

HEALTH AND SENIOR SERVICES

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 2001 Budget recommendation totals \$85.7 million in Direct State Services, \$658.7 million in Grants-In-Aid, \$31.9 million in State Aid, \$282.5 million in Casino Revenue Funds, and \$4.6 million in Capital Construction. The recommended State appropriation for the Department of Health and Senior Services is approximately \$1.1 billion. In addition to these State funds, the Department anticipates receiving over \$1.3 billion 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 \$65 million for General Fund grants to hospitals for charity care and NJ KidCare. (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 (PAA/D) and long-term care initiatives totaling \$66.8 million. Additional increases include a \$4.6 million cost of living adjustment for grant programs and a \$4.6 million salary supplement for direct service workers. In addition, a Supplemental Charity Care appropriation of \$15.1 million has been established to assist hospitals providing health care services to New Jersey's uninsured. 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 an increase of \$11.4 million for a total appropriation of \$30 million to decrease tobacco related activities throughout the State. The \$30 million appropriation, from anticipated tobacco settlement revenue, will support 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 \$825.4 million recommendation reflects an expansion of initiatives focusing on alternative long-term care and enhancing access to services. The second year of the ElderCare Initiative will receive \$19.9 million, along with an additional appropriation of \$3.5 million to implement the recommendations of the ElderCare Advisory Commission. The ElderCare Initiative has already begun to develop new community-based options and expand the Department's existing programs, such as the Community Choice program. 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.

SUMMARY OF APPROPRIATIONS BY FUND

(thousands of dollars)

Year Ending June 30, 1999					Year Ending June 30, 2001			
Orig. & (S)Supple- mental	Reapp. & (R)Recpts.	Transfers & (E)Emer- gencies	Total Available	Expended		2000 Adjusted Approp.	Requested	Recom- mended
47,986	7,211	1,858	57,055	54,887	Direct State Services	73,920	85,651	85,651
779,441	2,192	1,780	783,413	748,856	Grants-In-Aid	884,067	658,676	658,676
25,457	---	---	25,457	25,448	State Aid	30,713	31,906	31,906
1,269	633	---	1,902	1,383	Capital Construction	1,508	6,223	4,625
854,153	10,036	3,638	867,827	830,574	Total General Fund	990,208	782,456	780,858
270,634	39,921	-1,135	309,420	304,112	Total Casino Revenue Fund	271,698	282,505	282,505
1,124,787	49,957	2,503	1,177,247	1,134,686	GRAND TOTAL	1,261,906	1,064,961	1,063,363

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SUMMARY OF APPROPRIATIONS BY PROGRAM (thousands of dollars)

Year Ending June 30, 1999					Year Ending June 30, 2001			
Orig. & (S) Supplemental	Reapp. & (R) Recpts.	Transfers & (E) Emergencies	Total Available	Expended	2000 Adjusted Approp.	Requested	Recommended	
DIRECT STATE SERVICES - GENERAL FUND								
Health Services								
1,374	518	121	2,013	2,013	Vital Statistics	1,409	1,409	1,409
2,332	97	-68	2,361	2,147	Family Health Services	6,981	6,781	6,781
13,223	1,317	-340	14,200	13,373	Public Health Protection Services	14,150	14,150	14,150
594	3	268	865	852	Addiction Services	19,249	30,687	30,687
4,379	523	-8	4,894	4,880	Laboratory Services	4,597	4,597	4,597
2,703	34	136	2,873	2,810	AIDS Services	2,753	2,753	2,753
24,605	2,492	109	27,206	26,075	<i>Subtotal</i>	49,139	60,377	60,377
Health Planning and Evaluation								
4,247	1,697	-296	5,648	5,546	Long Term Care Systems	4,412	4,412	4,412
1,973	2,354	-151	4,176	4,070	Health Care Systems Analysis	2,013	2,013	2,013
6,220	4,051	-447	9,824	9,616	<i>Subtotal</i>	6,425	6,425	6,425
Health Administration								
1,746	39	2,028	3,813	3,813	Administration and Support Services	2,596	3,016	3,016
Senior Services								
4,489	412	344	5,245	5,044	Medical Services for the Aged	4,715	4,665	4,665
6,655	179	-16	6,818	6,428	Pharmaceutical Assistance to the Aged and Disabled	6,724	6,724	6,724
1,851	13	-66	1,798	1,771	Lifeline	1,994	1,994	1,994
1,115	---	-122	993	815	Programs for the Aged	992	1,115	1,115
571	23	31	625	625	Office of the Ombudsman	601	601	601
734	2	-3	733	700	Office of the Public Guardian	734	734	734
15,415	629	168	16,212	15,383	<i>Subtotal</i>	15,760	15,833	15,833
47,986	7,211	1,858	57,055	54,887	Subtotal Direct State Services - General Fund	73,920	85,651	85,651
DIRECT STATE SERVICES - CASINO REVENUE FUND								
Senior Services								
871	12	---	883	878	Programs for the Aged	871	871	871
871	12	---	883	878	Subtotal Direct State Services - Casino Revenue Fund	871	871	871
48,857	7,223	1,858	57,938	55,765	TOTAL DIRECT STATE SERVICES	74,791	86,522	86,522
GRANTS-IN-AID - GENERAL FUND								
Health Services								
10,587	---	-152	10,435	10,381	Family Health Services	13,641	11,710	11,710
6,599	---	50	6,649	1,649	Public Health Protection Services	2,169	2,368	2,368
21,935	2,192	736	24,863	24,456	Addiction Services	24,412	25,510	25,510
13,199	---	10	13,209	13,209	AIDS Services	14,432	16,415	16,415
52,320	2,192	644	55,156	49,695	<i>Subtotal</i>	54,654	56,003	56,003
Health Planning and Evaluation								
47,300	---	---	47,300	19,700	Health Care Systems Analysis	102,900	80,136	80,136

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Year Ending June 30, 1999					Year Ending June 30, 2001			
Orig. & (S) Supplemental	Reapp. & (R) Recpts.	Transfers & (E) Emer- gencies	Total Available	Expended		2000 Adjusted Approp.	Requested	Recom- mended
					Senior Services			
599,934	---	786	600,720	600,718	Medical Services for the Aged	626,021	387,861	387,861
33,120	---	---	33,120	33,120	Pharmaceutical Assistance to the Aged and Disabled	54,464	83,582	83,582
36,171	---	---	36,171	35,142	Lifeline	36,171	36,171	36,171
10,596	---	350	10,946	10,481	Programs for the Aged	9,857	14,923	14,923
<u>679,821</u>	<u>---</u>	<u>1,136</u>	<u>680,957</u>	<u>679,461</u>	<i>Subtotal</i>	<u>726,513</u>	<u>522,537</u>	<u>522,537</u>
779,441	2,192	1,780	783,413	748,856	Subtotal Grants-In-Aid - General Fund	884,067	658,676	658,676
					GRANTS-IN-AID - CASINO REVENUE FUND			
					Health Services			
500	---	---	500	498	Family Health Services	500	500	500
					Senior Services			
15,378	---	-1,135	14,243	13,490	Medical Services for the Aged	4,246	3,946	3,946
206,545	39,909	---	246,454	241,981	Pharmaceutical Assistance to the Aged and Disabled	218,811	229,918	229,918
34,669	---	---	34,669	34,602	Lifeline	34,669	34,669	34,669
12,671	---	---	12,671	12,663	Programs for the Aged	12,601	12,601	12,601
<u>269,263</u>	<u>39,909</u>	<u>-1,135</u>	<u>308,037</u>	<u>302,736</u>	<i>Subtotal</i>	<u>270,327</u>	<u>281,134</u>	<u>281,134</u>
269,763	39,909	-1,135	308,537	303,234	Subtotal Grants-In-Aid - Casino Revenue Fund	270,827	281,634	281,634
1,049,204	42,101	645	1,091,950	1,052,090	TOTAL GRANTS-IN-AID	1,154,894	940,310	940,310
					STATE AID - GENERAL FUND			
					Health Services			
18,747	---	---	18,747	18,747	Family Health Services	22,269	22,754	22,754
4,165	---	---	4,165	4,165	Public Health Protection Services	4,165	4,100	4,100
<u>22,912</u>	<u>---</u>	<u>---</u>	<u>22,912</u>	<u>22,912</u>	<i>Subtotal</i>	<u>26,434</u>	<u>26,854</u>	<u>26,854</u>
					Senior Services			
2,545	---	---	2,545	2,536	Programs for the Aged	4,279	5,052	5,052
25,457	---	---	25,457	25,448	Subtotal State Aid - General Fund	30,713	31,906	31,906
25,457	---	---	25,457	25,448	TOTAL STATE AID	30,713	31,906	31,906
					CAPITAL CONSTRUCTION			
					Health Services			
---	---	---	---	---	Public Health Protection Services	---	750	---
1,269	633	---	1,902	1,383	Laboratory Services	1,508	2,508	1,660
<u>1,269</u>	<u>633</u>	<u>---</u>	<u>1,902</u>	<u>1,383</u>	<i>Subtotal</i>	<u>1,508</u>	<u>3,258</u>	<u>1,660</u>
					Health Administration			
---	---	---	---	---	Administration and Support Services	---	2,965	2,965
1,269	633	---	1,902	1,383	Subtotal Capital Construction	1,508	6,223	4,625
1,124,787	49,957	2,503	1,177,247	1,134,686	TOTAL APPROPRIATION	1,261,906	1,064,961	1,063,363

HEALTH AND SENIOR SERVICES

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

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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

	Actual FY 1998	Actual FY 1999	Revised FY 2000	Budget Estimate FY 2001
PROGRAM DATA				
Vital Statistics				
Searches	91,433	108,901	109,000	109,000
Certified Copies Issued	61,355	69,353	69,000	69,000
Family Health Services				
Agencies receiving health services grants	187	215	225	225
Handicapped Children				
Physically disabled children receiving services	34,957	32,220	32,000	32,000
Children newly registered with Special Child Health Services	8,775	8,101	9,100	9,100
Maternal and Child Health				
Infant mortality rate/1,000 live births	5.8	5.7	5.6	5.6
Infant born to mothers with no prenatal care/1,000 live births	1.2	1.1	1.0	1.0
Newborns screened for PKU & hypothyroidism, galactosemia, sickle cell & hearing	110,562	111,578	110,000	110,000
Number of infants to be followed	8,257	7,665	7,300	7,300
Number of infants in early intervention	7,824	8,581	9,000	9,000
HealthStart (prenatal)	30,200	31,000	32,000	32,000
Women assessed for alcohol use/abuse during pregnancy	12,688	12,800	12,800	12,800
Women, Infants and Children (WIC) receiving services	259,469	247,500	260,000	260,000
Family Planning				
Women in reproductive years applying for and receiving services	102,972	101,000	101,000	101,000
Poison Control				
Children screened for lead poisoning (a)	9,681	9,586	100,000	100,000
Number of lead poisoned children identified (a)	965	1,604	2,000	2,000
Adult Health				
Huntington's disease families served	231	274	250	250
Adults served with Cystic Fibrosis	93	96	95	95
Health Promotion				
Persons screened and educated for breast and cervical cancer	10,714	10,000	12,000	12,000
Number of renal patients served	2,043	2,031	2,000	2,000
Youth violence prevention and intervention participants	231	400	400	400
Emergency Medical Services				
Mobile intensive care paramedics certified/recertified	527	553	570	570
Emergency Medical Technicians certified/recertified	8,412	6,563	9,000	7,000
Helicopter response missions	1,567	1,629	1,600	1,600
Mobile intensive care unit's patient charts audited	250	250	250	250
Ambulance/invalid services licensed	291	324	324	324
Ambulance/invalid vehicles licensed	1,876	2,110	2,110	2,110
EMT training agencies certified	43	57	57	57
Public Health Protection Services				
Cancer and Epidemiological Services				
Number of new cancer cases reports	65,000	77,652	77,000	77,000
Number of cumulative cancer reports in master file	975,730	1,053,382	1,130,382	1,207,382

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	Actual FY 1998	Actual FY 1999	Revised FY 2000	Budget Estimate FY 2001
Tuberculosis Control				
TB cases on register as of June 30	710	685	635	635
Visits to chest clinics	65,484	62,200	59,100	59,100
Percent of TB patients completing chemotherapy	84.0%	85.0%	88.5%	88.5%
Sexually Transmitted Diseases (STD)				
Percent of STD clinic patients receiving education about HIV infection	70%	75%	75%	75%
Reported cases of early syphilis	322	195	150	150
Syphilis cases (early and late) brought to treatment by Department of Health	1,235	784	600	600
Reported cases of gonorrhea	7,454	7,884	8,000	8,000
Gonorrhea cases brought to treatment by Department of Health	2,102	3,304	2,300	2,300
Visits to STD clinics	16,455	18,172	18,000	18,000
Patients receiving diagnostic services	8,833	9,100	9,300	9,300
Consumer Health				
Pet spay/neuter surgeries performed	9,896	10,880	10,000	10,000
Registration of dogs (Rabies control)	489,475	487,486	460,000	460,000
Environmental and sanitary inspections and investigations conducted	7,070	7,429	7,750	7,750
Number of food, drug and cosmetic embargoes, destructions and recalls	20	20	20	20
Other Communicable Disease Control				
Number of disease cases reported	7,000	6,400	8,000	8,000
Number of investigations of outbreaks	80	86	90	90
Levels of protection for children entering school against:				
Rubella	98%	98%	98%	98%
Measles	96%	96%	98%	98%
Mumps	98%	98%	98%	98%
Polio	98%	98%	98%	98%
Diphtheria	98%	98%	98%	98%
Infectious disease consultations	16,165	18,000	18,000	18,000
Non-outbreak investigations	220	220	240	240
Lyme disease hotline calls	1,500	1,500	1,600	1,600
Public Employees Occupational Safety and Health				
Complaint inspections conducted	225	216	253	253
Telephone consultations	2,232	1,702	1,900	1,900
Educational seminars presented	83	77	75	75
Right to Know				
Factsheets written or revised	170	309	300	300
Public and private workplaces inspected	1,056	1,162	800	800
Telephone consultations	3,339	3,572	3,500	3,500
Occupational Health Surveillance				
Exposure and illness reports received	2,951	2,978	3,300	3,300
Educational materials mailed to public	9,637	2,588	2,500	2,500
In-depth industrial hygiene evaluations	57	57	45	45
Follow-up industrial hygiene evaluations	4	5	10	10
Work-related chronic disease and epidemiology studies	6	4	4	4
Worker interviews and mailings	79	83	100	100
Environmental Health Services				
Certification of private training agencies	34	44	40	40
Audits of asbestos and lead training agencies	113	125	120	120
Quality assurance inspections in schools	81	132	125	125
Major community health field study on-going	14	17	16	16
Telephone consultations	4,000	4,090	4,100	4,100
Responses to acute environmental emergencies	3	8	9	9
Consultations provided to other agencies and to the public	14	8	10	10
Local health consultations, evaluations, and training services	3,136	3,266	5,278	5,278

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	Actual FY 1998	Actual FY 1999	Revised FY 2000	Budget Estimate FY 2001
Addiction Services				
Drug treatment admissions - primary alcohol	20,762	19,776	21,000	21,000
Drug treatment admissions - primary other drugs	39,980	39,097	40,000	40,000
Adult hospital detoxification admissions	12,291	10,604	12,500	12,500
Adult residential detoxification admissions	2,811	2,852	3,000	3,000
Adult residential admissions	8,484	8,980	8,900	8,900
Adult out-patient admissions	32,853	34,254	33,000	33,000
Juvenile treatment admissions	3,795	3,413	4,700	4,700
Juvenile hospital detoxification admissions	248	208	250	250
Juvenile residential detoxification admissions	51	70	90	90
Juvenile residential admissions	1,048	1,035	1,200	1,200
Juvenile out-patient admissions	2,410	2,100	3,100	3,100
Intoxicated driver cases processed	23,870	23,020	24,000	24,000
Individuals given information and referral	44,337	42,978	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	145,537	185,265	203,000	203,000
Inborn Errors of Metabolism				
Specimens performed	122,781	134,157	135,000	135,000
Chemistry				
Asbestos samples examined	390	230	250	250
Occupational health samples examined	121	70	100	100
Sewage, stream & trade waste samples examined	3,768	3,681	3,700	3,700
Narcotic samples examined	139,472	195,001	210,000	210,000
Potable water samples examined	2,801	3,108	2,500	2,500
Food and milk samples examined	3,811	3,327	3,600	3,600
Blood lead samples examined	12,685	10,744	11,000	11,000
Clinical Laboratory Services				
Clinical laboratories licensed	980	1,022	1,000	1,000
Proficiency test samples (percent acceptable)	95%	95%	95%	95%
Proficiency test samples reviewed	54,853	57,411	55,000	55,000
Blood banks inspected	61	111	111	111
Clinical laboratory inspections	468	483	480	480
Blood banks licensed	168	182	185	185
Serology				
Routine screen tests for syphilis	65,517	45,733	50,000	50,000
Virology				
Specimens analyzed	142,634	122,131	123,000	123,000
AIDS Services				
Number of clients tested and counseled	65,847	66,192	66,750	66,750
Contact tracing of individuals	1,010	1,155	1,200	1,200
Drug treatment clients and sex partners served	13,618	16,154	16,500	16,500
Hotline network calls	12,854	13,582	13,000	13,000
Living AIDS clients	13,958	14,583	15,000	15,000
HIV positive clients	13,937	14,232	14,500	14,500
Clients receiving early intervention services	9,867	12,467	12,500	12,500
Individuals reached/HIV training	5,523	4,782	5,000	5,000
AIDS Drug Distribution Program clients served	---	4,025	4,200	4,200

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	Actual FY 1998	Actual FY 1999	Revised FY 2000	Budget Estimate FY 2001
PERSONNEL DATA				
Position Data				
Filled Positions by Funding Source				
State Supported	349	340	360	362
Federal	506	527	527	559
All Other	54	58	56	60
Total Positions	909	925	943	981
Filled Positions by Program Class				
Vital Statistics	47	52	51	49
Family Health Services	168	173	200	208
Public Health Protection Services	291	299	296	323
Alcoholism, Drug Abuse and Addiction Services	145	145	140	142
AIDS Services	141	144	144	148
Laboratory Services	117	112	112	111
Total Positions	909	925	943	981

Notes:

Actual payroll counts are reported for fiscal years 1998 and 1999 as of December and revised fiscal year 2000 as of September. The Budget Estimate for fiscal year 2001 reflects the number of positions funded.

Actual fiscal year 1998 data has been restated to reflect accurate counts.

(a) Fiscal year 1998 and 1999 actual data represents numbers screened by the Department of Health and Senior Services Laboratory. Data is not available on all children screened. Data for fiscal years 2000 and 2001 are based on universal reporting of all test results, therefore the number is expected to increase significantly.

APPROPRIATIONS DATA (thousands of dollars)

Year Ending June 30, 1999					Year Ending June 30, 2001				
Orig. & (S)Supplemental	Reapp. & (R)Recpts.	Transfers & (E)Emergencies	Total Available	Expended	Prog. Class.	2000 Adjusted Approp.	Requested	Recommended	
DIRECT STATE SERVICES									
Distribution by Fund and Program									
1,374	518	121	2,013	2,013	01	1,409	1,409	1,409	
2,332	97	-68	2,361	2,147	02	6,981	6,781	6,781	
13,223	1,317	-340	14,200	13,373	03	14,150	14,150	14,150	
594	3	268	865	852	04	19,249	30,687	30,687	
4,379	523	-8	4,894	4,880	08	4,597	4,597	4,597	
2,703	34	136	2,873	2,810	12	2,753	2,753	2,753	
24,605	2,492	109	27,206	26,075	Total Direct State Services		49,139^(a)	60,377	60,377
Distribution by Fund and Object									
Personal Services:									
15,010	47 1,236 ^R	-271	16,022	16,003		15,470	15,470	15,470	
15,010	1,283	-271	16,022	16,003	Total Personal Services		15,470	15,470	15,470
2,508	2	-128	2,382	2,352		2,508	2,508	2,508	
1,121	251	314	1,686	1,665		1,121	1,121	1,121	
209	---	-6	203	201		209	209	209	
Special Purpose:									
250	---	---	250	250	01	250	250	250	
87	---	---	87	78	02	87	87	87	
79	---	---	79	78	02	79	79	79	
---	2	---	2	---		---	---	---	
---	95	---	95	1	02	---	---	---	
50	---	---	50	50	02	50	50	50	
---	---	---	---	---	02	25	---	---	

HEALTH AND SENIOR SERVICES

Year Ending June 30, 1999					Year Ending June 30, 2001			
Orig. & (S)Supple- mental	Reapp. & (R)Recpts.	Transfers & (E)Emer- gencies	Total Available	Expended	Prog. Class.	2000 Adjusted Approp.	Requested	Recom- mended
DIRECT STATE SERVICES								
---	---	---	---	---				
95 ^S	---	---	95	---				
500	---	---	500	498				
---	---	---	---	---				
---	---	---	---	---				
---	---	---	---	---				
---	---	---	---	---				
---	---	---	---	---				
---	---	---	---	---				
---	---	---	---	---				
400	---	---	400	385				
---	---	5	5	5				
1,000	111	---	1,111	1,052				
813	60	---	873	805				
	202	---	---	---				
464	31 ^R	---	697	556				
557	416	---	973	471				
1,362	---	---	1,362	1,332				
100	---	---	100	89				
---	---	---	---	---				
---	---	---	---	---				
---	---	---	---	---				
---	---	---	---	---				
---	---	---	---	---				
---	---	---	---	---				
---	---	---	---	---				
---	39	195	234	204				
GRANTS-IN-AID								
Distribution by Fund and Program								
11,087	---	-152	10,935	10,879				
10,587	---	-152	10,435	10,381				
500	---	---	500	498				
6,599	---	50	6,649	1,649				
21,935	2,192	736	24,863	24,456				
13,199	---	10	13,209	13,209				
52,820	2,192	644	55,656	50,193	Total Grants-in-Aid	55,154	56,503	56,503
52,320	2,192	644	55,156	49,695	(From General Fund)	54,654	56,003	56,003
500	---	---	500	498	(From Casino Revenue Fund)	500	500	500

HEALTH AND SENIOR SERVICES

Year Ending June 30, 1999					Year Ending June 30, 2001				
Orig. & (S)Supplemental	Reapp. & (R)Recpts.	Transfers & (E)Emergencies	Total Available	Expended	Prog. Class.	2000 Adjusted Approp.	Requested	Recommended	
GRANTS-IN-AID									
Distribution by Fund and Object									
Grants:									
2,825	---	194	3,019	3,019	02	3,315	3,315	3,315	
921	---	16	937	936	02	945	945	945	
115	---	3	118	118	02	120	120	120	
1,700	---	48	1,748	1,748	02	1,776	1,776	1,776	
368	---	11	379	361	02	385	385	385	
224	---	56	280	280	02	284	284	284	
25	---	---	25	25	02	25	25	25	
500	---	---	500	498	02	500	500	500	
300	---	-150	150	150	02	300	---	---	
---	---	---	---	---	02	350	---	---	
50	---	---	50	50	02	50	---	---	
---	---	---	---	---	02	25	---	---	
867	---	-583	284	284	02	---	429	429	
491	---	---	491	490	02	---	---	---	
65	---	---	65	65	02	---	---	---	
40	---	---	40	40	02	50	---	---	
50	---	-50	---	---	02	---	---	---	
5	---	-5	---	---	02	---	---	---	
50	---	---	50	50	02	---	---	---	
25	---	---	25	---	02	---	---	---	
---	---	271	271	271	02	607	607	607	
58	---	---	58	49	02	58	58	58	
---	---	---	---	---	02	225	225	225	
---	---	---	---	---	02	441	1,607	1,607	
---	---	---	---	---	02	600 ^S	---	---	
---	---	---	---	---	02	40	---	---	
---	---	---	---	---	02	25	---	---	
---	---	---	---	---	02	25	---	---	
335	---	9	344	344	02	350	350	350	
425	---	---	425	425	02	457	457	457	
---	---	---	---	---	02	75	---	---	
---	---	---	---	---	02	50	---	---	
550	---	12	562	562	02	570	570	570	
---	---	---	---	---	02	133	---	---	
25	---	---	25	25	02	---	---	---	
---	---	---	---	---	02	145	---	---	

HEALTH AND SENIOR SERVICES

Year Ending June 30, 1999					Year Ending June 30, 2001				
Orig. & (S)Supple- mental	Reapp. & (R)Recpts.	Transfers & (E)Emer- gencies	Total Available	Expended	Prog. Class.	2000 Adjusted Approp.	Requested	Recom- mended	
GRANTS-IN-AID									
---	---	---	---	---					
133	---	3	136	136		998	---	---	
150	---	5	155	155		138	138	138	
250	---	8	258	258		157	157	157	
---	---	---	---	---					
200	---	---	200	200		100	---	---	
100	---	---	100	100		100	---	---	
150	---	---	150	150		150	---	---	
---	---	---	---	---		100	---	---	
90	---	---	90	90		90	---	---	
---	---	---	---	---		---	---	---	
551	---	161	712	712		120	---	---	
270	---	-270	---	---		720	720	720	
153	---	-153	---	---		---	273	273	
---	---	50	50	50		---	---	---	
---	---	247	247	247		---	---	---	
---	---	---	---	---		72	262	262	
359	---	13	372	372		378	378	378	
5,000 ^S	---	---	5,000	---		---	---	---	
---	---	---	---	---		89	---	---	
---	---	---	---	---		100	---	---	
266	---	2	268	268		75	---	---	
100	---	---	100	75		272	272	272	
450	---	---	450	450		450	---	---	
1,250	---	---	1,250	1,250		1,270	1,270	1,270	
200	---	---	200	200		204	204	204	
---	---	---	---	---		---	1,588	1,588	
---	89	---	89	---		---	---	---	
14,621	43	2,697	17,361	17,144		17,740	17,740	17,740	
95	---	---	95	95		97	97	97	
200	---	---	200	200		400	---	---	

HEALTH AND SENIOR SERVICES

Year Ending June 30, 1999					Year Ending June 30, 2001			
Orig. & (S)Supplemental	Reapp. & (R)Recpts.	Transfers & (E)Emergencies	Total Available	Expended	Prog. Class.	2000 Adjusted Approp.	Requested	Recommended
GRANTS-IN-AID								
---	---	---	---	---				
---	---	---	---	---	04	400	---	---
---	---	---	---	---	04	65	---	---
---	---	---	---	---	04	25	---	---
---	---	---	---	---	04	75	---	---
---	---	---	---	---	04	100	---	---
1,192	---	-1,181	11	---	04	---	---	---
797	---	-797	---	---	04	---	---	---
---	---	---	---	---	04	---	---	---
600	60	17	677	612	04	416	1,516	1,516
620	---	---	620	620	04	627	627	627
---	---	---	---	---	04	630	630	630
1,810	---	---	1,810	1,810	04	1,838	1,838	1,838
---	---	---	---	---	04	25	---	---
---	2,000	---	2,000	2,000	04	---	---	---
---	---	---	---	---	04	50	---	---
853	---	-843	10	10	12	---	862	862
483	---	-483	---	---	12	---	---	---
---	---	---	---	---	12	443	1,614	1,614
11,863	---	1,336	13,199	13,199	12	13,939	13,939	13,939
---	---	---	---	---	12	50	---	---
STATE AID								
Distribution by Fund and Program								
18,747	---	---	18,747	18,747	02	22,269	22,754	22,754
4,165	---	---	4,165	4,165	03	4,165	4,100	4,100
22,912	---	---	22,912	22,912		26,434	26,854	26,854
Distribution by Fund and Object								
State Aid:								
---	---	---	---	---	02	---	485	485
18,747	---	---	18,747	18,747	02	19,769	---	---
4,165	---	---	4,165	4,165	03	4,165	4,100	4,100
CAPITAL CONSTRUCTION								
Distribution by Fund and Program								
---	---	---	---	---	03	---	750	---
1,269	633	---	1,902	1,383	08	1,508	2,508	1,660
1,269	633	---	1,902	1,383		1,508	3,258	1,660

HEALTH AND SENIOR SERVICES

Year Ending June 30, 1999					Year Ending June 30, 2001				
Orig. & (S)Supple- mental	Reapp. & (R)Recpts.	Transfers & (E)Emer- gencies	Total Available	Expended	Prog. Class.	2000 Adjusted Approp.	Requested	Recom- mended	
CAPITAL CONSTRUCTION									
Distribution by Fund and Object									
Division of Epidemiology, Environmental and Occupational Health									
---	---	---	---	---	03	---	750	---	
Tuberculosis Confinement Unit									
Division of Public Health and Environmental Laboratories									
500	507	---	1,007	527	08	800	740	---	
Improvements to Laboratories and Installed Equipment									
769	66	---	835	835	08	258	828	720	
Laboratory Equipment									
---	60	---	60	21	08	---	---	---	
Warehouse Equipment									
---	---	---	---	---	08	---	750	750	
New State Health Laboratory									
---	---	---	---	---	08	450	190	190	
Clinical Laboratory Services - Automation									
101,606	5,317	753	107,676	100,563	Grand Total State Appropriation		132,235	146,992	145,394
OTHER RELATED APPROPRIATIONS									
Federal Funds									
674	---	---	---	---	01	740	850	850	
Vital Statistics									
168 ^S	555	---	1,397	783	02	133,692	137,650	137,650	
Family Health Services									
143,832	6,971	-490	150,369	109,591	03	28,356	24,628	24,628	
Public Health Protection Services									
56 ^S	4,727	164	34,507	16,280	04	54,201	50,496	50,496	
Addiction Services									
29,616	11,450	-100	60,287	45,851	08	1,685	1,555	1,555	
Laboratory Services									
48,173	371	80	2,178	1,171	12	64,139	72,600	72,600	
AIDS Services									
764 ^S	2,426	-205	61,822	50,211	Total Federal Funds		282,813	287,779	287,779
All Other Funds									
---	1,822	---	---	---	02	27,694	27,694	27,694	
Family Health Services									
---	18,231 ^R	11,692	31,745	31,042	03	2,254	1,601	1,601	
Public Health Protection Services									
---	1,486	50	4,327	3,109	04	3,384	2,998	2,998	
Addiction Services									
---	2,791 ^R	---	---	---	08	450	400	400	
Laboratory Services									
---	1,779	---	---	---	12	6,756	5,400	5,400	
AIDS Services									
---	2,481 ^R	478	4,738	3,245	Total All Other Funds		40,538	38,093	38,093
GRAND TOTAL ALL FUNDS									
84	367 ^R	---	451	451	GRAND TOTAL ALL FUNDS		455,586	472,864	471,266
GRAND TOTAL ALL FUNDS									
---	6,053 ^R	---	6,053	5,571	GRAND TOTAL ALL FUNDS		455,586	472,864	471,266
GRAND TOTAL ALL FUNDS									
284,611	26,500	-551	310,560	223,887	GRAND TOTAL ALL FUNDS		455,586	472,864	471,266

Notes

- (a) The fiscal year 2000 appropriation has been adjusted largely for the allocation of salary increments; the remaining salary program costs are budgeted in the Interdepartmental Salary Increases and Other Benefits Account.
- (b) Appropriation of \$392,000 distributed to applicable program classes.
- (c) Appropriation of \$392,000 distributed to applicable program classes.
- (d) Appropriation of \$117,000 distributed to applicable program classes.
- (e) Appropriation of \$117,000 distributed to applicable program classes.
- (f) Appropriation of \$626,000 distributed to applicable program classes.
- (g) This account provides the necessary State maintenance of effort requirement to match the federal Substance Abuse Block grant.
- (h) Appropriation of \$595,000 distributed to applicable program classes.
- (i) Appropriation of \$370,000 distributed to applicable program classes.
- (j) Appropriation of \$370,000 distributed to applicable program classes.

HEALTH AND SENIOR SERVICES

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, 2000, in the New Jersey Emergency Medical Service Helicopter Response Program account is appropriated.
- Notwithstanding the provisions of any other law to the contrary, there is appropriated \$2,000,000 from the Emergency Medical Technician Training Fund for the purchase of defibrillator equipment.
- 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, 2000, 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 unexpended balance as of June 30, 2000, 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, 2000, 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, 2000, 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 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, drug abuse or both. Receipts derived from billings or fees and unexpended balances as of June 30, 2000 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, 2000, 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, 2000 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 Trust Fund to fund the Fetal Alcohol Syndrome Program.

The unexpended balance as of June 30, 2000 in the Cord Blood Resource Center account is appropriated.

The unexpended balance as of June 30, 2000 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, 2000, 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, 2000 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, 2000 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, 2000 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, 2001 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.
4. To administer a comprehensive Certificate of Need program to provide for the orderly development and replacement of needed health care facilities and services.

HEALTH AND SENIOR 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.
8. To oversee the provision of services by managed care organizations, investigate consumer complaints, and ensure the appropriate and timely delivery of services to the public by managed care organizations.

facilities, including criminal background checks and training programs; and provides consumers and professionals with information. The mission is to ensure that New Jersey citizens receive quality health care at appropriate levels of care in the regulated facilities under the Division's purview. Emphasis is placed on senior services.

PROGRAM CLASSIFICATIONS

06. **Long Term Care Systems.** Conducts on-site inspections and licenses nursing homes, residential health care facilities, assisted living residences, comprehensive personal care homes, alternate family care and medical day care; maintains a survey and certification program for nursing homes; investigates complaints received from consumers and other State and Federal agencies; develops new and revises existing licensing standards; licenses nursing home administrators, certifies nurse aides in long term care

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; regulates managed care organizations, addressing consumer complaints and reviews the ongoing performance of HMO's through periodic site visits and review of annual reports; 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 1998	Actual FY 1999	Revised FY 2000	Budget Estimate FY 2001
PROGRAM DATA				
Long Term Care Systems				
Licensed health care facilities	642	687	700	715
Licensed nursing home administrators	1,029	952	1,135	1,140
Total licenses issued	721	700	720	730
Number of beds licensed	63,828	67,768	69,000	69,384
Total inspections	2,400	2,600	3,000	3,200
Total federally certified licensed facilities	9	9	9	9
Total federally certified licensed beds	3,690	3,690	3,690	3,690
Administrative actions/penalties	275	345	365	390
Federal Enforcement Actions	267	292	310	320
Health Care Systems Analysis				
Inspections of acute care facilities	716	879	1,011	1,163
Complaints investigations	480	747	859	988
Hospital charity care audits	332	332	373	324
Certificate of need applications processed	356	202	113	104
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	81	81
Managed Care publications distributed	25,500	21,000	32,000	42,500
Acute Health Care facilities licensed	568	637	771	993
External Health Maintenance Organization complaints processed	680	3,816	6,000	10,000
PERSONNEL DATA				
Position Data				
Filled Positions by Funding Source				
State Supported	34	32	31	31
Federal	126	121	123	135
All Other	96	106	122	137
Total Positions	256	259	276	303

HEALTH AND SENIOR SERVICES

	Actual FY 1998	Actual FY 1999	Revised FY 2000	Budget Estimate FY 2001
Filled Positions by Program Class				
Long Term Care Systems Development & Quality Assurance	133	138	130	139
Health Care Systems Analysis	123	121	146	164
Total Positions	256	259	276	303

Notes:

Actual payroll counts are reported for fiscal years 1998 and 1999 as of December and revised fiscal year 2000 as of September. The Budget Estimate for fiscal year 2001 reflects the number of positions funded.

APPROPRIATIONS DATA (thousands of dollars)

Orig. & (S)Supple- mental	Year Ending June 30, 1999				Total Available	Expended		Year Ending June 30, 2001			
	Reapp. & (R)Recpts.	Transfers & (E)Emer- gencies	Total	Expended				Prog. Class.	2000 Adjusted Approp.	Requested	Recom- mended
<u>DIRECT STATE SERVICES</u>											
Distribution by Fund and Program											
4,247	1,697	-296	5,648	5,546	5,648	5,546	Long Term Care Systems	06	4,412	4,412	4,412
1,973	2,354	-151	4,176	4,070	4,176	4,070	Health Care Systems Analysis	07	2,013	2,013	2,013
6,220	4,051	-447	9,824	9,616	9,824	9,616	Total Direct State Services		6,425^(a)	6,425	6,425
Distribution by Fund and Object											
Personal Services:											
3,826	3,872 ^R	-613	7,132	7,130	7,132	7,130	Salaries and Wages		3,996	3,996	3,996
3,826	3,919	-613	7,132	7,130	7,132	7,130	Total Personal Services		3,996	3,996	3,996
60	---	-5	55	55	60	55	Materials and Supplies		60	60	60
220	---	16	236	235	220	235	Services Other Than Personal		220	220	220
94	---	-2	92	91	94	91	Maintenance and Fixed Charges		94	94	94
Special Purpose:											
900	---	-20	880	811	900	811	Nursing Home Background Checks/Nursing Aide Certification Program	06	900	900	900
---	120	---	120	120	---	120	Implementation of Statewide Health Information Network	06	---	---	---
120	---	---	120	120	120	120	Long Term Care Survey Staff	06	---	---	---
---	---	---	---	---	---	---	Resident Satisfaction System - Long Term Care	06	155	155	155
1,000	---	---	1,000	1,000	1,000	1,000	Implementation of Statewide Health Information Network	07	1,000	1,000	1,000
---	12	177	189	54	---	54	Additions, Improvements and Equipment		---	---	---
<u>GRANTS-IN-AID</u>											
Distribution by Fund and Program											
47,300	---	---	47,300	19,700	47,300	19,700	Health Care Systems Analysis	07	102,900	80,136	80,136
47,300	---	---	47,300	19,700	47,300	19,700	Total Grants-in-Aid		102,900	80,136	80,136
Distribution by Fund and Object											
Grants:											
44,100	---	---	44,100	16,500	44,100	16,500	Health Care Subsidy Fund Payments (P.L. 1997, c. 263) ^(b)	07	99,700	65,020	65,020
200	---	---	200	200	200	200	St. Barnabas/Kimball Medical Center-Low-Income Clinic	07	---	---	---
1,000	---	---	1,000	1,000	1,000	1,000	Southern New Jersey Emergency Medicine Center, Cooper Health System	07	1,000	---	---
1,000	---	---	1,000	1,000	1,000	1,000	Pediatric Trauma Education Program, Cooper Health System	07	1,000	---	---

HEALTH AND SENIOR SERVICES

Year Ending June 30, 1999					Year Ending June 30, 2001			
Orig. & (S)Supplemental	Reapp. & (R)Recpts.	Transfers & (E)Emergencies	Total Available	Expended	Prog. Class.	2000 Adjusted Approp.	Requested	Recommended
GRANTS-IN-AID								
1,000	---	---	1,000	1,000				
					07	1,000	---	---
---	---	---	---	---	07	200	---	---
---	---	---	---	---	07	---	15,116	15,116
53,520	4,051	-447	57,124	29,316		109,325	86,561	86,561
OTHER RELATED APPROPRIATIONS								
Federal Funds								
7,231	1,953	---	9,184	3,892	06	7,057	10,015	10,015
1,795	-129	---	1,666	386	07	1,259	16,139	16,139
9,026	1,824	---	10,850	4,278		8,316	26,154	26,154
All Other Funds								
---	729 299 ^R	-391	637	195	06	388	343	343
---	22,949 29,626 ^R	-11,919	40,656	11,792	07	48,916	48,181	48,181
---	53,603	-12,310	41,293	11,987		49,304	48,524	48,524
62,546	59,478	-12,757	109,267	45,581		166,945	161,239	161,239

Notes

- The fiscal year 2000 appropriation has been adjusted largely for the allocation of salary increments; the remaining salary program costs are budgeted in the Interdepartmental Salary Increases and Other Benefits Account.
- 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. An additional \$68,544,000 is appropriated in fiscal year 2001 from the Tobacco Settlement Trust Fund to offset General Fund contributions to the Health Care Subsidy Fund.

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, 2000, 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 to the New Jersey Institute of Technology and \$250,000 allocated to Thomas A. Edison State College for collaborative projects with the Department of Health and Senior Services relating to HINT technology, as approved by the Commissioner of Health and Senior Services.
- 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, 2000, are appropriated for the cost of this program, subject to the approval of the Director of the Division of Budget and Accounting.

HEALTH AND SENIOR SERVICES

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, \$6,000,000 of the amount hereinabove for the Health Care Subsidy Fund payments account is appropriated from the Admission Charge Hospital Assessment revenue item.

In addition to the amount appropriated hereinabove for the New Jersey KidCare portion of the Health Care Subsidy Fund Payments (P.L. 1997, c. 263) account, such additional sums as may be required are appropriated from the General Fund to cover health insurance costs of the program, 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 established a Supplemental Charity Care Fund account within the Health Care Subsidy Fund for disbursement of additional charity care funding to hospitals that exceed a threshold level of charity services to patients. The total amount to be disbursed from the Supplemental Charity Care Fund in fiscal year 2001 shall not exceed 20% of the excess of the audited documented charity care for calendar year 1999, valued at the Medicaid rate, over the actual charity care payments in fiscal year 2000, pursuant to P.L. 1997, Chapter 263. The payments to be made from the Supplemental Charity Care Fund that are in excess of the amount appropriated are subject to the approval of the Director of the Division of Budget and Accounting. Furthermore, a hospital shall be eligible to receive funding from the Supplemental Charity Care Fund only if its charity care subsidy under P.L. 1997, Chapter 263 for fiscal year 2000, is less than fifty (50) percent of the hospital's audited documented charity care, for calendar year 1999, valued at the Medicaid rate, less one (1) percent of the hospital's total annual revenue for calendar year 1998. A hospital that is eligible to receive funding from the Supplemental Charity Care Fund account shall receive from that account the difference between fifty (50) percent of the hospital's audited documented charity care for calendar year 1999, valued at the Medicaid rate, minus one (1) percent of the hospital's total revenues for the calendar year 1998 and the hospital's fiscal year 2000 charity care subsidy under P.L. 1997, Chapter 263. Furthermore, the Supplemental Charity Care Fund account subsidy does not change the allocation of Charity Care payments made to hospitals under P.L. 1997, Chapter 263. A detailed reimbursement methodology from the Supplemental Charity Care Fund account shall be established by the Commissioner of Health and Senior Services. The methodology shall be consistent with the definitions and other provisions of P.L. 1997, Chapter 263.

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

	Actual FY 1998	Actual FY 1999	Revised FY 2000	Budget Estimate FY 2001
PERSONNEL DATA				
Affirmative Action Data				
Male Minority	109	114	120	120
Male Minority %	5.8	5.8	6.2	6.2
Female Minority	426	453	450	450
Female Minority %	22.6	23.1	23.2	23.2
Total Minority	535	567	570	570
Total Minority %	28.4	28.9	29.4	29.4

HEALTH AND SENIOR SERVICES

	Actual FY 1998	Actual FY 1999	Revised FY 2000	Budget Estimate FY 2001
Position Data				
Filled Positions by Funding Source				
State Supported	92	93	98	89
Federal	1	3	5	5
All Other	64	79	83	81
Total Positions	157	175	186	175
Filled Positions by Program Class				
Administration and Support Services	157	175	186	175
Total Positions	157	175	186	175

Notes:

Actual payroll counts are reported for fiscal years 1998 and 1999 as of December and revised fiscal year 2000 as of September. The Budget Estimate for fiscal year 2001 reflects the number of positions funded.

APPROPRIATIONS DATA
(thousands of dollars)

Year Ending June 30, 1999					Year Ending June 30, 2001			
Orig. & (S)Supple- mental	Reapp. & (R)Recpts.	Transfers & (E)Emer- gencies	Total Available	Expended	Prog. Class.	2000 Adjusted Approp.	Requested	Recom- mended
<u>DIRECT STATE SERVICES</u>								
Distribution by Fund and Program								
1,746	39	2,028	3,813	3,813	99	2,596	3,016	3,016
1,746	39	2,028	3,813	3,813		2,596^(a)	3,016	3,016
Distribution by Fund and Object								
1,352	39 ^R	1,979	3,370	3,370				
1,352	39	1,979	3,370	3,370		2,177	2,127	2,127
49	---	---	49	49		49	49	49
223	---	49	272	272		248	718	718
38	---	---	38	38		38	38	38
84	---	---	84	84	99	84	84	84
<u>CAPITAL CONSTRUCTION</u>								
Distribution by Fund and Program								
---	---	---	---	---	99	---	2,965	2,965
---	---	---	---	---		---	2,965	2,965
Distribution by Fund and Object								
---	---	---	---	---	99	---	665	665
---	---	---	---	---	99	---	2,300	2,300
1,746	39	2,028	3,813	3,813		2,596	5,981	5,981

OTHER RELATED APPROPRIATIONS

Federal Funds								
300	371	236	907	644	99	460	460	460
300	371	236	907	644		460	460	460

HEALTH AND SENIOR SERVICES

Year Ending June 30, 1999					Year Ending June 30, 2001			
Orig. & (S)Supple- mental	Reapp. & (R)Recpts.	Transfers & (E)Emer- gencies	Total Available	Expended	Prog. Class.	2000 Adjusted Approp.	Requested	Recom- mended
OTHER RELATED APPROPRIATIONS								
All Other Funds								
---	18	-18	---	---	87	---	---	---
	3,709							
---	1,616 ^R	3,550	8,875	5,556	99	2,430	2,131	2,131
---	5,343	3,532	8,875	5,556		2,430	2,131	2,131
2,046	5,753	5,796	13,595	10,013		5,486	8,572	8,572
					GRAND TOTAL ALL FUNDS			

Notes

(a) The fiscal year 2000 appropriation has been adjusted largely for the allocation of salary increments; the remaining salary program costs are budgeted in the Interdepartmental Salary Increases and Other Benefits Account.

Language Recommendations -- Capital Construction

In addition to the amount appropriated above, an amount not to exceed \$4,600,000 is appropriated from the General Fund for the "E Public Health" initiative, subject to the approval of the Director of the Division of Budget and Accounting.

20. PHYSICAL AND MENTAL HEALTH

26. SENIOR SERVICES

OBJECTIVES

PROGRAM CLASSIFICATIONS

- | | |
|---|---|
| <ol style="list-style-type: none"> 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. | <ol style="list-style-type: none"> 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 \$18,587 if single or \$22,791 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. |
|---|---|

HEALTH AND SENIOR SERVICES

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.

EVALUATION DATA

	Actual FY 1998	Actual FY 1999	Revised FY 2000	Budget Estimate FY 2001
PROGRAM DATA				
Medical Services for the Aged				
Nursing Home Services:				
Per diem	\$95.09	\$98.26	\$98.50	\$101.00
Patient days	12,107,460	11,917,824	12,100,000	12,100,000
Gross annual cost (a)	\$1,151,298,371	\$1,173,802,000	\$1,193,794,000	\$1,186,794,000
Community Care Programs:				
Community Care Program for the Elderly and Disabled clients served	4,367	4,581	4,620	4,650
Community Care Program for the Elderly and Disabled amount expended	\$45,603,046 ^(b)	\$49,736,580 ^(b)	\$52,851,082 ^(b)	\$54,489,066 ^(b)
Assisted Living/ Alternative Family Care Clients served	251	522	850	1,350
Pharmaceutical Assistance to the Aged and Disabled				
Pharmaceutical Assistance to the Aged (PAA) Only:				
Average monthly eligibles	33,425	30,876	26,653	22,021
Average monthly prescriptions per eligible	2.25	2.36	2.35	2.58
Annual prescriptions	902,475	874,408	751,609	681,755
Cost per prescription (excludes co-payment)	\$39.28	\$40.73	\$47.95	\$53.23
Gross Cost PAA Program	\$35,449,218	\$35,614,651	\$36,039,650	\$36,286,393
Recoveries	(\$1,297,058)	(\$2,502,859)	(\$1,643,000)	(\$1,643,000)
Annual Cost	\$34,152,160	\$33,120,000	\$34,458,000	\$34,082,000 ^(c)
Pharmaceutical Assistance to the Aged & Disabled (PAAD) Only:				
Aged				
Average monthly eligibles	142,810	141,382	137,305	133,753
Average monthly prescriptions per eligible	2.52	2.70	2.68	2.81
Annual prescriptions	4,318,574	4,580,777	4,415,742	4,503,731
Cost per prescription (excludes co-payment)	\$38.08	\$41.61	\$48.30	\$53.16
Gross Cost PAAD Program (Aged only)	\$164,477,290	\$190,606,123	\$213,280,322	\$239,418,341
Recoveries	(\$7,307,000)	(\$6,049,587)	(\$7,188,900)	(\$7,086,600)
PAAD manufacturers' rebates (d)	(\$21,573,500)	(\$25,380,943)	(\$31,229,200)	(\$28,879,800)
Net Annual Cost	\$135,596,790	\$159,197,000	\$174,862,222	\$198,956,141 ^(c)
Disabled				
Average monthly eligibles	22,256	22,747	23,400	24,051
Average monthly prescriptions per eligible	3.40	3.60	3.68	3.90
Annual prescriptions	908,044	982,670	1,031,940	1,125,573
Cost per prescription (excludes co-payment)	\$53.47	\$61.44	\$72.90	\$82.69
Gross Cost PAAD Program (Disabled only)	\$48,557,710	\$60,375,269	\$75,228,426	\$93,073,612
Recoveries	(\$1,976,000)	(\$2,979,647)	(\$2,111,100)	(\$2,213,400)

HEALTH AND SENIOR SERVICES

	Actual FY 1998	Actual FY 1999	Revised FY 2000	Budget Estimate FY 2001
PAAD manufacturers' rebates (d)	(\$11,616,500)	(\$12,501,061)	(\$9,170,800)	(\$9,020,200)
Net Annual Cost	\$34,965,210	\$44,902,000	\$63,946,526	\$80,435,812 ^(c)
Total General Fund	\$34,152,160	\$33,120,000	\$54,464,000	\$83,582,000
Total Casino Revenue Fund	\$170,562,000	\$204,099,000	\$218,811,000	\$229,918,000
Lifeline				
Lifeline Credit Program				
Population Data				
Pharmaceutical Assistance to the Aged and Disabled	113,309	117,023	115,708	115,708
Supplemental Security Income	28,889	29,910	29,585	26,385
Medicaid only	8,874	9,914	9,893	8,893
Lifeline only	3,968	3,737	3,598	3,098
Total recipients	155,058	160,584	158,784	154,084
Credit amount	\$225	\$225	\$225	\$225
Tenants Lifeline Assistance Program				
Population Data				
Pharmaceutical Assistance to the Aged and Disabled	32,284	35,994	34,224	34,224
Supplemental Security Income	113,264	112,518	112,418	116,318
Medicaid only	8,186	8,608	8,529	9,529
Lifeline only	586	498	581	689
Total recipients	154,320	157,618	155,752	160,760
Rebate amount	\$225	\$225	\$225	\$225
Programs for the Aged				
Services and Service Units Provided:				
Congregate meals service	2,182,671	2,311,227	2,311,000	2,311,000
Home delivered meals service	2,731,633	2,907,729	2,908,000	2,908,000
Transportation service	1,105,624	1,237,615	1,238,000	1,238,000
Information and referral service	270,505	276,973	277,000	277,000
Telephone reassurance service	337,968	336,489	336,000	336,000
Outreach service	27,193	26,355	26,000	26,000
Personal care service	552,910	577,081	577,000	577,000
Legal service	35,723	33,825	34,000	34,000
Housekeeping and chore services	484,457	489,012	489,000	489,000
Education and training services	11,853	10,834	11,000	11,000
Case management service	75,993	87,369	87,000	87,000
Physical health services	70,850	69,868	70,000	70,000
Congregate Housing Services Program				
Persons served	1,600	1,834	1,834	1,834
Site locations	29	29	29	29
Adult Protective Services				
Persons Served	5,247	4,870	5,350	5,350
Health Insurance Counseling				
Clients served	22,500	25,000	25,000	25,000
Security Housing and Transportation				
Clients served	6,348	6,000	6,000	6,000
Gerontology Services				
Geriatric Patients Served	3,479	3,151	3,100	3,100
Alzheimer's Day Care Units Provided	31,266	42,657	42,000	42,000
Persons Trained in Gerontology	2,703	4,105	3,000	3,000
Caregivers Receiving Respite Care	1,895	2,185	2,500	2,500
Office of the Ombudsman				
Office of the Ombudsman				
Institutionalized elderly	72,500	72,500	72,500	72,500
On-site investigations:				
Involving patient funds	83	200	250	250
Involving care/abuse/neglect	2,373	4,226	5,000	5,000
Nursing homes visited	2,869	3,500	3,200	3,200
Boarding homes visited	83	120	120	120

HEALTH AND SENIOR SERVICES

	Actual FY 1998	Actual FY 1999	Revised FY 2000	Budget Estimate FY 2001
Residential health care/psychiatric and development centers visits	278	250	250	250
Cases referred to enforcement agencies	298	425	425	425
Office of the Public Guardian				
Office of the Public Guardian				
Number of inquiries	120	175	200	200
Number of cases handled	842	1,022	1,200	1,200
Number of court-appointed cases	32	55	150	150
PERSONNEL DATA				
Position Data				
Filled Positions by Funding Source				
State Supported	199	226	227	279
Federal	137	147	149	155
All Other	18	17	22	20
Total Positions	354	390	398	454
Filled Positions by Program Class				
Medical Services for the Aged	148	169	187	243
Pharmaceutical Assistance to the Aged & Disabled	81	96	83	86
Lifeline	34	33	32	31
Programs for the Aged	51	52	55	54
Ombudsman's Office	20	20	19	19
Office of the Public Guardian	20	20	22	21
Total Positions	354	390	398	454

Notes:

Actual payroll counts are reported for fiscal years 1998 and 1999 as of December, and revised fiscal year 2000 as of September. The Budget Estimate for fiscal year 2001 reflects the number of positions funded.

Actual fiscal year 1998 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) Includes resources from the Casino Revenue Fund, Grants-in-Aid, the Health Care Subsidy Fund, and matching federal funds.
- (c) The Net Annual Cost for PAA/PAAD reflects \$600,000 in savings for PAA and \$3.4 million in savings for PAAD resulting from the initiative to secure Medicare reimbursement for certain drugs covered under PAA/PAAD.
- (d) 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 June 30, 1999					Year Ending June 30, 2001			
Orig. & (S)Supplemental	Reapp. & (R)Recpts.	Transfers & (E)Emergencies	Total Available	Expended	Prog. Class.	2000 Adjusted Approp.	Requested	Recommended
DIRECT STATE SERVICES								
Distribution by Fund and Program								
4,489	412	344	5,245	5,044	22	4,715	4,665	4,665
6,655	179	-16	6,818	6,428	24	6,724	6,724	6,724
1,851	13	-66	1,798	1,771	28	1,994	1,994	1,994
1,986	12	-122	1,876	1,693	55	1,863	1,986	1,986
1,115	---	-122	993	815		992	1,115	1,115
871	12	---	883	878		871	871	871
571	23	31	625	625	56	601	601	601
734	2	-3	733	700	57	734	734	734
16,286	641	168	17,095	16,261		16,631	16,704	16,704
15,415	629	168	16,212	15,383		15,760 ^(a)	15,833	15,833
871	12	---	883	878		871	871	871

HEALTH AND SENIOR SERVICES

Year Ending June 30, 1999					Year Ending June 30, 2001			
Orig. & (S)Supple- mental	Reapp. & (R)Recpts.	Transfers & (E)Emer- gencies	Total Available	Expended	Prog. Class.	2000 Adjusted Approp.	Requested	Recom- mended
<u>DIRECT STATE SERVICES</u>								
Distribution by Fund and Object								
Personal Services:								
8,521	23 ^R	84	8,628	8,618		9,036	8,939	8,939
796	---	---	796	795		658	658	658
---	---	---	---	---		138	138	138
9,317	23	84	9,424	9,413		9,832	9,735	9,735
8,521	23	84	8,628	8,618		9,036	8,939	8,939
796	---	---	796	795		796	796	796
339	---	-62	277	276		339	339	339
14	---	---	14	14		14	14	14
1,820	---	308	2,128	2,099		1,820	1,820	1,820
47	---	---	47	47		47	47	47
849	---	-130	719	710		849	849	849
2	---	---	2	2		2	2	2
Special Purpose:								
119	412	-123	408	408		119	119	119
703	---	---	703	506		703	703	703
2,134	76	49	2,259	1,929		2,134	2,134	2,134
100	---	---	100	100		100	100	100
170 ^S	---	---	170	---		---	170	170
410	---	---	410	410		410	410	410
250	118	42	410	327		250	250	250
12	12	---	24	20		12	12	12
<u>GRANTS-IN-AID</u>								
Distribution by Fund and Program								
615,312	---	-349	614,963	614,208		630,267	391,807	391,807
599,934	---	786	600,720	600,718		626,021	387,861	387,861
15,378	---	-1,135	14,243	13,490		4,246	3,946	3,946
239,665	39,909	---	279,574	275,101		273,275	313,500	313,500
33,120	---	---	33,120	33,120		54,464	83,582	83,582
206,545	39,909	---	246,454	241,981		218,811	229,918	229,918
70,840	---	---	70,840	69,744		70,840	70,840	70,840
36,171	---	---	36,171	35,142		36,171	36,171	36,171
34,669	---	---	34,669	34,602		34,669	34,669	34,669
23,267	---	350	23,617	23,144		22,458	27,524	27,524
10,596	---	350	10,946	10,481		9,857	14,923	14,923
12,671	---	---	12,671	12,663		12,601	12,601	12,601
949,084	39,909	1	988,994	982,197		996,840	803,671	803,671
679,821	---	1,136	680,957	679,461		726,513	522,537	522,537
269,263	39,909	-1,135	308,037	302,736		270,327	281,134	281,134
Distribution by Fund and Object								
Grants:								
13,599	---	---	13,599	13,599		24,447	24,847	24,847
14,101	---	-1,072	13,029	12,335		3,253	3,253	3,253
546,835	---	-1,928	559,207	559,205		560,397	309,397	309,397
14,300 ^S	---	-1,928	559,207	559,205		560,397	309,397	309,397
16,200	---	2,714	18,914	18,914		21,840	24,740	24,740

HEALTH AND SENIOR SERVICES

Year Ending June 30, 1999					Year Ending June 30, 2001				
Orig. & (S) Supplemental	Reapp. & (R) Recpts.	Transfers & (E) Emergencies	Total Available	Expended	Prog. Class.	2000 Adjusted Approp.	Requested	Recommended	
GRANTS-IN-AID									
9,000	---	---	9,000	9,000					
					22	9,000	9,000	9,000	
---	---	---	---	---	22	10,337	19,877	19,877	
1,027	---	-63	964	945	22	743	443	443	
250	---	---	250	210					
					22	250	250	250	
27,263									
5,857 ^S	---	---	33,120	33,120	24	28,850			
						5,608 ^S	34,082	34,082	
---	---	---	---	---	24	20,006 ^S	49,500	49,500	
179,320	2,027								
27,225 ^S	37,882 ^R	---	246,454	241,981	24	213,686	229,918	229,918	
						5,125 ^S			
34,669	---	---	34,669	34,602	28	34,669	34,669	34,669	
36,171	---	---	36,171	35,142	28	36,171	36,171	36,171	
464 ^S	---	---	464	---	55	---	464	464	
7,267	---	---	7,267	7,266	55	7,789	7,789	7,789	
---	---	---	---	---	55	---	3,500	3,500	
---	---	150	150	150	55	---	---	---	
555	---	58	613	613	55	---	---	---	
995	---	-240	755	755	55	---	253	253	
---	---	---	---	---	55	---	---	---	
---	---	---	---	---	55	392	1,428	1,428	
615	---	42	657	657	55	681	681	681	
1,662	---	---	1,662	1,662	55	1,612	1,612	1,612	
---	---	---	---	---	55	100	---	---	
---	---	---	---	---	55	37	---	---	
700	---	340	1,040	1,040	55	808	808	808	
1,718	---	---	1,718	1,718	55	1,718	1,718	1,718	
1,630	---	---	1,630	1,630	55	1,610	1,610	1,610	
---	---	---	---	---	55	50	---	---	
4,841	---	---	4,841	4,841	55	4,841	4,841	4,841	
1,870	---	---	1,870	1,862	55	1,870	1,870	1,870	
950	---	---	950	950	55	950	950	950	
STATE AID									
Distribution by Fund and Program									
2,545	---	---	2,545	2,536	55	4,279	5,052	5,052	
2,545	---	---	2,545	2,536		4,279	5,052	5,052	

HEALTH AND SENIOR SERVICES

Year Ending June 30, 1999					Year Ending June 30, 2001				
Orig. & (S)Supplemental	Reapp. & (R)Recpts.	Transfers & (E)Emergencies	Total Available	Expended	Prog. Class.	2000 Adjusted Approp.	Requested	Recommended	
STATE AID									
Distribution by Fund and Object									
State Aid:									
---	---	---	---	---					
1,140	---	---	1,140	1,135	55	---	773	773	
1,405	---	---	1,405	1,401	55	1,177	1,177	1,177	
<u>967,915</u>	<u>40,550</u>	<u>169</u>	<u>1,008,634</u>	<u>1,000,994</u>	55	<u>3,102</u>	<u>3,102</u>	<u>3,102</u>	
					Grand Total State Appropriation		1,017,750	825,427	825,427
OTHER RELATED APPROPRIATIONS									
Federal Funds									
756,846	51	---	756,897	661,994	22	669,127	934,241	934,241	
38,872									
38 ^S	2,135	3	41,048	34,746	55	39,247	44,025	44,025	
420	12	---	432	427	56	420	420	420	
---	---	---	---	---	57	---	200	200	
<u>796,176</u>	<u>2,198</u>	<u>3</u>	<u>798,377</u>	<u>697,167</u>	Total Federal Funds		708,794	978,886	
All Other Funds									
---	153 ^R	---	153	153	22	---	---	---	
---	102	89	191	---	55	150	150	150	
---	5								
---	247 ^R	---	252	165	56	---	---	---	
---	373 ^R	---	373	372	57	380	420	420	
<u>---</u>	<u>880</u>	<u>89</u>	<u>969</u>	<u>690</u>	Total All Other Funds		530	570	
<u>1,764,091</u>	<u>43,628</u>	<u>261</u>	<u>1,807,980</u>	<u>1,698,851</u>	GRAND TOTAL ALL FUNDS		1,727,074	1,804,883	

Notes

- (a) The FY2000 appropriation has been adjusted largely for the allocation of salary increments; the remaining salary program costs are budgeted in the Interdepartmental Salary Increases and Other Benefits Account.
- (b) The FY2001 Requested and Recommended amounts reflect a \$250 million offset due to an enhanced federal match from the Intergovernmental Transfer.
- (c) The FY2000 and FY2001 amounts represent partial costs of the Pharmaceutical Assistance to the Aged and Disabled program - the remainder is funded by the Casino Revenue Fund. Costs have been shifted to the General Fund and charged to the Tobacco Settlement Trust Fund due to insufficient resources of the Casino Revenue Fund in FY2000 and FY2001.
- (d) In FY2000, \$20,006,000 has been shifted to the General Fund and charged to the Tobacco Settlement Trust Fund due to insufficient resources of the Casino Revenue Fund. In FY2001, \$49,500,000 has been shifted to the General Fund and charged to the Tobacco Settlement Trust Fund due to insufficient resources of the Casino Revenue Fund.
- (e) The FY2000 Appropriation of \$440,000 has been distributed to the appropriate grant accounts.
- (f) The FY2000 Appropriation of \$440,000 has been distributed to the appropriate grant accounts.

Language Recommendations -- Direct State Services - General Fund

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.

Receipts from the Office of the Public Guardian are appropriated.

HEALTH AND SENIOR SERVICES

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, 2001 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 2001 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 the 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 CF. 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.

From the amount appropriated for the Payments for Medical Assistance Recipients-Nursing Home account, funds shall be available to develop and implement a new nursing home rate setting system, subject to the approval of the Director of the Division of Budget and Accounting.

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: $E = A \text{ Medicaid days} / T \text{ Medicaid days} \times F$; 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, 2000; 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 programs, 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 (PAA/D) programs, 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 PAA/D benefits shall be void, and no PAA/D 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 programs 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 programs shall continue throughout fiscal year 2001. All revenues from such rebates during the fiscal year ending June 30, 2001, are appropriated for the Pharmaceutical Assistance to the Aged and Disabled programs.

HEALTH AND SENIOR SERVICES

Notwithstanding the provisions of any other law or regulation to the contrary, effective July 1, 2000, each prescription order dispensed in the Pharmaceutical Assistance to the Aged and Disabled programs 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 programs 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, 2000 consistent with the notice provisions of 42 CF. 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, 2000 consistent with the notice provisions of 42 CF. 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, 2000 shall remain in effect through fiscal year 2001, 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.

In addition to the amount hereinabove, there are appropriated from the General 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.

Notwithstanding any laws to the contrary, no funds appropriated in the Pharmaceutical Assistance to the Aged and Disabled programs are available to pharmacies who have not submitted an application to enroll by September 1, 2000 as an approved medical supplier in the Medicare program, unless they already are an approved Medicare medical supplier. Pharmacies will not be required to bill Medicare directly. Beneficiaries are 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, 2001, 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.

HEALTH AND SENIOR SERVICES

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 2001 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 2001. All revenues from such rebates during the fiscal year ending June 30, 2001, 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, 2000, 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, 2000 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, 2000 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, 2000 shall remain in effect through fiscal year 2001, 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 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 any laws to the contrary, no funds appropriated in the Pharmaceutical Assistance to the Aged and Disabled Programs are available to pharmacies who have not submitted an application to enroll by September 1, 2000 as an approved medical supplier in the Medicare program, unless they already are an approved Medicare medical supplier. Pharmacies will not be required to bill Medicare directly. Beneficiaries are responsible for the applicable PAA/D copayment.

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 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.

HEALTH AND SENIOR SERVICES

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, 2000 in the Health Care Subsidy Fund received through the .53 percent annual assessment on hospitals made during fiscal year 2000 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 the Commissioner's 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.

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

Language Recommendations -- State Aid - General Fund

From the amounts provided hereinabove for cost of living adjustments throughout the Department of Health and Senior Services, it is intended that these moneys shall be used to fund, at a minimum, a 1.6% cost of living increase for direct service workers' salaries, effective July 1, 2000.

The amount hereinabove for Salary Supplement for Direct Service Workers shall only be used to fund, at a minimum, an additional 2.0% direct service workers' cost of living adjustment throughout the Department of Health and Senior Services, effective July 1, 2000.

NOTES