

SYSTEMS OF CARE FINANCING MODEL

NEW JERSEY -- STATEWIDE APPROACH UTILIZING BOTH MEDICAID AND NON-MEDICAID FUNDS

Target Group – Both Medicaid and non-Medicaid children with both acute mental health needs and serious emotional disturbance. Focus is on children crossing two or more systems.

Funding Approach – Multifaceted. Existing funds from mental health, child welfare and Juvenile Justice, and Medicaid, new general purpose funds approved by legislative, expansion of Medicaid using Rehab. Option. Leveraging general funds to capture more federal reimbursement. Also utilizes EPSDT. New Jersey pooled \$85 million in Medicaid and Child Welfare funds to leverage more Medicaid money.

Single payor system gives blended funding to the State Medicaid agency to administer and pay for services.

Screening and Assessment – Uniform screening and assessment protocols and tools developed by the State. Strength-based wraparound assessments. Assessment tool called Information and Decision Support Tools (IMDS) and all agencies use it.

Administration – Utilizes a statewide ASO (Value Options) to coordinate, authorize and track youth needing services. Non-risk bearing ASO, manages single payment system and single IT system for all children

Care Management – Integral to the system are care management organizations (not-for-profit) located in each county or region of counties. CMOs receive a case rate to provide care coordination and care planning using wraparound approaches with child and family teams developing individualized service plans. They must address safety and permanency plans for those CMO youth involved in child welfare. CMOs employ care managers assigned small caseloads of 1:10 families.

Family Support Organizations (FSOs) – Every CMO has an attached family support organization and families have an assigned parent advocate to help them. Ensures family voice is incorporated in planning and delivery of services.

Benefit Plan – Broad, flexible plan of traditional mental health and non-traditional services. They use the Rehab Option under Medicaid to expand state benefit plan to include: assessment, mobile crisis, residential treatment, group home, treatment foster homes, care management, intensive in-home therapy, behavioral aides and “wraparound services”.

Presumptive Eligibility – Children who are Medicaid eligible or meet SED definition are presumed eligible and given a system of care identifier number

Provider Network – All providers contract with State of New Jersey Deputy of Human Services and are paid fee-for-service. CMOs receive separate allocations for “wraparound” type services for families.

Figure 1
New Jersey System of Care Flow Chart

