

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 2002 Budget recommendation totals \$94.1 million in Direct State Services, \$584.9 million in Grants-In-Aid, \$37.5 million in State Aid, \$319.1 million in Casino Revenue Funds, and \$14.1 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 \$1.6 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 \$103 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) totaling \$54.9 million, \$35.5 million of which will come from the Casino Revenue Fund. The new Senior Gold Prescription Program is included in the budget with an annualized cost of \$50 million. Additional increases include \$7.8 million for Medical Day Care Services, \$4.8 million cost of living adjustment for grant programs and a \$4.8 million salary supplement for direct service workers.

The Budget recommendation includes an appropriation of \$30 million to decrease tobacco related activities throughout the State. The \$30 million appropriation, from anticipated tobacco settlement revenue, will support programs that 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.

SUMMARY OF APPROPRIATIONS BY FUND

(thousands of dollars)

Year Ending June 30, 2000					Year Ending June 30, 2002			
Orig. & (S)Supple- mental	Reapp. & (R)Recpts.	Transfers & (E)Emer- gencies	Total Available	Expended		2001 Adjusted Approp.	Requested	Recom- mended
74,098	7,028	8,167	89,293	74,893	Direct State Services	89,816	94,165	94,165
860,121	21,053	2,170	883,344	868,540	Grants-In-Aid	752,687	584,886	584,886
29,847	5	---	29,852	29,851	State Aid	36,825	37,485	37,485
1,508	798	---	2,306	730	Capital Construction	3,465	14,317	14,079
965,574	28,884	10,337	1,004,795	974,014	Total General Fund	882,793	730,853	730,615
297,312	43,734	---	341,046	338,867	Total Casino Revenue Fund	283,711	319,132	319,132
1,262,886	72,618	10,337	1,345,841	1,312,881	GRAND TOTAL	1,166,504	1,049,985	1,049,747

HEALTH AND SENIOR SERVICES

SUMMARY OF APPROPRIATIONS BY PROGRAM (thousands of dollars)

Year Ending June 30, 2000					Year Ending June 30, 2002			
Orig. & (S) Supplemental	Reapp. & (R) Recpts.	Transfers & (E) Emergencies	Total Available	Expended		2001 Adjusted Approp.	Requested	Recommended
					DIRECT STATE SERVICES - GENERAL FUND			
					Health Services			
1,409	265	43	1,717	1,716	Vital Statistics	1,506	1,506	1,506
6,862	353	-485	6,730	5,071	Family Health Services	6,114	6,114	6,114
14,791	931	205	15,927	15,085	Public Health Protection Services	15,247	14,927	14,927
19,249	9	313	19,571	11,289	Addiction Services	30,687	30,687	30,687
4,547	516	619	5,682	5,681	Laboratory Services	5,488	6,278	6,278
2,703	26	270	2,999	2,984	AIDS Services	2,753	2,753	2,753
49,561	2,100	965	52,626	41,826	<i>Subtotal</i>	61,795	62,265	62,265
					Health Planning and Evaluation			
4,402	1,375	-721	5,056	4,867	Long Term Care Systems	4,430	4,491	4,491
2,068	2,938	-99	4,907	4,907	Health Care Systems Analysis	2,013	2,013	2,013
6,470	4,313	-820	9,963	9,774	<i>Subtotal</i>	6,443	6,504	6,504
					Health Administration			
2,282	31	1,509	3,822	3,819	Administration and Support Services	4,545	6,045	6,045
					Senior Services			
4,715	---	6,691	11,406	8,652	Medical Services for the Aged	5,421	6,789	6,789
6,674	381	127	7,182	6,569	Pharmaceutical Assistance to the Aged and Disabled	7,124	7,124	7,124
1,994	---	-126	1,868	1,828	Lifeline	2,038	2,038	2,038
1,067	170	-179	1,058	1,056	Programs for the Aged	1,115	1,115	1,115
601	2	---	603	602	Office of the Ombudsman	601	1,551	1,551
734	31	---	765	767	Office of the Public Guardian	734	734	734
15,785	584	6,513	22,882	19,474	<i>Subtotal</i>	17,033	19,351	19,351
74,098	7,028	8,167	89,293	74,893	Subtotal Direct State Services - General Fund	89,816	94,165	94,165
					DIRECT STATE SERVICES - CASINO REVENUE FUND			
					Senior Services			
871	3	---	874	869	Programs for the Aged	871	871	871
871	3	---	874	869	Subtotal Direct State Services - Casino Revenue Fund	871	871	871
74,969	7,031	8,167	90,167	75,762	TOTAL DIRECT STATE SERVICES	90,687	95,036	95,036
					GRANTS-IN-AID - GENERAL FUND			
					Health Services			
12,810	25	627	13,462	13,218	Family Health Services	14,113	13,719	13,719
2,097	5,000	283	7,380	2,371	Public Health Protection Services	2,536	2,794	2,794
25,760	443	-429	25,774	25,500	Addiction Services	26,297	28,189	28,189
13,989	---	492	14,481	14,472	AIDS Services	16,424	18,511	18,511
54,656	5,468	973	61,097	55,561	<i>Subtotal</i>	59,370	63,213	63,213
					Health Planning and Evaluation			
102,999	---	---	102,999	95,500	Health Care Systems Analysis	94,636	121,016	121,016

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Year Ending June 30, 2000					Year Ending June 30, 2002			
Orig. & (S)Supple- mental	Reapp. & (R)Recpts.	Transfers & (E)Emer- gencies	Total Available	Expended		2001 Adjusted Approp.	Requested	Recom- mended
Senior Services								
626,661	12	12,319	638,992	637,938	Medical Services for the Aged	442,377	205,584	205,584
28,850	15,109	-9,165	34,794	34,783	Pharmaceutical Assistance to the Aged and Disabled	83,182	143,852	143,852
36,171	---	-2,499	33,672	33,672	Lifeline	59,171	36,171	36,171
10,784	464	542	11,790	11,086	Programs for the Aged	13,951	15,050	15,050
702,466	15,585	1,197	719,248	717,479	<i>Subtotal</i>	598,681	400,657	400,657
860,121	21,053	2,170	883,344	868,540	Subtotal Grants-In-Aid - General Fund	752,687	584,886	584,886
GRANTS-IN-AID - CASINO REVENUE FUND								
Health Services								
500	---	---	500	500	Family Health Services	500	500	500
Senior Services								
4,246	---	---	4,246	4,183	Medical Services for the Aged	3,946	3,857	3,857
244,425	43,392	---	287,817	285,822	Pharmaceutical Assistance to the Aged and Disabled	229,918	265,428	265,428
34,669	---	---	34,669	34,669	Lifeline	34,669	34,669	34,669
12,601	339	---	12,940	12,824	Programs for the Aged	13,807	13,807	13,807
295,941	43,731	---	339,672	337,498	<i>Subtotal</i>	282,340	317,761	317,761
296,441	43,731	---	340,172	337,998	Subtotal Grants-In-Aid - Casino Revenue Fund	282,840	318,261	318,261
1,156,562	64,784	2,170	1,223,516	1,206,538	TOTAL GRANTS-IN-AID	1,035,527	903,147	903,147
STATE AID - GENERAL FUND								
Health Services								
21,969	---	---	21,969	21,969	Family Health Services	26,267	26,372	26,372
4,165	---	---	4,165	4,165	Public Health Protection Services	4,645	4,580	4,580
26,134	---	---	26,134	26,134	<i>Subtotal</i>	30,912	30,952	30,952
Senior Services								
3,713	5	---	3,718	3,717	Programs for the Aged	5,913	6,533	6,533
29,847	5	---	29,852	29,851	Subtotal State Aid - General Fund	36,825	37,485	37,485
29,847	5	---	29,852	29,851	TOTAL STATE AID	36,825	37,485	37,485
CAPITAL CONSTRUCTION								
Health Services								
1,508	798	---	2,306	730	Laboratory Services	1,660	14,317	14,079
Health Administration								
---	---	---	---	---	Administration and Support Services	1,805	---	---
1,508	798	---	2,306	730	Subtotal Capital Construction	3,465	14,317	14,079
1,262,886	72,618	10,337	1,345,841	1,312,881	TOTAL APPROPRIATION	1,166,504	1,049,985	1,049,747

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, alcohol and tobacco.
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 (R.S. 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 (R.S. 9:13-1 et seq.); provides and promotes family planning and genetic services (R.S. 26:5B), maternal and child health care (C.26:1A-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 (C.24:14A-1 et seq.); prenatal services for children; provides financial assistance to persons with hemophilia (C.26:2-87 et seq.); provides financial assistance to persons with chronic renal disease (C.26:2-87 et seq.) and general assistance to persons with other chronic diseases (C.26:1A-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 (R.S. 26:4-27 et seq.); controls tuberculosis (R.S. 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 (C.26:1A-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 (C.26:2G). Provides, by grants, counseling and detoxification services in clinics, institutions and schools; assists in development of employee assistance programs; coordinates with Mental Health Programs (C.26:2B-1); coordinates programs on fetal alcohol syndrome and child abuse; and provides counseling programs for compulsive gamblers.

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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 (e.g. tuberculosis, dairy products, sexually transmitted diseases, gastrointestinal illnesses, drinking water, and ocean pollution); Virology (e.g. AIDS, influenza, Rubella, and rabies); Serology (e.g. Lyme, Legionella, and syphilis); Inborn Errors of Metabolism (e.g. sickle cell, hypothyroidism, PKU, and Galactosemia) and Environmental and Chemical (e.g. blood lead, asbestos, drugs, water, food, and other environmental and chemical contaminants). Clinical Laboratory Services performs tests and monitors the quality of laboratory testing

performed in independent, hospital and public health laboratories in the State; inspects, proficiency tests and licenses all such laboratories (C.45:9-42.26 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

PROGRAM DATA	Actual FY 1999	Actual FY 2000	Revised FY 2001	Budget Estimate FY 2002
Vital Statistics				
Searches	108,901	107,769	109,000	109,000
Certified Copies Issued	69,353	66,436	69,000	69,000
Family Health Services				
Agencies receiving health services grants	215	228	235	235
Handicapped Children				
Physically disabled children receiving services	32,220	49,003	52,000	52,000
Children newly registered with Special Child Health Services	8,101	7,765	8,100	8,500
Maternal and Child Health				
Infant mortality rate/1,000 live births	6.3	6.3	6.3	6.3
Infant born to mothers with no prenatal care/1,000 live births	1.1	1.0	0.9	0.9
Newborns screened for PKU & hypothyroidism, galactosemia, sickle cell & hearing	111,578	110,815	110,000	110,000
Number of infants to be followed	7,665	6,614	7,300	7,300
Number of infants in early intervention	8,581	9,064	9,500	9,975
HealthStart (prenatal)	31,000	32,000	31,000	30,000
Women assessed for alcohol use/abuse during pregnancy ..	12,800	8,000	8,000	8,000
Women, Infants and Children (WIC) receiving services ...	247,500	221,328	250,000	250,000
Family Planning				
Women in reproductive years applying for and receiving services	101,000	104,000	105,000	105,000
Poison Control				
Children screened for lead poisoning (a)	9,586	140,000	200,000	200,000
Number of lead poisoned children identified (a)	1,604	2,000	2,000	2,000
Adult Health				
Huntington's disease families served	274	250	250	250
Adults served with Cystic Fibrosis	96	95	95	95
Health Promotion				
Persons screened and educated for breast and cervical cancer	8,643	15,519	20,000	20,000
Number of renal patients served	2,031	2,078	2,000	1,800
Youth violence prevention and intervention participants ...	400	400	400	400
Emergency Medical Services				
Mobile intensive care paramedics certified/recertified	553	570	615	625
Emergency Medical Technicians certified/recertified	6,563	9,000	7,500	9,000
Helicopter response missions	1,629	1,600	1,475	1,475
Mobile intensive care unit's patient charts audited	250	250	350	450
Ambulance/invalid services licensed	324	355	375	400
Ambulance/invalid vehicles licensed	2,110	2,387	2,550	2,575
EMT training agencies certified	57	57	59	62

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	Actual FY 1999	Actual FY 2000	Revised FY 2001	Budget Estimate FY 2002
Public Health Protection Services				
Cancer and Epidemiological Services				
Number of new cancer cases reports	77,652	77,000	77,000	77,000
Number of cumulative cancer reports in master file	1,053,382	1,130,382	1,207,382	1,284,382
Tuberculosis Control				
TB cases on register as of June 30	685	635	635	600
Visits to chest clinics	62,200	59,100	63,000	60,000
Percent of TB patients completing chemotherapy	85.00%	88.50%	88.00%	88.00%
Sexually Transmitted Diseases (STD)				
Percent of STD clinic patients receiving education about HIV infection				
Reported cases of early syphilis	195	150	165	150
Syphilis cases (early and late) brought to treatment by Department of Health				
Reported cases of gonorrhea	7,884	8,000	8,400	8,700
Gonorrhea cases brought to treatment by Department of Health				
Visits to STD clinics	18,172	18,000	19,750	20,500
Patients receiving diagnostic services	9,100	9,300	10,200	10,700
Consumer Health				
Pet spay/neuter surgeries performed	10,880	10,000	11,000	11,000
Registration of dogs (rabies control)	487,486	460,000	460,500	460,500
Environmental and sanitary inspections and investigations conducted				
Number of food, drug and cosmetic embargoes, destructions and recalls	20	20	20	20
Other Communicable Disease Control				
Number of disease cases reported	6,400	8,000	6,000	6,000
Number of investigations of outbreaks	86	90	90	90
Levels of protection for children entering school against:				
Rubella	98%	98%	98%	98%
Measles	96%	98%	98%	98%
Mumps	98%	98%	98%	98%
Polio	98%	98%	98%	98%
Diphtheria	98%	98%	98%	98%
Infectious disease consultations	18,000	18,000	18,000	18,000
Non-outbreak investigations	220	240	240	240
Lyme disease hotline calls	1,500	1,600	1,600	1,600
Public Employees Occupational Safety and Health				
Complaint inspections conducted	216	253	240	245
Telephone consultations	1,702	1,900	1,577	1,600
Educational seminars presented	77	75	102	75
Right to Know				
Factsheets written or revised	309	300	313	300
Public and private workplaces inspected	1,162	800	843	800
Telephone consultations	3,572	3,500	4,681	3,500
Occupational Health Surveillance				
Exposure and illness reports received	2,978	3,300	3,300	3,300
Educational materials mailed to public	2,588	2,500	3,500	3,000
In-depth industrial hygiene evaluations	57	45	75	75
Follow-up industrial hygiene evaluations	5	10	10	10
Work-related chronic disease and epidemiology studies ..	4	4	5	5
Worker interviews and mailings	83	100	100	100
Environmental Health Services				
Certification of private training agencies	44	40	35	35
Audits of asbestos and lead training agencies	125	120	100	100
Quality assurance inspections in schools	132	125	125	125
Major community health field study on-going	17	16	16	16
Telephone consultations	4,090	4,100	4,100	4,100
Responses to acute environmental emergencies	8	9	9	9

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	Actual FY 1999	Actual FY 2000	Revised FY 2001	Budget Estimate FY 2002
Consultations provided to other agencies and to the public	8	10	10	10
Local health consultations, evaluations, and training services	3,266	5,278	4,645	5,037
Addiction Services				
Drug treatment admissions - primary alcohol	19,776	21,000	21,000	21,000
Drug treatment admissions - primary other drugs	39,097	40,000	40,000	40,000
Adult hospital detoxification admissions	10,604	12,500	12,500	12,500
Adult residential detoxification admissions	2,852	3,000	3,000	3,000
Adult residential admissions	8,980	8,900	8,900	8,900
Adult out-patient admissions	34,254	33,000	33,000	33,000
Juvenile treatment admissions	3,413	4,700	4,700	4,700
Juvenile hospital detoxification admissions	208	250	250	250
Juvenile residential detoxification admissions	70	90	90	90
Juvenile residential admissions	1,035	1,200	1,200	1,200
Juvenile out-patient admissions	2,100	3,100	3,100	3,100
Intoxicated driver cases processed	23,020	24,000	24,000	24,000
Individuals given information and referral	42,978	45,000	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	185,265	188,316	191,500	193,000
Inborn Errors of Metabolism				
Specimens performed	134,157	134,352	144,352	144,000
Chemistry				
Asbestos samples examined	230	292	250	100
Occupational health samples examined	70	28	50	50
Sewage, stream & trade waste samples examined	3,681	3,824	3,800	4,000
Narcotic samples examined	195,001	218,398	229,000	240,000
Potable water samples examined	3,108	2,981	3,000	3,000
Food and milk samples examined	3,327	5,505	5,575	5,575
Blood lead samples examined	10,744	8,752	9,000	9,000
Clinical Laboratory Services				
Clinical laboratories licensed	1,022	1,114	1,114	1,114
Proficiency test samples (percent acceptable)	95%	95%	95%	95%
Proficiency test samples reviewed	57,411	53,912	53,000	53,000
Blood banks inspected	111	24	50	50
Clinical laboratory inspections	483	306	300	300
Blood banks licensed	182	187	193	198
Serology				
Routine screen tests for syphilis	45,733	50,000	41,000	41,000
Virology				
Specimens analyzed	122,131	120,704	123,000	123,000
AIDS Services				
Number of clients tested and counseled	66,192	57,260	58,000	58,000
Contact tracing of individuals	1,155	858	1,000	1,000
Drug treatment clients and sex partners served	16,154	17,189	16,500	17,000
Hotline network calls	13,582	13,000	13,000	13,000
Living AIDS clients	14,583	15,348	15,500	16,000
HIV positive clients	14,232	15,651	16,000	17,000
Clients receiving early intervention services	12,467	12,500	10,778	11,000
Individuals reached/HIV training	4,782	5,000	5,000	4,500
AIDS Drug Distribution Program clients served	4,025	4,399	4,421	4,700

HEALTH AND SENIOR SERVICES

	Actual FY 1999	Actual FY 2000	Revised FY 2001	Budget Estimate FY 2002
PERSONNEL DATA				
Position Data				
Filled Positions by Funding Source				
State Supported	340	375	397	429
Federal	527	534	539	601
All Other	58	45	56	57
Total Positions	925	954	992	1,087
Filled Positions by Program Class				
Vital Statistics	52	52	52	56
Family Health Services	173	204	206	214
Public Health Protection Services	299	302	309	351
Alcoholism, Drug Abuse and Addiction Services	145	140	153	157
AIDS Services	144	143	151	176
Laboratory Services	112	113	121	133
Total Positions	925	954	992	1,087

Notes:

Actual payroll counts are reported for fiscal years 1999 and 2000 as of December and revised fiscal year 2001 as of September. The Budget Estimate for fiscal year 2002 reflects the number of positions funded.

Actual fiscal year 1999 has been restated to reflect accurate counts.

(a) Fiscal year 1999 and 2000 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 2001 and 2002 are based on universal reporting of all tests results; therefore, the number is expected to increase significantly.

APPROPRIATIONS DATA
(thousands of dollars)

Orig. & (S)Supple- mental	Year Ending June 30, 2000			Total Available Expended	Program Class	Year Ending June 30, 2002		
	Reapp. & (R)Recpts.	Transfers & (E)Emer- gencies				2001 Adjusted Approp.	Requested	Recom- mended
DIRECT STATE SERVICES								
Distribution by Fund and Program								
1,409	265	43	1,717	1,716	01	1,506	1,506	1,506
6,862	353	-485	6,730	5,071	02	6,114	6,114	6,114
14,791	931	205	15,927	15,085	03	15,247	14,927	14,927
19,249	9	313	19,571	11,289	04	30,687	30,687	30,687
4,547	516	619	5,682	5,681	08	5,488	6,278	6,278
2,703	26	270	2,999	2,984	12	2,753	2,753	2,753
49,561	2,100	965	52,626	41,826	Total Direct State Services	61,795^(a)	62,265	62,265
Distribution by Fund and Object								
Personal Services:								
15,251	1,338 ^R	858	17,460	17,460		16,939	17,039	17,039
15,251	1,351	858	17,460	17,460	Total Personal Services	16,939	17,039	17,039
2,508	1	248	2,757	2,757	Materials and Supplies	2,508	2,508	2,508
1,121	6	245	1,372	1,365	Services Other Than Personal	1,121	1,121	1,121
209	---	7	216	216	Maintenance and Fixed Charges	209	209	209
Special Purpose:								
250	---	---	250	249	Electronic Death Certificate	01	250	250
87	---	---	87	87	WIC Farmers Market Program	02	87	87
79	---	---	79	79	Emergency Medical Services	02	79	79
50	---	---	50	50	Emergency Medical Services for Children	02	50	50
25	---	---	25	16	Service Recognition Program for EMT Volunteers	02	---	---
500	---	-115	385	385	First Response EMT Cardiac Training Program	02	125	125

HEALTH AND SENIOR SERVICES

Orig. & (S)Supple- mental	Year Ending June 30, 2000				Prog. Class.	Year Ending June 30, 2002			
	Reapp. & (R)Recpts.	Transfers & (E)Emer- gencies	Total Available	Expended		2001 Adjusted Approp.	Requested	Recom- mended	
<u>DIRECT STATE SERVICES</u>									
500	---	-250	250	178	02	---	---	---	---
900	---	-50	850	806					
---	95	---	95	95	02	900	900	900	900
500	---	---	500	449	02	---	---	---	---
2,700	---	---	2,700	1,217	02	500	500	500	500
50	---	---	50	50	02	2,700	2,700	2,700	2,700
200	---	-28	172	167	03	50	50	50	50
400	---	-36	364	361	03	200	200	200	200
---	---	---	---	---	03	400	400	400	400
1,000	---	---	---	---	03	---	80	80	80
600 ^S	61	60	1,721	1,375	03	1,000	1,000	1,000	1,000
813	94	---	907	887	03	817	817	817	817
50 ^S	---	---	50	---	03	---	---	---	---
502	147	---	665	602	03	502	502	502	502
557	16 ^R	---	854	507	03	557	557	557	557
---	297	---	---	---	03	400	---	---	---
1,992	---	---	1,992	1,992	03	2,046	2,046	2,046	2,046
---	---	---	---	---	03	200	200	200	200
155	---	---	155	155	04	155	155	155	155
7,262	---	---	7,262	3,582	04	6,300	6,300	6,300	6,300
2,600	---	---	2,600	1,000	04	8,700	8,700	8,700	8,700
1,700	---	---	1,700	1,700	04	3,000	3,000	3,000	3,000
2,200	---	---	2,200	2,000	04	5,000	5,000	5,000	5,000
4,800	---	---	4,800	2,000	04	7,000	7,000	7,000	7,000
---	---	---	---	---	08	---	690	690	690
---	32	26	58	39		---	---	---	---
<u>GRANTS-IN-AID</u>									
Distribution by Fund and Program									
13,310	25	627	13,962	13,718	02	14,613	14,219	14,219	14,219
12,810	25	627	13,462	13,218		14,113	13,719	13,719	13,719
500	---	---	500	500		500	500	500	500
2,097	5,000	283	7,380	2,371	03	2,536	2,794	2,794	2,794

HEALTH AND SENIOR SERVICES

Orig. & (S) Supplemental	Year Ending June 30, 2000				Total Available	Expended	Prog. Class.	Year Ending June 30, 2002		
	Reapp. & (R) Recpts.	Transfers & (E) Emergencies						2001 Adjusted Approp.	Requested	Recommended
25,760	443	-429	25,774	25,500	Addiction Services	04	26,297	28,189	28,189	
13,989	---	492	14,481	14,472	AIDS Services	12	16,424	18,511	18,511	
55,156	5,468	973	61,597	56,061	Total Grants-in-Aid		59,870	63,713	63,713	
54,656	5,468	973	61,097	55,561	(From General Fund)		59,370	63,213	63,213	
500	---	---	500	500	(From Casino Revenue Fund)		500	500	500	
Distribution by Fund and Object										
Grants:										
3,269	---	---	3,269	3,269	Family Planning Services	02	3,685	3,685	3,685	
937	---	---	937	937	Hemophilia Services	02	987	987	987	
118	---	---	118	118	Testing for Specific Hereditary Diseases	02	125	125	125	
1,748	---	---	1,748	1,745	Special Health Services for Handicapped Children	02	1,854	1,854	1,854	
379	---	---	379	379	Chronic Renal Disease Services	02	402	402	402	
280	---	---	280	280	Pharmaceutical Services for Adults With Cystic Fibrosis	02	297	297	297	
25	---	---	25	25	Birth Defects Registry	02	25	25	25	
500	---	---	500	500	Statewide Birth Defects Registry (CRF)	02	500	500	500	
300	---	-150	150	110	Interagency Council on Osteoporosis	02	300	---	---	
350	---	---	350	350	Center for Hope Hospice, Union County	02	---	---	---	
50	---	---	50	50	Best Friends Foundation	02	100	---	---	
25	---	---	25	25	Mary's Manor	02	---	---	---	
392	---	127	519	519	Cost of Living Adjustment, Family Health Services	02	---	429	429	
392	---	49	441	441	Cost of Living Adjustment, Deferred Cost-Family Health Services	02	---	1,290	1,290	
50	---	---	50	50	Birth Haven Inc., Newton	02	50	---	---	
---	25	---	25	---	Somerville Kids Care-Kool Vests	02	---	---	---	
271	---	210	481	481	Maternal and Child Health Services	02	1,329	1,329	1,329	
58	---	-25	33	33	Emergency Medical Services	02	58	58	58	
225	---	---	225	224	Primary Care Services - Dover Free Clinic	02	236	236	236	
---	---	441	441	441	Salary Supplement for Direct Service Workers	02	---	---	---	
---	---	---	---	---	Kimball Medical Center, Emergency Room	02	250	---	---	
---	---	---	---	---	Trinity Health Center	02	115	---	---	
---	---	---	---	---	Monmouth Medical Center, AWARE	02	100	---	---	
---	---	---	---	---	Child Health Institute of New Jersey	02	1,000	1,000	1,000	
40	---	---	40	40	New Jersey Institute for Parent Education, Inc	02	75	---	---	
25	---	---	25	25	Parenting Resources Education Network of Southern New Jersey	02	25	---	---	
25	---	-25	---	---	Child Federation of Atlantic City	02	25	---	---	
344	---	---	344	344	Lead Poisoning Program	02	366	366	366	
425	---	---	425	425	Poison Control Center	02	472	472	472	

HEALTH AND SENIOR SERVICES

Year Ending June 30, 2000					Year Ending June 30, 2002			
Orig. & (S)Supplemental	Reapp. & (R)Recpts.	Transfers & (E)Emergencies	Total Available	Expended	Prog. Class.	2001 Adjusted Approp.	Requested	Recommended
GRANTS-IN-AID								
75	---	---	75	---				
---	---	---	---	---				
50	---	---	50	50				
562	---	---	562	562				
133	---	---	133	133				
---	---	---	---	---				
---	---	---	---	---				
145	---	---	145	145				
998	---	---	998	998				
---	---	---	---	---				
136	---	---	136	136				
155	---	---	155	155				
---	---	---	---	---				
258	---	---	258	258				
100	---	---	100	100				
---	---	---	---	---				
100	---	---	100	---				
150	---	---	150	150				
100	---	---	100	100				
---	---	---	---	---				
120	---	---	120	120				
---	---	---	---	---				
---	---	---	---	---				
---	---	---	---	---				
---	---	---	---	---				
712	---	---	712	704				
117	---	49	166	166				
117	---	97	214	214				
247	---	---	247	247				

HEALTH AND SENIOR SERVICES

Orig. & (S) Supplemental	Year Ending June 30, 2000			Year Ending June 30, 2002					
	Reapp. & (R) Recpts.	Transfers & (E) Emergencies	Total Available	Expended	Prog. Class.	2001 Adjusted Approp.	Requested	Recommended	
GRANTS-IN-AID									
---	---	72	72	72					
372	---	---	372	371	03	---	---	---	---
---	5,000	---	5,000	---	03	395	395	395	
---	---	---	---	---	03	---	---	---	---
89	---	---	89	89	03	150	---	---	---
100	---	---	100	100	03	---	---	---	---
75	---	---	75	75	03	50	---	---	---
---	---	65	65	65	03	---	---	---	---
---	---	---	---	---	03	25	---	---	---
268	---	---	268	268	03	277	277	277	277
---	25	-25	---	---	04	---	---	---	---
450	---	---	450	450	04	---	---	---	---
1,250	---	---	1,250	1,250	04	1,325	1,325	1,325	1,325
200	---	---	200	200	04	208	208	208	208
626	---	-196	430	430	04	---	1,643	1,643	1,643
---	280	---	280	262	04	---	---	---	---
16,593	73	765	17,431	17,185	04	20,479	20,479	20,479	20,479
95	---	---	95	95	04	102	102	102	102
400	---	---	400	400	04	450	---	---	---
400	---	---	400	400	04	100	---	---	---
---	---	---	---	---	04	100	---	---	---
65	---	---	65	65	04	100	---	---	---
25	---	---	25	25	04	10	---	---	---
75	---	---	75	75	04	25	---	---	---
100	---	---	100	100	04	---	---	---	---
595	---	-125	470	470	04	---	---	---	---
---	---	500	500	500	04	---	---	---	---
---	---	---	---	---	04	25	---	---	---
1,764	---	-1,348	416	416	04	---	1,216	1,216	1,216
617	65	---	682	681	04	640	640	640	640
620	---	---	620	613	04	658	658	658	658

HEALTH AND SENIOR SERVICES

Orig. & (S)Supple- mental	Year Ending June 30, 2000				Total Available Expended	Prog. Class.	Year Ending June 30, 2002		
	Reapp. & (R)Recpts.	Transfers & (E)Emer- gencies					2001 Adjusted Approp.	Requested	Recom- mended
GRANTS-IN-AID									
1,810	---	---	1,810	1,808	In-State Juvenile Residential Treatment Services	04	1,918	1,918	1,918
---	---	---	---	---	Sussex Council on Alcohol and Drug Abuse - Strengthening Families Program	04	10	---	---
25	---	---	25	25	Atlantic Prevention Resources	04	25	---	---
---	---	---	---	---	Catholic Charities - Project FREE	04	22	---	---
50	---	---	50	50	Epiphany House	04	100	---	---
370	---	11	381	381	Cost of Living Adjustment, AIDS Services	12	---	862	862
370	---	38	408	408	Cost of Living Adjustment, Deferred Cost-AIDS Services	12	---	1,295	1,295
---	---	443	443	434	Salary Supplement for Direct Service Workers	12	---	---	---
13,199	---	---	13,199	13,199	AIDS Grants	12	16,354	16,354	16,354
50	---	---	50	50	Angel Connection, Inc	12	---	---	---
---	---	---	---	---	Free Throw for AIDS	12	20	---	---
---	---	---	---	---	Saint Mary's Hospital - F.A.I.T.H	12	50	---	---
STATE AID									
Distribution by Fund and Program									
21,969	---	---	21,969	21,969	Family Health Services	02	26,267	26,372	26,372
4,165	---	---	4,165	4,165	Public Health Protection Services	03	4,645	4,580	4,580
26,134	---	---	26,134	26,134	Total State Aid		30,912	30,952	30,952
Distribution by Fund and Object									
State Aid:									
---	---	---	---	---	Cost of Living Adjustment, Family Health Services	02	---	405	405
19,469	---	---	21,969	21,969	Early Childhood Intervention Program	02	26,267	25,967	25,967
2,500 ^S	---	---	4,165	4,165	Public Health Priority Funding	03	4,645	4,580	4,580
4,165	---	---	4,165	4,165					
CAPITAL CONSTRUCTION									
Distribution by Fund and Program									
1,508	798	---	2,306	730	Laboratory Services	08	1,660	14,317	14,079
1,508	798	---	2,306	730	Total Capital Construction		1,660	14,317	14,079
Distribution by Fund and Object									
Division of Public Health and Environmental Laboratories									
800	481	---	1,281	112	Improvements to Laboratories and Installed Equipment	08	---	400	400
258	278	---	536	390	Laboratory Equipment	08	720	1,727	1,489
---	39	---	39	5	Warehouse Equipment	08	---	---	---
---	---	---	---	---	New State Health Laboratory	08	750	12,000	12,000
450	---	---	450	223	Clinical Laboratory Services - Automation	08	190	190	190
132,359	8,366	1,938	142,663	124,751	Grand Total State Appropriation		154,237	171,247	171,009

HEALTH AND SENIOR SERVICES

Year Ending June 30, 2000					Year Ending June 30, 2002				
Orig. & (S) Supplemental	Reapp. & (R) Recpts.	Transfers & (E) Emergencies	Total Available	Expended	Prog. Class.	2001 Adjusted Approp.	Requested	Recommended	
OTHER RELATED APPROPRIATIONS									
Federal Funds									
740	268	---	1,008	576	Vital Statistics	01	850	850	850
133,692	140	3,476	137,308	95,210	Family Health Services	02	140,485	139,974	139,974
28,104					Public Health Protection Services	03	28,139		
303 ^S	4,288	-276	32,419	15,921			160 ^S	26,783	26,783
54,201					Addiction Services	04	50,896	48,985	48,985
40 ^S	11,958	-250	65,949	46,464	Laboratory Services	08	1,895		
1,685	594	296	2,575	1,214			37 ^S	1,849	1,849
64,028					AIDS Services	12	74,275	75,409	75,409
336 ^S	2,494	-127	66,731	54,245	Total Federal Funds		296,737	293,850	293,850
283,129	19,742	3,119	305,990	213,630	All Other Funds				
---	687				Family Health Services	02	27,694	29,453	29,453
---	21,309 ^R	13,838	35,834	35,827	Public Health Protection Services	03	1,601	2,111	2,111
---	1,228	50	3,317	1,736	Addiction Services	04	2,998	4,014	4,014
---	2,039 ^R	1,784	6,013	4,001	Laboratory Services	08	400	375	375
---	1,746				AIDS Services	12	5,400	9,000	9,000
---	2,483 ^R				Total All Other Funds		38,093	44,953	44,953
---	8				GRAND TOTAL ALL FUNDS		489,067	510,050	509,812
---	367 ^R								
---	530								
---	8,621 ^R								
---	39,018	15,672	54,690	50,936					
415,488	67,126	20,729	503,343	389,317					

Notes

- The fiscal year 2001 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.
- Appropriation of \$429,000 distributed to applicable program classes.
- Appropriation of \$1,607,000 distributed to applicable program classes.
- Appropriation of \$273,000 distributed to applicable program classes.
- Appropriation of \$262,000 distributed to applicable program classes.
- Appropriation of \$1,588,000 distributed to applicable program classes.
- This account provides the necessary State maintenance of effort requirement to match the federal Substance Abuse Block grant.
- Appropriation of \$1,516,000 distributed to applicable program classes.
- Appropriation of \$862,000 distributed to applicable program classes.
- Appropriation of \$1,614,000 distributed to applicable program classes.
- Appropriation of \$485,000 distributed to applicable program classes.

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, 2001, in the New Jersey Emergency Medical Service Helicopter Response Program account is appropriated.
- 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, 2001, 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.

HEALTH AND SENIOR SERVICES

- The unexpended balance as of June 30, 2001, 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, 2001, 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, 2001, 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 or drug abuse or both. Receipts derived from billings or fees and unexpended balances as of June 30, 2001 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 \$700,000 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.
- 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, 2001, 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, 2001 in the Pharmaceutical Services For Adults with Cystic Fibrosis account is appropriated.
- There are appropriated from the New Jersey Emergency Medical Service Helicopter Response Program Fund established pursuant to section 2 of P.L.1992, c.87 (C.26:2K-36.1) such sums as are necessary to pay the reasonable and necessary expenses of the operation of the New Jersey Emergency Medical Service Helicopter Response Program created pursuant to P.L. 1986, c. 106 (C. 26:2K-35 et seq.), subject to the approval of the Director of the Division of Budget and Accounting.
- An amount not to exceed \$1,830,000 is appropriated to the Department of Health and Senior Services from monies deposited in the Health Care Subsidy Fund established pursuant to section 8 of P.L. 1992, c.160 (C.26:2H-18-58) to fund the Infant Mortality Reduction Program.
- There is appropriated \$570,000 from the Alcohol Education, Rehabilitation and Enforcement Fund to fund the Fetal Alcohol Syndrome Program.
- The unexpended balance as of June 30, 2001 in the Cord Blood Resource Center account is appropriated.
- The unexpended balance as of June 30, 2001 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, 2001, 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.
- 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.

HEALTH AND SENIOR SERVICES

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, 2001 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, 2001 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, 2001 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, 2002 for the purposes prescribed in P.L. 1966, c.36 (C.26:2F-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.
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.

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 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.
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 the health status of New Jerseyans.

HEALTH AND SENIOR SERVICES

EVALUATION DATA

	Actual FY 1999	Actual FY 2000	Revised FY 2001	Budget Estimate FY 2002
PROGRAM DATA				
Long Term Care Systems				
Licensed health care facilities	687	700	740	760
Licensed nursing home administrators	952	1,135	1,050	1,050
Total licenses issued	700	720	745	765
Number of beds licensed	67,768	69,000	71,400	73,400
Total inspections	2,600	3,000	3,500	4,000
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	345	365	390	390
Federal Enforcement Actions	292	310	340	340
Health Care Systems Analysis				
Inspections of acute care facilities	879	780	1,173	1,651
Complaints investigations	747	859	1,068	1,281
Hospital charity care audits	332	354	391	324
Certificate of need applications processed	202	133	77	77
Collection and analysis of hospital cost, financial, and utilization data				
By patient	1,461,049	1,479,861	1,500,000	1,500,000
By hospital	83	81	81	81
Managed Care publications distributed	21,000	28,000	31,000	31,000
Acute Health Care facilities licensed	637	680	714	750
External Health Maintenance Organization complaints processed	3,816	5,185	7,500	10,000
PERSONNEL DATA				
Position Data				
Filled Positions by Funding Source				
State Supported	32	29	31	33
Federal	121	125	135	154
All Other	106	121	122	140
Total Positions	259	275	288	327
Filled Positions by Program Class				
Long Term Care Systems Development & Quality Assurance	138	130	139	161
Health Care Systems Analysis	121	145	149	166
Total Positions	259	275	288	327

Notes:

Actual payroll counts are reported for fiscal years 1999 and 2000 as of December and revised fiscal year 2001 as of September. The Budget Estimate for fiscal year 2002 reflects the number of positions funded.

APPROPRIATIONS DATA (thousands of dollars)

Year Ending June 30, 2000					Year Ending June 30, 2002			
Orig & (S)Supple- mental	Reapp. & (R)Recpts.	Transfers & (E)Emer- gencies	Total Available Expended	Total	2001 Prog. Class.	Adjusted Approp.	Requested	Recom- mended
DIRECT STATE SERVICES								
Distribution by Fund and Program								
4,402	1,375	-721	5,056	4,867	06	4,430	4,491	4,491
2,068	2,938	-99	4,907	4,907	07	2,013	2,013	2,013
6,470	4,313	-820	9,963	9,774	6,443		6,504	6,504
					Total Direct State Services			

HEALTH AND SENIOR SERVICES

Year Ending June 30, 2000					Year Ending June 30, 2002			
Orig. & (S) Supplemental	Reapp. & (R) Recpts.	Transfers & (E) Emergencies	Total Available	Expended	Prog. Class.	2001 Adjusted Approp.	Requested	Recommended
DIRECT STATE SERVICES								
Distribution by Fund and Object								
Personal Services:								
3,946	4,178 ^R	-670	7,454	7,440		3,996	3,996	3,996
---	---	---	---	14		---	---	---
<u>3,946</u>	<u>4,178</u>	<u>-670</u>	<u>7,454</u>	<u>7,454</u>		<u>3,996</u>	<u>3,996</u>	<u>3,996</u>
60	---	-9	51	51		60	60	60
220	---	-41	179	179		220	220	220
94	---	-17	77	77		94	94	94
Special Purpose:								
900	---	---	900	716				
155	---	---	155	155	06	918	979	979
1,000	---	---	1,000	1,000	06	155	155	155
95 ^S	---	---	95	95	07	1,000	1,000	1,000
---	135	-83	52	47	07	---	---	---
GRANTS-IN-AID								
Distribution by Fund and Program								
102,999	---	---	102,999	95,500	07	94,636	121,016	121,016
<u>102,999</u>	<u>---</u>	<u>---</u>	<u>102,999</u>	<u>95,500</u>		<u>94,636</u>	<u>121,016</u>	<u>121,016</u>
Distribution by Fund and Object								
Grants:								
99,700	---	---	99,700	92,300	07	65,020	102,900	102,900
---	---	---	---	---	07	500	---	---
---	---	---	---	---	07	9,500	---	---
---	---	---	---	---	07	1,500	---	---
1,000	---	---	1,000	1,000	07	---	---	---
1,000	---	---	1,000	1,000	07	---	---	---
1,000	---	---	1,000	1,000	07	---	---	---
200	---	---	200	200	07	---	---	---
99 ^S	---	---	99	---	07	---	---	---
---	---	---	---	---	07	18,116	18,116	18,116
<u>109,469</u>	<u>4,313</u>	<u>-820</u>	<u>112,962</u>	<u>105,274</u>		<u>101,079</u>	<u>127,520</u>	<u>127,520</u>
Grand Total State Appropriation								

HEALTH AND SENIOR SERVICES

Orig. & (S)Supple- mental	Year Ending June 30, 2000				Year Ending June 30, 2002				
	Reapp. & (R)Recpts.	Transfers & (E)Emer- gencies	Total Available	Expended	Prog. Class.	2001 Adjusted Approp.	Requested	Recom- mended	
OTHER RELATED APPROPRIATIONS									
Federal Funds									
7,057	3,693	-307	10,443	4,569	06	8,941	9,341	9,341	
<u>1,259</u>	<u>611</u>	<u>40</u>	<u>1,910</u>	<u>4</u>	07	<u>19,139</u>	<u>19,270</u>	<u>19,270</u>	
8,316	4,304	-267	12,353	4,573	Total Federal Funds		28,060	28,611	28,611
All Other Funds									
---	821	-265	869	131	06	343	392	392	
---	313 ^R				07	48,181	47,637	47,637	
---	7,799	-14,341	23,807	12,619	07	<u>48,524</u>	<u>48,029</u>	<u>48,029</u>	
---	<u>39,282</u>	<u>-14,606</u>	<u>24,676</u>	<u>12,750</u>	Total All Other Funds		48,524	48,029	48,029
117,785	47,899	-15,693	149,991	122,597	GRAND TOTAL ALL FUNDS		177,683	204,160	204,160

Notes

(a) Health Care Subsidy Fund payments represent General Fund contributions for Charity Care payments to hospitals, the Hospital Relief Fund and New Jersey KidCare children's health insurance program.

Language Recommendations -- Direct State Services - General Fund

Receipts from licenses, permits, fines, penalties and fees collected by the Department of Health and Senior Services in Health Planning and Evaluation, in excess of those anticipated, are appropriated.

Receipts from fees established by the Commissioner of Health and Senior Services for licensing of clinical laboratories pursuant to P. L. 1975, c. 166 (C.45:9-42.26 et seq.), and blood banks pursuant to P.L. 1963, c. 33 (C.26:2A-2 et seq.), and the unexpended balance of such fees as of June 30, 2001, 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 above 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, 2001, are appropriated for the cost of this program, subject to the approval of the Director of the Division of Budget and Accounting.

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

There are appropriated such sums as are necessary to pay prior year obligations of programs within the Health Care Subsidy Fund, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding any law to the contrary, \$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.

Notwithstanding the provisions of any law to the contrary, there is established a Supplemental Charity Care Fund account for disbursement of additional charity care funding to hospitals with documented charity care in calendar year 2000. The total amount to be disbursed from the Supplemental Charity Care Fund will not exceed the amount appropriated. Hospitals which have not received payments under the Charity Care Subsidy pursuant to P.L. 1997, Chapter 263, equal to at least \$0.30 per dollar of charity care provided, shall be eligible to receive payments from the Supplemental Charity Care Fund pursuant to a methodology established by the Commissioner of Health and Senior Services. These payments will be prorated so that payments to all hospitals from Supplemental Charity Care do not exceed the amount appropriated.

HEALTH AND SENIOR SERVICES

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 (C.26:1A-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 1999	Actual FY 2000	Revised FY 2001	Budget Estimate FY 2002
PERSONNEL DATA				
Affirmative Action Data				
Male Minority	114	138	140	140
Male Minority %	5.8	6.7	6.8	6.8
Female Minority	453	482	500	500
Female Minority %	23.1	23.4	24.2	24.2
Total Minority	567	620	640	640
Total Minority %	28.9	30.1	31.0	31.0
Position Data				
Filled Positions by Funding Source				
State Supported	93	98	89	94
Federal	3	5	5	6
All Other	79	83	81	82
Total Positions	175	186	175	182
Filled Positions by Program Class				
Administration and Support Services	175	186	175	182
Total Positions	175	186	175	182

Notes:

Actual payroll counts are reported for fiscal years 1999 and 2000 as of December and revised fiscal year 2001 as of September. The budget for fiscal year 2002 reflects the number of positions funded.

APPROPRIATIONS DATA (thousands of dollars)

Orig. & (S)Supple- mental	Year Ending June 30, 2000			Total Available Expended	Prog. Class.	Year Ending June 30, 2002			
	Reapp. & (R)Recpts.	Transfers & (E)Emer- gencies	Total			2001 Adjusted Approp.	Requested	Recom- mended	
2,282	31	1,509	3,822	3,819					
2,282	31	1,509	3,822	3,819					
DIRECT STATE SERVICES									
Distribution by Fund and Program									
					Administration and Support Services	99	4,545	6,045	6,045
					Total Direct State Services		4,545 (a)	6,045	6,045

HEALTH AND SENIOR SERVICES

Year Ending June 30, 2000					Year Ending June 30, 2002			
Orig. & (S) Supplemental	Reapp. & (R) Recpts.	Transfers & (E) Emergencies	Total Available Expended		Prog. Class.	2001 Adjusted Approp.	Requested	Recommended
DIRECT STATE SERVICES								
Distribution by Fund and Object								
Personal Services:								
1,863	31 ^R	1,411	3,305	3,305		3,656	3,656	3,656
<u>1,863</u>	<u>31</u>	<u>1,411</u>	<u>3,305</u>	<u>3,305</u>		<u>3,656</u>	<u>3,656</u>	<u>3,656</u>
49	---	---	49	49		49	49	49
248	---	96	344	343		718	2,218	2,218
38	---	---	38	37		38	38	38
Special Purpose:								
84	---	---	84	84				
					99	84	84	84
---	---	2	2	1		---	---	---
CAPITAL CONSTRUCTION								
Distribution by Fund and Program								
---	---	---	---	---		1,805	---	---
---	---	---	---	---		<u>1,805</u>	---	---
Distribution by Fund and Object								
Division of Management and Administration								
---	---	---	---	---		665	---	---
---	---	---	---	---	99	1,140	---	---
<u>2,282</u>	<u>31</u>	<u>1,509</u>	<u>3,822</u>	<u>3,819</u>		<u>6,350</u>	<u>6,045</u>	<u>6,045</u>
OTHER RELATED APPROPRIATIONS								
Federal Funds								
460								
150 ^S	-100	---	510	247	99	460	610	610
<u>610</u>	<u>-100</u>	<u>---</u>	<u>510</u>	<u>247</u>		<u>460</u>	<u>610</u>	<u>610</u>
All Other Funds								
---	54	-54	---	---	16	---	---	---
---	3,320							
---	1,326 ^R	3,738	8,384	5,707	99	2,131	1,944	1,944
---	<u>4,700</u>	<u>3,684</u>	<u>8,384</u>	<u>5,707</u>		<u>2,131</u>	<u>1,944</u>	<u>1,944</u>
<u>2,892</u>	<u>4,631</u>	<u>5,193</u>	<u>12,716</u>	<u>9,773</u>		<u>8,941</u>	<u>8,599</u>	<u>8,599</u>

Notes

(a) The fiscal year 2001 appropriation has been adjusted for the allocation of salary program.

20. PHYSICAL AND MENTAL HEALTH 26. SENIOR SERVICES

OBJECTIVES

1. To provide a variety of medical and health services to individuals in their own homes to avoid unnecessary institutional placement.
2. To provide prescription drugs, insulin and insulin syringes for State residents qualifying for the Pharmaceutical Assistance to the Aged and Disabled (PAA/D) programs (C.30: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.

HEALTH AND SENIOR SERVICES

5. To promote, advocate and insure, as a whole and in particular cases, the adequacy of the care received, and the quality of life experienced, by elderly patients, residents and clients of institutional facilities within this State.
6. To increase energy conservation and reduce the utility costs of low-income households through the weatherization of single and multi-family dwellings.
7. To assure through the County Offices on Aging that congregate and in-home nutrition services are provided on a daily basis to residents aged 60 years and older with emphasis on those in greatest need.
8. To continue to serve as an effective and visible advocate for the elderly through programs for the aging.
9. To provide assistance to elderly citizens who have been found by the court to need a guardian or conservator and to administer those services in order to provide a better quality of life for each individual represented.

PROGRAM CLASSIFICATIONS

22. **Medical Services for the Aged.** Supports medically related services to eligible elderly and disabled individuals including community-based services to clients who would normally be eligible for Medicaid coverage only in an institution. Rebates for hearing aids purchased are provided to persons eligible for Pharmaceutical Assistance to the Aged and Disabled. Home care services are also provided to persons previously ineligible because of income limits.
24. **Pharmaceutical Assistance to the Aged and Disabled (PAA/D).** The Pharmaceutical Assistance to the Aged (PAA) Program provides prescription drug benefits to persons over 65 years of age with an income of up to \$9,000 if single or \$12,000 if married. Eligible individuals above these income limits and the disabled are funded from the Casino Revenue Fund through the Pharmaceutical Assistance to the Aged and Disabled (PAAD) Program, which provides prescription drug benefits to persons over 65 years of age, or disabled as defined by the Federal Social Security Act, with an income of up to \$19,238 if single or \$23,791 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. The Senior Gold program provides prescription drug benefits to everyone over 65 years of age or receiving

Social Security Disability benefits, whose annual income is \$10,000 above the applicable PAAD income eligibility limits for single and married persons, which amount is to be determined on the same basis as income is determined for the purpose for eligibility for PAAD.

28. **Lifeline.** The Lifeline Credit Program provides combined gas and electric utility credits of up to \$225 a year to N.J. residents who are eligible for Pharmaceutical Assistance to the Aged and Disabled, Supplemental Security Income, Medicaid only, or Lifeline only. The Tenants Lifeline Assistance Program provides a cash payment of up to \$225 a year to tenants who would be eligible for the Lifeline Credit Program except for the fact that they do not pay their own utility bills. Persons receiving Supplemental Security Income (SSI) who are eligible for this program receive monthly utility supplements totaling \$225 a year included in their SSI checks.
55. **Programs for the Aged.** The Division on Aging (C.52:27D-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 (C.52:27G-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 (C.52:27G-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

PROGRAM DATA	Actual FY 1999	Actual FY 2000	Revised FY 2001	Budget Estimate FY 2002
Medical Services for the Aged				
Nursing Home Services:				
Per diem	\$98.26	\$102.60	\$109.37	\$111.13
Patient days	11,917,824	11,634,674	11,603,592	11,603,592
Gross annual cost (a)	\$1,173,802,000	\$1,193,794,000	\$1,186,794,000	\$1,289,520,000
Community Care Programs:				
Community Care Program for the Elderly and Disabled clients served	4,581	4,620	4,650	4,700
Community Care Program for the Elderly and Disabled amount expended	\$49,736,580 (b)	\$52,851,082 (b)	\$57,160,000 (b)	\$58,118,000 (b)
Assisted Living/ Alternative Family Care Clients served	522	850	1,350	1,500

HEALTH AND SENIOR SERVICES

	Actual FY 1999	Actual FY 2000	Revised FY 2001	Budget Estimate FY 2002
Pharmaceutical Assistance to the Aged and Disabled				
Pharmaceutical Assistance to the Aged (PAA) Only:				
Average monthly eligibles	30,876	26,653	23,920	21,678
Average monthly prescriptions per eligible	2.36	2.35	2.34	2.37
Annual prescriptions	874,408	751,609	671,674	616,522
Cost per prescription (excludes co-payment)	\$40.73	\$47.95	\$52.11	\$57.57
Gross Cost PAA Program	\$35,614,651	\$36,039,650	\$35,002,254	\$35,493,190
Recoveries	(\$2,502,859)	(\$1,643,000)	(\$1,643,000)	---
Annual Cost (e)	\$33,120,000	\$34,458,000	\$33,359,254	\$35,493,190 (c)
Pharmaceutical Assistance to the Aged & Disabled (PAAD) Only:				
Aged				
Average monthly eligibles	141,382	137,305	140,023	145,711
Average monthly prescriptions per eligible	2.70	2.68	2.74	2.78
Annual prescriptions	4,580,777	4,415,742	4,603,956	4,860,919
Cost per prescription (excludes co-payment)	\$41.61	\$48.30	\$53.50	\$58.30
Gross Cost PAAD Program (Aged only)	\$190,606,123	\$213,280,322	\$246,311,659	\$283,391,575
Recoveries	(\$6,049,587)	(\$7,188,900)	(\$7,086,600)	(\$7,086,600)
PAAD manufacturers' rebates (d)	(\$25,380,943)	(\$31,229,200)	(\$38,100,000)	(\$38,100,000)
Net Annual Cost (e)	\$159,197,000	\$174,862,222	\$201,125,059	\$238,204,975 (c)
Disabled				
Average monthly eligibles	22,747	23,400	24,728	25,905
Average monthly prescriptions per eligible	3.60	3.68	3.64	3.73
Annual prescriptions	982,670	1,031,940	1,080,119	1,159,508
Cost per prescription (excludes co-payment)	\$61.44	\$72.90	\$78.23	\$85.98
Gross Cost PAAD Program (Disabled only)	\$60,375,269	\$75,228,426	\$84,497,712	\$99,694,481
Recoveries	(\$2,979,647)	(\$2,111,100)	(\$2,213,400)	(\$2,213,400)
PAAD manufacturers' rebates (d)	(\$12,501,061)	(\$9,170,800)	(\$11,900,000)	(\$11,900,000)
Net Annual Cost (e)	\$44,902,000	\$63,946,526	\$70,384,312	\$85,581,081 (c)
Total General Fund	\$33,120,000	\$54,464,000	\$83,582,000	\$93,852,000
Total Casino Revenue Fund	\$204,099,000	\$218,811,000	\$229,918,000	\$265,428,000
Lifeline				
Lifeline Credit Program				
Population Data				
Pharmaceutical Assistance to the Aged and Disabled	117,023	115,708	115,708	115,708
Supplemental Security Income	29,910	29,585	26,385	26,385
Medicaid only	9,914	9,893	8,893	8,893
Lifeline only	3,737	3,598	3,098	3,098
Total recipients	160,584	158,784	154,084	154,084
Credit amount	\$225	\$225	\$225	\$225
Tenants Lifeline Assistance Program				
Population Data				
Pharmaceutical Assistance to the Aged and Disabled	35,994	34,224	34,224	34,224
Supplemental Security Income	112,518	112,418	116,318	116,318
Medicaid only	8,608	8,529	9,529	9,529
Lifeline only	498	581	689	689
Total recipients	157,618	155,752	160,760	160,760
Rebate amount	\$225	\$225	\$225	\$225
Programs for the Aged				
Services and Service Units Provided:				
Congregate meals service	2,311,227	2,311,000	2,201,200	2,201,200
Home delivered meals service	2,907,729	2,908,000	3,264,000	3,264,000
Transportation service	1,237,615	1,238,000	1,104,000	1,104,000
Information and referral service	276,973	277,000	326,000	326,000
Telephone reassurance service	336,489	336,000	349,000	349,000
Outreach service	26,355	26,000	27,000	27,000
Personal care service	577,081	577,000	595,000	595,000
Legal service	33,825	34,000	28,000	28,000

HEALTH AND SENIOR SERVICES

	Actual FY 1999	Actual FY 2000	Revised FY 2001	Budget Estimate FY 2002
Housekeeping and chore services	489,012	489,000	486,000	486,000
Education and training services	10,834	11,000	9,000	9,000
Case management service	87,369	87,000	102,000	102,000
Physical health services	69,868	70,000	68,000	68,000
Congregate Housing Services Program				
Persons served	1,834	1,834	1,984	2,434
Site locations	29	29	44	44
Adult Protective Services				
Persons served	4,870	5,350	5,350	5,350
Health Insurance Counseling				
Clients served	25,000	25,000	109,000	112,000
Security Housing and Transportation				
Clients served	6,000	6,000	7,500	7,500
Gerontology Services				
Geriatric Patients Served	3,151	3,100	4,250	4,250
Alzheimer's Day Care Units Provided	42,657	42,000	55,000	55,000
Persons Trained in Gerontology	4,105	3,000	4,000	4,000
Caregivers Receiving Respite Care	2,185	2,500	2,500	2,500
Office of the Ombudsman				
Office of the Ombudsman				
Institutionalized elderly	72,500	72,500	110,000	120,000
On-site investigations:				
Involving patient funds	200	250	250	500
Involving care/abuse/neglect	4,226	5,000	5,000	7,500
Nursing homes visited	3,500	3,200	3,500	4,000
Boarding homes visited	120	120	150	200
Residential health care/psychiatric and development centers visits	250	250	300	400
Cases referred to enforcement agencies	425	425	475	500
Office of the Public Guardian				
Office of the Public Guardian				
Number of inquiries	175	200	400	450
Number of cases handled	1,022	1,200	1,400	1,500
Number of court-appointed cases	55	150	150	150
PERSONNEL DATA				
Position Data				
Filled Positions by Funding Source				
State Supported	226	246	286	353
Federal	147	149	141	158
All Other	17	22	23	22
Total Positions	390	417	450	533
Filled Positions by Program Class				
Medical Services for the Aged	169	208	228	254
Pharmaceutical Assistance to the Aged & Disabled	96	81	93	143
Lifeline	33	32	30	31
Programs for the Aged	52	56	55	52
Ombudsman's Office	20	17	18	26
Office of the Public Guardian	20	23	26	27
Total Positions	390	417	450	533

Notes:

Actual payroll counts are reported for fiscal years 1999 and 2000 as of December and revised fiscal year 2001 as of September.

The Budget Estimate for fiscal year 2002 reflects the number of positions funded.

Actual fiscal year 1999 and 2000 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 the matching federal funds.

(c) The Net Annual Cost for PAA/PAAD reflects \$4.7 million in savings for PAAD resulting from the initiative to secure Medicare reimbursement for certain drugs covered under PAA/PAAD.

HEALTH AND SENIOR SERVICES

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

(e) Includes savings initiatives of \$4 million in Pharmacy Reform Projects in fiscal year 2002.

APPROPRIATIONS DATA (thousands of dollars)

Orig. & (S) Supplemental	Year Ending June 30, 2000				Prog. Class.	Year Ending June 30, 2002			
	Reapp. & (R) Recpts.	Transfers & (E) Emergencies	Total Available	Total Expended		2001 Adjusted Approp.	Requested	Recommended	
<u>DIRECT STATE SERVICES</u>									
Distribution by Fund and Program									
4,715	---	6,691	11,406	8,652	22	5,421	6,789	6,789	Medical Services for the Aged
6,674	381	127	7,182	6,569	24	7,124	7,124	7,124	Pharmaceutical Assistance to the Aged and Disabled
1,994	---	-126	1,868	1,828	28	2,038	2,038	2,038	Lifeline
1,938	173	-179	1,932	1,925	55	1,986	1,986	1,986	Programs for the Aged
1,067	170	-179	1,058	1,056		1,115	1,115	1,115	(From General Fund)
871	3	---	874	869		871	871	871	(From Casino Revenue Fund)
601	2	---	603	602	56	601	1,551	1,551	Office of the Ombudsman
734	31	---	765	767	57	734	734	734	Office of the Public Guardian
16,656	587	6,513	23,756	20,343		17,904	20,222	20,222	Total Direct State Services
15,785	584	6,513	22,882	19,474		17,033 ^(a)	19,351	19,351	(From General Fund)
871	3	---	874	869		871	871	871	(From Casino Revenue Fund)
Distribution by Fund and Object									
Personal Services:									
8,986	2 ^R	100	9,088	9,072		9,239	9,639	9,639	Salaries and Wages
796	---	---	796	630		658	658	658	Salaries and Wages (CRF)
---	---	---	---	166		138	138	138	Employee Benefits (CRF)
9,782	2	100	9,884	9,868		10,035	10,435	10,435	Total Personal Services
8,986	2	100	9,088	9,072		9,239	9,639	9,639	(From General Fund)
796	---	---	796	796		796	796	796	(From Casino Revenue Fund)
339	---	-89	275	274		339	339	339	Materials and Supplies
14	---	8	22	22		14	14	14	Materials and Supplies (CRF)
1,820	---	2,490	4,310	4,295		2,720	3,270	3,270	Services Other Than Personal
47	---	-8	39	38		47	47	47	Services Other Than Personal (CRF)
849	---	-92	757	749		849	849	849	Maintenance and Fixed Charges
2	---	3	5	3		2	2	2	Maintenance and Fixed Charges (CRF)
Special Purpose:									
119	---	---	119	119	22	119	1,487	1,487	Fiscal Agent - Medical Services for the Aged
703	---	-97	606	449	22	703	703	703	Community Choice/Acuity Audits
---	---	4,337	4,337	1,761	22	---	---	---	ElderCare Initiatives
2,134	330	---	2,464	1,937	24	2,134	2,134	2,134	Payments to Fiscal Agent - PAA
100	---	-100	---	---	55	100	100	100	New Jersey Easy Access Single Point-of-Entry (NJEASE)
---	170	---	170	170	55	170	170	170	Arthritis Quality of Life Initiative Act
50 ^S	---	---	50	50	55	---	---	---	Demonstration Adult Day Care Center Program-Alzheimer's Disease
410	---	---	410	410	55	410	410	410	Federal Programs for the Aging (State Share)

HEALTH AND SENIOR SERVICES

Orig. & (S)Supplemental	Year Ending June 30, 2000					Year Ending June 30, 2002			
	Reapp. & (R)Recpts.	Transfers & (E)Emergencies	Total Available	Expended		Prog. Class.	2001 Adjusted Approp.	Requested	Recommended
GRANTS-IN-AID									
34,669	---	---	34,669	34,669	Payments for Lifeline Credits (CRF)	28	34,669	34,669	34,669
36,171	---	-2,499	33,672	33,672	Payments for Tenants Assistance Rebates	28	36,171 (g) 23,000 S	36,171	36,171
---	464	---	464	464	Arthritis Quality of Life Initiative Act	55	464	464	464
7,539	---	---	7,539	7,539	Purchase of Social Services	55	8,130	8,130	8,130
---	---	---	---	---	ElderCare Advisory Commission Initiatives	55	3,500	3,500	3,500
---	---	150	150	150	Interagency Council on Osteoporosis--Seniors	55	---	---	---
440	---	---	440	440	Cost-of-Living Adjustment, Senior Services	55	---	253	253
440	---	---	440	440	Cost-of-Living Adjustment, Deferred Cost, Senior Services	55	---	1,146	1,146
---	---	392	392	392	Salary Supplement for Direct Service Workers	55	---	---	---
657	---	---	657	657	Alzheimer's Disease Program	55	733	733	733
753 S	---	---	753	49	Demonstration Adult Day Care Center Program-Alzheimer's Disease	55	---	---	---
1,612	338	---	1,950	1,879	Demonstration Adult Day Care Center Program-Alzheimer's Disease (CRF)	55	2,483	2,483	2,483
100	---	---	100	100	Adult Day Health Center, St. Barnabas Medical Center	55	200	---	---
37	---	---	37	37	Interfaith Caregivers, Inc. of Burlington County	55	---	---	---
768	---	---	768	768	Adult Protective Services	55	824	824	824
1,718	---	---	1,718	1,718	Adult Protective Services (CRF)	55	1,752	1,752	1,752
1,610	---	---	1,610	1,610	Senior Citizen Housing-Safe Housing and Transportation (CRF)	55	1,642	1,642	1,642
---	---	---	---	---	Hunterdon County Department of Human Services - LINK Program	55	100	---	---
50	---	---	50	50	American Red Cross, Union County and Plainsboro Chapter	55	---	---	---
4,841	1	---	4,842	4,801	Respite Care for the Elderly (CRF)	55	5,054	5,054	5,054
1,870	---	---	1,870	1,866	Congregate Housing Support Services (CRF)	55	1,907	1,907	1,907
950	---	---	950	950	Home Delivered Meals Expansion (CRF)	55	969	969	969
STATE AID									
Distribution by Fund and Program									
3,713	5	---	3,718	3,717	Programs for the Aged	55	5,913	6,533	6,533
3,713	5	---	3,718	3,717	Total State Aid		5,913	6,533	6,533
Distribution by Fund and Object									
State Aid:									
---	---	---	---	---	Cost-of-Living Adjustment, Senior Services	55	---	620	620

HEALTH AND SENIOR SERVICES

Year Ending June 30, 2000					Year Ending June 30, 2002				
Orig. & (S) Supplemental	Reapp. & (R) Recpts.	Transfers & (E) Emergencies	Total Available	Expended	Prog. Class.	2001 Adjusted Approp.	Requested	Recommended	
1,163	5	---	1,168	1,167					
2,550	---	---	2,550	2,550					
1,018,776	59,908	7,710	1,086,394	1,079,037					
STATE AID									
					County Offices on Aging	55	2,679	2,679	2,679
					Older Americans Act-State Share	55	3,234	3,234	3,234
					Grand Total State Appropriation		904,838	745,173	745,173
OTHER RELATED APPROPRIATIONS									
Federal Funds									
669,127									
500 ^S	18,596	307	688,530	686,472	Medical Services for the Aged	22	949,072	1,268,909	1,268,909
39,247									
92 ^S	2,581	---	41,920	29,457	Programs for the Aged	55	41,025	41,103	41,103
420	---	---	420	328	Office of the Ombudsman	56	420	420	420
---	---	---	---	---	Office of the Public Guardian	57	200	250	250
709,386	21,177	307	730,870	716,257	Total Federal Funds		990,717	1,310,682	1,310,682
All Other Funds									
---	900,278 ^R	---	900,278	900,115	Medical Services for the Aged	22	---	---	---
---	190	---							
---	38 ^R	---	228	88	Programs for the Aged	55	150	150	150
---	92	---	92	88	Office of the Ombudsman	56	---	---	---
---	380 ^R	---	380	381	Office of the Public Guardian	57	420	550	550
---	900,978	---	900,978	900,672	Total All Other Funds		570	700	700
1,728,162	982,063	8,017	2,718,242	2,695,966	GRAND TOTAL ALL FUNDS		1,896,125	2,056,555	2,056,555

Notes

- The FY2001 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.
- Due to an enhanced federal match from the Intergovernmental Transfer, the FY2001 adjusted amount reflects a \$250 million offset and the FY2002 requested and recommended increase has been adjusted by \$247.3 million.
- The FY2002 amount represents partial costs of the Pharmaceutical Assistance to the Aged and Disabled program. The remainder is funded by the Casino Revenue Fund. The FY2001 amount was supplemented by both the Casino Revenue Fund and the Tobacco Settlement Revenue.
- 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. In FY2002, \$58,359,000 has been shifted to the General Fund.
- The FY2001 Appropriation of \$253,000 has been distributed to the appropriate grant accounts.
- The FY2001 Appropriation of \$1,428,000 has been distributed to the appropriate grant accounts.
- The FY2001 adjusted appropriation includes \$23,000,000, of which up to \$15,000,000 may be transferred to other State energy assistance programs in accordance with pending legislation.

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, 2001, in the Payments to Fiscal Agent-PAA account are appropriated.

Receipts from the Office of the Public Guardian are appropriated.

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

The amounts hereinabove appropriated for Payments for Medical Assistance Recipients-Nursing Homes are available for the payment of obligations applicable to prior fiscal years.

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

All funds recovered pursuant to P.L.1968, c.413 (C.30: 4D-1 et seq.) and P.L.1975, c.194 (C.30: 4D-20 et seq.) during the fiscal year ending June 30, 2002 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 2002 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 CFR. 447.205.

Notwithstanding any other law to the contrary, effective July 1, 1996, reimbursement for nursing facility services shall be 90% of the per diem rate when a Medicaid beneficiary is hospitalized. As in the past, these payments shall be limited to be the first ten days of the hospitalization. Medicaid reimbursement for nursing facility services shall be discontinued beyond the tenth day of the hospitalization.

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, 2001; 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 co-payment 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 2002. All revenues from such rebates during the fiscal year ending June 30, 2002, 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, 2001, 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. In addition, effective July 1, 2001, no funds shall be expended for a brand-name drug unless prior authorized by the Medical Exception Process (MEP) vendor under contract with the Department of Human Services.

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, 2001 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, except for those participating in the Voluntary Discount Plan.

Notwithstanding the provisions of any other law or regulation to the contrary, effective July 1, 2001 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 15% discount for high volume pharmacies as defined by the Commissioner of Health and Senior Services or a 10% discount for all other pharmacies; (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, 2001 shall remain in effect through fiscal year 2002, 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 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 co-payment.

Notwithstanding any law to the contrary, pharmacists or pharmacy discount programs located within or outside of the State of New Jersey, with the approval of the Commissioner of the Department of Health and Senior Services, may competitively waive, discount, or rebate the co-payment charge for the Pharmaceutical Assistance to the Aged and Disabled program, in whole, or in part, and may dispense up to a 90 day supply on prescription refills, with the voluntary participation of the beneficiary.

From the amount appropriated hereinabove for the Senior Gold Program, an amount not to exceed \$4,300,000 may be transferred to various accounts as required, including Direct State Services accounts, subject to the approval of the Director of the Division of Budget and Accounting.

No funds shall be expended for the Senior Gold Prescription Assistance Program until enabling legislation is enacted.

There is appropriated to the Department of Health and Senior Services, such sums as are necessary, not to exceed \$10,000,000, to increase the reasonableness limit for total nursing care up to 120% of the median costs in the Medicaid nursing home rate setting system in recognition of the nursing shortage in the State, contingent upon the receipt of at least \$336,100,000 in State fiscal year 2002 Intergovernmental Transfer Funds, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding any law to the contrary and subject to the notice provisions of 42 CFR 444.205, for rates implemented on or after July 1, 2000, target occupancy as determined pursuant to N.J.A.C.10: 63-3.16 shall not apply to those facilities receiving enhanced rates of reimbursement (N.J.A.C.10: 63-2.21). The per diem amounts for all other expenses of the enhanced rates will be based upon reasonable base period costs divided by actual base period patient days (but no less than 85 percent of licensed bed days will be used).

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, 2002, 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.

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- For the purposes of account balance maintenance all object accounts in the Medical Services for the Aged program classification shall be considered as one object. This will allow timely payment of claims to providers of medical services but ensure that no overspending will occur in the program classification.
- Notwithstanding the provisions of P.L.1988, c.92 (C.30:4E-5 et seq.), funds appropriated for the Home Care Expansion (HCE) program shall be paid only for individuals enrolled in the program as of June 30, 1996 who are not eligible for the Community Care Program for the Elderly and Disabled or alternative programs, and only for so long as those individuals require services covered by the HCE program. Individuals enrolled in the HCE program as of June 30, 1996, and eligible for the Community Care Program for the Elderly and Disabled may apply to be enrolled in that program.
- Notwithstanding the provisions of P.L.1979, c.197 (C.48:2-29.15 et seq.), or the provisions of P.L.1981, c.210 (C.48:2-29.30 et seq.), or any other law to the contrary, the benefits of the Lifeline Credit Program and the Tenants' Lifeline Assistance Program may be distributed throughout the entire year from July through June, and are not limited to an October to March heating season, and therefore applications for Lifeline benefits and benefits from the Pharmaceutical Assistance to the Aged and Disabled program may be combined.
- Notwithstanding any other law to the contrary, a sufficient portion of receipts generated or savings realized in Casino Revenue Fund Medical Services for the Aged or Pharmaceutical Assistance to the Aged and Disabled Grants-In-Aid accounts from initiatives included in the fiscal year 2002 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 co-payment 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 2002. All revenues from such rebates during the fiscal year ending June 30, 2002, 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. In addition, effective July 1, 2001, no funds shall be expended for a brand-name drug unless prior authorized by the Medical Exception Process (MEP) vendor under contract with the Department of Human Services.
- 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, except for those participating in the Voluntary Discount Plan.
- 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 15% discount for high volume pharmacies as defined by the Commissioner of Health and Senior Services or 10% discount for all other pharmacies; (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, 2001 shall remain in effect through fiscal year 2002, 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 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 co-payment.

HEALTH AND SENIOR SERVICES

- Notwithstanding any law to the contrary, pharmacists or pharmacy discount programs located within or outside of the state of New Jersey, with the approval of the Commissioner of the Department of Health and Senior Services, may competitively waive, discount, or rebate the co-payment charge for the Pharmaceutical Assistance to the Disabled program, in whole, or in part and may dispense up to a 90 day supply on prescription refills, with the voluntary participation of the beneficiary.
- 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.
- The unexpended balance as of June 30,2001 in the Demonstration Adult Day Care Center Program- Alzheimer's Disease (CRF) account is appropriated.
- Notwithstanding any law to the contrary, of the amount appropriated hereinabove for Respite Care for the Elderly account, \$2,000,000 shall be charged to the Casino Simulcasting Fund.
- The unexpended balance as of June 30,2001 in the Congregate Housing Support Services account is appropriated.

DEPARTMENT OF HEALTH AND SENIOR SERVICES

Language Recommendations -- Direct State Services - General Fund

- Notwithstanding the provisions of any law to the contrary, 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. Of the funds remaining, an amount not to exceed \$11,000,000 is available for payments to Federally Qualified Health Centers. Any 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, 2001 in the Health Care Subsidy Fund received through the .53 percent annual assessment on hospitals made during fiscal year 2001 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.
- In addition to the amount hereinabove, receipts from the Federal Medicaid (Title XIX) Program for health services related programs throughout the Department of Health and Senior Services are appropriated, subject to the approval of the Director of the Division of Budget and Accounting

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.

HEALTH AND SENIOR SERVICES

In order to permit flexibility in implementing the ElderCare Advisory Commission Initiatives within the Programs 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.

There are appropriated such sums as are necessary to counties to satisfy obligations incurred in connection with the execution and delivery of Intergovernmental Transfer Agreements. There are also appropriated such additional sums to make payments to additional counties who have not signed Intergovernmental Transfer Agreements as of July 1, 2001 equal to 50% of the local match required to earn federal Peer Grouping Medicaid matching funds contingent upon the receipt by the State during FY2002 of at least \$266,800,000 in federal Intergovernmental Transfer funds, based upon an approved State Plan. The State Treasurer shall report to the Governor, the President of the Senate and the Speaker of the General Assembly on the Intergovernmental Transfer funds received by the State.

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, 2001.

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, 2001.

Notwithstanding any other law to the contrary, there are appropriated such amounts to the Department of Health and Senior Services, subject to the approval of the Director of the Division of Budget and Accounting, as are necessary to pay such supplemental payments in accordance with the Medicaid State Plan amendments to any participating governmental entity for certain Class II Governmental Nursing Facilities. There are appropriated to the Department of Health and Senior Services and the Department of the Treasury such additional sums as are necessary to pay costs incurred by the State Treasurer or any other State agency in connection with the execution and delivery of any agreements authorized under P.L.2000, c.28 (C.30:4D-19.2 et seq.), including the costs of professional services, attorneys and other costs necessary to complete the intergovernmental transfer.

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