

- 47 Middlesex MACC
- 48 Middlesex MACC
- 51 Middlesex MACC—Menlo Park Veterans Home
- 51 Middlesex MACC—Vineland Veterans Home
- 90 MACC in county in which beneficiary resides.

Amended by R.1997 d.354, effective September 2, 1997.  
 See: 29 N.J.R. 2512(a), 29 N.J.R. 3856(a).  
 Substituted "beneficiary" for "recipient" or "resident" throughout; in (a)3 and (b), substituted "Medicaid Eligibility Identification Number" for "HSP (Medicaid) Case Number"; in (b), inserted references to beneficiaries, amended MDO references, and inserted the two 51—Middlesex references.  
 Recodified from N.J.A.C 10:49-2.15 by R.1998 d.116, effective January 30, 1998 (operative February 1, 1998; to expire July 31, 1998).  
 See: 30 N.J.R. 713(a).  
 Former N.J.A.C. 10:49-2.16, Medicaid application, recodified to N.J.A.C. 10:49-2.17.  
 Adopted concurrent proposal, R.1998 d.426, effective July 24, 1998.  
 See: 30 N.J.R. 713(a), 30 N.J.R. 3034(a).  
 Readopted provisions of R.1998 d.116 without change.  
 Amended by R.2003 d.82, effective February 18, 2003.  
 See: 34 N.J.R. 2650(a), 35 N.J.R. 1118(a).

**10:49-2.17 Medicaid application**

(a) If a person has not applied for benefits, is unable to pay for services provided, and appears to meet the requirements for eligibility for the New Jersey Medicaid program, the provider shall encourage the person, or his or her representative, to apply for benefits:

1. To the CBOSS for programs such as AFDC-Related Medicaid; Medicaid Only; New Jersey Care ... Special Medicaid programs for pregnant women, children, and the aged, blind, or disabled; or for Medically Needy.
2. To the Social Security Administration for Supplemental Security Income benefits for the aged, blind, and disabled; or
3. In certain cases, to the New Jersey Division of Youth and Family Services, Department of Human Services.

(b) If it is not known which agency is responsible for determining eligibility or which program might be applicable, the MACC will be able to provide guidance in this matter (for MACC Directory, see Appendix N.J.A.C. 10:49).

(c) All providers are encouraged to refer pregnant women who may be eligible for Medicaid to a provider authorized to determine presumptive eligibility. The names and addresses of these providers may be obtained by calling the HOT LINE at 1-800-328-3838.

Amended by R.1997 d.354, effective September 2, 1997.  
 See: 29 N.J.R. 2512(a), 29 N.J.R. 3856(a).  
 Recodified from N.J.A.C 10:49-2.16 by R.1998 d.116, effective January 30, 1998 (operative February 1, 1998; to expire July 31, 1998).  
 See: 30 N.J.R. 713(a).  
 Adopted concurrent proposal, R.1998 d.426, effective July 24, 1998.  
 See: 30 N.J.R. 713(a), 30 N.J.R. 3034(a).

Readopted provisions of R.1998 d.116 without change.  
 Amended by R.2003 d.82, effective February 18, 2003.  
 See: 34 N.J.R. 2650(a), 35 N.J.R. 1118(a).

**10:49-2.18 (Reserved)**

**10:49-2.19 Medicaid or NJ FamilyCare eligibility—aliens**

For any alien who does not qualify for Medicaid or NJ FamilyCare-Plan A based on his or her alien status, and thus is potentially eligible for Medicaid or NJ FamilyCare-Plan A payment for emergency services only (see N.J.A.C. 10:49-5.4, Medicaid or NJ FamilyCare-Plan A Emergency Services for Aliens) the provider of service shall complete a Form PA-1C and submit it with Certification of Treatment of Emergency Medical Condition (if necessary) to the eligibility determination agency in the county in which the individual lives. The provider shall inform the individual that a Form PA-1C does not establish Medicaid eligibility or NJ FamilyCare-Plan A eligibility but serves only to protect the date of inquiry as an application date for Medicaid, or NJ FamilyCare-Plan A if an application is filed within three months of the date that the Form PA-1C is signed. The individual should be advised to file an application with the eligibility determination agency as soon as possible.

New Rule, R.1998 d.116, effective January 30, 1998 (operative February 1, 1998).  
 See: 30 N.J.R. 713(a).  
 Adopted concurrent proposal, R.1998 d.426, effective July 24, 1998.  
 See: 30 N.J.R. 713(a), 30 N.J.R. 3034(a).  
 Readopted provisions of R.1998 d.116 with changes, effective August 17, 1998.  
 Amended by R.2003 d.82, effective February 18, 2003.  
 See: 34 N.J.R. 2650(a), 35 N.J.R. 1118(a).

SUBCHAPTER 3. PROVIDER PARTICIPATION

**10:49-3.1 Provider types eligible to participate**

(a) The following provider types shall be eligible to participate as Medicaid/NJ FamilyCare-Plan A providers:

1. Case managers;
2. Certified nurse practitioners/clinical nurse specialists;
3. Chiropractors and/or chiropractic groups;
4. Clinics (independent outpatient health care facilities);
5. Clinical laboratories;
6. Dentists and/or dentist groups;
7. Hearing aid dealers;
8. Health maintenance organizations/managed care organizations;

9. Home health agencies;
10. Homemaker agencies;
11. Hospices;
12. Hospitals;
  - i. General;
  - ii. Psychiatric; and
  - iii. Special;
13. Local health departments;
14. Nursing facilities, including intermediate care facilities for the mentally retarded;
15. Medical suppliers;
16. Mental health rehabilitation providers:
  - i. Residential child care facilities (see N.J.A.C. 10:77 and 10:127);
  - ii. Children's group homes (see N.J.A.C. 10:77 and 10:128);
  - iii. Psychiatric community residences for youth (see N.J.A.C. 10:37B and 10:77);
  - iv. Providers of behavioral assistance services for children/youth or young adults (see N.J.A.C. 10:77-4);
  - v. Mobile response agencies (see N.J.A.C. 10:77-6);
  - vi. Providers of intensive in-community mental health rehabilitation services (see N.J.A.C. 10:77-5);
  - vii. Programs for Assertive Community Treatment (PACT) Agencies/Teams (see N.J.A.C. 10:37J and 10:76); and
  - viii. Community residences for mentally ill adults (see N.J.A.C. 10:37A and 10:77A).
17. Medical day care centers;
18. Nurse-midwives;
19. Opticians;
20. Optometrists;
21. Orthotists;
22. Pharmacies;
23. Physicians and/or physician groups;
24. Podiatrists and/or podiatric groups;
25. Prosthetists;
26. Psychologists and/or psychologist groups;
27. Residential treatment facilities;
28. Transportation providers; and

29. State and county agencies that have agreed to provide personal care assistant services.

(b) In order for professional practices to be eligible to participate in the Medicaid and NJ FamilyCare programs as specific provider entities, such practices shall comply with all applicable State licensing statutes and rules governing their ownership and direction.

Amended by R.1997 d.354, effective September 2, 1997.

See: 29 N.J.R. 2512(a), 29 N.J.R. 3856(a).

Inserted new (a)1; recodified former (a)1 through 25 as (a)2 through 26; in (a)7, inserted reference to managed care organizations.

Amended by R.1998 d.116, effective January 30, 1998 (operative February 1, 1998; to expire July 31, 1998).

See: 30 N.J.R. 713(a).

In (a), inserted a reference to NJ KidCare—Plan A in the introductory paragraph.

Amended by R.1998 d.143, effective March 16, 1998.

See: 29 N.J.R. 543(a), 30 N.J.R. 1081(a).

In (a), inserted a new 12, and recodified former 12 through 26 as 13 through 27.

Adopted concurrent proposal, R.1998 d.426, effective July 24, 1998.

See: 30 N.J.R. 713(a), 30 N.J.R. 3034(a).

Readopted provisions of R.1998 d.116 without change.

Amended by R.2000 d.309, effective August 7, 2000.

See: 32 N.J.R. 1342(a), 32 N.J.R. 2900(a).

In (a), inserted a new 1, and recodified former 1 through 27 as 2 through 28.

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

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

Inserted new (a)16 and recodified former (a)16 through 28 as new (a)17 through 29.

Amended by R.2003 d.82, effective February 18, 2003.

See: 34 N.J.R. 2650(a), 35 N.J.R. 1118(a).

Added (b).

Amended by R.2003 d.89, effective March 3, 2003.

See: 34 N.J.R. 1593(a), 35 N.J.R. 1281(a).

Rewrote (a)16.

Amended by R.2003 d.479, effective December 15, 2003.

See: 35 N.J.R. 2146(a), 35 N.J.R. 5584(a).

In (a)16, inserted a new iv and recodified former iv as new v.

Amended by R.2004 d.8, effective January 5, 2004.

See: 35 N.J.R. 2620(a), 35 N.J.R. 4204(a), 36 N.J.R. 189(a).

In (a)16, added vi.

Amended by R.2005 d.68, effective February 22, 2005.

See: 36 N.J.R. 379(a), 37 N.J.R. 659(a).

In (a), added 16v, recodified existing v to vi as vi to vii.

Amended by R.2005 d.98, effective April 4, 2005.

See: 36 N.J.R. 1158(a), 37 N.J.R. 1022(a).

In (a), added a new vi, recodified existing vi, vii as vii, viii in 16.

#### Cross References

Regional Perinatal Centers and Community Perinatal Centers, providing services in accordance with this section, see N.J.A.C. 8:33C-4.2.

Case Management Program/Mental Health, providing services in accordance with this section, see N.J.A.C. 10:73-2.4.

#### 10:49-3.2 Enrollment process

(a) Providers shall complete a Provider Application and sign a Provider Agreement (see Appendix, N.J.A.C. 10:49) or a specialized agreement, and submit such other information or documentation, including, but not limited to, social security number and date of birth, as the program may require, depending on the nature of the services provided.