

CHAPTER 91**ORGANIZATION AND GENERAL POLICY PROVISIONS OF THE COMMISSION FOR THE BLIND AND VISUALLY IMPAIRED****Authority**

N.J.S.A. 30:1-2, 52:14B-3(1) et seq.

Source and Effective Date

R.1990 d.432, effective September 4, 1990.
See: 21 N.J.R. 2753(a), 22 N.J.R. 2716(a).

Executive Order No. 66(1978) Expiration Date

Chapter 91, Organization and General Policy Provisions of the Commission for the Blind and Visually Impaired expires on September 4, 1995.

Historical Note

Chapter 91, formerly contained rules entitled "State Plan on Services to Families and Children," and became effective prior to September 1, 1969, pursuant to authority of N.J.S.A. 44:10-1 et seq. The rules were subsequently amended by R.1972 d.128, effective June 29, 1972. See: 4 N.J.R. 125(c), 4 N.J.R. 189(b). The chapter was repealed by R.1982 d.317, effective September 20, 1982. See: 14 N.J.R. 744(a), 14 N.J.R. 1057(b). Many of the rules have been covered in other parts of the Code, particularly under the Division of Youth and Family Services. Some of the rules were recodified by this promulgation to Chapter 131. See source and effective date for further rulemaking.

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SUBCHAPTER 1. PURPOSE AND SCOPE OF COMMISSION SERVICES**10:91-1.1 Administration of the Commission**

(a) The Commission for the Blind and Visually Impaired (the Commission) is an integral part of the Department of Human Services.

(b) The Commission's entire service delivery system is vested in two Statewide, three regional, one district and two satellite offices. The two Statewide offices offer Statewide

vocational and specialized services. They are coordinated out of the Commission's Central Office in Newark. Educational, independent living, prevention and vocational rehabilitation services are provided through the regional, district and satellite offices. The three regions are: Northern, which includes Bergen, Hudson, Morris, Passaic, Sussex and Warren Counties; Central, which includes Essex, Hunterdon, Mercer, Middlesex, Monmouth, Ocean, Somerset and Union Counties; and Southern, which includes Atlantic, Burlington, Camden, Cape May, Cumberland, Gloucester and Salem Counties.

(c) The Commission is coordinated by a Central Office, located in Newark, that includes staff headed by an Executive Director appointed by the Commissioner of Human Services. It provides support functions to the Statewide, regional, district and satellite offices. Some of these functions are policy and procedure development and publication, management and fiscal services, contract and information systems services, monitoring and staff training. Policy and procedural manuals, as they are prepared, shall be available to the public.

(d) The Commission licenses and supervises vending stands at various locations throughout the State, the majority of which are in governmental buildings (see: N.J.A.C. 10:97).

(e) The Commission operates:

1. The Joseph Kohn Rehabilitation Center;
2. The George F. Meyer Instructional Resource Center;
3. The Technical Aids Center; and
4. Camp Marcella, a summer camp for blind and visually impaired children.

10:91-1.2 General purpose and scope of services

(a) The New Jersey Commission for the Blind and Visually Impaired is mandated by a 1910 State law, N.J.S.A. 30:6-1, which states it, "shall provide all means which it deems feasible for ameliorating the condition of the blind and visually impaired."

(b) The Commission defines its mission as promoting eye health and assisting individuals with vision problems to reach their potential by whatever means possible.

(c) The Commission recognizes two major thrusts in carrying out this mission, which are:

1. Working with the community in regard to education and attitudes concerning visual impairment; and
2. Providing client services to persons with vision problems.

(d) For all of its clients, the Commission seeks to provide or insure access to those services which will enable them to obtain their fullest measure of self-reliance, to improve their quality of life, and to be treated with dignity and worth as individuals and fully integrated members of their community.

(e) To achieve this mission, the Commission has established the following goals for itself and for the New Jersey community serving the blind and visually impaired:

1. Prevention Goal: Because 50 percent of all blindness and loss of vision can be prevented or minimized, the Commission shall use its resources to publicize, maximize, coordinate, and increase efforts to conduct programs of education and detection to prevent blindness, to retain or restore vision, and to increase public awareness of the causes and treatment of vision loss; and

2. Independent Living Goal: The Commission shall provide the opportunity to persons who are blind or visually impaired to achieve their maximum level of independence and productive functioning in the most appropriate, least restrictive setting.

Case Notes

Administrative law judge did not have jurisdiction to conduct "due process" hearing to determine financial responsibility of Department and its subagency for special education costs of blind, retarded child. L.P. v. Edison Bd. of Educ., 265 N.J.Super. 266, 626 A.2d 473 (L.1993).

Superior Court, Law Division did not have jurisdiction to conduct "due process" hearing to determine financial responsibility of Department and its subagency for special education costs of child. L.P. v. Edison Bd. of Educ., 265 N.J.Super. 266, 626 A.2d 473 (L.1993).

10:91-1.3 Purpose and scope of educational services

(a) The primary objective of the Commission's Educational Service Program is to provide those services which allow visually impaired students to participate in all classroom activities. To meet this objective, the Commission shall provide to visually impaired students either the services of itinerant instructors of the blind and partially sighted who visit clients in need of direct instruction at their school and/or home or the services of specialists who provide technical assistance to the teachers and parents of visually impaired, developmentally disabled students.

(b) Those students served by a Commission itinerant instructor are considered to be in need of both instructional (for example, instruction in the use of braille, low vision aids, or adaptive techniques) as well as non-instructional services (for example, consultation with the teacher to suggest ways to fully integrate the student into the classroom program).

(c) The students served by specialists usually require only non-instructional services. Both students served by itinerant instructors of the blind and partially sighted and students served by specialists of the visually impaired and developmentally disabled shall also be provided with accommodative aids, materials and/or equipment through the Meyer Instructional Resource Center (see: N.J.A.C. 10:92).

10:91-1.4 Purpose and scope of allied independent living services

The major objectives of the Commission's independent living services are the provision of services related to the instruction of visually impaired individuals by rehabilitation instructors in techniques for performing activities of daily living; traveling skills by orientation and mobility instructors; and meeting social service needs by social workers. Shopping, meal preparation, general maintenance of the home, walking to the mailbox, reading one's mail, enjoying a hobby, and washing clothes are examples of activities of daily living tasks which people carry out on a routine basis. These tasks are included within that group of activities which are a part of one's daily routine, and which permit people to live independently.

10:91-1.5 Purpose and scope of allied prevention services

(a) The main goal of the programs within the Commission's prevention planning area is to prevent, delay the onset of, and/or stabilize the effects of a visual problem. The objective is to alert individuals and/or their caregivers to the need to seek appropriate eye care. If these individuals cannot afford or have no means of paying for the required treatment, then the agency shall assist such persons either financially or through referral to existing benefit programs.

(b) The Commission includes six programs within its prevention services area. Five of these make available free eye screenings or examinations to members of specific target populations, for example, persons with diabetes, preschool children, persons existing on a low income, and children of migrant laborers. The other program within prevention services makes available medical casework services to both indigent persons in need of vision related medical treatment as well as visually impaired individuals who are in need of either health education, for example, instruction in techniques for self-administration of insulin, and/or low vision services. Through these programs, the Commission is able to provide a rather comprehensive package of prevention services (see: N.J.A.C. 10:91-4.1).

10:91-1.6 Purpose and scope of vocational rehabilitation (VR) services

(a) The primary goal of the programs included within vocational rehabilitation (VR) services is to assist visually impaired individuals to obtain and maintain suitable employment. In the vernacular of vocational rehabilitation, someone is rehabilitated when placed into employment. Employment includes both wage earner positions (for example, competitive, sheltered, or self employment), as well as homemaking which is a non-wage earner position.

(b) Vocational rehabilitation services may be any goods and services necessary to assist an eligible individual in obtaining his or her vocational goal, including, but not limited to the following:

1. Counseling and guidance;

2. Diagnostic and evaluative services;
3. Services which are of a restorative nature, for example, surgery or low vision aids;
4. Higher education, vocational and/or adaptive skills training;
5. Daily living expenses while receiving another VR service;
6. Job placement services;
7. Other services such as readers or sign language interpreters; and
8. Services after a person is employed.

10:91-1.7 Legal authority to provide services

(a) The Commission for the Blind and Visually Impaired operates under a variety of State and Federal laws. These include the State legislation which created the Commission and made it a division of the Department of Human Services, as well as the Federal Rehabilitation Act of 1973 as amended, and the Education for All Handicapped Children Act of 1975, as amended.

(b) Pursuant to N.J.S.A. 30:6, the Commission for the Blind and Visually Impaired is mandated to provide services to blind and visually impaired people in order to "ameliorate" their condition. Specifically, the Commission is legally authorized to:

1. Maintain a register of all the blind within the State;
2. Fund and provide vocational training;
3. Pay for medical and surgical equipment;
4. Study the causes of blindness and undertake prevention programs;
5. Administer a vending stand program;
6. Provide instruction and assist in suitable educational placement for blind, visually impaired and multi-handicapped children; and
7. Promote and regulate the sale and distribution of products made by blind and visually impaired persons pursuant to N.J.A.C. 10:96.

(c) The Rehabilitation Act of 1973 (P.L. 93-112), as amended by the Rehabilitation Act Amendments of 1974 (P.L. 93-516), 1978 (P.L. 95-602), and 1986 (P.L. 99-506) is the Federal statute governing State administration of federally funded vocational rehabilitation services. The provisions of this Act are implemented in 34 CFR Parts 361, 365 and 370.

(d) In the State Plan submitted by the New Jersey Department of Labor, Division of Vocational Rehabilitation Services (DVRS), the Commission is designated the "sole State agency for the Blind" in New Jersey. This designation

means that the Commission is the only State agency which is legally authorized to provide vocational rehabilitation services to blind and visually impaired persons.

(e) Because of the Commission's legal authority to provide vocational rehabilitation services to blind and visually impaired persons, DVRS and the Commission share the Federal VR Grant annually allotted to New Jersey. To clarify which agencies will be responsible for which clients, the Commission and DVRS have a written agreement pursuant to 34 CFR 361.5. A copy of the agreement may be obtained by contacting the Commission's toll free number (1-800-962-1233). The most recent DVRS/Commission agreement provides in summary that:

1. Where an individual has central vision of 20/70 or more in the better eye with correction and there is little likelihood that vision is deteriorating, the responsibility for providing rehabilitation services rests with DVRS;
2. Any individual who has an eye problem requiring surgery is considered to have a serious impairment and shall be referred to the Commission by DVRS;
3. Any other individual who DVRS finds has a serious visual problem or a work placement problem because of his or her vision shall be referred to the Commission by DVRS; and
4. Wherever necessary the respective agencies shall consult one another in order to review and clarify the status of the client so that referrals can be expedited to the agency which can better serve him or her.

(f) The Education of All Handicapped Children Act of 1975 (P.L. 94-142), as amended by the Education for All Handicapped Children Act Amendments of 1986 (P.L. 99-457), is the Federal statute guaranteeing handicapped children, ages three through 21, a "free appropriate public education emphasizing special education and related services." The Act provides formula grants to states to fund these services. The provisions of the Act are implemented in 45 CFR Parts 106b, 116b, 121a.

(g) The Education of All Handicapped Children Act and its implementing regulations apply to all agencies having direct or delegated authority for the education of handicapped children regardless of whether they receive funds under the Act. In New Jersey, these agencies include the New Jersey Department of Education, local school districts, State-operated facilities and the Commission.

(h) As a provider of educational services, the Commission also falls under N.J.A.C. 6:28, Special Education. These rules correspond to the Education of All Handicapped Children Act.

Law Review and Journal Commentaries

Education—Administrative Law—Disabilities. Judith Nallin, 134 N.J.L.J. No. 8, 70 (1993).

Case Notes

Administrative law judge did not have jurisdiction to conduct "due process" hearing to determine financial responsibility of State Department of Human Services and its subagency, Commission for the Blind and Visually Impaired, for special education costs of blind, retarded child, as mandated by Individuals with Disabilities Education Act (IDEA); obligation to provide free and appropriate public education (FAPE) had been imposed exclusively on local boards of education through State Department of Education, which had been designated to handle petitions for due process review of local school board decisions regarding provision of FAPE. *L.P. v. Edison Bd. of Educ.*, 265 N.J.Super. 266, 626 A.2d 473 (L.1993).

Superior Court, Law Division did not have jurisdiction to conduct "due process" hearing to determine financial responsibility of State Department of Human Services and its subagency, Commission for the Blind and Visually Impaired, for special education costs of blind, retarded child, as mandated by Individuals with Disabilities Education Act (IDEA); disputes regarding proper residential placement of developmentally disabled citizens should be processed as "tested cases" under Administrative Procedure Act (APA) and resolved by agency head after trial-type hearing before administrative law judge. *L.P. v. Edison Bd. of Educ.*, 265 N.J.Super. 266, 626 A.2d 473 (L.1993).

10:91-1.8 Purpose and scope of the New Jersey blind register

(a) In accordance with N.J.S.A. 30:6-1, the Commission shall prepare and maintain a register of all blind and visually impaired persons in the State.

(b) In accordance with N.J.S.A. 30:6-15, the Commission is empowered to make inquiries concerning the causes of blindness and the proportion of cases within the State which is preventable, and it is entitled to receive the cooperation of other State and local government agencies in making these inquiries. The Commission shall publish an annual report, including, but not limited to, incidence and prevalence rates of blind and visually impaired persons in all areas of the State.

10:91-1.9 Composition and functions of the Commission's consumer advisory boards

(a) The Commission's consumer advisory boards have been created in order to provide consumers and interested persons the opportunity to evaluate, comment upon and impact on services provided by the Commission. Additionally, the boards review the Commission's administrative policies and procedures and provide input on Commission initiatives. To be eligible for board membership, an individual shall be blind or visually impaired or the parent or guardian or representative of a blind or visually impaired person.

(b) Board membership should include representatives of the disabled and minority communities, as well as senior citizens and parents or guardians of below college level students.

(c) The Board(s) shall consist of members appointed by the Commission's Executive Director and/or the regional or Statewide office managers. There shall be no overrepresentation of existing consumer organizations. There shall be established regional, as well as central, office Boards.

(d) A letter over the Executive Director's and/or the regional or Statewide office manager's signature shall be sent to organized and unorganized blind and visually impaired groups and individuals seeking applicants for membership.

(e) The following persons shall not be eligible for consumer advisory board membership:

1. Paid Commission employees;
2. Paid Commission consultants;
3. Persons employed by an agency under contract with the Commission; and
4. Persons who are related to a Board member by blood or marriage with the exception of ex-officio members who may be related to a Board member. However, this will be limited to one ex-officio member.

(f) Anyone wishing to apply for board membership shall express that desire in writing to the Executive Director or the appropriate regional or Statewide office manager and request an application. The applicants shall hear from the Executive Director or appropriate manager regarding acceptance or denial of their request within 30 days after returning the application.

(g) Boards shall:

1. Comply with the Open Public Meetings Act, N.J.S.A. 10:4-6 et seq.;
2. Choose one of its members to act as chairperson. The chairperson shall automatically have a seat on the executive director's consumer advisory board, representing the regional board;
3. Meet as often as required to conduct the business of the Board; and
4. Determine the location of the meetings.

(h) Board duties and responsibilities are:

1. To serve as an advocating body and to advise Commission administration with regard to the development of services for the blind and visually impaired;
2. To review Commission policy and related programs;
3. To participate in committee related activities and to establish communication networks with other relevant groups;
4. To review the Commission's Annual State Plan of services;
5. To survey client satisfaction with agency services;
6. To comment on legislative proposals;
7. To review Commission program evaluations; and

8. To review the Commission's annual budget.

(i) Terms of office are as follows:

1. Board members may serve for two years and shall serve without compensation;
2. Board members may serve two consecutive terms;
3. Board members shall not be reappointed until two years after their last active term of office;
4. Board members shall choose one of their members to act as chairperson who shall be elected for a term of one year and may serve two consecutive terms, but shall not be reappointed until three years after their last active term of office; and
5. Vacancies shall be filled within 60 days by the Executive Director and/or regional or Statewide office manager as appropriate.

(j) If an unexpired term of office is less than 50 percent of the entire term, a nominee can serve only one additional term of office. If more than 50 percent of the entire term, a nominee can serve two additional terms of office.

(k) The scope of power of a Board is as follows:

1. Board members shall have direct access to the Executive Director and/or regional or Statewide office manager;
2. Board members shall have access to public documents of the Commission such as the State Plan, policy manuals and budget;
3. Board members shall establish committees and/or study groups as they deem necessary and appoint the members thereof; and
4. Board members shall have the right to make recommendations to the Commission and the Department of Human Services concerning any aspects of services for the blind and visually impaired.

(l) Any member of the Board who does not attend three consecutive Board meetings without being excused by the chairperson and does not attend more than 50 percent of the Board's meetings in a single year will upon notification by the Board chairperson be replaced by the Commission's Director. Replacement will be accomplished within three months of that notification.

10:91-1.10 Purpose and responsibilities of the Commission's client service representative

(a) The Commission's client service representative shall assist applicants and clients who are not satisfied with Commission services by seeking better and more timely services. The representative intervenes on behalf of the applicants or clients who are having difficulty with the Commission by identifying the problem and by attempting to resolve it.

(b) The client service representative is a client advocate who directs blind or visually impaired persons to appropriate Federal, State or local agencies mandated to help persons who suspect that they are being discriminated against because of their handicap. For example, the representative assists clients in contacting the New Jersey Department of the Public Advocate, the United States Office for Civil Rights, the New Jersey Division on Civil Rights, or the New Jersey Department of Labor.

(c) The client services representative can be reached by calling the Commission's toll free number, 1-800-962-1233.

10:91-1.11 Request for legal guardianship of a client

Pursuant to the recommendation of the Attorney General's office, neither the Commission, nor any staff member of the Commission, shall be named legal guardian for any Commission client. If any agency or individual wishes to request guardianship, such request shall be directed to the Commission's Chief of Field Operations. The request shall then be forwarded to the appropriate Department of Human Services division, depending on the nature of the client's disability.

10:91-1.12 Definitions

The following words and terms, when used in this Chapter, shall have the following meanings, unless the context clearly indicates otherwise:

"Accommodation" means a process by which a person utilizes alternative techniques to perform vision oriented tasks.

"Active status" means that a person has been found eligible to receive Commission services and the person is currently receiving said services.

"Adaptive skills" means those skills which a visually impaired person has learned allowing them to perform tasks that normally involve the utilization of the visual sense.

"Ancillary caseworker" means a Commission staff person who is providing services to a client but is not the client's primary caseworker.

"Applicant" means a person who has completed the agency's application for service form, but has not yet been found either eligible or ineligible for placement into active status.

"Best correction" means the optimal visual acuity which a person can attain after their visual functioning is evaluated by an eye doctor.

"Competitive employment" means a job wherein the person is paid wages and the job is a position which is also available to non-disabled persons.

"Contested case" means an adversary proceeding, including any licensing proceeding, in which the legal rights, duties, obligations, privileges, benefits or other legal relations of specific parties are required by constitutional right or by statute to be determined by an agency by decisions, determinations, or orders, addressed to them or disposing of their interests, after opportunity for an agency hearing (see N.J.S.A. 52:14B-2). The required hearing must be designed to result in an adjudication concerning the rights, duties, obligations, privileges, benefits or other legal relations of specific parties over which there exist disputed questions of fact, law or disposition relating to past, current or proposed activities or interests. Contested cases are not informational nor intended to provide a forum for the expression of public sentiment on proposed agency action or broad policy issues affecting entire industries or large, undefined classes of people.

"Daily living skills" means those skills which a person learns that allows them to perform personal care activities, for example, dressing, washing and shopping.

"Developmentally disabled" means a severe, chronic disability of a person which is attributable to a mental or physical impairment or combination of mental or physical impairment that is manifest before age 22, is likely to continue indefinitely, results in substantial functional limitations in three or more of the following areas of major life activity, that is, self-care, receptive and expressive language, mobility, self-direction, and capacity for independent living or economic self-sufficiency, and reflects the need for a combination and sequence of special interdisciplinary or generic care, treatment or other services which are of life-long or extended duration and are individually planned and coordinated. Developmentally disabled includes, but is not limited to, severe disabilities attributable to mental retardation, autism, cerebral palsy, epilepsy, spina bifida and other neurological impairments where the above criteria are met.

"Eligible" means that a visually impaired person has met the eligibility criteria set forth for the services they wish to receive.

"Field of vision defect" means that the person cannot detect visual stimuli throughout the entire area being observed which normally can be seen without moving the head or eyes. See definition of "legally blind" in this section.

"Homemaker" means a person who performs the major portion of tasks associated with maintaining a home.

"Independent living" means that a person is able to maximize their level of independent and productive functioning in the most appropriate, least restrictive setting.

"Intake" means the process by which the Commission assesses a person's need, desire and eligibility for agency services.

“Last dollar resource” means that the Commission will execute payment for a service only after all other potential payors have been eliminated.

“Legally blind” means central visual acuity that does not exceed 20/200 in the better eye with best correction or fields of vision that are so limited that the widest diameter of visual field subtends an angle no greater than 20 degrees.

“Low vision” means reduced visual acuity and/or abnormal visual fields which are the result of a disorder in the visual system.

“Non-contested case” means any hearing offered by an agency for reasons not requiring a contested case proceeding under the statutory definition of contested case.

“Preschool” means that period of time between birth and a child’s sixth birthday.

“Primary caseworker” means the Commission staff person who is assigned the responsibility of being the Commission’s main representative to an individual client.

“Referral” means that a person or someone on their behalf has contacted the Commission to investigate the availability of services.

“Resident” means a person who is currently residing in New Jersey, or for the purpose of vocational rehabilitation, in the United States and who is either a United States citizen by birth or naturalization or can provide documentation that they have either applied for and/or been granted permanent residence by the Immigration and Naturalization Service.

“Self-employment” means that a person owns and operates their own business.

“Sheltered employment” means that a person is employed within a controlled environment which utilizes work experience and related services to assist the handicapped individual to achieve a more productive vocational status.

“Similar benefit” means any service or financial assistance for the same services from any other source(s).

“Visual acuity” means the measurement of the ability of the eye to perceive the shape of objects in the direct line of vision and to distinguish detail.

“Visual impairment” means having a condition in which a person has a corrected visual acuity not exceeding 20/70, but not less than 20/200, in the person’s better eye, or in which the peripheral field of the person’s vision has contracted so that the diameter of the visual field subtends an angle no greater than 40 degrees but no less than 20 degrees.

SUBCHAPTER 2. ELIGIBILITY STANDARDS FOR COMMISSION SERVICES

10:91-2.1 Allied independent living and prevention services

(a) Individuals whose visual acuity is better than 20/70 shall be eligible for certain services, if they have a problem in one or both eyes requiring surgery or treatment if such surgery or treatment would prevent vision loss, as follows:

1. Social caseworker assistance, rehabilitation classes and/or teaching or orientation and mobility instruction provided with the approval of the regional manager;
2. Muscle surgery which may contribute to an overall improvement in vision by enabling both eyes to work in unison even if the surgery neither prevents vision loss nor restores vision. Requests for muscle surgery by individuals with visual acuity of 20/70 or better shall be considered for approval by an allied services supervisor on a case-by-case basis; and
3. Medical casework services.

(b) Individuals shall be eligible for all allied services if their best corrected vision is 20/70 or less in their better eye.

(c) Individuals who have field of vision defects shall be eligible for all allied services (see N.J.A.C. 10:91-1.12).

(d) Individuals shall be ineligible for non-surgery or treatment related services if their best corrected vision is 20/50-1 to 20/69 in their better eye except as outlined in (a) above.

10:91-2.2 Education services

(a) Individuals whose best corrected visual acuity is 20/70 or less in their better eye shall be eligible for educational services.

(b) Individuals with field of vision defects shall be eligible for education services (see N.J.A.C. 10:91-1.12).

(c) Individuals with a problem in one or both eyes requiring surgery or treatment with visual acuity better than 20/70 shall be ineligible for educational services.

(d) Individuals whose best correction is between 20/50-1 and 20/69 in their better eye shall be ineligible for educational services.

(e) Education services clients shall meet additional criteria as set forth in N.J.A.C. 10:92.

10:91-2.3 Vocational rehabilitation services

(a) Individuals shall be eligible for vocational rehabilitation services if their best corrected vision is 20/50-1 to 20/69 in their better eye and vision is deteriorating and there is a job placement problem because of vision dysfunction.

(b) Individuals whose visual acuity is better than 20/69 shall be eligible for vocational rehabilitation services if there is a problem in one or both eyes requiring surgery or treatment and if there is a job placement problem because of vision dysfunction.

(c) Individuals whose best corrected vision is 20/70 or less in their better eye shall be eligible for vocational rehabilitation services.

(d) Individuals with field of vision defects shall be eligible for vocational rehabilitation services (see N.J.A.C. 10:91-1.12).

(e) Vocational rehabilitation services' clients shall meet additional criteria pursuant to N.J.A.C. 10:95.

(f) To be eligible for the Vending Facility Program, a person shall meet the definition of legal blindness.

10:91-2.4 Eye reports

(a) Eye reports shall be completed by ophthalmologists or optometrists and forwarded to the client's primary caseworker at the Commission. The eye report shall include an initial report including an eligibility classification and treatment recommendation, a report of any follow-up visits, and a post-operative report. Eye reports are necessary as part of the preliminary diagnostic study, to determine eligibility for Commission services, to develop service plans and to monitor the client's visual progress or lack of progress.

(b) The Commission shall request an eye report when the Commission pays for a client's eye examination, when the client pays for an examination, when a new examination is needed, or when a client has not been examined within the past year and a current eye report is considered necessary.

(c) Eye reports shall be filed in the client's case record.

(d) The caseworker's responsibility is to secure the name and address of a client's eye doctor. If a client has no eye doctor, the caseworker shall provide the client with a list of available doctors. If an eye exam has occurred within the past year, the caseworker shall inform the client that the eye report will be requested directly from the eye doctor.

(e) Commission staff cannot recommend specific doctors. Staff will provide a minimum of three doctors' names to clients in close proximity and accessible from a client's residence. The clients may select the doctor of their choice.

10:91-2.5 Residency requirements

(a) New Jersey residents who meet eligibility standards shall be eligible for all Commission services.

(b) Residents of other states who meet the eligibility standards shall be eligible for Commission services as follows:

1. Eligible for orientation and mobility training;
2. Eligible for educational services if they are receiving care at a New Jersey treatment center and the projected length of stay is not more than six months; and
3. Eligible for vocational rehabilitation.

(c) Resident aliens who meet the eligibility standards shall be eligible for all Commission services.

(d) Non-resident aliens, including people with temporary and student visas, who meet the eligibility standards shall be eligible for Commission services as follows:

1. Eligible for orientation and mobility;
2. Eligible for Educational Services if attending preschool, elementary school or high school; and
3. Other training and job placement related services shall be provided to foreign students attending college full time if funds are available and if the Statewide manager approves pursuant to N.J.A.C. 10:95.

(e) A regional, district or statewide office manager or the Chief of Field Operations shall have the authority to grant exceptions to the Commission's residency requirements in situations where a client will suffer irreversible damage to their visual system if services are not provided within 30 days of initial contact by the Commission. The requests for and the granting of exceptions shall be dealt with on a case-by-case basis.

10:91-2.6 Other educational standards

(a) The Commission shall provide special instruction and/or related services to certain individuals whose visual dysfunction impedes or may impede their progress in elementary and secondary school.

(b) An applicant for special instruction and/or related services shall meet the following eligibility requirements:

1. As set forth in N.J.A.C. 10:91-2.2 and 2.5;
2. He or she is 21 years of age or younger; and
3. He or she has not completed secondary school.

(c) Assessment and evaluation of the need for Commission services is based upon a determination that an individual meets the visual eligibility standards pursuant to N.J.A.C. 10:91-2.2, following which the Commission shall make a further determination as to a student's eligibility for educational services.

(d) Educational needs related to visual loss shall be reviewed by the Commission with the student, his or her parent or guardian and the local school district study team.

1. If it is determined that the student's visual dysfunction adversely affects his or her academic progress, the Commission shall provide educational services; and

2. If it is determined that the student's visual dysfunction does not adversely affect his or her academic progress, but the individual is eligible for other Commission services, he or she shall be referred to allied services.

10:91-2.7 Other vocational rehabilitation (VR) standards

(a) The primary purpose of a VR eligibility determination shall be to identify those visually impaired persons who may be served with VR funds pursuant to 34 CFR 361.31.

(b) The VR counselor shall have the ultimate responsibility, after advice and consultation with the supervisor, ancillary workers and medical consultants, to determine an individual's:

1. Eligibility for VR services;
2. Eligibility for extended evaluation; and
3. Ineligibility for VR services.

(c) Services to determine eligibility, while the client is in applicant status, shall be provided without regard to economic need.

(d) Illegal aliens present in the United States without legal status shall not be eligible for VR services.

(e) Immigrant aliens admitted for the purpose of permanent residence and who possess a valid alien registration card shall be eligible for VR services.

(f) Non-immigrant aliens are individuals admitted for a particular purpose or time period and are expected to return to their home country upon completion of a specific purpose or time period. Examples include:

1. Visitors for business or pleasure;
2. Crewmen of vessels or aircraft; and
3. Students pursuing a course of study.

(g) Non-immigrant aliens may be eligible for VR services if the individual is available to complete an Individual Written Rehabilitation Plan and the individual's temporary registration card (I-94) would allow the client to become employed.

(h) Eligibility shall be determined without regard to sex, race, age, color, religion, national origin, economic need, or category of disability.

(i) In order for an individual to be eligible for vocational rehabilitation services, there shall exist a certification that:

1. The individual has a mental or physical disability which for that individual constitutes or results in a substantial handicap to employment; and

2. Vocational rehabilitation services may be reasonably expected to benefit the individual in terms of employability.

(j) In all cases of legal blindness, severe visual impairment or where a rapidly progressive visual condition exists, the Commission shall have the responsibility for at least providing an evaluation to determine eligibility regardless of other documented disabilities.

10:91-2.8 Notification of ineligibility for allied and education services

(a) The Commission for the Blind and Visually Impaired shall notify by certified mail an individual, other than a preschool vision screening participant, who applied or was referred for Commission services whenever such an individual has been found to be ineligible for services (see N.J.A.C. 10:91-2.1 and 2.2). The Commission shall send this notice within two weeks of the determination that he or she does not meet basic eligibility criteria and cannot receive services.

(b) A caseworker may initially inform individuals of their ineligibility either in person or by telephone, as long as written notice is mailed within the required two-week period.

(c) The ineligibility notice shall state:

1. The Commission's decision;
2. The basis for the decision;
3. The effective date of the decision; and
4. The methods for appealing the decision.

10:91-2.9 Ineligibility for vocational rehabilitation services

(a) An individual may be determined ineligible for VR services for any of the following reasons:

1. "No disability", which means an individual does not have a visual disability which renders him or her eligible for Commission services;

2. "No vocational handicap", which means a client may have a disability, but does not have a handicap to employment; and/or

3. "No vocational potential", which means a client may have a disability and a vocational handicap, but there is no reasonable expectation that vocational rehabilitation services will benefit the person in terms of employability. For example:

- i. There is no vocational potential due to the severity of the disability or combination of disabling conditions; or

ii. There is no vocational potential due to unfavorable medical prognosis.

(b) An individual shall be declared ineligible if he or she fails to meet any of the eligibility criteria (see N.J.A.C. 10:91-2.7(i));

(c) An ineligibility determination shall be made only after consultation with the individual, parent, guardian, or other representative, or after affording a clear opportunity for such consultation.

(d) The individual shall be notified in writing of an ineligibility decision, including the reasons for the decision, and the means for expressing any dissatisfaction and seeking remedy, including the procedures for an administrative review and fair hearing (see N.J.A.C. 10:91-6.2). The client shall receive a copy of the Certification of Ineligibility and an ineligibility letter.

10:91-2.10 Certificate of ineligibility for vocational rehabilitation services

(a) A certificate of ineligibility shall be maintained in all case records when a client is determined to be ineligible pursuant to N.J.A.C. 10:91-2.9.

(b) No ineligibility certificate shall be needed when clients are closed from referral or applicant status for the following reasons which do not constitute a decision of ineligibility.

1. Client death;
2. Client moves out of State or is impossible to contact after reasonable efforts to do so;
3. Client is institutionalized, causing the individual to be unavailable and precluding evaluation, diagnosis, or other essential services for an indefinite or considerable period of time and continuance of an open case would not benefit the individual; and/or
4. Client declines to accept or utilize vocational rehabilitation services after a reasonable effort has been expended to encourage participation.

(c) Appropriate explanations shall be included in the case record when the reason for closure does not fit into any other category and is not related to the eligibility criteria. An individual may decline to participate for reasons determined to be related to the severity of his or her condition, such as emotional problems, which cannot be satisfactorily resolved. The reason for closure is then one of ineligibility instead of unavailability.

10:91-2.11 Presumption of eligibility

(a) A person who meets one of the following criteria will be presumed to be eligible for those services described in N.J.A.C. 10:91-4.1 through 4.3:

1. The person is a former client of the Commissioner who was previously found eligible pursuant to N.J.A.C. 10:91-2.1 through 2.5 and the date on which the person was most recently referred to the Commission is not more than one year after the date on which the person's most recent previous case was closed;

2. The person is a former client of the Commission who was previously found eligible pursuant to N.J.A.C. 10:91-2.1 through 2.5, and whose eye condition, as reported on the most recent eye report the Commission has on file for this person, is one which generally remains stable; or

3. The person is a client of the Division of Developmental Disabilities (DDD) and is being referred to the Commission by a DDD staff person who has documentation on file that the person being referred is visually impaired.

(b) A person shall not be presumed eligible for those Commission services for which there is a financial needs standard (see N.J.A.C. 10:91-3.1 through 3.3).

(c) A person shall not be presumed eligible if in order to receive the services they request must meet the eligibility standards cited in N.J.A.C. 10:91-2.6 and 2.7.

(d) If, at any time, a Commission caseworker receives information which suggests a person who has been presumed eligible may not be eligible, then the caseworker will commence a full eligibility investigation.

SUBCHAPTER 3. FINANCIAL STANDARD

10:91-3.1 Financial need standard and survey

(a) The financial need standard is a test which shall be used to determine a client's ability to pay for certain services. For those clients who meet the test, the Commission shall provide the cost of these services. For clients who do not meet the test, the standard establishes the level of their responsibility toward the cost of those services. The financial aid provided by the Commission shall supplement rather than replace resources available to a client including similar benefits (see N.J.A.C. 10:91-3.6). The Financial Survey Form and the Financial Participation Worksheet are the documents used to gather and analyze information needed to determine financial eligibility. The exception is college tuition assistance where the Commission utilizes the Financial Aid Form which is a standard form utilized by many college applicants for financial aid. The Financial Survey Form and the Financial Participation Worksheet are as follows:

Deductions from Income

Monthly Am't

	Amount	How Often Paid	Paid Up Date	
18. Indebtedness	_____	_____	_____	_____
19. College/training costs	_____	_____	_____	_____
20. Medical care/treatment costs per year _____; less \$1068 = _____; divided by 12 = _____				
21. Second working parent (= \$167)				_____
22. ALLOWABLE DEDUCTIONS FROM INCOME (Total lines 18 through 21)				_____
23. AVAILABLE INCOME (Line 17 minus Line 22)				_____

Liquid Assets

24. Amount of cash on hand or money in the bank	_____
25. Amount invested in savings bonds, stock, bonds, etc.	_____
26. TOTAL LIQUID ASSETS	_____
27. Total number of persons depending on family income, including client	_____
28. Sources of income verification	_____

Medical Insurance (Check Appropriate Box)

Blue Cross _____ Blue Shield _____ Rider J or Major Medical _____
 Medicare _____ A _____ B _____ Medicaid _____ Other _____ (Specify) _____

The information given above is a true statement of my financial condition.

Signature of Client _____

A review of the information on this form on the following date(s) indicated that there had not been a change in the client's financial situation.

_____ Date #1 _____ Date #2 _____ Date #3 _____ Date #4

FINANCIAL PARTICIPATION WORKSHEET

The client is automatically eligible and the calculation below is unnecessary, if, for the corresponding family size, liquid assets (line 26 on the Financial Survey form) are less than the asset allowance shown in column B and available income (line 23 on the Financial Survey form) is less than the monthly income allowance shown in column E. Otherwise, complete this form on the line corresponding to family size of client. If calculations result in "0" or less, enter "0"

	A	B	C	D	E	F	G
Family Size (Line 27)	Liquid Assets (Line 26)	Asset Allowance	Assets Counted (A-B)/12	Available Income (Line 23)	Monthly Income Allowance	Low Income Deduction (E-D)	Participation Amount (C+D-E-F)
1	_____	\$ 2,000	_____	_____	\$1,024	_____	_____
2	_____	4,000	_____	_____	1,351	_____	_____
3	_____	6,000	_____	_____	1,718	_____	_____
4	_____	8,000	_____	_____	2,046	_____	_____
5	_____	10,000	_____	_____	2,454	_____	_____
6	_____	12,000	_____	_____	2,761	_____	_____
Over 6 (each)		(+2,000)			(+144)		
# _____	_____	_____	_____	_____	_____	_____	_____

1. Family size times \$2,000.
2. \$2,761 + \$144 for each one above 6 persons.

ANNUAL FINANCIAL CONTRIBUTION ARRANGEMENT: (See: N.J.A.C. 10:91-3.4)

(b) Family income shall include gross wages before deductions, pensions, income from property and trusts, disability payments, interest and dividends, public assistance payments, and any other funds, not including loans, available to a client or legally responsible person. Dividends or interest from savings or insurance policies shall be counted as income. Only the actual contributions made to the family unit by siblings or other individuals living in the home shall be included as income.

(c) Legally responsible persons shall include spouse, parent or children depending on the ages involved (see: N.J.S.A. 44:4-100 et seq.). Where a client over age 18 is supported by a parent or other responsible persons the full financial resources of the parents or legally responsible relatives shall be counted in establishing family income.

(d) Liquid assets shall include checking accounts, cash, savings, stocks, and bonds (current market value) or income from trusts available to a client or legally responsible person.

(e) A home occupied by a client as a residence is not counted as a resource. Income from property shall be

counted after deducting the cost of operation and maintenance from the gross income received.

(f) Existing insurance policies shall not be counted as a resource but clients are advised to check to see whether they are eligible for disability payments. Disability payments received shall be counted as income at the time they are received.

(g) Personal effects such as personal apparel, jewelry, and household effects shall not be counted as a resource.

(h) Allowable deductions pertains to indebtedness or costs for medical care in excess of \$1,068 per year or college tuitions or other training costs for family members. These shall be deducted from income. Regular payments for indebtedness of an extraordinary nature such as a business loss shall also be considered on a case-by-case basis to be reviewed by the Supervisor.

(i) Low income deduction pertains to clients who derive income from assets and have little or no income from wages or pension payments. Clients as described in this subchapter shall be allowed a low income deduction. This subsection primarily is intended to assist older persons in allowing them to retain assets needed to generate income.

10:91-3.2 Financial need standard applied to allied and education services

(a) The following table indicates the application of the financial need standard to allied and education clients pursuant to N.J.A.C. 10:91-3.1:

Purchase of:	Allied Services	Education Services
Maintenance	yes	no
Training Equipment	not applicable	no ¹
Homemaking: Daily Living Aids	yes (after initial purchase) ²	no
Optical or Accessory Low Vision Aids	no	no
Projection or Electronic Low Vision Aids	yes	See N.J.A.C. 10:92
Transportation	no	no
Hospitalization	yes	yes
Surgery and Treatment	yes	yes
Diagnostic Evaluations	no	no
Prosthetics	yes	yes
Eye Glasses and Lenses	no	no
Textbooks and Materials	no	no
Other Training and Job Placement Related Services	no	no

1. High cost equipment is provided on a loan basis; and

2. The financial need standard does not apply to the initial purchase, but does apply to any subsequent purchases.

10:91-3.3 Financial need standard applied to vocational rehabilitation services

(a) Services not subject to the needs test standard are as follows:

1. The first \$10,000 spent on adaptive equipment;
2. Ancillary services provided by Commission staff including rehabilitation teaching, orientation and mobility, eye health nurse and social work services, etc.;
3. All diagnostic and evaluative assessment services while the client is an applicant or is being evaluated to determine eligibility for VR services, including medical, psychological and vocational assessment;
4. Eye glasses and lenses;
5. Costs incurred for any client attending the Joseph Kohn Rehabilitation Center for tuition, transportation, maintenance, or room and board while in any phase of a client's vocational rehabilitation program;
6. Loan of training or other equipment;
7. Optical or accessory low vision aids;
8. Low vision examination for initial evaluation and if the low vision examiner has recommended low vision aids, up to three follow-up visits;
9. Initial purchases of homemaking aids and aids to daily living;
10. Maintenance and evaluation costs for a client attending any type of diagnostic or evaluation program while in work adjustment or a basic skill training program at a rehabilitation facility, including the Joseph Kohn Rehabilitation Center;

11. On-the-job training, although it is considered to be a training program;

12. Technical Aids Center approved training equipment which remains the property of the Commission;

13. Transportation for work adjustment and basic skills training at a rehabilitation facility, including the Joseph Kohn Rehabilitation Center;

14. Visits to and from a doctor's office or hospital in order to determine eligibility while undergoing evaluation for VR services; and

15. Vocational training for work adjustment and basic skills at a rehabilitation facility including the Joseph Kohn Rehabilitation Center.

(b) Services subject to the needs test standards are as follows:

1. All purchases of adaptive equipment above the first \$10,000 spent;

2. Tuition costs for college training. This includes graduate, undergraduate, and two year college programs;

3. Projection or electronic low vision aids and devices, and follow-up visits including low vision follow-up visits where the low vision examiner has not recommended any low vision aids;

4. Homemaking aids and aids to daily living subsequent to the initial purchase;

5. All maintenance costs not designated as non-needs test items;

6. Medical devices and equipment such as hearing aids, prosthetic devices;

7. All placement equipment purchases. When adaptive equipment is purchased for a client as part of the start-up costs of a small business and the total start-up costs are \$10,000 or less, the needs standard does not apply to the purchase of that adaptive equipment (see small business enterprise program, N.J.A.C. 10:95);

8. Medical costs for physical and mental restoration;

9. Telecommunication and technological aids and devices including Optacon, CCTV, Versabrilie, electronic guiding devices, etc.;

10. All training equipment except that purchased relative to work adjustment training (see Training and vocational programs, N.J.A.C. 10:95);

11. All transportation costs not designated as non-needs test items; and

12. All other vocational training costs not designated as non-needs test items.

10:91-3.4 Financial participation by clients

(a) Participation by a client in the cost of services subject to financial need shall be required up to the calculated participation amount and represents the maximum amount he or she shall be expected to contribute.

(b) The client's financial participation amount shall be applied to services authorized in the one year period from the date on which the financial participation amount was determined except for instances in which there is a change in income or resources during that period of time.

(c) The client and the primary caseworker shall mutually agree upon the financial participation arrangement, which shall be documented in the case file. Payments by the client shall be made directly to the vendor. Clients shall be expected to participate up to the calculated participation amounts as first dollar payments. Whenever the client is to participate by contributing a specific amount to the cost of service, and this is documented on the financial participation worksheet:

1. The caseworker shall prepare an authorization for the Commission's share of the cost; and

2. The copy of the authorization sent to the vendor shall be accompanied by a letter indicating the participation arrangement that has been made with the client. A copy of that letter shall be sent to the client.

(d) The Financial Needs Survey shall be reviewed annually and a new one prepared if there is a change in income or resources.

10:91-3.5 Financial survey form

(a) A financial survey form shall be completed for each new and readmitted client at the time of the first authorization for any services subject to financial need. The client supplies the information and the primary caseworker completes the form.

(b) Survey forms shall not be mailed to clients for completion.

(c) Income shall be verified by pay stubs, or check stubs from pensions or benefits. The caseworker may request the previous year's income tax forms to identify any additional income or to verify the number of individuals reported as dependent on family income. Dependent refers to the total number of individuals dependent on family income, consistent with what is reported on IRS income tax forms.

(d) The client or parents shall be told that the financial survey form and financial participation worksheet shall become part of the client's confidential case record.

(e) Client or parent refusal to provide financial information or to sign the financial survey form shall be noted in the client's case record.

(f) A copy of the completed survey shall be offered to the client, and mailed if requested.

10:91-3.6 Commission as last dollar resource

(a) The concept of similar benefits means that the Commission is the last dollar resource for the purchase of services.

1. "Similar benefits" refers to any service or financial assistance available to visually handicapped persons from a resource other than the Commission. All clients shall be required to use or apply for similar benefits for which they are eligible in order to cover, in whole or in part, the cost of services unless this will cause a significant delay in the provision of services.

2. Similar benefits examples are as follows:

- i. An employer provides placement equipment on the basis of "reasonable accommodation"; and

- ii. Provision of textbooks and materials such as regular print texts and Recordings for the Blind tapes.

(b) Similar benefits shall include the utilization of community resources that may provide financial assistance, benefits, or services to a client.

SUBCHAPTER 4. DESCRIPTION OF SERVICES**10:91-4.1 Services available to all New Jersey residents**

(a) The following services are available to all New Jersey residents:

1. The 800 Unit provides counseling and guidance services, outreach, information and referral services and processes service applications for anyone contacting the Commission's toll free number (1-800-962-1233). This service is staffed between the hours of 9:00 A.M. and 5:00 P.M., Monday through Friday. Persons contacting the Commission after working hours or on weekends and holidays may leave messages on a tape system. Follow-ups shall be made on all inquiries;

2. The diabetic eye disease detection program promotes the early detection and monitoring of retinal and other ocular changes in known diabetics (see N.J.A.C. 10:94);

3. The pre-school vision screening program provides visual acuity and muscle imbalance screening to preschool and kindergarten children, to detect symptoms of amblyopia and other eye conditions that may cause visual impairment or visual loss (see N.J.A.C. 10:94);

4. The glaucoma detection program (Eye Health Week follow-up) provides follow-up for glaucoma suspects and others individually referred from screening

during Eye Health Week which is sponsored by the Medical Society of New Jersey (see N.J.A.C. 10:94);

5. The mobile eye examination units provide eye examinations to individuals for whom eye care is unavailable or available on a limited basis at sites such as housing projects, senior citizens centers, nursing homes, institutions, and facilities for the handicapped (see N.J.A.C. 10:94); and

6. The migrant eye examination program provides eye examinations and follow-up service in conjunction with the New Jersey Department of Education. Service is provided to children of migrant laborers who are attending schools or who are in the preschool handicapped program (see N.J.A.C. 10:94).

10:91-4.2 Services available to all applicants

(a) Vision related medical diagnostic services are available to all applicants as follows:

1. An ophthalmological exam, that is, an initial vision evaluation performed by an ophthalmologist including provision of a report which contains the physician's definitive diagnosis, prognosis, recommendations and classification;

2. An optometric exam, that is, an initial vision evaluation performed by an optometrist including provision of a report and classification; and

3. Evaluation by other vision specialists, such as, an examination by a corneal specialist, neuro-ophthalmologist, retinal specialist, ocular plastic specialist, or pediatric ophthalmologist.

(b) Non-vision related medical diagnostic services are available to all applicants as follows:

1. A general medical examination, that is, an examination performed by an internist, pediatrician or family practitioner with the objective of determining general health status; and

2. An otological exam, that is, an evaluation performed by an otologist which includes a hearing evaluation, detection of abnormalities of the ear canal or ear drum, recommendations for medical/surgical treatment and/or a hearing aid evaluation.

(c) Skills assessment services are available to all applicants as follows:

1. A daily living skills evaluation, that is, an assessment whose outcome is a written report which delineates strengths, weaknesses and needs relative to a client's ability to perform personal management tasks (for example, grooming, cooking);

2. A communication skills evaluation, that is, an assessment whose outcome is a written report which delineates strengths, weaknesses and needs relative to a client's ability to perform reading, writing, listening or other tasks related to receiving or giving information;

3. An orientation and mobility evaluation, that is, an assessment whose outcome is a written report which delineates strengths, weaknesses and needs relative to a client's ability to establish position in and relationship to objects in the environment and to move from one location to another;

4. A functional vision evaluation, that is, an assessment whose outcome is a written report which delineates an individual's strengths, weaknesses and needs relative to a client's ability to use residual vision;

5. An educational skills evaluation, that is, an assessment whose outcome is a written report which delineates strengths, weaknesses and needs relative to a client's ability to perform academic tasks (for example, using textbooks, taking tests);

6. An eye health skills evaluation, that is, an assessment whose outcome is a written report which delineates an individual's strengths, weaknesses and needs relative to a client's ability to secure or carry out the appropriate treatment for an eye condition; and

7. An evaluation by a social worker, that is, an assessment whose outcome is a written report which delineates an individual's needs relative to housing, health care, nutrition, adequate income, family and social supports.

(d) The payment for certain services which ensure the provision of diagnostic and evaluation services as specified in (a) through (c) above are available to all applicants as follows:

1. Transportation, that is, expenditures for transporting clients, and their escorts or attendants, if necessary, incidental to the provision of diagnostic services, including costs of travel and subsistence (or per diem allowance in lieu of subsistence) while in transit; and

2. Other related costs, that is, payment for food or shelter incidental to the provision of diagnostic services.

10:91-4.3 Services available to all eligible clients

(a) Once a determination of eligibility has been made by the Commission the client may receive appropriate services as specified in (b) through (q) below.

(b) Vision related medical diagnostics as follows:

1. A low vision exam, that is, an evaluation which has as its objective a prescription of low vision aids and instruction/training programs to enhance the visual performance of clients with low vision;

2. Vision related diagnostic procedures, such as, ultrasound of the eye (biometry), fluorescein angiogram, electroretinogram (ERG), endothelial cell count, fundus photography, visually-evoked response; and

3. Evaluation by other vision specialist (see N.J.A.C. 10:91-4.2(a)3).

(c) Non-vision related medical diagnostics as follows:

1. Audiological exam, that is, an audiogram (hearing test) performed by an audiologist; and

2. A psychiatric evaluation, that is, an initial mental status examination provided by a psychiatrist in a face-to-face interview which includes a comprehensive history and evaluation of pertinent diagnostic information necessary to arrive at a diagnosis and treatment plan and recommendation for treatment or further diagnostic studies or consultation.

(d) Psychological diagnostics as follows:

1. Evaluation/testing by a psychologist, that is, an assessment which includes Weschler Intelligence Scale or its equivalent, and tests in the following areas as needed: auditory, visual and visual motor, language, gross motor, personality and adjustment.

(e) Skills assessment at the Joseph Kohn Rehabilitation Center in a program of assessment and incidental instruction for clients who travel to and from the center on a daily basis, or who reside at the center, whose outcome is a written report which delineates the strengths, weaknesses, and needs relative to the client's ability to perform tasks associated with personal communication, orientation and mobility, arts and crafts, and industrial arts as well as the outcome of a vocational assessment of the client.

(f) Vision related restorative treatment by low vision specialists for services other than evaluations. Services are provided or supervised by a medical practitioner and are related to lens fitting and/or follow-up visits.

(g) Non-vision related restorative treatment as follows:

1. Services by a psychiatrist, that is, the provision of ongoing treatment including psychotherapy and medication management;

2. Services by a psychologist, that is, group and individual psychotherapy, marriage and family counseling; and

3. Services by other psychotherapist, that is, group and individual psychotherapy by a certified marriage and family counselor or clinical social worker.

(h) Provision of prosthetics and aids as follows:

1. A low vision aid for distance task, that is, an optical device used for observing objects, persons or other visual stimuli which are over five feet away from the user;

2. A low vision aid for near task (other than CCTV), that is, an optical device used for observing printed materials such as books, menus, etc.;

3. A closed circuit television (CCTV), that is, an optical device which utilizes a camera in conjunction with a monitor in order to magnify printed material;

4. Standard eyeglasses, that is, an optical device which consists of a frame and corrective lenses; and

5. Bifocal eyeglasses, that is, spectacles which contain lenses which correct for both a distance and near vision problem.

(i) Provision of training materials or equipment as follows:

1. Orientation and mobility aids, that is, materials and/or adaptive devices designed to help a blind or visually impaired person accommodate to vision loss when moving from one place to another or when establishing spatial position within the environment; and

2. Activities of daily living aids, that is, materials and/or adaptive devices designed to assist a blind or visually impaired person accommodate to vision loss when performing personal management tasks, for example, cooking, shopping, dressing.

(j) Skills acquisition instruction as follows:

1. Communication skills, that is, instruction whose purpose is to help clients acquire skills or other tasks related to receiving or giving information;

2. Use and care of low vision aids, that is, instruction whose purpose is to help clients acquire skills or concepts which will enable them to maintain and use optical or electronic devices designed to enhance low vision;

3. Use of other specialized aids, that is, instruction whose purpose is to help clients acquire skills or concepts which will enable them to maintain and use adaptive materials or devices (see N.J.A.C. 10:91-4.3(i));

4. Health maintenance, that is, instruction whose purpose is to help clients acquire skills or concepts which will enable them to perform tasks associated with maintaining adequate health care;

5. Techniques for accomplishing activities of daily living, that is, instruction whose purpose is to help clients acquire skills or concepts which will enable them to perform personal management tasks;

6. Orientation and mobility techniques, that is, instruction whose purpose is to help clients acquire skills or concepts which will enable them to establish spatial position within the environment and to move from one location to another, for example, home to work, home to school;

7. Methods of caring for the eye, that is, instruction whose purpose is to help clients acquire skills or concepts which will enable them to maintain proper eye care;

8. Use of residual vision, that is, instruction whose purpose is to help clients acquire skills or concepts which will enable them to make maximum use of their visual capabilities;

9. Social worker intervention, that is, instruction and/or other services provided or arranged by a social worker which address socio-economic, medical, housing, recreational, and/or other needs of a client; and

10. Joseph Kohn Rehabilitation Center (JKRC) training program for commuters or residents means a program of instruction whose purpose is to provide clients who travel to and from the center on a daily basis or who reside at the center with the opportunity to acquire skills which are needed to perform specific occupations, for example, operator of a vending facility or clerical professions.

(k) Payment for certain training related costs which ensure the delivery of training services as follows:

1. Transportation, that is, expenditures for transporting a client, and escorts or attendants as necessary, incidental to the provision of training services, including costs of travel and subsistence (or per diem allowance in lieu of subsistence) while in transit; and

2. Other related costs, that is payments for training services that cannot be properly classified under any other category.

(l) Room and board payments for training at the Joseph Kohn Rehabilitation Center, that is, room and board expenses in connection with the center.

(m) Other maintenance costs, that is, food, shelter, rent, clothing and other subsistence expenses not included within room and board payments.

(n) Training related to services to families as follows:

1. Psychiatric and/or psychological service to a member(s) of a client's immediate family (see N.J.A.C. 10:91-4.3(g));

2. Counseling services to a member(s) of a client's family by Commission staff;

3. Medical consultation to a member(s) of a client's family, that is, the provision of information to family members to help them understand the needs of the handicapped individual;

4. Training/Instruction of a member(s) of a client's family, that is, the provision of services in order to prepare a family member to assist a handicapped individual in a program of independent living skills and to adapt to new or altered methods of home management and/or the provision of child care where such facilities are lacking; and

5. Other services to families, that is, any other service or commodity not listed above which is provided to a member of the client's family so that the client's service plan goals might be accomplished.

(o) Provider service programs to meet the special needs of Commission clients (see N.J.A.C. 10:91-5.6).

(p) Special services request as follows:

1. The Commission for the Blind and Visually Impaired, in coordination with other New Jersey state agencies, provides certain special services to those of its clients who are legally blind.

i. Persons who are not legally blind, but whose best corrected visual acuity is less than 20/50-1 shall be eligible for issuance of a State of New Jersey Division of Motor Vehicles Identification card; and

2. Eligible Commission clients may request the following special services:

i. Division of Motor Vehicles identification card;

ii. Fishing license;

iii. Income tax certification letter;

iv. Transit Reduced Fare Program;

v. Guide transportation pass;

vi. Theater identification card;

vii. Park, forest, or reservation (free) admission pass; and

viii. Handicapped parking placard.

(q) Telephone directory assistance 411 exemption as follows:

1. Individuals whose impairment makes it impossible to use a telephone directory shall be allowed an exemption for directory assistance charges for calls made from their homes. These individuals also may obtain New Jersey Bell Calling Cards to make directory assistance calls from other locations;

2. Eligibility standard, that is, an individual classified as legally blind after all possible correction shall be eligible for an exemption from directory assistance charges; and

3. Application procedures are as follows:

i. Eligible individuals in active status with the Commission may obtain from their caseworker application forms for exemption from directory assistance charges. Caseworkers shall assist the clients in filing the exemption form, if necessary; and

ii. Clients whose cases are closed may telephone the Commission by calling 1-800-962-1233 to request an exemption from directory assistance charges. The 800 Number Operator processes the request by conducting a computer search to verify the existence of an acceptable record of legal blindness, entering on an application form that the individual's entitlement to the exemption is verified by the Commission for the Blind and Visually Impaired, 1100 Raymond Boulevard, Newark, NJ 07102, and mailing the application form to the client for further processing.

10:91-4.4 Additional services available to applicants and/or eligible clients

(a) In addition to services specified in N.J.A.C. 10:91-4.1 through 4.3, services may be made available to clients, as described in (b) through (i) below, when determined to be appropriate to a client's individual needs and based on the judgment and recommendation of a qualified professional, such as, a physician, psychologist or learning disability specialist.

(b) Educational services as follows:

1. Psychological diagnostics:
 - i. Learning disabilities evaluation, that is, an examination by a neuropsychologist or other learning disabilities specialist which include informal tests and observational measures, standard psychological tests and neuropsychological tests and which is designed to detect disorders of the cognitive processes involved in understanding, perceiving and/or using language or concepts that are spoken.
2. Skills assessment:
 - i. Camp Marcella provides one or two weeks residential summer camp experience for visually handicapped children.
3. Provision of training materials or equipment:
 - i. Educational aids, that is, materials and/or adaptive devices which are designed to help a blind or visually impaired person accommodate to vision loss when performing academic tasks.
4. Tuition payment:
 - i. Specialized school, that is, payment for attendance at residential schools for the deaf-blind;
 - ii. Nursery or day schools; and
 - iii. Day camp, that is, payment to an organization which operates a program of recreational activities.
5. Skills acquisition instruction:
 - i. Methods of accomplishing educational tasks, that is, instruction whose purpose is to help clients acquire skills or concepts which will enable them to perform academically related tasks; and

ii. Physical education or recreation skills, that is, instruction whose purpose is to help clients acquire skills or concepts which will enable them to participate in sports and/or leisure activities.

6. Room and board payments:

i. For all other training, that is, any room and board cost; and

7. Other services:

i. Reader service, that is, payment to a person under the supervision of a Commission client who reads printed material to and/or writes what is dictated by the client. Reader service is equivalent to amanuensis service.

(c) Allied prevention services as follows:

1. Vision related restorative treatment:

i. Treatment to the eyelids, that is, services provided or supervised by a medical practitioner which are related to procedures involving the eye's lid.

ii. Treatment of the lacrimal system, that is, services provided or supervised by a medical practitioner relating to the tear duct and tearing;

iii. Treatment of the conjunctiva, that is, services provided or supervised by a medical practitioner which are related to conjunctivitis or removal of the pterygium;

iv. Procedures related to repair of the cornea, that is, services provided or supervised by a medical practitioner which are related to an injury to the cornea including lacerations;

v. Procedures related to a corneal transplant, that is, services provided or supervised by a medical practitioner which involves the removal and subsequent replacement of the eye's cornea;

vi. Other treatment of the cornea, that is, services provided by a medical practitioner which are related to the removal of a foreign body, treatment of corneal abrasions, scraping of an ulcer on the cornea, etc.;

vii. Treatment of a condition of the iris, ciliary body, sclera, and anterior chamber, that is, services provided or supervised by a medical practitioner which are related to such treatment;

viii. Treatment related to cataract extraction, that is, services provided or supervised by a medical practitioner which are related to the removal of the eye's natural lens;

ix. Treatment related to insertion of prosthetic lens, that is, services provided or supervised by a medical practitioner which relate to the removal of the eye's natural lens and subsequent implantation of an artificial one;

x. Treatment related to the repair of retinal detachment/tear, that is, services provided or supervised by a medical practitioner which are related to a retinal detachment or tear;

xi. Other treatment related to the retina, choroid or posterior chamber, that is, services provided or supervised by a medical practitioner which are related to the treatment of inflammations or tumors;

xii. Treatment related to vitrectomy, that is, services provided or supervised by a medical practitioner which are related to the removal of the eye's vitreous;

xiii. Treatment related to the extra-ocular muscle, that is, services provided or supervised by a medical practitioner which are related to procedures involving eye muscles;

xiv. Treatment related to the eyeball, that is, services provided or supervised by a medical practitioner which are related to a medical procedure involving the eyeball (that is, enucleation);

xv. Contact lens specialists for services other than evaluation, that is, services provided or supervised by a medical practitioner which are related to lens fitting and/or follow-up visits;

xvi. An assistant surgeon in connection with vision-related treatment; and

xvii. An anesthesiologist for vision related treatment, that is, medical practitioner who is certified to administer anesthesia during a surgical procedure related to the eye.

2. Non-vision related restorative treatment:

i. Services of a Diabetologist, that is, an evaluation by a diabetes specialist.

3. Provision of prosthetics and aids:

i. An intraocular lens, that is, an optical device which is implanted in the eye as a replacement for the eye's natural lens;

ii. Contact lenses, that is, an optical device which rests directly on the eyeball whose purpose is to correct a refractive error;

iii. An ocular prosthetic, that is, a device which occupies the eye socket after an eye has been enucleated; and

iv. Eyeglasses for aphakia, that is, lenses which mount on the face in front of the eyes in order to correct the refractive error caused by the removal of the eye's natural lens.

4. Other vision related medical services:

i. Treatment related drugs or supplies, that is, payment for prescribed medications, biologicals, or supplies which are incident to the restorative services;

ii. In-patient hospitalization, that is, payment to a hospital for services provided to a client who has been or will be admitted to a hospital. Clients who will be having "same day surgery" are admitted to the hospital as patients;

iii. Out-patient hospitalization, that is, payment for hospital care which is provided to a client who has not been admitted to the hospital facilities at which the treatment occurs;

iv. Convalescent care, that is, payment to a convalescent or nursing home or nursing services organization for clients to purchase room, board, nursing home care and other services provided by said facility or organization;

v. X-rays, that is, a diagnostic procedure wherein Roentgen ray photographs of bodily parts are made and then interpreted by a medical professional;

vi. Lab tests, that is, diagnostic and/or pathology procedures such as urinalysis; and

vii. Pre-admission testing, that is, an examination performed prior to same-day surgery or in-patient hospitalization which includes blood pressure measurement, lab work/tests, etc.

5. Other vision restoration related services:

i. Transportation, that is, expenditures for transporting a client, and their escorts or attendants, if necessary, incidental to the provision of restoration services, including costs of travel and subsistence (or per diem allowance in lieu of subsistence) while in transit; and

ii. Other related cost, that is, payment for restoration services that cannot be properly classified under any other category.

6. Provision of training materials or equipment:

i. Health aids, that is, materials and/or adaptive devices which are designed to help a blind or visually impaired person accommodate to vision loss when performing health maintenance tasks, for example, injecting insulin or administering medication.

(d) Vocational rehabilitation (VR) services as follows:

1. Non-vision related medical diagnostics;

i. A dental exam, that is, an evaluation performed or supervised by a dentist whose purpose is to detect maxillofacial problems and/or diseases of the teeth and gums;

ii. A diabetologist exam, that is, an evaluation by a diabetes specialist;

iii. A gastro-intestinal exam, that is, an evaluation performed by a specialist in diseases of the stomach and intestinal tract;

- iv. A cardio-vascular examination, that is, an evaluation performed by a specialist in circulatory disorders of the heart and blood vessels;
- v. A proctological exam, that is, an evaluation performed by a proctologist;
- vi. A chiropractic exam, that is, an evaluation performed by a chiropractor;
- vii. X-rays (see (c)4v above);
- viii. Lab tests (see (c)4vi above);
- ix. An orthopedic exam, that is, an evaluation by a specialist in spine, joint and bone diseases and conditions;
- x. A neurological exam, that is, an evaluation by a specialist in central nervous systems disturbances.
- xi. Evaluation by other medical specialists, that is, all other evaluations by a specialist not listed separately in this series;
- xii. A speech/hearing evaluation, that is, an evaluation by a speech pathologist including an audiogram designed to detect impairment in hearing;
- xiii. A surgical evaluation, that is, an examination or pre-operative consultation by the practitioner who will be performing the surgery;
- xiv. A respiratory exam, that is, an evaluation by a pulmonary lung specialist;
- xv. A dermatological exam, that is, an evaluation by a skin specialist;
- xvi. An oncological exam, that is, an evaluation by a cancer specialist;
- xvii. A genito-urinary exam, that is, an examination performed by a urologist or gynecologist; and
- xviii. An otorhinolaryngological exam, that is, evaluation by an ear, nose and throat specialist.

2. Psychological diagnostics:

- i. Psychometric testing, that is, an assessment of a person's vocational skills, career preferences and performance.

3. Skills assessment:

- i. A vocational/pre-vocational evaluation, that is, an assessment whose outcome is a written report which delineates strengths, weaknesses and needs relative to a client's ability to perform tasks associated with a particular job or to carry out job seeking activities;
- ii. A career awareness evaluation, that is, an assessment whose outcome is a written report which delineates an individual's level of knowledge relative to current employment trends, level of ability to make informed career choices, and level of ability to make

informed choices relative to the need for post-secondary education and/or the appropriate post-secondary course of study;

- iii. A self-employment evaluation, that is, an assessment whose outcome is a written report which delineates both an individual's potential for self-employment as well as the probability of whether the individual's self-employment goal will succeed; and

- iv. A home products evaluation, that is, an assessment whose outcome is a written report which delineates a homebound individual's potential for self-employment.

4. Vision related restorative treatment (see (c)1 above);

5. Non-vision related restorative treatment:

- i. Speech/hearing therapist services, that is, provision of training necessary to enable persons with speech/hearing impairments to develop useful communication skills;

- ii. Physical therapist services, that is, provision of treatment necessary to overcome disabilities which interfere with activities of daily living/physical limitations of movement and bodily functions. Treatment can include the application of a range of therapeutic modalities such as exercise, gait training, massage, heat, water, light and electricity;

- iii. Dental services, that is, provision of routine dental health care including cleaning, tooth extraction, filling of cavities, and replacement with artificial materials;

- iv. Occupational therapist services, that is, provision of treatment directed toward an individual's participation in selected tasks designed to restore, reinforce, and enhance performance; facilitate learning of those skills and functions essential for adaptation and productivity or which diminish or correct pathology, and to promote and maintain health. Its fundamental concern is the development and maintenance of the capacity through the life span to perform those tasks and roles essential to productive living;

- v. Gastro-intestinal specialist services (see (d)1iii above);

- vi. Cardio-vascular specialist services (see (d)1iv above);

- vii. Orthopedist services (see (d)1ix above);

- viii. Neurologist services (see (d)1x above);

- ix. Chiropractor services (see (d)1vi above);

- x. E.N.T. specialist services (see (d)1xviii above);

- xi. An assistant surgeon involved with on-vision related surgery;

- xii. An anesthesiologist involved in non-vision related surgery;
 - xiii. Diabetologist services (see (c)2i above); and
 - xiv. Services of other specialists, that is, non-vision restorative treatment provided by a specialist not identified in (d)5i through xiii above.
6. Provision of prosthetics and aids (see (c)3 above);
 7. Other vision related medical services (see (c)4 above);
 8. Other restoration related services (vision or non-vision) (see (c)5 above);
 9. Provision of training or equipment:
 - i. Vocational aids, that is, materials and/or adaptive devices which are designed to help a blind or visually impaired person accommodate to vision loss when performing job related tasks, for example, reading a computer monitor;
 10. Tuition payment:
 - i. College or university;
 - ii. Vocational training, that is, payment for specific job related instruction which is provided by an agency, school or individual;
 - iii. Adjustment training, that is, payment for pre-vocational activities which promote an awareness of and healthy adjustment to the work environment and which provides clients with direct experiences of various types of work; and
 - iv. On-the-job training subsidies, that is, payment to an employer to support vocational training provided to a client by that employer;
 11. Job readiness training:
 - i. Career awareness training, that is, provision of pre-employment counseling and guidance related to occupational choices and career decisions;
 - ii. Job clubs, that is, counseling and guidance provided on a group basis to help clients learn the basic skills for obtaining employment and to offer peer support during the job-hunting process; and
 - iii. Job seeking skills, that is, counseling and guidance relating to resume preparations, dress and personal appearance, filling out applications and writing letters, applying for a job or responding to a job ad, interview techniques and taking employment tests;
 12. Room and board payments:
 - i. For restoration services including hospitalization, that is, expenses incurred for restoration services a client receives while away from home;
 - ii. For placement, that is, expenses incurred by a client in conjunction with job interviews or employment up to the receipt of client's initial pay check; and
 - iii. For all other training, that is, any room and board cost not listed in this paragraph.
 13. Training related to services to families:
 - i. Child care expenses incurred so that client may receive services.
 14. Job placement:
 - i. Occupational exploration, that is, the process by which jobs are analyzed and, if needed, modified, and the client, employers, and supervisors are consulted, advised, and trained;
 - ii. Business Enterprise Program consultation, that is, the provision of assistance to either a vending stand operator on issues related to managing a vending stand or a person who has recently started his or her own business; and
 - iii. Placement tools or equipment, that is, payment for licenses, tools or equipment necessary to accomplish job functions, advertising, initial business insurance premium, initial stock and other start up expenses;
 15. Other services:
 - i. Reader service (see (b)7i above);
 - ii. Services of an interpreter for the deaf, that is, payment to a person who acts as a translator for someone who communicates using a sign language such as AMSLAN; and
 - iii. Interpreter service, that is, payment to a person who acts as a translator for someone who communicates in a language other than English.
- (e) The Vending Facility Program is a VR service program which evaluates, trains and places a person who is legally blind into employment as an operator of a vending facility. The Commission is empowered by the Federal Randolph-Sheppard Act, as amended, as the sole State licensing agency to certify and license blind individuals to operate vending facilities on Federal and non-Federal property in the State (see N.J.A.C. 10:97).
- (f) The Small Business Enterprise Program evaluates VR clients to determine their potential to own and operate an independent business enterprise that is not part of the vending facility program. (see N.J.A.C. 10:95).
- (g) The Homebound Small Business Enterprise Program provides services to VR clients who have a goal of owning and operating a home-based business (see N.J.A.C. 10:95).

(h) The Home Products Program evaluates the work potential of VR clients in the home and provides business consultation and other services to train clients in the production of products in the home. These products are sold to the public at various sites throughout the State (see N.J.A.C. 10:96 and 10:95).

(i) Client Assistance Fund provisions are as follows:

1. The Client Assistance Fund shall be available to assist eligible clients of the Commission in meeting certain financial emergencies. These emergencies may include the following:

i. A client's specific, documented needs have not been met because money budgeted for the client by one or more Commission programs has not been provided for in a timely fashion;

ii. A client faces deprivation of a vital aspect of his or her life, for example, health care, shelter or social needs; and

iii. A client needs the funds to help overcome an immediate crisis or short-term hardship.

2. A client shall request money from the Client Assistance Fund only when the client's family has no readily available money, the client can not obtain funds from any other public or private sources and there are no other financial resources available to the client;

3. The Client Assistance Fund shall not impose a ceiling on the amount made available to a qualifying client. No limitation shall be placed on the number of requests for funds that a qualifying client may make; and

4. Types of allocations (loans or grants) are as follows:

i. Monies from the Client Assistance Fund shall be provided to eligible clients on a loan basis. Exact payment terms and any other relevant terms shall be stipulated to the client orally and in writing before the funds are issued. The client shall sign a standard promissory note which specifies the terms of the loan agreement. Examples of repayment terms are: the client agrees to repay the Client Assistance Fund as soon as he or she receives a social security check to replace the one that was lost; or the client's regular income is sufficient to allow repayment to the client assistance fund without hardship at a minimum rate of \$25.00 monthly; and

ii. Client assistance funds not allocated specifically as loans shall be disbursed as grants. Repayment of grants shall not be required.

Administrative Correction to (d)10iii.
See: 23 N.J.R. 99(a).

SUBCHAPTER 5. CASE MANAGEMENT PRACTICES

10:91-5.1 Referral procedures

(a) Clients will be telephoned within 10 working days from the date of initial contact with the Commission. The supervisor will assign the applicant to a primary caseworker at this time.

(b) All emergency calls shall be responded to immediately.

(c) Referrals may be made by use of the toll-free 800 number available to callers throughout the State (see N.J.A.C. 10:91-4.1(a)1).

10:91-5.2 Intake procedures

(a) The purposes of the intake interview shall be to gain an initial assessment of the applicant's total needs, to familiarize the applicant with Commission services and ways of helping, to respond to the applicant's most immediate or emergency needs, and to determine whether eligibility should be pursued, and, if so, to initiate together with the applicant, the development of a comprehensive service plan.

(b) The applicant survey is a device for gathering significant background information about the applicant during the initial interview. The survey is used by the Commission in identifying the needs of the applicant, making an overall assessment of the situation and developing a service plan. The survey is completed during the intake interview by the caseworker. After completion, the caseworker and the applicant, or his or her parent or guardian, shall sign the survey. The completed survey becomes a part of the applicant case record.

10:91-5.3 Case assignment and transfers

(a) Case assignments and transfers shall be made by a service supervisor or, if necessary, by the office manager.

(b) Case assignments shall be made to the primary caseworker whose area of expertise would involve 50 percent or more of the services to be provided to a client. The primary caseworker shall function as the Commission's main representative to an individual client.

(c) When requested by the primary caseworker, an ancillary caseworker with specialization in an area other than that of the primary caseworker, shall be assigned to provide Commission services.

10:91-5.4 Service plan development

(a) The client and primary caseworker shall discuss and agree to an organized plan of services which addresses the client's needs. This service plan is developed for all clients once a client, parent or guardian has signed an applicant survey form or sent a letter requesting services and is called the Individual Client Service Plan (ISP). Vocational rehabilitation (VR) clients have an additional plan called the Individualized Written Rehabilitation Plan (WRP) which is developed once eligibility for VR services has been determined (see N.J.A.C. 10:91-2.3 and 2.7). The primary caseworker is responsible for completing all service plan documents. Both the client and caseworker shall sign the ISP and IWRP.

(b) The ISP shall be completed at a face-to-face meeting with the client as soon as possible after the client, parent or guardian has signed the applicant survey. The ISP indicates:

1. The type of exams needed to determine the client's eligibility for services;
2. The type of services to be provided;
3. Time frames for service provision;
4. The type of Commission specialist to whom the client will be referred; and
5. The client's comments, if any.

(c) The development and use of the IWRP is mandated by the Rehabilitation Act of 1973, as amended in 1986. (P.L. 99-506, Section 102(b) as amended). The IWRP contains:

1. The long range vocational goal which the services are expected to achieve;
2. The intermediate rehabilitation objectives related to the attainment of the goal;
3. The VR services to be provided with time frames for their provision;
4. The evaluation criteria and time schedule for determining whether the goals and objectives are being met;
5. A provision for an initial assessment of the need for post-employment services; and
6. Prior to case closure, a further reassessment.

(d) The IWRP is intended to insure that the client and primary caseworker shall have discussed and agreed to an organized plan of services addressing all of the client's vocationally relevant rehabilitation needs as documented in the certificate of eligibility.

(e) The IWRP shall further insure the establishment of planned time frames within which the services are to be provided.

(f) The IWRP shall also insure that the progress toward achievement of stated objectives will be regularly evaluated, and that the client, parent or guardian where appropriate shall have been fully informed of the rights and responsibilities that accompany acceptance into the VR program.

(g) The ISP and/or IWRP shall be reviewed with the client in a face-to-face meeting on an annual basis. A new ISP or IWRP shall be drawn up at the annual meeting between the primary caseworker and the client. The ISP or IWRP for the past year shall be annotated to reflect which objectives have or have not been accomplished. Revision of the ISP or IWRP may be necessary due to change in client's goals or objectives, change in a client's condition and/or situation, progress, achievement of objectives, newly identified problems or needs, or unobtainable objectives. For VR clients, an amendment to the IWRP shall be written. At case closure, the current ISP or IWRP shall be annotated to reflect which objectives were or were not achieved.

10:91-5.5 Purchase of services; emergency and immediate need situations

(a) Payment for purchase of services for clients may be made by the Commission when requested, approved and allocated from the Commission funds. Primary and ancillary caseworkers may initiate requests for payment.

(b) Approved purchase of services through a rapid payments system shall be made by the Commission on behalf of a client to respond to an emergency or to purchase those client related services or commodities which cannot be purchased through normal procedures because of the presence of an immediate need.

(c) In emergency situations, an approved rapid payment shall be made within 48 hours of the original request.

(d) In immediate need situations, the rapid payment shall be made within two weeks of the initial request.

(e) Only the following service categories shall be permitted rapid payments:

1. Transportation services;
2. Maintenance services;
3. Prosthetics and aids;
4. Training materials or equipment; and
5. Placement tools or equipment.

(f) Client financial participation toward the expense of Commission purchased services to be utilized shall be based on the level of responsibility set forth in detail in the financial need standard and survey (see N.J.A.C. 10:91-3.1).

(g) Authorized time limits shall be in writing and an authorization shall not exceed three months, unless written approval is obtained from the Chief of Field Operations.

10:91-5.6 Referral to provider agencies

(a) The function of the Commission's program development and contracting unit shall be to develop community based programs with provider agencies to meet the special needs of Commission clients and develop grants to obtain additional funds for specialized program development. The program development and contracting unit shall administer the purchase of service contracts on a Statewide and regional basis.

(b) A client shall be referred to a provider agency for the purpose of achieving specific objectives or goals that the primary caseworker and the client have agreed are best achieved through the assistance of a provider agency. In making the referral, the primary caseworker shall indicate those services the provider agency is to provide. The client's ISP and IWRP shall contain a statement which specifies the fact that a particular provider agency will provide certain services so that the client might accomplish a specific objective or goal. Provided the client has signed a release to do so, information concerning a client's disabilities shall be provided the provider agency, as needed.

(c) On at least a quarterly basis the caseworker shall annotate the client's case record to reflect the outcome of the referral to the provider agency and/or the current status of the client's relationship with the provider agency. Additionally, the caseworker shall report in the client's case record any significant facts relative to the provider agency's service delivery to the client.

(d) All provider agencies shall submit a monthly report to the Commission, the contents of which shall be specified by contract.

10:91-5.7 Release of information and access to records

(a) No client information may be released unless Commission clients or their parents or guardians have consented in writing to such release or by order of a court of competent jurisdiction. This prohibition applies to release of the following:

1. Records from the Commission to outside agencies or practitioners;
2. Records from the Commission for other legitimate purposes; and/or
3. Records from outside agencies or practitioners to the Commission.

(b) A client and/or parent or guardian may authorize the release of confidential information and medical records to or from the Commission by signing a consent to release information form. This form shall specify the sending and receiving party, the purpose for which the release is required, and the date of the release.

(c) Client information may be released to an organization, agency, or individual engaged in audit, evaluation, or

research only for purposes directly connected with the administration of a vocational rehabilitation program, or for purposes which would significantly improve the quality of life for clients and only if the organization, agency, or individual assures that:

1. The information will be used only for the purposes for which it is being provided;
2. The information will be released only to persons officially connected with the audit, evaluation or research;
3. The information will not be released to the involved individual;
4. The information will be managed in a manner to safeguard confidentiality; and
5. The final product will not reveal any client identifying information without the informed written consent of the involved individual, or his or her representative.

(d) A Commission client may inspect and/or copy his or her own records. A client shall have access to all records relating to his or her eligibility for or receipt of assistance.

(e) Access to a client's records will be provided upon the Commission receiving a written request from a client or his or her duly authorized representative.

(f) Access to client information shall be denied when the prescribed procedures are not followed. The client shall be notified of the denial verbally and in writing by the regional or Statewide manager. The written notification shall set forth the reasons for the denial. A copy of the denial shall be placed in the client's case record.

(g) The regional or Statewide manager for the Commission shall forward a request for client access to his or her case records to the supervisor responsible for the client's case records. The supervisor shall contact the client, the client's parent or guardian or the client's attorney to schedule the date and time for review of the client's case records. Reader services shall be provided by the supervisor if the client requires them in order to review his or her case record. Clients or their representatives shall be charged the following fees, pursuant to N.J.S.A. 47:1A-1 et seq., for photocopying materials from the client's case records:

1-10 pages	\$.50 per page
11-20 pages	\$.25 per page
21 pages or more	\$.10 per page

Cross References

See N.J.A.C. 10:97-5.4, Business enterprise program for the blind and visually impaired record confidentiality.

10:91-5.8 Time limitation standards

(a) All education and allied services applicants who have not had an eye examination within the year prior to the date of the application survey will need to schedule and under-

take to have an eye examination within 45 calendar days of the date of the applicant survey.

(b) The following time limitation standards may be exceeded provided the caseworker justifies in writing the need for an extension of the times specified:

1. Within 30 calendar days from the date of referral, an individual shall be placed in applicant status or his or her case shall be closed (see N.J.A.C. 10:91-2.8 and 2.9);

2. Within 60 calendar days of a client being placed in applicant status for education and allied services, the client shall have eligibility determined, or have an individual service plan in effect, or the client's case shall be closed (see N.J.A.C. 10:91-2.8);

3. Within 120 calendar days of a client being placed in applicant status for vocational rehabilitation services, the client is placed in extended evaluation status, or VR eligibility shall be determined, or the client's case shall be closed (see N.J.A.C. 10:91-2.9);

4. VR clients in service plan development shall become involved in a diagnostic program within 90 calendar days of agreement to a service plan between client and primary caseworker. Within 30 calendar days of the completion of the diagnostic program, the Individualized Written Rehabilitation Plan (IWRP) shall be written and signed by the client, parent or guardian.

5. The VR services contained in the IWRP shall be implemented within 90 calendar days of the client's approval of this plan or the case shall be closed if implementation is impracticable (see N.J.A.C. 10:91-2.9); and

6. If a VR client is to receive homemaker training, the training shall commence within 90 calendar days of client's written approval of this vocational plan and shall be completed within nine months of the start of training.

10:91-5.9 Communicable diseases of Commission clients

(a) Upon learning of a client's communicable disease, a supervisor shall consult with the Commission's Administrative Medical Consultant as to what, if any, necessary precautions should be implemented and shall arrange for alternative services to a client where appropriate:

1. The supervisor shall develop a plan for an alternative service arrangement for the client during the duration of the illness; and

2. The caseworker shall notify the client or his or her guardian in writing of established alternative service arrangements and the reasons for such action. The caseworker shall be responsible for the implementation of the alternative service plan.

(b) The Commission shall in all respects comply with statutory and regulatory requirements concerning reporting of communicable diseases (see N.J.A.C. 8:57-1).

10:91-5.10 Reporting institutional abuse of elderly persons

Reporting of institutional abuse of elderly persons shall be undertaken pursuant to N.J.S.A. 52:27G-1 et seq. and N.J.A.C. 5:100.

10:91-5.11 Reporting suspected child abuse or neglect

Reporting of suspected child abuse or neglect shall be undertaken pursuant to N.J.S.A. 9:60-8.8 et seq. and N.J.A.C. 10:129.

10:91-5.12 Critical incidents involving clients

(a) A critical incident means the occurrence of serious accidental injuries to clients or suspected offenses involving injury to clients or their property which shall require the writing of an incident report. Incidents which need not be reported shall be those requiring only minor first aid treatment and which do not involve professional medical treatment, loss of consciousness or restriction of activity or motion.

(b) Incidents shall be verbally reported immediately to the Commission's Chief of Field Operations and Supervisor of Quality Assurance. This initial verbal notification, which is to be followed by a written report, shall be the responsibility of the Commission staff person who first learns of the occurrence of a critical incident, or his or her supervisor or manager and shall include:

1. The names and relationships of the persons involved;
2. The time, date and location of the incident;
3. A description of what occurred; and
4. The steps taken or to be taken to deal with the situation.

(c) Within 24 hours of this initial verbal notification, a written report shall be forwarded to the Chief of Field Operations and Supervisor of Quality Assurance containing the information listed in (b) above, and any other information related to the situation.

(d) Upon receipt of the initial verbal notification, the Commission's Executive and Deputy Directors shall be informed of the incident. All serious incidents shall be reported immediately by the Commission to the Commissioner of the Department of Human Services and its Office of Public Information.

(e) Within seven working days, the Supervisor of Quality Assurance shall initiate a follow-up investigation of the incident:

1. To determine any additional information not initially reported; and

2. To recommend any action or procedures to be taken to prevent a recurrence.

(f) The Commission's Executive Director or their designee shall supervise all follow-up activities, including presentation of recommendations, possible initiation of review by the Department of Human Services' Clinical Review Board, and implementation of all necessary actions.

(g) Based on the follow-up investigation report, the Commission's Chief of Field Operations shall oversee implementation of short- and long-term corrective actions.

(c) The appeal investigator conducting the administrative appeal investigation shall complete it within 30 working days of the time the client's case record shall have been received by him or her. This time limitation applies to both types of administrative appeal investigation.

(d) When the claimant requests an appeal investigation of the papers, the appeal investigator shall conduct an interview with the claimant, and as needed, other involved individuals. Notes of these interviews shall be typed and retained with the investigation records.

(e) When the claimant has requested an in-person administrative appeal investigation, the appeal investigator shall communicate with him or her to schedule the investigation at a mutually convenient day and time between 9:00 A.M. and 5:00 P.M., Monday through Friday. The appeal investigation will be conducted at a regional or central office of the Commission. The appeal investigator will function as chairperson and arrange for minutes to be taken, typed and retained with the investigation records. If the client is unable to arrange for his or her transportation in order to be present at the appeal investigation, the Commission will make arrangements to provide transportation.

(f) The claimant at an in-person administrative appeal investigation will be permitted:

1. To represent him or herself or to be represented by an attorney or another individual;
2. To present his or her reason(s) for the appeal;
3. To recount his or her understanding of the Commission's position about the circumstances resulting in the appeal;
4. To submit additional documents; however, such documents shall be provided to the appeal investigator at least two working days prior to the date of the appeal investigation; and
5. To meet together with the appeal investigator and Commission staff member(s) involved in the appeal and to question them.

(g) A claimant who wishes to represent himself or herself shall be 18 years of age or older.

(h) A claimant who wishes to be represented by counsel shall make those arrangements independent of the appeal investigator, except that the appeal investigator will inform the claimant that a list of private attorneys is available from the bar association of the county where the client is domiciled. The claimant shall assume full responsibility for any and all legal costs incurred. A client who cannot afford a private attorney will be referred to a local legal services office or to the Department of the Public Advocate. Commission claimants who are also vocational rehabilitation services clients shall be referred to the Client Assistance Project (CAP) of the Department of the Public Advocate.

SUBCHAPTER 6. CLIENT APPEAL RIGHTS

10:91-6.1 Recording of concerns by clients

Clients of the Commission for the Blind and Visually Impaired or their agents may record their concerns or problems regarding the timeliness of delivery of services or the adequacy of service by contacting their caseworker's supervisor or, in their absence, the office manager. The client also has the option of recording their concerns or problems with the Commission's Client Service Representative (see N.J.A.C. 10:91-1.10). Clients requesting an administrative appeal of their case may also do this through the Client Service Representative (see N.J.A.C. 10:91-6.2).

10:91-6.2 Administrative appeals

(a) A client (claimant) or his or her parent or guardian shall have the right to request an administrative appeal after all informal means of dispute resolution have been unsuccessful. The claimant may obtain an Administrative Appeal Request form from the caseworker or by telephone from the Client Service Representative, 1-800-962-1233 (see N.J.A.C. 10:91-1.10). Upon request, a claimant will be provided assistance in completing the form which will be forwarded, with relevant attachments, to the Executive Director of the Commission for the Blind and Visually Impaired. The claimant shall note on the form which type of appeal investigation is requested:

1. A review of the papers in a client's file; or
2. An in-person review in which all relevant parties participate.

(b) Upon receipt of a request for an administrative appeal, the Executive Director shall assign a supervisory employee to conduct the appeal investigation and arrange to forward to that employee the client's case record. Neither the appeal investigator assigned this task nor his or her immediate supervisor shall have had any direct part in the dispute under appeal. Additionally, if the administrative appeal has been initiated by a VR services client, the assigned investigator shall have VR experience and knowledge.

Both the Department of the Public Advocate and the CAP may be reached by telephone at 1-800-922-7233 or 1-609-292-9742.

(i) For the purpose of this section and as needed, all correspondence with a client will be in a medium accessible to the client.

(j) Within 25 working days of completing an appeal investigation, the appeal investigator shall submit a written report of his or her findings and recommendations to the Executive Director.

(k) Within five working days of an appeal investigation report being submitted to the Executive Director, the appeal investigator shall forward a registered letter to the allied or education client involved in the appeal, or their parent or guardian advising that:

1. The investigation has been completed;
2. A report of the investigation has been submitted to the Commission's Executive Director; and
3. The Executive Director, upon reviewing the report of the investigation, will immediately inform by registered letter, the client, parent or guardian whether the matter will be disposed of pursuant to (n) or (o) below.

(l) Within five working days of an appeal investigation report being submitted to the Executive Director, the appeal investigator shall forward a registered letter to the vocational rehabilitation client who filed an administrative appeal or their parent or guardian advising that:

1. The investigation has been completed;
2. A report of the investigation containing a recommended decision has been submitted to the Commission's Executive Director;
3. The client, parent or guardian has the right to request an administrative hearing before an administrative law judge if they disagree with the recommended decision;
4. A request for an administrative hearing will be in writing by registered mail from the client, parent or guardian to the Executive Director within 10 days of the client, parent or guardian receiving the registered letter from the appeal investigator; and
5. The Executive Director will notify the client, parent or guardian by registered letter, at the end of the 10 day comment period, whether the matter will be disposed of pursuant to (n) or (o) below.

(m) Based on the report submitted to the Executive Director by the administrative appeal investigator, and within 20 working days of receipt of the report, the Executive Director shall determine if the appeal is a contested versus a non-contested case (see N.J.A.C. 10:91-1.12).

(n) If the Executive Director determines that the administrative appeal represents a contested case or a vocational rehabilitation client or their parent or guardian requests an administrative hearing, the matter is immediately forwarded to the Office of Administrative Law pursuant to the Administrative Procedures Act, N.J.S.A. 52:14B-1 et seq., N.J.S.A. 52:14F-1 et seq., and the Uniform Administrative Procedure Rules, N.J.A.C. 1:1. The Executive Director will advise the client, parent or guardian of this action by registered letter.

(o) If the Executive Director determines that the administrative appeal represents a non-contested case, then the Executive Director shall issue a final decision and forward this decision by registered letter to the client, parent or guardian. The letter shall also contain a statement that any further appeal of this decision shall be made to the Appellate Division of the Superior Court of New Jersey.

(p) Following an administrative hearing of a contested case by an administrative law judge (ALJ), the ALJ renders a recommended decision that may be adopted, modified or rejected by the Executive Director, who by law is empowered to make a final decision in such matter. However, if the Executive Director does not so act in 45 days and unless such time limit is otherwise extended, this recommended decision shall become a final decision in accordance with N.J.S.A. 52:14B-10. The Executive Director shall advise the client, parent or guardian of the final decision and the reason for the decision, by registered letter.

SUBCHAPTER 7. MEDICAL POLICIES AND FEE SCHEDULES

10:91-7.1 Fee schedule

(a) In order to expedite authorizations for medical services, the Commission will maintain a medical fee schedule. This schedule will establish uniform and maximum authorization amounts for medical services. These services fall into one of the following categories:

1. Examinations;
2. Specialized eye procedures;
3. X-Ray, clinical, and lab tests;
4. Eyeglasses;
5. Contact lenses, prosthetics; and
6. Hospital clinic specialty procedures.

(b) As described in (a)1, 2, 3, and 6 above, before the caseworker certifies an authorization/invoice for payment of these services, the vendor shall provide to the client's caseworker a written report which details the services rendered by the vendor, the vendor's findings and recommendations, if any, and/or a description of the impact or the potential impact the service(s) has or will have on the client.

(c) The maximum authorization amounts in the Commission's medical fee schedule shall be established by the Commission's Administrative Medical Consultant. Prior to establishing a maximum amount, the Administrative Medical Consultant will do the following:

1. Review the current rate of payment for the service as established within the Blue Cross/Blue Shield 750 Series;
2. Review the current rate of payment for the service as established by other public health programs, for example, Medicaid or Medicare; and
3. Consult with applicable providers to gain an understanding of what the prevailing rate established by providers is.

(d) All established authorization amounts will be reviewed at least once every two years to determine if any adjustments are to be made to reflect inflation or other factors. Additionally, specific amounts will be reviewed at any time pursuant to a request for review from a provider or a Commission staff person or a change in Commission policy and procedure which will impact the providers associated with a particular Commission service, for example, low vision services.

(e) Changes in established maximum authorization amounts will be reflected in a timely fashion on the Commission's medical fee schedule.

(f) The maximum authorization amount for a medical service or a combination of services not listed on the Commission's medical fee schedule will be established on a case-by-case basis by the Commission's Administrative Medical Consultant.

(g) Exceptions to an established maximum authorization amount will be granted by the Commission's Administrative Medical Consultant based on a written request from a caseworker.

(h) The Commission's medical fee schedule follows:

General examinations:

General vision exam to determine classification including evaluation to determine need for field test	\$ 45.00
Follow-up treatment examination up to four each	25.00
Exam under anesthesia	135.00
General medical examination includes \$50.00 for medical exam and report, \$5.00 for urinalysis and \$5.00 for hemoglobin test	60.00
In-hospital pre-operative medical examination or consultation	60.00
In-hospital follow-up visits up to five each	30.00
Out of hospital pre-operative medical examination or consultation	60.00
Otological examination, including audiogram	75.00
Audiogram only	25.00
Hearing aid evaluation	45.00
Tympanogram	15.00
Dental examination with full mouth X-rays	45.00

Neurological evaluation	65.00
Physical therapy per session, as approved by administrative medical consultant	55.00
Psychiatric, psychological or other psychotherapeutic evaluation, three sessions, each up to	75.00
Individual therapy, one hour	60.00
Speech therapy, per session	55.00
Vision related consultative specialty examinations:	
Corneal examination	60.00
Glaucoma examination and report	60.00
Hereditary evaluation	60.00
Low vision exam for clients whose most recent eye report is one year old or less	100.00
Low vision exam for clients whose most recent eye report is over one year old	125.00
Up to three low vision exam follow-up visits which occur within four months of the date of the initial low vision exam, each	25.00
Low vision exam follow-up visit to fit fresnel prisms	22.00
Motility examination	60.00
Neuro-ophthalmological examination	130.00
Neuro-ophthalmological follow-up exam, up to three allowed	30.00 each
In-hospital consultations, first consultation with detailed report	130.00
Each succeeding day	30.00
Oculo-plastic examination	60.00
Ocular trauma examination	60.00
Orthoptic evaluation	40.00
Orthoptic follow-up exam	25.00 each
Orthoptic therapy, each session	20.00
Out of hospital pre-operative ophthalmic examination or consult	45.00
Pediatric ophthalmological examination	60.00
Pleoptic evaluation	40.00
Pleoptic therapy, each session	20.00
Retinal examination	60.00
Uveitis, tumor evaluation	60.00
Uveitis evaluation follow-up	25.00
Specialized eye procedures:	
Eyelids:	
Excision of cyst	55.00
Chalazion (multiple \$150.00)	80.00
Lesion (tumor)	135.00
Plastic repair of lid laceration:	
Without graft	185.00
With graft	370.00
Surgical correction of entropion or ectropion	345.00
Ptosis surgical repair	I.C.†
Extensive plastic repair of lids and orbits	I.C.†
Incision and drainage of abscess	55.00
Canthotomy	160.00
Excision of xanthoma:	
Unilateral	160.00
Bilateral	320.00
Tarsorrhaphy	160.00
Canthorrhaphy	160.00
Punctal occlusion	160.00
Punctal occlusion, other eye	100.00
Conjunctiva:	
Incision and removal of foreign body:	
Surface	25.00
Imbedded	30.00
Excision—lesion of conjunctiva:	
Biopsy	35.00
Excision of cyst or nevus	80.00
Excision of pterygium	180.00
Repair:	
Conjunctivoplasty with free graft:	
Conjunctival graft	375.00
Buccal mucosa membrane graft	425.00

Suture laceration	50.00	Two muscles, one or both eyes	470.00
Glaucoma procedures:		Three or more muscles, one or both eyes	525.00
Goniotomy	280.00	Lacrimal procedures:	
Peripheral iridectomy, laser or surgical	330.00	Dacryocystorhinostomy	425.00
Filter operation of any kind	400.00	Dacryocystectomy	375.00
Iridotomy by stab incision for iris bombe	200.00	Incision and drainage of lacrimal sac or lacrimal gland abscess	80.00
Cyclo diathermy	230.00	Plastic repair of torn canaliculi	265.00
Cyclo dialysis	370.00	Probing of naso-lacrimal duct	30.00
Cyclo cryotherapy	240.00	Subsequent (Max 4)	20.00
Argon laser or surgical trabeculectomy	400.00	X-ray:	
Cornea:		Skull—less than four views with or without stereo	25.00
Keratotomy:		Skull—complete, four views	45.00
Removal of foreign body from surface	25.00	Chest—single view	45.00
Embedded in Cornea	35.00	Chest two views or stereo	30.00
Keratotomy	240.00	Interpretation of chest—two views or stereo	15.00
Keratoplasty (corneal transplant)	915.00	Chest—three views	40.00
Radial keratotomy (as approved by Administrative Medical Consultant)	635.00	Chest—four views	45.00
Epikeratophakia	635.00	GI series—upper gastrointestinal tract	95.00
Removal of foreign body anterior chamber	370.00	CAT computerized tomography	200.00
Delimiting keratotomy	95.00	Interpretation of CAT Scan	45.00
Cauterization or cryotherapy of lesion of cornea	50.00	Magnetic Resonance Imaging (MRI) of skull, including interpretation	500.00
Crystalline lens:		Special clinical tests:	
Cataract extraction by phaco	615.00	ECG, EKG, Electrocardiogram	25.00
Cataract extraction with intraocular lens insertion	915.00	ECG, EKG interpretation	15.00
Cost of intraocular lens	370.00††	ERG electro retinogram	55.00
Secondary lens implant	615.00	VER electro encephalogram	55.00
Discussion of lens, surgical	215.00	Cardiovascular stress test	85.00
YAG laser posterior capsulotomy	475.00	Electroencephalogram	55.00
Removal of intraocular lens	615.00	Microscopic pathological evaluation of cataract after extraction	5.00
Eyeball:		Laboratory Tests:	
Excision:		Bun, Urea	7.00
Enucleation or evisceration	330.00	CBC (complete blood count)	7.00
With non movable implant	330.00	Creatinine	7.00
With movable implant	375.00	Blood sugar	7.00
Suture for wound or injury:		Hemoglobin	6.00
Non-perforating	140.00	Serology	7.00
Perforating	470.00	Urine	6.00
Retina and vitreous:		SMA 12	60.00
Scleral buckling	845.00	Prothrombin (bleeding time)	6.00
Sealing of retinal tear by argon laser coagulation	630.00	PTT (partial thromboplastin time)	7.00
Focal/Argon or krypton photo-coagulation for Rx of diabetic retinopathy unilateral:		Pre-operative pre-admission testing, including chest x-ray, EKG, SMA 12 and urinalysis	130.00
Unilateral, initial treatment	290.00	Price list for eyeglasses:	
Up to three additional treatments (each)	190.00	Eyeglasses complete with frames prescribed as a result of a general vision examination, no dispensing fee:	
Pan retinal photo-coagulation for vein occlusion, initial treatment	290.00	Single vision—distance or reading, spherical, hyperopia (+) or myopia (-)	60.00
One additional treatment	190.00	Single vision—distance or reading, spherocylindrical, astigmatism in addition to hyperopia or myopia	70.00
Pan retinal photo-coagulation for diabetic retinopathy initial treatment	290.00	Spherical bifocals, corrects both distance and reading	80.00
Up to two additional treatments (each)	190.00	If bifocal "add" greater than + 3.00	95.00
Vitreotomy pars plana approach with or without lensectomy	1,035.00	Sphero-cylindrical bifocals (same as spherical bifocals, except also corrects for astigmatism)	85.00
Cryoablation of retina (blind eye)	240.00	If bifocal "add" greater than + 3.00	100.00
Gas fluid exchange	250.00	Single vision spherical cataract glass	95.00
Endophotocoagulation	250.00	Single vision spherocylindrical cataract glass	100.00
Orbit:		Bifocal—spherical cataract glass	140.00
Plastic repair of orbit:		Bifocal—spherocylindrical cataract glass	150.00
Fracture of floor	655.00	Welsh 4 Drop or OSI cataract glass	180.00
Orbitotomy	375.00	Corning CPF UV lens	205.00
Removal of intra-orbital foreign body	425.00	(Commission low vision consultants suggest that the examining doctor consider prescribing less expensive alternatives to these Corning lenses, that is, Younger PLS 530, 540 and 550)	
Orbitotomy (kroenlein) as in exophthalmos	610.00		
Ocular muscles:			
Strabismus Surgery:			
One muscle	425.00		

Eyeglasses prescribed as a result of a low vision evaluation:

For the first or only pair made, the Commission will pay invoice costs for lenses and frames including a \$25.00 dispensing fee. A copy of the actual invoice shall be submitted for lenses and frames.

For each additional pair provided at the same time as the initial pair, the Commission will pay invoice costs and a \$12.50 dispensing fee. A copy of the actual invoice shall be submitted for lenses and frames.

Eyeglass mounted bioptics or clip-on low vision aids or custom made eyeglasses:

The Commission will pay invoice costs for lenses and frames and a \$50.00 dispensing fee. A copy of the actual invoice shall be submitted for lenses and frames.

Hard contact lenses:

Single lens	135.00
Two lens	225.00
Replacement lens	45.00
Hard pin hold contact lens (Aniridia)	335.00
	up to 390.00

Soft contact lenses (shall be initially approved by Administrative Medical Consultant):

Single lens	180.00
Two lens	270.00
Replacement lens (each)	67.00
Perma lens	200.00
Perma lens (pair)	225.00
Replacement perma lens (each)	73.00

Gas permeable lenses (shall be initially approved by Administrative Medical Consultant):

Gas permeable lens (each)	200.00
Gas permeable lens (pair)	300.00
Replacement gas permeable lens (each)	85.00

Therapeutic lenses (shall be initially approved by Administrative Medical Consultant):

Soft contact bandage lens	200.00
Collagen shield	75.00

Ocular prosthesis:

Custom fitted, hand painted, plastic ocular prosthesis	335.00
Custom fitted, hand painted, plastic scleral shell type ocular prosthesis	390.00
Orbital impression	110.00
Custom fitted temporary ocular prosthesis	55.00
Narcissus lens	390.00

Non-spectacle low vision aids:

The Commission will pay the price as listed in one of the following catalogs:

1. Coburn Optical Company;
2. Lighthouse;
3. American Optical Company; or
4. Designs for Vision.

If an aid or device appears in a catalog distinct from those listed above, the Commission's payment shall be set by its low vision consultant.

Hospital clinic and office specialty procedures:

Beta radiation therapy following excision of pterygium (up to three treatments)	50.00
Bronson ultrasound B scan (intraocular foreign body)	95.00
Color perimetry	90.00
Color fundus photos	45.00
Corneal transplant tissue	235.00
Dark adapt gross rod	130.00
Dark adapt rod and cone plateau	160.00
Electroculography	100.00
Electro retinography	100.00

Endothelial cell count	100.00
Fluorescein angiogram with interpretation and written report	100.00
Fresnell prism monocular	20.00
Fresnell prism binocular	30.00
Fresnell prism adaption	15.00
Gonioscopy	15.00
Goldman lens vitreous exam	15.00
Hess screen exam	60.00
Pachymetry	100.00
Perimetry (visual field)	25.00
Perimetry (threshold)	75.00
Perimetry (octopus)	100.00
Saccadic velocity evaluation	105.00
Services provided by an ambulatory surgical center	700.00
Surgery set up (minor surgery)	60.00
Tonography	35.00
Ultrasonography A (axial length measure monocular)	105.00
Ultrasonography A (axial length measure binocular)	180.00
Ultrasonography B (scan for vitreal and retinal pathology)	100.00
Use of laser and room (only in hospital)	200.00
Visual evoked response evaluation	115.00
Water bath ultrasound-monocular	170.00

† Individual consideration by the Commission's administrative medical consultant.

†† To be allowed as a separate payment when outpatient surgery is performed in a freestanding outpatient facility or when surgery is performed on a "same day surgery" basis at a hospital. However, when surgery is performed on an inpatient basis, the cost of the lens is included in the DRG allowance.

Administrative Corrections: changed "Punctual" to "Punctal"; "eyeglasses" to "eyeglass"; deleted an from Gas permeable lenses and from therapeutic lenses.

See: 23 N.J.R. 99(a).

10:91-7.2 Liability of Commission for missed medical appointments

(a) The Commission shall make no payment to a medical services provider for an education or allied services client who has given 24 hours notice of appointment cancellation.

(b) In the event that a Commission client fails to appear for a scheduled medical appointment or a Commission client fails to cancel a scheduled appointment prior to the date scheduled for the examination, the Commission shall be liable for one-half of the health provider's customary fee.

(c) Pursuant to Federal regulations, the Rehabilitation Services Administration has advised that the Commission shall not be liable for any fees associated with a missed medical appointment by a VR client.

10:91-7.3 Cataract surgery covered costs

The Commission shall cover the cost of outpatient facilities and services related to cataract surgery, for an eligible client, whether the surgery is conventional or employs a special procedure, such as an intraocular lens implant.

10:91-7.4 Payment to psychologists

(a) Psychologists who provide inservice training or who make formal presentations upon the request of the Commission shall be compensated at the rate of \$180.00 per diem.

(b) In the event that an education or allied services Commission client fails to appear for a scheduled test at the psychologist's office or fails to cancel an appointment to be tested prior to the date scheduled for the examination, a psychologist shall be reimbursed in the amount of \$45.00.

(c) In the event that an education or allied services Commission client fails to appear for a scheduled test at the Commission's offices or a location other than the psychologist's office, or fails to cancel an appointment prior to the date scheduled for the examination, a psychologist shall be reimbursed in the amount of \$90.00.