DEPARTMENT OF HEALTH AND SENIOR SERVICES

OVERVIEW

The Department's mission is to foster accessible, affordable health services that enable all New Jersey residents to achieve optimal health--through disease prevention, the promotion of community action, the protection of those at special risk, and the provision of services that promote independence, dignity and choice for 1.4 million older adults in New Jersey.

The fiscal 2000 Budget recommendation totals \$73.3 million in Direct State Services, \$845.7 million in Grants-In-Aid, \$27 million in State Aid, and \$258.9 million in Casino Revenue Funds. The recommended State appropriation of \$1.2 billion for the Department of Health and Senior Services represents an increase of \$93.2 million from the current year appropriation. In addition to these State funds, the Department anticipates receiving over \$900 million in federal funds to provide for drug treatment, maternal and child health programs including the Women, Infants and Children Program, health care facility inspections, and federal Medicaid matching funds for long-term care.

The Department has three major subdivisions: (1) Health Services represents the traditional public health programs and focuses efforts in the areas of Acquired Immune Deficiency Syndrome (AIDS), substance abuse treatment, and public health protection (communicable and chronic diseases). Within Health Services, the Department's public health laboratory tests for asbestos in schools and public institutions, rabies, Lyme disease, AIDS, and ocean and drinking water contaminants and performs a myriad of lab services for State and local agencies. (2) Health Planning and Evaluation places emphasis on improving the quality of health care through expanded surveillance efforts, inspection, and licensing, in addition to the development of new regulations and provision for the orderly development and replacement of needed facilities and services. This Budget provides \$107.2 million for grants to hospitals for charity care and the subsidized insurance program (NJ KidCare and ACCESS). (3) Senior Services provides seniors with centralized access to a variety of social, housing, transportation and health programs, including Pharmaceutical Assistance to the Aged and Disabled (PAA/D), Lifeline energy assistance, Meals on Wheels, nursing facility and community long-term care.

Appropriation increases include anticipated cost and caseload growth in the Pharmaceutical Assistance to the Aged and Disabled (PAAD) and long-term care initiatives totaling \$55.9 million. Additional increases include a \$1.9 million cost of living adjustment for grant programs and \$55.6 million in Charity Care and other related appropriations, reducing the reliance of Unemployment Insurance diversion funding. Decreases include a number of small reductions in non-priority grant accounts, elimination of one time funding, as well as savings initiatives in PAA/D and long-term care to bring costs in line with available resources.

The Budget recommendation includes new funding of \$2.7 million in Family Health Services to promote cancer screening, education, and early detection programs for African Americans. The goal of this initiative is to begin to address the disparity in cancer incidence and mortality rates of African Americans and other New Jersey population groups. An increase of \$18.6 million, from anticipated tobacco settlement revenue, is included within the Addiction Services to develop more comprehensive approaches, including programs which will focus on youth awareness, research, and smoking cessation. Also the Department will work with communities to promote local control and educational programs, designed to reduce the incidence of smoking.

In Senior Services, the \$967.9 million recommendation reflects an expansion of initiatives focusing on alternative long-term care and enhancing access to services. As part of a three year phase-in project, the ElderCare Initiative will develop new community-based options and expand the Department's existing programs, such as the Community Choice program. These initiatives will be supported in State fiscal year 2000 with \$10.3 million in State funding. The Department will also continue their first-in-the-nation partnership with the Robert Wood Johnson Foundation, working to improve the quality of care in nursing facilities through outcome-oriented regulation. Finally, during this budget year, all counties in New Jersey will be encouraged to become part of the emerging New Jersey Easy Access, Single Point-of-Entry (NJ EASE) system, which creates local access to a coordinated system of older-adult services through one-stop resource and referral centers.

SUMMARY OF APPROPRIATIONS BY FUND

(thousands of dollars)

	——Year Ei	nding June 3	0, 1998				Year E ——June 30	
Orig. & ^(S) Supple- mental	Reapp. & ^(R) Recpts.	Transfers & ^(E) Emer- gencies	& Total Available	Expended		1999 Adjusted Approp.	Requested	Recom- mended
42,844	4,077	2,855	49,776	47,589	Direct State Services	48,961	73,278	73,278
724,525	132	7,301	731,958	728,900	Grants-In-Aid	777,897	845,738	845,738
20,866			20,866	20,862	State Aid	27,347	26,982	26,982
1,506	242		1,748	1,115	Capital Construction	1,269	2,996	1,508
789,741	4,451	10,156	804,348	798,466	Total General Fund	855,474	948,994	947,506
278,271	33,190		311,461	303,791	Total Casino Revenue Fund	257,709	258,873	258,873
1,068,012	37,641	10,156	1,115,809	1,102,257	GRAND TOTAL	1,113,183	1,207,867	1,206,379

45,706

76,300

132

-715

45,123

76,300

42,974

76,300

SUMMARY OF APPROPRIATIONS BY PROGRAM

June 30, 2000 1999 Adjusted Requested Recommended - GENERAL FUND 1,409 1,409 1,409 ces 2,237 4,162 4,16 tion Services 13,261 16,841 16,841 632 19,249 19,24 4,547 4,547 4,54 2,703 2,703 2,70 24,789 48,911 48,91 valuation tems Development & 16
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Health Planning and Evaluation Health Care Systems Analysis 51,598

65,300

48,152

107,200

48,152

107,200

Subtotal

	——Year Er	iding June 30), 1998				Year E ——June 30	
Orig. & ^(S) Supple- mental	Reapp. & ^(R) Recpts.	Transfers & ^(E) Emer- gencies	Total Available	Expended		1999 Adjusted Approp.	Requested	Recom- mended
	_	-		_	Senior Services		_	
558,775		7,431	566,206	566,147	Medical Services for the Aged	585,634	618,521	618,521
35,162		-170	34,992	34,152	Pharmaceutical Assistance to the Aged			
					and Disabled	30,230	25,850	25,850
					Lifeline	36,171	36,171	36,171
8,582		755	9,337	9,327	Programs for the Aged	8,964	9,844	9,844
602,519		8,016	610,535	609,626	Subtotal	660,999	690,386	690,386
724,525	132	7,301	731,958	728,900	Subtotal Grants-In-Aid - General Fund	777,897	845,738	845,738

GRANTS-IN-AID - CASINO REVENUE FUND Health Services

500			500	499	Family Health Services	500	500	500
					Senior Services			
19,353			19,353	17,372	Medical Services for the Aged	15,378	4,246	4,246
169,571	33,190	4,800	207,561	203,752	Pharmaceutical Assistance to the Aged			
					and Disabled	193,620	206,686	206,686
76,260		-4,800	71,460	69,610	Lifeline	34,669	34,669	34,669
11,975		-249	11,726	11,714	Programs for the Aged	12,671	11,901	11,901
277,159	33,190	-249	310,100	302,448	Subtotal	256,338	257,502	257,502
277,659	33,190	- <i>2</i> 49	310,600	302,947	Subtotal Grants-In-Aid - Casino Revenue Fund	256,838	258,002	258,002
1,002,184	33,322	7, 0 52	1,042,558	1,031,847	TOTAL GRANTS	1,034,735	1,103,740	1,103,740

STATE AID - GENERAL FUND

					Health Services			
15,021			15,021	15,021	Family Health Services	19,469	19,469	19,469
3,600			3,600	3,600	Public Health Protection Services	4,165	4,100	4,100
18,621			18,621	18,621	Subtotal	23,634	23,569	23,569
					Senior Services			
2,245			2,245	2,241	Programs for the Aged	3,713	3,413	3,413
20,866			20,866	20,862	Subtotal State Aid - General Fund	27,347	26,982	26,982
20,866			20,866	20,862	TOTAL STATE AID	27,347	26,982	26,982
1,066,506	37,399	10,156	1,114,061	1,101,142	TOTAL APPROPRIATIONS DSS, GRANTS AND STATE AID	1,111,914	1,204,871	1,204,871

20. PHYSICAL AND MENTAL HEALTH 21. HEALTH SERVICES

OBJECTIVES

- 1. To provide a system for the registration of births, deaths, marriages and other vital statistics and to furnish certified copies as requested.
- 2. To reduce infant mortality and improve the health of mothers and children; to provide medical and dental services to special high risk populations; to provide access to quality medical services for handicapped children; to provide and promote family planning services and to identify, treat and minimize the exposure of children at high risk of lead poisoning.
- 3. To provide technical assistance and to monitor local health department performance against prescribed standards for Public Health Priority Funding.
- 4. To promote and improve local health delivery services, particularly for low income and minority families, and assist local health agencies in meeting recognized minimum standards of performance.
- 5. To assure the wholesomeness and safety of foods and cosmetics; to prevent food related illnesses and the misbranding, adulteration and illicit tampering of foods and cosmetics; to prevent the spread of animal diseases to man, especially rabies; to enhance the Department's capabilities to protect the citizenry from environmental hazards; to assure the health and safety of youth attending camps and the safety of those persons swimming in recreational waters; to assure a high level of sanitation in health care facilities and various State operated institutions; and to administer animal population control programs.
- 6. To detect, prevent, control and treat chronic diseases with emphasis on assistance for persons with low or limited socioeconomic status and to assess and support the special health needs of the geriatric population.
- 7. To reduce the incidence and spread of tuberculosis.
- 8. To detect, prevent and control occupationally related cancer and other diseases among workers in high risk industries.
- 9. To reduce dependence on narcotics and alcohol.
- 10. To provide a comprehensive range of timely and accurate public health, environmental and chemical laboratory analytical and diagnostic services to state and federal agencies, physicians, clinics, hospitals, local health departments, and other health care interests in the identification and control of disease and environmental threats.
- 11. To improve the quality of performance in New Jersey's clinical laboratories in the specialties of microbiology, blood banking, chemistry, hematology, serology and immunohematology and to serve as a reference resource for all laboratories, clinical and analytical, in New Jersey.
- 12. To reduce the spread of AIDS and HIV infection by providing an integrated continuum of AIDS health and social support services to promote cost-effective treatment, and to expand prevention and education efforts.
- 13. To reduce death and disability by improving response to medical emergencies, by assuring the availability of trained personnel for emergency medical services.

PROGRAM CLASSIFICATIONS

01. **Vital Statistics.** Collects and records data such as births, deaths and marriages from the 566 local registrars; approves appointment of, instructs and supervises local registrars of vital statistics; receives and processes vital records, searches and makes certified

copies of these records (RS 26:8-23 et seq.); processes legal changes of name, adoptions and corrections to vital records.

- 02. Family Health Services. Provides funding of specialized medical and rehabilitative services for handicapped children (RS 9:13-1 et seq.); provides and promotes family planning and genetic services (RS 26:5B), maternal and child health care (C26:1A-37E) including supplemental nutrition services, prenatal care, child health supervision and screening of newborns for metabolic causes of mental retardation and deafness; administers poison control activities e.g., childhood lead poisoning (C24:14A-1 et seq.); prenatal services for children; provides financial assistance to persons with hemophilia (C26:2-87 et seq.); provides financial assistance to persons with chronic renal disease (C26:2-87 et seq.) and general assistance to persons with other chronic diseases (C26:1A-92 et seq.); provides assistance to local health departments for the provision of primary and preventive health services; develops community based chronic disease detection programs and supports the special health needs of the geriatric population; and assists in training of emergency medical personnel and coordinating emergency medical services, including aeromedical response.
- 03. Public Health Protection Services. Initiates programs to reduce incidence of sexually transmitted diseases (RS 26:4-27 et seq.); controls tuberculosis (RS 26:4-1 et seq.); monitors and initiates programs to reduce the incidence of other communicable diseases such as hepatitis, measles, polio, pertussis and diphtheria; maintains a cancer registry which provides epidemiologic intelligence regarding cancer associated risk factors for control and prevention activities. Assures quality of food and milk, drugs, and general sanitation (C26:1A-7); distributes vaccine for the prevention of rabies; and assures the appropriate utilization of funds from dog license fees (\$1.00 per dog) to support activities. Performs health investigations in private and public workplaces to evaluate occupational exposures; conducts medical screenings for individuals exposed to chemicals; implements the worker provisions of the Worker and Community Right to Know Act and the health provisions of the Public Employees Occupational Safety and Health Act; collects occupational illness and exposure data; conducts environmental monitoring, health assessments, health screening and epidemiologic investigations of community exposure to toxic substances, and implements the State asbestos policy; provides assistance to local health departments for the provision of primary and preventive health services.
- 04. Addiction Services. Provides, by grants, support to multi-modality drug clinics and treatment facilities which reduce drug abuse and treat and rehabilitate addicts (C26:2G). Provides, by grants, counseling and detoxification services in clinics, institutions and schools; assists in development of employee assistance programs; coordinates with Mental Health Programs (C26:2B-1); coordinates programs on fetal alcohol syndrome and child abuse; and provides counseling programs for compulsive gamblers.
- 08. Laboratory Services. Performs comprehensive analytical and diagnostic laboratory services through five primary service categories on a 24 hour-7 day a week basis, which includes: Bacteriology (eg. tuberculosis, dairy products, sexually transmitted diseases, gastrointestinal illnesses, drinking water, and ocean pollution); Virology (eg. AIDS, influenza, Rubella, and rabies); Serology (eg. Lyme, Legionella, and syphilis); Inborn Errors of Metabolism (eg. sickle cell, hypothyroidism, PKU, and Galactosemia) and Environmental and Chemical (eg. blood lead, asbestos, drugs, water, food, and other environmental and chemical

contaminants). Clinical Laboratory Services performs tests and monitors the quality of laboratory testing performed in independent, hospital and public health laboratories in the State; inspects, proficiency tests and licenses all such laboratories (C45:9-42.26 et seq.); improves techniques of laboratory personnel by conducting workshops and seminars as necessary; and certifies clinical laboratories for Medicare participation. 12. **AIDS Services.** Promotes the health of the people of New Jersey by reducing the spread of AIDS by establishing and maintaining a comprehensive system of HIV/AIDS-related prevention, surveillance, counseling and testing, health and supportive services.

EVALUATION DATA

EVALUAI	ION DAIA			Dudat
	Actual FY 1997	Actual FY 1998	Revised FY 1999	Budget Estimate FY 2000
PROGRAM DATA				
Vital Statistics				
Searches	88,062	91,433	92,000	95,000
Certified Copies Issued	60,928	61,355	62,000	64,000
Family Health Services				
Agencies receiving health services grants	176	187	190	195
Handicapped Children				
Physically disabled children receiving services	34,948	34,957	32,000	32,000
Children newly registered with Special Child Health				
Services	9,153	8,775	9,200	9,100
Maternal and Child Health				
Infant mortality rate/1,000 live births	7.7	5.1	4.6	4.1
Infant born to mothers with no prenatal care/1,000 live				
births	1.4	1.3	1.3	1.0
Newborns screened for PKU & hypothyroidism,			110.000	
galactosemia, sickle cell & hearing	112,904	110,562	110,000	110,000
Number of infants to be followed	5,506	8,257	8,800	8,800
Number of infants in early intervention	6,994	7,824	8,500	8,900
HealthStart (prenatal)	37,255	30,200	31,000	33,000
Women assessed for alcohol use/abuse during pregnancy	10,023	12,688	12,800	12,800
Women, Infants and Children (WIC) receiving services	258,834	259,469	259,000	260,000
Family Planning				
Women in reproductive years applying for and receiving services	103,460	102,972	101,000	101,000
Poison Control				
Children screened for lead poisoning (a)	13,287	9,681	70,000	115,000
Number of lead poisoned children identified (a)	1,567	965	1,900	2,000
Percent of high risks screened (a)	40%	47%	50%	95%
Adult Health				
Huntington's disease families served	134	231	250	250
Adults served with Cystic Fibrosis	103	93	100	100
Health Promotion				
Persons screened and educated for breast and cervical				
cancer	5,140	7,607	10,000	10,000
Number of renal patients served	1,903	2,043	2,100	2,300
Youth violence prevention and intervention	,	,	,	,
participants	271	231	250	250
Emergency Medical Services				
Mobile intensive care paramedics certified/recertified	570	527	570	570
Emergency Medical Technicians certified/recertified	6,704	8,412	7,000	7,000
Helicopter response missions	1,739	1,567	1,750	1,750
Mobile intensive care unit's patient charts audited	240	250	250	250
Ambulance/invalid services licensed	272	200	272	272
Ambulance/invalid vehicles licensed	1,751	1,876	1,876	1,876
EMT training agencies certified	39	43	50	55
Public Health Protection Services				
Cancer and Epidemiological Services				
Number of new cancer cases reports	85,000	65,000	75,000	75,000
Number of cumulative cancer reports in master file	872,899	975,730	1,050,730	1,125,730
rumber of cumulative cancel reports in master me	012,000	515,150	1,000,700	1,120,700

	Actual FY 1997	Actual FY 1998	Revised FY 1999	Budget Estimate FY 2000
Tuberculosis Control				
TB cases on register as of June 30	760	710	690	655
Visits to chest clinics	62,606	65,484	62,200	59,100
Percent of TB patients completing chemotherapy	81.0%	84.0%	87.0%	88.5%
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Sexually Transmitted Diseases (STD)				
Percent of STD clinic patients receiving education about HIV infection	75%	70%	70%	80%
Reported cases of early syphilis	484	322	300	270
	404	322	300	270
Syphilis cases (early and late) brought to treatment by Department of Health	1,276	1,235	1,300	1,200
Reported cases of gonorrhea	8,297	7,454	7,600	7,500
Gonorrhea cases brought to treatment by Department of	0,201	7,101	7,000	7,000
Health	3,055	2,102	2,300	2,200
Visits to STD clinics	18,571	16,455	16,600	16,500
Patients receiving diagnostic services	11,143	8,833	9,100	9,500
Consumer Health	11,145	0,033	9,100	9,500
	10 145	0.900	10.000	10.000
Pet spay/neuter surgeries performed	10,145	9,896	10,000	10,000
Registration of dogs (Rabies control)	459,972	489,475	485,000	455,000
Environmental and sanitary inspections and	8,144	7,070	7,000	7,000
investigations conducted	0,144	7,070	7,000	7,000
Number of food, drug and cosmetic embargoes, destructions and recalls	29	20	20	20
	23	20	20	20
Other Communicable Disease Control	7 501	7.000	7 500	7 500
Number of disease cases reported	7,521	7,000	7,500	7,500
Number of investigations of outbreaks	90	80	90	90
Levels of protection for children entering school				
against:	000/	000/	000/	000/
Rubella	98%	98%	98%	98%
Measles	96%	96%	96%	98%
Mumps	98%	98%	98%	98%
Polio	98%	98%	98%	98%
Diphtheria	98%	98%	98%	97%
Infectious disease consultations	9,320	16,165	18,000	18,000
Non-outbreak investigations	51	220	240	200
Lyme disease hotline calls	1,630	1,500	1,800	1,800
Public Employees Occupational Safety and Health				
Complaint inspections conducted	201	225	200	200
Targeted inspections conducted	37	10	9	9
Telephone consultations	2,119	2,232	2,200	2,200
Educational seminars presented	131	83	78	78
Right to Know	101	00	10	10
Factsheets written or revised	150	170	370	370
Public and private workplaces inspected	1,172	1,056	800	800
Telephone consultations	3,714	3,339	3,300	3,300
Occupational Health Surveillance				
Exposure and Illness reports received	3,445	2,951	3,000	3,300
Educational materials mailed to public	4,817	9,637	5,000	5,100
In-depth industrial hygiene evaluations	39	57	40	45
Follow-up industrial hygiene evaluations	3	4	5	10
Work-related chronic disease and epidemiology studies	7	6	4	4
Worker interviews and mailings	115	79	80	100
Environmental Health Services				
Certification of private training agencies	40	34	32	32
Audits of asbestos and lead training agencies	126	113	120	120
Quality assurance inspections in schools	126	81	125	120
	120	14	125	123
Major community health field study on-going				
Telephone consultations	3,900	4,000	4,100	4,100

	Actual FY 1997	Actual FY 1998	Revised FY 1999	Budget Estimate FY 2000
Hazardous materials training sessions provided	2	2		
Responses to acute environmental emergencies Consultations provided to other agencies and to the	2	3	8	8
public	14	14	10	10
Local health consultations, evaluations, and training services	1,411	3,136	3,228	3,436
Addiction Services				
Drug treatment admissions – primary alcohol	22,849	20.762	21,000	21,000
Drug treatment admissions - primary other drugs	41,026	39,960	40,000	40,000
Adult hospital detoxification admissions	13,186	12,291	12,500	12,500
Adult residential detoxification admissions	3,625	2,811	3,000	3,000
Adult residential admissions	9,587	8,484	8,500	8,900
Adult out-patient admissions	33,257	32,853	33,000	33,000
Juvenile treatment admissions (b)	3,482	3,795	4,000	4,700
Juvenile hospital detoxification admissions (b)	237	248	250	250
Juvenile residential detoxification admissions (b)	65	51	90	90
Juvenile residential admissions (b)	1,064	1,048	1,100	1,200
Juvenile out-patient admissions (b)	2,107	2,410	2,500	3,100
Intoxicated driver cases processed	23,334	23,870	24,000	24,000
Individuals given information and referral	44,336	44,337	45,000	45,000
Tobacco Control				
Number of counties with smokefree treatment services	21	21	21	21
Number of counties with tobacco use education in				
curricula	21	21	21	21
Number of tobacco free schools	2,200	2,200	2,200	2,200
Laboratory Services				
Bacteriology				
Specimens analyzed	140,586	145,537	159,000	165,000
Inborn Errors of Metabolism				
Specimens performed	119,934	122,781	124,000	124,000
Chemistry				
Asbestos samples examined	354	390	300	300
Occupational health samples examined	164	121	100	100
Sewage, stream & trade waste samples examined	3,716	3,768	3,750	3,750
Narcotic samples examined	23,838	139,472	185,000	210,000
Potable water samples examined	2,148	2,801	2,150	2,150
Food and milk samples examined	4,052	3,811	3,500	3,200
Specimens analyzed	84,740	142,634	115,000	115,000
Blood lead samples examined	18,709	12,685	12,000	12,000
Clinical Laboratory Services				
Clinical laboratories licensed	906	980	950	950
Serology				
Proficiency test samples (percent acceptable)	95%	95%	95%	95%
Routine screen tests for syphilis	65,018	65,517	66,000	60,000
Proficiency test samples reviewed	51,300	54,853	53,000	53,000
Virology				
Blood banks inspected	10	61	75	75
Clinical laboratory inspections	480	468	490	490
Blood banks licensed	168	168	180	180
AIDS Services				
Number of clients tested and counseled	68,744	65,847	67,500	67,500
Contact tracing of individuals	978	1,010	1,200	1,200
Drug treatment clients and sex partners served	19,686	13,618	15,500	16,000
Hotline network calls	11,957	12,854	13,000	13,000

	Actual FY 1997	Actual FY 1998	Revised FY 1999	Budget Estimate FY 2000
Living AIDS clients	13,522	13,958	14,000	14,000
HIV positive clients	13,401	13,937	14,500	15,000
Clients receiving early intervention services	10,128	9,867	11,500	11,500
HIV care consortia	9	9	10	5
Individuals reached/HIV training	4,804	5,523	5,000	5,000
PERSONNEL DATA				
Position Data				
Filled Positions by Funding Source				
State Supported	361	349	343	356
Federal	512	506	516	525
All Other	44	54	57	61
Total Positions	917	909	916	942
Filled Positions by Program Class				
Vital Statistics	49	47	52	49
Family Health Services	174	168	169	189
Public Health Protection Services	294	291	296	304
Alcoholism, Drug Abuse and Addiction Services	146	145	141	143
AIDS Services	134	141	144	142
Laboratory Services	120	117	114	115
Total Positions	917	909	916	942

Actual payroll counts are reported for fiscal years 1997 and 1998 as of December and revised fiscal year 1999 as of September. The Budget Estimate for fiscal year 2000 reflects the number of positions funded.

(a) Fiscal year 1998 data represents numbers screen by the Department of Health and Senior Services Laboratory. Data is not available on all children screened. Estimates for fiscal years 1998 and 1999 are based on universal reporting of all test results, therefore the number is expected to increase significantly.

(b) Actual fiscal year 1997 amounts have been restated to reflect accurate counts.

APPROPRIATIONS DATA (thousands of dollars)

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	——Year En	ding June 30, 1	1998					Year E ——June 30	nding), 2000——
Orig. & ^(S) Supple- mental	Reapp. & ^(R) Recpts.	Transfers & ^(E) Emer- gencies	Total Available	Expended		Prog. Class.	1999 Adjusted Approp.	Requested	Recom- mended
					Distribution by Program				
1,101	166	278	1,545	1,294	Vital Statistics	01	1,409	1,409	1,409
25,168	95	646	25,909	25,779	Family Health Services	02	32,071	34,105	34,105
17,856	1,240	87	19,183	18,405	Public Health Protection Services	03	24,025	22,774	22,774
25,240	134	-1,958	23,416	21,296	Addiction Services	04	22,567	41,655	41,655
4,278	278	65	4,621	4,574	Laboratory Services	08	4,547	4,547	4,547
14,192	5	503	14,700	14,647	AIDS Services	12	15,902	16,642	16,642
87,835	1,918	- 379	89,374	85,995	Total Appropriation		100,521 ^(a)	121,132	121,132
					Distribution by Fund and Object				
					Direct State Services - General Fund	l			
					Personal Services:				
	45								
14,207	<u>796 R</u>	4	15,044	14,990	Salaries and Wages		15,251	15,251	15,251
14,207	841	-4	15,044	14,990	Total Personal Services		15,251	15,251	15,251
2,495	17	-127	2,385	2,382	Materials and Supplies		2,508	2,508	2,508
1,242	1	358	1,601	1,336	Services Other Than Personal		1,121	1,121	1,121
203		-28	175	175	Maintenance and Fixed Charges		209	209	209
					Special Purpose:				
					Electronic Death Certificate	01	250	250	250
87			87	87	WIC Farmers Market Program	02	87	87	87
79			79	78	Emergency Medical Services	02	79	79	79
	16		16	16	Screening of Children for Lead Exposure	02			

	—Year En	ding June 30, 1	998					Year Ending ——June 30, 2000—		
Orig. & ⁾ Supple- mental	Reapp. & ^(R) Recpts.	Transfers & ^(E) Emer- gencies	Total Available	Expended		Prog. Class.	1999 Adjusted Approp.	Requested	Recon	
	64		64	63	Interagency Council on Osteoporosis	02			-	
95 ^S			95		Advisory Council on Adolescent Pregnancy	02			-	
		50	50	50	Black Infant Mortality Public Awareness Campaign	02				
50			50	50	Emergency Medical Services for Children	02	50	50		
					Service Recognition Program for EMT Volunteers	02		25		
					First Response EMT Cardiac Training Program	02		500		
					Youth Trauma Initiative	02		500		
					Identification System for Children's Health and Disabilities	02		900		
					Public Awareness Campaign for Black Infant Mortality	02	500	500		
					Cancer Screening – Early Detection and Education Program	03		2,700	2.	
					Timely Issuance of Export of Certificates of Free Sale	03		50	2	
					Evaluation of Human Exposure to Hazardous Waste	03		200		
400			400	360	Cancer Registry	03	400	400		
1,000	102		1,102	1,003	New Jersey State Commission on Cancer Research	03	1,000	1,000	1	
813	67		880	823	Medical Waste Management Program	03	813	813		
453	168 41 ^R		662	499	Rabies Control Program	03	502	502		
550	461		1,011	595	Animal Population Control Program	03	557	557		
1,334			1,334	1,334	Worker and Community Right to Know	03	1,362	1,992	1	
					Middle School Survey on Substance Abuse	04	100	155		
					Youth Anti-Tobacco Awareness Media Campaign	04		7,262	7	
					Smoking Cessation Programs for Addicted Adults and Youth	04		2,600	2	
					Research, Surveillance, Evaluation & Assistance for Anti-Smoking Programs	04		1,700	1	
					School Based Programs for the Prevention of Tobacco Use	04		2,200	2	
					Community Based Tobacco Control Programs	04		4,800	4	
4,861	919	50	5,830	4,958	Total Special Purpose		5,700	29,822	29	
	8	87	95	60	Additions, Improvements and Equipment					
23,008	1,786	336	25,130	23,901	Total Direct State Services - General Fund		24,789	48,911	48	
					Grants-In-Aid - General Fund					
2,625		200	2,825	2,825	Family Planning Services	02	3,019	3,269	3	
921			921	920	Hemophilia Services	02	937	937	U	
115			115	115	Testing for Specific Hereditary Diseases	02	118	118		
			1,700	1,698	Special Health Services for					

	——Year En	ding June 30, 1	1998					Year E June 30	
Orig. & ⁵⁾ Supple- mental	Reapp. & ^(R) Recpts.	Transfers & ^(E) Emer- gencies	Total Available	Expended		Prog. Class.	1999 Adjusted Approp.	Requested	Recon mend
368			368	362	Chronic Renal Disease Services	02	379	379	3
224		55	279	279	Pharmaceutical Services for Adults With Cystic Fibrosis	02	280	280	4
25			25	25	Birth Defects Registry	02	25	25	
300	15	-150	165	161	Interagency Council on	02	25	23	
50		-50			Osteoporosis Center for Hope Hospice,	02	300		
50		-30			Union County	02			
50			50	50	Best Friends Foundation	02	50		
25			25	25	Mary's Manor	02			
25			25	25	Catholic Charities, Bridgewater Connections Program	02			
		512	512	496	Cost of Living Adjustment,	02			
					Family Health Services	02	(b)	392	
					Cost of Living Adjustment, Deferred Cost-Family Health Services	02		392	
					Evesham Alliance	02	65		
					Birth Haven Inc., Newton	02	40		
					Lyme-Net	02	50		
					Governor's Lyme Disease	02	50		
					Advisory Council Interfaith Health Services-	02	5		
					Urban Health Screening	02	50		
					Somerville Kids Care-Kool Vests	02	25		
					Maternal and Child Health Services	02	271	271	
					Emergency Medical Services- COLA	02	58	58	
					Primary Care Services – Dover Free Clinic	02		225	
335			335	335	Lead Poisoning Program	02	344	344	
425			425	425	Poison Control Center	02	425	425	
550			550	549	Cleft Palate Programs	02	562	562	
					Greenville Hospital, Jersey City	02	25		
133			133	133	Newborn Screening Followup and Treatment for Hemoglobins	02	136	136	
150			150	150	SIDS Assistance Act	02	155	155	
250			250	250	Services to Victims of		100	100	
200			200	200	Huntingtons Disease	02	258	258	
		40	40	40	Jewish Renaissance Foundation	02			
					Family Health Center at Monmouth Medical Center,	0.9	900		
					Long Branch Camdan Ontomatric Evo Contor	02 02	200 100		
					Camden Optometric Eye Center Moridian Health System	02	100		
					Meridian Health System- Pediatric Asthma Education and Resource Center	02	150		
					Sexual Assault Nurse Examiner (SANE) Program, Cooper Hospital, Camden	02	90		
197			197	197	Tuberculosis Services	02	712	712	
354			354	354	Treatment and Control of Drug Resistant Tuberculosis	03			
		153	153	153	Cost of Living Adjustment, Public Health Protection	03	(c)		
					Cost of Living Adjustment, Deferred Cost-Public Health	00		117	
					Protection	03		117	

	——Year En	ding June 30, 1	1998					Year E ——June 30	
Orig. & ⁵⁾ Supple- mental	Reapp. & ^(R) Recpts.	Transfers & ^(E) Emer- gencies	Total Available	Expended		Prog. Class.	1999 Adjusted Approp.	Requested	Recom mendeo
					Immunization Services	03	247	247	24
359			359	359	AIDS Communicable Disease Control	03	372	372	37
					Cord Blood Resource Center	03	5,000 ^S		
266			266	266	Worker and Community Right to Know	03	268	268	26
150			150	150	Chelsea House Outpatient Services	04	100		
450			450	450	National Council on Alcohol and Drug Dependency	04	450		
1,250			1,250	1,250	Substance Abuse Treatment for DYFS/WorkFirst Mothers- Pilot Project	04	1,250	1,250	1,25
200			200	200	Drugs are Ugly and Uncool Campaign	04	200	200	20
2,500		-1,958	542	542	Cost of Living Adjustment, Addiction Services	04	(d)	626	62
350			350	350	Trenton Detox Center-Drug Rehab & Intensive Aftercare/ Transition Facility	04			
14,621	66		14,687	14,618	Community Based Abuse Treatment and Prevention – State Share ^(e)	04	16,593	16,593	16,59
95			95	95	Vocational Adjustment Centers	04	95	95	9
100			100	100	Freedom House, Glen Gardner	04	200		
					Cost of Living Adjustment, Deferred Cost-Addiction	0.4		505	F
600	51		651	601	Services	04 04	 617	595 617	55 6
620			620	620	Compulsive Gambling Mutual Agreement Parolee Rehabilitation Project for Substance Abusers	04	620	620	62
1,810			1,810	1,810	In-State Juvenile Residential Treatment Services	04	1,810	1,810	1,8
2,000			2,000		New Hope Discovery Foundation/Relocation	04		1,010	1,0
		483	483	483	Cost of Living Adjustment, AIDS Services	12	(f)	370	37
					Cost of Living Adjustment,			010	
11,513			11,513	11,513	Deferred Cost-AIDS Services AIDS Grants	12 12	13,199	370 13,199	37 13,19
· · · ·						16	10,100	15,155	15,1
45,706	132	- 715	45,123	42,974	Total Grants-In-Aid - General Fund		51,598	48,152	48,1
500			500	499	Grants-In-Aid - Casino Revenue Fu Statewide Birth Defects Registry	nd 02	500	500	50
500			500	499	Total Grants-In-Aid - Casino	02		500	5
500					Revenue Fund		500	500	5
15,021			15,021	15,021	State Aid - General Fund Early Childhood Intervention	02	19,469	19,469	10 44
3,600			3,600	3,600	Program Public Health Priority				19,40
18,621			18,621	18,621	Funding Total State Aid - General	03	4,165	4,100	4,10
			10,001	10,0%1	Fund		23,634	23,569	23,5

	—Year En	ding June 30,	1998					Year Ending ——June 30, 2000——	
Orig. & ^(S) Supple- mental	Reapp. & ^(R) Recpts.	Transfers & ^(E) Emer- gencies		Expended		Prog. Class.	1999 Adjusted Approp.	Requested	Recom- mended
				0'	THER RELATED APPROPR	IATIONS			
<u>1.506</u> 89,341	<u>242</u> 2,160	- 379	<u> </u>	<u> </u>	Total Capital Construction TOTAL STATE APPROPRL	ATIONS	<u>1,269</u> 101,790	<u>2,996</u> 124,128	<u>1,508</u> 122,640
					Federal Funds				
615 66 ^S 123,989	557		1,238	637	Vital Statistics	01	674	685	685
408 ^S 30,834	18,569	521	143,487	122,590	Family Health Services	02	144,432	131,520	131,520
20 ^S	5,095	16	35,965	16,832	Public Health Protection Services	03	29,616	25,610	25,610
46,820	9,960	-74	56,706	44,475	Addiction Services	04	48,173	48,671	48,671
1,852	599		2,451	1,590	Laboratory Services	08	1,727	1,565	1,565
53,756	7,159		60,915	43,678	AIDS Services	12	59,601	64,028	64,028
<i>258,360</i>	41,939	463	300, 762	229,802	Total Federal Funds		284 ,223	272,079	272,079
					All Other Funds				
	2,556				Vital Statistics	01	151		
	17,056 ^R 1,089	10,607	30,219	30,403	Family Health Services	02	28,494	27,694	27,694
	2,779 ^R	50	3,918	2,751	Public Health Protection Services	03	2,489	2,254	2,254
	1,733								
	2,557 ^R 151	863	5,153	3,619	Addiction Services	04	3,306	3,384	3,384
	420 ^R		571	490	Laboratory Services	08	621	450	450
	<u>2,421 ^R</u>		2,421	2,422	AIDS Services	12	3,356	5,756	5,756
	<u>30, 762</u>	<u> </u>	42,282	<u>39,685</u>	Total All Other Funds		38,417	<u>39,538</u>	39,538
347,701	74,861	11,604	434,166	356,597	GRAND TOTAL		424,430	435,745	434,257

Notes

(a) The fiscal year 1999 appropriation has been adjusted for the allocation of salary program and has been reduced to reflect the transfer of funds to the Salary Increases and Other Benefits accounts.

(b) Appropriation of \$867,000 distributed to applicable grant accounts.

(c) Appropriation of \$270,000 distributed to applicable grant accounts.

(d) Appropriation of \$1,192,000 distributed to applicable grant accounts.

(e) This account provides the necessary State maintenance of effort requirement to match the federal Substance Abuse Block grant.

(f) Appropriation of \$853,000 distributed to applicable grant accounts.

Language Recommendations -- Direct State Services - General Fund

- In addition to the amount appropriated above for Emergency Medical Services for Children Program, \$150,000 is appropriated from the annual .53% assessment on New Jersey hospitals established pursuant to section 12 of P.L. 1992, c. 160(C.26:2H-18.62) for the same purpose.
- The unexpended balance as of June 30, 1999, in the New Jersey Emergency Medical Service Helicopter Response Program account is appropriated.
- The unexpended balance as of June 30, 1999, in the Comprehensive Regulated Medical Waste Management Act account, together with any receipts received by the Department of Health and Senior Services pursuant to the provisions of the Comprehensive Regulated Medical Waste Management Act, P.L. 1989, c.34 (C.13:1E-48.1 et seq.), is appropriated.
- The unexpended balance as of June 30, 1999, in the Rabies Control Program account, together with any receipts in excess of the amount anticipated, is appropriated.

The amount hereinabove for the Rabies Control Program account is payable out of the Rabies Control Fund. If receipts to that fund are less than anticipated, the appropriation shall be reduced proportionately.

The unexpended balance as of June 30, 1999, in the Animal Population Control Program account, together with any receipts in excess of the amount anticipated, is appropriated.

- The amount hereinabove for the Animal Population Control Program account is payable out of the Animal Population Control Fund. If receipts to that fund are less than anticipated, the appropriation shall be reduced proportionately.
- Notwithstanding the provisions of the Worker and Community Right to Know Act, P.L. 1983, c. 315 (C.34:5A-1 et seq.), \$1,362,000 of the amount hereinabove for the Worker and Community Right to Know account is payable out of the Worker and Community Right to Know Fund. If receipts to that fund are less than anticipated, the appropriation shall be reduced proportionately.
- In addition to the amount appropriated above, an amount not to exceed \$1,300,000 is appropriated from the Worker and Community Right to Know Fund, subject to the approval of the Director of the Division of Budget and Accounting.
- The amount hereinabove for the New Jersey State Commission on Cancer Research is charged to the Cancer Research Fund pursuant to section 5 of P.L. 1982, c. 40 (C.54:40A-37.1).
- The unexpended balance as of June 30, 1999, in the New Jersey State Commission on Cancer Research account is appropriated.
- Amounts deposited in the "New Jersey Breast Cancer Research Fund" from the gross income tax check-offs pursuant to the provisions of P.L. 1995, c.26 (C.54A:9-25.7 et al.) are appropriated to the New Jersey State Commission on Cancer Research for breast cancer research projects, subject to the approval of the Director of the Division of Budget and Accounting.
- The Division of Addiction Services is authorized to bill a patient, a patient's estate, or the person chargeable for a patient's support, or the county of residence for institutional, residential and out-patient support of patients treated for alcoholism or drug abuse or both. Receipts derived from billings or fees and unexpended balances as of June 30, 1999 from these billings and fees are appropriated to the Department of Health and Senior Services, Division of Addiction Services, for the support of the alcohol and drug abuse programs.
- There are appropriated from the Alcohol Education, Rehabilitation and Enforcement Fund such sums as may be necessary to carry out the provisions of P.L. 1983, c.531 (C.26:2B-32 et al.).
- There is transferred from the Drug Enforcement and Demand Reduction Fund \$350,000 to carry out P.L. 1995, c. 318 to establish an "Alcoholism and Drug Abuse Program for the Deaf, Hard of Hearing and Disabled" with the Department of Health and Senior Services, subject to the approval of the Director of the Division of Budget and Accounting.
- There is appropriated \$350,000 from the Drug Enforcement and Demand Reduction Fund established pursuant to N.J.S. 2C:35-15, to the Department of Health and Senior Services for a grant to Partnerships for a Drug Free New Jersey pursuant to P.L. 1997, c.174.
- The Director of the Division of Budget and Accounting is empowered to transfer or credit appropriations to the Department of Health and Senior Services for diagnostic laboratory services provided to any other agency or department; provided further, however, that funds have been appropriated or allocated to such agency or department for the purpose of purchasing these services.
- Receipts from fees established by the Commissioner of Health and Senior Services for licensing of clinical laboratories pursuant to P. L. 1975, c. 166 (C.45:9-42.26 et seq.), and blood banks pursuant to P.L. 1963, c. 33 (C.26:2A-2 et seq.), and the unexpended balance of such fees as of June 30, 1999, are appropriated.
- Receipts from licenses, permits, fines, penalties and fees collected by the Department of Health and Senior Services in Health Services, in excess of those anticipated, are appropriated, subject to the approval of the Director of the Division of Budget and Accounting.

Language Recommendations -- Grants-In-Aid - General Fund

- The unexpended balance as of June 30, 1999 in the Pharmaceutical Services For Adults with Cystic Fibrosis account is appropriated.
- There are appropriated from the New Jersey Emergency Medical Service Helicopter Response Program Fund established pursuant to section 2 of P.L.1992 c.87 (C.26:2K-36.1) such sums as are necessary to pay the reasonable and necessary expenses of the operation of the New Jersey Emergency Medical Service Helicopter Response Program created pursuant to P.L. 1986, c. 106 (C. 26:2K-35 et seq.), subject to the approval of the Director of the Division of Budget and Accounting.
- An amount not to exceed \$1,830,000 is appropriated to the Department of Health and Senior Services from monies deposited in the Health Care Subsidy Fund established pursuant to section 8 of P.L. 1992, c.160 (C.26:2H-18-58) to fund the Infant Mortality Reduction Program.
- There is appropriated \$570,000 from the Alcohol Education, Rehabilitation and Enforcement Fund to fund the Fetal Alcohol Syndrome Program.
- The unexpended balance as of June 30, 1999 in the Trenton Detox Center-Drug Rehabilitation and Intensive Aftercare/Transition Facility account is appropriated as a pass through grant to the city of Trenton for up to one-half of the cost of construction of a new facility for the United Progress Inc., Trenton Treatment Center upon satisfactory demonstration by the city of Trenton that matching funds are available. Construction of the new facility shall be completed under the supervision of the Department of the Treasury in such a manner as is agreed upon by the Department of the Treasury and the Department of Health and Senior Services, United Progress Inc., and the City of Trenton.
- The unexpended balance of appropriations, as of June 30, 1999, made to the Department of Health and Senior Services by section 20 of P.L. 1989, c. 51 for State licensed or approved drug abuse prevention and treatment programs is appropriated for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.
- Notwithstanding the provisions of any law to the contrary, there is transferred \$1,000,000 to the Department of Health and Senior Services from the Drug Enforcement and Demand Reduction Fund for drug abuse services for individuals with HIV.

- Notwithstanding the provisions of any law to the contrary, there is transferred \$500,000 to the Department of Health and Senior Services from the Drug Enforcement and Demand Reduction Fund for the Sub-Acute Residential Detoxification Program.
- An amount, not to exceed \$600,000, collected by the Casino Control Commission is payable to the General Fund pursuant to section 145 of P.L. 1977, c.110 (C.5:12-145). The unexpended balance as of June 30, 1999 in the Compulsive Gambling account is appropriated to the Department of Health and Senior Services to provide funds for compulsive gambling grants.
- The unexpended balance as of June 30, 1999 in the New Hope Discovery Foundation/Relocation account is appropriated.
- There is appropriated \$420,000 from the Alcohol Education, Rehabilitation and Enforcement Trust Fund to fund the Local Alcoholism Authorities Expansion account.
- Notwithstanding the provisions of P.L. 1983, c.531 (C.26:B-32 et al.) or any other law to the contrary, the unexpended balance in the Alcohol, Education, Rehabilitation and Enforcement Fund as of June 30, 1999 is appropriated and shall be distributed to counties for the treatment of alcohol and drug abusers and for education purposes.

Language Recommendations -- State Aid - General Fund

- The capitation is set not to exceed 40 cents for the year ending June 30, 2000 for the purposes prescribed in P.L. 1966, c.36 (C26:2F-1 et seq.).
- In addition to the amount hereinabove, receipts from the Federal Medicaid (Title XIX) Program for handicapped infants are appropriated, subject to the approval of the Director of the Division of Budget and Accounting.
- In addition to the amount hereinabove for the Early Childhood Intervention program, such additional sums as may be required are appropriated from the General Fund to cover additional costs of the program to maintain federal compliance, subject to the approval of the Director of the Division of Budget and Accounting.

20. PHYSICAL AND MENTAL HEALTH 22. HEALTH PLANNING AND EVALUATION

OBJECTIVES

- 1. To ensure high quality health care accessible to all New Jerseyans, in a safe environment, utilizing the appropriate level of health care facilities, at reasonable costs; to enhance the Department's response to consumer complaints and to conduct on-site visits at all health care facilities against which a complaint has been filed; to ensure that all new applications for licensure are capable of providing high quality care to the ill, the aging, and the vulnerable elderly and young; to continue development and implementation of improved licensure regulations for health care delivery; to monitor the quality of health care personnel training programs and to ensure an adequate number of certified personnel capable of providing quality care; and to increase consumer and professional awareness of the quality of care at New Jersey's licensed health care facilities.
- 2. To implement and participate in the development of the State health plan.
- 3. To coordinate the development of public health and regulatory databases and the publication of health research.
- To administer a comprehensive Certificate of Need program to provide for the orderly development and replacement of needed health care facilities and services.
- 5. Allocate health care subsidy funds for hospitals and other health care initiatives; review and analyze issues related to health care financing.
- 6. To develop reimbursement policies and procedures to refine the system in response to changes in the health care environment.

7. To develop analytical data on hospital prices and outcome measures.

PROGRAM CLASSIFICATIONS

- 06. Long Term Care Systems Development & Quality Assurance. Licenses and inspects health care facilities; maintains a surveillance system of all health care facilities and services; investigates complaints received from consumers and other State and Federal agencies; develops new and revises existing standards; reviews and approves all plans for construction and renovation of facilities and monitors costs; licenses nursing home administrators, certifies nurse's aides in long-term care facilities, approves nurse aide training programs; and provides consumers and professionals with information on the quality of care; regulates managed care organizations, addressing consumer complaints and reviews the ongoing performance of HMO's through periodic site visits and review of annual reports.
- 07. **Health Care Systems Analysis.** Contributes to the development of the State Health Plan; administers the Certificate of Need program; evaluates and controls capital expenditures for health facilities; establishes and maintains uniform health facility reporting systems; establishment of a subsidized health benefits program for workers and the temporarily unemployed; allocation of health care subsidy funds for hospitals and other health care initiatives; review and analysis of other issues related to health care financing; relates to other agencies in the State and Federal government that are affected by the planning and reimbursement system; and the administration and development of analytical data, which includes data on all vital health events to determine health the status of New Jerseyans.

EVALUATION DATA

	Actual FY 1997	Actual FY 1998	Revised FY 1999	Budget Estimate FY 2000
PROGRAM DATA				
Long Term Care Systems Development & Quality Assurance				
Licensed health care facilities	605	642	680	710
Licensed nursing home administrators	937	1,029	1,109	1,128
Total licenses issued	637	721	710	740
Number of beds licensed	60,908	63,828	65,900	68,000
Total inspections	2,250	2,400	2,700	2,800
Total federally certified licensed facilities	10	9	9	9
Total federally certified licensed beds	4,158	3,690	3,690	3,690
Administrative actions/penalties	53	275	330	365
Federal Enforcement Actions	279	267	300	310
Health Care Systems Analysis				
Certificate of need applications processed	399	356	200	145
Collection and analysis of hospital cost, financial, and utilization data				
By patient	1,400,000	1,400,000	1,400,000	1,400,000
By hospital	83	83	83	83
Managed Care publications distributed Collects, analyzes & maintains database of all vital	17,000	25,500	40,000	50,000
event records	243.814	242,700	242.500	243.000
Enrollees in New Jersey Subsidized Insurance Program	14.221	11.019	7.500	3,500
Acute Health Care facilities licensed	535	568	618	670
External Health Maintenance Organization complaints				
processed	637	680	2,900	3,600
PERSONNEL DATA				
Position Data				
Filled Positions by Funding Source				
State Supported	35	34	30	19
Federal	137	126	129	136
All Other	113	96	96	140
Total Positions	285	256	255	295
Filled Positions by Program Class				
Long Term Care Systems Development & Quality Assurance	188	133	138	131
Health Care Systems Analysis	97	123	117	164
Total Positions	285	256	255	295
Notes:				_

Actual payroll counts are reported for fiscal years 1997 and 1998 as of December and revised fiscal year 1999 as of September. The Budget Estimate for fiscal year 2000 reflects the number of positions funded.

APPROPRIATIONS DATA (thousands of dollars)

	—_Year En	ding June 30, 1	998		Justifies of domais)			Year E ——June 30	nding), 2000——
Orig. & ^(S) Supple- mental	Reapp. & ^(R) Recpts.	Transfers & ^(E) Emer- gencies	Total Available	Expended		Prog. Class.	1999 Adjusted Approp.	Requested	Recom- mended
					Distribution by Program				
4,335	1,194	-605	4,924	4,724	Long Term Care Systems Development & Quality Assurance	06	4,247	4,402	4,402
77,300	1,029	-691	77,638	77,475	Health Care Systems Analysis	07	67,273	109,173	109,173
81,635	2,223	- 1,296	82,562	<i>82,199</i>	Total Appropriation		71,520 ^(a)	113,575	113,575

	—Year End	ling June 30,	1998					Year E ——June 30	
Orig. & ^{S)} Supple- mental	Reapp. & ^(R) Recpts.	Transfers & ^(E) Emer- gencies	Total Available	Expended		Prog. Class.	1999 Adjusted Approp.	Requested	Recom- mended
					Distribution by Fund and Object Direct State Services - General Fund Personal Services:				
3,915	6 2.212 ^R	-1.343	4,790	4,743	Salaries and Wages		3,946	3,946	3,94
3,915	2,218	-1,343	4,790	4,743	Total Personal Services		3,946	3,946	3,94
73		4	77	64	Materials and Supplies		60	60	60
247 100		22 9	269 109	166 41	Services Other Than Personal Maintenance and Fixed Charges		220 94	220 94	220 94
100		9	105	41	Special Purpose:		54	54	5
					Nursing Home Background	06	900	900	0.00
					Checks Resident Satisfaction System	06	900	900	900
1 000			1 000	000	- Long Term Care	06		155	155
1,000			1,000	880	Implementation of Statewide Health Information Network	07	1,000	1,000	1,000
1,000			1,000	880	Total Special Purpose		1,900	2,055	2,055
	5	12	17	5	Additions, Improvements and Equipment				
5,335	2,223	- 1,296	6,262	5,899	Total Direct State Services - General Fund		6,220	6,375	6,37
									0,071
20,500					Grants-In-Aid - General Fund				
32,900 ^S			53,400	53,400	Health Care Subsidy Fund Payments (P.L. 1997, c. 263) ^(b)	07	44,100	99,700	99,700
12,500 10,000 ^S			22,500	22,500	New Jersey ACCESS Program	07	18,000	7,500	7,500
200			200	200	St. Barnabas/Kimball Medical		,	,	,
200			200	200	Center-Low-Income Clinic Monmouth Medical Center-	07	200		
					Outpatient Clinic Southern New Jersey	07			
					Emergency Medicine Center Pediatric Trauma Education	07	1,000		
					Program	07	1,000		
					Family Medicine/Preventive Medicine Center	07	1,000		
76,300			76,300	76,300	Total Grants- In - Aid - General Fund		65,300	107,200	107,20
						ONG			
				Ľ	THER RELATED APPROPRIATI	UNS			
8,523	1,330	-1,500	8,353	3,427	Federal Funds Long Term Care Systems Development & Quality				
240					Assurance	06	6,631	7,057	7,057
<u>48</u> S	360	1,578	2,226	1,506	Health Care Systems Analysis	07	1,795	1,150	1,150
8,811	1,690	78	10,579	4,933	Total Federal Funds		8,426	8 ,207	8,20
	100				All Other Funds				
	132 317 ^R	1,101	1,550	847	Long Term Care Systems Development & Quality				
	95 150				Assurance	06	2,301	388	388
	25,159 <u>27,015 ^R</u>	-10,975	41,199	16,207	Health Care Systems Analysis	07	62,408	48,916	48,916
	<u> </u>	- <u>10,975</u> - 9,874	<u>42,749</u>	<u> </u>	Total All Other Funds	01	<u>64,709</u>	<u>49,304</u>	<u>49,30</u> 4
	56,536	- 11,092	135,890	104,186	GRAND TOTAL		144,655	171,086	171,080

Notes

- (a) The fiscal year 1999 appropriation has been adjusted for the allocation of salary program and has been reduced to reflect the transfer of funds to the Salary Increases and Other Benefits account.
- (b) Health Care Subsidy Fund payments represent General Fund contributions for Charity Care payments to hospitals, the Hospital Relief Fund and New Jersey KidCare children's health insurance program.

Language Recommendations -- Direct State Services - General Fund

- Receipts from licenses, permits, fines, penalties and fees collected by the Department of Health and Senior Services in Health Planning and Evaluation, in excess of those anticipated, are appropriated.
- Receipts from fees established by the Commissioner of Health and Senior Services for licensing of clinical laboratories pursuant to P. L. 1975, c. 166 (C.45:9-42.26 et seq.), and blood banks pursuant to P.L. 1963, c. 33 (C.26:2A-2 et seq.), and the unexpended balance of such fees as of June 30, 1999, are appropriated.
- From the amount appropriated for the Implementation of Statewide Health Information Network, no amount shall be expended for costs of administrative services within the Department of Health and Senior Services.
- In addition to the amount appropriated above for the Implementation of Statewide Information Network, \$1,000,000 is appropriated from the annual .53% assessment on New Jersey hospitals established pursuant to section 12 of P.L. 1992, c. 160 (C.26:2H-18.62) for the same purpose.
- From the amount appropriated for the Implementation of Statewide Health Information Network, \$250,000 shall be allocated for a grant to the New Jersey Institute of Technology and \$250,000 shall be allocated for a grant to Thomas A. Edison State College.
- Available funds are appropriated to the Health Care Facilities Improvement Fund to provide available resources in an emergency situation at a health care facility, as defined by the Commissioner of Health and Senior Services, or for closure of a health care facility, subject to the approval of the Director of the Division of Budget and Accounting.
- Receipts derived from fees charged for processing Certificate of Need applications and the unexpended balances of such receipts as of June 30, 1999, are appropriated for the cost of this program, subject to the approval of the Director of the Division of Budget and Accounting.

Language Recommendations -- Grants-In-Aid - General Fund

- There are appropriated such sums as are necessary to pay prior year obligations of programs within the Health Care Subsidy Fund, subject to the approval of the Director of the Division of Budget and Accounting.
- Notwithstanding any law to the contrary, no funds appropriated for the New Jersey ACCESS program may be expended for individuals who were not enrolled in the program on July 1, 1998, or for individuals who are eligible for New Jersey KidCare or Title XIX medical coverage.
- In addition to the amounts hereinabove for the New Jersey ACCESS program or New Jersey KidCare, such additional sums as may be required are appropriated from the General Fund to cover health insurance costs of the programs, subject to the approval of the Director of the Division of Budget and Accounting.
- Notwithstanding any law to the contrary, all revenues received from health maintenance organizations covering ACCESS clients shall be deposited into the General Fund, subject to the approval of the Director of the Division of Budget and Accounting.
- Notwithstanding any law to the contrary, \$20,400,000 of the amount hereinabove within the Health Care Subsidy Fund payments account supporting Charity Care payments to hospitals is appropriated from the Admission Charge Hospital Assessment revenue item.

20. PHYSICAL AND MENTAL HEALTH 25. HEALTH ADMINISTRATION

OBJECTIVES

- 1. To execute legislative mandates and to assure the health and well-being of the citizens in New Jersey through the development of responsive public health policy and the provision of appropriate public health programs.
- 2. To plan, develop, and maintain financial, human resource, information processing and managerial support services which will ensure the delivery of effective and efficient public health programs.

PROGRAM CLASSIFICATIONS

99. Administration and Support Services. The Commissioner and staff (C26:1A-13 et seq.) provide Department-wide support in policy and planning development, legal services, legislative services, public information, program evaluation; the Office of

Minority Health; and a full range of centralized support services to the operating divisions including:

Financial and General Services. Prepares Department budgets; ensures the meeting of financial requirements for all federal, State and private grants; maintains Department financial records in accordance with legal requirements and generally accepted accounting principles; supervises Department auditing, procurement and grant processes and provides technical financial guidance to the Department and its grantees. Warehousing, printing, facilities, and mail handling are also provided.

Management and Information Services. Develops and maintains electronic data processing services for the Department; ensures the collection, storage and retrieval of data in a uniform, centralized system; provides systems analysis, design and implementation.

Human Resource Services. Provides personnel management and development, labor relations and affirmative action services for the Department.

EVALUATION DATA

EVALUAI	ION DAIA			
	Actual FY 1997	Actual FY 1998	Revised FY 1999	Budget Estimate FY 2000
PERSONNEL DATA				
Affirmative Action Data				
Male Minority	107	109	118	120
Male Minority %	5.9	5.8	6.1	6.2
Female Minority	384	426	442	450
Female Minority %	21.3	22.6	22.9	23.2
Total Minority	491	535	560	570
Total Minority %	27.2	28.4	29.0	29.4
Position Data				
Filled Positions by Funding Source				
State Supported	98	92	95	91
Federal	1	1	3	1
All Other	61	64	82	70
Total Positions	160	157	180	162
Filled Positions by Program Class				
Administration and Support Services	160	157	180	162
Total Positions	160	157	180	162

Actual payroll counts are reported for fiscal years 1997 and 1998 as of December and revised fiscal year 1999 as of September. The Budget Estimate for fiscal year 2000 reflects the number of positions funded.

APPROPRIATIONS DATA

(thousands of dollars)

	——Year En	ding June 30, 1	1998					Year E ——June 30	nding), 2000——
Orig. & ^{S)} Supple- mental	Reapp. & ^(R) Recpts.	Transfers & ^(E) Emer- gencies	Total Available	Expended		Prog. Class.	1999 Adjusted Approp.	Requested	Recom- mended
					Distribution by Program				
1,204	40	2,525	3,769	3,768	Administration and Support Services	99	2,242	2,282	2,282
1,204	40	2,525	3, 769	<i>3,768</i>	Total Appropriation		2,242 ^(a)	2,282	2,282
					Distribution by Fund and Object				
					Direct State Services - General Fund				
					Personal Services:				
823	<u>40</u> R	2,568	3,431	3,430	Salaries and Wages		1,863	1,863	1,863
823	40	2,568	3,431	3,430	Total Personal Services		1,863	1,863	1,863
49			49	49	Materials and Supplies		49	49	49
210		-44	166	166	Services Other Than Personal		208	248	248
38		1	39	39	Maintenance and Fixed Charges		38	38	38
					Special Purpose:				
84			84	84	Affirmative Action and Equal Employment Opportunity	99	84	84	84
84			84	84	Total Special Purpose		84	84	84
1,204	40	2,525	3,769	3,768	Total Direct State Services - General Fund		2,242	2,282	2,282

OTHER RELATED APPROPRIATIONS

<u> </u>	<u>183</u> 183	<u> </u>	<u> </u>	<u> </u>	Federal Funds Administration and Support Services Total Federal Funds	99	<u> </u>	<u>460</u> 460	<u>460</u> 460
	44	-44			All Other Funds New Jersey Essential Health Services Commission	16			

	—Year En	ding June 30, 1	1998					Year E ——June 30	nding), 2000——
Orig. & ^(S) Supple- mental	Reapp. & ^(R) Recpts.	Transfers & ^(E) Emer- gencies	Total Available	Expended		Prog. Class.	1999 Adjusted Approp.	Requested	Recom- mended
	41	-23	18		Office of Health Policy and Research	87			
	2,654 <u>1,254</u> ^R	2,103	6,011	2,459	Administration and Support Services	99	2,430	2,430	2,430
1,504	<u>3,993</u> 4,216	<u>2,036</u> 4,611	<u>6,029</u> 10,331	<u>2,459</u> 6,572	Total All Other Funds GRAND TOTAL		<u>2,430</u> 4,972	<u>2,430</u> 5,172	<u>2,430</u> 5,172

Notes

(a) The fiscal year 1999 appropriation has been adjusted for the allocation of salary program and has been reduced to reflect the transfer of funds to the Salary Increases and Other Benefits account.

20. PHYSICAL AND MENTAL HEALTH 26. SENIOR SERVICES

OBJECTIVES

- 1. To provide a variety of medical and health services to individuals in their own homes to avoid unnecessary institutional placement.
- 2. To provide prescription drugs, insulin and insulin syringes for State residents qualifying for the Pharmaceutical Assistance to the Aged and Disabled (PAA/D) programs (C30:D-21 et seq.).
- 3. To administer the Lifeline Credit Program (C.48:2-29.15 et seq.) and the Tenants Lifeline Assistance Program (C.48:2-29.30 et seq.).
- 4. To promote and encourage advocacy for the aging population at the federal, State, county and municipal levels in order to ensure that the elderly will not be deprived of their rights, privileges, entitlements or benefits.
- 5. To promote, advocate and insure, as a whole and in particular cases, the adequacy of the care received, and the quality of life experienced, by elderly patients, residents and clients of institutional facilities within this State.
- 6. To increase energy conservation and reduce the utility costs of low-income households through the weatherization of single and multi-family dwellings.
- 7. To assure through the County Offices on Aging that congregate and in-home nutrition services are provided on a daily basis to residents aged 60 years and older with emphasis on those in greatest need.
- 8. To continue to serve as an effective and visible advocate for the elderly through programs for the aging.
- 9. To provide assistance to elderly citizens who have been found by the court to need a guardian or conservator and to administer those services in order to provide a better quality of life for each individual represented.

PROGRAM CLASSIFICATIONS

- 22. **Medical Services for the Aged.** Supports medically related services to eligible elderly and disabled individuals including community-based services to clients who would normally be eligible for Medicaid coverage only in an institution. Rebates for hearing aids purchased are provided to persons eligible for Pharmaceutical Assistance to the Aged and Disabled. Home care services are also provided to persons previously ineligible because of income limits.
- 24. Pharmaceutical Assistance to the Aged and Disabled (PAA/ D). The Pharmaceutical Assistance to the Aged (PAA) Program provides prescription drug benefits to persons over 65 years of age

with an income of up to \$9,000 if single or \$12,000 if married. Eligible individuals above these income limits and the disabled are funded from the Casino Revenue Fund through the Pharmaceutical Assistance to the Aged and Disabled (PAAD) Program, which provides prescription drug benefits to persons over 65 years of age, or disabled as defined by the Federal Social Security Act, with an income of up to \$18,151 if single or \$22,256 if married. Both programs provide payment to pharmacies for the average wholesale price of prescription drugs (minus 10%) plus a dispensing fee reduced by a recipient co-payment.

- 28. Lifeline. The Lifeline Credit Program provides combined gas and electric utility credits of up to \$225 a year to N.J. residents who are eligible for Pharmaceutical Assistance to the Aged and Disabled, Supplemental Security Income, Medicaid only, or Lifeline only. The Tenants Lifeline Assistance Program provides a cash payment of up to \$225 a year to tenants who would be eligible for the Lifeline Credit Program except for the fact that they do not pay their own utility bills. Persons receiving Supplemental Security Income (SSI) who are eligible for this program receive monthly utility supplements totaling \$225 a year included in their SSI checks.
- 55. **Programs for the Aged.** The Division on Aging (C52:27D-28.1) supports programs which improve the quality of life for New Jersey's older citizens through technical assistance and grants to local entities. Funded programs include congregate and home delivered meals, informational assistance, outreach, personal care, legal services, transportation, telephone reassurance, housekeeping and chore services, and case management. These programs are financed with both State and federal funds. The 21 County Offices on Aging are also supported with state aid.
- 56. **Office of the Ombudsman.** The Ombudsman for the Institutionalized Elderly (C52:27G-1 et seq.) receives, investigates and resolves complaints concerning health care facilities serving the elderly, and initiates actions to secure, preserve and promote the health, safety, welfare and the civil and human rights of the institutionalized elderly. The Office reviews requests for the withdrawal or withholding of life-sustaining treatment for persons without advance directives for health care.
- 57. **Office of the Public Guardian.** The Public Guardian (C52:27G-20 et seq.) provides guardianship services for elderly adults who have been deemed by the courts to be in need of a guardian or conservator. Services include legal assistance, individualized social service plans, investigations into family/social history, and financial management, dependent on the client's personal needs.

EVALU	ATION DATA			Pudaat
	Actual FY 1997	Actual FY 1998	Revised FY 1999	Budget Estimate FY 2000
PROGRAM DATA				
Medical Services for the Aged				
Nursing Home Services:				
Per diem	\$93.79	\$94.28	\$94.88	\$95.77
Patient days	12,006,451	12,102,324	12,086,958	12,100,000
Gross annual cost (a)	\$1,126,085,039	\$1,140,972,000	\$1,146,763,000	\$1,158,846,000
Peer Grouping (Federal Funds) (b)	\$42,898,442	\$40,501,668	\$40,981,848	\$41,000,000
Community Care Programs:				
Community Care Program for the Elderly and Disabled	4,029	4,367	4,399	4 400
clients served Community Care Program for the Elderly and Disabled	4,029	4,307	4,399	4,499
amount expended	\$40,169,000 (c)	\$45,879,000 (c)	\$53,673,408 (c)	\$55,400,000 (c)
Assisted Living/ Alternative Family Care Clients	. , ,	. , ,	. , ,	. , ,
served	750 (d)	251	531	540
Pharmaceutical Assistance to the Aged and Disabled				
Pharmaceutical Assistance to the Aged (PAA) Only:				
Average monthly eligibles	43,622	33,425	29,876	23,189
Average monthly prescriptions per eligible	1.93	2.25	2.20	2.20
Annual prescriptions	1,008,135	902,475	788,726	612,189
Cost per prescription (excludes co-payment)	\$37.67	\$39.28	\$40.41	\$44.91
Gross Cost PAA Program	\$37,976,445	\$35,449,218	\$31,872,433	\$27,493,434
Recoveries	(\$2,380,171) \$35,596,274	(\$1,297,058) \$34,152,160	(\$1,643,000) \$30,229,433	(\$1,643,000) \$25,850,434
Pharmaceutical Assistance to the Aged & Disabled (PAAD) Only:				
Aged				
Average monthly eligibles	147,448	142,810	141,154	138,470
Average monthly prescriptions per eligible	2.15	2.52	2.53	2.50
Annual prescriptions	3,802,082	4,318,574	4,285,435	4,154,100
Cost per prescription (excludes co-payment)	\$39.18	\$38.08	\$41.98	\$47.50
Gross Cost PAAD Program (Aged only)	\$148,965,573	\$164,477,290	\$179,904,100	\$197,332,542
Recoveries	(\$5,998,948)	(\$7,307,000)	(\$7,307,000)	(\$11,517,450)
PAAD manufacturers' rebates	(\$21,241,600) (e)	(\$21,573,500) (e)	(\$21,573,500) (e)	(\$26,253,500) (e)
Net Annual Cost	\$121,725,025	\$135,596,790	\$151,023,600	\$159,561,592
Disabled Average monthly eligibles	22,169	22,256	22,313	22,389
Average monthly prescriptions per eligible	3.03	3.40	3.40	3.40
Annual prescriptions	805,839	908,044	910,370	913,471
Cost per prescription (excludes co-payment)	\$51.12	\$53.47	\$61.72	\$70.47
Gross Cost PAAD Program (Disabled only)	\$41,194,490	\$48,557,710	\$56,188,900	\$64,376,458
Recoveries	(\$3,374,408)	(\$1,976,000)	(\$1,976,000)	(\$3,115,550)
PAAD manufacturers' rebates	(\$11,948,400) (e)	(\$11,616,500) (e)	(\$11,616,500) (e)	(\$14,136,500) (e)
Net Annual Cost	\$25,871,682	\$34,965,210	\$42,596,400	\$47,124,408
Total General Fund	\$35,873,283	\$34,152,160	\$30,229,434	\$25,850,434
Total Casino Revenue Fund	\$147,255,857	\$170,562,000	\$193,620,000	\$206,686,000
Lifeline				
Lifeline Credit Program				
Population Data				
Pharmaceutical Assistance to the Aged and Disabled	114,064	113,309	110,208	109,708
Supplemental Security Income	28,329	28,889	29,085	29,585
Medicaid only	9,060	8,874	8,893	8,893
Lifeline only	4,997	3,968	5,893	5,898
Total recipients	156,449	155,058	154,084	154,084
Credit amount	\$225	\$225	\$225	\$225

	Actual FY 1997	Actual FY 1998	Revised FY 1999	Budget Estimate FY 2000
Tenants Lifeline Assistance Program				
Population Data				
Pharmaceutical Assistance to the Aged and Disabled	33,624	32,284	32,724	32,224
Supplemental Security Income	116,348	113,264	118,447	118,947
Medicaid only	8,045	8,186	8,708	8,708
Lifeline only	667	586	881	881
Total recipients	158,684	154,320	160,760	160,760
Rebate amount	\$225	\$225	\$225	\$225
Programs for the Aged				
Services and Service Units Provided:				
Congregate meals service	2,461,112	2,182,671	2,183,000	2,000,000
Home delivered meals service	2,639,197	2,731,633	2,732,000	2,915,000
Transportation service	1,133,282	1,105,624	1,106,000	1,150,000
Information and referral service	316,824	270,505	271,000	300,000
Telephone reassurance service	363,170	337,968	338,000	338,000
Outreach service	88,510	27,193	27,000	27,000
Personal care service	413,136	552,910	553,000	553,000
Legal service	25,214	35,723	36,000	35,000
Housekeeping and chore services	80,982	484,457	484,000	484,000
Education and training services	15,264	11,853	12,000	12,000
Case management service	58,018	75,993	76,000	80,000
Physical health services	73,966	70,850	71,000	71,000
Congregate Housing Services Program				
Persons served	1,843	1,600	1,600	1,600
Site locations	29	29	29	29
Adult Protective Services				
Persons Served	4,177	5,247	5,772	6,349
Health Insurance Counseling				
Clients served	21,855	22,500	24,000	25,000
Security Housing and Transportation				
Clients served	5,044	6,348	6,300	6,200
Gerontology Services				
Geriatric Patients Served	3,012	3,479	3,000	3,000
Alzheimer's Day Care Units Provided	26,422	31,266	37,000	37,000
Persons Trained in Gerontology	1,255	2,703	2,000	2,000
Caregivers Receiving Respite Care	1,821	1,895	2,200	2,200
Office of the Ombudsman				
Office of the Ombudsman				
Institutionalized elderly	72,500	72,500	72,500	72,500
On-site investigations:	12,000	12,000	12,000	12,000
Involving patient funds	69	83	120	120
Involving care/abuse/neglect	2,376	2,373	2,000	2,490
Nursing homes visited	2,879	2,869	3,100	3,200
Boarding homes visited	68	83	60	80
Residential health care/psychiatric and development				
centers visits	293	278	240	240
Cases referred to enforcement agencies	275	298	300	300
Office of the Public Guardian				
Office of the Public Guardian				
Number of inquiries	725	120	385	580
Number of cases handled	1,046	842	1,060	1,128
Number of court-appointed cases	28	32	96	144
PERSONNEL DATA				
Position Data				
Filled Positions by Funding Source	105	100	004	004
State Supported	195	199	224	224
Federal	131	137	139	139

	Actual FY 1997	Actual FY 1998	Revised FY 1999	Budget Estimate FY 2000
All Other	20	18	15	9
Total Positions	346	354	378	372
Filled Positions by Program Class				
Medical Services for the Aged	139	148	159	163
Pharmaceutical Assistance to the Aged & Disabled	88	81	97	96
Lifeline	29	34	31	32
Programs for the Aged	55	51	53	42
Ombudsman's Office	17	20	20	20
Office of the Public Guardian	18	20	18	19
Total Positions	346	354	378	372
Notes:				

Actual payroll counts are reported for fiscal years 1997 and 1998 as of December, and revised fiscal year 1999 as of September. The Budget Estimate for fiscal year 2000 reflects the number of positions funded.

Actual fiscal year 1997 amounts have been restated to reflect accurate accounts.

(a) Includes expenses for Medicaid High Occupancy, federal Peer Grouping, and SOBRA funded in the General Fund.

(b) Peer Grouping expenses are also reflected in Gross annual cost.

(c) Includes resources from the Casino Revenue Fund, Grants-in-Aid, the Health Care Subsidy Fund, and matching federal funds.

(d) FY1997 evaluation data reflects the number of slots available in Assisted Living/Alternative Family Care. Subsequent fiscal years report the number of clients served.

(e) Rebates are earned by all portions of the PAA/PAAD program; however, they are applied only to the Casino Revenue Fund.

APPROPRIATIONS DATA

(thousands of dollars)

Year Ending

	——Year En	ding June 30, 1	1998					June 30, 2000	
Orig. & ^(S) Supple- mental	Reapp. & ^(R) Recpts.	Transfers & ^(E) Emer- gencies	Total Available	Expended		Prog. Class.	1999 Adjusted Approp.	Requested	Recom- mended
					Distribution by Program				
581,295		8,766	590,061	587,606	Medical Services for the Aged	22	605,727	627,482	627,482
210,901	33,190	4,695	248,786	244,004	Pharmaceutical Assistance to the Aged and Disabled	24	230,524	239,210	239,210
78,020		-4,911	73,109	71,234	Lifeline	28	72,834	72,834	72,834
24,300	1	755	25,056	25,008	Programs for the Aged	55	27,211	27,021	27,021
600			600	595	Office of the Ombudsman	56	601	601	601
716	27	1	744	733	Office of the Public Guardian	57	734	734	734
895,832	<i>33,218</i>	9,306	938,356	929,180	Total Appropriation		937,631 ^(a)	967,882	967,882
					Distribution by Fund and Object Direct State Services - General Fund Personal Services:	d			
7,638									
<u>304</u> ^S			7,935	7,927	Salaries and Wages		8,986	8,986	8,986
7,942		-7	7,935	7,927	Total Personal Services		8,986	8,986	8,986
314		-25	289	284	Materials and Supplies		339	339	339
1,406		488	1,894	1,891	Services Other Than Personal		1,820	1,820	1,820
741		-60	681	663	Maintenance and Fixed Charges Special Purpose:		849	849	849
		531	531	119	Fiscal Agent - Medical Services for the Aged	22	119	119	119
					Community Choice/Acuity Audits	22	703	703	703
		100	100	100	Nursing Home Contract Audits	22			
2,134		48	2,182	2,106	Payments to Fiscal Agent - PAA	24	2,134	2,134	2,134
100			100	99	New Jersey Easy Access Single Point-of-Entry (NJEASE)	55	100	100	100
410			410	410	Federal Programs for the Aging (State Share)	55	410	410	410
2,644		679	3,323	2,834	Total Special Purpose		3,466	3,466	3,466

	Year Ending June 30, 1998–––––––––––––––––––––––––––––––––––							Year Ending ——June 30, 2000——	
Orig. & ^{S)} Supple- mental	Reapp. & ^(R) Recpts.	Transfers & ^(E) Emer- gencies	Total Available	Expended		Prog. Class.	1999 Adjusted Approp.	Requested	Recom- mended
250	28	215	493	422	Additions, Improvements and Equipment		250	250	250
13,297	28	1,290	14,615	14,021	Total Direct State Services -		·		
					General Fund		15,710	15,710	15,71
					Direct State Services - Casino Reve	enue Fund			
					Personal Services:				
582		204	786	646	Salaries and Wages		658	658	65
				139	Employee Benefits		138	138	13
582		204	786	785	Total Personal Services		796	796	79
10		2	12	8	Materials and Supplies		14	14	14
20		17	37	37	Services Other Than Personal		47	47	47
					Maintenance and Fixed Charges		2	2	4
		26	26	14	Additions, Improvements and Equipment		12	12	12
<i>612</i>		249	861	844	Total Direct State Services -				
					Casino Revenue Fund		871	871	87 1
					Grants-In-Aid - General Fund				
7,354			7,354	7,354	Community Care Alternatives ^(b)	22	13,599	24,447	24,447
530,294		4,189	534,483	534,424	Payments for Medical				
					Assistance Recipients -	0.0	E 4 0 0 0 E	EE9 907	FF9 90'
19 197		0.040	15 200	15 960	Nursing Homes ^(c)	22 22	546,835	552,897	552,897
12,127 9,000		3,242	$15,369 \\ 9,000$	15,369 9,000	Medical Day Care Services Medicaid High Occupancy -	22	16,200	21,840	21,840
9,000			9,000	9,000	Nursing Homes	22	9,000	9,000	9,000
					ElderCare Initiatives	22		10,337	10,337
35,162		-170	34,992	34,152	Pharmaceutical Assistance to the Aged – Claims	24	$^{27,263^{(d)}}_{2,967}$ s	25,850	25,850
					Payments for Tenants		,	,	,
					Assistance Rebates ^(e)	28	36,171	36,171	36,171
7,267			7,267	7,267	Purchase of Social Services	55	7,539	7,539	7,539
		150	150	143	Interagency Council on OsteoporosisSeniors	55			
		50	50	50	Center for Hope Hospice, Union CountySeniors	55			
		555	555	555	Cost-of-Living Adjustment, Senior Services	55	(f)	440	44(
					Cost-of-Living Adjustment, Deferred Cost, Senior				
045			015	010	Services	55		440	440
615			615	612	Alzheimer's Disease Program	55	657	657	657
700			700	700	Adult Protective Services	55	768	768	768
602,519		8,016	610,535	609,626	Total Grants-In-Aid - General Fund		660,999	690,386	690,38
					Grants-In-Aid - Casino Revenue F	hand			
16,703			16,703	15,067	Community Care Alternatives ^(g)	22	14,101	3,253	3,253
2,400			2,400	2,097	Home Care Expansion	22	1,027	3,233 743	743
2,400			2,400	2,007	Hearing Aid Assistance for	~~~	1,061	110	7 10
					the Aged and Disabled	22	250	250	250
152,161									
17,410 ^S	33,190 ^R	4,800	207,561	203,752	Pharmaceutical Assistance to the Aged and Disabled -		179,320 ^(h)	000 000	000.000
05 000			05 000	04.000	Claims Deumente fon Lifeline Credite	24	14,300 ^S	206,686	206,686
35,322			35,322	34,888	Payments for Lifeline Credits	28	34,669	34,669	34,669
40,938		-4,800	36,138	34,722	Payments for Tenants Assistance Rebates	28	(i)		

	——Year En	ding June 30, 1	1998					Year Ending ——June 30, 2000——	
Orig. & ^(S) Supple- mental	Reapp. & ^(R) Recpts.	Transfers & ^(E) Emer- gencies	Total Available	Expended		Prog. Class.	1999 Adjusted Approp.	Requested	Recom- mended
1,447		-34	1,413	1,412	Demonstration Adult Day Care Center Program-Alzheimber's Disease	55	1,662	912	912
1,718			1,718	1,718	Adult Protective Services	55	1,718	1,718	1,718
1,990		-62	1,928	1,928	Senior Citizen Housing-Safe Housing and Transportation	55	1,630	1,610	1,610
4,000		-153	3,847	3,844	Respite Care for the Elderly	55	4,841	4,841	4,841
1,870			1,870	1,862	Congregate Housing Support Services	55	1,870	1,870	1,870
950			950	950	Home Delivered Meals Expansion	55	950	950	950
277,159	33,190	- 249	310,100	302,448	Total Grants-In-Aid - Casino Revenue Fund		256,338	257,502	257,502
					State Aid - General Fund				
840			840	840	County Offices on Aging	55	1,163	863	863
1,405			1,405	1,401	Older Americans Act-State Share	55	2,550	2,550	2,550
2,245			2,245	2,241	Total State Aid - General Fund		3,713	3,413	3,413

OTHER RELATED APPROPRIATIONS

Federal Funds

1,590,110	37,717	11,409	1,639,236	1,606,246	GRAND TOTAL		1,629,529	1,669,289	1,669,289
	<u> </u>	<u> </u>	<u>789</u>	<u> </u>	Total All Other Funds		<u> </u>	<u>530</u>	<u>530</u>
	<u>362</u> R		362	361	Office of the Public Guardian	57	380	380	380
	25 ^R		25	20	Office of the Ombudsman	56			
	136	1	137	36	Programs for the Aged	55	181	150	150
	154 ^R		265	264	Medical Services for the Aged	22			
	111								
					All Other Funds				
694 ,278	3,711	2,102	700,091	676,385	Total Federal Funds		691,337	7 00,8 77	700,877
420	92		512	478	Office of the Ombudsman	56	420	420	420
40,154	3,300	-600	42,854	35,507	Programs for the Aged	55	38,872	39,325	39,325
740 ^S	319	2,702	656,725	640,400	Medical Services for the Aged	22	652,045	661,132	661,132
052,904									

Notes

652 964

(a) The FY1999 appropriation has been adjusted for the allocation of salary program.

(b) Of the FY1999 Community Care Alternatives appropriation, \$13,599,000 has been moved from the Casino Revenue Fund to the General Fund due to insufficient resources of the Casino Revenue Fund. \$10,848,000 of the FY2000 Community Care Alternatives recommendation is moved from the Casino Revenue Fund to the General Fund due to insufficient resources in the Casino Revenue Fund.

(c) Funding for Medicaid Expansion-SOBRA appropriation is reflected in the Payments for Medical Assistance Recipients-Nursing Homes account. The FY1999 appropriation of \$15,482,000 is moved from the Casino Revenue Fund to the General Fund due to insufficient resources of the Casino Revenue Fund.

(d) The FY1999 appropriation of \$48,935,000 is moved from the General Fund to the Casino Revenue Fund to properly reflect the full expenses of the Pharmaceutical Assistance to the Aged and Disabled program within the Casino Revenue Fund.

(e) The FY1999 Lifeline Tenants Assistance Rebates program appropriation of \$36,171,000 is moved from the Casino Revenue Fund to the General Fund due to insufficient resources of the Casino Revenue Fund.

(f) The FY1999 appropriation of \$555,000 has been distributed to applicable grant accounts.

Notes -- Continued

- (g) This appropriation line item combines the Community Care Program for the Elderly and Disabled (CCPED) and Long-term Care Alternatives. Of the FY1999 appropriation, \$13,599,000 is moved from the Casino Revenue Fund to the General Fund due to insufficient resources of the Casino Revenue Fund. \$10,848,000 of the FY2000 recommendation is moved from the Casino Revenue Fund to the General Fund due to insufficient resources in the Casino Revenue Fund.
- (h) The FY1999 Pharmaceutical Assistance to the Aged and Disabled Claims appropriation of \$48,935,000 is moved from the General Fund to the Casino Revenue Fund to properly reflect the full expenses of the Pharmaceutical Assistance to the Aged and Disabled program within the Casino Revenue Fund.
- (i) The FY1999 Lifeline Tenants Assistance Rebates program appropriation of \$36,171,000 is moved from the Casino Revenue Fund to the General Fund due to insufficient resources of the Casino Revenue Fund.

Language Recommendations -- Direct State Services - General Fund

Receipts from the Office of the Public Guardian are appropriated.

- When any action by a county welfare agency, whether alone or in combination with the Division of Medical Assistance and Health Services or the Department of Health and Senior Services, results in a recovery of improperly granted medical assistance, the Division of Medical Assistance and Health Services or Department of Health and Senior Services may reimburse the county welfare agency in the amount of 25% of the gross recovery.
- Notwithstanding any State law to the contrary, any third party as defined in subsection m. of section 3 of P.L.1968, c.413 (C.30:4D-3), writing health, casualty, or malpractice insurance policies in the State or covering residents of this State, shall enter into an agreement with the Department of Health and Senior Services to permit and assist the matching of the Department of Health and Senior Services program eligibility and/or adjudication claims files against that third party's eligibility and/or adjudicated claims files for the purpose of the coordination of benefits, utilizing, if necessary, social security numbers as common identifiers.

The unexpended balances as of June 30, 2000, in the Payments to Fiscal Agent-PAA account are appropriated.

Language Recommendations -- Grants-In-Aid - General Fund

- The amounts hereinabove appropriated for Payments for Medical Assistance Recipients--Nursing Homes are available for the payment of obligations applicable to prior fiscal years.
- In order to permit flexibility in the handling of appropriations and ensure the timely payment of claims to providers of medical services, amounts may be transferred to and from the various items of appropriation within the General Medical Services program classification in the Division of Medical Assistance and Health Services in the Department of Human Services and the Medical Services for the Aged program classification in the Division of Senior Services in the Department of Health and Senior Services, subject to the approval of the Director of the Division of Budget and Accounting. Notice thereof shall be provided to the Legislative Budget and Finance Officer on the effective date of the approved transfer.
- All funds recovered pursuant to P.L.1968, c.413 (C.30:4D-1 et seq.) and P.L.1975, c.194 (C.30:4D-20 et seq.) during the fiscal year ending June 30, 2000 are appropriated for payments to providers in the same program class from which the recovery originated.
- Notwithstanding any other law to the contrary, a sufficient portion of receipts generated or savings realized in Medical Services for the Aged Grants-in-Aid accounts from initiatives included in the fiscal year 2000 Budget may be transferred to administration accounts to fund costs incurred in realizing these additional receipts or savings, subject to the approval of the Director of the Division of Budget and Accounting.
- The Division of Medical Assistance and Health Services and Department of Health and Senior Services, subject to federal approval, shall implement policies that would limit the ability of persons who have the financial ability to provide for their own long-term care needs to manipulate current Medicaid rules to avoid payment for that care. The Division and Department of Health and Senior Services shall require, in the case of a married individual requiring long-term care services, that the portion of the couple's resources which are not protected for the needs of the community spouse be used solely for the purchase of long-term care services.
- Funding for community care alternative initiatives is made available from the Payments for Medical Assistance Recipients--Nursing Homes account, subject to both federal waiver approval and approval of the Director of the Division of Budget and Accounting.
- Such sums as may be necessary are appropriated from enhanced audit recoveries obtained by the Department of Health and Senior Services to fund the costs of enhanced audit recovery efforts of the Department within the Medical Services for the Aged program classification subject to the approval of the Director of the Division of Budget and Accounting.
- Notwithstanding the provisions of any law to the contrary, no funds appropriated for Medicaid nursing facility reimbursement shall be expended for administrator or assistant administrator costs or non-food general costs in excess of 100% of the median for those cost centers, subject to the notice provisions of 42 CFR 447.205.
- Notwithstanding any other law to the contrary, effective July 1, 1996, reimbursement for nursing facility services shall be 90% of the per diem rate when a Medicaid beneficiary is hospitalized. As in the past, these payments shall be limited to be the first ten days of the hospitalization. Medicaid reimbursement for nursing facility services shall be discontinued beyond the tenth day of the hospitalization.

- The funds appropriated here and above for Payments for Medical Assistance Recipients High Medicaid Occupancy Nursing Homes shall be distributed for patient services among those nursing homes where Medicaid patient day occupancy level is at or above 75%. Each such facility shall receive its distribution through a prospective per diem rate adjustment according to the following formula: E = A Medicaid days/ T Medicaid days x F; where E is the entitlement for a specific nursing home resulting from this allocation; A Medicaid days is an individual nursing home's reported Medicaid days on June 30, 1999; T Medicaid days is the total reported Medicaid days for all affected nursing homes; and F is the total amount of State and federal funds to be distributed. No nursing home shall receive a total allocation greater than the amount lost, due to adjustments in Medicaid reimbursement methodology, which became effective April 1, 1995. Any balances remaining undistributed from the abovementioned amount, shall be deposited in a reserve account in the General Fund.
- The amounts hereinabove appropriated for payments for Pharmaceutical Assistance to the Aged and Disabled program, P.L.1975, c.194 (C.30:4D-20 et seq.), are available for the payment of obligations applicable to prior fiscal years.
- Benefits provided under the Pharmaceutical Assistance to the Aged and Disabled (PAAD) program, P.L.1975, c.194 (C.30:4D-20 et seq.) shall be the last resource benefits, notwithstanding any provisions contained in contracts, wills, agreements or other instruments. Any provision in a contract of insurance, will, trust agreement or other instrument which reduces or excludes coverage or payment to an individual because of that individual's eligibility for or receipt of PAAD benefits shall be void, and no PAAD payments shall be made as a result of any such provision.
- Notwithstanding the provisions of section 3 of P.L.1975, c.194 (C.30:4D-22) to the contrary, the copayment in the Pharmaceutical Assistance to the Aged and Disabled program shall be \$5.00.
- Notwithstanding the provisions of any law to the contrary, rebates from pharmaceutical manufacturing companies for prescriptions purchased by the Pharmaceutical Assistance to the Aged and Disabled program shall continue throughout fiscal year 2000. All revenues from such rebates during the fiscal year ending June 30, 2000, are appropriated for the Pharmaceutical Assistance to the Aged and Disabled program.
- Notwithstanding the provisions of any other law or regulation to the contrary, effective July 1, 1999, each prescription order dispensed in the Pharmaceutical Assistance to the Aged and Disabled program for Maximum Allowable Cost (MAC) drugs shall state "Brand Medically Necessary" in the prescriber's own handwriting if the prescriber determines that it is necessary to override generic substitution of drugs, and each prescription order shall follow the requirements of P.L.1977, c.240 (C.24:6E-1 et seq.). The list of drugs substituted shall conform to the Drug Utilization Review Council approved list of substitutable drugs and all other requirements pertaining to drug substitution and federal upper limits for MAC drugs as administered by the State Medicaid Program.
- Notwithstanding the provisions of any law to the contrary, no funds appropriated to the Pharmaceutical Assistance to the Aged and Disabled program pursuant to the Act shall be expended unless participating pharmaceutical manufacturing companies execute contracts with the Department of Health and Senior Services through the Department of Human Services providing for the payment of rebates to the State.
- Notwithstanding the provisions of any other law or regulation to the contrary, effective July 1, 1999 consistent with the notice provisions of 42 CFR 447.205 where applicable, no funds appropriated in the Pharmaceutical Assistance to the Aged and Disabled program classification shall be expended except under the following conditions: legend and non-legend drugs dispensed by a retail pharmacy shall be limited to a maximum 34 day supply for an initial prescription and a 34 day or 100 unit dose supply, whichever is greater, for any prescription refill.
- Notwithstanding the provisions of any other law or regulation to the contrary, effective July 1, 1999 consistent with the notice provisions of 42 CFR 447.205 where applicable, no funds appropriated in the Pharmaceutical Assistance to the Aged and Disabled program classification shall be expended except under the following conditions: (a) reimbursement for prescription drugs shall be based on the Average Wholesale Price less a 10% discount; (b) prescription drugs dispensed by a retail pharmacy shall be limited to a maximum 34 day supply for the initial prescription and a 34 day or 100 unit dose supply, whichever is greater, for any prescription refill; and (c) the current prescription drug dispensing fee structure set as a variable rate of \$3.73 to \$4.07 in effect on June 30, 1999 shall remain in effect through fiscal year 2000, including the current increments for patient consultation, impact allowances, and allowances for 24-hour emergency services.
- Notwithstanding any laws to the contrary, payments for Pharmaceutical Assistance for the Aged and Disabled Programs shall not cover quantities of impotence therapy medication in excess of four treatments per month. Moreover, payment will only be provided if the diagnosis of impotence is written on the prescription form and the treatment is provided to males over the age of 18 years.
- Notwithstanding the provisions of any law to the contrary, no funds appropriated in the Pharmaceutical Assistance to the Aged and Disabled Programs shall be expended unless participating pharmacies are also approved medical suppliers in the Medicare program. Beneficiaries would be responsible for the applicable PAA/D copayment.

Language Recommendations -- Grants-In-Aid - Casino Revenue Fund

- In addition to the amount hereinabove, there are appropriated from the Casino Revenue Fund and available federal matching funds such additional sums as may be required for the payment of claims, credits and rebates, subject to the approval of the Director of the Division of Budget and Accounting.
- All funds recovered under P.L.1968, c.413 (C.30:4D-1 et seq.) and P.L.1975, c.194 (C.30:4D-20 et seq.) during the fiscal year ending June 30, 2000, are appropriated for payments to providers in the same program class from which the recovery originated.

In order to permit flexibility in the handling of appropriations and ensure the timely payment of claims to providers of medical services, amounts may be transferred to and from the various items of appropriation within the Medical Services for the Aged program classification, subject to the approval of the Director of the Division of Budget and Accounting. Notice thereof shall be provided to the Legislative Budget and Finance Officer on the effective date of the approved transfer.

For the purposes of account balance maintenance all object accounts in the Medical Services for the Aged program classification shall be considered as one object. This will allow timely payment of claims to providers of medical services but ensure that no overspending will occur in the program classification.

- Notwithstanding the provisions of P.L.1988, c.92 (C.30:4E-5 et seq.), funds appropriated for the Home Care Expansion (HCE) program shall be paid only for individuals enrolled in the program as of June 30, 1996 who are not eligible for the Community Care Program for the Elderly and Disabled or alternative programs, and only for so long as those individuals require services covered by the HCE program. Individuals enrolled in the HCE program as of June 30, 1996, and eligible for the Community Care Program for the Elderly and Disabled may apply to be enrolled in that program.
- Notwithstanding the provisions of P.L.1979, c.197 (C.48:2-29.15 et seq.), or the provisions of P.L.1981, c.210 (C.48:2-29.30 et seq.), or any other law to the contrary, the benefits of the Lifeline Credit Program and the Tenants' Lifeline Assistance Program may be distributed throughout the entire year from July through June, and are not limited to an October to March heating season, and therefore applications for Lifeline benefits and benefits from the Pharmaceutical Assistance to the Aged and Disabled program may be combined.
- Notwithstanding any other law to the contrary, a sufficient portion of receipts generated or savings realized in Casino Revenue Fund Medical Services for the Aged or Pharmaceutical Assistance to the Aged and Disabled Grants-in-Aid accounts from initiatives included in the fiscal year 2000 budget may be transferred to administration accounts to fund costs incurred in realizing these additional receipts or savings, subject to the approval of the Director of the Division of Budget and Accounting.
- The amounts hereinabove appropriated for payments in the Pharmaceutical Assistance to the Aged and Disabled program, P.L.1975, c.194 (C.30:4D-20 et seq.), are available for the payment of obligations applicable to prior fiscal years.
- Benefits provided under the Pharmaceutical Assistance to the Aged and Disabled (PAAD) Program, P.L.1975, c.194 (C.30:4D-20 et seq.) shall be the last resource benefits, notwithstanding any provision contained in contracts, wills, agreements or other instruments. Any provision in a contract of insurance, will, trust agreement or other instrument which reduces or excludes coverage or payment to an individual because of that individual's eligibility for or receipt of PAAD benefits shall be void, and no PAAD payments shall be made as a result of any such provision.
- Notwithstanding the provisions of section 3 of P.L.1975, c.194 (C.30:4D-22) to the contrary, the copayment in the Pharmaceutical Assistance to the Aged and Disabled program shall be \$5.00.
- Notwithstanding the provisions of any law to the contrary, rebates from pharmaceutical manufacturing companies for prescriptions purchased by the Pharmaceutical Assistance to the Aged and Disabled program shall continue throughout fiscal year 2000. All revenues from such rebates during the fiscal year ending June 30, 2000, shall be appropriated for the cost of the Pharmaceutical Assistance to the Aged and Disabled program.
- Notwithstanding the provisions of any other law or regulation to the contrary, effective July 1, 1999, each prescription order dispensed in the Pharmaceutical Assistance to the Aged and Disabled program for Maximum Allowable Cost (MAC) drugs shall state "Brand Medically Necessary" in the prescriber's own handwriting if the prescriber determines that it is necessary to override generic substitution of drugs, and each prescription order shall follow the requirements of P.L.1977, c.240 (C.24:6E-1 et seq.). The list of drugs substituted shall conform to the Drug Utilization Review Council approved list of substitutable drugs and all other requirements pertaining to drug substitution and federal upper limits for MAC drugs as administered by the State Medicaid Program.
- Notwithstanding the provisions of any law to the contrary, no funds appropriated in the Pharmaceutical Assistance to the Aged and Disabled program pursuant to the Act shall be expended unless participating pharmaceutical manufacturing companies execute contracts with the Department of Health and Senior Services through the Department of Human Services providing for the payment of rebates to the State.
- Notwithstanding the provisions of any law or regulation to the contrary, effective July 1, 1999 consistent with the notice provisions of 42 CFR 447.205 where applicable, no funds appropriated in the Pharmaceutical Assistance to the Aged and Disabled program classification shall be expended except under the following conditions: legend and non-legend drugs dispensed by a retail pharmacy shall be limited to a maximum 34 day supply for an initial prescription and a 34 day or 100 unit dose supply, whichever is greater, for any prescription refill.
- Notwithstanding the provisions of section 2 of P.L. 1988, c.114 (C.26:2M-10) to the contrary, private for profit agencies shall be eligible grantees for funding from the Demonstration Adult Day Care Center Program Alzheimer's Disease account.
- Notwithstanding the provisions of any other law or regulation to the contrary, effective July 1, 1999 consistent with the notice provisions of 42 CFR 447.205 where applicable, no funds appropriated in the Pharmaceutical Assistance to the Aged and Disabled program classification shall be expended except under the following conditions: (a) reimbursement for prescription drugs shall be based on the Average Wholesale Price less a 10% discount; (b) prescription drugs dispensed by a retail pharmacy shall be limited to a maximum 34 day supply for an initial prescription and a 34 day or 100 unit dose supply, whichever is greater, for any prescription refill; and (c) the current prescription drug dispensing fee structure set as a variable rate of \$3.73 to \$4.07 in effect on June 30, 1999 shall remain in effect through fiscal year 2000, including the current increments for patient consultation, impact allowances, and allowances for 24-hour emergency services.

- The amounts hereinabove for payments for the Lifeline Credit Program and payments for Tenants Lifeline Assistance Rebates are available for the payment of obligations applicable to prior fiscal years.
- In order to permit flexibility in the handling of appropriations and ensure the timely payment of Lifeline claims, amounts may be transferred from the various items of appropriation within the Lifeline program classification, subject to the approval of the Director of the Division of Budget and Accounting.
- Notwithstanding any laws to the contrary, payments for Pharmaceutical Assistance for the Aged and the Disabled Programs shall not cover quantities of impotence therapy medication in excess of four treatments per month. Moreover, payment will only be provided if the diagnosis of impotence is written on the prescription form and the treatment is provided to males over the age of 18 years.
- Notwithstanding the provisions of any law to the contrary, no funds appropriated within the Pharmaceutical Assistance to the Aged and the Disabled program classifications shall be expended unless participating pharmacies are also approved medical suppliers in the Medicare program. Beneficiaries are responsible for the applicable PAA/D copayment.

DEPARTMENT OF HEALTH AND SENIOR SERVICES

Language Recommendations -- Direct State Services - General Fund

- There is appropriated to the Department of Health and Senior Services from the "Health Care Subsidy Fund" established pursuant to section 8 of P.L. 1992, c.160 (C.26:2H-18.58) to continue to fund programs established pursuant to section 25 of P.L. 1991, c.187 (C.26:2H-18.47); P.L. 1997, c.192 (C.26:2H-10); and P.L. 1998, c.43 (C.26:2H-7C) through the annual .53 percent assessment on New Jersey hospitals established pursuant to section 12 of P.L. 1992, c.160 (C.26:2H-18.62). However, available funding shall first provide for the Community Care Program for the Elderly and Disabled, the expansion of Medicaid to 185 percent of poverty, and the Infant Mortality Reduction Program. The remaining available funds may be used to fund programs established by section 25 of P.L. 1991, c.187 (C.26:2H-18.47); P.L. 1997, c.192 (C.26:2H-10); and P.L. 1998, c.43 (C.26:2H-7C), as determined by the Commissioner of Health and Senior Services, subject to the approval of the Director of the Division of Budget and Accounting. Any unexpended balance as of June 30, 1999 in the Health Care Subsidy Fund received through the .53 percent annual assessment on hospitals made during fiscal year 1999 is appropriated.
- Receipts from licenses, permits, fines, penalties and fees collected by the Department of Health and Senior Services, in excess of those anticipated, are appropriated, subject to the approval of the Director of the Division of Budget and Accounting.
- Notwithstanding the provisions of P.L. 1995, c.133, or any other law to the contrary, the first \$1,200,000 in per adjusted admission charge assessment revenues, attributable to \$10.00 per adjusted admission charge assessments made by the Department of Health and Senior Services shall be anticipated as revenue in the General Fund available for health related purposes. Furthermore, it is recommended that the remaining revenue attributable to this fee shall be available to carry out the provisions of P.L. 1995, c.133 as determined by the Commissioner of Health and Senior Services and subject to the approval of the Director of the Division of Budget and Accounting.
- Notwithstanding the provisions of any law to the contrary, the State Treasurer shall transfer to the Health Care Subsidy Fund established pursuant to section 8 of P.L. 1992, c.160 (C.26:2H-18.58), only those additional revenues generated from third party liability recoveries, excluding Medicaid, by the State arising from a review by the Director of the Division of Budget and Accounting of hospital payments reimbursed from the Health Care Subsidy Fund with service dates that are after the date of enactment of P.L. 1996, c.29.
- Notwithstanding the provisions of any other law to the contrary, the Commissioner shall devise, at his discretion, rules or guidelines that allocate reductions in health service grants to the extent possible toward administration and not client services.
- Any change in program eligibility criteria and increases in the types of services or rates paid for services to or on behalf of clients for all programs under the purview of the Department of Health and Senior Services, not mandated by federal law, shall first be approved by the Director of the Division of Budget and Accounting.
- Notwithstanding any laws to the contrary, fees, fines, penalties and assessments owed to the Department of Health and Senior Services shall be offset against payments due and owing from other appropriated funds.

Language Recommendations -- Direct State Services - General Fund

Language Recommendations -- Grants-in-Aid - General Fund

In order to permit flexibility in implementing the ElderCare Initiatives within the Medical Services for the Aged program classification, amounts may be transferred between Direct State Services and Grants-in-Aid accounts, subject to the approval of the Director of the Division of Budget and Accounting. Notice thereof shall be provided to the Legislative Budget and Finance Officer on the effective date of the approved transfer.