

# Perspectives

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## Rule Adoptions

The Division of Medical Assistance and Health Services published notice of its January 1, 2013 administrative changes to the eligibility income standards for aged, blind, and disabled persons who make application for Medicaid Only program benefits. The adjustment includes a cost of living adjustment to the monthly income levels for persons in a Title XIX approved facility, including nursing homes. The cap is now \$ 2,130.00.

Notice of this adjustment appears in the August 5, 2013 New Jersey Register at 45 N.J.R. 1917(a).



The Division of Medical Assistance and Health Services published notice of its January 1, 2013 Medicaid only administrative changes adjusting the maximum and minimum amounts of a community spouse's share of a couple's combined countable resources. The maximum amount is increased from \$113,640 to \$115,920 and the minimum amount is increased from \$22,728 to \$23,184.

Notice of this change appears in the August 19, 2013 New Jersey Register at 45 N.J.R. 1960(b).



The Division of Medical Assistance and Health Services published notice that it has readopted N.J.A.C. 10:70, rules concerning the Medically Needy Program.

Notice of this adoption appears in the September 3, 2013 New Jersey Register at 45 N.J.R. 2041(b). The readoption took effect July 1, 2013 and expires on July 31, 2020.

## Advanced Standing PSO Requirement

To date, all facilities participating in the HCANJ Foundation Advanced Standing program have been required to participate in the collection of Tier I data through the National Center for Assisted Living (NCAL) Performance Measures Survey. Yearly, a Peer Review Panel selects a few of those measures that all facilities must meet to comply with the quality requirements of Advanced Standing. Currently, those requirements include:

- a family council that meets at least quarterly and encourages family participation,
- community leadership who meet regularly with the leaders of the family council,
- a formal on-going training program for all employees; and,
- measurement of and action on the results of resident and family satisfaction surveys.

In 2014, all facilities participating in Advanced Standing will also be required to participate in the collection of Tier II data through a Patient Safety Organization (PSO). Tier II measures include falls, medication management, hospitalizations, etc.

NCAL, after a year of research and negotiations, announced that they have partnered with the New Jersey Hospital Association's (NJHA) Institute for Quality and Patient Safety, a federally certified Patient Safety Organization (PSO), to collect Tier II Clinical Performance Measures. Data collected by a PSO is protected and is not subject to legal discovery. The HCANJ Foundation chose to work with the NJHA PSO not only because of NCAL, but because it is the most affordable way for Advanced Standing program participants to engage the services of a PSO.

There are additional costs to participate in the PSO and there are additional benefits. Among them, the ability for a community to benchmark their data against other communities in New Jersey as well as across the country. Also, a community will have the opportunity to improve safety and quality, leading to better resident outcomes.

As with the Tier I data, Tier II data will be collected by the PSO from each participating community, but only a few will be the focus of the 2014 Advanced Standing program. In early October, the Peer Review Panel will choose those Tier II measures and the 2014 data will create the benchmarks for the following year. In 2015, again all data will be collected but facilities will have to meet the benchmarks established in 2014.

Anyone with questions about the PSO requirement and/or the Advanced Standing program should contact Kathy Fiery at HCANJ.