30:4D-7

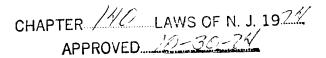
LEGISLATIVE HISTORY CHECKLIST

NJSA <u>30:4D-7</u>	-		
Laws of <u>1974</u> Chapter	140		
Bill No. <u>S 1310</u>			
Sponsor(s) Greenberg	anna a tha an ann an a		
Date Introduced July 18, 197	4		
Committee: AssemblyInstitut	ions, Health	& Welfare	
Senate Institut	ions, Health	& Welfare	
Amended during passage	Yes	XXX Amendments	during passage asterisks
Date of passage: Assembly0	ctober 21	denoted by	aster 15K5
SenateS	eptember 30		
Date of approvalOctober 30			
Following statements are attached if available:			
Sponsor statement	Yes	XUO	Not Remove From
Committee Statement: Assembly	***	ił o	
Senate	****	No	
Fiscal Note	**	No	
Veto message	***	No	D some
Nessage on signing	Yes	Xixo	
Following were printed:			
Reports	XX2x5	No	COPY Library
Hearings	XX X2X5	No	
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[OFFICIAL COPY REPRINT] SENATE, No. 1310

STATE OF NEW JERSEY

INTRODUCED JULY 18, 1974

By Senator GREENBERG

Referred to Committee on Institutions, Health and Welfare

An Act to amend the "New Jersey Medical Assistance and Health Services Act," approved January 15, 1969 (P. L. 1968, c. 413).

1 BE IT ENACTED by the Senate and General Assembly of the State

2 of New Jersey:

1 1. Section 7 of P. L. 1968, c. 413 (C. 30:4D-7) is amended to 2 read as follows:

7. Duties of commissioner. Under general policies established 3 by the State Board of Control, the] The commissioner is authorized 4 and empowered to issue, or to cause to be issued through the Divi-5 sion of Medical Assistance and Health Services all necessary rules 6 and regulations and administrative orders, and to do or cause to 7 8 be done all other acts and things necessary to secure for the State 9 of New Jersey the maximum Federal participation that is available with respect to a program of medical assistance, consistent with 10 fiscal responsibility and within the limits of funds available for 11 12any fiscal year, and to the extent authorized by the medical assist-13ance program plan; to adopt fee schedules with regard to medical 14 assistance benefits and otherwise to accomplish the purposes of this act, including specifically the following: 15

16 a. Subject to the limits imposed by this act, to submit a plan for 17medical assistance, as required by Title XIX of the Federal Social Security Act, to the Federal Department of Health, Education and 18 Welfare for approval pursuant to the provisions of such laws; 19 20to act for the State in making negotiations relative to the sub-21mission and approval of such plan, to make such arrangements, 22not inconsistent with the law, as may be required by or pursuant 23to Federal law to obtain and retain such approval and to secure for the State the benefits of the provisions of such law; 24

b. Subject to the limits imposed by this act, to determine the
 amount and scope of services to be covered, that the amounts to be
 EXPLANATION—Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

paid are reasonable, and the duration of medical assistance to be 27furnished; provided, however, that the department shall provide 28medical assistance on behalf of all recipients of categorical assist-29ance and such other related groups as are mandatory under Federal 30 laws and rules and regulations, as they now are or as they may 3132be hereafter amended, in order to obtain Federal matching funds 33for such purposes and, in addition, provide medical assistance for the foster children specified in section 3. f. (5) of this act. The 3435 medical assistance provided for these groups shall not be less in scope, duration, or amount than is currently furnished such groups, 36and in addition, shall include at least the minimum services re-37quired under Federal laws and rules and regulations to obtain 38 Federal matching funds for such purposes. 39

40The commissioner is authorized and empowered, at such times 41 as he may determine feasible, within the limits of appropriated 42funds for any fiscal year, to extend the scope, duration, and amount of medical assistance on behalf of these groups of categorical 4344 assistance recipients, related groups as are mandatory, and foster children authorized pursuant to section 3. f. (5) of this act, so as to 4546include, in whole or in part, the optional medical services autho-47rized under Federal laws and rules and regulations, and the com-48 missioner shall have the authority to establish and maintain the 49 priorities given such optional medical services; provided, however, 50that medical assistance shall be provided to at least such groups 51and in such scope, duration, and amount as are required to obtain 52Federal matching funds [, but in no event shall medical assistance 53be furnished under this act on behalf of any individuals or groups 54not enumerated in section 3. f. for whom Federal matching funds cannot be obtained, nor in any scope, duration or amount in excess 55 of those for which Federal matching funds can be obtained]; 56

The commissioner is further authorized and empowered, at such 57times as he may determine feasible, within the limits of appropri-58ated funds for any fiscal year, to issue, or cause to be issued through 59the Division of Medical Assistance and Health Services all neces-60 61sary rules, regulations and administrative orders, and to do or 62cause to be done all other acts and things necessary to implement and administer demonstration projects pursuant to Title *[XIX]* 63 64 *XI*, Section 1115 of the Federal Social Security Act, including, but 65not limited to waiving compliance with specific provisions *of* this 66 act, to the extent and for the period of time the commissioner deems 67 necessary, as well as contracting with any legal entity, including but not limited to corporations organized pursuant to Title 14A, 68

69 New Jersey Statutes (N. J. S. 14A:1-1 et seq.) and Title 15, Re-

70 vised Statutes (R. S. 15:1-1 et seq.) as well as boards, groups,

71 agencies, persons and other public or private entities.

72 c. To administer the provisions of this act;

73 d. To make reports to the Federal Department of Health, Edu-

cation and Welfare as from time to time may be required by such
Federal department and to the New Jersey Legislature as hereinafter provided;

e. To assure that any applicant for medical assistance shall be
afforded the opportunity for a fair hearing by the department
should his claim for medical assistance be denied or not acted upon
with reasonable promptness;

f. To provide that either the recipient or the provider shall be
afforded the opportunity for a fair hearing within a reasonable
time on any valid complaint;

g. To provide safeguards to restrict the use or disclosure of
information concerning applicants and recipients to purposes
directly connected with administration of this act[.];

h. To recover any and all payments incorrectly or illegally made
to a recipient or provider from such provider, the recipient or his
estate;

90 i. To recover any and all benefits incorrectly paid to a provider on behalf of a recipient from such recipient or from his estate 91 except that no lien may be imposed against property of the recip-9293 ient prior to his death except pursuant to the judgment of a court; 94 j. To take all reasonable measures to ascertain the legal liability 95of third parties to pay for care and services (available under the plan) arising out of injury, disease, or disability; where it is known 96 that a third party has a legal liability, to treat such legal liability 97 as a resource of the individual on whose behalf the care and services 98 are made available for purposes of determining eligibility; and 99 100 in any case where such a legal liability is found to exist after 101 medical assistance has been made available on behalf of the indi-102 vidual, to seek reimbursement for such assistance to the extent of 103 such legal liability. In any case where such a legal liability is 104 found the department shall be subrogated to the rights of the 105 individual for whom medical assistance was made available[.];

106 k. To solicit, receive and review bids pursuant to the provisions 107 of P. L. 1954, c. 48 (C. 52:34-6 et seq.) and all amendments and 108 supplements thereto, by authorized insurance companies and non-109 profit hospital service corporations or medical service corporations, 110 incorporated in New Jersey, and authorized to do business pursuant 111 to P. L. 1938, c. 366 (C. 17:48-1 et seq.) or P. L. 1940, c. 74 112 (C. 17:48A-1 et seq.), and to make recommendations in connection 113 therewith to the State Medicaid Commission[.];

114 l. To contract, or otherwise provide as in this act provided, for 115 the payment of claims in the manner approved by the State 116 Medicaid Commission[.];

117 m. Where necessary, to advance funds to the underwriter or fiscal 118 agent to enable such underwriter or fiscal agent, in accordance 119 with terms of its contract, to make payments to providers;

120 n. To contract with and to pay [the] for appropriate agencies 121 that investigate and determine [county welfare boards for in-122 vestigating and determining] whether applicants for benefits under 123 this act are eligible therefor under the standards prescribed by the 124 department;

o. To assure that the nature and quality of the medical assistance
provided for under this act shall be uniform and equitable to all
recipients.

1 2. This act shall take effect immediately.

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o. To assure that the nature and quality of the medical assistanceprovided for under this act shall be uniform and equitable to allrecipients.

1 2. This act shall take effect immediately.

STATEMENT

This bill provides the Commissioner of Institutions and Agencies with sufficient statutory authority to participate jointly with the U.S. Secretary for Health, Education and Welfare in waiving certain medicaid eligibility requirements. The bill also enables the commissioner to provide medicaid benefits to indivduals or groups for whom Federal matching funds could not be obtained. FROM THE OFFICE OF THE COVERNOR

OCTOBER 30, 1974

FOR IMMEDIATE RELEASE

FOR FURTHER INFORMATION DICK CAMPBELL

Governor Brendan Byrne signed into law Wednesday a bill designed to clear the way for the Newark Medicaid waiver project.

The bill, S-1310, sponsored by Senator Martin L. Greenberg, D-Essex, authorizes the state commissioner of institutions and agencies to waive Medicaid eligibility provisions in certain instances and to contract with a non-profit corporation to administer the program.

The measure is needed in order for the state to participate with the federal government in the Newark Medicaid waiver project.

The project is a three-year pilot program sponsored jointly by the state and federal governments to provide comprehensive health care to certain medically indigent who do not meet Medicaid eligibility requirements.

The project calls for New Jersey to receive an estimated * \$27 million in federal aid, which will be matched about equally with state funds.

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