

**LEGAL NOTICE
STATE OF NEW JERSEY
DEPARTMENT OF HEALTH
DIVISION OF HEALTH CARE FINANCING
DEPARTMENT OF HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES
HOSPITAL FINANCE**

Hospital Per Adjusted Admission Assessment Charge

TAKE NOTICE that the New Jersey Department of Health, Office of Health Care Financing together with the New Jersey Department of Human Services (DHS), Division of Medical Assistance and Health Services (DMAHS) intend to seek any required approval from and/or file a Title XIX Medicaid State Plan Amendment with the United States Department of Health and Human Services (HHS), Centers for Medicare and Medicaid Services (CMS), to amend the hospital per adjusted admission assessment charge of \$10 as follows. Notwithstanding the provisions of any law or regulation to the contrary, and subject to such modifications as may be required by CMS in order to comply with permissibility standards set forth in 42 C.F.R. 433.68, and achieve any required federal approval and federal financial participation, the hospital per adjusted admission assessment charge of \$10 originally established pursuant to P.L.1992, c.160 (C.26:2H-18.51et al.) to apply to all general acute care hospitals, shall also apply to all rehabilitation hospitals and long-term acute care hospitals pursuant to P.L.2018, c.116 (C.26:2H-18.57).

The State estimates that expanding the \$10 per adjusted admission assessment charge to long term acute care hospitals and rehabilitation hospitals will generate new State revenue of approximately \$268,646 in SFY 2019 and \$268,646 SFY 2020. This revenue will be in addition to the estimated \$17.41 million in State revenue collected through the current \$10 per adjusted admission assessment charge on general acute care hospital admissions for an estimated total collected State revenue of \$17.68 million each in SFY 2019 and SFY 2020.

Currently, the per adjusted admission assessment charge on acute care hospitals does not meet the permissibility standards set forth in 42 C.F.R. 433.68 and the amounts collected are deducted from the State's quarterly CMS-64 Title XIX

Medicaid claim. Subject to CMS approval of the expanded assessment's permissibility, the federal financial participation will increase by approximately \$8.7 million.

This notice is intended to satisfy the requirements of 42 U.S.C. 1396a(a)(13) and 42 C.F.R. 447.205. A copy of this Notice is available for public review at the Medical Assistance Customer Centers, County Welfare Agencies, and on the DHS website at <http://www.state.nj.us/humanservices/providers/grants/public/index.html>. Comments or inquiries must be submitted in writing within 30 days of the date of this notice to:

Joy Lindo

Department of Health

Office of Legal and Regulatory Compliance

P.O. Box 360

Trenton, New Jersey 08625