

CHAPTER 38

INTERIM ASSISTANCE PROCEDURES MANUAL

Authority

N.J.S.A. 30:4-27.19.

Source and Effective Date

R.2007 d.24, effective December 20, 2006.

See: 38 N.J.R. 2971(a), 39 N.J.R. 196(a).

Chapter Expiration Date

In accordance with N.J.S.A. 52:14B-5.1c, Chapter 38, Interim Assistance Procedures Manual, expires on June 18, 2014. See: 46 N.J.R. 162(a).

Chapter Historical Note

Chapter 38, Interim Assistance Procedures Manual, was adopted as R.1981 d.225, effective July 9, 1981. See: 13 N.J.R. 220(d), 13 N.J.R. 412(c).

Pursuant to Executive Order No. 66(1978), Chapter 38, Interim Assistance Procedures Manual, was readopted as R.1986 d.239, effective May 28, 1986. See: 18 N.J.R. 802(a), 18 N.J.R. 1383(a).

Subchapter 5, Trial Placement Status, was repealed and Subchapter 7, Medicaid Coverage For Interim Assistance Clients, was recodified to N.J.A.C. 10:38-5 by R.1990 d.370, effective August 6, 1990. See: 21 N.J.R. 2280(a), 22 N.J.R. 2306(a).

Pursuant to Executive Order No. 66(1978), Chapter 38, Interim Assistance Procedures Manual, was readopted as R.1991 d.268, effective April 29, 1991. See: 23 N.J.R. 261(b), 23 N.J.R. 1686(a).

Pursuant to Executive Order No. 66(1978), Chapter 38, Interim Assistance Procedures Manual, was readopted as R.1996 d.224, effective April 22, 1996. See: 28 N.J.R. 755(a), 28 N.J.R. 3125(a). Pursuant to Executive Order No. 66(1978), Chapter 38, Interim Assistance Procedures Manual, expired on April 22, 2001.

Chapter 38, Interim Assistance Procedures Manual, was adopted as new rules by R.2001 d.243, effective July 16, 2001. See: 33 N.J.R. 1071(a), 33 N.J.R. 2498(b).

Chapter 38, Interim Assistance Procedures Manual, was readopted as R.2007 d.24, effective December 20, 2006. See: Source and Effective Date. See, also, section annotations.

In accordance with N.J.S.A. 52:14B-5.1b, Chapter 38, Interim Assistance Procedures Manual, was scheduled to expire on December 20, 2013. See: 43 N.J.R. 1203(a).

CHAPTER TABLE OF CONTENTS

SUBCHAPTER 1. GENERAL PROVISIONS

- 10:38-1.1 Program description
- 10:38-1.2 Authority
- 10:38-1.3 Purpose
- 10:38-1.4 Definitions

SUBCHAPTER 2. INTERIM ASSISTANCE ELIGIBILITY

- 10:38-2.1 Clients eligible for Interim Assistance
- 10:38-2.2 Clients ineligible for Interim Assistance
- 10:38-2.3 Selection criteria
- 10:38-2.4 Approval authority

SUBCHAPTER 3. INTERIM ASSISTANCE CASE PROCESSING

- 10:38-3.1 Purpose
- 10:38-3.2 The Interdisciplinary Treatment Team
- 10:38-3.3 The hospital social service staff or designee
- 10:38-3.4 Responsibilities of the Discharge and/or Financial Unit
- 10:38-3.5 The Office of Fiscal and Management Operations of the Division of Mental Health Services

- 10:38-3.6 Responsibilities of the hospital business office
- 10:38-3.7 Action by the Social Security Administration
- 10:38-3.8 Responsibilities of the congregate housing provider

SUBCHAPTER 4. INTERIM ASSISTANCE PAYMENT PROCEDURES

- 10:38-4.1 Authorization of payments
- 10:38-4.2 Exempt resources
- 10:38-4.3 Business office payment procedures
- 10:38-4.4 Termination of payments

SUBCHAPTER 5. MEDICAID COVERAGE FOR INTERIM ASSISTANCE CLIENTS

- 10:38-5.1 Medicaid coverage
- 10:38-5.2 Procedures
- 10:38-5.3 Termination of institutional Medicaid coverage

SUBCHAPTER 6. APPEAL PROCEDURES

- 10:38-6.1 Right to appeal
- 10:38-6.2 Notice of decision and right of appeal
- 10:38-6.3 Procedure for filing appeal
- 10:38-6.4 Scheduling of Financial Entitlement Unit's review—rights of client
- 10:38-6.5 Financial Entitlement Unit's review
- 10:38-6.6 Results of the Financial Entitlement Unit's review
- 10:38-6.7 Effect of determination by the Social Security Administration
- 10:38-6.8 Divisional review
- 10:38-6.9 Results of divisional review
- 10:38-6.10 Appeal to the hospital manager of computation of net payment
- 10:38-6.11 Business manager's review
- 10:38-6.12 Results of business manager's review
- 10:38-6.13 Divisional review
- 10:38-6.14 Results of divisional review

SUBCHAPTER 7. CLIENT INCOME AND RESOURCE MONITORING

- 10:38-7.1 Purpose
- 10:38-7.2 Responsibilities of the hospital business manager
- 10:38-7.3 Chief Executive Officer as representative payee for client income
- 10:38-7.4 Client or non-institutional agent as payee for available client income
- 10:38-7.5 Client or non-institutional agent as payee for anticipated income
- 10:38-7.6 Refusal to honor payee agreement—client
- 10:38-7.7 Refusal to honor payee agreement—representative payee
- 10:38-7.8 Termination of Interim Assistance

APPENDIX A. INTERIM ASSISTANCE STATEMENT

APPENDIX B. FORM MH-30

APPENDIX C. CONTRACT FOR INTERIM ASSISTANCE

APPENDIX D. STATEMENT OF BUSINESS MANAGER STATE PSYCHIATRIC HOSPITAL

APPENDIX E. PAYEE AGREEMENT

APPENDIX E1. REPRESENTATIVE PAYEE AGREEMENT

APPENDIX F. FORM PV; PAYEE INSTRUCTIONS

APPENDIX G. BUSINESS MANAGER'S FINANCIAL INQUIRY

APPENDIX H. BUSINESS MANAGER'S STATEMENT TO INTERIM ASSISTANCE RECIPIENT

APPENDIX I. SOCIAL SECURITY ADMINISTRATION

APPENDIX J. FORM SSA-787

APPENDIX K. HEALTH BENEFITS IDENTIFICATION CARD

APPENDIX L. BUSINESS MANAGER'S STATEMENT TO SSI APPLICANT

APPENDIX M. (RESERVED)

SUBCHAPTER 1. GENERAL PROVISIONS

10:38-1.1 Program description

(a) Interim Assistance (IA) is a payment procedure developed by the State of New Jersey and the Social Security Administration. It permits a client who has been released from a State psychiatric hospital and who has applied for Federal Supplemental Security Income (SSI) benefits to receive State funds and community Medicaid coverage while his or her SSI claim is being evaluated. Through this process, the client shall receive a Personal Needs Allowance and have his or her initial maintenance costs paid by the Division of Mental Health Services upon release from the hospital. The Division, in turn, may directly receive the client's retroactive SSI payment from the Social Security Administration, may recoup Interim Assistance expenditures made and shall deposit this reimbursement in the hospital Interim Assistance revenue account.

(b) The revolving hospital fund which is thereby created shall be used to ensure that:

1. A client shall return to the community at an appropriate point in his or her treatment; and
2. A client's income, upon release, shall be adequate and at an established standard.

Amended by R.1990 d.370, effective August 6, 1990.

See: 21 N.J.R. 2280(a), 22 N.J.R. 2306(a).

Stylistic changes in text.

Amended by R.1991 d.268, effective May 20, 1991.

See: 23 N.J.R. 261(b), 23 N.J.R. 1686(a).

In (a); added "appropriation" before account.

Amended by R.1994 d.75, effective February 22, 1994.

See: 25 N.J.R. 3697(a), 26 N.J.R. 1088(a).

Amended by R.1996 d.224, effective June 17, 1996.

See: 28 N.J.R. 755(a), 28 N.J.R. 3125(a).

Amended by R.2007 d.24, effective January 16, 2007.

See: 38 N.J.R. 2971(a), 39 N.J.R. 196(a).

In (a), inserted "and community Medicaid coverage".

10:38-1.2 Authority

Legal authority for this program may be found in N.J.S.A. 30:4-27.19. An agreement between the State of New Jersey and the Social Security Administration, dated October 31, 1974, forms the basis for the procedures described in this manual.

Amended by R.1996 d.224, effective June 17, 1996.

See: 28 N.J.R. 755(a), 28 N.J.R. 3125(a).

10:38-1.3 Purpose

The purpose of these regulations is to set forth the eligibility standards, policies and procedures of the Interim Assis-

tance program and to identify roles of participating agencies in implementing and sustaining the program.

10:38-1.4 Definitions

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

"Boarding home" means a building containing two or more units of dwelling space arranged or intended for single room occupancy, exclusive of any such unit occupied by an owner or operator, offering no financial or personal services other than a room, food service, and laundry to two or more residents unrelated to the operator. Such facilities shall be licensed by the State Department of Community Affairs, pursuant to P.L. 1979, c.496 (Rooming House/Boarding House Act of 1979).

"Contract agency" means an agency contracted with the Division of Mental Health Services to receive State funds to provide various residential and/or treatment programs.

"Discharge" means legal discharge of a patient from the hospital to which he or she has been confined.

"Discharge Coordinator or equivalent" means the individual responsible for maintaining a housing resource file, providing technical assistance to placement social workers and monitoring the discharge process. This individual may also fulfill the role of Financial Coordinator.

"Discharge Oriented Service Plan" means a document used to coordinate and record all aspects of the discharge planning process.

"Discharge Unit or equivalent" means a discrete placement unit within the State psychiatric hospital responsible for locating housing, linking to aftercare services, and monitoring the adequacy of post-discharge housing and social services.

"DMHS" means the Division of Mental Health Services within the Department of Human Services.

"Drug addiction or alcohol (D.A.A.) case" means a client is disabled because of drug addiction and/or alcoholism.

"Financial Coordinator or designee" means the individual responsible for overseeing the functions of the Financial Entitlement Unit, including the supervision of the Income Maintenance Technician (IMT). This Coordinator is also responsible for monitoring post-discharge financial services. This individual may also fulfill the role of Discharge Coordinator.

"Financial Entitlement Unit or its equivalent" means that institutional unit within the Division of Mental Health Services which processes Interim Assistance, SSI and General Assistance applications for State psychiatric hospital clients who are being prepared to release.

"General assistance" means assistance provided by a municipal welfare department to a financially needy person who is