

TABLE F
(No change.)

- 1. (No change.)
- 2. Exterior Wall Openings: If the group of a building is changed to a higher hazard classification in accordance with Table F, the requirements for exterior wall openings in the table below shall be met.

<u>Group</u>	<u>Exterior Wall Requirements</u>
H	No opening permitted with a fire separation distance of three feet or less. Protected openings required with a fire separation distance of 20 feet or less.
A-1, A-2 Nightclubs, A-2 Other than Nightclubs, A-3, A-4, A-3 [Churches] Places of Worship , B, E, F-1, I-1, I-2, I-3, I-4, M, S-1, R-1	No openings permitted with a fire separation distance of three feet or less. Walls with a fire separation distance of 10 feet or less, but more than three feet, are permitted to have unprotected openings with an aggregate area not exceeding 10 percent of the area of the wall. Openings in excess of 10 percent of the aggregate wall area shall be protected.
F-2, S-2	No openings permitted with a fire separation distance of three feet or less. Protected openings required with a fire separation distance of five feet or less.

i.iii. (No change.)
(g) Automatic Sprinkler Systems: The following automatic sprinkler system requirements apply in changes of use.

TABLE G
Hazard Categories and Classifications
Automatic Sprinkler Systems

<u>Relative Hazard</u>	<u>Use Classification</u>
1 (highest)	A-2 nightclubs, H, I
2	A-2 (other than nightclubs), R-1, R-2, R-3, R-4
3	A-1, A-3, A-4
4	F-1, M, S-1
5	A-3 [Churches] Places of Worship , E
6 (lowest)	A-5, B, F-2, R-5, S-2, U

- 1.-4. (No change.)
- (h)-(q) (No change.)

HUMAN SERVICES

(a)

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

Psychological Services

Adopted Amendments: N.J.A.C. 10:67-1.2, 1.3, and 3
Adopted Repeal: N.J.A.C. 10:67-2.3

Proposed: June 5, 2023, at 55 N.J.R. 1128(a).
Adopted: November 20, 2023, by Sarah Adelman, Commissioner, Department of Human Services.
Filed: November 29, 2023, as R.2024 d.001, **without change**.
Authority: N.J.S.A. 30:4D-1 et seq., and 30:4J-8 et seq.
Agency Control Number: 23-A-01.
Effective Date: January 2, 2024.
Expiration Date: November 15, 2028.

Summary of Public Comment and Agency Response:
No comments were received.

Federal Standards Statement

Section 1902(a)(10) of the Social Security Act, 42 U.S.C. §1396a(a)(10), regulates program eligibility including the amount, duration, and scope of benefits. Section 1905(a)(6) of the Social Security Act, 42 U.S.C. §1396d(a)(6), governs reimbursement pursuant to State medical assistance programs for remedial care recognized pursuant to State law, which is furnished by licensed practitioners within the scope of their practice, as defined by State law. Federal regulations at 42 CFR 440.60(a) provide that remedial services rendered to a beneficiary by a licensed practitioner, practicing within the scope defined by State law, are reimbursable.

Title XXI of the Social Security Act allows states to establish a children’s health insurance program for targeted low-income children. New Jersey elected this option through implementation of the NJ FamilyCare Children’s Program. Section 2103, 42 U.S.C. §1397cc, provides broad coverage guidelines for the program. Section 2103(c)(5), specifically requires mental health and substance abuse services for children.

Regulations at 42 CFR 162.404 through 414 require the use of a standard unique health identifier for health care providers; the National Provider Identifier (NPI).

The Department has reviewed the applicable Federal laws and regulations and that review indicates that the adopted amendments and repeal do not exceed Federal standards. Therefore, a Federal standards analysis is not required.

Full text of the adopted amendments follows:

SUBCHAPTER 1. INTRODUCTION

10:67-1.2 Definitions

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

...
“Face-to-face” means direct contact between the provider and the patient during a treatment session, this shall include a telehealth visit.

“National Plan and Provider Enumerations System (NPPES)” means the system that assigns NPIs, maintains and updates information about health care providers with NPIs, and disseminates the NPI Registry and the NPPES Downloadable File. The NPI Registry is an online query system that allows users to search for a health care provider’s information.

“National Provider Identifier (NPI)” means a unique 10-digit identification number issued to health care providers by the Centers for Medicare and Medicaid Services (CMS).

...
“Psychological specialist” means a psychologist who limits his or her practice to his or her specialty and who:

- 1. (No change.)
- 2. Is eligible for or has been notified of admissibility to the examination by the American Board of Professional Psychology (Diplomate Eligible).

...
“Taxonomy code” means a code that describes the provider or organization’s type, classification, and the area of specialization.

“Type 1 NPI” means a code that describes an individual provider in the NPPES system.

“Type 2 NPI” means a code that describes an organizational provider in the NPPES system.

10:67-1.3 Conditions of participation

(a)-(c) (No change.)

(d) In order to be approved as a Medicaid/NJ FamilyCare-participating provider, the applicant shall have a valid National Provider Identifier (NPI) obtained from the National Plan and Provider Enumeration System (NPPES) and a valid taxonomy code for “psychologist” or “psychologist specialist” obtained from the NPPES.

(e) Once approved as a Medicaid/NJ FamilyCare provider, the provider shall remain a provider in good standing by successfully completing provider revalidation when requested by DMAHS.

SUBCHAPTER 2. GENERAL PROVISIONS

10:67-2.3 (Reserved)

SUBCHAPTER 3. CENTERS FOR MEDICARE & MEDICAID SERVICES (CMS) HEALTHCARE COMMON PROCEDURE CODING SYSTEM (HCPCS) CODE AND MAXIMUM FEE SCHEDULE FOR PSYCHOLOGICAL SERVICES

10:67-3.1 Introduction

(a)-(b) (No change.)

(c) The psychological services use exclusively Level I HCPCS codes of a two-level coding system, as follows:

1. (No change.)

(d) Specific elements of HCPCS codes require the attention of providers. The lists of HCPCS code numbers for psychologist services are arranged in tabular form with specific information for a code given under columns with titles such as: "IND," "HCPCS CODE," "MOD," "DESCRIPTION," "FOLLOW-UP DAYS," and "MAXIMUM FEE ALLOWANCE." The information given under each column is summarized below:

1. Alphabetic and numeric symbols under "IND" and "MOD": These symbols, when listed under the "IND" and "MOD" columns, are elements of the HCPCS coding system used as qualifiers or indicators ("IND" column) and as modifiers ("MOD" column). They assist the provider in determining the appropriate procedure codes to be used, the area to be covered, the minimum requirements needed, and any additional parameters required for reimbursement purposes.

i. (No change.)

ii. If there is no identifying symbol listed, the CPT/HCPCS procedure code narrative prevails.

IND (No change.)

...

MOD = (No change.)

"22" = (No change.)

HA = Services provided in child and/or adolescent treatment program.

(e) (No change.)

10:67-3.2 HCPCS Codes and reimbursement rates for psychological services (Level I)

IND	HCPCS Code	MOD	Maximum Fee Allowance	
			\$	NS
N	90791		\$167.21	\$142.13
N	90832		\$68.21	\$28.83
N	90833		\$70.33	\$29.69
N	90834		\$90.26	\$37.83
N	90836		\$88.79	\$37.12
N	90837		\$90.26	\$36.73
N	90838		\$89.04	\$36.73
N	90839			\$92.82
N	90846	HA 22		\$24.50
N	90847		\$113.94	\$26.00
...				
N	90853		\$27.50	\$6.00
N	90887		\$22.91	\$13.00
...				
N	96153		\$3.68	\$3.13
...				

10:67-3.3 HCPCS Code qualifiers for psychological services

Code	Narrative
90791	Initial Comprehensive Psychiatric Evaluation QUALIFIER: A Medicaid/NJ FamilyCare provider who is a psychologist may bill this physician procedure code for parallel psychological services. This code requires, for reimbursement purposes, a minimum of 50 minutes of face-to-face contact with the patient or family member.
90832	Individual Psychotherapy—approximately 20 to 30 minutes face-to-face with the patient QUALIFIER: This code requires, for reimbursement purposes, a minimum of 20 minutes of face-to-face contact with the patient or family member.
90834	Individual Psychotherapy—approximately 45 to 50 minutes face-to-face with the patient QUALIFIER: This code requires, for reimbursement purposes, a minimum of 45 minutes of face-to-face contact with the patient or family member.
...	
90853	Group psychotherapy by a psychologist (other than of a multiple family group) 60-90 minutes QUALIFIER: A Medicaid/NJ FamilyCare provider who is a psychologist may bill this physician procedure code for parallel psychological services. This code requires, for reimbursement purposes, a minimum of 60 minutes of face-to-face contact with the group members per session. One unit equals 60 minutes for each person in the group with the maximum of eight persons in the group.
...	

LAW AND PUBLIC SAFETY

(a)

DIVISION OF GAMING ENFORCEMENT Fees

Adopted Amendments: N.J.A.C. 13:69A-9.1, 9.4, 9.19, and 9.20

Adopted New Rule: N.J.A.C. 13:69A-9.21

Proposed: June 5, 2023, at 55 N.J.R. 1161(a).

Adopted: November 30, 2023, by David Rebeck, Director, Division of Gaming Enforcement.

Filed: November 30, 2023, as R.2024 d.002, **without change.**

Authority: N.J.S.A. 5:12-69, 70, 139, 141, and 141.1.

Effective Date: January 2, 2024.

Expiration Date: October 24, 2025.

Summary of Public Comment and Agency Response:

COMMENT: One comment was received from the Casino Association of New Jersey seeking to require additional language to the proposed new rule at N.J.A.C. 13:69A-9.21, which would require the Division of Gaming Enforcement (DGE) to divulge certain information, including of an investigative nature, to casino licensees.

RESPONSE: DGE has considered the single comment received and has determined that the text in the rulemaking is adopted without change at this time as the basis of the comment as to the outsourcing of DGE services is not included or envisioned by the language of the rule.

Federal Standards Statement

The adopted amendments and new rule are not adopted pursuant to the authority of, or in order to, implement, comply with, or participate in any program established pursuant to Federal law or pursuant to a State statute that incorporates or refers to Federal law, standards, or requirements. The DGE's adopted amendments and adopted new rule concern the requirements for licensed casino facilities, racetracks that host sports