

VETO MESSAGE: Yes

GOVERNOR'S PRESS RELEASE ON SIGNING: No

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LAW/IS 10/6/09

[Second Reprint]
SENATE, No. 221

STATE OF NEW JERSEY
213th LEGISLATURE

PRE-FILED FOR INTRODUCTION IN THE 2008 SESSION

Sponsored by:

Senator ROBERT W. SINGER

District 30 (Burlington, Mercer, Monmouth and Ocean)

Senator DANA REDD

District 5 (Camden and Gloucester)

Assemblywoman MARY PAT ANGELINI

District 11 (Monmouth)

Assemblyman RONALD S. DANCER

District 30 (Burlington, Mercer, Monmouth and Ocean)

Assemblyman ERIC MUNOZ

District 21 (Essex, Morris, Somerset and Union)

Co-Sponsored by:

Senator Beck, Assemblywomen Greenstein and Handlin

SYNOPSIS

Requires nursing homes and assisted living residences to provide informational sheet concerning Medicaid eligibility to certain residents.

CURRENT VERSION OF TEXT

As amended on February 23, 2009 by the Senate pursuant to the Governor's recommendations.

(Sponsorship Updated As Of: 5/22/2009)

1 AN ACT concerning certain health care facilities and supplementing
2 Title 26 of the Revised Statutes.

3

4 BE IT ENACTED by the Senate and General Assembly of the State
5 of New Jersey:

6

7 1. a. For the purposes of this act:

8 ²"Assisted living facility" means an assisted living residence or
9 comprehensive personal care home licensed pursuant to P.L.1971,
10 c.136 (C.26:2H-1 et seq.);²

11 "Medicaid" means the program established pursuant to P.L.1968,
12 c.413 (C.30:4D-1 et seq.);

13 ²["Medicaid bed" means a bed which is reserved for a Medicaid-
14 eligible resident at a nursing home or assisted living residence;]²
15 and

16 "Medicaid-eligible" means that a person is determined to meet
17 the financial ²and clinical² eligibility standards ²[for medical
18 assistance for long-term care under the State Medicaid program or
19 is] and has been² approved by the Department of Health and Senior
20 Services for participation in a federally approved 1915(c) Medicaid
21 waiver program that provides assisted living services.

22 ²[b. A nursing home licensed pursuant to P.L.1971, c.136
23 (C.26:2H-1 et seq.) shall provide to a prospective private pay
24 resident, the financially responsible party for the prospective
25 resident, or the prospective resident's legal guardian, as appropriate,
26 a written informational sheet, prepared and updated by the
27 Department of Health and Senior Services and the Division of
28 Medical Assistance and Health Services in the Department of
29 Human Services pursuant to section 2 of this act, that explains
30 eligibility for long-term care under the Medicaid program.

31 c.]² b. ²An assisted living ²[residence] ²facility² licensed pursuant
32 to P.L.1971, c.136 (C.26:2H-1 et seq.) shall provide to a
33 prospective private pay resident, the financially responsible party
34 for the prospective resident, or the prospective resident's legal
35 guardian, as appropriate, a written informational sheet, prepared and
36 updated by the Department of Health and Senior Services and the
37 Division of Medical Assistance and Health Services in the
38 Department of Human Services pursuant to section 2 of this act,
39 that explains eligibility for participation in a federally approved
40 1915(c) Medicaid waiver program that provides assisted living
41 services.

EXPLANATION – Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

¹Senate SHH committee amendments adopted February 14, 2008.

²Senate amendments adopted in accordance with Governor's recommendations February 23, 2009.

1 ²[d.]^{c.}² The written informational sheet provided to the
 2 prospective private pay resident, financially responsible party, or
 3 legal guardian, pursuant to ²[subsections]subsection² b. ²[or c.]²
 4 of this section, shall be accompanied by a written statement, signed
 5 by an authorized representative of the ²[nursing home or]² assisted
 6 living ²[residence, as appropriate,]facility² stating that:

7 (1) The ²[nursing home or]² assisted living ²[residence, as
 8 appropriate,]facility² is unable to guarantee the availability of a
 9 ²[Medicaid]² bed ²for use by a Medicaid-eligible resident, pursuant
 10 to P.L.2001, c.234 (C.26:2H-12.16 et seq.)² at the ²[nursing home
 11 or]² assisted living ²[residence]facility² at the time that the
 12 resident becomes Medicaid-eligible; and

13 (2) If there is no ²[Medicaid]² bed ²for use by a Medicaid-
 14 eligible resident, pursuant to P.L.2001, c.234 (C.26:2H-12.16 et
 15 seq.)² available at the time the resident becomes Medicaid-eligible,
 16 ²[the resident will need to transfer to another] the assisted living
 17 facility has the option to transfer the resident to a² nursing home or
 18 ²another² assisted living ²[residence]facility², as appropriate.

19 ²[e.]^{d.}² ¹[Six months prior to the date that the private pay
 20 resident is likely to become Medicaid-eligible, an authorized
 21 representative of the nursing home or assisted living residence, as
 22 appropriate, shall inform the resident, financially responsible party,
 23 or legal guardian, as appropriate, in writing, of the position of the
 24 resident's placement on any list of residents awaiting a Medicaid
 25 bed at the nursing home or assisted living residence.] If a private
 26 pay resident of ²[a nursing home or]an² assisted living
 27 ²[residence]facility² , or the resident's financially responsible
 28 party, or legal guardian, as appropriate, provides written notice to
 29 the ²[nursing home or]² assisted living ²[residence]facility² that
 30 the resident is likely to become Medicaid-eligible within the next
 31 six months, the ²[nursing home or]² assisted living
 32 ²[residence]facility² , upon receipt of such notice, shall inform the
 33 resident, financially responsible party, or legal guardian, as
 34 appropriate, in writing, of the position at the time of the notice of
 35 the resident's placement on any list of residents awaiting a
 36 ²[Medicaid]² bed ²for use by a Medicaid-eligible resident, pursuant
 37 to P.L.2001, c.234 (C.26:2H-12.16 et seq.)² .¹

38
 39 2. The Department of Health and Senior Services, in
 40 consultation with the Division of Medical Assistance and Health
 41 Services in the Department of Human Services, shall prepare a
 42 written informational sheet for ²[nursing homes that explains
 43 eligibility for long-term care services under the State Medicaid
 44 Program, and a written informational sheet for]² assisted living
 45 ²[residences]facilities² that explains eligibility for participation in

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1 a federally approved 1915(c) Medicaid waiver program that
2 provides assisted living services. The informational sheets shall be
3 available on the website of the Department of Health and Senior
4 Services and shall be updated by the Department of Health and
5 Senior Services as necessary to reflect a change in eligibility for the
6 programs.

7

8 3. The Department of Health and Senior Services shall
9 distribute the applicable informational sheets, prepared and updated
10 pursuant to section 2 of this act, to all licensed ²[nursing homes
11 and]² assisted living ²[residences]facilities² in the State.

12

13 4. This act shall take effect on the 90th day after enactment.

1 (2) If there is no Medicaid bed available at the time the resident
2 becomes Medicaid-eligible, the resident will need to transfer to
3 another nursing home or assisted living residence, as appropriate.

4 e. Six months prior to the date that the private pay resident is
5 likely to become Medicaid-eligible, an authorized representative of
6 the nursing home or assisted living residence, as appropriate, shall
7 inform the resident, financially responsible party or legal guardian,
8 as appropriate, in writing, of the position of the resident's placement
9 on any list of residents awaiting a Medicaid bed at the nursing home
10 or assisted living residence.

11
12 2. The Department of Health and Senior Services, in consultation
13 with the Division of Medical Assistance and Health Services in the
14 Department of Human Services, shall prepare a written
15 informational sheet for nursing homes that explains eligibility for
16 long-term care services under the State Medicaid Program, and a
17 written informational sheet for assisted living residences that
18 explains eligibility for participation in a federally approved 1915(c)
19 Medicaid waiver program that provides assisted living services.
20 The informational sheets shall be available on the website of the
21 Department of Health and Senior Services and shall be updated by
22 the Department of Health and Senior Services as necessary to
23 reflect a change in eligibility for the programs.

24
25 3. The Department of Health and Senior Services shall distribute
26 the applicable informational sheets, prepared and updated pursuant
27 to section 2 of this act, to all licensed nursing homes and assisted
28 living residences in the State.

29
30 4. This act shall take effect on the 90th day after enactment.

31
32

33 *S P O N S O R ' S* STATEMENT

34
35 This bill requires a nursing home and assisted living residence to
36 provide to a prospective private pay resident, the financially
37 responsible party for the prospective resident or the prospective
38 resident's legal guardian, as appropriate, a written informational
39 sheet that explains eligibility for long-term care under the Medicaid
40 program or eligibility for participation in a federally approved
41 1915(c) Medicaid waiver program that provides assisted living
42 services, as appropriate.

43 Under the provisions of the bill, the written informational sheet
44 must be accompanied by a written statement, signed by an
45 authorized representative of the nursing home or assisted living
46 residence, as appropriate, stating that:

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1 - The nursing home or assisted living residence, as appropriate,
2 is unable to guarantee the availability of a Medicaid bed at the
3 nursing home or assisted living residence at the time that the
4 resident becomes Medicaid-eligible; and

5 - If there is no Medicaid bed available at the time the resident
6 becomes Medicaid-eligible, the resident will need to transfer to
7 another nursing home or assisted living residence, as appropriate.

8 The bill also requires that six months prior to the date that the
9 private pay resident is likely to become Medicaid-eligible, an
10 authorized representative of the nursing home or assisted living
11 residence, as appropriate, must inform the resident, financially
12 responsible party or legal guardian, as appropriate, in writing, of the
13 position of the resident's placement on any list of residents awaiting
14 a Medicaid bed at the nursing home or assisted living residence.

15 The bill also requires the Department of Health and Senior
16 Services, in consultation with the Division of Medical Assistance
17 and Health Services in the Department of Human Services, to
18 prepare and update a written informational sheet for nursing homes
19 that explains eligibility for long-term care services under the State
20 Medicaid Program and a written informational sheet for assisted
21 living residences that explains eligibility for participation in a
22 federally approved 1915(c) Medicaid waiver program that provides
23 assisted living services. The informational sheets would be
24 available on the website of the Department of Health and Senior
25 Services.

26 Lastly, the bill requires the Department of Health and Senior
27 Services to distribute the applicable informational sheets to all
28 licensed nursing homes and assisted living residences in the State.

ASSEMBLY HEALTH AND SENIOR SERVICES COMMITTEE

STATEMENT TO

[First Reprint]

SENATE, No. 221

STATE OF NEW JERSEY

DATED: DECEMBER 8, 2008

The Assembly Health and Senior Services Committee reports favorably Senate Bill No. 221 (1R).

This bill requires certain health care facilities to provide information to prospective private pay residents, or other designated individuals on their behalf, about eligibility for certain publicly funded long-term care services.

The bill provides specifically as follows:

- A nursing home and an assisted living residence must provide to a prospective private pay resident, the financially responsible party for the prospective resident, or the prospective resident's legal guardian, as appropriate, a written informational sheet that explains eligibility for long-term care under the Medicaid program or eligibility for participation in a federally approved 1915(c) Medicaid waiver program that provides assisted living services, as appropriate.
- The written informational sheet must be accompanied by a written statement, signed by an authorized representative of the nursing home or assisted living residence, as appropriate, stating that:
 - The nursing home or assisted living residence, as appropriate, is unable to guarantee the availability of a Medicaid bed at the nursing home or assisted living residence at the time that the resident becomes Medicaid-eligible; and
 - If there is no Medicaid bed available at the time the resident becomes Medicaid-eligible, the resident will need to transfer to another nursing home or assisted living residence, as appropriate.
- If a private pay resident of a nursing home or assisted living residence, or the resident's financially responsible party, or legal guardian, as appropriate, provides written notice to the nursing home or assisted living residence that the resident is likely to become Medicaid-eligible within the next six months, the nursing home or assisted living residence, upon receipt of such notice, must inform the resident, financially responsible party, or legal guardian, as appropriate, in writing, of the position at the time of the notice of the resident's placement on any list of residents awaiting a Medicaid bed.

- The Department of Health and Senior Services (DHSS), in consultation with the Division of Medical Assistance and Health Services in the Department of Human Services, is to prepare and update a written informational sheet for nursing homes that explains eligibility for long-term care services under the State Medicaid Program and a written informational sheet for assisted living residences that explains eligibility for participation in a federally approved 1915(c) Medicaid waiver program that provides assisted living services. The informational sheets are to be available on the DHSS website.
- DHSS is to distribute the applicable informational sheets to all licensed nursing homes and assisted living residences in the State.

This bill is identical to Assembly Bill No. 2334 (Angelini/Dancer), which the committee also reported on this date.

SENATE HEALTH, HUMAN SERVICES AND SENIOR
CITIZENS COMMITTEE

STATEMENT TO

SENATE, No. 221

with committee amendments

STATE OF NEW JERSEY

DATED: FEBRUARY 14, 2008

The Senate Health, Human Services and Senior Citizens Committee reports favorably and with amendments Senate Bill No. 221.

As amended by committee, this bill requires a nursing home and assisted living residence to provide to a prospective private pay resident, the financially responsible party for the prospective resident, or the prospective resident's legal guardian, as appropriate, a written informational sheet that explains eligibility for long-term care under the Medicaid program or eligibility for participation in a federally approved 1915(c) Medicaid waiver program that provides assisted living services, as appropriate.

Under the provisions of the bill, the written informational sheet must be accompanied by a written statement, signed by an authorized representative of the nursing home or assisted living residence, as appropriate, stating that:

- The nursing home or assisted living residence, as appropriate, is unable to guarantee the availability of a Medicaid bed at the nursing home or assisted living residence at the time that the resident becomes Medicaid-eligible; and

- If there is no Medicaid bed available at the time the resident becomes Medicaid-eligible, the resident will need to transfer to another nursing home or assisted living residence, as appropriate.

The bill also requires if a private pay resident of a nursing home or assisted living residence, or the resident's financially responsible party, or legal guardian, as appropriate, provides written notice to the nursing home or assisted living residence that the resident is likely to become Medicaid-eligible within the next six months, the nursing home or assisted living residence, upon receipt of such notice, shall inform the resident, financially responsible party, or legal guardian, as appropriate, in writing, of the position at the time of the notice of the resident's placement on any list of residents awaiting a Medicaid bed.

The bill also requires the Department of Health and Senior Services, in consultation with the Division of Medical Assistance and

Health Services in the Department of Human Services, to prepare and update a written informational sheet for nursing homes that explains eligibility for long-term care services under the State Medicaid Program and a written informational sheet for assisted living residences that explains eligibility for participation in a federally approved 1915(c) Medicaid waiver program that provides assisted living services. The informational sheets would be available on the website of the Department of Health and Senior Services.

Lastly, the bill requires the Department of Health and Senior Services to distribute the applicable informational sheets to all licensed nursing homes and assisted living residences in the State.

The committee amended the bill to clarify the respective responsibilities of a resident of a nursing home or assisted living facility, and those facilities, when a resident is likely to become Medicaid-eligible. The amendments provide that if a private pay resident of a nursing home or assisted living residence, or the resident's financially responsible party, or legal guardian, as appropriate, provides written notice to the nursing home or assisted living residence that the resident is likely to become Medicaid-eligible within the next six months, the nursing home or assisted living residence, upon receipt of such notice, shall inform the resident, financially responsible party or legal guardian, as appropriate, in writing, of the position at the time of the notice of the resident's placement on any list of residents awaiting a Medicaid bed.

This bill was pre-filed for introduction in the 2008-2009 session pending technical review. As reported, the bill includes the changes required by technical review, which has been performed.

1 (2) If there is no Medicaid bed available at the time the resident
2 becomes Medicaid-eligible, the resident will need to transfer to
3 another nursing home or assisted living residence, as appropriate.

4 e. If a private pay resident of a nursing home or assisted
5 living residence, or the resident's financially responsible party, or
6 legal guardian, as appropriate, provides written notice to the nursing
7 home or assisted living residence that the resident is likely to
8 become Medicaid-eligible within the next six months, the nursing
9 home or assisted living residence, upon receipt of such notice, shall
10 inform the resident, financially responsible party, or legal guardian,
11 as appropriate, in writing, of the position at the time of the notice of
12 the resident's placement on any list of residents awaiting a Medicaid
13 bed.

14
15 2. The Department of Health and Senior Services, in
16 consultation with the Division of Medical Assistance and Health
17 Services in the Department of Human Services, shall prepare a
18 written informational sheet for nursing homes that explains
19 eligibility for long-term care services under the State Medicaid
20 Program, and a written informational sheet for assisted living
21 residences that explains eligibility for participation in a federally
22 approved 1915(c) Medicaid waiver program that provides assisted
23 living services. The informational sheets shall be available on the
24 website of the Department of Health and Senior Services and shall
25 be updated by the Department of Health and Senior Services as
26 necessary to reflect a change in eligibility for the programs.

27
28 3. The Department of Health and Senior Services shall
29 distribute the applicable informational sheets, prepared and updated
30 pursuant to section 2 of this act, to all licensed nursing homes and
31 assisted living residences in the State.

32
33 4. This act shall take effect on the 90th day after enactment.

34
35
36 SPONSOR'S STATEMENT

37
38 This bill requires a nursing home and assisted living residence to
39 provide to a prospective private pay resident, the financially
40 responsible party for the prospective resident, or the prospective
41 resident's legal guardian, as appropriate, a written informational
42 sheet that explains eligibility for long-term care under the Medicaid
43 program or eligibility for participation in a federally approved
44 1915(c) Medicaid waiver program that provides assisted living
45 services, as appropriate.

46 Under the provisions of the bill, the written informational sheet
47 must be accompanied by a written statement, signed by an

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1 authorized representative of the nursing home or assisted living
2 residence, as appropriate, stating that:

3 - The nursing home or assisted living residence, as appropriate,
4 is unable to guarantee the availability of a Medicaid bed at the
5 nursing home or assisted living residence at the time that the
6 resident becomes Medicaid-eligible; and

7 - If there is no Medicaid bed available at the time the resident
8 becomes Medicaid-eligible, the resident will need to transfer to
9 another nursing home or assisted living residence, as appropriate.

10 The bill also requires if a private pay resident of a nursing home
11 or assisted living residence, or the resident's financially responsible
12 party, or legal guardian, as appropriate, provides written notice to
13 the nursing home or assisted living residence that the resident is
14 likely to become Medicaid-eligible within the next six months, the
15 nursing home or assisted living residence, upon receipt of such
16 notice, shall inform the resident, financially responsible party, or
17 legal guardian, as appropriate, in writing, of the position at the time
18 of the notice of the resident's placement on any list of residents
19 awaiting a Medicaid bed.

20 The bill also requires the Department of Health and Senior
21 Services, in consultation with the Division of Medical Assistance
22 and Health Services in the Department of Human Services, to
23 prepare and update a written informational sheet for nursing homes
24 that explains eligibility for long-term care services under the State
25 Medicaid Program and a written informational sheet for assisted
26 living residences that explains eligibility for participation in a
27 federally approved 1915(c) Medicaid waiver program that provides
28 assisted living services. The informational sheets would be
29 available on the website of the Department of Health and Senior
30 Services.

31 Lastly, the bill requires the Department of Health and Senior
32 Services to distribute the applicable informational sheets to all
33 licensed nursing homes and assisted living residences in the State.

ASSEMBLY HEALTH AND SENIOR SERVICES COMMITTEE

STATEMENT TO

ASSEMBLY, No. 2334

STATE OF NEW JERSEY

DATED: DECEMBER 8, 2008

The Assembly Health and Senior Services Committee reports favorably Assembly Bill No. 2334.

This bill requires certain health care facilities to provide information to prospective private pay residents, or other designated individuals on their behalf, about eligibility for certain publicly funded long-term care services.

The bill provides specifically as follows:

- A nursing home and an assisted living residence must provide to a prospective private pay resident, the financially responsible party for the prospective resident, or the prospective resident's legal guardian, as appropriate, a written informational sheet that explains eligibility for long-term care under the Medicaid program or eligibility for participation in a federally approved 1915(c) Medicaid waiver program that provides assisted living services, as appropriate.
- The written informational sheet must be accompanied by a written statement, signed by an authorized representative of the nursing home or assisted living residence, as appropriate, stating that:
 - The nursing home or assisted living residence, as appropriate, is unable to guarantee the availability of a Medicaid bed at the nursing home or assisted living residence at the time that the resident becomes Medicaid-eligible; and
 - If there is no Medicaid bed available at the time the resident becomes Medicaid-eligible, the resident will need to transfer to another nursing home or assisted living residence, as appropriate.
- If a private pay resident of a nursing home or assisted living residence, or the resident's financially responsible party, or legal guardian, as appropriate, provides written notice to the nursing home or assisted living residence that the resident is likely to become Medicaid-eligible within the next six months, the nursing home or assisted living residence, upon receipt of such notice, must inform the resident, financially responsible party, or legal guardian, as appropriate, in writing, of the position at the time of the notice of the resident's placement on any list of residents awaiting a Medicaid bed.
- The Department of Health and Senior Services (DHSS), in consultation with the Division of Medical Assistance and Health

Services in the Department of Human Services, is to prepare and update a written informational sheet for nursing homes that explains eligibility for long-term care services under the State Medicaid Program and a written informational sheet for assisted living residences that explains eligibility for participation in a federally approved 1915(c) Medicaid waiver program that provides assisted living services. The informational sheets are to be available on the DHSS website.

- DHSS is to distribute the applicable informational sheets to all licensed nursing homes and assisted living residences in the State.

This bill is identical to Senate Bill No. 221 (1R) (Singer/Redd), which the committee also reported on this date.



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JON S. CORZINE
Governor

For Immediate Release:
Date: February 2, 2009

For More Information:
Robert Corrales

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Governor Corzine Takes Action on Legislation

TRENTON - Governor Jon S. Corzine today took action on the following legislation:

S-1304/A-3276 (Girgenti, Turner/Vainieri Huttie, Johnson, Coutinho, Ramos) - Upgrades unlawful possession of a machine gun or assault firearm to a crime of the second degree

S-221/A-2334 (Singer, Redd/Angelini, Dancer, Munoz) - CONDITIONAL VETO - Requires nursing homes and assisted living residences to provide informational sheet concerning Medicaid eligibility to certain residents

The Governor issued the following conditional veto message on Senate Bill No. 221 (First Reprint):

To the Senate:

Pursuant to Article V, Section I, Paragraph 14 of the New Jersey Constitution, I am returning Senate Bill No. 221 (First Reprint) with my recommendations for reconsideration.

This bill would require nursing homes and assisted living residences to provide its private pay residents with an informational sheet concerning Medicaid eligibility. The bill also would require an authorized representative of these facilities to issue a written statement informing the resident that should a private pay resident become eligible for Medicaid, the facility could not guarantee the availability of a Medicaid bed and that, if a Medicaid bed is not available at the time a resident reaches eligibility, the resident will need to be transferred to another nursing home or assisted living residence, as appropriate.

I commend the sponsors of this bill for addressing a serious issue facing private pay residents of long-term care facilities who can be removed from their place of living without prior notice upon reaching Medicaid eligibility. The sponsors' sincere efforts to provide consumer protections and improve the health care literacy of these residents are laudable. I believe it is important, however, to propose some technical amendments to ensure that this bill is consistent with the federal Social Security Act, that it applies to other similarly-situated individuals, and that the measure cannot be misconstrued as requiring facilities to transfer or discharge private pay residents upon reaching Medicaid eligibility.

Accordingly, I herewith return Senate Bill No. 221 (First Reprint) and recommend that it be amended as follows:

Page 2, Section 1, Line 8: Before "Medicaid" insert "'Assisted living facility' means an assisted living residence or comprehensive personal care home licensed pursuant to P.L. 1971, c.136 (C.26:2H-1 et seq.)."

Page 2, Section 1, Lines 10-11: Delete "'Medicaid bed' means a bed which is reserved for a Medicaid-eligible resident at a nursing home or assisted living residence;"

Page 2, Section 1, Line 13: After "financial" insert "and clinical"

Page 2, Section 1, Lines 13-14: After "standards" delete "for medical assistance for long-term care under the State Medicaid program or is" and insert "and has been"

Page 2, Section 1, Lines 18-26: Delete in its entirety

Page 2, Section 1, Line 27: Delete "c." and insert "b."

Page 2, Section 1, Line 27: After "living" delete "residence" and insert "facility"

Page 2, Section 1, Line 37: Delete "d." and insert "c."

Page 2, Section 1, Line 41: Delete "nursing home or"

Page 2, Section 1, Line 41: After "living" delete "residence" and insert "facility"

Page 2, Section 1, Line 43: After "The" delete "nursing home or"

Page 2, Section 1, Line 43: After "living" delete "residence, as appropriate," and insert "facility"

Page 2, Section 1, Line 44: After "a" delete "Medicaid"

Page 2, Section 1, Line 44: After "bed" insert "for use by a Medicaid-eligible resident, pursuant to P.L. 2001, c.234 (C.26:2H-12.16 et seq.)"

Page 3, Section 1, Line 1: Delete "nursing home or"

Page 3, Section 1, Line 1: After "living" delete "residence" and insert "facility"

Page 3, Section 1, Line 3: After "no" delete "Medicaid"

Page 3, Section 1, Line 3: After "bed" insert "for use by a Medicaid-eligible resident, pursuant to P.L. 2001, c.234 (C.26:2H-12.16 et seq.)"

Page 3, Section 1, Lines 4-5: After "eligible," delete "the resident will need to transfer to another" and insert "the assisted living facility has the option to transfer the resident to a"

Page 3, Section 1, Line 5: After "or" insert "another"

Page 3, Section 1, Line 5: After "living" delete "residence" and insert "facility"

Page 3, Section 1, Lines 12-13: After "of" delete "a nursing home or" and insert "an"

Page 3, Section 1, Line 13: After "living" delete "residence" and insert "facility"

Page 3, Section 1, Line 15: After "to the" delete "nursing home or"

Page 3, Section 1, Line 15: After "living" delete "residence" and insert "facility"

Page 3, Section 1, Line 17: After "the" delete "nursing home or"

Page 3, Section 1, Line 17: After "living" delete "residence" and insert "facility"

Page 3, Section 1, Line 21: After "a" delete "Medicaid"

Page 3, Section 1, Line 21: After "bed" insert "for use by a Medicaid-eligible resident, pursuant to P.L.2001, c.234 (C.26:2H-12.16 et seq.)"

Page 3, Section 2, Lines 26-28: After "for" delete "nursing homes that explains eligibility for long-term care services under the State Medicaid Program, and a written informational sheet for"

Page 3, Section 2, Line 29: Delete "residences" and insert "facilities"

Page 3, Section 3, Line 38: After "licensed" delete "nursing homes and"

Page 3, Section 3, Line 39: After "living" delete "residences" and insert "facilities"

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