weight-bearing assistance at least three times during the past three days.

“Medicaid beneficiary” means an individual who participates in the program for medical assistance, including Medicaid Waiver programs, authorized under Title XIX or Title XXI of the Social Security Act and administered jointly by the New Jersey Department of Health and Senior Services and the New Jersey Department of Human Services.

“Medical nutrition therapy” means the assessment of nutritional status and treatment, use of diet therapy, counseling and specialized nutritional supplements.

“Medication administration” means a procedure in which a prescribed medication is given to a beneficiary by an authorized person in accordance with all laws and rules governing such procedures. The complete procedure of administration includes removing an individual dose from a previously dispensed, properly labeled container (including a unit dose container), verifying it with the prescriber’s orders, giving the individual dose to the beneficiary, seeing that the beneficiary takes it, and recording the required information, including the method of administration. After the prescribed medication has been given the RN shall: assess the beneficiary for the development of side effects or interactions and/or for a change in the beneficiary’s ability to maintain the medication regimen (which may include an assessment of the beneficiary’s compliance with the medication regimen, the beneficiary’s knowledge about the dose and medication taken and the side effects and interactions, and swallowing difficulties or short-term memory deficits).

“Pediatric day health services facility” means a facility that provides additional services in order to provide for the needs of technology dependent or medically unstable children and conforms to the rules in this chapter and to the rules at N.J.A.C. 10:122, Manual of Requirements for Child Care Centers.