

ASSEMBLY, No. 4480

STATE OF NEW JERSEY 219th LEGISLATURE

INTRODUCED JULY 30, 2020

Sponsored by:

Assemblyman PEDRO MEJIA

District 32 (Bergen and Hudson)

Assemblywoman NANCY J. PINKIN

District 18 (Middlesex)

Assemblywoman ELIANA PINTOR MARIN

District 29 (Essex)

Assemblywoman BETTYLOU DECROCE

District 26 (Essex, Morris and Passaic)

Co-Sponsored by:

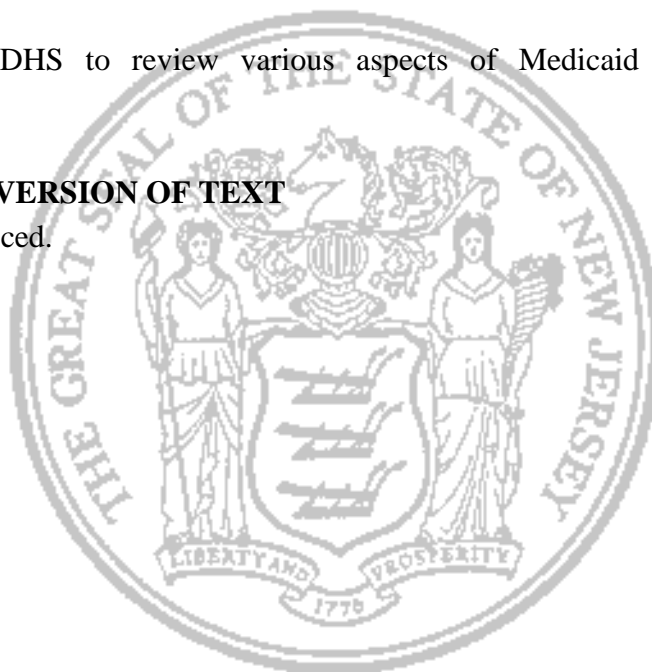
Assemblywoman Vainieri Huttel, Assemblyman Benson, Assemblywomen Speight, Schepisi, Dunn, McKnight, Reynolds-Jackson, DiMaso, Tucker, Downey, Assemblyman Wimberly, Assemblywoman Jimenez, Assemblyman Houghtaling and Assemblywoman Lopez

SYNOPSIS

Requires DHS to review various aspects of Medicaid managed care program.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 10/29/2020)

1 AN ACT concerning the Medicaid managed care program.

2

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

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6 1. The Department of Human Services shall review and
7 evaluate any existing requirements for Medicaid managed care
8 organizations to contract with any willing provider for the delivery
9 of nursing home services, and determine whether to request State
10 plan amendments or waivers as may be necessary to allow managed
11 care organizations to terminate or suspend a contract with a nursing
12 home that has a history of multiple violations related to State or
13 federal licensure requirements, or that has a history of one or more
14 violations of licensure requirements that resulted in severe adverse
15 health consequences for facility staff or residents. The Department
16 of Human Services shall additionally evaluate whether managed
17 care plans can be used to assist the Department of Health in
18 monitoring compliance and quality of care in nursing homes and, if
19 so, shall identify any actions as may be needed to allow managed
20 care plans to assist the Department of Health.

21

22 2. This act shall take effect immediately.

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STATEMENT

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27 This bill requires the Department of Human Services (DHS) to
28 review and evaluate any existing requirements for Medicaid
29 managed care organizations (MCOs) to contract with any willing
30 provider for the delivery of nursing home services, and determine
31 whether to request State plan amendments or waivers as may be
32 necessary to allow MCOs to terminate or suspend a contract with a
33 nursing home that has a history of multiple violations related to
34 State or federal licensure requirements, or that has a history of one
35 or more violations of licensure requirements that resulted in severe
36 adverse health consequences for facility staff or residents.

37 The bill additionally requires the DHS to evaluate whether
38 managed care plans can be used to assist the Department of Health
39 in monitoring compliance and quality of care in nursing homes and,
40 if so, identify any actions as may be needed to allow managed care
41 plans to assist the Department of Health.