TO: Licensed Physicians (including pediatricians), Licensed Midwives, Licensed Advanced Practice Nurses, Federally Qualified Health Centers – For Action
Health Maintenance Organizations – For Information

SUBJECT: New Jersey Integrated Care for Kids (NJ InCK) Services

EFFECTIVE: January 1, 2022

PURPOSE: Medicaid/NJ FamilyCare will provide NJ InCK services to pediatric beneficiaries residing in Monmouth and Ocean Counties

BACKGROUND: In 2019, three New Jersey-based organizations – Hackensack Meridian Health, Visiting Nurse Association of Central Jersey, and New Jersey Health Care Quality Institute (“NJ InCK Grantees”) – received funding through a cooperative agreement from the federal Center for Medicare and Medicaid Innovation (CMMI) to implement the Integrated Care for Kids payment and delivery model.

New Jersey Integrated Care for Kids (NJ InCK) model will include (1) early and periodic detection of social and medical complexity for all Medicaid beneficiaries 20 years of age or younger residing in Ocean and Monmouth counties, and (2) family-centered and community-based care coordination for those children identified as having significant complexity. The model will test whether these interventions decrease costs and/or improve pediatric outcomes.

NJ InCK services are provided in communication with the beneficiary’s primary care provider and are intended to support earlier identification of beneficiaries at risk of increased social and medical needs. NJ InCK Care Coordination is intended to be inclusive of parents and youth, as well as clinical and non-clinical care team members. The focus is to build family capacity to engage in shared decision-making and self-management of care, with care management staff playing a supporting role and intervening when needed. The goal is to prevent progression towards increasing social and medical complexity and associated health outcomes, including out-of-home placement.

For more information, please visit the NJ InCK Grantee’s website: http://www.njinck.org and the CMMI national InCK Model website: https://innovation.cms.gov/innovation-models/integrated-care-for-kids-model.
ACTION: Effective for claims with service dates on or after January 1, 2022, the NJ FamilyCare fee-for-service (FFS) program and its managed care partners shall provide reimbursement for NJ InCK services.

A. Eligibility for NJ InCK Services

In accordance to the terms of the award, NJ InCK services will be made available only to pediatric beneficiaries (20 years of age or younger) residing in Ocean and Monmouth County counties. Beneficiaries may belong to all Medicaid and CHIP (NJ FamilyCare) eligibility categories under plans ABP, A, B, C and D.

Pursuant to 42 C.F.R. Section 440.130(c), NJ InCK services are provided as a preventive service to prevent adverse health outcomes and promote physical and mental health and efficiency. Services must be recommended by a physician or other licensed practitioner of the healing arts within their scope of practice under state law to promote the physical and mental health of the beneficiary.

Services involving family members or other caregivers will be delivered for the sake of the beneficiary.

NJ FamilyCare will cover two NJ InCK Services: (1) Interpretation of NJ InCK Needs Assessment Tool by the primary care provider (2) InCK Care Coordination delivered by the NJ InCK Grantees (VNA of Central Jersey).

B. NJ InCK Service: Interpretation of NJ InCK Needs Assessment Tool

This service is available to all eligible beneficiaries and will be reimbursed through NJ FamilyCare’s fee-for-service and managed care programs.

To determine eligibility for NJ InCK Care Coordination (see C. NJ InCK Service: Care Coordination), beneficiaries must complete a comprehensive NJ InCK Needs Assessment Tool, branded as the HealthStory in member-facing communications. The NJ InCK Needs Assessment Tool includes developmental screening, psychosocial/behavioral health screening, trauma screening, and questions relevant to the caregiver(s) when for the direct benefit of the child. It meets the screening requirements of the American Academy of Pediatrics’ Bright Futures Recommendations for Preventive Pediatric Health Care. The NJ InCK Needs Assessment Tool includes, but is not limited to, questions modified from:

- Accountable Health Communities Screening Tool (AHC, from CMS)
- CRAFFT substance use screening tool for adolescents
- Survey of Well-being of Young Children (SWYC), which includes the Baby Pediatric Symptom Checklist (BPSC), the Edinburgh Postnatal Depression Scale (EPDS), Preschool Pediatric Symptom Checklist (PPSC), and the Parent’s Observations of Social Interactions (POSI)
• The Hunger Vital Sign (from Children’s HealthWatch)
• The Housing Stability Vital Sign (from Children’s HealthWatch)
• The Pediatric ACEs and Related Life-events Screener (PEARLS)
• The Protocol for Responding to and Assessing Patients’ Assets, Risks, and Experiences (PRAPARE)

The NJ InCK Needs Assessment Tool is a standardized, pediatric screening tool that is self-administered by the beneficiary and/or their caregiver. The NJ InCK Grantees will use these answers, in combination with other beneficiary health information derived from NJ FamilyCare claims data, to provisionally place pediatric members into one of three Service Integration Levels (SIL) that reflect the level of medical and social complexity as determined by the NJ InCK Model. The SIL placement determines which beneficiaries will be offered NJ InCK Care Coordination services.

The primary care provider will receive the provisional SIL assignment along with the NJ InCK Needs Assessment Tool responses and will have the opportunity to work with the NJ InCK Grantees—by communicating with the beneficiary’s Care Integration Manager—to update or adjust the final SIL if they do not feel the provisional assignment reflects the beneficiary’s need.

The primary care provider is eligible to receive payment for interpretation of the NJ InCK Needs Assessment Tool if they:

• review a completed NJ InCK Needs Assessment Tool
• discuss the answers with the beneficiary and/or family
• document actions to address identified medical, behavioral, and social needs in the patient’s medical record
• confirm final Service Integration Level assignment with the NJ InCK Care Integration Manager when they feel an adjustment to the provisional SIL assignment is needed

This service must be billed by a licensed primary care provider, who is enrolled in the NJ FamilyCare fee-for-service or managed care program, and eligible to provide preventive, pediatric well-visits.

This service cannot be billed on its own, but must be co-billed with another office visit, like the beneficiary’s annual well-visit (99381-99385, 993391-99395) or an E&M visit 99201-99205, 99211-99215).

As this service must be co-billed with another office visit, Federally Qualified Health Centers (FQHCs) may submit claims for this service. However, the provision of this service will not affect the bundled rates paid to FQHCs for office visits under the prospective payment system (PPS).
This service can be billed at least once a year. Primary care providers may receive additional reimbursements during the year if a reassessment is determined as medically necessary to monitor changes in the beneficiary’s progress. Providers may receive one additional reimbursement, up to (2) services per calendar year, for the following beneficiaries without independent determination of medical necessity:

- Beneficiaries younger than 36 months old
- Beneficiaries assigned to Service Integration Level 3 (see below)

Beneficiaries and their caregivers can get access to a NJ InCK Needs Assessment Tool (“HealthStory”) to complete by filling out the NJ InCK Contact Form here. For more information on how a beneficiary or their family can fill out the NJ InCK Needs Assessment Tool, please visit the NJ InCK Grantee’s website: http://www.njinck.org.

C. NJ InCK Service: Care Coordination

This service is available to those beneficiaries assigned to NJ InCK Service Integration Levels (SIL) 2 or 3. This service will be reimbursed through NJ FamilyCare’s fee-for-service for both fee-for-service and managed care beneficiaries.

The NJ InCK Grantees will assign eligible beneficiaries to one of three Service Integration Levels (1, 2, or 3) depending on their results from the NJ InCK Needs Assessment Tool. Beneficiaries in SIL 2 and 3 are those that have been identified as at risk of increased social and medical needs by the InCK Model. SIL2 and 3 beneficiaries will be offered the NJ InCK Care Coordination service, unless they are enrolled in another primary case management program that would be duplicative of what is being offered with NJ InCK.

NJ InCK Care Coordination is voluntary. The beneficiary/family must choose to receive these services and can choose to terminate these services.

NJ InCK Care Coordination will be delivered by an interdisciplinary team (Advanced Case Management Team):

- Licensed Social Worker, who is also responsible for direct supervision of the team.
- Community Health Worker, who has completed the New Jersey-Department of Health Colette Lamothe-Galette Community Healthworker Institute training
- Family Service Specialist, who has completed NJ’s SPAN Parent Advocacy network’s Family Service Specialist training
- Child Life Specialist, who has active Child Life Certification from the Association of Child Life Professionals

Each Social Worker leading a team will be directly supervised by a NJ InCK Care Integration Manager, who must either hold a RN/BSN, be a licensed Social Worker, or have a Master's degree in health, education, or human services. The NJ InCK Care Integration Manager and NJ InCK Advanced Case Management Teams will be employed by the NJ InCK Grantees (VNA of Central Jersey).
NJ InCK Care Coordination will be culturally congruent and community focused, and includes:

- Prevention planning entails the development of a Shared Plan of Care that identifies services and resources needed to address the child's risks.
- Coordination of services with family, community-based service providers, and the primary care team.
- Complete closed-loop referrals for core child services

Services involving beneficiary's caregivers or family members will be delivered for the sake of the beneficiary.

This service must be billed by a provider participating in the NJ InCK Model, employed by the NJ InCK Grantees (VNA of Central Jersey), enrolled in the NJ FamilyCare Fee-for-Service program. This service is reimbursed as a per-member per-month payment, with a date of service associated with contact with the beneficiary/caregiver. This payment can be billed if the provider:

- Ensures that at least one review of each beneficiary's case has been completed by the ACMT that month.
- For SIL3 beneficiaries, the monthly review must also include the beneficiary/caregiver, the primary care provider and/or representatives of core child services.

Services for SIL3 beneficiaries will be similar in kind to those for SIL2 beneficiaries, but will be paid at a higher rate to reflect the increased intensity of care coordination services provided.

Once a beneficiary/family initiates NJ InCK Care Coordination services, they can continue to receive those services for twelve months without a new re-assessment with the NJ InCK Needs Assessment Tool—as long as beneficiary/family continues to choose to receive those services and any re-assessment during the calendar year has not changed the beneficiary’s identified SIL.

For more information on NJ Care coordination, please visit the NJ InCK Grantee’s website: [http://www.njinck.org](http://www.njinck.org).
## Billing Procedures

NJ InCK services are billed to fee-for-service and managed care using the following HIPAA compliant codes, with reimbursement amounts shown:

<table>
<thead>
<tr>
<th>Service Description</th>
<th>Code</th>
<th>Billed to</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interpretation of NJ InCK Needs Assessment Tool: Beneficiary assigned to SIL 1*</td>
<td>G9920 33</td>
<td>Fee-for-service for FFS beneficiaries or Managed care for managed care beneficiaries</td>
<td>$29 (flat fee)</td>
</tr>
<tr>
<td>Interpretation of NJ InCK Needs Assessment Tool: Beneficiary assigned to SIL 2 or 3*</td>
<td>G9919 33</td>
<td>Fee-for-service for FFS beneficiaries (when billed by a licensed midwife)</td>
<td>$29 (flat fee)</td>
</tr>
<tr>
<td>Interpretation of NJ InCK Needs Assessment Tool: Beneficiary assigned to SIL 1*</td>
<td>G9920 33 SB</td>
<td>Fee-for-service for FFS beneficiaries (when billed by a licensed advanced practice nurse)</td>
<td>$29 (flat fee)</td>
</tr>
<tr>
<td>Interpretation of NJ InCK Needs Assessment Tool: Beneficiary assigned to SIL 2 or 3*</td>
<td>G9919 33 SB</td>
<td>Fee-for-service for FFS beneficiaries (when billed by a licensed advanced practice nurse)</td>
<td>$29 (flat fee)</td>
</tr>
<tr>
<td>NJ InCK Care Coordination: SIL2</td>
<td>G9002 33 TF</td>
<td>Fee-for-service for all beneficiaries</td>
<td>$65 (PMPM)</td>
</tr>
<tr>
<td>NJ InCK Care Coordination: SIL3</td>
<td>G9002 33 TG</td>
<td>Fee-for-service for all beneficiaries</td>
<td>$110 (PMPM)</td>
</tr>
</tbody>
</table>

*In cases where final assignment requires additional consultation with beneficiary, family, or NJ InCK Care Integration Manager, billing based on provisional assignment is allowed.

## Claims Submission

For assistance with submitting claims within fee-for-service, please contact Gainwell Technologies Provider Services by calling 1-800-776-6334 or emailing them at njmmisproviderservices@gainwelltechnologies.com.

For more information about billing within managed care, please contact each organization’s Provider department:

- Aetna Better Health of NJ 1-855-232-3596
- Amerigroup NJ 1-800-454-3730
- Horizon NJ Health 1-800-682-9091
• UnitedHealthcare Community Plan 1-888-362-3368
• Wellcare 1-888-453-2534

For more information, please see:
https://www.state.nj.us/humanservices/dmahs/info/resources/hmo/

If you have any questions concerning this Newsletter, please contact Gainwell Technologies, Provider Services Unit at 1-800-776-6334.

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