

ACTS
OF THE
First Annual Session
OF THE
Two Hundred and Fifteenth Legislature
OF THE
STATE OF NEW JERSEY



2012

New Jersey State Library

The following laws, enacted by the First Annual Session of the Two Hundred and Fifteenth Legislature, and an index of the laws are published in accordance with R.S. 1:3-1 et seq.

Legislative Services Commission

MEMBERS
of the
FIRST ANNUAL SESSION
of the
Two Hundred and Fifteenth Legislature

SENATORS

FIRST DISTRICT
(Cape May, Parts of Atlantic,
Cumberland)
JEFF VAN DREW

SECOND DISTRICT
(Part of Atlantic)
JIM WHELAN

THIRD DISTRICT
(Salem, Parts of Cumberland,
Gloucester)
STEPHEN M. SWEENEY

FOURTH DISTRICT
(Parts of Camden, Gloucester)
FRED H. MADDEN, JR.

FIFTH DISTRICT
(Parts of Camden, Gloucester)
DONALD NORCROSS

SIXTH DISTRICT
(Parts of Burlington, Camden)
JAMES BEACH

SEVENTH DISTRICT
(Part of Burlington)
DIANE B. ALLEN

EIGHTH DISTRICT
(Parts of Atlantic, Burlington,
Camden)
DAWN MARIE ADDIEGO

NINTH DISTRICT
(Parts of Atlantic, Burlington,
Ocean)
CHRISTOPHER J. CONNORS

TENTH DISTRICT
(Part of Ocean)
JAMES W. HOLZAPFEL

ELEVENTH DISTRICT
(Part of Monmouth)
JENNIFER BECK

TWELFTH DISTRICT
(Parts of Burlington, Middlesex,
Monmouth, Ocean)
SAMUEL D. THOMPSON

THIRTEENTH DISTRICT
(Part of Monmouth)
JOSEPH M. KYRILLOS, JR.

FOURTEENTH DISTRICT
(Parts of Mercer, Middlesex)
LINDA R. GREENSTEIN

FIFTEENTH DISTRICT
(Parts of Hunterdon, Mercer)
SHIRLEY K. TURNER

SIXTEENTH DISTRICT
(Parts of Hunterdon, Mercer,
Middlesex, Somerset)
CHRISTOPHER "KIP" BATEMAN

SEVENTEENTH DISTRICT
(Parts of Middlesex, Somerset)
BOB SMITH

EIGHTEENTH DISTRICT
(Part of Middlesex)
BARBARA BUONO

NINETEENTH DISTRICT
(Part of Middlesex)
JOSEPH F. VITALE

TWENTIETH DISTRICT
(Part of Union)
RAYMOND J. LESNIAK

TWENTY-FIRST DISTRICT
(Parts of Morris, Somerset, Union)
THOMAS H. KEAN, JR.

TWENTY-SECOND DISTRICT
(Parts of Middlesex, Somerset,
Union)
NICHOLAS P. SCUTARI

TWENTY-THIRD DISTRICT
(Part of Hunterdon, Somerset,
Warren)
MICHAEL J. DOHERTY

TWENTY-FOURTH DISTRICT
(Sussex, Parts of Morris, Warren)
STEVEN V. OROHO

TWENTY-FIFTH DISTRICT
(Parts of Morris, Somerset)
ANTHONY R. BUCCO

TWENTY-SIXTH DISTRICT
(Parts of Essex, Morris, Passaic)
JOSEPH PENNACCHIO

TWENTY-SEVENTH DISTRICT
(Parts of Essex, Morris)
RICHARD J. CODEY

TWENTY-EIGHTH DISTRICT
(Part of Essex)
RONALD L. RICE

TWENTY-NINTH DISTRICT
(Part of Essex)
M. TERESA RUIZ

THIRTIETH DISTRICT
(Parts of Monmouth, Ocean)
ROBERT W. SINGER

THIRTY-FIRST DISTRICT
(Part of Hudson)
SANDRA B. CUNNINGHAM

THIRTY-SECOND DISTRICT
(Parts of Bergen, Hudson)
NICHOLAS J. SACCO

THIRTY-THIRD DISTRICT
(Part of Hudson)
BRIAN P. STACK

THIRTY-FOURTH DISTRICT
(Parts of Essex, Passaic)
NIA H. GILL

THIRTY-FIFTH DISTRICT
(Parts of Bergen, Passaic)
NELLIE POU

THIRTY-SIXTH DISTRICT
(Parts of Bergen, Passaic)
PAUL A. SARLO

THIRTY-SEVENTH DISTRICT
(Part of Bergen)
LORETTA WEINBERG

THIRTY-EIGHTH DISTRICT
(Parts of Bergen, Passaic)
ROBERT M. GORDON

THIRTY-NINTH DISTRICT
(Part of Bergen, Passaic)
GERALD CARDINALE

FORTIETH DISTRICT
(Parts of Bergen, Essex, Morris,
Passaic)
KEVIN J. O'TOOLE

MEMBERS OF THE GENERAL ASSEMBLY

FIRST DISTRICT

(Cape May, Parts of
Atlantic, Cumberland)
NELSON T. ALBANO
MATTHEW W. MILAM

SECOND DISTRICT

(Part of Atlantic)
JOHN F. AMODEO
CHRIS A. BROWN

THIRD DISTRICT

(Salem, Parts of Cumberland,
Gloucester)
JOHN J. BURZICHELLI
CELESTE M. RILEY

FOURTH DISTRICT

(Parts of Camden, Gloucester)
PAUL D. MORIARTY
GABRIELA M. MOSQUERA¹

FIFTH DISTRICT

(Parts of Camden, Gloucester)
ANGEL FUENTES
GILBERT L. "WHIP" WILSON

SIXTH DISTRICT

(Part of Camden)
LOUIS D. GREENWALD
PAMELA R. LAMPITT

SEVENTH DISTRICT

(Parts of Burlington, Camden)
HERB CONAWAY, JR
TROY SINGLETON

EIGHTH DISTRICT

(Part of Burlington)
CHRISTHOPER J. BROWN
SCOTT RUDDER

NINTH DISTRICT

(Parts of Atlantic, Burlington,
Ocean)
DIANNE C. GOVE
BRIAN E. RUMPF

TENTH DISTRICT

(Parts of Monmouth, Ocean)
GREGORY P. McGUICKIN
DAVID W. WOLFE

ELEVENTH DISTRICT

(Part of Monmouth)
MARY PAT ANGELINI
CAROLINE CASAGRANDE

TWELFTH DISTRICT

(Parts of Mercer, Monmouth)
ROBERT D. CLIFTON
RONALD S. DANCER

THIRTEENTH DISTRICT

(Parts of Middlesex, Monmouth)
AMY H. HANDLIN
DECLAN J. O'SCANLON, JR.

FOURTEENTH DISTRICT

(Parts of Mercer, Middlesex)
DANIEL R. BENSON
WAYNE P. DeANGELO

FIFTEENTH DISTRICT

(Part of Mercer)
REED GUSCIORA
BONNIE WATSON COLEMAN

SIXTEENTH DISTRICT

(Parts of Morris, Somerset)
JACK M. CIATTARELLI
DONNA M. SIMON²

SEVENTEENTH DISTRICT
(Parts of Middlesex, Somerset)
UPENDRA J. CHIVUKULA
JOSEPH V. EGAN

EIGHTEENTH DISTRICT
(Part of Middlesex)
PETER J. BARNES III
PATRICK J. DIEGNAN, JR.

NINETEENTH DISTRICT
(Part of Middlesex)
CRAIG J. COUGHLIN
JOHN S. WISNIEWSKI

TWENTIETH DISTRICT
(Part of Union)
JOSEPH CRYAN
ANNETTE QUIJANO

TWENTY-FIRST DISTRICT
(Parts of Essex, Morris, Somerset,
Union)
JON M. BRAMNICK
NANCY F. MUNOZ

TWENTY-SECOND DISTRICT
(Parts of Middlesex, Somerset,
Union)
JERRY GREEN
LINDA STENDER

TWENTY-THIRD DISTRICT
(Warren, Part of Hunterdon)
JOHN DiMAIO
ERIK PETERSON

TWENTY-FOURTH DISTRICT
(Sussex, Parts of Hunterdon,
Morris)
GARY R. CHIUSANO
ALISON LITTELL McHOSE

TWENTY-FIFTH DISTRICT
(Part of Morris)
ANTHONY M. BUCCO
MICHAEL PATRICK CARROLL

TWENTY-SIXTH DISTRICT
(Parts of Morris, Passaic)
ALEX DeCROCE³
JAY WEBBER
BETTYLOU DeCROCE⁴

TWENTY-SEVENTH DISTRICT
(Part of Essex)
MILA M. JASEY
JOHN F. McKEON

TWENTY-EIGHTH DISTRICT
(Part of Essex)
RALPH R. CAPUTO
CLEOPATRA G. TUCKER

TWENTY-NINTH DISTRICT
(Parts of Essex, Union)
ALBERT COUTINHO
L. GRACE SPENCER

THIRTIETH DISTRICT
(Parts of Burlington, Mercer,
Monmouth, Ocean)
SEAN T. KEAN
DAVID P. RIBLE

THIRTY-FIRST DISTRICT
(Part of Hudson)
CHARLES MAINOR
JASON O'DONNELL

THIRTY-SECOND DISTRICT
(Parts of Bergen, Hudson)
ANGELICA M. JIMENEZ
VINCENT PRIETO

MEMBERS

9

THIRTY-THIRD DISTRICT
(Part of Hudson)
SEAN CONNERS
RUBEN J. RAMOS, JR.

THIRTY-FOURTH DISTRICT
(Parts of Essex, Passaic)
THOMAS P. GIBLIN
SHEILA Y. OLIVER

THIRTY-FIFTH DISTRICT
(Parts of Bergen, Passaic)
SHAVONDA E. SUMPTER
BENJIE E. WIMBERLY

THIRTY-SIXTH DISTRICT
(Parts of Bergen, Essex, Passaic)
MARLENE CARIDE
GARY S. SCHAER

THIRTY-SEVENTH DISTRICT
(Part of Bergen)
GORDON M. JOHNSON
VALERIE VAINIERI HUTTLE

THIRTY-EIGHTH DISTRICT
(Part of Bergen)
TIMOTHY J. EUSTACE
CONNIE WAGNER

THIRTY-NINTH DISTRICT
(Part of Bergen)
HOLLY T. SCHEPISI
ROBERT SCHROEDER

FORTIETH DISTRICT
(Parts of Bergen, Essex, Passaic)
SCOTT T. RUMANA
DAVID C. RUSSO

¹Sworn in 3/5/12.

²Sworn in 1/30/12 filling post-election
vacancy.

³Died 1/9/12.

⁴Sworn in 2/16/12.

LAWS

ACTS
ENACTED BY THE
First Annual Session
OF THE
Two Hundred and Fifteenth Legislature

CHAPTER 1

AN ACT concerning harassment, intimidation, and bullying in the public schools, amending P.L.2002, c.83 and P.L.2010, c.122, and making an appropriation.

BE IT ENACTED *by the Senate and General Assembly of the State of New Jersey*:

1. Section 3 of P.L.2002, c.83 (C.18A:37-15) is amended to read as follows:

C.18A:37-15 Adoption of policy concerning harassment, intimidating or bullying by each school district.

3. a. Each school district shall adopt a policy prohibiting harassment, intimidation or bullying on school property, at a school-sponsored function or on a school bus. The school district shall adopt the policy through a process that includes representation of parents or guardians, school employees, volunteers, students, administrators, and community representatives.

b. A school district shall have local control over the content of the policy, except that the policy shall contain, at a minimum, the following components:

- (1) a statement prohibiting harassment, intimidation or bullying of a student;
- (2) a definition of harassment, intimidation or bullying no less inclusive than that set forth in section 2 of P.L.2002, c.83 (C.18A:37-14);
- (3) a description of the type of behavior expected from each student;
- (4) consequences and appropriate remedial action for a person who commits an act of harassment, intimidation or bullying;

(5) a procedure for reporting an act of harassment, intimidation or bullying, including a provision that permits a person to report an act of harassment, intimidation or bullying anonymously; however, this shall not be construed to permit formal disciplinary action solely on the basis of an anonymous report.

All acts of harassment, intimidation, or bullying shall be reported verbally to the school principal on the same day when the school employee or contracted service provider witnessed or received reliable information regarding any such incident. The principal shall inform the parents or guardians of all students involved in the alleged incident, and may discuss, as appropriate, the availability of counseling and other intervention services. All acts of harassment, intimidation, or bullying shall be reported in writing to the school principal within two school days of when the school employee or contracted service provider witnessed or received reliable information that a student had been subject to harassment, intimidation, or bullying;

(6) a procedure for prompt investigation of reports of violations and complaints, which procedure shall at a minimum provide that:

(a) the investigation shall be initiated by the principal or the principal's designee within one school day of the report of the incident and shall be conducted by a school anti-bullying specialist. The principal may appoint additional personnel who are not school anti-bullying specialists to assist in the investigation. The investigation shall be completed as soon as possible, but not later than 10 school days from the date of the written report of the incident of harassment, intimidation, or bullying. In the event that there is information relative to the investigation that is anticipated but not yet received by the end of the 10-day period, the school anti-bullying specialist may amend the original report of the results of the investigation to reflect the information;

(b) the results of the investigation shall be reported to the superintendent of schools within two school days of the completion of the investigation, and in accordance with regulations promulgated by the State Board of Education pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), the superintendent may decide to provide intervention services, establish training programs to reduce harassment, intimidation, or bullying and enhance school climate, impose discipline, order counseling as a result of the findings of the investigation, or take or recommend other appropriate action;

(c) the results of each investigation shall be reported to the board of education no later than the date of the board of education meeting next following the completion of the investigation, along with information on any

services provided, training established, discipline imposed, or other action taken or recommended by the superintendent;

(d) parents or guardians of the students who are parties to the investigation shall be entitled to receive information about the investigation, in accordance with federal and State law and regulation, including the nature of the investigation, whether the district found evidence of harassment, intimidation, or bullying, or whether discipline was imposed or services provided to address the incident of harassment, intimidation, or bullying. This information shall be provided in writing within 5 school days after the results of the investigation are reported to the board. A parent or guardian may request a hearing before the board after receiving the information, and the hearing shall be held within 10 days of the request. The board shall meet in executive session for the hearing to protect the confidentiality of the students. At the hearing the board may hear from the school anti-bullying specialist about the incident, recommendations for discipline or services, and any programs instituted to reduce such incidents;

(e) at the next board of education meeting following its receipt of the report, the board shall issue a decision, in writing, to affirm, reject, or modify the superintendent's decision. The board's decision may be appealed to the Commissioner of Education, in accordance with the procedures set forth in law and regulation, no later than 90 days after the issuance of the board's decision; and

(f) a parent, student, guardian, or organization may file a complaint with the Division on Civil Rights within 180 days of the occurrence of any incident of harassment, intimidation, or bullying based on membership in a protected group as enumerated in the "Law Against Discrimination," P.L.1945, c.169 (C.10:5-1 et seq.);

(7) the range of ways in which a school will respond once an incident of harassment, intimidation or bullying is identified, which shall be defined by the principal in conjunction with the school anti-bullying specialist, but shall include an appropriate combination of services that are available within the district such as counseling, support services, intervention services, and other programs, as defined by the commissioner. In the event that the necessary programs and services are not available within the district, the district may apply to the Department of Education for a grant from the "Bullying Prevention Fund" established pursuant to section 25 of P.L.2010, c.122 (C.18A:37-28) to support the provision of out-of-district programs and services;

(8) a statement that prohibits reprisal or retaliation against any person who reports an act of harassment, intimidation or bullying and the conse-

quence and appropriate remedial action for a person who engages in reprisal or retaliation;

(9) consequences and appropriate remedial action for a person found to have falsely accused another as a means of retaliation or as a means of harassment, intimidation or bullying;

(10) a statement of how the policy is to be publicized, including notice that the policy applies to participation in school-sponsored functions;

(11) a requirement that a link to the policy be prominently posted on the home page of the school district's website and distributed annually to parents and guardians who have children enrolled in a school in the school district; and

(12) a requirement that the name, school phone number, school address and school email address of the district anti-bullying coordinator be listed on the home page of the school district's website and that on the home page of each school's website the name, school phone number, school address and school email address of the school anti-bullying specialist and the district anti-bullying coordinator be listed. The information concerning the district anti-bullying coordinator and the school anti-bullying specialists shall also be maintained on the department's website.

c. A school district shall adopt a policy and transmit a copy of its policy to the appropriate executive county superintendent of schools by September 1, 2003. A school district shall annually conduct a re-evaluation, reassessment, and review of its policy, making any necessary revisions and additions. The board shall include input from the school anti-bullying specialists in conducting its re-evaluation, reassessment, and review. The district shall transmit a copy of the revised policy to the appropriate executive county superintendent of schools within 30 school days of the revision. The first revised policy following the effective date of P.L.2010, c.122 (C.18A:37-13.1 et al.) shall be transmitted to the executive county superintendent of schools by September 1, 2011.

d. (1) To assist school districts in developing policies for the prevention of harassment, intimidation, or bullying, the Commissioner of Education shall develop a model policy applicable to grades kindergarten through 12. This model policy shall be issued no later than December 1, 2002.

(2) The commissioner shall adopt amendments to the model policy which reflect the provisions of P.L.2010, c.122 (C.18A:37-13.1 et al.) no later than 90 days after the effective date of that act and shall subsequently update the model policy as the commissioner deems necessary.

e. Notice of the school district's policy shall appear in any publication of the school district that sets forth the comprehensive rules, procedures and

standards of conduct for schools within the school district, and in any student handbook.

f. Nothing in this section shall prohibit a school district from adopting a policy that includes components that are more stringent than the components set forth in this section.

2. Section 5 of P.L.2002, c.83 (C.18A:37-17) is amended to read as follows:

C.18A:37-17 Establishment of bullying prevention programs or approaches.

5. a. Schools and school districts shall annually establish, implement, document, and assess bullying prevention programs or approaches, and other initiatives involving school staff, students, administrators, volunteers, parents, law enforcement and community members. The programs or approaches shall be designed to create school-wide conditions to prevent and address harassment, intimidation, and bullying. A school district may implement bullying prevention programs and approaches that may be available at no cost from the Department of Education, the New Jersey State Bar Foundation, or any other entity. A school district may, at its own discretion, implement bullying prevention programs and approaches which impose a cost on the district.

A school district may apply to the Department of Education for a grant to be used for programs, approaches, or personnel established pursuant to this act, to the extent funds are appropriated for these purposes or funds are made available through the "Bullying Prevention Fund" established pursuant to section 25 of P.L.2010, c.122 (C.18A:37-28). A school district may make an application for a grant only after exploring bullying prevention programs and approaches that are available at no cost, and making an affirmative demonstration of that exploration in its grant application.

b. A school district shall: (1) provide training on the school district's harassment, intimidation, or bullying policies to school employees and volunteers who have significant contact with students; (2) ensure that the training includes instruction on preventing bullying on the basis of the protected categories enumerated in section 2 of P.L.2002, c.83 (C.18A:37-14) and other distinguishing characteristics that may incite incidents of discrimination, harassment, intimidation, or bullying; and (3) develop a process for discussing the district's harassment, intimidation or bullying policy with students.

A school district may satisfy the training required pursuant to this subsection by utilizing training that may be provided at no cost by the Department of Education, the New Jersey State Bar Foundation, or any other en-

tity. A school district may, at its own discretion, implement a training program which imposes a cost on the district.

c. Information regarding the school district policy against harassment, intimidation or bullying shall be incorporated into a school's employee training program and shall be provided to full-time and part-time staff, volunteers who have significant contact with students, and those persons contracted by the district to provide services to students.

3. Section 25 of P.L.2010, c.122 (C.18A:37-28) is amended to read as follows:

C.18A:37-28 "Bullying Prevention Fund."

25. There is created a special fund in the Department of Education, which shall be designated the "Bullying Prevention Fund." The fund shall be maintained in a separate account and administered by the commissioner to carry out the provisions of this act. The fund shall consist of: (1) any monies appropriated by the State for the purposes of the fund; (2) any monies donated for the purposes of the fund; and (3) all interest and investment earnings received on monies in the fund. The fund shall be used to offer grants to school districts to provide training on harassment, intimidation, and bullying prevention and on the effective creation of positive school climates, and to help fund related personnel expenses.

4. a. There is established in but not of the Department of Education an Anti-Bullying Task Force. The task force shall consist of seven members: one appointed by the Senate President; one appointed by the Speaker of the General Assembly; one appointed jointly by the Senate President and the Speaker of the General Assembly; and four appointed by the Governor. Task force members shall have a background in, or special knowledge of, the legal, policy, educational, social, or psychological aspects of bullying in public schools.

b. Appointments to the task force shall be made no later than 30 days following the effective date of P.L.2012, c.1 (C.18A:37-32.1 et al.). The task force shall organize as soon as possible after the appointment of its members.

c. The task force shall:

(1) provide guidance to school districts on available resources to assist in the implementation of the "Anti-Bullying Bill of Rights Act," P.L.2010, c.122 (C.18A:37-13.2 et al.);

(2) examine the implementation of the "Anti-Bullying Bill of Rights Act";

(3) draft model regulations and submit them to the Commissioner of Education for use in promulgating regulations to implement the provisions of the act;

(4) present any recommendations regarding the “Anti-Bullying Bill of Rights Act” deemed to be necessary and appropriate; and

(5) prepare a report within 180 days of its organizational meeting and annually for the following three years on the effectiveness of the act in addressing bullying in schools. The report shall be submitted to the commissioner, to the Governor, and to the Legislature in accordance with the requirements of section 2 of P.L.1991, c.164 (C.52:14-19.1).

d. The task force shall expire upon submitting its final report to the commissioner, the Legislature, and the Governor.

C.18A:37-32.1 Rules, regulations.

5. Notwithstanding any provision of P.L.1968, c.410 (C.52:14B-1 et seq.) or any other law to the contrary, the commissioner may adopt, immediately upon filing with the Office of Administrative Law, such rules and regulations as the commissioner deems necessary to implement the provisions of P.L.2012, c.1 (C.18A:37-32.1 et al.), P.L.2010, c.122 (C.18A:37-13.2 et al.), and P.L.2002, c.83 (C.18A:37-13 et seq.). The regulations shall thereafter be amended, adopted, or readopted by the commissioner in accordance with the provisions of P.L.1968, c.410 (C.52:14B-1 et seq.).

6. There is appropriated from the General Fund to the Department of Education the sum of \$1,000,000 to be deposited into the “Bullying Prevention Fund” established pursuant to section 25 of P.L.2010, c.122 (C.18A:37-28).

7. This act shall take effect immediately.

Approved March 26, 2012.

CHAPTER 2

AN ACT establishing the “VETeach Pilot Program” in the Department of Education and supplementing chapter 6 of Title 18A of the New Jersey Statutes.

BE IT ENACTED *by the Senate and General Assembly of the State of New Jersey:*

C.18A:6-116 “VETeach Pilot Program.”

1. a. There is established in the Department of Education a four-year “VETeach Pilot Program.” The purpose of the pilot program shall be to address the shortage of certified public school teachers that is anticipated to occur due to teacher retirements, by taking advantage of the qualified workforce represented by the State’s veterans. The pilot program shall facilitate the teacher certification of veterans in order to advance the State’s goals of ensuring a qualified public school workforce and addressing the high rate of unemployment among returning veterans.

b. Under the pilot program, Richard Stockton College of New Jersey shall enroll in a 36-month teacher preparation program, a single cohort of students who are veterans of the United States Armed Forces and who served on or after September 11, 2001. The program shall lead to a baccalaureate degree and completion of the requirements necessary to apply to the State Board of Examiners for a certificate of eligibility with advanced standing.

c. Richard Stockton College of New Jersey shall establish, with the approval of the State Board of Education, the coherent sequence of courses required to be completed by a student under the pilot program in order to be eligible to receive a certificate of eligibility with advanced standing. A certificate of eligibility with advanced standing issued to a student who completes the pilot program shall authorize the student to seek employment as a teacher in grades K through 8, and in certain secondary education fields.

d. Upon the conclusion of the pilot program, the commissioner shall report to the Governor, and to the Legislature pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1), on the number of veterans who enrolled in the teacher preparation program established under the pilot program, the number of those veterans who were hired as teachers in public or nonpublic schools, and the advisability of the establishment of similar programs on a permanent basis.

2. This act shall take effect immediately.

Approved April 5, 2012.

CHAPTER 3

AN ACT concerning assault by auto or vessel and designated Jessica Rogers’ Law and amending N.J.S.2C:12-1.

BE IT ENACTED *by the Senate and General Assembly of the State of New Jersey*:

1. N.J.S.2C:12-1 is amended to read as follows:

Assault.

2C:12-1. Assault. a. Simple assault. A person is guilty of assault if he:

(1) Attempts to cause or purposely, knowingly or recklessly causes bodily injury to another; or

(2) Negligently causes bodily injury to another with a deadly weapon; or

(3) Attempts by physical menace to put another in fear of imminent serious bodily injury.

Simple assault is a disorderly persons offense unless committed in a fight or scuffle entered into by mutual consent, in which case it is a petty disorderly persons offense.

b. Aggravated assault. A person is guilty of aggravated assault if he:

(1) Attempts to cause serious bodily injury to another, or causes such injury purposely or knowingly or under circumstances manifesting extreme indifference to the value of human life recklessly causes such injury; or

(2) Attempts to cause or purposely or knowingly causes bodily injury to another with a deadly weapon; or

(3) Recklessly causes bodily injury to another with a deadly weapon; or

(4) Knowingly under circumstances manifesting extreme indifference to the value of human life points a firearm, as defined in section 2C:39-1f., at or in the direction of another, whether or not the actor believes it to be loaded; or

(5) Commits a simple assault as defined in subsection a. (1), (2) or (3) of this section upon:

(a) Any law enforcement officer acting in the performance of his duties while in uniform or exhibiting evidence of his authority or because of his status as a law enforcement officer; or

(b) Any paid or volunteer fireman acting in the performance of his duties while in uniform or otherwise clearly identifiable as being engaged in the performance of the duties of a fireman; or

(c) Any person engaged in emergency first-aid or medical services acting in the performance of his duties while in uniform or otherwise clearly identifiable as being engaged in the performance of emergency first-aid or medical services; or

(d) Any school board member, school administrator, teacher, school bus driver or other employee of a public or nonpublic school or school board while clearly identifiable as being engaged in the performance of his duties or because of his status as a member or employee of a public or nonpublic school or school board or any school bus driver employed by an operator under contract to a public or nonpublic school or school board while clearly identifiable as being engaged in the performance of his duties or because of his status as a school bus driver; or

(e) Any employee of the Division of Youth and Family Services while clearly identifiable as being engaged in the performance of his duties or because of his status as an employee of the division; or

(f) Any justice of the Supreme Court, judge of the Superior Court, judge of the Tax Court or municipal judge while clearly identifiable as being engaged in the performance of judicial duties or because of his status as a member of the judiciary; or

(g) Any operator of a motorbus or the operator's supervisor or any employee of a rail passenger service while clearly identifiable as being engaged in the performance of his duties or because of his status as an operator of a motorbus or as the operator's supervisor or as an employee of a rail passenger service; or

(h) Any Department of Corrections employee, county corrections officer, juvenile corrections officer, State juvenile facility employee, juvenile detention staff member, juvenile detention officer, probation officer or any sheriff, undersheriff, or sheriff's officer acting in the performance of his duties while in uniform or exhibiting evidence of his authority; or

(i) Any employee, including any person employed under contract, of a utility company as defined in section 2 of P.L.1971, c.224 (C.2A:42-86) or a cable television company subject to the provisions of the "Cable Television Act," P.L.1972, c.186 (C.48:5A-1 et seq.) while clearly identifiable as being engaged in the performance of his duties in regard to connecting, disconnecting or repairing or attempting to connect, disconnect or repair any gas, electric or water utility, or cable television or telecommunication service; or

(j) Any health care worker employed by a licensed health care facility to provide direct patient care, any health care professional licensed or otherwise authorized pursuant to Title 26 or Title 45 of the Revised Statutes to practice a health care profession, except a direct care worker at a State or county psychiatric hospital or State developmental center or veterans' memorial home, while clearly identifiable as being engaged in the duties of providing direct patient care or practicing the health care profession; or

(k) Any direct care worker at a State or county psychiatric hospital or State developmental center or veterans' memorial home, while clearly identifiable as being engaged in the duties of providing direct patient care or practicing the health care profession, provided that the actor is not a patient or resident at the facility who is classified by the facility as having a mental illness or developmental disability; or

(6) Causes bodily injury to another person while fleeing or attempting to elude a law enforcement officer in violation of subsection b. of N.J.S.2C:29-2 or while operating a motor vehicle in violation of subsection c. of N.J.S.2C:20-10. Notwithstanding any other provision of law to the contrary, a person shall be strictly liable for a violation of this subsection upon proof of a violation of subsection b. of N.J.S.2C:29-2 or while operating a motor vehicle in violation of subsection c. of N.J.S.2C:20-10 which resulted in bodily injury to another person; or

(7) Attempts to cause significant bodily injury to another or causes significant bodily injury purposely or knowingly or, under circumstances manifesting extreme indifference to the value of human life recklessly causes such significant bodily injury; or

(8) Causes bodily injury by knowingly or purposely starting a fire or causing an explosion in violation of N.J.S.2C:17-1 which results in bodily injury to any emergency services personnel involved in fire suppression activities, rendering emergency medical services resulting from the fire or explosion or rescue operations, or rendering any necessary assistance at the scene of the fire or explosion, including any bodily injury sustained while responding to the scene of a reported fire or explosion. For purposes of this subsection, "emergency services personnel" shall include, but not be limited to, any paid or volunteer fireman, any person engaged in emergency first-aid or medical services and any law enforcement officer. Notwithstanding any other provision of law to the contrary, a person shall be strictly liable for a violation of this paragraph upon proof of a violation of N.J.S.2C:17-1 which resulted in bodily injury to any emergency services personnel; or

(9) Knowingly, under circumstances manifesting extreme indifference to the value of human life, points or displays a firearm, as defined in subsection f. of N.J.S.2C:39-1, at or in the direction of a law enforcement officer; or

(10) Knowingly points, displays or uses an imitation firearm, as defined in subsection v. of N.J.S.2C:39-1, at or in the direction of a law enforcement officer with the purpose to intimidate, threaten or attempt to put the officer in fear of bodily injury or for any unlawful purpose; or

(11) Uses or activates a laser sighting system or device, or a system or device which, in the manner used, would cause a reasonable person to believe that it is a laser sighting system or device, against a law enforcement officer acting in the performance of his duties while in uniform or exhibiting evidence of his authority. As used in this paragraph, "laser sighting system or device" means any system or device that is integrated with or affixed to a firearm and emits a laser light beam that is used to assist in the sight alignment or aiming of the firearm.

Aggravated assault under subsections b. (1) and b. (6) is a crime of the second degree; under subsections b. (2), b. (7), b. (9) and b. (10) is a crime of the third degree; under subsections b. (3) and b. (4) is a crime of the fourth degree; and under subsection b. (5) is a crime of the third degree if the victim suffers bodily injury, otherwise it is a crime of the fourth degree. Aggravated assault under subsection b.(8) is a crime of the third degree if the victim suffers bodily injury; if the victim suffers significant bodily injury or serious bodily injury it is a crime of the second degree. Aggravated assault under subsection b. (11) is a crime of the third degree.

c. (1) A person is guilty of assault by auto or vessel when the person drives a vehicle or vessel recklessly and causes either serious bodily injury or bodily injury to another. Assault by auto or vessel is a crime of the fourth degree if serious bodily injury results and is a disorderly persons offense if bodily injury results.

(2) Assault by auto or vessel is a crime of the third degree if the person drives the vehicle while in violation of R.S.39:4-50 or section 2 of P.L.1981, c.512 (C.39:4-50.4a) and serious bodily injury results and is a crime of the fourth degree if the person drives the vehicle while in violation of R.S.39:4-50 or section 2 of P.L.1981, c.512 (C.39:4-50.4a) and bodily injury results.

(3) Assault by auto or vessel is a crime of the second degree if serious bodily injury results from the defendant operating the auto or vessel while in violation of R.S.39:4-50 or section 2 of P.L.1981, c.512 (C.39:4-50.4a) while:

(a) on any school property used for school purposes which is owned by or leased to any elementary or secondary school or school board, or within 1,000 feet of such school property;

(b) driving through a school crossing as defined in R.S.39:1-1 if the municipality, by ordinance or resolution, has designated the school crossing as such; or

(c) driving through a school crossing as defined in R.S.39:1-1 knowing that juveniles are present if the municipality has not designated the school crossing as such by ordinance or resolution.

Assault by auto or vessel is a crime of the third degree if bodily injury results from the defendant operating the auto or vessel in violation of this paragraph.

A map or true copy of a map depicting the location and boundaries of the area on or within 1,000 feet of any property used for school purposes which is owned by or leased to any elementary or secondary school or school board produced pursuant to section 1 of P.L.1987, c.101 (C.2C:35-7) may be used in a prosecution under subparagraph (a) of paragraph (3) of this subsection.

It shall be no defense to a prosecution for a violation of subparagraph (a) or (b) of paragraph (3) of this subsection that the defendant was unaware that the prohibited conduct took place while on or within 1,000 feet of any school property or while driving through a school crossing. Nor shall it be a defense to a prosecution under subparagraph (a) or (b) of paragraph (3) of this subsection that no juveniles were present on the school property or crossing zone at the time of the offense or that the school was not in session.

(4) Assault by auto or vessel is a crime of the third degree if the person purposely drives a vehicle in an aggressive manner directed at another vehicle and serious bodily injury results and is a crime of the fourth degree if the person purposely drives a vehicle in an aggressive manner directed at another vehicle and bodily injury results. For purposes of this paragraph, "driving a vehicle in an aggressive manner" shall include, but is not limited to, unexpectedly altering the speed of the vehicle, making improper or erratic traffic lane changes, disregarding traffic control devices, failing to yield the right of way, or following another vehicle too closely.

As used in this section, "vessel" means a means of conveyance for travel on water and propelled otherwise than by muscular power.

d. A person who is employed by a facility as defined in section 2 of P.L.1977, c.239 (C.52:27G-2) who commits a simple assault as defined in paragraph (1) or (2) of subsection a. of this section upon an institutionalized elderly person as defined in section 2 of P.L.1977, c.239 (C.52:27G-2) is guilty of a crime of the fourth degree.

e. (Deleted by amendment, P.L.2001, c.443).

f. A person who commits a simple assault as defined in paragraph (1), (2) or (3) of subsection a. of this section in the presence of a child under 16 years of age at a school or community sponsored youth sports event is guilty of a crime of the fourth degree. The defendant shall be strictly liable upon proof that the offense occurred, in fact, in the presence of a child under 16 years of age. It shall not be a defense that the defendant did not

know that the child was present or reasonably believed that the child was 16 years of age or older. The provisions of this subsection shall not be construed to create any liability on the part of a participant in a youth sports event or to abrogate any immunity or defense available to a participant in a youth sports event. As used in this act, "school or community sponsored youth sports event" means a competition, practice or instructional event involving one or more interscholastic sports teams or youth sports teams organized pursuant to a nonprofit or similar charter or which are member teams in a youth league organized by or affiliated with a county or municipal recreation department and shall not include collegiate, semi-professional or professional sporting events.

2. This act shall take effect immediately.

Approved April 20, 2012.

CHAPTER 4

AN ACT concerning organ and tissue donation information, supplementing Titles 52 and 36 of the Revised Statutes, and repealing P.L.1999, JR3.

BE IT ENACTED *by the Senate and General Assembly of the State of New Jersey*:

C.52:14-15g Dissemination of organ and tissue donation information during April.

1. The Department of the Treasury shall, during the month of April, disseminate organ and tissue donation information in accordance with the provisions of the "Revised Uniform Anatomical Gift Act," P.L.2008, c.50 (C.26:6-77 et seq.) with each State employee paycheck. The information shall be prepared in collaboration with the organ procurement organizations designated pursuant to 42 U.S.C.s.1320b-8 to serve in this State.

C.52:32-33.1 State contractors encouraged to disseminate information relative to organ donation.

2. The Department of the Treasury shall encourage all business concerns awarded contracts with the State, as defined in section 2 of P.L.1987, c.184 (C.52:32-33) to notify their employees, through information and materials or through an organ and tissue awareness program, of organ donation options. The information provided to employees shall be prepared in collaboration with the organ procurement organizations designated pursuant to 42 U.S.C.s.1320b-8 to serve in this State.

C.36:2-186 "Donate Life Month," April; designated.

3. The month of April in each year is designated as "Donate Life Month" in the State of New Jersey. The Governor shall issue a proclamation calling upon public officials and the citizens of this State to observe the month with appropriate activities and programs.

Repealer.

4. P.L.1999, JR3 (C.36:2-51) is repealed.

5. This act shall take effect 90 days from enactment.

Approved April 23, 2012.

CHAPTER 5

AN ACT concerning medically fragile students and amending P.L.1999, c.153.

BE IT ENACTED by the Senate and General Assembly of the State of New Jersey:

1. Section 1 of P.L.1999, c.153 (C.18A:40-3.2) is amended to read as follows:

C.18A:40-3.2 Findings, declarations relative to school nursing, clinical nursing services.

1. a. The Legislature finds and declares that school nursing is a separate and distinct specialty within the nursing and educational professions and that therefore competence in specified areas of health and education is needed in order for school nurses to act as health advocates for school-age children.

b. The Legislature further finds and declares that medically fragile students are often diagnosed with medical conditions and life-threatening diseases, including cerebral palsy, seizure disorder, and other neurological diseases, that require mechanical ventilation and emergent intervention by providers of clinical nursing services while attending school. Medically fragile students who require clinical nursing services while attending school should expect and receive the same level of care they receive at home. Maintaining a continuity of care for medically fragile students creates a safer environment at school, fosters learning, and gives parents confidence that their children's medical needs are being met by qualified health care

providers. Currently, there are no standards of practice in place for providers of clinical nursing services. As a result, the quality of care medically fragile students receive in school is often inadequate to meet their health care needs. Therefore, it is in the public interest that, in order to guarantee the health and safety of medically fragile students while attending school, providers of clinical nursing services for such students meet the same qualifications as providers of clinical nursing services certified to participate in the State's Medicaid and NJ FamilyCare programs, and that parents should be given the option to choose the provider who will render clinical nursing services to their children while attending school, if the cost remains neutral to the school district.

2. Section 2 of P.L.1999, c.153 (C.18A:40-3.3) is amended to read as follows:

C.18A:40-3.3 Employment of nursing, non-nursing personnel; definitions.

2. a. A school district shall only utilize or employ for the provision of nursing services in the public schools of the district persons holding an educational services certificate with an endorsement as a school nurse issued by the State Board of Examiners, except for those non-nursing personnel who are otherwise authorized by statute or regulation to perform specific health related services. Special education students and those with medical needs requiring specialized care shall have that care rendered by an appropriate provider as appointed by the State Board of Education. No person shall be issued such certificate unless the person is licensed as a registered nurse pursuant to the provisions of P.L.1947, c.262 (C.45:11-23 et seq.) and meets all of the requirements prescribed by the board for a nursing endorsement. A school district may supplement the services provided by the certified school nurse with non-certified nurses, provided that the non-certified nurse is assigned to the same school building or school complex as the certified school nurse.

b. A medically fragile student requiring clinical nursing services shall have those services rendered by a provider of clinical nursing services as defined in this subsection. Nothing in this section shall be construed to exclude a licensed health care service firm that is approved to provide private duty nursing under the Medicaid Program and is in compliance with State Board of Education regulations. The parent or legal guardian of a medically fragile student shall have the option to choose a provider to render clinical nursing services to the student, and the State Board of Education shall allow the provider chosen by the parent or legal guardian to render

such services to the student only if the cost to the school district remains neutral.

As used in this subsection:

“Medically fragile student” means a school-aged child who suffers from a life-threatening medical condition, and as a result of such condition, requires more individualized and continuous care than is available from a school nurse.

“Clinical nursing services” means specific health care services, based on a medically fragile student’s individualized education plan and a physician’s or advanced practice nurse’s orders, as provided by a registered nurse or licensed practical nurse with specialized pediatric training who attends to the student.

“Provider of clinical nursing services” means an agency that renders clinical nursing services and is approved to provide private duty nursing under the Medicaid program pursuant to P.L.1968, c.413 (C.30:4D-1 et seq.) or the NJ FamilyCare Program pursuant to P.L.2005, c.156 (C.30:4J-8 et al.).

3. This act shall take effect immediately.

Approved May 2, 2012.

CHAPTER 6

AN ACT concerning the acquisition and use of automated external defibrillators, and amending P.L.1999, c.34, P.L.2005, c.346, and P.L.2004, c.93.

BE IT ENACTED *by the Senate and General Assembly of the State of New Jersey*:

1. Section 1 of P.L.1999, c.34 (C.2A:62A-23) is amended to read as follows:

C.2A:62A-23 Legislative findings relative to acquisition, deployment, use of automated external defibrillators; immunity from civil liability.

1. The Legislature finds that:

a. More than 350,000 Americans die annually from out-of-hospital sudden cardiac arrest. Many die needlessly because life saving defibrillators are not immediately available. The American Heart Association estimates that almost 100,000 deaths could be prevented each year if defibrillators were more widely available;

b. Due to technological advances, automated external defibrillators may be used by lay persons without any training to provide defibrillation within the first minutes of cardiac arrest to victims, thereby increasing the victims' chances of survival; and

c. It is the intent of the Legislature to encourage greater acquisition, deployment, and use of automated external defibrillators throughout this State by expanding immunity from civil liability of persons who acquire automated external defibrillators and by granting immunity from civil liability to lay persons who use them in good faith in emergency situations.

2. Section 3 of P.L.1999, c.34 (C.2A:62A-25) is amended to read as follows:

C.2A:62A-25 Responsibilities of person, entity acquiring automated external defibrillator.

3. A person or entity that acquires an automated external defibrillator shall:

a. Ensure that any person, who is anticipated by the person or entity that acquires the defibrillator to be in a position to render emergency care or treatment by the use of a defibrillator in the performance of that person's duties of employment or volunteer service, shall, prior to using that defibrillator, have successfully completed and hold a current certification from the American Red Cross, American Heart Association, or other training program recognized by the Department of Health and Senior Services in cardio-pulmonary resuscitation and use of a defibrillator; however, a person or entity that acquires a defibrillator shall not be liable for any act or omission of any lay person who uses the defibrillator in the rendering of emergency care;

b. Ensure that the defibrillator is maintained and tested according to the manufacturer's operational guidelines;

c. Notify the appropriate first aid, ambulance, or rescue squad, or other appropriate emergency medical services provider that the person or entity has acquired the defibrillator, the type acquired, and its location; and

d. Prior to purchasing the automated external defibrillator, provide the prescribing licensed physician with documentation that the person or entity purchasing the defibrillator has a protocol in place to comply with the requirements of subsections a., b., and c. of this section.

3. Section 4 of P.L.1999, c.34 (C.2A:62A-26) is amended to read as follows:

C.2A:62A-26 Requirements for user of defibrillator.

4. a. (Deleted by amendment, P.L.2012, c.6)

b. Any person who uses a defibrillator shall request emergency medical assistance from the appropriate first aid, ambulance, or rescue squad as soon as practicable; however, a lay person who, in good faith, fails to request emergency medical assistance pursuant to this subsection shall be immune from civil liability for any personal injury that results from that failure.

4. Section 5 of P.L.1999, c.34 (C.2A:62A-27) is amended to read as follows:

C.2A:62A-27 Immunity from civil liability for user of defibrillator; exceptions.

5. a. (1) Any person or entity who, in good faith, acquires or provides a defibrillator, renders emergency care or treatment by the use of a defibrillator, assists in or supervises the emergency care or treatment by the use of a defibrillator, or attempts to use a defibrillator for the purpose of rendering emergency care or treatment, and who has complied with the requirements of this act, shall be immune from civil liability for any personal injury as a result of that care or treatment, or as a result of any acts or omissions by the person or entity in providing, rendering, assisting in, or supervising the emergency care or treatment.

(2) A person or entity providing or maintaining an automated external defibrillator shall not be liable for any act or omission involving the use of a defibrillator in the rendering of emergency care by a lay person.

b. The immunity provided in subsection a. of this section shall include the prescribing licensed physician and the person or entity who provided training in cardio-pulmonary resuscitation and use of the defibrillator.

c. This subsection shall not immunize a person for any act of gross negligence or willful or wanton misconduct. It shall not be considered gross negligence or willful or wanton misconduct to fail to use a defibrillator in the absence of an otherwise preexisting duty to do so.

5. Section 2 of P.L.2005, c.346 (C.2A:62A-31) is amended to read as follows:

C.2A:62A-31 Requirements of health clubs relative to defibrillators.

2. No later than one year after the effective date of this act:

a. The owner or operator of a health club registered with the Director of the Division of Consumer Affairs in the Department of Law and Public Safety pursuant to P.L.1987, c.238 (C.56:8-39 et seq.) shall:

(1) acquire at least one automated external defibrillator as defined in section 2 of P.L.1999, c.34 (C.2A:62A-24), and store it in an accessible location within the health club that is known and available to the employees of the health club for the purposes of this act; and

(2) ensure that the automated external defibrillator is tested and maintained, and provide notification to the appropriate first aid, ambulance, or rescue squad, or other appropriate emergency medical services provider regarding the defibrillator, the type acquired, and its location, pursuant to section 3 of P.L.1999, c.34 (C.2A:62A-25); and

b. The owner or operator of a health club that is subject to the provisions of subsection a. of this section shall:

(1) arrange and pay for training in cardio-pulmonary resuscitation and the use of an automated external defibrillator for the employees of that health club in accordance with the provisions of paragraph (2) of this subsection;

(2) ensure that the health club has at least one employee on site during its normal business hours who holds current certification from the American Red Cross, American Heart Association, or other training program recognized by the Department of Health and Senior Services in cardio-pulmonary resuscitation and use of a defibrillator; and

(3) ensure that an employee who uses a defibrillator requests emergency medical assistance from the appropriate first aid, ambulance, or rescue squad as soon as practicable.

6. Section 1 of P.L.2004, c.93 (C.26:2H-12.26) is amended to read as follows:

C.26:2H-12.26 Nursing homes, assisted living facilities, defibrillator, trained personnel; required.

1. A nursing home that is licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et al.) shall, no later than one year after the effective date of P.L.2004, c.93 (C.26:2H-12.26), and an assisted living facility that is licensed pursuant to P.L.1971, c.136 shall, no later than one year after the effective date of P.L.2009, c.46:

a. acquire at least one defibrillator as defined in section 2 of P.L.1999, c.34 (C.2A:62A-24), which shall be maintained in a central location within the nursing home or assisted living facility that shall be made known and available to the employees of the nursing home or assisted living facility for the purposes of this act;

b. ensure that the defibrillator is tested and maintained, and provide notification to the appropriate first aid, ambulance, or rescue squad, or other

appropriate emergency medical services provider regarding the defibrillator, the type acquired, and its location, pursuant to section 3 of P.L.1999, c.34 (C.2A:62A-25);

c. arrange and pay for training in cardio-pulmonary resuscitation and the use of a defibrillator for employees of the nursing home or assisted living facility to ensure that the employees hold current certification from the American Red Cross, American Heart Association, or other training program recognized by the Department of Health and Senior Services in cardio-pulmonary resuscitation and use of a defibrillator; and

d. ensure that an employee who uses a defibrillator requests emergency medical assistance from the appropriate first aid, ambulance, or rescue squad as soon as practicable.

7. This act shall take effect immediately.

Approved May 2, 2012.

CHAPTER 7

AN ACT concerning basic skills training and amending P.L.2001, c.152.

BE IT ENACTED *by the Senate and General Assembly of the State of New Jersey*:

1 Section 1 of P.L.2001, c.152 (C.34:15D-21) is amended to read as follows:

C.34:15D-21 "Supplemental Workforce Fund for Basic Skills."

1. a. A restricted, nonlapsing, revolving "Supplemental Workforce Fund for Basic Skills," to be managed and invested by the State Treasurer, is hereby established in the Department of Labor and Workforce Development to provide basic skills training. All moneys appropriated to the fund, all interest accumulated on balances in the fund and all cash received for the fund from any other source shall be allocated by the Commissioner of Labor and Workforce Development as follows:

(1) 24% shall be deposited in an account reserved to support basic skills training delivered by the State's One Stop Career Centers to qualified displaced, disadvantaged and employed workers pursuant to Employability Development Plans developed pursuant to section 7 of P.L.1992, c.43 (C.34:15D-7);

(2) 28% shall be deposited in an account reserved for Workforce Investment Boards to provide grants for basic skills training for qualified displaced, disadvantaged and employed workers pursuant to Employability Development Plans developed pursuant to section 7 of P.L.1992, c.43 (C.34:15D-7) and for other individuals with learning disabilities or otherwise in need of vocational rehabilitation services;

(3) 25% shall be deposited in an account reserved for grants to consortia including one or more of any of the following: eligible individual employers, employer organizations, labor organizations, community-based organizations or educational institutions to provide basic skills training to qualified displaced, disadvantaged or employed workers or to other individuals seeking to enter apprenticeship training;

(4) 13% shall be deposited in an account reserved for a grant to the New Jersey Community College Consortium for Workforce and Economic Development, a part of the New Jersey Council of County Colleges, to provide basic skills training to qualified displaced, disadvantaged or employed workers. The New Jersey Community College Consortium for Workforce and Economic Development may request additional funds, beyond the amount provided for in this paragraph, from the Commissioner of Labor and Workforce Development, which funds shall be provided in connection with paragraph (3) of this subsection, at the discretion of the commissioner and without any special preference over any other applicant seeking funds in connection with paragraph (3) of this subsection, for the purpose of providing basic skills training to qualified displaced, disadvantaged or employed workers. Any request for those additional funds shall only be authorized after a determination by the commissioner that the funds provided in connection with this paragraph have been encumbered and that there is a demand for additional funds to provide basic skills training; and

(5) 10% shall be deposited in an account to be used, at the discretion of the commissioner, for any of the purposes indicated in this subsection a. and any administrative costs incurred by the Department of Labor and Workforce Development in connection with the fund.

b. Any grant provided in connection with paragraph (3) of subsection a. of this section directly to an employer or to an employer through a consortium shall be regarded as a customized training grant and shall be administered by the Office of Customized Training and the employer and consortium shall comply with all requirements of section 5 of P.L.1992, c.43 (C.34:15D-5), except that any grants provided directly or indirectly to an employer for use in connection with any program which includes apprenticeship training or activities or preparation for entry into apprentice-

ship training shall be exempt from the requirement of this subsection b. to be administered by the Office of Customized Training and be subject to the requirements of section 5 of P.L.1992, c.43 (C.34:15D-5), if it is approved by the Apprenticeship Policy Committee, as defined in section 3 of P.L.1993, c.268 (C.34:15E-3), and the employer complies with the provisions of subsection e. of section 5 of P.L.1993, c.268 (C.34:15E-5). Any grant provided in connection with paragraph (2) of subsection a. of this section directly to an individual shall be regarded as an individual training grant and shall be subject to the requirements of subsections a., c. and d. of section 6 of P.L.1992, c.43 (C.34:15D-6).

Also, any funds provided in connection with paragraph (4) of subsection a. of this section shall be provided to the New Jersey Community College Consortium for Workforce and Economic Development by the Office of Customized Training, and shall comply with the following requirements:

(1) The New Jersey Community College Consortium for Workforce and Economic Development shall work with all the community colleges throughout the State of New Jersey to deliver basic skills training in the most effective and efficient manner possible at any of their 63 campuses or at any appropriate business facility;

(2) There shall be no charge to the employer sending employees to the training, but the employer shall pay employees regular wages for the hours the training takes place, except that any waiver of this requirement to pay employees regular wages, for the hours of training, authorized by the Commissioner of Labor and Workforce Development, may, at the discretion of the commissioner, be offered to the New Jersey Community College Consortium for Workforce and Economic Development on the same basis as any other grant recipient;

(3) The employers sending their employees to this training shall not be asked to provide any paperwork or complete any financial disclosure forms, including a tax clearance certificate as provided in section 1 of P.L.2007, c.101 (C.54:50-39), except that employers shall provide the employees participating in the training with the information that the employees need to comply with paragraph (4) of this subsection, and shall provide the New Jersey Community College Consortium for Workforce and Economic Development with the information the employer has regarding its participating employees that the consortium needs to produce the annual report required pursuant to paragraph (7) of this subsection;

(4) The employees being trained shall provide the Federal Employer Identification Number (FEIN) of their employer and the employer's contact information at the beginning of the training;

(5) The mean class size for training under this subsection shall be 10, but the New Jersey Community College Consortium for Workforce and Economic Development may aggregate employees from multiple employers in a single training to reach that mean of 10;

(6) The training provided under this subsection shall be basic skills training, but the apportionment of classes in the different areas of basic skills as defined by subsection h. of this section may be determined by the New Jersey Community College Consortium for Workforce and Economic Development in consultation with representatives of the business community;

(7) The New Jersey Community College Consortium for Workforce and Economic Development shall file an annual report by September 1 of each year with the New Jersey Legislature and the New Jersey Department of Labor and Workforce Development containing the total number of workers trained, the total funds expended on training, the number of workers trained in each area of basic skills training, the number of businesses with employees trained, the number of classes held in each area of basic skills training, the number of classes held at each community college, the wage ranges of the workers trained, the job titles of the workers trained and the results of the pre-training and post-training assessments. The report shall also include an analysis of the strengths and weaknesses of the training program and how it can be improved in the following year. The report shall supplant all requirements for any other reporting that the New Jersey Community College Consortium for Workforce and Economic Development may be asked to complete with respect to the funds it receives through paragraph (4) of subsection a. of this section; and

(8) The New Jersey Community College Consortium for Workforce and Economic Development shall work with the business community to promote this program to businesses across the State, including chambers of commerce, Statewide associations, such as the New Jersey Business and Industry Association, and any other appropriate business organizations.

c. Any employment and training services funded by the Supplemental Workforce Fund for Basic Skills shall be provided in a manner which complies with the provisions of subsections b., c., f., g., h. and i. of section 4 of P.L.1992, c.43 (C.34:15D-4), to the extent that those subsections pertain to remedial education. Any service provider receiving moneys from the Supplemental Workforce Fund for Basic Skills shall be subject to the provisions of section 8 of P.L.1992, c.43 (C.34:15D-8) and section 8 of P.L.1992, c.44 (C.34:15D-19).

d. All staff located at any One Stop Career Center supported by funds provided from the Supplemental Workforce Fund for Basic Skills shall be hired and employed by the State pursuant to Title 11A, Civil Service, of the New Jersey Statutes.

e. Beginning July 1, 2002, and for any subsequent fiscal year, if the unexpended cash balance in any of the accounts indicated in subsection a. of this section, less any amount awarded in grants but not yet disbursed from the account, is determined to exceed 20% of the amount of contributions collected for deposit in the account pursuant to this subsection during the fiscal year then ended, the excess shall be regarded as an unemployment compensation contribution and deposited into the unemployment compensation fund within seven business days of the date that the determination is made.

f. The Commissioner of Labor and Workforce Development shall establish standards of performance for providers of basic skills training pursuant to this act. The standards shall include, but not be limited to, standards for the curriculum or training to be furnished, qualifications for persons who will provide the training under the act, and standards for establishing what constitutes successful completion of the training program. The commissioner shall establish means of determining the ability of enrollees to gain or maintain employment following the successful completion of a training program established pursuant to this section. In the event that the commissioner determines that a provider has not conducted its training program in accordance with the standards of performance, he may take that action necessary to correct the deficiencies of the provider, or terminate the contract with the provider of basic skills services if the provider fails to respond to remedial action.

g. The State Employment and Training Commission shall review and evaluate the operations of programs supported by the Supplemental Workforce Fund for Basic Skills established pursuant to this section, with special consideration to how those programs assist in the implementation of the goals of the Strategic Five-Year State Plan for New Jersey's Workforce Investment System, and shall consult with the Commissioner of Labor and Workforce Development regarding its findings.

h. For the purpose of this section:

"Basic skills training" means basic mathematics, reading comprehension, basic computer literacy, English proficiency and work-readiness skills and shall be regarded as a form of "remedial education" for the purposes of section 3 of P.L.1992, c.43 (C.34:15D-3);

"One Stop Career Center" means one of the centers established in local areas to coordinate a variety of State and local programs providing em-

ployment and training services, including job placement services, or any other similar State or local government-sponsored center providing employment and training services as may be developed at any later time; and

"Qualified disadvantaged worker," "qualified displaced worker," "qualified employed worker," and "employment and training services" have the meanings given to them by section 3 of P.L.1992, c.43 (C.34:15D-3).

2. This act shall take effect immediately.

Approved May 2, 2012.

CHAPTER 8

AN ACT concerning the NJ STARS and NJ STARS II Programs, amending and supplementing P.L.2004, c.59 and P.L.2005, c.359.

BE IT ENACTED *by the Senate and General Assembly of the State of New Jersey*:

1. Section 5 of P.L.2004, c.59 (C.18A:71B-85) is amended to read as follows:

C.18A:71B-85 NJ STARS scholarships; eligibility.

5. a. A scholarship under the NJ STARS Program shall cover the full cost of tuition, subject to the prior application of other grants and scholarships against those costs as provided under paragraph (2) of subsection c. of this section, for up to 18 credit hours in any semester, for an eligible student enrolled in a full-time course of study at the New Jersey county college serving the student's county of residence. An otherwise eligible student who demonstrates to the authority, in accordance with such criteria and by means of such documentation as the authority shall establish by regulation, that the county college serving the student's county of residence does not offer the curriculum that the student chooses to study shall be eligible for such scholarship at another New Jersey county college offering that curriculum. The amount of any scholarship allowed hereunder to a student at a county college serving a county other than the student's county of residence shall be computed as though the student were a resident of the county served by that college, and the college shall likewise compute the amount of any additional payment, required with respect to the enrollment of that student for credit hours of study during a semester in which the scholarship

is awarded that are not covered by that scholarship, as though the student were a resident of the county.

b. A student shall be eligible for a scholarship under the NJ STARS Program for up to five semesters, including summer sessions. The scholarship shall be payable for the first year of enrollment in a county college to a student who:

(1) graduated in the top 15.0% of the student's high school graduating class, provided that in the case of students graduating from high schools that do not calculate the class rank of their students, the student's ranking shall be determined by the high school in consultation with the authority; and

(2) completed a rigorous high school course of study in accordance with standards established by the Secretary of Higher Education in consultation with the Commissioner of Education.

During a student's enrollment in a county college after the first year of enrollment, the scholarship shall be payable to that student if the student attains a grade point average of at least 3.0 by the start of the student's second year of county college enrollment. A student who attains a grade point average of less than 3.0 at the start of the second semester of the student's first year of county college enrollment shall participate in an enrichment program designed by the county college during the second semester of the student's first year of enrollment.

c. To be eligible to receive a scholarship under the NJ STARS Program a student shall:

(1) be a State resident pursuant to guidelines established by the authority. Notwithstanding the provisions of section 1 of P.L.1979, c.361 (C.18A:62-4) or any other section of law to the contrary, a dependent child of a parent or guardian who has been transferred to a military installation located in this State shall be considered a resident of this State for the purposes of qualifying for an NJ STARS scholarship;

(2) have applied for all other available forms of State and federal need-based grants and merit scholarships, exclusive of loans, the full amount of which grants and scholarships shall be applied to tuition to reduce the amount of any scholarship that the student shall receive under the provisions of this act;

(3) except as otherwise provided pursuant to subsection a. of section 3 of P.L.2008, c.124 (C.18A:71B-85.2), be enrolled in a full-time course of study at a New Jersey county college;

(4) have graduated from high school in 2004 or later, and not earlier than the calendar year two years prior to the first calendar year in which a scholarship payment is to be made; and

(5) except as otherwise provided pursuant to subsection a. of section 3 of P.L.2008, c.124 (C.18A:71B-85.2), maintain continuous enrollment in a full-time course of study, unless on medical leave due to the illness of the student or a member of the student's immediate family or emergency leave because of a family emergency, which medical or emergency leave shall have been approved by the county college, or unless called to partial or full mobilization for State or federal active duty as a member of the National Guard or a Reserve component of the Armed Forces of the United States.

d. A student who is dismissed for academic or disciplinary reasons from a county college shall no longer be eligible for a scholarship under this act. If a student participating in the program is dismissed for disciplinary reasons, the student shall repay in full all amounts received under the program. The county college shall be responsible for collecting the repayment, or the amount of any overpayment or other improper payment, of any State awards under the program, in accordance with the provisions of N.J.S.18A:71B-10.

e. A student scholarship under the NJ STARS Program may be renewed upon the student's filing of a renewal financial aid application and providing evidence that the student has satisfied the requirements pursuant to subsection b. of this section.

2. Section 2 of P.L.2005, c.359 (C.18A:71B-86.2) is amended to read as follows:

C.18A:71B-86.2 Definitions relative to NJ STARS II Program.

2. As used in this act:

"Authority" means the Higher Education Student Assistance Authority established pursuant to N.J.S.18A:71A-3.

"Full-time course of study" in any semester means a course of study that includes at least 12 credit hours, not including any credit hours in a remedial or developmental curriculum, and leads to a degree from a New Jersey four-year public or independent institution of higher education.

"Program" means the New Jersey Student Tuition Assistance Reward Scholarship II (NJ STARS II) Program.

3. Section 4 of P.L.2005, c.359 (C.18A:71B-86.4) is amended to read as follows:

C.18A:71B-86.4 Eligibility for NJ STARS II; scholarship amounts.

4. a. A scholarship under the NJ STARS II Program shall be applied toward the cost of tuition or in the case of a student who receives a Tuition

Aid Grant toward the cost of tuition and fees, subject to the prior application of other grants and scholarships against such costs as provided under paragraph (2) of subsection e. of this section, for an eligible student enrolled in a full-time course of study at a New Jersey four-year public or independent institution of higher education. A scholarship under the NJ STARS II Program shall be paid to the institution in the amount of \$1,250 per semester. The cost of a scholarship shall be paid 100% by the State. Any cost of attendance that is not covered by the NJ STARS II scholarship or other available forms of grants and scholarships shall be paid by the student.

b. A student shall be eligible for a scholarship under the NJ STARS II Program for up to four semesters, excluding summer sessions, at a New Jersey four-year public or independent institution of higher education.

c. A student shall be eligible to receive a scholarship under the NJ STARS II Program for the student's third academic year of study if the student: has an annual family income, both taxable and non-taxable, as derived from the Free Application for Federal Student Aid (FAFSA) for the academic year, of less than \$250,000; attained an associate's degree from a New Jersey county college; except as otherwise provided pursuant to subsection c. of section 2 and subsection b. of section 3 of P.L.2008, c.124 (C.18A:71B-85.2), received a scholarship under the "New Jersey Student Tuition Assistance Reward Scholarship (NJ STARS) Program Act," P.L.2004, c.59 (C.18A:71B-81 et seq.), for each semester of study in the county college, or was eligible for but did not receive a scholarship under NJ STARS because the student's tuition was fully covered by other State or federal need-based grants or merit scholarships, or was eligible for but did not receive a scholarship under NJ STARS because the student was enrolled while a high school student in county college courses and received an associate's degree in accordance with a joint program offered by the student's school district and a county college; attains a cumulative grade point average of at least 3.25 upon graduation from county college; enrolls in a baccalaureate degree program at a New Jersey four-year public or independent institution of higher education for the third academic year of study in the academic year immediately following the student's attainment of an associate's degree; and meets the criteria set forth in subsection e. of this section. A grade for credits earned during a summer semester shall for the purposes of this subsection be included in the calculation of the cumulative grade point average.

d. A student shall be eligible to receive a scholarship under the NJ STARS II Program for the student's fourth academic year of study if the student: received a scholarship under the NJ STARS II Program for the stu-

dent's third academic year of study pursuant to subsection c. of this section; based on the student's performance during the third academic year of study, attained a grade point average of at least 3.25; and meets the criteria set forth in subsection e. of this section. A grade for credits earned during a summer semester shall for the purposes of this subsection be included in the calculation of the grade point average for the preceding academic year.

e. To be eligible to receive a scholarship under the NJ STARS II Program, a student shall:

(1) be a State resident pursuant to guidelines established by the authority. Notwithstanding the provisions of section 1 of P.L.1979, c.361 (C.18A:62-4) or any other section of law to the contrary, a dependent child of a parent or guardian who has been transferred to a military installation located in this State shall be considered a resident of this State for the purposes of qualifying for an NJ STARS II scholarship;

(2) have applied for all other available forms of State and federal need-based grants and merit scholarships, exclusive of loans, the full amount of which grants and scholarships shall be applied to tuition, and fee charges if applicable, to reduce the amount of any scholarship that the student shall receive under the provisions of P.L.2005, c.359 (C.18A:71B-86.1 et seq.);

(3) be enrolled in a full-time course of study at a four-year public or independent institution of higher education; and

(4) maintain continuous enrollment in a full-time course of study, unless on medical leave due to the illness of the student or a member of the student's immediate family or emergency leave because of a family emergency, which medical or emergency leave shall have been approved by the four-year public or independent institution of higher education, or unless called to partial or full mobilization for State or federal active duty as a member of the National Guard or a Reserve component of the Armed Forces of the United States.

f. A student who is dismissed for academic or disciplinary reasons from a four-year public or independent institution of higher education shall no longer be eligible for a scholarship under this act. If a student participating in the program is dismissed for disciplinary reasons, the student shall repay in full all amounts received under the program. The four-year public or independent institution of higher education shall be responsible for collecting the repayment, or the amount of any overpayment or other improper payment, of any State awards under the program, in accordance with the provisions of N.J.S.18A:71B-10.

g. A student scholarship under the NJ STARS II Program may be renewed upon the student's filing of a renewal financial aid application and

providing evidence that the student has satisfied the requirements pursuant to this section.

4. Section 7 of P.L.2005, c.359 (C.18A:71B-86.7) is amended to read as follows:

C.18A:71B-86.7 Construction of act relative to application, admissions procedures.

7. Nothing in this act shall be construed to require a four-year public or independent institution of higher education to admit a student eligible for a scholarship under this act or to waive its admission standards and application procedures; except that the institution shall apply the same admission standards and application procedures that it applies to all other transfer students.

C.18A:71B-85.6 Annual recruitment day.

5. Each county college is encouraged to host an annual recruitment day and invite a representative from each four-year public and independent institution of higher education in the State for the purpose of recruiting students for the NJ STARS II Program.

C.18A:71B-85.7 Current NJ STARS recipients unaffected.

6. In the case of a student who is receiving a scholarship under the NJ STARS Program on the effective date of P.L.2012, c.8 (C.18A:71B-85.6 et al.) and who graduated from high school prior to 2010, the student shall receive an NJ STARS scholarship in accordance with the provisions of P.L.2004, c.59 (C.18A:71B-81 et seq.) as the same read before the effective date of P.L.2012, c.8 (C.18A:71B-85.6 et al.).

C.18A:71B-86.4b Current NJ STARS II recipients unaffected.

7. In the case of a student who is receiving a scholarship under the NJ STARS II Program in the 2011-2012 academic year and is in the third academic year of study or was eligible to receive an NJ STARS II scholarship in the 2011-2012 academic year for the third academic year of study but did not receive the scholarship because the student's tuition or tuition and fees, as applicable, was fully covered by other available forms of State and federal need-based grants and merit scholarships, the student shall receive an NJ STARS II scholarship for the student's fourth academic year of study in accordance with the provisions of P.L.2005, c.359 (C.18A:71B-86.1 et seq.) as the same read before the effective date of P.L.2012, c.8 (C.18A:71B-85.6 et al.).

8. This act shall take effect immediately and shall first be applicable to the 2012-2013 academic year.

Approved May 2, 2012.

CHAPTER 9

AN ACT concerning certain payments by casinos to out-of-State racetracks and amending P.L.1992, c.19.

BE IT ENACTED *by the Senate and General Assembly of the State of New Jersey*:

1. Section 11 of P.L.1992, c.19 (C.5:12-201) is amended to read as follows:

C.5:12-201 Payment to out-of-State sending track.

11. a. Except as provided in subsection b. of this section, a casino which receives a simulcast horse race from an out-of-State sending track shall not pay the out-of-State sending track for the transmission an amount equal to more than 6% of the parimutuel pool on each race.

b. Subject to the approval of the New Jersey Racing Commission and with respect to no more than 28 races per casino per calendar year, plus the number of races run annually at the Breeders' Cup World Championships, a casino may pay an out-of-State sending track an amount equal to not more than 9% of the parimutuel pool for the transmission of a race.

2. Section 13 of P.L.1992, c.19 (C.5:12-203) is amended to read as follows:

C.5:12-203 Wagers subject to takeout rate.

13. Sums wagered at a casino on races being transmitted to that casino from an out-of-State sending track shall be subject to the takeout rate determined pursuant to section 12 of this act, and the sums resulting from that takeout rate as applied to the parimutuel pool generated at the casino shall be distributed as follows, subject to the provisions of section 16 of this act:

a. .50% of the parimutuel pool generated at the casino shall be paid to the New Jersey Racing Commission for deposit in the Casino Simulcasting Fund established pursuant to section 18 of this act;

b. the actual amount paid by the casino for the transmission of the race, which shall be not more than 6%, or if applicable not more than 9%, of the parimutuel pool generated at the casino shall be paid to the casino to be used for payment to the out-of-State sending track for the transmission of the race, as provided in section 11 of this act;

c. in calendar years 1993, 1994, and 1995, 2% of the parimutuel pool generated at the casino shall be paid to the New Jersey Racing Commission for payment to the Atlantic City Racetrack until a total of \$100,000,000 in parimutuel pools has been generated in wagering on simulcast races at all casinos in each of those calendar years, except that if casino simulcasting in Atlantic City begins after January 1, 1993 and before January 1, 1994, 2% of the parimutuel pool generated at the casino shall be paid to the commission for payment to the Atlantic City Racetrack until that portion of \$100,000,000 determined by the following formula has been generated in wagering at casinos on simulcast races in 1993:

$$A/B = C/D$$

here: A = 365 minus (a) the number of racing days in 1993, other than live racing days, prior to the commencement of casino simulcasting in Atlantic City that the Atlantic City Racetrack conducts simulcasting under the provisions of the "Simulcasting Racing Act," P.L.1985, c.269 (C.5:5-110 et seq.) or the provisions of section 37 of P.L.1992, c.19 (C.5:5-125), and (b) the number of live racing days conducted by the Atlantic City Racetrack in 1993;

B = 365 (the number of calendar days in 1993);

C = the amount of the parimutuel pool generated in wagering on simulcast races in 1993 of which 2% is to be paid to the New Jersey Racing Commission for payment to the Atlantic City Racetrack;

D = \$100,000,000;

d. of the amount remaining after the deduction of the amounts under subsections a., b., and c. from the amount of the takeout rate, 55% shall be paid to the casino;

e. .50% of the parimutuel pool generated at the casino shall be paid to the New Jersey Racing Commission and shall be deposited by that commission as follows:

(1) 50% in the special trust account established pursuant to or specified in section 46a.(2) of P.L.1940, c.17 (C.5:5-66), section 2b. of P.L.1984, c.236 (C.5:5-66.1), section 5a.(1) of P.L.1982, c.201 (C.5:5-98), or section 7f.(1)(a) of P.L.1971, c.137 (C.5:10-7), as appropriate, for use and distribution as provided in section 46a.(2)(a), (b), and (c) of P.L.1940, c.17 (C.5:5-

66), section 2b.(1), (2), and (3) of P.L.1984, c.236 (C.5:5-66.1), section 5a.(1)(a), (b), and (c) of P.L.1982, c.201 (C.5:5-98), or section 7f.(1)(a)(i), (ii), and (iii) of P.L.1971, c.137 (C.5:10-7), as appropriate; and

(2) 50% in the special trust account established pursuant to or specified in section 46b.(1)(e) and (2)(e) of P.L.1940, c.17 (C.5:5-66), section 5b.(3) of P.L.1982, c.201 (C.5:5-98), or section 7f.(2)(c) of P.L.1971, c.137 (C.5:10-7), as appropriate, for use and distribution as provided therein;

f. .03% of the parimutuel pool generated at the casino shall be paid to the New Jersey Racing Commission and set aside in the special trust account for horse breeding and development for distribution and use as provided in section 5 of P.L.1967, c.40 (C.5:5-88); and

g. the amount remaining after the deduction of the amounts under subsections a., b., c., d., e., and f. from the amount of the takeout rate shall be distributed as follows:

(1) 43% of that remaining amount shall be paid to the New Jersey Racing Commission and shall be distributed by that commission, on the basis of the following formula, among the New Jersey racetracks for their own use:

$$A/B = C/D$$

here: A = the gross parimutuel pool generated at each racetrack during the preceding calendar year, including the parimutuel pool on simulcast races;

B = the gross parimutuel pool generated at racetracks Statewide during the preceding calendar year, including the parimutuel pool on simulcast races;

C = the amount to be paid to each racetrack from the moneys available for distribution pursuant to this paragraph;

D = the total amount of moneys available for distribution pursuant to this paragraph;

(2) 43% of that remaining amount shall be paid to the New Jersey Racing Commission and, subject to the provisions of section 14 of this act, shall be distributed by that commission, in the following year and on the basis of the following formula, among the New Jersey racetracks for payment as purse money and for programs designed to aid horsemen and horsemen's organizations as provided in section 46a.(4) of P.L.1940, c.17 (C.5:5-66), section 2d. of P.L.1984, c.236 (C.5:5-66.1), section 5a.(2) of P.L.1982, c.201 (C.5:5-98), or section 7f.(1)(b) of P.L.1971, c.137 (C.5:10-7), in the case of harness races, and section 46b.(1)(d) or 46b.(2)(d) of P.L.1940, c.17 (C.5:5-66), section 5b.(2) of P.L.1982, c.201 (C.5:5-98), or section 7f.(2)(b) of P.L.1971, c.137 (C.5:10-7), in the case of running races:

$$A/B = C/D$$

here: A = the total amount distributed by each racetrack pursuant to section 46a.(4) of P.L.1940, c.17 (C.5:5-66), section 2d. of P.L.1984, c.236 (C.5:5-66.1), section 5a.(2) of P.L.1982, c.201 (C.5:5-98), or section 7f.(1)(b) of P.L.1971, c.137 (C.5:10-7), in the case of harness races, or section 46b.(1)(d) or 46b.(2)(d) of P.L.1940, c.17 (C.5:5-66), section 5b.(2) of P.L.1982, c.201 (C.5:5-98), or section 7f.(2)(b) of P.L.1971, c.137 (C.5:10-7), in the case of running races, during the preceding calendar year, plus any additional amounts paid out by each racetrack for overnight purses during the preceding calendar year from the permit holder's share of the parimutuel pool;

B = the total amount distributed by racetracks Statewide pursuant to section 46a.(4) of P.L.1940, c.17 (C.5:5-66), section 2d. of P.L.1984, c.236 (C.5:5-66.1), section 5a.(2) of P.L.1982, c.201 (C.5:5-98), and section 7f.(1)(b) of P.L.1971, c.137 (C.5:10-7), in the case of harness races, and pursuant to section 46b.(1)(d) and 46b.(2)(d) of P.L.1940, c.17 (C.5:5-66), section 5b.(2) of P.L.1982, c.201 (C.5:5-98), and section 7f.(2)(b) of P.L.1971, c.137 (C.5:10-7), in the case of running races, during the preceding calendar year, plus any additional amounts paid out by racetracks for overnight purses during the preceding calendar year from the permit holders' share of the parimutuel pool;

C = the amount to be paid to each racetrack from the moneys available for distribution pursuant to this paragraph;

D = the total amount of moneys available for distribution pursuant to this paragraph; and

(3) 14% of that remaining amount shall be paid to the New Jersey Racing Commission for deposit in the Casino Simulcasting Special Fund established pursuant to section 15 of this act.

In addition, all breakage moneys and outstanding parimutuel ticket moneys resulting from the wagering at the casino shall be paid to the New Jersey Racing Commission and deposited in the Casino Simulcasting Special Fund.

If a racetrack conducts both harness races and running races, the moneys the racetrack receives for payment pursuant to paragraph (2) of subsection g. above shall be distributed on the basis of the following formula:

$$A/B = C/D$$

here: A = the total amount distributed by the racetrack pursuant to section 46a.(4) of P.L.1940, c.17 (C.5:5-66), section 2d. of P.L.1984, c.236 (C.5:5-66.1), section 5a.(2) of P.L.1982, c.201 (C.5:5-98), or section 7f.(1)(b) of

P.L.1971, c.137 (C.5:10-7), as appropriate, in the case of harness races, plus any additional amounts paid out by the racetrack for overnight purses for harness races during the preceding calendar year from the permit holder's share of the parimutuel pool, or pursuant to section 46b.(1)(d) or 46b.(2)(d) of P.L.1940, c.17 (C.5:5-66), section 5b.(2) of P.L.1982, c.201 (C.5:5-98), or section 7f.(2)(b) of P.L.1971, c.137 (C.5:10-7), as appropriate, in the case of running races, plus any additional amounts paid out by the racetrack for overnight purses for running races during the preceding calendar year from the permit holder's share of the parimutuel pool, as the case may be;

B = the total amount distributed by the racetrack pursuant to section 46a.(4) of P.L.1940, c.17 (C.5:5-66), section 2d. of P.L.1984, c.236 (C.5:5-66.1), section 5a.(2) of P.L.1982, c.201 (C.5:5-98), or section 7f.(1)(b) of P.L.1971, c.137 (C.5:10-7), as appropriate, and pursuant to section 46b.(1)(d) or 46b.(2)(d) of P.L.1940, c.17 (C.5:5-66), section 5b.(2) of P.L.1982, c.201 (C.5:5-98), or section 7f.(2)(b) of P.L.1971, c.137 (C.5:10-7), as appropriate, plus any additional amounts paid out by the racetrack for overnight purses for both harness and running races during the preceding calendar year from the permit holder's share of the parimutuel pool;

C = the amount to be paid by the racetrack for overnight purse money and for programs designed to aid horsemen and horsemen's organizations as provided in section 46a.(4) of P.L.1940, c.17 (C.5:5-66), section 2d. of P.L.1984, c.236 (C.5:5-66.1), section 5a.(2) of P.L.1982, c.201 (C.5:5-98), or section 7f.(1)(b) of P.L.1971, c.137 (C.5:10-7), in the case of harness races, and section 46b.(1)(d) or 46b.(2)(d) of P.L.1940, c.17 (C.5:5-66), section 5b.(2) of P.L.1982, c.201 (C.5:5-98), or section 7f.(2)(b) of P.L.1971, c.137 (C.5:10-7), in the case of running races;

D = the total amount of moneys available to the racetrack for distribution as overnight purse money and for programs designed to aid horsemen and horsemen's organizations pursuant to this paragraph.

3. This act shall take effect immediately.

Approved May 2, 2012.

CHAPTER 10

AN ACT concerning agreements of State and county colleges involving certain projects and amending P.L.2009, c.90.

BE IT ENACTED *by the Senate and General Assembly of the State of New Jersey*:

1. Section 43 of P.L.2009, c.90 (C.18A:64-85) is amended to read as follows:

C.18A:64-85 State, county college may enter into certain contracts with a private entity.

43. a. A State college or county college may enter into a contract with a private entity, subject to subsection f. of this section, to be referred to as a public-private partnership agreement, that permits the private entity to assume full financial and administrative responsibility for the on-campus construction, reconstruction, repair, alteration, improvement or extension of a building, structure, or facility of, or for the benefit of, the institution, provided that the project is financed in whole by the private entity and that the State or institution of higher education, as applicable, retains full ownership of the land upon which the project is completed.

b. (1) A private entity that assumes financial and administrative responsibility for a project pursuant to subsection a. of this section shall not be subject to the procurement and contracting requirements of all statutes applicable to the institution of higher education at which the project is completed, including, but not limited to, the "State College Contracts Law," P.L.1986, c.43 (C.18A:64-52 et seq.), and the "County College Contracts Law," P.L.1982, c.189 (C.18A:64A-25.1 et seq.). For the purposes of facilitating the financing of a project pursuant to subsection a. of this section, a public entity may become the owner or lessee of the project or the lessee of the land, or both, may issue indebtedness in accordance with the public entity's enabling legislation and, notwithstanding any provision of law to the contrary, shall be empowered to enter into contracts with a private entity and its affiliates without being subject to the procurement and contracting requirements of any statute applicable to the public entity provided that the private entity has been selected by the institution of higher education pursuant to a solicitation of proposals or qualifications. For the purposes of this section, a public entity shall include the New Jersey Economic Development Authority, and any project undertaken pursuant to subsection a. of this section of which the authority becomes the owner or lessee, or which is situated on land of which the authority becomes the lessee, shall be deemed a "project" under the "New Jersey Economic Development Authority Act," P.L.1974, c.80 (C.34:1B-1 et seq.).

(2) As the carrying out of any project described pursuant to this section constitutes the performance of an essential public function, all projects predominantly used in furtherance of the educational purposes of the institution undertaken pursuant to this section, provided it is owned by or leased to a public entity, non-profit business entity, foreign or domestic, or a business entity wholly owned by such non-profit business entity, shall at all times be exempt from property taxation and special assessments of the State, or any municipality, or other political subdivision of the State and, notwithstanding the provisions of section 15 of P.L.1974, c.80 (C.34:1B-15) or section 2 of P.L.1977, c.272 (C.54:4-2.2b) or any other section of law to the contrary, shall not be required to make payments in lieu of taxes. The land upon which the project is located shall also at all times be exempt from property taxation. Further, the project and land upon which the project is located shall not be subject to the provisions of section 1 of P.L.1984, c.176 (C.54:4-1.10) regarding the tax liability of private parties conducting for profit activities on tax exempt land, or section 1 of P.L.1949, c.177 (C.54:4-2.3) regarding the taxation of leasehold interests in exempt property that are held by nonexempt parties.

c. Each worker employed in the construction, rehabilitation, or building maintenance services of facilities by a private entity that has entered into a public-private partnership agreement with a State or county college pursuant to subsection a. of this section shall be paid not less than the prevailing wage rate for the worker's craft or trade as determined by the Commissioner of Labor and Workforce Development pursuant to P.L.1963, c.150 (C.34:11-56.25 et seq.) and P.L.2005, c.379 (C.34:11-56.58 et seq.).

d. (1) All construction projects under a public-private partnership agreement entered into pursuant to this section shall contain a project labor agreement. The project labor agreement shall be subject to the provisions of P.L.2002, c.44 (C.52:38-1 et seq.), and shall be in a manner that to the greatest extent possible enhances employment opportunities for individuals residing in the county of the project's location. Further, the general contractor, construction manager, design-build team, or subcontractor for a construction project proposed in accordance with this paragraph shall be registered pursuant to the provisions of P.L.1999, c.238 (C.34:11-56.48 et seq.), and shall be classified by the Division of Property Management and Construction to perform work on a public-private partnership higher education project. All construction projects proposed in accordance with this paragraph shall be submitted to the New Jersey Economic Development Authority for its review and approval and, when practicable, are encouraged to adhere to the

Leadership in Energy and Environmental Design Green Building Rating System as adopted by the United States Green Building Council.

(2) Where no public fund has been established for the financing of a public improvement, the chief financial officer of the public owner shall require the private entity for whom the public improvement is being made to post, or cause to be posted, a bond guaranteeing prompt payment of moneys due to the contractor, his or her subcontractors and to all persons furnishing labor or materials to the contractor or his or her subcontractors in the prosecution of the work on the public improvement.

e. A general contractor, construction manager, design-build team, or subcontractor shall be registered pursuant to the provisions of P.L.1999, c.238 (C.34:11-56.48 et seq.), and shall be classified by the Division of Property Management and Construction to perform work on a public-private partnership higher education project.

f. (1) On or before August 1, 2013, all projects proposed in accordance with this section shall be submitted to the New Jersey Economic Development Authority for its review and approval. The projects are encouraged, when practicable, to adhere to the green building manual prepared by the Commissioner of Community Affairs pursuant to section 1 of P.L.2007, c.132 (C.52:27D-130.6). Any application that is deemed to be incomplete on August 2, 2013 shall not be eligible for consideration.

(2) (a) In order for an application to be complete and considered by the authority it shall include, but not be limited to: (i) a public-private partnership agreement between the State or county college and the private developer; (ii) a full description of the project; (iii) the estimated costs and financial documentation for the project; (iv) a timetable for completion of the project extending no more than five years after consideration and approval; and (v) any other requirements that the authority deems appropriate or necessary.

(b) As part of the estimated costs and financial documentation for the project the application shall contain a long-range maintenance plan and shall specify the expenditures that qualify as an appropriate investment in maintenance. This long-range maintenance plan shall be approved by the authority pursuant to regulations promulgated by the authority that reflect national building maintenance standards and other appropriate building maintenance benchmarks. All contracts to implement a long-range maintenance plan pursuant to this paragraph shall contain a project labor agreement. The project labor agreement shall be subject to the provisions of P.L.2002, c.44 (C.52:38-1 et seq.), and shall be in a manner that to the greatest extent possible enhances employment opportunities for individuals residing in the county of the project's location.

(3) The authority shall review all completed applications, and request additional information as is needed to make a complete assessment of the project. No project shall be undertaken until final approval has been granted by the authority; provided, however, that the authority shall retain the right to revoke approval if it determines that the project has deviated from the plan submitted pursuant to paragraph (2) of this subsection.

(4) The authority may promulgate any rules and regulations necessary to implement this subsection, including provisions for fees to cover administrative costs.

Where no public fund has been established for the financing of a public improvement, the chief financial officer of the public owner shall require the private entity for whom the public improvement is being made to post, or cause to be posted, a bond guaranteeing prompt payment of moneys due to the contractor, his or her subcontractors and to all persons furnishing labor or materials to the contractor or his or her subcontractors in the prosecution of the work on the public improvement.

g. The provisions of P.L.2009, c.136 (C.52:18-42 et al.) shall not apply to any project carried out pursuant to this section.

2. This act shall take effect immediately.

Approved May 2, 2012.

CHAPTER 11

AN ACT establishing a program in the Department of Education to address the shortage of teachers in mathematics and science and supplementing chapter 27 of Title 18A of the New Jersey Statutes.

BE IT ENACTED *by the Senate and General Assembly of the State of New Jersey*:

C.18A:26-2.11 Findings, declarations relative to shortages of mathematics, science teachers.

1. The Legislature finds and declares that:
 - a. Economic development focused on twenty-first century skills in areas related to mathematics and the sciences is critically important to the future of the State; and
 - b. Documented shortages of mathematics and science teachers exist in New Jersey and this shortage will negatively impact the State's efforts to

provide a workforce well prepared in such fields as engineering, research, and computer technology.

C.18A:26-2.12 Program to issue subject area endorsements in certain areas.

2. a. In accordance with the provisions of subsection b. of this section, the Commissioner of Education shall establish a program to issue subject area endorsements in mathematics, in the sciences, or in any subject area in which there is a shortage of teachers in the State as determined by the United States Department of Education, to certificated teaching staff members authorized to work in New Jersey public schools who do not currently have a subject area endorsement in those fields. The purpose of the program shall be to reduce the shortage of teachers in mathematics, science, and other identified subject areas.

b. Under the program, and notwithstanding any provision of law or regulation to the contrary, the State Board of Examiners shall issue a subject area endorsement in mathematics, in the sciences, or in any subject area in which there is a teacher shortage in the State as determined by the United States Department of Education, as appropriate, upon successful completion of the program to a teaching staff member who:

- (1) passes the appropriate State test of subject matter knowledge; and
- (2) meets such other criteria as the commissioner shall set forth in regulation. The commissioner shall have the authority under the program to establish different criteria for completion of the program based on factors such as the subject area in which the individual intends to teach.

c. The program shall be subject to oversight by the commissioner, including routine reviews and the elimination of subject areas for which endorsements are available under the program. The elimination of a subject area shall be based on the classroom performance of the teachers who have received endorsements in the subject area under the program or the fact that the subject area no longer has a shortage of teachers.

C.18A:26-2.13 Rules, regulations.

3. Notwithstanding any provision of P.L.1968, c.410 (C.52:14B-1 et seq.) or any other law to the contrary, the commissioner may adopt, immediately upon filing with the Office of Administrative Law, such rules and regulations as the commissioner deems necessary to implement the provisions of this act which shall be effective for a period not to exceed 12 months following the effective date of P.L.2012, c.11 (C.18A:26-2.11 et seq.). The regulations shall thereafter be amended, adopted, or readopted by the commissioner in accordance with the provisions of P.L.1968, c.410 (C.52:14B-1 et seq.).

4. This act shall take effect immediately.

Approved May 9, 2012.

CHAPTER 12

AN ACT amending and supplementing the Fiscal Year 2012 annual appropriations act, P.L.2011, c.85.

BE IT ENACTED *by the Senate and General Assembly of the State of New Jersey*:

1. The following items and language provisions in section 1 of P.L.2011, c.85, the annual appropriations act for fiscal year 2012, are amended to read as follows:

34 DEPARTMENT OF EDUCATION

30 Educational, Cultural, and Intellectual Development

34 Educational Support Services

STATE AID

39-5095 Teachers' Pension and Annuity Assistance	<u>\$1,886,037,000</u>
(From Property Tax Relief Fund	\$1,886,037,000)
Total State Aid Appropriation,	
Educational Support Services	<u>\$2,128,431,000</u>
(From Property Tax Relief Fund	\$2,128,431,000)

State Aid:

39 Social Security Tax (PTRF)	(\$755,633,000)
Department of Education, Total State Appropriation	<u>\$10,606,212,000</u>

54 DEPARTMENT OF HUMAN SERVICES

50 Economic Planning, Development, and Security

53 Economic Assistance and Security

7550 Division of Family Development

GRANTS-IN-AID

Notwithstanding any law or regulation to the contrary, in addition to the amounts hereinabove for Work First New Jersey Child Care, an amount not to exceed \$35,000,000 is appropriated from the Workforce Development Partnership Fund established pursuant to section 9 of P.L.1992, c.43 (C.34:15D-9), subject to the approval of the Director of the Division of Budget and Accounting.

62 DEPARTMENT OF LABOR AND WORKFORCE DEVELOPMENT**50 Economic Planning, Development, and Security****54 Manpower and Employment Services****GRANTS-IN-AID**

Notwithstanding the provisions of any law or regulation to the contrary, in addition to the amounts hereinabove appropriated for the Work First New Jersey Work Activities and Work First New Jersey - Training Related Expenses accounts, an amount not to exceed \$21,500,000 is appropriated from the Workforce Development Partnership Fund, established pursuant to section 9 of P.L.1992, c.43 (C.34:15D-9), subject to the approval of the Director of the Division of Budget and Accounting.

78 DEPARTMENT OF TRANSPORTATION**60 Transportation Programs****61 State and Local Highway Facilities****CAPITAL CONSTRUCTION**

60-6200 Trust Fund Authority – Revenues and other funds	
available for new projects	<u>\$956,667,000</u>
Total Capital Construction Appropriation, State and Local	
Highway Facilities	<u>\$956,667,000</u>

Capital Projects:

60 Transportation Trust Fund Account	(\$956,667,000)

The amount hereinabove appropriated for the Transportation Trust Fund account shall first be provided from revenues received from (i) motor fuel taxes, which are hereby appropriated for such purposes pursuant to Article VIII, Section II, paragraph 4 of the State Constitution; (ii) \$222,500,000 from the petroleum products gross receipts tax, which is hereby appropriated for such purposes pursuant to Article VIII, Section II, paragraph 4 of the State Constitution; (iii) \$200,000,000 from the sales and use tax which is hereby appropriated for such purposes pursuant to Article VIII, Section II, paragraph 4 of the State Constitution; (iv) \$12,000,000 of funds received from the various transportation-oriented authorities pursuant to contracts between such transportation-oriented authorities and the State; and (v) such additional sums pursuant to P.L.1984, c.73 (C.27:1B-1 et seq.); as may be necessary to satisfy all fiscal year 2012 debt service, bond reserve requirements, and other fiscal obligations of the New Jersey Transportation Trust Fund Authority.

Department of Transportation,	

Total State Appropriation	<u>\$1,336,573,000</u>
Total State Appropriation, All State Funds	<u>\$11,942,785,000</u>

2. In addition to the amounts appropriated under P.L.2011, c.85, the annual appropriations act for fiscal year 2012, there are appropriated out of the General Fund the following sums for the purposes specified:

22 DEPARTMENT OF COMMUNITY AFFAIRS
70 Government Direction, Management, and Control
75 State Subsidies and Financial Aid

STATE AID

04-8030 Local Government Services.....	<u>\$21,118,000</u>
Total State Aid Appropriation, State Subsidies and Financial Aid.....	<u>\$21,118,000</u>
<i>State Aid:</i>	
Transitional Aid to Localities.....	(\$21,118,000)
Department of Community Affairs, Total State Appropriation	<u>\$21,118,000</u>

46 DEPARTMENT OF HEALTH AND SENIOR SERVICES

20 Physical and Mental Health

26 Senior Services

GRANTS-IN-AID

22-4275 Medical Services for the Aged	<u>\$35,511,000</u>
Total Grants-in-Aid Appropriation, Senior Services.....	<u>\$35,511,000</u>
<i>Grants-in-Aid:</i>	
22 Payments for Medical Assistance	
Recipients – Nursing Homes	(\$35,511,000)
Department of Health and Senior Services, Total State Appropriation	<u>\$35,511,000</u>

54 DEPARTMENT OF HUMAN SERVICES

20 Physical and Mental Health

24 Special Health Services

7540 Division of Medical Assistance and Health Services

GRANTS-IN-AID

22-7540 General Medical Services	<u>\$145,792,000</u>
Total Grants-in-Aid Appropriation, Division of Medical Assistance and Health Services	<u>\$145,792,000</u>
<i>Grants-in-Aid:</i>	
22 Managed Care Initiative	(\$145,792,000)

30 Educational, Cultural, and Intellectual Development

32 Operation and Support of Educational Institutions

DIRECT STATE SERVICES

05-7610 Residential Care and Habilitation Services	<u>\$28,866,000</u>
Total Direct State Services Appropriation, Operation and Support of Educational Institutions.....	<u>\$28,866,000</u>
<i>Direct State Services:</i>	
<i>Personal Services:</i>	
Salaries and Wages	(\$28,866,000)

Department of Human Services,
Total State Appropriation \$174,658,000

66 DEPARTMENT OF LAW AND PUBLIC SAFETY

10 Public Safety and Criminal Justice

12 Law Enforcement

DIRECT STATE SERVICES

06-1200 State Police Operations \$1,293,000

Total Direct State Services Appropriation, Law Enforcement \$1,293,000

Direct State Services:

Personal Services:

Salaries and Wages (\$1,293,000)

Department of Law and Public Safety,

Total State Appropriation \$1,293,000

Total Appropriation, General Fund \$232,580,000

Total Appropriation, All State Funds \$232,580,000

3. Upon certification by the Director of the Division of Budget and Accounting in the Department of the Treasury that federal funds to support the expenditures listed below are available, the following sums are appropriated in addition to the amounts of federal funds appropriated under P.L.2011, c.85, the annual appropriations act for fiscal year 2012:

FEDERAL FUNDS

54 DEPARTMENT OF HUMAN SERVICES

50 Economic Planning, Development, and Security

53 Economic Assistance and Security

15-7550 Income Maintenance Management \$22,000,000

Total Appropriation, Economic Assistance and Security \$22,000,000

Special Purpose:

Work First New Jersey – Technology

Investments – Title XIX (\$22,000,000)

67 DEPARTMENT OF MILITARY AND VETERANS' AFFAIRS

80 Special Government Services

83 Services to Veterans

20-3640 Domiciliary and Treatment Services \$2,163,000

Total Appropriation, Services to Veterans \$2,163,000

Special Purpose:

Medicare Part A Receipts for Resident

Care and Operational Costs (\$2,163,000)

Total Appropriation, Federal Funds \$24,163,000

Total Appropriation, All Funds \$256,743,000

4. The following language provision is added to the General Provisions of P.L.2011, c.85, the annual appropriations act for fiscal year 2012:

Notwithstanding the provisions of any law or regulation to the contrary, there is appropriated an amount not to exceed \$200,000,000 from the Clean Energy Fund for transfer to the General Fund as State revenue, subject to the approval of the Director of the Division of Budget and Accounting.

5. This act shall take effect immediately.

Approved June 27, 2012.

CHAPTER 13

AN ACT concerning the New Jersey Transportation Trust Fund Authority and amending various parts of the statutory law.

BE IT ENACTED *by the Senate and General Assembly of the State of New Jersey*:

1. Section 3 of P.L.1984, c.73 (C.27:1B-3) is amended to read as follows:

C.27:1B-3 Definitions.

3. The following words or terms as used in this act shall have the following meaning unless a different meaning clearly appears from the context:

a. "Act" means this New Jersey Transportation Trust Fund Authority Act of 1984 as amended and supplemented.

b. "Authority" means the New Jersey Transportation Trust Fund Authority created by section 4 of this act.

c. "Bonds" means bonds issued by the authority pursuant to the act and includes prior bonds and transportation program bonds.

d. "Commissioner" means the Commissioner of Transportation.

e. "Department" means the Department of Transportation.

f. "Federal aid highway" means any highway within the State in connection with which the State receives payment or reimbursement from the federal government under the terms of Title 23, United States Code or any amendment, successor, or replacement thereof, for the purposes contained in the act.

g. "Federal government" means the United States of America, and any officer, department, board, commission, bureau, division, corporation, agency or instrumentality thereof.

h. "South Jersey Transportation Authority" means the public corporation created by section 4 of P.L.1991, c.252 (C.27:25A-4) or its successor.

i. "New Jersey Highway Authority" means the public corporation created by section 4 of P.L.1952, c.16 (C.27:12B-4) or its successor.

j. "New Jersey Turnpike Authority" means the public corporation created by section 3 of P.L.1948, c.454 (C.27:23-3) or its successor.

k. "Notes" means the notes issued by the authority pursuant to the act.

l. "Public highways" means public roads, streets, expressways, freeways, parkways, motorways and boulevards, including bridges, tunnels, overpasses, underpasses, interchanges, rest areas, express bus roadways, bus pullouts and turnarounds, park-ride facilities, traffic circles, grade separations, traffic control devices, the elimination or improvement of crossings of railroads and highways, whether at grade or not at grade, bicycle and pedestrian pathways and pedestrian and bicycle bridges traversing public highways and any facilities, equipment, property, rights of way, easements and interests therein needed for the construction, improvement and maintenance of highways.

m. "Public transportation project" means, in connection with public transportation service, passenger stations, shelters and terminals, automobile parking facilities, ferries and ferry facilities, including capital projects for ferry terminals, approach roadways, pedestrian accommodations, parking, docks, and other necessary land-side improvements, ramps, track connections, signal systems, power systems, information and communication systems, roadbeds, transit lanes or rights of way, equipment storage, pedestrian walkways and bridges connecting to passenger stations and servicing facilities, bridges, grade crossings, rail cars, locomotives, motorbuses and other motor vehicles, maintenance and garage facilities, revenue handling equipment and any other equipment, facility or property useful for or related to the provision of public transportation service.

n. "State agency" means any officer, department, board, commission, bureau, division, agency or instrumentality of the State.

o. "Toll road authorities" means and includes the New Jersey Turnpike Authority, the New Jersey Highway Authority and the South Jersey Transportation Authority.

p. "Transportation project" means, in addition to public highways and public transportation projects, any equipment, facility or property useful or related to the provision of any ground, waterborne or air transportation for

the movement of people and goods including rail freight infrastructure, which equipment, facility, or property may be acquired by purchase or lease.

q. "Transportation system" means public highways, public transportation projects, other transportation projects, and all other surface, airborne and waterborne methods of transportation for the movement of people and goods.

r. "Permitted maintenance" means, in relation to public transportation projects, direct costs of work necessary for preserving or maintaining the useful life of public transportation projects, provided the work performed is associated with the acquisition, installation and rehabilitation of components which are not included in the normal operating maintenance of equipment and facilities or replaced on a scheduled basis. The work shall ensure the useful life of the project for not less than five years and shall not include routine maintenance or inspection of equipment and facilities that is conducted on a scheduled basis. This definition shall not apply to the term "maintenance" as used in subsection l. of this section. For purposes of this subsection, "permitted maintenance" means, in relation to public highways, the direct costs of work necessary for preserving or maintaining the useful life of public highways, provided the work is not associated with the regular and routine maintenance of public highways and their components. The work shall ensure the useful life of the project for not less than five years.

s. "Circle of Mobility" means an essential group of related transit projects that include (1) the New Jersey Urban Core Project, as defined in section 3031 of the "Intermodal Surface Transportation Efficiency Act of 1991," Pub.L.102-240, and consisting of the following elements: Secaucus Transfer, Kearny Connection, Waterfront Connection, Northeast Corridor Signal System, Hudson River Waterfront Transportation System, Newark-Newark International Airport-Elizabeth Transit Link, a rail connection between Penn Station Newark and Broad Street Station, Newark, New York Penn Station Concourse, and the equipment needed to operate revenue service associated with improvements made by the project, and (2) the modification and reconstruction of the West Shore Line in Bergen County connected to Allied Junction/Secaucus Transfer Meadowlands Rail Center; the construction of a rail station and associated components at the Meadowlands Sports Complex; the modification and reconstruction of the Susquehanna and Western Railway, as defined and provided in section 3035 (a) of the "Intermodal Surface Transportation Efficiency Act of 1991"; the modification and reconstruction of the Lackawanna Cutoff Commuter Rail Line connecting Morris, Sussex and Warren Counties to the North Jersey Transportation Rail Centers; and commuter rail service in the central New Jersey region terminating at the proposed Lakewood Transportation Center in

Ocean County or other location, as determined by the Board of the New Jersey Transit Corporation, pursuant to a resolution of the board providing for the achievement of a consensus among the interested parties as to the direction of the proposed rail line; provided, however, that this 2000 amendatory act shall not be construed as affecting any priorities which may have been assigned to any other project in the Circle of Mobility.

t. "Prior bonds" means bonds issued pursuant to the authorization contained in P.L.1995, c.108 and P.L.2006, c.3 and any bonds issued to refund such prior bonds.

u. "Transportation program bonds" means bonds issued pursuant to the authorization contained in P.L.2012, c.13, and any bonds issued to refund such transportation program bonds.

2. Section 7 of P.L.1984, c.73 (C.27:1B-7) is amended to read as follows:

C.27:1B-7 Power to accept and use funds appropriated and paid by State.

7. The authority shall have the power to accept and use any funds appropriated and paid by the State to the authority, including, without limitation, appropriations and payments from the Transportation Trust Fund Account established pursuant to the act, for the purposes for which the appropriations and payments are made, provided that only those revenues which are dedicated pursuant to the New Jersey Constitution, including Article VIII, Section II, paragraph 4, may be used to pay debt service on the transportation program bonds and any agreement securing the repayment of the transportation program bonds. Debt service on prior bonds shall be paid for solely from amounts on deposit in the "Transportation Trust Fund Account – Subaccount for Debt Service for Prior Bonds," and debt service on transportation program bonds and any agreement securing the repayment of the transportation program bonds shall be paid for solely from amounts on deposit in the "Transportation Trust Fund Account – Subaccount for Debt Service for Transportation Program Bonds."

3. Section 9 of P.L.1984, c.73 (C.27:1B-9) is amended to read as follows:

C.27:1B-9 Issuance of bonds.

9. a. The authority shall have the power and is hereby authorized after November 15, 1984 and from time to time thereafter to issue its bonds, notes or other obligations in principal amounts as in the opinion of the au-

thority shall be necessary to provide for any of its corporate purposes, including the payment, funding or refunding of the principal of, or interest or redemption premiums on, any bonds, notes or other obligations issued by it, whether the bonds, notes, obligations or interest to be funded or refunded have or have not become due; and to provide for the security thereof and for the establishment or increase of reserves to secure or to pay the bonds, notes or other obligations or interest thereon and all other reserves and all costs or expenses of the authority incident to and necessary or convenient to carry out its corporate purposes and powers; and in addition to its bonds, notes and other obligations, the authority shall have the power to issue subordinated indebtedness, which shall be subordinate in lien to the lien of any or all of its bonds or notes. No resolution or other action of the authority providing for the issuance of bonds, refunding bonds, notes, or other obligations shall be adopted or otherwise made effective by the authority without the prior approval in writing of the Governor and the State Treasurer.

b. Except as may be otherwise expressly provided in the act or by the authority:

(1) Every issue of bonds or notes shall be general obligations payable out of any revenues or funds of the authority, subject only to any agreements with the holders of particular bonds or notes pledging any particular revenues or funds. The authority may provide the security and payment provisions for its bonds or notes as it may determine, including (without limiting the generality of the foregoing) bonds or notes as to which the principal and interest are payable from and secured by all or any portion of the revenues of and payments to the authority, and other moneys or funds as the authority shall determine, provided that for transportation program bonds or notes issued in anticipation of such transportation program bonds, only revenues dedicated pursuant to the New Jersey Constitution, including Article VIII, Section II, paragraph 4, and deposited into the "Transportation Trust Fund Account – Subaccount for Debt Service for Transportation Program Bonds," may be used for such payment;

(2) In addition, the authority may issue notes, in anticipation of the issuance of the bonds, provided that the issuance of such notes shall be subject to the bonding limitations as provided in subsection i. of this section, and the payment of such notes if issued in anticipation of the issuance of transportation program bonds shall be paid solely from revenues dedicated pursuant to the New Jersey Constitution, including Article VIII, Section II, paragraph 4, and deposited into the "Transportation Trust Fund Account – Subaccount for Debt Service for Transportation Program Bonds." The authority may also issue notes in anticipation of the receipt of appropriations, grants, reim-

bursements or other funds, including without limitation grants from the federal government for federal aid highways or public transportation systems, the principal of or interest on which, or both, shall be payable out of the proceeds of appropriations, grants, reimbursements or other funds, including without limitation grants from the federal government for federal aid highways or public transportation systems. Such notes shall not be subject to the bonding limitations as provided in subsection i. of this section; and

(3) The authority may also enter into bank loan agreements, lines of credit and other security agreements as authorized pursuant to subsection h. of section 6 of P.L.1984, c.73 (C.27:1B-6) and obtain for or on its behalf letters of credit in each case for the purpose of securing its bonds, notes or other obligations or to provide direct payment of any costs which the authority is authorized to pay by this act and to secure repayment of any borrowings under the loan agreement, line of credit, letter of credit or other security agreement by its bonds, notes or other obligations or the proceeds thereof or by any or all of the revenues of and payments to the authority or by any appropriation, grant or reimbursement to be received by the authority and other moneys or funds as the authority shall determine, provided that for any such agreements entered into in connection with transportation program bonds issued pursuant to the authorization contained in subsection i. of this section, or notes issued in anticipation of such transportation program bonds, only revenues dedicated pursuant to the New Jersey Constitution, including Article VIII, Section II, paragraph 4, and deposited into the "Transportation Trust Fund Account – Subaccount for Debt Service for Transportation Program Bonds," may be used for such payment.

c. Whether or not the bonds and notes are of the form and character as to be negotiable instruments under the terms of Title 12A, Commercial Transactions, New Jersey Statutes, the bonds and notes are hereby made negotiable instruments within the meaning of and for all the purposes of Title 12A of the New Jersey Statutes.

d. Bonds or notes of the authority shall be authorized by a resolution or resolutions of the authority and may be issued in one or more series and shall bear the date, or dates, mature at the time or times, bear interest at the rate or rates of interest per annum, be in the denomination or denominations, be in the form, carry the conversion or registration privileges, have the rank or priority, be executed in the manner, be payable from the sources, in the medium of payment, at the place or places within or without the State, and be subject to the terms of redemption (with or without premium) as the resolution or resolutions may provide. Bonds or notes may be further secured by a trust indenture between the authority and a corporate

trustee within or without the State. All other obligations of the authority shall be authorized by resolution containing terms and conditions as the authority shall determine.

e. Bonds, notes or other obligations of the authority may be sold at public or private sale at a price or prices and in a manner as the authority shall determine, either on a negotiated or on a competitive basis. Every bond, or refunding bond, issued on or after the effective date of P.L.2006, c.3 (C.27:1B-22.2 et al.) shall mature and be paid no later than 31 years from the date of the issuance of that bond or refunding bond.

f. Bonds or notes may be issued and other obligations incurred under the provisions of the act without obtaining the consent of any department, division, commission, board, bureau or agency of the State, other than the approval as required by subsection a. of this section, and without any other proceedings or the happening of any other conditions or other things than those proceedings, conditions or things which are specifically required by the act.

g. Bonds, notes and other obligations of the authority issued or incurred under the provisions of the act shall not be in any way a debt or liability of the State or of any political subdivision thereof other than the authority and shall not create or constitute any indebtedness, liability or obligation of the State or of any political subdivision or be or constitute a pledge of the faith and credit of the State or of any political subdivision, but all bonds, notes and obligations, unless funded or refunded by bonds, notes or other obligations of the authority, shall be payable solely from revenues or funds pledged or available for their payment as authorized in the act. Each bond, note or other obligation shall contain on its face a statement to the effect that the authority is obligated to pay the principal thereof or the interest thereon only from revenues or funds of the authority, and for transportation program bonds and agreements securing such transportation program bonds only from revenues dedicated pursuant to the New Jersey Constitution, including Article VIII, Section II, paragraph 4, and deposited into the "Transportation Trust Fund Account – Subaccount for Debt Service for Transportation Program Bonds," and that neither the State nor any political subdivision thereof is obligated to pay the principal or interest and that neither the faith and credit nor the taxing power of the State or any political subdivision thereof is pledged to the payment of the principal or the interest on the bonds, notes or other obligations. For the purposes of this subsection, political subdivision does not include the authority.

h. All expenses incurred in carrying out the provisions of the act shall be payable solely from the revenues or funds provided or to be provided under or pursuant to the provisions of the act and nothing in the act shall be

construed to authorize the authority to incur any indebtedness or liability on behalf of or payable by the State or any political subdivision thereof.

i. The authority shall minimize debt incurrence by first relying on appropriations and other revenues available to the authority before incurring debt secured by State revenues to meet its statutory purposes. Commencing with the fiscal year beginning July 1, 1995 and ending within the fiscal year beginning July 1, 2005, the authority shall not incur debt in any fiscal year in excess of \$650,000,000, except that if that permitted amount of debt, or any portion thereof, is not incurred in a fiscal year it may be incurred in a subsequent fiscal year. Commencing with the fiscal year beginning July 1, 2006 and ending with the fiscal year beginning on July 1, 2010, the authority shall not incur debt for any fiscal year in excess of \$1,600,000,000, reduced in each of those fiscal years by the amount by which the appropriation of State funds to the Transportation Trust Fund Account for that fiscal year shall exceed \$895,000,000; provided, however, that if a portion of that permitted amount of debt, less any reduction as provided above, is not incurred in a fiscal year, an amount not greater than the unused portion may be incurred in a subsequent fiscal year in addition to the amount otherwise permitted. Debt permitted for the fiscal year beginning July 1, 2006 may be incurred prior to July 1, 2006. The authority shall not issue transportation program bonds in excess of \$1,247,000,000 for the fiscal year beginning July 1, 2012, in excess of \$849,200,000 for the fiscal year beginning July 1, 2013, in excess of \$735,300,000 for the fiscal year beginning July 1, 2014, and in excess of \$626,800,000 for the fiscal year beginning July 1, 2015, except that (1) if that permitted amount of transportation program bonds, or any portion thereof, is not incurred in a fiscal year, it may be issued in a subsequent fiscal year and (2) 30 percent of the permitted amount of transportation program bonds for a fiscal year may be issued in the fiscal year preceding such fiscal year provided that (a) any transportation program bonds issued pursuant to this paragraph shall be deducted from the authorization for the fiscal year from which it was taken, and (b) the proceeds of any such transportation program bonds shall not be encumbered until the fiscal year from which the deduction of the authorization was taken pursuant to this paragraph. Transportation program bonds authorized to be issued for the fiscal year beginning July 1, 2012 may be issued prior to July 1, 2012. Any increase in this limitation shall only occur if so provided for by law. In computing the foregoing limitation as to the amount of bonds the authority may issue, the authority may exclude any bonds, notes or other obligations, including subordinated obligations of the authority, issued for refunding purposes. The payment of debt service on transportation program bonds and

any agreements issued in connection with such transportation program bonds shall be paid solely from revenues dedicated pursuant to the New Jersey Constitution, including Article VIII, Section II, paragraph 4, and deposited into the "Transportation Trust Fund Account – Subaccount for Debt Service for Transportation Program Bonds."

j. Upon the decision by the authority to issue refunding bonds pursuant to this section, and prior to the sale of those bonds, the authority shall transmit to the Joint Budget Oversight Committee, or its successor, a report that a decision has been made, reciting the basis on which the decision was made, including an estimate of the debt service savings to be achieved and the calculations upon which the authority relied when making the decision to issue refunding bonds. The report shall also disclose the intent of the authority to issue and sell the refunding bonds at public or private sale and the reasons therefor.

k. The Joint Budget Oversight Committee, or its successor, shall have authority to approve or disapprove the sale of refunding bonds as included in each report submitted in accordance with subsection j. of this section. The committee shall approve or disapprove the sale of refunding bonds within 10 business days after physical receipt of the report. The committee shall notify the authority in writing of the approval or disapproval as expeditiously as possible.

l. No refunding bonds shall be issued unless the report has been submitted to and approved by the Joint Budget Oversight Committee, or its successor, as set forth in subsection k. of this section.

m. Within 30 days after the sale of the refunding bonds, the authority shall notify the Joint Budget Oversight Committee, or its successor, of the result of that sale, including the prices and terms, conditions and regulations concerning the refunding bonds, and the actual amount of debt service savings to be realized as a result of the sale of refunding bonds.

n. The Joint Budget Oversight Committee, or its successor, shall, however, review all information and reports submitted in accordance with this section and may, on its own initiative, make observations and recommendations to the authority or to the Legislature, or both, as it deems appropriate.

o. No refunding bonds shall be issued unless the authority shall first determine that the present value of the aggregate principal of and interest on the refunding bonds is less than the present value of the aggregate principal of and interest on the outstanding bonds to be refinanced, except that, for the purposes of this limitation, present value shall be computed using a discount rate equal to the yield of those refunding bonds, and yield shall be computed using an actuarial method based upon a 360-day year with semi-

annual compounding and upon the prices paid to the authority by the initial purchasers of those refunding bonds.

4. Section 10 of P.L.1984, c.73 (C.27:1B-10) is amended to read as follows:

C.27:1B-10 Covenants with holders of bonds, notes or other obligations.

10. In any resolution of the authority authorizing or relating to the issuance of any bonds, notes or other obligations or in any indenture securing the bonds, notes or other obligations, the authority, in order to secure the payment of the bonds, notes or other obligations and in addition to its other powers, shall have the power by provisions therein, which shall constitute covenants by the authority and contracts with the holders of the bonds, notes or other obligations, provided that in any such resolution authorizing the issuance of transportation program bonds or in any indenture or agreement securing such transportation program bonds, the payment of such transportation program bonds or any agreement securing such transportation program bonds shall be made solely from revenues dedicated pursuant to the New Jersey Constitution, Article VIII, Section II, paragraph 4, and deposited into the "Transportation Trust Fund Account – Subaccount for Debt Service for Transportation Program Bonds":

a. To pledge all or any part of its revenues or receipts to which its right then exists or may thereafter come into existence and other moneys or funds as the authority shall determine and the moneys derived therefrom, and the proceeds of any bonds, notes or other obligations;

b. To pledge any agreement, including, without limitation, the contract or contracts referred to in section 23 of the act; contracts with the toll road authorities or other State agencies, except that any contracts with the toll road authorities or other State agencies may not be pledged to the payment of the transportation program bonds or to any agreement securing such transportation program bonds; and any grant, contract, or agreement with the federal government or the revenues or payments thereunder and the proceeds thereof;

c. To covenant against pledging all or any part of its revenues or receipts or its agreements and the revenues derived thereunder or the proceeds thereof and other moneys or funds as the authority shall determine and the moneys derived therefrom or against permitting or suffering any lien on any of the foregoing;

d. To covenant with respect to limitations on any right to sell, lease or otherwise dispose of any property of any kind;

e. To covenant as to any bonds, notes and other obligations to be issued and the limitations thereof and the terms and conditions thereof and as to the custody, application, investment, and disposition of the proceeds thereof;

f. To covenant as to the issuance of additional bonds, or notes or other obligations or as to limitations on the issuance of additional bonds, notes or other obligations and on the incurring of other debts by it;

g. To covenant as to the payment of the principal of or interest on the bonds, notes, or other obligations, as to the sources and methods of payment, as to the rank or priority of any bonds, notes or obligations with respect to any lien or security or as to the acceleration of the maturity of any bonds, notes or obligations;

h. To provide for the replacement of lost, stolen, destroyed or mutilated bonds, notes or other obligations;

i. To covenant against extending the time for the payment of bonds, notes or other obligations or interest thereon;

j. To covenant as to the redemption of bonds, notes or other obligations and privileges of exchange thereof for other bonds, notes or other obligations of the authority;

k. Subject to the rights and security interests of the holders from time to time of bonds, notes or other obligations heretofore or hereafter issued by each of the toll road authorities or other State agencies, to covenant as to the enforcement of any term in any agreement entered into pursuant to the act, to which the authority is a party or an assignee, fixing amounts of funds of the toll road authorities or other State agencies to be paid over to and received by the authority in each year or other period of time, including any term concerning the fixing of tolls and other charges by the toll road authorities or other State agencies, at rates as shall be necessary to provide the amounts of funds;

l. To covenant to create or authorize the creation of special funds or moneys to be held in pledge or otherwise for payment or redemption of bonds, notes, or other obligations, reserves or other purposes and as to the use, investment, and disposition of the moneys held in the funds;

m. To establish the procedure, if any, by which the terms of any contract or covenant with or for the benefit of the holders of bonds, notes or other obligations may be amended or abrogated, the amount of bonds, notes or other obligations the holders of which must consent thereto, and the manner in which the consent may be given;

n. To provide for the release of property, agreements, or revenues and receipts from any pledge and to reserve rights and powers in, or the right to dispose of, property which is subject to a pledge;

o. To provide for the rights and liabilities, powers and duties arising upon the breach of any covenant, condition or obligation and to prescribe the events of default and the terms and conditions upon which any or all of the bonds, notes or other obligations of the authority shall become or may be declared due and payable before maturity and the terms and conditions upon which any declaration and its consequences may be waived;

p. To vest in a trustee or trustees within or without the State such property, rights, powers and duties in trust as the authority may determine, and to limit the rights, duties and powers of such trustee;

q. To execute all bills of sale, conveyances, deeds of trust and other instruments necessary or convenient in the exercise of its powers or in the performance of its covenants or duties;

r. To pay the costs or expenses incident to the enforcement of the bonds, notes or other obligations or of the provisions of the resolution or of any covenant or agreement of the authority with the holders of its bonds, notes or other obligations;

s. To limit the rights of the holders of any bonds, notes or other obligations to enforce any pledge or covenant securing the bonds, notes or other obligations; and

t. To make covenants, in addition to the covenants herein expressly authorized, of like or different character, and to make covenants to do or refrain from doing acts and things as may be necessary, or convenient and desirable, in order to better secure bonds, notes or other obligations or which in the absolute discretion of the authority will tend to make bonds, notes or other obligations more marketable, notwithstanding that the covenants, acts or things may not be enumerated herein.

5. Section 20 of P.L.1984, c.73 (C.27:1B-20) is amended to read as follows:

C.27:1B-20 "Transportation Trust Fund Account."

20. There is hereby established in the General Fund an account entitled "Transportation Trust Fund Account," which shall consist of two subaccounts entitled: "Transportation Trust Fund Account – Subaccount for Debt Service for Prior Bonds" and "Transportation Trust Fund Account – Subaccount for Debt Service for Transportation Program Bonds." During the fiscal year beginning July 1, 1984 and during each succeeding fiscal year in which the authority has bonds, notes or other obligations outstanding, the treasurer shall credit to the "Transportation Trust Fund Account – Subaccount for Debt Service for Prior Bonds" a portion of the revenues derived from the following,

as determined by the treasurer, and to the "Transportation Trust Fund Account – Subaccount for Debt Service for Transportation Program Bonds" only revenues derived under subsection a. of this section and from the petroleum and sales tax as set forth in subsection d. of this section:

a. An amount equivalent to the revenue derived from \$0.105 per gallon from the tax imposed on the sale of motor fuels pursuant to chapter 39 of Title 54 of the Revised Statutes, as provided in Article VIII, Section II, paragraph 4 of the State Constitution, provided, however, such amount during any fiscal year shall not be less than \$483,000,000;

b. (Deleted by amendment, P.L.2000, c.73).

c. An amount equivalent to moneys received by the State in accordance with contracts entered into with toll road authorities or other State agencies, provided that effective with the fiscal year beginning July 1, 1988 the amount so credited shall not be less than \$24,500,000.00 in any fiscal year.

The treasurer shall also credit to the "Transportation Trust Fund Account – Subaccount for Debt Service for Prior Bonds," in accordance with a contract between the treasurer and the authority, an amount equivalent to the sum of the revenues due from the increase of fees for motor vehicle registrations collected pursuant to the amendment to R.S.39:3-20 made by section 32 of P.L.1984, c.73 and from the increase in the tax on diesel fuels imposed pursuant to the amendment to R.S.54:39-27 made by section 35 of P.L.1984, c.73 and by P.L.1987, c.460, and as amended by section 18 of P.L.1992, c.23, and repealed by section 56 of P.L.2010, c.22 and now imposed pursuant to section 3 of P.L.2010, c.22 (C.54:39-103), provided that the total amount credited during the fiscal year beginning July 1, 1984 shall not be less than \$20,000,000.00 and that the total amount credited during the fiscal year beginning July 1, 1985 and during every fiscal year thereafter shall not be less than \$30,000,000.00.

In addition to the amounts credited to the account by this section, commencing with the fiscal year beginning July 1, 1995 and every fiscal year thereafter, there shall be appropriated from the General Fund such additional amounts as are necessary to carry out the provisions of this act and beginning July 1, 2000 the fees collected pursuant to subsection a. of section 68 of P.L.1990, c.8 (C.17:33B-63) shall be credited to the account for the purposes of this act, provided, however, the amount credited from such fees during any fiscal year shall not be less than \$60,000,000.

d. In addition to the amount credited in subsection a. of this section, beginning January 1 following approval by the voters an amount equivalent to the revenue derived from the tax imposed on the sale of petroleum products pursuant to P.L.1990, c.42 (C.54:15B-1 et seq.), provided, however,

such amount shall not be less than \$100,000,000 in the period January 1 through June 30 following approval by the voters and shall not be less than \$200,000,000 in any fiscal year thereafter and for the fiscal year commencing July 1, 2001 and for each fiscal year thereafter an amount equivalent to the revenue derived from the tax imposed under the "Sales and Use Tax Act," P.L.1966, c.30 (C.54:32B-1 et seq.) on the sale of new motor vehicles, provided, however, that such amount shall not be less than \$200,000,000 for the fiscal year commencing July 1, 2003 and for each fiscal year thereafter, as provided in Article VIII, Section II, paragraph 4 of the State Constitution.

No later than the fifth business day of the month following the month in which a credit has been made, the treasurer shall pay to the authority, for its purposes as provided herein, the amounts then credited to the "Transportation Trust Fund Account – Subaccount for Debt Service for Prior Bonds" and "Transportation Trust Fund Account – Subaccount for Debt Service for Transportation Program Bonds," provided that the payments to the authority shall be subject to and dependent upon appropriations being made from time to time by the Legislature of the amounts thereof for the purposes of the act, and further provided that the revenues deposited into the "Transportation Trust Fund Account – Subaccount for Debt Service for Transportation Program Bonds" shall consist solely of revenues which are dedicated pursuant to the New Jersey Constitution, including Article VIII, Section II, paragraph 4, and subsections a. and d. of this section.

6. Section 21 of P.L.1984, c.73 (C.27:1B-21) is amended to read as follows:

C.27:1B-21 "Special Transportation Fund."

21. a. There is hereby established a separate fund entitled "Special Transportation Fund." This fund shall be maintained by the State Treasurer and may be held in depositories as may be selected by the treasurer and invested and reinvested as other funds in the custody of the treasurer, in the manner provided by law. The commissioner may from time to time (but not more frequently than monthly) certify to the authority an amount necessary to fund payments made, or anticipated to be made by or on behalf of the department, from appropriations established for or made to the department from revenues or other funds of the authority. The commissioner's certification shall be deemed conclusive for purposes of the act. The authority shall, within 15 days of receipt of the certificate, transfer from available funds of the authority to the treasurer for deposit in the Special Transportation Fund the amount certified by the commissioner, provided that all funds transferred

shall only be expended by the department by project pursuant to appropriations made from time to time by the Legislature for the purposes of the act.

b. The department shall not expend any money except as appropriated by law. Commencing with appropriations for the fiscal years beginning on July 1, 1988, the department shall not expend any funds other than for permitted maintenance except as are appropriated by specific projects identified by a description of the projects, the county or counties within which they are located, and amounts to be expended on each project, in the annual appropriations act. Funds expended for permitted maintenance may be appropriated as one item of appropriation and subject to allocation at the commissioner's discretion.

c. No funds appropriated, authorized or expended pursuant to this act shall be used to finance the resurfacing of highways by department personnel, where that resurfacing would require the use of more than 100,000 tons of bituminous concrete for that purpose in any calendar year, except that the commissioner may waive this provision when he determines the existence of emergency conditions requiring the use of department personnel for the resurfacing of highways, after the department has effectively reached the 100,000 ton limit.

d. In order to provide the department with flexibility in administering the specific appropriations by project identified in the annual appropriations act, the commissioner may transfer a part of any item to any other item subject to the approval of the Director of the Division of Budget and Accounting and of the Joint Budget Oversight Committee or its successor. Upon approval of the director and the committee, the transfer shall take effect.

e. Any federal funds which become available to the State for transportation projects which have not been appropriated to the department in the annual appropriations act, shall be deemed appropriated to the department and may, subject to approval by the Joint Budget Oversight Committee and the State Treasurer, be expended for any purpose for which such funds are qualified.

f. There shall be no appropriations from the revenues and other funds of the authority for regular and routine maintenance of public highways and components thereof, or operational activities of the department unrelated to the implementation of, and indirect costs associated with, the capital program. The commissioner shall include in his annual budget request sufficient funding to effectuate the purposes of P.L.2000, c.73 (C.27:1B-21.14 et al.).

g. To the extent that salaries or overhead of the department or the New Jersey Transit Corporation are charged to transportation projects, each agency shall keep adequate and truthful personnel records, and time charts to adequately justify each such charge and shall make those records available to the external auditor to the authority.

h. The commissioner shall annually, on or before January 1 of each fiscal year, report to the Governor and the Legislature how much money was expended in the previous fiscal year for salaries and overhead of the department and the New Jersey Transit Corporation. However, the amount expended from the revenues and other funds of the authority for salaries and overhead of the department and the New Jersey Transit Corporation for the fiscal year beginning July 1, 2006 and each fiscal year thereafter shall not exceed 13 percent of the total funds appropriated from the revenues and other nonfederal funds of the authority for those fiscal years.

i. No revenues or other funds of the authority shall be expended for emergency response operations, the review of applications for access permits under the State highway access management code and membership fees or other fees connected with membership in TRANSCOM, the Transportation Operations Coordinating Committee.

7. Section 8 of P.L.1987, c.460 (C.27:1B-21.1) is amended to read as follows:

C.27:1B-21.1 Annual funding maximums.

8. a. Commencing with the report of the commissioner, as may be amended, required to be submitted pursuant to section 22 of P.L.1984, c.73 (C.27:1B-22) on or before March 1, 2006 and on each succeeding March 1 thereafter through March 1, 2015, the annual amount so reported by the commissioner for proposed projects shall not exceed \$1,600,000,000 exclusive of federal funds.

b. For the fiscal year beginning on July 1, 2006 and for each fiscal year thereafter through the fiscal year beginning on July 1, 2011, the total annual amount authorized to be appropriated from the revenues and other nonfederal funds of the New Jersey Transportation Trust Fund Authority for the projects listed in the appropriations act pursuant to section 21 of P.L.1984, c.73 (C.27:1B-21) shall not exceed \$1,600,000,000, all amounts exclusive of federal funds. The total amount authorized to be appropriated from the revenues and other nonfederal funds of the New Jersey Transportation Trust Fund Authority for the projects listed in the appropriations act pursuant to section 21 of P.L.1984, c.73 (C.27:1B-21) shall not exceed: \$1,247,000,000 for the fiscal year beginning on July 1, 2012; \$1,224,000,000 for the fiscal year beginning on July 1, 2013; \$1,225,000,000 for the fiscal year beginning on July 1, 2014; and \$1,247,000,000 for the fiscal year beginning on July 1, 2015.

c. (Deleted by amendment, P.L.1991, c.40.)

d. (Deleted by amendment, P.L.1992, c.10).

e. The State Auditor shall provide for a unified annual audit of expenditures from the "Special Transportation Fund," established by section 21 of P.L.1984, c.73 (C.27:1B-21), in order to determine that these funds are expended for costs eligible for funding from the authority and in a manner consistent with appropriations made by the Legislature. The findings of such audits shall be transmitted to the presiding officer of each House of the Legislature, and to the Chair of the Senate Budget and Appropriations Committee, the Senate Transportation Committee, the Assembly Appropriations Committee, and the Assembly Transportation and Communications Committee or their successors.

f. The State Auditor shall review bond issuances of the authority and report to the Joint Budget Oversight Committee and to the members of the Senate Budget and Appropriations Committee and the Assembly Appropriations Committee, or their successors, on the status of the bonds of the authority and projects financed from the proceeds of the bonds. The report shall include the investment status of all unexpended bond proceeds and provide a description of any bond issues expected during a fiscal year, including type of issue, estimated amount of bonds to be issued and the expected month of sale.

8. Section 23 of P.L.1984, c.73 (C.27:1B-23) is amended to read as follows:

C.27:1B-23 Contracts by treasurer, commissioner and authority.

23. In order to implement the arrangement provided for in the act, the treasurer, the commissioner and the authority are hereby authorized to enter into one or more contracts. The contracts shall commence with the fiscal year beginning July 1, 1984, and provide for the credit to the "Transportation Trust Fund Account" in the amounts provided for in section 20 of the act and for the payment to the authority of the amounts credited to the "Transportation Trust Fund Account" in accordance with the provisions of section 20 of the act. The contracts shall also provide for the payment by the authority of the amounts provided for in section 21 of the act and for expenditures from the "Special Transportation Fund," as provided in section 21 of the act. The contract or contracts shall be on terms and conditions as determined by the parties and may contain terms and conditions necessary and desirable to secure the bonds, notes and other obligations of the authority, provided, however, that the incurrence of any obligation by the State under the contract or contracts, including any payments to be made there-

under from the "Transportation Trust Fund Account" or the "Special Transportation Fund," shall be subject to and dependent upon appropriations being made from time to time by the Legislature for the purposes of the act. Any contract providing for the payment of transportation program bonds and any agreements securing such transportation program bonds shall provide that such payment shall be made solely from revenues dedicated pursuant to the New Jersey Constitution, including Article VIII, Section II, paragraph 4, and deposited into the "Transportation Trust Fund Account – Subaccount for Debt Service for Transportation Program Bonds."

9. Section 25 of P.L.1984, c.73 (C.27:1B-25) is amended to read as follows:

C.27:1B-25 County, municipal projects.

25. a. Notwithstanding the provisions of subtitle 4 of Title 27 of the Revised Statutes and P.L.1946, c.301 (C.27:15A-1 et seq.), the commissioner may, pursuant to appropriations or authorizations being made from time to time by the Legislature according to law, allocate to counties and municipalities funds for the planning, acquisition, engineering, construction, reconstruction, repair, resurfacing and rehabilitation of public highways and the planning, acquisition, engineering, construction, reconstruction, repair, maintenance and rehabilitation of public transportation projects and of other transportation projects which a county or municipality may be authorized by law to undertake.

b. The commissioner shall, pursuant to appropriations or authorizations being made from time to time by the Legislature according to law, allocate at his discretion State aid to counties and municipalities for transportation projects, except that the amount to be appropriated for this program shall be 10% of the total amount appropriated for the total county and municipal aid programs. This State aid shall be set aside prior to any formula allocations provided for in subsections c., d., and e. of this section.

c. The commissioner shall, pursuant to appropriations or authorizations being made from time to time by the Legislature according to law and pursuant to the provisions of subsections b. and d. of this section, allocate State aid to municipalities for public highways under their jurisdiction. The amount to be appropriated shall be allocated on the basis of the following distribution factor:

$$DF = Pc/Ps + Cm/Sm$$

where, DF equals the distribution factor

Pc equals county population

Ps equals State population

Cm equals municipal road mileage within the county

Sm equals municipal road mileage within the State.

After the amount of aid has been allocated based on the above formula, the commissioner shall determine priority for the funding of municipal projects within each county, based upon criteria relating to volume of traffic, safety considerations, growth potential, readiness to obligate funds and local taxing capacity. In addition to the above criteria used in determining priority of funding of municipal projects in each county, the commissioner shall consider whether a project is intended to remedy hazardous conditions as identified for the purposes of providing transportation pursuant to N.J.S.18A:39-1.2 for school pupils or to improve pedestrian safety.

For the purposes of this subsection, (1) "population" means the official population count as reported by the New Jersey Department of Labor and Workforce Development; and (2) "municipal road mileage" means that road mileage under the jurisdiction of municipalities, as determined by the department.

d. There shall be appropriated at least \$175,000,000 for the fiscal year commencing July 1, 2006 and for each fiscal year thereafter, for the purposes provided herein and in subsections b., c. and e. of this section. (1) Of that appropriation, the commissioner shall allocate \$5,000,000.00 as State aid to any municipality qualifying for aid pursuant to the provisions of P.L.1978, c.14 (C.52:27D-178 et seq.). The commissioner shall allocate the aid to each municipality in the same proportion that the municipality receives aid under P.L.1978, c.14. (2) The remaining amount of the appropriation shall be allocated pursuant to the provisions of subsection c. of this section.

e. The commissioner may, pursuant to appropriations or authorizations being made from time to time by the Legislature according to law, allocate additional funding to the Local County Aid Program for public highway projects, in accordance with a formula similar to that provided for in subsection c. of this section, except that Cm equals road mileage under county jurisdiction and Sm equals total county road mileage within the State.

10. Section 9 of P.L.1995, c.108 (C.27:1B-25.1) is amended to read as follows:

C.27:1B-25.1 Aid to counties, municipalities, basis.

9. Aid to counties and municipalities administered by the department may, at the discretion of the commissioner, be disbursed to any individual county or municipality on a grant basis or on a cost reimbursement basis.

Distribution of the portion of the grant provided initially to a county or municipality may be contingent on its performance in spending prior grants. Failure to award construction or other approved contracts for 100 percent of a county's allotment within three years of notification by the department of that year's allotment shall result in the allotment being immediately rescinded or the funds returned to the department, as applicable, or in the event such funds are not immediately returned, deducted by the department from future allocations of aid to such county. Any such funds may be reallocated by the commissioner on a grant basis or a cost reimbursement basis to such other counties or municipalities as the commissioner shall so determine. Failure to award construction or other approved contracts for 100 percent of a municipality's allotment within two years of notification by the department of that year's allotment shall result in that year's allocation being immediately rescinded. Any such funds may be reallocated by the commissioner on a grant basis or a cost reimbursement basis to such other counties or municipalities as the commissioner shall determine.

11. This act shall take effect immediately.

Approved June 29, 2012.

CHAPTER 14

AN ACT concerning stored value cards, amending P.L.2010, c.25 and P.L.2002, c.14 and supplementing chapter 30B of Title 46 of the Revised Statutes.

BE IT ENACTED *by the Senate and General Assembly of the State of New Jersey*:

1. Section 5 of P.L.2010, c.25 (C.46:30B-42.1) is amended to read as follows:

C.46:30B-42.1 Presumption of abandonment of stored value card; exceptions; cash redemption.

5. a. A stored value card for which there has been no stored value card activity for five years is presumed abandoned. This subsection shall apply to any stored value card issued on or after July 1, 2010.

b. The proceeds of a general purpose reloadable card presumed abandoned shall be the value of the card, in money, on the date the general pur-

pose reloadable card is presumed abandoned. The proceeds of all other stored value cards presumed abandoned shall be 60% of the value of the card, in money, on the date the stored value card is presumed abandoned.

c. Beginning the first day of the 49th month following the date of enactment of P.L.2012, c.14, an issuer of a stored value card shall obtain the name and address of the purchaser or owner of each stored value card issued or sold and shall, at a minimum, maintain a record of the zip code of the owner or purchaser.

d. Nothing in this section shall be construed to prevent an issuer from honoring a stored value card, the unredeemed value of which has been reported to the State Treasurer pursuant to R.S.46:30B-1 et seq., and thereafter seeking reimbursement from the State Treasurer pursuant to R.S.46:30B-62.

e. This section does not apply to:

(1) a stored value card that is distributed by the issuer, directly or indirectly, to a person under a promotional, incentive, rewards, or customer loyalty program or a charitable program for which no direct monetary consideration is paid by the owner;

(2) a stored value card that is donated or sold below face value to a nonprofit or charitable organization or an educational organization;

(3) a stored value card that is redeemable for admission to events or venues at a particular location or group of affiliated locations, or for goods or services in conjunction with admission to those events or venues, or both, at the event or venue or at specific locations affiliated with and in geographic proximity to the event or venue; and

(4) a stored value card issued by any issuer that in the past year sold stored value cards with a face value of \$250,000 or less. For purposes of this subsection, sales of stored value cards by businesses that operate either (1) under the same trade name as or under common ownership or control with another business or businesses in the State, or (2) as franchised outlets of a parent business, shall be considered sales by a single issuer.

f. The State Treasurer is authorized to grant an exemption from such provisions concerning stored value cards, on such terms and conditions as the State Treasurer may require, for a business or class of businesses that demonstrate good cause to the satisfaction of the State Treasurer. In exercising his discretion pursuant to this section, the State Treasurer may consider relevant factors including, but not limited to, the amount of stored value card transactions processed, the technology in place, whether or not stored value cards issued contain a microprocessor chip, magnetic strip, or other means designed to trace and capture information about place and date of purchase, and such other factors as the State Treasurer shall deem relevant.

g. Notwithstanding the provisions of this act or any other law to the contrary, only a stored value card which is exempt from the provisions of this act pursuant to subsection e. or f. of this section shall be deemed a gift card or gift certificate for purposes of P.L.2002, c.14 (C.56:8-110 et seq.).

h. Beginning September 1, 2012 if a stored value card is redeemed and a balance of less than \$5 remains on the card after redemption, at the owner's request the merchant or other entity redeeming the card shall refund the balance in cash to the owner.

A merchant or other entity required to comply with the provisions of this subsection shall be liable to a penalty of \$500 for each violation plus restitution of the amount of the cash value remaining on the stored value card, provided however that the amount of the penalty shall be trebled for an aggregate of 100 such violations occurring during any 12 month period. Failure to provide requested cash redemption for each stored value card shall be considered a separate violation. Upon receiving evidence of any violation of the provisions of this subsection, the Director of the Division of Consumer Affairs, or the director's designee, is empowered to hold hearings upon those violations and upon finding the violation to have been committed, to assess a penalty against the person alleged to have committed the violation in the amounts provided in this subsection. The director shall thereafter return to the owner of the card the amount of the cash value remaining on the card recovered under this subsection, and this shall be the sole remedy available to the owner for those violations.

This subsection does not impose on an issuer or merchant or other entity required to comply with the provisions of this subsection an obligation to advertise the availability of a refund balance redemption. Notwithstanding the foregoing or any provision in section 3 of P.L.1981, c.454 (C.56:12-16), an issuer, seller or redeemer of stored value cards may elect to include a disclosure or may, in the alternative, include a statement on the stored value card or other marketing materials that the card "is not redeemable for cash except as required by law" or similar statement.

This subsection shall not apply to (1) a non-reloadable stored value card with an initial value of \$5 or less; or (2) a stored value card that is not purchased but is provided in lieu of a refund for returned merchandise; or (3) a stored value card that can be redeemed at multiple merchants that are not under common ownership or control, including but not limited to network-branded stored value cards.

i. The funds associated with a stored value card sold on or after December 1, 2012 shall be valid until redemption and shall not expire. However, a stored value card may contain an expiration date to the extent per-

mitted by federal law that applies only to the card or other tangible medium through which the underlying funds can be accessed, provided those underlying funds do not expire.

j. For stored value cards sold on or after December 1, 2012, in addition to the requirements of section 37 of P.L.2002, c.35 (C.46:30B-43.1), no fees or charges shall be imposed on a stored value card except that the issuer may charge (1) an activation, issuance, purchase or similar fee related to the issuance and purchase of a stored value card and for each occurrence of adding value to an existing stored value card; and (2) a replacement card fee with respect to lost, stolen or damaged stored value cards provided that these fees are disclosed in writing prior to issuance or referenced on the stored value card or the stored value card packaging. The State Treasurer may adopt regulations regarding the establishment of activation, issuance, purchase or similar fees, fees for adding value to an existing stored value card, and replacement card fees.

A general purpose reloadable card shall not be subject to the provisions of this subsection.

k. As used in this section:

"Stored value card activity" means the purchase or issuance of the stored value card, a transaction executed by the owner that increased or decreased the value of the stored value card, or communication by the owner of the stored value card with the issuer of the stored value card concerning the value of the balance remaining on the stored value card as evidenced by a contemporaneous record prepared by or on behalf of the issuer.

"Issuer" means an issuer of a stored value card that is a person, retailer, merchant, vendor, provider or business association with the obligations of a holder to accept the stored value card as redeemable for, solely or a combination of, merchandise, services, or cash, and to report and deliver proceeds of the stored value card if abandoned.

"General purpose reloadable card" means a stored value card issued by a bank or other similarly regulated financial institution or by a licensed money transmitter that is (1) usable and honored upon presentation at multiple merchants or service providers that are not under common ownership or control for goods or services or at automated teller machines, (2) issued in a requested prepaid amount which amount may be, at the option of the issuer, increased in value or reloaded if requested by the cardholder, and (3) not marketed or labeled as a gift card; the term "reloadable card" includes a temporary non-reloadable card issued solely in connection with a reloadable card.

2. Section 1 of P.L.2002, c.14 (C.56:8-110) is amended to read as follows:

C.56:8-110 Gift certificate, card, validity, terms, required; definitions.

1. a. A gift certificate or gift card sold after the effective date of this amendatory act shall retain full unused value until presented in exchange for merchandise, or shall have any and all conditions and limitations, as permitted in paragraphs (1) through (3) of this subsection, disclosed to the purchaser of the gift certificate or gift card at the time of purchase as provided in subsection b. of this section.

(1) In no case shall the underlying funds associated with a gift certificate or gift card expire within the 24 months immediately following the date of sale.

(2) No dormancy fee shall be charged against a gift certificate or a gift card within the 24 months immediately following the date of sale, nor shall one be charged within the 24 months immediately following the most recent activity or transaction in which the certificate or card was used.

(3) A dormancy fee charged against a gift certificate or gift card as permitted by this subsection shall not exceed \$2.00 per month.

b. The terms of any expiration date or dormancy fee applicable to a gift certificate or gift card, as permitted by subsection a. of this section, shall be disclosed to a consumer by:

(1) written notice of the expiration date or dormancy fee or both printed in at least 10 point font, on the gift certificate or gift card, or the sales receipt for the certificate or card, or the package for the certificate or card; and

(2) written notice, in at least 10 point font, on the gift certificate or gift card, or the sales receipt for the certificate or card, or the package for the certificate or card, of a telephone number which the consumer may call, for information concerning any expiration date or dormancy fee.

c. Beginning September 1, 2012 if a stored value card deemed a gift card or gift certificate pursuant to section 5 of P.L.2010, c.25 (C.46:30B-42.1) is redeemed and a balance of less than \$5 remains on the card after redemption, at the owner's request the merchant or other entity redeeming the card shall refund the balance in cash to the owner.

A merchant or other entity required to comply with the provisions of this subsection shall be liable to a penalty of \$500 for each violation plus restitution of the amount of the cash value remaining on the stored value card, provided however that the amount of the penalty shall be trebled for an aggregate of 100 such violations occurring during any 12-month period. Failure to provide requested cash redemption for each stored value card

shall be considered a separate violation. Upon receiving evidence of any violation of the provisions of this subsection, the Director of the Division of Consumer Affairs, or the director's designee, is empowered to hold hearings upon those violations and upon finding the violation to have been committed, to assess a penalty against the person alleged to have committed the violation in the amounts provided in this subsection. The director shall thereafter return to the owner of the card the amount of the cash value remaining on the card recovered under this subsection, and this shall be the sole remedy available to the owner for those violations.

This subsection does not impose on an issuer or merchant or other entity required to comply with the provisions of this subsection an obligation to advertise the availability of a refund balance redemption. Notwithstanding the foregoing or any provision in section 3 of P.L.1981, c.454 (C.56:12-16), an issuer, seller or redeemer of stored value cards may elect to include a disclosure or may, in the alternative, include a statement on the stored value card or other marketing materials that the card "is not redeemable for cash except as required by law" or similar statement.

This subsection shall not apply to (1) a non-reloadable stored value card with an initial value of \$5 or less; or (2) a stored value card that is not purchased but is provided in lieu of a refund for returned merchandise; or (3) a stored value card that can be redeemed at multiple merchants that are not under common ownership or control, including but not limited to network-branded stored value cards; or (4) a rewards card; or (5) a stored value card that is donated or sold below face value to a nonprofit or charitable organization or an educational organization; or (6) a stored value card that is redeemable for admission to events or venues at a particular location or group of affiliated locations, or for goods or services in conjunction with admission to those events or venues, or both, at the event or venue or at specific locations affiliated with and in geographic proximity to the event or venue.

d. As used in this section:

"Dormancy fee" means a charge imposed against the unused value of a gift card or gift certificate due to inactivity;

"Gift card" means a tangible device, whereon is embedded or encoded in an electronic or other format a value issued in exchange for payment, which promises to provide to the bearer merchandise of equal value to the remaining balance of the device. "Gift card" does not include a prepaid telecommunications or technology card, prepaid bank card or rewards card;

"Gift certificate" means a written promise given in exchange for payment to provide merchandise in a specified amount or of equal value to the

bearer of the certificate. "Gift certificate" does not include a prepaid telecommunications or technology card, prepaid bank card or rewards card;

"Merchandise" means and includes any objects, wares, goods, commodities, services or anything offered, directly or indirectly, to the public for sale;

"Prepaid bank card" means a general use, prepaid card or other electronic payment device that is issued by a bank or other financial institution, or a licensed money transmitter, in a pre-denominated amount usable at multiple, unaffiliated merchants or at automated teller machines, or both, but shall not include a card issued by a retail merchant;

"Prepaid telecommunications or technology card" includes, but is not limited to: a prepaid telephone calling card; prepaid technical support card; or prepaid Internet disk distributed to or purchased by a consumer; and

"Rewards card" means a card or certificate distributed by the issuer to a consumer pursuant to an awards, loyalty, rewards or promotional program, without any money or other consideration or thing of value by the consumer in exchange for the card or certificate.

3. Notwithstanding any provision of the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.) to the contrary, the State Treasurer may adopt immediately upon filing with the Office of Administrative Law such regulations as the State Treasurer deems necessary to implement the provisions of P.L.2012, c.14, which regulations shall be effective for a period not to exceed 180 days following the date of enactment of P.L.2012, c.14 and may thereafter be amended, adopted, or readopted by the State Treasurer in accordance with the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.).

4. This act shall take effect immediately.

Approved June 29, 2012.

CHAPTER 15

AN ACT transferring the New Jersey Sports and Exposition Authority from the Department of Community Affairs to the Department of State and amending and supplementing P.L.1971, c.137 (C.5:10-1 et seq.).

BE IT ENACTED *by the Senate and General Assembly of the State of New Jersey*:

C.5:10-4.1 New Jersey Sports and Exposition Authority transferred to the Department of State.

1. The New Jersey Sports and Exposition Authority, established as a public body corporate and politic in the Department of Community Affairs pursuant to section 4 of P.L.1971, c.137 (C.5:10-4), together with its functions, powers and duties, is transferred as a public body corporate and politic to the Department of State. The transfer made pursuant to this section shall be made in accordance with the provisions of the "State Agency Transfer Act," P.L.1971, c.375 (C.52:14D-1 et seq.).

2. Section 4 of P.L.1971, c.137 (C.5:10-4) is amended to read as follows:

C.5:10-4 "New Jersey Sports and Exposition Authority."

4. a. There is hereby established in the Department of State a public body corporate and politic, with corporate succession, to be known as the "New Jersey Sports and Exposition Authority." The authority is hereby constituted as an instrumentality of the State exercising public and essential governmental functions, and the exercise by the authority of the powers conferred by P.L.1971, c.137 (C.5:10-1 et seq.) shall be deemed and held to be an essential governmental function of the State and the application of the revenue derived from the projects to the purposes provided in P.L.1971, c.137 (C.5:10-1 et seq.) shall be deemed and held to be applied in support of government.

b. The authority shall consist of the State Treasurer, the President of the New Jersey Sports and Exposition Authority, and a member of the New Jersey Meadowlands Commission, to be appointed by the Governor, who shall be members ex officio, 11 members appointed by the Governor with the advice and consent of the Senate, one member appointed by the President of the Senate and one member appointed by the Speaker of the General Assembly, for terms of four years. Each member shall hold office for the term of the member's appointment and until the member's successor shall have been appointed and qualified. A member shall be eligible for reappointment. Any vacancy in the membership occurring other than by expiration of term shall be filled in the same manner as the original appointment but for the unexpired term only.

c. Each appointed member may be removed from office by the Governor, for cause, after a public hearing, and may be suspended by the Governor pending the completion of such hearing. Each member before entering upon the member's duties shall take and subscribe an oath to perform the duties of the member's office faithfully, impartially and justly to the

best of the member's ability. A record of such oaths shall be filed in the office of the Secretary of State.

d. The chair shall be appointed by the Governor from the members of the authority other than ex officio members, and the members of the authority shall elect one of their number as vice chair thereof. The authority shall elect a secretary and a treasurer, who need not be members, and the same person may be elected to serve both as secretary and treasurer. The powers of the authority shall be vested in the members thereof in office from time to time and nine members of the authority shall constitute a quorum at any meeting thereof. Action may be taken and motions and resolutions adopted by the authority at any meeting thereof by the affirmative vote of at least eight members of the authority. No vacancy in the membership of the authority shall impair the right of a quorum of the members to exercise all the powers and perform all the duties of the authority.

e. Each member and the treasurer of the authority shall execute a bond to be conditioned upon the faithful performance of the duties of such member or treasurer, as the case may be, in such form and amount as may be prescribed by the Director of the Division of Budget and Accounting in the Department of the Treasury. Such bonds shall be filed in the office of the Secretary of State. At all times thereafter the members and treasurer of the authority shall maintain such bonds in full force and effect. All costs of such bonds shall be borne by the authority.

f. The members of the authority shall serve without compensation, but the authority shall reimburse its members for actual expenses necessarily incurred in the discharge of their duties. Notwithstanding the provisions of any other law, no officer or employee of the State shall be deemed to have forfeited or shall forfeit the officer's or employee's office or employment or any benefits or emoluments thereof by reason of the officer's or employee's acceptance of the office of ex officio member of the authority or the officer's or employee's services therein.

g. Each ex officio member of the authority may designate an officer or employee of the member's department or agency to represent the member at meetings of the authority, and each such designee may lawfully vote and otherwise act on behalf of the member for whom the designee is constituted. Any such designation shall be in writing delivered to the authority and shall continue in effect until revoked or amended by writing delivered to the authority.

h. The authority may be dissolved by act of the Legislature on condition that the authority has no debts or obligations outstanding or that provision has been made for the payment or retirement of such debts or obliga-

tions. Upon any such dissolution of the authority all property, funds and assets thereof shall be vested in the State.

i. A true copy of the minutes of every meeting of the authority shall be forthwith delivered by and under the certification of the secretary thereof to the Governor. No action taken at such meeting by the authority shall have force or effect until 15 days after such copy of the minutes shall have been so delivered unless during such 15-day period the Governor shall approve the same, in which case such action shall become effective upon such approval. If, in said 15-day period, the Governor returns such copy of the minutes with veto of any action taken by the authority or any member thereof at such meeting, such action shall be null and void and of no effect. The powers conferred in this subsection i. upon the Governor shall be exercised with due regard for the rights of the holders of bonds and notes of the authority at any time outstanding, and nothing in, or done pursuant to, this subsection i. shall in any way limit, restrict or alter the obligation or powers of the authority or any representative or officer of the authority to carry out and perform in every detail each and every covenant, agreement or contract at any time made or entered into by or on behalf of the authority with respect to its bonds or notes or for the benefit, protection or security of the holders thereof.

3. Section 5 of P.L.1977, c.137 (C.5:10-5) is amended to read as follows:

C.5:10-5 Powers of authority.

5. Except as otherwise limited by the act, the authority shall have power:

- a. To sue and be sued;
- b. To have an official seal and alter the same at pleasure;
- c. To make and alter bylaws for its organization and internal management and for the conduct of its affairs and business;
- d. To maintain an office at such place or places within the State as it may determine;
- e. To acquire, hold, use and dispose of its income, revenues, funds and moneys;
- f. To acquire, lease as lessee or lessor, rent, lease, hold, use and dispose of real or personal property for its purposes;
- g. To borrow money and to issue its negotiable bonds or notes and to secure the same by a mortgage on its property or any part thereof, and to enter into any credit agreement, and otherwise to provide for and secure the payment of its bonds and notes and to provide for the rights of the holders thereof;

h. To make and enter into all contracts, leases, and agreements for the use or occupancy of its projects or any part thereof or which are necessary or incidental to the performance of its duties and the exercise of its powers under the act;

i. To make surveys, maps, plans for, and estimates of the cost of its projects;

j. To establish, acquire, construct, lease the right to construct, rehabilitate, repair, improve, own, operate, and maintain its projects, and let, award and enter into construction contracts, purchase orders and other contracts with respect thereto in such manner as the authority shall determine, subject only to the provisions of sections 1 through 3 of P.L.1981, c.447 (C.5:10-21.1 through 5:10-21.3) and section 3 of P.L.1987, c.318 (C.5:10-21.1a);

k. To fix and revise from time to time and charge and collect rents, tolls, fees and charges for the use, occupancy or services of its projects or any part thereof or for admission thereto, and for the grant of concessions therein and for things furnished or services rendered by the authority;

l. To establish and enforce rules and regulations for the use or operation of its projects or the conduct of its activities, and provide for the policing and the security of its projects;

m. To acquire in the name of the authority by purchase or otherwise, on such terms and conditions and in such manner as it may deem proper, or, except with respect to the State, by the exercise of the power of eminent domain, any land and other property, including land under water, meadowlands, and riparian rights, which it may determine is reasonably necessary for any of its projects or for the relocation or reconstruction of any highway by the authority and any and all rights, title and interest in such land and other property, including public lands, reservations, highways or parkways, owned by or in which the State or any county, city, borough, town, township, village, public corporation, or other political subdivision of the State has any right, title or interest, or parts thereof or rights therein and any fee simple absolute or any lesser interest in private property, and any fee simple absolute in, easements upon or the benefit of restrictions upon abutting property, to preserve and protect any project, except that the authority shall not have the right to exercise the power of eminent domain in connection with projects authorized under paragraphs (5), (6), and (7) of subsection a. of section 6 of P.L.1971, c.137 (C.5:10-6);

n. To provide through its employees, or by the grant of one or more concessions, or in part through its employees and in part by grant of one or more concessions, for the furnishing of services and things for the accommodation of persons admitted to or using its projects or any part thereof;

- o. To hold and conduct horse race meetings for stake, purse or reward and to provide and operate a parimutuel system of wagering at such meetings, but subject only to the provisions of section 7 of the act;
- p. To acquire, construct, operate, maintain, improve, and make capital contributions to others for transportation and other facilities, services and accommodations for the public's use of its projects and to lease or otherwise contract for the operation thereof;
- q. Subject to any agreement with bondholders or noteholders, to invest moneys of the authority not required for immediate use, including proceeds from the sale of any bonds or notes, in such obligations, securities and other investments as the authority shall deem prudent;
- r. To contract for and to accept any gifts or grants or loans of funds or property or financial or other aid in any form from the United States of America or any agency or instrumentality thereof, or from the State or any agency, instrumentality or political subdivision thereof, or from any other source and to comply, subject to the provisions of the act, with the terms and conditions thereof;
- s. Subject to any agreements with bondholders or noteholders, to purchase bonds or notes of the authority out of any funds or money of the authority available therefor, and to hold, cancel or resell such bonds or notes;
- t. To appoint and employ a president, who shall be the chief executive officer, and such additional officers, who need not be members of the authority, and accountants, attorneys, financial advisors or experts and all such other or different officers, agents and employees as it may require and to determine their qualifications, terms of office, duties and compensation, all without regard to the provisions of Title 11A of the New Jersey Statutes; provided that it is the express intent of the Legislature that the authority within its sole discretion shall utilize, to the fullest extent feasible, the services of the officers, personnel and consultants of the Meadowlands Commission, in connection with its project in the Meadowlands complex;
- u. To do and perform any acts and things authorized by the act, under, through, or by means of its officers, agents or employees or by contract with any person, firm or corporation;
- v. To procure insurance against any losses in connection with its property, operations or assets, in such amounts and from such insurers as it deems desirable;
- w. To do any and all things, including, but not limited to, the creation or formation of profit or not-for-profit corporations, necessary or convenient to carry out its purposes and exercise the powers given and granted in the act;

x. To determine the location, type and character of a project or any part thereof and all other matters in connection with all or any part of a project, notwithstanding any land use plan, zoning regulation, building code or similar regulation heretofore or hereafter adopted by the State, any municipality, county, public body politic and corporate, including but not limited to the Meadowlands Commission, or any other political subdivision of the State, except that all projects constructed after the effective date of this 1987 amendatory and supplementary act shall conform to the Barrier-Free Sub-Code promulgated as part of the State Uniform Construction Code pursuant to P.L.1975, c.217 (C.52:27D-119 et seq.) and further excepted that the authority shall consult with the Meadowlands Commission before making any determination as to the location, type and character of any project under the jurisdiction of the Meadowlands Commission;

y. To provide, with or without charge as it deems appropriate, through or by means of its officers, agents or employees, advisory, consulting, management or operating services to any political subdivision of the State, or any agency or instrumentality of the State or of any political subdivision of the State, with regard to a stadium, arena, concert hall or other sports or entertainment facility in operation as of January 1, 2004 and owned or operated by such entity as of January 1, 2004; and

z. To consult, collaborate, and work in partnership with the Division of Travel and Tourism and the Motion Picture and Television Development Commission to coordinate economic development and promotional and marketing efforts related to tourism, entertainment, sports, and related activities and to assist the division and the Commission in fulfilling their respective duties and responsibilities as prescribed by law.

4. This act shall take effect immediately.

Approved June 29, 2012.

CHAPTER 16

AN ACT reorganizing the Department of Children and Families, transferring the Division on Women from the Department of Community Affairs to the Department of Children and Families, transferring certain services for youth from the Department of Human Services to the Department of Children and Families, amending various parts of the statutory law, and supplementing P.L.1974, c.87 (C.52:27D-43.8) and Title 30 of the Revised Statutes.

BE IT ENACTED *by the Senate and General Assembly of the State of New Jersey*:

1. Section 24 of P.L.1982, c.77 (C.2A:4A-43) is amended to read as follows:

C.2A:4A-43 Disposition of delinquency cases.

24. Disposition of delinquency cases. a. In determining the appropriate disposition for a juvenile adjudicated delinquent the court shall weigh the following factors:

- (1) The nature and circumstances of the offense;
- (2) The degree of injury to persons or damage to property caused by the juvenile's offense;
- (3) The juvenile's age, previous record, prior social service received, and out-of-home placement history;
- (4) Whether the disposition supports family strength, responsibility and unity and the well-being and physical safety of the juvenile;
- (5) Whether the disposition provides for reasonable participation by the child's parent, guardian, or custodian, provided, however, that the failure of a parent or parents to cooperate in the disposition shall not be weighed against the juvenile in arriving at an appropriate disposition;
- (6) Whether the disposition recognizes and treats the unique physical, psychological, and social characteristics and needs of the child;
- (7) Whether the disposition contributes to the developmental needs of the child, including the academic and social needs of the child where the child has intellectual disabilities or learning disabilities;
- (8) Any other circumstances related to the offense and the juvenile's social history as deemed appropriate by the court;
- (9) The impact of the offense on the victim or victims;
- (10) The impact of the offense on the community; and
- (11) The threat to the safety of the public or any individual posed by the child.

b. If a juvenile is adjudged delinquent, and except to the extent that an additional specific disposition is required pursuant to subsection e. or f. of this section, the court may order incarceration pursuant to section 25 of P.L.1982, c.77 (C.2A:4A-44) or any one or more of the following dispositions:

- (1) Adjourn formal entry of disposition of the case for a period not to exceed 12 months for the purpose of determining whether the juvenile makes a satisfactory adjustment, and if during the period of continuance the juvenile makes such an adjustment, dismiss the complaint; provided that if

the court adjourns formal entry of disposition of delinquency for a violation of an offense defined in chapter 35 or 36 of Title 2C of the New Jersey Statutes the court shall assess the mandatory penalty set forth in N.J.S.2C:35-15 but may waive imposition of the penalty set forth in N.J.S.2C:35-16 for juveniles adjudicated delinquent;

(2) Release the juvenile to the supervision of the juvenile's parent or guardian;

(3) Place the juvenile on probation to the chief probation officer of the county or to any other suitable person who agrees to accept the duty of probation supervision for a period not to exceed three years upon such written conditions as the court deems will aid rehabilitation of the juvenile;

(4) Transfer custody of the juvenile to any relative or other person determined by the court to be qualified to care for the juvenile;

(5) Place the juvenile under the care and responsibility of the Department of Children and Families so that the commissioner may designate a division or organizational unit in the department pursuant to P.L.1951, c.138 (C.30:4C-1 et seq.) for the purpose of providing services in or out of the home. Within 14 days, unless for good cause shown, but not later than 30 days, the Department of Children and Families shall submit to the court a service plan, which shall be presumed valid, detailing the specifics of any disposition order. The plan shall be developed within the limits of fiscal and other resources available to the department. If the court determines that the service plan is inappropriate, given existing resources, the department may request a hearing on that determination;

(6) Place the juvenile under the care and custody of the Commissioner of Children and Families for the purpose of receiving the services of the Division of Children's System of Care of that department, provided that the juvenile has been determined to be eligible for those services under P.L.1965, c.59, s.16 (C.30:4-25.4);

(7) Commit the juvenile, pursuant to applicable laws and the Rules of Court governing civil commitment, to the Department of Children and Families under the responsibility of the Division of Children's System of Care for the purpose of placement in a suitable public or private hospital or other residential facility for the treatment of persons who are mentally ill, on the ground that the juvenile is in need of involuntary commitment;

(8) Fine the juvenile an amount not to exceed the maximum provided by law for such a crime or offense if committed by an adult and which is consistent with the juvenile's income or ability to pay and financial responsibility to the juvenile's family, provided that the fine is specially adapted to the rehabilitation of the juvenile or to the deterrence of the type of crime or

offense. If the fine is not paid due to financial limitations, the fine may be satisfied by requiring the juvenile to submit to any other appropriate disposition provided for in this section;

(9) Order the juvenile to make restitution to a person or entity who has suffered loss resulting from personal injuries or damage to property as a result of the offense for which the juvenile has been adjudicated delinquent. The court may determine the reasonable amount, terms, and conditions of restitution. If the juvenile participated in the offense with other persons, the participants shall be jointly and severally responsible for the payment of restitution. The court shall not require a juvenile to make full or partial restitution if the juvenile reasonably satisfies the court that the juvenile does not have the means to make restitution and could not reasonably acquire the means to pay restitution;

(10) Order that the juvenile perform community services under the supervision of a probation division or other agency or individual deemed appropriate by the court. Such services shall be compulsory and reasonable in terms of nature and duration. Such services may be performed without compensation, provided that any money earned by the juvenile from the performance of community services may be applied towards any payment of restitution or fine which the court has ordered the juvenile to pay;

(11) Order that the juvenile participate in work programs which are designed to provide job skills and specific employment training to enhance the employability of job participants. Such programs may be without compensation, provided that any money earned by the juvenile from participation in a work program may be applied towards any payment of restitution or fine which the court has ordered the juvenile to pay;

(12) Order that the juvenile participate in programs emphasizing self-reliance, such as intensive outdoor programs teaching survival skills, including but not limited to camping, hiking, and other appropriate activities;

(13) Order that the juvenile participate in a program of academic or vocational education or counseling, such as a youth service bureau, requiring attendance at sessions designed to afford access to opportunities for normal growth and development. This may require attendance after school, evenings, and weekends;

(14) Place the juvenile in a suitable residential or nonresidential program for the treatment of alcohol or narcotic abuse, provided that the juvenile has been determined to be in need of such services;

(15) Order the parent or guardian of the juvenile to participate in appropriate programs or services when the court has found either that such person's omission or conduct was a significant contributing factor towards

the commission of the delinquent act, or, under its authority to enforce litigant's rights, that such person's omission or conduct has been a significant contributing factor towards the ineffective implementation of a court order previously entered in relation to the juvenile;

(16) (a) Place the juvenile in a nonresidential program operated by a public or private agency, providing intensive services to juveniles for specified hours, which may include education, counseling to the juvenile and the juvenile's family if appropriate, vocational training, employment counseling, work, or other services;

(b) Place the juvenile under the custody of the Juvenile Justice Commission established pursuant to section 2 of P.L.1995, c.284 (C.52:17B-170) for placement with any private group home or private residential facility with which the commission has entered into a purchase of service contract;

(17) Instead of or in addition to any disposition made according to this section, the court may postpone, suspend, or revoke for a period not to exceed two years the driver's license, registration certificate, or both of any juvenile who used a motor vehicle in the course of committing an act for which the juvenile was adjudicated delinquent. In imposing this disposition and in deciding the duration of the postponement, suspension, or revocation, the court shall consider the severity of the delinquent act and the potential effect of the loss of driving privileges on the juvenile's ability to be rehabilitated. Any postponement, suspension, or revocation shall be imposed consecutively with any custodial commitment;

(18) Order that the juvenile satisfy any other conditions reasonably related to the rehabilitation of the juvenile;

(19) Order a parent or guardian who has failed or neglected to exercise reasonable supervision or control of a juvenile who has been adjudicated delinquent to make restitution to any person or entity who has suffered a loss as a result of that offense. The court may determine the reasonable amount, terms, and conditions of restitution; or

(20) Place the juvenile, if eligible, in an appropriate juvenile offender program established pursuant to P.L.1997, c.81 (C.30:8-61 et al.).

c. (1) Except as otherwise provided in subsections e. and f. of this section, if the county in which the juvenile has been adjudicated delinquent has a juvenile detention facility meeting the physical and program standards established pursuant to this subsection by the Juvenile Justice Commission, the court may, in addition to any of the dispositions not involving placement out of the home enumerated in this section, incarcerate the juvenile in the youth detention facility in that county for a term not to exceed 60 con-

secutive days. Counties which do not operate their own juvenile detention facilities may contract for the use of approved commitment programs with counties with which they have established agreements for the use of predisposition juvenile detention facilities. The Juvenile Justice Commission shall promulgate such rules and regulations from time to time as deemed necessary to establish minimum physical facility and program standards for the use of juvenile detention facilities pursuant to this subsection.

(2) No juvenile may be incarcerated in any county detention facility unless the county has entered into an agreement with the Juvenile Justice Commission concerning the use of the facility for sentenced juveniles. Upon agreement with the county, the Juvenile Justice Commission shall certify detention facilities which may receive juveniles sentenced pursuant to this subsection and shall specify the capacity of the facility that may be made available to receive such juveniles; provided, however, that in no event shall the number of juveniles incarcerated pursuant to this subsection exceed 50% of the maximum capacity of the facility.

(3) The court may fix a term of incarceration under this subsection where:

(a) The act for which the juvenile was adjudicated delinquent, if committed by an adult, would have constituted a crime or repetitive disorderly persons offense;

(b) Incarceration of the juvenile is consistent with the goals of public safety, accountability, and rehabilitation and the court is clearly convinced that the aggravating factors substantially outweigh the mitigating factors as set forth in section 25 of P.L.1982, c.77 (C.2A:4A-44); and

(c) The detention facility has been certified for admission of adjudicated juveniles pursuant to paragraph (2).

(4) If as a result of incarceration of adjudicated juveniles pursuant to this subsection, a county is required to transport a predisposition juvenile to a juvenile detention facility in another county, the costs of such transportation shall be borne by the Juvenile Justice Commission.

d. Whenever the court imposes a disposition upon an adjudicated delinquent which requires the juvenile to perform a community service, restitution, or to participate in any other program provided for in this section other than subsection c., the duration of the juvenile's mandatory participation in such alternative programs shall extend for a period consistent with the program goal for the juvenile and shall in no event exceed one year beyond the maximum duration permissible for the delinquent if the juvenile had been committed to a term of incarceration.

e. In addition to any disposition the court may impose pursuant to this section or section 25 of P.L.1982, c.77 (C.2A:4A-44), the following orders shall be included in dispositions of the adjudications set forth below:

(1) An order of incarceration for a term of the duration authorized pursuant to this section or section 25 of P.L.1982, c.77 (C.2A:4A-44) or an order to perform community service pursuant to paragraph (10) of subsection b. of this section for a period of at least 60 days, if the juvenile has been adjudicated delinquent for an act which, if committed by an adult, would constitute the crime of theft of a motor vehicle, or the crime of unlawful taking of a motor vehicle in violation of subsection c. of N.J.S.2C:20-10, or the third degree crime of eluding in violation of subsection b. of N.J.S.2C:29-2;

(2) An order of incarceration for a term of the duration authorized pursuant to this section or section 25 of P.L.1982, c.77 (C.2A:4A-44) which shall include a minimum term of 60 days during which the juvenile shall be ineligible for parole, if the juvenile has been adjudicated delinquent for an act which, if committed by an adult, would constitute the crime of aggravated assault in violation of paragraph (6) of subsection b. of N.J.S.2C:12-1, the second degree crime of eluding in violation of subsection b. of N.J.S.2C:29-2, or theft of a motor vehicle, in a case in which the juvenile has previously been adjudicated delinquent for an act, which if committed by an adult, would constitute unlawful taking of a motor vehicle or theft of a motor vehicle;

(3) An order to perform community service pursuant to paragraph (10) of subsection b. of this section for a period of at least 30 days, if the juvenile has been adjudicated delinquent for an act which, if committed by an adult, would constitute the fourth degree crime of unlawful taking of a motor vehicle in violation of subsection b. of N.J.S.2C:20-10;

(4) An order of incarceration for a term of the duration authorized pursuant to this section or section 25 of P.L.1982, c.77 (C.2A:4A-44) which shall include a minimum term of 30 days during which the juvenile shall be ineligible for parole, if the juvenile has been adjudicated delinquent for an act which, if committed by an adult, would constitute the crime of unlawful taking of a motor vehicle in violation of N.J.S.2C:20-10 or the third degree crime of eluding in violation of subsection b. of N.J.S.2C:29-2, and if the juvenile has previously been adjudicated delinquent for an act which, if committed by an adult, would constitute either theft of a motor vehicle, the unlawful taking of a motor vehicle or eluding.

f. (1) The minimum terms of incarceration required pursuant to subsection e. of this section shall be imposed regardless of the weight or balance

of factors set forth in this section or in section 25 of P.L.1982, c.77 (C.2A:4A-44), but the weight and balance of those factors shall determine the length of the term of incarceration appropriate, if any, beyond any mandatory minimum term required pursuant to subsection e. of this section.

(2) When a court in a county that does not have a juvenile detention facility or a contractual relationship permitting incarceration pursuant to subsection c. of this section is required to impose a term of incarceration pursuant to subsection e. of this section, the court may, subject to limitations on commitment to State correctional facilities of juveniles who are under the age of 11 or developmentally disabled, set a term of incarceration consistent with subsection c. which shall be served in a State correctional facility. When a juvenile who because of age or developmental disability cannot be committed to a State correctional facility or cannot be incarcerated in a county facility, the court shall order a disposition appropriate as an alternative to any incarceration required pursuant to subsection e.

(3) For purposes of subsection e. of this section, in the event that a "boot camp" program for juvenile offenders should be developed and is available, a term of commitment to such a program shall be considered a term of incarceration.

g. Whenever the court imposes a disposition upon an adjudicated delinquent which requires the juvenile to perform a community service, restitution, or to participate in any other program provided for in this section, the order shall include provisions which provide balanced attention to the protection of the community, accountability for offenses committed, fostering interaction and dialogue between the offender, victim and community and the development of competencies to enable the child to become a responsible and productive member of the community.

2. Section 10 of P.L.1982, c.80 (C.2A:4A-85) is amended to read as follows:

C.2A:4A-85 Alcoholic, drug-dependent parent.

10. Alcoholic, drug-dependent parent. a. When a petition is filed and as a result of any information supplied on the family situation by the crisis intervention unit, court intake services has reason to believe that the parent or guardian is an alcoholic, as defined by P.L.1975, c.305 (C.26:2B-8), or a drug-dependent person, as defined by section 2 of the "New Jersey Controlled Dangerous Substances Act," P.L.1970, c.226 (C.24:21-2), intake services shall state the basis for this determination and provide recommendations to the court.

b. When, as a result of any information supplied by the crisis intervention unit, court intake services has reason to believe that a juvenile is an "abused or neglected child," as defined in P.L.1974, c.119 (C.9:6-8.21), they shall handle the case pursuant to the procedure set forth in that law. The Division of Child Protection and Permanency shall, upon disposition of any case originated pursuant to this subsection, notify court intake services as to the nature of the disposition.

c. (1) When, as a result of any information supplied with regard to any juvenile by the crisis intervention unit or from any other source, court intake services has reason to believe that the juvenile may have an auditory or vision problem, intake services shall state the basis for this determination and provide recommendations to the court. Before arriving at its determination, intake services may request the court to order any appropriate school medical records of the juvenile. On the basis of this recommendation or on its own motion, the court may order any juvenile concerning whom a complaint is filed to be examined by a physician, optometrist, audiologist, or speech language pathologist.

(2) Any examination shall be made and the findings submitted to the court within 30 days of the date the order is entered, but this period may be extended by the court for good cause.

(3) Copies of any reports of findings submitted to the court shall be available to counsel for all parties prior to an adjudication of whether or not the juvenile is delinquent.

3. Section 1 of P.L.2009, c.217 (C.2A:4A-92) is amended to read as follows:

C.2A:4A-92 "Court Appointed Special Advocate" (CASA) program.

1. a. As provided in P.L.2009, c.217, a "Court Appointed Special Advocate" (CASA) shall mean a community volunteer who has been recruited, screened, trained, and supervised by a CASA program affiliated with Court Appointed Special Advocates of New Jersey or a similar organization as determined by the Administrative Office of the Courts. An affiliate CASA program shall meet all State Court Appointed Special Advocate and National Court Appointed Special Advocate standards, and shall be affiliated with Court Appointed Special Advocates of New Jersey and the National Court Appointed Special Advocates Association.

b. There shall be established in the State of New Jersey a Court Appointed Special Advocate program which shall serve as a resource to the courts in determining the best interests of any child less than 18 years of

age who has been removed from his home due to abuse or neglect. A Court Appointed Special Advocate may continue to undertake activities in furtherance of the child's best interests, in appropriate cases, until the child who is the subject of the court appointment reaches 21 years of age.

c. Pursuant to the Rules of Court, the court may appoint a special advocate from the CASA program to act on behalf of the court. The special advocate shall undertake certain activities in furtherance of the child's interests, but shall not supplant or interfere with the role of counsel or guardian ad litem for that child. Any such special advocate shall be a volunteer associated with a court-authorized CASA program. The duties and activities of a CASA program and all of its volunteers shall be subject to guidelines and standards established by the Administrative Director of the Courts.

d. A person seeking to volunteer as a Court Appointed Special Advocate shall be subject to the following:

(1) a criminal history record background check submitted by the Administrative Office of the Courts or its designee to the appropriate authorities. A copy of the results shall be provided to the affiliate CASA program. A person shall not be approved as a Court Appointed Special Advocate if criminal history record information exists on file with the Federal Bureau of Investigation or the Division of State Police which would disqualify that person from serving in that capacity, as determined by the affiliate CASA program; and

(2) a child abuse record information check conducted by the Department of Children and Families to determine if an incident of child abuse or neglect has been substantiated, pursuant to section 4 of P.L.1971, c.437 (C.9:6-8.11), against the prospective CASA volunteer. The department shall cooperate by conducting the child abuse record information check and providing the results to the affiliate CASA program.

If a prospective volunteer refuses to consent to, or cooperate in, the securing of a criminal history record background check or a child abuse record information check, the person shall not be appointed as a Court Appointed Special Advocate.

e. Upon presentation of an order of appointment, the special advocate shall be provided access to all information and records relevant to the child, including but not limited to: school records, child care records, medical records, mental health records, family court and juvenile court records, and records of the Division of Child Protection and Permanency in the Department of Children and Families.

f. Any special advocate or affiliate CASA program staff member acting in good faith within the scope of his appointment or employment shall

have immunity from any civil or criminal liability that otherwise might result by reason of his actions or failure to act, except in cases of willful or wanton misconduct.

4. Section 6 of P.L.2004, c.157 (C.2A:23C-6) is amended to read as follows:

C.2A:23C-6 Exceptions to privilege.

6. Exceptions to Privilege.

a. There is no privilege under section 4 of P.L.2004, c.157 (C.2A:23C-4) for a mediation communication that is:

(1) in an agreement evidenced by a record signed by all parties to the agreement;

(2) made during a session of a mediation that is open, or is required by law to be open, to the public;

(3) a threat or statement of a plan to inflict bodily injury or commit a crime;

(4) intentionally used to plan a crime, attempt to commit a crime, or to conceal an ongoing crime or ongoing criminal activity;

(5) sought or offered to prove or disprove a claim or complaint filed against a mediator arising out of a mediation;

(6) except as otherwise provided in subsection c., sought or offered to prove or disprove a claim or complaint of professional misconduct or malpractice filed against a mediation party, nonparty participant, or representative of a party based on conduct occurring during a mediation; or

(7) sought or offered to prove or disprove child abuse or neglect in a proceeding in which the Division of Child Protection and Permanency in the Department of Children and Families is a party, unless the Division of Child Protection and Permanency participates in the mediation.

b. There is no privilege under section 4 of P.L.2004, c.157 (C.2A:23C-4) if a court, administrative agency, or arbitrator finds, after a hearing in camera, that the party seeking discovery or the proponent of the evidence has shown that the evidence is not otherwise available, that there is a need for the evidence that substantially outweighs the interest in protecting confidentiality, and that the mediation communication is sought or offered in:

(1) a court proceeding involving a crime as defined in the "New Jersey Code of Criminal Justice," N.J.S.2C:1-1 et seq.; or

(2) except as otherwise provided in subsection c., a proceeding to prove a claim to rescind or reform or a defense to avoid liability on a contract arising out of the mediation.

c. A mediator may not be compelled to provide evidence of a mediation communication referred to in paragraph (6) of subsection a. or paragraph (2) of subsection b.

d. If a mediation communication is not privileged under subsection a. or b., only the portion of the communication necessary for the application of the exception from nondisclosure may be admitted. Admission of evidence under subsection a. or b. does not render the evidence, or any other mediation communication, discoverable or admissible for any other purpose.

5. Section 5 of P.L.1994, c.133 (C.2C:7-5) is amended to read as follows:

C.2C:7-5 Records; immunity.

5. a. Records maintained pursuant to P.L.1994, c.133 (C.2C:7-1 et seq.) shall be open to any law enforcement agency in this State, the United States, or any other state and may be released to the Division of Child Protection and Permanency in the Department of Children and Families for use in carrying out its responsibilities under law. Law enforcement agencies in this State shall be authorized to release relevant and necessary information regarding sex offenders to the public when the release of the information is necessary for public protection in accordance with the provisions of P.L.1994, c.128 (C.2C:7-6 et seq.).

b. An elected public official, public employee, or public agency is immune from civil liability for damages for any discretionary decision to release relevant and necessary information, unless it is shown that the official, employee, or agency acted with gross negligence or in bad faith. The immunity provided under this section applies to the release of relevant information to other employees or officials or to the general public.

c. Nothing in P.L.1994, c.133 shall be deemed to impose any liability upon or to give rise to a cause of action against any public official, public employee, or public agency for failing to release information as authorized in subsection d. of this section.

d. Nothing in this section shall be construed to prevent law enforcement officers from notifying members of the public exposed to danger of any persons that pose a danger under circumstances that are not enumerated in P.L.1994, c.133.

6. N.J.S.2C:12-1 is amended to read as follows:

Assault.

2C:12-1. Assault. a. Simple assault. A person is guilty of assault if he:

- (1) Attempts to cause or purposely, knowingly, or recklessly causes bodily injury to another; or
- (2) Negligently causes bodily injury to another with a deadly weapon; or
- (3) Attempts by physical menace to put another in fear of imminent serious bodily injury.

Simple assault is a disorderly persons offense unless committed in a fight or scuffle entered into by mutual consent, in which case it is a petty disorderly persons offense.

b. Aggravated assault. A person is guilty of aggravated assault if he:

- (1) Attempts to cause serious bodily injury to another, or causes such injury purposely or knowingly or under circumstances manifesting extreme indifference to the value of human life recklessly causes such injury; or
- (2) Attempts to cause or purposely or knowingly causes bodily injury to another with a deadly weapon; or
- (3) Recklessly causes bodily injury to another with a deadly weapon; or
- (4) Knowingly under circumstances manifesting extreme indifference to the value of human life points a firearm, as defined in section 2C:39-1f., at or in the direction of another, whether or not the actor believes it to be loaded; or

(5) Commits a simple assault as defined in subsection a. (1), (2) or (3) of this section upon:

(a) Any law enforcement officer acting in the performance of his duties while in uniform or exhibiting evidence of his authority or because of his status as a law enforcement officer; or

(b) Any paid or volunteer fireman acting in the performance of his duties while in uniform or otherwise clearly identifiable as being engaged in the performance of the duties of a fireman; or

(c) Any person engaged in emergency first-aid or medical services acting in the performance of his duties while in uniform or otherwise clearly identifiable as being engaged in the performance of emergency first-aid or medical services; or

(d) Any school board member, school administrator, teacher, school bus driver, or other employee of a public or nonpublic school or school board while clearly identifiable as being engaged in the performance of his duties or because of his status as a member or employee of a public or nonpublic school or school board or any school bus driver employed by an operator under contract to a public or nonpublic school or school board while clearly identifiable as being engaged in the performance of his duties or because of his status as a school bus driver; or

(e) Any employee of the Division of Child Protection and Permanency while clearly identifiable as being engaged in the performance of his duties or because of his status as an employee of the division; or

(f) Any justice of the Supreme Court, judge of the Superior Court, judge of the Tax Court or municipal judge while clearly identifiable as being engaged in the performance of judicial duties or because of his status as a member of the judiciary; or

(g) Any operator of a motorbus or the operator's supervisor or any employee of a rail passenger service while clearly identifiable as being engaged in the performance of his duties or because of his status as an operator of a motorbus or as the operator's supervisor or as an employee of a rail passenger service; or

(h) Any Department of Corrections employee, county corrections officer, juvenile corrections officer, State juvenile facility employee, juvenile detention staff member, juvenile detention officer, probation officer or any sheriff, undersheriff, or sheriff's officer acting in the performance of his duties while in uniform or exhibiting evidence of his authority; or

(i) Any employee, including any person employed under contract, of a utility company as defined in section 2 of P.L.1971, c.224 (C.2A:42-86) or a cable television company subject to the provisions of the "Cable Television Act," P.L.1972, c.186 (C.48:5A-1 et seq.) while clearly identifiable as being engaged in the performance of his duties in regard to connecting, disconnecting or repairing or attempting to connect, disconnect or repair any gas, electric or water utility, or cable television or telecommunication service; or

(j) Any health care worker employed by a licensed health care facility to provide direct patient care, any health care professional licensed or otherwise authorized pursuant to Title 26 or Title 45 of the Revised Statutes to practice a health care profession, except a direct care worker at a State or county psychiatric hospital or State developmental center or veterans' memorial home, while clearly identifiable as being engaged in the duties of providing direct patient care or practicing the health care profession; or

(k) Any direct care worker at a State or county psychiatric hospital or State developmental center or veterans' memorial home, while clearly identifiable as being engaged in the duties of providing direct patient care or practicing the health care profession, provided that the actor is not a patient or resident at the facility who is classified by the facility as having a mental illness or developmental disability; or

(6) Causes bodily injury to another person while fleeing or attempting to elude a law enforcement officer in violation of subsection b. of

N.J.S.2C:29-2 or while operating a motor vehicle in violation of subsection c. of N.J.S.2C:20-10. Notwithstanding any other provision of law to the contrary, a person shall be strictly liable for a violation of this subsection upon proof of a violation of subsection b. of N.J.S.2C:29-2 or while operating a motor vehicle in violation of subsection c. of N.J.S.2C:20-10 which resulted in bodily injury to another person; or

(7) Attempts to cause significant bodily injury to another or causes significant bodily injury purposely or knowingly or, under circumstances manifesting extreme indifference to the value of human life recklessly causes such significant bodily injury; or

(8) Causes bodily injury by knowingly or purposely starting a fire or causing an explosion in violation of N.J.S.2C:17-1 which results in bodily injury to any emergency services personnel involved in fire suppression activities, rendering emergency medical services resulting from the fire or explosion or rescue operations, or rendering any necessary assistance at the scene of the fire or explosion, including any bodily injury sustained while responding to the scene of a reported fire or explosion. For purposes of this subsection, "emergency services personnel" shall include, but not be limited to, any paid or volunteer fireman, any person engaged in emergency first-aid or medical services and any law enforcement officer. Notwithstanding any other provision of law to the contrary, a person shall be strictly liable for a violation of this paragraph upon proof of a violation of N.J.S.2C:17-1 which resulted in bodily injury to any emergency services personnel; or

(9) Knowingly, under circumstances manifesting extreme indifference to the value of human life, points or displays a firearm, as defined in subsection f. of N.J.S.2C:39-1, at or in the direction of a law enforcement officer; or

(10) Knowingly points, displays, or uses an imitation firearm, as defined in subsection v. of N.J.S.2C:39-1, at or in the direction of a law enforcement officer with the purpose to intimidate, threaten, or attempt to put the officer in fear of bodily injury or for any unlawful purpose; or

(11) Uses or activates a laser sighting system or device, or a system or device which, in the manner used, would cause a reasonable person to believe that it is a laser sighting system or device, against a law enforcement officer acting in the performance of his duties while in uniform or exhibiting evidence of his authority. As used in this paragraph, "laser sighting system or device" means any system or device that is integrated with or affixed to a firearm and emits a laser light beam that is used to assist in the sight alignment or aiming of the firearm.

Aggravated assault under subsections b. (1) and b. (6) is a crime of the second degree; under subsections b. (2), b. (7), b. (9), and b. (10) is a crime of the third degree; under subsections b. (3) and b. (4) is a crime of the fourth degree; and under subsection b. (5) is a crime of the third degree if the victim suffers bodily injury, otherwise it is a crime of the fourth degree. Aggravated assault under subsection b.(8) is a crime of the third degree if the victim suffers bodily injury; if the victim suffers significant bodily injury or serious bodily injury it is a crime of the second degree. Aggravated assault under subsection b. (11) is a crime of the third degree.

c. (1) A person is guilty of assault by auto or vessel when the person drives a vehicle or vessel recklessly and causes either serious bodily injury or bodily injury to another. Assault by auto or vessel is a crime of the fourth degree if serious bodily injury results and is a disorderly persons offense if bodily injury results.

(2) Assault by auto or vessel is a crime of the third degree if the person drives the vehicle while in violation of R.S.39:4-50 or section 2 of P.L.1981, c.512 (C.39:4-50.4a) and serious bodily injury results and is a crime of the fourth degree if the person drives the vehicle while in violation of R.S.39:4-50 or section 2 of P.L.1981, c.512 (C.39:4-50.4a) and bodily injury results.

(3) Assault by auto or vessel is a crime of the second degree if serious bodily injury results from the defendant operating the auto or vessel while in violation of R.S.39:4-50 or section 2 of P.L.1981, c.512 (C.39:4-50.4a) while:

(a) on any school property used for school purposes which is owned by or leased to any elementary or secondary school or school board, or within 1,000 feet of such school property;

(b) driving through a school crossing as defined in R.S.39:1-1 if the municipality, by ordinance or resolution, has designated the school crossing as such; or

(c) driving through a school crossing as defined in R.S.39:1-1 knowing that juveniles are present if the municipality has not designated the school crossing as such by ordinance or resolution.

Assault by auto or vessel is a crime of the third degree if bodily injury results from the defendant operating the auto or vessel in violation of this paragraph.

A map or true copy of a map depicting the location and boundaries of the area on or within 1,000 feet of any property used for school purposes which is owned by or leased to any elementary or secondary school or school board produced pursuant to section 1 of P.L.1987, c.101 (C.2C:35-7)

may be used in a prosecution under subparagraph (a) of paragraph (3) of this subsection.

It shall be no defense to a prosecution for a violation of subparagraph (a) or (b) of paragraph (3) of this subsection that the defendant was unaware that the prohibited conduct took place while on or within 1,000 feet of any school property or while driving through a school crossing. Nor shall it be a defense to a prosecution under subparagraph (a) or (b) of paragraph (3) of this subsection that no juveniles were present on the school property or crossing zone at the time of the offense or that the school was not in session.

(4) Assault by auto or vessel is a crime of the third degree if the person purposely drives a vehicle in an aggressive manner directed at another vehicle and serious bodily injury results and is a crime of the fourth degree if the person purposely drives a vehicle in an aggressive manner directed at another vehicle and bodily injury results. For purposes of this paragraph, "driving a vehicle in an aggressive manner" shall include, but is not limited to, unexpectedly altering the speed of the vehicle, making improper or erratic traffic lane changes, disregarding traffic control devices, failing to yield the right of way, or following another vehicle too closely.

As used in this section, "vessel" means a means of conveyance for travel on water and propelled otherwise than by muscular power.

d. A person who is employed by a facility as defined in section 2 of P.L.1977, c.239 (C.52:27G-2) who commits a simple assault as defined in paragraph (1) or (2) of subsection a. of this section upon an institutionalized elderly person as defined in section 2 of P.L.1977, c.239 (C.52:27G-2) is guilty of a crime of the fourth degree.

e. (Deleted by amendment, P.L.2001, c.443).

f. A person who commits a simple assault as defined in paragraph (1), (2) or (3) of subsection a. of this section in the presence of a child under 16 years of age at a school or community sponsored youth sports event is guilty of a crime of the fourth degree. The defendant shall be strictly liable upon proof that the offense occurred, in fact, in the presence of a child under 16 years of age. It shall not be a defense that the defendant did not know that the child was present or reasonably believed that the child was 16 years of age or older. The provisions of this subsection shall not be construed to create any liability on the part of a participant in a youth sports event or to abrogate any immunity or defense available to a participant in a youth sports event. As used in this act, "school or community sponsored youth sports event" means a competition, practice or instructional event involving one or more interscholastic sports teams or youth sports teams

organized pursuant to a nonprofit or similar charter or which are member teams in a youth league organized by or affiliated with a county or municipal recreation department and shall not include collegiate, semi-professional or professional sporting events.

7. N.J.S.2C:13-1 is amended to read as follows:

Kidnapping.

2C:13-1. Kidnapping. a. Holding for ransom, reward, or as a hostage. A person is guilty of kidnapping if he unlawfully removes another from the place where he is found or if he unlawfully confines another with the purpose of holding that person for ransom or reward or as a shield or hostage.

b. Holding for other purposes. A person is guilty of kidnapping if he unlawfully removes another from his place of residence or business, or a substantial distance from the vicinity where he is found, or if he unlawfully confines another for a substantial period, with any of the following purposes:

(1) To facilitate commission of any crime or flight thereafter;

(2) To inflict bodily injury on or to terrorize the victim or another;

(3) To interfere with the performance of any governmental or political function; or

(4) To permanently deprive a parent, guardian, or other lawful custodian of custody of the victim.

c. Grading of kidnapping. (1) Except as provided in paragraph (2) of this subsection, kidnapping is a crime of the first degree and upon conviction thereof, a person may, notwithstanding the provisions of paragraph (1) of subsection a. of N.J.S.2C:43-6, be sentenced to an ordinary term of imprisonment between 15 and 30 years. If the actor releases the victim unharmed and in a safe place prior to apprehension, it is a crime of the second degree.

(2) Kidnapping is a crime of the first degree and upon conviction thereof, an actor shall be sentenced to a term of imprisonment by the court, if the victim of the kidnapping is less than 16 years of age and if during the kidnapping:

(a) A crime under N.J.S.2C:14-2 or subsection a. of N.J.S.2C:14-3 is committed against the victim;

(b) A crime under subsection b. of N.J.S.2C:24-4 is committed against the victim; or

(c) The actor sells or delivers the victim to another person for pecuniary gain other than in circumstances which lead to the return of the victim to a parent, guardian or other person responsible for the general supervision of the victim.

Notwithstanding the provisions of paragraph (1) of subsection a. of N.J.S.2C:43-6, the term of imprisonment imposed under this paragraph shall be either a term of 25 years during which the actor shall not be eligible for parole, or a specific term between 25 years and life imprisonment, of which the actor shall serve 25 years before being eligible for parole; provided, however, that the crime of kidnapping under this paragraph and underlying aggravating crimes listed in subparagraph (a), (b), or (c) of this paragraph shall merge for purposes of sentencing. If the actor is convicted of the criminal homicide of a victim of a kidnapping under the provisions of chapter 11, any sentence imposed under provisions of this paragraph shall be served consecutively to any sentence imposed pursuant to the provisions of chapter 11.

d. "Unlawful" removal or confinement. A removal or confinement is unlawful within the meaning of this section and of sections 2C:13-2 and 2C:13-3, if it is accomplished by force, threat, or deception, or, in the case of a person who is under the age of 14 or is incompetent, if it is accomplished without the consent of a parent, guardian, or other person responsible for general supervision of his welfare.

e. It is an affirmative defense to a prosecution under paragraph (4) of subsection b. of this section, which must be proved by clear and convincing evidence, that:

(1) The actor reasonably believed that the action was necessary to preserve the victim from imminent danger to his welfare. However, no defense shall be available pursuant to this subsection if the actor does not, as soon as reasonably practicable but in no event more than 24 hours after taking a victim under his protection, give notice of the victim's location to the police department of the municipality where the victim resided, the office of the county prosecutor in the county where the victim resided, or the Division of Child Protection and Permanency in the Department of Children and Families;

(2) The actor reasonably believed that the taking or detaining of the victim was consented to by a parent, or by an authorized State agency; or

(3) The victim, being at the time of the taking or concealment not less than 14 years old, was taken away at his own volition by his parent and without purpose to commit a criminal offense with or against the victim.

f. It is an affirmative defense to a prosecution under paragraph (4) of subsection b. of this section that a parent having the right of custody reasonably believed he was fleeing from imminent physical danger from the other parent, provided that the parent having custody, as soon as reasonably practicable:

(1) Gives notice of the victim's location to the police department of the municipality where the victim resided, the office of the county prosecutor in the county where the victim resided, or the Division of Child Protection and Permanency in the Department of Children and Families; or

(2) Commences an action affecting custody in an appropriate court.

g. As used in subsections e. and f. of this section, "parent" means a parent, guardian or other lawful custodian of a victim.

8. N.J.S.2C:13-4 is amended to read as follows:

Interference with custody.

2C:13-4. Interference with custody.

a. Custody of children. A person, including a parent, guardian, or other lawful custodian, is guilty of interference with custody if he:

(1) Takes or detains a minor child with the purpose of concealing the minor child and thereby depriving the child's other parent of custody or parenting time with the minor child; or

(2) After being served with process or having actual knowledge of an action affecting marriage or custody but prior to the issuance of a temporary or final order determining custody and parenting time rights to a minor child, takes, detains, entices, or conceals the child within or outside the State for the purpose of depriving the child's other parent of custody or parenting time, or to evade the jurisdiction of the courts of this State; or

(3) After being served with process or having actual knowledge of an action affecting the protective services needs of a child pursuant to Title 9 of the Revised Statutes in an action affecting custody, but prior to the issuance of a temporary or final order determining custody rights of a minor child, takes, detains, entices, or conceals the child within or outside the State for the purpose of evading the jurisdiction of the courts of this State; or

(4) After the issuance of a temporary or final order specifying custody, joint custody rights or parenting time, takes, detains, entices, or conceals a minor child from the other parent in violation of the custody or parenting time order.

Interference with custody is a crime of the second degree if the child is taken, detained, enticed, or concealed: (i) outside the United States or (ii) for more than 24 hours. Otherwise, interference with custody is a crime of the third degree but the presumption of non-imprisonment set forth in subsection e. of N.J.S.2C:44-1 for a first offense of a crime of the third degree shall not apply.

b. Custody of committed persons. A person is guilty of a crime of the fourth degree if he knowingly takes or entices any committed person away from lawful custody when he is not privileged to do so. "Committed person" means, in addition to anyone committed under judicial warrant, any orphan, neglected, or delinquent child, person with a mental disease, defect, or illness, or other dependent or incompetent person, entrusted to another's custody by or through a recognized social agency or otherwise by authority of law.

c. It is an affirmative defense to a prosecution under subsection a. of this section, which must be proved by clear and convincing evidence, that:

(1) The actor reasonably believed that the action was necessary to preserve the child from imminent danger to his welfare. However, no defense shall be available pursuant to this subsection if the actor does not, as soon as reasonably practicable but in no event more than 24 hours after taking a child under his protection, give notice of the child's location to the police department of the municipality where the child resided, the office of the county prosecutor in the county where the child resided, or the Division of Child Protection and Permanency in the Department of Children and Families;

(2) The actor reasonably believed that the taking or detaining of the minor child was consented to by the other parent, or by an authorized State agency; or

(3) The child, being at the time of the taking or concealment not less than 14 years old, was taken away at his own volition and without purpose to commit a criminal offense with or against the child.

d. It is an affirmative defense to a prosecution under subsection a. of this section that a parent having the right of custody reasonably believed he was fleeing from imminent physical danger from the other parent, provided that the parent having custody, as soon as reasonably practicable:

(1) Gives notice of the child's location to the police department of the municipality where the child resided, the office of the county prosecutor in the county where the child resided, or the Division of Child Protection and Permanency in the Department of Children and Families; or

(2) Commences an action affecting custody in an appropriate court.

e. The offenses enumerated in this section are continuous in nature and continue for so long as the child is concealed or detained.

f. (1) In addition to any other disposition provided by law, a person convicted under subsection a. of this section shall make restitution of all reasonable expenses and costs, including reasonable counsel fees, incurred by the other parent in securing the child's return.

(2) In imposing sentence under subsection a. of this section the court shall consider, in addition to the factors enumerated in chapter 44 of Title 2C of the New Jersey Statutes:

- (a) Whether the person returned the child voluntarily; and
- (b) The length of time the child was concealed or detained.
- g. As used in this section, "parent" means a parent, guardian or other lawful custodian of a minor child.

9. Section 1 of P.L.1999, c.421 (C.2C:25-34) is amended to read as follows:

C.2C:25-34 Domestic violence restraining orders, central registry.

1. The Administrative Office of the Courts shall establish and maintain a central registry of all persons who have had domestic violence restraining orders entered against them, all persons who have been charged with a crime or offense involving domestic violence, and all persons who have been charged with a violation of a court order involving domestic violence. All records made pursuant to this section shall be kept confidential and shall be released only to:

- a. A public agency authorized to investigate a report of domestic violence;
- b. A police or other law enforcement agency investigating a report of domestic violence, or conducting a background investigation involving a person's application for a firearm permit or employment as a police or law enforcement officer or for any other purpose authorized by law or the Supreme Court of the State of New Jersey;
- c. A court, upon its finding that access to such records may be necessary for determination of an issue before the court;
- d. A surrogate, in that person's official capacity as deputy clerk of the Superior Court, in order to prepare documents that may be necessary for a court to determine an issue in an adoption proceeding; or
- e. The Division of Child Protection and Permanency in the Department of Children and Families when the division is conducting a background investigation involving:
 - (1) an allegation of child abuse or neglect, to include any adult member of the same household as the individual who is the subject of the abuse or neglect allegation; or
 - (2) an out-of-home placement for a child being placed by the Division of Child Protection and Permanency, to include any adult member of the prospective placement household.

Any individual, agency, surrogate, or court which receives from the Administrative Office of the Courts the records referred to in this section shall keep the records and reports, or parts thereof, confidential and shall not disseminate or disclose such records and reports, or parts thereof; provided that nothing in this section shall prohibit a receiving individual, agency, surrogate or court from disclosing records and reports, or parts thereof, in a manner consistent with and in furtherance of the purpose for which the records and reports or parts thereof were received.

Any individual who disseminates or discloses a record or report, or parts thereof, of the central registry, for a purpose other than investigating a report of domestic violence, conducting a background investigation involving a person's application for a firearm permit or employment as a police or law enforcement officer, making a determination of an issue before the court, conducting a background investigation as specified in subsection e. of this section, or for any other purpose other than that which is authorized by law or the Supreme Court of the State of New Jersey, shall be guilty of a crime of the fourth degree.

10. Section 1 of P.L.2003, c.301 (C.2C:44-6.2) is amended to read as follows:

C.2C:44-6.2 Person sentenced to incarceration, care and custody of minor child.

1. a. In any case in which a person has been convicted of a crime for which the person will be incarcerated, the court shall order, as part of the presentence investigation required pursuant to N.J.S.2C:44-6, that a determination be made as to whether the person is the sole caretaker of a minor child and, if so, who will assume responsibility for the child's care and custody during the period the person is incarcerated.

b. If the determination is made that the person is the sole caretaker of the child, the presentence investigation shall also include:

(1) verification that the person who will be responsible for the child's care and custody during the period of incarceration has agreed to assume responsibility for the child's care and custody;

(2) an inquiry as to the willingness of the person to assume responsibility for the child's care and custody during the period of incarceration; and

(3) a PROMIS/GAVEL network check, juvenile central registry check, and domestic violence central registry check on the person who will be responsible for the child's care and custody during the period of incarceration and on any adult and juvenile over 12 years of age in the person's household.

c. The court shall provide the information compiled pursuant to subsection b. of this section, from the presentence investigation, to the Division of Child Protection and Permanency in the Department of Children and Families.

11. Section 3 of P.L.2003, c.301 (C.2C:44-6.3) is amended to read as follows:

C.2C:44-6.3 Report of persons convicted of certain crimes residing with minor children.

3. a. In any case in which a person has been convicted of a crime enumerated in subsection b. of this section and:

(1) the victim of the crime was either a person under the age of 18 at the time of the commission of the crime, or a person defined in paragraph (9) of subsection b. of this section; and

(2) the person convicted of the crime resides in a household with other minor children or is a parent of a minor child,
the court, based on an interview with the defendant, shall make a referral to the Division of Child Protection and Permanency in the Department of Children and Families and provide the division with the name and address of the person convicted of the crime, information on the person's criminal history, and the name and address of each child referred to in paragraph (2) of this subsection.

b. For purposes of this section, "crime" includes any of the following:

(1) murder pursuant to N.J.S.2C:11-3 or manslaughter pursuant to N.J.S.2C:11-4;

(2) simple assault or aggravated assault pursuant to N.J.S.2C:12-1;

(3) stalking pursuant to P.L.1992, c.209 (C.2C:12-10);

(4) terrorist threats pursuant to N.J.S.2C:12-3;

(5) kidnapping and related offenses including criminal restraint; false imprisonment; interference with custody; criminal coercion; or enticing a child into a motor vehicle, structure, or isolated area pursuant to N.J.S.2C:13-1 through 2C:13-6;

(6) sexual assault, criminal sexual contact, or lewdness pursuant to N.J.S.2C:14-2 through N.J.S.2C:14-4;

(7) arson pursuant to N.J.S.2C:17-1, or causing or risking widespread injury or damage which would constitute a crime of the second degree pursuant to N.J.S.2C:17-2;

(8) a crime against a child, including endangering the welfare of a child and child pornography pursuant to N.J.S.2C:24-4; or child abuse, neglect, or abandonment pursuant to R.S.9:6-3;

(9) endangering the welfare of an incompetent person pursuant to N.J.S.2C:24-7 or endangering the welfare of an elderly or disabled person pursuant to N.J.S.2C:24-8;

(10) domestic violence pursuant to P.L.1991, c.261 (C.2C:25-17 et seq.); or

(11) an attempt or conspiracy to commit an offense listed in paragraphs (1) through (10) of this subsection.

12. Section 3 of P.L.1995, c.76 (C.3B:12-69) is amended to read as follows:

C.3B:12-69 Definitions.

3. As used in P.L.1995, c.76 (C.3B:12-67 et seq.):

"Appointed standby guardian" means a person appointed pursuant to section 6 of P.L.1995, c.76 (C.3B:12-72) to assume the duties of guardian over the person and, when applicable, the property of a minor child upon the death or a determination of incapacity or debilitation, and with the consent, of the parent or legal custodian.

"Attending physician" means the physician who has primary responsibility for the treatment and care for the petitioning parent or legal custodian. When more than one physician shares this responsibility, or when a physician is acting on the primary physician's behalf, any such physician may act as the attending physician pursuant to this act. When no physician has this responsibility, a physician who is familiar with the petitioner's medical condition may act as the attending physician pursuant to P.L.1995, c.76 (C.3B:12-67 et seq.).

"Consent" means written consent signed by the parent or legal custodian in the presence of two witnesses who shall also sign the document. The written consent shall constitute the terms for the commencement of the duties of the standby guardian.

"Debilitation" means a chronic and substantial inability, as a result of a physically debilitating illness, disease, or injury, to care for one's minor child.

"Designated standby guardian" means a person designated pursuant to section 8 of P.L.1995, c.76 (C.3B:12-74) to assume temporarily the duties of guardianship over the person and, when applicable, the property of a minor child upon the death or a determination of incapacity or debilitation, and with the consent, of the parent or legal custodian.

"Designation" means a written document voluntarily executed by the designator pursuant to P.L.1995, c.76.

New Jersey State Library

"Designator" means a competent parent or legal custodian of a minor child who makes a designation pursuant to P.L.1995, c.76.

"Determination of debilitation" means a written determination made by the attending physician which contains the physician's opinion to a reasonable degree of medical certainty regarding the nature, cause, extent, and probable duration of the parent's or legal custodian's debilitation.

"Determination of incapacity" means a written determination made by the attending physician which contains the physician's opinion to a reasonable degree of medical certainty regarding the nature, cause, extent, and probable duration of the parent's or legal custodian's incapacity.

"Incapacity" means a chronic and substantial inability, as a result of mental or organic impairment, to understand the nature and consequences of decisions concerning the care of one's minor child, and a consequent inability to make these decisions.

"Minor child" means a child under the age of eighteen years but excludes a child residing in a placement funded or approved by the Division of Child Protection and Permanency in the Department of Children and Families pursuant to either a voluntary placement agreement or court order.

"Triggering event" means an event stated in the designation, petition or decree which empowers the standby guardian to assume the duties of the office, which event may be the death, incapacity or debilitation, with the consent, of the custodial parent or legal custodian, whichever occurs first.

13. Section 2 of P.L.2001, c.250 (C.3B:12A-2) is amended to read as follows:

C.3B:12A-2 Definitions relative to kinship legal guardianship.

2. As used in sections 1 through 6 of P.L.2001, c.250 (C.3B:12A-1 et seq.):

"Caregiver" means a person over 18 years of age, other than a child's parent, who has a kinship relationship with the child and has been providing care and support for the child, while the child has been residing in the caregiver's home, for either the last 12 consecutive months or 15 of the last 22 months.

"Caregiver" includes a resource family parent as defined in section 1 of P.L.1962, c.136 (C.30:4C-26.4).

"Child" means a person under 18 years of age, except as otherwise provided in P.L.2001, c.250 (C.3B:12A-1 et al.).

"Commissioner" means the Commissioner of Children and Families.

"Court" means the Superior Court, Chancery Division, Family Part.

"Department" means the Department of Children and Families.

"Division" means the Division of Child Protection and Permanency in the Department of Children and Families.

"Family friend" means a person who is connected to a child or the child's parent by an established positive psychological or emotional relationship that is not a biological or legal relationship.

"Home review" means the basic review of the information provided by the petitioner and a visit to the petitioner's home where the child will continue to reside, in accordance with the provisions of P.L.2001, c.250 (C.3B:12A-1 et al.) and pursuant to regulations adopted by the commissioner.

"Kinship caregiver assessment" means a written report prepared in accordance with the provisions of P.L.2001, c.250 (C.3B:12A-1 et al.) and pursuant to regulations adopted by the commissioner.

"Kinship legal guardian" means a caregiver who is willing to assume care of a child due to parental incapacity, with the intent to raise the child to adulthood, and who is appointed the kinship legal guardian of the child by the court pursuant to P.L.2001, c.250 (C.3B:12A-1 et al.). A kinship legal guardian shall be responsible for the care and protection of the child and for providing for the child's health, education and maintenance.

"Kinship relationship" means a family friend or a person with a biological or legal relationship with the child.

"Parental incapacity" means incapacity of such a serious nature as to demonstrate that the parent is unable, unavailable, or unwilling to perform the regular and expected functions of care and support of the child.

14. Section 2 of P.L.1977, c.367 (C.9:3-38) is amended to read as follows:

C.9:3-38 Definitions.

2. For the purposes of P.L.1977, c.367 (C.9:3-37 et seq.):

a. "Approved agency" means a nonprofit corporation, association, or agency, including any public agency, approved by the Department of Children and Families for the purpose of placing children for adoption in New Jersey;

b. "Child" means a person under 18 years of age;

c. "Custody" means the general right to exercise continuing control over the person of a child derived from court order or otherwise;

d. "Guardianship" means the right to exercise continuing control over the person or property or both of a child which includes any specific right of control over an aspect of the child's upbringing derived from court order;

e. "Guardian ad litem" means a qualified person, not necessarily an attorney, appointed by the court under the provisions of this act or at the discretion of the court to represent the interests of the child whether or not the child is a named party in the action;

f. "Parent" means a birth parent or parents, including the birth father of a child born out of wedlock who has acknowledged the child or to whom the court has ordered notice to be given, or a parent or parents by adoption;

g. "Placement for adoption" means the transfer of custody of a child to a person for the purpose of adoption by that person;

h. "Plaintiff" means a prospective parent or parents who have filed a complaint for adoption;

i. "Legal services" means the provision of counseling or advice related to the law and procedure for adoption of a child, preparation of legal documents, or representation of any person before a court or administrative agency;

j. "Surrender" means a voluntary relinquishment of all parental rights by a birth parent, previous adoptive parent, or other person or agency authorized to exercise these rights by law, court order or otherwise, for purposes of allowing a child to be adopted;

k. "Home study" means an approved agency's formal assessment of the capacity and readiness of prospective adoptive parents to adopt a child, including the agency's written report and recommendations conducted in accordance with rules and regulations promulgated by the Director of the Division of Child Protection and Permanency; and

l. "Intermediary" means any person, firm, partnership, corporation, association, or agency, which is not an approved agency as defined in this section, who acts for or between any parent and any prospective parent or acts on behalf of either in connection with the placement of the parent's child for adoption in the State or in any other state or country. An intermediary in any other state or country shall not receive money or other valuable consideration in connection with the placement of a child for adoption in this State. An intermediary in this State shall not receive money or other valuable consideration in connection with the placement of a child for adoption in this State or in any other state or country. The provisions of this subsection shall not be construed to prohibit the receipt of money or other valuable consideration specifically authorized in section 18 of P.L.1993, c.345 (C.9:3-39.1).

15. Section 18 of P.L.1993, c.345 (C.9:3-39.1) is amended to read as follows:

C.9:3-39.1 Offering, assisting in the placement of child for adoption, conditions.

18. a. A person, firm, partnership, corporation, association, or agency shall not place, offer to place, or materially assist in the placement of any child for adoption in New Jersey unless:

- (1) the person is the parent or guardian of the child, or
- (2) the firm, partnership, corporation, association, or agency is an approved agency to act as agent, finder, or to otherwise materially assist in the placement of any child for adoption in this State, or
- (3) the placement for adoption is with a brother, sister, aunt, uncle, grandparent, birth father, or stepparent of the child, or
- (4) the placement is through an intermediary and (a) the person with whom the child is to be placed has been approved for placement for adoption by an approved agency home study which consists of the agency's formal written assessment of the capacity and readiness of the prospective adoptive parents to adopt a child, conducted in accordance with rules and regulations promulgated by the Director of the Division of Child Protection and Permanency;

(b) The birth parent, except one who cannot be identified or located prior to the placement of the child for adoption, shall be offered counseling as to the birth parent's options other than placement of the child for adoption. Such counseling shall be made available by or through an approved licensed agency in New Jersey or in the birth parent's state or country of residence. The fact that counseling has been made available, and the name, address, and telephone number of the agency through which the counseling is available, shall be confirmed in a written document signed by the birth parent and acknowledged in this State pursuant to section 1 of P.L.1991, c.308 (R.S.46:14-2.1) or acknowledged in another state or country pursuant to section 1 of P.L.1991, c.308 (R.S.46:14-6.1) a copy of which shall be provided to the birth parent and the agency conducting the adoption complaint investigation pursuant to section 12 of P.L.1977, c.367 (C.9:3-48) and shall be filed with the court prior to termination of parental rights; and

(c) Written notice shall be given to the birth parent, except one who cannot be identified or located prior to the placement of the child for adoption, and the adoptive parent that the decision not to place the child for adoption or the return of the child to the birth parent cannot be conditioned upon reimbursement of expenses by the birth parent to the adoptive parent, and that payments by the adoptive parent are non-refundable. Provision of such notice shall be confirmed in a written document signed by the birth parent and adoptive parent in separate documents which shall be acknowledged in this State pursuant to section 1 of P.L.1991, c.308 (R.S.46:14-2.1)

or acknowledged in another state or country pursuant to section 1 of P.L.1991, c.308 (R.S.46:14-6.1), a copy of which shall be provided to the birth parent, and the agency conducting the adoption complaint investigation pursuant to section 12 of P.L.1977, c.367 (C.9:3-48), and shall be filed with the court prior to termination of parental rights.

b. The Superior Court in an action by the Commissioner of Children and Families may enjoin any party found by the court to have violated this section from any further violation of this section.

c. A person, firm, partnership, corporation, association, or agency violating subsection a. of this section shall be guilty of a crime of the third degree.

d. A person, firm, partnership, corporation, association, intermediary, or agency other than an approved agency which pays, seeks to pay, receives, or seeks to receive money or other valuable consideration in connection with the placement of a child for adoption shall be guilty of a crime of the second degree.

e. It shall not be a violation of subsection d. of this section: (1) to pay, provide, or reimburse to a parent of the child, or for a parent of the child to receive payment, provision, or reimbursement for medical, hospital, counseling, or other similar expenses incurred in connection with the birth or any illness of the child, or the reasonable living expenses of the mother of the child during her pregnancy including payments for reasonable food, clothing, medical expenses, shelter, and religious, psychological, vocational, or similar counseling services during the period of the pregnancy and for a period not to exceed four weeks after the termination of the pregnancy by birth or otherwise. These payments may be made directly to the birth mother or on the mother's behalf to the supplier of the goods or services, or

(2) where the child is from a foreign country, reasonable and customary fees and expenses of a foreign agency or attorney for the care or representation of the child during any period of foster or institutional care in the child's country of origin, or

(3) reasonable attorney fees and costs for legal services.

16. Section 8 of P.L.1977, c.367 (C.9:3-44) is amended to read as follows:

C.9:3-44 Filing of complaint.

8. Whenever a person receives a child into the person's home for the purpose of adoption other than from an approved agency, a complaint for adoption shall be filed within 45 days after receipt of the child. If the per-

son receiving the child has been approved previously for placement for adoption in accordance with the provisions of section 18 of P.L.1993, c.345 (C.9:3-39.1), the person shall, immediately upon receiving the child, notify the approved agency which granted approval of the receipt of the child, and that agency shall undertake immediate supervision of the child in accordance with rules and regulations promulgated by the Director of the Division of Child Protection and Permanency. The cost of the supervision shall be paid by the person receiving the child. If the agency, in the course of supervision shall determine that the child is at risk of harm or that the best interests of the child are not served by the child remaining in the home, the agency may apply to a court for removal of the child from the home. Whenever a person receives a child into the person's home for purposes other than adoption and it is later determined that an adoption shall be sought, a complaint for adoption shall be instituted with reasonable promptness following the determination. Failure to file the complaint in a timely manner shall not be a sole basis for refusal of the adoption but the failure shall require the filing, with the complaint, of an affidavit setting forth the reasons for the delay.

17. Section 3 of P.L.1999, c.53 (C.9:3-45.2) is amended to read as follows:

C.9:3-45.2 Resource family relative, parent, notice, right to be heard.

3. In any case in which the Division of Child Protection and Permanency accepts a child in its care or custody, the child's resource family parent or relative providing care for the child, as applicable, shall receive written notice of, and shall have a right to be heard at, any review or hearing held with respect to the child, but the resource family parent or relative shall not be made a party to the review or hearing solely on the basis of the notice and right to be heard.

18. Section 21 of P.L.1993, c.345 (C.9:3-54.2) is amended to read as follows:

C.9:3-54.2 Home study, fingerprint and criminal data.

21. a. (1) In addition to meeting the other requirements established by the Department of Children and Families, a home study completed by an approved agency shall include a recommendation regarding the suitability of the home for the placement of a child based upon the results of State and federal criminal history record checks for each prospective adoptive parent and each adult residing in the home.

For the purposes of this section, the federal criminal history record check conducted by the U.S. Citizenship and Immigration Services in the Department of Homeland Security on a prospective adoptive parent shall be valid for the prospective adoptive parent in fulfilling the home study requirement for the State.

(2) Each prospective adoptive parent and each member of the prospective adoptive parent's household, age 18 or older, shall submit to the approved agency standard fingerprint cards containing his name, address and fingerprints taken by a State or municipal law enforcement agency.

(3) The cost of all criminal history record checks conducted pursuant to this section shall be paid by the prospective adoptive parent or household member at the time the fingerprint cards are submitted.

(4) The approved agency shall forward the fingerprint cards and payment to the commissioner.

(5) The commissioner is authorized to exchange fingerprint data and receive criminal history record information from the Federal Bureau of Investigation and the Division of State Police for use in making the recommendations provided for in this section.

(6) The department shall advise the approved agency of information received from State and federal criminal history record checks based upon the fingerprints submitted by the agency. Information provided to the approved agency shall be confidential and not disclosed by the approved agency to any individual or entity without the written permission of the person who is the subject of the record check.

(7) The commissioner shall adopt regulations for the use of criminal history record information by approved agencies when determining the suitability of a home for the placement of a child for the purposes of adoption.

b. (1) Beginning one year after the effective date of P.L.1993, c.345, a home study completed by an approved agency shall include a recommendation regarding the suitability of the home for the placement of the child based upon a check for any records which might reveal a history of child abuse or neglect by the proposed adoptive parent or member of the parent's household who is 18 years of age or older.

(2) Beginning one year after the effective date, at the request of an approved agency, the commissioner or his designee shall conduct a search of the records of the Division of Child Protection and Permanency regarding referrals of dispositions of child abuse or neglect matters as to the proposed adoptive parent and any member of the parent's household 18 years of age or older, and, if there is information that would raise a question of the suitability of the proposed adoptive parent or member of the parent's household

to have guardianship of a child, shall provide that information to the approved agency for its consideration. Information provided to the approved agency pursuant to this paragraph shall be confidential. The commissioner shall establish penalties for disclosure of this confidential information.

19. Section 9 of P.L.2006, c.47 (C.9:3A-9) is amended to read as follows:

C.9:3A-9 Functions, powers, duties of Office of Children's Services transferred to department.

9. All of the functions, powers, and duties of the Office of Children's Services in the Department of Human Services, and the power to receive, allocate, expend, and authorize the expenditure of federal moneys available for children and families are hereby transferred and assigned to, assumed by, and devolved upon the Department of Children and Families. To effectuate such transfer there shall also be transferred such officers and employees as are necessary, all appropriations or reappropriations, to the extent of remaining unexpended or unencumbered balances thereof, whether allocated or unallocated and whether obligated or unobligated, and all necessary books, papers, records and property. All rules, regulations, acts, determinations, and decisions in force at the time of such transfer and proceedings or other such matters undertaken, commenced, or pending by or before the Office of Children's Services at the time of such transfer shall continue in force and effect until duly modified, abrogated or completed by the Department of Children and Families.

As used in this section, the Office of Children's Services includes, but is not limited to, the Division of Child Protection and Permanency, the Division of Children's System of Care, the Division of Family and Community Partnerships, and the New Jersey Child Welfare Training Academy in the Department of Human Services.

20. Section 10 of P.L.2006, c.47 (C.9:3A-10) is amended to read as follows:

C.9:3A-10 "Office of Children's Services" refers to Department of Children and Families.

10. a. Whenever the term "Office of Children's Services" occurs or any reference is made thereto in any law, regulation, contract, or document, the same shall be deemed to mean or refer to the Department of Children and Families.

b. Whenever the terms "Division of Youth and Family Services," "Division of Child Behavioral Health Services," "Division of Prevention and Community Partnerships" and "New Jersey Child Welfare Training Academy" occur or any reference is made thereto in any law, regulation, contract, or document, the same shall be deemed to mean or refer to, respectively, the "Division of Child Protection and Permanency," "Division of Children's System of Care," "Division of Family and Community Partnerships," and "New Jersey Child Welfare Training Academy" in the Department of Children and Families established herein.

21. Section 3 of P.L.1971, c.437 (C.9:6-8.10) is amended to read as follows:

C.9:6-8.10 Report of abuse.

3. Any person having reasonable cause to believe that a child has been subjected to child abuse or acts of child abuse shall report the same immediately to the Division of Child Protection and Permanency by telephone or otherwise. Such reports, where possible, shall contain the names and addresses of the child and his parent, guardian, or other person having custody and control of the child and, if known, the child's age, the nature and possible extent of the child's injuries, abuse or maltreatment, including any evidence of previous injuries, abuse or maltreatment, and any other information that the person believes may be helpful with respect to the child abuse and the identity of the perpetrator.

22. Section 1 of P.L.1977, c.102 (C.9:6-8.10a) is amended to read as follows:

C.9:6-8.10a Records of child abuse reports; confidentiality; disclosure.

1. a. All records of child abuse reports made pursuant to section 3 of P.L.1971, c.437 (C.9:6-8.10), all information obtained by the Department of Children and Families in investigating such reports including reports received pursuant to section 20 of P.L.1974, c.119 (C.9:6-8.40), and all reports of findings forwarded to the child abuse registry pursuant to section 4 of P.L.1971, c.437 (C.9:6-8.11) shall be kept confidential and may be disclosed only under the circumstances expressly authorized under subsections b., c., d., e., f., and g. herein. The department shall disclose information only as authorized under subsections b., c., d., e., f., and g. of this section that is relevant to the purpose for which the information is required, provided, however, that nothing may be disclosed which would likely endanger the

life, safety, or physical or emotional well-being of a child or the life or safety of any other person or which may compromise the integrity of a department investigation or a civil or criminal investigation or judicial proceeding. If the department denies access to specific information on this basis, the requesting entity may seek disclosure through the Chancery Division of the Superior Court. This section shall not be construed to prohibit disclosure pursuant to paragraphs (2) and (7) of subsection b. of this section.

Nothing in P.L.1977, c.102 (C.9:6-8.10a et seq.) shall be construed to permit the disclosure of any information deemed confidential by federal or State law.

b. The department may and upon written request, shall release the records and reports referred to in subsection a., or parts thereof, consistent with the provisions of P.L.1997, c.175 (C.9:6-8.83 et al.) to:

(1) A public or private child protective agency authorized to investigate a report of child abuse or neglect;

(2) A police or other law enforcement agency investigating a report of child abuse or neglect;

(3) A physician who has before him a child whom he reasonably suspects may be abused or neglected or an authorized member of the staff of a duly designated regional child abuse diagnostic and treatment center which is involved with a particular child who is the subject of the request;

(4) A physician, a hospital director or his designate, a police officer, or other person authorized to place a child in protective custody when such person has before him a child whom he reasonably suspects may be abused or neglected and requires the information in order to determine whether to place the child in protective custody;

(5) An agency, whether public or private, including any division or unit in the Department of Human Services or the Department of Children and Families, authorized to care for, treat, assess, evaluate, or supervise a child who is the subject of a child abuse report, or a parent, guardian, resource family parent, or other person who is responsible for the child's welfare, or both, when the information is needed in connection with the provision of care, treatment, assessment, evaluation, or supervision to such child or such parent, guardian, resource family parent, or other person and the provision of information is in the best interests of the child as determined by the Division of Child Protection and Permanency;

(6) A court or the Office of Administrative Law, upon its finding that access to such records may be necessary for determination of an issue before it, and such records may be disclosed by the court or the Office of Administrative Law in whole or in part to the law guardian, attorney, or other appro-

priate person upon a finding that such further disclosure is necessary for determination of an issue before the court or the Office of Administrative Law;

(7) A grand jury upon its determination that access to such records is necessary in the conduct of its official business;

(8) Any appropriate State legislative committee acting in the course of its official functions, provided, however, that no names or other information identifying persons named in the report shall be made available to the legislative committee unless it is absolutely essential to the legislative purpose;

(9) (Deleted by amendment, P.L.1997, c.175).

(10) A family day care sponsoring organization for the purpose of providing information on child abuse or neglect allegations involving prospective or current providers or household members pursuant to P.L.1993, c.350 (C.30:5B-25.1 et seq.) and as necessary, for use in administrative appeals related to information obtained through a child abuse registry search;

(11) The Victims of Crime Compensation Board, for the purpose of providing services available pursuant to the "Criminal Injuries Compensation Act of 1971," P.L.1971, c.317 (C.52:4B-1 et seq.) to a child victim who is the subject of such report;

(12) Any person appealing a department service or status action or a substantiated finding of child abuse or neglect and his attorney or authorized lay representative upon a determination by the department or the presiding Administrative Law Judge that such disclosure is necessary for a determination of the issue on appeal;

(13) Any person or entity mandated by statute to consider child abuse or neglect information when conducting a background check or employment-related screening of an individual employed by or seeking employment with an agency or organization providing services to children;

(14) Any person or entity conducting a disciplinary, administrative, or judicial proceeding to determine terms of employment or continued employment of an officer, employee, or volunteer with an agency or organization providing services for children. The information may be disclosed in whole or in part to the appellant or other appropriate person only upon a determination by the person or entity conducting the proceeding that the disclosure is necessary to make a determination;

(15) The members of a county multi-disciplinary team, established in accordance with State guidelines, for the purpose of coordinating the activities of agencies handling alleged cases of child abuse and neglect;

(16) A person being evaluated by the department or the court as a potential care-giver to determine whether that person is willing and able to provide the care and support required by the child;

(17) The legal counsel of a child, parent, or guardian, whether court-appointed or retained, when information is needed to discuss the case with the department in order to make decisions relating to or concerning the child;

(18) A person who has filed a report of suspected child abuse or neglect for the purpose of providing that person with only the disposition of the investigation;

(19) A parent, resource family parent, or legal guardian when the information is needed in a department matter in which that parent, resource family parent, or legal guardian is directly involved. The information may be released only to the extent necessary for the requesting parent, resource family parent, or legal guardian to discuss services or the basis for the department's involvement or to develop, discuss, or implement a case plan for the child;

(20) A federal, State, or local government entity, to the extent necessary for such entity to carry out its responsibilities under law to protect children from abuse and neglect;

(21) Citizen review panels designated by the State in compliance with the federal "Child Abuse Prevention and Treatment Act Amendments of 1996," Pub.L.104-235;

(22) The Child Fatality and Near Fatality Review Board established pursuant to P.L.1997, c.175 (C.9:6-8.83 et al.); or

(23) Members of a family team or other case planning group formed by the Division of Child Protection and Permanency and established in accordance with regulations adopted by the Commissioner of Children and Families for the purpose of addressing the child's safety, permanency, or well-being, when the provision of such information is in the best interests of the child as determined by the Division of Child Protection and Permanency.

Any individual, agency, board, court, grand jury, legislative committee, or other entity which receives from the department the records and reports referred to in subsection a., shall keep the records and reports, or parts thereof, confidential and shall not disclose the records and reports or parts thereof except as authorized by law.

c. The department may share information with a child who is the subject of a child abuse or neglect report, as appropriate to the child's age or condition, to enable the child to understand the basis for the department's involvement and to participate in the development, discussion, or implementation of a case plan for the child.

d. The department may release the records and reports referred to in subsection a. of this section to any person engaged in a bona fide research purpose, provided, however, that no names or other information identifying

persons named in the report shall be made available to the researcher unless it is absolutely essential to the research purpose and provided further that the approval of the Commissioner of Children and Families or his designee shall first have been obtained.

e. For incidents determined by the department to be substantiated, the department shall forward to the police or law enforcement agency in whose jurisdiction the child named in the report resides, the identity of persons alleged to have committed child abuse or neglect and of victims of child abuse or neglect, their addresses, the nature of the allegations, and other relevant information, including, but not limited to, prior reports of abuse or neglect and names of siblings obtained by the department during its investigation of a report of child abuse or neglect. The police or law enforcement agency shall keep such information confidential.

f. The department may disclose to the public the findings or information about a case of child abuse or neglect which has resulted in a child fatality or near fatality. Nothing may be disclosed which would likely endanger the life, safety, or physical or emotional well-being of a child or the life or safety of any other person or which may compromise the integrity of a department investigation or a civil or criminal investigation or judicial proceeding. If the department denies access to specific information on this basis, the requesting entity may seek disclosure of the information through the Chancery Division of the Superior Court. No information may be disclosed which is deemed confidential by federal or State law. The name or any other information identifying the person or entity who referred the child to the department shall not be released to the public.

g. The department shall release the records and reports referred to in subsection a. of this section to a unified child care agency contracted with the department pursuant to N.J.A.C.10:15-2.1 for the purpose of providing information on child abuse or neglect allegations involving a prospective approved home provider or any adult household member pursuant to section 2 of P.L.2003, c.185 (C.30:5B-32) to a child's parent when the information is necessary for the parent to make a decision concerning the placement of the child in an appropriate child care arrangement.

The department shall not release any information that would likely endanger the life, safety, or physical or emotional well-being of a child or the life or safety of any other person.

23. Section 2 of P.L.2003, c.301 (C.9:6-8.10c) is amended to read as follows:

C.9:6-8.10c Child abuse record information check on designated caretaker.

2. a. Upon receiving the presentencing investigation information from the court pursuant to section 1 of P.L.2003, c.301 (C.2C:44-6.2) concerning a sole caretaker of a child who will be incarcerated and the person who will assume care and custody of the child during the period of incarceration, the Division of Child Protection and Permanency in the Department of Children and Families shall conduct a child abuse record information check of its child abuse records to determine if an incident of child abuse or neglect has been substantiated against the person who will be responsible for the child's care and custody or any adult and juvenile over 12 years of age in the person's household.

b. If, based on the information provided by the court and the check of its child abuse records, the division determines that the incarcerated person's minor child may be at risk for abuse or neglect or the child's emotional, physical, health care, and educational needs will not be met during the period of incarceration, the division shall take appropriate action to ensure the safety of the child.

24. Section 4 of P.L.1971, c.437 (C.9:6-8.11) is amended to read as follows:

C.9:6-8.11 Actions to ensure safety of child; investigation; report.

4. Upon receipt of any such report, the Division of Child Protection and Permanency, or such another entity in the Department of Children and Families as may be designated by the Commissioner of Children and Families to investigate child abuse or neglect, shall immediately take such action as shall be necessary to insure the safety of the child and to that end may request and shall receive appropriate assistance from local and State law enforcement officials. A representative of the division or other designated entity shall initiate an investigation within 24 hours of receipt of the report, unless the division or other entity authorizes a delay based upon the request of a law enforcement official. The division or other entity shall also, within 72 hours, forward a report of such matter to the child abuse registry operated by the division in Trenton.

The child abuse registry shall be the repository of all information regarding child abuse or neglect that is accessible to the public pursuant to State and federal law. No information received in the child abuse registry shall be considered as a public record within the meaning of P.L.1963, c.73 (C.47:1A-1 et seq.) or P.L.2001, c.404 (C.47:1A-5 et al.).

25. Section 5 of P.L.1971, c.437 (C.9:6-8.12) is amended to read as follows:

C.9:6-8.12 Emergency telephone services for child abuse and neglect calls.

5. The Division of Child Protection and Permanency shall maintain, at all times, an emergency telephone service for the receipt of calls involving a report, complaint, or allegation of child abuse or neglect.

26. Section 8 of P.L.1971, c.437 (C.9:6-8.15) is amended to read as follows:

C.9:6-8.15 Rules and regulations.

8. The Division of Child Protection and Permanency shall from time to time promulgate such rules and regulations as may be necessary to effectuate the provisions of P.L.1971, c.437 (C.9:6-8.8 et seq.).

27. Section 2 of P.L.1973, c.147 (C.9:6-8.17) is amended to read as follows:

C.9:6-8.17 Report of action of taking protective custody of child.

2. The physician or the director or his designate of a hospital or similar institution taking a child into such protective custody shall immediately report his action to the Division of Child Protection and Permanency by calling its emergency telephone service maintained pursuant to section 5 of P.L.1971, c.437 (C.9:6-8.12).

28. Section 3 of P.L.1973, c.147 (C.9:6-8.18) is amended to read as follows:

C.9:6-8.18 Division of Child Protection and Permanency, actions upon receipt of report.

3. The Division of Child Protection and Permanency, shall upon receipt of such report, take action to insure the safety of the child under section 4 of P.L.1971, c.437 (C.9:6-8.11). The report shall be deemed an oral complaint under section 12 of P.L.1951, c.138 (C.30:4C-12), and the Division of Child Protection and Permanency, shall investigate the circumstances under which the child was injured and may, after such investigation has been completed, apply for a court order placing the child under its care and supervision, pursuant to section 12 of P.L.1951, c.138 (C.30:4C-12).

29. Section 4 of P.L.1973, c.147 (C.9:6-8.19) is amended to read as follows:

C.9:6-8.19 Notice to parents or guardian; visitation rights; limitation on period.

4. a. The Division of Child Protection and Permanency, shall immediately after the receipt of such report, and after making a determination to take the child into protective custody, shall serve or attempt to serve, written notice upon the parents or guardian that the said child has been taken into protective custody. The notice shall contain a statement of the maximum duration of the protective custody and the location of the child during protective custody.

b. The parents or guardian of a child in protective custody may, upon request and in the reasonable discretion of the physician, director, or his designate, or appropriate official of the Division of Child Protection and Permanency, visit the child, provided that the life or health of the child will not be endangered by such visit.

c. The entire period of protective custody shall not exceed three court days. The protective custody may be terminated earlier at the discretion of the reporting physician, director or appropriate official of the Division of Child Protection and Permanency, or upon order of the court.

30. Section 5 of P.L.1999, c.53 (C.9:6-8.19a) is amended to read as follows:

C.9:6-8.19a Resource family parent, notice, opportunity to be heard.

5. In any case in which the Division of Child Protection and Permanency accepts a child in its care or custody, the child's resource family parent or relative providing care for the child, as applicable, shall receive written notice of and an opportunity to be heard at any review or hearing held with respect to the child, but the resource family parent or relative shall not be made a party to the review or hearing solely on the basis of the notice and opportunity to be heard.

31. Section 1 of P.L.1974, c.119 (C.9:6-8.21) is amended to read as follows:

C.9:6-8.21 Definitions.

1. As used in P.L.1974, c.119 (C.9-8.21 et seq.), unless the specific context indicates otherwise:

a. "Parent or guardian" means any natural parent, adoptive parent, resource family parent, stepparent, paramour of a parent, or any person, who has assumed responsibility for the care, custody, or control of a child or upon whom there is a legal duty for such care. Parent or guardian includes a teacher, employee, or volunteer, whether compensated or uncom-

pensated, of an institution who is responsible for the child's welfare and any other staff person of an institution regardless of whether or not the person is responsible for the care or supervision of the child. Parent or guardian also includes a teaching staff member or other employee, whether compensated or uncompensated, of a day school as defined in section 1 of P.L.1974, c.119 (C.9:6-8.21).

b. "Child" means any child alleged to have been abused or neglected.

c. "Abused or neglected child" means a child less than 18 years of age whose parent or guardian, as herein defined, (1) inflicts or allows to be inflicted upon such child physical injury by other than accidental means which causes or creates a substantial risk of death, or serious or protracted disfigurement, or protracted impairment of physical or emotional health or protracted loss or impairment of the function of any bodily organ; (2) creates or allows to be created a substantial or ongoing risk of physical injury to such child by other than accidental means which would be likely to cause death or serious or protracted disfigurement, or protracted loss or impairment of the function of any bodily organ; (3) commits or allows to be committed an act of sexual abuse against the child; (4) or a child whose physical, mental, or emotional condition has been impaired or is in imminent danger of becoming impaired as the result of the failure of his parent or guardian, as herein defined, to exercise a minimum degree of care (a) in supplying the child with adequate food, clothing, shelter, education, medical or surgical care though financially able to do so or though offered financial or other reasonable means to do so, or (b) in providing the child with proper supervision or guardianship, by unreasonably inflicting or allowing to be inflicted harm, or substantial risk thereof, including the infliction of excessive corporal punishment; or by any other acts of a similarly serious nature requiring the aid of the court; (5) or a child who has been willfully abandoned by his parent or guardian, as herein defined; (6) or a child upon whom excessive physical restraint has been used under circumstances which do not indicate that the child's behavior is harmful to himself, others, or property; (7) or a child who is in an institution and (a) has been placed there inappropriately for a continued period of time with the knowledge that the placement has resulted or may continue to result in harm to the child's mental or physical well-being or (b) who has been willfully isolated from ordinary social contact under circumstances which indicate emotional or social deprivation.

A child shall not be considered abused or neglected pursuant to paragraph (7) of subsection c. of this section if the acts or omissions described therein occur in a day school as defined in this section.

No child who in good faith is under treatment by spiritual means alone through prayer in accordance with the tenets and practices of a recognized church or religious denomination by a duly accredited practitioner thereof shall for this reason alone be considered to be abused or neglected.

d. "Law guardian" means an attorney admitted to the practice of law in this State, regularly employed by the Office of the Public Defender or appointed by the court, and designated under P.L.1974, c.119 to represent minors in alleged cases of child abuse or neglect and in termination of parental rights proceedings.

e. "Attorney" means an attorney admitted to the practice of law in this State who shall be privately retained; or, in the instance of an indigent parent or guardian, an attorney from the Office of the Public Defender or an attorney appointed by the court who shall be appointed in order to avoid conflict between the interests of the child and the parent or guardian in regard to representation.

f. "Division" means the Division of Child Protection and Permanency in the Department of Children and Families unless otherwise specified.

g. "Institution" means a public or private facility in the State which provides children with out of home care, supervision, or maintenance. Institution includes, but is not limited to, a correctional facility, detention facility, treatment facility, day care center, residential school, shelter, and hospital.

h. "Day school" means a public or private school which provides general or special educational services to day students in grades kindergarten through 12. Day school does not include a residential facility, whether public or private, which provides care on a 24-hour basis.

32. Section 9 of P.L.1974, c.119 (C.9:6-8.29) is amended to read as follows:

C.9:6-8.29 Removal of child without court order.

9. a. A police officer or a designated employee of the Probation Division or a designated employee of the division may remove a child from the place where the child is residing, or any person or any physician treating a child may keep a child in the person's or physician's custody without an order pursuant to section 8 of P.L.1974, c.119 (C.9:6-8.28) and without the consent of the parent or guardian regardless of whether the parent or guardian is absent, if the child is in such condition that the child's continuance in the place or residence or in the care and custody of the parent or guardian presents an imminent danger to the child's life, safety, or health, and there is insufficient time to apply for a court order pursuant to section 8 of

P.L.1974, c.119 (C.9:6-8.28), or any physician or hospital treating a child may keep a child in custody pursuant to P.L.1973, c.147 (C.9:6-8.16 et seq.). The Division of Child Protection and Permanency shall not be required to provide reasonable efforts to prevent placement if removal of the child is necessary due to imminent danger to the child's life, safety, or health in accordance with section 24 of P.L.1999, c.53 (C.30:4C-11.2).

b. If a person authorized by this section removes or keeps custody of a child, he shall (1) inform the division immediately; (2) bring the child immediately to a place designated by the division for this purpose; and (3) make every reasonable effort to inform the parent or guardian of the facility to which the person has brought the child.

c. Any person or institution acting in good faith in the removal or keeping of a child pursuant to this section shall have immunity from any liability, civil or criminal, that might otherwise be incurred or imposed as a result of such removal or keeping.

d. Any person acting under the authority of P.L.1974, c.119 (C.9:6-8.21 et seq.) may request and shall receive appropriate assistance from local and State law enforcement officials.

33. Section 11 of P.L.1974, c.119 (C.9:6-8.31) is amended to read as follows:

C.9:6-8.31 Preliminary orders after filing of complaint.

11. Preliminary orders after filing of complaint. a. In any case where the child has been removed without court order, except where action has been taken pursuant to P.L.1973, c.147 (C.9:6-8.16 et seq.) the Superior Court, Chancery Division, Family Part shall hold a hearing on the next court day, whereby the safety of the child shall be of paramount concern, to determine whether the child's interests require protection pending a final order of disposition. In any other case under P.L.1974, c.119 (C.9:6-8.21 et seq.), any person who may originate a proceeding may apply for, or the court, on its own motion, may order a hearing at any time after the complaint is filed to determine, with the safety of the child of paramount concern, whether the child's interests require protection pending a final order of disposition.

b. Upon such hearing, if the court finds that continued removal is necessary to avoid an ongoing risk to the child's life, safety, or health, it shall affirm the removal of the child to an appropriate place or place him in the custody of a suitable person.

If the court determines that removal of the child by a physician, police officer, designated employee of the Probation Division, or designated em-

ployee of the Division of Child Protection and Permanency was necessary due to imminent danger to the child's life, safety, or health, the court shall find that the Division of Child Protection and Permanency was not required to provide reasonable efforts to prevent placement of the child in accordance with section 24 of P.L.1999, c.53 (C.30:4C-11.2).

c. Upon such hearing the court may, for good cause shown, issue a preliminary order of protection which may contain any of the provisions authorized on the making of an order of protection under section 35 of P.L.1974, c.119 (C.9:6-8.55).

d. Upon such hearing, the court may, for good cause shown, release the child to the custody of his parent or guardian from whose custody or care the child was removed, pending a final order of disposition, in accord with section 33 of P.L.1974, c.119 (C.9:6-8.53).

e. Upon such hearing, the court may authorize a physician or hospital to provide medical or surgical procedures if such procedures are necessary to safeguard the child's life or health.

f. If the court grants or denies a preliminary order requested pursuant to this section, it shall state the grounds for such decision.

g. In all cases involving abuse or neglect the court shall order an examination of the child by a physician appointed or designated for the purpose by the division. As part of such examination, the physician shall arrange to have color photographs taken as soon as practical of any areas of trauma visible on such child and may if indicated, arrange to have a radiological examination performed on the child. The physician, on the completion of such examination, shall forward the results thereof together with the color photographs to the court ordering such examination.

34. Section 1 of P.L.1997, c.62 (C.9:6-8.40a) is amended to read as follows:

C.9:6-8.40a Expungement of unfounded allegations.

1. a. The Division of Child Protection and Permanency in the Department of Children and Families shall expunge from its records all information relating to a report, complaint, or allegation of an incident of child abuse or neglect with respect to which the division or other entity designated by the Commissioner of Children and Families to investigate allegations of child abuse or neglect has determined, based upon its investigation thereof, that the report, complaint, or allegation of the incident was unfounded.

b. (Deleted by amendment, P.L.2004, c.130).

The definition of, and process for, making a determination of an unfounded report, complaint, or allegation of an incident of child abuse or neglect shall be defined in regulations promulgated by the department pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.).

35. Section 1 of P.L.1998, c.127 (C.9:6-8.58a) is amended to read as follows:

C.9:6-8.58a Substance abuse assessment of parent of placed child.

1. When a child is placed in the custody of a relative or other suitable person or the Division of Child Protection and Permanency pursuant to section 34 of P.L.1974, c.119 (C.9:6-8.54), because of a finding of abuse or neglect, the Superior Court, Chancery Division, Family Part shall order the parent and, when appropriate, any other adult domiciled in the home to undergo substance abuse assessment, when necessary. If the assessment reveals positive evidence of substance abuse, the court shall require the parent and other adult, when appropriate, to demonstrate that he is receiving treatment and complying with the treatment program for the substance abuse problem before the child is returned to the parental home.

36. Section 2 of P.L.1994, c.119 (C.9:6-8.75) is amended to read as follows:

C.9:6-8.75 "New Jersey Task Force on Child Abuse and Neglect."

2. There is established the "New Jersey Task Force on Child Abuse and Neglect."

a. The purpose of the task force is to study and develop recommendations regarding the most effective means of improving the quality and scope of child protective and preventative services provided or supported by State government, including a review of the practices and policies utilized by the Division of Child Protection and Permanency and the Division of Family and Community Partnerships in the Department of Children and Families in order to:

- (1) optimize coordination of child abuse-related services and investigations;
- (2) promote the safety of children at risk of abuse or neglect;
- (3) ensure a timely determination with regard to reports of alleged child abuse;
- (4) educate the public about the problems of, and coordinate activities relating to, child abuse and neglect;

(5) develop a Statewide plan to prevent child abuse and neglect and mechanisms to facilitate child abuse and neglect prevention strategies in coordination with the Division of Family and Community Partnerships;

(6) mobilize citizens and community agencies in a proactive effort to prevent and treat child abuse and neglect; and

(7) foster cooperative working relationships between State and local agencies responsible for providing services to victims of child abuse and neglect and their families.

b. The task force shall receive, evaluate, and approve applications of public and private agencies and organizations for grants from moneys annually appropriated from the "Children's Trust Fund" established pursuant to section 2 of P.L.1985, c.197 (C.54A:9-25.4). Any portion of the moneys actually appropriated which are remaining at the end of a fiscal year shall lapse to the "Children's Trust Fund."

Grants shall be awarded to public and private agencies for the purposes of planning and establishing or improving programs and services for the prevention of child abuse and neglect, including activities which:

(1) Provide Statewide educational and public informational seminars for the purpose of developing appropriate public awareness regarding the problems of child abuse and neglect;

(2) Encourage professional persons and groups to recognize and deal with problems of child abuse and neglect;

(3) Make information about the problems of child abuse and neglect available to the public and organizations and agencies which deal with problems of child abuse and neglect; and

(4) Encourage the development of community prevention programs, including:

(a) community-based educational programs on parenting, prenatal care, prenatal bonding, child development, basic child care, care of children with special needs, coping with family stress, personal safety and sexual abuse prevention training for children, and self-care training for latchkey children; and

(b) community-based programs relating to crisis care, aid to parents, child abuse counseling, peer support groups for abusive or potentially abusive parents and their children, lay health visitors, respite of crisis child care, and early identification of families where the potential for child abuse and neglect exists.

The task force shall, in awarding grants, establish such priorities respecting the programs or services to be funded and the amounts of funding to be provided as it deems appropriate, except that the task force shall place

particular emphasis on community-based programs and services which are designed to develop and demonstrate strategies for the early identification, intervention, and assistance of families and children at risk in order to prevent child abuse and neglect.

The task force shall adopt such rules and regulations pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.) to govern the awarding of grants pursuant to this subsection as may be necessary to establish adequate reporting requirements on the use of grant funds by recipient agencies and organizations and to permit the task force to evaluate the programs and services for which grants are awarded.

c. The task force shall establish a Staffing and Oversight Review Subcommittee to review staffing levels of the Division of Child Protection and Permanency in order to develop recommendations regarding staffing levels and the most effective methods of recruiting, hiring, and retaining staff within the division. In addition, the subcommittee shall review the division's performance in the achievement of management and client outcomes, and shall issue a preliminary report with its findings and recommendations no later than January 1, 2007, and subsequent reports annually thereafter with the first full report due no later than July 1, 2007. The subcommittee shall directly issue its reports to the Governor and, pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1), to the Legislature.

37. Section 3 of P.L.1994, c.119 (C.9:6-8.76) is amended to read as follows:

C.9:6-8.76 Task force membership.

3. The task force shall consist of 29 members as follows: the Commissioners of Human Services, Children and Families, Education, Community Affairs, Corrections, and Health and Senior Services, the Attorney General, two judges of the Superior Court involved in both civil and criminal court proceedings related to child abuse and neglect as appointed by the Chief Justice of the Supreme Court, the Public Defender, and the Superintendent of State Police, or their designees, as ex officio members; two members of the Senate and the General Assembly, respectively, no more than one of whom in each case shall be of the same political party; and a county prosecutor appointed by the Attorney General. The 13 public members shall be appointed by the Governor as follows: one member who is a director of a regional diagnostic and treatment center for child abuse and neglect; one member who represents the Advocates for Children of New Jersey; one member who represents Foster and Adoptive Family Services;

one member who represents a faith-based organization; one member who is a director of a county department of human services; one member who is a youth 21 years of age or younger who is or has been placed under the care and custody of the Division of Child Protection and Permanency because of an allegation of child abuse or neglect; two members who represent service providers under contract with the Division of Child Protection and Permanency; and five members of the public who have an interest or expertise in issues concerning child welfare. The public members shall reflect the diversity of the residents of the State and the children and families served by the State's child welfare system.

The task force membership shall comply with the multidisciplinary requirements set forth in the "Child Abuse Prevention and Treatment Act," Pub.L.93-247 (42 U.S.C. s.5101 et seq.).

The task force shall be co-chaired, one co-chair shall be the Commissioner of Children and Families and the other shall be appointed by the Governor with the advice and consent of the Senate. The second co-chair shall be selected from among the public members and shall serve at the pleasure of the Governor. The public members shall serve for a term of three years.

38. Section 2 of P.L.1997, c.175 (C.9:6-8.84) is amended to read as follows:

C.9:6-8.84 Definitions relative to child abuse, neglect.

2. As used in this act:

"Board" means the Child Fatality and Near Fatality Review Board established under P.L.1997, c.175 (C.9:6-8.83 et al.).

"Child" means any person under the age of 18.

"Commissioner" means the Commissioner of Children and Families.

"Division" means the Division of Child Protection and Permanency in the Department of Children and Families.

"Near fatality" means a case in which a child is in serious or critical condition, as certified by a physician.

"Panel" means a citizen review panel as established under P.L.1997, c.175 (C.9:6-8.83 et al.).

"Parent or guardian" means a person defined pursuant to section 1 of P.L.1974, c.119 (C.9:6-8.21) who has the responsibility for the care, custody, or control of a child or upon whom there is a legal duty for such care.

"Reasonable efforts" means attempts by an agency authorized by the Division of Child Protection and Permanency to assist the parents in remedying the circumstances and conditions that led to the placement of the

child and in reinforcing the family structure, as defined in section 7 of P.L.1991, c.275 (C.30:4C-15.1).

"Sexual abuse" means contacts or actions between a child and a parent or caretaker for the purpose of sexual stimulation of either that person or another person. Sexual abuse includes:

- a. the employment, use, persuasion, inducement, enticement, or coercion of any child to engage in, or assist any other person to engage in, any sexually explicit conduct or simulation of such conduct;
- b. sexual conduct including molestation, prostitution, other forms of sexual exploitation of children, or incest; or
- c. sexual penetration and sexual contact as defined in N.J.S.2C:14-1 and a prohibited sexual act as defined in N.J.S.2C:24-4.

"Significant bodily injury" means a temporary loss of the functioning of any bodily member or organ or temporary loss of any one of the five senses.

"Withholding of medically indicated treatment" means the failure to respond to a child's life-threatening conditions by providing treatment, including appropriate nutrition, hydration, and medication which, in the treating physician's reasonable judgment, will most likely be effective in ameliorating or correcting all such conditions. The term does not include the failure to provide treatment, other than appropriate nutrition, hydration, or medication to a child when, in the treating physician's reasonable medical judgment:

- a. the child is chronically and irreversibly comatose;
- b. the provision of such treatment would merely prolong dying, not be effective in ameliorating or correcting all of the child's life-threatening conditions, or otherwise be futile in terms of the survival of the child; or
- c. the provision of such treatment would be virtually futile in terms of the survival of the child and the treatment itself under such circumstances would be inhumane.

39. Section 7 of P.L.1997, c.175 (C.9:6-8.89) is amended to read as follows:

C.9:6-8.89 Membership, terms of board members.

7. a. The board shall consist of 13 members as follows: the Commissioner of Children and Families, the Commissioner of Health and Senior Services, the Director of the Division of Child Protection and Permanency in the Department of Children and Families, the Attorney General, and the Superintendent of State Police, or their designees, the State Medical Examiner, and the Chairperson or Executive Director of the New Jersey Task Force on Child Abuse and Neglect, who shall serve ex officio; and six pub-

lic members appointed by the Governor, one of whom shall be a representative of the New Jersey Prosecutors' Association, one of whom shall be a Law Guardian, one of whom shall be a pediatrician with expertise in child abuse and neglect, one of whom shall be a psychologist with expertise in child abuse and neglect, one of whom shall be a social work educator with experience and expertise in the area of child abuse or a related field and one of whom shall have expertise in substance abuse.

b. The public members of the board shall serve for three-year terms. Of the public members first appointed, three shall serve for a period of two years, and three shall serve for a term of three years. They shall serve without compensation but shall be eligible for reimbursement for necessary and reasonable expenses incurred in the performance of their official duties and within the limits of funds appropriated for this purpose. Vacancies in the membership of the board shall be filled in the same manner as the original appointments were made.

c. The Governor shall appoint a public member to serve as chairperson of the board who shall be responsible for the coordination of all activities of the board and who shall provide the technical assistance needed to execute the duties of the board.

d. The board is entitled to call to its assistance and avail itself of the services of employees of any State, county, or municipal department, board, bureau, commission, or agency as it may require and as may be available for the purposes of reviewing a case pursuant to the provisions of P.L.1997, c.175 (C.9:6-8.83 et al.). The board may also seek the advice of experts, such as persons specializing in the fields of pediatric, radiological, neurological, psychiatric, orthopedic, and forensic medicine; nursing; psychology; social work; education; law enforcement; family law; substance abuse; child advocacy; or other related fields, if the facts of a case warrant additional expertise.

40. Section 3 of P.L.1999, c.224 (C.9:12A-4) is amended to read as follows:

C.9:12A-4 Definitions relative to homeless youth.

3. As used in P.L.1999, c.224 (C.9:12A-2 et seq.):

"Department" means the Department of Children and Families.

"Division" means the Division of Child Protection and Permanency in the Department of Children and Families.

"Homeless youth" means a person 21 years of age or younger who is without shelter where appropriate care and supervision are available.

41. Section 2 of P.L.1979, c.42 (C.18A:35-4.4) is amended to read as follows:

C.18A:35-4.4 Advisory Council.

2. The Commissioner of Education, in consultation with the Department of Children and Families, Division on Women, shall appoint an advisory council to assist and advise the State Board of Education in the development and implementation of educational programs for the prevention of sexual assault.

The advisory council shall consist of 15 members chosen from among the legal, law enforcement, medical, and educational communities, and shall also include representatives of community-based groups providing services and assistance to victims of sexual assault. Each shall be appointed for a 2-year term and shall serve without compensation.

42. Section 1 of P.L.2007, c.248 (C.18A:36-25.2) is amended to read as follows:

C.18A:36-25.2 Investigation, reporting of certain pupil absences, transfers.

1. a. If any child enrolled in a school district has an unexcused absence from school for five consecutive school days, the attendance officer of the district shall investigate the absence and notify the district superintendent of the absence. In the event the investigation leads the district superintendent to have reasonable cause to believe the child has been abused or neglected as defined in section 1 of P.L.1974, c.119 (C.9:6-8.21), the district superintendent shall then notify the Division of Child Protection and Permanency in the Department of Children and Families for its determination of whether the division is or has been involved with the child and whether action, as appropriate, is warranted.

b. When a child's parent, guardian, or other person having charge and control of the child notifies a school district that the child will be withdrawing from the district and transferring to another school district, the principal of the school from which the child is withdrawing shall request that the parent, guardian, or other person having charge and control of the child provide the principal with the name and location of the school district in which the child will subsequently be enrolled and the expected date of enrollment. The principal shall provide the information supplied by the parent, guardian, or other person having charge and control of the child to the district superintendent. Five school days following the expected date of enrollment, the superintendent of the district of last attendance shall contact

the school district in which the child is to be subsequently enrolled to determine if the child has enrolled in the district. If the child has not been so enrolled, the attendance officer of the transfer district shall investigate the failure to enroll and notify the superintendent of the transfer district of the failure to enroll. In the event the investigation leads the superintendent of the transfer district to have reasonable cause to believe the child has been abused or neglected as defined in section 1 of P.L.1974, c.119 (C.9:6-8.21), the superintendent of the transfer district shall then notify the Division of Child Protection and Permanency in the Department of Children and Families for its determination of whether the division is or has been involved with the child and whether action, as appropriate, is warranted. If the child has been so enrolled, the district of last attendance and the transfer district shall arrange for the transfer of the child's records in accordance with the provisions of section 1 of P.L.1986, c.160 (C.18A:36-19a) and subsection b. of section 4 of P.L.1995, c.395 (C.18A:36-25.1).

c. School district policies for the early detection of missing and abused children required pursuant to section 2 of P.L.1984, c.228 (C.18A:36-25) shall include provisions to implement the requirements of this section.

43. Section 1 of P.L.1997, c.362 (C.18A:40A-7.1) is amended to read as follows:

C.18A:40A-7.1 Confidentiality of certain information provided by pupil; exceptions.

1. a. Except as provided by section 3 of P.L.1971, c.437 (C.9:6-8.10), if a public or private elementary or secondary school pupil who is participating in a school-based drug and alcohol abuse counseling program provides information during the course of a counseling session in that program which indicates that the pupil's parent or guardian or other person residing in the pupil's household is dependent upon or illegally using a substance as that term is defined in section 2 of P.L.1987, c.387 (C.18A:40A-9), that information shall be kept confidential and may be disclosed only under the circumstances expressly authorized under subsection b. of this section.

b. The information provided by a pupil pursuant to subsection a. of this section may be disclosed:

(1) subject to the pupil's written consent, to another person or entity whom the pupil specifies in writing in the case of a secondary school pupil, or to a member of the pupil's immediate family or the appropriate school personnel in the case of an elementary school pupil;

(2) pursuant to a court order;

(3) to a person engaged in a bona fide research purpose, except that no names or other information identifying the pupil or the person with respect to whose substance abuse the information was provided, shall be made available to the researcher; or

(4) to the Division of Child Protection and Permanency or to a law enforcement agency, if the information would cause a person to reasonably suspect that the elementary or secondary school pupil or another child may be an abused or neglected child as the terms are used in R.S.9:6-1, or as the terms are defined in section 2 of P.L.1971, c.437 (C.9:6-8.9), or section 1 of P.L.1974, c.119 (C.9:6-8.21).

c. Any disclosure made pursuant to paragraph (1) or (2) of subsection b. of this section shall be limited to that information which is necessary to carry out the purpose of the disclosure, and the person or entity to whom the information is disclosed shall be prohibited from making any further disclosure of that information without the pupil's written consent. The disclosure shall be accompanied by a written statement advising the recipient that the information is being disclosed from records the confidentiality of which is protected by P.L.1997, c.362 (C.18A:40A-7.1 et seq.), and that this law prohibits any further disclosure of this information without the written consent of the person from whom the information originated. Nothing in P.L.1997, c.362 (C.18A:40A-7.1 et seq.) shall be construed as prohibiting the Division of Child Protection and Permanency or a law enforcement agency from using or disclosing the information in the course of conducting an investigation or prosecution. Nothing in P.L.1997, c.362 shall be construed as authorizing the violation of any federal law.

d. The prohibition on the disclosure of information provided by a pupil pursuant to subsection a. of this section shall apply whether the person to whom the information was provided believes that the person seeking the information already has it, has other means of obtaining it, is a law enforcement or other public official, has obtained a subpoena, or asserts any other justification for the disclosure of this information.

44. Section 3 of P.L.1985, c.427 (C.18A:54D-3) is amended to read as follows:

C.18A:54D-3 Duties of commissioners.

3. The Commissioners of Education and Labor and Workforce Development each shall:

- a. Identify the regulations, policies, programs, and procedures of their respective departments which relate to apprenticeship programs and other forms of preparation for technical trades;
- b. In consultation with the Division on Civil Rights in the Department of Law and Public Safety and the Division on Women in the Department of Children and Families, identify the factors which have produced low rates of minority and female participation in apprenticeship and other technical training programs;
- c. Take appropriate action to encourage a higher rate of minority and female participation in these programs;
- d. Advise the Legislature of any additional legislative action which would advance the purposes of P.L.1985, c.427 (C.18A:54D-1 et seq.).

45. Section 1 of P.L.2005, c.50 (C.26:2H-12.6b) is amended to read as follows:

C.26:2H-12.6b Definitions relative to emergency contraception for sexual assault victims.

1. As used in P.L.2005, c.50 (C.26:2H-12.6b et seq.):

"Commissioner" means the Commissioner of Health and Senior Services.

"Division on Women" means the Division on Women in the Department of Children and Families.

"Emergency care to sexual assault victims" means a medical examination, procedure, or service provided by an emergency health care facility to a sexual assault victim following an alleged sexual offense.

"Emergency contraception" means one or more prescription drugs to prevent pregnancy, used separately or in combination, administered to or self-administered by a patient within a medically recommended time after sexual intercourse, dispensed for that purpose in accordance with professional standards of practice and determined to be safe by the United States Food and Drug Administration.

"Emergency health care facility" means a general hospital or satellite emergency department licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.).

"Medically and factually accurate and objective" means verified or supported by the weight of research conducted in compliance with accepted scientific methods and standards, published in peer-reviewed journals and recognized as accurate and objective by leading professional organizations and agencies with relevant expertise in the field of obstetrics and gynecology.

"Sexual Assault Nurse Examiner program" means the Statewide Sexual Assault Nurse Examiner program in the Division of Criminal Justice in the Department of Law and Public Safety, established pursuant to P.L.2001, c.81 (C.52:4B-50 et seq.).

"Sexual assault victim" means a female who alleges or is alleged to have suffered a personal, physical, or psychological injury as a result of a sexual offense.

"Sexual offense" means sexual assault and aggravated sexual assault as set forth in N.J.S.2C:14-2, criminal sexual contact and aggravated criminal sexual contact as set forth in N.J.S.2C:14-3, fourth degree lewdness as set forth in subsection b. of N.J.S.2C:14-4 and endangering the welfare of a child by engaging in sexual conduct which would impair or debauch the morals of the child as set forth in N.J.S.2C:24-4.

46. Section 4 of P.L.2005, c.50 (C.26:2H-12.6e) is amended to read as follows:

C.26:2H-12.6e Written information relative to emergency contraception for sexual assault victims.

4. a. The commissioner, in collaboration with the Director of the Division on Women, the New Jersey Coalition Against Sexual Assault, and the Sexual Assault Nurse Examiner program, shall develop, prepare, and produce, in quantities sufficient to comply with the purposes of P.L.2005, c.50 (C.26:2H-12.6b et seq.), written information relating to: emergency contraception for the prevention of pregnancy in sexual assault victims; and sexually transmitted diseases.

b. The information shall be clearly written and readily comprehensible in a culturally competent manner, as the commissioner, in collaboration with the Division on Women, the New Jersey Coalition Against Sexual Assault, and the Sexual Assault Nurse Examiner program, deems necessary to inform a sexual assault victim. The information shall explain:

(1) the nature of emergency contraception, the effectiveness of emergency contraception in preventing pregnancy, where emergency contraception can be obtained, and treatment options; and

(2) the symptoms and effects of sexually transmitted diseases, and treatment options.

c. The information shall be distributed to all hospital and satellite emergency departments in the State for use in those facilities pursuant to P.L.2005, c.50.

47. Section 5 of P.L.2005, c.50 (C.26:2H-12.6f) is amended to read as follows:

C.26:2H-12.6f Responsibilities of commissioner concerning compliance.

5. a. The commissioner shall:

(1) investigate every complaint of noncompliance with the provisions of P.L.2005, c.50 (C.26:2H-12.6b et seq.) by an emergency health care facility, including the failure of a facility to provide the services required by P.L.2005, c.50;

(2) determine whether the complaint is substantiated, and if so, what action shall be taken by the emergency health care facility or commissioner to address the complaint;

(3) notify the Sexual Assault Nurse Examiner program of all substantiated complaints;

(4) compile the substantiated complaints;

(5) analyze the substantiated complaints, at least annually, to determine if there is any pattern of failure to provide services pursuant to P.L.2005, c.50; and

(6) determine, at least annually, whether an emergency health care facility is complying with the provisions of P.L.2005, c.50. The commissioner may utilize all means within his regulatory authority concerning health care facilities to verify a facility's compliance with P.L.2005, c.50.

b. If the commissioner determines that an emergency health care facility is not in compliance with the provisions of P.L.2005, c.50, the commissioner may assess such penalties and take other actions against the facility, as provided in P.L.1971, c.136 (C.26:2H-1 et seq.). Any such penalties assessed for noncompliance shall be paid to the Department of the Treasury and allocated, on a quarterly basis, to the Division on Women for supplemental funding for designated rape crisis centers.

c. The commissioner shall prepare an annual report, which shall be available to the public, summarizing the substantiated complaints, the actions taken by an emergency health care facility or the commissioner to address the complaints, and the commissioner's findings concerning any pattern of failure to provide services under, or noncompliance with, the provisions of P.L.2005, c.50.

48. Section 7 of P.L.2005, c.50 (C.26:2H-12.6g) is amended to read as follows:

C.26:2H-12.6g Rules, regulations.

7. Pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), the commissioner, in consultation with the Director of the Division on Women and the Sexual Assault Nurse Examiner program, shall adopt rules and regulations to effectuate the purposes of P.L.2005, c.50 (C.26:2H-12.6b et seq.); except that, notwithstanding any provision of P.L.1968, c.410 to the contrary, the commissioner may adopt, immediately upon filing with the Office of Administrative Law, such regulations as the commissioner deems necessary to implement the provisions of this act, which shall be effective for a period not to exceed six months and may thereafter be amended, adopted or readopted by the commissioner in accordance with the requirements of P.L.1968, c.410.

49. Section 4 of P.L.1997, c.191 (C.26:2R-4) is amended to read as follows:

C.26:2R-4 Establishment of Interagency Council on Osteoporosis.

4. There is established an Interagency Council on Osteoporosis in the department to advise the commissioner on the development and implementation of the program. The members of the council shall be appointed by the commissioner, and shall include the following: The Director of the Division of Epidemiology, Environmental and Occupational Health Services and the Assistant Commissioner of Senior Affairs in the department and the Director of the Division on Women in the Department of Children and Families, as ex officio members, and public members who are representatives of: persons with osteoporosis; women's health organizations; public health educators; experts in bone and osteoporosis research, prevention and treatment; and health care providers, including at least one radiologist, orthopedist, registered professional nurse, physical therapist, and nutritionist. The members of the council shall serve without compensation and shall not be reimbursed for any expenses incurred by them in the performance of their duties.

50. Section 5 of P.L.1999, c.72 (C.26:2V-5) is amended to read as follows:

C.26:2V-5 Advisory Council on Arthritis.

5. There is established an Advisory Council on Arthritis in the department to advise the commissioner on the development and implementation of the initiative. The council shall include: two members of the Senate, to be appointed by the President of the Senate, who shall not be of the

same political party; two members of the General Assembly, to be appointed by the Speaker of the General Assembly, who shall not be of the same political party; the Senior Assistant Commissioner, Public Health Prevention and Protection and the Assistant Commissioner, Division of Senior Services in the department; the Director of the Division on Women in the Department of Children and Families, and a member of the Inter-agency Council on Osteoporosis, as ex officio members; and 15 public members to be appointed by the commissioner who may include representatives of persons with arthritis, arthritis health organizations, public health educators, experts in arthritis research, prevention and treatment and health care strategic planning, and health care providers including physicians and nurses. The public members of the council shall serve without compensation and may be reimbursed for any expenses incurred by them in the performance of their duties.

Legislative members shall serve during their terms of office. Public members shall serve for a term of three years from the date of their appointment and until their successors are appointed and qualified; except that of the first appointments made: five shall be for a term of one year, five for two years, and five for three years.

Vacancies shall be filled in the same manner as the original appointments were made.

The advisory council shall organize as soon as may be practicable after the appointment of its members and shall select a chairman from among its members and a secretary who need not be a member of the council.

51. Section 3 of P.L.2007, c.134 (C.26:4-95.4) is amended to read as follows:

C.26:4-95.4 Public awareness campaign about HPV.

3. a. The Commissioner of Health and Senior Services, in consultation with the Commissioner of Education and the Director of the Division on Women in the Department of Children and Families, shall establish a public awareness campaign to inform the general public about the clinical significance and public health implications of the human papillomavirus, including its causes and the most effective means of prevention and treatment. The public awareness campaign shall be established in accordance with accepted public health practice and recommendations of the federal Centers for Disease Control and Prevention, and within the limits of available funds and any other resources available for the purposes thereof.

b. The commissioner shall prepare a patient information brochure regarding the human papillomavirus, including its causes and the most effective means of prevention and treatment. The department shall distribute the pamphlet, at no charge, to all pediatricians in the State. The department shall update the pamphlet as necessary, and shall make additional copies of the pamphlet available to other health care providers upon request.

52. Section 7 of P.L.2009, c.328 (C.30:4-8.8) is amended to read as follows:

C.30:4-8.8 Submission of complaints concerning female inmates.

7. The commissioner shall semiannually submit all inmate complaints submitted to the department concerning female inmates to the Director of the Division on Women in the Department of Children and Families.

53. Section 2 of P.L.1951, c.138 (C.30:4C-2) is amended to read as follows:

C.30:4C-2 Definitions.

2. For the purposes of P.L.1951, c.138 (C.30:4C-1 et seq.) the following words and terms shall, unless otherwise indicated, be deemed and taken to have the meanings herein given to them:

(a) The term "Division of Child Protection and Permanency" or "division," means the State agency for the care, custody, guardianship, maintenance, and protection of children, as more specifically described by the provisions of P.L.1951, c.138, and succeeding the agency heretofore variously designated by the laws of this State as the State Board of Child Welfare or the State Board of Children's Guardians.

(b) The word "child" includes stepchild and illegitimate child, and further means any person under the age of 18 years.

(c) The term "care" means cognizance of a child for the purpose of providing necessary welfare services, or maintenance, or both.

(d) The term "custody" means continuing responsibility for the person of a child, as established by a surrender and release of custody or consent to adoption, for the purpose of providing necessary welfare services, or maintenance, or both.

(e) The term "guardianship" means control over the person and property of a child as established by the order of a court of competent jurisdiction, and as more specifically defined by the provisions of P.L.1951, c.138. Guardianship by the Division of Child Protection and Permanency shall be

treated as guardianship by the Commissioner of Children and Families exercised on his behalf wholly by and in the name of the Division of Child Protection and Permanency, acting through the chief executive officer of the division or the chief executive's authorized representative. The exercise of guardianship by the division shall be at all times and in all respects subject to the supervision of the commissioner.

(f) The term "maintenance" means moneys expended by the Division of Child Protection and Permanency to procure board, lodging, clothing, medical, dental, and hospital care, or any other similar or specialized commodity or service furnished to, on behalf of, or for a child pursuant to the provisions of P.L.1951, c.138; maintenance also includes but is not limited to moneys expended for shelter, utilities, food, repairs, essential household equipment, and other expenditures to remedy situations of an emergent nature to permit, as far as practicable, children to continue to live with their families.

(g) The term "welfare services" means consultation, counseling, and referral to or utilization of available resources, for the purpose of determining and correcting or adjusting matters and circumstances which are endangering the welfare of a child, and for the purpose of promoting a child's proper development and adjustment in the family and the community.

(h) The term "resource family parent" means any person other than a natural or adoptive parent with whom a child in the care, custody, or guardianship of the Department of Children and Families is placed by the department, or with its approval, for care, and shall include any person with whom a child is placed by the division for the purpose of adoption until the adoption is finalized.

(i) The term "resource family home" means and includes private residences wherein any child in the care, custody, or guardianship of the Department of Children and Families may be placed by the department, or with its approval, for care, and shall include any private residence maintained by persons with whom any child is placed by the division for the purpose of adoption until the adoption is finalized.

(j) The singular includes the plural form.

(k) The masculine noun and pronoun include the feminine.

(l) The word "may" shall be construed to be permissive.

(m) The term "group home" means and includes any single family dwelling used in the placement of 12 children or less pursuant to law, recognized as a group home by the Department of Children and Families in accordance with rules and regulations adopted by the Commissioner of Children and Families; provided, however, that no group home shall contain more than 12 children.

(n) The term "youth facility" means a facility within this State used to house or provide services to children under P.L.1951, c.138, including but not limited to group homes, residential facilities, day care centers, and day treatment centers.

(o) The term "youth facility aid" means aid provided by the Division of Child Protection and Permanency to public, private, or voluntary agencies to purchase, construct, renovate, repair, upgrade, or otherwise improve a youth facility in consideration for an agreement for the agency to provide residential care, day treatment, or other youth services for children in need of such services.

(p) The term "day treatment center" means a facility used to provide counseling, supplemental educational services, therapy, and other related services to children for whom it has been determined that such services are necessary, but is not used to house these children in a residential setting.

(q) The term "residential facility" means a facility used to house and provide treatment and other related services on a 24-hour basis to children determined to be in need of such housing and services.

(r) The term "legally responsible person" means the natural or adoptive parent, or the spouse of a child receiving maintenance from or through the Division of Child Protection and Permanency.

(s) "Commissioner" means the Commissioner of Children and Families.

(t) "Department" means the Department of Children and Families.

54. Section 39 of P.L.1962, c.197 (C.30:4C-2.1) is amended to read as follows:

C.30:4C-2.1 Division of Child Protection and Permanency as continuation of former agencies.

39. Except as otherwise provided by P.L.1962, c.197, the Division of Child Protection and Permanency shall in all respects and for all purposes be deemed a continuation of the agency heretofore known as the State Board of Children's Guardians or the State Board of Child Welfare.

55. Section 3 of P.L.1951, c.138 (C.30:4C-3) is amended to read as follows:

C.30:4C-3 Duties of Division of Child Protection and Permanency.

3. The Division of Child Protection and Permanency, in administering the provisions of P.L.1951, c.138 (C.30:4C-1 et seq.), whereby the safety of children shall be of paramount concern, shall:

(a) provide care and custody for children eligible therefor in such manner that the children may, so far as practicable, continue to live in their own homes and family life be thereby preserved and strengthened;

(b) provide necessary welfare services as may be required by such children, so far as practicable, without assumption of custody;

(c) encourage the development of private and voluntary agencies qualified to provide welfare services for children to the end that through cooperative effort the need for such services may be limited or reduced; and

(d) for each child placed outside his home by the division, provide permanency through return of the child to the child's own home, if the child can be returned home without endangering the child's health or safety; through adoption, if family reunification is not possible; or through an alternative permanent placement, if termination of parental rights is not appropriate.

56. Section 1 of P.L.2003, c.40 (C.30:4C-3.7) is amended to read as follows:

C.30:4C-3.7 Photographing, fingerprinting of child under custody of the Division of Child Protection and Permanency.

1. a. The Division of Child Protection and Permanency in the Department of Children and Families shall provide for the photographing of each child under its custody no later than two months after the division assumes custody of the child. A child who is under the custody of the division on the effective date of P.L.2003, c.40 (C.30:4C-3.7 et seq.) shall be photographed for the purposes of P.L.2003, c.40 no later than one year after its effective date.

The division shall, in addition, provide for the fingerprinting of any child under its custody with respect to whom the division determines, in accordance with criteria as the Commissioner of Children and Families shall establish by regulation, that the availability of a fingerprint record would be appropriate; the fingerprints of any child with respect to whom such a determination is made shall be taken no later than two months after the division has made that determination.

b. The division shall update the photograph of each child taken pursuant to subsection a. of this section at least every two years. In addition, the division shall retain the fingerprint information and photograph of each child for whom such records are taken for at least one year after the date that the child is no longer under the custody of the division.

c. The division shall be entitled to receive the assistance of any other State department, division, or agency as it may deem necessary and may

receive the assistance of any county or municipal government agency, as may be available, in carrying out the provisions of P.L.2003, c.40.

57. Section 1 of P.L.1962, c.140 (C.30:4C-4.1) is amended to read as follows:

C.30:4C-4.1 Consent and approval of actions or proceedings.

1. Notwithstanding the provisions of any other law, no action or proceeding, including an application for a writ of habeas corpus, in any court which the Division of Child Protection and Permanency is authorized by law to commence or maintain shall be commenced or maintained by the division, without the consent and approval of the Commissioner of Children and Families, as hereinafter provided.

58. Section 2 of P.L.1962, c.140 (C.30:4C-4.2) is amended to read as follows:

C.30:4C-4.2 Consent, approval of commissioner.

2. In no case shall the Division of Child Protection and Permanency, defend against any action or proceeding or make or oppose any application for a writ of habeas corpus without the express consent and approval of the Commissioner of Children and Families.

59. Section 6 of P.L.1951, c.138 (C.30:4C-6) is amended to read as follows:

C.30:4C-6 Recipients of payments not deemed paupers; certain treatments permitted.

6. No person to whom or for whom payments for maintenance are made under P.L.1951, c.138 (C.30:4C-1 et seq.) shall be deemed to be or classified as a pauper by reason thereof.

The provisions of P.L.1951, c.138 shall not be construed to deny treatment by spiritual means or prayer, of any child, in accordance with the religious faith of the parent or parents of such child. The provisions of P.L.1951, c.138 shall not be construed to authorize or empower the Division of Child Protection and Permanency to compel a child to undergo medical or surgical treatment, if the child, or parent or guardian of the child, objects thereto in a signed statement upon the ground that the proposed action interferes with the free exercise of his religious principles.

60. Section 7 of P.L.1951, c.138 (C.30:4C-7) is amended to read as follows:

C.30:4C-7 Issuance of certain certificates free of charge.

7. All birth, death, and marriage certificates which may be required under the provisions of P.L.1951, c.138 (C.30:4C-1 et seq.), or under any rule or regulation issued by the Division of Child Protection and Permanency, shall be issued free of charge upon the order of the division.

61. Section 11 of P.L.1951, c.138 (C.30:4C-11) is amended to read as follows:

C.30:4C-11 Application for care and custody; verification, investigation.

11. Whenever it shall appear that any child within this State is of such circumstances that the child's safety or welfare will be endangered unless proper care or custody is provided, an application setting forth the facts in the case may be filed with the Division of Child Protection and Permanency by a parent or other relative of the child, by a person standing in loco parentis to the child, by a person or association or agency or public official having a special interest in the child or by the child himself, seeking that the division accept and provide care or custody of the child as the circumstances may require. The application shall be in writing, and shall contain a statement of the relationship to or special interest in the child which justifies the filing of the application. The provisions of this section shall be deemed to include an application on behalf of an unborn child when the prospective mother is within this State at the time of application for services.

Upon receipt of an application as provided in this section, the division shall verify the statements set forth in the application and shall investigate all the matters pertaining to the circumstances of the child. If upon such verification and investigation it shall appear (a) that the safety or welfare of the child will be endangered unless proper care or custody is provided; (b) that the needs of the child cannot properly be provided for by financial assistance as made available by the laws of this State; (c) that there is no person legally responsible for the support of the child whose identity and whereabouts are known and who is willing and able to provide for the care and support required by the child; and (d) that the child, if suffering from a mental or physical disability requiring institutional care, is not immediately admissible to any public institution providing care; then the division may accept and provide care or custody as the circumstances of the child may require.

62. Section 24 of P.L.1999, c.53 (C.30:4C-11.2) is amended to read as follows:

C.30:4C-11.2 Exceptions to requirement to make reasonable efforts to prevent placement of child.

24. In any case in which the Division of Child Protection and Permanency accepts a child in care or custody, including placement, the division shall not be required to provide reasonable efforts to prevent placement of the child if a court of competent jurisdiction has determined that both of the following criteria are met:

a. One of the following actions has occurred:

(1) the parent has subjected the child to aggravated circumstances of abuse, neglect, cruelty, or abandonment,

(2) the parent has been convicted of murder, aggravated manslaughter, or manslaughter of another child of the parent; aiding or abetting, attempting, conspiring, or soliciting to commit murder, aggravated manslaughter, or manslaughter of the child or another child of the parent; committing or attempting to commit an assault that resulted, or could have resulted, in the significant bodily injury to the child or another child of the parent; or committing a similarly serious criminal act which resulted, or could have resulted, in the death or significant bodily injury to the child or another child of the parent,

(3) the rights of the parent to another of the parent's children have been involuntarily terminated or

(4) removal of the child was required due to imminent danger to the child's life, safety or health; and

b. Efforts to prevent placement were not reasonable due to risk of harm to the child's health or safety.

When determining whether reasonable efforts are required to prevent placement, the health and safety of the child shall be of paramount concern to the court.

63. Section 25 of P.L.1999, c.53 (C.30:4C-11.3) is amended to read as follows:

C.30:4C-11.3 Exceptions to requirement to provide reasonable efforts to reunify child with parent.

25. In any case in which the Division of Child Protection and Permanency accepts a child in care or custody, including placement, the division shall not be required to provide reasonable efforts to reunify the child with a parent if a court of competent jurisdiction has determined that:

a. The parent has subjected the child to aggravated circumstances of abuse, neglect, cruelty, or abandonment;

b. The parent has been convicted of murder, aggravated manslaughter, or manslaughter of another child of the parent; aiding or abetting, attempting, conspiring, or soliciting to commit murder, aggravated manslaughter or manslaughter of the child or another child of the parent; committing or attempting to commit an assault that resulted, or could have resulted, in significant bodily injury to the child or another child of the parent; or committing a similarly serious criminal act which resulted, or could have resulted, in the death of or significant bodily injury to the child or another child of the parent; or

c. The rights of the parent to another of the parent's children have been involuntarily terminated.

When determining whether reasonable efforts are required to reunify the child with the parent, the health and safety of the child and the child's need for permanency shall be of paramount concern to the court.

This section shall not be construed to prohibit the division from providing reasonable efforts to reunify the family, if the division determines that family reunification is in the child's best interests.

A permanency plan for the child may be established at the same hearing at which the court determines that reasonable efforts are not required to reunify the child with the parent, if the hearing meets all of the requirements of a permanency hearing pursuant to section 50 of P.L.1999, c.53 (C.30:4C-61.2).

64. Section 28 of P.L.1999, c.53 (C.30:4C-12.2) is amended to read as follows:

C.30:4C-12.2 Resource family parent, relative, notice; right to be heard.

28. In any case in which the Division of Child Protection and Permanency accepts a child in its care or custody, the child's resource family parent or relative providing care for the child, as applicable, shall receive written notice of, and shall have a right to be heard at, any review or hearing held with respect to the child, but the resource family parent or relative shall not be made a party to the review or hearing solely on the basis of the notice and right to be heard.

65. Section 13 of P.L.1951, c.138 (C.30:4C-13) is amended to read as follows:

C.30:4C-13 Referral to legally responsible person or agency.

13. If in the course of verifying and investigating any applications or complaints, as provided for in sections 11 and 12 of P.L.1951, c.138

(C.30:4C-11 and C.30:4C-12), it shall appear that there is a person legally responsible for the support of the child who is willing and able to provide the care and support required by the child; or it shall appear that the needs of the child can properly be provided for by financial assistance as made available by the laws of this State; then, the Division of Child Protection and Permanency, before accepting and providing care or custody, shall first make proper referral of the matter to such legally responsible person, or to the agency charged with the administration of such financial assistance. If it shall appear that the welfare of the child is endangered, and that such condition can be eliminated or ameliorated by making available to or for the child any one or more of whatever specific services the Division of Child Protection and Permanency may be authorized, within the limits of legislative appropriations, to provide for all children in similar circumstances, the child shall be found eligible for care or custody, and the division shall proceed to furnish the services either by direct provision or, if the division so determines in the specific case, by purchasing services from any appropriate privately sponsored agency or institution which complies with whatever rules and regulations, established pursuant to P.L.1951, c.138 (C.30:4C-1 et seq.), may govern such arrangements for purchase of service.

66. Section 14 of P.L.1951, c.138 (C.30:4C-14) is amended to read as follows:

C.30:4C-14 Notice of action taken on application.

14. The Division of Child Protection and Permanency shall give due notice in writing to the applicant or complainant of the action taken on any application as provided in sections 11 and 12 of P.L.1951, c.138 (C.30:4C-11 and C.30:4C-12).

67. Section 31 of P.L.1999, c.53 (C.30:4C-15.3) is amended to read as follows:

C.30:4C-15.3 Exceptions from requirement to file petition seeking termination of parental rights.

31. The Division of Child Protection and Permanency shall not be required to file a petition seeking the termination of parental rights if:

- a. The child is being cared for by a relative and a permanent plan for the child can be achieved without termination of parental rights;
- b. The division has documented in the case plan, which shall be available for court review, a compelling reason for determining that filing the petition would not be in the best interests of the child; or

c. The division is required to provide reasonable efforts to reunify the family but the division has not provided to the family of the child, consistent with the time period in the case plan, such services as the division deems necessary for the safe return of the child to his home.

68. Section 4 of P.L.2000, c.58 (C.30:4C-15.7) is amended to read as follows:

C.30:4C-15.7 Designated sites for voluntary relinquishment of child; assumption of care, custody, control by Division of Child Protection and Permanency.

4. a. If a person voluntarily delivers a child who is or appears to be no more than 30 days old to, and leaves the child at a State, county or municipal police station and does not express an intent to return for the child, a State, county, or municipal police officer shall take the child to the emergency department of a licensed general hospital in this State and the hospital shall proceed as specified in subsection b. of this section.

b. If a person voluntarily delivers a child who is or appears to be no more than 30 days old to, and leaves the child at an emergency department of a licensed general hospital in this State and does not express an intent to return for the child, or, if a State, county, or municipal police officer brings a child to a licensed general hospital under the circumstances set forth in subsection a. of this section, the hospital shall:

- (1) take possession of the child without a court order;
- (2) take any action or provide any treatment necessary to protect the child's physical health and safety; and
- (3) no later than the first business day after taking possession of the child, notify the Division of Child Protection and Permanency in the Department of Children and Families that the hospital has taken possession of the child.

c. The Division of Child Protection and Permanency shall assume the care, custody, and control of the child immediately upon receipt of notice from a licensed general hospital pursuant to paragraph (3) of subsection b. of this section. The division shall commence a thorough search of all listings of missing children to ensure that the relinquished child has not been reported missing.

d. A child for whom the Division of Child Protection and Permanency assumes care, custody, and control pursuant to subsection c. of this section shall be treated as a child taken into possession without a court order.

e. It shall be an affirmative defense to prosecution for abandonment of a child that the parent voluntarily delivered the child to and left the child

at, or voluntarily arranged for another person to deliver the child to and leave the child at, a State, county, or municipal police station as provided in subsection a. of this section or the emergency department of a licensed general hospital in this State as provided in subsection b. of this section. Nothing in this subsection shall be construed to create a defense to any prosecution arising from any conduct other than the act of delivering the child as described herein, and this subsection specifically shall not constitute a defense to any prosecution arising from an act of abuse or neglect committed prior to the delivery of the child to a State, county or municipal police station as provided in subsection a. of this section or the emergency department of a licensed general hospital in this State as provided in subsection b. of this section.

f. A State, county, or municipal police officer and the governmental jurisdiction employing that officer or an employee of an emergency department of a licensed general hospital in this State and the hospital employing that person shall incur no civil or criminal liability for any good faith acts or omissions performed pursuant to this section.

g. Any person who voluntarily delivers a child who is or appears to be no more than 30 days old to a licensed general hospital or a police station in accordance with this section shall not be required to disclose that person's name or other identifying information or that of the child or the child's parent, if different from the person who delivers the child to the hospital or police station, or provide background or medical information about the child, but may voluntarily do so.

69. Section 17 of P.L.1951, c.138 (C.30:4C-17) is amended to read as follows:

C.30:4C-17 Petition, notice of hearing; interlocutory, order.

17. a. When a petition is filed under section 15 of P.L.1951, c.138 (C.30:4C-15), by a person, association, or agency other than the Division of Child Protection and Permanency, the court, in addition to causing service to be made upon the parent, parents, guardian, or person having custody and control of such child in accordance with rules of court, shall also cause a copy of the petition and notice of the time and place of hearing to be served on or mailed to the division at least 20 days before the time of such hearing.

b. When a petition is filed under section 15 of P.L.1951, c.138 (C.30:4C-15) by a person, association, or agency, the court shall cause a copy of the petition to be served upon the absent parent of the child. The notice shall inform the parent of the purpose of the action and of the right to

file written objections to the guardianship proceedings within 20 days after notice is given in the case of a resident, and 35 days in the case of a non-resident, of this State.

If personal service of the notice cannot be effected because the whereabouts of an absent parent are unknown, the court shall determine that an adequate effort has been made to serve notice upon the parent if the plaintiff has:

(1) Sent the notice by regular mail and by certified mail return receipt requested, to the last known address of the parent;

(2) Made a discreet inquiry among any known relatives, friends, and current or former employers of the parent;

(3) Unless otherwise restricted by law, made direct inquiries, using the party's name and last known or suspected address, to the local post office, the New Jersey Motor Vehicle Commission in, but not of, the Department of Transportation, the county welfare agency, the municipal police department, the Division of State Police in the Department of Law and Public Safety, the county probation office, the Department of Corrections, and any other social service or law enforcement agency known to have had contact with the parent, or the equivalent agencies in other states, territories, or countries.

Failure to receive a response to the inquiries made pursuant to paragraphs (2) and (3) of this subsection within 45 days shall constitute a negative response.

c. In any case in which the identity of an absent parent cannot be determined or the known parent of a child is unable or refuses to identify the other parent, and the court is unable from other information before the court to identify the other parent, service on that parent shall be waived by the court.

d. Whenever a petition is filed under section 15 of P.L.1951, c.138 (C.30:4C-15), and there shall be filed with such petition a statement or statements made under oath and attesting that the best interests of the child require that he be placed under the guardianship of the division immediately and pending final hearing, the court, at a special summary hearing held upon notice to the division, may make an interlocutory order committing such child to the division until a final hearing on the petition. Such interlocutory order shall have the same force and effect as an order of commitment provided for in section 20 of P.L.1951, c.138 (C.30:4C-20).

70. Section 18 of P.L.1951, c.138 (C.30:4C-18) is amended to read as follows:

C.30:4C-18 Verification of petition; investigation; report of findings.

18. Immediately upon receipt of the copy of a petition served on or mailed to the Division of Child Protection and Permanency as provided by section 17 of P.L.1951, c.138 (C.30:4C-17), the division shall verify such petition and investigate all the facts pertaining to the eligibility of the child for commitment, and prior to the day set for hearing shall file with the court a report of its findings. The report shall show such facts as will assist the court in making a decision in the matter.

71. Section 20 of P.L.1951, c.138 (C.30:4C-20) is amended to read as follows:

C.30:4C-20 Order terminating parental rights; committing child to guardianship.

20. If upon the completion of the hearing the court is satisfied that the best interests of the child require that the child be placed under proper guardianship, the court shall make an order terminating parental rights and committing the child to the guardianship and control of the Division of Child Protection and Permanency, and the child shall thereupon become the legal ward of the division, which shall be the legal guardian of the child for all purposes, including the placement of the child for adoption.

If the court shall have made an interlocutory order as provided in section 17 of P.L.1951, c.138 (C.30:4C-17), but at the final hearing a further order of commitment shall not be made as provided in this section, the Division of Child Protection and Permanency shall return the child forthwith to the parent or parents, guardian, or person having had custody of the child immediately prior to the filing of the petition; provided, however, that if the return does not ensure the safety of the child or if the parent or parents, guardian, or person having had custody cannot be found or, for other reason satisfactory to the court, is unable to accept the child, the division, upon order of the court, may place the child with such other person or persons who, at the time of final hearing, expressed willingness to accept the child, but the order shall in no wise be construed as a grant of custody or guardianship. In all such cases the interlocutory order shall continue in full force and effect until the division shall have made disposition of the child as provided herein or as otherwise provided by law, but in no case for a period longer than 30 days after the final hearing.

72. Section 21 of P.L.1951, c.138 (C.30:4C-21) is amended to read as follows:

C.30:4C-21 Guardianship order not to be restrictive.

21. The order of the court committing a child to the guardianship of the Division of Child Protection and Permanency, shall in no wise be restrictive of the duties, powers, and authority of the division in the care, custody, placement, welfare, and exclusive guardianship of the child as provided in P.L.1951, c.138 (C.30:4C-1 et seq.), and the division shall be removed as the guardian only by a court of competent jurisdiction upon charges preferred and upon good cause shown after an opportunity to be heard.

73. Section 23 of P.L.1951, c.138 (C.30:4C-23) is amended to read as follows:

C.30:4C-23 Voluntary surrenders, releases of custody, consents to adoption.

23. In addition to the methods otherwise provided in this article for establishing guardianship by the Division of Child Protection and Permanency, and when necessary to carry out the provisions of P.L.1951, c.138 (C.30:4C-1 et seq.), the Division of Child Protection and Permanency, after due investigation and consideration, may, in cases where it would be to the permanent advantage of the child, take voluntary surrenders and releases of custody and consents to adoption from the parent, parents, guardians, or other persons or agencies having the right or authority to give such surrenders, releases, or consents. Such surrenders, releases, or consents, when properly acknowledged before a person authorized to take acknowledgments of proofs in the State of New Jersey, shall be valid and binding irrespective of the age of the person giving the same, and shall be irrevocable except at the discretion of the Division of Child Protection and Permanency or upon order of a court of competent jurisdiction.

74. Section 24 of P.L.1951, c.138 (C.30:4C-24) is amended to read as follows:

C.30:4C-24 Application for care or custody; complaint; petition.

24. Whenever the director of welfare of any county or municipality in this State shall be called upon to serve any child whose needs cannot properly be provided for by financial assistance as made available by the laws of this State, the director shall, within 24 hours thereafter, give written notice thereof to the Division of Child Protection and Permanency, and shall file an application for care or custody, as provided in section 11 of P.L.1951, c.138 (C.30:4C-11), or shall file a complaint as provided in section 12 of P.L.1951, c.138 (C.30:4C-12), or shall file a petition as provided in section 15 of P.L.1951, c.138 (C.30:4C-15), as the situation of the child may require. The

notice shall contain all available information concerning the child and the child's circumstances, which will enable the Division of Child Protection and Permanency to take proper action. If the immediate needs of the child so require, the director shall provide for the child's care in a suitable place, approved with reasonable promptness for that purpose by the division, paying therefor as a charge against county or municipal funds until such time as the child has been found eligible for care, custody, or guardianship in accordance with the provisions of P.L.1951, c.138 (C.30:4C-1 et seq.).

75. Section 25 of P.L.1951, c.138 (C.30:4C-25) is amended to read as follows:

C.30:4C-25 Agents of Division of Child Protection and Permanency to visit children.

25. The Division of Child Protection and Permanency, by its agent or agents, shall regularly visit all children under its care, custody, or guardianship under the provisions of P.L.1951, c.138 (C.30:4C-1 et seq.) in order to assure the maximum benefit from such services.

76. Section 3 of P.L.2010, c.69 (C.30:4C-26b) is amended to read as follows:

C.30:4C-26b Child in resource family home, determination of school placement.

3. a. Whenever the Division of Child Protection and Permanency in the Department of Children and Families places any child in a resource family home, including a change in a placement following the initial placement, there shall be a presumption that the child shall remain in the school currently attended by the child and the child shall remain in that school, pending a best interest determination as set forth in subsection c. of this section, unless the division determines that the circumstances provided in subsection b. of this section are present.

b. If the division determines that remaining in the present school is not in the best interest of the child upon consideration of the best interest factors listed in subsection f. of this section, and would present significant safety concerns or otherwise be a significant and immediate detriment to the child, the child may be immediately enrolled in the school district in which the resource family home is located. If the division enrolls the child in the school district in which the resource family home is located, pursuant to this subsection, the division shall, within two business days of taking such action, provide notice to the child's law guardian and a parent or legal guardian, of the new school placement and the basis for such action. If the

division determines there exists a credible safety issue for the child if the location of the school in the resource family's district is disclosed to the parent or legal guardian, the division shall not include the location of that school or other information about the identity of the school in the notice to the parent or legal guardian.

c. Except as provided in subsection b. of this section, within five business days of placement in a resource family home, the division shall make a determination, upon consideration of the best interest factors listed in subsection f. of this section, whether the presumption that the child continue to attend the school that the child currently attends is outweighed by the best interest factors supporting placement in the school district in which the resource family home is located.

In making that determination, the division shall make reasonable efforts to consult with a parent or guardian of the child, the child, the child's law guardian, a representative from the school the child attended at the time of removal, and any school district under consideration for placement.

d. If the division's determination, pursuant to subsection c. of this section, is that it is in the best interest of the child to enroll the child in the school district in which the resource family home is located, the determination shall remain preliminary pending the completion of the requirements of this subsection. If the division's determination is consistent with the presumption established pursuant to subsection a. of this section, the determination shall be deemed conclusive at the time the determination is made.

(1) The division shall immediately transmit a written notice to the child's law guardian and a parent or legal guardian of the child: (a) advising of the preliminary determination; (b) providing the basis for the preliminary determination; and (c) that the preliminary determination shall be deemed conclusive if the division does not receive notice that an application pursuant to this subsection has been made with the court by the date indicated on the notice, which date shall be five business days from the date the notice is transmitted by the division.

The child shall remain enrolled in his current school at least until the time allotted to seek a court review of the preliminary determination is exhausted.

(2) Any party may make an application with the court seeking a review of whether the division's preliminary determination is in the best interest of the child upon consideration of the best interest factors listed in subsection f. of this section within the time allotted by the division as specified in the division's notice, which date shall be five business days from the date the notice is transmitted by the division, unless the child's law guardian, on behalf of the

child, and a parent or legal guardian of the child agrees, in writing, to waive the opportunity for a court review of the preliminary determination pursuant to this subsection, in which case the determination becomes conclusive.

Any party who makes an application for court review of the preliminary determination pursuant to this subsection shall provide simultaneous notice to the division and all other parties involved in the division's complaint for custody and guardianship. The court shall hear and decide such application in an expedited manner. In any such proceedings, the division shall bear the burden of proof, based on a preponderance of the evidence, that its determination to enroll the child in the school district in which the resource family home is located is in the best interest of the child.

If a party makes an application for court review of the division's preliminary determination pursuant to this subsection, the child shall continue to attend his current school while the court hears and decides the application.

(3) If the division does not receive timely notice pursuant to paragraph (2) of this subsection that an application has been made for court review within five business days of the transmittal date of the notice of the preliminary determination, the preliminary determination shall be deemed conclusive and the division shall implement its determination as provided in subsection g. of this section.

e. (1) At any time during placement of a child in a resource family home, the court may, upon application by any party to the division's complaint for custody or guardianship, review the child's school placement upon consideration of the best interest factors listed in subsection f. of this section, and make appropriate orders regarding school placement.

(2) At any time during placement in a resource family home, the division may reconsider the child's school placement and make a new determination in accordance with subsection b. or c. and d. of this section, upon consideration of the best interest factors listed in subsection f. of this section.

f. The factors the division and the court shall consider in making a best interest determination, as provided in this section, shall include, but not be limited to:

- (1) safety considerations;
- (2) the proximity of the resource family home to the child's present school;
- (3) the age and grade level of the child as it relates to the other best interest factors listed in this subsection;
- (4) the needs of the child, including social adjustment and wellbeing;
- (5) the child's preference;

- (6) the child's performance, continuity of education, and engagement in the school the child presently attends;
- (7) the child's special education programming if the child is classified;
- (8) the point of time in the school year;
- (9) the child's permanency goal and the likelihood of reunification;
- (10) the anticipated duration of the current placement; and
- (11) such other factors as provided by regulation of the Commissioner of Children and Families.

g. At the time a determination becomes conclusive or upon any subsequent decision by the court, the child shall either continue to be enrolled in his current school or shall be immediately enrolled in the new school district, and the mandated student record shall be provided to the new school district in accordance with applicable regulations of the State Board of Education.

h. The division shall provide transportation for the child to attend school during the time that a determination is being made or while a court review is pending as to where the child will attend school and for the subsequent five school days. At such time as a determination is made by the division or a decision is rendered by the court, the division shall immediately notify the school district where the child is currently attending school, the school district of residence, and the school district where the resource family home is located, as applicable.

The district of residence shall be responsible for transportation for the child to attend school, within five days of being notified by the division where the child will attend school.

i. Nothing in this section shall be construed to require any public entity to fund students placed in nonpublic schools by their parents or guardians.

j. Notwithstanding the provisions of this section, the division shall not be required to identify the school where the child is or will be enrolled to a parent or legal guardian, if the release of such information would pose a risk to the safety of the child.

77. Section 1 of P.L.1962, c.137 (C.30:4C-26.1) is amended to read as follows:

C.30:4C-26.1 "Resource family home" defined.

1. As used in P.L.1962, c.137 (C.30:4C-26.1 et seq.) "resource family home" means and includes private residences wherein any child in the care, custody, or guardianship of the Department of Children and Families may be placed by the department, or with its approval, for care, and shall include

any private residence maintained by persons with whom any child is placed by the Division of Child Protection and Permanency for the purpose of adoption until the adoption is finalized.

78. Section 2 of P.L.1962, c.137 (C.30:4C-26.2) is amended to read as follows:

C.30:4C-26.2 Child care shelters; establishment, maintenance.

2. The Division of Child Protection and Permanency, shall establish and maintain, within the limits of available appropriations, child care shelters in numbers and at locations throughout the State as the Commissioner of Children and Families shall deem to be necessary.

79. Section 3 of P.L.1962, c.137 (C.30:4C-26.3) is amended to read as follows:

C.30:4C-26.3 Shelters for care, supervision of children.

3. The shelters shall be equipped and used for the temporary care and supervision of children who are placed in the care, custody, or guardianship of the Division of Child Protection and Permanency, during the interim between such placement and placement in a suitable resource family home. The shelters shall be properly staffed to provide for child care and supervision and shall contain the necessary facilities for both physical and psychological examinations of children.

80. Section 1 of P.L.1962, c.136 (C.30:4C-26.4) is amended to read as follows:

C.30:4C-26.4 "Resource family parent" defined.

1. As used in P.L.1962, c.136 (C.30:4C-26.4 et seq.) "resource family parent" shall mean any person with whom a child in the care, custody, or guardianship of the Department of Children and Families is placed by the department, or with its approval, for care and shall include any person with whom a child is placed by the Division of Child Protection and Permanency for the purpose of adoption until the adoption is finalized.

81. Section 2 of P.L.1962, c.136 (C.30:4C-26.5) is amended to read as follows:

C.30:4C-26.5 Adoption of child by resource family parent.

2. Notwithstanding the provisions of any other law or any rule or regulation of the Division of Child Protection and Permanency, no agreement entered into between the division and any resource family parent for

the care of any child in the care, custody, or guardianship of the division shall contain any provision prohibiting the adoption of any child by the resource family parent.

82. Section 1 of P.L.1962, c.139 (C.30:4C-26.6) is amended to read as follows:

C.30:4C-26.6 "Resource family parent" defined.

1. As used in P.L.1962, c.139 (C.30:4C-26.6 et seq.) "resource family parent" shall mean any person with whom a child in the care, custody, or guardianship of the Department of Children and Families is placed by the department, or with its approval, for care and shall include any person with whom a child is placed by the Division of Child Protection and Permanency for the purpose of adoption until the adoption is finalized.

83. Section 2 of P.L.1962, c.139 (C.30:4C-26.7) is amended to read as follows:

C.30:4C-26.7 Application for adoption of child by resource family parent.

2. Any person, who, as a resource family parent, has cared for a child continuously for a period of 15 months or more, may apply to the Division of Child Protection and Permanency, for the placement of the child with them for the purpose of adoption and if the child is eligible for adoption, the division shall give preference and first consideration to their application over all other applications for adoption placements.

84. Section 1 of P.L.1985, c.396 (C.30:4C-26.8) is amended to read as follows:

C.30:4C-26.8 Adoptive, resource family parent, investigation.

1. a. A person, in addition to meeting other requirements as may be established by the Department of Children and Families, shall become a resource family parent or eligible to adopt a child only upon the completion of an investigation to ascertain if there is a State or federal record of criminal history for the prospective adoptive or resource family parent or any other adult residing in the prospective parent's home. The investigation shall be conducted by the Division of State Police in the Department of Law and Public Safety and shall include an examination of its own files and the obtaining of a similar examination by federal authorities.

b. If the prospective resource family parent or any adult residing in the prospective parent's home has a record of criminal history, the Department of Children and Families shall review the record with respect to the

type and date of the criminal offense and make a determination as to the suitability of the person to become a resource family parent or the suitability of placing a child in that person's home, as the case may be.

c. For the purposes of this section, a conviction for one of the offenses enumerated in subsection d. or e. of this section has occurred if the person has been convicted under the laws of this State or any other state or jurisdiction for an offense that is substantially equivalent to the offenses enumerated in these subsections.

d. A person shall be disqualified from being a resource family parent or shall not be eligible to adopt a child if that person or any adult residing in that person's household ever committed a crime which resulted in a conviction for:

(1) a crime against a child, including endangering the welfare of a child and child pornography pursuant to N.J.S.2C:24-4; or child abuse, neglect, or abandonment pursuant to R.S.9:6-3;

(2) murder pursuant to N.J.S.2C:11-3 or manslaughter pursuant to N.J.S.2C:11-4;

(3) aggravated assault which would constitute a crime of the second or third degree pursuant to subsection b. of N.J.S.2C:12-1;

(4) stalking pursuant to P.L.1992, c.209 (C.2C:12-10);

(5) kidnapping and related offenses including criminal restraint; false imprisonment; interference with custody; criminal coercion; or enticing a child into a motor vehicle, structure, or isolated area pursuant to N.J.S.2C:13-1 through 2C:13-6;

(6) sexual assault, criminal sexual contact, or lewdness pursuant to N.J.S.2C:14-2 through N.J.S.2C:14-4;

(7) robbery which would constitute a crime of the first degree pursuant to N.J.S.2C:15-1;

(8) burglary which would constitute a crime of the second degree pursuant to N.J.S.2C:18-2;

(9) domestic violence pursuant to P.L.1991, c.261 (C.2C:25-17 et seq.);

(10) endangering the welfare of an incompetent person pursuant to N.J.S.2C:24-7 or endangering the welfare of an elderly or disabled person pursuant to N.J.S.2C:24-8;

(11) terrorist threats pursuant to N.J.S.2C:12-3;

(12) arson pursuant to N.J.S.2C:17-1, or causing or risking widespread injury or damage which would constitute a crime of the second degree pursuant to N.J.S.2C:17-2; or

(13) an attempt or conspiracy to commit an offense listed in paragraphs (1) through (12) of this subsection.

e. A person shall be disqualified from being a resource family parent if that person or any adult residing in that person's household was convicted of one of the following crimes and the date of release from confinement occurred during the preceding five years:

- (1) simple assault pursuant to subsection a. of N.J.S.2C:12-1;
- (2) aggravated assault which would constitute a crime of the fourth degree pursuant to subsection b. of N.J.S.2C:12-1;
- (3) a drug-related crime pursuant to P.L.1987, c.106 (C.2C:35-1 et seq.);
- (4) robbery which would constitute a crime of the second degree pursuant to N.J.S.2C:15-1;
- (5) burglary which would constitute a crime of the third degree pursuant to N.J.S.2C:18-2; or
- (6) an attempt or conspiracy to commit an offense listed in paragraphs (1) through (5) of this subsection.

For the purposes of this subsection, the "date of release from confinement" means the date of termination of court-ordered supervision through probation, parole, or residence in a correctional facility, whichever date occurs last.

For purposes of this section, "resource family parent" means any person with whom a child in the care, custody, or guardianship of the Department of Children and Families is placed by the department, or with its approval, for care and shall include any person with whom a child is placed by the Division of Child Protection and Permanency for the purpose of adoption until the adoption is finalized.

85. Section 1 of P.L.1989, c.21 (C.30:4C-26.9) is amended to read as follows:

C.30:4C-26.9 Provisional approval for resource family parent; definition.

1. The Department of Children and Families may grant approval to a prospective resource family parent for a period not to exceed six months, upon completion of the State portion of the criminal history record investigation required pursuant to P.L.1985, c.396 (C.30:4C-26.8), pending completion and review of the federal portion of the criminal history record investigation required pursuant to that act, if: (1) the State portion of the criminal history record investigation indicates no information which would disqualify the person, (2) the prospective resource family parent and any adult residing in the prospective resource family parent's home submit a sworn statement to the Department of Children and Families attesting that the person does not have a record of criminal history which would disqualify the person, and (3)

there is substantial compliance with department standards for resource family homes indicating there is no risk to a child's health or safety.

For purposes of this section, "resource family parent" means any person with whom a child in the care, custody, or guardianship of the Department of Children and Families is placed by the department, or with its approval, for care and shall include any person with whom a child is placed by the Division of Child Protection and Permanency for the purpose of adoption until the adoption is finalized.

86. Section 1 of P.L.2010, c.98 (C.30:4C-26.20) is amended to read as follows:

C.30:4C-26.20 Minor and child to remain together as family unit.

1. a. Notwithstanding any other provision of law to the contrary, if a minor is placed in a resource family home, group home, or institution, pursuant to section 26 of P.L.1951, c.138 (C.30:4C-26), and is pregnant, becomes pregnant, or gives birth to a child while in the placement, the Division of Child Protection and Permanency in the Department of Children and Families shall provide or arrange for the provision of services to ensure that the minor and her child remain together as a family unit.

b. A Division of Child Protection and Permanency caseworker shall develop and implement a permanency plan for the minor and her child that will enable the minor to provide a safe and stable home for her child, and shall not limit the minor's legal right to make decisions regarding the care, custody, and supervision of her child. The plan shall address, but shall not be limited to, the following areas:

- (1) counseling and advocacy services;
- (2) information about and referral to physicians, certified nurse midwives, and other health care professionals providing prenatal care;
- (3) medical care, including hospital, maternity, postnatal, and preventive pediatric services; and
- (4) maintenance services, including, clothing, food, housing, and financial assistance.

c. If, as a result of the minor's pregnancy or birth of her child, the minor's current placement is no longer available, is inappropriate, or could result in harm to the minor or her child, the caseworker shall locate and place the minor and her child together in a substitute living arrangement.

d. The Division of Child Protection and Permanency shall not be required to arrange or provide for services to the minor and her child pursuant to subsection a. of this section, if the division has reasonable cause to be-

lieve that the minor's child has been subjected to child abuse or acts of child abuse or neglect by the minor.

e. For purposes of this section, "minor" means a person 21 years of age or younger who is under the care and supervision or custody of the Division of Child Protection and Permanency pursuant to section 12 of P.L.1951, c.138 (C.30:4C-12).

87. Section 1 of P.L.1962, c.135 (C.30:4C-27.1) is amended to read as follows:

C.30:4C-27.1 "Resource family parent" defined.

1. As used in P.L.1962, c.135 (C.30:4C-27.1 et seq.) "resource family parent" shall mean any person with whom a child in the care, custody, or guardianship of the Department of Children and Families is placed by the department, or with its approval, for care and shall include any person with whom a child is placed by the Division of Child Protection and Permanency for the purpose of adoption until the adoption is finalized.

88. Section 2 of P.L.1962, c.135 (C.30:4C-27.2) is amended to read as follows:

C.30:4C-27.2 Discontinuance of clothing distribution centers; clothing allowance.

2. Notwithstanding the provision of any other law, the maintenance of a clothing warehouse and distribution center for the distribution of clothing to children in the care, custody, or guardianship of the Division of Child Protection and Permanency, shall be discontinued and in lieu thereof the division shall increase the monthly allowance payable to any resource family parent caring for any of the children in a sufficient amount to enable the resource family parent to purchase the necessary clothing items required by the children from the local merchants of the locality wherein the resource family parent resides.

89. Section 3 of P.L.2001, c.419 (C.30:4C-27.5) is amended to read as follows:

C.30:4C-27.5 Definitions relative to resource family care.

3. As used in P.L.2001, c.419 (C.30:4C-27.3 et seq.):

"Child" means a person who: is either under the age of 18 or meets the criteria set forth in subsection f. of section 2 of P.L.1972, c.81 (C.9:17B-2); and is under the care or custody of the division or another public or private agency authorized to place children in New Jersey.

"Commissioner" means the Commissioner of Children and Families.

"Department" means the Department of Children and Families.

"Division" means the Division of Child Protection and Permanency in the Department of Children and Families.

"Resource family home" or "home" means a private residence, other than a children's group home or shelter home, in which board, lodging, care, and temporary out-of-home placement services are provided by a resource family parent on a 24-hour basis to a child under the auspices of the division or any public or private agency authorized to place children in New Jersey.

"Resource family parent" means a person who has been licensed pursuant to P.L.2001, c.419 to provide resource family care to five or fewer children, including a child who has been placed by the division with the person for the purpose of adoption, except that the department may license a resource family parent to provide care for more than five children, if necessary, to keep sibling groups intact or to serve the best interests of the children in the home.

"License" means a document issued by the department to a person who meets the requirements of P.L.2001, c.419 to provide resource family care to children in the person's home.

90. Section 1 of P.L.2003, c.186 (C.30:4C-27.16) is amended to read as follows:

C.30:4C-27.16 Definitions relative to background checks for residential child care staff.

1. As used in sections 1 through 6 and 8 through 11 of P.L.2003, c.186 (C.30:4C-27.16 et al.):

"Department" means the Department of Children and Families.

"Division" means the Division of Child Protection and Permanency in the Department of Children and Families.

"Residential child care facility" or "facility" means any public or private establishment subject to the regulatory authority of the department that provides room, board, care, shelter, or treatment services for children on a 24-hour-a-day basis. The term shall include: residential facilities operated by or under contract or agreement with the division to serve 13 or more children with emotional or behavioral problems as defined pursuant to section 2 of P.L.1951, c.138 (C.30:4C-2); State-operated children's psychiatric facilities providing inpatient treatment; group homes, treatment homes, teaching family homes, alternative care homes, and supervised transitional

living homes operated by or under contract or agreement with the division to serve 12 or fewer children with emotional or behavioral problems as defined pursuant to N.J.A.C.10:128-1.2; and shelter care facilities and homes, including shelters serving children in juvenile-family crisis and in need of temporary shelter care, as defined pursuant to section 3 of P.L.1982, c.77 (C.2A:4A-22).

"Staff member" means an individual 18 years of age or older who is an administrator of, employed by, or works in a facility on a regularly scheduled basis during the facility's operating hours, including full-time, part-time, voluntary, contract, consulting, and substitute staff, whether compensated or not.

91. Section 28 of P.L.1951, c.138 (C.30:4C-28) is amended to read as follows:

C.30:4C-28 Discharge for care, custody, or guardianship.

28. The Division of Child Protection and Permanency may at any time discharge from its care, custody, or guardianship any child, if in the opinion of the division the best interests of the child will be promoted thereby.

92. Section 29 of P.L.1951, c.138 (C.30:4C-29) is amended to read as follows:

C.30:4C-29 Payments for maintenance.

29. Subject to the provisions of section 30 of P.L.1951, c.138 (C.30:4C-30), payments for maintenance shall be made by the Division of Child Protection and Permanency.

The Division of Child Protection and Permanency is hereby empowered to receive from the State Treasurer and from the county treasurer of each county such sums as shall be appropriated for the purposes of P.L.1951, c.138 (C.30:4C-1 et seq.), and shall cause such sums to be set up in a special account or accounts subject to disbursement by the Division of Child Protection and Permanency.

93. Section 1 of P.L.1962, c.142 (C.30:4C-29.1) is amended to read as follows:

C.30:4C-29.1 Liability for maintenance costs.

1. a. In any case in which the Department of Children and Families, through the Division of Child Protection and Permanency, is providing care or custody for any child when the child is in a resource family home, any legally responsible person of the child, if of sufficient financial ability, is

liable for the full costs of maintenance of the child incurred by the division. If the legally responsible person is of insufficient financial ability, the person is liable in an amount which a court of competent jurisdiction directs according to a scheduled rate approved by the division. Nothing contained herein shall prevent the legally responsible person from voluntarily executing an agreement for payment to the division for the costs of maintenance of the child receiving care or custody when the child is in a resource family home.

b. The division shall have a lien against the property of the legally responsible person in an amount equal to the amount to be paid, which lien shall have priority over all unrecorded encumbrances.

c. If the legally responsible person fails to reimburse the department, through the division, for the costs of maintenance of a child incurred by the division when the child is in a resource family home, a court of competent jurisdiction, upon the complaint of the Commissioner of Children and Families, may summon the legally responsible person and other witnesses, and may order the legally responsible person to pay an amount to the department, according to a scheduled rate approved by the division.

d. In any case in which the department, through the division, has agreed to provide youth facilities aid to a public, private, or voluntary agency pursuant to P.L.1962, c.142 (C.30:4C-29.1 et seq.), the division shall have a lien against the property of any person, persons, or agency so contracting, in an amount equal to the amount or amounts so contracted to be paid, which lien shall have priority over all unrecorded encumbrances. The lien shall be reduced for each year of service provided by the agency at a rate to be negotiated by the division and the agency, but in no case more than 20% a year; provided, however, that annual reductions shall not exceed \$10,000.

94. Section 32 of P.L.1951, c.138 (C.30:4C-32) is amended to read as follows:

C.30:4C-32 Burial of child receiving care; expenses.

32. Whenever a child receiving care, custody, or guardianship as provided by P.L.1951, c.138 (C.30:4C-1 et seq.) has died, and an investigation by the Division of Child Protection and Permanency discloses that there are insufficient funds from any other source to provide proper burial, the division shall authorize the expenditure of an amount reasonably necessary to provide proper burial for the child, and the amount shall be a proper charge against State funds, within the limits of available appropriations, in the same manner and extent as expenditures for maintenance.

The amount reasonably necessary to provide proper burial shall be determined by the average cost for a proper burial and funeral charged by funeral directors in the locality in which the child is buried.

95. Section 33 of P.L.1951, c.138 (C.30:4C-33) is amended to read as follows:

C.30:4C-33 Compromise and settlement of claims.

33. The Division of Child Protection and Permanency may compromise and settle any claim due or which may become due the division for reimbursement of moneys paid to any individual or organization for maintenance of a child. A memorandum of the compromise and settlement shall be entered in the official records of the division.

96. Section 34 of P.L.1951, c.138 (C.30:4C-34) is amended to read as follows:

C.30:4C-34 Recovery, reimbursement of moneys.

34. Whenever the Division of Child Protection and Permanency shall recover or receive reimbursement of any moneys paid to any individual or organization for the maintenance of a child, the moneys so recovered or received shall be credited to the State treasury or to the Federal Government in the same proportion as they were charged in the original instance. The division is hereby authorized to take all necessary and proper action under the laws of this State for the recovery of any moneys wrongfully received or retained by any individual or organization, or for the recovery from the person or persons responsible under the laws of this State for the support of the child the value of maintenance furnished to the child.

97. Section 35 of P.L.1951, c.138 (C.30:4C-35) is amended to read as follows:

C.30:4C-35 Contributions.

35. The Division of Child Protection and Permanency is authorized to retain any voluntary contributions of money heretofore received by it, and to receive future contributions. All contributions, whether already received or hereafter received, shall be kept in a separate fund, and shall be used only upon order of the division for the purposes for which the contributions were made, and the funds shall be in the custody and control of the division; provided, however, that any contribution made to the division, the original purpose of which is no longer practicable or possible of achieve-

ment, may be used by the division, at its discretion, for the general benefit and welfare of children under its supervision.

98. Section 36 of P.L.1951, c.138 (C.30:4C-36) is amended to read as follows:

C.30:4C-36 Petty cash fund.

36. On application in writing by the Division of Child Protection and Permanency, the State Treasurer on warrant of the Director of the Division of Budget and Accounting may pay to the division from its annual appropriation such amount not exceeding \$5,000 as may be necessary to establish a petty cash fund for the payment of traveling expenses and other current expenses as require a prompt cash outlay.

The division shall file an account with vouchers attached showing all expenditures from its petty cash fund and on receipt of the amount thereof from the State Treasurer shall reimburse the fund. Any questions with reference to the allowance, expenditure, accounting, and reimbursement of petty cash moneys shall be finally determined by ruling of the Director of the Division of Budget and Accounting.

99. Section 37 of P.L.1951, c.138 (C.30:4C-37) is amended to read as follows:

C.30:4C-37 Checks, drafts, warrants, procedure if uncashed.

37. Whenever the Division of Child Protection and Permanency shall have issued, or shall hereafter issue, any checks, drafts, or warrants to be paid from moneys received from the Federal Government, the State, or any county of this State for the cost of maintenance, and the checks, drafts, or warrants shall not be cashed for a period of one year from the date of issue, the following procedure shall be taken:

(a) The division shall give due notice to the bank on which the checks, drafts, or warrants were issued that no payment shall be made thereon.

(b) The division shall then from time to time deposit in a special fund moneys in an amount equal to that represented by the checks, drafts, or warrants, which moneys shall be held for the payments of the checks, drafts, or warrants. The special fund shall be in the custody and control of the division.

(c) The moneys so deposited shall be maintained in the special fund for a period of six years from the date of deposit, and, if still unclaimed after that time by anyone having a legal right thereto, shall be credited to the Federal Government, the State, or any county of this State in the same proportion as the moneys were received by the division in the original instance.

Whenever the division shall have credited any moneys to the Federal Government, the State, or any county of this State pursuant to the provisions of this section, it shall thereupon be free of all obligations as to those checks, drafts, or warrants for which such moneys have been held for payment.

100. Section 2 of P.L.1962, c.206 (C.30:4C-42) is amended to read as follows:

C.30:4C-42 Adoption Resource Exchange.

2. The Division of Child Protection and Permanency, is hereby authorized and empowered, subject to the availability of appropriations therefor, to establish an Adoption Resource Exchange, the services of which shall be available only to approved agencies as a further resource to facilitate placement of children for adoption by and through the agencies.

101. Section 3 of P.L.1962, c.206 (C.30:4C-43) is amended to read as follows:

C.30:4C-43 Purpose of adoption resource exchange.

3. The Adoption Resource Exchange authorized by P.L.1962, c.206 (C.30:4C-41 et seq.) shall not itself engage in the placement of children for adoption nor shall it be construed as a substitute for other local community resources, whether public or voluntary. It shall be a facility whereby the Division of Child Protection and Permanency and other approved agencies may mutually share and exchange information concerning children available for adoption and homes available for the placement of adoptive children.

102. Section 4 of P.L.1962, c.206 (C.30:4C-44) is amended to read as follows:

C.30:4C-44 Rules, regulations, and procedures.

4. The Division of Child Protection and Permanency is hereby authorized and empowered to establish rules, regulations, and procedures necessary to accomplish the purposes of P.L.1962, c.206 (C.30:4C-41 et seq.).

103. Section 2 of P.L.1973, c.81 (C.30:4C-46) is amended to read as follows:

C.30:4C-46 Payments in subsidization of adoption; qualifications.

2. The Division of Child Protection and Permanency shall make payments to adoptive parents on behalf of a child placed for adoption by the division whenever:

a. The child because of physical or mental condition, race, age, or membership in a sibling group, or for any other reason falls into the category of a child hard to place for adoption;

b. The adoptive family is capable of providing the permanent family relationships needed by the child; and

c. Except in situations involving adoption by a child's resource family parent, there has been a reasonable effort to place the child in an adoptive setting without providing a subsidy.

Payments shall be made on behalf of a child placed for adoption by the division except that whenever a child who would otherwise be eligible for subsidy payment is in the care of an approved New Jersey adoption agency pursuant to P.L.1977, c.367 (C.9:3-37 et seq.) a child shall, upon application by the agency and satisfaction of the regular requirements of the adoption subsidy program, be approved for participation in the adoption subsidy program. In any case the division may approve payment in subsidization of adoption for a child without legal transfer of care or custody of the child to the division. The division shall adopt regulations for administration of this program with respect to these children, except that all children are evaluated for eligibility in the same manner as children already under the care, custody, or guardianship of the division.

104. Section 4 of P.L.1973, c.81 (C.30:4C-48) is amended to read as follows:

C.30:4C-48 Qualifications; original and annual determination.

4. Qualification for payments in subsidization of adoption shall be determined and approved by the Division of Child Protection and Permanency prior to the completion of the adoption proceeding, and may be redetermined annually thereafter. No payments shall be made for any child who the division has determined was brought into this State for the sole purpose of qualifying for an adoption subsidy pursuant to P.L.1973, c.81 (C.30:4C-45 et seq.).

105. Section 5 of P.L.1973, c.81 (C.30:4C-49) is amended to read as follows:

C.30:4C-49 Rules and regulations.

5. The Division of Child Protection and Permanency shall make all necessary rules and regulations for administering the program for payments in subsidization of adoptions.

106. Section 2 of P.L.1977, c.424 (C.30:4C-51) is amended to read as follows:

C.30:4C-51 Legislative declarations.

2. The Legislature declares that it is in the public interest, whereby the safety of children shall be of paramount concern, to afford every child placed outside his home by the Division of Child Protection and Permanency with the opportunity for eventual return to the child's home or placement in an alternative permanent home; that it is the obligation of the State to promote this end through effective planning and regular review of each child's placement; and that it is the purpose of P.L.1977, c.424 (C.30:4C-50 et seq.) to establish procedures for both administrative and judicial review of each child's placement in order to ensure that such placement ensures the safety and health and serves the best interest of the child.

107. Section 3 of P.L.1977, c.424 (C.30:4C-52) is amended to read as follows:

C.30:4C-52 Definitions.

3. As used in P.L.1977, c.424 (C.30:4C-50 et seq.), unless the context indicates otherwise:

- a. "Child" means any person less than 18 years of age;
- b. "Child placed outside his home" means a child under the care, custody, or guardianship of the division who resides in a resource family home, group home, residential treatment facility, shelter for the care of abused or neglected children or juveniles considered as juvenile-family crisis cases, or independent living arrangement operated by or approved for payment by the division, or a child who has been placed by the division in the home of a person who is not related to the child and does not receive any payment for the care of the child from the division, or a child placed by the court in juvenile-family crisis cases pursuant to P.L.1982, c.77 (C.2A:4A-20 et seq.), but does not include a child placed by the court in the home of a person related to the child who does not receive any payment from the division for the care of the child;
- c. "County of supervision" means the county in which the division has established responsibility for supervision of the child;
- d. "Division" means the Division of Child Protection and Permanency in the Department of Children and Families;
- e. "Temporary caretaker" means a resource family parent as defined in section 1 of P.L.1962, c.136 (C.30:4C-26.4) or a director of a group home or residential treatment facility;

f. "Designated agency" means an agency designated by the court pursuant to P.L.1982, c.80 (C.2A:4A-76 et seq.) to develop a family services plan.

108. Section 1 of P.L.1991, c.448 (C.30:4C-53.1) is amended to read as follows:

C.30:4C-53.1 Findings, declarations.

1. The Legislature finds and declares that it is in the public interest, whereby the safety of children shall be of paramount concern, to afford every child placed outside the child's home by the Division of Child Protection and Permanency in the Department of Children and Families with permanency through return to the child's own home, if the child can be returned home without endangering the child's health or safety; through adoption, if family reunification is not possible; or through an alternative permanent placement, if termination of parental rights is not appropriate:

a. Due to the severity of health and social problems such as AIDS, drug abuse, and homelessness, the division often works with families over a period of many years, and the children of these families often spend a majority of their young lives in resource family care; and

b. Research has shown that the longer children remain in the resource family care system, the greater number of placements they experience. As a result of these multiple placements, from birth family to resource family home, and from one resource family home to another resource family home, children develop emotional and psychological problems, making it more difficult for them to develop a positive self-image; and

c. (Deleted by amendment, P.L.2004, c.130).

d. The obligation of the State to recognize and protect the rights of children in the child welfare system should be fulfilled in the context of a clear and consistent policy which limits the repeated placement of children in resource family care and promotes the eventual placement of these children in stable and safe permanent homes.

109. Section 2 of P.L.1991, c.448 (C.30:4C-53.2) is amended to read as follows:

C.30:4C-53.2 Definition of "repeated placement in resource family care," "placed again into resource family care."

2. For purposes of P.L.1991, c.448 (C.30:4C-53.1 et seq.), the terms "repeated placement into resource family care" and "placed again into resource family care" shall apply to a child who has been placed in the custody of the Division of Child Protection and Permanency for placement in

resource family care by the Family Part of the Chancery Division of the Superior Court or as a result of a voluntary placement agreement pursuant to P.L.1974, c.119 (C.9:6-8.21 et seq.), released into the custody of the child's parents or legally responsible guardian at the conclusion of the placement and is once again temporarily removed from the child's place of residence and placed under the division's care and supervision.

110. Section 7 of P.L.2001, c.250 (C.30:4C-84) is amended to read as follows:

C.30:4C-84 Definitions relative to kinship legal guardianship and State agency action.

7. As used in sections 7 through 10 of P.L.2001, c.250 (C.30:4C-84 et seq.):

"Caregiver" means a person over 18 years of age, other than a child's parent, who has a kinship relationship with the child and has been providing care and support for the child, while the child has been residing in the caregiver's home, for either the last 12 consecutive months or 15 of the last 22 months. "Caregiver" includes a resource family parent as defined in section 1 of P.L.1962, c.136 (C.30:4C-26.4).

"Child" means a person under 18 years of age, except as otherwise provided in P.L.2001, c.250 (C.3B:12A-1 et al.).

"Commissioner" means the Commissioner of Children and Families.

"Court" means the Superior Court, Chancery Division, Family Part.

"Division" means the Division of Child Protection and Permanency in the Department of Children and Families.

"Family friend" means a person who is connected to a child or the child's parent by an established, positive psychological or emotional relationship that is not a biological or legal relationship.

"Kinship caregiver assessment" means a written report prepared in accordance with the provisions of P.L.2001, c.250 (C.3B:12A-1 et al.) and pursuant to regulations adopted by the commissioner.

"Kinship legal guardian" means a caregiver who is willing to assume care of a child due to parental incapacity, with the intent to raise the child to adulthood, and who is appointed the kinship legal guardian of the child by the court pursuant to P.L.2001, c.250 (C.3B:12A-1 et al.). A kinship legal guardian shall be responsible for the care and protection of the child and for providing for the child's health, education, and maintenance.

"Kinship relationship" means a family friend or a person with a biological or legal relationship with the child.

111. Section 2 of P.L.2005, c.95 (C.30:4C-90) is amended to read as follows:

C.30:4C-90 Findings, declarations relative to kinship legal guardianship.

2. The Legislature finds and declares that:

a. An increasing number of relatives in the State, including grandparents, find themselves providing care on a long-term basis to children who cannot reside with their parents due to the parent's incapacity or inability to perform the regular and expected functions of care and support of the child;

b. The State law allows for the appointment of an individual as a kinship legal guardian; a kinship legal guardian has the same rights, responsibilities, and authority relating to a child as a birth parent, with the exception of consenting to the adoption of the child or a name change for the child, while the birth parent retains the obligation to pay child support and the right to court-approved visitation or parenting time with the child;

c. (Deleted by amendment, P.L.2012, c.16);

d. The Department of Children and Families has established the Kinship Navigator program, which is a referral service designed to help kinship caregivers coordinate the various government and community resources that may be available to them; and

e. It is appropriate for the State to ensure that individuals who may be eligible to become kinship legal guardians are aware of the eligibility requirements for, and the responsibilities of, kinship legal guardianship, and that both individuals who may be eligible to become kinship legal guardians and current kinship legal guardians are aware of the services available to kinship legal guardians in the State.

112. Section 3 of P.L.2005, c.95 (C.30:4C-91) is amended to read as follows:

C.30:4C-91 Dissemination of information by DCF.

3. The Department of Children and Families shall, in easily understandable language:

a. inform individuals, of whom the department is aware, who may be eligible to become kinship legal guardians of:

(1) the eligibility requirements for, and the responsibilities of, kinship legal guardianship; and

(2) the full-range of services for which kinship legal guardians may be eligible and the eligibility requirements for those services; and

b. inform current kinship legal guardians of the full-range of services for which kinship legal guardians may be eligible and the eligibility requirements for those services.

113. Section 4 of P.L.2005, c.95 (C.30:4C-92) is amended to read as follows:

C.30:4C-92 Rules, regulations.

4. The Commissioner of Children and Families shall adopt rules and regulations, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), to effectuate the purposes of P.L.2005, c.95 (C.30:4C-89 et seq.).

114. Section 3 of P.L.1968, c.413 (C.30:4D-3) is amended to read as follows:

C.30:4D-3 Definitions.

3. Definitions. As used in P.L.1968, c.413 (C.30:4D-1 et seq.), and unless the context otherwise requires:

a. "Applicant" means any person who has made application for purposes of becoming a "qualified applicant."

b. "Commissioner" means the Commissioner of Human Services.

c. "Department" means the Department of Human Services, which is herein designated as the single State agency to administer the provisions of this act.

d. "Director" means the Director of the Division of Medical Assistance and Health Services.

e. "Division" means the Division of Medical Assistance and Health Services.

f. "Medicaid" means the New Jersey Medical Assistance and Health Services Program.

g. "Medical assistance" means payments on behalf of recipients to providers for medical care and services authorized under P.L.1968, c.413.

h. "Provider" means any person, public or private institution, agency, or business concern approved by the division lawfully providing medical care, services, goods, and supplies authorized under P.L.1968, c.413, holding, where applicable, a current valid license to provide such services or to dispense such goods or supplies.

i. "Qualified applicant" means a person who is a resident of this State, and either a citizen of the United States or an eligible alien, and is determined to need medical care and services as provided under P.L.1968, c.413, with

respect to whom the period for which eligibility to be a recipient is determined shall be the maximum period permitted under federal law, and who:

(1) Is a dependent child or parent or caretaker relative of a dependent child who would be, except for resources, eligible for the aid to families with dependent children program under the State Plan for Title IV-A of the federal Social Security Act as of July 16, 1996;

(2) Is a recipient of Supplemental Security Income for the Aged, Blind and Disabled under Title XVI of the Social Security Act;

(3) Is an "ineligible spouse" of a recipient of Supplemental Security Income for the Aged, Blind and Disabled under Title XVI of the Social Security Act, as defined by the federal Social Security Administration;

(4) Would be eligible to receive Supplemental Security Income under Title XVI of the federal Social Security Act or, without regard to resources, would be eligible for the aid to families with dependent children program under the State Plan for Title IV-A of the federal Social Security Act as of July 16, 1996, except for failure to meet an eligibility condition or requirement imposed under such State program which is prohibited under Title XIX of the federal Social Security Act such as a durational residency requirement, relative responsibility, consent to imposition of a lien;

(5) (Deleted by amendment, P.L.2000, c.71).

(6) Is an individual under 21 years of age who, without regard to resources, would be, except for dependent child requirements, eligible for the aid to families with dependent children program under the State Plan for Title IV-A of the federal Social Security Act as of July 16, 1996, or groups of such individuals, including but not limited to, children in resource family placement under supervision of the Division of Child Protection and Permanency in the Department of Children and Families whose maintenance is being paid in whole or in part from public funds, children placed in a resource family home or institution by a private adoption agency in New Jersey or children in intermediate care facilities, including developmental centers for the developmentally disabled, or in psychiatric hospitals;

(7) Would be eligible for the Supplemental Security Income program, but is not receiving such assistance and applies for medical assistance only;

(8) Is determined to be medically needy and meets all the eligibility requirements described below:

(a) The following individuals are eligible for services, if they are determined to be medically needy:

(i) Pregnant women;

(ii) Dependent children under the age of 21;

(iii) Individuals who are 65 years of age and older; and

(iv) Individuals who are blind or disabled pursuant to either 42 C.F.R.435.530 et seq. or 42 C.F.R.435.540 et seq., respectively.

(b) The following income standard shall be used to determine medically needy eligibility:

(i) For one person and two person households, the income standard shall be the maximum allowable under federal law, but shall not exceed 133 1/3% of the State's payment level to two person households under the aid to families with dependent children program under the State Plan for Title IV-A of the federal Social Security Act in effect as of July 16, 1996; and

(ii) For households of three or more persons, the income standard shall be set at 133 1/3% of the State's payment level to similar size households under the aid to families with dependent children program under the State Plan for Title IV-A of the federal Social Security Act in effect as of July 16, 1996.

(c) The following resource standard shall be used to determine medically needy eligibility:

(i) For one person households, the resource standard shall be 200% of the resource standard for recipients of Supplemental Security Income pursuant to 42 U.S.C. s.1382(1)(B);

(ii) For two person households, the resource standard shall be 200% of the resource standard for recipients of Supplemental Security Income pursuant to 42 U.S.C. s.1382(2)(B);

(iii) For households of three or more persons, the resource standard in subparagraph (c)(ii) above shall be increased by \$100.00 for each additional person; and

(iv) The resource standards established in (i), (ii), and (iii) are subject to federal approval and the resource standard may be lower if required by the federal Department of Health and Human Services.

(d) Individuals whose income exceeds those established in subparagraph (b) of paragraph (8) of this subsection may become medically needy by incurring medical expenses as defined in 42 C.F.R.435.831(c) which will reduce their income to the applicable medically needy income established in subparagraph (b) of paragraph (8) of this subsection.

(e) A six-month period shall be used to determine whether an individual is medically needy.

(f) Eligibility determinations for the medically needy program shall be administered as follows:

(i) County welfare agencies and other entities designated by the commissioner are responsible for determining and certifying the eligibility of pregnant women and dependent children. The division shall reimburse

county welfare agencies for 100% of the reasonable costs of administration which are not reimbursed by the federal government for the first 12 months of this program's operation. Thereafter, 75% of the administrative costs incurred by county welfare agencies which are not reimbursed by the federal government shall be reimbursed by the division;

(ii) The division is responsible for certifying the eligibility of individuals who are 65 years of age and older and individuals who are blind or disabled. The division may enter into contracts with county welfare agencies to determine certain aspects of eligibility. In such instances the division shall provide county welfare agencies with all information the division may have available on the individual.

The division shall notify all eligible recipients of the Pharmaceutical Assistance to the Aged and Disabled program, P.L.1975, c.194 (C.30:4D-20 et seq.) on an annual basis of the medically needy program and the program's general requirements. The division shall take all reasonable administrative actions to ensure that Pharmaceutical Assistance to the Aged and Disabled recipients, who notify the division that they may be eligible for the program, have their applications processed expeditiously, at times and locations convenient to the recipients; and

(iii) The division is responsible for certifying incurred medical expenses for all eligible persons who attempt to qualify for the program pursuant to subparagraph (d) of paragraph (8) of this subsection;

(9) (a) Is a child who is at least one year of age and under 19 years of age and, if older than six years of age but under 19 years of age, is uninsured; and

(b) Is a member of a family whose income does not exceed 133% of the poverty level and who meets the federal Medicaid eligibility requirements set forth in section 9401 of Pub.L.99-509 (42 U.S.C. s.1396a);

(10) Is a pregnant woman who is determined by a provider to be presumptively eligible for medical assistance based on criteria established by the commissioner, pursuant to section 9407 of Pub.L.99-509 (42 U.S.C. s.1396a(a));

(11) Is an individual 65 years of age and older, or an individual who is blind or disabled pursuant to section 301 of Pub.L.92-603 (42 U.S.C. s.1382c), whose income does not exceed 100% of the poverty level, adjusted for family size, and whose resources do not exceed 100% of the resource standard used to determine medically needy eligibility pursuant to paragraph (8) of this subsection;

(12) Is a qualified disabled and working individual pursuant to section 6408 of Pub.L.101-239 (42 U.S.C. s.1396d) whose income does not exceed

200% of the poverty level and whose resources do not exceed 200% of the resource standard used to determine eligibility under the Supplemental Security Income Program, P.L.1973, c.256 (C.44:7-85 et seq.);

(13) Is a pregnant woman or is a child who is under one year of age and is a member of a family whose income does not exceed 185% of the poverty level and who meets the federal Medicaid eligibility requirements set forth in section 9401 of Pub.L.99-509 (42 U.S.C. s.1396a), except that a pregnant woman who is determined to be a qualified applicant shall, notwithstanding any change in the income of the family of which she is a member, continue to be deemed a qualified applicant until the end of the 60-day period beginning on the last day of her pregnancy;

(14) (Deleted by amendment, P.L.1997, c.272).

(15) (a) Is a specified low-income Medicare beneficiary pursuant to 42 U.S.C. s.1396a(a)10(E)iii whose resources beginning January 1, 1993 do not exceed 200% of the resource standard used to determine eligibility under the Supplemental Security Income program, P.L.1973, c.256 (C.44:7-85 et seq.) and whose income beginning January 1, 1993 does not exceed 110% of the poverty level, and beginning January 1, 1995 does not exceed 120% of the poverty level.

(b) An individual who has, within 36 months, or within 60 months in the case of funds transferred into a trust, of applying to be a qualified applicant for Medicaid services in a nursing facility or a medical institution, or for home or community-based services under section 1915(c) of the federal Social Security Act (42 U.S.C. s.1396n(c)), disposed of resources or income for less than fair market value shall be ineligible for assistance for nursing facility services, an equivalent level of services in a medical institution, or home or community-based services under section 1915(c) of the federal Social Security Act (42 U.S.C. s.1396n(c)). The period of the ineligibility shall be the number of months resulting from dividing the uncompensated value of the transferred resources or income by the average monthly private payment rate for nursing facility services in the State as determined annually by the commissioner. In the case of multiple resource or income transfers, the resulting penalty periods shall be imposed sequentially. Application of this requirement shall be governed by 42 U.S.C. s.1396p(c). In accordance with federal law, this provision is effective for all transfers of resources or income made on or after August 11, 1993. Notwithstanding the provisions of this subsection to the contrary, the State eligibility requirements concerning resource or income transfers shall not be more restrictive than those enacted pursuant to 42 U.S.C. s.1396p(c).

(c) An individual seeking nursing facility services or home or community-based services and who has a community spouse shall be required to expend those resources which are not protected for the needs of the community spouse in accordance with section 1924(c) of the federal Social Security Act (42 U.S.C. s.1396r-5(c)) on the costs of long-term care, burial arrangements, and any other expense deemed appropriate and authorized by the commissioner. An individual shall be ineligible for Medicaid services in a nursing facility or for home or community-based services under section 1915(c) of the federal Social Security Act (42 U.S.C. s.1396n(c)) if the individual expends funds in violation of this subparagraph. The period of ineligibility shall be the number of months resulting from dividing the uncompensated value of transferred resources and income by the average monthly private payment rate for nursing facility services in the State as determined by the commissioner. The period of ineligibility shall begin with the month that the individual would otherwise be eligible for Medicaid coverage for nursing facility services or home or community-based services.

This subparagraph shall be operative only if all necessary approvals are received from the federal government including, but not limited to, approval of necessary State plan amendments and approval of any waivers;

(16) Subject to federal approval under Title XIX of the federal Social Security Act, is a dependent child, parent or specified caretaker relative of a child who is a qualified applicant, who would be eligible, without regard to resources, for the aid to families with dependent children program under the State Plan for Title IV-A of the federal Social Security Act as of July 16, 1996, except for the income eligibility requirements of that program, and whose family earned income,

(a) if a dependent child, does not exceed 133% of the poverty level; and

(b) if a parent or specified caretaker relative, beginning September 1, 2005 does not exceed 100% of the poverty level, beginning September 1, 2006 does not exceed 115% of the poverty level and beginning September 1, 2007 does not exceed 133% of the poverty level, plus such earned income disregards as shall be determined according to a methodology to be established by regulation of the commissioner;

The commissioner may increase the income eligibility limits for children and parents and specified caretaker relatives, as funding permits;

(17) Is an individual from 18 through 20 years of age who is not a dependent child and would be eligible for medical assistance pursuant to P.L.1968, c.413 (C.30:4D-1 et seq.), without regard to income or resources, who, on the individual's 18th birthday was in resource family care under the

care and custody of the Division of Child Protection and Permanency in the Department of Children and Families and whose maintenance was being paid in whole or in part from public funds;

(18) Is a person between the ages of 16 and 65 who is permanently disabled and working, and:

(a) whose income is at or below 250% of the poverty level, plus other established disregards;

(b) who pays the premium contribution and other cost sharing as established by the commissioner, subject to the limits and conditions of federal law; and

(c) whose assets, resources and unearned income do not exceed limitations as established by the commissioner;

(19) Is an uninsured individual under 65 years of age who:

(a) has been screened for breast or cervical cancer under the federal Centers for Disease Control and Prevention breast and cervical cancer early detection program;

(b) requires treatment for breast or cervical cancer based upon criteria established by the commissioner;

(c) has an income that does not exceed the income standard established by the commissioner pursuant to federal guidelines;

(d) meets all other Medicaid eligibility requirements; and

(e) in accordance with Pub.L.106-354, is determined by a qualified entity to be presumptively eligible for medical assistance pursuant to 42 U.S.C. s.1396a(aa), based upon criteria established by the commissioner pursuant to section 1920B of the federal Social Security Act (42 U.S.C. s.1396r-1b); or

(20) Subject to federal approval under Title XIX of the federal Social Security Act, is a single adult or couple, without dependent children, whose income in 2006 does not exceed 50% of the poverty level, in 2007 does not exceed 75% of the poverty level and in 2008 and each year thereafter does not exceed 100% of the poverty level; except that a person who is a recipient of Work First New Jersey general public assistance, pursuant to P.L.1947, c.156 (C.44:8-107 et seq.), shall not be a qualified applicant.

j. "Recipient" means any qualified applicant receiving benefits under this act.

k. "Resident" means a person who is living in the State voluntarily with the intention of making his home here and not for a temporary purpose. Temporary absences from the State, with subsequent returns to the State or intent to return when the purposes of the absences have been accomplished, do not interrupt continuity of residence.

l. "State Medicaid Commission" means the Governor, the Commissioner of Human Services, the President of the Senate and the Speaker of the General Assembly, hereby constituted a commission to approve and direct the means and method for the payment of claims pursuant to P.L.1968, c.413.

m. "Third party" means any person, institution, corporation, insurance company, group health plan as defined in section 607(1) of the federal "Employee Retirement and Income Security Act of 1974," 29 U.S.C. s.1167(1), service benefit plan, health maintenance organization, or other prepaid health plan, or public, private or governmental entity who is or may be liable in contract, tort, or otherwise by law or equity to pay all or part of the medical cost of injury, disease or disability of an applicant for or recipient of medical assistance payable under P.L.1968, c.413.

n. "Governmental peer grouping system" means a separate class of skilled nursing and intermediate care facilities administered by the State or county governments, established for the purpose of screening their reported costs and setting reimbursement rates under the Medicaid program that are reasonable and adequate to meet the costs that must be incurred by efficiently and economically operated State or county skilled nursing and intermediate care facilities.

o. "Comprehensive maternity or pediatric care provider" means any person or public or private health care facility that is a provider and that is approved by the commissioner to provide comprehensive maternity care or comprehensive pediatric care as defined in subsection b. (18) and (19) of section 6 of P.L.1968, c.413 (C.30:4D-6).

p. "Poverty level" means the official poverty level based on family size established and adjusted under Section 673(2) of Subtitle B, the "Community Services Block Grant Act," of Pub.L.97-35 (42 U.S.C. s.9902(2)).

q. "Eligible alien" means one of the following:

(1) an alien present in the United States prior to August 22, 1996, who is:

(a) a lawful permanent resident;

(b) a refugee pursuant to section 207 of the federal "Immigration and Nationality Act" (8 U.S.C. s.1157);

(c) an asylee pursuant to section 208 of the federal "Immigration and Nationality Act" (8 U.S.C. s.1158);

(d) an alien who has had deportation withheld pursuant to section 243(h) of the federal "Immigration and Nationality Act" (8 U.S.C. s.1253 (h));

(e) an alien who has been granted parole for less than one year by the U.S. Citizenship and Immigration Services pursuant to section 212(d)(5) of the federal "Immigration and Nationality Act" (8 U.S.C. s.1182(d)(5));

(f) an alien granted conditional entry pursuant to section 203(a)(7) of the federal "Immigration and Nationality Act" (8 U.S.C. s.1153(a)(7)) in effect prior to April 1, 1980; or

(g) an alien who is honorably discharged from or on active duty in the United States armed forces and the alien's spouse and unmarried dependent child.

(2) An alien who entered the United States on or after August 22, 1996, who is:

(a) an alien as described in paragraph (1)(b), (c), (d) or (g) of this subsection; or

(b) an alien as described in paragraph (1)(a), (e) or (f) of this subsection who entered the United States at least five years ago.

(3) A legal alien who is a victim of domestic violence in accordance with criteria specified for eligibility for public benefits as provided in Title V of the federal "Illegal Immigration Reform and Immigrant Responsibility Act of 1996" (8 U.S.C. s.1641).

115. Section 7 of P.L.2007, c.58 (C.30:4D-59) is amended to read as follows:

C.30:4D-59 Transfers of certain functions, powers, employees.

7. a. The Medicaid audit, program integrity, fraud and abuse prevention and recovery functions, all officers and employees that the Medicaid Inspector General deems qualified and substantially engaged therein, and any documents and records that the Medicaid Inspector General deems necessary and related to the transfer of such functions and personnel, shall be transferred to the Office of the Medicaid Inspector General from the Medicaid Office of Program Integrity Unit and the Third Party Liability Unit in the Division of Medical Assistance and Health Services, the Division of Disability Services, the Division of Developmental Disabilities, the Division of Mental Health and Addiction Services, the Division of Child Protection and Permanency, the Division of Children's System of Care, the Department of Health and Senior Services, and the Department of the Treasury. The Medicaid Inspector General shall consult with the head of each department or agency from which such function is to be transferred to determine the officers and employees to be transferred.

b. The Medicaid Inspector General shall have general managerial control over the office and shall establish the organizational structure of the office as the Medicaid Inspector General deems appropriate to carry out the responsibilities and functions of the office. Within the limits of funds ap-

propriated therefor, the Medicaid Inspector General may hire such employees in the unclassified service as are necessary to administer the office. These employees shall serve at the pleasure of the Medicaid Inspector General. Subject to the availability of appropriations, the Medicaid Inspector General may obtain the services of certified public accountants, qualified management consultants, professional auditors, or other professionals necessary to independently perform the functions of the office.

116. Section 10 of P.L.1985, c.307 (C.30:4G-10) is amended to read as follows:

C.30:4G-10 Advisory Council on Personal Attendant Services.

10. a. There is established in the department an Advisory Council on Personal Attendant Services which consists of 19 members as follows: the Commissioner of Health and Senior Services, the Director of the Division of Child Protection and Permanency in the Department of Children and Families, the Director of the Division of Developmental Disabilities, and the Director of the Division of Medical Assistance and Health Services in the Department of Human Services, the Director of the Division of Veterans' Services in the Department of Military and Veterans' Affairs, and the Director of the Division of Vocational Rehabilitation Services in the Department of Labor and Workforce Development, or their designees, who shall serve ex officio, and 13 members appointed by the commissioner who are residents of this State, one of whom is a member of the New Jersey Association of County Representatives of Disabled Persons, four of whom represent providers of personal attendant services, five of whom represent consumers of personal attendant services and three of whom represent advocacy groups or agencies for the physically disabled.

A vacancy in the membership of the council shall be filled in the same manner as the original appointment.

The members of the council shall serve without compensation, but the department shall reimburse the members for the reasonable expenses incurred in the performance of their duties.

b. The council shall hold an organizational meeting within 30 days after the appointment of its members. The members of the council shall elect from among them a chairman, who shall be the chief executive officer of the council and the members shall elect a secretary, who need not be a member of the council.

c. The council shall:

(1) Advise the commissioner on matters pertaining to personal attendant services and the development of the personal attendant program, upon the request of the commissioner;

(2) Review the rules and regulations promulgated for the implementation of the personal attendant program and make recommendations to the commissioner, as appropriate;

(3) Evaluate the effectiveness of the personal attendant program in achieving the purposes of this act; and

(4) Assess the Statewide need for personal attendant services and the projected cost for providing these services Statewide.

117. Section 1 of P.L.1997, c.254 (C.30:5B-6.1) is amended to read as follows:

C.30:5B-6.1 Definitions relative to child abuse record information checks.

1. As used in P.L.1997, c.254 (C.30:5B-6.1 et seq.):

"Department" means the Department of Children and Families.

"Division" means the Division of Child Protection and Permanency in the Department of Children and Families.

"Staff member" means any owner, sponsor, director, or person employed by or working at a child care center on a regularly scheduled basis during the center's operating hours, including full-time, part-time, voluntary, contract, consulting, and substitute staff, whether compensated or not.

"Child care center" or "center" means any facility which is maintained for the care, development or supervision of six or more children under 13 years of age who attend the facility for less than 24 hours a day, and which is subject to State licensure or life-safety approval, pursuant to the provisions of the "Child Care Center Licensing Act," P.L.1983, c.492 (C.30:5B-1 to 30:5B-15).

118. Section 1 of P.L.2000, c.77 (C.30:5B-6.10) is amended to read as follows:

C.30:5B-6.10 Definitions relative to criminal history record background checks for child care center staff.

1. As used in sections 1 through 7 and 9 through 12 of P.L.2000, c.77 (C.30:5B-6.10 et seq.):

"Child care center" or "center" means any facility which is maintained for the care, development, or supervision of six or more children under 13 years of age who attend the facility for less than 24 hours a day, and which

is subject to State licensure or life-safety approval pursuant to P.L.1983, c.492 (C.30:5B-1 et seq.).

"Department" means the Department of Children and Families.

"Division" means the Division of Child Protection and Permanency in the Department of Children and Families.

"Staff member" means a person 18 years of age or older who owns, sponsors, or directs a child care center, or who is employed by or works in a child care center on a regularly scheduled basis during the center's operating hours, including full-time, part-time, voluntary, contract, consulting, and substitute staff, whether compensated or not.

119. Section 14 of P.L.1983, c.492 (C.30:5B-14) is amended to read as follows:

C.30:5B-14 Child Care Advisory Council.

14. a. The Director of the Division of Family Development in the Department of Human Services, a designee of the Commissioner of Children and Families, and the Director of the Division on Women in the Department of Children and Families shall establish a Child Care Advisory Council which shall consist of at least 15 individuals who have experience, training, or other interests in child care issues. To the extent possible, the directors shall designate members of existing councils or task forces heretofore established on child care in New Jersey as the advisory council.

b. The advisory council shall:

(1) Review rules and regulations or proposed revisions to existing rules and regulations governing the licensing of child care centers;

(2) Review proposed statutory amendments governing the licensing of child care centers and make recommendations to the commissioner;

(3) Advise the commissioner on the administration of the licensing responsibilities under this act;

(4) Advise the Commissioners of Human Services and Children and Families and other appropriate units of State government on the needs, priorities, programs, and policies relating to child care throughout the State;

(5) Study and recommend alternative resources for child care; and

(6) Facilitate employer supported child care through information and technical assistance.

c. The advisory council may accept from any governmental department or agency, public or private body, or any other source grants or contributions to be used in carrying out its responsibilities under P.L.1983, c.492 (C.30:5B-1 et seq.).

120. Section 2 of P.L.1993, c.350 (C.30:5B-25.2) is amended to read as follows:

C.30:5b-25.2 Definitions.

2. As used in sections 1 through 4 of P.L.1993, c.350 (C.30:5B-25.1 through C.30:5B-25.4):

"Child abuse registry" means the child abuse registry of the Division of Child Protection and Permanency in the Department of Children and Families established pursuant to section 4 of P.L.1971, c.437 (C.9:6-8.11).

"Provider" means a family day care provider as defined by section 3 of P.L.1987, c.27 (C.30:5B-18) and includes, but is not limited to, a family day care provider's assistant and a substitute family day care provider.

"Family day care sponsoring organization" means an agency or organization which contracts with the Department of Human Services to assist in the registration of family day care providers in a specific geographic area pursuant to P.L.1987, c.27 (C.30:5B-16 et seq.).

"Household member" means an individual over 14 years of age who resides in a family day care provider's home.

121. Section 3 of P.L.1993, c.350 (C.30:5B-25.3) is amended to read as follows:

C.30:5B-25.3 Child abuse registry search.

3. a. The Division of Child Protection and Permanency in the Department of Children and Families shall conduct a search of its child abuse registry to determine if a report of child abuse or neglect has been filed, pursuant to section 3 of P.L.1971, c.437 (C.9:6-8.10), involving a person registering as a prospective provider or a household member of the prospective provider or as a current provider or household member of the current provider.

b. The division shall conduct the search only upon receipt of the prospective or current provider or household member's written consent to the search. If the person refuses to provide his consent, the family day care sponsoring organization shall deny the prospective or current provider's application for a certificate or renewal of registration.

c. The division shall advise the sponsoring organization of the results of the child abuse registry search within a time period to be determined by the Department of Children and Families.

d. The department shall not issue a certificate or renewal of registration to a prospective or current provider unless the department has first determined that no substantiated charge of child abuse or neglect against the

prospective or current provider or household member is found during the child abuse registry search.

122. Section 3 of P.L.1987, c.215 (C.30:5B-28) is amended to read as follows:

C.30:5B-28 Applicant requirements.

3. The Commissioner of Human Services, in consultation with the Commissioner of Education and the Advisory Council on Child Care established pursuant to section 14 of P.L.1983, c.492 (C.30:5B-14) and the Division on Women in the Department of Children and Families, shall establish criteria for assessing the suitability of grant applicants. Each applicant for a grant under this act shall:

- a. Describe the need for and type of child care services to be furnished;
- b. Provide assurances that the applicant has knowledge of and experience in the special nature of child care services for school-age children;
- c. Provide assurances that each person to be employed by the applicant for child care has appropriate experience and character including a criminal history records check of the files of the State Bureau of Identification and the Federal Bureau of Investigation, Identification Division;
- d. Provide evidence that the applicant will be afforded use of an appropriate school facility or another appropriate location as approved by the commissioner, which may be a child care center licensed pursuant to P.L.1983, c.492 (C.30:5B-1 et seq.);
- e. Provide assurances that the program will be in conformity with all appropriate statutes, regulations, ordinances, and such programs as shall be developed for the program created by P.L.1987, c.215 (C.30:5B-26 et seq.);
- f. Provide a tentative budget for the program, including a proposed sliding-fee schedule which should reflect a family's capacity to pay;
- g. Provide assurances that the parents of school-age children will be involved in the development and implementation of the child care program; and
- h. Provide such other assurances and information as the commissioner shall reasonably require to carry out the provisions of P.L.1987, c.215.

123. Section 2 of P.L.2003, c.185 (C.30:5B-32) is amended to read as follows:

C.30:5B-32 Child abuse record information check for prospective approved home providers.

2. a. A unified child care agency contracted with the Department of Human Services pursuant to N.J.A.C.10:15-2.1, shall request that the Divi-

sion of Child Protection and Permanency in the Department of Children and Families conduct a child abuse record information check of the division's child abuse records, as promptly as possible, to determine if an incident of child abuse or neglect has been substantiated, pursuant to section 4 of P.L.1971, c.437 (C.9:6-8.11), against:

(1) a prospective approved home provider as defined in N.J.A.C.10:15-1.2 providing child care services under the "New Jersey Cares for Kids Program" established pursuant to N.J.A.C.10:15-5.1, or to a child whose parent is receiving assistance under the Work First New Jersey program established pursuant to P.L.1997, c.38 (C.44:10-55 et seq.) or is employed but continues to receive supportive services pursuant to the provisions of section 5 of P.L.1997, c.13 (C.44:10-38); or

(2) any adult member of the prospective provider's household.

b. The division shall conduct the child abuse record information check only upon receipt of the prospective approved home provider's or any adult household member's written consent to the check. If the person refuses to provide his consent, the unified child care agency shall deny the prospective approved home provider's application to provide child care services.

c. If the division determines that an incident of child abuse or neglect by the prospective approved home provider or any adult member of the household has been substantiated, the division shall release the results of the child abuse record information check to the unified child care agency pursuant to subsection g. of section 1 of P.L.1977, c.102 (C.9:6-8.10a) and the agency shall deny the prospective approved home provider's application to provide child care services.

d. Before denying the prospective approved home provider's application to provide child care services, the unified child care agency shall give notice personally or by certified or registered mail to the last known address of the prospective approved home provider with return receipt requested, of the reasons why the application will be denied. The notice shall afford the prospective approved home provider the opportunity to be heard and to contest the agency's action. The hearing shall be conducted in accordance with the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.).

e. If a prospective approved home provider's application to provide child care services is denied, the unified child care agency shall notify the parent of the child who would be eligible to receive such services, personally and in writing, of the reasons why the application was denied and the parent's right to select another provider. The parent shall keep such information confidential and shall not disclose the information except as authorized by law.

124. Section 2 of P.L.1995, c.321 (C.30:9A-19) is amended to read as follows:

C.30:9A-19 License required for conducting, maintaining, operating mental health program; fees.

2. a. A person shall not conduct, maintain or operate a mental health program unless: (1) the commissioner or the Commissioner of Children and Families, as applicable, has issued a license to that person, in accordance with rules and regulations adopted by the commissioner or the Commissioner of Children and Families, as applicable, which prescribe standards for the provision of services by a mental health program; and (2) that person has a purchase of service contract or an affiliation agreement with the Division of Mental Health and Addiction Services in the Department of Human Services or the Department of Children and Families, including, but not limited to, the Division of Children's System of Care, as applicable.

b. Application for a license to conduct, maintain, or operate a mental health program shall be made upon forms prescribed by the commissioner or the Commissioner of Children and Families, as applicable. The commissioner or the Commissioner of Children and Families, as applicable, shall charge such nonrefundable fees for the filing of an application for a license, and for any renewal thereof, as the commissioner or the Commissioner of Children and Families, as applicable, shall from time to time fix by regulation.

125. Section 2 of P.L.1977, c.448 (C.30:11B-2) is amended to read as follows:

C.30:11B-2 Definitions.

2. "Community residence for the developmentally disabled" means any community residential facility housing up to 16 persons with developmental disabilities, which provides food, shelter, and personal guidance for persons with developmental disabilities who require assistance, temporarily or permanently, in order to live independently in the community. Such residences shall not be considered health care facilities within the meaning of the "Health Care Facilities Planning Act," P.L.1971, c.136 (C.26:2H-1 et seq.) and shall include, but not be limited to, group homes, halfway houses, supervised apartment living arrangements and hostels.

"Community residence for the mentally ill" means any community residential facility which provides food, shelter, and personal guidance, under such supervision as required, to not more than 15 persons with mental illness who require assistance temporarily or permanently, in order to live

independently in the community. These residences shall be approved for a purchase of service contract or an affiliation agreement pursuant to procedures established by the Division of Mental Health and Addiction Services in the Department of Human Services or the Division of Children's System of Care in the Department of Children and Families, as applicable. These residences shall not house persons who have been assigned to a State psychiatric hospital after having been found not guilty of a criminal offense by reason of insanity or unfit to be tried on a criminal charge. These residences shall not be considered health care facilities within the meaning of the "Health Care Facilities Planning Act," P.L.1971, c.136 (C.26:2H-1 et seq.) and shall include, but not be limited to, group homes, halfway houses, supervised apartment living arrangements, family care homes, and hostels.

"Community residence for persons with head injuries" means a community residential facility providing food, shelter, and personal guidance, under such supervision as required, to not more than 15 persons with head injuries, who require assistance, temporarily or permanently, in order to live in the community, and shall include, but not be limited to: group homes, halfway houses, supervised apartment living arrangements, and hostels. Such a residence shall not be considered a health care facility within the meaning of the "Health Care Facilities Planning Act," P.L.1971, c.136 (C.26:2H-1 et seq.).

"Developmental disability" or "developmentally disabled" means a severe, chronic disability of a person which: a. is attributable to a mental or physical impairment or combination of mental or physical impairments; b. is manifest before age 22; c. is likely to continue indefinitely; d. 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, learning, mobility, self-direction and capacity for independent living, or economic self-sufficiency; and e. reflects the need for a combination and sequence of special interdisciplinary or generic care, treatment or other services which are of lifelong or extended duration and are individually planned and coordinated. Developmental disability includes, but is not limited to, severe disabilities attributable to an intellectual disability, autism, cerebral palsy, epilepsy, spina bifida, and other neurological impairments where the above criteria are met.

"Mentally ill" or "mental illness" means any psychiatric disorder which has required an individual to receive either inpatient psychiatric care or outpatient psychiatric care on an extended basis.

"Person with head injury" means a person who has sustained an injury, illness, or traumatic changes to the skull, the brain contents or its coverings

which results in a temporary or permanent physiobiological decrease of cognitive, behavioral, social, or physical functioning which causes partial or total disability.

126. Section 10 of P.L.1987, c.112 (C.30:11B-4.2) is amended to read as follows:

C.30:11B-4.2 Program standards.

10. a. Within six months of the effective date of P.L.1987, c.112, the Director of the Division of Mental Health and Addiction Services in the Department of Human Services or the Division of Children's System of Care in the Department of Children and Families, as applicable, shall develop program standards which include criteria for educational and professional experience of employees of a community residence for the mentally ill and staffing ratios appropriate to the needs of the residents of the community residences for the mentally ill.

b. Within six months after the effective date of P.L.1993, c.329, the Commissioner of Human Services or the Commissioner of Children and Families, as applicable, shall develop program standards which include criteria for educational and professional experience of employees of a community residence for persons with head injuries and staffing ratios appropriate to the needs of the residents of these community residences.

127. Section 4 of P.L.1979, c.337 (C.30:14-4) is amended to read as follows:

C.30:14-4 Advisory Council on Domestic Violence.

4. a. There is created an Advisory Council on Domestic Violence which shall consist of 20 members: the Director of the Division on Women in the Department of Children and Families, the Director of the Division of Child Protection and Permanency in the Department of Children and Families and the Director of the Division of Family Development in the Department of Human Services, the Director of the Administrative Office of the Courts, the Commissioner of the Department of Education, the Commissioner of Labor and Workforce Development, the Attorney General, or their designees, and one representative of Legal Services of New Jersey, one former domestic violence shelter resident, one representative of the Police Chiefs Association, one representative of the County Prosecutors Association, one representative of the New Jersey State Nurses Association, one representative of the Mental Health Association in New Jersey, one representative of the New Jersey Crime Prevention Officers Association, one representative

of the New Jersey Hospital Association, one representative of the Violent Crimes Compensation Board, and four representatives of the New Jersey Coalition for Battered Women to be appointed by the Governor.

b. The advisory council shall:

(1) Monitor the effectiveness of the laws concerning domestic violence and make recommendations for their improvement;

(2) Review proposed legislation governing domestic violence and make recommendations to the Governor and the Legislature;

(3) Study the needs, priorities, programs, and policies relating to domestic violence throughout the State; and

(4) Ensure that all service providers and citizens are aware of the needs of and services available to victims of domestic violence and make recommendations for community education and training programs.

c. The advisory council shall periodically advise the Director of the Division of Child Protection and Permanency in the Department of Children and Families and the Director of the Division on Women in the Department of Children and Families on its activities, findings, and recommendations.

128. Section 3 of P.L.2001, c.195 (C.30:14-15) is amended to read as follows:

C.30:14-15 "Domestic Violence Victims' Fund."

3. a. There is hereby established the "Domestic Violence Victims' Fund," a dedicated fund within the General Fund and administered by the Division of Child Protection and Permanency in the Department of Children and Families. The fund shall be the depository of moneys realized from the civil penalty imposed pursuant to section 1 of P.L.2001, c.195 (C.2C:25-29.1) and any other moneys made available for the purposes of the fund.

b. All moneys deposited in the "Domestic Violence Victims' Fund" shall be used for direct services to victims of domestic violence, including, but not limited to, shelter services, legal advocacy services, and legal assistance services, and for related administrative costs of the Division of Child Protection and Permanency.

129. Section 1 of P.L.1999, c.223 (C.34:15C-21) is amended to read as follows:

C.34:15C-21 Council on Gender Parity in Labor and Education.

1. a. There is created, in the New Jersey State Employment and Training Commission, a council which shall be known as the Council on Gender Parity in Labor and Education.

b. The council shall consist of 16 members who are individuals with experience in the fields of labor, education, training, or gender equity. The 16 members shall include: six members appointed by the Director of the Division on Women; six members appointed by the Executive Director of the State Employment and Training Commission; and four members who shall serve ex officio, one of whom shall be appointed by the Commissioner of Children and Families, one by the Commissioner of Education, one by the Commissioner of Human Services, and one by the Executive Director of the Commission on Higher Education. Not more than half of the members appointed by the Director of the Division on Women and not more than half of the members appointed by the Executive Director of the State Employment and Training Commission shall be of the same political party. The members appointed by the director and executive director shall serve for terms of three years, except that of the eight members first appointed by the director and the executive director, four shall be appointed for three years, two shall be appointed for two years, and two shall be appointed for one year. Each member shall hold office for the term of appointment and until his successor is appointed and qualified. A member appointed to fill a vacancy occurring in the membership of the council for any reason other than the expiration of the term shall have a term of appointment for the unexpired term only. Vacancies shall be filled in the same manner as the original appointment. A member may be appointed for any number of successive terms. Any member appointed by the director or the executive director may be removed from the council by the director or the executive director, as the case may be, for cause, after a hearing and may be suspended by the director or the executive director pending the completion of the hearing.

c. Members of the council shall serve without compensation, but may be reimbursed for necessary expenses incurred in the performance of their duties as members. Action may be taken and motions and resolutions may be adopted by the council at a council meeting by an affirmative vote of a majority of the members. The council shall elect from its members a chairperson who shall be a nongovernmental member of the council. Advanced notification for, and copies of the minutes of, each meeting of the council shall be filed with the Governor, the President of the Senate, and the Speaker of the General Assembly.

130. Section 2 of P.L.1999, c.223 (C.34:15C-22) is amended to read as follows:

C.34:15C-22 Duties of council.

2. The Council shall:
 - a. Assess the effectiveness of State programs designed to provide gender equity in labor, education, and training;
 - b. Make recommendations to the Commissioners of Children and Families, Education, Human Services, and Labor and Workforce Development, and the Secretary of Higher Education regarding the needs, priorities, programs, and policies related to access and equity for labor, education, and workforce training throughout the State;
 - c. Review current and proposed legislation and regulations pertaining to gender equity in labor, education, and workforce training and make recommendations regarding possible legislation and regulations to the State Employment and Training Commission and the Division on Women;
 - d. Develop policies to insure that State agencies set benchmarks and integrate their data collection systems to assess progress toward achieving gender equity and take action to insure that appropriate data collection systems exist where needed;
 - e. Develop policies to promote linkages among individuals, schools, organizations, and public agencies providing gender equity services and programs;
 - f. Educate and provide information to the public on the issues and current developments in gender equity by issuing reports and holding events such as conferences and symposia;
 - g. Submit an annual report to the Governor, the Legislature, the State Employment and Training Commission, and the Division on Women of its assessments and recommendations made pursuant to this section;
 - h. Conduct studies and promote research, as practicable, to develop the means to correct gender inequitable practices, including practices leading to pay disparities between men and women and publish and otherwise make available to employers, labor organizations, professional associations, educational institutions, the media, and the general public the findings resulting from these studies and other materials;
 - i. Develop and make available information, as practicable, regarding best practices for workplace gender equity to enable employers to evaluate job categories based on objective criteria, such as educational requirements, skill requirements, independence, working conditions, and responsibility; and
 - j. Establish a Statewide recognition of exceptional practices, as practicable, to promote gender equity in the workplace to be presented to a workplace, as shall be defined by the Council, that, at a minimum, has demonstrated it has made a substantial effort to eliminate pay disparities

between men and women, and thus deserves special recognition, in addition to any other requirements and specifications the Council deems appropriate in the determination of the workplace to be recognized.

131. Section 2 of P.L.2007, c.319 (C.38A:3-39) is amended to read as follows:

C.38A:3-39 Membership of commission; terms; vacancies.

2. The commission shall consist of 15 members who are New Jersey residents. The Governor shall appoint 12 members and of the 12 appointed, nine shall be women. There shall be appointed one representative from each of the following branches of military service who may also be affiliated with an organization named below: the Army; the Air Force; the Coast Guard; the Marines; and the Navy. There shall also be appointed by the Governor, one representative from the Veterans of Foreign Wars, one representative from the American Legion, one representative from the Disabled American Veterans, one representative from the American Veterans, one representative from the New Jersey Army National Guard, one representative from the New Jersey Air National Guard, and one representative from the Military Order of the Purple Heart. The Commissioner of Military and Veterans' Affairs, the Commissioner of Labor and Workforce Development, and the Director of the Division on Women in the Department of Children and Families, or their respective designees, shall serve as ex-officio members.

The public members shall serve for terms of three years and until the appointment and qualification of their successors, except that of the initial appointment of public members, four shall be appointed for a term of three years, four shall be appointed for a term of two years, and four shall be appointed for a term of one year.

If any public member discontinues affiliation with the respective veterans' organization, the member shall immediately resign membership with the commission.

Any vacancy in the membership of the commission shall be filled in the same manner as the original appointments are made.

132. Section 35 of P.L.1979, c.496 (C.44:7-93) is amended to read as follows:

C.44:7-93 Services provided to eligible residents by county welfare board.

35. a. As used in this section, "eligible resident" means a resident of a residential health care facility, rooming house, or boarding house who is: eligible to receive services under the latest New Jersey Comprehensive Annual

Services Program Plan for the use of funds appropriated under Title XX of the Federal Social Security Act; an "eligible person" under the act to which this act is a supplement; an otherwise aged, blind, or disabled person; or a resident designated to be eligible by the Commissioner of Human Services.

b. County welfare boards shall provide services to eligible residents of residential health care facilities, rooming houses, and boarding houses which shall include, but not be limited to, the following:

(1) Investigation and evaluation of reports of abuse or exploitation, as defined in section 36 hereunder, or of threats of such abuse or exploitation of eligible residents, at the direction of the Commissioner of Human Services;

(2) Visits to all such facilities having eligible residents, at regularly scheduled intervals to assess the needs of such residents, determine whether they are receiving needed services and appropriate levels of care, and to provide such services where appropriate;

(3) Provision of information to eligible residents concerning social service, welfare, mental health, home health, and medical assistance programs available to them; referral of eligible residents to State, county, and local agencies and organizations for any services which county welfare boards cannot provide; and follow up to such referrals to determine whether such services are being provided;

(4) Reporting of any suspected violations of the provisions of this act and of any complaints received concerning services and conditions in such facilities to the commissioner and to appropriate State and local agencies for remedial action; and

(5) Provision of information to eligible residents whose continued residence in such facilities may be injurious or dangerous to their health concerning alternative housing and living arrangements available to them.

County welfare boards shall coordinate all services provided under this subsection with services provided to eligible residents by the State Divisions of Mental Health and Addiction Services and Developmental Disabilities in the Department of Human Services and Division of Child Protection and Permanency in the Department of Children and Families, charitable institutions, and other State and local agencies and service providers.

c. In order to fulfill their responsibilities under subsection b. above, county welfare boards shall be entitled to receive full and free access to residential health care facilities, rooming houses, and boarding houses by the owners and operators of the facilities, and to receive cooperation and assistance from State and local law enforcement officials as needed.

d. The Commissioner of Human Services shall:

(1) Promulgate all necessary regulations to implement the provisions of this section;

(2) Maintain a central file of all complaints received concerning suspected violations of the provisions of this act and concerning services and conditions at residential health care facilities, rooming houses, and boarding houses and shall maintain a record of the State and local agencies to which complaints have been referred by county welfare boards; refer any complaints received by the commissioner to State and local agencies for remedial action as necessary; and follow up all complaints to determine whether remedial action has been taken;

(3) Provide such training and educational programs to the operators of such facilities as will enable them to appropriately respond to the needs of their residents;

(4) Designate agencies to:

(a) Identify those residential health care facilities, rooming houses, and boarding houses in which substantial numbers of persons reside who are in need of mental health or developmental disabilities services;

(b) Receive referrals and be responsible for the provision of mental health or developmental disability services, or both;

(c) Report any apparent violation of this act to the appropriate State and local officials and authorities;

(d) Coordinate their efforts with county welfare boards, charitable institutions, the State Divisions of Mental Health and Addiction Services and Developmental Disabilities in the Department of Human Services, and Division of Child Protection and Permanency in the Department of Children and Families, and other State and local entities and service providers;

(5) Periodically monitor and evaluate services provided to eligible residents by county welfare boards and community agencies serving persons with mental illness or developmental disabilities;

(6) Issue a report to the Legislature's Standing Reference Committees on Health, Human Services and Senior Citizens concerning the implementation of this section, one year following the effective date of this act.

e. Any person who submits or reports a complaint concerning a suspected violation of the provisions of this act or concerning services and conditions in residential health care facilities, rooming houses, and boarding houses, or who testifies in any administrative or judicial proceeding arising from a complaint, shall have immunity from any civil or criminal liability on account of such complaint, unless such person has acted in bad faith or with malicious purpose.

133. Section 10 of P.L.1991, c.134 (C.45:15BB-10) is amended to read as follows:

C.45:15BB-10 State Board of Social Work Examiners created.

10. There is created within the Division of Consumer Affairs in the Department of Law and Public Safety, the State Board of Social Work Examiners. The board shall consist of 10 members who are residents of the State, two of whom shall be public members appointed pursuant to the provisions of subsection b. of section 2 of P.L.1971, c.60 (C.45:1-2.2) and one of whom shall be the Commissioner of Human Services, or the commissioner's designee, and one of whom shall be the Commissioner of Children and Families, or the commissioner's designee, the latter two appointed in fulfillment of the requirement of subsection c. of that section. Of the six remaining members, three shall have been actively engaged in the practice of social work for at least five years immediately preceding their appointment, and, except for the members first appointed, one shall be a licensed clinical social worker, one shall be a licensed social worker, and one shall be a certified social worker pursuant to this act. Of the three remaining members, two shall be social work educators, one of whom shall represent a baccalaureate level program and one of whom shall represent a master's level program; and one shall be a social worker with a doctorate level degree, and, all of whom, except for the members first appointed, shall be licensed or certified pursuant to this act.

The Governor shall appoint each member, other than the State executive department member, for terms of three years, except that of the social worker members first appointed, two shall serve for a term of three years, two shall serve for terms of two years and two shall serve for terms of one year. Any vacancy in the membership shall be filled for the unexpired term in the manner provided by the original appointment. No member of the board may serve more than two successive terms in addition to any unexpired term to which he has been appointed. The Governor may remove any member of the board, other than the State executive department member, for cause.

134. Section 3 of P.L.2001, c.81 (C.52:4B-51) is amended to read as follows:

C.52:4B-51 Statewide Sexual Assault Nurse Examiner program.

3. The Attorney General shall establish a Statewide Sexual Assault Nurse Examiner program in the Department of Law and Public Safety.

Upon implementation of the certification process for a forensic sexual assault nurse examiner pursuant to section 5 of P.L.2001, c.81 (C.52:4B-53), the county prosecutor in each county shall appoint or designate a certified forensic sexual assault nurse examiner to serve as program coordinator for the program in the county in accordance with the provisions of this section.

a. The county prosecutor may appoint an employee of the prosecutor's office who is a certified forensic sexual assault nurse examiner to serve as program coordinator to administer the program in that county.

b. In a county where the county prosecutor does not appoint an employee of his office to serve as program coordinator, the county prosecutor shall designate a certified forensic sexual assault nurse examiner who is an employee of a licensed health care facility or a county rape care program that is designated by the Division on Women in the Department of Children and Families to serve as the program coordinator. A person designated as a program coordinator pursuant to this subsection shall not be deemed an employee of the county prosecutor's office.

135. Section 6 of P.L.2001, c.81 (C.52:4B-54) is amended to read as follows:

C.52:4B-54 Sexual Assault Response Team in each county.

6. a. The county prosecutor's office in each county shall establish a Sexual Assault Response Team or shall enter into a collaborative agreement with another county to share the services of that county's response team. The response team shall be comprised of: a certified forensic sexual assault nurse examiner, a rape care advocate from the county program established, or designated by the Division on Women in the Department of Children and Families, as provided under section 3 of P.L.2001, c.81 (C.52:4B-51), and a law enforcement official. The response team shall:

(1) respond to a report of sexual assault at the request of a victim of sexual assault pursuant to guidelines established by the Attorney General pursuant to section 17 of P.L.2001, c.81 (C.52:4B-60); and

(2) provide treatment, counseling, legal, and forensic medical services to a victim of sexual assault in accordance with the standard protocols developed by the Attorney General pursuant to subsection d. of section 6 of P.L.1985, c.404 (C.52:4B-44).

b. Each member of the response team shall complete the standardized education and training program developed by the program coordinator pursuant to subsection e. of section 4 of P.L.2001, c.81 (C.52:4B-52).

136. Section 7 of P.L.2001, c.81 (C.52:4B-55) is amended to read as follows:

C.52:4B-55 Sexual Assault Nurse Examiner Program Coordinating Council.

7. a. The Attorney General shall establish a Sexual Assault Nurse Examiner Program Coordinating Council comprised of: the Attorney General, the Director of the Division on Women, the Chief of the Office of Victim-Witness Advocacy, the Executive Director of the New Jersey Coalition Against Sexual Assault, and the Executive Director of the New Jersey Board of Nursing, or their respective designees; a representative from the New Jersey County Prosecutor's Association; and the program coordinators appointed or designated pursuant to section 3 of P.L.2001, c.81 (C.52:4B-51).

The Attorney General, through the sexual assault unit established pursuant to section 8 of P.L.2001, c.81 (C.52:4B-56), and in consultation with the coordinating council, shall oversee the Statewide Sexual Assault Nurse Examiner program and identify and obtain any State and federal funding available to supplement the funds appropriated to operate the program.

b. The coordinating council shall review the effectiveness of the services provided by the State to victims of sexual assault and make recommendations to the Attorney General for any needed changes in the standards, regulations or State policy concerning the provision of victim services.

137. Section 2 of P.L.1961, c.49 (C.52:14-17.26) is amended to read as follows:

C.52:14-17.26 Definitions relative to health care benefits for public employees.

2. As used in P.L.1961, c.49 (C.52:14-17.26 et seq.):

(a) The term "State" means the State of New Jersey.

(b) The term "commission" means the State Health Benefits Commission, created by section 3 of P.L.1961, c.49 (C.52:14-17.27).

(c) (1) The term "employee" means an appointive or elective officer, a full-time employee of the State of New Jersey, or a full-time employee of an employer other than the State who appears on a regular payroll and receives a salary or wages for an average of the number of hours per week as prescribed by the governing body of the participating employer which number of hours worked shall be considered full-time, determined by resolution, and not less than 20.

(2) After the effective date of P.L.2010, c.2, the term "employee" means (i) a full-time appointive or elective officer whose hours of work are

fixed at 35 or more per week, a full-time employee of the State, or a full-time employee of an employer other than the State who appears on a regular payroll and receives a salary or wages for an average of the number of hours per week as prescribed by the governing body of the participating employer which number of hours worked shall be considered full-time, determined by resolution, and not less than 25, or (ii) an appointive or elective officer, an employee of the State, or an employee of an employer other than the State who has or is eligible for health benefits coverage provided under P.L.1961, c.49 (C.52:14-17.25 et seq.) or sections 31 through 41 of P.L.2007, c.103 (C.52:14-17.46.1 et seq.) on that effective date and continuously thereafter provided the officer or employee is covered by the definition in paragraph (1) of this subsection. For the purposes of this act an employee of Rutgers, The State University of New Jersey, shall be deemed to be an employee of the State, and an employee of the New Jersey Institute of Technology shall be considered to be an employee of the State during such time as the Trustees of the Institute are party to a contractual agreement with the State Treasurer for the provision of educational services. The term "employee" shall further mean, for purposes of this act, a former employee of the South Jersey Port Corporation, who is employed by a subsidiary corporation or other corporation, which has been established by the Delaware River Port Authority pursuant to subdivision (m) of Article I of the compact creating the Delaware River Port Authority (R.S.32:3-2), as defined in section 3 of P.L.1997, c.150 (C.34:1B-146), and who is eligible for continued membership in the Public Employees' Retirement System pursuant to subsection j. of section 7 of P.L.1954, c.84 (C.43:15A-7).

For the purposes of this act the term "employee" shall not include persons employed on a short-term, seasonal, intermittent or emergency basis, persons compensated on a fee basis, persons having less than two months of continuous service or persons whose compensation from the State is limited to reimbursement of necessary expenses actually incurred in the discharge of their official duties, provided, however, that the term "employee" shall include persons employed on an intermittent basis to whom the State has agreed to provide coverage under P.L.1961, c.49 (C.52:14-17.25 et seq.) in accordance with a binding collective negotiations agreement. An employee paid on a 10-month basis, pursuant to an annual contract, will be deemed to have satisfied the two-month waiting period if the employee begins employment at the beginning of the contract year. The term "employee" shall also not include retired persons who are otherwise eligible for benefits under this act but who, although they meet the age or disability eligibility requirement of Medicare, are not covered by Medicare Hospital

Insurance, also known as Medicare Part A, and Medicare Medical Insurance, also known as Medicare Part B. A determination by the commission that a person is an eligible employee within the meaning of this act shall be final and shall be binding on all parties.

(d) (1) The term "dependents" means an employee's spouse, partner in a civil union couple or an employee's domestic partner as defined in section 3 of P.L.2003, c.246 (C.26:8A-3), and the employee's unmarried children under the age of 23 years who live with the employee in a regular parent-child relationship. "Children" shall include stepchildren, legally adopted children and children placed by the Division of Child Protection and Permanency in the Department of Children and Families, provided they are reported for coverage and are wholly dependent upon the employee for support and maintenance. A spouse, partner in a civil union couple, domestic partner or child enlisting or inducted into military service shall not be considered a dependent during the military service. The term "dependents" shall not include spouses, partners in a civil union couple or domestic partners of retired persons who are otherwise eligible for the benefits under this act but who, although they meet the age or disability eligibility requirement of Medicare, are not covered by Medicare Hospital Insurance, also known as Medicare Part A, and Medicare Medical Insurance, also known as Medicare Part B.

(2) Notwithstanding the provisions of paragraph (1) of this subsection to the contrary and subject to the provisions of paragraph (3) of this subsection, for the purposes of an employer other than the State that is participating in the State Health Benefits Program pursuant to section 3 of P.L.1964, c.125 (C.52:14-17.34), the term "dependents" means an employee's spouse or partner in a civil union couple and the employee's unmarried children under the age of 23 years who live with the employee in a regular parent-child relationship. "Children" shall include stepchildren, legally adopted children and children placed by the Division of Child Protection and Permanency in the Department of Children and Families provided they are reported for coverage and are wholly dependent upon the employee for support and maintenance. A spouse, partner in a civil union couple or child enlisting or inducted into military service shall not be considered a dependent during the military service. The term "dependents" shall not include spouses or partners in a civil union couple of retired persons who are otherwise eligible for benefits under P.L.1961, c.49 (C.52:14-17.25 et seq.) but who, although they meet the age or disability eligibility requirement of Medicare, are not covered by Medicare Hospital Insurance, also known as Medicare Part A, and Medicare Medical Insurance, also known as Medicare Part B.

(3) An employer other than the State that is participating in the State Health Benefits Program pursuant to section 3 of P.L.1964, c.125 (C.52:14-17.34) may adopt a resolution providing that the term "dependents" as defined in paragraph (2) of this subsection shall include domestic partners as provided in paragraph (1) of this subsection.

(e) The term "carrier" means a voluntary association, corporation or other organization, including a health maintenance organization as defined in section 2 of the "Health Maintenance Organizations Act," P.L.1973, c.337 (C.26:2J-2), which is lawfully engaged in providing or paying for or reimbursing the cost of, personal health services, including hospitalization, medical and surgical services, under insurance policies or contracts, membership or subscription contracts, or the like, in consideration of premiums or other periodic charges payable to the carrier.

(f) The term "hospital" means (1) an institution operated pursuant to law which is primarily engaged in providing on its own premises, for compensation from its patients, medical diagnostic and major surgical facilities for the care and treatment of sick and injured persons on an inpatient basis, and which provides such facilities under the supervision of a staff of physicians and with 24 hour a day nursing service by registered graduate nurses, or (2) an institution not meeting all of the requirements of (1) but which is accredited as a hospital by the Joint Commission on Accreditation of Hospitals. In no event shall the term "hospital" include a convalescent nursing home or any institution or part thereof which is used principally as a convalescent facility, residential center for the treatment and education of children with mental disorders, rest facility, nursing facility or facility for the aged or for the care of drug addicts or alcoholics.

(g) The term "State managed care plan" means a health care plan under which comprehensive health care services and supplies are provided to eligible employees, retirees, and dependents: (1) through a group of doctors and other providers employed by the plan; or (2) through an individual practice association, preferred provider organization, or point of service plan under which services and supplies are furnished to plan participants through a network of doctors and other providers under contracts or agreements with the plan on a prepayment or reimbursement basis and which may provide for payment or reimbursement for services and supplies obtained outside the network. The plan may be provided on an insured basis through contracts with carriers or on a self-insured basis, and may be operated and administered by the State or by carriers under contracts with the State.

(h) The term "Medicare" means the program established by the "Health Insurance for the Aged Act," Title XVIII of the "Social Security Act,"

Pub.L.89-97 (42 U.S.C. s.1395 et seq.), as amended, or its successor plan or plans.

(i) The term "traditional plan" means a health care plan which provides basic benefits, extended basic benefits and major medical expense benefits as set forth in section 5 of P.L.1961, c.49 (C.52:14-17.29) by indemnifying eligible employees, retirees, and dependents for expenses for covered health care services and supplies through payments to providers or reimbursements to participants.

(j) The term "successor plan" means a State managed care plan that shall replace the traditional plan and that shall provide benefits as set forth in subsection (B) of section 5 of P.L.1961, c.49 (C.52:14-17.29) with provisions regarding reimbursements and payments as set forth in paragraph (1) of subsection (C) of section 5 of P.L.1961, c.49 (C.52:14-17.29).

138. Section 1 of P.L.2005, c.347 (C.52:17B-210) is amended to read as follows:

C.52:17B-210 Pamphlet for students relative to pedophile crimes.

1. The Attorney General, in consultation with the New Jersey School Boards Association, the New Jersey Coalition Against Sexual Assault, the New Jersey Education Association, and the Division on Women, shall prepare a pamphlet to educate children about pedophile crimes and how to reduce their chances of becoming victims of pedophile crimes. The pamphlet shall be distributed to all public and private elementary and secondary schools throughout the State. The schools shall reproduce the pamphlet for distribution to students. The pamphlets shall be designed by the Attorney General.

139. Section 2 of P.L.1985, c.66 (C.52:27D-29.15) is amended to read as follows:

C.52:27D-29.15 Intergenerational Child Care Demonstration Matching Program.

2. The Commissioner of Children and Families, in consultation with the Division on Women and the Advisory Council on Child Care established pursuant to section 14 of P.L.1983, c.492 (C.30:5B-14), shall establish an Intergenerational Child Care Demonstration Matching Program in the Division on Aging established pursuant to section 28 of P.L.1966, c.293 (C.52:27D-28) to enable senior residents of the State, 60 years of age or older, to be recruited and matched by a county office on aging so they may render nurturing child care services to pre-school and latchkey children of working parents after school hours.

140. Section 3 of P.L.1985, c.66 (C.52:27D-29.16) is amended to read as follows:

C.52:27D-29.16 Standards relative to program; regulations.

3. a. The Division on Aging, the Division on Women, and the Advisory Council on Child Care shall recommend standards to ensure that the Inter-generational Child Care Demonstration Matching Program is of high quality and benefits both children and older people. Subject to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), the Commissioner of Children and Families shall adopt all regulations necessary to effectuate the purposes of P.L.1985, c.66 (C.52:27D-29.14 et seq.).

b. Any county office on aging that is interested in participating in the program may submit a proposal to the commissioner. The commissioner shall review the proposals and approve the proposals that best meet the purposes of the demonstration program.

141. Section 1 of P.L.1974, c.87 (C.52:27D-43.8) is amended to read as follows:

C.52:27D-43.8 Short title.

1. This act shall be known as, and may be cited as, the "Division on Women Act."

142. Section 2 of P.L.1974, c.87 (C.52:27D-43.9) is amended to read as follows:

C.52:27D-43.9 Division on Women.

2. There is hereby established in the Department of Children and Families a Division on Women. The division shall consist of a director and the New Jersey Advisory Commission on the Status of Women.

C.52:27D-43.9a Division on Women transferred to DCF.

143. a. The Division on Women in the Department of Community Affairs, together with its functions, powers, and duties, is transferred to the Department of Children and Families. All programs, services, and funding maintained and associated with the division in effect during Fiscal Year 2012, and prior to the start of Fiscal Year 2013, shall continue in the division and shall not be altered or diminished by the transfer of the division. The transfer pursuant to this section shall be made in accordance with the provisions of the "State Agency Transfer Act," P.L.1971, c.375 (C.52:14D-1 et seq.).

b. All appropriations and other monies available, and to become available, to the Division on Women in the Department of Community Affairs, transferred to the Department of Children and Families, are continued in the Division on Women in the Department of Children and Families established hereunder and shall be available for the objects and purposes for which these monies are appropriated, subject to the provisions of P.L.2012, c.16 (C.52:27D-43.9a et al.) and any other terms, restrictions, limitations, or other requirements imposed by law.

c. Whenever, in any law, rule, regulation, order, contract, document, judicial, or administrative proceeding or otherwise, reference is made to the Division on Women in the Department of Community Affairs, the same shall mean and refer to the Division on Women in the Department of Children and Families.

144. Section 3 of P.L.1974, c.87 (C.52:27D-43.10) is amended to read as follows:

C.52:27D-43.10 Director of Division on Women.

3. The Director of the Division on Women shall be a person qualified by training and experience to perform the duties of the division. The director shall be appointed by the Governor, by and with the advice and consent of the Senate, and shall serve at the pleasure of the Governor during the Governor's term of office and until the appointment and qualification of a successor. The director shall administer the work of the division under the direction and supervision of the commissioner, and shall perform such other functions of the department as the commissioner may prescribe. The director shall receive such salary as shall be provided by law.

145. Section 5 of P.L.1974, c.87 (C.52:27D-43.12) is amended to read as follows:

C.52:27D-43.12 Duties of director.

5. The Division on Women shall be under the supervision of the director. The director shall:

a. Appoint and remove such professionals, technical, and clerical assistants, and employees, subject to the provisions of Title 11, Civil Service of the Revised Statutes, and other applicable statutes, as may be necessary to enable the division to perform the duties imposed upon it by P.L.1974, c.87 (C.52:27D-43.8 et seq.) and shall fix their compensation within the limits of available appropriations and as shall be provided by law;

b. Select and retain the services of consultants whose advice is considered necessary to assist the division in obtaining information or developing plans and programs required for the performance of the duties and responsibilities of the division as provided by P.L.1974, c.87;

c. Attend all meetings of the New Jersey Advisory Commission on the Status of Women and its committees but shall have no vote. The director may delegate to subordinate officers or employees the responsibility to attend the meetings of the commission.

146. Section 6 of P.L.1974, c.87 (C.52:27D-43.13) is amended to read as follows:

C.52:27D-43.13 Duties of division.

6. The division, under the supervision and leadership of the director, shall:

a. Serve as the central permanent agency for the coordination of programs and services for the women of New Jersey and for the evaluation of the effectiveness of their implementation and as a planning agency for the development of new programs and services;

b. Establish a liaison with all other governmental departments and agencies involved with the enforcement of laws, ordinances, and regulations and with the development of programs affecting the status of women;

c. Request State departments and other public and private agencies on a State, county, and local level to initiate joint efforts to promote the expansion of rights and opportunities available to the women of this State;

d. Cooperate with all Federal and interstate programs and services provided for women;

e. Engage in a continuous study of the changing needs and concerns of women in New Jersey and develop and recommend new programs to the Governor and the Legislature;

f. Consult with, advise, and otherwise provide professional assistance to organized efforts by communities, organizations, associations, and groups which are working toward the goal of improving the status of women;

g. Serve as a clearing house to publish and disseminate information and to provide assistance and direction to women with specific problems and needs;

h. Act as a search committee for the Governor and other executive officers in the State Government for the purpose of discovering and recommending women who are talented and qualified to serve in the Executive Branch of the State Government;

- i. Report annually to the Commissioner of Children and Families and the Governor on its activities and recommendations;
- j. Do all other things necessary to carry out the powers and duties granted under P.L.1974, c.87 (C.52:27D-43.8 et seq.).

147. Section 8 of P.L.1974, c.87 (C.52:27D-43.15) is amended to read as follows:

C.52:27D-43.15 Powers and duties.

8. The commission, acting jointly and as a body, shall advise the Director of the Division on Women on matters referred to it by the director and may originate and make recommendations to the director concerning policies and their implementation. The commission, or any member thereof, may not act in the name of or as an agent of the Division on Women or give instructions to the director or a member of the staff of the division.

148. Section 1 of P.L.2003, c.225 (C.52:27D-43.17a) is amended to read as follows:

C.52:27D-43.17a Definitions relative to domestic violence.

1. As used in this act:

"Board" means the Domestic Violence Fatality and Near Fatality Review Board established pursuant to P.L.2003, c.225 (C.52:27D-43.17a et seq.).

"Domestic violence-related fatality" or "fatality" means a death which arises as a result of one or more acts of domestic violence as defined in section 3 of P.L.1991, c.261 (C.2C:25-19).

"Near fatality" means a case in which a victim of domestic violence is in serious or critical condition, as certified by a physician.

"Panel" means the Panel to Study Domestic Violence in the Law Enforcement Community established pursuant to section 9 of P.L.2003, c.225 (C.52:27D-43.17i).

149. Section 2 of P.L.2003, c.225 (C.52:27D-43.17b) is amended to read as follows:

C.52:27D-43.17b Domestic Violence Fatality and Near Fatality Review Board.

2. There is established the Domestic Violence Fatality and Near Fatality Review Board. For the purposes of complying with the provisions of Article V, Section IV, paragraph 1 of the New Jersey Constitution, the board is established within the Department of Children and Families, but notwithstanding the establishment, the board shall be independent of any supervision or control by the department or any board or officer thereof.

The purpose of the board is to review the facts and circumstances surrounding domestic violence-related fatalities and near fatalities in New Jersey in order to identify their causes and their relationship to government and nongovernment service delivery systems, and to develop methods of prevention. The board shall: review trends and patterns of fatalities and near fatalities; evaluate the responses of government and nongovernment service delivery systems to fatalities and near fatalities and offer recommendations for improvement of these responses; identify and characterize high-risk groups in order to develop public policy; collect statistical data, in a consistent and uniform manner, on the occurrence of fatalities and near fatalities; and improve collaboration between State and local agencies and organizations for the purpose of developing initiatives to prevent domestic violence.

150. Section 3 of P.L.2003, c.225 (C.52:27D-43.17c) is amended to read as follows:

C.52:27D-43.17c Membership of board, terms, compensation.

3. a. The board shall consist of 20 members as follows:

(1) the Commissioners of Community Affairs, Human Services, Children and Families, and Health and Senior Services, the Attorney General, the Public Defender, the Superintendent of the State Police, the Director of the Division of Child Protection and Permanency in the Department of Children and Families, the State Medical Examiner, and the chairperson of the Child Fatality and Near Fatality Review Board, or their designees, who shall serve *ex officio*;

(2) eight public members appointed by the Governor who shall include a representative of the County Prosecutors Association of New Jersey with expertise in prosecuting domestic violence cases, a representative of the New Jersey Coalition for Battered Women, a representative of a program for battered women that provides intervention services to perpetrators of acts of domestic violence, a representative of the law enforcement community with expertise in the area of domestic violence, a psychologist with expertise in the area of domestic violence or other related fields, a licensed social worker with expertise in the area of domestic violence, a licensed health care professional knowledgeable in the screening and identification of domestic violence cases and a county probation officer; and

(3) two retired judges appointed by the Administrative Director of the Administrative Office of the Courts, one with expertise in family law and one with expertise in municipal law as it relates to domestic violence.

b. The public members of the board shall serve for three-year terms, except that of the public members first appointed, four shall serve for a period of one year, three shall serve for a period of two years and two shall serve for a period of three years. The members shall serve without compensation, but shall be eligible for reimbursement for necessary and reasonable expenses incurred in the performance of their official duties and within the limits of funds appropriated for this purpose. Vacancies in the membership of the board shall be filled in the same manner as the original appointments were made.

c. The board shall select a chairperson from among its members who shall be responsible for the coordination of all activities of the board.

d. The board is entitled to call to its assistance and avail itself of the services of employees of any State, county, or municipal department, board, bureau, commission, or agency as it may require and as may be available for the purposes of reviewing a case pursuant to the provisions of P.L.2003, c.225 (C.52:27D-43.17a et seq.).

e. The board may seek the advice of experts, such as persons specializing in the fields of psychiatric and forensic medicine, nursing, psychology, social work, education, law enforcement, family law, academia, military affairs, or other related fields, if the facts of a case warrant additional expertise.

151. Section 2 of P.L.1979, c.125 (C.52:27D-43.19) is amended to read as follows:

C.52:27D-43.19 Definitions.

2. As used in P.L.1979, c.125 (C.52:27D-43.18 et seq.), a "displaced homemaker" is an individual who has not worked in the labor force for a substantial number of years but has, during those years, worked in the home providing unpaid services for family members and has been dependent upon the income of another family member but is no longer supported by that income and:

a. Is receiving public assistance because of dependent children in the home but is within one year of no longer being eligible for assistance; or

b. Is unemployed or underemployed and is experiencing difficulty in obtaining or upgrading employment; or

c. Is at least 40 years of age, an age at which discrimination based on age is likely, and at which entry or reentry to or advancement in the labor market is difficult.

"Commissioner" means the Commissioner of Children and Families.

"Division" shall mean the Division on Women within the Department of Children and Families.

152. Section 3 of P.L.1979, c.125 (C.52:27D-43.20) is amended to read as follows:

C.52:27D-43.20 Displaced homemaker programs, duties of division.

3. The Division on Women in the Department of Children and Families shall identify existing displaced homemaker programs and provide technical assistance and encouragement for the expansion of other multi-purpose programs which provide:

a. Job counseling services which are specifically designed for displaced homemakers, and which aid them in acquiring knowledge of their talents and skills in relation to existing jobs, and which counsel displaced homemakers with respect to appropriate job opportunities.

b. Job training and job placement services which develop, by working with State and local government agencies and private employers, training and placement programs for jobs in the public and private sectors, which assist participants in gaining admission to existing public and private job training programs and opportunities, and which identify community needs and encourage the creation of new jobs in the public and private sectors.

c. Health education and counseling services which cooperate with existing health programs to provide counseling on preventive health care, health care consumer education, family health care and nutrition, alcohol and drug addiction, and overcoming health barriers to employment.

d. Financial management services which provide information and assistance with respect to credit, insurance, taxes, estate and probate problems, mortgages, loans, and other related financial matters.

e. Educational services, including outreach and information about courses offering credit through secondary or post-secondary education programs, and including bilingual programs where appropriate, as well as information about other programs which are determined to be of interest and benefit to displaced homemakers in developing employable skills.

f. Legal counseling and referral services.

g. Outreach and information services with respect to Federal and State employment, education, health, public assistance, and unemployment assistance programs.

153. Section 5 of P.L.1979, c.125 (C.52:27D-43.22) is amended to read as follows:

C.52:27D-43.22 Continuous study of needs of displaced homemakers.

5. The Division on Women within the Department of Children and Families shall make a continuous study of the needs of displaced homemakers, and effective programs and services and funding available to meet those needs. The division shall also coordinate community organizations, women's groups, and public agencies to maximize the utilization of existing programs and resources. The coordination shall include, but not be limited to, the Division on Aging in the Department of Community Affairs, the Office on Women of the Division of Vocational Education in the Department of Education, the Division of Vocational Rehabilitation Services in the Department of Labor and Industry, and the Division of Welfare in the Department of Human Services. The goal of this coordination shall be to put eligible people in touch with existing programs and to foster cooperation and the exchange of information among all departments and agencies of State Government which sponsor programs for which displaced homemakers would be eligible.

154. Section 6 of P.L.1979, c.125 (C.52:27D-43.23) is amended to read as follows:

C.52:27D-43.23 Compilation, maintenance of description, assessment of programs; report.

6. The division shall compile and maintain a description and assessment of each program operating pursuant to P.L.1979, c.125 (C.52:27D-43.18 et seq.), including the number of displaced homemakers served, the number who obtained employment, the number who enrolled in educational courses, the number of those enrolled who completed such educational courses, the cost per displaced homemaker for each program, and the total number of staff and staff ratio to persons served under the program. The report shall be available within one year of the effective date of P.L.1979, c.125.

155. Section 3 of P.L.1993, c.188 (C.52:27D-43.24b) is amended to read as follows:

C.52:27D-43.24b Establishment of trust fund.

3. The Department of Children and Families shall establish a trust fund for the deposit of the fees collected pursuant to section 2 of P.L.1993, c.188 (C.52:27D-43.24a). The moneys from the trust fund shall be used for the specific purpose of providing grants-in-aid to programs for displaced homemakers as identified by the Division on Women in the Department of Children and Families pursuant to section 3 of P.L.1979, c.125 (C.52:27D-43.20).

156. Section 2 of P.L.2005, c.204 (C.52:27D-43.36) is amended to read as follows:

C.52:27D-43.36 Domestic violence public awareness campaign.

2. a. The Director of the Division on Women in the Department of Children and Families, in consultation with the Advisory Council on Domestic Violence and the Commissioners of Human Services and Health and Senior Services, shall establish a domestic violence public awareness campaign in order to promote public awareness of domestic violence among the general public and health care and social services professionals and provide information to assist victims of domestic violence and their children.

b. The public awareness campaign shall include the development and implementation of public awareness and outreach efforts to promote domestic violence prevention and education, including, but not limited to, the following subjects:

- (1) the causes and nature of domestic violence;
- (2) risk factors;
- (3) preventive measures; and

(4) the availability of, and how to access, services in the community for victims of domestic violence, including, but not limited to, shelter services, legal advocacy services, and legal assistance services.

c. The director shall coordinate the efforts of the division with any activities being undertaken by other State agencies to promote public awareness of, and provide information to the public about, domestic violence.

d. The director, within the limits of funds available for this purpose, shall seek to utilize electronic and print media, and may prepare and disseminate such written information as the director deems necessary, to accomplish the purposes of P.L.2005, c.204 (C.52:27D-43.35 et seq.).

e. The division shall make available electronically on its Internet website in English and Spanish information about domestic violence as described in subsection b. of this section.

f. The director may accept, for the purposes of the public awareness campaign, any special grant of funds, services, or property from the federal government or any of its agencies, or from any foundation, organization, or other entity.

g. The director shall report to the Governor and the Legislature, no later than 18 months after the effective date of P.L.2005, c.204 (C.52:27D-43.35 et seq.), on the activities and accomplishments of the public awareness campaign.

157. Section 2 of P.L.1999, c.239 (C.52:27D-444) is amended to read as follows:

C.52:27D-444 Findings, declarations relative to financial assistance to certain women's businesses.

2. The Legislature finds and declares that:

a. Micro-business loans are usually granted to those businesses that are mostly sole proprietorships with five or fewer employees, that require an initial capital outlay of less than \$35,000 to start a new business or expand an existing business, utilize loans in amounts of less than \$15,000 with most loans being paid back on time, and experience a default rate that is often no higher than on commercial loans;

b. Experience in numerous other states and in certain urban areas in New Jersey has shown that "micro lending," or carefully underwriting small loans to individual entrepreneurs with well-developed, realistic business plans, has been successful in helping individuals, without regard to geographical location, to start micro-businesses;

c. Nonprofit community-based development corporations have the experience of providing the training and technical assistance that is necessary for prospective entrepreneurs to establish a viable business;

d. While the New Jersey Economic Development Authority currently manages several programs to promote the development of micro and small businesses in the State and the New Jersey Development Authority for Small Businesses, Minorities' and Women's Enterprises has a peer group micro-lending program in place which targets urban areas of the State, there is a need to establish a separate micro-business credit program to provide new and innovative ways to assist more unemployed women and underemployed women in all areas of the State to enter or reenter the marketplace and to recognize that nonprofit community-based development corporations and certain Statewide women's business organizations have the experience of providing the training and technical assistance that is necessary for prospective entrepreneurs to establish a viable business; and

e. It is appropriate to establish a micro-business credit program that would target only those potential female entrepreneurs who have little or no prior business experience, are self-motivated and are willing to undertake an extensive training program and receive other kinds of technical assistance in order to gain the necessary experience to start a successful business through grants given to certified nonprofit community development corporations and certain Statewide women's business organizations, and the Department of Community Affairs which has experience in evaluating and

monitoring community development corporations is the appropriate State agency to accomplish these goals.

C.30:4C-4.4 Services provided to certain persons with developmental disabilities; rules, procedures; interagency agreement.

158. a. Notwithstanding any law, rule, or regulation to the contrary, commencing on or after the effective date of P.L.2012, c.16 (C.52:27D-43.9a et al.) and subject to the provisions of subsection b. of this section, the Division of Children's System of Care in the Department of Children and Families shall determine eligibility and provide support and services, deemed clinically and functionally appropriate by the Department of Children and Families, as limited by service availability and appropriations and other monies available, and to become available, for persons with developmental disabilities, as defined in section 3 of P.L.1977, c.82 (C.30:6D-3), under 21 years of age. The Division of Children's System of Care shall be responsible for licensing, inspection, and standard-setting with regard to facilities providing services for persons with developmental disabilities under 21 years of age.

With the exception of the services provided to adults over the age of 18 by the Moderate Security Unit, established pursuant to P.L.2006, c.5 (C.30:4-25.13 et seq.), the Division of Developmental Disabilities in the Department of Human Services shall cease providing services for those persons with developmental disabilities under 21 years of age as of the date that the Division of Children's System of Care in Department of Children and Families commences determining eligibility and providing services for these persons, except that, as agreed to by the Department of Children and Families and the Department of Human Services pursuant to subsection b. of this section, the Division of Developmental Disabilities may continue to provide services to individuals under 21 years of age determined eligible for such services prior to the effective date of P.L.2012, c.16 (C.52:27D-43.9a et al.). The Division of Developmental Disabilities may establish rules and procedures for the transition of persons receiving services from the Department of Children and Families to adult services provided by the Division of Developmental Disabilities, including, but not limited to, a re-determination of eligibility for services. There shall not be a presumption of eligibility for persons seeking adult services through the Division of Developmental Disabilities in the Department of Human Services.

The Division of Developmental Disabilities shall retain all responsibility for and authority over the operation of State developmental centers pursuant to R.S.30:1-7.

b. The Commissioner of Human Services and the Commissioner of Children and Families, or the commissioners' designees, shall establish and enter into an inter-agency agreement as necessary for the purposes of subsection a. of this section.

c. The Commissioners of Human Services and Children and Families, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt, notwithstanding any provision of P.L.1968, c.410 (C.52:14B-1 et seq.) to the contrary, immediately upon filing with the Office of Administrative Law, such rules and regulations as the Commissioners deem necessary to effectuate the purposes of section 158 of P.L.2012, c.16 (C.30:4C-4.4), which shall be effective for a period not to exceed 12 months following the effective date of P.L.2012, c.16 (C.52:27D-43.9a et al.). The regulations shall thereafter be amended, adopted, or re-adopted by the commissioners in accordance with the provisions of P.L.1968, c.410 (C.52:14B-1 et seq.).

d. Whenever any current law, rule, regulation, or order, pertaining to persons with developmental disabilities, as defined in section 3 of P.L.1977, c.82 (C.30:6D-3), under 21 years of age refers to the Division of Developmental Disabilities in the Department of Human Services, the same shall mean and refer to the Division of Children's System of Care in the Department of Children and Families.

C.30:4C-4.5 Provision of services for alcoholism, substance abuse for certain persons; interagency agreement; rules, regulations.

159. a. Notwithstanding any law, rule, or regulation to the contrary, commencing on or after the effective date of P.L.2012, c.16 (C.52:27D-43.9a et al.) and subject to the provisions of subsection b. of this section, the Division of Children's System of Care in the Department of Children and Families, in lieu of the Division of Mental Health and Addiction Services in the Department of Human Services, shall provide, manage, and coordinate services for the treatment of alcoholism and substance abuse for persons under 21 years of age, deemed clinically and functionally appropriate by the Department of Children and Families, as limited by service availability and appropriations and other monies available, and to become available, except that, as agreed to by the Department of Children and Families and the Department of Human Services pursuant to subsection b. of this section, the Division of Mental Health and Addiction Services may continue to exclusively provide, manage, and coordinate programs and services designed primarily for adults 18 years of age or older, including, but

not limited to, services provided pursuant to R.S.39:4-50 and the Drug Courts of this State.

b. The Commissioner of Human Services and the Commissioner of Children and Families, or the commissioners' designees, shall establish and enter into an inter-agency agreement as necessary for the purposes of subsection a. of this section.

c. The Commissioners of Human Services and Children and Families, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt, notwithstanding any provision of P.L.1968, c.410 (C.52:14B-1 et seq.) to the contrary, immediately upon filing with the Office of Administrative Law, such rules and regulations as the Commissioners deem necessary to effectuate the purposes of section 159 of P.L.2012, c.16 (C.30:4C-4.5), which shall be effective for a period not to exceed 12 months following the effective date of P.L.2012, c.16 (C.52:27D-43.9a et al.). The regulations shall thereafter be amended, adopted, or readopted by the commissioners in accordance with the provisions of P.L.1968, c.410 (C.52:14B-1 et seq.).

d. Whenever any current law, rule, regulation, or order pertaining to the treatment of alcoholism and substance abuse for persons under 21 years of age refers to the Division of Mental Health and Addiction Services in the Department of Human Services, the same shall mean and refer to the Division of Children's System of Care in the Department of Children and Families, except where the Division of Mental Health and Addiction Services continues to exclusively provide, manage, and coordinate programs and services consistent with this section.

160. This act shall take effect immediately.

Approved June 29, 2012.

CHAPTER 17

AN ACT reorganizing and renaming the Department of Health and Senior Services as the Department of Health, establishing a Division of Aging Services in the Department of Human Services and transferring certain services for senior citizens from the Department of Health and Senior Services to the division, revising various parts of the statutory law, and supplementing Titles 26 and 30 of the Revised Statutes.

BE IT ENACTED *by the Senate and General Assembly of the State of New Jersey*:

1. Section 10 of P.L.2004, c.17 (C.2A:62A-1.3) is amended to read as follows:

C.2A:62A-1.3 Immunity from civil liability for certain health care professionals, certain situations.

10. a. If an individual's actual health care facility duty, including on-call duty, does not require a response to a patient emergency situation, a health care professional who, in good faith, responds to a life-threatening emergency or responds to a request for emergency assistance in a life-threatening emergency within a hospital or other health care facility, is not liable for civil damages as a result of an act or omission in the rendering of emergency care. The immunity granted pursuant to this section shall not apply to acts or omissions constituting gross negligence, recklessness, or willful misconduct.

b. The provisions of subsection a. of this section shall not apply to a health care professional if a provider-patient relationship existed before the emergency, or if consideration in any form is provided to the health care professional for the service rendered.

c. The provisions of subsection a. of this section do not diminish a general hospital's responsibility to comply with all Department of Health licensure requirements concerning medical staff availability at the hospital.

d. A health care professional shall not be liable for civil damages for injury or death caused in an emergency situation occurring in the health care professional's private practice or in a health care facility on account of a failure to inform a patient of the possible consequences of a medical procedure when the failure to inform is caused by any of the following:

(1) the patient was unconscious;

(2) the medical procedure was undertaken without the consent of the patient because the health care professional reasonably believed that the medical procedure should be undertaken immediately and that there was insufficient time to fully inform the patient; or

(3) the medical procedure was performed on a person legally incapable of giving informed consent, and the health care professional reasonably believed that the medical procedure should be undertaken immediately and that there was insufficient time to obtain the informed consent of the person authorized to give such consent for the patient.

The provisions of this subsection shall apply only to actions for damages for an injury or death arising as a result of a health care professional's failure to inform, and not to actions for damages arising as a result of a health care professional's negligence in rendering or failing to render treatment.

e. As used in this section:

(1) "Health care professional" means a physician, dentist, nurse, or other health care professional whose professional practice is regulated pursuant to Title 45 of the Revised Statutes and an emergency medical technician or mobile intensive care paramedic certified by the Commissioner of Health pursuant to Title 26 of the Revised Statutes; and

(2) "Health care facility" means a health care facility licensed by the Department of Health pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) and a psychiatric hospital operated by the Department of Human Services and listed in R.S.30:1-7.

2. N.J.S.2C:35-2 is amended to read as follows:

Definitions.

2C:35-2. As used in this chapter:

"Administer" means the direct application of a controlled dangerous substance or controlled substance analog, whether by injection, inhalation, ingestion, or any other means, to the body of a patient or research subject by: (1) a practitioner (or, in his presence, by his lawfully authorized agent), or (2) the patient or research subject at the lawful direction and in the presence of the practitioner.

"Agent" means an authorized person who acts on behalf of or at the direction of a manufacturer, distributor, or dispenser but does not include a common or contract carrier, public warehouseman, or employee thereof.

"Controlled dangerous substance" means a drug, substance, or immediate precursor in Schedules I through V, any substance the distribution of which is specifically prohibited in N.J.S.2C:35-3, in section 3 of P.L.1997, c.194 (C.2C:35-5.2), in section 5 of P.L.1997, c.194 (C.2C:35-5.3), or in section 2 of P.L.2011, c.120 (C.2C:35-5.3a), and any drug or substance which, when ingested, is metabolized or otherwise becomes a controlled dangerous substance in the human body. When any statute refers to controlled dangerous substances, or to a specific controlled dangerous substance, it shall also be deemed to refer to any drug or substance which, when ingested, is metabolized or otherwise becomes a controlled dangerous substance or the specific controlled dangerous substance, and to any substance that is an immediate precursor of a controlled dangerous substance

or the specific controlled dangerous substance. The term shall not include distilled spirits, wine, malt beverages, as those terms are defined or used in R.S.33:1-1 et seq., or tobacco and tobacco products. The term, wherever it appears in any law or administrative regulation of this State, shall include controlled substance analogs.

"Controlled substance analog" means a substance that has a chemical structure substantially similar to that of a controlled dangerous substance and that was specifically designed to produce an effect substantially similar to that of a controlled dangerous substance. The term shall not include a substance manufactured or distributed in conformance with the provisions of an approved new drug application or an exemption for investigational use within the meaning of section 505 of the "Federal Food, Drug and Cosmetic Act," 52 Stat. 1052 (21 U.S.C. s.355).

"Counterfeit substance" means a controlled dangerous substance or controlled substance analog which, or the container or labeling of which, without authorization, bears the trademark, trade name, or other identifying mark, imprint, number, or device, or any likeness thereof, of a manufacturer, distributor, or dispenser other than the person or persons who in fact manufactured, distributed, or dispensed the substance and which thereby falsely purports or is represented to be the product of, or to have been distributed by, such other manufacturer, distributor, or dispenser.

"Deliver" or "delivery" means the actual, constructive, or attempted transfer from one person to another of a controlled dangerous substance or controlled substance analog, whether or not there is an agency relationship.

"Dispense" means to deliver a controlled dangerous substance or controlled substance analog to an ultimate user or research subject by or pursuant to the lawful order of a practitioner, including the prescribing, administering, packaging, labeling, or compounding necessary to prepare the substance for that delivery. "Dispenser" means a practitioner who dispenses.

"Distribute" means to deliver other than by administering or dispensing a controlled dangerous substance or controlled substance analog. "Distributor" means a person who distributes.

"Drugs" means (a) substances recognized in the official United States Pharmacopoeia, official Homeopathic Pharmacopoeia of the United States, or official National Formulary, or any supplement to any of them; and (b) substances intended for use in the diagnosis, cure, mitigation, treatment, or prevention of disease in man or other animals; and (c) substances (other than food) intended to affect the structure or any function of the body of man or other animals; and (d) substances intended for use as a component

of any article specified in subsections (a), (b), and (c) of this section; but does not include devices or their components, parts, or accessories.

"Drug or alcohol dependent person" means a person who as a result of using a controlled dangerous substance or controlled substance analog or alcohol has been in a state of psychic or physical dependence, or both, arising from the use of that controlled dangerous substance or controlled substance analog or alcohol on a continuous or repetitive basis. Drug or alcohol dependence is characterized by behavioral and other responses, including but not limited to a strong compulsion to take the substance on a recurring basis in order to experience its psychic effects, or to avoid the discomfort of its absence.

"Hashish" means the resin extracted from any part of the plant Genus Cannabis L. and any compound, manufacture, salt, derivative, mixture, or preparation of such resin.

"Manufacture" means the production, preparation, propagation, compounding, conversion, or processing of a controlled dangerous substance or controlled substance analog, either directly or by extraction from substances of natural origin, or independently by means of chemical synthesis, or by a combination of extraction and chemical synthesis, and includes any packaging or repackaging of the substance or labeling or relabeling of its container, except that this term does not include the preparation or compounding of a controlled dangerous substance or controlled substance analog by an individual for his own use or the preparation, compounding, packaging, or labeling of a controlled dangerous substance: (1) by a practitioner as an incident to his administering or dispensing of a controlled dangerous substance or controlled substance analog in the course of his professional practice, or (2) by a practitioner (or under his supervision) for the purpose of, or as an incident to, research, teaching, or chemical analysis and not for sale.

"Marijuana" means all parts of the plant Genus Cannabis L., whether growing or not; the seeds thereof, and every compound, manufacture, salt, derivative, mixture, or preparation of the plant or its seeds, except those containing resin extracted from the plant; but shall not include the mature stalks of the plant, fiber produced from the stalks, oil, or cake made from the seeds of the plant, any other compound, manufacture, salt, derivative, mixture, or preparation of mature stalks, fiber, oil, or cake, or the sterilized seed of the plant which is incapable of germination.

"Narcotic drug" means any of the following, whether produced directly or indirectly by extraction from substances of vegetable origin, or independently by means of chemical synthesis, or by a combination of extraction and chemical synthesis:

- (a) Opium, coca leaves, and opiates;
- (b) A compound, manufacture, salt, derivative, or preparation of opium, coca leaves, or opiates;

(c) A substance (and any compound, manufacture, salt, derivative, or preparation thereof) which is chemically identical with any of the substances referred to in subsections (a) and (b), except that the words "narcotic drug" as used in this act shall not include decocainized coca leaves or extracts of coca leaves, which extracts do not contain cocaine or ecogine.

"Opiate" means any dangerous substance having an addiction-forming or addiction-sustaining liability similar to morphine or being capable of conversion into a drug having such addiction-forming or addiction-sustaining liability. It does not include, unless specifically designated as controlled pursuant to the provisions of section 3 of P.L.1970, c.226 (C.24:21-3), the dextrorotatory isomer of 3-methoxy-n-methylmorphinan and its salts (dextromethorphan). It does include its racemic and levorotatory forms.

"Opium poppy" means the plant of the species *Papaver somniferum* L., except the seeds thereof.

"Person" means any corporation, association, partnership, trust, other institution or entity, or one or more individuals.

"Plant" means an organism having leaves and a readily observable root formation, including, but not limited to, a cutting having roots, a rootball or root hairs.

"Poppy straw" means all parts, except the seeds, of the opium poppy, after mowing.

"Practitioner" means a physician, dentist, veterinarian, scientific investigator, laboratory, pharmacy, hospital, or other person licensed, registered, or otherwise permitted to distribute, dispense, conduct research with respect to, or administer a controlled dangerous substance or controlled substance analog in the course of professional practice or research in this State.

(a) "Physician" means a physician authorized by law to practice medicine in this or any other state and any other person authorized by law to treat sick and injured human beings in this or any other state.

(b) "Veterinarian" means a veterinarian authorized by law to practice veterinary medicine in this State.

(c) "Dentist" means a dentist authorized by law to practice dentistry in this State.

(d) "Hospital" means any federal institution, or any institution for the care and treatment of the sick and injured, operated or approved by the appropriate State department as proper to be entrusted with the custody and professional use of controlled dangerous substances or controlled substance analogs.

(e) "Laboratory" means a laboratory to be entrusted with the custody of narcotic drugs and the use of controlled dangerous substances or controlled substance analogs for scientific, experimental, and medical purposes and for purposes of instruction approved by the Department of Health.

"Production" includes the manufacture, planting, cultivation, growing, or harvesting of a controlled dangerous substance or controlled substance analog.

"Immediate precursor" means a substance which the Division of Consumer Affairs in the Department of Law and Public Safety has found to be and by regulation designates as being the principal compound commonly used or produced primarily for use, and which is an immediate chemical intermediary used or likely to be used in the manufacture of a controlled dangerous substance or controlled substance analog, the control of which is necessary to prevent, curtail, or limit such manufacture.

"Residential treatment facility" means any facility licensed and approved by the Department of Human Services and which is approved by any county probation department for the inpatient treatment and rehabilitation of drug or alcohol dependent persons.

"Schedules I, II, III, IV, and V" are the schedules set forth in sections 5 through 8 of P.L.1970, c.226 (C.24:21-5 through 24:21-8) and in section 4 of P.L.1971, c.3 (C.24:21-8.1) and as modified by any regulations issued by the Director of the Division of Consumer Affairs in the Department of Law and Public Safety pursuant to the director's authority as provided in section 3 of P.L.1970, c.226 (C.24:21-3).

"State" means the State of New Jersey.

"Ultimate user" means a person who lawfully possesses a controlled dangerous substance or controlled substance analog for his own use or for the use of a member of his household or for administration to an animal owned by him or by a member of his household.

"Prescription legend drug" means any drug which under federal or State law requires dispensing by prescription or order of a licensed physician, veterinarian, or dentist and is required to bear the statement "Rx only" or similar wording indicating that such drug may be sold or dispensed only upon the prescription of a licensed medical practitioner and is not a controlled dangerous substance or stramonium preparation.

"Stramonium preparation" means a substance prepared from any part of the stramonium plant in the form of a powder, pipe mixture, cigarette, or any other form with or without other ingredients.

"Stramonium plant" means the plant *Datura Stramonium* Linne, including *Datura Tatula* Linne.

3. Section 6 of P.L.1999, c.90 (C.2C:36-6.1) is amended to read as follows:

C.2C:36-6.1 Discarding hypodermic needle or syringe.

6. Discarding hypodermic needle or syringe.

a. A person commits a petty disorderly persons offense if:

(1) the person discards, in a place accessible to other persons, a hypodermic needle or syringe without destroying the hypodermic needle or syringe; or

(2) he is the owner, lessee, or person in control of real property and, knowing that needles and syringes in an intact condition have been discarded or abandoned on his real property, allows them to remain.

b. A hypodermic needle is destroyed if the needle is broken from the hub or mangled. A syringe is destroyed if the nipple of the barrel is broken from the barrel, or the plunger and barrel are melted. Alternatively, a hypodermic needle or syringe is destroyed if it is discarded as a single unit, without recapping, into a rigid container and the container is destroyed by grinding or crushing in a compactor, or by burning in an incinerator approved by the Department of Environmental Protection, or by another method approved by the Department of Health.

4. Section 1 of P.L.2011, c.183 (C.2C:36-6.2) is amended to read as follows:

C.2C:36-6.2 Sale by licensed pharmacy of hypodermic syringe or needle under certain circumstances.

1. a. Notwithstanding any State law, rule, or regulation to the contrary, a licensed pharmacy may sell a hypodermic syringe or needle, or any other instrument adapted for the administration of drugs by injection, to a person over 18 years of age who presents valid photo identification to demonstrate proof of age or who otherwise satisfies the seller that he is over 18 years of age, as follows:

(1) without a prescription if sold in quantities of 10 or fewer; and

(2) pursuant to a prescription issued by a person authorized to prescribe under State law if sold in quantities of more than 10.

b. A licensed pharmacy that provides hypodermic syringes or needles for sale shall also be required to:

(1) maintain its supply of such instruments under or behind the pharmacy sales counter such that they are accessible only to a person standing behind a pharmacy sales counter; and

(2) make available to each person who purchases any such instrument, at the time of purchase, information to be developed by the Department of Health to the purchaser, about:

(a) the safe disposal of the instrument, including local disposal locations or a telephone number to call for that information; and

(b) substance abuse treatment, including a telephone number to call for assistance in obtaining treatment.

c. In addition to any other provision of law that may apply, a person who purchases a hypodermic syringe or needle pursuant to subsection a. of this section and sells that needle or syringe to another person is guilty of a disorderly persons offense.

d. The Department of Health, in consultation with the Department of Human Services and the New Jersey State Board of Pharmacy, may, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), adopt rules and regulations to effectuate the purposes of subsection b. of this section. The Department of Health shall make the information that is to be developed pursuant to subsection b. of this section available to pharmacies and purchasers of hypodermic syringes or needles through its Internet website.

5. Section 8 of P.L.1941, c.151 (C.4:19-15.8) is amended to read as follows:

C.4:19-15.8 Licensing of kennel, pet shop, shelter, pound.

8. a. Any person who keeps or operates or proposes to establish a kennel, a pet shop, a shelter or a pound shall apply to the clerk or other official designated to license dogs in the municipality where such establishment is located, for a license entitling him to keep or operate such establishment.

The application shall describe the premises where the establishment is located or is proposed to be located, the purpose or purposes for which it is to be maintained, and shall be accompanied by the written approval of the local municipal and health authorities showing compliance with the local and State rules and regulations governing location of and sanitation at such establishments.

b. All licenses issued for a kennel, pet shop, shelter, or pound shall state the purpose for which the establishment is maintained, and all licenses shall expire on the last day of June of each year, and be subject to revocation by the municipality on recommendation of the Department of Health or the local board of health for failure to comply with the rules and regulations of the State department or local board governing the same, after the owner has been afforded a hearing by either the State department or local board, except as provided in subsection c. of this section.

Any person holding a license shall not be required to secure individual licenses for dogs owned by a licensee and kept at the establishments; the licenses shall not be transferable to another owner or different premises.

c. The license for a pet shop shall be subject to review by the municipality, upon recommendation by the Department of Health or the local health authority for failure by the pet shop to comply with the rules and regulations of the State department or local health authority governing pet shops or if the pet shop meets the criteria for recommended suspension or revocation provided under subsection c. or d. of section 5 of P.L.1999, c.336 (C.56:8-96), after the owner of the pet shop has been afforded a hearing pursuant to subsection e. of section 5 of P.L.1999, c.336 (C.56:8-96).

The municipality, based on the criteria for the recommendation of the local health authority provided under subsections c. and d. of section 5 of P.L.1999, c.336 (C.56:8-96), may suspend the license for 90 days or may revoke the license if it is determined at the hearing that the pet shop: (1) failed to maintain proper hygiene and exercise reasonable care in safeguarding the health of animals in its custody or (2) sold a substantial number of animals that the pet shop knew, or reasonably should have known, to be unfit for purchase.

d. The municipality may issue a license for a pet shop that permits the pet shop to sell pet supplies for all types of animals, including cats and dogs, and sell animals other than cats and dogs but restricts the pet shop from selling cats or dogs, or both.

e. Every pet shop licensed in the State shall submit annually and no later than May 1 of each year records of the total number of cats and dogs, respectively, sold by the pet shop each year to the municipality in which it is located, and the municipality shall provide this information to the local health authority.

6. Section 12 of P.L.1941, c.151 (C.4:19-15.12) is amended to read as follows:

C.4:19-15.12 Fee for dog license.

12. a. The governing body of each municipality may, by ordinance, fix the sum to be paid annually for a dog license and each renewal thereof, as required by section 3 of this act, which sum shall be not less than \$1.50 or more than \$21; provided however, that the governing body may by ordinance, provide for a reduction or waiver of the sum to be paid by an owner who presents a certificate signed by a licensed veterinarian stating that the

dog has been spayed or neutered. In the absence of any local ordinance, the fee for all dog licenses shall be \$1.50.

b. The governing body of each municipality, may, by ordinance, fix the sum to be paid for a 3-year dog license and each renewal thereof, which sum shall be not more than 3 times the sum charged for an annual license under subsection a. of this section. In the absence of such a local ordinance, the license fee for a 3-year dog license shall be \$4.50. The Department of Health shall promulgate appropriate regulations concerning veterinarians' certificates for rabies inoculations of dogs for 3-year periods in connection with licenses issued under this subsection.

7. Section 16 of P.L.1941, c.151 (C.4:19-15.16) is amended to read as follows:

C.4:19-15.16 Unclaimed dogs or other animals to be euthanized, offered for adoption.

16. a. The certified animal control officer appointed by the governing body of the municipality shall take into custody and impound any animal, to thereafter be euthanized or offered for adoption, as provided in this section:

(1) Any dog off the premises of the owner or of the person charged with the care of the dog, which is reasonably believed to be a stray dog;

(2) Any dog off the premises of the owner or the person charged with the care of the dog without a current registration tag on its collar or elsewhere;

(3) Any female dog in season off the premises of the owner or the person charged with the care of the dog;

(4) Any dog or other animal which is suspected to be rabid; or

(5) Any dog or other animal off the premises of the owner or the person charged with its care that is reported to, or observed by, a certified animal control officer to be ill, injured, or creating a threat to public health, safety, or welfare, or otherwise interfering with the enjoyment of property.

b. If an animal taken into custody and impounded pursuant to subsection a. of this section has a collar or harness with identification of the name and address of any person, or has a registration tag, or has a microchip with an identification number that can be traced to the owner or person charged with the care of the animal, or the owner or the person charged with the care of the animal is otherwise known, the certified animal control officer shall ascertain the name and address of the owner or the person charged with the care of the animal, and serve to the identified person as soon as practicable, a notice in writing that the animal has been seized and will be liable to be offered for adoption or euthanized if not claimed within seven days after the service of the notice.

c. A notice required pursuant to this section may be served: (1) by delivering it to the person on whom it is to be served, or by leaving it at the person's usual or last known place of residence or the address given on the collar, harness, or microchip identification; or (2) by mailing the notice to that person at the person's usual or last known place of residence, or to the address given on the collar, harness or microchip identification.

d. A shelter, pound, or kennel operating as a shelter or pound receiving an animal from a certified animal control officer pursuant to subsection a. of this section, or from any other individual, group, or organization, shall hold the animal for at least seven days before offering it for adoption, or euthanizing, relocating, or sterilizing the animal, except if:

(1) the animal is surrendered voluntarily by its owner to the shelter, pound, or kennel operating as a shelter or pound, in which case the provisions of subsection e. of this section shall apply; or

(2) the animal is suspected of being rabid, in which case the provisions of subsection j. of this section shall apply.

e. If a shelter, pound or kennel operating as a shelter or pound is not required to hold an animal for at least seven days pursuant to paragraph (1) of subsection d. of this section, the shelter, pound, or kennel operating as a shelter or pound:

(1) shall offer the animal for adoption for at least seven days before euthanizing it; or

(2) may transfer the animal to an animal rescue organization facility or a foster home prior to offering it for adoption if such a transfer is determined to be in the best interest of the animal by the shelter, pound, or kennel operating as a shelter or pound.

f. Except as otherwise provided for under subsection e. of this section, no shelter, pound, or kennel operating as a shelter or pound receiving an animal from a certified animal control officer may transfer the animal to an animal rescue organization facility or a foster home until the shelter, pound, or kennel operating as a shelter or pound has held the animal for at least seven days.

g. If the owner or the person charged with the care of the animal seeks to claim it within seven days, or after the seven days have elapsed but before the animal has been adopted or euthanized, the shelter, pound, or kennel operating as a shelter or pound:

(1) shall, in the case of a cat or dog, release it to the owner or person charged with its care, provided the owner or person charged with the care of the animal provides proof of ownership, which may include a valid cat or dog license, registration, rabies inoculation certificate, or documentation

from the owner's veterinarian that the cat or dog has received regular care from that veterinarian;

(2) may, in the case of a cat or dog, charge the cost of sterilizing the cat or dog, if the owner requests such sterilizing when claiming it; and

(3) may require the owner or person charged with the care of the animal to pay all the animal's expenses while in the care of the shelter, pound, or kennel operating as a shelter or pound, not to exceed \$4 per day.

h. If the animal remains unclaimed, is not claimed due to the failure of the owner or other person to comply with the requirements of this section, or is not adopted after seven days after the date on which notice is served pursuant to subsection c. of this section or, if no notice can be served, not less than seven days after the date on which the animal was impounded, the impounded animal may be placed in a foster home, transferred to another shelter, pound, kennel operating as a shelter or pound, or animal rescue organization facility, or euthanized in a manner causing as little pain as possible and consistent with the provisions of R.S.4:22-19.

i. At the time of adoption, the right of ownership in the animal shall transfer to the new owner. No dog or other animal taken into custody, impounded, sent or otherwise brought to a shelter, pound, or kennel operating as a shelter or pound shall be sold or otherwise be made available for the purpose of experimentation. Any person who sells or otherwise makes available any such dog or other animal for the purpose of experimentation shall be guilty of a crime of the fourth degree.

j. Any animal seized under this section suspected of being rabid shall be immediately reported to the executive officer of the local board of health and to the Department of Health, and shall be quarantined, observed, and otherwise handled and dealt with as appropriate for an animal suspected of being rabid or as required by the Department of Health for the animals.

k. When a certified animal control officer takes into custody and impounds, or causes to be taken into custody and impounded, an animal, the certified animal control officer may place the animal in the custody of, or cause the animal to be placed in the custody of, only a licensed shelter, pound, or kennel operating as a shelter or pound. The certified animal control officer may not place the animal in the custody of, or cause the animal to be placed in the custody of, any animal rescue organization facility, foster home, or other unlicensed facility. However, the licensed shelter, pound, or kennel operating as a shelter or pound may place the animal in an animal rescue organization facility, foster home, or other unlicensed facility if necessary pursuant to subsection e. or h. of this section.

1. Notwithstanding the provisions of this section and sections 3 and 4 of P.L.2011, c.142 (C.4:19-15.30 and C.4:19-15.31) to the contrary, no cat or dog being transferred between shelters, pounds, or kennels operating as shelters or pounds, or being transferred to an animal rescue organization facility or placed in a foster home, shall be required to be sterilized prior to that transfer.

8. Section 3 of P.L.1983, c.525 (C.4:19-15.16a) is amended to read as follows:

C.4:19-15.16a Rules, regulations concerning training, educational qualifications for animal control officers.

3. a. The Commissioner of Health shall, within 120 days after the effective date of P.L.1983, c.525, and pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), adopt rules and regulations concerning the training and educational qualifications for the certification of animal control officers, including, but not limited to, a course of study approved by the commissioner and the Police Training Commission, in consultation with the New Jersey Certified Animal Control Officers Association, which acquaints a person with:

(1) The law as it affects animal control, animal welfare, and animal cruelty;

(2) Animal behavior and the handling of stray or diseased animals;

(3) Community safety as it relates to animal control; and

(4) The law enforcement methods and techniques required for an animal control officer to properly exercise the authority to investigate and sign complaints and arrest without warrant pursuant to section 8 of P.L.1997, c.247 (C.4:19-15.16c), including, but not limited to, those methods and techniques which relate to search, seizure, and arrest. The training in law enforcement methods and techniques described pursuant to this paragraph shall be part of the course of study for an animal control officer only when required by the governing body of a municipality pursuant to section 4 of P.L.1983, c.525 (C.4:19-15.16b).

Any person 18 years of age or older may satisfy the courses of study established pursuant to this subsection at that person's own time and expense; however, nothing in this section shall be construed as authorizing a person to exercise the powers and duties of an animal control officer absent municipal appointment or authorization pursuant to section 4 of P.L.1983, c.525 (C.4:19-15.16b).

b. (1) The commissioner shall provide for the issuance of a certificate to a person who possesses, or acquires, the training and education required to qualify as a certified animal control officer pursuant to paragraphs (1) through (3) of subsection a. of this section and to a person who has been employed in the State of New Jersey in the capacity of, and with similar responsibilities to those required of, a certified animal control officer pursuant to the provisions of P.L.1983, c.525, for a period of three years before January 17, 1987. The commissioner shall not issue a certificate to any person convicted of, or found civilly liable for, a violation of any provision of chapter 22 of Title 4 of the Revised Statutes.

(2) The commissioner shall revoke the certificate of any person convicted of, or found civilly liable for, a violation of any provision of chapter 22 of Title 4 of the Revised Statutes, and shall place the name of the person on the list established pursuant to subsection c. of this section.

c. (1) The commissioner shall establish a list of all persons issued a certificate pursuant to subsection b. of this section (a) for whom that certificate has been revoked, or (b) who have been convicted of, or found civilly liable for, a violation of any provision of chapter 22 of Title 4 of the Revised Statutes. The commissioner shall provide each municipality in the State with a copy of this list within 30 days after the list is established and not less often than annually thereafter if no revised list required pursuant to paragraph (2) of this subsection has been issued in the interim.

(2) Upon receipt of a notice required pursuant to section 3 or 4 of P.L.2003, c.67 (C.4:22-57 or C.2B:12-17.1) involving a person who has been issued a certificate pursuant to subsection b. of this section, the commissioner shall add to the list the name of the person convicted of, or found civilly liable for, a violation of any provision of chapter 22 of Title 4 of the Revised Statutes according to the notice, and shall issue a copy of the revised list to each municipality within 30 days after receipt of any notice.

9. Section 4 of P.L.1983, c.525 (C.4:19-15.16b) is amended to read as follows:

C.4:19-15.16b Appointment of certified animal control officer.

4. The governing body of a municipality shall, within three years of the effective date of P.L.1983, c.525, appoint a certified animal control officer who shall be responsible for animal control within the jurisdiction of the municipality and who shall enforce and abide by the provisions of section 16 of P.L.1941, c.151 (C.4:19-15.16). The governing body shall not appoint a certified animal control officer, shall not contract for animal con-

trol services with any company that employs a certified animal control officer, and shall revoke the appointment of a certified animal control officer, who has been convicted of, or found civilly liable for, a violation of any provision of chapter 22 of Title 4 of the Revised Statutes or whose name is on the list or any revision thereto established and provided by the Commissioner of Health pursuant to subsection c. of section 3 of P.L.1983, c.525 (C.4:19-15.16a). The governing body shall, within 30 days after receipt thereof, review any such list or revision thereto received by the municipality and shall, within that 30-day period, take action accordingly as required pursuant to this section.

The governing body may authorize the certified animal control officer to investigate and sign complaints, arrest violators, and otherwise act as an officer for detection, apprehension, and arrest of offenders against the animal control, animal welfare and animal cruelty laws of the State, and ordinances of the municipality, if the officer has completed the training required pursuant to paragraph 4 of subsection a. of section 3 of P.L.1983, c.525 (C.4:19-15.16a). Only certified animal control officers who have completed the training may be authorized by the governing body to so act as an officer for detection, apprehension, and arrest of offenders; however, officers who have completed the training shall not have the authority to so act unless authorized by the governing body which is employing the officer or contracting for the officer's services.

10. Section 19 of P.L.1941, c.151 (C.4:19-15.19) is amended to read as follows:

C.4:19-15.19 Violations of act or rules; penalty.

19. Except as otherwise provided in this act, any person who violates or who fails or refuses to comply with sections 2, 4, 6, 7, 8, 10, or 18 of this act or the rules and regulations promulgated by the Department of Health pursuant to section 14 of this act, shall be liable to a penalty of not less than \$5.00 nor more than \$50 for each offense, to be recovered by and in the name of the Commissioner of Health, or by and in the name of the local board of health of the municipality, or by and in the name of the municipality, as the case may be, except that for the first offense in cases of violations of sections 2, 4, and 6 of this act, the penalty shall be not less than \$1.00 nor more than \$50, to be recovered in the same manner.

11. Section 20 of P.L.1941, c.151 (C.4:19-15.20) is amended to read as follows:

C.4:19-15.20 Penalty to be paid to plaintiff; disposition.

20. Any penalty recovered in an action brought under the provisions of this act shall be paid to the plaintiff therein. When the plaintiff is the Commissioner of Health, the penalty shall be paid by the commissioner into the treasury of the State. When the plaintiff is a local board of health the penalty shall be paid by the local board into the treasury of the municipality within which the local board has jurisdiction.

12. Section 3 of P.L.2011, c.142 (C.4:19-15.30) is amended to read as follows:

C.4:19-15.30 "Pet Sterilization Pilot Program."

3. a. The Department of Health shall develop and establish a pilot program to be known as the "Pet Sterilization Pilot Program." The pilot program shall operate in any county with significant animal overpopulation issues that is selected for the program by the Commissioner of Health and agrees to participate in the program. Upon the county's agreement to participate, every shelter, pound, and kennel operating as a shelter or pound in the county shall participate in the pilot program.

b. A shelter, pound, or kennel operating as a shelter or pound in a county participating in the pilot program established under subsection a. of this section shall require every cat or dog to be sterilized before releasing it to a person adopting a cat or dog from the shelter, pound, or kennel operating as a shelter or pound when adoption is permitted pursuant to section 16 of P.L.1941, c.151 (C.4:19-15.16), except as provided under section 4 of P.L.2011, c.142 (C.4:19-15.31). The shelter, pound, or kennel operating as a shelter or pound may charge the person adopting the animal the cost of sterilization.

c. The pilot program shall operate for a period of at least two years. No later than two years after the pilot program is established and becomes operative, the Commissioner of Health shall submit a written report to the Governor and, pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1), to the Legislature. The report shall contain information on the implementation of the pilot program and shall include the recommendation of the commissioner on the feasibility of implementing the pilot program on a Statewide basis.

13. Section 6 of P.L.2011, c.142 (C.4:19-15.33) is amended to read as follows:

C4:19-15.33 Registry of animal rescue organizations, facilities.

6. a. The Department of Health shall establish a registry of animal rescue organizations and their facilities in the State. Any animal rescue organization may voluntarily participate in the registry.

b. The department, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), may adopt any rules and regulations determined necessary to implement the voluntary registry and coordinate its use with the provisions of P.L.2011, c.142 (C.4:19-15.30 et al.) and section 16 of P.L.1941, c.151 (C.4:19-15.16).

14. Section 4 of P.L.2002, c.102 (C.4:19-41) is amended to read as follows:

C4:19-41 Statement filed by veterinarian.

4. Whenever a duly licensed veterinarian surgically debarks or silences a dog, the veterinarian shall prepare and file a written statement with the Department of Health setting forth the veterinary basis for administering the surgery and providing the name and address of the owner, keeper or harbinger of the debarked or silenced dog. A veterinarian who fails to comply with the provisions of this section shall be subject to disciplinary action by the State Board of Veterinary Medical Examiners.

15. Section 15 of P.L.1997, c.236 (C.4:27-15) is amended to read as follows:

C4:27-15 Aquaculture statistics, reporting assistance programs.

15. The Department of Agriculture:

a. in consultation with the Aquaculture Technology Transfer Center, the Rutgers Cooperative Extension and the Department of Environmental Protection, shall implement an aquaculture statistics reporting program which may include the collection of information on the numbers of jobs being created in aquaculture, the amount, value and type of product being produced, and the overall economic activity in the aquaculture industry;

b. in consultation with the Aquaculture Technology Transfer Center, and the Rutgers Cooperative Extension, shall assist aquaculturists in obtaining coverage from federal crop insurance programs;

c. in consultation with the Aquaculture Technology Transfer Center and the Rutgers Cooperative Extension, shall assist aquaculturists in completing the proper paperwork and other information necessary to develop eligibility for economic emergency loans for disaster relief through the Farmers Services Agency and other programs;

d. in consultation with the United States Department of Agriculture and the National Association of State Aquaculture Coordinators, shall develop a monthly wholesale market report for aquaculture products;

e. in conjunction with the Aquaculture Technology Transfer Center and the Department of Health, shall assist the aquaculture industry in the development of necessary quality control guidelines and specifications for production, processing, and marketing of aquaculture products;

f. in conjunction with the Aquaculture Technology Transfer Center, shall assist (1) the aquaculture industry in promoting its products through techniques that may include the establishment and use of a trademark and other specialized marketing efforts; and (2) aquaculturists interested in developing coordinated efforts or arrangements, including producer cooperatives, joint ventures, market orders, and other forms of association; and

g. in conjunction with the Department of Health, the Department of Commerce and Economic Development, the Department of Environmental Protection shall explore the possibilities of establishing private sector joint processing facilities to accommodate agriculture, seafood, and aquaculture products.

16. Section 2 of P.L.2001, c.39 (C.5:12-71.3) is amended to read as follows:

C.5:12-71.3 Penalties for gaming by prohibited persons.

2. a. A person who is prohibited from gaming in a licensed casino or simulcasting facility by any provision of P.L.1977, c.110 (C.5:12-1 et seq.) or any order of the director, commission, or court of competent jurisdiction, including any person on the self-exclusion list pursuant to section 1 of P.L.2001, c.39 (C.5:12-71.2), shall not collect, in any manner or proceeding, any winnings or recover any losses arising as a result of any prohibited gaming activity.

b. For the purposes of P.L.1977, c.110 (C.5:12-1 et seq.), any gaming activity in a licensed casino or simulcasting facility which results in a prohibited person obtaining any money or thing of value from, or being owed any money or thing of value by, the casino or simulcasting facility shall be considered, solely for purposes of this section, to be a fully executed gambling transaction.

c. In addition to any other penalty provided by law, any money or thing of value which has been obtained by, or is owed to, any prohibited person by a licensed casino or simulcasting facility as a result of wagers made by a prohibited person shall be subject to forfeiture following notice to the prohibited person and opportunity to be heard. A licensed casino or

simulcasting facility shall inform a prohibited person of the availability of such notice on the division's Internet website when ejecting the prohibited person and seizing any chips, vouchers or other representative of money owed by a casino to the prohibited person as authorized by this subsection.

Of any forfeited amount under \$100,000, one-half shall be deposited into the State General Fund for appropriation by the Legislature to the Department of Human Services to provide funds for compulsive gambling treatment and prevention programs in the State and the remaining one-half shall be deposited into the Casino Revenue Fund. Of any forfeited amount of \$100,000 or more, \$50,000 shall be deposited into the State General Fund for appropriation by the Legislature to the Department of Human Services to provide funds for compulsive gambling treatment and prevention programs and the remainder shall be deposited into the Casino Revenue Fund.

d. In any proceeding brought by the division against a licensee or registrant pursuant to section 108 of P.L.1977, c.110 (C.5:12-108) for a willful violation of the commission's self-exclusion regulations, the division may order, in addition to any other sanction authorized by section 129 of P.L.1977, c.110 (C.5:12-129), the forfeiture of any money or thing of value obtained by the licensee or registrant from any self-excluded person. Any money or thing of value so forfeited shall be disposed of in the same manner as any money or thing of value forfeited pursuant to subsection c. of this section.

17. Section 145 of P.L.1977, c.110 (C.5:12-145) is amended to read as follows:

C.5:12-145 "Casino Revenue Fund."

145. a. There is hereby created and established in the Department of the Treasury a separate special account to be known as the "Casino Revenue Fund," into which shall be deposited all revenues from the tax imposed by section 144 of this act; the investment alternative tax imposed by section 3 of P.L.1984, c.218 (C.5:12-144.1); the taxes and fees imposed by sections 3, 4 and 6 of P.L.2003, c.116 (C.5:12-148.1, C.5:12-148.2 and C.5:12-145.8) and any interest and penalties imposed by the division relating to those taxes; the percentage of the value of expired gaming related obligations pursuant to section 24 of P.L.2009, c.36 (C.5:12-141.2); and all penalties levied and collected by the division pursuant to P.L.1977, c.110 (C.5:12-1 et seq.) and the regulations promulgated thereunder, except that the first \$600,000 in penalties collected each fiscal year shall be paid into the General Fund for appropriation by the Legislature to the Department of Human Services, \$500,000 of which is to provide funds to the Council on

Compulsive Gambling of New Jersey and \$100,000 of which is to provide funds for compulsive gambling treatment programs in the State. In the event that less than \$600,000 in penalties are collected, the Department of Human Services shall determine the allocation of funds between the Council and the treatment programs eligible under the criteria developed pursuant to section 2 of P.L.1993, c.229 (C.26:2-169).

b. The division shall require at least monthly deposits by the licensee of the tax established pursuant to subsection a. of section 144 of P.L.1977, c.110 (C.5:12-144), at such times, under such conditions, and in such depositories as shall be prescribed by the State Treasurer. The deposits shall be deposited to the credit of the Casino Revenue Fund. The division may require a monthly report and reconciliation statement to be filed with it on or before the 10th day of each month, with respect to gross revenues and deposits received and made, respectively, during the preceding month.

c. Moneys in the Casino Revenue Fund shall be appropriated exclusively for reductions in property taxes, rentals, telephone, gas, electric, and municipal utilities charges of eligible senior citizens and disabled residents of the State, and for additional or expanded health services or benefits or transportation services or benefits to eligible senior citizens and disabled residents, as shall be provided by law. On or about March 15 and September 15 of each year, the State Treasurer shall publish in at least 10 newspapers circulating generally in the State a report accounting for the total revenues received in the Casino Revenue Fund and the specific amounts of money appropriated therefrom for specific expenditures during the preceding six months ending December 31 and June 30.

18. Section 1 of P.L.1992, c.108 (C.5:12-145.3) is amended to read as follows:

C.5:12-145.3 "Casino Revenue Fund Advisory Commission."

1. There is created a commission to be known as the "Casino Revenue Fund Advisory Commission." The commission shall consist of 15 members to be appointed as follows: two members of the Senate, appointed by the President of the Senate, not more than one of whom shall be of the same political party; two members of the General Assembly, appointed by the Speaker of the General Assembly, not more than one of whom shall be of the same political party; three public members who are senior citizens, one of whom is appointed by the President of the Senate, one of whom is appointed by the Speaker of the General Assembly, and one of whom is appointed by the Governor; three public members who are disabled, one of

whom is appointed by the President of the Senate, one of whom is appointed by the Speaker of the General Assembly, and one of whom is appointed by the Governor; one public member who is a representative of the casino industry to be appointed by the Governor upon the recommendation of the Casino Association of New Jersey; the President of the New Jersey Association of Directors of Area Agencies on Aging, the Chairperson of the New Jersey Association of County Representatives for Disabled Persons, the Director of the Division of Aging Services in the Department of Human Services, and the Legislative Budget and Finance Officer, or their designees, who shall serve as ex officio members.

The legislative members shall serve during the two-year legislative session in which the appointment is made. The senior citizen and disabled members shall serve for three-year terms or until a successor is appointed; but of the members initially appointed, one of the senior citizens and one of the disabled members shall serve for a term of one year, one of the senior citizens and one of the disabled members shall serve for a term of two years, and one of the senior citizens and one of the disabled members shall serve for a term of three years.

Vacancies in the membership of the commission shall be filled in the same manner as the original appointments are made and a member may be eligible for reappointment. Vacancies occurring other than by expiration of a term shall be filled for the unexpired term.

Members shall be eligible for reimbursement for necessary and reasonable expenses incurred in the performance of their official duties but reimbursement of expenses shall be within the limits of funds appropriated or otherwise made available to the commission for its purposes.

19. Section 3 of P.L.1991, c.290 (C.9:6B-3) is amended to read as follows:

C.9:6B-3 Definitions.

3. As used in this act:

"Child placed outside his home" means a child placed outside his home by the Department of Human Services, the Department of Children and Families, the Department of Health, or a board of education.

"Department" means the Department of Human Services, the Department of Children and Families, the Department of Health, or board of education, as applicable.

20. Section 5 of P.L.1991, c.290 (C.9:6B-5) is amended to read as follows:

C.9:6B-5 Public information.

5. The Departments of Human Services, Children and Families, Health, and Education shall each prepare and update at least every six months, and shall make available to the public upon request, aggregate non-identifying data about children under their care, custody, or supervision who are placed in out-of-home settings, by category as appropriate. The data shall include the following:

- a. The number of children placed outside their homes during the six-month period and the cumulative number of children residing in out-of-home settings;
- b. The age, sex, and race of the children residing in out-of-home settings;
- c. The reasons for placement of these children;
- d. The types of settings in which these children reside;
- e. The length of time that these children have resided in these settings;
- f. The number of placements for those children who have been placed in more than one setting;
- g. The number of children who have been placed in the same county in which their parents or legal guardians reside and the number who have been placed outside of the State;
- h. The number of children who have been permanently placed or returned to their homes during the six-month period, and a projection of the number of children who will be permanently placed or returned to their homes during the following six-month period; and
- i. The number of children who have been permanently placed or returned to their homes who are subsequently returned to an out-of-home setting during the six-month period.

21. Section 6 of P.L.1991, c.290 (C.9:6B-6) is amended to read as follows:

C.9:6B-6 Rules, regulations.

6. The Commissioners of Human Services, Children and Families, Health, and Education, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall each adopt rules and regulations to effectuate the purposes of this act.

22. Section 9 of P.L.1999, c.145 (C.9:17A-1.8) is amended to read as follows:

C.9:17A-1.8 Fact sheet for distribution to unemancipated pregnant minors.

9. The Department of Health shall prepare a fact sheet for distribution to unemancipated pregnant minors who are seeking abortion services.

a. The fact sheet shall be written in terms generally understood by a teenager and shall explain the parental notification requirements of this act, including, but not limited to:

(1) that a minor may, by petition or motion, seek a waiver of parental notification from a judge of the Superior Court;

(2) that a minor may participate in proceedings in the court on her own behalf, that the court may appoint a guardian ad litem for her and that the minor has a right to court appointed counsel, which shall be provided to her by the court upon her request; and

(3) the procedure established by the court for petitioning or making a motion before the court.

b. The department shall distribute the fact sheet, at no charge, to ambulatory care facilities and hospitals licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.), public and private agencies and physicians' offices that provide family planning services and prenatal care.

c. The physician who is responsible for providing notification to an unemancipated minor's parent pursuant to this act, or his designee, shall provide the unemancipated minor with a copy of the fact sheet at the time the minor initially requests abortion services from the physician.

23. Section 12 of P.L.1999, c.145 (C.9:17A-1.11) is amended to read as follows:

C.9:17A-1.11 Rules, regulations.

12. The Commissioner of Health, in consultation with the Department of Law and Public Safety, shall promulgate rules and regulations pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), concerning procedures for physicians to follow in effectuating the notice required pursuant to the provisions of P.L.1999, c.145 (C.9:17A-1.1 et al.).

24. N.J.S.11A:11-2 is amended to read as follows:

Department of Personnel abolished.

11A:11-2. a. The Department of Personnel is abolished as a principal department in the Executive Branch of State government. The offices and terms of the Commissioner of Personnel, the deputy commissioner, assistant commissioners, and the directors of the various divisions and offices of the Department of Personnel are terminated, except as otherwise provided by P.L.2008, c.29.

b. The functions, powers, and duties of the Department of Personnel, the Commissioner of Personnel, the deputy commissioner, assistant commissioners, and directors of the various divisions and offices of the Department of Personnel are continued and transferred as provided by P.L.2008, c.29. The State Treasurer may allocate the functions, powers, and duties transferred to the Department of the Treasury or the State Treasurer by P.L.2008, c.29 among such divisions or subdivisions in the Department of the Treasury as the State Treasurer deems appropriate or as the State Treasurer may establish.

c. (1) The Division of Equal Employment Opportunity and Affirmative Action as constituted in the Department of Personnel, with its functions, powers, and duties, and those of the Commissioner of Personnel and the Merit System Board with regard to that division, is continued and transferred to the Department of the Treasury, except with regard to the power to adjudicate complaints of violations of the State policy against discrimination which power shall remain with the Civil Service Commission. The functions, powers, and duties of the Division of Equal Employment Opportunity and Affirmative Action shall be allocated within the department as the State Treasurer shall determine.

The Equal Employment Opportunity Advisory Commission as constituted in the Department of Personnel is continued and transferred to the Department of the Treasury to be allocated within that department as the State Treasurer shall determine. The members of the Equal Employment Opportunity Advisory Commission shall continue as members of the commission for the duration of their current terms and any reappointments and until their successors are appointed, unless removed for cause.

(2) The planning and research unit and function as constituted in the Department of Personnel is continued and transferred to the Department of the Treasury to be allocated within that department as the State Treasurer shall determine.

d. The Working Well NJ State employee wellness program as constituted in the Department of Personnel is continued and transferred to the Department of Health to be allocated within that department as the commissioner shall determine.

e. The toll-free information "Law Enforcement Officer Crisis Intervention Services" telephone hotline as constituted in the Department of Personnel is continued and transferred to the Department of Human Services, pursuant to sections 115 to 116 of P.L.2008, c.29 (C.26:2NN-1 to C.26:2NN-2), to be allocated within that department as the commissioner shall determine.

f. The New Jersey Employee Awards Committee as constituted in the Department of Personnel is continued and transferred to the Civil Service Commission. The members of the New Jersey Employee Awards Committee shall continue as members of the committee for the duration of their current terms and any reappointments and until their successors are appointed, unless removed for cause.

g. The commission shall develop a plan for the consolidation and coordination of personnel and related functions, including, but not limited to, classification, compensation, and workforce planning, in the executive branch of State government and for transfer to the commission of employees, positions, funding, facilities, equipment, powers, and duties from throughout the executive branch of State government as necessary and appropriate to effectuate such consolidation and coordination.

h. The commission shall submit the plan prepared pursuant to subsection g. of this section to the Governor for review and approval. With the approval of the Governor and in accordance with regulations adopted by the commission, the commission, pursuant to the approved plan, shall direct the consolidation and coordination of personnel and related functions, including, but not limited to, classification, compensation, and workforce planning, in the executive branch of State government and transfer to the commission employees, positions, funding, facilities, equipment, powers, duties, and functions from throughout the executive branch of State government to effectuate the consolidation and coordination. The commission shall organize these functions in the units as the commission determines are necessary for the efficient operation of the commission and in a manner as will provide the appointing authorities and all State employees with proper support in personnel matters. The consolidation shall not apply to those functions which the commission has determined are unique to each department or agency in its capacity as an appointing authority.

i. Each department, office, division, bureau, or agency in the executive branch of State government shall cooperate with the commission and make available to the commission such information, personnel and assistance necessary to effectuate the purposes of P.L.2008, c.29.

j. This section shall not be construed to permit or require negotiations pursuant to the "New Jersey Employer-Employee Relations Act," P.L.1941, c.100 (C.34:13A-1 et seq.), of any rule or regulation promulgated by the State Treasurer or Civil Service Commission pursuant to this section or any other section of this title.

25. N.J.S.11A:11-3 is amended to read as follows:

Names.

11A:11-3. Any law, rule, regulation, order, reorganization plan, contract, document, judicial or administrative proceeding, appropriation, or otherwise which refers to the Department of Personnel, Commissioner of Personnel, or Merit System Board shall mean the Department of the Treasury, State Treasurer, Civil Service Commission, the Department of Health, or the Department of Human Services, as provided by P.L.2008, c.29.

26. N.J.S.11A:11-4 is amended to read as follows:

Rules.

11A:11-4. All rules of the Merit System Board or the Department of Personnel in effect on the effective date of P.L.2008, c.29 shall remain in effect except as changed or modified by this title or action of the Civil Service Commission, State Treasurer, Commissioner of Health, Commissioner of Human Services, or other authority, as appropriate.

27. Section 20 of P.L.1989, c.34 (C.13:1E-48.20) is amended to read as follows:

C.13:1E-48.20 Enforcement.

20. a. This act, and any rule or regulation adopted pursuant thereto, shall be enforced by the departments and by every local board of health, or county health department, as the case may be.

The departments and the local board of health, or the county health department, as the case may be, shall have the right to enter the premises of a generator, transporter, or facility at any time in order to determine compliance with this act.

The municipal attorney or an attorney retained by a municipality in which a violation of this act is alleged to have occurred shall act as counsel to a local board of health.

The county counsel or an attorney retained by a county in which a violation of this act is alleged to have occurred shall act as counsel to the county health department.

All enforcement activities undertaken by county health departments pursuant to this subsection shall conform to all applicable performance and administrative standards adopted pursuant to section 10 of the "County Environmental Health Act," P.L.1977, c.443 (C.26:3A2-28).

b. Whenever the Commissioner of Environmental Protection or the Commissioner of Health finds that a person has violated this act, or any rule or regulation adopted pursuant thereto, that commissioner shall:

(1) issue an order requiring the person found to be in violation to comply in accordance with subsection c. of this section;

(2) bring a civil action in accordance with subsection d. of this section;

(3) levy a civil administrative penalty in accordance with subsection e. of this section;

(4) bring an action for a civil penalty in accordance with subsection f. of this section; or

(5) petition the Attorney General to bring a criminal action in accordance with subsections g. through j. of this section.

Pursuit of any of the remedies specified under this section shall not preclude the seeking of any other remedy specified.

c. Whenever the Commissioner of Environmental Protection or the Commissioner of Health finds that a person has violated this act, or any rule or regulation adopted pursuant thereto, that commissioner may issue an order specifying the provision or provisions of this act, or the rule or regulation adopted pursuant thereto, of which the person is in violation, citing the action that constituted the violation, ordering abatement of the violation, and giving notice to the person of the person's right to a hearing on the matters contained in the order. The ordered party shall have 20 days from receipt of the order within which to deliver to the commissioner a written request for a hearing. After the hearing and upon finding that a violation has occurred, the commissioner may issue a final order. If no hearing is requested, the order shall become final after the expiration of the 20-day period. A request for hearing shall not automatically stay the effect of the order.

d. The Commissioner of Environmental Protection, the Commissioner of Health, a local board of health, or a county health department may institute an action or proceeding in the Superior Court for injunctive and other relief, including the appointment of a receiver for any violation of this act, or of any rule or regulation adopted pursuant thereto, and the court may proceed in the action in a summary manner. In any proceeding the court may grant temporary or interlocutory relief.

The relief may include, singly or in combination:

(1) a temporary or permanent injunction;

(2) assessment of the violator for the costs of any investigation, inspection, or monitoring survey that led to the establishment of the violation, and for the reasonable costs of preparing and litigating the case under this subsection;

(3) assessment of the violator for any cost incurred by the State in removing, correcting, or terminating the adverse effects upon environmental quality or public health resulting from any violation of this act, or any rule

or regulation adopted pursuant thereto, for which the action under this subsection may have been brought;

(4) assessment against the violator of compensatory damages for any loss or destruction of wildlife, fish or aquatic life, and for any other actual damages caused by any violation of this act, or any rule or regulation adopted pursuant thereto, for which the action under this subsection may have been brought; and

(5) assessment against the violator of the actual amount of any economic benefits accruing to the violator from a violation. Economic benefits may include the amount of any savings realized from avoided capital or noncapital costs resulting from the violation; the return earned or that may be earned on the amount of avoided costs; any benefits accruing to the violator as a result of a competitive market advantage enjoyed by reason of the violation; or any other benefits resulting from the violation.

Assessments under this subsection shall be paid to the State Treasurer, or to the local board of health, or to the county health department, as the case may be, except that compensatory damages may be paid by specific order of the court to any persons who have been aggrieved by the violation.

If a proceeding is instituted by a local board of health or county health department, notice thereof shall be served upon the commissioners in the same manner as if the commissioners were named parties to the action or proceeding. Either of the departments may intervene as a matter of right in any proceeding brought by a local board of health or county health department.

e. Either of the commissioners, as the case may be, may assess a civil administrative penalty of not more than \$100,000 for each violation. Each day that a violation continues shall constitute an additional, separate, and distinct offense. A commissioner may not assess a civil administrative penalty in excess of \$25,000 for a single violation, or in excess of \$2,500 for each day during which a violation continues, until the departments have respectively adopted, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), regulations requiring the appropriate commissioner, in assessing a civil administrative penalty, to consider the operational history of the violator, the severity of the violation, the measures taken to mitigate or prevent further violations, and whether the penalty will maintain an appropriate deterrent. No assessment may be levied pursuant to this section until after the violator has been notified by certified mail or personal service. The notice shall include a reference to the section of the statute, rule, regulation, or order violated, a concise statement of the facts alleged to constitute a violation, a statement of the amount of the civil administrative penalties to be imposed, and a statement of the party's right to a hearing. The or-

dered party shall have 20 calendar days from receipt of the notice within which to deliver to the appropriate commissioner a written request for a hearing. After the hearing and upon finding that a violation has occurred, that commissioner may issue a final order after assessing the amount of the fine specified in the notice. If no hearing is requested, the notice shall become a final order after the expiration of the 20-day period. Payment of the assessment is due when a final order is issued or the notice becomes a final order. The authority to levy a civil administrative penalty is in addition to all other enforcement provisions in this act, and the payment of any assessment shall not be deemed to affect the availability of any other enforcement provisions in connection with the violation for which the assessment is levied. Each department may compromise any civil administrative penalty assessed under this section in an amount the department determines appropriate.

f. A person who violates this act, or any rule or regulation adopted pursuant thereto, shall be liable for a penalty of not more than \$100,000 per day for each violation, to be collected in a civil action commenced by the Commissioner of Environmental Protection, the Commissioner of Health, a local board of health, or a county health department.

A person who violates an administrative order issued pursuant to subsection c. of this section, or a court order issued pursuant to subsection d. of this section, or who fails to pay an administrative assessment in full pursuant to subsection e. of this section is subject upon order of a court to a civil penalty not to exceed \$200,000 per day for each violation.

Of the penalty imposed pursuant to this subsection, 10% or \$250, whichever is greater, shall be paid to the appropriate department from the General Fund if the Attorney General determines that a person is entitled to a reward pursuant to section 24 of this act.

Any penalty imposed pursuant to this subsection may be collected, with costs, in a summary proceeding pursuant to the "Penalty Enforcement Law of 1999," P.L.1999, c.274 (C.2A:58-10 et seq.). The Superior Court and the municipal court shall have jurisdiction to enforce the provisions of the "Penalty Enforcement Law of 1999" in connection with this act.

g. A person who purposely or knowingly:

(1) disposes or stores regulated medical waste without authorization from either the Department of Environmental Protection or the Department of Health, as appropriate, or in violation of this act, or any rule or regulation adopted pursuant thereto;

(2) makes any false or misleading statement to any person who prepares any regulated medical waste application, registration, form, label,

certification, manifest, record, report, or other document required by this act, or any rule or regulation adopted pursuant thereto;

(3) makes any false or misleading statement on any regulated medical waste application, registration, form, label, certification, manifest, record, report, or other document required by this act, or any rule or regulation adopted pursuant thereto; or

(4) fails to properly treat certain types of regulated medical waste designated by the Department of Health in a prescribed manner; shall, upon conviction, be guilty of a crime of the third degree and, notwithstanding the provisions of N.J.S.2C:43-3, shall be subject to a fine of not more than \$100,000 for the first offense, and not more than \$200,000 for each subsequent offense, and restitution, in addition to any other appropriate disposition authorized by subsection b. of N.J.S.2C:43-2.

h. A person who recklessly or negligently:

(1) disposes or stores regulated medical waste without authorization from either the Department of Environmental Protection or the Department of Health, as appropriate, or in violation of this act, or any rule or regulation adopted pursuant thereto;

(2) makes any false or misleading statement to any person who prepares any regulated medical waste application, registration, form, label, certification, manifest, record, report, or other document required by this act, or any rule or regulation adopted pursuant thereto;

(3) makes any false or misleading statement on any regulated medical waste application, registration, form, label, certification, manifest, record, report, or other document required by this act, or any rule or regulation adopted pursuant thereto; or

(4) fails to properly treat certain types of regulated medical waste designated by the Department of Health in a manner prescribed thereby; shall, upon conviction, be guilty of a crime of the fourth degree.

i. A person who, regardless of intent:

(1) transports any regulated medical waste to a facility or any other place in the State that does not have authorization from the Department of Environmental Protection to accept the waste, or in violation of this act, or any rule or regulation adopted pursuant thereto; or

(2) transports, or receives transported, regulated medical waste without completing and submitting a manifest in accordance with this act, or any rule or regulation adopted pursuant thereto; shall, upon conviction, be guilty of a crime of the fourth degree.

j. A person who purposely, knowingly, or recklessly:

(1) generates and causes or permits to be transported any regulated medical waste to a facility or any other place in the State that does not have authorization from the Department of Environmental Protection to accept the waste, or in violation of this act, or any rule or regulation adopted pursuant thereto; or

(2) violates any other provision of this act, or any rule or regulation adopted pursuant thereto, for which no other criminal penalty has been specifically provided for; shall, upon conviction, be guilty of a crime of the fourth degree.

k. All conveyances used or intended for use in the willful discharge, in violation of this act, or any rule or regulation adopted pursuant thereto, of regulated medical waste are subject to forfeiture to the State pursuant to P.L.1981, c.387 (C.13:1K-1 et seq.).

l. (Deleted by amendment, P.L.1997, c.325.)

m. No prosecution for a violation under this act shall be deemed to preclude a prosecution for the violation of any other applicable statute.

28. Section 1 of P.L.1998, c.18 (C.17:23A-13.1) is amended to read as follows:

C.17:23A-13.1 Notification of test results by insurer to applicants; "reportable communicable disease" defined.

1. An insurer who requires an applicant for insurance to submit to medical testing as a condition of issuing, extending or renewing the insurance shall obtain the applicant's written consent for the test. If in the course of the testing the insurer determines that the applicant has a reportable communicable disease, the insurer shall promptly notify the applicant of the determination and recommend that the applicant contact a physician or other medical professional regarding the significance of the test result. The insurer shall also promptly provide the Department of Health and a physician or other medical professional designated by the applicant with a copy of the results of the test. The provisions of this act shall not be construed to require a physician or other medical professional who receives a copy of the test result to initiate contact with the applicant regarding the test result.

The insurer shall provide the notification required pursuant to this section regardless of whether the existence of the disease will result in an adverse underwriting decision for the applicant.

For the purposes of this act, "reportable communicable disease" means those diseases required to be reported to the Department of Health pursuant to N.J.A.C.8:57-1.3 through 8:57-1.6 and N.J.A.C.8:57-2.2 and 8:57-2.3.

29. Section 2 of P.L.1998, c.18 (C.17:23A-13.2) is amended to read as follows:

C.17:23A-13.2 Regulations.

2. The Commissioner of Banking and Insurance, in consultation with the Commissioner of Health, shall adopt regulations pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.) which establish procedures that insurers shall use to notify applicants of test results pursuant to this act.

30. Section 1 of P.L.1970, c.22 (C.17:27A-1) is amended to read as follows:

C.17:27A-1 Definitions.

1. Definitions.

As used in P.L.1970, c.22 (C.17:27A-1 et seq.), the following terms shall have the respective meanings hereinafter set forth, unless the context shall otherwise require:

a. An "affiliate" of, or person "affiliated" with, a specific person, is a person that directly, or indirectly through one or more intermediaries, controls, or is controlled by, or is under common control with, the person specified.

b. The term "commissioner" shall mean the Commissioner of Banking and Insurance or the commissioner's deputies, except that when a health maintenance organization is the subject of an acquisition of control or merger, the commissioner shall consult with the Commissioner of Health on matters relating to quality of, and access to, health care services.

c. The term "control" (including the terms "controlling," "controlled by" and "under common control with") means the possession, direct or indirect, of the power to direct or cause the direction of the management and policies of a person, whether through the ownership of voting securities, by contract other than a commercial contract for goods or nonmanagement services, or otherwise, unless the power is the result of an official position with or corporate office held by the person. Control shall be presumed to exist if any person, directly or indirectly, owns, controls, holds with the power to vote, or holds proxies representing, 10% or more of the voting securities of any other person, provided that no such presumption of control shall of itself relieve any person so presumed to have control from any requirement of P.L.1970, c.22 (C.17:27A-1 et seq.). This presumption may be rebutted by a showing made in the manner provided by subsection j. of section 3 of P.L.1970, c.22 (C.17:27A-3) that control does not exist in fact. The commissioner may determine, after furnishing all persons in interest

notice and an opportunity to be heard, and making specific findings of fact to support such determination, that control exists in fact, notwithstanding the absence of a presumption to that effect.

d. An "insurance holding company system" consists of two or more affiliated persons, one or more of which is an insurer.

e. The term "insurer" means any person or persons, corporation, partnership, or company authorized by the laws of this State to transact the business of insurance or to operate a health maintenance organization in this State, except that it shall not include agencies, authorities, or instrumentalities of the United States, its possessions and territories, the Commonwealth of Puerto Rico, the District of Columbia, or a state or political subdivision of a state.

f. A "person" is an individual, a corporation, a partnership, an association, a joint stock company, a trust, an unincorporated organization, any similar entity or any combination of the foregoing acting in concert.

g. (Deleted by amendment, P.L.1993, c.241).

h. A "subsidiary" of a specified person is an affiliate controlled by such person directly, or indirectly through one or more intermediaries.

i. The term "voting security" shall include any security convertible into or evidencing a right to acquire a voting security.

j. "Acquisition" means any agreement, arrangement or activity, the consummation of which results in a person acquiring directly or indirectly the control of another person, and includes but is not limited to the acquisition of voting securities, and assets, and bulk reinsurance and mergers.

k. "Health maintenance organization" means any person operating under a certificate of authority issued pursuant to P.L.1973, c.337 (C.26:2J-1 et seq.).

31. Section 1 of P.L.1998, c.129 (C.17:29A-35.1) is amended to read as follows:

C.17:29A-35.1 Surcharge debts of driver extinguished upon death.

1. Notwithstanding the provisions or any law, rule or regulation to the contrary, upon the death of a driver on whom surcharges have been levied by the New Jersey Motor Vehicle Commission pursuant to section 6 of P.L.1983, c.65 (C.17:29A-35), any debt established by the imposition of those surcharges is extinguished and the commission, or any agent or representative thereof, shall cease to seek payment of that debt.

Whenever the division is unable to obtain a death certificate from a person representing the estate of any driver on whom surcharges have been levied and who was a resident of the State, the commission shall obtain a

copy of the death certificate by contacting the State registrar of vital statistics in the Department of Health and, in these cases, the commission shall not require the estate of the driver to furnish a death certificate.

32. Section 27 of P.L.2004, c.17 (C.17:30D-29) is amended to read as follows:

C.17:30D-29 Medical Malpractice Liability Insurance Premium Assistance Fund.

27. a. There is established a Medical Malpractice Liability Insurance Premium Assistance Fund within the Department of the Treasury as a nonlapsing, revolving fund.

b. The fund shall be comprised of the following revenue:

(1) an annual surcharge of \$3 per employee for all employers who are subject to the New Jersey "unemployment compensation law," R.S.43:21-1 et seq., collected by the comptroller for the New Jersey Unemployment Compensation Fund and paid over to the State Treasurer for deposit in the fund annually, as provided by the commissioner, which surcharge may, at the option of the employer, be treated as a payroll deduction to each covered employee;

(2) an annual charge of \$75 to be imposed by the State Board of Medical Examiners on every physician and podiatrist licensed by the board pursuant to the provisions of R.S.45:9-1 et seq., collected by the board and remitted to the State Treasurer for deposit into the fund;

(3) an annual charge of \$75 to be imposed by the State Board of Chiropractic Examiners on every chiropractor licensed by the board pursuant to the provisions of P.L.1989, c.153 (C.45:9-41.17 et seq.), collected by the board and remitted to the State Treasurer for deposit into the fund;

(4) an annual charge of \$75 to be imposed by the New Jersey State Board of Dentistry on every dentist licensed pursuant to the provisions of R.S.45:6-1 et seq., collected by the board and remitted to the State Treasurer for deposit into the fund;

(5) an annual charge of \$75 to be imposed by the New Jersey State Board of Optometrists on every optometrist licensed by the board pursuant to the provisions of R.S.45:12-1 et seq., collected by the board and remitted to the State Treasurer for deposit into the fund; and

(6) an annual fee of \$75 to be assessed by the State Treasurer and payable by each person licensed to practice law in this State, for deposit into the fund.

The provisions of paragraphs (2) through (5) of this subsection shall not apply to physicians, podiatrists, chiropractors, dentists, or optometrists who: are statutorily or constitutionally barred from the practice of their re-

spective profession; can show that they do not maintain a bona fide office for the practice of their profession in this State; are completely retired from the practice of their profession; are on full-time duty with the armed forces, VISTA, or the Peace Corps and not engaged in practice; or have not practiced their profession for at least one year.

The provisions of paragraph (6) of this subsection shall not apply to attorneys who: are constitutionally or statutorily barred from the practice of law; can show that they do not maintain a bona fide office for the practice of law in this State; are completely retired from the practice of law; are on full-time duty with the armed forces, VISTA, or the Peace Corps and not engaged in practice; are ineligible to practice law because they have not made their New Jersey Lawyers' Fund for Client Protection payment; or have not practiced law for at least one year.

c. The State Treasurer shall deposit all monies collected pursuant to this section into the fund. Monies credited to the fund may be invested in the same manner as assets of the General Fund and any investment earnings on the fund shall accrue to the fund and shall be available subject to the same terms and conditions as other monies in the fund.

d. The fund shall be administered by the Department of Banking and Insurance in accordance with the provisions of P.L.2004, c.17 (C.2A:53A-37 et al.).

e. The monies in the fund are specifically dedicated and shall be utilized exclusively for the following purposes:

(1) \$17 million shall be allocated annually for the purpose of providing relief towards the payment of medical malpractice liability insurance premiums to health care providers in the State who have experienced or are experiencing a liability insurance premium increase in an amount as established by the commissioner by regulation and meet the criteria established pursuant to section 28 of P.L.2004, c.17 (C.17:30D-30);

(2) \$6.9 million shall be allocated annually to the Health Care Subsidy Fund established pursuant to section 8 of P.L.1992, c.160 (C.26:2H-18.58) for the purpose of providing payments to hospitals in accordance with the formula used for the distribution of charity care subsidies that are provided pursuant to P.L.1992, c.160 (C.26:2H-18.51 et al.);

(3) \$1 million shall be allocated annually for a student loan expense reimbursement program for obstetrician/gynecologists, to be established pursuant to section 29 of P.L.2004, c.17 (C.18A:71C-49); and

(4) \$1.2 million shall be allocated annually to the Division of Medical Assistance and Health Services in the Department of Human Services for the purposes provided in section 30 of P.L.2004, c.17 (C.30:4J-7).

f. The fund and the annual surcharge, charges, and fee provided for in subsection b. of this section shall expire three years after the effective date of P.L.2004, c.17 (C.2A:53A-37 et al.).

g. The commissioner, in consultation with the Commissioner of Health, shall adopt rules and regulations pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), to carry out the purposes of sections 26 through 29 of P.L.2004, c.17 (C.17:30D-28 through C.17:30D-30 and C.18A:71C-49); except that, notwithstanding any provision of P.L.1968, c.410 to the contrary, the commissioner may adopt, immediately upon filing with the Office of Administrative Law, such regulations as the commissioner deems necessary to implement the provisions of sections 26 through 29 of P.L.2004, c.17 (C.17:30D-28 through C.17:30D-30 and C.18A:71C-49), which shall be effective for a period not to exceed six months and may thereafter be amended, adopted, or readopted by the commissioner in accordance with the requirements of P.L.1968, c.410.

33. Section 28 of P.L.2004, c.17 (C.17:30D-30) is amended to read as follows:

C.17:30D-30 Responsibilities of commissioner.

28. a. In order to carry out the purposes of section 27 of P.L.2004, c.17 (C.17:30D-29), the commissioner shall, at a minimum:

(1) establish a program to provide medical malpractice liability insurance premium subsidies to health care providers from monies that are contained in the fund;

(2) establish a methodology and procedures for determining eligibility for, and providing subsidies from, the fund;

(3) maintain confidential records on each health care provider who receives assistance from the fund;

(4) take all necessary action to recover the cost of the subsidy provided to a health care provider that the commissioner determines to have been incorrectly provided; and

(5) provide for subsidies to all practitioners who are members of specialties and subspecialties who qualify for relief under subsection b. of this section, including those whose professional liability insurance protection is provided by hospital funding supplemented by purchased commercial insurance coverage.

b. The commissioner shall certify classes of practitioners by specialty and subspecialty for each type of practitioner, whose average medical malpractice premium, as a class, on or after December 31, 2002, is in excess of

an amount per year as determined by the commissioner by regulation. In certifying classes eligible for the subsidy, the commissioner, in consultation with the Commissioner of Health, may also consider if access to care is threatened by the inability of a significant number of practitioners, as applicable, in a particular specialty or subspecialty, to continue practicing in a geographic area of the State.

(1) In order to be eligible for a subsidy from the fund, a practitioner shall have received a medical malpractice liability insurance premium increase in an amount as determined by the commissioner by regulation, for one or more of the following: upon renewal on or after January 1, 2004, from the amount paid by that practitioner in calendar year 2003; upon renewal on or after January 1, 2005, from the amount paid by that practitioner in calendar year 2004; and upon renewal on or after January 1, 2006, from the amount paid by that practitioner in calendar year 2005; or

(2) In the case of a health care provider providing professional liability insurance protection through self-insured hospital funding supplemented with purchased commercial insurance coverage, in order to be eligible for a subsidy from the fund, that provider shall have increased its total professional liability funding obligation in an amount as determined by the commissioner by regulation, for one or more of the following: upon renewal on or after January 1, 2004, from the professional liability funding obligation paid by that provider in calendar year 2003; upon renewal on or after January 1, 2005, from the professional liability funding obligation paid by that provider in calendar year 2004; and upon renewal on or after January 1, 2006, from the professional liability funding obligation paid by that provider in calendar year 2005.

(3) The amount of the subsidy shall be an amount, as determined by the commissioner by regulation, of the increase from the preceding year's premium or self-insured professional liability funding obligation; except that no health care provider shall receive a subsidy in any year that is greater than an amount as determined by the commissioner by regulation.

c. A practitioner who has been subject to a disciplinary action or civil penalty by the practitioner's respective licensing board pursuant to section 8, 9 or 12 of P.L.1978, c.73 (C.45:1-21, 22 or 25), when that action or penalty relates to the practitioner's provision of, or failure to provide, treatment or care to a patient, is not eligible for a subsidy from the fund.

d. (1) A practitioner who receives a subsidy from the fund shall be required to practice in that practitioner's specialty or subspecialty in this State for a period of at least two years after receipt of the subsidy.

(2) A practitioner who fails to comply with the provisions of paragraph (1) of this subsection shall be required to repay to the commissioner the amount of the subsidy, in whole or in part as determined by the commissioner.

e. The commissioner may waive the criteria for eligibility for a subsidy established pursuant to this section, if the commissioner determines that access to care for a particular specialty is threatened because of an inability of a sufficient number of practitioners in that specialty or subspecialty to practice in a geographic area of the State.

f. The State Board of Medical Examiners, the State Board of Chiropractic Examiners, the New Jersey State Board of Dentistry, and the New Jersey Board of Nursing shall each provide to the commissioner, on a quarterly basis, the names of the practitioners who have been subject to a disciplinary action or civil penalty by the practitioner's respective licensing board.

g. For the purposes of section 29 of P.L.2004, c.17 (C.18A:71C-49), the commissioner, in consultation with the State Board of Medical Examiners, shall provide to the Higher Education Student Assistance Authority the names of obstetrician/gynecologists licensed by the board who may qualify for the student loan reimbursement program established pursuant to P.L.2004, c.17. A physician who has been subject to a disciplinary action or civil penalty by the board, as provided in subsection c. of this section, shall not be eligible for the program.

34. Section 34 of P.L.1998, c.21 (C.17:33A-18) is amended to read as follows:

C.17:33A-18 Establishment of liaison between office, other departments; responsibilities.

34. a. A section of the Office of Insurance Fraud Prosecutor shall be designated to be responsible for establishing a liaison and continuing communication between the office and the Department of Health, the Department of Human Services, the Department of Labor and Workforce Development, any professional board in the Division of Consumer Affairs in the Department of Law and Public Safety, the Department of Banking and Insurance, the Division of State Police, every county prosecutor's office, local government units as may be necessary or practicable, and insurers.

b. The section of the office responsible for such liaison shall establish procedures: (1) for receiving notice from all entities enumerated in subsection a. of this section of any case in which fraud is suspected or has been substantiated; (2) for receiving referrals for the investigation of alleged fraud; (3) for receiving referrals for the prosecution of fraud by the office; (4) for re-

ceiving and referring information regarding cases, administrative or otherwise, under investigation by any department or other entity to the appropriate authority; and (5) for providing information to and coordinating information among any referring entities on pending cases of insurance fraud which are under investigation or being litigated or prosecuted. The liaison section of the office shall maintain a record of every referral or investigation.

35. Section 2 of P.L.1995, c.316 (C.17:48-6m) is amended to read as follows:

C.17:48-6m Hospital service corporation contracts, child screening, blood lead, hearing loss; immunizations.

2. No hospital service corporation contract providing hospital or medical expense benefits for groups with greater than 50 persons shall be delivered, issued, executed, or renewed in this State, or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance on or after the effective date of P.L.2005, c.248 (C.17:48E-35.27 et al.), unless the contract provides benefits to any named subscriber or other person covered thereunder for expenses incurred in the following:

a. Screening by blood lead measurement for lead poisoning for children, including confirmatory blood lead testing as specified by the Department of Health pursuant to section 7 of P.L.1995, c.316 (C.26:2-137.1); and medical evaluation and any necessary medical follow-up and treatment for lead poisoned children.

b. All childhood immunizations as recommended by the Advisory Committee on Immunization Practices of the United States Public Health Service and the Department of Health pursuant to section 7 of P.L.1995, c.316 (C.26:2-137.1). A hospital service corporation shall notify its subscribers, in writing, of any change in coverage with respect to childhood immunizations and any related changes in premium. Such notification shall be in a form and manner to be determined by the Commissioner of Banking and Insurance.

c. Screening for newborn hearing loss by appropriate electrophysiologic screening measures and periodic monitoring of infants for delayed onset hearing loss, pursuant to P.L.2001, c.373 (C.26:2-103.1 et al.). Payment for this screening service shall be separate and distinct from payment for routine new baby care in the form of a newborn hearing screening fee as negotiated with the provider and facility.

The benefits provided pursuant to this section shall be provided to the same extent as for any other medical condition under the contract, except that a deductible shall not be applied for benefits provided pursuant to this

section; however, with respect to a contract that qualifies as a high deductible health plan for which qualified medical expenses are paid using a health savings account established pursuant to section 223 of the federal Internal Revenue Code of 1986 (26 U.S.C. s.223), a deductible shall not be applied for any benefits provided pursuant to this section which represent preventive care as permitted by that federal law, and shall not be applied as provided pursuant to section 6 of P.L.2005, c.248 (C.17:48-6dd). This section shall apply to all hospital service corporation contracts in which the health service corporation has reserved the right to change the premium.

36. Section 11 of P.L.1979, c.478 (C.17:48D-11) is amended to read as follows:

C.17:48D-11 Books, records; examination, inspection by commissioner.

11. a. The commissioner or the commissioner's designee may, as often as the commissioner may reasonably determine, investigate the business and examine the books, accounts, records, and files of every dental plan organization. For that purpose the commissioner or the commissioner's designee shall have reasonably free access to the offices and places of business, books, accounts, papers, records, and files of all dental plan organizations. A dental plan organization shall keep and use in its business such books, accounts, and records as will enable the commissioner to determine whether the dental plan organization is complying with the provisions of this act and with the rules and regulations promulgated pursuant to it. A dental plan organization shall preserve its books, accounts, and records for at least 7 years; except that preservation by photographic reproduction or records in photographic form shall constitute compliance with this act.

b. For the purpose of the examination, the commissioner may, within the limits of funds appropriated for such purpose, contract with such persons as the commissioner may deem advisable to conduct the same or assist therein.

c. At the discretion of the commissioner, the Commissioner of Health and the New Jersey State Board of Dentistry may participate in the investigations and examinations described in this section to verify the existence of an effective dental plan.

d. The expenses incurred in making any examination pursuant to this section shall be assessed against and paid by the dental plan organization so examined. A dental plan organization having direct premiums written in this State of less than \$2,000,000 in any calendar year shall be subject to a limited scope examination with expenses for that examination not to exceed \$5,000. Upon written notice by the commissioner of the total amount of an

assessment, a dental plan organization shall become liable for and shall pay the assessment to the commissioner.

37. Section 1 of P.L.1985, c.236 (C.17:48E-1) is amended to read as follows:

C.17:48E-1 Definitions.

1. As used in this act:
 - a. "Commissioner" means the Commissioner of Banking and Insurance.
 - b. "Board" and "board of directors" means the board of directors of the health service corporation.
 - c. "Elective surgical procedure" means any nonemergency surgical procedure which may be scheduled at the convenience of the patient or the surgeon without jeopardizing the patient's life or causing serious impairment to the patient's bodily functions.
 - d. "Eligible physician" means a physician licensed to practice medicine and surgery who holds the rank of Diplomate of an American Board (M.D.) or Certified Specialist (D.O.) in the surgical or medical specialty for which surgery is proposed.
 - e. "Health service corporation" means a health service corporation established pursuant to the provisions of this act, which is organized, without capital stock and not for profit, for the purpose of (1) establishing, maintaining, and operating a nonprofit health service plan and (2) supplying services in connection with (a) the providing of health care or (b) conducting the business of insurance as provided for in this act.
 - f. "Health service plan" means a plan under which contracts are issued providing complete or partial prepayment or postpayment of health care services and supplies eligible under the contracts for a given period to persons covered under the contracts where arrangements are made for payment for health care services and supplies directly to the provider thereof or to a covered person under those contracts.
 - g. "Hospital service corporation" means a hospital service corporation established pursuant to the provisions of P.L.1938, c.366 (C.17:48-1 et seq.).
 - h. "Medical service corporation" means a medical service corporation established pursuant to the provisions of P.L.1940, c.74 (C.17:48A-1 et seq.).
 - i. "Provider of health care services" shall include, but not be limited to: (1) a health service corporation, a hospital service corporation or medical service corporation; (2) a hospital or health care facility under contract with a health service corporation to provide health care services or supplies to persons who become subscribers under contracts with the health service

corporation; (3) a hospital or health care facility which is maintained by a state or any of its political subdivisions; (4) a hospital or health care facility licensed by the Department of Health; (5) other hospitals or health care facilities, as designated by the Department of Health to provide health care services; (6) a registered nursing home providing convalescent care; (7) a nonprofit voluntary visiting nurse organization providing health care services other than in a hospital; (8) hospitals or other health care facilities located in other states, which are subject to the supervision of those states, which if located in this State would be eligible to be licensed or designated by the Department of Health; (9) nonprofit hospital, medical or health service plans of other states approved by the commissioner; (10) physicians licensed to practice medicine and surgery; (11) licensed chiropractors; (12) licensed dentists; (13) licensed optometrists; (14) licensed pharmacists; (15) licensed podiatrists; (16) registered bio-analytical laboratories; (17) licensed psychologists; (18) registered physical therapists; (19) certified nurse-midwives; (20) registered professional nurses; (21) licensed health maintenance organizations; (22) licensed audiologists; (23) licensed speech-language pathologists; and (24) providers of other similar health care services or supplies as are approved by the commissioner.

j. "Second surgical opinion" means an opinion of an eligible physician based on that physician's examination of a person for the purpose of evaluating the medical advisability of that person undergoing an elective surgical procedure, but prior to the performance of the surgical procedure.

k. "Subscriber" means a person to whom a subscription certificate is issued by a health service corporation, and the term shall also include "policyholder," "member," or "employer" under a group contract where the context requires.

38. Section 1 of P.L.1995, c.316 (C.17:48E-35.10) is amended to read as follows:

C.17:48E-35.10 Health service corporation contracts, child screening, blood lead, hearing loss; immunizations.

1. No health service corporation contract providing hospital or medical expense benefits for groups with greater than 50 persons shall be delivered, issued, executed, or renewed in this State, or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance on or after the effective date of P.L.2005, c.248 (C.17:48E-35.27 et al.), unless the contract provides benefits to any named subscriber or other person covered thereunder for expenses incurred in the following:

a. Screening by blood lead measurement for lead poisoning for children, including confirmatory blood lead testing as specified by the Department of Health pursuant to section 7 of P.L.1995, c.316 (C.26:2-137.1); and medical evaluation and any necessary medical follow-up and treatment for lead poisoned children.

b. All childhood immunizations as recommended by the Advisory Committee on Immunization Practices of the United States Public Health Service and the Department of Health pursuant to section 7 of P.L.1995, c.316 (C.26:2-137.1). A health service corporation shall notify its subscribers, in writing, of any change in coverage with respect to childhood immunizations and any related changes in premium. The notification shall be in a form and manner to be determined by the Commissioner of Banking and Insurance.

c. Screening for newborn hearing loss by appropriate electrophysiologic screening measures and periodic monitoring of infants for delayed onset hearing loss, pursuant to P.L.2001, c.373 (C.26:2-103.1 et al.). Payment for this screening service shall be separate and distinct from payment for routine new baby care in the form of a newborn hearing screening fee as negotiated with the provider and facility.

The benefits provided pursuant to this section shall be provided to the same extent as for any other medical condition under the contract, except that a deductible shall not be applied for benefits provided pursuant to this section; however, with respect to a contract that qualifies as a high deductible health plan for which qualified medical expenses are paid using a health savings account established pursuant to section 223 of the federal Internal Revenue Code of 1986 (26 U.S.C. s.223), a deductible shall not be applied for any benefits provided pursuant to this section which represent preventive care as permitted by that federal law, and shall not be applied as provided pursuant to section 3 of P.L.2005, c.248 (C.17:48E-35.28). This section shall apply to all health service corporation contracts in which the health service corporation has reserved the right to change the premium.

39. Section 3 of P.L.1999, c.409 (C.17:48H-3) is amended to read as follows:

C.17:48H-3 Application for certification.

3. a. An organized delivery system which is not subject to licensure requirements pursuant to this act shall submit an application for certification to the Commissioner of Banking and Insurance. The organized delivery system may continue to operate during the pendency of its application, but in

no case longer than 12 months after the date of submission of the application to the Department of Banking and Insurance, unless the commissioner, by regulation, extends the 12-month limitation. In the event the application is denied, the applicant shall be treated as an organized delivery system whose certification has been revoked pursuant to sections 7 and 8 of this act.

Notwithstanding the obligations imposed by this act regarding certification requirements, nothing in this subsection shall operate to impair any contract in force on the effective date of this act, but this act shall apply to any contract renewed on or after the effective date of this act.

b. The certification shall be valid for a period of three years.

c. A certified organized delivery system shall not directly issue health benefits plans.

40. Section 4 of P.L.1999, c.409 (C.17:48H-4) is amended to read as follows:

C.17:48H-4 Form, contents of application.

4. Application for certification to operate an organized delivery system shall be made to the Commissioner of Banking and Insurance on a form prescribed by the commissioner, shall be certified by an officer or authorized representative of the applicant and shall include the following:

a. A copy of the applicant's basic organizational documents. For purposes of this subsection, "basic organizational documents" means the articles of incorporation, articles of association, partnership agreement, management agreement, trust agreement, or other applicable documents as appropriate to the applicant's form of business entity, and all amendments to those documents;

b. A copy of the executed bylaws, rules, and regulations, or similar documents, regulating the conduct of the applicant's internal affairs;

c. A list, in a form approved by the Commissioner of Banking and Insurance, of the names, addresses, and official positions of the persons who are to be responsible for the conduct of the affairs of the applicant, including, but not limited to, the members of the board of directors, executive committee, or other governing board or committee, the principal officers, and any person or entity owning or having the right to acquire 10% or more of the voting securities of the applicant; in the case of a partnership or association, the names of the partners or members; and a statement of any criminal convictions or civil, enforcement, or regulatory action, including actions relating to professional licenses, taken against any person who is a member of the board, the executive committee, or other governing board or

committee, the principal officers, or the persons who are responsible for the conduct of the affairs of the applicant;

d. A statement generally describing the applicant, its facilities, personnel, and the health care services to be offered by the organized delivery system;

e. A copy of the standard form of any provider agreement made or to be made between the applicant and any providers relative to the provision of health care services;

f. A copy of the form of any contract made or to be made between the applicant and any carrier for the provision of or arrangement to provide health care services, which contract shall contain provisions establishing the respective duties of the carrier and the applicant with respect to compliance with P.L.1997, c.192 (C.26:2S-1 et seq.);

g. With respect to each contract made or to be made between the applicant and any other person who will provide comprehensive or limited health care services:

(1) A list of the persons who are to provide the health care services, and the geographical area in which they are located and in which the services are to be performed;

(2) A list of any affiliate of the applicant which provides services to the applicant in this State and a description of any material transaction between the affiliate and the applicant;

(3) A description of the health care services or benefits to be offered or proposed to be offered by the applicant;

(4) A description of the means which will be utilized to assure the availability and accessibility of the health care services to enrollees or contract holders; and

(5) A description of the means by which the organized delivery system shall be compensated for each contract entered into with a carrier; and

h. A list of all administrative, civil, or criminal actions and proceedings to which the applicant, or any of its affiliates, or persons who are responsible for the conduct of the affairs of the applicant or affiliate, have been subject and the resolution of those actions and proceedings. If a license, certificate, or other authority to operate has been refused, suspended, or revoked by any jurisdiction, the applicant shall provide a copy of any orders, proceedings, and determinations relating thereto.

In addition to the information required pursuant to this section, the Commissioner of Banking and Insurance may establish additional reporting requirements or make detailed reporting requirements for any class of certified organized delivery system.

41. Section 5 of P.L.1999, c.409 (C.17:48H-5) is amended to read as follows:

C.17:48H-5 Review of application.

5. Following receipt of an application for certification, the Commissioner of Banking and Insurance shall review it and notify the applicant of any deficiencies contained therein.

a. The Commissioner of Banking and Insurance shall issue a certification to an organized delivery system if the commissioner finds that the system meets the standards provided for in this act, including, but not limited to:

(1) All of the material required by section 4 of this act has been filed;

(2) The persons responsible for conducting the applicant's affairs are competent, trustworthy, and possess good reputations, and have had appropriate experience, training, and education;

(3) The persons who are to perform the health care services are properly qualified;

(4) The organized delivery system has demonstrated the ability to assure that health care services will be provided in a manner which will assure the availability and accessibility of the services;

(5) The standard forms of provider agreements to be used by the organized delivery system are acceptable; and

(6) The organized delivery system's contracts to provide services do not entail or will not result in the assumption of financial risk by the system.

b. The commissioner may deny an application for certification if the applicant fails to meet any of the standards provided in this act or on any other reasonable grounds. If certification is denied, the commissioner shall notify the applicant and shall set forth the reasons for the denial in writing. The applicant may request a hearing by notice to the commissioner within 30 days of receiving the notice of denial. Upon such denial, the applicant shall submit to the commissioner a plan for bringing the organized delivery system into compliance or providing for the closing down of its business.

42. Section 6 of P.L.1999, c.409 (C.17:48H-6) is amended to read as follows:

C.17:48H-6 Notice of change, modification.

6. a. A certified organized delivery system, unless otherwise provided for in this act, shall not materially modify any matter or document furnished to the Commissioner of Banking and Insurance pursuant to section 4 of this act unless the organized delivery system files with the commis-

sioner, at least 60 days prior to use or adoption of the change, a notice of the change or modification, together with that information required by the commissioner to explain the change or modification. If the commissioner fails to affirmatively approve or disapprove the change or modification within 60 days of submission of the notice, the notice of modification shall be deemed approved. The commissioner may extend the 60-day review period for not more than 30 additional days by giving written notice of the extension before the expiration of the 60-day period. If a change or modification is disapproved, the commissioner shall notify the system in writing and specify the reason for the disapproval.

b. Prior to entering into any contract with a carrier, a certified organized delivery system shall file with the commissioner, for the commissioner's approval, a copy of that contract. The filing shall be made no later than 60 days prior to the date that the contract is intended to be in effect. If the contract is not disapproved prior to the effective date by the commissioner, the contract shall be deemed approved.

43. Section 7 of P.L.1999, c.409 (C.17:48H-7) is amended to read as follows:

C.17:48H-7 Suspension, revocation of certification, grounds.

7. The Commissioner of Banking and Insurance may suspend or revoke a certification issued to an organized delivery system pursuant to this act upon the commissioner's determination that:

a. The certified organized delivery system is operating in contravention of its basic organizational documents;

b. The certified organized delivery system is unable to fulfill its obligations to the carriers with whom it contracts;

c. The continued operation of the certified organized delivery system would be hazardous to the health and welfare of the enrollees or contract holders to whom it is obligated to provide health care services or detrimental to a carrier with whom it has contracted to provide the services;

d. The certified organized delivery system is unable to maintain the standards as set forth by the commissioner by regulation;

e. The certified organized delivery system has failed, as provided by the contract, to comply with the provisions of P.L.1997, c.192 (C.26:2S-1 et seq.);

f. The certified organized delivery system has failed to provide the health care services for which it has been certified or has provided health care services which are in contravention of the contract or contracts filed with the commissioner;

g. The certified organized delivery system has otherwise failed to comply with this act or with other applicable law; or

h. There are other reasonable grounds that warrant suspension or revocation.

44. Section 8 of P.L.1999, c.409 (C.17:48H-8) is amended to read as follows:

C.17:48H-8 Notification of grounds for suspension, revocation of certification.

8. a. If the Commissioner of Banking and Insurance has cause to believe that grounds exist for the suspension or revocation of the certification issued to an organized delivery system, the commissioner shall notify the system, in writing, specifically stating the grounds for suspension or revocation and fixing a time for a hearing in accordance with the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.). If the certification is revoked, the organized delivery system shall submit a plan to the commissioner within 15 days of the revocation, for the winding up of its affairs, and shall conduct no further business except as may be essential to the orderly conclusion of its business. The commissioner may, by written order, permit such further operation of the organized delivery system as the commissioner finds to be in the best interest of individuals receiving health care services from the system.

b. The commissioner shall notify all carriers with contracts with the system that are on file with the Department of Banking and Insurance of the proceedings.

45. Section 9 of P.L.1999, c.409 (C.17:48H-9) is amended to read as follows:

C.17:48H-9 Fees.

9. A certified organized delivery system shall pay to the Commissioner of Banking and Insurance those application and examination fees as are established by the commissioner by regulation.

46. Section 10 of P.L.1999, c.409 (C.17:48H-10) is amended to read as follows:

C.17:48H-10 Civil administrative penalty.

10. The Commissioner of Banking and Insurance may, upon notice and hearing, assess a civil administrative penalty in an amount not less than \$250 nor more than \$10,000 for each day that a certified organized delivery system is in violation of this act. Penalties imposed by the commissioner

pursuant to this section may be in lieu of, or in addition to, suspension or revocation of a certification pursuant to this act. A penalty may be recovered in a summary proceeding pursuant to "The Penalty Enforcement Law of 1999," P.L.1999, c.274 (C.2A:58-10 et seq.).

47. Section 11 of P.L.1999, c.409 (C.17:48H-11) is amended to read as follows:

C.17:48H-11 Application for licensure.

11. a. An organized delivery system which receives compensation on a basis that entails the assumption of financial risk shall submit an application for licensure to the Commissioner of Banking and Insurance. The organized delivery system may continue to operate during the pendency of its application, but in no case longer than 12 months after the date of submission of the application to the Department of Banking and Insurance, unless the commissioner, by regulation, extends the 12-month limitation. In the event the application is denied, the applicant shall be treated as an organized delivery system whose license has been revoked pursuant to sections 23 and 24 of this act.

Notwithstanding the obligations imposed by this act regarding licensure requirements, nothing in this subsection shall operate to impair any contract in force on the effective date of this act, but this act shall apply to any contract renewed on or after the effective date of this act.

b. An organized delivery system which receives compensation on a basis that entails the assumption of financial risk, but meets the criteria set forth in this subsection, may apply to the commissioner for an exemption from the licensure requirements of this act based on the system's current contractual arrangements.

The commissioner may grant the exemption for such period of time that the commissioner determines that the financial risk of the organized delivery system is de minimis because the organized delivery system's exposure to financial loss is limited in amount or likelihood to the degree that it reasonably will not prevent the system from satisfying the liabilities imposed under the terms of its contracts.

The commissioner may revoke the organized delivery system's exemption from licensure, after notice and an opportunity to be heard, if the commissioner determines that the system's contracts no longer meet the requirements for exemption set forth in this subsection. Upon revocation of the exemption, the system shall be required to obtain licensure from the department within 90 days.

c. An organized delivery system that is granted an exemption from licensure shall apply to and obtain certification as an organized delivery system from the Department of Banking and Insurance pursuant to the provisions of this act.

d. A licensed organized delivery system shall not directly issue health benefits plans.

48. Section 12 of P.L.1999, c.409 (C.17:48H-12) is amended to read as follows:

C.17:48H-12 Form, contents of application.

12. Application for a license to operate an organized delivery system shall be made to the Commissioner of Banking and Insurance on a form prescribed by the commissioner, shall be certified by an officer or authorized representative of the applicant, and shall include the following:

a. A copy of the applicant's basic organizational documents. For purposes of this subsection, "basic organizational documents" means the articles of incorporation, articles of association, partnership agreement, management agreement, trust agreement, or other applicable documents as appropriate to the applicant's form of business entity and all amendments to those documents;

b. A copy of the executed bylaws, rules, and regulations, or similar documents, regulating the conduct of the applicant's internal affairs;

c. A list, in a form approved by the Commissioner of Banking and Insurance, of the names, addresses, and official positions of the persons who are to be responsible for the conduct of the affairs of the applicant, including, but not limited to, the members of the board of directors, executive committee or other governing board or committee, the principal officers, and any person or entity owning or having the right to acquire 10% or more of the voting securities of the applicant; in the case of a partnership or association, the names of the partners or members; each person who has loaned funds to the applicant for the operation of its business; and a statement of any criminal convictions or civil, enforcement or regulatory action, including actions relating to professional licenses, taken against any person who is a member of the board, the executive committee or other governing board or committee, or the principal officers, or the persons who are responsible for the conduct of the affairs of the applicant;

d. A statement generally describing the applicant, its facilities, personnel, and the health care services to be offered by the organized delivery system;

e. A copy of the standard form of any provider agreement made or to be made between the applicant and any providers relative to the provision of health care services;

f. A copy of the form of any contract made or to be made between the applicant and any carrier for the provision of or arrangement to provide health care services, which contract shall contain provisions establishing the respective duties of the carrier and the applicant with respect to compliance with P.L.1997, c.192 (C.26:2S-1 et seq.);

g. A copy of the applicant's most recent financial statements audited by an independent certified public accountant. If the financial affairs of the applicant's parent company are audited by an independent certified public accountant, but those of the applicant are not, then a copy of the most recent audited financial statement of the applicant's parent company, audited by an independent certified public accountant, shall be submitted. A consolidated financial statement of the applicant and its parent company shall satisfy this requirement unless the Commissioner of Banking and Insurance determines that additional or more recent financial information is required for the proper administration of this act;

h. A copy of the applicant's financial plan, including a three-year projection of anticipated operating results, a statement of the sources of working capital and any other sources of funding and provisions for contingencies;

i. With respect to each contract made or to be made between the applicant and any other person who will provide comprehensive or limited health care services:

(1) A list of the persons who are to provide the health care services, and the geographical area in which they are located and in which the services are to be performed;

(2) A list of any affiliate of the applicant which provides services to the applicant in this State and a description of any material transaction between the affiliate and the applicant;

(3) A description of the health care services or benefits to be offered or proposed to be offered;

(4) A description of the means which will be utilized to assure the availability and accessibility of the health care services to enrollees or contract holders;

(5) A plan, in the event of the insolvency of the organized delivery system, for continuation of the health care services to be provided for under the contract; and

(6) A description of the means by which the organized delivery system shall be compensated for each contract entered into with a carrier;

j. A power of attorney, duly executed by the applicant, if not domiciled in this State, appointing the Commissioner of Banking and Insurance and the commissioner's successors in office as the true and lawful attorney of the applicant in and for this State upon whom all lawful process in any legal action or proceeding against the organized delivery system in a cause of action arising in this State may be served;

k. A list of all administrative, civil, or criminal actions and proceedings to which the applicant, or any of its affiliates, or persons who are responsible for the conduct of the affairs of the applicant or affiliate, have been subject and the resolution of those actions and proceedings. If a license, certificate or other authority to operate has been refused, suspended, or revoked by any jurisdiction, the applicant shall provide a copy of any orders, proceedings and determinations relating thereto; and

l. Other information as may be required by the Commissioner of Banking and Insurance.

49. Section 13 of P.L.1999, c.409 (C.17:48H-13) is amended to read as follows:

C.17:48H-13 Review of application.

13. Following receipt of an application for licensure, the Commissioner of Banking and Insurance shall review it and notify the applicant of any deficiencies contained therein.

a. The Commissioner of Banking and Insurance shall issue a license to an organized delivery system if the commissioner finds that the system meets the standards provided for in this act, including, but not limited to:

- (1) All of the material required by section 12 of this act has been filed;
- (2) The persons responsible for conducting the applicant's affairs are competent, trustworthy, and possess good reputations, and have had appropriate experience, training, and education;
- (3) The persons who are to perform the health care services are properly qualified;
- (4) The organized delivery system has demonstrated the ability to assure that health care services will be provided in a manner which will assure the availability and accessibility of the services;
- (5) The standard forms of provider agreements to be used by the organized delivery system are acceptable;
- (6) The applicant is financially sound and may reasonably be expected to meet its obligations to enrollees, contract holders and carriers. In making this determination, the commissioner shall consider:

(a) The financial soundness of the applicant's compensation arrangements for the provision of health care services;

(b) The adequacy of working capital, other sources of funding and provisions for contingencies; and

(c) Whether any deposit of cash or securities, or any other evidence of financial protection submitted, meets the requirements set forth in this act or by the commissioner by regulation;

(7) Any deficiencies identified by the commissioner have been corrected; and

(8) Any other factors determined by the commissioner to be relevant have been addressed to the satisfaction of the commissioner.

b. (Deleted by amendment, P.L.2012, c.17).

c. The Commissioner of Banking and Insurance, may deny an application for a license if the applicant fails to meet any of the standards provided in this act or on any other reasonable grounds. If the license is denied, the Commissioner of Banking and Insurance shall notify the applicant and shall set forth the reasons for the denial in writing. The applicant may request a hearing by notice to the commissioner within 30 days of receiving the notice of denial. Upon such denial, the applicant shall submit to the commissioner a plan for bringing the organized delivery system into compliance or providing for the closing down of its business.

50. Section 15 of P.L.1999, c.409 (C.17:48H-15) is amended to read as follows:

C.17:48H-15 Services provided by licensed organized delivery system.

15. A licensed organized delivery system may:

a. Contract with an insurer licensed in this State for the provision of indemnity coverage against the cost of services provided by the system or other obligations of the system, either on an individual or aggregate attachment basis; and

b. In addition to comprehensive or limited services, as applicable, provided by the system for enrollees or contract holders, provide:

(1) Additional services as approved by the Commissioner of Banking and Insurance;

(2) Indemnity benefits covering urgent care or emergency services;

(3) Coverage for services from providers, other than participating providers, in accordance with the terms of the contract; and

(4) Any other function provided by law, in the system's organizational documents or in the license.

51. Section 31 of P.L.1999, c.409 (C.17:48H-31) is amended to read as follows:

C.17:48H-31 Notification of change of means for receipt of compensation.

31. Any certified organized delivery system which intends to change the means by which it receives compensation so that it will be compensated on a basis that entails the assumption of financial risk shall make application for licensure to the Commissioner of Banking and Insurance pursuant to this act.

52. Section 32 of P.L.1999, c.409 (C.17:48H-32) is amended to read as follows:

C.17:48H-32 Rules, regulations.

32. The Commissioner of Banking and Insurance shall adopt rules and regulations pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), to effectuate the purposes of this act.

The commissioner shall adopt the rules and regulations within 180 days of the date of enactment of this act.

53. Section 33 of P.L.1999, c.409 (C.17:48H-33) is amended to read as follows:

C.17:48H-33 Applicability of health care quality act.

33. An organized delivery system which is licensed by the Department of Banking and Insurance shall be subject to the "Health Care Quality Act," P.L.1997, c.192 (C.26:2S-1 et seq.) and the regulations promulgated thereunder.

54. Section 35 of P.L.1999, c.409 (C.17:48H-35) is amended to read as follows:

C.17:48H-35 Documents deemed proprietary, confidential.

35. Any documents provided by a organized delivery system to the Department of Banking and Insurance pursuant to this act that are deemed by the Commissioner of Banking and Insurance to be proprietary, shall be confidential and shall not be considered public documents pursuant to P.L.1963, c.73 (C.47:1A-2).

55. Section 3 of P.L.1995, c.316 (C.17B:27-46.11) is amended to read as follows:

C.17B:27-46.11 Group health insurance policy, child screening, blood lead, hearing loss; immunizations.

3. No group health insurance policy providing hospital or medical expense benefits for groups with more than 50 persons shall be delivered, issued, executed, or renewed in this State, or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance on or after the effective date of P.L.2005, c.248 (C.17:48E-35.27 et al.), unless the policy provides benefits to any named insured or other person covered thereunder for expenses incurred in the following:

a. Screening by blood lead measurement for lead poisoning for children, including confirmatory blood lead testing as specified by the Department of Health pursuant to section 7 of P.L.1995, c.316 (C.26:2-137.1); and medical evaluation and any necessary medical follow-up and treatment for lead poisoned children.

b. All childhood immunizations as recommended by the Advisory Committee on Immunization Practices of the United States Public Health Service and the Department of Health pursuant to section 7 of P.L.1995, c.316 (C.26:2-137.1). A health insurer shall notify its policyholders, in writing, of any change in coverage with respect to childhood immunizations and any related changes in premium. Such notification shall be in a form and manner to be determined by the Commissioner of Banking and Insurance.

c. Screening for newborn hearing loss by appropriate electrophysiologic screening measures and periodic monitoring of infants for delayed onset hearing loss, pursuant to P.L.2001, c.373 (C.26:2-103.1 et al.). Payment for this screening service shall be separate and distinct from payment for routine new baby care in the form of a newborn hearing screening fee as negotiated with the provider and facility.

The benefits provided pursuant to this section shall be provided to the same extent as for any other medical condition under the policy, except that a deductible shall not be applied for benefits provided pursuant to this section; however, with respect to a policy that qualifies as a high deductible health plan for which qualified medical expenses are paid using a health savings account established pursuant to section 223 of the federal Internal Revenue Code of 1986 (26 U.S.C. s.223), a deductible shall not be applied for any benefits provided pursuant to this section that represent preventive care as permitted by that federal law, and shall not be applied as provided pursuant to section 9 of P.L.2005, c.248 (C.17B:27-46.1dd). This section shall apply to all group health insurance policies in which the health insurer has reserved the right to change the premium.

56. Section 4 of P.L.2001, c.368 (C.17B:27A-4.7) is amended to read as follows:

C.17B:27A-4.7 Carrier offering plans pursuant to C.17B:27A-2 et seq. may offer additional plan with certain limited benefits.

4. In addition to the health benefits plans offered by a carrier on the effective date of this act, a carrier that writes individual health benefits plans pursuant to P.L.1992, c.161 (C.17B:27A-2 et al.) may also offer one or more of the plans through the carrier's network of providers, with no reimbursement for any out-of-network benefits other than emergency care, urgent care, and continuity of care. A carrier's network of providers shall be subject to review and approval or disapproval by the Commissioner of Banking and Insurance, in consultation with the Commissioner of Health, pursuant to regulations promulgated by the Department of Banking and Insurance, including review and approval or disapproval before plans with benefits provided through a carrier's network of providers pursuant to this section may be offered by the carrier. Policies or contracts written on this basis shall be rated in a separate rating pool for the purposes of establishing a premium, but for the purpose of determining a carrier's losses, these policies or contracts shall be aggregated with the losses on the carrier's other business written pursuant to the provisions of P.L.1992, c.161 (C.17B:27A-2 et al.).

57. Section 6 of P.L.1992, c.161 (C.17B:27A-7) is amended to read as follows:

C.17B:27A-7 Establishment of policy; contract forms; high deductible health plan; benefit levels.

6. The commissioner shall approve the policy and contract forms and benefit levels to be made available by all carriers for the health benefits plans required to be issued pursuant to section 3 of P.L.1992, c.161 (C.17B:27A-4), and shall adopt such modifications to one or more plans as the board determines are necessary to make available a "high deductible health plan" or plans consistent with section 301 of Title III of the "Health Insurance Portability and Accountability Act of 1996," Pub.L.104-191 (26 U.S.C. s.220), regarding tax-deductible medical savings accounts, within 60 days after the enactment of P.L.1997, c.414 (C.54A:3-4 et al.). The commissioner shall provide the board with an informational filing of the policy and contract forms and benefit levels it approves.

a. The individual health benefits plans established by the board may include cost containment measures such as, but not limited to: utilization

review of health care services, including review of medical necessity of hospital and physician services; case management benefit alternatives; selective contracting with hospitals, physicians, and other health care providers; and reasonable benefit differentials applicable to participating and non-participating providers; and other managed care provisions.

b. An individual health benefits plan offered pursuant to section 3 of P.L.1992, c.161 (C.17B:27A-4) shall contain a limitation of no more than 12 months on coverage for preexisting conditions. An individual health benefits plan offered pursuant to section 3 of P.L.1992, c.161 (C.17B:27A-4) shall not contain a preexisting condition limitation of any period under the following circumstances:

(1) to an individual who has, under creditable coverage, with no intervening lapse in coverage of more than 31 days, been treated or diagnosed by a physician for a condition under that plan or satisfied a 12-month pre-existing condition limitation; or

(2) to a federally defined eligible individual who applies for an individual health benefits plan within 63 days of termination of the prior coverage.

c. In addition to the standard individual health benefits plans provided for in section 3 of P.L.1992, c.161 (C.17B:27A-4), the board may develop up to five rider packages. Premium rates for the rider packages shall be determined in accordance with section 8 of P.L.1992, c.161 (C.17B:27A-9).

d. After the board's establishment of the individual health benefits plans required pursuant to section 3 of P.L.1992, c.161 (C.17B:27A-4), and notwithstanding any law to the contrary, a carrier shall file the policy or contract forms with the commissioner and certify to the commissioner that the health benefits plans to be used by the carrier are in substantial compliance with the provisions in the corresponding approved plans. The certification shall be signed by the chief executive officer of the carrier. Upon receipt by the commissioner of the certification, the certified plans may be used until the commissioner, after notice and hearing, disapproves their continued use.

e. Effective immediately for an individual health benefits plan issued on or after the effective date of P.L.2005, c.248 (C.17:48E-35.27 et al.) and effective on the first 12-month anniversary date of an individual health benefits plan in effect on the effective date of P.L.2005, c.248 (C.17:48E-35.27 et al.), the individual health benefits plans required pursuant to section 3 of P.L.1992, c.161 (C.17B:27A-4), including any plan offered by a federally qualified health maintenance organization, shall contain benefits for expenses incurred in the following:

(1) Screening by blood lead measurement for lead poisoning for children, including confirmatory blood lead testing as specified by the Department of Health pursuant to section 7 of P.L.1995, c.316 (C.26:2-137.1); and medical evaluation and any necessary medical follow-up and treatment for lead poisoned children.

(2) All childhood immunizations as recommended by the Advisory Committee on Immunization Practices of the United States Public Health Service and the Department of Health pursuant to section 7 of P.L.1995, c.316 (C.26:2-137.1). A carrier shall notify its insureds, in writing, of any change in the health care services provided with respect to childhood immunizations and any related changes in premium. Such notification shall be in a form and manner to be determined by the Commissioner of Banking and Insurance.

(3) Screening for newborn hearing loss by appropriate electrophysiologic screening measures and periodic monitoring of infants for delayed onset hearing loss, pursuant to P.L.2001, c.373 (C.26:2-103.1 et al.). Payment for this screening service shall be separate and distinct from payment for routine new baby care in the form of a newborn hearing screening fee as negotiated with the provider and facility.

The benefits provided pursuant to this subsection shall be provided to the same extent as for any other medical condition under the health benefits plan, except that a deductible shall not be applied for benefits provided pursuant to this subsection; however, with respect to a health benefits plan that qualifies as a high deductible health plan for which qualified medical expenses are paid using a health savings account established pursuant to section 223 of the federal Internal Revenue Code of 1986 (26 U.S.C. s.223), a deductible shall not be applied for any benefits provided pursuant to this subsection that represent preventive care as permitted by that federal law, and shall not be applied as provided pursuant to section 14 of P.L.2005, c.248 (C.17B:27A-7.11). This subsection shall apply to all individual health benefits plans in which the carrier has reserved the right to change the premium.

f. Effective immediately for a health benefits plan issued on or after the effective date of P.L.2001, c.361 (C.17:48-6z et al.) and effective on the first 12-month anniversary date of a health benefits plan in effect on the effective date of P.L.2001, c.361 (C.17:48-6z et al.), the health benefits plans required pursuant to section 3 of P.L.1992, c.161 (C.17B:27A-4) that provide benefits for expenses incurred in the purchase of prescription drugs shall provide benefits for expenses incurred in the purchase of specialized non-standard infant formulas, when the covered infant's physician has di-

agnosed the infant as having multiple food protein intolerance and has determined such formula to be medically necessary, and when the covered infant has not been responsive to trials of standard non-cow milk-based formulas, including soybean and goat milk. The coverage may be subject to utilization review, including periodic review, of the continued medical necessity of the specialized infant formula.

The benefits shall be provided to the same extent as for any other prescribed items under the health benefits plan.

This subsection shall apply to all individual health benefits plans in which the carrier has reserved the right to change the premium.

g. Effective immediately for an individual health benefits plan issued on or after the effective date of P.L.2005, c.248 (C.17:48E-35.27 et al.) and effective on the first 12-month anniversary date of an individual health benefits plan in effect on the effective date of P.L.2005, c.248 (C.17:48E-35.27 et al.), the health benefits plans required pursuant to section 3 of P.L.1992, c.161 (C.17B:27A-4) that qualify as high deductible health plans for which qualified medical expenses are paid using a health savings account established pursuant to section 223 of the federal Internal Revenue Code of 1986 (26 U.S.C. s.223), including any plan offered by a federally qualified health maintenance organization, shall contain benefits for expenses incurred in connection with any medically necessary benefits provided in-network which represent preventive care as permitted by that federal law.

The benefits provided pursuant to this subsection shall be provided to the same extent as for any other medical condition under the health benefits plan, except that a deductible shall not be applied for benefits provided pursuant to this subsection. This subsection shall apply to all individual health benefits plans in which the carrier has reserved the right to change the premium.

58. Section 3 of P.L.1992, c.162 (C.17B:27A-19) is amended to read as follows:

C.17B:27A-19 Health benefits plans offered to small employers; exceptions.

3. a. Except as provided in subsection f. of this section, every small employer carrier shall, as a condition of transacting business in this State, offer to every small employer at least three of the health benefit plans established by the board, as provided in this section, and also offer and make a good faith effort to market individual health benefits plans as provided in section 3 of P.L.1992, c.161 (C.17B:27A-4). The board shall establish a standard policy form for each of the plans, which except as otherwise pro-

vided in subsection j. of this section, shall be the only plans offered to small groups on or after January 1, 1994. One policy form shall contain the benefits provided for in sections 55, 57, and 59 of P.L.1991, c.187 (C.17:48E-22.2, 17B:26B-2 and 26:2J-4.3). In the case of indemnity carriers, one policy form shall be established which contains benefits and cost sharing levels which are equivalent to the health benefits plans of health maintenance organizations pursuant to the "Health Maintenance Organization Act of 1973," Pub.L.93-222 (42 U.S.C. s.300e et seq.). The remaining policy forms shall contain basic hospital and medical-surgical benefits, including, but not limited to:

- (1) Basic inpatient and outpatient hospital care;
- (2) Basic and extended medical-surgical benefits;
- (3) Diagnostic tests, including X-rays;
- (4) Maternity benefits, including prenatal and postnatal care; and
- (5) Preventive medicine, including periodic physical examinations and inoculations.

At least three of the forms shall provide for major medical benefits in varying lifetime aggregates, one of which shall provide at least \$1,000,000 in lifetime aggregate benefits. The policy forms provided pursuant to this section shall contain benefits representing progressively greater actuarial values.

Notwithstanding the provisions of this subsection to the contrary, the board also may establish additional policy forms by which a small employer carrier, other than a health maintenance organization, may provide indemnity benefits for health maintenance organization enrollees by direct contract with the enrollees' small employer through a dual arrangement with the health maintenance organization. The dual arrangement shall be filed with the commissioner for approval. The additional policy forms shall be consistent with the general requirements of P.L.1992, c.162 (C.17B:27A-17 et seq.).

b. Initially, a carrier shall offer a plan within 90 days of the approval of such plan by the commissioner. Thereafter, the plans shall be available to all small employers on a continuing basis. Every small employer which elects to be covered under any health benefits plan who pays the premium therefor and who satisfies the participation requirements of the plan shall be issued a policy or contract by the carrier.

c. The carrier may establish a premium payment plan which provides installment payments and which may contain reasonable provisions to ensure payment security, provided that provisions to ensure payment security are uniformly applied.

d. In addition to the standard policies described in subsection a. of this section, the board may develop up to five rider packages. Any such pack-

age which a carrier chooses to offer shall be issued to a small employer who pays the premium therefor, and shall be subject to the rating methodology set forth in section 9 of P.L.1992, c.162 (C.17B:27A-25).

e. (Deleted by amendment, P.L.2008, c.38).

f. Notwithstanding the provisions of this section to the contrary, a health maintenance organization which is a qualified health maintenance organization pursuant to the "Health Maintenance Organization Act of 1973," Pub.L.93-222 (42 U.S.C. s.300e et seq.) shall be permitted to offer health benefits plans formulated by the board and approved by the commissioner which are in accordance with the provisions of that law in lieu of the plans required pursuant to this section.

Notwithstanding the provisions of this section to the contrary, a health maintenance organization which is approved pursuant to P.L.1973, c.337 (C.26:2J-1 et seq.) shall be permitted to offer health benefits plans formulated by the board and approved by the commissioner which are in accordance with the provisions of that law in lieu of the plans required pursuant to this section, except that the plans shall provide the same level of benefits as required for a federally qualified health maintenance organization, including any requirements concerning copayments by enrollees.

g. A carrier shall not be required to own or control a health maintenance organization or otherwise affiliate with a health maintenance organization in order to comply with the provisions of this section, but the carrier shall be required to offer at least three of the health benefits plans which are formulated by the board and approved by the commissioner, including one plan which contains benefits and cost sharing levels that are equivalent to those required for health maintenance organizations.

h. Notwithstanding the provisions of subsection a. of this section to the contrary, the board may modify the benefits provided for in sections 55, 57 and 59 of P.L.1991, c.187 (C.17:48E-22.2, 17B:26B-2 and 26:2J-4.3).

i. (1) In addition to the rider packages provided for in subsection d. of this section, every carrier may offer, in connection with the health benefits plans required to be offered by this section, any number of riders which may revise the coverage offered by the plans in any way, provided, however, that any form of such rider or amendment thereof which decreases benefits or decreases the actuarial value of a plan shall be filed for informational purposes with the board and for approval by the commissioner before such rider may be sold. Any rider or amendment thereof which adds benefits or increases the actuarial value of a plan shall be filed with the board for informational purposes before such rider may be sold. The added pre-

mium or reduction in premium for each rider, as applicable, shall be listed separately from the premium for the standard plan.

The commissioner shall disapprove any rider filed pursuant to this subsection that is unjust, unfair, inequitable, unreasonably discriminatory, misleading, contrary to law or the public policy of this State. The commissioner shall not approve any rider which reduces benefits below those required by sections 55, 57 and 59 of P.L.1991, c.187 (C.17:48E-22.2, 17B:26B-2 and 26:2J-4.3) and required to be sold pursuant to this section. The commissioner's determination shall be in writing and shall be appealable.

(2) The benefit riders provided for in paragraph (1) of this subsection shall be subject to the provisions of section 2, subsection b. of section 3, and sections 6, 7, 8, 9 and 11 of P.L.1992, c.162 (C.17B:27A-18, 17B:27A-19, 17B:27A-22, 17B:27A-23, 17B:27A-24, 17B:27A-25, and 17B:27A-27).

j. (1) Notwithstanding the provisions of P.L.1992, c.162 (C.17B:27A-17 et seq.) to the contrary, a health benefits plan issued by or through a carrier, association, or multiple employer arrangement prior to January 1, 1994 or, if the requirements of subparagraph (c) of paragraph (6) of this subsection are met, issued by or through an out-of-State trust prior to January 1, 1994, at the option of a small employer policy or contract holder, may be renewed or continued after February 28, 1994, or in the case of such a health benefits plan whose anniversary date occurred between March 1, 1994 and the effective date of P.L.1994, c.11 (C.17B:27A-19.1 et al.), may be reinstated within 60 days of that anniversary date and renewed or continued if, beginning on the first 12-month anniversary date occurring on or after the sixtieth day after the board adopts regulations concerning the implementation of the rating factors permitted by section 9 of P.L.1992, c.162 (C.17B:27A-25) and, regardless of the situs of delivery of the health benefits plan, the health benefits plan renewed, continued or reinstated pursuant to this subsection complies with the provisions of section 2, subsection b. of section 3, and sections 6, 7, 8, 9 and 11 of P.L.1992, c.162 (C.17B:27A-18, 17B:27A-19, 17B:27A-22, 17B:27A-23, 17B:27A-24, 17B:27A-25 and 17B:27A-27) and section 7 of P.L.1995, c.340 (C.17B:27A-19.3).

Nothing in this subsection shall be construed to require an association, multiple employer arrangement or out-of-State trust to provide health benefits coverage to small employers that are not contemplated by the organizational documents, bylaws, or other regulations governing the purpose and operation of the association, multiple employer arrangement or out-of-State trust. Notwithstanding the foregoing provision to the contrary, an association, multiple employer arrangement or out-of-State trust that offers health benefits coverage to its members' employees and dependents:

(a) shall offer coverage to all eligible employees and their dependents within the membership of the association, multiple employer arrangement or out-of-State trust;

(b) shall not use actual or expected health status in determining its membership; and

(c) shall make available to its small employer members at least one of the standard benefits plans, as determined by the commissioner, in addition to any health benefits plan permitted to be renewed or continued pursuant to this subsection.

(2) Notwithstanding the provisions of this subsection to the contrary, a carrier or out-of-State trust which writes the health benefits plans required pursuant to subsection a. of this section shall be required to offer those plans to any small employer, association or multiple employer arrangement.

(3) (a) A carrier, association, multiple employer arrangement, or out-of-State trust may withdraw a health benefits plan marketed to small employers that was in effect on December 31, 1993 with the approval of the commissioner. The commissioner shall approve a request to withdraw a plan, consistent with regulations adopted by the commissioner, only on the grounds that retention of the plan would cause an unreasonable financial burden to the issuing carrier, taking into account the rating provisions of section 9 of P.L.1992, c.162 (C.17B:27A-25) and section 7 of P.L.1995, c.340 (C.17B:27A-19.3).

(b) A carrier which has renewed, continued or reinstated a health benefits plan pursuant to this subsection that has not been newly issued to a new small employer group since January 1, 1994, may, upon approval of the commissioner, continue to establish its rates for that plan based on the loss experience of that plan if the carrier does not issue that health benefits plan to any new small employer groups.

(4) (Deleted by amendment, P.L.1995, c.340).

(5) A health benefits plan that otherwise conforms to the requirements of this subsection shall be deemed to be in compliance with this subsection, notwithstanding any change in the plan's deductible or copayment.

(6) (a) Except as otherwise provided in subparagraphs (b) and (c) of this paragraph, a health benefits plan renewed, continued or reinstated pursuant to this subsection shall be filed with the commissioner for informational purposes within 30 days after its renewal date. No later than 60 days after the board adopts regulations concerning the implementation of the rating factors permitted by section 9 of P.L.1992, c.162 (C.17B:27A-25) the filing shall be amended to show any modifications in the plan that are necessary to comply with the provisions of this subsection. The commissioner

shall monitor compliance of any such plan with the requirements of this subsection, except that the board shall enforce the loss ratio requirements.

(b) A health benefits plan filed with the commissioner pursuant to subparagraph (a) of this paragraph may be amended as to its benefit structure if the amendment does not reduce the actuarial value and benefits coverage of the health benefits plan below that of the lowest standard health benefits plan established by the board pursuant to subsection a. of this section. The amendment shall be filed with the commissioner for approval pursuant to the terms of sections 4, 8, 12 and 25 of P.L.1995, c.73 (C.17:48-8.2, 17:48A-9.2, 17:48E-13.2 and 26:2J-43), N.J.S.17B:26-1 and N.J.S.17B:27-49, as applicable, and shall comply with the provisions of sections 2 and 9 of P.L.1992, c.162 (C.17B:27A-18 and 17B:27A-25) and section 7 of P.L.1995, c.340 (C.17B:27A-19.3).

(c) A health benefits plan issued by a carrier through an out-of-State trust shall be permitted to be renewed or continued pursuant to paragraph (1) of this subsection upon approval by the commissioner and only if the benefits offered under the plan are at least equal to the actuarial value and benefits coverage of the lowest standard health benefits plan established by the board pursuant to subsection a. of this section. For the purposes of meeting the requirements of this subparagraph, carriers shall be required to file with the commissioner the health benefits plans issued through an out-of-State trust no later than 180 days after the date of enactment of P.L.1995, c.340. A health benefits plan issued by a carrier through an out-of-State trust that is not filed with the commissioner pursuant to this subparagraph, shall not be permitted to be continued or renewed after the 180-day period.

(7) Notwithstanding the provisions of P.L.1992, c.162 (C.17B:27A-17 et seq.) to the contrary, an association, multiple employer arrangement or out-of-State trust may offer a health benefits plan authorized to be renewed, continued or reinstated pursuant to this subsection to small employer groups that are otherwise eligible pursuant to paragraph (1) of subsection j. of this section during the period for which such health benefits plan is otherwise authorized to be renewed, continued or reinstated.

(8) Notwithstanding the provisions of P.L.1992, c.162 (C.17B:27A-17 et seq.) to the contrary, a carrier, association, multiple employer arrangement or out-of-State trust may offer coverage under a health benefits plan authorized to be renewed, continued or reinstated pursuant to this subsection to new employees of small employer groups covered by the health benefits plan in accordance with the provisions of paragraph (1) of this subsection.

(9) Notwithstanding the provisions of P.L.1992, c.162 (C.17B:27A-17 et seq.) or P.L.1992, c.161 (C.17B:27A-2 et al.) to the contrary, any individ-

ual, who is eligible for small employer coverage under a policy issued, renewed, continued or reinstated pursuant to this subsection, but who would be subject to a preexisting condition exclusion under the small employer health benefits plan, or who is a member of a small employer group who has been denied coverage under the small employer group health benefits plan for health reasons, may elect to purchase or continue coverage under an individual health benefits plan until such time as the group health benefits plan covering the small employer group of which the individual is a member complies with the provisions of P.L.1992, c.162 (C.17B:27A-17 et seq.).

(10) In a case in which an association made available a health benefits plan on or before March 1, 1994 and subsequently changed the issuing carrier between March 1, 1994 and the effective date of P.L.1995, c.340, the new issuing carrier shall be deemed to have been eligible to continue and renew the plan pursuant to paragraph (1) of this subsection.

(11) In a case in which an association, multiple employer arrangement or out-of-State trust made available a health benefits plan on or before March 1, 1994 and subsequently changes the issuing carrier for that plan after the effective date of P.L.1995, c.340, the new issuing carrier shall file the health benefits plan with the commissioner for approval in order to be deemed eligible to continue and renew that plan pursuant to paragraph (1) of this subsection.

(12) In a case in which a small employer purchased a health benefits plan directly from a carrier on or before March 1, 1994 and subsequently changes the issuing carrier for that plan after the effective date of P.L.1995, c.340, the new issuing carrier shall file the health benefits plan with the commissioner for approval in order to be deemed eligible to continue and renew that plan pursuant to paragraph (1) of this subsection.

Notwithstanding the provisions of subparagraph (b) of paragraph (6) of this subsection to the contrary, a small employer who changes its health benefits plan's issuing carrier pursuant to the provisions of this paragraph, shall not, upon changing carriers, modify the benefit structure of that health benefits plan within six months of the date the issuing carrier was changed.

k. Effective immediately for a health benefits plan issued on or after the effective date of P.L.2005, c.248 (C.17:48E-35.27 et al.) and effective on the first 12-month anniversary date of a health benefits plan in effect on the effective date of P.L.2005, c.248 (C.17:48E-35.27 et al.), the health benefits plans required pursuant to this section, including any plans offered by a State approved or federally qualified health maintenance organization, shall contain benefits for expenses incurred in the following:

(1) Screening by blood lead measurement for lead poisoning for children, including confirmatory blood lead testing as specified by the Department of Health pursuant to section 7 of P.L.1995, c.316 (C.26:2-137.1); and medical evaluation and any necessary medical follow-up and treatment for lead poisoned children.

(2) All childhood immunizations as recommended by the Advisory Committee on Immunization Practices of the United States Public Health Service and the Department of Health pursuant to section 7 of P.L.1995, c.316 (C.26:2-137.1). A carrier shall notify its insureds, in writing, of any change in the health care services provided with respect to childhood immunizations and any related changes in premium. Such notification shall be in a form and manner to be determined by the Commissioner of Banking and Insurance.

(3) Screening for newborn hearing loss by appropriate electrophysiologic screening measures and periodic monitoring of infants for delayed onset hearing loss, pursuant to P.L.2001, c.373 (C.26:2-103.1 et al.). Payment for this screening service shall be separate and distinct from payment for routine new baby care in the form of a newborn hearing screening fee as negotiated with the provider and facility.

The benefits provided pursuant to this subsection shall be provided to the same extent as for any other medical condition under the health benefits plan, except that a deductible shall not be applied for benefits provided pursuant to this subsection; however, with respect to a small employer health benefits plan that qualifies as a high deductible health plan for which qualified medical expenses are paid using a health savings account established pursuant to section 223 of the federal Internal Revenue Code of 1986 (26 U.S.C. s.223), a deductible shall not be applied for any benefits that represent preventive care as permitted by that federal law, and shall not be applied as provided pursuant to section 16 of P.L.2005, c.248 (C.17B:27A-19.14). This subsection shall apply to all small employer health benefits plans in which the carrier has reserved the right to change the premium.

1. The board shall consider including benefits for speech-language pathology and audiology services, as rendered by speech-language pathologists and audiologists within the scope of their practices, in at least one of the standard policies and in at least one of the five riders to be developed under this section.

m. Effective immediately for a health benefits plan issued on or after the effective date of P.L.2001, c.361 (C.17:48-6z et al.) and effective on the first 12-month anniversary date of a health benefits plan in effect on the effective date of P.L.2001, c.361 (C.17:48-6z et al.), the health benefits plans

required pursuant to this section that provide benefits for expenses incurred in the purchase of prescription drugs shall provide benefits for expenses incurred in the purchase of specialized non-standard infant formulas, when the covered infant's physician has diagnosed the infant as having multiple food protein intolerance and has determined such formula to be medically necessary, and when the covered infant has not been responsive to trials of standard non-cow milk-based formulas, including soybean and goat milk. The coverage may be subject to utilization review, including periodic review, of the continued medical necessity of the specialized infant formula.

The benefits shall be provided to the same extent as for any other prescribed items under the health benefits plan.

This subsection shall apply to all small employer health benefits plans in which the carrier has reserved the right to change the premium.

n. Effective immediately for a health benefits plan issued on or after the effective date of P.L.2005, c.248 (C.17:48E-35.27 et al.) and effective on the first 12-month anniversary date of a small employer health benefits plan in effect on the effective date of P.L.2005, c.248 (C.17:48E-35.27 et al.), the health benefits plans required pursuant to this section that qualify as high deductible health plans for which qualified medical expenses are paid using a health savings account established pursuant to section 223 of the federal Internal Revenue Code of 1986 (26 U.S.C. s.223), including any plans offered by a State approved or federally qualified health maintenance organization, shall contain benefits for expenses incurred in connection with any medically necessary benefits provided in-network that represent preventive care as permitted by that federal law.

The benefits provided pursuant to this subsection shall be provided to the same extent as for any other medical condition under the health benefits plan, except that no deductible shall be applied for benefits provided pursuant to this subsection. This subsection shall apply to all small employer health benefits plans in which the carrier has reserved the right to change the premium.

59. Section 5 of P.L.2001, c.368 (C.17B:27A-19.11) is amended to read as follows:

C.17B:27A-19.11 Carrier offering plans pursuant to C.17B:27A-17 et seq. may offer additional plan with certain limited benefits.

5. In addition to the standard health benefits plans offered by a carrier on the effective date of this act, a carrier that writes small employer health benefits plans pursuant to P.L.1992, c.162 (C.17B:27A-17 et seq.) may also

offer one or more of the plans through the carrier's network of providers, with no reimbursement for any out-of-network benefits other than emergency care, urgent care, and continuity of care. A carrier's network of providers shall be subject to review and approval or disapproval by the Commissioner of Banking and Insurance, in consultation with the Commissioner of Health, pursuant to regulations promulgated by the Department of Banking and Insurance, including review and approval or disapproval before plans with benefits provided through a carrier's network of providers pursuant to this section may be offered by the carrier. Policies or contracts written on this basis shall be rated in a separate rating pool for the purposes of establishing a premium, but for the purpose of determining a carrier's losses, these policies or contracts shall be aggregated with the losses on the carrier's other business written pursuant to the provisions of P.L.1992, c.162 (C.17B:27A-17 et seq.).

60. Section 13 of P.L.1992, c.162 (C.17B:27A-29) is amended to read as follows:

C.17B:27A-29 Meetings, organization of board; terms.

13. a. Within 60 days of the effective date of this act, the commissioner shall give notice to all members of the time and place for the initial organizational meeting, which shall take place within 90 days of the effective date. The members shall elect the initial board, subject to the approval of the commissioner. The board shall consist of 10 elected public members and two ex officio members who include the Commissioner of Health and the commissioner or their designees. Initially, three of the public members of the board shall be elected for a three-year term, three shall be elected for a two-year term, and three shall be elected for a one-year term. Thereafter, all elected board members shall serve for a term of three years. The following categories shall be represented among the elected public members:

(1) Three carriers whose principal health insurance business is in the small employer market;

(2) One carrier whose principal health insurance business is in the large employer market;

(3) A health service corporation or a domestic stock insurer which converted from a health service corporation pursuant to the provisions of P.L.2001, c.131 (C.17:48E-49 et al.) and is primarily engaged in the business of issuing health benefit plans in this State;

(4) Two health maintenance organizations; and

(5) (Deleted by amendment, P.L.1995, c.298).

(6) (Deleted by amendment, P.L.1995, c.298).

(7) Three persons representing small employers, at least one of whom represents minority small employers.

No carrier shall have more than one representative on the board.

The board shall hold an election for the two members added pursuant to P.L.1995, c.298 within 90 days of the date of enactment of that act. Initially, one of the two new members shall serve for a term of one year and one of the two new members shall serve for a term of two years. Thereafter, the new members shall serve for a term of three years. The terms of the risk-assuming carrier and reinsuring carrier shall terminate upon the election of the two new members added pursuant to P.L.1995, c.298, notwithstanding the provisions of this section to the contrary.

In addition to the 10 elected public members, the board shall include six public members appointed by the Governor with the advice and consent of the Senate who shall include:

Two insurance producers licensed to sell health insurance pursuant to P.L.1987, c.293 (C.17:22A-1 et seq.);

One representative of organized labor;

One physician licensed to practice medicine and surgery in this State; and

Two persons who represent the general public and are not employees of a health benefits plan provider.

The public members shall be appointed for a term of three years, except that of the members first appointed, two shall be appointed for a term of one year, two for a term of two years and two for a term of three years.

A vacancy in the membership of the board shall be filled for an unexpired term in the manner provided for the original election or appointment, as appropriate.

b. If the initial board is not elected at the organizational meeting, the commissioner shall appoint the public members within 15 days of the organizational meeting, in accordance with the provisions of paragraphs (1) through (7) of subsection a. of this section.

c. (Deleted by amendment, P.L.1995, c.298).

d. All meetings of the board shall be subject to the requirements of the "Open Public Meetings Act," P.L.1975, c.231 (C.10:4-6 et seq.).

e. At least two copies of the minutes of every meeting of the board shall be delivered forthwith to the commissioner.

61. Section 4 of P.L.2003, c.193 (C.17B:27D-4) is amended to read as follows:

C.17B:27D-4 Membership; terms; vacancies.

4. The commission shall consist of 17 voting members as follows: the Commissioners of Health, Human Services and Banking and Insurance or their designees, who shall serve ex officio; three public members appointed by the President of the Senate, who shall include a representative of a commercial health insurance company, a physician licensed in this State who is a member of the Medical Society of New Jersey, and a representative of the New Jersey Business and Industry Association, no more than two of whom shall be from the same political party; three public members appointed by the Speaker of the General Assembly, who shall include a representative of a health service corporation, a physician licensed in this State, and a representative of organized labor, no more than two of whom shall be from the same political party; and eight public members appointed by the Governor, who shall include a medical educator from the University of Medicine and Dentistry of New Jersey whose major field of expertise is the study and evaluation of the cost of health care and health insurance, a representative of the New Jersey Association of Health Plans, a representative of the New Jersey Hospital Association, a representative of the New Jersey State Nurses Association, a representative of the New Jersey Dental Association, a representative of a consumer advocacy organization and two representatives of the general public who are knowledgeable about health benefits plans.

The President of the Senate may appoint two members of the Senate, no more than one of whom shall be from the same political party, to serve as nonvoting members of the commission. The Speaker of the General Assembly may appoint two members of the General Assembly, no more than one of whom shall be from the same political party, to serve as nonvoting members of the commission. The legislative members shall serve during their legislative term of office.

Of the voting members first appointed, four shall serve for a term of two years, four for a term of three years, and three for a term of four years.

Voting members appointed thereafter shall serve four-year terms, and any vacancy shall be filled by appointment for the unexpired term only. A member is eligible for reappointment. Vacancies in the membership of the commission shall be filled in the same manner as the original appointments were made.

62. Section 5 of P.L.2003, c.193 (C.17B:27D-5) is amended to read as follows:

C.17B:27D-5 Election of chairman, vice chairman, appointment of secretary; meetings.

5. a. The commission shall organize and hold its first meeting within 90 days after the appointment of its members and shall elect a chairman and a vice chairman from among its members. The commission may appoint a secretary, who need not be a member of the commission.

b. The members of the commission shall serve without compensation but may be allowed their actual and necessary expenses incurred in the performance of their duties within the limits of funds appropriated or otherwise made available to the commission for this purpose.

c. The Department of Banking and Insurance, in consultation with the Department of Health, shall assist the commission in the performance of its duties.

d. The commission shall be entitled to call upon the services of any State, county or municipal department, board, commission or agency as it may require and as may be available to it for these purposes, and to incur such traveling and other miscellaneous expenses as it may deem necessary for the proper execution of its duties and as may be within the limit of funds appropriated or otherwise made available to it for these purposes.

e. The commission shall meet regularly, and at a minimum of four times per year. Special meetings may be called by the chairman of the commission.

63. Section 6 of P.L.2003, c.193 (C.17B:27D-6) is amended to read as follows:

C.17B:27D-6 Duties of commission relative to review of bills.

6. It shall be the duty of the commission to review any bill introduced in either House of the Legislature that would require a carrier to provide a mandated health benefit, as provided in this section.

a. Whenever a bill containing a mandated health benefit is introduced in the Legislature, the chairman of the standing reference committee to which the bill has been referred in the House in which it was introduced shall, upon introduction of the bill, request the commission to prepare a written report that assesses the social and financial effects and the medical efficacy of the proposed mandated health benefit.

If the bill is subsequently amended, a prime sponsor or the presiding officer of the House in which the bill is pending may request the commission to amend or revise its report to reflect the changes made by the amendment.

b. (1) For the period ending December 31, 2003, the commission shall complete its review of a bill within 90 days after the date the review is requested, and provide its comments and recommendations in writing to the prime sponsor, committee chairman and presiding officer of the House in which the bill is pending. The commission may request an extension prior to the 90th day, in which case the presiding officer of the House in which the bill is pending may grant an extension of up to 45 days for the commission to complete its review.

(2) Beginning January 1, 2004, the commission shall complete its review of a bill within 60 days after the date the review is requested, and provide its comments and recommendations in writing to the prime sponsor, committee chairman and presiding officer of the House in which the bill is pending. The commission may request an extension prior to the 60th day, in which case the presiding officer of the House in which the bill is pending may grant an extension of up to 45 days for the commission to complete its review.

c. The House or standing reference committee, as applicable, shall not consider or vote upon the bill until either: (1) the commission completes its review and provides its comments and recommendations in writing to the prime sponsor, committee chairman and presiding officer of the House in which the bill is pending, or (2) the 90th or 60th day, as applicable, after the date the review is requested, if no extension was granted, or the designated day for the end of the extension period, whichever is later.

d. (1) If the presiding officer of the House in which the bill is pending determines that the bill is an urgent matter, the presiding officer shall so notify in writing the commission and the chairman of the standing reference committee to which the bill was referred, and the House or committee may consider and vote upon the bill as soon as practicable.

(2) If the chairman of the standing reference committee to which the bill is referred, in consultation with the Commissioner of Health, determines that the bill is of such an urgent nature that it would seriously impair the public health to wait for the commission to issue its report, the chairman shall so notify in writing the presiding officer of the House in which the bill is pending, and the commission, of that determination, and the standing reference committee, with the agreement of the presiding officer of the House, may consider and vote upon the bill as soon as practicable.

64. Section 7 of P.L.2003, c.193 (C.17B:27D-7) is amended to read as follows:

C.17B:27D-7 Contents of review of bill.

7. The review of a bill containing a proposed mandated health benefit by the commission shall include the following:

a. The social impact of mandating the health benefit, which shall include:

(1) the extent to which the proposed mandated health benefit and the services it would provide are needed by, available to and utilized by the population of New Jersey;

(2) the extent to which insurance coverage for the proposed mandated health benefit already exists or, if no coverage exists, the extent to which the lack of coverage results in inadequate health care or financial hardship for the affected population of New Jersey;

(3) the demand for the proposed mandated health benefit from the public and the source and extent of opposition to mandating the health benefit;

(4) relevant findings bearing on the social impact of the lack of the proposed mandated health benefit; and

(5) such other information with respect to the social impact as the commission deems appropriate.

b. The financial impact of mandating the health benefit, which shall include:

(1) the extent to which the proposed mandated health benefit would increase or decrease the cost for treatment or service;

(2) the extent to which similar mandated health benefits in other states have affected charges, costs and payments for services;

(3) the extent to which the proposed mandated health benefit would increase the appropriate use of the treatment or service;

(4) the impact of the proposed mandated health benefit on total costs to carriers and on administrative costs;

(5) the impact of the proposed mandated health benefit on total costs to purchasers and benefit costs;

(6) the impact of the proposed mandated health benefit on the total cost of health care within New Jersey; and

(7) such other information with respect to the financial impact as the commission deems appropriate.

c. The medical efficacy of mandating the health benefit, which shall include:

(1) if the proposed health benefit mandates coverage of a particular treatment or therapy, the recommendation of a clinical study or review article in a major peer-reviewed professional journal;

(2) if the proposed benefit mandates coverage of the services provided by an additional class of practitioners, the results of at least one professionally accepted, controlled trial comparing the medical results achieved by the additional class of practitioners and the practitioners already covered by benefits;

(3) the results of other research;

(4) the impact of the proposed benefit on the general availability of health benefits coverage in New Jersey; and

(5) such other information with respect to the medical efficacy as the commission deems appropriate.

d. The effects of balancing the social, economic and medical efficacy considerations, which shall include, but not be limited to:

(1) the extent to which the need for coverage outweighs the costs of mandating the health benefit; and

(2) the extent to which the problem of coverage may be solved by mandating the availability of the coverage as an option under a health benefits plan.

e. An analysis of information collected from various sources, including, but not limited to:

(1) a State data collection system;

(2) the Departments of Health and Banking and Insurance;

(3) health planning organizations;

(4) proponents and opponents of the proposed health benefit mandate, who shall be encouraged to provide appropriate documentation supporting their positions. The commission shall examine such documentation to determine whether:

(a) the documentation is complete;

(b) the assumptions upon which the research is based are valid;

(c) the research cited in the documentation meets professional standards;

(d) all relevant research respecting the proposed benefit has been cited in the documentation;

(e) the conclusions and interpretations in the documentation are consistent with the data submitted; and

(5) such other data sources as the commission deems appropriate.

In analyzing information from the various sources, the commission shall give substantial weight to the documentation provided by the proponents and opponents of the mandate to the extent that such documentation is made available to them.

65. Section 8 of P.L.2003, c.193 (C.17B:27D-8) is amended to read as follows:

C.17B:27D-8 Development of system of data collection; review, comment.

8. In the course of studying and evaluating proposed mandated health benefits, the commission shall:

a. develop criteria for a system and program of data collection, for use by the Departments of Health and Banking and Insurance, to assess the impact of mandated health benefits, including the cost to employers and carriers, impact of treatment, cost savings in the health care system, number of providers, and other data as may be appropriate; and

b. review and comment to any State department, board, bureau, commission, or agency, with respect to any order or regulations proposed or implemented thereby that affect mandated health benefits.

66. Section 1 of P.L.1999, c.154 (C.17B:30-23) is amended to read as follows:

C.17B:30-23 Timetable for implementation of electronic receipt, transmission of health care claim information; standard forms.

1. a. (1) The Commissioner of Banking and Insurance, in consultation with the Commissioner of Health, shall establish, by regulation, a timetable for implementation of the electronic receipt and transmission of health care claim information by each hospital, medical, and health service corporation, individual and group health insurer, health maintenance organization, dental service corporation, dental plan organization, and prepaid prescription service organization, respectively, and a subsidiary of such corporation, insurer, or organization that processes health care benefits claims as a third party administrator, authorized to do business in this State.

The Commissioner of Banking and Insurance shall establish the timetable within 90 days of the date the federal Department of Health and Human Services adopts rules establishing standards for health care transactions, including: health claims or equivalent encounter information, including institutional, professional, pharmacy, and dental health claims; enrollment and disenrollment in a health plan; eligibility for a health plan; health care payment and remittance advice; health care premium payments; first report of injury; health claim status; and referral certification and authorization, respectively, pursuant to section 262 of Pub.L.104-191 (42 U.S.C.s.1320d et seq.). The commissioner may adopt more than one timetable, if necessary, to conform the requirements of this section with the dates of adoption of the federal rules.

(2) The timetable for implementation adopted by the commissioner shall provide for extensions and waivers of the implementation requirement pursuant to paragraph (1) of this subsection in cases when it has been demonstrated to the commissioner's satisfaction that compliance with the timetable for implementation will result in an undue hardship to a hospital, medical or health service corporation, individual or group health insurer, health maintenance organization, dental service corporation, dental plan organization, or prepaid prescription service organization, respectively, or a subsidiary of such corporation, insurer, or organization that processes health care benefits claims as a third party administrator, authorized to do business in this State.

(3) The Commissioner of Banking and Insurance shall report to the Governor and the Legislature within one year of establishing the timetable pursuant to this subsection, on the number of extensions and waivers of the implementation requirement that he has granted pursuant to paragraph (2) of this subsection, and the reasons therefor.

b. The Commissioner of Banking and Insurance, in consultation with the Commissioner of Health, shall adopt, by regulation for each type of contract, as he deems appropriate, one set of standard health care enrollment and claim forms in paper and electronic formats to be used by each hospital, medical, or health service corporation, individual and group health insurer, health maintenance organization, dental service corporation, dental plan organization, and prepaid prescription service organization, and a subsidiary of such corporation, insurer, or organization that processes health care benefits claims as a third party administrator, authorized to do business in this State.

The Commissioner of Banking and Insurance shall establish the standard health care enrollment and claim forms within 90 days of the date the federal Department of Health and Human Services adopts rules establishing standards for the forms.

67. Section 15 of P.L.1999, c.154 (C.17B:30-24) is amended to read as follows:

C.17B:30-24 Regulations.

15. The Commissioner of Banking and Insurance, in consultation with the Commissioner of Health, shall adopt regulations to effectuate the purposes of sections 1 through 10 of this act, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.). To the extent practicable, the regulations shall include any provisions the commissioner deems

appropriate that seek to reduce the amount of, or to consolidate, the paper forms sent by hospital, medical, health, and dental service corporations, and commercial insurers, health maintenance organizations, dental plan organizations, and prepaid prescription service organizations to health care providers and covered persons.

68. Section 16 of P.L.1999, c.154 (C.17B:30-25) is amended to read as follows:

C.17B:30-25 Thomas A. Edison State College to study, monitor effectiveness of electronic data interchange technology, electronic health records.

16. Thomas A. Edison State College shall study and monitor the effectiveness of electronic data interchange technology and electronic health records in reducing administrative costs, identify means by which new electronic data interchange technology and electronic health records can be implemented to effect health care system cost savings, and determine the extent of electronic data interchange technology and electronic health records use in the State's health care system.

The Departments of Health and Banking and Insurance or any other department upon request shall cooperate with and provide assistance to the college in carrying out its study pursuant to this section.

The college shall report to the Legislature and the Governor from time to time on its findings and recommendations.

69. Section 2 of P.L.2003, c.112 (C.17B:30-42) is amended to read as follows:

C.17B:30-42 Definitions relative to collection of unpaid hospital accounts.

2. As used in this act:

"Coinsurance" means the percentage of a charge covered by a health plan that must be paid by a person covered under the health plan.

"Collection agency" means the Department of the Treasury and any company, agency, or law firm engaged in collecting debts that the Department of the Treasury may determine to engage to assist it in collecting debts.

"Debt" means money owed by a patient to a hospital, or by someone who is legally responsible for payment for a patient, and includes late payment penalties and interest thereon. It does not include monies owed to a hospital by a health plan for services provided by the hospital to a person with coverage under that plan, or amounts subject to dispute between a health plan and a hospital.

"Debtor" means an individual owing money to or having a delinquent account with a hospital, which obligation has not been adjudicated, satisfied by court order, set aside by court order, or discharged in bankruptcy.

"Deductible" means the amount of covered charges under a health plan that an individual must pay for services before a health plan begins to pay on a covered charge.

"Department" means the Department of Health.

"General Hospital" and "hospital" have the meanings set forth in N.J.A.C.8:43G-1.2.

"Health plan" means an individual or group health benefits plan that provides or pays the cost of hospital and medical expenses, dental or vision care, or prescription drugs, and is provided by or through an insurer, health maintenance organization, the Medicaid program, the Medicare program, a Medicare+Choice provider or Medicare supplemental insurer, an employer-sponsored group health benefits plan, government or church-sponsored health benefits plan or a multi-employer welfare arrangement.

"Medicaid" means the program established pursuant to P.L.1968, c.413 (C.30:4D-1 et seq.).

"Medicare" means the program established by Pub.L.89-97 (42 U.S.C. s.1395 et seq.) as amended, or its successor plan or plans.

"Patient" means a person who receives services in a hospital on an in-patient or outpatient basis.

70. Section 7 of P.L.2003, c.112 (C.17B:30-47) is amended to read as follows:

C.17B:30-47 Procedures for participating hospitals.

7. a. The following procedures shall apply for those hospitals that wish to participate in the voluntary assignment program created by this act.

b. The hospital shall file with the department a notice signifying its intent to participate voluntarily and certifying the following:

(1) the hospital has determined that the patient is not eligible for charity care under the New Jersey Hospital Care Payment Assistance Program established by the Department of Health pursuant to section 10 of P.L.1992, c.160 (C.26:2H-18.60);

(2) the hospital has submitted a "clean claim" pursuant to P.L.1999, c.154 (C.17B:30-23 et al.) and P.L.1999, c.155 (C.17B:30-26 et seq.) to the patient, a responsible party, Medicaid, Medicare or a health plan, as applicable, within a reasonable time following the patient's discharge, or in the case of outpatient service, the date of service;

(3) the claims have been fully adjudicated by a health plan, Medicare or Medicaid, where applicable, and a debt remains outstanding;

(4) the hospital has not initiated collection procedures against the patient or responsible party while a claim was pending adjudication with Medicare or a health plan, for which a debt remains outstanding;

(5) the hospital has notified the patient of the hospital's intention, if the account is not paid in full, or alternatively through a payment plan with the hospital, to proceed with legal action, or to turn the bill over to the department for collection.

c. Nothing herein shall be deemed to create any new right to collection of hospital debts by hospitals beyond existing law; nor shall it be deemed to preclude any existing right to collection.

d. The department may determine the content of the notice required by paragraph (5) of subsection b. of this section to the patient concerning the likelihood that the account will be turned over to the department for collection.

e. The minimum amount of an unpaid bill that may be assigned to the department by a hospital is \$100, or such other minimum as the department shall determine by regulation.

f. Upon receipt of the voluntary assignment, the Department of the Treasury shall send, on behalf of the department, a notice to the person named as a debtor of the hospital, notifying the person as to receipt of the assignment by the department, providing the person with 30 days to challenge the validity of the debt, and providing notice that in the absence of such challenge, a Certificate of Debt will be filed with the Superior Court of New Jersey. The notice shall also include a statement on the department's intention to take action to set off the liability against any refund of taxes pursuant to the "New Jersey Gross Income Tax Act" including an earned income tax credit, a NJ SAVER rebate or a homestead rebate, or other such funds as may be authorized by law.

g. If the person named as a debtor responds within the 30-day period, the person shall be provided with an opportunity to present, either in writing or in person, evidence as to why the person does not believe he is responsible for the debt. The department shall provide written notice to both the person and the hospital as to its determination regarding the validity of the debt, including the imposition of collection fees and interest, if applicable.

h. If the person fails to respond within 30 days to the department, the department may utilize the provisions of the Set off of Individual Liability (SOIL) program established pursuant to P.L.1981, c.239 (C.54A:9-8.1 et

seq.), to collect any surcharge levied under this section that is unpaid on or after the effective date of this act.

As additional remedies, the department may utilize the services of a collection agency to settle the debt and may also issue a certificate to the Clerk of the Superior Court stating that the person identified in the certificate is indebted under this law in such amount as shall be stated in the certificate. The certificate shall reference this act. Thereupon the clerk to whom such certificate shall have been issued shall immediately enter upon the record of docketed judgments: the name of the person as debtor; the State as creditor; the address of the person, if shown in the certificate; the amount of the debt so certified; a reference to this act under which the debt is assessed; and the date of making the entries. The docketing of the entries shall have the same force and effect as a civil judgment docketed in the Superior Court, and the department shall have all the remedies and may take all of the proceedings for the collection thereof which may be had or taken upon the recovery of a judgment in an action, but without prejudice to any right of appeal. Upon entry by the clerk of the certificate in the record of docketed judgments in accordance with this provision, interest in the amount specified by the court rules for post-judgment interest shall accrue from the date of the docketing of the certificate; however, payment of the interest may be waived by the department.

i. Any collection efforts undertaken pursuant to this act shall be undertaken in accordance with the "Health Insurance Portability and Accountability Act of 1996," Pub.L.104-191 and 45 C.F.R. 160.101 to 164.534, or any other similar law. The department and any other entity performing collection activities pursuant to this act is authorized to enter into any agreements required to comply with such laws, including, but not limited to, entering into agreements with the hospitals and collection agencies to provide for appropriate safeguarding of information.

71. Section 3 of P.L.2005, c.352 (C.17B:30-50) is amended to read as follows:

C.17B:30-50 Definitions relative to processing health claims.

3. As used in sections 3 through 7 of P.L.2005, c.352 (C.17B:30-50 through C.17B:30-54):

"Authorization" means a determination required under a health benefits plan, that based on the information provided, satisfies the requirements under the member's health benefits plan for medical necessity.

"Carrier" means an insurance company, health service corporation, hospital service corporation, medical service corporation, or health maintenance organization authorized to issue health benefits plans in this State.

"Commissioner" means the Commissioner of Banking and Insurance.

"Covered person" means a person on whose behalf a carrier offering the plan is obligated to pay benefits or provide services pursuant to the health benefits plan.

"Covered service" means a health care service provided to a covered person under a health benefits plan for which the carrier is obligated to pay benefits or provide services.

"Generally accepted standards of medical practice" means standards that are based on: credible scientific evidence published in peer-reviewed medical literature generally recognized by the relevant medical community; physician and health care provider specialty society recommendations; the views of physicians and health care providers practicing in relevant clinical areas; and any other relevant factor as determined by the commissioner by regulation.

"Health benefits plan" means a benefits plan which pays or provides hospital and medical expense benefits for covered services, and is delivered or issued for delivery in this State by or through a carrier. Health benefits plan includes, but is not limited to, Medicare supplement coverage and Medicare+Choice contracts to the extent not otherwise prohibited by federal law. For the purposes of sections 3 through 7 of P.L.2005, c.352 (C.17B:30-50 through C.17B:30-54), health benefits plan shall not include the following plans, policies, or contracts: accident only, credit, disability, long-term care, Civilian Health and Medical Program for the Uniformed Services, CHAMPUS supplement coverage, coverage arising out of a workers' compensation or similar law, automobile medical payment insurance, personal injury protection insurance issued pursuant to P.L.1972, c.70 (C.39:6A-1 et seq.), or hospital confinement indemnity coverage.

"Hospital" means a general acute care facility licensed by the Commissioner of Health pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.), including rehabilitation, psychiatric, and long-term acute facilities.

"Medical necessity" or "medically necessary" means or describes a health care service that a health care provider, exercising his prudent clinical judgment, would provide to a covered person for the purpose of evaluating, diagnosing, or treating an illness, injury, disease, or its symptoms and that is: in accordance with the generally accepted standards of medical practice; clinically appropriate, in terms of type, frequency, extent, site, and duration, and considered effective for the covered person's illness, injury, or disease; not primarily for the convenience of the covered person or the

health care provider; and not more costly than an alternative service or sequence of services at least as likely to produce equivalent therapeutic or diagnostic results as to the diagnosis or treatment of that covered person's illness, injury, or disease.

"Network provider" means a participating hospital or physician under contract or other agreement with a carrier to furnish health care services to covered persons.

"Payer" means a carrier which requires that utilization management be performed to authorize the approval of a health care service and includes an organized delivery system that is certified by the Commissioner of Banking and Insurance or licensed by the commissioner pursuant to P.L.1999, c.409 (C.17:48H-1 et seq.).

"Payer's agent" or "agent" means an intermediary contracted or affiliated with the payer to provide authorization for service or perform administrative functions including, but not limited to, the payment of claims or the receipt, processing, or transfer of claims or claim information.

"Physician" means a physician licensed pursuant to Title 45 of the Revised Statutes.

"Utilization management" means a system for reviewing the appropriate and efficient allocation of health care services under a health benefits plan according to specified guidelines, in order to recommend or determine whether, or to what extent, a health care service given or proposed to be given to a covered person should or will be reimbursed, covered, paid for, or otherwise provided under the health benefits plan. The system may include, but shall not be limited to: preadmission certification, the application of practice guidelines, continued stay review, discharge planning, preauthorization of ambulatory care procedures, and retrospective review.

72. Section 1 of P.L.2007, c.194 (C.17B:30-58) is amended to read as follows:

C.17B:30-58 Definitions relative to reimbursement for certain ambulance services.

1. As used in this act:

"Ambulance service" means the provision of emergency health care services, basic life support services, advanced life support services, critical care services, mobile intensive care services, or emergency medical transportation in a vehicle that is licensed, equipped, and staffed in accordance with the requirements set forth by the Commissioner of Health.

"Assignment of benefits" means any written instrument executed by the covered person or his authorized representative which assigns a service

provider the covered person's right to receive reimbursement for a covered service rendered to the covered person.

"Carrier" means an insurance company, health service corporation, hospital service corporation, medical service corporation, or health maintenance organization authorized to issue health benefits plans in this State.

"Claim" means a claim by a covered person for payment of benefits under a health benefits plan.

"Commissioner" means the Commissioner of Banking and Insurance.

"Covered person" means a person on whose behalf a carrier offering the health benefits plan is obligated to pay benefits or provide services pursuant to the health benefits plan.

"Covered service" means an ambulance service provided to a covered person under a health benefits plan for which the carrier is obligated to pay benefits or provide services.

"Health benefits plan" means a hospital and medical expense insurance policy; health service corporation contract; hospital service corporation contract; medical service corporation contract; health maintenance organization subscriber contract; or other plan for medical care delivered or issued for delivery in this State. For purposes of this act, health benefits plan shall not include one or more, or any combination of, the following: coverage only for accident, or disability income insurance, or any combination thereof; coverage issued as a supplement to liability insurance; liability insurance, including general liability insurance and automobile liability insurance; stop loss or excess risk insurance; workers' compensation or similar insurance; automobile medical payment insurance; credit-only insurance; coverage for on-site medical clinics; coverage for Medicaid services pursuant to a contract with the State; and any other similar insurance coverage, as specified in federal regulations, under which benefits for medical care are secondary or incidental to other insurance benefits. Health benefits plans shall not include the following benefits if they are provided under a separate policy, certificate or contract of insurance or are otherwise not an integral part of the plan: limited scope dental or vision benefits; benefits for long-term care, nursing home care, home health care, community-based care, or any combination thereof; and such other similar, limited benefits as are specified in federal regulations. Health benefits plan shall not include hospital confinement indemnity coverage if the benefits are provided under a separate policy, certificate or contract of insurance, there is no coordination between the provision of the benefits and any exclusion of benefits under any group health benefits plan maintained by the same plan sponsor, and those benefits are paid with respect to an event without regard to

whether benefits are provided with respect to such an event under any group health plan maintained by the same plan sponsor.

"Payer" means a carrier or any agent thereof who is doing business in the State and is under a contractual obligation to pay claims.

"Service provider" means any person, public or private institution, agency, or business concern lawfully providing an ambulance service.

73. Section 1 of P.L.2011, c.214 (C.18A:3B-69) is amended to read as follows:

C.18A:3B-69 Emergency operations plan for institutions of higher education.

1. a. The governing board of each institution of higher education shall develop and coordinate an emergency operations plan to ensure the continuity of essential institution functions under all circumstances. The plan shall:

(1) identify a baseline of preparedness for all potential emergencies, including pandemics, to establish a viable capability to perform essential functions during any emergency that disrupts normal operations; and

(2) be coordinated with State and local authorities including, but not limited to, the State Office of Emergency Management, local law enforcement officers, county and local health officers, county offices of emergency management, and other emergency responders.

b. The plan shall include, but not be limited to, the following components: identification of essential functions, programs, and personnel; procedures to implement the plan; delegation of authority and lines of succession; identification of alternative facilities and related infrastructure, including those for communications; identification and protection of vital records and databases; and schedules and procedures for periodic tests, training, and exercises. The plan shall be consistent with the local emergency operations plan of the municipality in which the institution is located.

c. The governing board of the institution shall adopt and submit for review an emergency operations plan to the Secretary of Higher Education, the State Office of Emergency Management, the Department of Health, and the Office of Homeland Security and Preparedness within six months of the effective date of this act. The governing board shall review, update, and resubmit the plan to the offices every five years. If an emergency incident occurs at an institution during the five-year period, the plan shall be reviewed immediately.

d. The Office of Homeland Security and Preparedness, the State Office of Emergency Management, the Department of Health, and the Secretary of Higher Education shall review the emergency operations plan sub-

mitted by an institution of higher education pursuant to subsection c. of this section and, when necessary, shall in coordination with other State agencies make recommendations to the institution for improving the plan that are deemed necessary.

e. Any plan prepared pursuant to this section shall not be considered a government record as defined in section 1 of P.L.1995, c.23 (C.47:1A-1.1) and shall not be available for public inspection, copying, or the purchase of copies.

74. Section 2 of P.L.1997, c.368 (C.18A:40-12.6) is amended to read as follows:

C.18A:40-12.6 Policy for administration of epinephrine to pupil.

2. The policy for the administration of medication to a pupil shall provide that the school nurse shall have the primary responsibility for the administration of the epinephrine. The school nurse shall designate, in consultation with the board of education, or chief school administrator of a nonpublic school additional employees of the school district or nonpublic school who volunteer to administer epinephrine via a pre-filled auto-injector mechanism to a pupil for anaphylaxis when the nurse is not physically present at the scene. The school nurse shall determine that:

a. the designees have been properly trained in the administration of the epinephrine via a pre-filled auto-injector mechanism using standardized training protocols established by the Department of Education in consultation with the Department of Health;

b. the parents or guardians of the pupil consent in writing to the administration of the epinephrine via a pre-filled auto-injector mechanism by the designees;

c. the board or chief school administrator of a nonpublic school informs the parents or guardians of the pupil in writing that the district and its employees or agents or the nonpublic school and its employees and agents shall have no liability as a result of any injury arising from the administration of the epinephrine to the pupil;

d. the parents or guardians of the pupil sign a statement acknowledging their understanding that the district or nonpublic school shall have no liability as a result of any injury arising from the administration of the epinephrine via a pre-filled auto-injector mechanism to the pupil and that the parents or guardians shall indemnify and hold harmless the district and its employees or agents against any claims arising out of the administration of the epinephrine via a pre-filled auto-injector mechanism to the pupil; and

e. the permission is effective for the school year for which it is granted and is renewed for each subsequent school year upon fulfillment of the requirements in subsections a. through d. of this section.

The Department of Education, in consultation with the Department of Health, shall require trained designees for students enrolled in a school who may require the emergency administration of epinephrine for anaphylaxis when the school nurse is not available.

Nothing in this section shall be construed to prohibit the emergency administration of epinephrine via a pre-filled auto-injector mechanism to a pupil for anaphylaxis by the school nurse or other employees designated pursuant to this section when the pupil is authorized to self-administer epinephrine pursuant to section 1 of P.L.1993, c.308 (C.18A:40-12.3), or when there is a coexisting diagnosis of asthma, or when a prescription is received from a licensed health care professional for epinephrine coupled with another form of medication.

75. Section 4 of P.L.2007, c.57 (C.18A:40-12.6a) is amended to read as follows:

C.18A:40-12.6a Guidelines for schools for management of food allergies, administration of epinephrine.

4. The Department of Education, in consultation with the Department of Health, appropriate medical experts, and professional organizations representing school nurses, principals, teachers, and the food allergy community, shall establish and disseminate to each board of education and chief school administrator of a nonpublic school guidelines for the development of a policy by a school district or nonpublic school for the management of food allergies in the school setting and the emergency administration of epinephrine to students for anaphylaxis.

76. Section 6 of P.L.2007, c.57 (C.18A:40-12.6c) is amended to read as follows:

C.18A:40-12.6c Training protocols for volunteer designees to administer epinephrine.

6. a. In an effort to assist the certified school nurse in a public school district and the school nurse in a nonpublic school in recruiting and training additional school employees as volunteer designees to administer epinephrine for anaphylaxis when the school nurse is not physically present, the Department of Education and the Department of Health shall jointly develop training protocols, in consultation with the New Jersey School Nurses Association.

b. The certified school nurse in consultation with the board of education, or the school nurse in consultation with the chief school administrator of a nonpublic school, shall recruit and train volunteer designees who are determined acceptable candidates by the school nurse within each school building as deemed necessary by the nursing service plan.

77. Section 3 of P.L.2001, c.61 (C.18A:40-12.8) is amended to read as follows:

C.18A:40-12.8 Regulations for use of nebulizer in schools.

3. The State Board of Education, in consultation with the Commissioner of Health, shall adopt regulations requiring each public school board of education to develop policies for the administration of asthma medication through the use of a nebulizer by the school nurse or other person authorized by regulation. The regulations shall include:

a. a requirement that each certified nurse or other person authorized to administer asthma medication receive training in airway management and in the use of nebulizers and inhalers consistent with nationally recognized standards, including, but not limited to, those of the National Institutes of Health and the American Association of Allergy and Immunology; and

b. a requirement that each pupil authorized to use asthma medication pursuant to section 1 of P.L.1993, c.308 (C.18A:40-12.3), or a nebulizer have an asthma treatment plan prepared by the physician of the pupil, which shall identify, at a minimum, asthma triggers, the treatment plan, and such other elements as shall be determined by the State Board of Education.

78. Section 3 of P.L.2002, c.58 (C.18A:40-21.1) is amended to read as follows:

C.18A:40-21.1 Hepatitis B vaccination required for public, private school students in grades nine through twelve.

3. The Commissioner of Health shall require the immunization of a child for hepatitis B as a condition of enrollment in grades nine through 12.

b. Beginning with the 2003-2004 school year, a principal, director or other person in charge of a public or private school in this State shall not knowingly admit or retain in grades nine through 12 a child whose parent or guardian has not submitted acceptable evidence of the child's immunization for hepatitis B prior to or during enrollment in ninth grade, as provided by regulation of the Commissioner of Health.

c. The Commissioner of Health shall adopt rules and regulations pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.) to carry out the purposes of this section.

79. Section 3 of P.L.2007, c.122 (C.18A:40-37) is amended to read as follows:

C.18A:40-37 Three-year comprehensive eye examination pilot program for second grade students.

3. a. The Commissioner of Education, in consultation with the Commissioner of Health, shall establish a three-year comprehensive eye examination pilot program for second grade students. The purpose of the program shall be to eliminate inappropriate referrals for special education programs and services by examining students at the end of second grade for vision-related problems that may go undiagnosed and result in special education classification.

b. The commissioner shall select for participation in the pilot program one school district in each of the northern, central, and southern regions of the State, including an urban school district, a suburban school district, and a rural school district. In selecting the pilot school districts, the commissioner may consider the percentage of students in the district classified as eligible for special education programs and services, the percentage increase in such classifications over the prior five school years, and the district's interest in participating in the program. The commissioner shall collaborate with each pilot school district on the procedures to be implemented to conduct the comprehensive eye examinations, including the coverage of any costs associated with the examinations. In any agreement concerning the cost of providing examinations, no parent or guardian of a student shall be required to make any payment to the optometrist or ophthalmologist providing a comprehensive eye examination, or the school district or any other entity; except that if the student is covered by a health insurance plan which has a copayment requirement, the parent or guardian shall pay the health care provider the required copayment. In this case, the parent or guardian may apply to the Comprehensive Eye Examination Fund for reimbursement of the copayment.

c. The commissioner shall develop and distribute to the pilot districts a form to document and provide information on each comprehensive eye examination conducted under the program.

80. Section 1 of P.L.2007, c.125 (C.18A:40-41) is amended to read as follows:

C.18A:40-41 Sudden cardiac death, pamphlet; development, distribution to school districts, parents of athletes.

1. a. The Commissioner of Education, in consultation with the Commissioner of Health, the American Heart Association, and the American Academy of Pediatrics, shall develop a pamphlet that provides information about sudden cardiac death to the parents or guardians of student athletes. The pamphlet shall include an explanation of sudden cardiac death, its incidence among student athletes, a description of early warning signs, and an overview of the options that are privately available to screen for cardiac conditions that may lead to sudden cardiac death, including a statement about the limitations of these options.

b. The commissioner shall distribute the pamphlet, at no charge, to all school districts in the State. The commissioner shall update the pamphlet as necessary, and shall make additional copies available to nonpublic schools upon request.

c. In the 2007-2008 school year and in each school year thereafter, each school district shall distribute the pamphlet to the parents or guardians of students participating in school sports.

81. Section 2 of P.L.2007, c.134 (C.18A:40-42) is amended to read as follows:

C.18A:40-42 Educational fact sheet about HPV.

2. a. The Commissioner of Education, in consultation with the Commissioner of Health, shall develop an educational fact sheet about the human papillomavirus (HPV) for distribution to parents or guardians of students in grades seven through 12. The educational fact sheet shall include information about the causes, symptoms and means of transmission of HPV, and where additional information can be obtained.

b. For the 2007-2008 school year, a school district shall distribute to parents and guardians of students in grades seven through 12 the educational fact sheet on HPV, in a manner prescribed by the Commissioner of Education.

c. Beginning with the 2008-2009 school year, a school district shall distribute the educational fact sheet annually to parents or guardians of students in grade seven in a manner prescribed by the Commissioner of Education.

d. The Commissioner of Education also shall make the educational fact sheet available to private schools educating students in grades seven through 12. Such schools are encouraged, but not required, to distribute the fact sheet to parents or guardians of students at the school.

82. Section 5 of P.L.1987, c.387 (C.18A:40A-12) is amended to read as follows:

C.18A:40A-12 Reporting of pupils under influence; examination; report; return home; evaluation of possible need for treatment; referral for treatment.

5. a. Whenever it shall appear to any teaching staff member, school nurse or other educational personnel of any public school in this State that a pupil may be under the influence of substances as defined pursuant to section 2 of this act, other than anabolic steroids, that teaching staff member, school nurse, or other educational personnel shall report the matter as soon as possible to the school nurse or medical inspector, as the case may be, or to a student assistance coordinator, and to the principal or, in his absence, to his designee. The principal or his designee, shall immediately notify the parent or guardian and the superintendent of schools, if there be one, or the administrative principal and shall arrange for an immediate examination of the pupil by a doctor selected by the parent or guardian, or if that doctor is not immediately available, by the medical inspector, if he is available. If a doctor or medical inspector is not immediately available, the pupil shall be taken to the emergency room of the nearest hospital for examination accompanied by a member of the school staff designated by the principal and a parent or guardian of the pupil if available. The pupil shall be examined as soon as possible for the purpose of diagnosing whether or not the pupil is under such influence. A written report of that examination shall be furnished within 24 hours by the examining physician to the parent or guardian of the pupil and to the superintendent of schools or administrative principal. If it is determined that the pupil was under the influence of a substance, the pupil shall be returned to the pupil's home as soon as possible and shall not resume attendance at school until the pupil submits to the principal a written report certifying that the pupil is physically and mentally able to return thereto, which report shall be prepared by a personal physician, the medical inspector, or the physician who examined the pupil pursuant to the provisions of this act.

In addition, the pupil shall be interviewed by a student assistance coordinator or another appropriately trained teaching staff member for the purpose of determining the extent of the pupil's involvement with these sub-

stances and possible need for treatment. In order to make this determination the coordinator or other teaching staff member may conduct a reasonable investigation which may include interviews with the pupil's teachers and parents. The coordinator or other teaching staff member may also consult with experts in the field of substance abuse as may be necessary and appropriate. If it is determined that the pupil's involvement with and use of these substances represents a danger to the pupil's health and well-being, the coordinator or other teaching staff member shall refer the pupil to an appropriate treatment program which has been approved by the Commissioner of Health.

b. Whenever any teaching staff member, school nurse, or other educational personnel of any public school in this State shall have reason to believe that a pupil has used or may be using anabolic steroids, that teaching staff member, school nurse, or other educational personnel shall report the matter as soon as possible to the school nurse or medical inspector, as the case may be, or to a student assistance coordinator, and to the principal or, in his absence, to his designee. The principal or his designee, shall immediately notify the parent or guardian and the superintendent of schools, if there be one, or the administrative principal and shall arrange for an examination of the pupil by a doctor selected by the parent or guardian or by the medical inspector. The pupil shall be examined as soon as possible for the purpose of diagnosing whether or not the pupil has been using anabolic steroids. A written report of that examination shall be furnished by the examining physician to the parent or guardian of the pupil and to the superintendent of schools or administrative principal. If it is determined that the pupil has been using anabolic steroids, the pupil shall be interviewed by a student assistance coordinator or another appropriately trained teaching staff member for the purpose of determining the extent of the pupil's involvement with these substances and possible need for treatment. In order to make this determination the coordinator or other teaching staff member may conduct a reasonable investigation which may include interviews with the pupil's teachers and parents. The coordinator or other teaching staff member may also consult with experts in the field of substance abuse as may be necessary and appropriate. If it is determined that the pupil's involvement with and use of these substances represents a danger to the pupil's health and well-being, the coordinator or other teaching staff member shall refer the pupil to an appropriate treatment program which has been approved by the Commissioner of Health.

83. Section 11 of P.L.1987, c.387 (C.18A:40A-18) is amended to read as follows:

C.18A:40A-18 Employment of student assistance coordinators in certain school districts.

11. The Commissioner of Education, in consultation with the Commissioner of Health, shall develop and administer a program which provides for the employment of student assistance coordinators in certain school districts.

a. Within 90 days of the effective date of this act, the Commissioner of Education shall forward to each local school board a request for a proposal for the employment of a student assistance coordinator. A board which wants to participate in the program shall submit a proposal to the commissioner which outlines the district's plan to provide substance abuse prevention, intervention, and treatment referral services to students through the employment of a student assistance coordinator. Nothing shall preclude a district which employs a student assistance coordinator at the time of the effective date of this act from participating in this program. The commissioner shall select school districts to participate in the program through a competitive grant process. The participating districts shall include urban, suburban, and rural districts from the north, central, and southern geographic regions of the State with at least one school district per county. In addition to all other State aid to which the local district is entitled under the provisions of P.L.2007, c.260 (C.18A:7F-43 et al.) and other pertinent statutes, each board of education participating in the program shall receive from the State, for a three-year period, the amount necessary to pay the salary of its student assistance coordinator.

b. The position of student assistance coordinator shall be separate and distinct from any other employment position in the district, including, but not limited to district guidance counselors, school social workers, and school psychologists. The State Board of Education shall approve the education and experience criteria necessary for employment as a student assistance coordinator. The criteria shall include a requirement for certification by the State Board of Examiners. In addition to the criteria established by the State board, the Department of Education and the Department of Health shall jointly conduct orientation and training programs for student assistance coordinators, and shall also provide for continuing education programs for coordinators.

c. It shall be the responsibility of student assistance coordinators to assist local school districts in the effective implementation of this act. Co-

ordinators shall assist with the in service training of school district staff concerning substance abuse issues and the district program to combat substance abuse; serve as an information resource for substance abuse curriculum development and instruction; assist the district in revising and implementing substance abuse policies and procedures; develop and administer intervention services in the district; provide counseling services to pupils regarding substance abuse problems; and, where necessary and appropriate, cooperate with juvenile justice officials in the rendering of substance abuse treatment services.

d. The Commissioner of Education, in consultation with the Commissioner of Health, shall implement a plan to collect data on the effectiveness of the program in treating problems associated with substance abuse and in reducing the incidence of substance abuse in local school districts. Six months prior to the expiration of the program authorized pursuant to this section, the Commissioner of Education shall submit to the Governor and the Legislature an evaluation of the program and a recommendation on the advisability of its continuation or expansion to all school districts in the State.

84. Section 9 of P.L.2003, c.117 (C.24:2-9) is amended to read as follows:

C.24:2-9 Fees for issuance of "Certificate of Free Sale."

9. The Department of Health may, pursuant to regulation adopted in accordance with the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), establish and charge reasonable fees not to exceed \$100 to cover administrative costs associated with the issuance of a "Certificate of Free Sale." For the purpose of this act, a "Certificate of Free Sale" is defined as a certificate completed and issued by the department attesting that a specific food, drug, cosmetic, or medical device product regulated under Title 24 of the Revised Statutes, and manufactured, distributed, and offered for sale in this State is labeled in conformance with the applicable food, drug, cosmetic, or medical device laws and rules of this State and further attests to the results of the most recently conducted sanitary inspection of the manufacturer or distributor of the subject product.

Further, the Department of Health may, pursuant to regulation adopted in accordance with the "Administrative Procedure Act," establish and charge reasonable fees not to exceed \$100 to cover administrative costs associated with the issuance of other certifications or affidavits related to matters regulated by the department under Title 24 of the Revised Statutes.

85. Section 13 of P.L.1961, c.52 (C.24:6B-12) is amended to read as follows:

C.24:6B-12 Definitions.

13. For the purposes of this registration act, unless otherwise required by the context:

(a) "Commissioner" means Commissioner of Health or the commissioner's designated representative.

(b) "Department" means the Department of Health.

(c) "Drugs" means "drugs" and "devices" as defined in R.S.24:1-1.

(d) "Person" means a natural person, partnership, corporation, or any other business association.

(e) "Registrant" means the person in whose name a drug manufacturing business or wholesale non-prescription drug business is registered.

(f) "Drug manufacturing business" means the business of creating, making, or producing drugs by compounding, growing, or other process. This definition shall apply to persons engaged in the drug manufacturing business who do not maintain a manufacturing location in this State but do operate distribution depots or warehouses of such business in this State. This definition shall not apply to licensed pharmacies or to licensed professional individuals such as, but not limited to, pharmacists, physicians, dentists, or veterinarians when engaged in the lawful pursuit of their professions.

(g) "Wholesale drug business" means the business of supplying non-prescription drugs to persons other than the ultimate consumer. This definition shall not apply to licensed pharmacies or to licensed professional individuals such as, but not limited to, pharmacists, physicians, dentists, or veterinarians when engaged in the lawful pursuit of their professions, and shall not apply to a registered drug manufacturing business.

86. Section 5 of P.L.2005, c.206 (C.24:6B-14) is amended to read as follows:

C.24:6B-14 Definitions relative to pharmaceutical wholesale distributors.

5. As used in sections 5 through 24 of P.L.2005, c.206 (C.24:6B-14 et seq.):

"Adulterated" means a prescription drug that is adulterated pursuant to R.S.24:5-10.

"Authenticate" means to affirmatively verify before any distribution of a prescription drug that each transaction listed on the pedigree has occurred.

"Authorized distributor" or "authorized distributor of record" means a wholesale distributor with whom a manufacturer has established an ongoing

ing relationship to distribute the manufacturer's product. An ongoing relationship is deemed to exist when the wholesale distributor, or any member of its affiliated group as defined in section 1504 of the Internal Revenue Code of 1986 (26 U.S.C. s.1504): is listed on the manufacturer's list of authorized distributors; has a written agreement currently in effect with the manufacturer; or has a verifiable account with the manufacturer and meets or exceeds the following transaction or volume requirement thresholds:

- a. 5,000 sales units per company within 12 months; or
- b. 12 purchases by invoice at the manufacturer's minimum purchasing requirement per invoice within 12 months.

"Centralized prescription processing" means the processing by a pharmacy of a request from another pharmacy to fill or refill a prescription drug order or to perform processing functions such as dispensing, drug utilization review, claims adjudication, refill authorizations and therapeutic interventions.

"Chain pharmacy distribution center" means a distribution facility or warehouse owned by and operated for the primary use of a group of pharmacies that are under common or affiliated control or ownership.

"Commissioner" means the Commissioner of Health.

"Contraband" with respect to a prescription drug means: counterfeit; stolen; misbranded; obtained by fraud; purchased by a nonprofit institution for its own use and placed in commerce in violation of the own use agreement; or the existing documentation or pedigree, if required, for the prescription drug has been forged, counterfeited, falsely created, or contains any altered, false, or misrepresented information.

"Counterfeit prescription drug" means a prescription drug, or the container, shipping container, seal, or labeling thereof, which, without authorization, bears the trademark, trade name or other identifying mark, imprint, or any likeness thereof, of a manufacturer, processor, packer, or distributor other than the person or persons who in fact manufactured, processed, packed, or distributed the prescription drug and which thereby falsely purports or is represented to be the product of, or to have been packed or distributed by, such other manufacturer, processor, packer, or distributor.

"DEA" means the federal Drug Enforcement Administration.

"Department" means the Department of Health.

"Designated representative" means an individual who is designated by a wholesale prescription drug distributor to serve as the primary contact person for the wholesale distributor with the department, and who is responsible for managing the company's operations at that licensed location.

"Distribute" means to sell, offer to sell, deliver, offer to deliver, broker, give away, or transfer a prescription drug, whether by passage of title,

physical movement, or both. The term does not mean to: dispense or administer; deliver or offer to deliver in the usual course of business as a common carrier or logistics provider, or provide a sample to a patient by a licensed practitioner, a health care professional acting at the direction and under the supervision of a practitioner, or the pharmacist of a health care facility licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) acting at the direction of a practitioner.

"Drug" means: a. an article or substance recognized in the official United States Pharmacopoeia, official Homeopathic Pharmacopoeia of the United States or official National Formulary, or any supplement to any of them; b. an article or substance intended for use in the diagnosis, cure, mitigation, treatment, or prevention of disease in man or other animals; c. an article or substance, other than food, intended to affect the structure of any function of the body of man or animals; and d. an article or substance intended for use as a component of any article or substance specified in clause a., b., or c.; but does not include devices or their components, parts, or accessories. Drug includes a prefilled syringe or needle.

"Immediate container" means a container but does not include package liners.

"Logistics provider" means an entity that receives drugs from the original manufacturer and delivers them at the direction of that manufacturer, and does not purchase, sell, trade, or take title to the drugs.

"Misbranded" means a prescription drug with respect to which the label is: false or misleading in any particular; does not bear the name and address of the manufacturer, packer, or distributor and does not have an accurate statement of the quantities of the active ingredients; or does not show an accurate monograph for legend drugs; or is misbranded based upon other considerations as provided in the Federal Food, Drug, and Cosmetic Act, 21 U.S.C. s.301 et seq.

"Pedigree" means a statement or record identifying each previous sale of a prescription drug, from the sale by a manufacturer through acquisition and sale by a wholesale distributor, including each distribution to an authorized distributor, starting with the last authorized distributor, or the manufacturer if the prescription drug has not been purchased previously by an authorized distributor or is a prescription drug on the specified list of susceptible products. A pedigree shall include the following information: the proprietary and established name of the prescription drug; the dosage; container size; number of containers; and the date, business name, and address of all parties to each prior transaction involving the prescription drug starting with the last authorized distributor or the manufacturer if the prescrip-

tion drug has not been purchased previously by an authorized distributor or is a prescription drug on the specified list of susceptible products.

"Repackage" means changing the container, wrapper, quantity, or labeling of a prescription drug to further its distribution.

"Sales unit" means the unit of measure that the manufacturer uses to invoice its customer for the particular product.

"Specified list of susceptible products" means a specific list of prescription drugs, to be determined by the commissioner, that are considered to be potential targets for adulteration, counterfeiting, or diversion, which the commissioner shall provide to wholesale distributors as prescription drugs are added to or removed from the list, along with notification of those changes.

"Wholesale distribution" means the distribution of prescription drugs in or into the State by a wholesale distributor to a person other than a consumer or patient, and includes transfers of prescription drugs from one pharmacy to another pharmacy if the value of the goods transferred exceeds 5% of total prescription drug sales revenue of either the transferor or transferee pharmacy during any consecutive 12-month period. The term excludes:

a. the sale, purchase or trade of a prescription drug, an offer to sell, purchase, or trade a prescription drug, or the dispensing of a prescription drug pursuant to a prescription;

b. the sale, purchase or trade of a prescription drug, or an offer to sell, purchase, or trade a prescription drug for emergency medical reasons;

c. the sale, purchase or trade of a prescription drug, or an offer to sell, purchase, or trade a prescription drug by pharmacies, chain pharmacy distribution centers, and the associated transfer of goods between chain pharmacy distribution centers and their servicing wholesale distributors or manufacturers;

d. intracompany transactions or sales among wholesale distributors, chain pharmacy distribution centers, and pharmacies, and which are limited to those sales or transfers of a prescription drug among members of an affiliated group, even if the members of the affiliated group are separate legal entities;

e. the sale, purchase or trade of a prescription drug, or an offer to sell, purchase, or trade a prescription drug among hospitals or other health care entities licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) that are under common control;

f. the sale, purchase or trade of a prescription drug, or offer to sell, purchase, or trade a prescription drug by a charitable organization exempt

from taxation pursuant to section 501(c)(3) of the Internal Revenue Code of 1986 (26 U.S.C. s.501(c)(3)) to a nonprofit affiliate of the organization;

g. the purchase or other acquisition by a hospital or other similar health care entity licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) that is a member of a group purchasing organization of a prescription drug for its own use from the group purchasing organization or from other hospitals or similar health care entities that are members of these organizations;

h. the transfer of prescription drugs between pharmacies pursuant to a centralized prescription processing agreement;

i. the distribution of prescription drug samples by manufacturers' representatives or wholesale distributors' representatives;

j. the sale, purchase or trade of blood and blood components intended for transfusion;

k. prescription drug returns, when conducted by a pharmacy, chain pharmacy distribution center, hospital, health care entity licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.), or charitable institution in accordance with regulations established by the commissioner;

l. the sale of minimal quantities of prescription drugs by retail pharmacies to licensed practitioners for office use;

m. the stockpiling and distribution of drugs under the authorization of a State agency for the purpose of providing those products in an emergency situation; or

n. the sale, transfer, merger, or consolidation of all or part of the business of a pharmacy or pharmacies from or with another pharmacy or pharmacies whether accomplished as a purchase and sale of stock or business assets.

"Wholesale distributor" means any person, other than the manufacturer, pharmacy, logistics provider, or chain pharmacy distribution center, engaged in wholesale distribution of prescription drugs in or into the State and includes repackagers, own-label distributors, private-label distributors, jobbers, brokers, warehouses including distributors' warehouses, independent prescription drug traders, and retail pharmacies that conduct wholesale distribution.

87. Section 5 of P.L.1977, c.240 (C.24:6E-4) is amended to read as follows:

C.24:6E-4 Definitions.

5. As used in this act unless the context clearly indicates otherwise:

a. "Drug product" means a dosage form containing one or more active therapeutic ingredients along with other substances included during the manufacturing process.

b. "Brand name" means the proprietary name assigned to a drug by the manufacturer thereof.

c. "Established name" with respect to a drug or ingredient thereof, means (1) the applicable official name designated pursuant to the Federal Food, Drug and Cosmetic Act (Title 21, U.S.C. s.301 et seq.), or (2) if there is no such official name and such drug or ingredient is recognized in an official compendium, then the official title thereof in such compendium, except that where a drug or ingredient is recognized in the United States Pharmacopoeia and in the Homeopathic Pharmacopoeia under different official titles, the official title used in the United States Pharmacopoeia shall apply unless it is labeled and offered for sale as a homeopathic drug, in which case the official title used in the Homeopathic Pharmacopoeia shall apply, or (3) if neither (1) nor (2) is applicable, then the common or usual name, if any, of such drug or ingredient.

d. "Prescription" means an order for drugs or combinations or mixtures thereof, written or signed by a duly licensed physician, dentist, veterinarian, or other medical practitioner licensed to write prescriptions intended for the treatment or prevention of disease in man or animals, and includes orders for drugs or medicines or combinations or mixtures thereof transmitted to pharmacists through word of mouth, telephone, telegraph, or other means of communication by a duly licensed physician, dentist, veterinarian, or other medical practitioner licensed to write prescriptions intended for the treatment or prevention of disease in man or animals.

e. "Department" means the Department of Health.

f. "Chemical equivalents" means those drug products that contain the same amounts of the same therapeutically active ingredients in the same dosage forms and that meet present compendial standards.

g. "Reference drug product" means the product which is adopted by the department as the standard for other chemically equivalent drugs in terms of testing for the therapeutic equivalence. In all cases, the reference drug product shall be a currently marketed drug which is the subject of a full (not abbreviated) new drug application approved by the Federal Food and Drug Administration.

h. "Therapeutic equivalents" means chemical equivalents which, when administered to the same individuals in the same dosage regimen, will provide essentially the same efficacy or toxicity as their respective reference drug products.

i. "Bioavailability" means the extent and rate of absorption from a dosage form as reflected by the time-concentration curve of the administered drug in the systemic circulation.

j. "Bioequivalents" means chemical equivalents which, when administered to the same individuals in the same dosage regimen, will result in comparable bioavailability.

k. "Pharmaceutical equivalents" means those drug products that contain the same amounts of the same therapeutically active ingredients in the same dosage form and that meet established standards.

l. "Interchangeable drug products" means pharmaceutical equivalents or bioequivalents that are determined to be therapeutic equivalents by the department.

m. "Present compendial standards" means the official standards for drug excipients and drug products listed in the latest revision of the United States Pharmacopoeia (USP) and the National Formulary (NF).

n. "Dosage form" means the physical formulation or medium in which the product is intended, manufactured and made available for use, including, but not limited to: tablets, capsules, oral solutions, aerosols, inhalers, gels, lotions, creams, ointments, transdermals and suppositories, and the particular form of the above which utilizes a specific technology or mechanism to control, enhance, or direct the release, targeting, systemic absorption, or other delivery of a dosage regimen in the body.

88. Section 2 of P.L.2003, c.57 (C.24:6H-2) is amended to read as follows:

C.24:6H-2 Label required on ephedrine alkaloid products.

2. A product that contains ephedrine alkaloids that is not a drug as defined in R.S.24:1-1, shall not be sold or offered for sale in this State after the effective date of this act unless its label indicates that the sale of the product to minors under 18 years of age is prohibited by State law, in accordance with regulations adopted by the Commissioner of Health.

89. Section 3 of P.L.2003, c.57 (C.24:6H-3) is amended to read as follows:

C.24:6H-3 Rules, regulations.

3. The Commissioner of Health shall adopt rules and regulations pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.) to carry out the purposes of this act.

90. Section 3 of P.L.2009, c.307 (C.24:6I-3) is amended to read as follows:

C.24:6I-3 Definitions relative to the medical use of marijuana.

3. As used in this act:

"Bona fide physician-patient relationship" means a relationship in which the physician has ongoing responsibility for the assessment, care, and treatment of a patient's debilitating medical condition.

"Certification" means a statement signed by a physician with whom a qualifying patient has a bona fide physician-patient relationship, which attests to the physician's authorization for the patient to apply for registration for the medical use of marijuana.

"Commissioner" means the Commissioner of Health.

"Debilitating medical condition" means:

(1) one of the following conditions, if resistant to conventional medical therapy: seizure disorder, including epilepsy; intractable skeletal muscular spasticity; or glaucoma;

(2) one of the following conditions, if severe or chronic pain, severe nausea or vomiting, cachexia, or wasting syndrome results from the condition or treatment thereof: positive status for human immunodeficiency virus; acquired immune deficiency syndrome; or cancer;

(3) amyotrophic lateral sclerosis, multiple sclerosis, terminal cancer, muscular dystrophy, or inflammatory bowel disease, including Crohn's disease;

(4) terminal illness, if the physician has determined a prognosis of less than 12 months of life; or

(5) any other medical condition or its treatment that is approved by the department by regulation.

"Department" means the Department of Health.

"Marijuana" has the meaning given in section 2 of the "New Jersey Controlled Dangerous Substances Act," P.L.1970, c.226 (C.24:21-2).

"Medical marijuana alternative treatment center" or "alternative treatment center" means an organization approved by the department to perform activities necessary to provide registered qualifying patients with usable marijuana and related paraphernalia in accordance with the provisions of this act. This term shall include the organization's officers, directors, board members, and employees.

"Medical use of marijuana" means the acquisition, possession, transport, or use of marijuana or paraphernalia by a registered qualifying patient as authorized by this act.

"Minor" means a person who is under 18 years of age and who has not been married or previously declared by a court or an administrative agency to be emancipated.

"Paraphernalia" has the meaning given in N.J.S.2C:36-1.

"Physician" means a person licensed to practice medicine and surgery pursuant to Title 45 of the Revised Statutes with whom the patient has a bona fide physician-patient relationship and who is the primary care physician, hospice physician, or physician responsible for the ongoing treatment of a patient's debilitating medical condition, provided, however, that the ongoing treatment shall not be limited to the provision of authorization for a patient to use medical marijuana or consultation solely for that purpose.

"Primary caregiver" or "caregiver" means a resident of the State who:

- a. is at least 18 years old;
- b. has agreed to assist with a registered qualifying patient's medical use of marijuana, is not currently serving as primary caregiver for another qualifying patient, and is not the qualifying patient's physician;
- c. has never been convicted of possession or sale of a controlled dangerous substance, unless such conviction occurred after the effective date of this act and was for a violation of federal law related to possession or sale of marijuana that is authorized under this act;
- d. has registered with the department pursuant to section 4 of this act, and has satisfied the criminal history record background check requirement of section 4 of this act; and
- e. has been designated as primary caregiver on the qualifying patient's application or renewal for a registry identification card or in other written notification to the department.

"Qualifying patient" or "patient" means a resident of the State who has been provided with a certification by a physician pursuant to a bona fide physician-patient relationship.

"Registry identification card" means a document issued by the department that identifies a person as a registered qualifying patient or primary caregiver.

"Usable marijuana" means the dried leaves and flowers of marijuana, and any mixture or preparation thereof, and does not include the seeds, stems, stalks or roots of the plant.

91. Section 15 of P.L.2009, c.307 (C.24:6I-13) is amended to read as follows:

C.24:6I-13 Exchange of data, information.

15. a. The Department of Health is authorized to exchange fingerprint data with, and receive information from, the Division of State Police in the Department of Law and Public Safety and the Federal Bureau of Investigation for use in reviewing applications for individuals seeking to serve as primary caregivers pursuant to section 4 of P.L.2009, c.307 (C.24:6I-4), and for permits to operate as, or to be a director, officer, or employee of, alternative treatment centers pursuant to section 7 of P.L.2009, c.307 (C.24:6I-7).

b. The Division of State Police shall promptly notify the Department of Health in the event an applicant seeking to serve as a primary caregiver or an applicant for a permit to operate as, or to be a director, officer, or employee of, an alternative treatment center, who was the subject of a criminal history record background check conducted pursuant to subsection a. of this section, is convicted of a crime involving possession or sale of a controlled dangerous substance.

92. Section 2 of P.L.1970, c.226 (C.24:21-2) is amended to read as follows:

C.24:21-2 Definitions.

2. As used in this act:

"Administer" means the direct application of a controlled dangerous substance, whether by injection, inhalation, ingestion, or any other means, to the body of a patient or research subject by: (1) a practitioner (or, in his presence, by his lawfully authorized agent), or (2) the patient or research subject at the lawful direction and in the presence of the practitioner.

"Agent" means an authorized person who acts on behalf of or at the direction of a manufacturer, distributor, or dispenser but does not include a common or contract carrier, public warehouseman, or employee thereof.

"Commissioner" means the Commissioner of Health.

"Controlled dangerous substance" means a drug, substance, or immediate precursor in Schedules I through V of article 2 of P.L.1970, c.226 (C.24:21-1 et seq.). The term shall not include distilled spirits, wine, malt beverages, as those terms are defined or used in R.S.33:1-1 et seq., or tobacco and tobacco products.

"Counterfeit substance" means a controlled dangerous substance which, or the container or labeling of which, without authorization, bears the trademark, trade name, or other identifying mark, imprint, number or device, or any likeness thereof, of a manufacturer, distributor, or dispenser other than the person or persons who in fact manufactured, distributed, or

dispensed such substance and which thereby falsely purports or is represented to be the product of, or to have been distributed by, such other manufacturer, distributor, or dispenser.

"Deliver" or "delivery" means the actual, constructive, or attempted transfer from one person to another of a controlled dangerous substance, whether or not there is an agency relationship.

"Director" means the Director of the Division of Consumer Affairs in the Department of Law and Public Safety.

"Dispense" means to deliver a controlled dangerous substance to an ultimate user or research subject by or pursuant to the lawful order of a practitioner, including the prescribing, administering, packaging, labeling, or compounding necessary to prepare the substance for that delivery. "Dispenser" means a practitioner who dispenses.

"Distribute" means to deliver other than by administering or dispensing a controlled dangerous substance. "Distributor" means a person who distributes.

"Division" means the Division of Consumer Affairs in the Department of Law and Public Safety.

"Drug Enforcement Administration" means the Drug Enforcement Administration in the United States Department of Justice.

"Drugs" means (a) substances recognized in the official United States Pharmacopoeia, official Homeopathic Pharmacopoeia of the United States, or official National Formulary, or any supplement to any of them; and (b) substances intended for use in the diagnosis, cure, mitigation, treatment, or prevention of disease in man or other animals; and (c) substances (other than food) intended to affect the structure or any function of the body of man or other animals; and (d) substances intended for use as a component of any article specified in subsections (a), (b), and (c) of this section; but does not include devices or their components, parts or accessories.

"Drug dependent person" means a person who is using a controlled dangerous substance and who is in a state of psychic or physical dependence, or both, arising from the use of that controlled dangerous substance on a continuous basis. Drug dependence is characterized by behavioral and other responses, including but not limited to a strong compulsion to take the substance on a recurring basis in order to experience its psychic effects, or to avoid the discomfort of its absence.

"Hashish" means the resin extracted from any part of the plant Genus Cannabis L. and any compound, manufacture, salt, derivative, mixture, or preparation of such resin.

"Marihuana" means all parts of the plant Genus Cannabis L., whether growing or not; the seeds thereof; and every compound, manufacture, salt,

derivative, mixture, or preparation of the plant or its seeds, except those containing resin extracted from the plant; but shall not include the mature stalks of the plant, fiber produced from the stalks, oil or cake made from the seeds of the plant, any other compound, manufacture, salt, derivative, mixture, or preparation of such mature stalks, fiber, oil, or cake, or the sterilized seed of the plant which is incapable of germination.

"Manufacture" means the production, preparation, propagation, compounding, conversion, or processing of a controlled dangerous substance, either directly or by extraction from substances of natural origin, or independently by means of chemical synthesis, or by a combination of extraction and chemical synthesis, and includes any packaging or repackaging of the substance or labeling or relabeling of its container, except that this term does not include the preparation or compounding of a controlled dangerous substance by an individual for his own use or the preparation, compounding, packaging, or labeling of a controlled dangerous substance: (1) by a practitioner as an incident to his administering or dispensing of a controlled dangerous substance in the course of his professional practice, or (2) by a practitioner (or under his supervision) for the purpose of, or as an incident to, research, teaching, or chemical analysis and not for sale.

"Narcotic drug" means any of the following, whether produced directly or indirectly by extraction from substances of vegetable origin, or independently by means of chemical synthesis, or by a combination of extraction and chemical synthesis:

- (a) Opium, coca leaves, and opiates;
- (b) A compound, manufacture, salt, derivative, or preparation of opium, coca leaves, or opiates;
- (c) A substance (and any compound, manufacture, salt, derivative, or preparation thereof) which is chemically identical with any of the substances referred to in subsections (a) and (b), except that the words "narcotic drug" as used in this act shall not include decocainized coca leaves or extracts of coca leaves, which extracts do not contain cocaine or ecgonine.

"Official written order" means an order written on a form provided for that purpose by the Attorney General of the United States or his delegate, under any laws of the United States making provisions therefor, if such order forms are authorized and required by the federal law, and if no such form is provided, then on an official form provided for that purpose by the division. If authorized by the Attorney General of the United States or the division, the term shall also include an order transmitted by electronic means.

"Opiate" means any dangerous substance having an addiction-forming or addiction-sustaining liability similar to morphine or being capable of

conversion into a drug having such addiction-forming or addiction-sustaining liability. It does not include, unless specifically designated as controlled under section 3 of this act, the dextrorotatory isomer of 3-methoxy-n-methylmorphinan and its salts (dextromethorphan). It does include its racemic and levorotatory forms.

"Opium poppy" means the plant of the species *Papaver somniferum* L., except the seeds thereof.

"Person" means any corporation, association, partnership, trust, other institution or entity, or one or more individuals.

"Pharmacist" means a registered pharmacist of this State.

"Pharmacy owner" means the owner of a store or other place of business where controlled dangerous substances are compounded or dispensed by a registered pharmacist; but nothing in this chapter contained shall be construed as conferring on a person who is not registered or licensed as a pharmacist any authority, right, or privilege that is not granted to him by the pharmacy laws of this State.

"Poppy straw" means all parts, except the seeds, of the opium poppy, after mowing.

"Practitioner" means a physician, dentist, veterinarian, scientific investigator, laboratory, pharmacy, hospital, or other person licensed, registered, or otherwise permitted to distribute, dispense, conduct research with respect to, or administer a controlled dangerous substance in the course of professional practice or research in this State.

(a) "Physician" means a physician authorized by law to practice medicine in this or any other state and any other person authorized by law to treat sick and injured human beings in this or any other state.

(b) "Veterinarian" means a veterinarian authorized by law to practice veterinary medicine in this State.

(c) "Dentist" means a dentist authorized by law to practice dentistry in this State.

(d) "Hospital" means any federal institution, or any institution for the care and treatment of the sick and injured, operated or approved by the appropriate State department as proper to be entrusted with the custody and professional use of controlled dangerous substances.

(e) "Laboratory" means a laboratory to be entrusted with the custody of narcotic drugs and the use of controlled dangerous substances for scientific, experimental, and medical purposes and for purposes of instruction approved by the Department of Health.

"Production" includes the manufacture, planting, cultivation, growing, or harvesting of a controlled dangerous substance.

"Immediate precursor" means a substance which the division has found to be and by regulation designates as being the principal compound commonly used or produced primarily for use, and which is an immediate chemical intermediary used or likely to be used in the manufacture of a controlled dangerous substance, the control of which is necessary to prevent, curtail, or limit such manufacture.

"State" means the State of New Jersey.

"Ultimate user" means a person who lawfully possesses a controlled dangerous substance for his own use or for the use of a member of his household or for administration to an animal owned by him or by a member of his household.

C.26:1A-2.1 Redesignation as Department of Health, Commissioner of Health.

93. a. The Department of Health, established pursuant to P.L.1947, c.177 (C.26:1A-1 et seq.), and continued and constituted and redesignated as the Department of Health and Senior Services pursuant to Reorganization Plan No. 001-1996, is continued and constituted and redesignated as the Department of Health. The Commissioner of Health and Senior Services shall be redenominated as the Commissioner of Health.

b. Whenever the terms "Department of Health and Senior Services" and "Commissioner of Health and Senior Services" occur or any references are made thereto in any law, rule, regulation, order, contract, document, judicial or administrative proceeding, or otherwise, the same shall be deemed to mean or refer to the "Department of Health" and the "Commissioner of Health," respectively.

c. The Commissioner of Health shall have the power, not inconsistent with section 13 of P.L.1947, c.177 (C.26:1A-13) or the provisions of P.L.2012, c.17 (C.26:1A-2.1 et al.), to organize the work of the Department of Health in such organizational units as the commissioner may determine to be necessary for its efficient and effective operation.

94. Section 11 of P.L.1999, c.154 (C.26:1A-15.1) is amended to read as follows:

C.26:1A-15.1 Advisory board on health information electronic data interchange technology, Statewide electronic health record policy.

11. The Commissioner of Health, in consultation with the Commissioner of Banking and Insurance, shall establish an advisory board to make recommendations to the commissioners on health information electronic data interchange technology policy, including a Statewide policy on electronic health

records, and measures to protect the confidentiality of medical information. The members of the board shall include, at a minimum, representation from health insurance carriers, health care professionals and facilities, higher education, business and organized labor, health care consumers, and the commissioner of each department in the State that uses individuals' medical records or processes claims for health care services. The members of the board shall serve without compensation but shall be entitled to reimbursement for reasonable expenses incurred in the performance of their duties.

95. Section 12 of P.L.1999, c.154 (C.26:1A-15.2) is amended to read as follows:

C.26:1A-15.2 Annual report to Governor, Legislature.

12. The Commissioner of Health, in conjunction with the Commissioner of Banking and Insurance, shall present an annual report to the Governor and the Legislature on the development and use of health information electronic data interchange technology in New Jersey. The report shall be prepared in consultation with the advisory board established pursuant to section 11 of P.L.1999, c.154 (C.26:1A-15.1). The report shall include any recommendations, including proposals for regulatory and legislative changes, to promote the development and use of health information electronic data interchange technology in this State.

96. Section 2 of P.L.1993, c.309 (C.26:1A-36.7) is amended to read as follows:

C.26:1A-36.7 Early intervention services established.

2. The Department of Health, in conjunction with the Departments of Education and Human Services, shall establish a Statewide system of early intervention services for eligible infants and toddlers from birth to age two, inclusive, with physical, cognitive, communication, social, or emotional, and adaptive developmental delays or disabilities in accordance with Part H of the "Individuals with Disabilities Education Act," Pub.L.91-230 (20 U.S.C. s.1471 et seq.).

97. Section 2 of P.L.2007, c.172 (C.26:1A-36.7a) is amended to read as follows:

C.26:1A-36.7a Activities of Early Intervention Program relative to autism spectrum disorders.

2. The Early Intervention Program in the Department of Health, established pursuant to section 2 of P.L.1993, c.309 (C.26:1A-36.7), shall con-

duct activities to address the specific needs of children with autism spectrum disorders and their families. These activities shall include, but not be limited to, the following:

- a. developing, in consultation with autism experts and advocates, including, but not limited to, the Governor's Council for Medical Research and Treatment of Autism, Autism Speaks, The New Jersey Center for Outreach and Services for the Autism Community, The Autism Center of New Jersey Medical School at the University of Medicine and Dentistry of New Jersey, the Statewide Parent Advocacy Network, Inc., and the New Jersey chapter of the American Academy of Pediatrics, guidelines for health care professionals to use in evaluating infants and toddlers living in the State for autism and to ensure the timely referral by health care professionals of infants and toddlers who are identified as having autism or suspected of being on the autism spectrum to the Early Intervention Program in order to provide appropriate services to those infants and toddlers as early as possible;
- b. referring affected children who are identified as having autism or suspected of being on the autism spectrum and their families to schools and agencies, including community, consumer, and parent-based agencies, and organizations and other programs mandated by Part C of the "Individuals with Disabilities Education Act" (20 U.S.C. s.1431 et seq.), which offer programs specifically designed to meet the unique needs of children with autism;
- c. collecting data on Statewide autism screening, diagnosis, and intervention programs and systems that can be used for applied research, program evaluation, and policy development; and
- d. disseminating information on the medical care of individuals with autism to health care professionals and the general public.

98. Section 2 of P.L.1999, c.265 (C.26:1A-37.6) is amended to read as follows:

C.26:1A-37.6 New Jersey Council on Physical Fitness and Sports.

2. There is established in the Department of Health a New Jersey Council on Physical Fitness and Sports which shall serve the citizens of the State by developing safe, healthful, and enjoyable physical fitness and sports programs. The council shall provide instruments of motivation and education, and shall promote public awareness to ensure that all citizens of the State have the opportunity to pursue a more healthful lifestyle.

99. Section 3 of P.L.1999, c.265 (C.26:1A-37.7) is amended to read as follows:

C.26:1A-37.7 Council, members, terms, compensation, administration.

3. a. The council shall consist of 16 members, including: the Commissioner of Health, or the commissioner's designee, who shall serve as an ex officio member; and 15 public members to be appointed by the Governor as follows: one member each from the New Jersey Association of Health, Physical Education, Recreation and Dance; the New Jersey Recreation and Parks Association; the Medical Society of New Jersey; the New Jersey State Interscholastic Athletic Association; and such other persons or professionals as are interested in the physical fitness of the citizens of the State. The council shall meet and organize immediately after appointment of the members and shall elect from its membership a chairperson and vice chairperson.

b. Each public member of the council shall serve for a term of three years, expiring on January 1 in the appropriate year; except that of the members first appointed, four shall be appointed for a term of one year, five shall be appointed for a term of two years and six shall be appointed for a term of three years, as determined by the Governor. Each member shall hold office for the term of appointment and until a successor is appointed and qualified. A public member of the council shall be eligible for reappointment. Members appointed to fill a vacancy occurring for any reason other than the expiration of the term shall serve for the unexpired term only.

c. Public members shall serve without compensation, but shall be reimbursed for necessary expenses incurred in the performance of their duties.

d. The council shall adopt rules for the transaction of its business and shall keep a record of its business, including a record of its resolutions, transactions, findings and determinations. A majority of the members of the council shall constitute a quorum, but a lesser number may hold a hearing.

e. The council shall meet at least once in each quarter of the fiscal year, and as often thereafter as shall be deemed necessary by the chairperson.

f. By a two-thirds vote of the council, a member may be dismissed from membership for such reasons as the council may establish, which reasons shall include lack of interest in council duties or repeated absences from council meetings.

g. The council shall be administrated by the Department of Health. The department shall employ necessary staff to carry out the duties and functions of the council as otherwise provided in this act or as otherwise provided by law.

100. Section 41 of P.L.1947, c.177 (C.26:1A-41) is amended to read as follows:

C.26:1A-41 Issuance of licenses for health officer, registered environmental health specialist.

41. The commissioner shall, in the name of the department, issue the following licenses:

- a. Health officer's license;
- b. (Deleted by amendment, P.L.1997, c.416).
- c. (Deleted by amendment, P.L.1997, c.416).
- d. (Deleted by amendment, P.L.1997, c.416).
- e. (Deleted by amendment, P.L.1997, c.416).
- f. (Deleted by amendment, P.L.1997, c.416).
- g. (Deleted by amendment, P.L.1997, c.416).
- h. (Deleted by amendment, P.L.1997, c.416).
- i. (Deleted by amendment, P.L.1997, c.416).
- j. (Deleted by amendment, P.L.1997, c.416).
- k. Registered environmental health specialist's license.

However, any health officer's license, sanitary inspector's license, and plumbing inspector's license issued before the effective date of P.L.1947, c.177 (C.26:1A-1 et seq.) by the Department of Health shall, unless suspended or revoked in accordance with the provisions of sections 43 and 44 of that act, remain in effect during the employment as such of the holder thereof. Upon enactment of P.L.1997, c.416 (C.26:1A-42.1 et al.) any existing Sanitary Inspector, First Grade license shall become a Registered Environmental Health Specialist license without any further action required of the licensee.

Any license eliminated by P.L.1997, c.416 (C.26:1A-42.1 et al.) shall, unless suspended or revoked in accordance with the provisions of sections 43 and 44 of P.L.1947, c.177 (C.26:1A-43 and C.26:1A-44), remain in effect until the holder thereof does not renew the license within two years from the date of its expiration, or the commissioner does not renew the license in accordance with section 42 of that act, whichever comes first.

101. Section 43 of P.L.1947, c.177 (C.26:1A-43) is amended to read as follows:

C.26:1A-43 Suspension, revocation of license.

43. Any license issued in accordance with the provisions of this article, and any health officer's license or sanitary inspector's license heretofore issued by the Department of Health, may be suspended or revoked, after notice and hearing conducted by an administrative law judge pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), for any of the following causes:

- a. Violation of any of the provisions of this act or of any law relating to public health;
- b. Violation of any provision of the State Sanitary Code;
- c. Violation of any applicable local health regulation or ordinance;
- d. Any act or happening occurring after the making of application for such license which, if the same had occurred prior to said time, would have prevented the issuance of such license; or
- e. A conviction in a court of competent jurisdiction, either within or outside this State, of a crime involving moral turpitude, except that if the conviction is reversed and the holder of the license is discharged or acquitted, or if the holder is pardoned or the civil rights of the holder are restored, the holder may obtain a license.

Notwithstanding any provision of section 10 of P.L.1968, c.410 (C.52:14B-10) to the contrary, the commissioner, before adopting, rejecting or modifying the recommended report and decision of an administrative law judge, shall consult with the Public Health Council.

The suspension or revocation of a license shall be effected by a notice in writing of the suspension or revocation, designating the effective date thereof, and in the case of a suspension, the term of the suspension, which notice may be served upon the licensee personally or by mailing the same by registered mail addressed to the licensee at the licensee's home address.

The commissioner shall file a copy of the notice of suspension or revocation of license with the local board of health.

102. Section 1 of P.L.1957, c.72 (C.26:1A-107) is amended to read as follows:

C.26:1A-107 Division of Aging Services.

1. There is hereby established in the Department of Human Services, a Division of Aging Services, consisting of a director and the New Jersey State Commission on Aging in accordance with the provisions of section 398 of P.L.2012, c.17 (C.30:1A-14).

103. Section 6 of P.L.1957, c.72 (C.26:1A-112) is amended to read as follows:

C.26:1A-112 Appointment of staff, compensation.

6. The Commissioner of Human Services may appoint such professional, technical, and clerical assistants and employees as may be necessary to enable the division and the commission to perform the duties imposed upon it by this act and their compensation shall be fixed within the limits of

available appropriations and as shall be provided by law. The assistants and employees, together with the director of the division, shall be deemed to be the staff of the division and the commission. The advisory commission shall meet at regular intervals and at least 4 times annually. The times and places for the said meetings shall be fixed by the commission and special meetings may be called by the director on not less than 10 days' written notice to each member, and any such notice shall specify the object of the meeting.

104. Section 9 of P.L.1966, c.61 (C.26:1A-113.1) is amended to read as follows:

C.26:1A-113.1 Powers and duties of commission.

9. The commission shall:

- (1) Furnish consultation and advice to the Division of Aging Services on programs designed to carry out the division's mandate.
- (2) Provide leadership in the field of aging.
- (3) Make recommendations to the Governor and Legislature regarding new legislation needed in areas related to aging.
- (4) Maintain liaison with other commissions and groups whose activities relate to the broad field of aging.

105. Section 10 of P.L.1966, c.61 (C.26:1A-115.1) is amended to read as follows:

C.26:1A-115.1 Agreements with federal government; reimbursement.

10. The Commissioner of Human Services, subject to the approval of the Governor, is authorized, on behalf of the State of New Jersey, to enter into agreements with the Federal Government or any agency thereof, under which the Division of Aging Services (1) will provide or otherwise secure the adoption of programs consonant with the objectives of this act and (2) will receive reimbursement from the United States for any such costs incurred, expenses paid, or allowances and benefits paid in connection with said programs in accordance with said agreement and the laws of this State or of the United States.

106. Section 2 of P.L.2001, c.376 (C.26:1A-124) is amended to read as follows:

C.26:1A-124 Office of Women's Health.

2. There is established the Office on Women's Health in the Department of Health.

The office shall:

- a. Provide grants to community-based organizations to conduct special research, demonstration, and evaluation projects on women's health concerns;
- b. Develop and implement model public and private partnerships throughout the State for health awareness campaigns and to improve the access, acceptability, and use of public health services;
- c. Serve as an information and resource center for women's health information and data;
- d. Function as an advocate for the adoption and implementation of effective measures to improve women's health;
- e. Convene such task forces of experienced, knowledgeable persons on specific women's health issues as the director deems appropriate; and
- f. Review the programs of the Departments of Health, Human Services, Children and Families, and Education and any other department of State government, as appropriate, that concern women's health and make recommendations to the departments that will enable them to better coordinate and improve the effectiveness of their efforts.

107. Section 3 of P.L.2001, c.376 (C.26:1A-125) is amended to read as follows:

C.26:1A-125 Appointment of director.

3. The Commissioner of Health shall appoint a director for the office who shall serve at the pleasure of the commissioner during the commissioner's term of office and until the appointment and qualification of the director's successor. The director shall devote his entire time to the duties of the position and shall receive a salary as provided by law.

108. Section 5 of P.L.2001, c.376 (C.26:1A-127) is amended to read as follows:

C.26:1A-127 Women's Health Advisory Commission.

5. There is established a Women's Health Advisory Commission.

The commission shall consist of nine members, including the Commissioner of Health or his designee, who shall serve ex officio, and eight public members who are residents of the State and who shall be appointed as follows: one member who is a health care professional shall be appointed by the President of the Senate; one member who is a health care professional shall be appointed by the Speaker of the General Assembly; and six members, at least two of whom are health care professionals, at least one of whom represents health care facilities, at least one of whom represents the health insurance industry, and at least one of whom is a woman with a dis-

ability, shall be appointed by the Governor with the advice and consent of the Senate. No less than five of the public members shall be women.

The term of office of each public member shall be three years, but of the members first appointed, two shall be appointed for a term of one year, three shall be appointed for a term of two years and three shall be appointed for a term of three years. A member shall hold office for the term of his appointment and until his successor has been appointed and qualified. All vacancies shall be filled for the balance of the unexpired term in the same manner as the original appointment. A member of the commission is eligible for reappointment.

The public members of the commission shall not receive any compensation for their services, but shall be reimbursed for the actual and necessary expenses incurred in the performance of their duties as members of the commission, within the limits of funds available to the commission.

The members of the commission shall annually elect a chairman and a vice-chairman from among the public members and may select a secretary, who need not be a member of the commission.

The Office on Women's Health in the Department of Health shall provide staff and assistance which the commission requires to carry out its work.

109. Section 9 of P.L.2001, c.376 (C.26:1A-131) is amended to read as follows:

C.26:1A-131 Rules, regulations.

9. The Commissioner of Health shall adopt rules and regulations pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.) to carry out the purposes of this act.

110. Section 5 of P.L.2007, c.330 (C.26:1A-136) is amended to read as follows:

C.26:1A-136 New Jersey Health Information Technology Commission.

5. a. There is established the New Jersey Health Information Technology Commission. For the purpose of complying with the provisions of Article V, Section IV, paragraph 1 of the New Jersey Constitution, the commission is established within the Department of Health, but, notwithstanding the establishment, the commission shall be independent of any supervision or control by the department or any board or officer thereof.

b. The commission shall collaborate with the Office for e-HIT established pursuant to section 8 of this act (C.17:1D-1), concerning all activities related to the development, implementation, and oversight of the plan.

The commission shall be responsible for approving the Statewide health information technology plan.

c. In providing advice on the development of the plan, the commission shall, at a minimum, consider the following:

(1) the importance of the education of the general public and health care professionals about the value of an electronic health infrastructure for improving the delivery of patient care;

(2) the means for the creation of an effective, efficient, Statewide use of electronic health information in patient care, health care policymaking, clinical research, health care financing, and continuous quality improvements;

(3) the means for the promotion of the use of national standards for the development of an interoperative system, including provisions relating to security, privacy, data content, structures and format, vocabulary, and transmission protocols;

(4) the nature of proper strategic investments in equipment and other infrastructure elements that will facilitate the ongoing development of a Statewide infrastructure;

(5) funding needs for the ongoing development of health information technology projects;

(6) actions needed to incorporate existing health care information technology initiatives into the plan in order to avoid incompatible systems and duplicative efforts;

(7) the proper means for the review and integration of the recommendations, findings, and conclusions of the New Jersey Health Information Security and Privacy Collaboration;

(8) the importance of recommending steps for the proper resolution of issues related to data ownership, governance, and confidentiality and security of patient information;

(9) the importance of promoting the deployment of health information technology in primary care provider settings; and

(10) the roles that the development and use of open-source electronic medical record software and the use of application service provider software can play in effectuating the purposes of paragraph (9) of this subsection.

d. The commission shall review the plan submitted by the Office for e-HIT and notify it of any changes needed to approve the plan.

111. Section 6 of P.L.2007, c.330 (C.26:1A-137) is amended to read as follows:

C.26:1A-137 Membership of commission; terms; authority.

6. a. The New Jersey Health Information Technology Commission shall be comprised of 19 members as follows:

(1) the Commissioners of Health, Banking and Insurance, Children and Families, and Human Services, and the State Treasurer, or their designees, who shall serve ex officio; and

(2) 14 public members, who shall be appointed by the Governor no later than the 60th day after the effective date of this act, as follows: three physicians engaged in private practice in this State, one of whom is a pediatrician and one a psychiatrist; two persons who represent acute care hospitals in this State, one of whom represents a teaching hospital and the other a non-teaching hospital; a registered professional nurse practicing in this State; a pharmacist practicing in this State; a person who represents a clinical laboratory operating in this State; an attorney practicing in this State with demonstrated expertise in health privacy issues; a person who represents a health insurance carrier operating in this State; a person who represents a Quality Improvement Organization located in New Jersey that contracts with the federal Centers for Medicare & Medicaid Services to improve the efficiency and effectiveness, economy, and quality of services provided to Medicare beneficiaries; and three members of the public with a demonstrated professional expertise in issues relating to the work of the commission, including one member with expertise in electronic health information technology.

(3) The Governor shall designate a public member as chair of the commission.

b. The public members shall serve for a term of three years; except that, of the public members first appointed, five shall serve for a term of three years, five for a term of two years, and four for a term of one year. Vacancies in the membership of the commission shall be filled in the same manner as the original appointments were made.

c. The commission shall organize as soon as may be practicable, but no later than the 45th day after the appointment of its members. The public members shall serve without compensation, but may be reimbursed for necessary expenses incurred in the performance of their duties.

d. A majority of the total authorized membership of the commission shall constitute a quorum at any meeting thereof. Action may be taken and motions and resolutions adopted by the commission at any meeting of the commission by the affirmative vote of a majority of the quorum of the members who are present. A vacancy in the membership of the commis-

sion shall not impair the right of a quorum of the members to exercise all the powers and perform all the duties of the commission.

e. The commission shall meet and confer with the Office for e-HIT at least quarterly and may meet at other times at the call of the commission chair. The meetings of the commission shall comply with the provisions of the "Senator Byron M. Baer Open Public Meetings Act," P.L.1975, c.231 (C.10:4-6 et seq.).

f. In addition to any other powers authorized by law, the commission shall have the authority, in accordance with State law, to:

- (1) make and enter into contracts to purchase services and supplies;
- (2) develop and submit a proposed budget, not to exceed \$1 million annually;
- (3) apply for, receive, and expend grants from governmental or private nonprofit sources;
- (4) recommend to the Department of Banking and Insurance the necessary charges and assessments to be levied to collect payments from persons and entities for the provision of services or as the Office for e-HIT otherwise determines necessary to effectuate the purposes of this act;
- (5) receive and expend appropriations;
- (6) provide such other services and perform such other functions as the commission deems necessary to fulfill its responsibilities under this act; and
- (7) appoint, retain, or employ consultants on a contract basis or otherwise, who are deemed necessary, and as may be within the limits of funds appropriated or otherwise made available to it for its purposes.

g. In collaboration with the Office for e-HIT, the commission shall, no later than 18 months after its initial meeting and annually thereafter, submit a joint report to the Governor, and to the Legislature pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1), concerning its activities and the status of, and actions taken regarding development, implementation, and oversight of the Statewide health information technology plan. The commission shall include in that report any findings and recommendations that it desires to make, along with any legislative bills that it desires to recommend for adoption by the Legislature.

h. The commission shall develop and submit a proposed budget to the Commissioner of Health to effectuate its duties as set forth in this act.

The budget shall be subject to approval by the Commissioner of Health.

i. The commission shall appoint a full-time executive director, who shall serve as secretary to the commission. The executive director shall serve at the pleasure of the commission and shall be qualified by training and experience to perform the duties of the position. The executive director

shall be in the unclassified service of the Civil Service and may hire properly qualified employees, within the limits of funds appropriated or otherwise made available to the commission, who shall also be employed in the unclassified service of the Civil Service; except that employees performing stenographic or clerical duties shall be in the career service and appointed pursuant to Title 11A of the New Jersey Statutes.

112. Section 2 of P.L.2001, c.373 (C.26:2-103.2) is amended to read as follows:

C.26:2-103.2 Definitions relative to universal newborn hearing screening.

2. As used in this act:

"Commissioner" means the Commissioner of Health.

"Department" means the Department of Health.

"Electrophysiologic screening measures" means the electrical result of the application of physiologic agents and includes, but is not limited to, the procedures currently known as Auditory Brainstem Response testing (ABR) and Otoacoustic Emissions testing (OAE) and any other procedure adopted by regulation by the commissioner.

"Hearing loss" means a hearing loss of 30dB or greater in the frequency region important for speech recognition and comprehension in one or both ears, which is approximately 500 through 4000 Hz., except that the commissioner may adopt a standard which establishes a less severe hearing loss, as appropriate.

"Newborn" means a child up to 28 days old.

"Parent" means a biological parent, stepparent, adoptive parent, legal guardian, or other legal custodian of a child.

113. Section 2 of P.L.1977, c.266 (C.26:2-105) is amended to read as follows:

C.26:2-105 Establishment, maintenance of State cancer registry.

2. The Department of Health shall establish and maintain an up-to-date registry which shall include a record of cases of cancer and specified cases of tumorous or precancerous disease that occur in New Jersey, and such information concerning these cases as it shall deem necessary and appropriate in order to conduct thorough and complete epidemiologic surveys of cancer and cancer-related diseases in this State and to apply appropriate preventive and control measures.

114. Section 3 of P.L.1977, c.266 (C.26:2-106) is amended to read as follows:

C.26:2-106 Reports; rules, regulations; enforcement.

3. a. The Commissioner of Health, in consultation with the Public Health Council, shall require the reporting of cases of cancer and other specified tumorous and precancerous diseases, and the submission of such specified additional information on reported cases or control populations as he deems necessary and appropriate for the recognition, prevention, cure, or control of such diseases.

b. Pursuant to subsection a. of this section, the Commissioner of Health is hereby authorized to adopt and promulgate, in the manner prescribed by the applicable provisions of the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.) rules and regulations specifying the health care providers, individuals, and other organizations obliged to make the report and submissions required by subsection a. of this section, the related information to be included in such reports, and the methods for such reporting.

c. All abstracting work performed by a health care facility in accordance with this section shall be performed by a certified tumor registrar.

d. (1) The Department of Health shall contract out its registry services to health care facilities which lack adequate internal capabilities to report cases on a timely basis, as provided in the regulations adopted pursuant to this section. Such health care facilities shall reimburse the department for services rendered.

(2) If a health care facility fails to correct deficiencies in its reporting that are discovered on audit by the Department of Health within 30 days, the department will conduct the appropriate registrar activities and charge the facility for all costs related to its services.

e. Health insurers and other third party health care payers providing health benefits plans to residents of the State shall report to the Department of Health cases of cancer of State residents based upon selection criteria and in a format specified by the department.

f. (1) A health care facility, health care provider, or health insurer that fails to comply with the provisions of this section shall be liable to a penalty of up to \$500 per unreported cancer case.

(2) A health care facility that fails to report cases of cancer electronically, as required by regulation, shall be liable to a penalty not to exceed \$1,000 per business day.

(3) A penalty sued for under the provisions of this subsection shall be recovered by and in the name of the Department of Health and shall be dedicated to the cancer registry.

g. All information reported to the Department of Health for inclusion in the cancer registry pursuant to this section shall be verified for accuracy by the department within six months of receiving the information and shall be incorporated in the registry. Aggregate or summary information, to include gender distribution, age groupings of cases, and cancer types, shall be made available to the public no later than six months after verification by the department. The department shall not make public any information reported to the department which discloses the identity of any person to whom the information relates.

115. Section 4 of P.L.1977, c.266 (C.26:2-107) is amended to read as follows:

C.26:2-107 Confidentiality of reports.

4. The reports made pursuant to this act are to be used only by the Department of Health and such other agencies as may be designated by the Commissioner of Health and shall not otherwise be divulged or made public so as to disclose the identity of any person to whom they relate; and to that end, such reports shall not be included under materials available to public inspection pursuant to P.L.1963, c.73 (C.47:1A-1 et seq.).

116. Section 5 of P.L.1977, c.266 (C.26:2-108) is amended to read as follows:

C.26:2-108 Immunity from liability for individuals, organizations providing information.

5. No individual or organization providing information to the Department of Health in accordance with this act shall be deemed to be, or held liable for, divulging confidential information.

117. Section 1 of P.L.2004, c.12 (C.26:2-111.1) is amended to read as follows:

C.26:2-111.1 Option of additional screening for disorders in infant required; cost.

1. a. A health care provider shall give an infant's parent or guardian the option of consenting to the performance of testing by qualified laboratories for disorders in infants for which testing is not required pursuant to P.L.1977, c.321 (C.26:2-110 et seq.), on a form and in a manner prescribed

by the Commissioner of Health. The health care provider shall not be required to assume the cost of such testing.

As used in this section:

"Health care provider" means a health care professional licensed pursuant to Title 45 of the Revised Statutes or a health care facility licensed pursuant to Title 26 of the Revised Statutes that provides health care services to newborn infants.

"Qualified laboratory" means a clinical laboratory not operated by the Department of Health, which is certified by the Secretary of Health and Human Services pursuant to the federal "Clinical Laboratory Improvement Amendments of 1988," Pub.L.100-578 (42 U.S.C. s.263a) and reports its test results by using normal pediatric reference ranges.

b. (1) The Commissioner of Health shall prepare and make available electronically, on the Internet website of the Department of Health, information that explains the availability of testing performed by qualified laboratories for disorders in infants for which testing is not required pursuant to P.L.1977, c.321 (C.26:2-110 et seq.).

(2) A health care provider shall give an infant's parent or guardian a hard copy of the information prepared pursuant to paragraph (1) of this subsection and provide the parent or guardian with a reasonable opportunity to read the information when giving the parent or guardian the option of consenting to the performance of testing pursuant to subsection a. of this section.

118. Section 4 of P.L.2007, c.218 (C.26:2-111.2) is amended to read as follows:

C.26:2-111.2 HIV testing required for certain newborns.

4. a. The Commissioner of Health shall require each birthing facility in the State to administer to a newborn in its care a test for human immunodeficiency virus (HIV) if the HIV status of the mother of the newborn is unknown.

A newborn shall not be denied testing for HIV on the basis of the newborn's economic status.

b. The commissioner shall establish a comprehensive program for the follow-up testing of newborns who test positive for HIV pursuant to subsection a. of this section or whose mother is HIV-positive, which shall include, but not be limited to, procedures for the administration of HIV testing, counseling of the newborn's mother, tracking the newborn, disclosure of HIV test results to the mother, facility compliance reviews, and educational activities related to the HIV testing.

c. The provisions of this section shall not apply to a newborn whose parents object to the test as being in conflict with their religious tenets and practices. The parents shall provide the health care facility with a written statement of the objection, and the statement shall be included in the newborn's medical record.

d. As used in this section, "birthing facility" means an inpatient or ambulatory health care facility licensed by the Department of Health that provides birthing and newborn care services.

e. The Commissioner of Health shall adopt rules and regulations, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), necessary to carry out the purposes of this section.

119. Section 2 of P.L.2011, c.74 (C.26:2-111.4) is amended to read as follows:

C.26:2-111.4 Birthing facilities required to perform pulse oximetry screening; rules, regulations.

2. a. The Commissioner of Health shall require each birthing facility licensed by the Department of Health to perform a pulse oximetry screening, a minimum of 24 hours after birth, on every newborn in its care.

b. As used in this section, "birthing facility" means an inpatient or ambulatory health care facility licensed by the Department of Health that provides birthing and newborn care services.

c. The commissioner shall adopt rules and regulations, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), necessary to carry out the purposes of this act.

120. Section 1 of P.L.2011, c.175 (C.26:2-111.5) is amended to read as follows:

C.26:2-111.5 Testing of newborns for certain lysosomal storage disorders required.

1. a. All infants born in this State shall be tested for the lysosomal storage disorders known as Krabbe, Pompe, Gaucher, Fabry, and Niemann-Pick diseases within six months following the occurrence of all of the following:

(1) the registration with the federal Food and Drug Administration of the necessary reagents;

(2) the availability of the necessary reagents from the federal Centers for Disease Control and Prevention;

(3) the availability of quality assurance testing methodology for these processes; and

(4) the acquisition by the Department of Health of the equipment necessary to implement the expanded screening tests.

b. The Department of Health may charge a reasonable fee for the tests performed pursuant to this section. The amount of the fee and the procedures for collecting the fee shall be determined by the Commissioner of Health.

121. Section 4 of P.L.1987, c.370 (C.26:2-151) is amended to read as follows:

C.26:2-151 Catastrophic Illness in Children Relief Fund Commission.

4. There is established in the Executive Branch of the State government, the Catastrophic Illness in Children Relief Fund Commission. For the purposes of complying with the provisions of Article V, section IV, paragraph 1 of the New Jersey Constitution, the commission is allocated within the Department of Human Services, but notwithstanding that allocation, the commission shall be independent of any supervision or control by the department or by any board or officer thereof.

The commission shall consist of the Commissioner of Health, the Commissioner of Human Services, the Commissioner of Children and Families, the Commissioner of Banking and Insurance, and the State Treasurer, who shall be members ex officio, and seven public members who are residents of this State, appointed by the Governor with the advice and consent of the Senate for terms of five years, two of whom are appointed upon the recommendation of the President of the Senate, one of whom is a provider of health care services to children in this State and two of whom are appointed upon the recommendation of the Speaker of the General Assembly, one of whom is a provider of health care services to children in this State. The five public members first appointed by the Governor shall serve for terms of one, two, three, four and five years, respectively.

Each member shall hold office for the term of his appointment and until his successor has been appointed and qualified. A member of the commission is eligible for reappointment.

Each ex officio member of the commission may designate an officer or employee of the ex officio member's department to represent the member at meetings of the commission, and each designee may lawfully vote and otherwise act on behalf of the member for whom he constitutes the designee. Any designation shall be in writing delivered to the commission and filed with the office of the Secretary of State and shall continue in effect until revoked or amended in the same manner as provided for designation.

122. Section 2 of P.L.1991, c.401 (C.26:2-161) is amended to read as follows:

C.26:2-161 New Jersey Office on Minority and Multicultural Health.

2. a. There is established the New Jersey Office on Minority and Multicultural Health in the Department of Health.

b. Whenever the term "New Jersey Office on Minority Health" occurs or any reference is made thereto in any law, contract, or document, the same shall be deemed to mean or refer to the "New Jersey Office on Minority and Multicultural Health."

123. Section 3 of P.L.1991, c.401 (C.26:2-162) is amended to read as follows:

C.26:2-162 Duties of the office.

3. The office shall:

a. Provide grants to community-based organizations to conduct special research, demonstration, and evaluation projects for targeted at-risk racial and ethnic minority populations and to support ongoing community-based programs that are designed to reduce or eliminate racial and ethnic health disparities in the State;

b. Develop and implement model public and private partnerships in racial and ethnic minority communities for health awareness campaigns and to improve the access, acceptability, and use of public health services;

c. Serve as an information and resource center for racial and ethnic minority specific health information and data and develop a clearinghouse to collate and organize data on a county-by-county basis and disseminate it upon request to interested parties;

d. Review, recommend, and develop culturally appropriate health education materials;

e. Provide assistance to local school districts to develop programs in elementary and secondary schools which stress good nutrition and healthy lifestyles;

f. Function as an advocate for the adoption and implementation of effective measures to improve the health of racial and ethnic minority populations in this State, which measures should lead to the elimination of disparities among the various racial and ethnic populations of this State with respect to access to high-quality health care, utilization of health care services, and health status;

g. Improve existing data systems to ensure that the health information that is collected includes specific race and ethnicity identifiers;

h. Review the programs of the Departments of Health, Human Services, Community Affairs, and Education and any other department of State government, as appropriate, that concern multicultural or minority health and make recommendations to the departments that will enable them to better coordinate and improve the effectiveness of their efforts;

i. Develop a Statewide plan for increasing the number of racial and ethnic minority health care professionals which includes recommendations for the financing mechanisms and recruitment strategies necessary to carry out the plan;

j. Work collaboratively with colleges of medicine and dentistry in this State and other health care professional training programs to develop cultural and language competency courses that are designed to address the problem of racial and ethnicity disparities in health care access, utilization, treatment decisions, quality, and outcomes;

k. Develop recommendations for the most effective means of providing outreach to racial and ethnic minority communities throughout the State to ensure their maximum participation in publicly funded health benefits programs;

l. Seek to establish a Statewide alliance with community-based agencies and organizations, health care facilities, health care provider organizations, managed care organizations, and pharmaceutical manufacturers to promote the objectives of the office; and

m. Evaluate multicultural or racial and ethnic minority health programs in other states to assess their efficacy and potential for replication in this State and make recommendations regarding the adoption of such programs, as appropriate.

124. Section 4 of P.L.1991, c.401 (C.26:2-163) is amended to read as follows:

C.26:2-163 Powers of the office.

4. The office is authorized to:

a. Adopt rules and regulations pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), concerning the operation of the office and other matters that may be necessary to carry out the purposes of this act;

b. Maintain offices at such places within the State as it may designate;

c. Employ a director and other personnel as may be necessary. The director shall be appointed by the Commissioner of Health and shall serve at the pleasure of the commissioner during the commissioner's term of office and until the appointment and qualification of the director's successor.

The director shall devote his entire time to the duties of the position and shall receive a salary as provided by law;

d. Apply for and accept any grant of money from the federal government, private foundations or other sources, which may be available for programs related to multicultural or minority health;

e. Serve as the designated State agency for receipt of federal funds specifically designated for multicultural or racial and ethnic minority health programs; and

f. Enter into contracts with individuals, organizations, and institutions necessary for the performance of its duties under this act.

125. Section 5 of P.L.1991, c.401 (C.26:2-164) is amended to read as follows:

C.26:2-164 New Jersey Office on Minority and Multicultural Health Advisory Commission.

5. There is established a New Jersey Office on Minority and Multicultural Health Advisory Commission.

The commission shall consist of nine members, including the Commissioner of Health or his designee, who shall serve *ex officio*, and eight public members who are residents of the State and who shall be appointed as follows: one member who is a health care professional shall be appointed by the President of the Senate; one member who is a health care professional shall be appointed by the Speaker of the General Assembly; and six members, at least two of whom are health care professionals, at least one of whom represents health care facilities and at least one of whom represents the health insurance industry, shall be appointed by the Governor with the advice and consent of the Senate.

The term of office of each public member shall be three years, but of the members first appointed, two shall be appointed for a term of one year, three shall be appointed for a term of two years and three shall be appointed for a term of three years. A member shall hold office for the term of his appointment and until his successor has been appointed and qualified. All vacancies shall be filled for the balance of the unexpired term in the same manner as the original appointment. A member of the commission is eligible for reappointment.

The public members of the commission shall not receive any compensation for their services, but shall be reimbursed for the actual and necessary expenses incurred in the performance of their duties as members of the commission, within the limits of funds available to the commission.

The members of the commission shall annually elect a chairman and a vice-chairman from among the public members and may select a secretary, who need not be a member of the commission.

The New Jersey Office on Minority and Multicultural Health shall provide such staff and assistance as the commission requires to carry out its work.

126. Section 1 of P.L.2004, c.137 (C.26:2-167.1) is amended to read as follows:

C.26:2-167.1 "Eliminating Health Disparities Initiative."

1. The Commissioner of Health shall establish the "Eliminating Health Disparities Initiative" in the Office on Minority and Multicultural Health. The commissioner shall require the office to develop and implement a comprehensive, coordinated plan to reduce health disparities between White and racial and ethnic minority populations in the State in the following priority areas: asthma; infant mortality; breast, cervical, prostate and colorectal cancer screening; kidney disease; HIV/AIDS; hepatitis C; sexually transmitted diseases; adult and child immunizations; cardiovascular disease; diabetes; and accidental injuries and violence. As used in this act, "office" means the New Jersey Office on Minority and Multicultural Health.

127. Section 3 of P.L.2004, c.137 (C.26:2-167.3) is amended to read as follows:

C.26:2-167.3 Rules, regulations.

3. The Commissioner of Health shall adopt rules and regulations, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), to effectuate the purposes of this act.

128. Section 2 of P.L.1993, c.229 (C.26:2-169) is amended to read as follows:

C.26:2-169 Criteria for compulsive gambling programs; grants.

2. The Department of Human Services shall develop criteria which prevention, education, and treatment programs for compulsive gamblers shall meet in order to become eligible for a grant from the funds made available for such programs pursuant to section 145 of P.L.1977, c.110 (C.5:12-145). The department shall also develop a formula for the distribution of available funds which will result in an equitable distribution among the programs which meet the eligibility criteria and apply for grants.

The department shall submit a report to the Senate Budget and Appropriations Committee and the Assembly Appropriations Committee, or their successors, describing the criteria developed pursuant to this section and detailing the amount of grants distributed and the names of the programs receiving grants. The department shall submit the report annually to both committees.

129. Section 2 of P.L.1997, c.229 (C.26:2-171) is amended to read as follows:

C.26:2-171 Advisory Council on Adolescent Pregnancy.

2. a. There is established in the Executive Branch of the State Government an Advisory Council on Adolescent Pregnancy. For the purposes of complying with the provisions of Article V, Section IV, paragraph 1 of the New Jersey Constitution, the advisory council is allocated within the Department of Health, but notwithstanding that allocation, the advisory council shall be independent of any supervision or control by the department or by any board or officer thereof.

b. The advisory council shall consist of 24 members as follows: the Commissioners of the Departments of Health, Human Services, Children and Families, Education, Community Affairs, and Labor and Workforce Development, who shall serve as ex officio members, and 18 public members, four of whom shall be teenagers, including two teenage parents and two teenagers who are not parents, and fourteen of whom shall be representatives of community based religious, health, and social service organizations which serve adolescents and health professionals and educators with recognized expertise in the field of adolescent pregnancy. Of the public members, three shall be appointed by the President of the Senate, no more than two of whom shall be of the same political party; three shall be appointed by the Speaker of the General Assembly, no more than two of whom shall be of the same political party; and 12 shall be appointed by the Governor. Eight of the persons appointed by the Governor shall be appointed with the advice and consent of the Senate, no more than four of whom shall be of the same political party; and four of the persons appointed by the Governor shall be teenagers. The advisory council shall organize within 30 days after the appointment of its members. The members shall select one person from among them to serve as the chairperson and the members shall select a secretary, who need not be a member of the advisory council.

c. Each ex officio member may designate an employee of the member's department to represent the member at hearings of the advisory council. All designees may lawfully vote and otherwise act on behalf of the member for whom they constitute the designee.

d. Each public member shall be appointed for a term of three years, but of the members first appointed, six shall serve for a term of one year, six for a term of two years, and six for a term of three years. Members shall serve until their successors are appointed and qualified. Vacancies shall be filled in the same manner as the original appointments were made.

e. Members of the advisory council shall serve without compensation but, within the limits of funds appropriated or otherwise made available to it, shall be eligible for reimbursement of necessary expenses incurred in the performance of their duties.

f. The Department of Health shall provide such staff as the advisory council requests to carry out the purposes of this act.

130. Section 2 of P.L.2000, c.167 (C.26:2-176) is amended to read as follows:

C.26:2-176 Development of policies, procedures for care.

2. The Commissioner of Health, in conjunction with the State Board of Medical Examiners and the New Jersey Board of Nursing, shall work with health care facilities and licensed health care professionals in the State to develop policies and procedures to achieve the following requirements concerning postpartum depression:

a. Physicians, nurse midwives, and other licensed health care professionals providing prenatal care to women shall provide education to women and their families about postpartum depression in order to lower the likelihood that new mothers will continue to suffer from this illness in silence;

b. All birthing facilities in the State shall provide departing new mothers and fathers and other family members, as appropriate, with complete information about postpartum depression, including its symptoms, methods of coping with the illness, and treatment resources;

c. Physicians, nurse midwives, and other licensed health care professionals providing postnatal care to women shall screen new mothers for postpartum depression symptoms prior to discharge from the birthing facility and at the first few postnatal check-up visits; and

d. Physicians, nurse midwives, and other licensed health care professionals providing prenatal and postnatal care to women shall include fathers and other family members, as appropriate, in both the education and treat-

ment processes to help them better understand the nature and causes of postpartum depression so that they too can overcome the spillover effects of the illness and improve their ability to be supportive of the new mother.

131. Section 3 of P.L.2000, c.167 (C.26:2-177) is amended to read as follows:

C.26:2-177 Public awareness campaign.

3. The Commissioner of Health shall establish a public awareness campaign to inform the general public about the nature and causes of postpartum depression and its health implications, including its symptoms, methods of coping with the illness, and the most effective means of treatment.

132. Section 4 of P.L.2000, c.167 (C.26:2-178) is amended to read as follows:

C.26:2-178 Rules, regulations.

4. The Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt rules and regulations to effectuate the purposes of this act.

133. Section 1 of P.L.2003, c.174 (C.26:2-179) is amended to read as follows:

C.26:2-179 Consumer's mercury alert notice, posting, distribution.

1. The Department of Health, in consultation with the Department of Environmental Protection, shall prepare a consumer's mercury alert notice for posting in all patient areas of professional medical offices that provide gynecological, obstetrical, or pediatric care and in the patient or client areas of all maternal and child health and nutrition programs. The notice shall explain the danger to women who expect to become pregnant, women who are pregnant or breast feeding their children, and young children, of eating mercury contaminated fish. The notice shall summarize the State's and the federal government's most current mercury health advisories concerning fish consumption and shall contain such other information as the department deems appropriate. The notice also shall list any telephone number that may be established for State residents to call for further information about the health advisories.

The department shall distribute the notice, at no charge, to all professional medical offices that provide gynecological, obstetrical, or pediatric care and to all publicly funded maternal and child health and nutrition pro-

grams in the State. The department shall update the notice as necessary, and shall make additional copies of the notice available to health care providers upon request.

134. Section 2 of P.L.2005, c.98 (C.26:2-181) is amended to read as follows:

C.26:2-181 Public awareness campaign relative to post-polio sequelae.

2. The Commissioner of Health shall establish a public awareness campaign to inform the general public about post-polio sequelae, for which purpose the commissioner shall provide for the development of educational materials, in consultation with health care facilities and providers that have a demonstrated record of expertise and interest in this subject, which shall be made available to local boards of health, physicians, hospitals, and clinics for distribution to consumers.

135. Section 1 of P.L.2005, c.280 (C.26:2-182) is amended to read as follows:

C.26:2-182 "Task Force on Cancer Prevention, Early Detection and Treatment in New Jersey."

1. a. There is established the "Task Force on Cancer Prevention, Early Detection and Treatment in New Jersey" within the Department of Health.

b. The task force shall be comprised of the following members:

(1) the Commissioner of Health, or his designee, who shall serve ex officio; and

(2) no more than 20 public members to be appointed by the Governor, who shall include representatives from: the Public Health Council; the New Jersey State Commission on Cancer Research; the New Jersey Office on Minority and Multicultural Health; the Medical Society of New Jersey; academic medical centers and universities engaged in cancer education, research, and treatment; providers of cancer treatment and support services; pharmaceutical companies engaged in cancer research; community-based organizations and coalitions engaged in cancer outreach, education, and screening; and cancer survivors.

c. The public members shall serve for a term of one year. Vacancies in the membership of the task force shall be filled in the same manner as the original appointments were made.

d. The task force shall organize as soon as may be practicable, but no later than the 30th day after the appointment of its members, and shall select a chairperson from among the public members. The chairperson shall

appoint a secretary who need not be a member of the task force. The public members shall serve without compensation, but may be reimbursed for necessary expenses incurred in the performance of their duties.

e. The Department of Health shall supply such staff and resources, including a person to serve as executive director of the task force, as the task force requires to carry out its duties.

f. The task force is entitled to the assistance and services of the employees of any State department, board, bureau, commission, or agency as it may require and as may be available to it for its purposes, and to incur traveling and other miscellaneous expenses necessary to perform its duties, within the limits of funds appropriated or otherwise made available to it for its purpose.

136. Section 2 of P.L.2005, c.280 (C.26:2-183) is amended to read as follows:

C.26:2-183 Duties of task force.

2. a. The task force shall:

(1) evaluate current trends in cancer incidence, morbidity and mortality, screening, diagnosis, and behaviors that increase risk;

(2) evaluate historic, current, and emerging cancer control strategies;

(3) establish cancer reduction goals, which shall seek to reduce mortality rates for breast, cervical, prostate, lung, and colorectal cancer;

(4) establish specific goals for:

(a) reducing behavior that increases the risk of cancer, including behavior related to smoking and diet;

(b) reversing the present trend of annual increases in the rate of invasive melanoma;

(c) closing the gap in cancer mortality rates between the total population and minorities;

(d) increasing the use of screening tests for cancer, especially among elderly and minority populations; and

(e) increasing the percentage of cancers diagnosed at early stages;

(5) develop an integrated set of priority strategies that are necessary to achieve the goals established pursuant to this act; and

(6) delineate the respective roles and responsibilities for the State and other entities in implementing the priority strategies identified pursuant to this act.

b. (1) The task force shall report to the Governor, the Commissioner of Health, and the Legislature on its findings, recommendations, and activities at least biennially.

(2) In addition, the cervical cancer workgroup, which the task force shall establish in addition to such other workgroups as it deems appropriate, shall report to the Governor, the Commissioner of Health, and the Legislature at least biennially on its findings and recommendations regarding strategies and actions to reduce the occurrence of, and burdens suffered from, cervical cancer, along with any legislative bills that it desires to recommend for adoption by the Legislature.

137. Section 3 of P.L.2005, c.280 (C.26:2-184) is amended to read as follows:

C.26:2-184 Task force established by E.O.114 continued as this task force.

3. The task force established pursuant to Executive Order No. 114 of 2000, together with its functions, powers, duties, and workgroups, is continued in the Department of Health as the "Task Force on Cancer Prevention, Early Detection and Treatment in New Jersey" established pursuant to this act.

138. Section 2 of P.L.2011, c.155 (C.26:2-184.2) is amended to read as follows:

C.26:2-184.2 Establishment of public awareness campaign.

2. a. The Commissioner of Health shall establish a public awareness campaign to inform the general public about the clinical significance of ovarian cancer and its public health implications. The campaign shall include, at a minimum, risk factors, symptoms, the need for early detection, and methods of treatment.

b. The commissioner shall, at a minimum:

(1) provide for the development of printed educational materials and public service announcements in English and Spanish; and

(2) disseminate information for distribution to the public, through a variety of entities, including, but not limited to, local health agencies and clinics, physicians, health care facilities, county offices on aging, pharmacies, libraries, senior citizen centers, other community-based outreach programs and organizations, and the Department of Health's official website.

139. Section 2 of P.L.2007, c.170 (C.26:2-186) is amended to read as follows:

C.26:2-186 Reporting diagnosis to Department of Health.

2. a. A physician, psychologist, and any other health care professional licensed pursuant to Title 45 of the Revised Statutes who is qualified by train-

ing to make the diagnosis and who then makes the diagnosis that a child has an autism spectrum disorder shall report this diagnosis to the Department of Health in a form and manner prescribed by the Commissioner of Health.

b. The report shall be in writing and shall include the name and address of the person submitting the report, the name, age, place of birth, and address of the child diagnosed as having an autism spectrum disorder, and other pertinent information as may be required by the commissioner; except that, if the child's parent or guardian objects to the reporting of the child's diagnosis for any reason, the report shall not include any information that could be used to identify the child.

c. The commissioner shall specify procedures for the health care professional to inform the child's parent or guardian of the requirements of subsections a. and b. of this section and the purpose served by including this information in the registry established pursuant to section 3 of P.L.2007, c.170 (C.26:2-187), as well as the parent's or guardian's right to refuse to permit the reporting of any information that could be used to identify the child.

140. Section 4 of P.L.2009, c.204 (C.26:2-186.1) is amended to read as follows:

C.26:2-186.1 Reporting adult diagnosis of autism spectrum disorder.

4. a. An adult who has been diagnosed as having an autism spectrum disorder by a physician, psychologist, or any other health care professional licensed pursuant to Title 45 of the Revised Statutes who is qualified by training to make the diagnosis, and whose diagnosis has not been reported pursuant to section 2 of P.L.2007, c.170 (C.26:2-186), may, at his discretion, report this diagnosis, or request that a health care professional on his behalf report this diagnosis, to the Department of Health in a form and manner prescribed by the Commissioner of Health.

b. The report shall be in writing and shall include the name and address of the person submitting the report, the name, age, place of birth, and address of the adult diagnosed as having an autism spectrum disorder, and other pertinent information as may be required by the commissioner.

c. The commissioner shall specify procedures for the health care professional to inform the adult of the provisions of subsections a. and b. of this section and the purpose served by including this information in the registry established pursuant to section 3 of P.L.2007, c.170 (C.26:2-187).

141. Section 3 of P.L.2007, c.170 (C.26:2-187) is amended to read as follows:

C.26:2-187 Maintenance of up-to-date registry.

3. The Department of Health, in consultation with the Department of Human Services, shall maintain an up-to-date registry which shall include a record of: all reported cases of an autism spectrum disorder that occur in New Jersey, including those reported pursuant to section 2 of P.L.2007, c.170 (C.26:2-186) and section 4 of P.L.2009, c.204 (C.26:2-186.1); each reported case of an autism spectrum disorder that occurs in New Jersey in which the initial diagnosis is changed, lost, or considered misdiagnosed; and any other information it deems relevant and appropriate in order to conduct thorough and complete epidemiologic surveys of autism spectrum disorders, to enable analysis of this problem and to plan for and provide services to children and adults with an autism spectrum disorder and their families.

142. Section 4 of P.L.2007, c.170 (C.26:2-188) is amended to read as follows:

C.26:2-188 Use of reports; immunity for professionals.

4. a. The reports made pursuant to P.L.2007, c.170 (C.26:2-185 et seq.) and section 4 of P.L.2009, c.204 (C.26:2-186.1) are to be used only by the Department of Health and other agencies as may be designated by the Commissioner of Health, including the Department of Human Services, and shall not otherwise be divulged or made public so as to disclose the identity of any person to whom they relate; and, to that end, the reports shall not be included under materials available to public inspections pursuant to P.L.1963, c.73 (C.47:1A-1 et seq.) or P.L.2001, c.404 (C.47:1A-5 et al.).

b. A physician, psychologist, or health care professional providing information to the department in accordance with P.L.2007, c.170 (C.26:2-185 et seq.) or section 4 of P.L.2009, c.204 (C.26:2-186.1) shall not be deemed to be, or held liable for, divulging confidential information.

c. Nothing in P.L.2007, c.170 (C.26:2-185 et seq.) or section 4 of P.L.2009, c.204 (C.26:2-186.1) shall be construed to compel a child or adult who has been reported as having an autism spectrum disorder to submit to medical or health examination or supervision by the department.

143. Section 2 of P.L.2008, c.80 (C.26:2-190) is amended to read as follows:

C.26:2-190 Development of training curriculum; rules, regulations.

2. a. The Commissioner of Health and the Commissioner of Human Services, in consultation with the New Jersey Fire and Emergency Medical Services Institute and the New Jersey State First Aid Council, shall develop

a training curriculum with the purpose of informing emergency responders of the risks associated with autism or an intellectual or other developmental disability, as well as providing instruction in appropriate recognition and response techniques concerning these disabilities. The curriculum shall be incorporated into existing time requirements for training and continuing education of emergency responders.

b. Prior to certification by the Department of Health, each emergency medical technician trained in basic life support services as defined in section 1 of P.L.1985, c.351 (C.26:2K-21) shall be required to satisfactorily complete the training developed under subsection a. of this section. Every emergency medical technician certified prior to the effective date of this act shall, within 36 months of the effective date of this act, satisfactorily complete the training in recognition and response techniques concerning these disabilities, through existing continuing education requirements.

c. The Commissioner of Health shall adopt rules and regulations, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), to effectuate the purposes of this act.

144. Section 3 of P.L.2007, c.255 (C.26:2AA-3) is amended to read as follows:

C.26:2AA-3 Definitions relative to RSDS.

3. As used in this act:

"Commissioner" means the Commissioner of Health; and

"Reflex sympathetic dystrophy syndrome" or "RSDS" means a debilitating and progressively chronic condition characterized by severe burning pain, pathological changes in bone and skin, excessive sweating, tissue swelling, and extreme sensitivity to touch.

145. Section 4 of P.L.2007, c.255 (C.26:2AA-4) is amended to read as follows:

C.26:2AA-4 Establishment of education and research program.

4. The commissioner shall establish a reflex sympathetic dystrophy syndrome education and research program in the Department of Health. The purpose of the program is to promote public awareness of the causes of RSDS, the value of early detection and the diagnosis of and possible treatments for the syndrome, and to promote research, through public and private sources, to accurately identify, diagnose, and treat RSDS.

146. Section 5 of P.L.2007, c.255 (C.26:2AA-5) is amended to read as follows:

C.26:2AA-5 Responsibilities of Department of Health.

5. The Department of Health shall:

a. establish a public education program through the department's website, to promote RSDS education, which will enable individuals to make informed decisions about their health, including, but not limited to the following elements:

- (1) the cause and nature of RSDS;
- (2) the risk factors that contribute to the manifestation of RSDS;
- (3) available treatment options, including risks and benefits of those options;
- (4) environmental safety and injury prevention;
- (5) rest and use of appropriate body mechanics;
- (6) the availability of RSDS diagnostic, treatment, and outreach services in the community; and
- (7) any other factors or elements that might mitigate the effects of RSDS;

b. notify local health departments, hospitals, clinics, and other health care providers about the availability of information concerning RSDS on the department's website;

c. within the limits of funds available to the department for this purpose, coordinate, promote, and offer professional education programs, through institutions of higher education, for health care providers and health-related community-based organizations, which may include, but are not limited to the following elements:

- (1) research findings;
- (2) the cause and nature of RSDS;
- (3) the risk factors, including, but not limited to, lifestyle, heredity, and drug interactions;
- (4) the diagnostic procedures and appropriate indications for their use;
- (5) medical and surgical treatment options, including experimental and established drug therapies and the risks and benefits of each option;
- (6) environmental safety and injury prevention; and
- (7) the availability of RSDS diagnosis and treatment and support services in the community; and

d. promote research, through both private and public funding sources, to accurately identify, diagnose, and treat RSDS.

147. Section 1 of P.L.2006, c.48 (C.26:2D-82.1) is amended to read as follows:

C.26:2D-82.1 Restrictions on use of tanning facilities by minors.

1. a. A tanning facility operator shall not permit a person who is under 14 years of age to use a tanning facility.

b. A tanning facility operator shall not permit a person who is at least 14 but less than 18 years of age to use a tanning facility without written authorization of the person's parent or legal guardian indicating that such parent or guardian has read and understood the safety standards and warnings required pursuant to section 3 of P.L.1989, c.234 (C.26:2D-83). An emancipated minor shall be exempt from the authorization requirement of this subsection upon legal proof documenting said emancipation.

c. The Commissioner of Health shall establish by regulation:

(1) the contents required in the authorization form;

(2) the method for maintaining a record of the forms; and

(3) the frequency with which the forms shall be authorized or reauthorized.

d. The penalties for violating the provisions of this section shall be as provided in section 7 of P.L.1989, c.234 (C.26:2D-87).

148. Section 3 of P.L.1989, c.234 (C.26:2D-83) is amended to read as follows:

C.26:2D-83 Minimum safety standards for tanning facilities established.

3. The Commissioner of Health, in consultation with the Commissioner of Environmental Protection, shall, by regulation, establish minimum safety standards for tanning facilities. The standards shall include, but not be limited to:

a. Establishment of a maximum safe time of exposure to radiation and a maximum safe temperature at which tanning devices may be operated;

b. A requirement that a patron at a tanning facility wear protective eye glasses when using tanning equipment and that a patron be supervised as to the length of time the patron uses tanning equipment at the facility;

c. A requirement that the facility operator post easily legible, permanent warning signs near the tanning equipment which state: "DANGER-ULTRAVIOLET RADIATION FOLLOW ALL INSTRUCTIONS";

d. A requirement that the facility have protective shielding for tanning equipment in the facility; and

e. A requirement that the facility operator post a sign in conspicuous view at or near the reception area which states: "PERSONS UNDER AGE 14 SHALL NOT BE PERMITTED TO USE THIS TANNING FACILITY. PERSONS BETWEEN 14 AND 18 YEARS OF AGE SHALL NOT BE PERMITTED TO USE THIS TANNING FACILITY WITHOUT WRITTEN AUTHORIZATION OF A PARENT OR LEGAL GUARDIAN."

149. Section 5 of P.L.1989, c.234 (C.26:2D-85) is amended to read as follows:

C.26:2D-85 "Non-Ionizing Radiation Fund."

5. There is established in the Department of Health a nonlapsing revolving fund known as the "Non-Ionizing Radiation Fund." The fund shall be credited with all fees collected pursuant to this act. Interest on monies in the fund shall be credited to the fund, and all monies in the fund are appropriated for the purposes of this act.

150. Section 6 of P.L.1989, c.234 (C.26:2D-86) is amended to read as follows:

C.26:2D-86 Tanning facility; annual registration, fee.

6. a. A tanning facility shall register annually with the Department of Health on forms provided by the department and shall pay to the department an annual registration fee.

b. The Department of Health shall establish a registration fee schedule, by regulation, to cover the costs of implementing the provisions of this act, including the costs incurred by local boards of health pursuant to section 4 of this act.

151. Section 7 of P.L.1989, c.234 (C.26:2D-87) is amended to read as follows:

C.26:2D-87 Violations, penalties.

7. A person who violates the provisions of this act is subject to a penalty of \$100 for the first offense and \$200 for each subsequent offense. The penalty shall be sued for and collected in a court of competent jurisdiction in a summary proceeding in accordance with the "Penalty Enforcement Law of 1999," P.L.1999, c.274 (C.2A:58-10 et seq.).

A penalty recovered under the provisions of this act shall be recovered by and in the name of the Commissioner of Health or by and in the name of the local board of health. When the plaintiff is the Commissioner of Health

the penalty recovered shall be paid by the commissioner into the treasury of the State. When the plaintiff is a local board of health, the penalty recovered shall be paid by the local board of health into the treasury of the municipality where the violation occurred.

152. Section 8 of P.L.1989, c.234 (C.26:2D-88) is amended to read as follows:

C.26:2D-88 Rules, regulations.

8. In accordance with the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), the Commissioner of Health, in consultation with the Commissioner of Environmental Protection, shall promulgate rules and regulations necessary to carry out the purposes of this act.

153. Section 2 of P.L.1971, c.136 (C.26:2H-2) is amended to read as follows:

C.26:2H-2 Definitions.

2. The following words or phrases, as used in this act, shall have the following meanings, unless the context otherwise requires:

a. "Health care facility" means the facility or institution whether public or private, engaged principally in providing services for health maintenance organizations, diagnosis, or treatment of human disease, pain, injury, deformity, or physical condition, including, but not limited to, a general hospital, special hospital, mental hospital, public health center, diagnostic center, treatment center, rehabilitation center, extended care facility, skilled nursing home, nursing home, intermediate care facility, tuberculosis hospital, chronic disease hospital, maternity hospital, outpatient clinic, dispensary, home health care agency, residential health care facility, and bioanalytical laboratory (except as specifically excluded hereunder) or central services facility serving one or more such institutions but excluding institutions that provide healing solely by prayer and excluding such bioanalytical laboratories as are independently owned and operated, and are not owned, operated, managed, or controlled, in whole or in part, directly or indirectly by any one or more health care facilities, and the predominant source of business of which is not by contract with health care facilities within the State of New Jersey and which solicit or accept specimens and operate predominantly in interstate commerce.

b. "Health care service" means the preadmission, outpatient, inpatient, and postdischarge care provided in or by a health care facility, and such other items or services as are necessary for such care, which are provided

by or under the supervision of a physician for the purpose of health maintenance organizations, diagnosis, or treatment of human disease, pain, injury, disability, deformity, or physical condition, including, but not limited to, nursing service, home care nursing, and other paramedical service, ambulance service, service provided by an intern, resident in training or physician whose compensation is provided through agreement with a health care facility, laboratory service, medical social service, drugs, biologicals, supplies, appliances, equipment, bed and board, but excluding services provided by a physician in his private practice, except as provided in sections 7 and 12 of P.L.1971, c.136 (C.26:2H-7 and 26:2H-12), or by practitioners of healing solely by prayer, and services provided by first aid, rescue and ambulance squads as defined in the "New Jersey Highway Safety Act of 1971," P.L.1971, c.351 (C.27:5F-1 et seq.).

c. "Construction" means the erection, building, or substantial acquisition, alteration, reconstruction, improvement, renovation, extension, or modification of a health care facility, including its equipment, the inspection and supervision thereof; and the studies, surveys, designs, plans, working drawings, specifications, procedures, and other actions necessary thereto.

d. "Board" means the Health Care Administration Board established pursuant to this act.

e. (Deleted by amendment, P.L.1998, c.43).

f. "Government agency" means a department, board, bureau, division, office, agency, public benefit, or other corporation, or any other unit, however described, of the State or political subdivision thereof.

g. (Deleted by amendment, P.L.1991, c.187).

h. (Deleted by amendment, P.L.1991, c.187).

i. "Department" means the Department of Health.

j. "Commissioner" means the Commissioner of Health.

k. "Preliminary cost base" means that proportion of a hospital's current cost which may reasonably be required to be reimbursed to a properly utilized hospital for the efficient and effective delivery of appropriate and necessary health care services of high quality required by such hospital's mix of patients. The preliminary cost base initially may include costs identified by the commissioner and approved or adjusted by the commission as being in excess of that proportion of a hospital's current costs identified above, which excess costs shall be eliminated in a timely and reasonable manner prior to certification of the revenue base. The preliminary cost base shall be established in accordance with regulations proposed by the commissioner and approved by the board.

l. (Deleted by amendment, P.L.1992, c.160).

m. "Provider of health care" means an individual (1) who is a direct provider of health care service in that the individual's primary activity is the provision of health care services to individuals or the administration of health care facilities in which such care is provided and, when required by State law, the individual has received professional training in the provision of such services or in such administration and is licensed or certified for such provision or administration; or (2) who is an indirect provider of health care in that the individual (a) holds a fiduciary position with, or has a fiduciary interest in, any entity described in subparagraph b(ii) or subparagraph b(iv); provided, however, that a member of the governing body of a county or any elected official shall not be deemed to be a provider of health care unless he is a member of the board of trustees of a health care facility or a member of a board, committee or body with authority similar to that of a board of trustees, or unless he participates in the direct administration of a health care facility; or (b) received, either directly or through his spouse, more than one-tenth of his gross annual income for any one or more of the following:

(i) Fees or other compensation for research into or instruction in the provision of health care services;

(ii) Entities engaged in the provision of health care services or in research or instruction in the provision of health care services;

(iii) Producing or supplying drugs or other articles for individuals or entities for use in the provision of or in research into or instruction in the provision of health care services;

(iv) Entities engaged in producing drugs or such other articles.

n. "Private long-term health care facility" means a nursing home, skilled nursing home, or intermediate care facility presently in operation and licensed as such prior to the adoption of the 1967 Life Safety Code by the Department of Health in 1972 and which has a maximum 50-bed capacity and which does not accommodate Medicare or Medicaid patients.

o. (Deleted by amendment, P.L.1998, c.43).

p. "State Health Planning Board" means the board established pursuant to section 33 of P.L.1991, c.187 (C.26:2H-5.7) to conduct certificate of need review activities.

154. Section 1 of P.L.2000, c.62 (C.26:2H-5b) is amended to read as follows:

C.26:2H-5b Routine monitoring of pain as fifth vital sign required.

1. a. The Commissioner of Health shall prescribe, by regulation, requirements to be adopted by health care facilities licensed pursuant to

P.L.1971, c.136 (C.26:2H-1 et seq.) for the routine monitoring of pain as a fifth vital sign in patients, in addition to blood pressure, pulse, respiration, and temperature.

For the purpose of this subsection, the commissioner shall require health care facilities to:

- (1) routinely inquire whether a patient is in pain;
- (2) maintain policies and procedures as prescribed by the commissioner for asking patients to rate their degree of pain for a specified period of time and to record their responses; and
- (3) routinely record levels of pain intensity on patient charts.

b. The requirements to be adopted pursuant to subsection a. of this section shall take effect no later than the 180th day after the effective date of this act.

155. Section 2 of P.L.2000, c.62 (C.26:2H-5c) is amended to read as follows:

C.26:2H-5c Rules, regulations.

2. The Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt rules and regulations to effectuate the purposes of this act, for which purpose the commissioner shall consult, at a minimum, with: the State Board of Medical Examiners, the New Jersey Board of Nursing, the Board of Pharmacy, the New Jersey Hospital Association, the New Jersey Association of Health Care Facilities, the Medical Society of New Jersey, the New Jersey Association of Osteopathic Physicians and Surgeons, the New Jersey State Nurses Association, the Home Health Assembly of New Jersey, and the New Jersey Hospice and Palliative Care Organization.

156. Section 1 of P.L.2002, c.81 (C.26:2H-5d) is amended to read as follows:

C.26:2H-5d Provision of information by home health agency to patient.

1. a. The Commissioner of Health, in consultation with the Director of the Division of Consumer Affairs in the Department of Law and Public Safety, shall require that, no later than the 180th day after the date of enactment of this act, each home health agency licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) shall provide the following information to each patient receiving home-based services from that agency, or to a person designated by the patient:

(1) the name and certification or licensure title, as applicable, of the homemaker-home health aide or other health care professional whose practice is regulated pursuant to Title 45 of the Revised Statutes, to be displayed on an identification tag as required for homemaker-home health aides by regulation of the New Jersey Board of Nursing, or as otherwise to be prescribed by regulation of the commissioner for other health care professionals, that the homemaker-home health aide or other health care professional shall wear at all times while examining, observing, or caring for the patient; and

(2) a copy of the most current edition of the consumer guide to homemaker-home health aides published by the New Jersey Board of Nursing.

b. The consumer guide required pursuant to subsection a. of this section shall be provided:

(1) in advance of the provision of services to the patient, whenever possible; and

(2) otherwise upon the homemaker-home health aide's initial visit to the patient's home.

c. Beginning on the first day of the 13th month after the date of enactment of this act, the identification tag required pursuant to subsection a. of this section shall include a photograph of the homemaker-home health aide or other health care professional.

d. The commissioner, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt rules and regulations to effectuate the purposes of this section.

157. Section 1 of P.L.2004, c.90 (C.26:2H-5e) is amended to read as follows:

C.26:2H-5e Adoption of policies for notifying family members of patient deaths by health care facilities.

1. A general or special hospital, nursing home or assisted living residence licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) shall, commencing no later than the 180th day after the effective date of this act and as prescribed by regulation of the Commissioner of Health, adopt and maintain written policies and procedures to delineate the responsibilities of its staff for prompt notification of a family member, guardian, or other designated person about a patient's death and confirmation and written documentation of that notification.

158. Section 3 of P.L.2005, c.21 (C.26:2H-5h) is amended to read as follows:

C.26:2H-5h Rules, regulations.

3. The Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt rules and regulations to effectuate the purposes of this act, in consultation with the Quality Improvement Advisory Committee established by the commissioner. The regulations shall include, but not be limited to, procedures for standardizing the reporting of information by general hospitals and nursing homes that is required pursuant to subsection d. of section 2 of this act.

159. Section 2 of P.L.2008, c.58 (C.26:2H-5.1a) is amended to read as follows:

C.26:2H-5.1a Regulations prescribed by commissioner relative to appointment of monitor.

2. a. The Commissioner of Health shall prescribe, by regulation: (1) specific indicators by which a general hospital may be evaluated for financial soundness, and the thresholds at which it may be considered to be in financial distress or at risk of being in financial distress; and (2) the progressive levels of monitoring and department participation in the development and oversight of corrective measures to resolve a general hospital's financial or potential financial difficulties, including the various levels of involvement by an appointed monitor. The indicators and progressive levels of monitoring and intervention shall be guided by the indicators and levels of monitoring and intervention identified in the final report of the New Jersey Commission on Rationalizing Health Care Resources, issued on January 24, 2008.

b. The thresholds of specified financial indicators and corresponding Department of Health involvement that may be triggered by them shall include, but are not limited to, measures relating to:

- (1) days cash-on-hand;
- (2) cushion ratio;
- (3) days in accounts receivable;
- (4) average payment period;
- (5) total margin;
- (6) earnings before depreciation; and
- (7) any other factor which the commissioner deems appropriate, including failure to provide required or requested financial information.

c. If the commissioner determines that a hospital is in financial distress or at risk of being in financial distress after considering the specified financial indicators set forth in subsection b. of this section, then the commissioner may appoint, in consultation with the hospital, a monitor to pre-

vent further financial deterioration. Payment for the monitor shall be determined through a contingency contract established between the hospital and the monitor. The contract shall be subject to approval by the department with regard to the monitor's responsibilities. In no case shall a hospital bear financial liability if no savings result from measures undertaken pursuant to the contract.

The appointed monitor shall have demonstrated expertise in hospital administration, management, or operations. A monitor: (1) shall be authorized to attend all hospital board meetings, executive committee meetings, finance committee meetings, steering committee meetings, turnaround committee meetings, or any other meetings concerning the hospital's fiscal matters; (2) may be authorized to have voting and veto powers over actions taken in the above mentioned meetings; (3) shall report to the commissioner and the full hospital board of trustees in a manner prescribed by the commissioner; and (4) shall serve for such period of time as may be determined by the commissioner in consultation with the hospital.

The commissioner shall maintain continuing oversight of the actions and recommendations of the monitor to ensure that the public interest is protected.

160. Section 3 of P.L.2008, c.58 (C.26:2H-5.1b) is amended to read as follows:

C.26:2H-5.1b Conditions for licensure of general hospital.

3. As a condition of licensure under P.L.1971, c.136 (C.26:2H-1 et al.), a general hospital shall:

a. provide monthly unaudited financial information and annual audited financial statements to the Department of Health, and such other financial information as the department may request; and

b. permit the Commissioner of Health, or a monitor appointed by the commissioner, as applicable, to oversee its financial operations, and, if the commissioner determines that the hospital is at risk of being in financial distress or is in financial distress based on criteria specified by regulation, participate in the development and implementation of a corrective plan to resolve the hospital's financial difficulties, pursuant to section 2 of P.L.2008, c.58 (C.26:2H-5.1a).

161. Section 1 of P.L.2009, c.263 (C.26:2H-5.1c) is amended to read as follows:

C.26:2H-5.1c Ambulatory care facility to use common billing form.

1. An ambulatory care facility licensed to provide surgical services pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) shall use a common billing form, designated by the Commissioner of Health, for each patient when billing for health care services. The information provided on the billing form shall, to the extent applicable, be the same as that required of hospitals.

162. Section 3 of P.L.2009, c.263 (C.26:2H-5.1e) is amended to read as follows:

C.26:2H-5.1e Quarterly report from ambulatory care facility; required information.

3. a. An ambulatory care facility licensed to provide surgical services pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) shall be required to report quarterly to the Department of Health, in a form and manner prescribed by the commissioner:

(1) process quality indicators of infection control as selected by the commissioner in consultation with the Quality Improvement Advisory Committee within the department; and

(2) beginning 30 days after the adoption of regulations pursuant to this act, data on infection rates for the major site categories that define facility-associated infection locations, multiple infections, and device-related and non-device related infections, as selected by the commissioner in consultation with the Quality Improvement Advisory Committee within the department.

b. The information reported pursuant to this section shall be transmitted in such a manner as to not include identifying information about patients.

c. The commissioner shall promptly advise an ambulatory care facility in the event that the commissioner determines, based on information reported by the facility, that a change in facility practices or policy is necessary to improve performance in the prevention of facility-associated infection and quality of care provided at the facility.

d. The commissioner shall make available to members of the public, on the official Internet website of the department, the information reported pursuant to this section, in such a format as the commissioner deems appropriate to enable comparison among ambulatory care facilities with respect to the information.

e. In order to effectuate the purposes of this section, the commissioner, in consultation with the Quality Improvement Advisory Committee in the department, shall, by regulation: establish standard methods for identifying and reporting facility-associated infections; identify the major site categories for which infections shall be reported, taking into account

the categories most likely to improve the delivery and outcome of health care in the State; and specify the methodology for presenting the data to the public, including procedures to adjust for differences in case mix and severity of infections among facilities.

163. Section 4 of P.L.2009, c.263 (C.26:2H-5.1f) is amended to read as follows:

C.26:2H-5.1f Rules, regulations.

4. The Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt rules and regulations to effectuate the purposes of this act.

164. Section 33 of P.L.1991, c.187 (C.26:2H-5.7) is amended to read as follows:

C.26:2H-5.7 State Health Planning Board established.

33. There is established in the Department of Health a State Health Planning Board. The members of the board shall include: the Commissioners of Health, Children and Families, and Human Services, or their designees, who shall serve as ex officio, nonvoting members; the chairmen of the Health Care Administration Board and the Public Health Council, or their designees, who shall serve as ex officio members; and nine public members appointed by the Governor with the advice and consent of the Senate, five of whom are consumers of health care services who are neither providers of health care services or persons with a fiduciary interest in a health care service.

Of the additional public members first appointed pursuant to P.L.1998, c.43, two shall serve for a term of two years and two shall serve for a term of three years. Following the expiration of the original terms, the public members shall serve for a term of four years and are eligible for reappointment. Public members serving on the board on the effective date of P.L.1998, c.43 shall continue to serve for the term of their appointment. Any vacancy shall be filled in the same manner as the original appointment, for the unexpired term. Public members shall continue to serve until their successors are appointed. The public members shall serve without compensation but may be reimbursed for reasonable expenses incurred in the performance of their duties, within the limits of funds available to the board.

a. A member or employee of the State Health Planning Board shall not, by reason of his performance of any duty, function, or activity required of, or authorized to be undertaken by the board, be held civilly or criminally liable if that person acted within the scope of his duty, function, or

activity as a member or employee of the board, without gross negligence or malice toward any person affected thereby.

b. A member of the State Health Planning Board shall not vote on any matter before the board concerning an individual or entity with which the member has, or within the last 12 months has had, any substantial ownership, employment, medical staff, fiduciary, contractual, creditor, or consultative relationship. A member who has or has had such a relationship with an individual or entity involved in any matter before the board shall make a written disclosure of the relationship before any action is taken by the board with respect to the matter and shall make the relationship public in any meeting in which action on the matter is to be taken.

165. Section 34 of P.L.1991, c.187 (C.26:2H-5.8) is amended to read as follows:

C.26:2H-5.8 Review of application for certificate of need.

34. a. (Deleted by amendment, P.L.1998, c.43).

b. The State Health Planning Board shall review applications for certificates of need and make recommendations to the Commissioner of Health.

c. In the case of an application for a certificate of need to transfer ownership of an existing general acute care hospital or to close or eliminate a health care facility or service that is subject to review by the State Health Planning Board, the State Health Planning Board shall hold at least one public hearing in the service area of the health care facility or service; except that, in the event the Attorney General or the Department of Health is required by State law to hold a public hearing on the transfer of ownership of the hospital, the State Health Planning Board shall not be required to hold a public hearing on the application for a certificate of need to transfer ownership of the hospital. The public hearing shall be held no later than 30 days after an application is deemed complete by the Commissioner of Health. Public notice of the hearing shall be provided at least two weeks in advance of the date of the hearing.

Notwithstanding the provisions of this subsection to the contrary, in the event that the commissioner determines that a proposed closure or elimination of a health care facility or service should be considered on an expedited basis in order to preserve the quality of health care provided to the community, the commissioner may reduce the period of time required for public notice of the hearing.

166. Section 2 of P.L.1999, c.311 (C.26:2H-5.11) is amended to read as follows:

C.26:2H-5.11 Definitions relative to use of needles, sharp devices in health care facilities.

2. As used in this act:

"Commissioner" means the Commissioner of Health.

"Department" means the Department of Health.

"Needle stick injury" means the parenteral introduction into the body of a health care worker of blood or other potentially infectious material by a needle or other sharp device during the worker's performance of health care duties in a health care facility.

167. Section 6 of P.L.2007, c.236 (C.26:2H-5.22) is amended to read as follows:

C.26:2H-5.22 Violations, penalties.

6. A covered health care facility licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et al.) that is in violation of the provisions of this act shall be subject to such penalties as the Commissioner of Health may determine pursuant to sections 13 and 14 of P.L.1971, c.136 (C.26:2H-13 and 26:2H-14).

168. Section 7 of P.L.2007, c.236 (C.26:2H-5.23) is amended to read as follows:

C.26:2H-5.23 Rules, regulations.

7. The Commissioners of Health and Human Services shall adopt rules and regulations pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.) to carry out the purposes of this act.

169. Section 7 of P.L.1971, c.136 (C.26:2H-7) is amended to read as follows:

C.26:2H-7 Certificate of need required for construction, expansion of health care facility.

7. No health care facility shall be constructed or expanded, and no new health care service shall be instituted after the effective date of P.L.1971, c.136 (C.26:2H-1 et seq.) except upon application for and receipt of a certificate of need as provided by P.L.1971, c.136 (C.26:2H-1 et seq.). No agency of the State or of any county or municipal government shall approve any grant of funds for, or issue any license to, a health care facility which is constructed or expanded, or which institutes a new health care service, in violation of the provisions of P.L.1971, c.136 (C.26:2H-1 et seq.).

Except as provided in section 19 of P.L.1992, c.160 (C.26:2H-7a) and section 16 of P.L.1998, c.43 (C.26:2H-7c), the provisions of this section shall apply to:

a. The initiation of any health care service as provided in section 2 of P.L.1971, c.136 (C.26:2H-2);

b. The initiation by any person of a health care service which is the subject of a health planning regulation adopted by the Department of Health;

c. The purchase by any person of major moveable equipment whose total cost is over \$2 million;

d. The expenditure by a licensed health care facility of over \$2 million for construction of a new health care facility; and

e. The construction of a facility by any person, whose total project cost exceeds \$2 million, if the facility-type is the subject of a health planning regulation adopted by the Department of Health.

The commissioner may periodically increase the monetary thresholds established in this section, by regulation, to reflect inflationary increases in the costs of health care equipment or construction.

For the purposes of this section, "health care service" shall include any service which is the subject of a health planning regulation adopted by the Department of Health, and "person" shall include a corporation, company, association, society, firm, partnership, and joint stock company, as well as an individual.

A physician who initiates a health care service which is the subject of a health planning regulation or purchases major moveable equipment pursuant to subsection b. or c. of this section, may apply to the commissioner for a waiver of the certificate of need requirement if: the equipment or health care service is such an essential, fundamental, and integral component of the physician's practice specialty, that the physician would be unable to practice his specialty according to the acceptable medical standards of that specialty without the health care service or equipment; the physician bills at least 75% of his total amount of charges in the practice specialty which uses the health care service or equipment; and the health care service or equipment is not otherwise available and accessible to patients, pursuant to standards established by the commissioner, by regulation. The commissioner shall make a determination about whether to grant or deny the waiver, within 120 days from the date the request for the waiver is received by the commissioner and shall so notify the physician who requested the waiver. If the request is denied, the commissioner shall include in that notification the reason for the denial. If the request is denied, the initiation of a health care service or the purchase of major moveable equipment shall be subject to the certificate of need requirements pursuant to this section.

A health maintenance organization which furnishes at least basic comprehensive care health services on a prepaid basis to enrollees either through providers employed by the health maintenance organization or through a medical group or groups which contract directly with the health maintenance organization, which initiates a health care service, or constructs a health care facility pursuant to subsection a., b., d., or e. of this section, may apply to the commissioner for a waiver of the certificate of need requirement if: the initiation of the health care service or the construction is in the best interests of State health planning; and the health maintenance organization is in compliance with the provisions of P.L.1973, c.337 (C.26:2J-1 et seq.) and complies with the provisions of subsection d. of section 3 of P.L.1973, c.337 (C.26:2J-3) regarding notification to the commissioner. The commissioner shall make a determination about whether to grant or deny the waiver within 45 days from the date the request for the waiver is received by the commissioner and shall so notify the health maintenance organization. If the request for a waiver is denied on the basis that the request would not be in the best interests of State health planning, the commissioner shall state in that notification the reason why the request would not be in the best interests of State health planning. If the request for a waiver is denied, the health maintenance organization's initiation of a health care service or construction project shall be subject to the certificate of need requirements pursuant to this section.

The requirement to obtain a certificate of need for major moveable equipment pursuant to subsection c. of this section shall not apply if a contract to purchase that equipment was entered into prior to July 1, 1991.

170. Section 16 of P.L.1998, c.43 (C.26:2H-7c) is amended to read as follows:

C.26:2H-7c Exemptions from certificate of need requirement.

16. a. Notwithstanding the provisions of section 7 of P.L.1971, c.136 (C.26:2H-7) to the contrary, 20 months after the effective date of P.L.1998, c.43 the following shall be exempt from the certificate of need requirement:

Extracorporeal shock wave lithotripter;

Hyperbaric chamber;

Positron emission tomography;

Residential drug and alcohol services;

Ambulatory surgical facilities;

Basic obstetric and pediatric services and birth centers, including additions of basic obstetric and pediatric beds in hospitals; and

Linear accelerator, including Cobalt 60 unit.

b. Notwithstanding the provisions of subsection a. of this section to the contrary, if the Commissioner of Health determines that Department of Health licensing standards for a health care service or facility listed in subsection a. of this section have been adopted by regulation of the department pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), the commissioner may exempt the health care service or facility from the provisions of section 7 of P.L.1971, c.136 (C.26:2H-7) prior to the 20-month period established in subsection a. of this section.

The commissioner shall publish notice of any exemptions established pursuant to this subsection in the New Jersey Register and provide for 45 days' public notice prior to the effective date of the exemption.

c. In the case of any health care service or facility that is not exempted from the provisions of section 7 of P.L.1971, c.136 (C.26:2H-7) pursuant to this section or section 19 of P.L.1992, c.160 (C.26:2H-7a) and is not subject to expedited review, the commissioner shall publish a call schedule for the initiation of the services or facilities within 90 days of the date of enactment of this act. In the event that the commissioner determines that there is insufficient need to support the initiation of the service or facility, the commissioner is authorized to cancel the call. The commissioner shall provide public notice of the cancellation at least 45 days prior to the scheduled call date.

171. Section 18 of P.L.1998, c.43 (C.26:2H-7d) is amended to read as follows:

C.26:2H-7d Certain health care equipment exempt.

18. Notwithstanding the provisions of P.L.1971, c.136 (C.26:2H-1 et seq.) to the contrary, health care equipment which involves new technology that is not identified in N.J.A.C.8:33 et seq., shall not be subject to certificate of need requirements and may be initiated in the State in accordance with the requirements of this section.

a. The new technology shall be directly related to a health care service for which the provider is already licensed and has obtained a certificate of need, when required.

b. The provider shall notify the Commissioner of Health about the intent to initiate the new technology at least 60 days prior to the date the provider will begin use of the technology.

c. The new technology shall have pre-market approval from the federal Food and Drug Administration.

d. The provider shall use the new technology in accordance with guidelines approved by The Joint Commission until such time as the Department of Health has adopted licensing standards for the new technology. The provider shall be required to comply with the department's licensing standards for the new technology upon adoption of the standards.

e. The provider shall agree to submit to the department appropriate patient information and other data concerning use of the new technology to assist the department in establishing licensing standards. The provider shall submit the information and other data on a quarterly basis until such time as licensing standards are adopted for the new technology.

f. The commissioner may suspend a provider's use of the new technology if he determines that the provider is not in compliance with the requirements of this section.

172. Section 3 of P.L.1996, c.102 (C.26:2H-7.6) is amended to read as follows:

C.26:2H-7.6 Requirements for subacute care unit.

3. a. A hospital which proposes to utilize a portion of its licensed bed capacity for the purpose of establishing a subacute care unit shall be subject to the following requirements:

(1) the subacute care unit's beds shall be licensed by the Department of Health as long-term care beds and shall meet all applicable State licensing and federal certification requirements, including the physical requirements for skilled nursing beds under the federal Medicare program established pursuant to Pub.L.89-97 (42 U.S.C.s.1395 et seq.), with reasonable waiver provisions as determined by the commissioner or the federal Centers for Medicare & Medicaid Services, as appropriate;

(2) the maximum length of stay in the unit shall not exceed eight days;

(3) the unit shall be certified to participate in the Medicare program as a skilled nursing facility;

(4) the unit shall be comprised of not more than 7% of the hospital's licensed medical-surgical bed capacity or 12 beds, whichever is greater;

(5) the hospital's licensed medical-surgical bed capacity shall be reduced, by the commissioner, by the number of beds used to establish a subacute care unit under the provisions of this section. Long-term care beds in a hospital's subacute care unit shall not be transferred to, or combined with, a subacute care unit in another hospital. Bed limitations for a hospital shall include both conversions of existing acute care beds and any

purchases or other acquisitions or rentals of beds to be used by a hospital for the provision of subacute care under this act;

(6) (Deleted by amendment, P.L.1998, c.43).

(7) the hospital shall be subject to the fee for the filing of an application for a license for long-term care beds and any renewal thereof as established by the Department of Health pursuant to section 12 of P.L.1971, c.136 (C.26:2H-12).

b. Subacute care shall not be covered by the Medicaid program established pursuant to P.L.1968, c.413 (C.30:4D-1 et seq.). The long-term care beds in a subacute care unit shall not be included in long-term care bed inventories for certificate of need review purposes.

173. Section 2 of P.L.2000, c.143 (C.26:2H-7.11) is amended to read as follows:

C.26:2H-7.11 Additional requirements for nonprofit hospitals relative to acquisitions; exemptions; procedures.

2. In addition to the requirements of P.L.1971, c.136 (C.26:2H-1 et seq.) concerning certificate of need and licensure requirements, a nonprofit hospital licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) shall satisfy the requirements of this act before applying to the Superior Court of New Jersey for approval prior to entering into a transaction that results in the acquisition of the hospital as defined in this act. The proposed acquisition shall be subject to the prior review of the Attorney General, in consultation with the Commissioner of Health, pursuant to the provisions of this section. The Attorney General shall review the application in furtherance of his common law responsibilities as protector, supervisor, and enforcer of charitable trusts and charitable corporations.

For the purposes of sections 2 and 3 of this act, "acquisition" means the purchase, lease, exchange, conversion, restructuring, merger, division, consolidation, transfer of control, or other disposition of a substantial amount of assets or operations, whether through a single transaction or series of transactions, with one or more persons or entities.

This act shall not apply to a nonprofit hospital if the proposed acquisition is in the usual and regular course of its activities and the Attorney General has given the nonprofit hospital a written waiver as to the proposed acquisition. As used in this section, a proposed acquisition is not in the usual and regular course of a nonprofit hospital's activities if it effects a fundamental corporate change that involves transfer of ownership or control of charitable assets or a change of the nonprofit hospital's mission or purpose.

a. (1) Within five working days of submitting an application pursuant to this section, the nonprofit hospital shall publish a notice of the proposed acquisition, in a form approved by the Attorney General, in a newspaper of general circulation in the service area of the hospital once per week for three weeks. The notice shall state the names of the parties to the agreement, describe the contents of the application to the Attorney General, and state the date by which a person may submit written comments about the application to the Attorney General.

(2) Within 30 days after receipt of an initial application, the Attorney General shall advise the applicant in writing whether the application is complete, and, if not, shall specify what additional information is required.

(3) The Attorney General shall, upon receipt of the information requested, notify the applicant in writing of the date of completion of the application.

b. Within 90 days of the date of completion of the application, the Attorney General, in consultation with the Commissioner of Health, shall review the application and support the proposed acquisition, with or without any specific modifications, or, if the Attorney General finds that it is not in the public interest, oppose the proposed acquisition. The Attorney General or commissioner may, for good cause, extend the time for review of an application submitted pursuant to this section.

The proposed acquisition shall not be considered to be in the public interest unless the Attorney General determines that appropriate steps have been taken to safeguard the value of the charitable assets of the hospital and to ensure that any proceeds from the proposed acquisition are irrevocably dedicated for appropriate charitable health care purposes; and the Commissioner of Health determines that the proposed transaction is not likely to result in the deterioration of the quality, availability or accessibility of health care services in the affected communities.

c. In determining whether the acquisition meets the criteria of subsection b. of this section, the Attorney General shall consider:

(1) Whether the acquisition is permitted under the "New Jersey Non-profit Corporation Act," Title 15A of the New Jersey Statutes, and other applicable State statutes governing nonprofit entities, trusts, or charities;

(2) Whether the nonprofit hospital exercised due diligence in deciding to effectuate the acquisition, selecting the other party to the acquisition and negotiating the terms and conditions of the acquisition;

(3) The procedures used by the nonprofit hospital in making its decision, including whether appropriate expert assistance was used;

(4) Whether conflict of interest was disclosed, including, but not limited to, conflicts of interest related to board members of, executives of and experts retained by the nonprofit hospital, purchaser, or other parties to the acquisition;

(5) Whether any management contract under the acquisition is for reasonable fair value;

(6) Whether the acquisition proceeds will be used for appropriate charitable health care purposes consistent with the nonprofit hospital's original purpose or for the support and promotion of health care and whether the proceeds will be controlled as charitable funds independently of the purchaser or parties to the acquisition; and

(7) Any other criteria the Attorney General establishes by regulation to determine whether the proposed acquisition is in the public interest.

d. In determining whether an acquisition by any person or entity other than a corporation organized in this State for charitable purposes under Title 15A of the New Jersey Statutes meets the criteria of subsection b. of this section, the Attorney General shall consider, in addition to the criteria set forth in subsection c., the following criteria:

(1) Whether the nonprofit hospital will receive full and fair market value for its assets. The Attorney General may employ, at the nonprofit hospital's expense, reasonably necessary expert assistance in making this determination;

(2) Whether charitable funds are placed at unreasonable risk, if the acquisition is financed in part by the nonprofit hospital;

(3) Whether a right of first refusal has been retained to repurchase the assets by a successor nonprofit corporation or foundation if, following the acquisition, the hospital is subsequently sold to, acquired by or merged with another entity;

(4) Whether the nonprofit hospital established appropriate criteria in deciding to pursue a conversion in relation to carrying out its mission and purposes;

(5) Whether the nonprofit hospital considered the proposed conversion as the only alternative or as the best alternative in carrying out its mission and purposes;

(6) Whether the nonprofit hospital exercised due care in assigning a value to the existing hospital and its charitable assets in proceeding to negotiate the proposed conversion;

(7) Whether officers, directors, board members, or senior management will receive future contracts in existing, new, or affiliated hospitals or foundations; and

(8) Any other criteria the Attorney General establishes by regulation to determine whether a proposed acquisition by any person or entity other than a corporation organized in this State for charitable purposes under Title 15A of the New Jersey Statutes is in the public interest.

e. In the Attorney General's review of the proposed acquisition, the Attorney General may assess the entity proposing to acquire the nonprofit hospital for reasonable costs related to the review, as determined by the Attorney General to be necessary. Reasonable costs may include expert review of the acquisition and a process for educating the public about the acquisition and obtaining public input.

f. The Attorney General and the Commissioner of Health shall, during the course of the review pursuant to this section, hold at least one public hearing in which any person may file written comments and exhibits or appear and make a statement. The public hearing may, if the Attorney General and commissioner so agree, be conducted jointly. The commissioner may satisfy the requirements of this subsection by conducting a public hearing in conjunction with the certificate of need review process pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.). The Attorney General or the commissioner may subpoena additional information or witnesses, including, but not limited to, information about any transaction that is collateral to the proposed acquisition and any related documents, require and administer oaths, require sworn statements, take depositions and use related discovery procedures for purposes of the hearing and at any time prior to completing the review of the proposed acquisition.

The Attorney General shall make the information received pursuant to this section, and the Department of Health shall make any information in its records relating to the proposed acquisition, available for inspection at no cost to the public.

The public hearing shall be held no later than 60 days after the date that an application from a nonprofit hospital is deemed complete by the Attorney General. Public notice of the hearing shall be provided at least two weeks in advance of the date of the hearing.

g. In a proposed acquisition subject to review under subsection d. of this section, the Attorney General, after consultation with the principal parties to the transaction, shall make a determination as to the amount of assets which the nonprofit hospital shall set aside as a charitable obligation, based on the full and fair market value of the hospital at the time of the proposed acquisition as determined by the Attorney General.

h. Upon execution of a proposed acquisition subject to review under subsection d. of this section, the amount determined by the Attorney Gen-

eral to be set aside as a charitable obligation shall be placed in a nonprofit charitable trust or one or more existing or newly established tax-exempt charitable organizations operating pursuant to 26 U.S.C. s. 501(c)(3). The charitable mission and grant-making functions of any charitable entity that receives assets pursuant to subsection g. of this section shall be dedicated to serving the health care needs of the community historically served by the predecessor nonprofit hospital. Any charitable entity that receives assets pursuant to subsection g. of this section, the directors, officers, and trustees of any such charitable entity, and the assets of any such charitable entity, including any stock involved in the acquisition, shall be independent of any influence or control by the acquiring entity, its directors, officers, trustees, subsidiaries, or affiliates.

(1) The governance of the charitable trust that results from the acquisition or of any newly established charitable organization that is to receive charitable assets pursuant to subsection g. of this section shall be subject to review and approval by the Attorney General. The governance of any existing charitable organization that is to receive charitable assets pursuant to subsection g. of this section shall be subject to review by the Attorney General. The governance of the charitable trust or the charitable organization shall be broadly based, and neither the trust or organization nor any officer, director, or senior manager of the trust or organization shall be affiliated with the acquiring entity and no officer, director, or senior manager of the trust or organization shall be a full-time employee of State government. No officer, director, or senior manager of the trust or organization shall have been a director, officer, agent, trustee, or employee of the nonprofit hospital during the three years immediately preceding the effective date of the acquisition, unless that person can demonstrate to the satisfaction of the Attorney General that the person's assumption of the position of officer, director, or senior manager of the trust or organization would not constitute a breach of fiduciary duty or other conflict of interest.

(2) The governing body of the charitable trust or organization shall establish or demonstrate that it has in place, as the case may be, a mechanism to avoid conflicts of interest and to prohibit grants that benefit the board of directors and management of the acquiring entity or its affiliates or subsidiaries.

(3) The governing body of the charitable trust or organization shall provide the Attorney General with an annual report which shall include an audited financial statement and a detailed description of its grant-making and other charitable activities related to its use of the charitable assets received pursuant to this act. The annual report shall be made available to the

public at both the Attorney General's office and the office of the charitable trust or organization. Nothing contained in this act shall affect the obligations of an entity possessing endowment funds under P.L.1975, c.26 (C.15:18-15 et seq.).

i. (1) The entity acquiring the nonprofit hospital, if determined to be necessary by the Commissioner of Health, shall provide funds, in an amount determined by the Commissioner of Health, for the hiring by the Department of Health of an independent health care access monitor to monitor and report quarterly to the Department of Health on community health care access by the entity, including levels of uncompensated care for indigent persons provided by the entity. The funding shall be provided for three years after the date of the acquisition. The entity acquiring the hospital shall provide the monitor with appropriate access to the entity's records in order to enable the monitor to fulfill this function.

To prevent the duplication of any information already reported by the entity, the monitor shall, to the extent possible, utilize data already provided by the entity to the Department of Health.

No personal identifiers shall be attached to any of the records obtained by the monitor, and all such records shall be subject to the privacy and confidentiality provisions of medical records provided by law.

(2) Following the monitoring period, or in the event that no monitoring period is established, if the Commissioner of Health receives information indicating that the acquiring entity is not fulfilling its commitment to the affected service area pursuant to this act and determines that the information is true, the commissioner shall order the acquiring entity to comply with a corrective action plan. The commissioner shall retain oversight of the acquiring entity's obligations under the corrective action plan for as long as necessary to ensure compliance with this act.

j. The trustees and senior managers of the nonprofit hospital are prohibited from investing in the acquiring entity for a period of three years following the acquisition.

k. No director, officer, agent, trustee, or employee of the nonprofit hospital shall benefit directly or indirectly from the acquisition, including the receipt of any compensation directly related to the proposed acquisition.

l. Upon completion by the Attorney General of the review of the application required by this act, the nonprofit hospital shall apply to the Superior Court for approval of the proposed acquisition. In that proceeding, the Attorney General shall advise the court as to whether the Attorney General supports or opposes the proposed acquisition, with or without any specific modifications, and the basis for that position. Any person who filed a writ-

ten comment or exhibit or appeared and made a statement in the public hearing held by the Attorney General pursuant to subsection f. of this section shall be considered a party to the proceeding, including consumers or community groups representing the citizens of the State.

m. Notwithstanding the provisions of subsections a. and f. of this section to the contrary, in the event that the Attorney General or the Commissioner of Health determines that a proposed acquisition should be considered on an expedited basis in order to preserve the quality of health care provided to the community, the Attorney General and the commissioner may combine the public notice about the acquisition with the notice for a public hearing as required in subsections a. and f., respectively, and may reduce the period of time required for notice, as necessary. In considering a proposed acquisition on an expedited basis, the Attorney General and commissioner may agree to reduce the period of time for review of a completed application to less than 90 days.

n. The Attorney General, in consultation with the Commissioner of Health, shall adopt regulations pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.) to carry out the purposes of this act.

174. Section 5 of P.L.2000, c.143 (C.26:2H-7.14) is amended to read as follows:

C.26:2H-7.14 Construction of act.

5. Nothing in this act shall be construed to limit the existing authority of the Attorney General, the Commissioner of Health, or any other government official or entity or the court to review, approve or disapprove conditions related to an acquisition, transaction, or disposition under current law.

175. Section 1 of P.L.2002, c.25 (C.26:2H-7.15) is amended to read as follows:

C.26:2H-7.15 Definitions relative to assisted living.

1. As used in this act:

"Assisted living" means a coordinated array of supportive personal and health services, available 24 hours per day, which promote resident self-direction and participation in decisions that emphasize independence, individuality, privacy, dignity, and homelike surroundings to residents who have been assessed to need these services, including residents who require formal long-term care.

"Assisted living program" means the provision of or arrangement for meals and assisted living services, when needed, to the residents of publicly

subsidized housing, which because of any federal, State, or local housing laws, rules, regulations, or requirements cannot become licensed as an assisted living residence.

"Assisted living residence" means a facility licensed by the Department of Health to provide apartment-style housing and congregate dining and to assure that assisted living services are available when needed, for four or more adult persons unrelated to the proprietor. Apartment units shall offer, at a minimum, one unfurnished room, a private bathroom, a kitchenette, and a lockable door on the unit entrance.

"Commissioner" means the Commissioner of Health.

176. Section 8 of P.L.2002, c.25 (C.26:2H-7.21) is amended to read as follows:

C.26:2H-7.21 Rules, regulations.

8. The Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.) shall adopt rules and regulations to effectuate the purposes of this act.

177. Section 1 of P.L.1982, c.149 (C.26:2H-11.1) is amended to read as follows:

C.26:2H-11.1 Requirements for applicants for certificate of need, initial licensure for certain facilities.

1. In the case of an application for a certificate of need or initial licensure, as applicable, for a narcotic and drug abuse treatment center to be located within 500 feet from any building in this State used for the instruction of children between the ages of five and 18 years, the applicant shall notify the governing body of the municipality within which the applicant proposes to locate the treatment center of the applicant's intention to apply for the certificate of need or licensure and the proposed location of the center. Documentation of the notice shall be filed with the certificate of need or license application. The Commissioner of Health is hereby authorized to adopt reasonable rules and regulations, in accordance with the provisions of the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), to effectuate the purposes of this act. For the purposes of this act, the definition of "narcotic and drug abuse treatment center" shall be identical to the definition in subsection (a) of section 2 of P.L.1970, c.334 (C.26:2G-22). This act shall not apply to any narcotic and drug abuse treatment center for which an application was filed prior to the effective date of this act.

178. Section 3 of P.L.1989, c.300 (C.26:2H-12.2a) is amended to read as follows:

C.26:2H-12.2a Maintenance of records of complaints, disciplinary actions.

3. a. A health care entity shall maintain all records of all documented complaints of events related to patient care about, and disciplinary proceedings or actions against, a health care professional who is employed by or has an affiliation with the health care entity. The health care entity shall retain the information for a period of seven years and make the records, including any information the health care entity has pertaining to records maintained on the health care professional prior to the effective date of P.L.1989, c.300 (C.45:9-19.4 et al.), available to the division, the board which licenses or otherwise authorizes the health care professional to practice, the Medical Practitioner Review Panel established pursuant to section 8 of P.L.1989, c.300 (C.45:9-19.8), and the Department of Health, as applicable, upon request.

b. A health care entity shall maintain for a period of four years all records and source data relating to its mortality, morbidity, complication, infection, and readmission and shall make the records available to the division, the board which licenses, or otherwise authorizes the health care professional, the review panel and the Department of Health, as applicable, upon request.

c. A health care entity which fails to maintain the records required pursuant to this section shall be subject to such penalties as the Department of Health shall determine pursuant to sections 13 and 14 of P.L.1971, c.136 (C.26:2H-13 and 26:2H-14) and section 16 of P.L.1997, c.192 (C.26:2S-16), or the director shall determine pursuant to P.L.1989, c.331 (C.34:8-43 et seq.), as applicable.

179. Section 2 of P.L.2005, c.83 (C.26:2H-12.2b) is amended to read as follows:

C.26:2H-12.2b Notification relative to certain impairments of health care professionals; definitions.

2. a. A health care entity shall notify the division in writing if a health care professional who is employed by, under contract to render professional services to, or has privileges granted by, that health care entity, or who provides such services pursuant to an agreement with a health care services firm or staffing registry:

(1) for reasons relating to the health care professional's impairment, incompetency, or professional misconduct, which incompetency or profes-

sional misconduct relates adversely to patient care or safety: (a) has full or partial privileges summarily or temporarily revoked or suspended, or permanently reduced, suspended, or revoked; (b) has been removed from the list of eligible employees of a health services firm or staffing registry; (c) has been discharged from the staff; or (d) has had a contract to render professional services terminated or rescinded;

(2) has conditions or limitations placed on the exercise of clinical privileges or practice within the health care entity for reasons relating to the health care professional's impairment, incompetency, or professional misconduct or, which incompetency or professional misconduct relates adversely to patient care or safety, including, but not limited to, second opinion requirements, non-routine concurrent or retrospective review of admissions or care, non-routine supervision by one or more members of the staff, or the completion of remedial education or training;

(3) voluntarily resigns from the staff if: (a) the health care entity is reviewing the health care professional's patient care or reviewing whether, based upon its reasonable belief, the health care professional's conduct demonstrates an impairment or incompetence or is unprofessional, which incompetence or unprofessional conduct relates adversely to patient care or safety; or (b) the health care entity, through any member of the medical or administrative staff, has expressed an intention to do such a review;

(4) voluntarily relinquishes any partial privilege or authorization to perform a specific procedure if: (a) the health care entity is reviewing the health care professional's patient care or reviewing whether, based upon its reasonable belief, the health care professional's conduct demonstrates an impairment or incompetence or is unprofessional, which incompetence or unprofessional conduct relates adversely to patient care or safety; or (b) the health care entity, through any member of the medical or administrative staff, has expressed an intention to do such a review;

(5) while under, or subsequent to, a review by the health care entity of the health care professional's patient care or professional conduct is granted a leave of absence for reasons relating to a physical, mental, or emotional condition or drug or alcohol use which impairs the health care professional's ability to practice with reasonable skill and safety, except that no report is required for pregnancy-related leaves of absence or if the health care professional has sought assistance from a professional assistance or intervention program approved or designated by the division or a board to provide confidential oversight of the health care professional and is following the treatment regimen or monitoring as that program requires; or

(6) is a party to a medical malpractice liability suit, to which the health care entity is also a party, and in which there is a settlement, judgment, or arbitration award.

As used in this subsection, incompetence, professional misconduct, and unprofessional conduct shall not include personal conduct, such as tardiness, insubordination, or other similar behavior, which does not relate to patient care or safety.

b. A health care entity shall notify the division in writing if it is in possession of information that indicates that a health care professional has failed to comply with a request to seek assistance from a professional assistance or intervention program approved or designated by the division or a board to provide confidential oversight of the health care professional, or has failed to follow the treatment regimen or monitoring program required by that program to assure that the health care professional's physical, mental, or emotional condition or drug or alcohol use does not impair the health care professional's ability to practice with reasonable skill and safety.

c. A health care entity shall notify the division in writing if any health care professional who has been the subject of a report pursuant to this section, has had conditions or limitations on the exercise of clinical privileges or practice within the health care entity altered, or privileges restored, or has resumed exercising clinical privileges that had been voluntarily relinquished.

d. In the case of a health care professional who is providing services at a health care entity pursuant to an agreement with a health care services firm or staffing agency and is the subject of a notice pursuant to this section, the health care entity shall, when it submits a notice to the division concerning that health care professional, provide a copy of the notice to the health care services firm or staffing agency.

e. The form of notification shall be prescribed by the Commissioner of Health, in consultation with the Commissioner of Human Services in the case of psychiatric facilities and developmental centers, and shall contain such information as may be required by the division and shall be made within seven days of the date of the action, settlement, judgment, or award.

f. A health care entity which fails to provide such notice to the division or fails to cooperate with a request for information by the division, the board or the Medical Practitioner Review Panel established pursuant to section 8 of P.L.1989, c.300 (C.45:9-19.8) shall be subject to such penalties as the Department of Health may determine pursuant to sections 13 and 14 of P.L.1971, c.136 (C.26:2H-13 and 26:2H-14).

g. A health care entity, or any employee thereof, which provides information to the division, the board, the Medical Practitioner Review Panel,

a health care services firm or staffing agency, or the Department of Health, in good faith and without malice, regarding a health care professional pursuant to the provisions of this section or section 3 of P.L.1989, c.300 (C.26:2H-12.2a), is not liable for civil damages in any cause of action arising out of the provision or reporting of the information.

h. A health care entity shall provide the health care professional who is the subject of a notice pursuant to paragraphs (1), (2), (4), and (5) of subsection a. of this section and subsection c. of this section with a copy of the notice provided to the division, when the health care entity submits the notice to the division.

i. For the purposes of this section, section 3 of P.L.1989, c.300 (C.26:2H-12.2a) and section 15 of P.L.2005, c.83 (C.26:2H-12.2c):

"Board" means a professional and occupational licensing board within the Division of Consumer Affairs in the Department of Law and Public Safety which licenses or otherwise authorizes a health care professional to practice a health care profession.

"Division" means the Division of Consumer Affairs in the Department of Law and Public Safety.

"Health care entity" means a health care facility licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.), a health maintenance organization authorized to operate pursuant to P.L.1973, c.337 (C.26:2J-1 et seq.), a carrier which offers a managed care plan regulated pursuant to P.L.1997, c.192 (C.26:2S-1 et seq.), a State or county psychiatric hospital, a State developmental center, a staffing registry, and a home care services agency as defined in section 1 of P.L.1947, c.262 (C.45:11-23).

"Health care professional" means a person licensed or otherwise authorized pursuant to Title 45 or Title 52 of the Revised Statutes to practice a health care profession that is regulated by the Director of the Division of Consumer Affairs or by one of the following boards: the State Board of Medical Examiners, the New Jersey Board of Nursing, the New Jersey State Board of Dentistry, the New Jersey State Board of Optometrists, the New Jersey State Board of Pharmacy, the State Board of Chiropractic Examiners, the Acupuncture Examining Board, the State Board of Physical Therapy, the State Board of Respiratory Care, the Orthotics and Prosthetics Board of Examiners, the State Board of Psychological Examiners, the State Board of Social Work Examiners, the State Board of Veterinary Medical Examiners, the State Board of Examiners of Ophthalmic Dispensers and Ophthalmic Technicians, the Audiology and Speech-Language Pathology Advisory Committee, the State Board of Marriage and Family Therapy Examiners, the Occupational Therapy Advisory Council and the Certified Psychoanalysts

Advisory Committee. "Health care professional" also includes a nurse aide and a personal care assistant certified by the Department of Health.

180. Section 15 of P.L.2005, c.83 (C.26:2H-12.2c) is amended to read as follows:

C.26:2H-12.2c Disclosure of information by health care entity.

15. a. A health care entity, upon the inquiry of another health care entity, shall truthfully:

(1) disclose whether, within the seven years preceding the inquiry, it provided any notice to the division pursuant to section 2 of P.L.2005, c.83 (C.26:2H-12.2b), or to the review panel, as required by section 3 of P.L.1989, c.300 (C.26:2H-12.2a), with respect to the health care professional about whom the inquiry has been made, providing a copy of the form of notification and any supporting documentation that was provided to the division, a professional or occupational licensing board in the Division of Consumer Affairs in the Department of Law and Public Safety, or the review panel; and

(2) provide information about a current or former employee's job performance as it relates to patient care, as provided in this section, and, in the case of a former employee, the reason for the employee's separation.

b. For the purposes of this section, "job performance" shall relate to the suitability of the employee for re-employment at a health care entity, and the employee's skills and abilities as they relate to suitability for future employment at a health care entity. Information about a current or former employee's job performance pursuant to this paragraph shall be based on the employee's performance evaluation, and provided to another health care entity only if: (1) the evaluation has been signed by the evaluator and shared with the employee; (2) the employee has had the opportunity to respond; and (3) the employee's response, if any, has been taken into consideration when providing the information to another health care entity.

Job performance as it relates to patient care shall not include the current or former employee's participation in labor activities pursuant to the "National Labor Relations Act," 29 U.S.C. s.151 et seq.

c. A health care entity, or any employee designated by the entity, which, pursuant to this section, provides information in good faith and without malice to another health care entity concerning a health care professional, including information about a current or former employee's job performance as it relates to patient care, is not liable for civil damages in any cause of action arising out of the provision or reporting of the information.

d. A health care entity which fails to truthfully disclose information to another health care entity making an inquiry pursuant to this section or fails to cooperate with such request for information by the other health care entity shall be subject to such penalties as the Department of Health may determine pursuant to sections 13 and 14 of P.L.1971, c.136 (C.26:2H-13 and 26:2H-14) and section 16 of P.L.1997, c.192 (C.26:2S-16), or the director shall determine pursuant to P.L.1989, c.331 (C.34:8-43 et seq.), as applicable.

181. Section 1 of P.L.1998, c.136 (C.26:2H-12.6a) is amended to read as follows:

C.26:2H-12.6a Preparation, distribution of resource guide providing information on child abuse, neglect.

1. a. The Department of Children and Families, in consultation with the Department of Health, shall prepare a resource guide in both English and Spanish which provides information on child abuse and neglect to all parents of newborn infants born in this State. The resource guide shall be distributed to each parent present during the infant's birth, by the personnel at a hospital or birthing facility, prior to the mother's discharge, as part of the hospital or birthing facility's discharge procedures.

b. The resource guide shall include information on the signs of child abuse and neglect, the services provided by the State which help in preventing child abuse and neglect, including the availability of home visitation resources, the legal ramifications of abusing or neglecting a child, and tips on child safety.

c. The department shall distribute the resource guide, at no charge, to all the hospitals and birthing facilities in the State. The department shall update the resource guide as necessary, and shall make additional copies of the resource guide available to health care providers upon request.

d. In addition to the resource guide prepared pursuant to subsection a. of this section, the department, in consultation with the Department of Health, shall prepare a pamphlet in both English and Spanish that includes information on the prevention of shaken baby syndrome and detailed suggestions for how to cope with a crying baby. The pamphlet shall be distributed to each parent present during the infant's birth, by the personnel at a hospital or birthing facility, prior to the mother's discharge, as part of the hospital or birthing facility's discharge procedures. The department shall: distribute the pamphlet, at no charge, to all hospitals and birthing facilities in the State; update the pamphlet as necessary; and make additional copies of the pamphlet available to health care providers upon request.

182. Section 1 of P.L.2005, c.50 (C.26:2H-12.6b) is amended to read as follows:

C.26:2H-12.6b Definitions relative to emergency contraception for sexual assault victims.

1. As used in P.L.2005, c.50 (C.26:2H-2.6b et seq.):

"Commissioner" means the Commissioner of Health.

"Division on Women" means the Division on Women in the Department of Children and Families.

"Emergency care to sexual assault victims" means a medical examination, procedure, or service provided by an emergency health care facility to a sexual assault victim following an alleged sexual offense.

"Emergency contraception" means one or more prescription drugs to prevent pregnancy, used separately or in combination, administered to or self-administered by a patient within a medically recommended time after sexual intercourse, dispensed for that purpose in accordance with professional standards of practice and determined to be safe by the United States Food and Drug Administration.

"Emergency health care facility" means a general hospital or satellite emergency department licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.).

"Medically and factually accurate and objective" means verified or supported by the weight of research conducted in compliance with accepted scientific methods and standards, published in peer-reviewed journals and recognized as accurate and objective by leading professional organizations and agencies with relevant expertise in the field of obstetrics and gynecology.

"Sexual Assault Nurse Examiner program" means the Statewide Sexual Assault Nurse Examiner program in the Division of Criminal Justice in the Department of Law and Public Safety, established pursuant to P.L.2001, c.81 (C.52:4B-50 et seq.).

"Sexual assault victim" means a female who alleges or is alleged to have suffered a personal, physical, or psychological injury as a result of a sexual offense.

"Sexual offense" means sexual assault and aggravated sexual assault as set forth in N.J.S.2C:14-2, criminal sexual contact and aggravated criminal sexual contact as set forth in N.J.S.2C:14-3, fourth degree lewdness as set forth in subsection b. of N.J.S.2C:14-4 and endangering the welfare of a child by engaging in sexual conduct which would impair or debauch the morals of the child as set forth in N.J.S.2C:24-4.

183. Section 2 of P.L.1989, c.170 (C.26:2H-12.8) is amended to read as follows:

C.26:2H-12.8 Rights of persons admitted to a general hospital.

2. Every person admitted to a general hospital as licensed by the Department of Health pursuant to P.L.1971, c.136 (C.26:2H-1 et al.) shall have the right:

a. To considerate and respectful care consistent with sound nursing and medical practices, which shall include being informed of the name and licensure status of a student nurse or facility staff member who examines, observes, or treats the patient and the right to expect and receive appropriate assessment, management, and treatment of pain as an integral component of that person's care;

b. To be informed of the name of the physician responsible for coordinating his care;

c. To obtain from the physician complete, current information concerning his diagnosis, treatment, and prognosis in terms he can reasonably be expected to understand. When it is not medically advisable to give this information to the patient, it shall be made available to another person designated by the patient on his behalf;

d. To receive from the physician information necessary to give informed consent prior to the start of any procedure or treatment and which, except for those emergency situations not requiring an informed consent, shall include as a minimum the specific procedure or treatment, the medically significant risks involved, and the possible duration of incapacitation, if any, as well as an explanation of the significance of the patient's informed consent. The patient shall be advised of any medically significant alternatives for care or treatment, however, this does not include experimental treatments that are not yet accepted by the medical establishment;

e. To refuse treatment to the extent permitted by law and to be informed of the medical consequences of this act;

f. To privacy to the extent consistent with providing adequate medical care to the patient. This shall not preclude discussion of a patient's case or examination of a patient by appropriate health care personnel;

g. To privacy and confidentiality of all records pertaining to the patient's treatment, except as otherwise provided by law or third party payment contract, and to access to those records, including receipt of a copy thereof at reasonable cost, upon request, unless the patient's physician states in writing that access by the patient is not medically advisable;

h. To expect that within its capacity, the hospital will make reasonable response to the patient's request for services, including the services of an interpreter in a language other than English if 10% or more of the population in the hospital's service area speaks that language;

i. To be informed by the patient's physician of any continuing health care requirements which may follow discharge and to receive assistance from the physician and appropriate hospital staff in arranging for required follow-up care after discharge;

j. To be informed by the hospital of the necessity of transfer to another facility prior to the transfer and of any alternatives to it which may exist, which transfer shall not be effected unless it is determined by the physician to be medically necessary;

k. To be informed, upon request, of other health care and educational institutions that the hospital has authorized to participate in his treatment;

l. To be advised if the hospital proposes to engage in or perform human research or experimentation and to refuse to participate in these projects. For the purposes of this subsection "human research" does not include the mere collecting of statistical data;

m. To examine and receive an explanation of the patient's bill, regardless of source of payment, and to receive information or be advised on the availability of sources of financial assistance to help pay for the patient's care, as necessary;

n. To expect reasonable continuity of care;

o. To be advised of the hospital rules and regulations that apply to his conduct as a patient;

p. To treatment without discrimination as to race, age, religion, sex, national origin, or source of payment; and

q. To contract directly with a New Jersey licensed registered professional nurse of the patient's choosing for private professional nursing care during his hospitalization. A registered professional nurse so contracted shall adhere to hospital policies and procedures in regard to treatment protocols and policies and procedures so long as those policies and procedures are the same for private duty and regularly employed nurses. The registered professional nurse shall not be considered an agent or employee of the hospital for purposes of any financial liabilities, including, but not limited to, State or federal employee taxes, worker's compensation payments or coverage for professional liability.

The hospital, upon a patient's or the patient's designee's request for private professional nursing care, shall provide the patient or the patient's des-

ignee with a list of local nonprofit professional nurses association registries that refer nurses for private professional nursing care.

184. Section 14 of P.L.1999, c.154 (C.26:2H-12.12) is amended to read as follows:

C.26:2H-12.12 Responsibility of health care facilities for filing claims.

14. Effective 12 months after the adoption of regulations establishing standard health care enrollment and claim forms by the Commissioner of Banking and Insurance pursuant to section 1 of P.L.1999, c.154 (C.17B:30-23), a health care facility licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) is responsible for filing all claims for third party payment, including claims filed on behalf of the health care facility's patient for any health care service provided by the health care facility that is eligible for third party payment, except that at the patient's option, the patient may file the claim for third party payment.

a. In the case of a claim filed on behalf of the health care facility's patient, the health care facility shall file the claim within 60 days of the last date of service for a course of treatment, on the standard claim form adopted by the Commissioner of Banking and Insurance pursuant to section 1 of P.L.1999, c.154 (C.17B:30-23).

b. In the case of a claim in which the patient has assigned the patient's benefits to the health care facility, the health care facility shall file the claim within 180 days of the last date of service for a course of treatment, on the standard claim form adopted by the Commissioner of Banking and Insurance pursuant to section 1 of P.L.1999, c.154 (C.17B:30-23). If the health care facility does not file the claim within 180 days of the last date of service for a course of treatment, the third party payer shall reserve the right to deny payment of the claim, in accordance with regulations established by the Commissioner of Banking and Insurance, and the health care facility shall be prohibited from seeking any payment directly from the patient.

(1) In establishing the standards for denial of payment, the Commissioner of Banking and Insurance shall consider the length of delay in filing the claim, the good faith use of information provided by the patient to the health care facility with respect to the identity of the patient's third party payer, delays in filing a claim related to coordination of benefits between third party payers and any other factors the commissioner deems appropriate, and, accordingly, shall define specific instances where the sanctions permitted pursuant to this subsection shall not apply.

(2) A health care facility which fails to file a claim within 180 days and whose claim for payment has been denied by the third party payer in accordance with this subsection may, in the discretion of a judge of the Superior Court, be permitted to refile the claim if the third party payer has not been substantially prejudiced thereby. Application to the court for permission to refile a claim shall be made within 14 days of notification of denial of payment and shall be made upon motion based upon affidavits showing sufficient reasons for the failure to file the claim with the third party payer within 180 days.

c. The provisions of this section shall not apply to any claims filed pursuant to P.L.1972, c.70 (C.39:6A-1 et seq.).

d. A health care facility which violates the provisions of subsection a. of this section may be subject to a civil penalty of \$250 for each violation plus \$50 for each day after the 60th day that the health care facility fails to submit a claim. The penalty shall be sued for and collected by the Department of Health pursuant to the "Penalty Enforcement Law of 1999," P.L.1999, c.274 (C.2A:58-10 et seq.).

185. Section 3 of P.L.1999, c.362 (C.26:2H-12.13) is amended to read as follows:

C.26:2H-12.13 Posting of drinking water test reports by general hospitals.

3. a. The owner or operator of a general hospital who is required to prepare a Consumer Confidence Report pursuant to the "Safe Drinking Water Act Amendments of 1996," (42 U.S.C.s.300f et al.), or who receives a Consumer Confidence Report from the owner or operator of a public community water system, shall post each Consumer Confidence Report it prepares or receives in the area of each major entrance and in each admitting room in the hospital.

b. The owner or operator of a general hospital who is a supplier of water but is not required to prepare a Consumer Confidence Report pursuant to the "Safe Drinking Water Act Amendments of 1996," and who is required to conduct tests of its drinking water by the Department of Environmental Protection, shall post a chart setting forth the results of the water tests, including the level of detection and, as appropriate for each contaminant, the maximum contaminant level, highest level allowed, action level, treatment technique, or other expression of an acceptable level, for each contaminant, in the area of each major entrance and in each admitting room in the general hospital. The chart also shall include in bold print the statement required to be included in a Consumer Confidence Report pursuant to 40 CFR s.141.154(a). The chart shall not include contaminants that are not detected.

c. As used in this section, "general hospital" shall mean any general hospital licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.).

d. The provisions of this section shall be enforced by the Department of Health. The Department of Health shall not be required to conduct on-site inspections to determine compliance with this section more frequently than any on-site inspections of general hospitals are conducted by the department pursuant to any other law.

186. Section 4 of P.L.1999, c.362 (C.26:2H-12.14) is amended to read as follows:

C.26:2H-12.14 Posting of drinking water test reports by rehabilitation centers, extended care facilities, nursing homes.

4. a. The owner or operator of a rehabilitation center, extended care facility, skilled nursing home, or nursing home who is required to prepare a Consumer Confidence Report pursuant to the "Safe Drinking Water Act Amendments of 1996," (42 U.S.C.s.300f et al.), or who receives a Consumer Confidence Report from the owner or operator of a public community water system, shall post each Consumer Confidence Report it prepares or receives in at least one conspicuous location in the rehabilitation center, extended care facility, skilled nursing home, or nursing home.

b. The owner or operator of a rehabilitation center, extended care facility, skilled nursing home, or nursing home who is a supplier of water but is not required to prepare a Consumer Confidence Report pursuant to the "Safe Drinking Water Act Amendments of 1996," and who is required to conduct tests of its drinking water by the Department of Environmental Protection, shall post a chart setting forth the results of the water tests, including the level of detection and, as appropriate for each contaminant, the maximum contaminant level, highest level allowed, action level, treatment technique, or other expression of an acceptable level, for each contaminant, in at least one conspicuous location in the rehabilitation center, extended care facility, skilled nursing home, or nursing home. The chart also shall include in bold print the statement required to be included in a Consumer Confidence Report pursuant to 40 CFR s.141.154(a). The chart shall not include contaminants that are not detected.

c. As used in this section, "rehabilitation center," "extended care facility," "skilled nursing home," and "nursing home" shall mean a rehabilitation center, extended care facility, skilled nursing home, or nursing home licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.).

d. The provisions of this section shall be enforced by the Department of Health. The Department of Health shall not be required to conduct on-site inspections to determine compliance with this section more frequently than any on-site inspections of rehabilitation centers, extended care facilities, skilled nursing homes, or nursing homes are conducted by the department pursuant to any other law.

187. Section 2 of P.L.1999, c.436 (C.26:2H-12.15) is amended to read as follows:

C.26:2H-12.15 Regulations on use of unlicensed assistive personnel.

2. a. The Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt regulations governing the use of unlicensed assistive personnel in licensed health care facilities, in consultation with at least the following: the Director of the Division of Consumer Affairs in the Department of Law and Public Safety, the New Jersey Hospital Association, the New Jersey Association of Health Care Facilities, the Medical Society of New Jersey, and the New Jersey State Nurses Association.

As used in this section, "unlicensed assistive personnel" means any unlicensed or uncertified personnel employed by a licensed health care facility that perform nursing tasks which do not require the skill or judgment of a registered professional nurse and which are assigned to them by, and carried out under the supervision of, a registered professional nurse.

b. The regulations adopted pursuant to subsection a. of this section, shall require, at a minimum, that:

(1) unlicensed assistive personnel employed by a health care facility meet the standards and requirements for education and competency evaluation prescribed by the New Jersey Board of Nursing pursuant to paragraph (26) of subsection d. of section 2 of P.L.1947, c.262 (C.45:11-24); and

(2) a health care facility, prior to implementing the use of unlicensed assistive personnel, establish a multidisciplinary committee, including representation from registered professional nurses, physicians, administrative staff, and unlicensed assistive personnel, to evaluate the need for using these personnel, formulate and adopt a plan to implement their use, and monitor the implementation of the plan.

c. The plan for implementing the use of unlicensed assistive personnel pursuant to paragraph (2) of subsection b. of this section shall, at a minimum:

- (1) require the use and specify the composition of multidisciplinary patient care teams operating under the plan;
- (2) prescribe materials and protocols for the orientation and training of health care facility staff with respect to implementing the plan;
- (3) provide for the periodic monitoring and evaluation of the use of unlicensed assistive personnel by the multidisciplinary committee established pursuant to subsection b. of this section; and
- (4) require in-service training and educational programming for both registered professional nurses and unlicensed assistive personnel which include subject matter relating to the delegation of nursing tasks to unlicensed assistive personnel and the supervision of these personnel by registered professional nurses.

188. Section 2 of P.L.2001, c.234 (C.26:2H-12.17) is amended to read as follows:

C.26:2H-12.17 Waiver of utilization requirement.

2. The Commissioner of Health may waive the 10% utilization requirement or reduce the required percentage by regulation for specific regions of the State or Statewide if the commissioner determines that sufficient numbers of assisted living beds are available in the State to meet the needs of Medicaid-eligible persons within the limits of the federal waiver to provide assisted living services through the Medicaid program.

189. Section 6 of P.L.2001, c.234 (C.26:2H-12.21) is amended to read as follows:

C.26:2H-12.21 Rules, regulations.

6. The Commissioner of Health shall adopt regulations pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.) necessary to carry out the purposes of this act.

190. Section 3 of P.L.2004, c.9 (C.26:2H-12.25) is amended to read as follows:

C.26:2H-12.25 Definitions relative to patient safety; plans; reports; documentation, notification of adverse effects, etc.

3. a. As used in this act:

"Adverse event" means an event that is a negative consequence of care that results in unintended injury or illness, which may or may not have been preventable.

"Anonymous" means that information is presented in a form and manner that prevents the identification of the person filing the report.

"Commissioner" means the Commissioner of Health.

"Department" means the Department of Health.

"Event" means a discrete, auditable, and clearly defined occurrence.

"Health care facility" or "facility" means a health care facility licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) and a State psychiatric hospital operated by the Department of Human Services and listed in R.S.30:1-7.

"Health care professional" means an individual who, acting within the scope of the individual's licensure or certification, provides health care services, and includes, but is not limited to, a physician, dentist, nurse, pharmacist, or other health care professional whose professional practice is regulated pursuant to Title 45 of the Revised Statutes.

"Near-miss" means an occurrence that could have resulted in an adverse event but the adverse event was prevented.

"Preventable event" means an event that could have been anticipated and prepared against, but occurs because of an error or other system failure.

"Serious preventable adverse event" means an adverse event that is a preventable event and results in death or loss of a body part, or disability or loss of bodily function lasting more than seven days or still present at the time of discharge from a health care facility.

b. In accordance with the requirements established by the commissioner by regulation, pursuant to this act, a health care facility shall develop and implement a patient safety plan for the purpose of improving the health and safety of patients at the facility.

The patient safety plan shall, at a minimum, include:

- (1) a patient safety committee, as prescribed by regulation;
- (2) a process for teams of facility staff, which teams are comprised of personnel who are representative of the facility's various disciplines and have appropriate competencies, to conduct ongoing analysis and application of evidence-based patient safety practices in order to reduce the probability of adverse events resulting from exposure to the health care system across a range of diseases and procedures;
- (3) a process for teams of facility staff, which teams are comprised of personnel who are representative of the facility's various disciplines and have appropriate competencies, to conduct analyses of near-misses, with particular attention to serious preventable adverse events and adverse events; and
- (4) a process for the provision of ongoing patient safety training for facility personnel.

The provisions of this subsection shall not be construed to eliminate or lessen a hospital's obligation under current law or regulation to have a continuous quality improvement program.

c. A health care facility shall report to the department or, in the case of a State psychiatric hospital, to the Department of Human Services, in a form and manner established by the commissioner, every serious preventable adverse event that occurs in that facility.

d. A health care facility shall assure that the patient affected by a serious preventable adverse event or an adverse event specifically related to an allergic reaction, or, in the case of a minor or a patient who is incapacitated, the patient's parent or guardian or other family member, as appropriate, is informed of the serious preventable adverse event or adverse event specifically related to an allergic reaction, no later than the end of the episode of care, or, if discovery occurs after the end of the episode of care, in a timely fashion as established by the commissioner by regulation. The time, date, participants, and content of the notification shall be documented in the patient's medical record in accordance with rules and regulations adopted by the commissioner. The content of the documentation shall be determined in accordance with the rules and regulations of the commissioner. If the patient's physician determines that the disclosure would seriously and adversely affect the patient's health, then the facility shall assure that the family member, if available, is notified in accordance with rules and regulations adopted by the commissioner. In the event that an adult patient is not informed of the serious preventable adverse event or adverse event specifically related to an allergic reaction, the facility shall assure that the physician includes a statement in the patient's medical record that provides the reason for not informing the patient pursuant to this section.

e. (1) A health care professional or other employee of a health care facility is encouraged to make anonymous reports to the department or, in the case of a State psychiatric hospital, to the Department of Human Services, in a form and manner established by the commissioner, regarding near-misses, preventable events, and adverse events that are otherwise not subject to mandatory reporting pursuant to subsection c. of this section.

(2) The commissioner shall establish procedures for and a system to collect, store, and analyze information voluntarily reported to the department pursuant to this subsection. The repository shall function as a clearinghouse for trend analysis of the information collected pursuant to this subsection.

f. Any documents, materials, or information received by the department, or the Department of Human Services, as applicable, pursuant to the provisions of subsections c. and e. of this section concerning serious pre-

ventable adverse events, near-misses, preventable events, and adverse events that are otherwise not subject to mandatory reporting pursuant to subsection c. of this section, shall not be:

(1) subject to discovery or admissible as evidence or otherwise disclosed in any civil, criminal, or administrative action or proceeding;

(2) considered a public record under P.L.1963, c.73 (C.47:1A-1 et seq.) or P.L.2001, c.404 (C.47:1A-5 et al.); or

(3) used in an adverse employment action or in the evaluation of decisions made in relation to accreditation, certification, credentialing, or licensing of an individual, which is based on the individual's participation in the development, collection, reporting or storage of information in accordance with this section. The provisions of this paragraph shall not be construed to limit a health care facility from taking disciplinary action against a health care professional in a case in which the professional has displayed recklessness, gross negligence, or willful misconduct, or in which there is evidence, based on other similar cases known to the facility, of a pattern of significant substandard performance that resulted in serious preventable adverse events.

The information received by the department, or the Department of Human Services, as applicable, shall be shared with the Attorney General in accordance with rules and regulations adopted pursuant to subsection j. of this section, and may be used by the department, the Department of Human Services, and the Attorney General for the purposes of this act and for oversight of facilities and health care professionals; however, the departments and the Attorney General shall not use the information for any other purpose.

In using the information to exercise oversight, the department, Department of Human Services, and Attorney General, as applicable, shall place primary emphasis on assuring effective corrective action by the facility or health care professional, reserving punitive enforcement or disciplinary action for those cases in which the facility or the professional has displayed recklessness, gross negligence, or willful misconduct, or in which there is evidence, based on other similar cases known to the department, Department of Human Services or the Attorney General, of a pattern of significant substandard performance that has the potential for or actually results in harm to patients.

g. Any documents, materials, or information developed by a health care facility as part of a process of self-critical analysis conducted pursuant to subsection b. of this section concerning preventable events, near-misses, and adverse events, including serious preventable adverse events, and any document or oral statement that constitutes the disclosure provided to a pa-

tient or the patient's family member or guardian pursuant to subsection d. of this section, shall not be:

(1) subject to discovery or admissible as evidence or otherwise disclosed in any civil, criminal, or administrative action or proceeding; or

(2) used in an adverse employment action or in the evaluation of decisions made in relation to accreditation, certification, credentialing, or licensing of an individual, which is based on the individual's participation in the development, collection, reporting, or storage of information in accordance with subsection b. of this section. The provisions of this paragraph shall not be construed to limit a health care facility from taking disciplinary action against a health care professional in a case in which the professional has displayed recklessness, gross negligence or willful misconduct, or in which there is evidence, based on other similar cases known to the facility, of a pattern of significant substandard performance that resulted in serious preventable adverse events.

h. Notwithstanding the fact that documents, materials, or information may have been considered in the process of self-critical analysis conducted pursuant to subsection b. of this section, or received by the department or the Department of Human Services pursuant to the provisions of subsection c. or e. of this section, the provisions of this act shall not be construed to increase or decrease, in any way, the availability, discoverability, admissibility, or use of any such documents, materials, or information if obtained from any source or context other than those specified in this act.

i. The investigative and disciplinary powers conferred on the boards and commissions established pursuant to Title 45 of the Revised Statutes, the Director of the Division of Consumer Affairs in the Department of Law and Public Safety and the Attorney General under the provisions of P.L.1978, c.73 (C.45:1-14 et seq.) or any other law, rule, or regulation, as well as the investigative and enforcement powers conferred on the department and the commissioner under the provisions of Title 26 of the Revised Statutes or any other law, rule or regulation, shall not be exercised in such a manner so as to unduly interfere with a health care facility's implementation of its patient safety plan established pursuant to this section. However, this act shall not be construed to otherwise affect, in any way, the exercise of such investigative, disciplinary, and enforcement powers.

j. The commissioner shall, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), adopt such rules and regulations necessary to carry out the provisions of this act. The regulations shall establish: criteria for a health care facility's patient safety plan and patient safety committee; the time frame and format for mandatory reporting of

serious preventable adverse events at a health care facility; the types of events that qualify as serious preventable adverse events and adverse events specifically related to an allergic reaction; the circumstances under which a health care facility is not required to inform a patient or the patient's family about a serious preventable adverse event or adverse event specifically related to an allergic reaction; and a system for the sharing of information received by the department and the Department of Human Services pursuant to subsections c. and e. of this section with the Attorney General. In establishing the criteria for reporting serious preventable adverse events, the commissioner shall, to the extent feasible, use criteria for these events that have been or are developed by organizations engaged in the development of nationally recognized standards.

The commissioner shall consult with the Commissioner of Human Services with respect to rules and regulations affecting the State psychiatric hospitals and with the Attorney General with respect to rules and regulations regarding the establishment of a system for the sharing of information received by the department and the Department of Human Services pursuant to subsections c. and e. of this section with the Attorney General.

k. Nothing in this act shall be construed to increase or decrease the discoverability, in accordance with *Christy v. Salem*, No. A-6448-02T3 (Superior Court of New Jersey, Appellate Division, February 17, 2004)(2004 WL291160), of any documents, materials or information if obtained from any source or context other than those specified in this act.

191. Section 8 of P.L.2007, c.196 (C.26:2H-12.25a) is amended to read as follows:

C.26:2H-12.25a Compilation of findings on patient safety; annual reports.

8. The Commissioner of Health and the Commissioner of Human Services shall compile their findings and recommendations for operational changes related to patient safety in health care facilities, based on information reported to the commissioners pursuant to the "Patient Safety Act," P.L.2004, c.9 (C.26:2H-12.23 et seq.).

The commissioners shall jointly issue an annual report of their findings and recommendations to the Governor, and to the Legislature pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1), to be made available on the official Internet website of the Department of Health.

192. Section 1 of P.L.2009, c.122 (C.26:2H-12.25b) is amended to read as follows:

C.26:2H-12.25b Certain data included in New Jersey Hospital Performance Report; rules, regulations.

1. a. The Department of Health shall include in the New Jersey Hospital Performance Report issued annually by the department hospital-specific data from hospital procedure and diagnosis codes concerning the following patient safety indicators:

- (1) Foreign body left during procedure (PSI 05);
- (2) Iatrogenic pneumothorax (PSI 06);
- (3) Postoperative hip fracture (PSI 08);
- (4) Postoperative hemorrhage or hematoma (PSI 09);
- (5) Postoperative deep vein thrombosis (DVT) or pulmonary embolism (PE) (PSI 12);
- (6) Postoperative sepsis (PSI 13);
- (7) Postoperative wound dehiscence (PSI 14);
- (8) Accidental puncture or laceration (PSI 15);
- (9) Transfusion reaction (PSI 16);
- (10) Birth trauma (PSI 17);
- (11) Obstetric trauma-vaginal delivery with instrument (PSI 18);
- (12) Obstetric trauma-vaginal delivery without instrument (PSI 19);
- (13) Air embolism; and
- (14) Surgery on the wrong side, wrong body part, or wrong person, or wrong surgery performed on a patient.

b. The Commissioner of Health, in consultation with the Quality Improvement Advisory Committee in the Department of Health, may include additional patient safety indicators in the annual report, by regulation. The commissioner shall consider indicators that: (1) are recommended by the federal Agency for Healthcare Research and Quality or the Centers for Medicare & Medicaid Services; (2) are suitable for comparative reporting and public accountability, and are risk adjusted; (3) have a strong evidence base with no substantial evidence against their use for comparative reporting; and (4) can be measured through data that are available through hospital procedure and diagnosis codes.

c. The commissioner shall request the Quality Improvement Advisory Committee to study and make recommendations to the commissioner on how to expand public reporting by the department of patient pressure ulcers, patient infections due to hospital care, and falls by patients in general hospitals.

d. The commissioner shall, in accordance with the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), adopt such rules and regulations as the commissioner deems necessary to carry out the provisions of this act.

193. Section 2 of P.L.2004, c.136 (C.26:2H-12.28) is amended to read as follows:

C.26:2H-12.28 Designation of hospitals as stroke centers.

2. The Commissioner of Health shall designate hospitals that meet the criteria set forth in this act as primary or comprehensive stroke centers.

a. A hospital shall apply to the commissioner for designation and shall demonstrate to the satisfaction of the commissioner that the hospital meets the criteria set forth in section 3 or 4 of this act for a primary or comprehensive stroke center, respectively.

b. The commissioner shall designate as many hospitals as primary stroke centers as apply for the designation, provided that the hospital meets the criteria set forth in section 3 of this act. In addition to the criteria set forth in section 3 of this act, the commissioner is encouraged to take into consideration whether the hospital contracts with carriers that provide coverage through the State Medicaid program, established pursuant to P.L.1968, c.413 (C.30:4D-1 et seq.) and the NJ FamilyCare Program, established pursuant to P.L.2005, c.156 (C.30:4J-8 et al.).

c. The commissioner shall designate as many hospitals as comprehensive stroke centers as apply for the designation, provided that the hospital meets the criteria set forth in section 4 of this act.

d. The commissioner may suspend or revoke a hospital's designation as a stroke center, after notice and hearing, if the commissioner determines that the hospital is not in compliance with the requirements of this act.

194. Section 4 of P.L.2004, c.136 (C.26:2H-12.30) is amended to read as follows:

C.26:2H-12.30 Minimum criteria for comprehensive stroke centers.

4. A hospital designated as a comprehensive stroke center shall use proven state-of-the-art technology and medical techniques and, at a minimum, meet the criteria set forth in this section.

a. The hospital shall meet all of the criteria required for a primary stroke center pursuant to section 3 of this act.

b. With respect to patient care, the hospital shall:

(1) maintain a neurosurgical team that is capable of assessing and treating complex stroke and stroke-like syndromes;

(2) maintain on staff a neuro-radiologist with Certificate of Added Qualifications and a physician with neuro-interventional angiographic training and skills;

(3) provide comprehensive rehabilitation services either on site or by transfer agreement with another health care facility; and

(4) enter into and maintain written transfer agreements with primary stroke centers to accept transfer of patients with complex strokes when clinically warranted.

c. With respect to support services, the hospital shall:

(1) have magnetic resonance imaging and computed tomography angiography capabilities;

(2) have digital subtraction angiography and a suite equipped for neuro-interventional procedures;

(3) develop and maintain sophisticated outcomes assessment and performance improvement capability that incorporates data from affiliated primary stroke centers and integrates regional, State, and national data;

(4) provide guidance and continuing medical education to primary stroke centers;

(5) provide graduate medical education in stroke; and

(6) conduct research on stroke-related topics.

d. If the Commissioner of Health determines that a new drug, device, technique, or technology has become available for the treatment of stroke that provides a diagnostic or therapeutic advantage over existing elements included in the criteria established in this section or in section 3 of this act, the commissioner may, by regulation, revise or update the criteria accordingly.

195. Section 5 of P.L.2004, c.136 (C.26:2H-12.31) is amended to read as follows:

C.26:2H-12.31 Awarding of matching grants to designated stroke centers.

5. a. In order to encourage and ensure the establishment of stroke centers throughout the State, the Commissioner of Health shall award matching grants to hospitals that seek designation as stroke centers and demonstrate a need for financial assistance to develop the necessary infrastructure, including personnel and equipment, in order to satisfy the criteria for designation provided pursuant to this act. The matching grants shall not exceed \$250,000 or 50% of the hospital's cost for developing the necessary infrastructure, whichever is less.

b. A hospital seeking designation as a stroke center shall apply to the commissioner for a matching grant, in a manner and on a form required by the commissioner, and provide such information as the commissioner deems necessary to determine if the hospital is eligible for the grant.

c. The commissioner may provide matching grants to as many hospitals as the commissioner deems appropriate, except that:

(1) Matching grant awards shall be made to at least two applicant hospitals in the northern region of this State (comprising Bergen, Hudson, Essex, Passaic, Morris, Sussex, and Warren counties), at least two applicant hospitals in the central region of this State (comprising Union, Somerset, Hunterdon, Mercer, Middlesex, and Monmouth counties) and at least two applicant hospitals in the southern region of this State (comprising Burlington, Camden, Gloucester, Salem, Cumberland, Cape May, Atlantic, and Ocean counties), provided in the case of each region that the applicant hospitals receiving the awards must be eligible therefor under the provisions of this act; and

(2) No more than 20% of the funds appropriated pursuant to this act shall be allocated to hospitals that seek designation as comprehensive stroke centers.

196. Section 6 of P.L.2004, c.136 (C.26:2H-12.32) is amended to read as follows:

C.26:2H-12.32 Report to Governor, Legislature.

6. The Commissioner of Health shall, not later than September 1, 2005, prepare and submit to the Governor, the President of the Senate, and the Speaker of the General Assembly a report indicating, as of June 30, 2005, the total number of hospitals that shall have applied for grants under section 5 of this act and the number of those applicants that shall have been found to be eligible for such grants, the total number of grants awarded, the name and address of each grantee hospital and the amount of the award to each, and the amount of each award that shall have been paid to the grantee.

197. Section 1 of P.L.2007, c.65 (C.26:2H-12.33) is amended to read as follows:

C.26:2H-12.33 Availability of certain information on departmental website.

1. a. The Department of Health shall make available to the public, through its official department website, information regarding:

(1) the ownership of each long-term care facility and adult day health services facility licensed by the department; and

(2) any violation of statutory standards or rules and regulations of the department pertaining to the care of patients or physical plant standards found at any such facility by the department.

b. The information made available to the public pursuant to subsection a. of this section shall be provided in a manner that would enable a

member of the public to search the website by name of a facility or its owner in order to access the information. The department shall also make the information available in writing, upon request.

c. The information regarding the ownership of a long-term care or adult day health services facility that is made available to the public pursuant to subsection a. of this section shall provide, at a minimum: the name of the owner of a facility as listed on the facility's license and, if there is more than one owner or the facility is owned by a corporation, the name of each person who holds at least a 10% interest in the facility; the name of any other licensed long-term care or adult day health services facility in the State owned by this owner, corporation, and each person who holds at least a 10% interest in the facility, as applicable; and the address and contact information for the facility.

d. The information that is displayed on the official department website pursuant to subsection a. of this section shall include Internet web links to the New Jersey Report Card for Nursing Homes maintained by the department and the Medicare Nursing Home Compare database maintained by the federal Centers for Medicare & Medicaid Services.

198. Section 1 of P.L.2007, c.74 (C.26:2H-12.34) is amended to read as follows:

C.26:2H-12.34 Training required for service as trustee of general hospital, conditions.

1. a. (1) As a condition of serving as a member of the board of trustees of a general hospital licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et al.), a person shall be required to complete a training program approved by the Commissioner of Health that is designed to clarify the roles and duties of a hospital trustee and is at least one day in length.

(2) The training shall be completed no later than six months after the date that the person is appointed as a member of the board, except that a person who is appointed as a member of a hospital board of trustees on or after the date of enactment of this act but prior to the effective date thereof shall complete the training no later than six months after the effective date.

(3) A person who was appointed as a member of a hospital board of trustees prior to the date of enactment of P.L.2007, c.74 shall complete the training no later than six months after the effective date of P.L.2008, c.57.

b. The commissioner shall, in consultation with the New Jersey Hospital Association, the Hospital Alliance of New Jersey, and the New Jersey Council of Teaching Hospitals:

(1) prescribe the subject matter of the training, which shall include, but need not be limited to, a review of the types of financial, organizational, le-

gal, regulatory, and ethical issues that a hospital trustee may be required to consider in the course of discharging the trustee's governance responsibilities;

(2) arrange for, or specify, the entity or entities to provide the training;

(3) specify the timeframe within which the training is to be completed;

(4) certify completion of the training for each trustee upon receipt of documentation thereof, as provided on a form and in a manner prescribed by the commissioner, or otherwise arrange for certification by the training entity; and

(5) take such other actions as the commissioner determines appropriate to effectuate the purposes of this act.

199. Section 2 of P.L.2007, c.120 (C.26:2H-12.36) is amended to read as follows:

C.26:2H-12.36 Hospitals required to implement an infection program, reporting of cases of MRSA.

2. a. Within one month after the effective date of this act, all general hospitals licensed by the Department of Health pursuant to P.L.1971, c.136 (C.26:2H-1 et al.) shall implement an infection prevention program in their intensive care unit or units, as applicable, and if the hospital has no intensive care unit, then in another high-risk unit such as a surgical unit, or other unit where there is significant risk of facility-acquired infections.

Ultimately, the hospital shall expand the infection prevention program to all areas of the hospital, with the exception of an inpatient psychiatric unit, if applicable. The expansion of the infection prevention program shall be completed as quickly as feasible, taking into account the hospital's patient population, physical plant, and other facility-specific circumstances.

b. In addition to any other best practices and effective strategies, the hospital shall incorporate the following strategies:

(1) identification and isolation of both colonized and infected patients by screening patients upon admission in order to break the chain of transmission;

(2) contact precautions for patients found to be MRSA positive, as "contact precautions" is defined by the Centers for Disease Control and Prevention;

(3) patient cultures for MRSA upon discharge or transfer from the unit where the infection prevention program has been implemented, and flagging of patients who are readmitted to the hospital;

(4) strict adherence to hygiene guidelines;

(5) a written infections prevention and control policy with input from frontline caregivers; and

(6) a worker education requirement regarding modes of transmission of MRSA, use of protective equipment, disinfection policies and procedures, and other preventive measures.

c. A general hospital shall report to the Department of Health, in a manner and according to a schedule prescribed by the Commissioner of Health, the number of cases of hospital-acquired MRSA that occur in its facility.

200. Section 3 of P.L.2007, c.120 (C.26:2H-12.37) is amended to read as follows:

C.26:2H-12.37 Violations, penalties.

3. A general hospital that is in violation of the provisions of this act shall be subject to such penalties as the Commissioner of Health may determine pursuant to sections 13 and 14 of P.L.1971, c.136 (C.26:2H-13 and 26:2H-14).

201. Section 2 of P.L.2007, c.196 (C.26:2H-12.40) is amended to read as follows:

C.26:2H-12.40 Findings, declarations relative to reporting of infection rates by hospitals.

2. The Legislature finds and declares:

a. Health care facility-associated infections constitute a major public health problem in this country, affecting from 5% to 10% of hospitalized patients annually, resulting in an estimated two million infections, and 90,000 deaths, and adding an estimated \$4.5 to \$5.7 billion in health care costs;

b. Many health care facility-associated infections can be prevented, and a goal of zero health care facility-associated infections is desirable. There are many simple and effective practices in hospitals that can dramatically reduce the incidence of health care facility-associated infections, such as hand washing, using gloves and properly sterilized equipment, and following the same established best practices, every time, for procedures such as the insertion of an intravenous tube to deliver fluids and medication;

c. The uniform reporting of health care facility-associated infections to the State, and the review and analysis of this data by the Department of Health, will provide a measurable means to assist hospitals in improving patient outcomes;

d. The federal Centers for Disease Control and Prevention recommends that states establishing public reporting systems for health care facil-

ity-associated infections focus on major site categories to report rates of health care facility-associated infections related to procedures and conditions including, but not limited to, urinary tract infections, surgical site infections, ventilator-associated pneumonia, and central line-related bloodstream infections. A focus on major site categories helps ensure that data collection is concentrated in populations where health care facility-associated infections are more prevalent, and that the infection rates reported are most useful for targeting prevention practices and making comparisons among hospitals and within hospitals, over time;

e. The Department of Health currently provides comparative hospital performance data in its annual New Jersey Hospital Performance Report, and including information about hospital infection rates will further enhance the value of the report to the public and health care providers; and

f. Therefore, it is a matter of public health and fiscal policy that patients in New Jersey's hospitals receive health care that incorporates best practices in infection control, not only to protect their health and lives, but also to ensure the economic viability of New Jersey's hospitals.

202. Section 3 of P.L.2007, c.196 (C.26:2H-12.41) is amended to read as follows:

C.26:2H-12.41 Quarterly reports by general hospital to Department of Health.

3. A general hospital licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et al.) shall be required to report quarterly to the Department of Health, in a form and manner prescribed by the Commissioner of Health:

a. process quality indicators of hospital infection control that have been identified by the federal Centers for Medicare & Medicaid Services, as selected by the commissioner in consultation with the Quality Improvement Advisory Committee within the department; and

b. beginning 30 days after the adoption of regulations pursuant to this act, data on infection rates for the major site categories that define health care facility-associated infection locations, multiple infections, and device-related and non-device related infections, identified by the federal Centers for Disease Control and Prevention, as selected by the commissioner in consultation with the Quality Improvement Advisory Committee within the department.

203. Section 5 of P.L.2007, c.196 (C.26:2H-12.43) is amended to read as follows:

C.26:2H-12.43 Information available to public on Internet website.

5. The commissioner shall make available to members of the public, on the official Internet website of the Department of Health, the information reported pursuant to this act, in such a format as the commissioner deems appropriate to enable comparison among hospitals, with respect to the information, and shall include information in the New Jersey Hospital Performance Report annually issued by the commissioner that measures the performance of general hospitals in the State with respect to process quality indicators and health care facility-associated infection among patients.

204. Section 3 of P.L.2007, c.247 (C.26:2H-12.48) is amended to read as follows:

C.26:2H-12.48 Provision of copy of brochure to pregnant patients.

3. A health care professional shall provide to each patient to whom that individual is providing prenatal care, as early as practicable in the health care professional's therapeutic relationship with the patient, preferably in the first trimester, a copy of the brochure prepared by the Division of Family Health Services in the Department of Health that may be downloaded from the website of the department, which is designed to answer common questions about umbilical cord and placental blood donation and storage, including the NMDP-affiliated public umbilical cord blood bank and private umbilical cord blood bank options and the differences between and benefits of these options. The health care professional shall offer to discuss the information contained in the brochure with the patient.

205. Section 2 of P.L.2008, c.59 (C.26:2H-12.51) is amended to read as follows:

C.26:2H-12.51 Notice of meeting on department's website.

2. The Department of Health shall post the notice of a hospital's annual public meeting on the department's website.

206. Section 1 of P.L.2008, c.60 (C.26:2H-12.52) is amended to read as follows:

C.26:2H-12.52 Limitation on charges for certain uninsured patients.

1. A hospital licensed by the Department of Health pursuant to P.L.1971, c.136 (C.26:2H-1 et al.) shall charge a patient who is an uninsured resident of this State, and whose family gross income is less than 500% of the federal poverty level, an amount no greater than 115% of the applicable payment rate under the federal Medicare program, established pursuant to

Pub.L.89-97 (42 U.S.C.s.1395 et seq.), for the health care services rendered to the patient. The amount shall be in accordance with the sliding scale based on income developed by the department pursuant to this act.

207. Section 2 of P.L.2008, c.60 (C.26:2H-12.53) is amended to read as follows:

C.26:2H-12.53 Sliding scale for certain hospital charges.

2. The Department of Health shall establish a sliding scale based on income which stipulates the percentage of a hospital charge that an uninsured resident of this State whose family gross income is less than 500% of the federal poverty level is required to pay for health care services rendered at a hospital.

208. Section 2 of P.L.2009, c.61 (C.26:2H-12.57) is amended to read as follows:

C.26:2H-12.57 Written informational sheet for assisted living facilities.

2. The Department of Health, in consultation with the Division of Medical Assistance and Health Services in the Department of Human Services, shall prepare a written informational sheet for assisted living facilities that explains eligibility for participation in a federally approved 1915(c) Medicaid waiver program that provides assisted living services. The informational sheets shall be available on the website of the Department of Health and shall be updated by the Department of Health as necessary to reflect a change in eligibility for the programs.

209. Section 3 of P.L.2009, c.61 (C.26:2H-12.58) is amended to read as follows:

C.26:2H-12.58 Distribution of informational sheets.

3. The Department of Health shall distribute the applicable informational sheets, prepared and updated pursuant to section 2 of this act, to all licensed assisted living facilities in the State.

210. Section 1 of P.L.2010, c.61 (C.26:2H-12.59) is amended to read as follows:

C.26:2H-12.59 Online brochure relative to bone marrow donation.

1. a. The Commissioner of Health shall prepare an online brochure for display on the Internet website of the Department of Health, based upon information derived from the National Marrow Donor Program, or NMDP,

which may be downloaded by physicians and utilized by the commissioner for the purposes of subsection c. of this section, and shall be designed to inform patients of the option to become a bone marrow or peripheral blood stem cell, or PBSC, donor by registering with the NMDP and to answer common questions about bone marrow and peripheral blood stem cell, or PBSC, donation.

b. The brochure shall describe:

(1) the health benefits to the community from making a bone marrow or PBSC donation through the NMDP;

(2) how to register with the NMDP;

(3) the procedures for making a bone marrow or PBSC donation through the NMDP, including notice that there is no charge to the donor or the donor's family for making the donation;

(4) the circumstances and procedures by which a patient may receive a transfusion of the patient's previously donated blood; and

(5) any other aspects of bone marrow or PBSC donation that the commissioner deems appropriate for the purposes of this act.

c. The commissioner, within the limits of resources available to the Department of Health for this purpose, shall seek to promote awareness among physicians and the general public in this State about the option to become a bone marrow or PBSC donor. In doing so, the commissioner shall consult with at least the following: the Medical Society of New Jersey, the Institute of Medicine and Public Health of New Jersey, the NMDP, and other organizations that are seeking to increase bone marrow and PBSC donation among various ethnic groups within the State in need of these donations.

211. Section 1 of P.L.2011, c.16 (C.26:2H-12.61) is amended to read as follows:

C.26:2H-12.61 Discharge of patients from certain residences; provision for care in alternate facility.

1. a. If a facility licensed to operate as an assisted living residence or comprehensive personal care home pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) opts to surrender its license and has promised a resident of the facility or the resident's responsible party, in writing through a resident agreement or other instrument, or through a condition of licensure or certificate of need with the Department of Health, that it will not discharge a resident who becomes Medicaid-eligible, as that term is defined in section 1 of P.L.2001, c.234 (C.26:2H-12.16), the facility shall escrow sufficient funds, as determined by the Commissioner of Health, to cover the cost of provid-

ing a resident with care in an alternate State-licensed assisted living residence or comprehensive personal care home for as long as the resident shall require care.

b. The facility shall cover any costs necessary to utilize actuarial services as the Department of Health may require to determine the amount to be escrowed pursuant to subsection a. of this section.

c. In the event of a facility bankruptcy, any monies left over after all creditors have been paid shall be used, to the maximum extent practicable, to cover the cost of care provided to a resident in an alternate State-licensed assisted living residence or comprehensive personal care home pursuant to subsection a. of this section.

212. Section 7 of P.L.2007, c.225 (C.26:2H-14.14) is amended to read as follows:

C.26:2H-14.14 Violations, penalties.

7. A covered health care facility licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et al.) that is in violation of the provisions of this act shall be subject to such penalties as the Department of Health may determine pursuant to sections 13 and 14 of P.L.1971, c.136 (C.26:2H-13 and 26:2H-14).

213. Section 8 of P.L.2007, c.225 (C.26:2H-14.15) is amended to read as follows:

C.26:2H-14.15 Rules, regulations.

8. The Commissioner of Health shall adopt rules and regulations pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), within 12 months of the date of enactment of this act, to carry out the purposes of this act.

214. Section 3 of P.L.1987, c.299 (C.26:2H-18c) is amended to read as follows:

C.26:2H-18c Designation of specialty acute care children's hospital for southern New Jersey.

3. a. The Commissioner of Health, subject to the provisions of subsection b. of this section, shall designate Cooper University Hospital in the City of Camden as the State's specialty acute care children's hospital in southern New Jersey for the counties of Atlantic, Burlington, Camden, Cape May, Cumberland, Gloucester, and Salem.

b. The designation by the Commissioner of Health pursuant to subsection a. of this section shall be made subsequent to, and shall be contingent

upon, the execution of a written agreement between Cooper University Hospital and a majority of the acute care hospitals providing inpatient pediatric services which are located in the counties listed in subsection a. of this section.

The written agreement shall state that the other facility recognizes Cooper University Hospital as the State's specialty acute care children's hospital for the counties listed in subsection a. of this section and shall set forth the basis on which the other facility shall make referrals to Cooper University Hospital.

215. Section 1 of P.L.1992, c.181 (C.26:2H-18d) is amended to read as follows:

C.26:2H-18d Designation of specialty acute care children's hospital for central New Jersey.

1. a. The Commissioner of Health, subject to the provisions of subsection b. of this section, shall designate Robert Wood Johnson University Hospital/St. Peter's University Hospital in the City of New Brunswick as the State's specialty acute care children's hospital in central New Jersey for the counties of Hunterdon, Mercer, Middlesex, and Somerset.

b. The designation by the Commissioner of Health pursuant to subsection a. of this section shall be made subsequent to, and shall be contingent upon, the execution of a written agreement between Robert Wood Johnson University Hospital/St. Peter's University Hospital and a majority of the acute care hospitals providing inpatient pediatric services which are located in the counties listed in subsection a. of this section.

The written agreement shall state that the other facility recognizes Robert Wood Johnson University Hospital/St. Peter's University Hospital as the State's specialty acute care children's hospital for the counties listed in subsection a. of this section and shall set forth the basis on which the other facility shall make referrals to Robert Wood Johnson University Hospital/St. Peter's University Hospital.

216. Section 1 of P.L.1993, c.374 (C.26:2H-18e) is amended to read as follows:

C.26:2H-18e Designation of specialty acute care children's hospital for Bergen, Passaic, Sussex, and Warren counties.

1. a. The Commissioner of Health, subject to the provisions of subsection b. of this section, shall designate St. Joseph's Hospital and Medical Center in the City of Paterson as the State's specialty acute care children's hospital for the counties of Bergen, Passaic, Sussex, and Warren.

b. The designation by the Commissioner of Health pursuant to subsection a. of this section shall be made subsequent to, and shall be contingent upon, the execution of a written agreement between St. Joseph's Hospital and Medical Center and a majority of the acute care hospitals providing inpatient pediatric services which are located in the counties listed in subsection a. of this section.

The written agreement shall state that the other facility recognizes St. Joseph's Hospital and Medical Center as the State's specialty acute care children's hospital for the counties listed in subsection a. of this section and shall set forth the basis on which the other facility shall make referrals to St. Joseph's Hospital and Medical Center.

217. Section 2 of P.L.2003, c.98 (C.26:2H-18f) is amended to read as follows:

C.26:2H-18f Designation of specialty acute care children's hospital for Morris and Union counties.

2. a. The Commissioner of Health, subject to the provisions of subsection b. of this section, shall designate Morristown Memorial Hospital as the State's specialty acute care children's hospital for Morris and Union counties.

b. The designation by the Commissioner of Health pursuant to subsection a. of this section shall be made subsequent to, and shall be contingent upon, the execution of written transfer agreements between Morristown Memorial Hospital and a majority of the acute care hospitals providing inpatient pediatric services which are located in Morris and Union counties.

The written agreement shall state that the other facility recognizes Morristown Memorial Hospital as the State's specialty acute care children's hospital for Morris and Union counties and shall set forth the basis on which the other facility shall make referrals to Morristown Memorial Hospital.

218. Section 1 of P.L.2005, c.116 (C.26:2H-18g) is amended to read as follows:

C.26:2H-18g Designation of acute care children's hospitals for Monmouth and Ocean counties.

1. a. The Commissioner of Health, subject to the provisions of subsection b. of this section, shall designate Jersey Shore University Medical Center and Monmouth Medical Center, each, as the State's specialty acute care children's hospitals for Monmouth and Ocean counties, subject to the commissioner's determination that each hospital meets all of the licensure criteria that apply to a children's hospital and has met and complied with all of

the requirements to obtain State authorization to offer the component services that constitute a children's hospital. The commissioner's determination and the designation pursuant thereto shall be made separately for each hospital; and the commissioner's decision on the designation of each hospital shall be made independently of, and shall not be contingent upon, the decision on the designation of the other hospital.

b. The designation of each hospital by the Commissioner of Health pursuant to subsection a. of this section shall be made subsequent to, and shall be contingent upon, the execution of written transfer agreements, respectively, between: Jersey Shore University Medical Center and a majority of the acute care hospitals providing inpatient pediatric services located in Monmouth and Ocean counties; and Monmouth Medical Center and a majority of the acute care hospitals providing inpatient pediatric services located in Monmouth and Ocean counties.

The written agreement shall state that the other facility recognizes Jersey Shore University Medical Center and Monmouth Medical Center, as applicable, as the State's specialty acute care children's hospitals for Monmouth and Ocean counties and shall set forth the basis on which the other facility shall make referrals to Jersey Shore University Medical Center or Monmouth Medical Center, as applicable.

219. Section 1 of P.L.2011, c.208 (C.26:2H-18h) is amended to read as follows:

C.26:2H-18h Specialized care facilities for Huntington's Disease; rules, regulations.

1. a. The Commissioner of Health may issue a nursing facility license for a facility that provides care for Huntington's Disease.

b. The commissioner, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), may adopt rules and regulations to effectuate the purposes of this act.

220. Section 2 of P.L.1992, c.160 (C.26:2H-18.52) is amended to read as follows:

C.26:2H-18.52 Definitions relative to provision of health care services to low income persons.

2. As used in sections 1 through 17 of P.L.1992, c.160 (C.26:2H-18.51 through 26:2H-18.67), sections 12 through 15 of P.L.1995, c.133 (C.26:2H-18.59a through C.26:2H-18.59d), sections 7 through 12 of P.L.1996, c.28 (C.26:2H-18.59e et al.) and sections 6, 8, 10 and 11 of

P.L.1997, c.263 (C.26:2H-18.58e, C.26:2H-18.58f, C.26:2H-18.58d and C.26:2H-18.59h):

"Administrator" means the administrator of the Health Care Subsidy Fund appointed by the commissioner.

"Charity care" means care provided at disproportionate share hospitals that may be eligible for a charity care subsidy pursuant to this act.

"Charity care subsidy" means the component of the disproportionate share payment that is attributable to care provided at a disproportionate share hospital to persons unable to pay for that care, as provided in this act.

"Commission" means the New Jersey Essential Health Services Commission established pursuant to section 4 of this act.

"Commissioner" means the Commissioner of Health.

"Department" means the Department of Health.

"Disproportionate share hospital" means a hospital designated by the Commissioner of Human Services pursuant to Pub.L.89-97 (42 U.S.C. s.1396a et seq.) and Pub.L.102-234.

"Disproportionate share payment" means those payments made by the Division of Medical Assistance and Health Services in the Department of Human Services to hospitals defined as disproportionate share hospitals by the Commissioner of Human Services in accordance with federal laws and regulations applicable to hospitals serving a disproportionate number of low income patients.

"Fund" means the Health Care Subsidy Fund established pursuant to section 8 of this act.

"Hospital" means an acute care hospital licensed by the Department of Health pursuant to P.L.1971, c.136 (C.26:2H-1 et al.).

"Medicaid" means the New Jersey Medical Assistance and Health Services Program in the Department of Human Services established pursuant to P.L.1968, c.413 (C.30:4D-1 et seq.).

"Medicare" means the program established pursuant to Pub.L.89-97 (42 U.S.C. s.1395 et seq.).

221. Section 2 of P.L.2006, c.87 (C.26:2H-18.55a) is amended to read as follows:

C.26:2H-18.55a Compilation of information relative to employed recipients of charity care.

2. a. The Commissioner of Health shall compile, to the extent data are available, the following information about recipients of charity care who are employed:

(1) the employer's name and address;
(2) the number of recipients of charity care who are employed by the employer; and

(3) the cost to the State of providing charity care for the employer's employees and their dependents.

b. In order to compile the information required pursuant to this section, the commissioner may require hospitals and other health care facilities to submit such information as may be necessary for this purpose.

c. The commissioner may include comparable information about recipients of other public health care coverage programs, and other information as the commissioner deems appropriate regarding employer-based coverage for persons covered under public insurance programs.

d. The information compiled by the commissioner shall not include the name of any charity care recipient or any family member of a recipient.

e. The commissioner shall provide the information required pursuant to this section to the Commissioner of Human Services for inclusion in the annual report on Access to Employer-Based Health Insurance, as provided in section 1 of P.L.2006, c.87 (C.30:4J-17).

222. Section 7 of P.L.1992, c.160 (C.26:2H-18.57) is amended to read as follows:

C.26:2H-18.57 Assessment of per adjusted admission charge.

7. a. Effective January 1, 1994, the Department of Health shall assess each hospital a per adjusted admission charge of \$10.

Of the revenues raised by the hospital per adjusted admission charge, \$5 per adjusted admission shall be used by the department to carry out its duties pursuant to P.L.1992, c.160 (C.26:2H-18.51 et al.) and \$5 per adjusted admission shall be used by the department for administrative costs related to health planning.

b. Effective July 1, 2004, the department shall assess each licensed ambulatory care facility that is licensed to provide one or more of the following ambulatory care services: ambulatory surgery, computerized axial tomography, comprehensive outpatient rehabilitation, extracorporeal shock wave lithotripsy, magnetic resonance imaging, megavoltage radiation oncology, positron emission tomography, orthotripsy, and sleep disorder services. The Commissioner of Health may, by regulation, add additional categories of ambulatory care services that shall be subject to the assessment if such services are added to the list of services provided in N.J.A.C.8:43A-2.2(b) after the effective date of P.L.2004, c.54.

The assessment established in this subsection shall not apply to an ambulatory care facility that is licensed to a hospital in this State as an off-site ambulatory care service facility.

(1) For Fiscal Year 2005, the assessment on an ambulatory care facility providing one or more of the services listed in this subsection shall be based on gross receipts for the 2003 tax year as follows:

(a) a facility with less than \$300,000 in gross receipts shall not pay an assessment; and

(b) a facility with at least \$300,000 in gross receipts shall pay an assessment equal to 3.5% of its gross receipts or \$200,000, whichever amount is less.

The commissioner shall provide notice no later than August 15, 2004 to all facilities that are subject to the assessment that the first payment of the assessment is due October 1, 2004 and that proof of gross receipts for the facility's tax year ending in calendar year 2003 shall be provided by the facility to the commissioner no later than September 15, 2004. If a facility fails to provide proof of gross receipts by September 15, 2004, the facility shall be assessed the maximum rate of \$200,000 for Fiscal Year 2005.

The Fiscal Year 2005 assessment shall be payable to the department in four installments, with payments due October 1, 2004, January 1, 2005, March 15, 2005 and June 15, 2005.

(2) For Fiscal Year 2006, the commissioner shall use the calendar year 2004 data submitted in accordance with subsection c. of this section to calculate a uniform gross receipts assessment rate for each facility with gross receipts over \$300,000 that is subject to the assessment, except that no facility shall pay an assessment greater than \$200,000. The rate shall be calculated so as to raise the same amount in the aggregate as was assessed in Fiscal Year 2005. A facility shall pay its assessment to the department in four payments in accordance with a timetable prescribed by the commissioner.

(3) Beginning in Fiscal Year 2007 and for each fiscal year thereafter through Fiscal Year 2010, the uniform gross receipts assessment rate calculated in accordance with paragraph (2) of this subsection shall be applied to each facility subject to the assessment with gross receipts over \$300,000, as those gross receipts are documented in the facility's most recent annual report to the department, except that no facility shall pay an assessment greater than \$200,000. A facility shall pay its annual assessment to the department in four payments in accordance with a timetable prescribed by the commissioner.

(4) Beginning in Fiscal Year 2011 and for each fiscal year thereafter, the uniform gross receipts assessment shall be applied at the rate of 2.95% to each facility subject to the assessment with gross receipts over \$300,000, as those gross receipts are documented in the facility's most recent annual

report submitted to the department pursuant to subsection c. of this section, except that no facility shall pay an assessment greater than \$350,000. A facility shall pay its annual assessment to the department in four payments in accordance with a timetable prescribed by the commissioner.

c. Each ambulatory care facility that is subject to the assessment provided in subsection b. of this section shall submit an annual report including, at a minimum, data on volume of patient visits, charges, and gross revenues, by payer type, for patient services, beginning with calendar year 2004 data. The annual report shall be submitted to the department according to a timetable and in a form and manner prescribed by the commissioner.

The department may audit selected annual reports in order to determine their accuracy.

d. (1) If, upon audit as provided for in subsection c. of this section, it is determined that an ambulatory care facility understated its gross receipts in its annual report to the department, the facility's assessment for the fiscal year that was based on the defective report shall be retroactively increased to the appropriate amount and the facility shall be liable for a penalty in the amount of the difference between the original and corrected assessment.

(2) A facility that fails to provide the information required pursuant to subsection c. of this section shall be liable for a civil penalty not to exceed \$500 for each day in which the facility is not in compliance.

(3) A facility that is operating one or more of the ambulatory care services listed in subsection b. of this section without a license from the department, on or after July 1, 2004, shall be liable for double the amount of the assessment provided for in subsection b. of this section, in addition to such other penalties as the department may impose for operating an ambulatory care facility without a license.

(4) The commissioner shall recover any penalties provided for in this subsection in an administrative proceeding in accordance with the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.).

e. The revenues raised by the ambulatory care facility assessment pursuant to this section shall be deposited in the Health Care Subsidy Fund established pursuant to section 8 of P.L.1992, c.160 (C.26:2H-18.58).

223. Section 8 of P.L.1992, c.160 (C.26:2H-18.58) is amended to read as follows:

C.26:2H-18.58 Health Care Subsidy Fund.

8. There is established the Health Care Subsidy Fund in the Department of Health.

a. The fund shall be comprised of revenues from employee and employer contributions made pursuant to section 29 of P.L.1992, c.160 (C.43:21-7b), revenues from the hospital assessment made pursuant to section 12 of P.L.1992, c.160 (C.26:2H-18.62), revenues pursuant to section 11 of P.L.1996, c.28 (C.26:2H-18.58c), revenues from interest and penalties collected pursuant to this act and revenues from other sources as the Legislature shall determine. Interest earned on the monies in the fund shall be credited to the fund. The fund shall be a nonlapsing fund dedicated for use by the State to: (1) distribute charity care and other uncompensated care disproportionate share payments to hospitals, and other eligible providers pursuant to section 8 of P.L.1996, c.28 (C.26:2H-18.59f), provide subsidies for the Health Access New Jersey program established pursuant to section 15 of P.L.1992, c.160 (C.26:2H-18.65), and provide funding for children's health care coverage in the NJ FamilyCare Program pursuant to P.L.2005, c.156 (C.30:4J-8 et al.); (2) provide funding for federally qualified health centers pursuant to section 12 of P.L.1992, c.160 (C.26:2H-18.62); and (3) provide for the payment in State fiscal year 2002 of appropriate Medicaid expenses, subject to the approval of the Director of the Division of Budget and Accounting.

b. The fund shall be administered by a person appointed by the commissioner.

The administrator of the fund is responsible for overseeing and coordinating the collection and reimbursement of fund monies. The administrator is responsible for promptly informing the commissioner if monies are not or are not reasonably expected to be collected or disbursed.

c. The commissioner shall adopt rules and regulations to ensure the integrity of the fund, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.).

d. The administrator shall establish separate accounts for the charity care component of the disproportionate share hospital subsidy, other uncompensated care component of the disproportionate share hospital subsidy, federally qualified health centers funding, and the payments for subsidies for insurance premiums to provide care in disproportionate share hospitals, known as the Health Access New Jersey subsidy account, respectively.

e. In the event that the charity care component of the disproportionate share hospital subsidy account has a surplus in a given year after payments are distributed pursuant to the methodology established in section 13 of P.L.1995, c.133 (C.26:2H-18.59b) and section 7 of P.L.1996, c.28 (C.26:2H-18.59e) and within the limitations provided in subsection e. of section 9 of P.L.1992, c.160 (C.26:2H-18.59), the surplus monies in calen-

dar years 2002, 2003 and 2004 shall lapse to the unemployment compensation fund established pursuant to R.S.43:21-9, and each year thereafter shall lapse to the charity care component of the disproportionate share hospital subsidy account for distribution in subsequent years.

224. Section 6 of P.L.1997, c.263 (C.26:2H-18.58e) is amended to read as follows:

C.26:2H-18.58e Transfer of funds to Hospital Relief Fund.

6. a. The Commissioner of Health shall transfer to the Hospital Health Care Subsidy account, known as the Hospital Relief Fund, in the Division of Medical Assistance and Health Services in the Department of Human Services from the Health Care Subsidy Fund, \$50.75 million in fiscal year 1998 and \$101.5 million each fiscal year thereafter, according to a schedule to be determined by the Commissioner of Health in consultation with the Commissioner of Human Services. These funds shall be distributed to eligible disproportionate share hospitals according to a methodology adopted by the Commissioner of Human Services pursuant to N.J.A.C.10:52-8.2, using hospital expenditure data for the most recent calendar year available for reimbursements from these funds.

b. In fiscal year 1998 and each fiscal year thereafter, the Governor shall recommend and the Legislature shall appropriate to the Hospital Health Care Subsidy account for distribution to disproportionate share hospitals which are eligible for reimbursement pursuant to subsection a. of this section, those federal funds received in connection with the provision of hospital reimbursements from that account.

225. Section 8 of P.L.1997, c.263 (C.26:2H-18.58f) is amended to read as follows:

C.26:2H-18.58f Transfer of funds to Division of Medical Assistance and Health Services.

8. a. The Commissioner of Health shall transfer to the Division of Medical Assistance and Health Services in the Department of Human Services from the Health Care Subsidy Fund, \$23.8 million in fiscal year 1998, \$47.6 million in fiscal year 1999, and an amount in each succeeding fiscal year that is necessary to obtain the maximum amount of federal funds to which the State is entitled in order to provide children's health care coverage in the NJ FamilyCare Program pursuant to P.L.2005, c.156 (C.30:4J-8 et al.), according to a schedule to be determined by the Commissioner of Health in consultation with the Commissioner of Human Services. These

funds shall be expended to provide children's health care coverage in the NJ FamilyCare Program pursuant to P.L.2005, c.156.

b. In fiscal year 1999 and each fiscal year thereafter, the Governor shall recommend and the Legislature shall appropriate to the Division of Medical Assistance and Health Services for the purposes of subsection a. of this section, those federal funds received in connection with the provision of children's health care coverage in the NJ FamilyCare Program pursuant to P.L.2005, c.156.

226. Section 4 of P.L.1997, c.264 (C.26:2H-18.58g) is amended to read as follows:

C.26:2H-18.58g Disposition of revenue collected from cigarette tax.

4. Notwithstanding the provisions of any other law to the contrary,

a. commencing July 1, 1998 and ending June 30, 2006: after the deposit required pursuant to section 5 of P.L.1982, c.40 (C.54:40A-37.1), the first \$150,000,000 of revenue collected annually from the cigarette tax imposed pursuant to P.L.1948, c.65 (C.54:40A-1 et seq.) and the first \$5,000,000 of revenue collected annually from the "Tobacco Products Wholesale Sales and Use Tax Act," P.L.1990, c.39 (C.54:40B-1 et seq.), shall be deposited into the Health Care Subsidy Fund established pursuant to section 8 of P.L.1992, c.160 (C.26:2H-18.58); and the next \$390,000,000 of revenue collected annually from the cigarette tax imposed pursuant to P.L.1948, c.65 (C.54:40A-1 et seq.) shall be appropriated annually for health programs, and the next \$50,000,000 of revenue collected annually from the cigarette tax imposed pursuant to P.L.1948, c.65 (C.54:40A-1 et seq.) shall be appropriated annually to the New Jersey Economic Development Authority for payment of debt service incurred by the authority for school facilities projects and in fiscal years commencing July 1, 2002 and July 1, 2003, the next \$30,000,000 of revenue collected annually from the cigarette tax imposed pursuant to P.L.1948, c.65 (C.54:40A-1 et seq.) shall be directed to the Department of Health to fund anti-smoking initiatives, except that the amount shall be \$40,000,000 in the fiscal year commencing July 1, 2004 and \$45,000,000 in the fiscal year commencing July 1, 2005; and

b. commencing with fiscal years beginning on and after July 1, 2006, after the deposit required pursuant to section 5 of P.L.1982, c.40 (C.54:40A-37.1), the first \$150,000,000 of revenue collected annually from the cigarette tax imposed pursuant to P.L.1948, c.65 (C.54:40A-1 et seq.) and the first \$5,000,000 of revenue collected annually from the "Tobacco Products Wholesale Sales and Use Tax Act," P.L.1990, c.39 (C.54:40B-1 et

seq.), shall be deposited into the Health Care Subsidy Fund established pursuant to section 8 of P.L.1992, c.160 (C.26:2H-18.58). In addition, commencing with fiscal years beginning on and after July 1, 2006 but before July 1, 2009, there shall be deposited \$215,000,000 of revenue collected annually from the cigarette tax imposed pursuant to P.L.1948, c.65 (C.54:40A-1 et seq.) in accordance with the provisions of section 5 of P.L.2004, c.68 (C.34:1B-21.20), and, commencing with fiscal years beginning on and after July 1, 2009, there shall be deposited \$241,500,000 of revenue collected annually from the cigarette tax imposed pursuant to P.L.1948, c.65 (C.54:40A-1 et seq.) in accordance with the provisions of section 5 of P.L.2004, c.68 (C.34:1B-21.20).

227. Section 9 of P.L.1997, c.263 (C.26:2H-18.59) is amended to read as follows:

C.26:2H-18.59 Allocation of funds.

9. a. The commissioner shall allocate such funds as specified in subsection e. of this section to the charity care component of the disproportionate share hospital subsidy account. In a given year, the department shall transfer from the fund to the Division of Medical Assistance and Health Services in the Department of Human Services such funds as may be necessary for the total approved charity care disproportionate share payments to hospitals for that year.

b. For the period January 1, 1993 to December 31, 1993, the commission shall allocate \$500 million to the charity care component of the disproportionate share hospital subsidy account. The Department of Health shall recommend the amount that the Division of Medical Assistance and Health Services shall pay to an eligible hospital on a provisional, monthly basis pursuant to paragraphs (1) and (2) of this subsection. The department shall also advise the commission and each eligible hospital of the amount a hospital is entitled to receive.

(1) The department shall determine if a hospital is eligible to receive a charity care subsidy in 1993 based on the following:

$$\frac{\text{Hospital Specific Approved Uncompensated Care-1991}}{\text{Hospital Specific Preliminary Cost Base-1992}}$$

$$= \text{Hospital Specific \% Uncompensated Care (\%UC)}$$

A hospital is eligible for a charity care subsidy in 1993 if, upon establishing a rank order of the %UC for all hospitals, the hospital is among the 80% of hospitals with the highest %UC.

(2) The maximum amount of the charity care subsidy an eligible hospital may receive in 1993 shall be based on the following:

Hospital Specific Approved Uncompensated Care-1991
Total approved Uncompensated Care All Eligible Hospitals-1991

X \$500 million

= Maximum Amount of Hospital Specific Charity Care Subsidy for 1993

(3) A hospital shall be required to submit all claims for charity care cost reimbursement, as well as demographic information about the persons who qualify for charity care, to the department in a manner and time frame specified by the Commissioner of Health, in order to continue to be eligible for a charity care subsidy in 1993 and in subsequent years.

The demographic information shall include the recipient's age, sex, marital status, employment status, type of health insurance coverage, if any, and if the recipient is a child under 18 years of age who does not have health insurance coverage or a married person who does not have health insurance coverage, whether the child's parent or the married person's spouse, as the case may be, has health insurance.

(4) A hospital shall be reimbursed for the cost of eligible charity care at the same rate paid to that hospital by the Medicaid program; except that charity care services provided to emergency room patients who do not require those services on an emergency basis shall be reimbursed at a rate appropriate for primary care, according to a schedule of payments developed by the commission.

(5) The department shall provide for an audit of a hospital's charity care for 1993 within a time frame established by the department.

c. For the period January 1, 1994 to December 31, 1994, a hospital shall receive disproportionate share payments from the Division of Medical Assistance and Health Services based on the amount of charity care submitted to the commission or its designated agent, in a form and manner specified by the commission. The commission or its designated agent shall review and price all charity care claims and notify the Division of Medical Assistance and Health Services of the amount it shall pay to each hospital on a monthly basis based on actual services rendered.

(1) (Deleted by amendment, P.L.1995, c.133.)

(2) If the commission is not able to fully implement the charity care claims pricing system by January 1, 1994, the commission shall continue to make provisional disproportionate share payments to eligible hospitals, through the Division of Medical Assistance and Health Services, based on the charity care costs incurred by all hospitals in 1993, until such time as the commission is able to implement the claims pricing system.

If there are additional charity care balances available after the 1994 distribution based on 1993 charity care costs, the department shall transfer these available balances from the fund to the Division of Medical Assistance and Health Services for an approved one-time additional disproportionate share payment to hospitals according to the methodology provided in section 12 of P.L.1995, c.133 (C.26:2H-18.59a). The total payment for all hospitals shall not exceed \$75.5 million.

(3) A hospital shall be reimbursed for the cost of eligible charity care at the same rate paid to that hospital by the Medicaid program; except that charity care services provided to emergency room patients who do not require those services on an emergency basis shall be reimbursed at a rate appropriate for primary care, according to a schedule of payments developed by the commission.

(4) (Deleted by amendment, P.L.1995, c.133.)

d. (Deleted by amendment, P.L.1995, c.133.)

e. The total amount allocated for charity care subsidy payments shall be: in 1994, \$450 million; in 1995, \$400 million; in 1996, \$310 million; in 1997, \$300 million; for the period January 1, 1998 through June 30, 1998, \$160 million; and in fiscal year 1999 and each fiscal year thereafter through fiscal year 2004, \$320 million. Total payments to hospitals shall not exceed the amount allocated for each given year.

f. Beginning January 1, 1995:

(1) The charity care subsidy shall be determined pursuant to section 13 of P.L.1995, c.133 (C.26:2H-18.59b).

(2) A charity care claim shall be valued at the same rate paid to that hospital by the Medicaid program, except that charity care services provided to emergency room patients who do not require those services on an emergency basis shall be valued at a rate appropriate for primary care according to a schedule of payments adopted by the commissioner.

(3) The department shall provide for an audit of a hospital's charity care within a time frame established by the commissioner.

228. Section 9 of P.L.1996, c.28 (C.26:2H-18.59g) is amended to read as follows:

C.26:2H-18.59g Establishment of technology infrastructure to support the provision of charity care.

9. The Commissioner of Health, in consultation with the State Treasurer, shall establish a technology infrastructure to support the provision of charity care pursuant to P.L.1992, c.160 (C.26:2H-18.51 et al.).

The State Treasurer, in consultation with the Commissioners of Health and Human Services may, if deemed to be in the State's best interests, include system features and provisions in the technology infrastructure to satisfy the requirements of multiple programs and purposes, including, but not limited to, programs such as, Medicaid, food stamps, public assistance, and purposes such as the exchange and consolidation of health care information permitted by law, eligibility and identity verification, claims processing, the use of electronic patient identification technology, and electronic data interchange.

229. Section 3 of P.L.2004, c.113 (C.26:2H-18.59i) is amended to read as follows:

C.26:2H-18.59i Reimbursed documented charity care; charity care subsidy formula after July 1, 2004.

3. a. Beginning July 1, 2004 and each year thereafter:

(1) Reimbursed documented charity care shall be equal to the Medicaid-priced amounts of charity care claims submitted to the Department of Health for the most recent calendar year, adjusted, as necessary, to reflect the annual audit results. These amounts shall be augmented to reflect payments to hospitals by the Medicaid program for Graduate Medical Education and Indirect Medical Education based on the most recent Graduate Medical Education and Indirect Medical Education formulas utilized by the federal Medicare program.

(2) Hospital-specific reimbursed documented charity care shall be equal to the Medicaid-priced dollar amount of charity care provided by a hospital as submitted to the Department of Health for the most recent calendar year. A sample of the claims submitted by the hospital to the department shall be subject to an annual audit conducted pursuant to applicable charity care eligibility criteria.

b. Beginning July 1, 2004 and each year thereafter, the charity care subsidy shall be determined according to the following methodology:

(1) Each hospital shall be ranked in order of its hospital-specific, relative charity care percentage, or RCCP, by dividing the amount of hospital-

specific gross revenue for charity care patients by the hospital's total gross revenue for all patients.

(2) The nine hospitals with the highest RCCPs shall receive a charity care payment equal to 96% of each hospital's hospital-specific reimbursed documented charity care. The hospital ranked number 10 shall receive a charity care payment equal to 94% of its hospital-specific reimbursed documented charity care, and each hospital ranked number 11 and below shall receive two percentage points less than the hospital ranked immediately above that hospital.

(3) Notwithstanding the provisions of paragraph (2) of this subsection to the contrary, each of the hospitals located in the 10 municipalities in the State with the lowest median annual household income according to the most recent census data, shall be ranked from the hospital with the highest hospital-specific reimbursed documented charity care to the hospital with the lowest hospital-specific reimbursed documented charity care. The hospital in each of the 10 municipalities, if any, with the highest documented hospital-specific charity care shall receive a charity care payment equal to 96% of its hospital-specific reimbursed documented charity care.

(4) Notwithstanding the provisions of this subsection to the contrary, no hospital shall receive reimbursement for less than 43% of its hospital-specific reimbursed documented charity care.

c. To ensure that charity care subsidy payments remain viable and appropriate, the State shall maintain the charity care subsidy at an amount not less than 75% of the Medicaid-priced amounts of charity care provided by hospitals in the State. In addition, these amounts shall be augmented to reflect payments to hospitals by the Medicaid program for Graduate Medical Education and Indirect Medical Education based on the most recent Graduate Medical Education and Indirect Medical Education formulas utilized by the federal Medicare program.

d. Notwithstanding any other provisions of this section to the contrary, in the event that the change from the charity care subsidy formula in effect for fiscal year 2004 to the formula established pursuant to this section in effect for fiscal year 2005, reduces, for any reason, the amount of the charity care subsidy payment to a hospital below the amount that the hospital received under the formula in effect in fiscal year 2004, the hospital shall receive a payment equal to the amount it would have received under the formula in effect for fiscal year 2004.

230. Section 6 of P.L.2008, c.38 (C.26:2H-18.59j) is amended to read as follows:

C.26:2H-18.59j Charity claims by hospital, eligibility.

6. Notwithstanding the provisions of section 3 of P.L.2004, c.113 (C.26:2H-18.59i) to the contrary, a hospital shall not submit charity care claims to the Department of Health for health care services provided to a child under 19 years of age who presents at a hospital for emergency care and who may be deemed presumptively eligible for NJ FamilyCare coverage pursuant to P.L.2005, c.156 (C.30:4J-8 et al.) or Medicaid coverage pursuant to P.L.1968, c.413 (C.30:4D-1 et seq.).

231. Section 3 of P.L.2007, c.217 (C.26:2H-18.60c) is amended to read as follows:

C.26:2H-18.60c Required procedures by hospitals for charity care.

3. The Commissioner of Health shall require the use of procedures by hospitals to ensure their uniform collection from applicants for charity care pursuant to section 10 of P.L.1992, c.160 (C.26:2H-18.60) and the transmission to the Department of Health of demographic and financial information as the commissioner requires pursuant to section 14 of P.L.1995, c.133 (C.26:2H-18.59c) and any other information that the commissioner determines necessary to ensure the efficient, cost-effective operation of the hospital charity care subsidy program and to prevent and detect fraudulent charity care claims.

232. Section 4 of P.L.2007, c.217 (C.26:2H-18.60d) is amended to read as follows:

C.26:2H-18.60d Interagency agreement with Medicaid Inspector General.

4. a. The Commissioner of Health and the Medicaid Inspector General shall establish an inter-agency agreement under which the staff and resources of the Office of the Medicaid Inspector General are utilized to:

(1) investigate charity care claims, which that office or the Department of Health reasonably suspects may be fraudulent, with the same authority as that granted to the Medicaid Inspector General to investigate complaints related to Medicaid integrity, fraud, and abuse pursuant to P.L.2007, c.58 (C.30:4D-53 et al.); and

(2) recover monies from third party payers that were paid as charity care subsidies based upon fraudulent charity care claims.

b. The commissioner and the Medicaid Inspector General shall take such actions as are necessary to ensure that any monies recovered pursuant to subsection a. of this section are deposited in the Health Care Subsidy

Fund and used for the purposes of providing charity care subsidies pursuant to P.L.1992, c.160 (C.26:2H-18.51 et al.).

233. Section 5 of P.L.2007, c.217 (C.26:2H-18.60e) is amended to read as follows:

C.26:2H-18.60e Inter-agency agreement with State Treasurer.

5. The Commissioner of Health and the State Treasurer shall establish an inter-agency agreement under which the staff and resources of the Division of Taxation in the Department of the Treasury are utilized to conduct random checks of personal State income tax returns filed by persons determined eligible for charity care pursuant to section 10 of P.L.1992, c.160 (C.26:2H-18.60), in consultation with the commissioner, and with the Medicaid Inspector General pursuant to section 4 of P.L.2007, c.217 (C.26:2H-18.60d), for the purposes of determining the validity of charity care claims for health care services provided to those persons.

234. Section 7 of P.L.2007, c.217 (C.26:2H-18.60f) is amended to read as follows:

C.26:2H-18.60f Reporting system established.

7. The Commissioner of Health shall establish a mechanism, by means of a toll-free telephone hotline or electronic mail, through which persons may confidentially report suspected incidents of fraudulent charity care claims to the Department of Health.

235. Section 12 of P.L.1992, c.160 (C.26:2H-18.62) is amended to read as follows:

C.26:2H-18.62 Monies designated for Health Care Subsidy Fund; allocation of monies.

12. a. (Deleted by amendment, P.L.2005, c.237).
- b. (Deleted by amendment, P.L.2005, c.237).
- c. (1) Notwithstanding any law to the contrary, each general hospital and each specialty heart hospital shall pay .53% of its total operating revenue to the department for deposit in the Health Care Subsidy Fund. The hospital shall make monthly payments to the department beginning July 1, 1993. The commissioner shall determine the manner in which the payments shall be made.

For the purposes of this subsection, "total operating revenue" shall be defined by the department in accordance with financial reporting requirements established pursuant to N.J.A.C.8:31B-3.3 and shall include revenue

from any ambulatory care facility that is licensed to a general hospital as an off-site ambulatory care service facility.

(2) The commissioner shall allocate the monies paid by hospitals pursuant to paragraph (1) of this subsection as follows:

(a) In State fiscal years 2006 and 2007, \$35 million of those monies shall be allocated to the support of federally qualified health centers in this State, and the remainder shall be allocated to the support of (i) the infant mortality reduction program in the Department of Health, (ii) the primary care physician and dentist loan redemption program established in the Higher Education Student Assistance Authority by article 3 of P.L.1999, c.46 (C.18A:71C-32 et seq.), and (iii) the development and use of health information electronic data interchange technology pursuant to P.L.1999, c.154 (C.17B:30-23 et al.); and

(b) In State fiscal year 2008 and thereafter, \$40 million of those monies shall be allocated to the support of federally qualified health centers in this State.

Monies allocated to the support of federally qualified health centers in the State under this paragraph shall be used for the purpose of compensating them for health care services provided to uninsured patients.

d. The monies paid by the hospitals and allocated under subsection c. of this section for the support of federally qualified health centers shall be credited to the federally qualified health centers account.

e. (1) Monies paid by hospitals under subsection c. of this section in excess of \$40 million, federal matching funds received on account of such monies, and interest received on such payments and funds shall be allocated exclusively to support funding to hospitals.

(2) In the event that any approval, application, or other condition necessary for the implementation of this subsection and the distribution of funds pursuant thereto consistent with the Fiscal Year 2011 annual appropriations act is not obtained, granted, or satisfied, the Departments of Health and Human Services shall jointly prepare a plan concerning charity care and related hospital funding, which shall be subject to the approval of the Joint Budget Oversight Committee.

236. Section 3 of P.L.2008, c.33 (C.26:2H-18.76) is amended to read as follows:

C.26:2H-18.76 Health Care Stabilization Fund.

3. a. The Health Care Stabilization Fund is established as a nonlapsing, revolving fund in the Department of Health. The fund shall be administered by

the Department of Health in consultation with the Department of the Treasury. The fund shall be comprised of revenues as are appropriated by the Legislature from time to time, along with any interest earned on monies in the fund.

b. Monies from the fund shall be disbursed solely as grants to qualifying licensed health care facilities pursuant to eligibility criteria, and subject to conditions, prescribed by the Commissioner of Health in accordance with the requirements of this act.

237. Section 4 of P.L.2008, c.33 (C.26:2H-18.77) is amended to read as follows:

C.26:2H-18.77 Awarding of grant to health care facility; factors considered.

4. The Commissioner of Health, in consultation with the State Treasurer and the New Jersey Health Care Facilities Financing Authority, may award a grant to a hospital or other licensed health care facility from the fund if the commissioner determines that, due to extraordinary circumstances, the grant is necessary to maintain access to essential health care services or referral sources, as appropriate. In determining whether to award a grant to a licensed health care facility, the commissioner shall consider whether, at a minimum, the following factors are present:

- a. Extraordinary circumstances threaten access to essential health services for residents in a community;
- b. Persons in a community will be without ready access to essential health care services in the absence of the award of a grant from the fund;
- c. Funding is unavailable from other sources to preserve or provide essential health care services;
- d. A grant from the fund is likely to stabilize access to the essential health care services;
- e. There is a reasonable likelihood that the essential health care services will be sustainable upon the termination of the grant;
- f. The proposed recipient of the grant agrees to conditions established by the commissioner for receipt of a grant; and
- g. The hospital or other licensed health care facility serves a significant number of uninsured and underinsured persons.

238. Section 5 of P.L.2008, c.33 (C.26:2H-18.78) is amended to read as follows:

C.26:2H-18.78 Conditions for receipt of grant; rules, regulations; annual report.

5. a. The Commissioner of Health shall set reasonable conditions for the receipt of a grant by a general hospital or other licensed health care fa-

cility, which conditions may include, but need not be limited to, requirements to assure the efficient and effective delivery of health care services.

The facility shall agree to: the provision of essential health care services to the community as determined by the commissioner; facilitating the enrollment of individuals in appropriate government insurance programs; and providing the Department of Health with quality of care, utilization, and financial information as determined by the commissioner to be reasonable and necessary. In the case of a facility whose financial condition created or contributed to the extraordinary circumstances necessitating the award of the grant, the facility shall agree to such corrective steps to its governance, management, and business operations as the commissioner deems reasonable and appropriate in light of the facility's circumstances and the health care needs of the community.

b. Within one year of the award of a grant from the fund, the commissioner, in consultation with the State Comptroller, shall cause to be conducted an audit to evaluate:

(1) whether a grantee's use of the funds was consistent with the provisions of this act, the commissioner's regulations, and any conditions imposed upon the award of the grant; and

(2) whether a grantee's use of the funds furthered the purposes of this act.

c. The commissioner, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt such rules and regulations as are necessary to effectuate the purposes of this act. The regulations shall specify eligibility criteria for, and conditions that must be met by, a health care facility to receive a grant from the fund.

Notwithstanding any provision of P.L.1968, c.410 (C.52:14B-1 et seq.) to the contrary, the commissioner may adopt immediately upon filing with the Office of Administrative Law such regulations as the commissioner deems necessary to implement the provisions of this act, which shall be effective for a period not to exceed 270 days following enactment of this act and may thereafter be amended, adopted, or readopted by the department in accordance with the requirements of P.L.1968, c.410.

d. The commissioner shall annually, by March 1 of each year, submit a report on the Health Care Stabilization Fund to the Governor, and to the Legislature pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1). The commissioner shall include a copy of the report on the department's website.

The report shall identify the health care facilities that received grants during the reporting period, the purpose for which the grant was allocated to the facility, and the extent to which the awarding of the grant furthered

the purposes of this act. The report shall include a copy of any audits conducted pursuant to subsection b. of this section.

239. Section 3 of P.L.1997, c.78 (C.26:2H-81) is amended to read as follows:

C.26:2H-81 Rules, regulations.

3. The Commissioner of Health shall adopt rules and regulations pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.) necessary to carry out the provisions of this act.

240. Section 2 of P.L.1997, c.100 (C.26:2H-83) is amended to read as follows:

C.26:2H-83 Background checks for nurse aid, personal care assistant certification.

2. a. The Department of Health shall not issue a nurse aide or personal care assistant certification to any applicant, except on a conditional basis as provided for in subsection d. of section 3 of P.L.1997, c.100 (C.26:2H-84), unless the Commissioner of Health first determines, consistent with the requirements of sections 2 through 6 of P.L.1997, c.100 (C.26:2H-83 through 87), that no criminal history record information exists on file in the Federal Bureau of Investigation, Identification Division, or in the State Bureau of Identification in the Division of State Police, which would disqualify that person from being certified. A nurse aide or personal care assistant certified by the department prior to the effective date of P.L.2000, c.20 upon whom a criminal history record background check has not been conducted pursuant to sections 2 through 6 of P.L.1997, c.100 (C.26:2H-83 through 87), shall be required to undergo that criminal history record background check as a condition of that individual's initial recertification following the effective date of P.L.2000, c.20.

In addition, a follow-up criminal history record background check of federal records shall be conducted at least once every two years as a condition of recertification for every certified nurse aide and personal care assistant; except that the commissioner, in lieu of conducting follow-up criminal history record background checks for purposes of recertification, may provide for an alternative means of determining whether a certified nurse aide or personal care assistant has been convicted of a crime or disorderly persons offense which would disqualify that person from certification, including, but not limited to, a match of a person's Social Security number or other identifying information with records of criminal proceedings in this and other states. If the commissioner elects to implement this alternative

means of determining whether a certified nurse aide or personal care assistant has been convicted of a crime or disorderly persons offense which would disqualify that person from certification, the commissioner shall report to the Governor and the Legislature prior to its implementation on the projected costs and procedures to be followed with respect to its implementation and setting forth the rationale therefor.

A person shall be disqualified from certification if that person's criminal history record background check reveals a record of conviction of any of the following crimes and offenses:

(1) In New Jersey, any crime or disorderly persons offense:

(a) involving danger to the person, meaning those crimes and disorderly persons offenses set forth in N.J.S.2C:11-1 et seq., N.J.S.2C:12-1 et seq., N.J.S.2C:13-1 et seq., N.J.S.2C:14-1 et seq. or N.J.S.2C:15-1 et seq.; or

(b) against the family, children, or incompetents, meaning those crimes and disorderly persons offenses set forth in N.J.S.2C:24-1 et seq.; or

(c) involving theft as set forth in chapter 20 of Title 2C of the New Jersey Statutes; or

(d) involving any controlled dangerous substance or controlled substance analog as set forth in chapter 35 of Title 2C of the New Jersey Statutes except paragraph (4) of subsection a. of N.J.S.2C:35-10.

(2) In any other state or jurisdiction, of conduct which, if committed in New Jersey, would constitute any of the crimes or disorderly persons offenses described in paragraph (1) of this subsection.

b. Notwithstanding the provisions of subsection a. of this section, no person shall be disqualified from certification on the basis of any conviction disclosed by a criminal history record background check performed pursuant to sections 2 through 6 and section 14 of P.L.1997, c.100 (C.26:2H-83 through 87 and C.53:1-20.9a) if the person has affirmatively demonstrated to the Commissioner of Health clear and convincing evidence of the person's rehabilitation. In determining whether a person has affirmatively demonstrated rehabilitation, the following factors shall be considered:

(1) the nature and responsibility of the position which the convicted person would hold, has held or currently holds, as the case may be;

(2) the nature and seriousness of the offense;

(3) the circumstances under which the offense occurred;

(4) the date of the offense;

(5) the age of the person when the offense was committed;

(6) whether the offense was an isolated or repeated incident;

(7) any social conditions which may have contributed to the offense;

and

(8) any evidence of rehabilitation, including good conduct in prison or in the community, counseling or psychiatric treatment received, acquisition of additional academic or vocational schooling, successful participation in correctional work-release programs, or the recommendation of those who have had the person under their supervision.

c. If a person subject to the provisions of sections 2 through 6 of P.L.1997, c.100 (C.26:2H-83 through 87) refuses to consent to, or cooperate in, the securing of a criminal history record background check, the commissioner shall, as applicable:

(1) not issue a nurse aide or personal care assistant certification and shall notify the applicant, and the applicant's employer if the applicant is conditionally employed as provided in subsection d. of section 3 of P.L.1997, c.100 (C.26:2H-84) or the applicant's prospective employer if known, of that denial; or

(2) revoke the person's current nurse aide or personal care assistant certification and notify the person, and the person's employer, if known, of that revocation.

241. Section 3 of P.L.1997, c.100 (C.26:2H-84) is amended to read as follows:

C.26:2H-84 Qualification, disqualification for certification; petition for hearing.

3. a. An applicant for certification, or a certified nurse aide or personal care assistant who is required to undergo a criminal history record background check pursuant to section 2 of P.L.1997, c.100 (C.26:2H-83), shall submit to the Commissioner of Health that individual's name, address, and fingerprints taken on standard fingerprint cards by a State or municipal law enforcement agency. The commissioner is authorized to exchange fingerprint data with and receive criminal history record information from the Federal Bureau of Investigation and the Division of State Police for use in making the determinations required by sections 2 through 6 of P.L.1997, c.100 (C.26:2H-83 through 87).

b. Upon receipt of the criminal history record information for a person from the Federal Bureau of Investigation or the Division of State Police, the commissioner shall immediately notify, in writing, the applicant, and the applicant's employer if the applicant is conditionally employed as provided in subsection d. of this section or the applicant's prospective employer if known, or a certified nurse aide or personal care assistant who is required to undergo a criminal history record background check pursuant to section 2 of P.L.1997, c.100 (C.26:2H-83) and that person's employer, as applicable, of

the person's qualification or disqualification for certification under sections 2 through 6 of P.L.1997, c.100 (C.26:2H-83 through 87). If the person is disqualified, the conviction or convictions which constitute the basis for the disqualification shall be identified in the notice to the person, but shall not be identified in the notice to the person's employer or prospective employer.

c. The person who is the subject of the background check shall have 30 days from the date of the written notice of disqualification to petition the commissioner for a hearing on the accuracy of the person's criminal history record information or to establish the person's rehabilitation under subsection b. of section 2 of P.L.1997, c.100 (C.26:2H-83). The commissioner shall notify the person's employer or prospective employer of the person's petition for a hearing within five days following the receipt of the petition from the person. Upon the issuance of a final decision upon a petition to the commissioner pursuant to this subsection, the commissioner shall notify the person and the person's employer or prospective employer as to whether the person remains disqualified from certification under sections 2 through 6 of P.L.1997, c.100 (C.26:2H-83 through 87).

d. An applicant for certification may be issued conditional certification and may be employed as a nurse aide or a personal care assistant conditionally for a period not to exceed 60 days, pending completion of a criminal history record background check required under sections 2 through 6 of P.L.1997, c.100 (C.26:2H-83 through 87) by the Division of State Police in the Department of Law and Public Safety based upon an examination of its own files in accordance with section 14 of P.L.1997, c.100 (C.53:1-20.9a), and for an additional period not to exceed 60 days pending completion of a criminal history record background check by federal authorities as arranged for by the Division of State Police pursuant to section 14 of P.L.1997, c.100 (C.53:1-20.9a), if the person submits to the commissioner a sworn statement attesting that the person has not been convicted of any crime or disorderly persons offense as described in section 2 of P.L.1997, c.100 (C.26:2H-83). A person who submits a false sworn statement shall be disqualified from certification as a nurse aide or a personal care assistant, as the case may be, and shall not have an opportunity to establish rehabilitation pursuant to subsection b. of section 2 of P.L.1997, c.100 (C.26:2H-83).

A conditionally employed person, or an employed person certified as a nurse aide or a personal care assistant, who disputes the accuracy of the criminal history record information and who files a petition requesting a hearing pursuant to subsection c. of this section may remain employed by that person's employer until the commissioner rules on the person's petition but, pending the commissioner's ruling, the employer shall not permit the

person to have unsupervised contact with patients, residents, or clients, as the case may be, who are 60 years of age or older.

e. (1) A licensed health care facility or other entity that has received an application from or conditionally employs an applicant for nurse aide or personal care assistant certification, or employs a certified nurse aide or personal care assistant, and:

(a) receives notice from the Commissioner of Health that the applicant or certified nurse aide or personal care assistant, as applicable, has been determined by the commissioner to be disqualified from certification as a nurse aide or personal care assistant pursuant to sections 2 through 6 of P.L.1997, c.100 (C.26:2H-83 through 87); or

(b) terminates its employment of a conditionally employed applicant for nurse aide or personal care assistant certification or a certified nurse aide or personal care assistant because the person was disqualified from employment at the health care facility or other entity on the basis of a conviction of a crime or disorderly persons offense as described in section 2 of P.L.1997, c.100 (C.26:2H-83) after commencing employment at the health care facility or other entity;

shall be immune from liability for disclosing that disqualification or termination in good faith to another licensed health care facility or other entity that is qualified by statute or regulation to employ the person as a nurse aide or personal care assistant.

(2) A licensed health care facility or other entity which discloses information pursuant to paragraph (1) of this subsection shall be presumed to be acting in good faith unless it is shown by clear and convincing evidence that the health care facility or other entity acted with actual malice toward the person who is the subject of the information.

f. (1) A licensed health care facility or other entity, upon receiving notice from the Commissioner of Health that a person employed by it as a nurse aide or personal care assistant, including a conditionally employed person, has been convicted of a crime or disorderly persons offense as described in section 2 of P.L.1997, c.100 (C.26:2H-83) after commencing employment at the health care facility or other entity, shall:

(a) immediately terminate the person's employment as a nurse aide or personal care assistant; and

(b) report information about the termination to the Commissioner of Health in a manner prescribed by the commissioner, who shall thereupon deem the person to be disqualified from certification as a nurse aide or personal care assistant, subject to the provisions of paragraph (3) of this subsection.

(2) A licensed health care facility or other entity shall be immune from liability for any actions taken in good faith pursuant to paragraph (1) of this subsection and shall be presumed to be acting in good faith unless it is shown by clear and convincing evidence that the health care facility or other entity acted with actual malice toward the employee.

(3) The person terminated from employment pursuant to paragraph (1) of this subsection shall have 30 days from the date of the termination to petition the commissioner for a hearing on the accuracy of the information about the conviction reported to the commissioner or to establish why the person should not be terminated from employment, and disqualified from certification, as a nurse aide or personal care assistant. The commissioner shall notify the person's employer of the person's petition for a hearing within five days following the receipt of the petition from the person. Upon the issuance of a final decision upon a petition to the commissioner pursuant to this paragraph, the commissioner shall notify the person and the person's employer as to whether:

(a) the person is to be reinstated in the person's employment as a nurse aide or personal care assistant and retain the person's certification; or

(b) the person's termination from employment as a nurse aide or personal care assistant stands and the person remains disqualified from certification.

g. The commissioner shall provide for a registry of all persons who have successfully completed all training and competency evaluation requirements for certification as a nurse aide or personal care assistant and shall provide for the inclusion in the registry of information about the disqualification of any person from certification pursuant to sections 2 through 6 of P.L.1997, c.100 (C.26:2H-83 through 87); for which purposes, the commissioner may use an existing registry established pursuant to statute or regulation, subject to the requirements of federal law. The registry shall include the specific documented findings constituting the basis for that disqualification, except that the information shall indicate that the person was convicted of a crime or disorderly persons offense as described in section 2 of P.L.1997, c.100 (C.26:2H-83), but shall not identify the conviction or convictions which constitute the basis for the disqualification.

242. Section 4 of P.L.1997, c.100 (C.26:2H-85) is amended to read as follows:

C.26:2H-85 Assumption of cost of background checks.

4. The Department of Health shall assume the cost of the criminal history record background check conducted on an applicant for nurse aide

or personal care assistant certification, or a certified nurse aide or personal care assistant, as the case may be, pursuant to sections 2 through 6 and section 14 of P.L.1997, c.100 (C.26:2H-83 through 87 and C.53:1-20.9a).

243. Section 5 of P.L.1997, c.100 (C.26:2H-86) is amended to read as follows:

C.26:2H-86 Rules, regulations.

5. In accordance with the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), the Commissioner of Health shall adopt rules and regulations necessary to implement the provisions of sections 1 through 4 and section 6 of P.L.1997, c.100 (C.26:2H-82 through C.26:2H-85 and C.26:2H-87).

244. Section 6 of P.L.1997, c.100 (C.26:2H-87) is amended to read as follows:

C.26:2H-87 False statement; fine.

6. Any person submitting a false sworn statement pursuant to section 3 of P.L.1997, c.100 (C.26:2H-84) shall be subject to a fine of not more than \$1,000, which may be assessed by the Commissioner of Health.

245. Section 2 of P.L.1997, c.296 (C.26:2H-89) is amended to read as follows:

C.26:2H-89 PACE, pre-PACE program operation.

2. A PACE or Pre-PACE program shall operate in the State only in accordance with a contract with the Department of Human Services pursuant to the provisions of this act.

The programs shall not be subject to the requirements of P.L.1973, c.337 (C.26:2J-1 et seq.).

246. Section 3 of P.L.2003, c.105 (C.26:2H-94) is amended to read as follows:

C.26:2H-94 Definitions relative to nursing home quality of care.

3. As used in this act:

"Commissioner" means the Commissioner of Human Services.

"Department" means the Department of Human Services.

"Director" means the Director of the Division of Taxation in the Department of the Treasury.

"Fund" means the "Nursing Home Quality of Care Improvement Fund" established pursuant to this act.

"Medicaid" means the Medicaid program established pursuant to P.L.1968, c.413 (C.30:4D-1 et seq.).

"Nursing home" means a long-term care facility licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.), as well as the distinct part of another health care facility or continuing care retirement community that is licensed to provide skilled nursing care services pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.). For the purposes of this act, nursing home shall not include: an acute care hospital; assisted living facility; comprehensive personal care home; residential health care facility; adult day health care facility; alternate family care program; adult family care program; home health care agency; State psychiatric hospital; county health care facility, including, but not limited to, county geriatric center, county nursing home or other county long-term care facility; the New Jersey Firemen's Home; or a health care facility operated by the Department of Military and Veterans' Affairs.

247. Section 4 of P.L.2003, c.105 (C.26:2H-95) is amended to read as follows:

C.26:2H-95 "Nursing Home Quality of Care Improvement Fund."

4. The "Nursing Home Quality of Care Improvement Fund" is established as a nonlapsing fund in the Department of the Treasury. The fund shall be administered by the State Treasurer, in consultation with the Commissioner of Human Services or the commissioner's designee, who shall be responsible for the oversight, coordination, and disbursement of fund monies, and shall be credited with monies received pursuant to section 6 of this act, except for those monies which are deposited into the General Fund in accordance with the provisions of that section.

a. The fund shall be comprised of:

(1) revenues from assessments paid by nursing homes pursuant to section 5 of this act;

(2) matching federal funds received pursuant to Title XIX of the federal Social Security Act (42 U.S.C. s.1396 et seq.) that result from the expenditure of revenues from assessments collected pursuant to section 5 of this act;

(3) General Fund revenues, as necessary, to allow for the per diem add-on payments pursuant to subsection d. of section 6 of this act until the revenue from the assessment has been collected. Upon collection of the revenue from the assessment, the General Fund shall be repaid within 90 days; and

(4) any interest or other income earned on monies deposited into the fund.

b. Any disbursement of monies from the fund shall be used solely for Medicaid nursing home add-ons as provided for under section 6 of this act, which shall not in any manner render the assessment mechanism set forth in section 5 of this act to be in violation of the hold harmless provisions of 42 C.F.R. s.433.68(f).

c. The State Treasurer shall provide by regulation for such measures as are required to ensure the integrity of the fund.

d. The State Treasurer shall establish separate accounts within the fund as are needed to efficiently manage and disburse fund monies.

e. Monies in the fund shall not be used to supplant appropriations from the General Fund to the department for use in securing matching federal funds not otherwise provided for in this act.

f. The Director of the Division of Taxation shall be responsible for collecting the assessments.

248. Section 3 of P.L.2005, c.233 (C.26:2H-104) is amended to read as follows:

C.26:2H-104 Definitions relative to advance directives for mental health care.

3. As used in this act:

"Adult" means an individual 18 years of age or older.

"Advance directive for mental health care" or "advance directive" means a writing executed in accordance with the requirements of this act. An "advance directive" may include a proxy directive or an instruction directive, or both.

"Decision-making capacity" means a patient's ability to understand and appreciate the nature and consequences of mental health care decisions, including the benefits and risks of each, and alternatives to any proposed mental health care, and to reach an informed decision. A patient's decision-making capacity is evaluated relative to the demands of a particular mental health care decision.

"Declarant" means a competent adult who executes an advance directive for mental health care.

"Domestic partner" means a domestic partner as defined in section 3 of P.L.2003, c.246 (C.26:8A-3).

"Instruction directive" means a writing which provides instructions and direction regarding the declarant's wishes for mental health care in the event that the declarant subsequently lacks decision-making capacity.

"Mental health care decision" means a decision to accept or refuse any treatment, service, or procedure used to diagnose, treat, or care for a patient's mental condition. "Mental health care decision" also means a decision to accept or refuse the services of a particular mental health care professional or psychiatric facility, including a decision to accept or to refuse a transfer of care.

"Mental health care professional" means an individual licensed or certified by this State to provide or administer mental health care in the ordinary course of business or practice of a profession.

"Mental health care representative" means the individual designated by a declarant pursuant to the proxy directive part of an advance directive for mental health care for the purpose of making mental health care decisions on the declarant's behalf, and includes an individual designated as an alternate mental health care representative who is acting as the declarant's mental health care representative in accordance with the terms and order of priority stated in an advance directive for mental health care.

"Patient" means an individual who is under the care of a mental health care professional.

"Proxy directive" means a writing which designates a mental health care representative in the event that the declarant subsequently lacks decision-making capacity.

"Psychiatric facility" means a State psychiatric facility listed in R.S.30:1-7, a county psychiatric hospital or the psychiatric unit of a county hospital, a short-term care facility, special psychiatric hospital or psychiatric unit of a general hospital or other health care facility licensed by the Department of Health pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.), or a hospital or community-based mental health center or other entity licensed or funded by the Department of Human Services to provide community-based mental health services.

"Responsible mental health care professional" means a person licensed or certified by the State to provide or administer mental health care who is selected by, or assigned to, the patient and has primary responsibility for the care and treatment of the patient.

"State" means a state, territory, or possession of the United States, the District of Columbia, or the Commonwealth of Puerto Rico.

249. Section 16 of P.L.2005, c.233 (C.26:2H-117) is amended to read as follows:

C.26:2H-117 Rules, regulations relative to psychiatric facilities operated by the Department of Health.

16. In accordance with the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), the Commissioner of Health, in consultation with the Commissioner of Human Services, shall adopt rules and regulations, with respect to psychiatric facilities licensed by the Department of Health, to:

a. provide for the annual reporting by those psychiatric facilities to the Department of Health, and the gathering of such additional data, as is reasonably necessary to oversee and evaluate the implementation of this act; except that the commissioner shall seek to minimize the burdens of record-keeping imposed by the rules and regulations and ensure the appropriate confidentiality of patient records; and

b. require those psychiatric facilities to adopt policies and practices designed to:

(1) make routine inquiry, at the time of admission and at such other times as are appropriate under the circumstances, concerning the existence and location of an advance directive for mental health care;

(2) provide appropriate informational materials concerning advance directives for mental health care, including information about the registry of advance directives for mental health care established or designated pursuant to section 17 of this act, to all interested patients and their families and mental health care representatives, and to assist patients interested in discussing and executing an advance directive for mental health care, as well as to encourage declarants to periodically review their advance directives for mental health care as needed;

(3) inform mental health care professionals of their rights and responsibilities under this act, to assure that the rights and responsibilities are understood, and to provide a forum for discussion and consultation regarding the requirements of this act; and

(4) otherwise comply with the provisions of this act.

250. Section 18 of P.L.2005, c.233 (C.26:2H-118) is amended to read as follows:

C.26:2H-118 Joint evaluation, report to Governor, Legislature.

18. The Department of Health and the Department of Human Services shall jointly evaluate the implementation of this act and report to the Governor and the Legislature, including recommendations for any changes deemed necessary, within five years after the effective date of this act.

251. Section 19 of P.L.2005, c.233 (C.26:2H-119) is amended to read as follows:

C.26:2H-119 Immunity from criminal, civil liability.

19. a. A mental health care representative shall not be subject to criminal or civil liability for any actions performed in good faith and in accordance with the provisions of this act to carry out the terms of an advance directive for mental health care.

b. A mental health care professional shall not be subject to criminal or civil liability, or to discipline by the psychiatric facility or the respective State licensing board for professional misconduct, for any actions performed to carry out the terms of an advance directive for mental health care in good faith and in accordance with: the provisions of this act; any rules and regulations adopted by the Commissioner of Health or the Commissioner of Human Services pursuant to this act; and accepted professional standards.

c. A psychiatric facility shall not be subject to criminal or civil liability for any actions performed in good faith and in accordance with the provisions of this act to carry out the terms of an advance directive for mental health care.

252. Section 1 of P.L.2006, c.75 (C.26:2H-126) is amended to read as follows:

C.26:2H-126 Notification to residents of closing, relocation of nursing home, assisted living facility; exceptions.

1. a. Except as provided in subsection b. of this section, at least 60 days prior to the proposed date of the closing or relocation of a nursing home or assisted living residence licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.), the nursing home or assisted living administrator shall notify, in writing, a resident of the facility, the resident's legal representative, if applicable, and the Department of Health of the closing or relocation of the facility.

b. The Commissioner of Health may waive the 60-day notice requirement in subsection a. of this section if the commissioner determines that an emergency situation warrants a more immediate closure or relocation of the nursing home or assisted living residence. In the case of such an emergency situation, the administrator of the facility shall notify, in writing, a resident, the resident's legal representative, if applicable, and the Department of Health of the closure or relocation as soon as practicable.

As used in this section, an "emergency situation" may include: the suspension or revocation of the facility license by the commissioner; decertification of the facility by the federal Medicare program established pursuant to Title XVIII of the "Social Security Act," Pub.L.89-97 (42 U.S.C.

s.1395 et seq.), or the Medicaid program established pursuant to P.L.1968, c.413 (C.30:4D-1 et seq.); or any other event as prescribed by regulation of the commissioner.

253. Section 1 of P.L.2009, c.55 (C.26:2H-127) is amended to read as follows:

C.26:2H-127 Assisted living facility, refund of deposit, certain circumstances.

1. a. An assisted living facility licensed by the Department of Health pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) that requires a new resident, as a condition of admission to the facility, to pay a one-time security deposit, which is in addition to the regular monthly rental and services charges, shall provide that the deposit plus interest earned on the deposit is refundable to the resident or other designated person upon the resident's vacating the facility if the resident provides the facility with 30 days' notice that the resident intends to vacate the facility.

b. The facility may deduct an amount not to exceed one percent per annum of the amount of the invested or deposited security deposit for the cost of servicing and processing an account containing a security deposit.

254. Section 1 of P.L.2011, c.58 (C.26:2H-128) is amended to read as follows:

C.26:2H-128 Rights of residents of assisted living facilities, comprehensive personal care homes.

1. a. Each assisted living facility and comprehensive personal care home provider licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) shall distribute to each resident and post in a conspicuous, public place in the facility or home, as applicable, a statement of resident rights. The statement of rights shall include, at a minimum, the rights set forth in subsection b. of this section. Each resident, resident family member, and legally appointed guardian, as applicable, shall be informed of the resident rights, and provided with explanations if needed. The provider shall ensure that each resident, or the resident's legally appointed guardian, as applicable, signs a copy of the statement of rights.

b. Every resident of an assisted living facility or comprehensive personal care home that is licensed in the State shall have the right to:

(1) receive personalized services and care in accordance with the resident's individualized general service or health service plan;

(2) receive a level of care and services that address the resident's changing physical and psychosocial status;

- (3) have the resident's independence and individuality;
- (4) be treated with respect, courtesy, consideration, and dignity;
- (5) make choices with respect to services and lifestyle;
- (6) privacy;
- (7) have or not to have families' and friends' participation in resident service planning and implementation;
- (8) receive pain management as needed, in accordance with Department of Health regulations;
- (9) choose a physician, advanced practice nurse, or physician assistant;
- (10) appeal an involuntary discharge as specified in department regulations;
- (11) receive written documentation that fee increases based on a higher level of care are based on reassessment of the resident and in accordance with department regulations;
- (12) receive a written explanation of fee increases that are not related to increased services, upon request by the resident;
- (13) participate, to the fullest extent that the resident is able, in planning the resident's own medical treatment and care;
- (14) refuse medication and treatment after the resident has been informed, in language that the resident understands, of the possible consequences of this decision;
- (15) refuse to participate in experimental research, including the investigations of new drugs and medical devices, and to be included in experimental research only when the resident gives informed, written consent to such participation;
- (16) be free from physical and mental abuse and neglect;
- (17) be free from chemical and physical restraints, unless a physician, advanced practice nurse, or physician assistant authorizes the use for a limited period of time to protect the resident or others from injury. Under no circumstances shall a resident be confined in a locked room, or restrained, including with the use of excessive drugs, for punishment or for the convenience of staff;
- (18) manage the resident's own finances, and to delegate that responsibility to a family member, assigned guardian, facility administrator, or some other individual with power of attorney. The resident's authorization delegating such authority shall be witnessed and in writing;
- (19) receive prior to or at the time of admission, and afterwards through addenda, an admission agreement that complies with all applicable State and federal laws, describes the services provided and the related charges, and includes the policies for payment of fees, deposits, and refunds;

(20) receive a quarterly written account of the resident's funds, the itemized property deposited with the facility for the resident's use and safekeeping, and all financial transactions with the resident, next-of-kin, or guardian, which account shall show the amount of property in the account at the beginning and end of the accounting period, as well as a list of all deposits and withdrawals, substantiated by receipts given to the resident or the resident's guardian;

(21) have daily access during specified hours to the money and property that the resident has deposited with the facility, and to delegate, in writing, this right of access to a representative;

(22) live in safe and clean conditions that do not admit more residents than can safely be accommodated;

(23) not be arbitrarily and capriciously moved to a different bed or room;

(24) wear the resident's own clothes;

(25) keep and use the resident's personal property, unless doing so would be unsafe, impractical, or an infringement on the rights of other residents;

(26) reasonable opportunities for private and intimate physical and social interaction with other people, including the opportunity to share a room with another individual unless it is medically inadvisable;

(27) confidential treatment with regard to information about the resident, subject to the requirements of law;

(28) receive and send mail in unopened envelopes, unless the resident requests otherwise, and the right to request and receive assistance in reading and writing correspondence unless medically contraindicated;

(29) have a private telephone in the resident's living quarters at the resident's own expense;

(30) meet with any visitors of the resident's choice, at any time, in accordance with facility policies and procedures;

(31) take part in activities, and to meet with and participate in the activities of any social, religious, and community groups, as long as these activities do not disrupt the lives of other residents;

(32) refuse to perform services for the facility;

(33) request visits at any time by representatives of the religion of the resident's choice and, upon the resident's request, to attend outside religious services at the resident's own expense;

(34) participate in meals, recreation, and social activities without being subjected to discrimination based on age, race, religion, sex, marital status, nationality, or disability;

(35) organize and participate in a resident council that presents residents' concerns to the administrator of the facility;

(36) be transferred or discharged only in accordance with the terms of the admission agreement and with N.J.A.C. 8:36-5.1(d);

(37) receive written notice at least 30 days in advance when the facility requests the resident's transfer or discharge, except in an emergency, which notice shall include the name and contact information for the New Jersey Office of the Ombudsman for the Institutionalized Elderly;

(38) receive a written statement of resident rights and any regulations established by the facility involving resident rights and responsibilities;

(39) retain and exercise all constitutional, civil, and legal rights to which the resident is entitled by law;

(40) voice complaints without fear of interference, discharge, reprisal, and obtain contact information respecting government agencies to which residents can complain and ask questions, which information also shall be posted in a conspicuous place in the facility;

(41) hire a private caregiver or companion at the resident's expense and responsibility, as long as the caregiver or companion complies with the facility's policies and procedures; and

(42) obtain medications from a pharmacy of the resident's choosing, as long as the pharmacy complies with the facility's medication administration system, if applicable.

255. Section 3 of P.L.2011, c.145 (C.26:2H-131) is amended to read as follows:

C.26:2H-131 Definitions relative to POLST form.

3. As used in sections 1 through 12 of this act:

"Advance directive" means an advance directive for health care as defined in section 3 of P.L.1991, c.201 (C.26:2H-55).

"Advanced practice nurse" or "APN" means a person who is certified as an advanced practice nurse pursuant to P.L.1991, c.377 (C.45:11-45 et seq.).

"Commissioner" means the Commissioner of Health.

"Decision-making capacity" means a patient's ability to understand and appreciate the nature and consequences of a particular health care decision, including the benefits and risks of that decision, and alternatives to any proposed health care, and to reach an informed decision.

"Department" means the Department of Health.

"Emergency care" means the use of resuscitative measures and other immediate treatment provided in response to a sudden, acute, and unanticipated medical crisis in order to avoid injury, impairment, or death.

"Emergency care provider" means an emergency medical technician, paramedic, or member of a first aid, ambulance, or rescue squad.

"Health care decision" means a decision to accept, withdraw, or refuse a treatment, service, or procedure used to diagnose, treat, or care for a person's physical or mental condition, including life-sustaining treatment.

"Health care institution" means a health care facility licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.), a psychiatric facility as defined in section 2 of P.L.1987, c.116 (C.30:4-27.2), or a State developmental center listed in R.S.30:1-7.

"Health care professional" means a health care professional who is licensed or otherwise authorized to practice a health care profession pursuant to Title 45 or 52 of the Revised Statutes and is currently engaged in that practice.

"Life-sustaining treatment" means the use of any medical device or procedure, artificially provided fluids and nutrition, drugs, surgery, or therapy that uses mechanical or other artificial means to sustain, restore, or supplant a vital bodily function, and thereby increase the expected life span of a patient.

"Patient" means a person who is under the care of a physician or APN.

"Patient's representative" means an individual who is designated by a patient or otherwise authorized under law to make health care decisions on the patient's behalf if the patient lacks decision-making capacity.

"Physician" means a person who is licensed to practice medicine and surgery pursuant to chapter 9 of Title 45 of the Revised Statutes.

"Physician Orders for Life-Sustaining Treatment form" or "POLST form" means a standardized printed document that is uniquely identifiable and has a uniform color, which:

- a. is recommended for use on a voluntary basis by patients who have advanced chronic progressive illness or a life expectancy of less than five years, or who otherwise wish to further define their preferences for health care;
- b. does not qualify as an advance directive;
- c. is not valid unless it meets the requirements for a completed POLST form as set forth in this act;
- d. provides a means by which to indicate whether the patient has made an anatomical gift pursuant to P.L.2008, c.50 (C.26:6-77 et al.);
- e. is intended to provide direction to emergency care personnel regarding the use of emergency care, and to a health care professional regarding the use of life-sustaining treatment, with respect to the patient, by indicating the patient's preference concerning the use of specified interventions and the intensity of treatment for each intervention;

f. is intended to accompany the patient, and to be honored by all personnel attending the patient, across the full range of possible health care settings, including the patient's home, a health care institution, or otherwise at the scene of a medical emergency; and

g. may be modified or revoked at any time by a patient with decision-making capacity or the patient's representative in accordance with the provisions of section 7 of this act.

"Resuscitative measures" means cardiopulmonary resuscitation provided in the event that a patient suffers a cardiac or respiratory arrest.

256. Section 5 of P.L.2011, c.145 (C.26:2H-133) is amended to read as follows:

C.26:2H-133 Designation of patient safety organization; responsibilities.

5. The Commissioner of Health shall designate a patient safety organization (PSO) operating in this State pursuant to the federal "Patient Safety and Quality Improvement Act of 2005," Pub.L.109-41, to carry out the following responsibilities, by mutual written agreement of the commissioner and that PSO:

a. prescribe a POLST form and the procedures for completion, modification, and revocation of the form;

b. seek to promote awareness among health care professionals, emergency care providers, and the general public in this State about the option to complete a POLST form;

c. provide ongoing training of health care professionals and emergency care providers about the use of the POLST form, in consultation with organizations representing, and educational programs serving, health care professionals and emergency care providers, respectively, in this State;

d. prescribe additional requirements for the completion of a POLST form that may be applicable in the case of a patient with mental illness or a developmental disability in consultation with organizations that represent persons with mental illness and developmental disabilities, respectively;

e. provide for ongoing evaluation of the design and use of POLST forms through the use of such data as the PSO determines reasonably necessary for that purpose, subject to the commissioner's written approval; and

f. seek to minimize any record-keeping burden imposed on a health care institution pursuant to this act and take such actions as are necessary to ensure the confidentiality of any data furnished to the PSO that may contain patient-specific information.

257. Section 11 of P.L.2011, c.145 (C.26:2H-139) is amended to read as follows:

C.26:2H-139 Intentional failure to act, penalties, degree of crime.

11. a. A health care professional who intentionally fails to act in accordance with the requirements of this act is subject to discipline for professional misconduct pursuant to section 8 of P.L.1978, c.73 (C.45:1-21).

b. A health care institution that intentionally fails to act in accordance with the requirements of this act shall be liable to a civil penalty of not more than \$1,000 for each offense. For the purposes of this subsection, each violation shall constitute a separate offense. The civil penalty shall be collected in a summary proceeding, brought in the name of the State in a court of competent jurisdiction pursuant to the "Penalty Enforcement Law of 1999," P.L.1999, c.274 (C.2A:58-10 et seq.).

c. An emergency care provider subject to regulation by the Department of Health who intentionally fails to act in accordance with the requirements of this act is subject to such disciplinary measures as the commissioner deems necessary and within his statutory authority to impose.

d. A person who commits any of the following acts is guilty of a crime of the fourth degree:

(1) willfully concealing, canceling, defacing, obliterating, or withholding personal knowledge of a completed POLST form or a modification or revocation thereof, without the patient's consent;

(2) falsifying or forging a completed POLST form or a modification or revocation thereof of another person;

(3) coercing or fraudulently inducing the completion of a POLST form or a modification or revocation thereof; or

(4) requiring or prohibiting the completion of a POLST form or a modification or revocation thereof as a condition of coverage under any policy of health or life insurance or an annuity, or a public benefits program, or as a condition of the provision of health care.

e. The commission of an act identified in paragraph (1), (2), or (3) of subsection d. of this section, which results in the involuntary earlier death of a patient, shall constitute a crime of the first degree.

f. The provisions of this section shall not be construed to repeal any sanctions applicable under any other law.

258. Section 3 of P.L.1972, c.29 (C.26:2I-3) is amended to read as follows:

C.26:2I-3 Terms defined.

3. As used in this act, the following words and terms shall have the following meanings, unless the context indicates or requires another or different meaning or intent:

"Authority" means the New Jersey Health Care Facilities Financing Authority created by this act or any board, body, commission, department, or officer succeeding to the principal functions thereof or to whom the powers conferred upon the authority by this act shall be given by law.

"Bond" means bonds, notes, or other evidences of indebtedness of the authority issued pursuant to this act.

"Commissioner" means the Commissioner of Health.

"Credit agreement" means a loan agreement, revolving credit agreement, agreement establishing a line of credit, letter of credit, reimbursement agreement, interest exchange agreement, insurance contract, surety bond, commitment to purchase bonds, purchase or sale agreement, or commitment or other contract or agreement authorized and approved by the authority in connection with the authorization, issuance, security or payment of bonds.

"Health care organization" means an organization located in this State which is authorized or permitted by law, whether directly or indirectly through a holding corporation, partnership, or other entity, to provide health care-related services, including, but not limited to, hospital, outpatient, public health, home health care, residential care, assisted living, hospice, health maintenance organization, blood bank, alcohol or drug abuse, half-way house, diagnostic, treatment, rehabilitation, extended care, skilled nursing care, nursing care, intermediate care, tuberculosis care, chronic disease care, maternity, mental health, boarding or sheltered care or day care, services provided by a physician in his office, or any other service offered in connection with health care services or by an entity affiliated with a health care organization or an integrated delivery system.

"Hospital asset transformation program" means the hospital asset transformation program established pursuant to subsection g. of section 7 of P.L.1972, c.29 (C.26:2I-7).

"Integrated delivery system" means a group of legally affiliated health care organizations.

"Public health care organization" means a State, county, or municipal health care organization.

"Project" or "health care organization project" means the acquisition, construction, improvement, renovation, or rehabilitation of lands, buildings, fixtures, equipment, and articles of personal property, or other tangible or intangible assets that are necessary or useful in the development, establish-

ment, or operation of a health care organization pursuant to this act, and "project" or "health care organization project" may include: the financing, refinancing, or consolidation of secured or unsecured debt, borrowings, or obligations, or the provision of financing for any other expense incurred in the ordinary course of business, all of which lands, buildings, fixtures, equipment, and articles of personal property are to be used or occupied by any person in the health care organization; the acquisition of an entity interest, including capital stock, in a corporation; or any combination thereof; and may include any combination of the foregoing undertaken jointly by any health care organization with one or more other health care organizations.

"Project cost" or "health care organization project cost" means the sum total of all or any part of costs incurred or estimated to be incurred by the authority or by a health care organization which are reasonable and necessary for carrying out all works and undertakings and providing all necessary equipment for the development of a project, exclusive of the amount of any private or federal, State, or local financial assistance for and received by a health care organization for the payment of such project cost. Such costs shall include, but are not necessarily limited to: interest prior to, during and for a reasonable period after such development; start-up costs and costs of operation and maintenance during the construction period and for a reasonable additional period thereafter; organization, administration, operation, and other expenses of the health care organization prior to and during construction; the cost of necessary studies, surveys, plans, and specifications, architectural, engineering, legal, or other special services; the cost of acquisition of land, buildings, and improvements thereon (including payments for the relocation of persons displaced by such acquisition), site preparation and development, construction, reconstruction, equipment, including fixtures, equipment, and cost of demolition and removal, and articles of personal property required; the reasonable cost of financing incurred by a health care organization or the authority in the course of the development of the project; reserves for debt service; the fees imposed upon a health care organization by the commissioner and by the authority; other fees charged, and necessary expenses incurred in connection with the initial occupancy of the project; and the cost of such other items as may be reasonable and necessary for the development of a project; as well as provision or reserves for working capital, operating or maintenance or replacement expenses, or for payment or security of principal of, or interest on, bonds.

259. Section 4 of P.L.1972, c.29 (C.26:2I-4) is amended to read as follows:

C.26:2I-4 "New Jersey Health Care Facilities Financing Authority."

4. a. There is hereby established in the Department of Health, a public body corporate and politic, with corporate succession, to be known as the "New Jersey Health Care Facilities Financing Authority." The authority shall constitute a political subdivision of the State established as an instrumentality exercising public and essential governmental functions, and the exercise by the authority of the powers conferred by this act shall be deemed and held to be an essential governmental function.

b. The authority shall consist of seven members, three of whom shall be the commissioner, who shall be the chairman, the Commissioner of Banking and Insurance, and the Commissioner of Human Services, who shall serve during their terms of office, or when so designated by them, their deputies or other representatives, who shall serve at their pleasure, and four public members who are citizens of the State to be appointed by the Governor, with the advice and consent of the Senate for terms of four years; provided that the four members first appointed by the Governor shall serve terms expiring on the first, second, third, and fourth, respectively, April 30 ensuing after the enactment of this act. Each member shall hold office for the term of the member's appointment and until the member's successor shall have been appointed and qualified. Any vacancy among the public members shall be filled by appointment for the unexpired term only.

c. Any member of the authority appointed by the Governor may be removed from office by the Governor for cause after a public hearing.

d. The members of the authority shall serve without compensation, but the authority may reimburse its members for necessary expenses incurred in the discharge of their official duties.

e. The authority, upon the first appointment of its members and thereafter on or after April 30 in each year, shall annually elect from among its members a vice chairman who shall hold office until April 30 next ensuing and shall continue to serve during the term of his successor and until his successor shall have been appointed and qualified. The authority may also appoint, retain, and employ, without regard to the provisions of Title 11A, Civil Service, of the New Jersey Statutes, such officers, agents, and employees as it may require, and it shall determine their qualifications, terms of office, duties, services, and compensation.

f. The powers of the authority shall be vested in the members thereof in office from time to time and a majority of the total authorized membership of the authority shall constitute a quorum at any meeting thereof. Action may be taken and motions and resolutions adopted by the authority at any meeting thereof by the affirmative vote of a majority of the members present, unless

in any case the bylaws of the authority shall require a larger number. No vacancy in the membership of the authority shall impair the right of a quorum to exercise all the rights and perform all the duties of the authority.

g. Each member and the treasurer of the authority shall execute a bond to be conditioned upon the faithful performance of the duties of such member or treasurer, as the case may be, in such form and amount as may be prescribed by the Attorney General. Such bonds shall be filed in the office of the Secretary of State. At all times thereafter the members and treasurer of the authority shall maintain such bonds in full force and effect. All costs of such bonds shall be borne by the authority.

h. No trustee, director, officer, or employee of a health care organization may serve as a member of the authority.

i. At least two true copies of the minutes of every meeting of the authority shall be forthwith delivered by and under the certification of the secretary thereof, to the Governor. No action taken at such meeting by the authority shall have force or effect until 10 days, exclusive of Saturdays, Sundays, and public holidays, after such copies of the minutes shall have been so delivered or at such earlier time as the Governor shall sign a statement of approval thereof. If, in said 10-day period, the Governor returns a copy of the minutes with veto of any action taken by the authority or any member thereof at such meeting, such action shall be null and of no effect. If the Governor shall not return the minutes within said 10-day period, any action therein recited shall have force and effect according to the wording thereof. At any time prior to the expiration of the said 10-day period, the Governor may sign a statement of approval of all or any such action of the authority.

The powers conferred in this subsection upon the Governor shall be exercised with due regard for the rights of the holders of bonds of the authority at any time outstanding.

260. Section 5 of P.L.1972, c.29 (C.26:2I-5) is amended to read as follows:

C.26:2I-5 Powers of authority.

5. Powers of authority. The authority shall have power:

- a. To adopt bylaws for the regulation of its affairs and the conduct of its business and to alter and revise such bylaws from time to time at its discretion.
- b. To adopt and have an official seal and alter the same at pleasure.
- c. To maintain an office at such place or places within the State as it may designate.
- d. To sue and be sued in its own name.

e. To borrow money and to issue bonds of the authority and to provide for the rights of the holders thereof as provided in this act.

f. To acquire, lease as lessee or lessor, hold and dispose of real and personal property or any interest therein, in the exercise of its powers and the performance of its duties under this act.

g. To acquire in the name of the authority by purchase or otherwise, on such terms and conditions and in such manner as it may deem proper, any land or interest therein and other property which it may determine is reasonably necessary for any project; and to hold and use the same and to sell, convey, lease, or otherwise dispose of property so acquired, no longer necessary for the authority's purposes, for fair consideration after public notice.

h. To receive and accept, from any federal or other public agency or governmental entity directly or through the Department of Health or any other agency of the State or any health care organization, grants or loans for or in aid of the acquisition or construction of any project, and to receive and accept aid or contributions from any other source, of either money, property, labor or other things of value, to be held, used, and applied only for the purposes for which such grants, loans and, contributions may be made.

i. To prepare or cause to be prepared plans, specifications, designs, and estimates of costs for the construction and equipment of health care organization projects for health care organizations under the provisions of this act, and from time to time to modify such plans, specifications, designs, or estimates.

j. By contract or contracts with and for health care organizations only, to construct, acquire, reconstruct, rehabilitate and improve, and furnish and equip health care organization projects. The authority, in the exercise of its authority to make and enter into contracts and agreements necessary or incidental to the performance of its duties and the execution of its powers, shall adopt standing rules and procedures providing that, except as hereinafter provided, no contract on behalf of the authority shall be entered into for the doing of any work, or for the hiring of equipment or vehicles, where the sum to be expended exceeds the sum of \$7,500 or the amount determined as provided in this subsection, unless the authority shall first publicly advertise for bids therefor, and shall award the contract to the lowest responsible bidder; provided, however, that such advertising shall not be required where the contract to be entered into is one for the furnishing or performing of services of a professional nature or for the supplying of any product or the rendering of any service by a public utility subject to the jurisdiction of the Board of Public Utilities, and tariffs and schedules of the charges, made, charged, or exacted by the public utility for any such prod-

ucts to be supplied or services to be rendered are filed with said board. The Governor, in consultation with the Department of the Treasury, shall, no later than March 1 of each odd-numbered year, adjust the threshold amount set forth in this subsection, or subsequent to 1985 the threshold amount resulting from any adjustment under this subsection or section 17 of P.L.1985, c.469, in direct proportion to the rise or fall of the Consumer Price Index for all urban consumers in the New York City and the Philadelphia areas as reported by the United States Department of Labor. The Governor shall, no later than June 1 of each odd-numbered year, notify the authority of the adjustment. The adjustment shall become effective July 1 of each odd-numbered year.

k. To determine the location and character of any project to be undertaken, subject to the provisions of this act, and subject to State health and environmental laws, to construct, reconstruct, maintain, repair, lease as lessee or lessor, and regulate the same and operate the same in the event of default by a health care organization of its obligations and agreements with the authority; to enter into contracts for any or all such purposes; and to enter into contracts for the management and operation of a project in the event of default as herein provided. The authority shall use its best efforts to conclude its position as an operator as herein provided as soon as is practicable.

l. To establish rules and regulations for the use of a project or any portion thereof and to designate a health care organization as its agent to establish rules and regulations for the use of a project undertaken by such a health care organization.

m. Generally to fix and revise from time to time and to charge and collect rates, rents, fees, and other charges for the use of and for the services furnished or to be furnished by a project or any portion thereof and to contract with holders of its bonds and with any other person, party, association, corporation or other body, public or private, in respect thereof.

n. To enter into agreements, credit agreements or contracts, execute any and all instruments, and do and perform any and all acts or things necessary, convenient or desirable for the purposes of the authority or to carry out any power expressly given in this act.

o. To invest any moneys held in reserve or sinking funds, or any moneys not required for immediate use or disbursement, at the discretion of the authority, in such obligations as are authorized by resolution of the authority.

p. To obtain, or aid in obtaining, from any department or agency of the United States any insurance or guarantee as to, or of, or for the payment or repayment of interest or principal, or both, or any part thereof, on any loan or any instrument evidencing or securing the same, made or entered

into pursuant to the provisions of this act; and notwithstanding any other provisions of this act, to enter into agreement, contract, or any other instrument whatsoever with respect to any such insurance or guarantee, and accept payment in such manner and form as provided therein in the event of default by the borrower.

q. To obtain from any department or agency of the United States or a private insurance company any insurance or guarantee as to, or of, or for the payment or repayment of interest or principal, or both, or any part thereof, on any bonds issued by the authority pursuant to the provisions of this act; and notwithstanding any other provisions of this act, to enter into any agreement, contract, or any other instrument whatsoever with respect to any such insurance or guarantee, except to the extent that such action would in any way impair or interfere with the authority's ability to perform and fulfill the terms of any agreement made with the holders of the bonds of the authority.

r. To receive and accept, from any department or agency of the United States or of the State or from any other entity, any grant, appropriation, or other moneys to be used for or applied to any corporate purpose of the authority, including without limitation the meeting of debt service obligations of the authority in respect of its bonds.

s. Subject to the approval of the State Treasurer, to grant or loan all or any portion of the funds received pursuant to subsection g. of section 7 of P.L.1972, c.29 (C.26:2I-7) in connection with the hospital asset transformation program.

261. Section 21 of P.L.1972, c.29 (C.26:2I-21) is amended to read as follows:

C.26:2I-21 Department may visit, examine, inspect authority, require reports.

21. The Department of Health, or the commissioner or their representatives, may visit, examine into, and inspect, the authority and may require, as often as desired, duly verified reports therefrom giving such information and in such form as the department or commissioner shall prescribe.

262. Section 23 of P.L.1972, c.29 (C.26:2I-23) is amended to read as follows:

C.26:2I-23 Powers of State departments, agencies.

23. In order to provide new health care organizations and to enable the construction and financing thereof, to refinance indebtedness hereafter created by the authority for the purpose of providing one or more health care

organizations or additions or improvements thereto or modernization thereof or for any one or more of said purposes but for no other purpose unless authorized by law, each of the following bodies shall have the powers hereafter enumerated to be exercised upon such terms and conditions, including the fixing of fair consideration or rental to be paid or received, as it shall determine by resolution as to such property and each shall be subject to the performance of the duties hereafter enumerated, that is to say, the Department of Health as to such as are located on land owned by, or owned by the State and held for, any State institution or on lands of the institutions under the jurisdiction of the Department of Health or of the Department of Human Services, or by the authority, the Commissioner of Human Services as to State institutions operated by that department, the board of trustees or governing body of any public health care organization, the board of trustees of the University of Medicine and Dentistry of New Jersey, as to such as are located on land owned by the university, or by the State for the university, the State or by the particular public health care organization, respectively, namely:

a. The power to sell and to convey to the authority title in fee simple in any such land and any existing health care facility thereon owned by the State and held for any department thereof or of any of the institutions under the jurisdiction of the Department of Health or the power to sell and to convey to the authority such title as the State or the public health care organization, respectively, may have in any such land and any existing health care facility thereon.

b. The power to lease to the authority any land and any existing health care facility thereon so owned for a term or terms not exceeding 50 years each.

c. The power to lease or sublease from the authority, and to make available, any such land and existing health care facility conveyed or leased to the authority under subsections a. and b. of this section, and any new health care facility erected upon such land or upon any other land owned by the authority.

d. The power and duty, upon receipt of notice of any assignment by the authority of any lease or sublease made under subsection c. of this section, or of any of its rights under any such lease or sublease, to recognize and give effect to such assignment, and to pay to the assignee thereof rentals or other payments then due or which may become due under any such lease or sublease which has been so assigned by the authority.

263. Section 6 of P.L.1991, c.279 (C.26:2J-4.4) is amended to read as follows:

C.26:2J-4.4 Health maintenance organization, mammogram examination benefits.

6. Notwithstanding any provision of law to the contrary, a certificate of authority to establish and operate a health maintenance organization in this State shall not be issued or continued by the Commissioner of Banking and Insurance on or after the effective date of this act unless the health maintenance organization provides health care services to any enrollee for the conduct of: one baseline mammogram examination for women who are at least 35 but less than 40 years of age; a mammogram examination every year for women age 40 and over; and, in the case of a woman who is under 40 years of age and has a family history of breast cancer or other breast cancer risk factors, a mammogram examination at such age and intervals as deemed medically necessary by the woman's health care provider.

These health care services shall be provided to the same extent as for any other sickness under the enrollee agreement.

The provisions of this section shall apply to all enrollee agreements in which the health maintenance organization has reserved the right to change the schedule of charges.

264. Section 8 of P.L.1993, c.327 (C.26:2J-4.6) is amended to read as follows:

C.26:2J-4.6 Health maintenance organization, benefits for health promotion.

8. a. Notwithstanding any provision of this act or any other law to the contrary, a certificate of authority to establish and operate a health maintenance organization in this State shall not be issued or continued by the Commissioner of Health on or after the effective date of this act unless the health maintenance organization provides health care services to any enrollee which include a health promotion program providing health wellness examinations and counseling, which program shall include, but not be limited to, the following tests and services:

(1) For all persons 20 years of age and older, annual tests to determine blood hemoglobin, blood pressure, blood glucose level, and blood cholesterol level or, alternatively, low-density lipoprotein (LDL) level, and blood high-density lipoprotein (HDL) level;

(2) For all persons 35 years of age or older, a glaucoma eye test every five years;

(3) For all persons 40 years of age or older, an annual stool examination for presence of blood;

(4) For all persons 45 years of age or older, a left-sided colon examination of 35 to 60 centimeters every five years;

(5) For all women 20 years of age or older, a pap smear pursuant to the provisions of section 5 of P.L.1995, c.415 (C.26:2J-4.12);

(6) For all women 40 years of age or older, a mammogram examination pursuant to the provisions of section 6 of P.L.1991, c.279 (C.26:2J-4.4);

(7) For all adults, recommended immunizations; and

(8) For all persons 20 years of age or older, an annual consultation with a health care provider to discuss lifestyle behaviors that promote health and well-being including, but not limited to, smoking control, nutrition and diet recommendations, exercise plans, lower back protection, weight control, immunization practices, breast self-examination, testicular self-examination, and seat belt usage in motor vehicles.

Notwithstanding the provisions of this subsection to the contrary, if a physician or other health care provider recommends that it would be medically appropriate for an enrollee to receive a different schedule of tests and services than that provided for under this subsection, the health maintenance organization shall provide coverage for the tests or services actually provided, within the limits of the amounts listed in subsection b. of this section.

b. A health maintenance organization shall not be required to offer services to enrollees set forth in subsection a. of this section for which the value exceeds: \$125 a year for each person between the ages of 20 to 39, inclusive; \$145 a year for each man age 40 and over; and \$235 a year for each woman age 40 and over; except that for persons 45 years of age or older, the value of a left-sided colon examination shall not be included in the above amount; however, no health maintenance organization shall be required to provide services to enrollees for a left-sided colon examination with a value in excess of \$150.

c. The Commissioner of Health, in consultation with the Department of the Treasury, shall annually adjust the threshold amounts provided by subsection b. of this section in direct proportion to the increase or decrease in the consumer price index for all urban consumers in the New York City and Philadelphia areas as reported by the United States Department of Labor. The adjustment shall become effective on July 1 of the year in which it is reported.

d. Nothing in this act shall be construed to require that a health maintenance organization take any actions which conflict with the health benefits, underwriting and rating standards established by the federal government pursuant to subchapter XI of Pub.L.93-222 (42 U.S.C. s.300e et seq.).

e. This section shall apply to all health maintenance organization contracts in which the right to change the enrollee charge has been reserved.

f. The provisions of this section shall not apply to a health benefits plan subject to the provisions of P.L.1992, c.161 (C.17B:27A-2 et seq.) or P.L.1992, c.162 (C.17B:27A-17 et seq.).

265. Section 4 of P.L.1995, c.316 (C.26:2J-4.10) is amended to read as follows:

C.26:2J-4.10 Health maintenance organization, child screening, blood lead, hearing loss; immunizations.

4. A certificate of authority to establish and operate a health maintenance organization in this State shall not be issued or continued by the Commissioner of Banking and Insurance on or after the effective date of P.L.2005, c.248 (C.17:48E-35.27 et al.) unless the health maintenance organization offers health care services to any enrollee which include:

a. Screening by blood lead measurement for lead poisoning for children, including confirmatory blood lead testing as specified by the Department of Health pursuant to section 7 of P.L.1995, c.316 (C.26:2-137.1); and medical evaluation and any necessary medical follow-up and treatment for lead poisoned children.

b. All childhood immunizations as recommended by the Advisory Committee on Immunization Practices of the United States Public Health Service and the Department of Health pursuant to section 7 of P.L.1995, c.316 (C.26:2-137.1). A health maintenance organization shall notify its enrollees, in writing, of any change in the health care services provided with respect to childhood immunizations and any related changes in premium. The notification shall be in a form and manner to be determined by the Commissioner of Banking and Insurance.

c. Screening for newborn hearing loss by appropriate electrophysiologic screening measures and periodic monitoring of infants for delayed onset hearing loss, pursuant to P.L.2001, c.373 (C.26:2-103.1 et al.). Payment for this screening service shall be separate and distinct from payment for routine new baby care in the form of a newborn hearing screening fee as negotiated with the provider and facility.

The health care services provided pursuant to this section shall be provided to the same extent as for any other medical condition under the contract, except that a deductible shall not be applied for services provided pursuant to this section; however, with respect to a contract that qualifies as a high deductible health plan for which qualified medical expenses are paid using a health savings account established pursuant to section 223 of the federal Internal Revenue Code of 1986 (26 U.S.C. s.223), a deductible shall not be applied for any services provided pursuant to this section that represent preventive care as permitted by that federal law, and shall not be applied as provided pursuant to section 12 of P.L.2005, c.248 (C.26:2J-4.29). This section shall apply to all contracts under which the health maintenance

organization has reserved the right to change the schedule of charges for enrollee coverage.

266. Section 5 of P.L.1995, c.415 (C.26:2J-4.12) is amended to read as follows:

C.26:2J-4.12 HMO contracts, Pap smear benefits.

5. A certificate of authority to establish and operate a health maintenance organization in this State shall not be issued or continued by the Commissioner of Banking and Insurance on or after the effective date of this act unless the health maintenance organization offers health care services to any enrollee or other person covered thereunder which include a Pap smear. The health care services shall be provided to the same extent as for any other medical condition under the contract.

As used in this section, and notwithstanding the provisions of this section to the contrary, "Pap smear" means an initial Pap smear and any confirmatory test when medically necessary and as ordered by the covered person's physician and includes all laboratory costs associated with the initial Pap smear and any confirmatory test.

The provisions of this section shall apply to all contracts for health care services by health maintenance organizations under which the right to change the schedule of charges for enrollee coverage is reserved.

267. Section 6 of P.L.1997, c.75 (C.26:2J-4.14) is amended to read as follows:

C.26:2J-4.14 HMO to provide benefits for reconstructive breast surgery.

6. A certificate of authority to establish and operate a health maintenance organization in this State pursuant to P.L.1973, c.337 (C.26:2J-1 et seq.) shall not be issued or continued by the Commissioner of Banking and Insurance on or after the effective date of P.L.1997, c.75 unless the health maintenance organization provides health care services to any enrollee, following a mastectomy on one breast or both breasts, for reconstructive breast surgery, surgery to restore and achieve symmetry between the two breasts, and prostheses and, under any contract for health care services providing outpatient x-ray or radiation therapy, outpatient chemotherapy following surgical procedures in connection with the treatment of breast cancer shall be included as a part of the outpatient x-ray or radiation therapy.

The health care services shall be provided to the same extent as for any other medical condition under the contract for health care services.

The provisions of this section shall apply to all contracts for health care services by health maintenance organizations under which the right to change the schedule of charges for enrollee coverage is reserved.

268. Section 8 of P.L.1997, c.149 (C.26:2J-4.15) is amended to read as follows:

C.26:2J-4.15 Coverage for minimum inpatient care following mastectomy by HMO.

8. a. Every enrollee agreement that provides hospital or medical expense benefits and is delivered, issued, executed, or renewed in this State pursuant to P.L.1973, c.337 (C.26:2J-1 et seq.) or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance on or after the effective date of this act shall provide health care services for a minimum of 72 hours of inpatient care following a modified radical mastectomy and a minimum of 48 hours of inpatient care following a simple mastectomy. The enrollee agreement shall not require a health care provider to obtain authorization from the health maintenance organization for prescribing 72 or 48 hours, as appropriate, of inpatient care as provided for in this section.

The provisions of this section shall not be construed to: require a patient to receive inpatient care for 72 or 48 hours, as appropriate, if the patient in consultation with the patient's physician determines that a shorter length of stay is medically appropriate; or relieve a patient or a patient's physician, if appropriate, of any notification requirements to the health maintenance organization under the enrollee agreement.

The health care services shall be provided to the same extent as for any other sickness under the enrollee agreement.

The provisions of this section shall apply to enrollee agreements in which the health maintenance organization has reserved the right to change the schedule of charges.

b. The Commissioner of Banking and Insurance shall adopt regulations pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.) to implement the provisions of this section.

269. Section 8 of P.L.1997, c.338 (C.26:2J-4.17) is amended to read as follows:

C.26:2J-4.17 Coverage for treatment of inherited metabolic diseases by health maintenance organization.

8. Notwithstanding any provision of law to the contrary, a certificate of authority to establish and operate a health maintenance organization in this State shall not be issued or continued by the Commissioner of Banking and

Insurance on or after the effective date of this act unless the health maintenance organization provides health care services to each enrollee for the therapeutic treatment of inherited metabolic diseases, including the purchase of medical foods and low protein modified food products, when diagnosed and determined to be medically necessary by the enrollee's physician.

For the purposes of this section, "inherited metabolic disease" means a disease caused by an inherited abnormality of body chemistry for which testing is mandated pursuant to P.L.1977, c.321 (C.26:2-110 et seq.); "low protein modified food product" means a food product that is specially formulated to have less than one gram of protein per serving and is intended to be used under the direction of a physician for the dietary treatment of an inherited metabolic disease, but does not include a natural food that is naturally low in protein; and "medical food" means a food that is intended for the dietary treatment of a disease or condition for which nutritional requirements are established by medical evaluation and is formulated to be consumed or administered enterally under direction of a physician.

The health care services shall be provided to the same extent as for any other medical condition under the contract.

The provisions of this section shall apply to all contracts for health care services by health maintenance organizations under which the right to change the schedule of charges for enrollee coverage is reserved.

270. Section 6 of P.L.1999, c.49 (C.26:2J-4.19) is amended to read as follows:

C.26:2J-4.19 Coverage for certain dental procedures for the severely disabled or child age five or under by HMO.

6. a. A certificate of authority to establish and operate a health maintenance organization in this State pursuant to P.L.1973, c.337 (C.26:2J-1 et seq.), shall not be issued or continued by the Commissioner of Banking and Insurance on or after the effective date of this amendatory and supplementary act unless the health maintenance organization provides health care services to an enrollee who is severely disabled or a child age five or under for: (1) general anesthesia and hospitalization for dental services; or (2) a medical condition covered by the enrollee agreement which requires hospitalization or general anesthesia for dental services rendered by a participating dentist regardless of where the dental services are provided.

b. A health maintenance organization may require prior authorization of hospitalization for dental services in the same manner that prior authorization is required for hospitalization for other covered diseases or conditions.

c. This section shall apply to all contracts for health care services in which the health maintenance organization has reserved the right to change the schedule of charges.

271. Section 8 of P.L.1999, c.108 (C.26:2J-4.20) is amended to read as follows:

C.26:2J-4.20 HMO to provide coverage for biologically based mental illness.

8. a. Every enrollee agreement delivered, issued, executed, or renewed in this State pursuant to P.L.1973, c.337 (C.26:2J-1 et seq.) or approved for issuance or renewal in this State by the Commissioner of Banking and Insurance, on or after the effective date of this act shall provide health care services for biologically-based mental illness under the same terms and conditions as provided for any other sickness under the agreement. "Biologically-based mental illness" means a mental or nervous condition that is caused by a biological disorder of the brain and results in a clinically significant or psychological syndrome or pattern that substantially limits the functioning of the person with the illness, including but not limited to, schizophrenia, schizoaffective disorder, major depressive disorder, bipolar disorder, paranoia and other psychotic disorders, obsessive-compulsive disorder, panic disorder and pervasive developmental disorder, or autism. "Same terms and conditions" means that the health maintenance organization cannot apply different copayments, deductibles, or health care services limits to biologically-based mental health care services than those applied to other medical or surgical health care services.

b. Nothing in this section shall be construed to change the manner in which a health maintenance organization determines:

(1) whether a mental health care service meets the medical necessity standard as established by the health maintenance organization; or

(2) which providers shall be entitled to reimbursement or to be participating providers, as appropriate, for mental health services under the enrollee agreement.

c. The provisions of this section shall apply to enrollee agreements in which the health maintenance organization has reserved the right to change the premium.

272. Section 1 of P.L.1999, c.332 (C.26:2J-4.21) is amended to read as follows:

C.26:2J-4.21 HMO to provide continuing nursing home care, certain.

1. a. A certificate of authority to establish and operate a health maintenance organization in this State shall not be issued or continued by the

Commissioner of Banking and Insurance on or after the effective date of this act unless the health maintenance organization offers health care services in conformance with the provisions of subsection b. of this section.

b. If an enrollee is a resident of a skilled nursing facility, continuing care retirement community, or a retirement community which operates a skilled nursing facility on the premises of the community, regardless of whether the health maintenance organization is under contract with the skilled nursing facility or the skilled nursing facility at the continuing care retirement community or retirement community, the enrollee's primary care physician shall refer the enrollee to the skilled nursing facility or the community's Medicare-certified skilled nursing unit, as applicable, rather than to a skilled nursing facility separate from the facility or the community of origin, if:

(1) the skilled nursing facility or the continuing care retirement community or retirement community with a skilled nursing facility has the capacity to provide the services the enrollee needs;

(2) the primary care physician, in consultation with the enrollee or a representative of the enrollee's family, determines that the referral is in the best interest of the enrollee;

(3) the skilled nursing facility or the continuing care retirement community or retirement community with a skilled nursing facility agrees to be reimbursed at the same contract rate negotiated by the health maintenance organization with similar providers for the same services and supplies in the same geographic area; and

(4) the skilled nursing facility or the continuing care retirement community or retirement community with a skilled nursing facility meets all applicable State licensing and certification requirements.

c. For the purposes of this act, "continuing care retirement community" means a continuing care facility operating under a certificate of authority issued by the Department of Community Affairs pursuant to P.L.1986, c.103 (C.52:27D-330 et seq.), and "retirement community" means a retirement community which is registered with the Department of Community Affairs pursuant to P.L.1977, c.419 (C.45:22A-21 et seq.).

273. Section 8 of P.L.2001, c.295 (C.26:2J-4.24) is amended to read as follows:

C.26:2J-4.24 HMO agreement to provide coverage for colorectal cancer screening.

8. Every enrollee agreement that provides hospital or medical expense benefits and is delivered, issued, executed, or renewed in this State pursuant to P.L.1973, c.337 (C.26:2J-1 et seq.), or approved for issuance or renewal in

this State by the Commissioner of Banking and Insurance on or after the effective date of this act, shall provide health care services to any enrollee or other person covered thereunder for expenses incurred in conducting colorectal cancer screening at regular intervals for persons age 50 and over and for persons of any age who are considered to be at high risk for colorectal cancer. The methods of screening for which benefits shall be provided shall include: a screening fecal occult blood test, flexible sigmoidoscopy, colonoscopy, barium enema, or any combination thereof; or the most reliable, medically recognized screening test available. The method and frequency of screening to be utilized shall be in accordance with the most recent published guidelines of the American Cancer Society and as determined medically necessary by the covered person's physician, in consultation with the covered person.

As used in this section, "high risk for colorectal cancer" means a person has:

- a. a family history of: familial adenomatous polyposis; hereditary non-polyposis colon cancer; or breast, ovarian, endometrial, or colon cancer or polyps;
- b. chronic inflammatory bowel disease; or
- c. a background, ethnicity, or lifestyle that the physician believes puts the person at elevated risk for colorectal cancer.

The health care services shall be provided to the same extent as for any other medical condition under the enrollee agreement.

The provisions of this section shall apply to all enrollee agreements in which the health maintenance organization has reserved the right to change the schedule of charges.

274. Section 11 of P.L.2005, c.248 (C.26:2J-4.28) is amended to read as follows:

C.26:2J-4.28 HMO, high deductible, coverage for preventive care.

11. A certificate of authority to establish and operate a health maintenance organization, which organization offers a contract that qualifies as a high deductible health plan for which qualified medical expenses are paid using a health savings account established pursuant to section 223 of the federal Internal Revenue Code of 1986 (26 U.S.C. s.223), shall not be issued or continued by the Commissioner of Banking and Insurance on or after the effective date of P.L.2005, c.248 (C.17:48E-35.27 et al.), unless the health maintenance organization offers health care services to any enrollee which include services provided in-network which represent medically necessary preventive care as permitted by that federal law.

The services provided pursuant to this section shall be provided to the same extent as for any other medical condition under the contract, except that a deductible shall not be applied for services provided pursuant to this section. This section shall apply to all contracts under which the health maintenance organization has reserved the right to change the schedule of charges for enrollee coverage.

275. Section 12 of P.L.2005, c.248 (C.26:2J-4.29) is amended to read as follows:

C.26:2J-4.29 Health service corporation, coverage for prescription female contraceptives.

12. Notwithstanding the provisions of section 4 of P.L.1995, c.316 (C.26:2J-4.10) regarding deductibles for a high deductible health plan, a contract offered by a health maintenance organization, which certificate of authority to establish and operate is issued or continued by the Commissioner of Banking and Insurance on or after the effective date of P.L.2005, c.248 (C.17:48E-35.27 et al.), that qualifies as a high deductible health plan for which qualified medical expenses are paid using a health savings account established pursuant to section 223 of the federal Internal Revenue Code of 1986 (26 U.S.C. s.223), shall not apply a deductible for any benefits in which a deductible is not applicable pursuant to any law enacted after the effective date of P.L.2005, c.248 (C.17:48E-35.27 et al.).

This section shall apply to all contracts under which the health maintenance organization has reserved the right to change the schedule of charges for enrollee coverage.

276. Section 8 of P.L.2007, c.345 (C.26:2J-4.31) is amended to read as follows:

C.26:2J-4.31 HMOs to provide benefits for orthotic and prosthetic appliances.

8. a. A certificate of authority to establish and operate a health maintenance organization in this State pursuant to P.L.1973, c.337 (C.26:2J-1 et seq.) shall not be issued or continued by the Commissioner of Banking and Insurance on or after the effective date of this act unless the health maintenance organization provides health care services for any person covered thereunder for expenses incurred in obtaining an orthotic or prosthetic appliance from any licensed orthotist or prosthetist, or any certified pedorthist, as determined medically necessary by the covered person's physician.

As used in this section, "orthotic appliance," "prosthetic appliance," "licensed orthotist," and "licensed prosthetist" have the meaning assigned to

them in section 3 of P.L.1991, c.512 (C.45:12B-3) and "certified pedorthist" has the meaning assigned to it in subsection j. of section 18 of P.L.1991, c.512 (C.45:12B-18).

b. On and after the effective date of this act, a health maintenance organization shall reimburse for orthotic and prosthetic appliances at the same rate as reimbursement for such appliances under the federal Medicare reimbursement schedule.

c. The benefits shall be provided to the same extent as for any other medical condition under the enrollee agreement.

d. The provisions of this section shall apply to all enrollee agreements in which the health maintenance organization has reserved the right to change the schedule of charges.

277. Section 23 of P.L.1973, c.337 (C.26:2J-23) is amended to read as follows:

C.26:2J-23 Fees.

23. Every health maintenance organization subject to this act shall pay to the commissioner the following fees:

a. for filing an application for a certificate of authority or amendment thereto, \$100.00;

b. for filing each annual report, \$10.00; and

c. for the purpose of supporting the activities of the Department of Banking and Insurance associated with the regulation of health maintenance organizations, \$1.50 per life per year, with payment being made annually no later than July 15 for the preceding calendar year. Payments made by a health maintenance organization pursuant to this act shall not in any way reduce payments that may be owed by a health maintenance organization pursuant to P.L.1995, c.156 (C.17:1C-19 et seq.) and subsequent amendments thereto. No such payment shall be required for any per life per year that is funded through the Medicaid program established pursuant to P.L.1968, c.413 (C.30:4D-1 et seq.) or the NJ FamilyCare Program established pursuant to P.L.2005, c.156 (C.30:4J-8 et al.).

In accordance with the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), the commissioner may promulgate rules and regulations directing that additional fees be paid.

From fees collected under the provisions of subsection c. of this section, the Legislature shall in each fiscal year appropriate to the community health law project the sum of \$100,000 to fund a grant in support of a program to provide any senior citizen resident of this State who is covered as

an enrollee in or beneficiary of a health plan administered by a health maintenance organization with information concerning the person's rights under the program and assistance with the procedures for receiving the benefits to which the person is entitled under the program.

278. Section 1 of P.L.1986, c.106 (C.26:2K-35) is amended to read as follows:

C.26:2K-35 Definitions.

1. As used in this act:
 - a. "Commissioner" means the Commissioner of Health.
 - b. "Dispatch" means the coordinated request for and dispatch of the emergency medical service helicopter response unit by a central communications center located in the service area, following protocols developed by the mobile intensive care hospital, the regional trauma or critical care center, the commissioner, and the superintendent.
 - c. "Emergency medical service helicopter response unit" means a specially equipped hospital-based emergency medical service helicopter staffed by advanced life support personnel and operated for the provision of advanced life support services under the medical direction of a mobile intensive care program and the regional trauma or critical care center authorized by the commissioner.
 - d. "Emergency medical transportation" means the prehospital or interhospital transportation of an acutely ill or injured patient by a dedicated emergency medical service helicopter response unit operated, maintained and piloted by the Division of State Police of the Department of Law and Public Safety, pursuant to regulations adopted by the commissioner under chapter 40 of Title 8 of the New Jersey Administrative Code.
 - e. "Medical direction" means the medical control and medical orders transmitted from the physician of the mobile intensive care hospital or from the physician at the regional trauma or critical care center to the staff of the helicopter. The mobile intensive care unit coordinating center and regional trauma or critical care center shall have the ability to cross patch and consult with each other as approved by the commissioner.
 - f. "Mobile intensive care hospital" means a hospital authorized by the commissioner to develop and maintain a mobile intensive care unit to provide advanced life support services in accordance with P.L.1984, c.146 (C.26:2K-7 et al.).
 - g. "Regional trauma center" means a State designated level one hospital-based trauma center equipped and staffed to provide emergency medical

services to an accident or trauma victim, including, but not limited to, the level one trauma centers at the University of Medicine and Dentistry of New Jersey-University Hospital in Newark, known as the "Eric Munoz Trauma Center," and at the Cooper Hospital/University Medical Center in Camden.

h. "Critical care center" means a hospital authorized by the commissioner to provide regional critical care services, such as trauma, burn, spinal cord, cardiac, poison, or neonatal care.

i. "Superintendent" means the Superintendent of the Division of State Police of the Department of Law and Public Safety.

279. Section 1 of P.L.2003, c.1 (C.26:2K-47.1) is amended to read as follows:

C.26:2K-47.1 Definitions relative to administration of epinephrine.

1. As used in this act:

"Commissioner" means the Commissioner of Health;

"Emergency medical service" means a program in a hospital staffed 24 hours-a-day by a licensed physician trained in emergency medicine;

"Emergency medical technician" means a person trained in basic life support services as defined in section 1 of P.L.1985, c.351 (C.26:2K-21) and who is certified by the Department of Health to provide that level of care.

280. Section 2 of P.L.2003, c.1 (C.26:2K-47.2) is amended to read as follows:

C.26:2K-47.2 Administration, maintenance, disposal of auto-injector device; certification; training; fee.

2. a. An emergency medical technician who has been certified by the commissioner pursuant to subsection b. of this section to administer an epinephrine auto-injector device shall administer, maintain and dispose of the device in accordance with rules and regulations adopted by the commissioner.

Each administration of an auto-injector device pursuant to this act shall be reported to the Department of Health in a manner determined by the commissioner.

b. The commissioner shall establish written standards and application procedures which an emergency medical technician shall meet in order to obtain certification. The commissioner shall certify a candidate who: provides evidence of satisfactory completion of an educational program which is approved by the commissioner and includes training in the administration of epinephrine auto-injector devices; and passes an examination in the administration of the devices which is approved by the commissioner.

c. The commissioner shall maintain a registry of all persons certified pursuant to this section, which shall include, but not be limited to:

- (1) the person's name and residence; and
- (2) the date that certification was granted.

d. The commissioner shall annually compile a list of emergency medical technicians who have obtained certification to administer an epinephrine auto-injector device pursuant to this section, which shall be available to the public.

e. A fee may be charged to a person enrolled in an educational program approved by the department which includes training in the administration of an epinephrine auto-injector device in order to cover the cost of training and testing for certification pursuant to this section, if the entity that provides the educational program is not reimbursed for the cost of that training and testing from the "Emergency Medical Technician Training Fund" established pursuant to section 3 of P.L.1992, c.143 (C.26:2K-56).

281. Section 10 of P.L.2003, c.1 (C.26:2K-47.9) is amended to read as follows:

C.26:2K-47.9 Rules, regulations.

10. Pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), the Commissioner of Health shall adopt rules and regulations to effectuate the purposes of this act, including medical protocols for the administration of epinephrine auto-injector devices, in consultation with the State mobile intensive care advisory council and the New Jersey State First Aid Council, Inc. The rules and regulations shall address age appropriateness in the administration of epinephrine.

282. Section 1 of P.L.2009, c.174 (C.26:2K-63) is amended to read as follows:

C.26:2K-63 Certification as EMT valid for five years.

1. Certification of a person as an emergency medical technician by the Commissioner of Health, when that person meets the requirements therefor as prescribed by regulation of the commissioner, shall be valid for a period of five years.

283. Section 2 of P.L.2009, c.174 (C.26:2K-64) is amended to read as follows:

C.26:2K-64 Rules, regulations.

2. The Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt rules and regulations to effectuate the purposes of this act.

284. Section 1 of P.L.2003, c.269 (C.26:2M-7.2) is amended to read as follows:

C.26:2M-7.2 Training for long-term care facility staff relative to Alzheimer's Disease.

1. a. The Commissioner of Health shall establish a mandatory training program for long-term care facility staff, as described in subsection b. of this section, in the specialized care of patients who are diagnosed by a physician as having Alzheimer's disease or a related disorder. The training program shall include the causes and progression of Alzheimer's disease and related disorders and methods to deal with the specific problems encountered in the care of patients with Alzheimer's disease and related disorders, including, but not limited to: communicating with patients with Alzheimer's disease and related disorders; psychological, social and physical needs of patients with Alzheimer's disease and related disorders; and safety measures which need to be taken for a patient with Alzheimer's disease and related disorders.

b. A long-term care facility shall annually provide training, under the training program established pursuant to subsection a. of this section, to a certified nurse aide, licensed practical nurse, registered professional nurse, and other health care professionals, as appropriate, who provide direct care to a patient in the facility who is diagnosed as having Alzheimer's disease or a related disorder.

285. Section 2 of P.L.1988, c.114 (C.26:2M-10) is amended to read as follows:

C.26:2M-10 Definitions.

2. As used in this act:

a. "Adult day care" means a community-based group program designed to meet the needs of functionally or cognitively impaired adults through an individual plan of care structured to provide a variety of health, social, and related support services in a protective setting during any part of a day but less than 24 hours.

b. "Alzheimer's Disease and related disorders" means forms of dementia characterized by a general loss of intellectual abilities of sufficient severity to interfere with social or occupational functioning.

c. "Care needs or behavioral problems" means the manifestations of dementia which may include, but need not be limited to, progressive memory loss, confusion, inability to communicate, extreme personality change, and eventual inability to perform the most basic tasks.

d. "Commissioner" means the Commissioner of Human Services.

e. "Department" means the Department of Human Services.

f. "Grantee" means a public agency, private for profit agency, or private nonprofit agency selected by the department to establish an adult day care program for participants pursuant to this act.

g. "Participant" means an individual with Alzheimer's disease or a related disorder, particularly those in the moderate to severe stages. To be eligible for services, a participant shall have documentation from a physician that the participant has Alzheimer's disease or a related disorder.

286. Section 2 of P.L.2011, c.76 (C.26:2M-17) is amended to read as follows:

C.26:2M-17 New Jersey Alzheimer's Disease Study Commission.

2. a. There is established the New Jersey Alzheimer's Disease Study Commission in the Department of Human Services.

b. The commission shall consist of 15 members as follows:

(1) the Commissioners of Health and Human Services, or their designees, who shall serve ex officio;

(2) two members of the Senate, to be appointed by the President of the Senate, who shall not be of the same political party;

(3) two members of the General Assembly, to be appointed by the Speaker of the General Assembly, who shall not be of the same political party; and

(4) nine members appointed by the Governor, as follows: two persons recommended by the Alzheimer's Association, one of whom shall be a representative of the Greater New Jersey Chapter and one of whom shall be a representative of the Alzheimer's Association Delaware Valley Chapter; three health care professionals who are currently involved in the provision of direct services, one of whom shall be a representative of an agency that provides home care services to persons with dementia, one of whom shall be a representative of an assisted living facility that provides specialized services to persons with dementia, and one of whom shall be a representative of a licensed nursing home that provides specialized services to persons with dementia; one representative from the clergy who has experience providing emotional and spiritual care and support for persons with Alz-

heimer's disease and their families; two persons who by reason of family relationship or legal guardianship bear or have borne responsibility in caring for a person with Alzheimer's disease; and one attorney who is currently licensed and practicing in New Jersey, has expertise in legal and financial planning and elder care issues, and has extensive community-based experience working with persons with Alzheimer's disease and their families.

c. Vacancies in the membership of the commission shall be filled in the same manner provided for the original appointments.

d. The commission shall organize as soon as practicable following the appointment of its members and shall select a chairperson from among the members. The chairperson shall appoint a secretary who need not be a member of the commission.

e. Members of the commission shall serve without compensation, but shall be reimbursed for necessary expenses incurred in the performance of their duties as members of the commission, within the limits of funds appropriated or otherwise made available to the commission for its purposes.

f. The commission shall be entitled to call to its assistance and avail itself of the services of the employees of any State, county, or municipal department, board, bureau, commission, or agency as it may require and as may be available to it for its purposes.

g. The Department of Human Services shall provide staff support to the commission, as necessary.

287. Section 2 of P.L.2003, c.257 (C.26:2N-9) is amended to read as follows:

C.26:2N-9 Administration of antibody titer prior to second dose of MMR vaccine.

2. a. Prior to administering a second dose of the measles-mumps-rubella (MMR) vaccine to a child, a health care provider may give the child's parent or guardian the option of consenting to the administration of an antibody titer to determine whether or not the child has already developed immunity to MMR in response to a previously administered dose of the vaccine and would not require the second dose.

b. Documented laboratory evidence of immunity from MMR shall exempt a child from further vaccination for MMR, as may be required pursuant to Department of Health regulations.

288. Section 3 of P.L.2003, c.257 (C.26:2N-10) is amended to read as follows:

C.26:2N-10 Pamphlet explaining nature, purpose of MMR vaccine and anti-body titer.

3. The Commissioner of Health shall prepare and make available to all health care providers in the State a pamphlet that explains the nature and purpose of the MMR vaccine and the antibody titer used to determine immunity pursuant to section 2 of this act.

The commissioner shall send a copy of the pamphlet to every licensed health care provider in the State who administers the MMR vaccine, with a cover letter advising the health care provider that the pamphlet was prepared in accordance with the requirements of P.L.2003, c. 257 (C.26:2N-8 et seq.), known as "Holly's Law," and how the health care provider can obtain additional copies of the pamphlet from the Department of Health.

289. Section 4 of P.L.2003, c.257 (C.26:2N-11) is amended to read as follows:

C.26:2N-11 Rules, regulations.

4. The Commissioner of Health shall adopt rules and regulations, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), necessary to carry out the provisions of this act.

290. Section 2 of P.L.1993, c.288 (C.26:2Q-2) is amended to read as follows:

C.26:2Q-2 Definitions.

2. As used in sections 1 through 12 of P.L.1993, c.288 (C.26:2Q-1 through C.26:2Q-12):

"Commissioner" means the Commissioner of Health.

"Department" means the Department of Health.

"Interim controls" means a set of measures designed to reduce temporarily human exposure or likely exposure to lead-based paint hazards, including specialized cleaning, repairs, maintenance, painting, temporary containment, ongoing monitoring of lead-based paint hazards or potential hazards, and the establishment and operation of management and resident education programs, or as the term is defined under 42 U.S.C.s.4851b.

"Lead abatement" means a set of measures designed to permanently eliminate lead-based paint hazards in accordance with standards established by the Commissioner of Community Affairs in compliance with standards promulgated by the appropriate federal agencies. Such term includes:

a. the removal of lead-based paint and lead-contaminated dust, the permanent containment or encapsulation of lead-based paint, the replace-

ment of lead-painted surfaces or fixtures, and the removal or covering of lead contaminated soil; and

b. all preparation, cleanup, disposal, and post-abatement clearance testing activities associated with such measures.

"Lead evaluation" means a surface-by-surface investigation to determine the presence of lead-based paint and the provision of a report explaining the results of the investigation.

"Lead hazard control work" means work to make housing lead-safe, or to mitigate, through the use of interim controls as permitted under federal law and as defined in 42 U.S.C.s.4851b, or to eliminate permanently lead-based paint hazards by abatement on a premises by a person certified to perform lead abatement work pursuant to sections 1 through 12 of P.L.1993, c.288 (C.26:2Q-1 et seq.) and sections 14 through 24 of P.L.1993, c.288 (C.52:27D-427 et seq.).

"Lead-based paint" means paint or other surface coating material that contains lead in excess of 1.0 milligrams per centimeter squared or in excess of 0.5% by weight, or such other level as may be established by federal law.

"Lead-based paint hazard" means any condition that causes exposure to lead from lead-contaminated dust or soil or lead-contaminated paint that is deteriorated or present in surfaces, that would result in adverse human health effects.

"Lead-based paint hazard inspection" means an inspection of residential housing and the structure's interior common areas and exterior surface for the presence of lead-based paint hazards.

"Lead safe maintenance work" means those maintenance activities which are necessary to maintain surfaces in a lead safe condition and to prevent lead-based paint hazards from occurring or reoccurring.

"Surface" means an area such as an interior or exterior wall, ceiling, floor, door, door frame, window sill, window frame, porch, stair, handrail and spindle, or other abradable surface, soil, furniture, a carpet, a radiator or a water pipe.

291. Section 2 of P.L.1997, c.191 (C.26:2R-2) is amended to read as follows:

C.26:2R-2 Definitions relative to "Osteoporosis Prevention and Education Program Act."

2. As used in this act:

"Commissioner" means the Commissioner of Human Services.

"Council" means the Interagency Council on Osteoporosis established pursuant to this act.

"Department" means the Department of Human Services.

"Program" means the osteoporosis prevention and education program established pursuant to this act.

292. Section 3 of P.L.1997, c.191 (C.26:2R-3) is amended to read as follows:

C.26:2R-3 Establishment of osteoporosis prevention and education program.

3. a. The Commissioner of Human Services shall establish an osteoporosis prevention and education program in the Department of Human Services. The purpose of the program is to promote: public awareness of the causes of osteoporosis; options for prevention; the value of early detection; and possible treatments, including the benefits and risks of those treatments. The department may accept, for that purpose, any special grant of money, services, or property from the federal government or any of its agencies, or from any foundation, organization, or medical school.

b. The program shall include the following:

(1) Development of a public education and outreach campaign to promote osteoporosis prevention and education, including, but not limited to, the following subjects:

- (a) The cause and nature of the disease;
- (b) Risk factors;
- (c) The role of hysterectomy;
- (d) Prevention of osteoporosis, including nutrition, diet, and physical exercise;
- (e) Diagnostic procedures and appropriate indications for their use;
- (f) Hormone replacement, including the benefits and risks;
- (g) Environmental safety and injury prevention; and
- (h) Availability of osteoporosis diagnostic treatment services in the community.

(2) Development of educational materials to be made available for consumers, particularly targeted to high-risk groups, through local boards of health, physicians, other health care providers, including, but not limited to, health maintenance organizations, hospitals, and clinics, and women's organizations.

(3) Development of professional education programs for health care providers to assist them in understanding research findings and the subjects set forth in paragraph (1) of this subsection.

(4) Development and maintenance of a list of current providers of specialized services for the prevention and treatment of osteoporosis. Dissemination of the list shall be accompanied by a description of diagnostic procedures, appropriate indications for their use, and a cautionary statement about the current status of osteoporosis research, prevention, and treatment. The statement shall also indicate that the department does not license, certify, or in any other way approve osteoporosis programs or centers in this State.

293. Section 1 of P.L.1999, c.330 (C.26:2R-3.1) is amended to read as follows:

C.26:2R-3.1 Preparation, distribution of informational pamphlet on osteoporosis.

1. The Department of Human Services shall prepare an informational pamphlet which describes the causes and nature of osteoporosis as well as methods which may be used to prevent and treat osteoporosis, including nutrition, diet, physical exercise, and medications. The department shall make a supply of these pamphlets available to all pharmacies registered with the New Jersey Board of Pharmacy for distribution to the public.

294. Section 2 of P.L.1997, c.192 (C.26:2S-2) is amended to read as follows:

C.26:2S-2 Definitions relative to health care quality.

2. As used in sections 2 through 19 of this act:

"Behavioral health care services" means procedures or services rendered by a health care provider for the treatment of mental illness, emotional disorders, or drug or alcohol abuse. "Behavioral health care services" does not include: any quality assurance or utilization management activities or treatment plan reviews conducted by a carrier, or a private entity on behalf of the carrier, pertaining to these services, whether administrative or clinical in nature; or any other administrative functions, including, but not limited to, accounting and financial reporting, billing and collection, data processing, debt or debt service, legal services, promotion and marketing, or provider credentialing.

"Carrier" means an insurance company, health service corporation, hospital service corporation, medical service corporation, or health maintenance organization authorized to issue health benefits plans in this State.

"Commissioner" means the Commissioner of Banking and Insurance.

"Contract holder" means an employer or organization that purchases a contract for services.

"Covered person" means a person on whose behalf a carrier offering the plan is obligated to pay benefits or provide services pursuant to the health benefits plan.

"Covered service" means a health care service provided to a covered person under a health benefits plan for which the carrier is obligated to pay benefits or provide services.

"Department" means the Department of Banking and Insurance.

"Health benefits plan" means a benefits plan which pays or provides hospital and medical expense benefits for covered services, and is delivered or issued for delivery in this State by or through a carrier. Health benefits plan includes, but is not limited to, Medicare supplement coverage and risk contracts to the extent not otherwise prohibited by federal law. For the purposes of this act, health benefits plan shall not include the following plans, policies, or contracts: accident only, credit, disability, long-term care, CHAMPUS supplement coverage, coverage arising out of a workers' compensation or similar law, automobile medical payment insurance, personal injury protection insurance issued pursuant to P.L.1972, c.70 (C.39:6A-1 et seq.), or hospital confinement indemnity coverage.

"Health care provider" means an individual or entity which, acting within the scope of its licensure or certification, provides a covered service defined by the health benefits plan. Health care provider includes, but is not limited to, a physician and other health care professionals licensed pursuant to Title 45 of the Revised Statutes, and a hospital and other health care facilities licensed pursuant to Title 26 of the Revised Statutes.

"Independent utilization review organization" means an independent entity comprised of physicians and other health care professionals who are representative of the active practitioners in the area in which the organization will operate and which is under contract with the department to provide medical necessity or appropriateness of services appeal reviews pursuant to this act.

"Managed behavioral health care organization" means an entity, other than a carrier, which contracts with a carrier to provide, undertake to arrange, or administer behavioral health care services to covered persons through health care providers employed by the managed behavioral health care organization or otherwise make behavioral health care services available to covered persons through contracts with health care providers.

"Managed behavioral health care organization" does not include a person or entity that, for an administrative fee only, solely arranges a panel of health care providers for a carrier for the provision of behavioral health care services on a discounted fee-for-service basis.

"Managed care plan" means a health benefits plan that integrates the financing and delivery of appropriate health care services to covered persons by arrangements with participating providers, who are selected to participate on the basis of explicit standards, to furnish a comprehensive set of health care services and financial incentives for covered persons to use the participating providers and procedures provided for in the plan.

"Subscriber" means, in the case of a group contract, a person whose employment or other status, except family status, is the basis for eligibility for enrollment by the carrier or, in the case of an individual contract, the person in whose name the contract is issued.

"Utilization management" means a system for reviewing the appropriate and efficient allocation of health care services under a health benefits plan according to specified guidelines, in order to recommend or determine whether, or to what extent, a health care service given or proposed to be given to a covered person should or will be reimbursed, covered, paid for, or otherwise provided under the health benefits plan. The system may include: preadmission certification, the application of practice guidelines, continued stay review, discharge planning, preauthorization of ambulatory care procedures, and retrospective review.

295. Section 1 of P.L.2001, c.88 (C.26:2S-7.1) is amended to read as follows:

C.26:2S-7.1 Universal application for credentialing physicians for a carrier's provider network.

1. The Commissioner of Banking and Insurance, in consultation with the New Jersey Association of Health Plans, the Health Insurance Association of America, the Medical Society of New Jersey, the New Jersey Hospital Association, and such other representatives of managed care plans as the commissioner deems appropriate, shall adopt by regulation, a universal physician application for participation form for use by carriers which offer managed care plans for the purpose of credentialing physicians who seek to participate in a carrier's provider network and for the purpose of credentialing physicians who are employed by hospitals or other health care facilities which seek to participate in a carrier's provider network.

The commissioner, in consultation with the New Jersey Association of Health Plans, the Health Insurance Association of America, the Medical Society of New Jersey, the New Jersey Hospital Association and such other representatives of managed care plans as the commissioner deems appropriate, shall also adopt by regulation a form for renewal of credentialing,

which shall be an abbreviated version of the universal application form. The renewal form shall be designed to enable a physician to indicate changes in the information provided in the application form.

The commissioner shall revise the universal application and renewal forms, as necessary, to conform with industry-wide, national standards for credentialing.

In developing the forms, the commissioner shall consult with the Commissioner of Human Services to ensure that the credentialing requirements for participation in the Medicaid program, established pursuant to P.L.1968, c.413 (C.30:4D-1 et seq.), and the NJ FamilyCare Program established pursuant to P.L.2005, c.156 (C.30:4J-8 et al.) are adequately reflected on the application and renewal forms.

296. Section 3 of P.L.2001, c.88 (C.26:2S-7.3) is amended to read as follows:

C.26:2S-7.3 Rules, regulations.

3. The Commissioner of Banking and Insurance shall adopt regulations within 180 days of the date of enactment of this act, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), necessary to carry out the purposes of this act.

297. Section 1 of P.L.2000, c.121 (C.26:2S-10.1) is amended to read as follows:

C.26:2S-10.1 Home treatment for bleeding episodes associated with hemophilia, required coverage.

1. A carrier which offers a managed care plan that provides benefits or health care services, as applicable, for the home treatment of bleeding episodes associated with hemophilia, including the purchase of blood products and blood infusion equipment, shall comply with the provisions of this section.

a. For the purpose of providing home treatment services for bleeding episodes associated with hemophilia, the carrier shall be required to contract with, and exclusively use, providers that comply with standards adopted by regulation of the Department of Banking and Insurance in consultation with the Hemophilia Association of New Jersey. At a minimum, the standards shall require that each provider:

(1) provide services pursuant to a prescription from the covered person's attending physician and not make any substitutions of blood products without prior approval of the attending physician;

(2) provide all brands of clotting factor products in low, medium and high-assay range levels to execute treatment regimens as prescribed by a covered person's attending physician, and all needed ancillary supplies for the treatment or prevention of bleeding episodes, including, but not limited to, needles, syringes, and cold compression packs;

(3) have the ability to deliver prescribed blood products, medications, and nursing services within three hours after receipt of a prescription for an emergent situation, and maintain 24-hour on-call service to accommodate this requirement;

(4) demonstrate experience with and knowledge of bleeding disorders and the management thereof;

(5) demonstrate the ability for appropriate and necessary record keeping and documentation, including the ability to expedite product recall or notification systems and the ability to assist covered persons in obtaining third party reimbursement;

(6) provide for proper removal and disposal of hazardous waste pursuant to State and federal law;

(7) provide covered persons with a written copy of the agency's policy regarding discontinuation of services related to loss of health benefits plan coverage or inability to pay; and

(8) provide covered persons, upon request, with information about the expected costs for medications and services provided by the agency that are not otherwise covered by the covered person's health benefits plan.

b. The Department of Banking and Insurance shall compile a list of providers who meet the minimum standards established pursuant to this section and shall make the list available to carriers and covered persons, upon request.

c. As used in this section: "blood product" includes, but is not limited to, Factor VIII, Factor IX and cryoprecipitate; and "blood infusion equipment" includes, but is not limited to, syringes and needles.

298. Section 11 of P.L.2000, c.121 (C.26:2S-10.3) is amended to read as follows:

C.26:2S-10.3 Regulations by department.

11. The Department of Banking and Insurance, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt regulations to carry out the provisions of sections 1 and 2 of this act.

299. Section 1 of P.L.2011, c.190 (C.26:2S-14.1) is amended to read as follows:

C.26:2S-14.1 General hospital to provide information concerning the Independent Health Care Appeals Program.

1. A general hospital licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) shall be required, as prescribed by regulation of the Commissioner of Health, to:

(1) post, in a conspicuous place in each of its waiting rooms for members of the general public, a notice, as prescribed pursuant to section 3 of P.L.2011, c.190 (C.26:2S-14.2), which provides information about the operation of, and how to apply for, the Independent Health Care Appeals Program established pursuant to section 11 of P.L.1997, c.192 (C.26:2S-11); and

(2) ensure that appropriate hospital staff, including direct patient care providers, staff that are concerned with billing for hospital services or provide financial counseling to patients, and staff otherwise engaged in providing patient advocacy or patient relations services, are made aware of the program and are able to provide information to patients and their family members, or other persons on the patient's behalf, about how to contact the program.

300. Section 3 of P.L.2011, c.190 (C.26:2S-14.2) is amended to read as follows:

C.26:2S-14.2 Size, content, format of notice.

3. The Commissioner of Banking and Insurance, in consultation with the Commissioner of Health and the State Board of Medical Examiners, shall prescribe the size, content, and format of the notice about the Independent Health Care Appeals Program to be posted in general hospitals pursuant to section 1 of P.L.2011, c.190 (C.26:2S-14.1) and in physicians' medical offices pursuant to section 2 of P.L.2011, c.190 (C.45:9-22.26), and shall make the notice available to general hospitals and physicians, and to members of the general public, by posting it on the Internet website of the Department of Banking and Insurance.

301. Section 4 of P.L.2011, c.190 (C.26:2S-14.3) is amended to read as follows:

C.26:2S-14.3 Rules, regulations.

4. The Commissioner of Health and the State Board of Medical Examiners, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.) and in consultation with each other and the Commissioner of Banking and Insurance, shall adopt rules and regulations to effectuate the purposes of this act.

302. Section 2 of P.L.2001, c.14 (C.26:2S-20) is amended to read as follows:

C.26:2S-20 Definitions relative to Managed Health Care Consumer Assistance Program.

2. As used in this act:

"Carrier" means a carrier as defined in section 2 of P.L.1997, c.192 (C.26:2S-2).

"Commissioner" means the Commissioner of Banking and Insurance.

"Department" means the Department of Banking and Insurance.

"Managed care plan" means a managed care plan as defined in section 2 of P.L.1997, c.192 (C.26:2S-2).

"Medicaid" means the Medicaid program established pursuant to P.L.1968, c.413 (C.30:4D-1 et seq.).

"Medicare" means the federal Medicare program established pursuant to the federal Social Security Act, Pub.L.89-97 (42 U.S.C. s.1395 et seq.).

"NJ FamilyCare" means the FamilyCare Health Coverage Program established pursuant to P.L.2005, c.156 (C.30:4J-8 et al.).

"Program" means the Managed Health Care Consumer Assistance Program established pursuant to this act.

303. Section 3 of P.L.2001, c.14 (C.26:2S-21) is amended to read as follows:

C.26:2S-21 Managed Health Care Consumer Assistance Program.

3. a. There is established the Managed Health Care Consumer Assistance Program in the Department of Banking and Insurance. The commissioner shall make agreements to operate the program as necessary, in consultation with the Commissioner of Human Services, to assure that citizens have reasonable access to services in all regions of the State.

b. The program shall:

(1) create and provide educational materials and training to consumers regarding their rights and responsibilities as enrollees in managed care plans, including materials and training specific to Medicaid, NJ FamilyCare, Medicare, and commercial managed care plans;

(2) assist and educate individual enrollees about the functions of the State and federal agencies that regulate managed care products, assist and educate enrollees about the various complaint, grievance, and appeal processes, including State fair hearings, provide assistance to individuals in determining which process is most appropriate for the individual to pursue

when necessary, maintain and provide to individual enrollees the forms that may be necessary to submit a complaint, grievance or appeal with the State or federal agencies, and provide assistance to individual enrollees in completion of the forms, if necessary;

(3) maintain and provide information to individuals upon request about advocacy groups, including legal services programs Statewide and in each county that may be available to assist individuals, and maintain lists of State and Congressional representatives and the means by which to contact representatives, for distribution upon request;

(4) maintain a toll-free telephone number for consumers to call for information and assistance. The number shall be accessible to the deaf and hard of hearing, and staff or translation services shall be available to assist non-English proficient individuals who are members of language groups that meet population thresholds established by the department;

(5) ensure that individuals have timely access to the services of, and receive timely responses from, the program;

(6) provide feedback to managed care plans, beneficiary advisory groups and employers regarding enrollees' concerns and problems;

(7) provide nonpartisan information about federal and State activities relative to managed care, and provide assistance to individuals in obtaining copies of pending legislation, statutes, and regulations; and

(8) develop and maintain a data base monitoring the degree of each type of service provided by the program to individual enrollees, the types of concerns and complaints brought to the program and the entities about which complaints and concerns are brought.

c. In order to meet its objectives, the program shall have access to:

(1) the medical and other records of an individual enrollee maintained by a managed care plan, upon the specific written authorization of the enrollee or his legal representative;

(2) the administrative records, policies, and documents of managed care plans to which individuals or the general public have access; and

(3) all licensing, certification, and data reporting records maintained by the State or reported to the federal government by the State that are not proprietary information or otherwise protected by law, with copies thereof to be supplied to the program by the State upon the request of the program.

d. The program shall take such actions as are necessary to protect the identity and confidentiality of any complainant or other individual with respect to whom the program maintains files or records. Any medical or personally identifying information received or in the possession of the program shall be considered confidential and shall be used only by the depart-

ment, the program and such other agencies as the commissioner designates and shall not be subject to public access, inspection or copying under P.L.1963, c.73 (C.47:1A-1 et seq.) or the common law concerning access to public records. This subsection shall not be construed to limit the ability of the program to compile and report non-identifying data pursuant to paragraph (8) of subsection b. of this section.

e. The program shall seek to coordinate its activities with consumer advocacy organizations, legal assistance providers serving low-income and other vulnerable health care consumers, managed care and health insurance counseling assistance programs, and relevant federal and State agencies to assure that the information and assistance provided by the program are current and accurate.

f. Until such time as the program is developed, the commissioner shall make agreements with two independent, private nonprofit consumer advocacy organizations, which shall be the Community Health Law Project and New Jersey Protection and Advocacy, Inc. to operate the program on an interim basis. The interim program shall be in effect for one year from the effective date of this act. Any appropriation in this act for the program may be allocated for the interim program.

304. Section 8 of P.L.2001, c.14 (C.26:2S-25) is amended to read as follows:

C.26:2S-25 Rules, regulations.

8. The Commissioner of Banking and Insurance, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt rules and regulations to effectuate the purposes of this act.

305. Section 1 of P.L.1998, c.116 (C.26:2T-1) is amended to read as follows:

C.26:2T-1 Newly diagnosed Hepatitis C cases; information, reports.

1. The Commissioner of Health shall provide for the inclusion of all newly diagnosed cases of hepatitis C among those communicable diseases which are required to be reported by health care providers or other designated persons to the Department of Health pursuant to N.J.A.C.8:57-1.4 and 8:57-1.5. The commissioner shall require that such information be reported directly to the department, rather than to local health departments, as the commissioner determines necessary to assist the department to develop hepatitis C disease control measures, and shall revise these requirements as

necessary to reflect technological advances which improve the ability to diagnose and treat the disease.

306. Section 2 of P.L.1998, c.116 (C.26:2T-2) is amended to read as follows:

C.26:2T-2 Written guidance for screening.

2. The Commissioner of Health shall provide written guidance regarding screening for the hepatitis C virus to licensed physicians and public health officers which reflects current and accepted standards of medical and public health practice, consistent with the recommendations of the federal Centers for Disease Control and Prevention, and encourages appropriate screening and diagnosis of all persons at high risk for hepatitis C infection as defined by the federal centers, including, but not limited to:

- (1) veterans of the United States armed forces;
- (2) women who underwent a caesarian section or a premature delivery prior to 1990;
- (3) persons who received blood or blood products prior to 1992;
- (4) persons who received an organ or tissue transplant prior to 1990;
- (5) persons who have received invasive cosmetic procedures, including body piercing and tattooing;
- (6) persons who have a history of multiple sexually transmitted diseases or multiple partners;
- (7) persons with a history of intravenous drug use; and
- (8) such other categories of persons at high risk for hepatitis C infection as may be determined by the commissioner.

307. Section 3 of P.L.1998, c.116 (C.26:2T-3) is amended to read as follows:

C.26:2T-3 Provision of information materials to physicians, public health officers.

3. The Commissioner of Health shall make available to licensed physicians and public health officers, in printed and electronic format, hepatitis C education and prevention information materials which reflect the recommendations of the federal Centers for Disease Control and Prevention and other relevant entities, including, but not limited to, the American Liver Foundation, for distribution to persons at high risk for hepatitis C infection as described in section 2 of this act.

308. Section 4 of P.L.1998, c.116 (C.26:2T-4) is amended to read as follows:

C.26:2T-4 Rules, regulations.

4. The Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt rules and regulations to effectuate the purposes of this act.

309. Section 2 of P.L.2001, c.357 (C.26:2T-6) is amended to read as follows:

C.26:2T-6 Definitions relative to hepatitis C.

2. As used in this act:

"Commissioner" means the Commissioner of Health.

"HCV" means the hepatitis C virus.

"Program" means the hepatitis C education, prevention, and screening program established pursuant to this act.

310. Section 3 of P.L.2001, c.357 (C.26:2T-7) is amended to read as follows:

C.26:2T-7 Hepatitis C education, prevention and screening program.

3. In consultation with the hepatitis C advisory board established pursuant to section 4 of this act, the Commissioner of Health shall establish a hepatitis C education, prevention, and screening program that includes, but is not limited to, measures directed to physicians and other health care workers, police officers, correctional officers, firefighters, emergency services personnel, employees of the State's developmental centers, and the general public. The program shall be established in accordance with accepted public health practice and recommendations of the federal Centers for Disease Control and Prevention, the Surgeon General of the United States, the American Association for the Study of Liver Diseases, the National Institutes of Health and the American Liver Foundation and within the limits of resources available for the purposes thereof.

a. For the purposes of this program, the commissioner shall develop and implement the following:

(1) public education and outreach to raise awareness of hepatitis C among persons at high risk for hepatitis C as described in section 2 of P.L.1998, c.116 (C.26:2T-2), which includes police officers, firefighters, persons employed by correctional facilities, emergency response personnel,

and other high-risk groups, including, but not limited to, health care professionals and persons employed in primary care settings or health care facilities, which shall include, at a minimum, information on risk factors, the value of early detection and the options available for treating hepatitis C;

(2) measures to promote public awareness about the availability of hepatitis C screening, prevention and treatment services among persons at high risk for hepatitis C as determined by the commissioner based upon data provided by the federal Centers for Disease Control and Prevention, the Surgeon General of the United States, the American Association for the Study of Liver Diseases, the National Institutes of Health and the American Liver Foundation, and any other nationally recognized liver societies;

(3) educational activities for health care professionals in regard to the epidemiology, natural history, detection, and treatment of hepatitis C, which shall include information about coinfection with HCV and HIV and the implications of coinfection for HIV or AIDS treatment;

(4) educational and informational measures targeted at specific groups, including, but not limited to, activities designed to educate youth about the long-term consequences of infection with HCV;

(5) measures to prevent further transmission of HCV and to prevent onset of chronic liver disease caused by hepatitis C through outreach to detect and treat chronic HCV infection; and

(6) a collaborative effort with the Department of Corrections to develop screening services to identify inmates at risk for hepatitis C upon admission, and to provide education and counseling about treatment options to reduce the potential health risk to the community from these persons.

b. The commissioner shall evaluate existing hepatitis C support services in the community and assess the need for improving the quality and accessibility of these services.

c. The commissioner shall seek to establish public-private partnerships to promote outreach and increase awareness for the purposes of this act among employers, organized labor, health care providers, health insurers, and community-based organizations, and coalitions.

d. The commissioner shall take such actions as are reasonably necessary to ensure that the program established pursuant to this act provides clear, complete, and accurate hepatitis C education, information, and referral services in a multiculturally competent manner that is designed to provide appropriate linkages to health care services for persons in need thereof.

e. The commissioner shall seek to secure the use of such funds or other resources from private nonprofit or for-profit sources or the federal government to effectuate the purposes of this act as may be available there-

for, which shall be used to supplement and shall not supplant State funds used to carry out the purposes of this act.

f. The commissioner shall seek, to the maximum extent practicable, to coordinate the activities of the program, as applicable, with services provided separately to specific populations, including, but not limited to, veterans of the United States armed forces, persons participating in private or public drug abuse or alcohol treatment programs, and persons with HIV.

311. Section 1 of P.L.1999, c.366 (C.26:2U-1) is amended to read as follows:

C.26:2U-1 Chronic Fatigue Syndrome resources network established.

1. The Commissioner of Health shall establish a Statewide network of resources to provide the following services to persons with chronic fatigue syndrome, also known as chronic fatigue immune dysfunction syndrome: physician training and patient education programs, and a public awareness campaign.

312. Section 2 of P.L.1999, c.66 (C.26:2U-2) is amended to read as follows:

C.26:2U-2 Informational manual; preparation, availability.

2. The Department of Health, in consultation with the New Jersey Chronic Fatigue Syndrome Association, Inc., the Academy of Medicine of New Jersey, and the University of Medicine and Dentistry of New Jersey, shall prepare and make available to all health care providers in the State, upon request, a manual which provides information about the clinical significance, diagnosis and treatment of chronic fatigue syndrome. The manual may contain any other information which the Commissioner of Health deems necessary and may be revised by the department whenever new information about chronic fatigue syndrome becomes available. The department shall publicize and make available the manual to the maximum extent possible.

313. Section 3 of P.L.1999, c.66 (C.26:2U-3) is amended to read as follows:

C.26:2U-3 Rules, regulations.

3. The Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt rules and regulations to effectuate the purposes of this act.

314. Section 3 of P.L.1999, c.72 (C.26:2V-3) is amended to read as follows:

C.26:2V-3 Definitions relative to arthritis quality of life initiative.

3. As used in this act:

"Commissioner" means the Commissioner of Human Services.

"Department" means the Department of Human Services.

"Initiative" means the arthritis quality of life initiative established pursuant to this act.

"Arthritis" means any of the more than 130 types of arthritis and rheumatic diseases.

315. Section 5 of P.L.1999, c.72 (C.26:2V-5) is amended to read as follows:

C.26:2V-5 Advisory Council on Arthritis.

5. There is established an Advisory Council on Arthritis in the department to advise the commissioner on the development and implementation of the initiative. The council shall include: two members of the Senate, to be appointed by the President of the Senate, who shall not be of the same political party; two members of the General Assembly, to be appointed by the Speaker of the General Assembly, who shall not be of the same political party; the Senior Assistant Commissioner, Public Health Prevention and Protection and the Director of the Division of Aging Services in the Department of Human Services; the Director of the Division on Women in the Department of Children and Families, and a member of the Interagency Council on Osteoporosis, as ex officio members; and 15 public members to be appointed by the commissioner who may include representatives of persons with arthritis, arthritis health organizations, public health educators, experts in arthritis research, prevention, and treatment and health care strategic planning, and health care providers including physicians and nurses. The public members of the council shall serve without compensation and may be reimbursed for any expenses incurred by them in the performance of their duties.

Legislative members shall serve during their terms of office. Public members shall serve for a term of three years from the date of their appointment and until their successors are appointed and qualified; except that of the first appointments made: five shall be for a term of one year, five for two years, and five for three years.

Vacancies shall be filled in the same manner as the original appointments were made.

The advisory council shall organize as soon as may be practicable after the appointment of its members and shall select a chairman from among its members and a secretary who need not be a member of the council.

316. Section 1 of P.L.1999, c.361 (C.26:2W-1) is amended to read as follows:

C.26:2W-1 Cancer Awareness Education and Research Program.

1. The Commissioner of Health shall establish a Cancer Awareness, Education and Research Program to provide the following: support for cancer medical research; physician education and awareness; and patient education and screening services, particularly for members of minority groups.

317. Section 2 of P.L.1999, c.361 (C.26:2W-2) is amended to read as follows:

C.26:2W-2 Rules, regulations.

2. The Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt rules and regulations to effectuate the purposes of this act.

318. Section 1 of P.L.2001, c.196 (C.26:2W-3) is amended to read as follows:

C.26:2W-3 Breast cancer public awareness campaign.

1. a. The Commissioner of Health shall establish a breast cancer public awareness campaign, as a component of the Cancer Awareness, Education and Research Program established pursuant to P.L.1999, c.361 (C.26:2W-1 et seq.), to promote awareness and outreach throughout the State in regard to breast cancer screening services. The public awareness campaign shall be established in accordance with accepted public health practice and recommendations of the federal Centers for Disease Control and Prevention, and within the limits of funds appropriated pursuant to this act and any other resources available for the purposes thereof.

b. For the purposes of this act, the commissioner shall, at a minimum:

(1) develop and implement a Statewide plan to promote public awareness among members of the public, community-based organizations, and health care providers, and encourage more referrals to breast cancer screening services;

(2) distribute promotional incentives for free or discounted items to be provided to women by local retail businesses that will encourage them to undergo mammography and become educated about breast cancer;

(3) provide for the use of public service announcements and printed materials in both English and Spanish;

(4) seek to disseminate information through a variety of entities, including, but not limited to, primary care sites, health care facilities, local health departments and clinics, county offices on the aging, pharmacies, libraries, YWCAs and YMCAs, senior centers, houses of worship, programs that serve victims of domestic violence, other community-based outreach programs and organizations, and the Internet;

(5) consult and seek to collaborate with at least the following entities to effectuate the public awareness campaign: the New Jersey Primary Care Association, the American Cancer Society, the Medical Society of New Jersey, the New Jersey Hospital Association, Planned Parenthood, AARP, the New Jersey Advisory Commission on the Status of Women, the New Jersey State Commission on Cancer Research, The Cancer Institute of New Jersey, the New Jersey Pharmacists Association, the Health Research and Educational Trust of New Jersey, and The Peer Review Organization of New Jersey, Inc.;

(6) establish and publicize the availability of a toll-free telephone number operated by the Department of Health to provide information and referral to members of the general public about breast screening services, with particular emphasis on facilitating free and reduced charge screening for low-income and uninsured women; and

(7) seek to secure the use of such funds or other resources from private nonprofit or for-profit sources or the federal government to effectuate the purposes of this act as may be available therefor, which shall be used to supplement and shall not supplant State funds used to carry out the purposes of this act.

319. Section 1 of P.L.2000, c.25 (C.26:2X-1) is amended to read as follows:

C.26:2X-1 Public awareness campaign relative to meningitis.

1. The Commissioner of Health shall establish a public awareness campaign to inform the general public about the clinical significance of meningitis and its public health implications, including its causes and the most effective means of prevention and treatment.

320. Section 3 of P.L.2000, c.25 (C.26:2X-2) is amended to read as follows:

C.26:2X-2 Rules, regulations.

3. The Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt rules and regulations to effectuate the purposes of this act.

321. Section 1 of P.L.2006, c.64 (C.26:2X-3) is amended to read as follows:

C.26:2X-3 Development of educational fact sheet concerning meningococcal meningitis.

1. The Commissioner of Health, in consultation with the Commissioner of Education, shall develop an educational fact sheet concerning meningococcal meningitis for distribution to parents or guardians of students in grades 6 through 12, pursuant to section 2 of P.L.2006, c.64 (C.18A:40-21.2). The educational fact sheet shall include, but need not be limited to, the following information:

- a. the causes, symptoms, and means of transmission of meningococcal meningitis;
- b. the availability, effectiveness, and risks of the meningitis vaccine;
- and
- c. where additional information concerning the disease can be obtained.

322. Section 2 of P.L.2001, c.304 (C.26:2Y-2) is amended to read as follows:

C.26:2Y-2 Findings, declarations relative to adult family care.

2. The Legislature finds and declares that:

a. In the absence of appropriate housing with supportive services, many elders or people with physical disabilities are often subject to inappropriate, premature, or overextended institutionalization. This results in the overutilization of costly services and the negative impact of the institutional environment on the individual's emotional and physical well-being. A need exists to fill this gap in the housing continuum between independent living and institutionalization for those elders and physically disabled citizens who are in need of shelter and services to remain in the community.

b. Adult family care has proven to be a successful and cost-effective means of fulfilling basic shelter and everyday service needs of elders and physically disabled adults, thereby enabling them to preserve their independence, choice and dignity in a secure environment.

c. Therefore, it is the policy of this State to promote the health, safety and welfare of its elderly and physically disabled citizens by encouraging the development of adult family care homes for elders and physically disabled adults and to provide for the licensing of caregivers and regulation of such adult family care homes by the Department of Health.

323. Section 3 of P.L.2001, c.304 (C.26:2Y-3) is amended to read as follows:

C.26:2Y-3 Definitions relative to adult family care.

3. As used in this act:

"Activities of daily living" or "ADL" means functions and tasks for self-care which are performed either independently or with supervision or assistance, which include, but are not limited to, mobility, transferring, walking, grooming, bathing, dressing and undressing, eating, and toileting.

"Adult family care" means a 24-hour per day living arrangement for persons who, because of age or physical disability, need assistance with activities of daily living, and for whom services designed to meet their individual needs are provided by licensed caregivers in approved adult family care homes.

"Adult family care caregiver" means a person licensed to provide care and services in the daily operation of an adult family care home, but does not include the owner or lessor of the building in which the adult family care home is situated unless the owner or lessor is also the provider of care and services in the adult family care home.

"Adult family care home" means a residence regulated by the department and housing no more than three clients, in which personal care and other supportive services are provided by an individual who has been licensed by the department as an adult family care caregiver. "Adult family care home" shall not include a rooming or boarding house used and operated under license of the Department of Community Affairs pursuant to P.L.1979, c.496 (C.55:13B-1 et seq.).

"Adult family care sponsor agency" means an entity licensed by the department to administer an adult family care program within a given area, which provides essential administrative and clerical support services to two or more caregivers, and which shall not be considered to be a health care facility as defined in section 2 of P.L.1971, c.136 (C.26:2H-2).

"Client" means an elder or person with physical disabilities enrolled in adult family care.

"Commissioner" means the Commissioner of Health.

"Department" means the Department of Health.

"Elder" means a person sixty years of age or older.

324. Section 13 of P.L.2001, c.304 (C.26:2Y-11) is amended to read as follows:

C.26:2Y-11 Rules, regulations.

13. The Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt rules and regulations to effectuate the purposes of this act.

325. Section 2 of P.L.2005, c.274 (C.26:2MM-2) is amended to read as follows:

C.26:2MM-2 Definitions relative to elderly person suicide prevention.

2. As used in this act:

"Alcohol and drug counselor" means a person who is a certified alcohol and drug counselor or a licensed clinical alcohol and drug counselor pursuant to P.L.1997, c.331 (C.45:2D-1 et seq.).

"Attempted suicide" means destructive behavior intended by the actor to result in the actor's harm or death.

"Completed suicide" means a death that is known or reasonably suspected to have resulted from an intentional act of the deceased, regardless of whether it has been ruled a suicide by a medical examiner.

"Council" means the New Jersey Elderly Person Suicide Prevention Advisory Council established pursuant to section 3 of this act.

"Department" means the Department of Human Services.

"Elderly person" means a person 65 years of age and older.

"Licensed clinical social worker" means a person who holds a current, valid license issued pursuant to subsection a. of section 6 or subsection a. or d. of section 8 of P.L.1991, c.134 (C.45:15BB-1 et seq.).

326. Section 3 of P.L.2005, c.274 (C.26:2MM-3) is amended to read as follows:

C.26:2MM-3 New Jersey Elderly Person Suicide Prevention Advisory Council.

3. There is established in the Department of Human Services the New Jersey Elderly Person Suicide Prevention Advisory Council.

a. The purpose of the council shall be to examine existing needs of and services for elderly persons at risk of suicide and make recommendations to the department for suicide prevention and intervention strategies to help reduce the incidence of attempted and completed suicides among elderly persons.

b. The council shall consist of nine members as follows:

(1) the Commissioners of Health and Human Services and the chairman of the Community Mental Health Citizens Advisory Board established pursuant to P.L.1957, c.146 (C.30:9A-1 et seq.), or their designees, who shall serve ex officio;

(2) two public members appointed by the Governor, one of whom shall be a person with personal or family experience with suicide of an elderly person and one of whom shall be an alcohol and drug counselor;

(3) two public members appointed by the Speaker of the General Assembly, who are not members of the same political party, one of whom shall be a registered professional nurse and one of whom shall be a licensed clinical social worker; and

(4) two public members appointed by the President of the Senate, who are not members of the same political party, one of whom shall be a physician who has been specially trained in caring for elderly persons and has a certificate of added qualifications in geriatrics and one of whom shall be a geropsychiatrist.

c. The public members shall be appointed no later than 60 days after the enactment of this act.

d. The public members shall serve for a term of five years; but, of the members first appointed, two shall serve for a term of three years, two shall serve for a term of four years and two shall serve for a term of five years. Members are eligible for reappointment upon the expiration of their terms. Vacancies in the membership of the council shall be filled in the same manner provided for the original appointments.

e. The council shall organize as soon as practicable following the appointment of its members and shall select a chairperson and vice-chairperson from among the members. The chairperson shall appoint a secretary who need not be a member of the council.

f. The public members shall serve without compensation, but shall be reimbursed for necessary expenses incurred in the performance of their duties and within the limits of funds available to the council.

g. The council shall be entitled to call to its assistance and avail itself of the services of the employees of any State, county, or municipal department, board, bureau, commission, or agency as it may require and as may be available to it for its purposes.

h. The Department of Human Services shall provide staff support to the council.

327. Section 115 of P.L.2008, c.29 (C.26:2NN-1) is amended to read as follows:

C.26:2NN-1 "Law Enforcement Officer Crisis Intervention Services" telephone hotline.

115. a. The Department of Human Services shall maintain a toll-free information "Law Enforcement Officer Crisis Intervention Services" telephone hotline on a 24-hour basis.

The hotline shall receive and respond to calls from law enforcement officers and sheriff's officers who have been involved in any event or incident which has produced personal or job-related depression, anxiety, stress, or other psychological or emotional tension, trauma, or disorder for the officer and officers who have been wounded in the line of duty. The operators of the hotline shall seek to identify those officers who should be referred to further debriefing, and counseling services, and to provide such referrals. In the case of wounded officers, those services may include peer counseling, diffusing, debriefing, group therapy and individual therapy as part of a coordinated assistance program, to be known as the "Blue Heart Law Enforcement Assistance Program," designed and implemented by the University of Medicine and Dentistry of New Jersey's University Behavioral Healthcare Unit.

b. The operators of the hotline shall be trained by the Department of Human Services and, to the greatest extent possible, shall be persons, who by experience or education, are: (1) familiar with post trauma disorders and the emotional and psychological tensions, depressions, and anxieties unique to law enforcement officers and sheriff's officers; or (2) trained to provide counseling services involving marriage and family life, substance abuse, personal stress management, and other emotional or psychological disorders or conditions which may be likely to adversely affect the personal and professional well-being of a law enforcement officer and a sheriff's officer.

c. To ensure the integrity of the telephone hotline and to encourage officers to utilize it, the commissioner shall provide for the confidentiality of the names of the officers calling, the information discussed by that officer and the operator, and any referrals for further debriefing or counseling; provided, however, the commissioner may, by rule and regulation, (1) establish guidelines providing for the tracking of any officer who exhibits a severe emotional or psychological disorder or condition which the operator handling the call reasonably believes might result in harm to the officer or others and (2) establish a confidential registry of wounded New Jersey law enforcement officers.

328. Section 16 of P.L.2008, c.39 (C.26:2NN-2) is amended to read as follows:

C.26:2NN-2 List of counseling resources available to law enforcement, sheriff's officers.

116. The Commissioner of Human Services shall prepare a list of appropriately licensed or certified psychiatrists, psychologists, and social workers; other appropriately trained and qualified counselors; and experienced former law enforcement officers who are willing to accept referrals and to participate in the debriefing and counseling offered law enforcement officers and sheriff's officers under the provisions of sections 115 to 116 of P.L.2008, c.29 (C.26:2NN-1 to C.26:2NN-2).

329. Section 2 of P.L.2005, c.3 (C.26:3A2-36) is amended to read as follows:

C.26:3A2-36 Plan for standardization, coordination of hazardous materials emergency response programs.

2. a. The Department of Environmental Protection, with the concurrence of the Department of Health and the State Office of Emergency Management in the Division of State Police in the Department of Law and Public Safety, shall develop a comprehensive plan for the standardization and coordination of county hazardous material response programs to effectively address all incidents involving hazardous materials, including, but not limited to, chemical, biological, radiological, nuclear, or explosive incidents.

The plan shall include procedures for State, county, and local response to incidents involving hazardous materials, including, but not limited to, chemical, biological, radiological, nuclear, or explosive incidents, and planning, training, exercising, and equipment requirements designed to assure that local responders have the capacity, competency and capability to protect the public from exposure to those materials, and shall include the adoption of environmental health performance standards and standards of administrative procedures for county hazardous materials response.

b. The certified local health agency in each county shall develop, in consultation with their county office of emergency management, a comprehensive, coordinated county-wide emergency response program for incidents involving hazardous materials, including, but not limited to, chemical, biological, radiological, nuclear, or explosive incidents for the county that is consistent with the plan developed by the department pursuant to subsection a. of this section.

c. In any county in which there is no certified local health agency, the board of chosen freeholders shall designate a local health agency from the county to develop, in consultation with the county office of emergency management and the Department of Health, a comprehensive, coordinated county-wide emergency response program for incidents involving hazardous materials, including, but not limited to, chemical, biological, radiological, nuclear, or explosive incidents for the county that is consistent with the plan developed by the department pursuant to subsection a. of this section.

330. Section 4 of P.L.2005, c.3 (C.26:3A2-38) is amended to read as follows:

C.26:3A2-38 Rules, regulations relative to grant awards, performance standards, interlocal agreements.

4. a. The Department of Environmental Protection, with the concurrence of the Department of Health and the State Office of Emergency Management in the Division of State Police in the Department of Law and Public Safety, and in consultation with representatives of certified local health agencies, shall adopt, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), rules and regulations that:

(1) establish criteria and procedures for the award of grants to certified local health agencies, or local health agencies, as appropriate, pursuant to section 3 of P.L.2005, c.3 (C.26:3A2-37);

(2) establish environmental health performance standards and standards of administrative procedures for county hazardous materials response for incidents involving hazardous materials, including, but not limited to, chemical, biological, radiological, nuclear, or explosive incidents; and

(3) establish criteria and procedures for the development of inter-local agreements to facilitate the creation of a Statewide mutual aid network for responding to incidents involving hazardous materials, including, but not limited to, chemical, biological, radiological, nuclear, or explosive incidents

b. Prior to the adoption of rules and regulations pursuant to subsection a. of this section, and notwithstanding the provisions of the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.) to the contrary, the Commissioner of Environmental Protection may, immediately upon filing the proper notice with the Office of Administrative Law, adopt such temporary rules and regulations as the commissioner determines are necessary to implement the provisions of P.L.2005, c.3 (C.26:3A2-36 et al.). The temporary rules and regulations shall be in effect for a period not to exceed 270 days after the date of the filing, except that in no case shall the temporary

rules and regulations be in effect one year after the effective date of P.L.2005, c.3 (C.26:3A2-36 et al.). The temporary rules and regulations shall thereafter be amended, adopted or readopted by the commissioner as the commissioner determines is necessary in accordance with the requirements of the "Administrative Procedure Act."

331. Section 8 of P.L.2005, c.383 (C.26:3D-62) is amended to read as follows:

C.26:3D-62 Violations, fines, penalties; enforcement.

8. a. The person having control of an indoor public place or workplace shall order any person smoking in violation of this act to comply with the provisions of this act. A person, after being so ordered, who smokes in violation of this act is subject to a fine of not less than \$250 for the first offense, \$500 for the second offense and \$1,000 for each subsequent offense. A penalty shall be recovered in accordance with the provisions of subsections c. and d. of this section.

b. The Department of Health or the local board of health or the board, body, or officers exercising the functions of the local board of health according to law, upon written complaint or having reason to suspect that an indoor public place or workplace covered by the provisions of this act is or may be in violation of the provisions of this act, shall, by written notification, advise the person having control of the place accordingly, and order appropriate action to be taken. A person receiving that notice who fails or refuses to comply with the order is subject to a fine of not less than \$250 for the first offense, \$500 for the second offense, and \$1,000 for each subsequent offense. In addition to the penalty provided herein, the court may order immediate compliance with the provisions of this act.

c. A penalty recovered under the provisions of this act shall be recovered by and in the name of the Commissioner of Health or by and in the name of the local board of health. When the plaintiff is the Commissioner of Health, the penalty recovered shall be paid by the commissioner into the treasury of the State. When the plaintiff is a local board of health, the penalty recovered shall be paid by the local board into the treasury of the municipality where the violation occurred.

d. A municipal court shall have jurisdiction over proceedings to enforce and collect any penalty imposed because of a violation of this act if the violation has occurred within the territorial jurisdiction of the court. The proceedings shall be summary and in accordance with the "Penalty Enforcement Law of 1999," P.L.1999, c.274 (C.2A:58-10 et seq.). Process

shall be in the nature of a summons or warrant and shall issue only at the suit of the Commissioner of Health, or the local board of health, as the case may be, as plaintiff.

e. The penalties provided in subsections a. and b. of this section shall be the only civil remedy for a violation of this act, and there shall be no private right of action against a party for failure to comply with the provisions of this act.

332. Section 10 of P.L.2005, c.383 (C.26:3D-64) is amended to read as follows:

C.26:3D-64 Rules, regulations.

10. The Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt rules and regulations to effectuate the purposes of this act.

333. Section 1 of P.L.2005, c.26 (C.26:3E-14) is amended to read as follows:

C.26:3E-14 Fact sheet distributed to restaurants relative to nut allergies; definitions.

1. The Commissioner of Health, in consultation with the New Jersey Restaurant Association, shall prepare a fact sheet, to be directed to restaurant managers and staff, which is designed to explain nut allergies and the health-related consequences to persons with nut allergies who are exposed to food items that contain or are prepared with nut products, and includes a recommendation that restaurants identify such food items on their menus. The commissioner shall make this fact sheet available to local boards of health by electronic or other means of distribution, and local health officers shall furnish this information to restaurants at the time of inspection.

As used in this section:

"Nut" means peanuts and tree nuts, including, but not limited to, almonds, brazil nuts, cashews, hazelnuts, filberts, macadamia nuts, pecans, pistachios, and walnuts; and

"Restaurant" means an establishment in which the principal business is the sale of food for consumption on the premises.

334. Section 2 of P.L.2005, c.26 (C.26:3E-15) is amended to read as follows:

C.26:3E-15 "Ask Before You Eat" public information campaign.

2. The Commissioner of Health shall conduct, within the limits of monies appropriated pursuant to this act, a public information campaign regarding food allergies, to be known as "Ask Before You Eat." The public information campaign shall be designed to inform the public about food allergies and the health-related consequences, including anaphylaxis, to persons with such allergies who are exposed to food items that contain or are prepared with ingredients that trigger severe allergic reactions, such as peanuts, tree nuts, and seafood.

335. Section 2 of P.L.2009, c.306 (C.26:3E-17) is amended to read as follows:

C.26:3E-17 Requirements for certain retail food establishments.

2. Notwithstanding any provision of law to the contrary:

a. (1) A retail food establishment using a standard printed menu shall list next to each food or beverage item on the menu, the total number of calories for that item as usually prepared and offered for sale;

(2) A retail food establishment using a menu board system or similar signage shall list next to each food or beverage item on the board or sign, the total number of calories for that item as usually prepared and offered for sale;

(3) A retail food establishment that has a drive-through window shall display calorie content values either on the drive-through menu board or on an adjacent stanchion visible at the point of ordering, and the calorie content values shall be posted adjacent to their respective menu item names as clearly and conspicuously as the price or menu item is on the drive-through menu board; and

(4) A retail food establishment which offers alcoholic beverages for sale may, as an alternative to listing calorie information for each individual alcoholic beverage, list the average caloric value for beers, wines, and spirits as established by the United States Department of Agriculture, Agriculture Research Service in the National Nutrient Database for Standard Reference.

A retail food establishment that lists the average caloric values for alcoholic beverages pursuant to this paragraph shall add to the labeling the following statement: "Signature drinks or liqueurs with added ingredients may increase calorie content."

b. The calorie information listed pursuant to paragraphs (1) and (2) of subsection a. of this section shall be posted clearly and conspicuously adjacent or in close proximity to the applicable menu item using a font and

format that is at least as prominent, in size and appearance, as that used to post either the name or price of the menu item.

The calorie content values required by this act shall be based upon a verifiable analysis of the menu item, which may include the use of nutrient databases, laboratory testing, or other reliable methods of analysis, and shall be rounded to the nearest 10 calories for calorie content values above 50 calories and to the nearest five calories for calorie content values 50 calories and below.

c. The provisions of this section shall apply to each menu item that is served in portions the size and content of which are standardized.

d. For menu items that come in different flavors and varieties but that are listed as a single menu item, the minimum to maximum numbers of calories for all flavors and varieties of that item shall be listed on the menu, menu board, or stanchion, as applicable, for each size offered for sale.

e. (1) The disclosure of calorie information on a menu, menu board, or stanchion next to a standard menu item that is a combination of at least two standard menu items on the menu, menu board, or stanchion, shall, based upon all possible combinations for that standard menu item, include both the minimum and the maximum amount of calories. If there is only one possible total amount of calories, that total shall be disclosed.

(2) The disclosure of calorie information on a menu, menu board, or stanchion next to a standard menu item that is not an appetizer or dessert, but is intended to serve more than one individual, shall include both:

(a) the number of individuals intended to be served by the standard menu item; and

(b) the calorie information per individual serving.

If the standard menu item is a combination of at least two standard menu items, the disclosure shall, based upon all possible combinations for that standard menu item, include both the minimum and the maximum amount of calories. If there is only one possible total amount of calories, that total shall be disclosed.

f. Nothing in this section shall prohibit a retail food establishment from providing additional nutrition information to its customers for each food or beverage item listed on its menu.

g. The provisions of this section shall not apply to any:

(1) item not listed on a standard printed menu or menu board system or similar signage, including, but not limited to, condiments or other products placed on a table or counter for general use; or

(2) daily specials, temporary menu items appearing on the menu for less than 60 days per calendar year, customized orders, or food or beverage items from a consumer self-serve salad bar or buffet.

h. (1) The Department of Health or the local board of health or the board, body, or officers exercising the functions of the local board of health according to law, upon written complaint or having reason to suspect that a violation of this act has occurred, shall, by written notification, advise the proprietor of the retail food establishment accordingly and order appropriate action to be taken.

(2) A proprietor of a retail food establishment who violates the provisions of this section by failing to provide the information about food and beverage items as required in this section, or knowingly misstating the number of calories in a food or beverage item, shall be subject to a penalty of not less than \$50 or more than \$100 for the first offense, and not less than \$250 or more than \$500 for the second or any subsequent offense. A municipal court shall have jurisdiction over proceedings to enforce and collect any penalty imposed because of a violation of this act, if the violation has occurred within the territorial jurisdiction of the court. The proceedings shall be summary and in accordance with the "Penalty Enforcement Law of 1999," P.L.1999, c.274 (C.2A:58-10 et seq.). Process shall be in the nature of a summons or warrant and shall issue only at the suit of the Commissioner of Health, or the local board of health, as the case may be, as plaintiff.

When the plaintiff is the Commissioner of Health, the penalty recovered shall be paid by the commissioner into the treasury of the State. When the plaintiff is a local board of health, the penalty recovered shall be paid by the local board into the treasury of the municipality where the violation occurred.

i. The provisions of this section shall not be construed to create or enhance any claim, right of action, or civil liability that did not previously exist under State law or limit any claim, right of action, or civil liability that otherwise exists under State law.

j. There shall be no private right of action against the proprietor of a retail food establishment for failure to comply with the provisions of this section.

k. To the extent consistent with federal law, the provisions of this section, as well as any other State law that regulates the disclosure of caloric information, shall be a matter of Statewide concern and shall occupy the entire field of regulation regarding the disclosure of caloric information by a retail food establishment, as well as content required to be posted on menus, menu board systems or similar signage, or stanchions, as applicable. No ordinance or regulation of a local government or local board of health shall regulate the dissemination of caloric information or the content required to be placed on menus, menu board systems or similar signage, or stanchions by a retail food establishment. Any local government or local

board of health ordinance or regulation that violates this prohibition is void and shall have no force or effect.

1. As used in this section, "retail food establishment" means a fixed restaurant or any similar place that is part of a chain with 20 or more locations nationally and doing business

- (1) under the same trade name or under common ownership or control or
- (2) as franchised outlets of a parent business,

the principal activity of which consists of preparing for consumption within the establishment a meal or food to be eaten on the premises or picked up at a drive-through window.

336. Section 3 of P.L.2009, c.306 (C.26:3E-18) is amended to read as follows:

C.26:3E-18 Rules, regulations.

3. The Commissioner of Health shall adopt rules and regulations, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), to effectuate the purposes of this act.

337. R.S.26:4-2 is amended to read as follows:

Powers of State department and local board.

26:4-2. In order to prevent the spread of disease affecting humans, the Department of Health, and the local boards of health within their respective jurisdictions and subject to the State sanitary code, shall have power to:

- a. Declare what diseases are communicable.
- b. Declare when any communicable disease has become epidemic.
- c. Require the reporting of communicable diseases.
- d. Maintain and enforce proper and sufficient quarantine, wherever deemed necessary.
- e. Remove any person infected with a communicable disease to a suitable place, if in its judgment removal is necessary and can be accomplished without any undue risk to the person infected.
- f. Disinfect any premises when deemed necessary.
- g. Remove to a proper place to be designated by it all articles within its jurisdiction, which, in its opinion, shall be infected with any matter likely to communicate disease and to destroy such articles, when in its opinion the safety of the public health requires it.

In the event the Governor declares a public health emergency, the department shall oversee the uniform exercise of these powers in the State and

the local board of health shall be subject to the department's exercise of authority under this section.

338. Section 3 of P.L.2007, c.134 (C.26:4-95.4) is amended to read as follows:

C.26:4-95.4 Public awareness campaign about HPV.

3. a. The Commissioner of Health, in consultation with the Commissioner of Education and the Director of the Division on Women in the Department of Children and Families, shall establish a public awareness campaign to inform the general public about the clinical significance and public health implications of the human papillomavirus, including its causes and the most effective means of prevention and treatment. The public awareness campaign shall be established in accordance with accepted public health practice and recommendations of the federal Centers for Disease Control and Prevention, and within the limits of available funds and any other resources available for the purposes thereof.

b. The commissioner shall prepare a patient information brochure regarding the human papillomavirus, including its causes and the most effective means of prevention and treatment. The department shall distribute the pamphlet, at no charge, to all pediatricians in the State. The department shall update the pamphlet as necessary, and shall make additional copies of the pamphlet available to other health care providers upon request.

339. Section 3 of P.L.2004, c.138 (C.26:4-133) is amended to read as follows:

C.26:4-133 Definitions relative to Statewide automated and electronic immunization registry.

3. As used in this act:

"Commissioner" means the Commissioner of Health.

"Department" means the Department of Health.

"Health care provider" means a health care facility licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) or a health care professional whose practice is regulated pursuant to Title 45 of the Revised Statutes.

"Registry" means the New Jersey Immunization Information System established pursuant to this act.

340. Section 4 of P.L.2004, c.138 (C.26:4-134) is amended to read as follows:

C.26:4-134 Statewide automated and electronic immunization registry.

4. a. There is established a Statewide automated and electronic immunization registry, to be designated as the New Jersey Immunization Information System, in the Department of Health. The registry shall be designed to serve as a single repository of immunization records to aid, coordinate, and help promote effective and cost-efficient disease screening, prevention, and control efforts in the State.

b. A newborn infant in New Jersey, who is born on or after January 1, 1998, shall be enrolled in the registry immediately following birth unless the parent or legal guardian of the infant provides a written request to not participate in the registry.

A child born prior to January 1, 1998 may be enrolled in the registry at the parent's or legal guardian's written request.

c. Access to the information in the registry shall be limited to: health care providers, schools, colleges, licensed child care centers, and public agencies, and private organizations as determined by regulation of the commissioner. A registrant, or the registrant's parent or legal guardian if the registrant is a minor, shall have access to the registrant's immunization and other preventive health screening information in the registry.

d. The information contained in the registry shall be used for the following purposes:

(1) to help ensure that registrants receive all recommended immunizations in a timely manner by providing access to the registrants' immunization records;

(2) to help improve immunization rates by providing notice to registrants of overdue or upcoming immunizations; and

(3) to help control communicable diseases by assisting in the identification of persons who require immediate immunization in the event of a vaccine-preventable disease outbreak.

e. The authentic immunization and other preventive health screening record of a child, which shall consist of a paper or electronic copy of the registry entry that is a true and accurate representation of the information contained therein, obtained from the registry shall be accepted as a valid immunization and preventive health screening record of the registrant for the purpose of meeting immunization and preventive health screening documentation requirements for admission to a school, college, or licensed child care center.

f. A health care provider shall not discriminate in any way against a person solely because the person elects not to participate in the registry.

g. An authorized user granted access as provided in subsection c. of this section shall only access information in the registry on a specific patient or client who is presently receiving services, is under the user's care or is within the applicable governmental health authority's jurisdiction.

h. An agency, organization, or other entity authorized to access information in the registry shall not use any report made by a health care provider pursuant to this act in any punitive manner against the provider.

i. The commissioner, in consultation with the Public Health Council, shall adopt rules and regulations, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), to effectuate the purposes of this act, including, but not limited to:

- (1) the establishment and maintenance of the registry;
- (2) the methods for submitting, and the content of, reports of immunizations to the registry, for which purpose the commissioner shall provide, to the maximum extent practicable, for reporting options to facilitate compliance with the requirements of subsection b. of this section;
- (3) procedures for the birth hospital of a newborn infant or health care provider, as applicable, to inform the parent or legal guardian of a newborn infant or minor of the purpose of the registry and its potential uses by parties having authorized access to registry information, and the content of that information;
- (4) procedures for a registrant, or the registrant's parent or legal guardian if the registrant is a minor, to review and correct information contained in the registry;
- (5) procedures for the parent or legal guardian of a newborn infant or minor, or a person over 18 years of age, to request to not participate in the registry at any time and to remove or inactivate information from the registry;
- (6) limits on, and methods of, access to the registry by those authorized pursuant to subsection c. of this section;
- (7) procedures for health insurers to obtain immunization information from the registry concerning only their covered persons, as well as summary statistics, which information or statistics shall not be used or disclosed for any other purpose than to:
 - (a) improve patient care;
 - (b) provide quality assurance to employers purchasing group coverage and to health care providers;
 - (c) improve outreach and education efforts with respect to their covered persons and health care providers; and

(d) monitor and improve quality of care standards as developed by professional organizations, accreditation agencies and government agencies in collaboration with the department; and

(8) procedures for the department to disseminate statistical information and supporting commentary.

341. Section 10 of P.L.2011, c.210 (C.26:5B-6) is amended to read as follows:

C.26:5B-6 Availability of information about sickle cell anemia.

10. a. The Department of Health, in consultation with the Medical Society of New Jersey and the University of Medicine and Dentistry of New Jersey, shall prepare, and make available on its Internet website, information in English and Spanish, which is designed to be easily understandable by the general public, about the genetic risk factors associated with, and the symptoms and treatment of, sickle cell anemia, in addition to any other information that the Commissioner of Health deems necessary for the purposes of this act. The department shall revise this information whenever new information about sickle cell anemia becomes available.

b. The department shall prepare an informational booklet in English and Spanish that contains the information posted on its website pursuant to subsection a. of this section, as funds become available for that purpose. The department shall make a supply of booklets available to all licensed health care facilities engaged in the diagnosis or treatment of sickle cell anemia, as well as to health care professionals, community health centers, members of the public, and social services agencies upon their request.

342. Section 1 of P.L.1995, c.174 (C.26:5C-15) is amended to read as follows:

C.26:5C-15 Definitions.

1. As used in this act:

"AIDS" means acquired immune deficiency syndrome as defined by the Centers for Disease Control and Prevention of the United States Public Health Service.

"Commissioner" means the Commissioner of Health.

"Department" means the Department of Health.

"HIV" means the human immunodeficiency virus or any other related virus identified as a probable causative agent of AIDS.

343. Section 2 of P.L.1997, c.246 (C.26:5C-22) is amended to read as follows:

C.26:5C-22 HIV test on potential semen donor; consent; payment; notification.

2. a. A semen bank shall perform an HIV test on a potential donor prior to that person donating semen and shall freeze all donated semen for a waiting period of at least six months, in accordance with standards adopted by the United States Centers for Disease Control and Prevention.

b. A semen bank shall perform the HIV test only after the donor has provided written informed consent according to standards adopted by the Commissioner of Health. A donor who refuses to provide written informed consent to an HIV test or tests positive for HIV shall not be permitted to donate semen.

c. The cost of the HIV test shall be borne by the recipient of the donation.

d. The Commissioner of Health shall establish procedures for notification by a semen bank to donors of screening results and referrals to appropriate counseling and health care services as necessary.

344. Section 4 of P.L.1997, c.246 (C.26:5C-24) is amended to read as follows:

C.26:5C-24 Rules, regulations.

4. The Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt rules and regulations to effectuate the purposes of this act.

345. Section 3 of P.L.2006, c.99 (C.26:5C-27) is amended to read as follows:

C.26:5C-27 Demonstration program for operation of sterile syringe access programs.

3. The Commissioner of Health shall establish a demonstration program to permit up to six municipalities to operate a sterile syringe access program in accordance with the provisions of this act. For the purposes of the demonstration program, the commissioner shall prescribe by regulation requirements for a municipality to establish, or otherwise authorize the operation within that municipality of, a sterile syringe access program to provide for the exchange of hypodermic syringes and needles in accordance with the provisions of this act.

a. The commissioner shall:

(1) request an application, to be submitted on a form and in a manner to be prescribed by the commissioner, from any municipality that seeks to establish a sterile syringe access program, or from other entities authorized to operate a sterile syringe access program within that municipality as provided in paragraph (2) of subsection a. of section 4 of this act;

(2) approve those applications that meet the requirements established by regulation of the commissioner and contract with the municipalities or entities whose applications are approved to establish a sterile syringe access program as provided in paragraph (2) of subsection a. of section 4 of this act to operate a sterile syringe access program in any municipality in which the governing body has authorized the operation of sterile syringe access programs within that municipality by ordinance;

(3) support and facilitate, to the maximum extent practicable, the linkage of sterile syringe access programs to health care facilities and programs as may provide appropriate health care services, including mental health and substance abuse treatment, and to housing assistance, career employment-related counseling, and education counseling to consumers participating in a sterile syringe access program;

(4) provide for the adoption of a uniform identification card or other uniform Statewide means of identification for consumers, staff, and volunteers of a sterile syringe access program pursuant to paragraph (8) of subsection b. of section 4 of this act; and

(5) maintain a record of the data reported to the commissioner by sterile syringe access programs pursuant to paragraph (10) of subsection b. of section 4 of this act.

b. The commissioner shall be authorized to accept funding as may be made available from the private sector to effectuate the purposes of this act.

346. Section 3 of P.L.2008, c.49 (C.26:6-70) is amended to read as follows:

C.26:6-70 Definitions relative to anatomical gifts for educational and research use.

3. As used in this act:

"Anatomical research recovery organization" means a nonprofit corporation engaged in the recovery of a human body or part donated for education, research, or the advancement of medical, dental, or mortuary science pursuant to P.L.1969, c.161 (C.26:6-57 et seq.) or any subsequent statute adopted pursuant thereto, where part or all of the recovery takes place in this State. Anatomical research recovery organization shall not include an accredited institution of higher education in this State that uses an anatomi-

cal gift for its own educational or research purposes and is not engaged in the distribution of a human body or part to another person or entity.

"Commissioner" means the Commissioner of Health.

"Department" means the Department of Health.

"Distribution" means the removal of a human body or part from a storage location to any other location for educational or research use, or the advancement of medical, dental, or mortuary science.

"Education" means the use of the whole body or parts for purposes of teaching or training individuals, including medical or dental professionals and students, with regard to the anatomy and characteristics of the human body.

"Human body part" or "part" means organs, tissues, eyes, bones, blood vessels, and any other portions of a deceased human body which are subject to an anatomical gift pursuant to P.L.1969, c.161 (C.26:6-57) or any subsequent statute adopted pursuant thereto, but does not include blood collected pursuant to P.L.1945, c.301 (C.26:2A-1).

"Recovery" means the obtaining of a human body or part, including, but not limited to, determining or obtaining consent or authorization for donation of the human body or part, performing surgical or other technical procedures for recovering the body or part, and processing the body or part. Recovery does not include actions taken by a medical examiner or coroner as part of his professional duties.

"Research" means the conduct of scientific testing and observation designed to result in the acquisition of generalizable knowledge. Research does not include an autopsy or other investigation conducted for the purpose of obtaining information related to the decedent.

347. Section 4 of P.L.2008, c.49 (C.26:6-71) is amended to read as follows:

C.26:6-71 Registration as anatomical research recovery organization.

4. a. No person shall engage in the recovery of a human body or part donated in this State for education, research, or the advancement of medical, dental, or mortuary science pursuant to P.L.1969, c.161 (C.26:6-57 et seq.) or any subsequent statute adopted pursuant thereto, unless the person is registered as an anatomical research recovery organization with the Department of Health pursuant to this act.

The registration required pursuant to this act shall be in addition to any license or permit required by a local board of health, other local health agency, or any State or federal agency.

b. The registration shall be valid for a one-year period and may be renewed subject to compliance with the requirements of this act. The commissioner shall establish such registration and renewal fees as may be reasonable and necessary to carry out the purposes of this act.

c. The commissioner may enter and inspect the premises of any anatomical research recovery organization and the books and records as is reasonably necessary to carry out the provisions of this act.

348. Section 28 of P.L.2003, c.221 (C.26:8-21.1) is amended to read as follows:

C.26:8-21.1 Rules, regulations.

28. The Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt rules and regulations to effectuate the purposes of this act.

349. R.S.26:8-23 is amended to read as follows:

Duty of the department; examination of records.

26:8-23. The Department of Health shall have charge of the registration of births, deaths, fetal deaths, marriages, civil unions, and domestic partnerships and shall procure the prompt and accurate registration of the same in each registration district and in the department. The department may promulgate any rule or regulation which it deems necessary for the uniform and thorough enforcement of this section.

The department may decline permission to examine any record except in the presence of an officer or employee of the department.

350. Section 17 of P.L.2003, c.221 (C.26:8-24.2) is amended to read as follows:

C.26:8-24.2 "New Jersey Electronic Death Registration Support Fund."

17. a. There is established the "New Jersey Electronic Death Registration Support Fund" as a nonlapsing, revolving fund to be administered by the Commissioner of Health and credited with monies received pursuant to subsection c. of R.S.26:8-62.

b. The State Treasurer is the custodian of the fund and all disbursements from the fund shall be made by the treasurer upon vouchers signed by the commissioner. The monies in the fund shall be invested and reinvested by the Director of the Division of Investment in the Department of

the Treasury as are other trust funds in the custody of the State Treasurer in the manner provided by law. Interest received on the monies in the fund shall be credited to the fund.

c. The monies in the fund and the interest earned thereon shall be used to meet the development and operational costs of the NJ-EDRS, including, but not limited to, costs associated with: personnel; hardware purchases and maintenance; software and communications infrastructure; website hosting; and licensing fees, royalties and transaction expenses incurred in the development, installation, maintenance and operation of electronic payment security, authentication and encryption systems, and user training and education.

d. The Commissioner of Health shall, no later than 30 months after the date of enactment of P.L.2003, c.221, report to the chairs of the Senate Health, Human Services and Senior Citizens Committee, the Senate Budget and Appropriations Committee, the Assembly Health and Human Services Committee and the Assembly Appropriations Committee, or their successors, concerning the sources and uses of monies in the fund. The report shall include a description of the methodology used by the State registrar to set the fee imposed pursuant to subsection c. of R.S.26:8-62, a summary of the monies credited to the fund, and a summary of expenditures by category from the fund pursuant to the authority of this section and the requirements of section 16 of P.L.2003, c.221 (C.26:8-24.1), together with any recommendations by the State registrar or the commissioner for changes that either considers should be made in the law concerning the implementation of the NJ-EDRS or the fees imposed pursuant to subsection c. of R.S.26:8-62.

351. Section 2 of P.L.1983, c.291 (C.26:8-40.21) is amended to read as follows:

C.26:8-40.21 Birth defects, severe neonatal jaundice registry.

2. a. The Department of Health shall establish and maintain a birth defects and severe neonatal jaundice registry, which shall contain a confidential record of all birth defects and all cases of severe hyperbilirubinemia that occur in New Jersey and any other information that the department deems necessary and appropriate in order to conduct thorough and complete epidemiologic surveys of birth defects and cases of severe hyperbilirubinemia that occur in this State and plan for and provide services to children with birth defects and severe hyperbilirubinemia and their families.

b. The department shall make available electronically on its Internet website, in English and Spanish, information on the characteristics and effects of severe neonatal jaundice.

352. Section 3 of P.L.1983, c.291 (C.26:8-40.22) is amended to read as follows:

C.26:8-40.22 Confidential reports of abortions of fetus with or infant affected by birth defect or severe neonatal jaundice.

3. a. The Commissioner of Health, in consultation with the Public Health Council, shall require the confidential reporting to the Department of Health of all cases where an infant is diagnosed with severe hyperbilirubinemia, and where a pregnancy results in a naturally aborted fetus or infant affected by a birth defect, and an electively aborted fetus that exhibits or is known to have a birth defect after 15 weeks of gestation. The reporting requirement shall apply to all infants from birth through five years of age.

b. The Commissioner of Health shall determine the health care providers and facilities which shall be required to report all birth defects and all cases of severe hyperbilirubinemia, the types of conditions or defects that shall be reported, the type of information that shall be contained in the confidential report and the method for making the report. In reports concerning all fetuses with anomalies, the name of the mother shall not be submitted.

353. R.S.26:8-69 is amended to read as follows:

Penalties; recovery.

26:8-69. Except as otherwise specifically provided in this chapter and R.S.37:1-1 et seq., any person who shall:

a. Fail or refuse to furnish correctly any information in the person's possession; or

b. Willfully and knowingly furnish false information affecting any certificate or record required by this chapter; or

c. Willfully alter, otherwise than is provided by R.S.26:8-48 et seq., or willfully or knowingly falsify, any certificate or record established by this chapter; or

d. Fail to fill out and transmit any certificate or record in the manner required by this chapter; or

e. Being a local registrar, deputy registrar, alternate deputy registrar or subregistrar, shall fail to perform the person's duty as required by this chapter and by the directions of the State registrar thereunder; or

f. Violate any of the provisions of this chapter or fail to discharge any duty required by this chapter-

Shall be subject to a penalty of not less than \$100 nor more than \$250 for each first offense and not less than \$250 nor more than \$500 for each subsequent offense.

The penalties shall be recovered in a civil action in the name of the Department of Health or local board in any court of competent jurisdiction.

The Superior Court or municipal court shall have jurisdiction over proceedings to enforce and collect any such penalty, if the violation has occurred within the territorial jurisdiction of the court. The proceedings shall be summary and in accordance with the "Penalty Enforcement Law of 1999," P.L.1999, c.274 (C.2A:58-10 et seq.).

Notwithstanding the provisions of this section to the contrary, the State registrar may refer a violation of this chapter by a physician, nurse, or funeral director who is licensed pursuant to Title 45 of the Revised Statutes to the appropriate professional board in the Division of Consumer Affairs in the Department of Law and Public Safety, which shall, in accordance with the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), assess the penalty provided for in this subsection and assume enforcement responsibility on the same basis as it would for a violation of the statute or regulations governing the practice of those persons regulated by that board.

354. Section 3 of P.L.2003, c.246 (C.26:8A-3) is amended to read as follows:

C.26:8A-3 Definitions relative to domestic partners.

3. As used in sections 1 through 9 of P.L.2003, c.246 (C.26:8A-1 through C.26:8A-9) and in R.S.26:8-1 et seq.:

"Affidavit of Domestic Partnership" means an affidavit that sets forth each party's name and age, the parties' common mailing address, and a statement that, at the time the affidavit is signed, both parties meet the requirements of this act for entering into a domestic partnership and wish to enter into a domestic partnership with each other.

"Basic living expenses" means the cost of basic food and shelter, and any other cost, including, but not limited to, the cost of health care, if some or all of the cost is paid as a benefit because a person is another person's domestic partner.

"Certificate of Domestic Partnership" means a certificate that includes: the full names of the domestic partners, a statement that the two individuals are members of a registered domestic partnership recognized by the State of New Jersey, the date that the domestic partnership was entered into, and a statement that the partners are entitled to all the rights, privileges and responsibilities accorded to domestic partners under the law. The certificate shall bear the seal of the State of New Jersey.

"Commissioner" means the Commissioner of Health.

"Domestic partner" or "partner" means a person who is in a relationship that satisfies the definition of a domestic partnership as set forth in this act.

"Have a common residence" means that two persons share the same place to live in this State, or share the same place to live in another jurisdiction when at least one of the persons is a member of a State-administered retirement system, regardless of whether or not: the legal right to possess the place is in both of their names; one or both persons have additional places to live; or one person temporarily leaves the shared place of residence to reside elsewhere, on either a short-term or long-term basis, for reasons that include, but are not limited to, medical care, incarceration, education, a sabbatical, or employment, but intends to return to the shared place of residence.

"Jointly responsible" means that each domestic partner agrees to provide for the other partner's basic living expenses if the other partner is unable to provide for himself.

"Notice of Rights and Obligations of Domestic Partners" means a form that advises domestic partners, or persons seeking to become domestic partners, of the procedural requirements for establishing, maintaining, and terminating a domestic partnership, and includes information about the rights and responsibilities of the partners.

355. Section 59 of P.L.2003, c.246 (C.26:8A-12) is amended to read as follows:

C.26:8A-12 Rules, regulations; responsible agencies.

59. a. The Commissioner of Health, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt rules and regulations to effectuate the purposes of sections 1 through 10 and 13 through 35 of this act.

b. The Commissioner of Banking and Insurance, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt rules and regulations to effectuate the purposes of sections 47 through 52, 55 and 56 of this act.

c. The New Jersey Individual Health Coverage Program Board, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt rules and regulations to effectuate the purposes of section 53 of this act.

d. The New Jersey Small Employer Health Benefits Program Board, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt rules and regulations to effectuate the purposes of section 54 of this act.

356. Section 2 of P.L.2005, c.222 (C.26:13-2) is amended to read as follows:

C.26:13-2 Definitions relative to emergency health powers.

2. As used in this act:

"Biological agent" means any microorganism, virus, bacterium, rickettsiae, fungus, toxin, infectious substance, or biological product that may be naturally occurring or engineered as a result of biotechnology, or any naturally occurring or bioengineered component of any such microorganism, virus, bacterium, rickettsiae, fungus, infectious substance, or biological product, capable of causing death, disease, or other biological malfunction in a human, an animal, a plant, or another living organism.

"Bioterrorism" means the intentional use or threat of use of any biological agent, to cause death, disease, or other biological malfunction in a human, animal, plant, or other living organism, or degrade the quality and safety of the food, air, or water supply.

"Chemical weapon" means a toxic chemical and its precursors, except where intended for a lawful purpose as long as the type and quantity is consistent with such a purpose. Chemical weapon includes, but is not limited to: nerve agents, choking agents, blood agents, and incapacitating agents.

"Commissioner" means the Commissioner of Health, or the commissioner's designee.

"Contagious disease" means an infectious disease that can be transmitted from person to person.

"Department" means the Department of Health.

"Health care facility" means any non-federal institution, building or agency, or portion thereof whether public or private for profit or nonprofit that is used, operated or designed to provide health services, medical or dental treatment or nursing, rehabilitative, or preventive care to any person. Health care facility includes, but is not limited to: an ambulatory surgical facility, home health agency, hospice, hospital, infirmary, intermediate care facility, dialysis center, long-term care facility, medical assistance facility, mental health center, paid and volunteer emergency medical services, outpatient facility, public health center, rehabilitation facility, residential treatment facility, skilled nursing facility, and adult day care center. Health care facility also includes, but is not limited to, the following related property when used for or in connection with the foregoing: a laboratory, research facility, pharmacy, laundry facility, health personnel training and lodging facility, patient, guest and health personnel food service facility, and the

portion of an office or office building used by persons engaged in health care professions or services.

"Health care provider" means any person or entity who provides health care services including, but not limited to: a health care facility, bioanalytical laboratory director, perfusionist, physician, physician assistant, pharmacist, dentist, nurse, paramedic, respiratory care practitioner, medical or laboratory technician, and ambulance and emergency medical workers.

"Infectious disease" means a disease caused by a living organism or other pathogen, including a fungus, bacteria, parasite, protozoan, virus, or prion. An infectious disease may, or may not, be transmissible from person to person, animal to person, or insect to person.

"Isolation" means the physical separation and confinement of an individual or groups of individuals who are infected or reasonably believed to be infected, on the basis of signs, symptoms or laboratory analysis, with a contagious or possibly contagious disease from non-isolated individuals, to prevent or limit the transmission of the disease to non-isolated individuals.

"Local health agency" means a county, regional, municipal, or other governmental agency organized for the purpose of providing health services, administered by a full-time health officer and conducting a public health program pursuant to law.

"Local Information Network and Communications System Agency" or "LINCS agency" means the lead local public health agency in each county or identified city, as designated and determined by the commissioner pursuant to section 21 of this act, responsible for providing central planning, coordination, and delivery of specialized services within the designated county or city, in partnership with the other local health agencies within that jurisdiction, in order to prepare for and respond to acts of bioterrorism and other forms of terrorism or other public health emergencies or threats, and to discharge the activities as specified under this act.

"Microorganism" includes, but is not limited to, bacteria, viruses, fungi, rickettsiae, or protozoa.

"Nuclear or radiological device" means: any nuclear device which is an explosive device designed to cause a nuclear yield; an explosive radiological dispersal device used directly or indirectly to spread radioactive material; or a simple radiological dispersal device which is any act, container or any other device used to release radiological material for use as a weapon.

"Overlap agent or toxin" means: any microorganism or toxin that poses a risk to both human and animal health and includes:

Anthrax - *Bacillus anthracis*

Botulism - *Clostridium botulinum* toxin, Botulinum neurotoxins, Botulinum neurotoxin producing species of *Clostridium*

Plague - *Yersinia pestis*

Tularemia - *Francisella tularensis*

Viral Hemorrhagic Fevers - Ebola, Marburg, Lassa, Machupo

Brucellosis- Brucellosis species

Glanders - *Burkholderia mallei*

Melioidosis - *Burkholderia pseudomallei*

Psittacosis - *Chlamydothila psittaci*

Coccidioidomycosis - *Coccidioides immitis*

Q Fever - *Coxiella burnetii*

Typhus Fever - *Rickettsia prowazekii*

Viral Encephalitis - VEE (Venezuelan equine encephalitis virus), EEE (Eastern equine encephalitis), WEE (Western equine encephalitis)

Toxins - *Ricinus communis*, *Clostridium perfringens*, *Staph. Aureus*, Staphylococcal enterotoxins, T-2 toxin, Shigatoxin

Nipah - Nipah virus

Hantavirus - Hantavirus

West Nile Fever - West Nile virus

Hendra - Hendra virus

Rift Valley Fever - Rift Valley Fever virus

Highly Pathogenic Avian Influenza

"Public health emergency" means an occurrence or imminent threat of an occurrence that:

a. is caused or is reasonably believed to be caused by any of the following: (1) bioterrorism or an accidental release of one or more biological agents; (2) the appearance of a novel or previously controlled or eradicated biological agent; (3) a natural disaster; (4) a chemical attack or accidental release of toxic chemicals; or (5) a nuclear attack or nuclear accident; and

b. poses a high probability of any of the following harms: (1) a large number of deaths, illness, or injury in the affected population; (2) a large number of serious or long-term impairments in the affected population; or (3) exposure to a biological agent or chemical that poses a significant risk of substantial future harm to a large number of people in the affected population.

"Quarantine" means the physical separation and confinement of an individual or groups of individuals, who are or may have been exposed to a contagious or possibly contagious disease and who do not show signs or symptoms of a contagious disease, from non-quarantined individuals, to prevent or limit the transmission of the disease to non-quarantined individuals.

"Toxin" means the toxic material of plants, animals, microorganisms, viruses, fungi, or infectious substances, or a recombinant molecule, whatever its origin or method of production, including:

- a. any poisonous substance or biological product that may be engineered as a result of biotechnology or produced by a living organism; or
- b. any poisonous isomer or biological product, homolog, or derivative of such a substance.

357. Section 24 of P.L.2005, c.222 (C.26:13-24) is amended to read as follows:

C.26:13-24 State Public Health Emergency Claim Reimbursement Board.

24. a. There is hereby established in the Department of Health a State Public Health Emergency Claim Reimbursement Board. The board shall include the following members: the Commissioner of Health, who shall be the presiding officer, the Attorney General, the Adjutant General of the Department of Military and Veterans' Affairs, the State Director of Emergency Management, the Secretary of Agriculture, the Commissioner of Banking and Insurance, the Commissioner of Environmental Protection, the Commissioner of Community Affairs, the State Medical Examiner, and the State Treasurer, or their designees. The members of the board shall serve without pay in connection with all such duties as are prescribed in this act.

b. The board shall meet at such times as may be necessary to fulfill the requirements set forth herein. The Commissioner of Health shall convene the board within 45 days of the filing of a complete petition. The concurrence of six members of the board shall be necessary for the validity of all acts of the board.

c. Subject to available appropriations, the board shall have the authority to award reasonable reimbursement, as determined by the board, for any services required of any person under the provisions of this act, which shall be paid at the prevailing established rate for services of a like or similar nature as determined by the board. Subject to available appropriations, the board shall have the authority to award reasonable reimbursement, as determined by the board, for any property employed, taken, or used under the provisions of this act.

d. All awards shall be paid from any funds appropriated by the State, any political subdivision of the State, or the federal government, for such purpose. In awarding reimbursement under this section, the board shall take into account any funds, or any other thing of value, received by a claimant from any other source, including but not limited to private dona-

tions, contributions, and insurance proceeds. The board shall not award reimbursement unless the claimant has demonstrated, to the satisfaction of the board, that the claimant has first sought reimbursement for any loss incurred due to the declaration of a public health emergency from any and all appropriate third party payers.

358. Section 25 of P.L.2005, c.222 (C.26:13-25) is amended to read as follows:

C.26:13-25 Claims for reimbursement.

25. a. Any person making a claim for reimbursement for private property or services employed, taken or used for a public purpose under this act shall, subsequent to the termination of the public health emergency, file a petition for an award with the State Public Health Emergency Claim Reimbursement Board, established pursuant to section 24 of this act, through the Commissioner of Health. The petition shall be signed by the claimant and shall set forth the following:

- (1) a description of the services or property employed, taken, or used;
- (2) the dates of the employment, taking, or usage;
- (3) the person or entity ordering the employment, taking, or usage;
- (4) such additional information as the petitioner deems relevant to a full consideration of the claim; and
- (5) any additional information that the board may require.

b. The board may establish such forms, documents, and procedures as may be necessary to expedite the processing of claims, and all claimants shall utilize and follow the forms, documents, and procedures, if so established. Subsequent to the filing of an initial petition, the board may request such additional information as it deems necessary from any claimant and may require the claimant, and any other person with knowledge of facts and circumstances relevant to the claim, to appear before the board for a hearing. No petition shall be filed with the board more than 180 days from the last date the services or property were employed, taken or used, except that this deadline may be extended by the board as is necessary to further the purposes of this act.

c. The board's determination concerning a claimant's petition for reimbursement shall be transmitted to the claimant in writing. The claimant may appeal the decision to the Superior Court subject to the Rules of Court regarding the review of State agency actions.

d. Any person seeking reimbursement under this act shall proceed in accordance with the provisions of this section unless the declaration of pub-

lic health emergency which gives rise to the claim or petition for reimbursement is superseded by order of the Governor pursuant to P.L.1942, c.251 (C.App.A:9-33 et seq.). Upon the declaration of an emergency by the Governor pursuant to P.L.1942, c.251 which supersedes the declaration of a public health emergency, the person shall proceed in accordance with the provisions of P.L.1942, c.251 and the person's rights, remedies and entitlement to reimbursement shall be limited to that which is afforded in that act.

e. Notwithstanding the provisions of this section to the contrary, in the event funds are otherwise made available for reimbursement, a person shall not be required to file a petition for an award with the board pursuant to this section.

359. Section 6 of P.L.1968, c.413 (C.30:4D-6) is amended to read as follows:

C.30:4D-6 Basic medical care and services.

6. a. Subject to the requirements of Title XIX of the federal Social Security Act, the limitations imposed by this act and by the rules and regulations promulgated pursuant thereto, the department shall provide medical assistance to qualified applicants, including authorized services within each of the following classifications:

- (1) Inpatient hospital services;
- (2) Outpatient hospital services;
- (3) Other laboratory and X-ray services;
- (4) (a) Skilled nursing or intermediate care facility services;

(b) Early and periodic screening and diagnosis of individuals who are eligible under the program and are under age 21, to ascertain their physical or mental defects and the health care, treatment, and other measures to correct or ameliorate defects and chronic conditions discovered thereby, as may be provided in regulations of the Secretary of the federal Department of Health and Human Services and approved by the commissioner;

(5) Physician's services furnished in the office, the patient's home, a hospital, a skilled nursing, or intermediate care facility or elsewhere.

As used in this subsection, "laboratory and X-ray services" includes HIV drug resistance testing, including, but not limited to, genotype assays that have been cleared or approved by the federal Food and Drug Administration, laboratory developed genotype assays, phenotype assays, and other assays using phenotype prediction with genotype comparison, for persons diagnosed with HIV infection or AIDS.

b. Subject to the limitations imposed by federal law, by this act, and by the rules and regulations promulgated pursuant thereto, the medical assistance program may be expanded to include authorized services within each of the following classifications:

(1) Medical care not included in subsection a.(5) above, or any other type of remedial care recognized under State law, furnished by licensed practitioners within the scope of their practice, as defined by State law;

(2) Home health care services;

(3) Clinic services;

(4) Dental services;

(5) Physical therapy and related services;

(6) Prescribed drugs, dentures, and prosthetic devices; and eyeglasses prescribed by a physician skilled in diseases of the eye or by an optometrist, whichever the individual may select;

(7) Optometric services;

(8) Podiatric services;

(9) Chiropractic services;

(10) Psychological services;

(11) Inpatient psychiatric hospital services for individuals under 21 years of age, or under age 22 if they are receiving such services immediately before attaining age 21;

(12) Other diagnostic, screening, preventive, and rehabilitative services, and other remedial care;

(13) Inpatient hospital services, nursing facility services, and intermediate care facility services for individuals 65 years of age or over in an institution for mental diseases;

(14) Intermediate care facility services;

(15) Transportation services;

(16) Services in connection with the inpatient or outpatient treatment or care of drug abuse, when the treatment is prescribed by a physician and provided in a licensed hospital or in a narcotic and drug abuse treatment center approved by the Department of Health pursuant to P.L.1970, c.334 (C.26:2G-21 et seq.) and whose staff includes a medical director, and limited to those services eligible for federal financial participation under Title XIX of the federal Social Security Act;

(17) Any other medical care and any other type of remedial care recognized under State law, specified by the Secretary of the federal Department of Health and Human Services, and approved by the commissioner;

(18) Comprehensive maternity care, which may include: the basic number of prenatal and postpartum visits recommended by the American College

of Obstetrics and Gynecology; additional prenatal and postpartum visits that are medically necessary; necessary laboratory, nutritional assessment and counseling, health education, personal counseling, managed care, outreach, and follow-up services; treatment of conditions which may complicate pregnancy; and physician or certified nurse-midwife delivery services;

(19) Comprehensive pediatric care, which may include: ambulatory, preventive, and primary care health services. The preventive services shall include, at a minimum, the basic number of preventive visits recommended by the American Academy of Pediatrics;

(20) Services provided by a hospice which is participating in the Medicare program established pursuant to Title XVIII of the Social Security Act, Pub.L.89-97 (42 U.S.C. s.1395 et seq.). Hospice services shall be provided subject to approval of the Secretary of the federal Department of Health and Human Services for federal reimbursement;

(21) Mammograms, subject to approval of the Secretary of the federal Department of Health and Human Services for federal reimbursement, including one baseline mammogram for women who are at least 35 but less than 40 years of age; one mammogram examination every two years or more frequently, if recommended by a physician, for women who are at least 40 but less than 50 years of age; and one mammogram examination every year for women age 50 and over.

c. Payments for the foregoing services, goods, and supplies furnished pursuant to this act shall be made to the extent authorized by this act, the rules and regulations promulgated pursuant thereto and, where applicable, subject to the agreement of insurance provided for under this act. The payments shall constitute payment in full to the provider on behalf of the recipient. Every provider making a claim for payment pursuant to this act shall certify in writing on the claim submitted that no additional amount will be charged to the recipient, the recipient's family, the recipient's representative or others on the recipient's behalf for the services, goods, and supplies furnished pursuant to this act.

No provider whose claim for payment pursuant to this act has been denied because the services, goods, or supplies were determined to be medically unnecessary shall seek reimbursement from the recipient, his family, his representative or others on his behalf for such services, goods, and supplies provided pursuant to this act; provided, however, a provider may seek reimbursement from a recipient for services, goods, or supplies not authorized by this act, if the recipient elected to receive the services, goods or supplies with the knowledge that they were not authorized.

d. Any individual eligible for medical assistance (including drugs) may obtain such assistance from any person qualified to perform the ser-

vice or services required (including an organization which provides such services, or arranges for their availability on a prepayment basis), who undertakes to provide the individual such services.

No copayment or other form of cost-sharing shall be imposed on any individual eligible for medical assistance, except as mandated by federal law as a condition of federal financial participation.

e. Anything in this act to the contrary notwithstanding, no payments for medical assistance shall be made under this act with respect to care or services for any individual who:

(1) Is an inmate of a public institution (except as a patient in a medical institution); provided, however, that an individual who is otherwise eligible may continue to receive services for the month in which he becomes an inmate, should the commissioner determine to expand the scope of Medicaid eligibility to include such an individual, subject to the limitations imposed by federal law and regulations, or

(2) Has not attained 65 years of age and who is a patient in an institution for mental diseases, or

(3) Is over 21 years of age and who is receiving inpatient psychiatric hospital services in a psychiatric facility; provided, however, that an individual who was receiving such services immediately prior to attaining age 21 may continue to receive such services until the individual reaches age 22. Nothing in this subsection shall prohibit the commissioner from extending medical assistance to all eligible persons receiving inpatient psychiatric services; provided that there is federal financial participation available.

f. (1) A third party as defined in section 3 of P.L.1968, c.413 (C.30:4D-3) shall not consider a person's eligibility for Medicaid in this or another state when determining the person's eligibility for enrollment or the provision of benefits by that third party.

(2) In addition, any provision in a contract of insurance, health benefits plan, or other health care coverage document, will, trust, agreement, court order, or other instrument which reduces or excludes coverage or payment for health care-related goods and services to or for an individual because of that individual's actual or potential eligibility for or receipt of Medicaid benefits shall be null and void, and no payments shall be made under this act as a result of any such provision.

(3) Notwithstanding any provision of law to the contrary, the provisions of paragraph (2) of this subsection shall not apply to a trust agreement that is established pursuant to 42 U.S.C. s.1396p(d)(4)(A) or (C) to supplement and augment assistance provided by government entities to a per-

son who is disabled as defined in section 1614(a)(3) of the federal Social Security Act (42 U.S.C. s.1382c (a)(3)).

g. The following services shall be provided to eligible medically needy individuals as follows:

(1) Pregnant women shall be provided prenatal care and delivery services and postpartum care, including the services cited in subsection a.(1), (3), and (5) of this section and subsection b.(1)-(10), (12), (15), and (17) of this section, and nursing facility services cited in subsection b.(13) of this section.

(2) Dependent children shall be provided with services cited in subsection a.(3) and (5) of this section and subsection b.(1), (2), (3), (4), (5), (6), (7), (10), (12), (15), and (17) of this section, and nursing facility services cited in subsection b.(13) of this section.

(3) Individuals who are 65 years of age or older shall be provided with services cited in subsection a.(3) and (5) of this section and subsection b.(1)-(5), (6) excluding prescribed drugs, (7), (8), (10), (12), (15), and (17) of this section, and nursing facility services cited in subsection b.(13) of this section.

(4) Individuals who are blind or disabled shall be provided with services cited in subsection a.(3) and (5) of this section and subsection b.(1)-(5), (6) excluding prescribed drugs, (7), (8), (10), (12), (15), and (17) of this section, and nursing facility services cited in subsection b.(13) of this section.

(5) (a) Inpatient hospital services, subsection a.(1) of this section, shall only be provided to eligible medically needy individuals, other than pregnant women, if the federal Department of Health and Human Services discontinues the State's waiver to establish inpatient hospital reimbursement rates for the Medicare and Medicaid programs under the authority of section 601(c)(3) of the Social Security Act Amendments of 1983, Pub.L.98-21 (42 U.S.C. s.1395ww(c)(5)). Inpatient hospital services may be extended to other eligible medically needy individuals if the federal Department of Health and Human Services directs that these services be included.

(b) Outpatient hospital services, subsection a.(2) of this section, shall only be provided to eligible medically needy individuals if the federal Department of Health and Human Services discontinues the State's waiver to establish outpatient hospital reimbursement rates for the Medicare and Medicaid programs under the authority of section 601(c)(3) of the Social Security Act Amendments of 1983, Pub.L.98-21 (42 U.S.C. s.1395ww(c)(5)). Outpatient hospital services may be extended to all or to certain medically needy individuals if the federal Department of Health and Human Services directs that these services be included. However, the use of outpatient hos-

pital services shall be limited to clinic services and to emergency room services for injuries and significant acute medical conditions.

(c) The division shall monitor the use of inpatient and outpatient hospital services by medically needy persons.

h. In the case of a qualified disabled and working individual pursuant to section 6408 of Pub.L.101-239 (42 U.S.C. s.1396d), the only medical assistance provided under this act shall be the payment of premiums for Medicare part A under 42 U.S.C. ss.1395i-2 and 1395r.

i. In the case of a specified low-income Medicare beneficiary pursuant to 42 U.S.C. s.1396a(a)10(E)iii, the only medical assistance provided under this act shall be the payment of premiums for Medicare part B under 42 U.S.C. s.1395r as provided for in 42 U.S.C. s.1396d(p)(3)(A)(ii).

j. In the case of a qualified individual pursuant to 42 U.S.C. s.1396a(aa), the only medical assistance provided under this act shall be payment for authorized services provided during the period in which the individual requires treatment for breast or cervical cancer, in accordance with criteria established by the commissioner.

360. Section 3 of P.L.1981, c.134 (C.30:4D-6.4) is amended to read as follows:

C.30:4D-6.4 Minimum requirements, liability insurance, personnel; rules, regulations.

3. After consulting with the Commissioner of Human Services, the Commissioner of Health is authorized and empowered to issue and enforce, or cause to be issued and enforced through the division, all necessary rules, regulations, and administrative orders with respect to:

a. The development of minimum requirements concerning the equipment, supplies, and vehicles of providers of mobility assistance vehicle services;

b. The establishment of standards for the amount of liability insurance each provider must maintain in order to be eligible to provide mobility assistance vehicle services. Evidence of such insurance, including the name of the insurer and the policy number, shall be filed at the time of application for approval by the division and from time to time as the division shall deem necessary; and

c. The establishment of standards for certified trained personnel employed by providers of mobility assistance vehicle services.

361. Section 7 of P.L.1968, c.413 (C.30:4D-7) is amended to read as follows:

New Jersey State Library

C.30:4D-7 Duties of commissioner.

7. Duties of commissioner. The commissioner is authorized and empowered to issue, or to cause to be issued through the Division of Medical Assistance and Health Services, all necessary rules and regulations and administrative orders, and to do or cause to be done all other acts and things necessary to secure for the State of New Jersey the maximum federal participation that is available with respect to a program of medical assistance, consistent with fiscal responsibility and within the limits of funds available for any fiscal year, and to the extent authorized by the medical assistance program plan; to adopt fee schedules with regard to medical assistance benefits and otherwise to accomplish the purposes of this act, including specifically the following:

a. Subject to the limits imposed by this act, to submit a plan for medical assistance, as required by Title XIX of the federal Social Security Act, to the federal Department of Health and Human Services for approval pursuant to the provisions of such law; to act for the State in making negotiations relative to the submission and approval of such plan, to make such arrangements, not inconsistent with the law, as may be required by or pursuant to federal law to obtain and retain such approval and to secure for the State the benefits of the provisions of such law;

b. Subject to the limits imposed by this act, to determine the amount and scope of services to be covered, that the amounts to be paid are reasonable, and the duration of medical assistance to be furnished; provided, however, that the department shall provide medical assistance on behalf of all recipients of categorical assistance and such other related groups as are mandatory under federal laws and rules and regulations, as they now are or as they may be hereafter amended, in order to obtain federal matching funds for such purposes and, in addition, provide medical assistance for the resource family children specified in subsection i.(7) of section 3 of P.L.1968, c.413 (C.30:4D-3). The medical assistance provided for these groups shall not be less in scope, duration, or amount than is currently furnished these groups, and in addition, shall include at least the minimum services required under federal laws and rules and regulations to obtain federal matching funds for such purposes.

The commissioner is authorized and empowered, at such times as he may determine feasible, within the limits of appropriated funds for any fiscal year, to extend the scope, duration, and amount of medical assistance on behalf of these groups of categorical assistance recipients, related groups as are mandatory, and resource family children authorized pursuant to section 3i. (7) of this act, so as to include, in whole or in part, the optional medical

services authorized under federal laws and rules and regulations, and the commissioner shall have the authority to establish and maintain the priorities given such optional medical services; provided, however, that medical assistance shall be provided to at least such groups and in such scope, duration, and amount as are required to obtain federal matching funds.

The commissioner is further authorized and empowered, at such times as he may determine feasible, within the limits of appropriated funds for any fiscal year, to issue, or cause to be issued through the Division of Medical Assistance and Health Services, all necessary rules, regulations and administrative orders, and to do or cause to be done all other acts and things necessary to implement and administer demonstration projects pursuant to Title XI, section 1115 of the federal Social Security Act, including, but not limited to waiving compliance with specific provisions of this act, to the extent and for the period of time the commissioner deems necessary, as well as contracting with any legal entity, including but not limited to corporations organized pursuant to Title 14A, New Jersey Statutes (N.J.S.14A:1-1 et seq.), Title 15, Revised Statutes (R.S.15:1-1 et seq.), and Title 15A, New Jersey Statutes (N.J.S.15A:1-1 et seq.) as well as boards, groups, agencies, persons, and other public or private entities;

c. To administer the provisions of this act;

d. To make reports to the federal Department of Health and Human Services as from time to time may be required by such federal department and to the New Jersey Legislature as hereinafter provided;

e. To assure that any applicant, qualified applicant or recipient shall be afforded the opportunity for a hearing should the person's claim for medical assistance be denied, reduced, terminated, or not acted upon within a reasonable time;

f. To assure that providers shall be afforded the opportunity for an administrative hearing within a reasonable time on any valid complaint arising out of the claim payment process;

g. To provide safeguards to restrict the use or disclosure of information concerning applicants and recipients to purposes directly connected with administration of this act;

h. To take all necessary action to recover any and all payments incorrectly made to or illegally received by a provider from such provider or his estate or from any other person, firm, corporation, partnership, or entity responsible for or receiving the benefit or possession of the incorrect or illegal payments or their estates, successors or assigns, and to assess and collect such penalties as are provided for herein;

i. To take all necessary action to recover the cost of benefits incorrectly provided to or illegally obtained by a recipient, including those made after a voluntary divestiture of real or personal property or any interest or estate in property for less than adequate consideration made for the purpose of qualifying for assistance. The division shall take action to recover the cost of benefits from a recipient, legally responsible relative, representative payee, or any other party or parties whose action or inaction resulted in the incorrect or illegal payments or who received the benefit of the divestiture, or from their respective estates, as the case may be and to assess and collect the penalties as are provided for herein, except that no lien shall be imposed against property of the recipient prior to his death except in accordance with section 17 of P.L.1968, c.413 (C.30:4D-17). No recovery action shall be initiated more than five years after an incorrect payment has been made to a recipient when the incorrect payment was due solely to an error on the part of the State or any agency, agent, or subdivision thereof;

j. To take all necessary action to recover the cost of benefits correctly provided to a recipient from the estate of said recipient in accordance with sections 6 through 12 of this amendatory and supplementary act;

k. To take all reasonable measures to ascertain the legal or equitable liability of third parties to pay for care and services (available under the plan) arising out of injury, disease, or disability; where it is known that a third party has a liability, to treat such liability as a resource of the individual on whose behalf the care and services are made available for purposes of determining eligibility; and in any case where such a liability is found to exist after medical assistance has been made available on behalf of the individual, to seek reimbursement for such assistance to the extent of such liability;

l. To compromise, waive, or settle and execute a release of any claim arising under this act including interest or other penalties, or designate another to compromise, waive, or settle and execute a release of any claim arising under this act. The commissioner or the commissioner's designee whose title shall be specified by regulation may compromise, settle or waive any such claim in whole or in part, either in the interest of the Medicaid program or for any other reason which the commissioner by regulation shall establish;

m. To pay or credit to a provider any net amount found by final audit as defined by regulation to be owing to the provider. Such payment, if it is not made within 45 days of the final audit, shall include interest on the amount due at the maximum legal rate in effect on the date the payment became due, except that such interest shall not be paid on any obligation for the period preceding September 15, 1976. This subsection shall not apply until federal financial participation is available for such interest payments;

n. To issue, or designate another to issue, subpoenas to compel the attendance of witnesses and the production of books, records, accounts, papers, and documents of any party, whether or not that party is a provider, which directly or indirectly relate to goods or services provided under this act, for the purpose of assisting in any investigation, examination, or inspection, or in any suspension, debarment, disqualification, recovery, or other proceeding arising under this act;

o. To solicit, receive, and review bids pursuant to the provisions of P.L.1954, c.48 (C.52:34-6 et seq.) and all amendments and supplements thereto, by any corporation doing business in the State of New Jersey, including nonprofit hospital service corporations, medical service corporations, health service corporations, or dental service corporations incorporated in New Jersey and authorized to do business pursuant to P.L.1938, c.366 (C.17:48-1 et seq.), P.L.1940, c.74 (C.17:48A-1 et seq.), P.L.1985, c.236 (C.17:48E-1 et seq.), or P.L.1968, c.305 (C.17:48C-1 et seq.), and to make recommendations in connection therewith to the State Medicaid Commission;

p. To contract, or otherwise provide as in this act provided, for the payment of claims in the manner approved by the State Medicaid Commission;

q. Where necessary, to advance funds to the underwriter or fiscal agent to enable such underwriter or fiscal agent, in accordance with terms of its contract, to make payments to providers;

r. To enter into contracts with federal, State, or local governmental agencies, or other appropriate parties, when necessary to carry out the provisions of this act;

s. To assure that the nature and quality of the medical assistance provided for under this act shall be uniform and equitable to all recipients;

t. To provide for the reimbursement of State and county-administered skilled nursing and intermediate care facilities through the use of a governmental peer grouping system, subject to federal approval and the availability of federal reimbursement.

(1) In establishing a governmental peer grouping system, the State's financial participation is limited to an amount equal to the nonfederal share of the reimbursement which would be due each facility if the governmental peer grouping system was not established, and each county's financial participation in this reimbursement system is equal to the nonfederal share of the increase in reimbursement for its facility or facilities which results from the establishment of the governmental peer grouping system.

(2) On or before December 1 of each year, the commissioner shall estimate and certify to the Director of the Division of Local Government Services in the Department of Community Affairs the amount of increased

federal reimbursement a county may receive under the governmental peer grouping system. On or before December 15 of each year, the Director of the Division of Local Government Services shall certify the increased federal reimbursement to the chief financial officer of each county. If the amount of increased federal reimbursement to a county exceeds or is less than the amount certified, the certification for the next year shall account for the actual amount of federal reimbursement that the county received during the prior calendar year.

(3) The governing body of each county entitled to receive increased federal reimbursement under the provisions of this amendatory act shall, by March 31 of each year, submit a report to the commissioner on the intended use of the savings in county expenditures which result from the increased federal reimbursement. The governing body of each county, with the advice of agencies providing social and health related services, shall use not less than 10% and no more than 50% of the savings in county expenditures which result from the increased federal reimbursement for community-based social and health related programs for elderly and disabled persons who may otherwise require nursing home care. This percentage shall be negotiated annually between the governing body and the commissioner and shall take into account a county's social, demographic, and fiscal conditions, a county's social and health related expenditures and needs, and estimates of federal revenues to support county operations in the upcoming year, particularly in the areas of social and health related services.

(4) The commissioner, subject to approval by law, may terminate the governmental peer grouping system if federal reimbursement is significantly reduced or if the Medicaid program is significantly altered or changed by the federal government subsequent to the enactment of this amendatory act. The commissioner, prior to terminating the governmental peer grouping system, shall submit to the Legislature and to the governing body of each county a report as to the reasons for terminating the governmental peer grouping system;

u. The commissioner, in consultation with the Commissioner of Health, shall:

(1) Develop criteria and standards for comprehensive maternity or pediatric care providers and determine whether a provider who requests to become a comprehensive maternity or pediatric care provider meets the department's criteria and standards;

(2) Develop a program of comprehensive maternity care services which defines the type of services to be provided, the level of services to be

provided, and the frequency with which qualified applicants are to receive services pursuant to P.L.1968, c.413 (C.30:4D-1 et seq.);

(3) Develop a program of comprehensive pediatric care services which defines the type of services to be provided, the level of services to be provided, and the frequency with which qualified applicants are to receive services pursuant to P.L.1968, c.413 (C.30:4D-1 et seq.);

(4) Develop and implement a system for monitoring the quality and delivery of comprehensive maternity and pediatric care services and a system for evaluating the effectiveness of the services programs in meeting their objectives;

(5) Establish provider reimbursement rates for the comprehensive maternity and pediatric care services;

v. The commissioner, jointly with the Commissioner of Health, shall report to the Governor and the Legislature no later than two years following the date of enactment of P.L.1987, c.115 (C.30:4D-2.1 et al.) and annually thereafter on the status of the comprehensive maternity and pediatric care services and their effectiveness in meeting the objectives set forth in section 1 of P.L.1987, c.115 (C.30:4D-2.1) accompanying the report with any recommendations for changes in the law governing the services that the commissioners deem necessary.

362. Section 2 of P.L.2009, c.268 (C.30:4D-7l) is amended to read as follows:

C.30:4D-71 Department to facilitate implementation of C.30:4D-7k.

2. The Department of Health shall adjust the Family Planning Services Grant-in-Aid appropriation and transfer the appropriate amount of State funds to the Division of Medical Assistance and Health Services in the Department of Human Services to facilitate the implementation of section 1 of this act. The Department of Health shall notify the Legislative Budget and Finance Officer as to the amount that is transferred.

363. Section 4 of P.L.2011, c.114 (C.30:4D-8.4) is amended to read as follows:

C.30:4D-8.4 Applications for certification as a Medicaid ACO.

4. a. The department shall accept applications for certification from demonstration project applicants beginning 60 days following the effective date of this act, and shall certify an applicant as a Medicaid ACO for participation in the demonstration project following its determination that the applicant meets the requirements specified in this section. The department

may deny certification of any ACO applicant that the department determines does not meet the requirements of this act. The department may consider applications for approval, including revised applications submitted by an ACO not previously approved to participate in the demonstration project.

b. The department, in consultation with the Department of Health, may certify as many ACOs for participation in the demonstration project as it determines appropriate, but shall certify no more than one ACO for each designated area.

c. Prior to certification, a demonstration project applicant shall demonstrate that it meets the following minimum standards:

(1) The applicant has been formed as a nonprofit corporation pursuant to the "New Jersey Nonprofit Corporation Act," P.L.1983, c.127 (C.15A:1-1 et seq.), for the purposes described in this act;

(2) The applicant's governing board includes:

(a) individuals representing the interests of: health care providers, including, but not limited to, general hospitals, clinics, private practice offices, physicians, behavioral health care providers, and dentists, patients, and other social service agencies or organizations located in the designated area; and

(b) voting representation from at least two consumer organizations capable of advocating on behalf of patients residing within the designated area of the ACO. At least one of the organizations shall have extensive leadership involvement by individuals residing within the designated area of the ACO, and shall have a physical location within the designated area. Additionally, at least one of the individuals representing a consumer organization shall be an individual who resides within the designated area served by the ACO;

(3) The applicant has support of its application by: all of the general hospitals located in the designated area served by the ACO; no fewer than 75% of the qualified primary care providers located in the designated area; and at least four qualified behavioral health care providers located in the designated area;

(4) The applicant has a process for receipt of gainsharing payments from the department and any voluntarily participating Medicaid managed care organizations, and the subsequent distribution of such gainsharing payments in accordance with a quality improvement and gainsharing plan to be approved by the department, in consultation with the Department of Health;

(5) The applicant has a process for engaging members of the community and for receiving public comments with respect to its gainsharing plan;

(6) The applicant has a commitment to become accountable for the health outcomes, quality, cost, and access to care of Medicaid recipients

residing in the designated area for a period of at least three years following certification; and

(7) The applicant has a commitment to ensure the use of electronic prescribing and electronic medical records by health care providers located in the designated area.

d. Nothing in this act shall be construed to prevent the department from certifying an applicant as a Medicaid ACO that also participates in a Medicare ACO demonstration project approved by the federal Centers for Medicare & Medicaid Services.

364. Section 5 of P.L.2011, c.114 (C.30:4D-8.5) is amended to read as follows:

C.30:4D-8.5 Eligibility to receive, distribute gainsharing payments.

5. a. A certified Medicaid ACO shall be eligible to receive and distribute gainsharing payments only after having received approval from the department of its gainsharing plan, which approval may be requested by the ACO at the time of certification or at any time within one year of certification. An ACO may seek to amend its gainsharing plan at any time following the plan's initial approval by submitting amendments to the department for approval.

b. The department, with input from the Department of Health and utilizing outcome evaluation data provided by the Rutgers Center for State Health Policy, shall approve only those gainsharing plans that promote: improvements in health outcomes and quality of care, as measured by objective benchmarks as well as patient experience of care; expanded access to primary and behavioral health care services; and the reduction of unnecessary and inefficient costs associated with care rendered to Medicaid recipients residing in the ACO's designated area. The department and the Department of Health shall provide all data necessary to the Rutgers Center for State Health Policy for analysis in support of the department's review of gainsharing plans. Criteria to be considered by the department and the Department of Health in approving a gainsharing plan shall include, but are not limited to:

(1) whether the plan promotes: care coordination through multidisciplinary teams, including care coordination of patients with chronic diseases and the elderly; expansion of the medical home and chronic care models; increased patient medication adherence and use of medication therapy management services; use of health information technology and sharing of health information; and use of open access scheduling in clinical and behavioral health care settings;

(2) whether the plan encourages services such as patient or family health education and health promotion, home-based services, telephonic communication, group care, and culturally and linguistically appropriate care;

(3) whether the gainsharing payment system is structured to reward quality and improved patient outcomes and experience of care;

(4) whether the plan funds interdisciplinary collaboration between behavioral health and primary care providers for patients with complex care needs likely to inappropriately access an emergency department and general hospital for preventable conditions;

(5) whether the plan funds improved access to dental services for high-risk patients likely to inappropriately access an emergency department and general hospital for untreated dental conditions; and

(6) whether the plan has been developed with community input and will be made available for inspection by members of the community served by the ACO.

c. The gainsharing plan shall include an appropriate proposed time period beginning and ending on specified dates prior to the commencement of the demonstration project, which shall be the benchmark period against which cost savings can be measured on an annual basis going forward. Savings shall be calculated in accordance with a methodology that:

(1) identifies expenditures per recipient by the Medicaid fee-for-service program during the benchmark period, adjusted for characteristics of recipients and local conditions that predict future Medicaid spending but are not amenable to the care coordination or management activities of an ACO which shall serve as the benchmark payment calculation;

(2) compares the benchmark payment calculation to amounts paid by the Medicaid fee-for-service program for all such resident recipients during subsequent periods; and

(3) provides that the benchmark payment calculation shall remain fixed for a period of three years following approval of the gainsharing plan.

d. The percentage of cost savings identified pursuant to subsection c. of this section to be distributed to the ACO, retained by any voluntarily participating Medicaid managed care organization, and retained by the State, shall be identified in the gainsharing plan and shall remain in effect for a period of three years following approval of the gainsharing plan. The percentages shall be designed to ensure that:

(1) the State can achieve meaningful savings and support the ongoing operation of the demonstration project, and

(2) the ACO receives a sufficient portion of the shared savings necessary to achieve its mission and expand its scope of activities.

e. Notwithstanding the provisions of this section to the contrary, the department shall not approve a gainsharing plan that provides direct or indirect financial incentives for the reduction or limitation of medically necessary and appropriate items or services provided to patients under a health care provider's clinical care in violation of federal law.

f. Notwithstanding the provisions of this section to the contrary, a gainsharing plan that provides for shared savings between general hospitals and physicians related to acute care admissions utilizing the methodological component of the Physician-Hospital Collaboration Demonstration awarded by the federal Centers for Medicare & Medicaid Services to the New Jersey Care Integration Consortium, shall not be required to be approved by the department. The department shall not be under any obligation to participate in the Physician-Hospital Collaboration Demonstration.

g. The department shall consider using a portion of any savings generated to expand the nursing, primary care, behavioral health care, and dental workforces and services in the area served by the ACO.

h. A gainsharing plan submitted to the department for this ACO demonstration project shall contain an assessment of the expected impact of revenues on hospitals that agree to participate. The assessment shall include estimates for changes in both direct patient care reimbursement and indirect revenue, such as disproportionate share payments, graduate medical education payments, and other similar payments. The assessment shall include a review of whether participation in the demonstration project could significantly impact the financial stability of any hospital through rapid reductions in revenue and how this impact will be mitigated. The gainsharing plan shall include a letter of support from all participating hospitals in order to be accepted by the department.

365. Section 8 of P.L.2011, c.114 (C.30:4D-8.8) is amended to read as follows:

C.30:4D-8.8 Duties of the department; authorization to seek grants.

8. a. The department, in consultation with the Department of Health, shall:

- (1) design and implement the application process for approval of participating ACOs in the demonstration project;
- (2) collect data from participants in the demonstration project; and

(3) approve a methodology proposed by the Medicaid ACO applicant for calculation of cost savings and for monitoring of health outcomes and quality of care under the demonstration project.

b. The department and the Department of Health shall be authorized to jointly seek public and private grants to implement and operate the demonstration project.

366. Section 9 of P.L.2011, c.114 (C.30:4D-8.9) is amended to read as follows:

C.30:4D-8.9 Annual evaluation.

9. The department, in consultation with the Department of Health, shall evaluate the demonstration project annually to assess whether: cost savings, including, but not limited to, savings in administrative costs and savings due to improved health outcomes, are achieved through implementation of the demonstration project.

The department, in consultation with the Department of Health, and with the assistance of the Rutgers Center for State Health Policy, shall evaluate the demonstration project annually to assess whether there is improvement in the rates of health screening, the outcomes and hospitalization rates for persons with chronic illnesses, and the hospitalization and readmission rates for patients residing in the designated areas served by the ACOs. The department and the Department of Health shall provide the Rutgers Center for State Health Policy with all data necessary to perform the annual evaluation of the demonstration project.

367. Section 12 of P.L.2011, c.114 (C.30:4D-8.12) is amended to read as follows:

C.30:4D-8.12 Continuation of payments for certain services.

12. a. Under the demonstration project, payment shall continue to be made to providers of services and suppliers participating in the Medicaid ACO for services provided to managed care recipients or individuals who receive services on a fee-for-service basis in the same manner as they would otherwise be made, except that the ACO is eligible to receive gain-sharing payments under sections 5 and 6 of this act if it meets the requirements set forth therein.

b. Nothing in this act shall be construed to authorize the Department of Human Services or Health to waive or limit any provisions of federal or State law or reimbursement methodologies governing Medicaid reim-

bursement to federally qualified health centers, including, but not limited to, Medicaid prospective payment reimbursement and any supplemental payments made to a federally qualified health center providing services to Medicaid managed care recipients.

368. Section 14 of P.L.2001, c.114 (C.30:4D-8.14) is amended to read as follows:

C.30:4D-8.14 Report to Governor, Legislature.

14. Upon completion of the demonstration project, the Commissioners of Human Services and Health shall report to the Governor, and to the Legislature pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1), on the demonstration project, and include in the report the findings of the evaluation carried out pursuant to section 9 of this act. The commissioners shall make such recommendations as they deem appropriate.

If, after three years following enactment of this act, the commissioners find the demonstration project was successful in reducing costs and improving health outcomes and the quality of care for Medicaid recipients, the commissioners may recommend that Medicaid ACOs be established on a permanent basis and in additional communities in which Medicaid recipients reside.

369. Section 15 of P.L.2011, c.114 (C.30:4D-8.15) is amended to read as follows:

C.30:4D-8.15 Rules, regulations.

15. The Commissioner of Human Services, in accordance with the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.) and with input from the Commissioner of Health, shall, within 180 days of the effective date of this act, adopt rules and regulations establishing the standards for gainsharing plans submitted by Medicaid ACOs. The Commissioner of Human Services shall also adopt, with input from the Commissioner of Health such rules and regulations governing the ongoing oversight and monitoring of the quality of care delivered to Medicaid recipients in the designated areas served by the Medicaid ACOs, and such other requirements as the Commissioner of Human Services deems necessary to carry out the provisions of this act.

370. Section 2 of P.L.1998, c.41 (C.30:4D-17.17a) is amended to read as follows:

C.30:4D-17.17a Drug Utilization Review Board.

2. a. There is established the Drug Utilization Review Board in the department to advise the department on the implementation of a drug utilization review program pursuant to P.L.1993, c.16 (C.30:4D-17.16 et seq.) and this section. The board shall establish a Senior Drug Utilization Review Committee to address the specific prescribing needs of the elderly and an AIDS/HIV Drug Utilization Review Committee to address the specific prescribing needs of persons with AIDS/HIV, in addition to such other committees as it deems necessary. It shall be the responsibility of each committee to evaluate the specific prescribing needs of its beneficiary population, and to submit recommendations to the board in regard thereto.

The board shall consist of 17 members, including the Commissioners of Human Services and Health or their designees, who shall serve as non-voting ex officio members, and 15 public members. The public members shall be appointed by the Governor with the advice and consent of the Senate. The appointments shall be made as follows: six persons licensed and actively engaged in the practice of medicine in this State, including one who is a psychiatrist and at least two who specialize in geriatric medicine and two who specialize in AIDS/HIV care, one of whom who is a pediatric AIDS/HIV specialist, four of whom shall be appointed upon the recommendation of the Medical Society of New Jersey and two upon the recommendation of the New Jersey Association of Osteopathic Physicians and Surgeons; one person licensed as a physician in this State who is actively engaged in academic medicine; four persons licensed in and actively practicing or teaching pharmacy in this State, who shall be appointed from a list of pharmacists recommended by the New Jersey Pharmacists Association, the New Jersey Council of Chain Drug Stores, the Garden State Pharmacy Owners, Inc., the New Jersey Society of Hospital Pharmacists, the Academy of Consultant Pharmacists and the College of Pharmacy of Rutgers, The State University; one additional health care professional; two persons certified as advanced practice nurses in this State, who shall be appointed upon the recommendation of the New Jersey State Nurses Association; and one member to be appointed upon the recommendation of the Pharmaceutical Research and Manufacturers of America.

Each member of the board shall have expertise in the clinically appropriate prescribing and dispensing of outpatient drugs.

b. All appointments to the board shall be made no later than the 60th day after the effective date of this act. The public members shall be appointed for two-year terms and shall serve until a successor is appointed and qualified, and are eligible for reappointment; except that of the public

members first appointed, eight shall be appointed for a term of two years and five for a term of one year.

c. Vacancies in the membership of the board shall be filled in the same manner as the original appointments were made but for the unexpired term only. Members of the board shall serve with compensation for the time and expenses incurred in the performance of their duties as board members, as determined by the Commissioners of Human Services and Health, subject to the approval of the Director of the Division of Budget and Accounting in the Department of the Treasury.

d. The board shall select a chairman from among the public members, who shall serve a one-year term, and a secretary. The chairman may serve consecutive terms. The board shall adopt bylaws. The board shall meet at least quarterly and may meet at other times at the call of the chairman. The board shall in all respects comply with the provisions of the "Senator Byron M. Baer Open Public Meetings Act," P.L.1975, c.231 (C.10:4-6 et seq.). No motion to take any action by the board shall be valid except upon the affirmative vote of a majority of the authorized membership of the board.

e. The duties of the board shall include the development and application of the criteria and standards to be used in retrospective and prospective drug utilization review. The criteria and standards shall be based on the compendia and developed with professional input in a consensus fashion. There shall be provisions for timely reassessments and revisions as necessary and provisions for input by persons acting as patient advocates. The drug utilization review standards shall reflect the local practices of prescribers, in order to monitor:

- (1) therapeutic appropriateness;
- (2) overutilization or underutilization;
- (3) therapeutic duplication;
- (4) drug-disease contraindications;
- (5) drug-drug interactions;
- (6) incorrect drug dosage;
- (7) duration of drug treatment; and
- (8) clinical drug abuse or misuse.

The board shall recommend to the department criteria for denials of claims and establish standards for a medical exception process. The board shall also consider relevant information provided by interested parties outside of the board and, if appropriate, shall make revisions to the criteria and standards in a timely manner based upon this information.

f. The board, with the approval of the department, shall be responsible for the development, selection, application, and assessment of interven-

tions or remedial strategies for prescribers, pharmacists, and beneficiaries that are educational and not punitive in nature to improve the quality of care, including:

- (1) Information disseminated to prescribers and pharmacists to ensure that they are aware of the duties and powers of the board;
- (2) Written, oral, or electronic reminders of patient-specific or drug-specific information that are designed to ensure prescriber, pharmacist, and beneficiary confidentiality, and suggested changes in the prescribing or dispensing practices designed to improve the quality of care;
- (3) The development of an educational program, using data provided through drug utilization review as a part of active and ongoing educational outreach activities to improve prescribing and dispensing practices as provided in this section. These educational outreach activities shall include accurate, balanced, and timely information about drugs and their effect on a patient. If the board contracts with another entity to provide this program, that entity shall publicly disclose any financial interest or benefit that accrues to it from the products selected or used in this program;
- (4) Use of face-to-face discussion between experts in drug therapy and the prescriber or pharmacist who has been designated by the board for educational intervention;
- (5) Intensified reviews or monitoring of selected prescribers or pharmacists;
- (6) The timely evaluation of interventions to determine whether the interventions have improved the quality of care; and
- (7) The review of case profiles prior to the conducting of an intervention.

371. Section 3 of P.L.1993, c.163 (C.30:4D-17.18) is amended to read as follows:

C.30:4D-17.18 Responsibilities of department.

3. The department shall be responsible for:
 - a. (Deleted by amendment, P.L.1998, c.41).
 - b. The implementation of a drug utilization review program, subject to the approval of the Commissioner of Health, to ensure that prescriptions are appropriate, medically necessary, and not likely to result in adverse medical outcomes, including the approval of the provisions of any contractual agreement between the State pharmaceutical benefits program and other entities processing and reviewing drug claims and profiles for the drug utilization review program.

The program shall include both retrospective and prospective drug utilization review. Retrospective drug utilization review shall include an analysis of drug claims processing data in order to identify patterns of fraud, abuse, or gross overuse, and inappropriate or medically unnecessary care, and to assess data on drug use against standards that are based on the compendia and other sources. Prospective drug utilization review shall include a review conducted by the pharmacist at the point of sale.

c. (Deleted by amendment, P.L.1998, c.41).

d. (Deleted by amendment, P.L.1998, c.41).

e. The submission of an annual report, which shall be subject to public comment prior to its issuance, to the federal Department of Health and Human Services by December 1 of each year. The annual report shall also be submitted to the Governor, the Legislature, the New Jersey Pharmaceutical Association and the Medical Society of New Jersey by December 1 of each year. The report shall include the following information:

(1) An overview of the activities of the board and the drug utilization review program;

(2) Interventions used and their ability to improve the quality of care; however, this information shall not disclose the identities of individual prescribers, pharmacists, or beneficiaries, but shall specify whether the intervention was a result of underutilization or overutilization of drugs;

(3) The costs of administering the drug utilization review program;

(4) Any cost impact to other areas of the State pharmaceutical benefits program resulting from the drug utilization review program, such as hospitalization rates or changes in long-term care;

(5) A quantitative assessment of how drug utilization review has improved beneficiaries' quality of care;

(6) A review of the total number of prescriptions and medical exception requests reviewed by drug therapeutic class;

(7) An assessment of the impact of the educational program established pursuant to subsection f. of section 2 of P.L.1998, c.41 (C.30:4D-17.17a) and interventions on prescribing or dispensing practices, total program costs, quality of care, and other pertinent patient patterns; and

(8) Recommendations for improvement of the drug utilization review program.

f. The development of a working agreement between the board and other boards or agencies, including, but not limited to: the Board of Pharmacy of the State of New Jersey and the State Board of Medical Examiners, in order to clarify any overlapping areas of responsibility.

g. The establishment of an appeal process for prescribers, pharmacists, and beneficiaries pursuant to P.L.1993, c.16 (C.30:4D-17.16 et seq.) and section 2 of P.L.1998, c.41 (C.30:4D-17.17a).

h. The publication and dissemination of medically correct and balanced educational information to prescribers and pharmacists to identify and reduce the frequency of patterns of fraud, abuse, gross overuse, or inappropriate or medically unnecessary care among prescribers, pharmacists, and beneficiaries, including:

- (1) potential or actual reactions to drugs;
- (2) therapeutic appropriateness;
- (3) overutilization or underutilization;
- (4) appropriate use of generic drugs;
- (5) therapeutic duplication;
- (6) drug-disease contraindications;
- (7) drug-drug interactions;
- (8) incorrect drug dosage or duration of drug treatment;
- (9) drug allergy interactions; and
- (10) clinical abuse or misuse.

i. The development and publication, with the input of the Board of Pharmacy of the State of New Jersey, of the guidelines to be used by pharmacists, including mail order pharmacies, in their counseling of beneficiaries.

j. The adoption and implementation of procedures designed to ensure the confidentiality of any information collected, stored, retrieved, assessed, or analyzed by the board, staff to the board, or contractors to the drug utilization review program, that identifies individual prescribers, pharmacists, or beneficiaries. The board may have access to identifying information for purposes of carrying out intervention activities, but the identifying information may not be released to anyone other than a member of the board, except that the board may release cumulative nonidentifying information for purposes of legitimate research. The improper release of identifying information in violation of this act may subject that person to criminal or civil penalties.

k. The determination of whether nursing or long-term care facilities under 42 CFR 483.60 are exempt from the provisions of this act.

l. The establishment of a medical exception process by regulation.

m. The provision of such staff and other resources as the board requires.

372. Section 4 of P.L.1998, c.41 (C.30:4D-17.18a) is amended to read as follows:

C.30:4D-17.18a Rules, regulations.

4. The Commissioner of Human Services, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), and subject to the approval of the Commissioner of Health as appropriate, shall adopt rules and regulations to effectuate the purposes of P.L.1993, c.16 (C.30:4D-17.16 et seq.) and section 2 of P.L.1998, c.41 (C.30:4D-17.17a); except that, notwithstanding any provision of P.L.1968, c.410 (C.52:14B-1 et seq.) to the contrary, the Commissioner of Human Services, may adopt, immediately upon filing with the Office of Administrative Law, such regulations as the commissioner deems necessary to implement the provisions of P.L.1993, c.16 (C.30:4D-17.16 et seq.) and section 2 of P.L.1998, c.41 (C.30:4D-17.17a), which shall be effective for a period not to exceed six months and may thereafter be amended, adopted or re-adopted by the Commissioner of Human Services, in accordance with the requirements of P.L.1968, c.410 (C.52:14B-1 et seq.).

373. Section 2 of P.L.2006, c.23 (C.30:4D-17.24) is amended to read as follows:

C.30:4D-17.24 Findings, declarations relative to long-term care for Medicaid recipients.

2. The Legislature finds and declares that:
 - a. The current population of adults 60 years of age and older in New Jersey is about 1.4 million, and this number is expected to double in size over the next 25 years;
 - b. A primary objective of public policy governing access to long-term care in this State shall be to promote the independence, dignity and lifestyle choice of older adults and persons with physical disabilities or Alzheimer's disease and related disorders;
 - c. Many states are actively seeking to "rebalance" their long-term care programs and budgets in order to support consumer choice and offer more choices for older adults and persons with disabilities to live in their homes and communities;
 - d. New Jersey has been striving to redirect long-term care away from an over-reliance on institutional care toward more home and community-based options; however, it is still often easier for older adults and persons with disabilities to qualify for Medicaid long-term care coverage if they are admitted to a nursing home than if they seek to obtain services through one of the Medicaid home and community-based long-term care options available in this State, such as the Global Options Waiver, Adult Day Health

Services, Traumatic Brain Injury, AIDS Community Care Alternatives Program, Community Resources for People with Disabilities, or Community Resources for People with Disabilities Private Duty Nursing;

e. The federal "New Freedom Initiative" was launched in 2001 for the purpose of promoting the goal of independent living for persons with disabilities; and Executive Order No. 13217, issued by the President of the United States on June 18, 2001, called upon the federal government to assist states and localities to swiftly implement the 1999 United States Supreme Court decision in *Olmstead v. L.C.* and directed federal agencies to evaluate their policies, programs, statutes, and regulations to determine whether any should be revised or modified to improve the availability of community-based services for qualified persons with disabilities;

f. Executive Order No. 100, issued by the Governor on March 23, 2004, directed the Commissioner of Health, in consultation with the State Treasurer, to prepare an analysis and recommendations for developing a global long-term care budgeting process designed to provide the Department of Health with the authority and flexibility to move Medicaid recipients into the appropriate level of care based on their individual needs, and to identify specific gaps and requirements necessary to streamline paperwork and expedite the process of obtaining Medicaid eligibility for home care options for those who qualify;

g. Executive Order No. 31, issued by the Governor on April 21, 2005, established a "money follows the person" pilot program and set aside funding in fiscal year 2006 for home and community-based long-term care;

h. Older adults and those with physical disabilities or Alzheimer's disease and related disorders that require a nursing facility level of care should not be forced to choose between going into a nursing home or giving up the medical assistance that pays for their needed services, and thereby be denied the right to choose where they receive those services; their eligibility for home and community-based long-term care services under Medicaid should be based upon the same income and asset standards as those used to determine eligibility for long-term care in an institutional setting; and

i. The enactment of P.L.2006, c.23 (C.30:4D-17.23 et seq.) will ensure that, in the case of Medicaid-funded long-term care services, "the money follows the person" to allow maximum flexibility between nursing homes and home and community-based settings when it does not compromise federal funding or services in the nursing home and, in so doing, significantly expands the choices available to consumers of these services and thereby fulfills the goal of personal independence so highly valued by the growing number of older adults and persons with disabilities in this State.

374. Section 3 of P.L.2006, c.23 (C.30:4D-17.25) is amended to read as follows:

C.30:4D-17.25 Definitions relative to long-term care for Medicaid recipients.

3. As used in this act:

"Commissioner" means the Commissioner of Human Services.

"Funding parity between nursing home care and home and community-based care" means that the distribution of the amounts expended for these two categories of long-term care under the Medicaid program reflects an appropriate balance between the service delivery costs of those persons whose needs and preferences can most appropriately be met in a nursing home and those persons whose needs and preferences can most appropriately be met in a home or community-based setting.

"Home and community-based care" means Medicaid home and community-based long-term care options available in this State, including, but not limited to, the Global Options Waiver, Adult Day Health Services, Traumatic Brain Injury, AIDS Community Care Alternatives Program, Community Resources for People with Disabilities, and Community Resources for People with Disabilities Private Duty Nursing.

375. Section 4 of P.L.2006, c.23 (C.30:4D-17.26) is amended to read as follows:

C.30:4D-17.26 Process to rebalance allocation of funding for expansion of long-term care services; pilot program, use Statewide.

4. a. (1) Beginning in fiscal year 2008, and in each succeeding fiscal year through fiscal year 2013, the commissioner, in consultation with the State Treasurer and in accordance with the provisions of this section, shall implement a process that rebalances the overall allocation of funding within the Department of Human Services for long-term care services through the expansion of home and community-based services for persons eligible for long-term care as defined by regulation of the commissioner. The expansion of home and community-based services shall be funded, within the existing level of appropriations, by diverting persons in need of long-term care to allow maximum flexibility between nursing home placements and home and community-based services. The State Treasurer, after review and analysis, shall determine the transfer of such funding to home and community-based services provided by the Department of Human Services as is necessary to effectuate the purposes of this act.

(2) Beginning in fiscal year 2008, and in each succeeding fiscal year through fiscal year 2013, funds equal to the amount of the reduction in the

projected growth of Medicaid expenditures for nursing home care pursuant to paragraph (1) of this subsection, for State dollars only plus the percentage anticipated for programs and persons that will receive federal matching dollars, shall be reallocated to home and community-based care through a global budget and expended solely for such care, until the commissioner determines that total Medicaid expenditures for long-term care have been sufficiently rebalanced to achieve funding parity between nursing home care and home and community-based care. Any funds so reallocated, which are not expended in the fiscal year in which they are reallocated, shall be reserved for expenditures for home and community-based care in a subsequent fiscal year.

(3) Subject to federal approval, the home and community-based services to which funds are reallocated pursuant to this act shall include services designated by the commissioner and the Medicaid Long-Term Care Funding Advisory Council established pursuant to this act.

(4) Notwithstanding the provisions of this subsection to the contrary, this act shall not be construed to authorize a reduction in funding for Medicaid-approved services based upon the approved State Medicaid nursing home reimbursement methodology, including existing cost screens used to determine daily rates, annual rebasing and inflationary adjustments.

b. The commissioner shall adopt modifications to the Medicaid long-term care intake system that promote increased use of home and community-based services. These modifications shall include, but not be limited to, the following:

(1) commencing March 1, 2007, on a pilot basis in Atlantic and Warren counties, pursuant to Executive Order No. 31 of 2005:

(a) the provision of home and community-based services available under Medicaid, as designated by the commissioner, in consultation with the Medicaid Long-Term Care Funding Advisory Council established pursuant to this act, pending completion of a formal Medicaid financial eligibility determination for the recipient of services, for a period that does not exceed a time limit established by the commissioner; except that the cost of any services provided pursuant to this subparagraph to a person who is subsequently determined to be ineligible for Medicaid may be recovered from that person; and

(b) the use of mechanisms for making fast-track Medicaid eligibility determinations, a revised clinical assessment instrument, and a computerized tracking system for Medicaid long-term care expenditures; and

(2) commencing March 1, 2008, expansion of the services and measures provided for in paragraph (1) of this subsection to all of the remaining counties in the State, subject to the commissioner conducting or otherwise

providing for an evaluation of the pilot programs in Atlantic and Warren counties prior to that date and determining from that evaluation that the pilot programs are cost-effective and should be expanded Statewide.

376. Section 6 of P.L.2006, c.23 (C.30:4D-17.28) is amended to read as follows:

C.30:4D-17.28 Duties of commissioner relative to funding parity, coordination, assessment instrument.

6. The commissioner, in consultation with the Medicaid Long-Term Care Funding Advisory Council established pursuant to this act, shall:

a. Implement, by such time as the commissioner certifies to the Governor and the Legislature that funding parity has been achieved pursuant to subsection b. of section 5 of this act, a comprehensive data system to track long-term care expenditures and services and consumer profiles and preferences. The data system shall include, but not be limited to: the number of vacant nursing home beds annually and the number of nursing home residents transferred to home and community-based care pursuant to this act; annual long-term care expenditures for nursing home care and each of the home and community based long-term care options available to Medicaid recipients; and annual percentage changes in both long-term care expenditures for, and the number of Medicaid recipients utilizing, nursing home care and each of the home and community based long-term care options, respectively;

b. Commence the following no later than January 1, 2008:

(1) implement a system of Statewide long-term care service coordination and management designed to minimize administrative costs, improve access to services, and minimize obstacles to the delivery of long-term care services to people in need;

(2) identify home and community based long-term care service models that are determined by the commissioner to be efficient and cost-effective alternatives to nursing home care, and develop clear and concise performance standards for those services for which standards are not already available in a home and community-based services waiver;

(3) develop and implement a comprehensive consumer assessment instrument that is designed to facilitate an expedited process to authorize the provision of home and community-based care to a person through fast track eligibility prior to completion of a formal financial eligibility determination; and

(4) develop and implement a comprehensive quality assurance system with appropriate and regular assessments that is designed to ensure that all

forms of long-term care available to consumers in this State are financially viable, cost-effective, and promote and sustain consumer independence; and

c. Seek to make information available to the general public on a State-wide basis, through print and electronic media, regarding the various forms of long-term care available in this State and the rights accorded to long-term care consumers by statute and regulation, as well as information about public and nonprofit agencies and organizations that provide informational and advocacy services to assist long-term care consumers and their families.

377. Section 7 of P.L.2006, c.23 (C.30:4D-17.29) is amended to read as follows:

C.30:4D-17.29 Medicaid Long-Term Care Funding Advisory Council.

7. a. There is established the Medicaid Long-Term Care Funding Advisory Council within the Department of Human Services. The advisory council shall meet at least quarterly during each fiscal year until such time as the commissioner certifies to the Governor and the Legislature that funding parity has been achieved pursuant to subsection b. of section 5 of this act, and shall be entitled to receive such information from the Departments of Health, Human Services, and the Treasury as the advisory council deems necessary to carry out its responsibilities under this act.

b. The advisory council shall:

(1) monitor and assess, and advise the commissioner on, the implementation and operation of the Medicaid long-term care expenditure reforms and other provisions of this act; and

(2) develop recommendations for a program to recruit and train a stable workforce of home care providers, including recommendations for changes to provider reimbursement under Medicaid home and community-based care programs.

c. The advisory council shall comprise 14 members as follows:

(1) the commissioner and the State Treasurer, or their designees, as ex officio members; and

(2) 12 public members to be appointed by the commissioner as follows: one person appointed upon the recommendation of AARP; one person upon the recommendation of the New Jersey Association of Area Agencies on Aging, one person upon the recommendation of the New Jersey Association of County Offices for the Disabled; one person upon the recommendation of the Health Care Association of New Jersey; one person upon the recommendation of the New Jersey Association of Non-Profit Homes for the Aging; one person upon the recommendation of the New Jersey Hospital Association; one person

upon the recommendation of the Rutgers Center for State Health Policy; one person upon the recommendation of the New Jersey Elder Rights Coalition; one person upon the recommendation of the County Welfare Directors Association of New Jersey; one person upon the recommendation of the New Jersey Adult Day Services Association; one person upon the recommendation of a labor union that represents home and community-based health care workers; and one person who is a representative of the home care industry.

d. The advisory council shall organize as soon as possible after the appointment of its members, and shall annually select from its membership a chairman who shall serve until his successor is elected and qualifies. The members shall also select a secretary who need not be a member of the advisory council.

e. The department shall provide such staff and administrative support to the advisory council as it requires to carry out its responsibilities.

378. Section 8 of P.L.2006, c.23 (C.30:4D-17.30) is amended to read as follows:

C.30:4D-17.30 Waiver of federal requirements.

8. The Commissioner of Human Service shall apply to the federal Centers for Medicare & Medicaid Services for any waiver of federal requirements, or for any State plan amendments or home and community-based services waiver amendments, which may be necessary to obtain federal financial participation for State Medicaid expenditures in order to effectuate the purposes of this act.

379. Section 9 of P.L.2006, c.23 (C.30:4D-17.31) is amended to read as follows:

C.30:4D-17.31 Tracking of expenditures.

9. The commissioner shall track Medicaid long-term care expenditures necessary to carry out the provisions of this act.

380. Section 2 of P.L.2000, c.28 (C.30:4D-19.3) is amended to read as follows:

C.30:4D-19.3 Definitions relative to intergovernmental transfer program under Medicaid.

2. As used in this act:

"Bank" means a State or federally chartered bank, savings bank, or savings and loan association located in this State that is authorized to receive

public funds and that is selected by the participating governmental entities to carry out the provisions of this act.

"Intergovernmental transfer" means the transfer of money to the State account by a participating governmental entity as contemplated by an intergovernmental transfer agreement.

"Intergovernmental transfer agreement" means an agreement among the State Treasurer, the Commissioners of Human Services and Health, and a participating governmental entity pertaining to participation in and implementation of the intergovernmental transfer program.

"Intergovernmental transfer program" or "program" means a program to enhance federal financial participation under the Medicaid program by using intergovernmental transfers.

"Medicaid" means the "New Jersey Medical Assistance and Health Services Program" established pursuant to P.L.1968, c.413 (C.30:4D-1 et seq.).

"Medicaid State plan" means the plan submitted by the State to the federal Centers for Medicare & Medicaid Services in the Department of Health and Human Services, including any amendments thereto.

"Participant accounts" means the accounts maintained at the bank by each participating governmental entity for the purpose of effectuating the intergovernmental transfer program.

"Participating governmental entity" means any governmental entity that owns a nursing facility enrolled in the Medicaid program and qualifies for a supplemental payment under the Medicaid State plan, and which signs an intergovernmental transfer agreement.

"State account" means the account maintained at the bank by the State Treasurer for the purpose of the intergovernmental transfer program.

"Supplemental payment" means the Medicaid payment made by the State to a participating governmental entity for a specified fiscal year, as set forth and provided for in an intergovernmental transfer agreement.

381. Section 3 of P.L.2000, c.28 (C.30:4D-19.4) is amended to read as follows:

C.30:4D-19.4 Intergovernmental transfer program established.

3. There is established an intergovernmental transfer program subject to the provisions of this act.

a. Notwithstanding the provisions of any other law to the contrary, a governmental entity eligible to receive a supplemental payment is authorized to participate in the intergovernmental transfer program and to take all

actions necessary to effectuate completion of the intergovernmental transfer program, including, but not limited to:

(1) entering into agreements, including an intergovernmental transfer agreement, with any entity, including the State Treasurer, the Commissioner of Human Services, the Commissioner of Health, and other participating governmental entities;

(2) cooperating with a bank in the execution of any additional documentation required by the bank to effect the borrowing by any participating governmental entity through the issuance of short-term notes in the manner prescribed for the issuance of tax anticipation notes pursuant to N.J.S.40A:4-64, except that the short-term notes shall not be subject to the provisions of N.J.S.40A:4-66, or in any other manner permitted by law, and to pledge to the bank a security interest in all of its right, title and interest in and to its participant account for repayment of short-term notes;

(3) transferring participating governmental entity funds to the State account;

(4) executing certifications, letters of instruction or other instruments necessary to effectuate the intergovernmental transfer program; and

(5) receiving and utilizing supplemental payments received in accordance with the Medicaid State plan, in the manner set forth under the terms of an intergovernmental transfer agreement and as may be necessary to achieve the purposes of the intergovernmental transfer agreement.

b. Notwithstanding any other law to the contrary, the State Treasurer, the Commissioner of Human Services and the Commissioner of Health, acting on behalf of the State, are authorized to participate in the intergovernmental transfer program and to take all actions and make payments in connection with the completion of the intergovernmental transfer program, including, but not limited to:

(1) entering into agreements, including the intergovernmental transfer agreement, with any entity, including participating governmental entities, upon such terms and conditions as the State Treasurer deems necessary or desirable to allow for the entity's participation in the intergovernmental transfer program;

(2) cooperating with any bank in the execution of any additional documentation required by the bank to transfer supplemental payments to the participant accounts and otherwise effectuate the intergovernmental transfer program; and

(3) executing, approving, and authorizing certifications, letters of instruction, legal opinions, or other instruments as the State Treasurer deems necessary or desirable to effectuate the intergovernmental transfer program.

382. Section 4 of P.L.2000, c.28 (C.30:4D-19.5) is amended to read as follows:

C.30:4D-19.5 Appropriations for supplemental payments under intergovernmental transfer program; costs.

4. a. There are appropriated to the Department of Human Services such sums as are determined necessary by the Director of the Division of Budget and Accounting in the Department of the Treasury to make supplemental payments in accordance with the Medicaid State plan under the intergovernmental transfer program. The sums so appropriated shall be deposited in the State account and used to make supplemental payments to the participant accounts pursuant to this subsection and as set forth in an intergovernmental transfer agreement.

b. There are appropriated to the Department of Human Services and Department of the Treasury such additional sums as are determined necessary by the Director of the Division of Budget and Accounting in the Department of the Treasury to pay costs incurred by the State in connection with the execution and delivery of any agreements authorized hereunder, including the costs of professional services, attorneys, and any other costs necessary to complete the intergovernmental transfer program.

383. Section 1 of P.L.2003, c.281 (C.30:4D-21.4) is amended to read as follows:

C.30:4D-21.4 PAAD recipients, notification as to error in estimated annual income.

1. a. Notwithstanding the provisions of any other law to the contrary, a recipient of benefits under the "Pharmaceutical Assistance to the Aged and Disabled" program, established pursuant to P.L.1975, c.194 (C.30:4D-20 et seq.), shall notify the Department of Human Services if the recipient unintentionally errs in estimating annual income to determine eligibility for the program due to an unanticipated payment which would render the recipient ineligible for the program. Notification to the department shall be made in the time and manner prescribed by the department.

b. If the department determines that the payment was unanticipated, the recipient shall reimburse the program for only those benefits that were paid by the program after the recipient received the unanticipated payment.

c. If the department determines that the payment was not unanticipated, the recipient shall reimburse the program for all benefits that were paid by the program in the calendar year in which the payment was received.

d. Within 30 days of receipt of a determination by the department that the payment was not unanticipated, a recipient may request a hearing, which shall be conducted pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.).

e. Nothing in this section shall preclude a recipient from reapplying for benefits in the calendar year following the year in which the recipient notified the department pursuant to subsection a. of this section.

384. Section 1 of P.L.2009, c.272 (C.30:4D-21.5) is amended to read as follows:

C.30:4D-21.5 Automatic enrollment in certain pharmaceutical assistance programs.

1. a. If a person who is a recipient of benefits under the "Pharmaceutical Assistance to the Aged and Disabled," or PAAD, program becomes ineligible for PAAD because the person's income exceeds the program's income eligibility limit and the person still remains eligible for the "Senior Gold Prescription Discount Program," the person shall be enrolled automatically in the "Senior Gold Prescription Discount Program."

b. If a person who is a recipient of benefits under the "Senior Gold Prescription Discount Program" has a decrease in income that renders the person eligible for PAAD, the person shall automatically be enrolled in PAAD.

c. The Department of Human Services shall establish one application form for use in applying for the PAAD program and the "Senior Gold Prescription Discount Program." The form shall provide for the inclusion of all information necessary to determine eligibility for both programs and advise applicants of the automatic enrollment provisions of subsections a. and b. of this section.

385. Section 2 of P.L.2003, c.281 (C.30:4D-38.1) is amended to read as follows:

C.30:4D-38.1 "Hearing Aid Assistance to the Aged and Disabled," notification as to error in estimated annual income.

2. a. Notwithstanding the provisions of any other law to the contrary, a recipient of benefits under the "Hearing Aid Assistance for the Aged and Disabled" program, established pursuant to P.L.1987, c.298 (C.30:4D-36 et seq.), shall notify the Department of Human Services if the recipient unintentionally errs in estimating annual income to determine eligibility for the program due to an unanticipated payment which would render the recipient ineligible for the program. Notification to the department shall be made in the time and manner prescribed by the department.

b. If the department determines that the payment was unanticipated, the recipient shall reimburse the program for only those benefits that were paid by the program after the recipient received the unanticipated payment.

c. If the department determines that the payment was not unanticipated, the recipient shall reimburse the program for all benefits that were paid by the program in the calendar year in which the payment was received.

d. Within 30 days of receipt of a determination by the department that the payment was not unanticipated, a recipient may request a hearing, which shall be conducted pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.).

e. Nothing in this section shall preclude a recipient from reapplying for benefits in the calendar year following the year in which the recipient notified the department pursuant to subsection a. of this section.

386. Section 2 of P.L.2001, c.96 (C.30:4D-44) is amended to read as follows:

C.30:4D-44 Definitions regarding the "Senior Gold Prescription Discount Act."

2. As used in this act:

"Commissioner" means the Commissioner of Human Services.

"Department" means the Department of Human Services.

"PAAD" means the program of pharmaceutical assistance to the aged and disabled established pursuant to P.L.1975, c.194 (C.30:4D-20 et seq.).

"Prescription drug" means any legend drug which is covered by PAAD.

"Program" means the "Senior Gold Prescription Discount Program" established pursuant to this act.

"Reasonable cost" means the cost of a prescription drug as established for PAAD.

"Resident" means a resident as defined in section 3 of P.L.1975, c.194 (C.30:4D-22) for purposes of eligibility for PAAD.

387. Section 3 of P.L.2001, c.96 (C.30:4D-45) is amended to read as follows:

C.30:4D-45 "Senior Gold Prescription Discount Program."

3. a. There is established the "Senior Gold Prescription Discount Program" in the Department of Human Services.

b. A resident of this State shall be eligible for the program if the person is:

(1) either 65 years of age or older or a recipient of disability insurance benefits under Title II of the federal Social Security Act (42 U.S.C. s.401 et seq.);

(2) receiving an annual income, the amount of which is not more than \$10,000 above the applicable PAAD income eligibility limits for single and married persons, which amount is to be determined on the same basis as income is determined for the purpose of eligibility for PAAD; and

(3) not eligible for any other program of State-funded prescription drug benefits.

c. The program shall provide a payment to a pharmacy that is participating in the program for the reasonable cost of one or more prescription drugs purchased by an eligible person who presents an identification card issued by the program in an amount that exceeds the copayment paid by the eligible person. The payments to pharmacies shall commence no later than 120 days after the effective date of this act or after enactment, whichever is later.

At the time of each purchase of a prescription drug, the eligible person shall pay a copayment that shall not be waived, discounted, or rebated in whole or in part, and shall be equal to:

(1) \$15 plus 50% of the remaining amount of the reasonable cost for the prescription drug, or the reasonable cost for the prescription drug, whichever is less; or

(2) \$15, or the reasonable cost for the prescription drug, whichever is less, in the case of an eligible person who has incurred out-of-pocket expenditures, including copayments and deductibles, for the purchase of prescription drugs, which are not reimbursable by any other plan of assistance or insurance and are credited to that person's account for each 12-month period of eligibility in accordance with procedures established by the commissioner, in the following amounts: \$2,000 for a single person and \$3,000 for a married couple. These out-of-pocket expense amounts shall include only expenses incurred on or after the date that the person received proof of eligibility for the program from the department.

d. If an interchangeable drug product contained in the latest list approved and published by the Drug Utilization Review Council pursuant to section 7 of P.L.1977, c.240 (C.24:6E-6) is available for the prescribed prescription drug, an eligible person shall either:

(1) purchase an interchangeable drug product, the cost of which is equal to or less than the maximum allowable cost as determined by the commissioner; or

(2) if the prescriber specifically indicates that substitution is not permissible, purchase the prescribed drug product that is higher in cost than the maximum allowable cost as determined by the commissioner and pay the amount of the price above that maximum allowable cost, in addition to the amount of the copayment paid by the eligible person pursuant to subsection c. of this section.

e. An eligible person whose prescription drug costs are covered in part by any other program or plan of assistance or insurance may be required to receive reduced assistance under the Senior Gold Prescription Discount Program. If an eligible person's prescription drug costs are covered in whole or in part by any other program or plan of assistance or insurance, the other program or plan shall be the primary payer and the Senior Gold Prescription Discount Program shall be the payer of last resort.

f. The commissioner may establish limits on the day supply or maximum quantity of prescription drugs which may be purchased by an eligible person under the program in a manner equivalent to those established for prescription drug purchases under PAAD.

g. An eligible person under the program shall, upon the submission of an application and proof of expenditure as the department may prescribe, be reimbursed for 50% of the cost of each prescription drug purchased by that person in an amount that exceeds the required copayment, during the period commencing 30 days after the person's properly completed application was received by the department and ending on the date on which the person received proof of eligibility from the department; except that no reimbursement under this act shall be made for a prescription drug purchased prior to the effective date of this act.

h. The commissioner shall by regulation provide for:

(1) arrangements for providing notice of the availability of the program and the distribution of application forms therefor;

(2) a system of payments to pharmacies that includes the same dispensing fee structure that is used for PAAD and a system for determining eligibility for the program, including evidence of complete or partial coverage of prescription drug costs by any other program or plan of assistance or insurance; and

(3) the issuance of program identification cards to persons who are determined eligible for the program.

388. Section 3 of P.L.2003, c.281 (C.30:4D-45.1) is amended to read as follows:

C.30:4D-45.1 "Senior Gold Prescription Discount Program," notification as to error in estimated annual income.

3. a. Notwithstanding the provisions of any other law to the contrary, a recipient of benefits under the "Senior Gold Prescription Discount Program," established pursuant to P.L.2001, c.96 (C.30:4D-43 et seq.), shall notify the Department of Human Services if the recipient unintentionally errs in estimating annual income to determine eligibility for the program due to an unanticipated payment which would render the recipient ineligible for the program. Notification to the department shall be made in the time and manner prescribed by the department.

b. If the department determines that the payment was unanticipated, the recipient shall reimburse the program for only those benefits that were paid by the program after the recipient received the unanticipated payment.

c. If the department determines that the payment was not unanticipated, the recipient shall reimburse the program for all benefits that were paid by the program in the calendar year in which the payment was received.

d. Within 30 days of receipt of a determination by the department that the payment was not unanticipated, a recipient may request a hearing, which shall be conducted pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.).

e. Nothing in this section shall preclude a recipient from reapplying for benefits in the calendar year following the year in which the recipient notified the department pursuant to subsection a. of this section.

389. Section 8 of P.L.2001, c.96 (C.30:4D-50) is amended to read as follows:

C.30:4D-50 Rules, regulations.

8. The Commissioner of Human Services, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt rules and regulations to effectuate the purposes of this act.

390. Section 9 of P.L.2001, c.96 (C.30:4D-51) is amended to read as follows:

C.30:4D-51 Conditions on expending funds.

9. Notwithstanding the provisions of any law to the contrary, no funds appropriated for the Senior Gold Prescription Discount Program established pursuant to this act shall be expended unless participating pharmaceutical manufacturing companies execute contracts with the Department of Human

Services providing for the payment of rebates to the State under terms substantially similar to those of rebate payment contracts under PAAD, provided that the manufacturer's rebates for the Senior Gold Prescription Discount Program shall apply only to the amount paid by the State under the program.

391. Section 10 of P.L.2001, c.96 (C.30:4D-52) is amended to read as follows:

C.30:4D-52 Rebates to DHS for program.

10. Amounts received as rebates under rebate payment contracts executed pursuant to section 9 of this act are appropriated to the Department of Human Services for the support of the Senior Gold Prescription Discount Program.

392. Section 2 of P.L.2007, c.58 (C.30:4D-54) is amended to read as follows:

C.30:4D-54 Findings, declarations relative to the Office of Medicaid Inspector General.

2. The Legislature finds and declares that:
 - a. The State of New Jersey expends more than \$9 billion in taxpayer funds to fund the Medicaid program each year;
 - b. The State has a continuing responsibility to ensure that funds expended under the Medicaid program are used appropriately and efficiently to promote the public health;
 - c. Fraud, waste, and abuse by providers and recipients in the Medicaid program reduces the ability of the State to properly fund the program and results in harm to the health of the citizens of this State;
 - d. Controlling fraud, waste, and abuse in the Medicaid program includes preventing, detecting, and investigating such fraud, waste, and abuse, and referring it for civil or criminal action when appropriate;
 - e. The current system for controlling Medicaid fraud, waste, and abuse is based largely on formal and informal agreements among the Department of Human Services, the Medicaid Fraud Control Unit of the Department of Law and Public Safety, the Department of Health and other local, State, and federal agencies whose clients are served by the Medicaid program or who are otherwise responsible for the control of Medicaid fraud, waste, and abuse;
 - f. Centralizing fraud recovery efforts and establishing an independent Office of the Medicaid Inspector General by statute to prevent, detect, and investigate fraud and abuse and coordinate the anti-fraud efforts of all State

agencies funded by Medicaid will enhance the efforts of the State to control Medicaid costs;

g. The current efforts to control Medicaid fraud, waste, and abuse in New Jersey range from investigating providers before they enroll in the Medicaid program to identifying fraud, waste, and abuse on the part of both providers and recipients;

h. Changes in federal and State law, as well as in the health care industry and in available technology, suggest that it is time for a comprehensive review of the Medicaid fraud, waste, and abuse control infrastructure in this State;

i. Toward that end, the Governor has appointed the New Jersey Commission on Government Efficiency and Reform to evaluate the budget, structure, and organization of government in New Jersey, including State agencies, instrumentalities and independent authorities, local and county government and school districts, and advise the Governor on governmental restructuring, effectiveness, best practices, efficiencies, cost-saving measures, and how best to achieve economies of scale in the delivery of services and programs, at the lowest possible cost, consistent with mission and quality; and

j. While the State examines and prepares to implement such fundamental, long-term structural changes, the immediate coordination of State efforts to control Medicaid fraud, waste, and abuse at all levels of government is essential.

393. Section 5 of P.L.2007, c.58 (C.30:4D-57) is amended to read as follows:

C.30:4D-57 Functions, duties, powers, responsibilities of Medicaid Inspector General.

5. a. The Medicaid Inspector General shall have the following general functions, duties, powers, and responsibilities:

(1) To appoint such deputies, directors, assistants, and other officers and employees as may be needed for the office to meet its responsibilities, and to prescribe their duties and fix their compensation in accordance with State law and within the amounts appropriated therefor;

(2) To conduct and supervise all State government activities, except those of the Medicaid Fraud Control Unit in the Department of Law and Public Safety, relating to Medicaid integrity, fraud, and abuse;

(3) To call upon any department, office, division, or agency of State government to provide such information, resources, or other assistance as the Medicaid Inspector General deems necessary to discharge the duties and

functions and to fulfill the responsibilities of the Medicaid Inspector General under this act. Each department, office, division, and agency of this State shall cooperate with the Medicaid Inspector General and furnish the office with the assistance necessary to accomplish the purposes of this act;

(4) To coordinate activities to prevent, detect, and investigate Medicaid fraud and abuse among the following: the Departments of Human Services, Health, Education, and Treasury; the Office of the Attorney General; and the special investigative unit maintained by each health insurer providing a Medicaid managed care plan within the State;

(5) To apply for and receive federal grants and monies with all necessary assistance as the Medicaid Inspector General shall require from the department;

(6) To enter into any applicable federal pilot programs and demonstration projects and coordinate with the department in order for the department to apply as requested by the Medicaid Inspector General, for necessary federal waivers;

(7) To recommend and implement policies relating to Medicaid integrity, fraud, and abuse, and monitor the implementation of any recommendations made by the office to other agencies or entities responsible for the administration of Medicaid;

(8) To perform any other functions that are necessary or appropriate in furtherance of the mission of the office; and

(9) To direct all public or private Medicaid service providers or recipients to cooperate with the office and provide such information or assistance as shall be reasonably required by the office.

b. As it relates to ensuring compliance with applicable Medicaid standards and requirements, identifying and reducing fraud and abuse, and improving the efficiency and effectiveness of Medicaid, the functions, duties, powers, and responsibilities of the Medicaid Inspector General shall include, but not be limited to, the following:

(1) To establish, in consultation with the department and the Attorney General, guidelines under which the withholding of payments or exclusion from Medicaid may be imposed on a provider or shall automatically be imposed on a provider;

(2) To review the utilization of Medicaid services to ensure that Medicaid funds, regardless of which agency administers the service, are appropriately spent to improve the health of Medicaid recipients;

(3) To review and audit contracts, cost reports, claims, bills, and all other expenditures of Medicaid funds to determine compliance with applicable laws, regulations, guidelines, and standards, and enhance program integrity;

(4) To consult with the department to optimize the Medicaid management information system in furtherance of the mission of the office. The department shall consult with the Medicaid Inspector General on matters that concern the operation, upgrade and implementation of the Medicaid management information system;

(5) To coordinate the implementation of information technology relating to Medicaid integrity, fraud, and abuse; and

(6) To conduct educational programs for Medicaid providers, vendors, contractors, and recipients designed to limit Medicaid fraud and abuse.

c. As it relates to investigating allegations of Medicaid fraud and abuse and enforcing applicable laws, rules, regulations, and standards, the functions, duties, powers, and responsibilities of the Medicaid Inspector General shall include, but not be limited to, the following:

(1) To conduct investigations concerning any acts of misconduct within Medicaid;

(2) To refer information and evidence to regulatory agencies and professional and occupational licensing boards;

(3) To coordinate the investigations of the office with the Attorney General, the State Inspector General, law enforcement authorities, and any prosecutor of competent jurisdiction, and endeavor to develop these investigations in a manner that expedites and facilitates criminal prosecutions and the recovery of improperly expended Medicaid funds, including:

(a) keeping detailed records for cases processed by the State Inspector General and the Attorney General and county prosecutors. The records shall include: information on the total number of cases processed and, for each case, the agency and division to which the case is referred for investigation; the date on which the case is referred; and the nature of the suspected fraud, waste, or abuse; and

(b) receiving notice from the Attorney General of each case that the Attorney General declines to prosecute or prosecutes unsuccessfully;

(4) To make information and evidence relating to suspected criminal acts which the Medicaid Inspector General may obtain in carrying out his duties available to the Medicaid Fraud Control Unit pursuant to the requirements of federal law, as well as to other law enforcement officials when appropriate, and consult with the Attorney General and county prosecutors in order to coordinate criminal investigations and prosecutions;

(5) To refer complaints alleging criminal conduct to the Attorney General or other appropriate prosecutorial authority. If the Attorney General or other appropriate prosecutorial authority decides not to investigate or prosecute the matter, the Attorney General or other appropriate prosecuto-

rial authority shall promptly notify the Medicaid Inspector General. The Attorney General or the prosecutorial authority shall inform the Medicaid Inspector General as to whether an investigation is ongoing with regard to any matter so referred. The Medicaid Inspector General shall preserve the confidentiality of the existence of any ongoing criminal investigation.

(a) If the Attorney General or the prosecutorial authority decides not to investigate or act upon the matter referred, the Inspector General is authorized to continue an investigation after the receipt of such a notice.

(b) Upon the completion of an investigation or, in a case in which the investigation leads to prosecution, upon completion of the prosecution, the Attorney General or the prosecutorial authority shall report promptly the findings and results to the Medicaid Inspector General. In the course of informing the Medicaid Inspector General, the Attorney General or prosecutorial authority shall give full consideration to the authority, duties, functions, and responsibilities of the Medicaid Inspector General, the public interest in disclosure, and the need for protecting the confidentiality of complainants and informants.

(c) The Medicaid Inspector General shall maintain a record of all matters referred and the responses received and shall be authorized to disclose information received as appropriate and as may be necessary to resolve the matter referred, to the extent consistent with the public interest in disclosure and the need for protecting the confidentiality of complainants and informants and preserving the confidentiality of ongoing criminal investigations.

(d) Notwithstanding any referral made pursuant to this subsection, the Medicaid Inspector General may pursue any administrative or civil remedy under the law;

(6) In furtherance of an investigation, to compel at a specific time and place, by subpoena, the appearance and sworn testimony of any person whom the Medicaid Inspector General reasonably believes may be able to give information relating to a matter under investigation;

(a) For this purpose, the Medicaid Inspector General is empowered to administer oaths and examine witnesses under oath, and compel any person to produce at a specific time and place, by subpoena, any documents, books, records, papers, objects, or other evidence that the Medicaid Inspector General reasonably believes may relate to a matter under investigation.

(b) If any person to whom a subpoena is issued fails to appear or, having appeared, refuses to give testimony, or fails to produce the books, papers, or other documents required, the Medicaid Inspector General may apply to the Superior Court and the court may order the person to appear and give testimony or produce the books, papers, or other documents, as

applicable. Any person failing to obey that order may be punished by the court as for contempt;

(7) Subject to applicable State and federal law, to have full and unrestricted access to all records, reports, audits, reviews, documents, papers, data, recommendations, or other material available to State and local departments of health and human services, other State and local government agencies, and Medicaid service providers relating to programs and operations with respect to which the office has responsibilities under this act;

(8) To solicit, receive, and investigate complaints related to Medicaid integrity, fraud, and abuse;

(9) To prepare cases, provide expert testimony, and support administrative hearings and other legal proceedings; and

(10) Upon reasonable belief of the commission of a fraudulent or abusive act, to conduct on-site facility inspections.

d. As it relates to recovering improperly expended Medicaid funds, imposing administrative sanctions, damages or penalties, negotiating settlements, and developing an effective third-party liability program to assure that all private or other governmental medical resources have been exhausted before a claim is paid by Medicaid or that reimbursement is sought when there is discovered a liable third party after payment of a claim, the functions, duties, powers, and responsibilities of the Medicaid Inspector General shall include, but not be limited to, the following:

(1) On behalf of the department, to collect all overpayments for reimbursable services that are self-disclosed by providers pursuant to current law;

(2) To pursue civil and administrative enforcement actions against those who engage in fraud, abuse, or illegal acts perpetrated within Medicaid, including providers, contractors, agents, recipients, individuals, or other entities involved directly or indirectly with the provision of Medicaid care, services, and supplies. These civil and administrative enforcement actions shall include the imposition of administrative sanctions, penalties, suspension of fraudulent, abusive, or illegal payments, and actions for civil recovery and seizure of property or other assets connected with such payments;

(3) To initiate civil suits consistent with the provisions of this act, maintain actions for civil recovery on behalf of the State, and enter into civil settlements;

(4) To withhold payments to any provider for Medicaid services if the provider unreasonably fails to produce complete and accurate records related to an investigation that is initiated by the office with reasonable cause;

(5) To ensure that Medicaid is the payor of last resort, and to provide for the coordination of benefits with each health insurer operating in the State and the recoupment of any duplicate reimbursement paid by the State. Every such health insurer shall be required to provide such information and reports as may be deemed necessary by the Medicaid Inspector General for the coordination of benefits and shall maintain files in a manner and format approved by the department; and

(6) To monitor and pursue the recoupment of Medicaid overpayments, damages, penalties, and sanctions.

394. Section 7 of P.L.2007, c.58 (C.30:4D-59) is amended to read as follows:

C.30:4D-59 Transfer of certain functions, powers, employees.

7. a. The Medicaid audit, program integrity, fraud, and abuse prevention and recovery functions, all officers and employees that the Medicaid Inspector General deems qualified and substantially engaged therein, and any documents and records that the Medicaid Inspector General deems necessary and related to the transfer of such functions and personnel, shall be transferred to the Office of the Medicaid Inspector General from the Medicaid Office of Program Integrity Unit and the Third Party Liability Unit in the Division of Medical Assistance and Health Services, the Division of Aging Services, the Division of Disability Services, the Division of Developmental Disabilities, the Division of Mental Health and Addiction Services, the Division of Child Protection and Permanency, the Division of Child Behavioral Health Services, the Department of Health and the Department of the Treasury. The Medicaid Inspector General shall consult with the head of each department or agency from which such function is to be transferred to determine the officers and employees to be transferred.

b. The Medicaid Inspector General shall have general managerial control over the office and shall establish the organizational structure of the office as the Medicaid Inspector General deems appropriate to carry out the responsibilities and functions of the office. Within the limits of funds appropriated therefor, the Medicaid Inspector General may hire such employees in the unclassified service as are necessary to administer the office. These employees shall serve at the pleasure of the Medicaid Inspector General. Subject to the availability of appropriations, the Medicaid Inspector General may obtain the services of certified public accountants, qualified management consultants, professional auditors, or other professionals necessary to independently perform the functions of the office.

395. Section 10 of P.L.1985, c.307 (C.30:4G-10) is amended to read as follows:

C.30:4G-10 Advisory Council on Personal Attendant Services.

10. a. There is established in the department an Advisory Council on Personal Attendant Services which consists of 19 members as follows: the Director of the Division of Child Protection and Permanency in the Department of Children and Families, the Director of the Division of Aging Services, the Director of the Division of Developmental Disabilities, and the Director of the Division of Medical Assistance and Health Services in the Department of Human Services, the Director of the Division of Veterans' Services in the Department of Military and Veterans' Affairs, and the Director of the Division of Vocational Rehabilitation Services in the Department of Labor and Workforce Development, or their designees, who shall serve ex officio, and 13 members appointed by the commissioner who are residents of this State, one of whom is a member of the New Jersey Association of County Representatives of Disabled Persons, four of whom represent providers of personal attendant services, five of whom represent consumers of personal attendant services and three of whom represent advocacy groups or agencies for the physically disabled.

A vacancy in the membership of the council shall be filled in the same manner as the original appointment.

The members of the council shall serve without compensation, but the department shall reimburse the members for the reasonable expenses incurred in the performance of their duties.

b. The council shall hold an organizational meeting within 30 days after the appointment of its members. The members of the council shall elect from among them a chairperson, who shall be the chief executive officer of the council and the members shall elect a secretary, who need not be a member of the council.

c. The council shall:

(1) Advise the commissioner on matters pertaining to personal attendant services and the development of the personal attendant program, upon the request of the commissioner;

(2) Review the rules and regulations promulgated for the implementation of the personal attendant program and make recommendations to the commissioner, as appropriate;

(3) Evaluate the effectiveness of the personal attendant program in achieving the purposes of this act; and

(4) Assess the Statewide need for personal attendant services and the projected cost for providing these services Statewide.

396. Section 1 of P.L.2006, c.87 (C.30:4J-17) is amended to read as follows:

C.30:4J-17 Annual report on Access to Employer-Based Health Insurance; contents.

1. The Commissioner of Human Services, in consultation with the Commissioners of Health, Labor and Workforce Development, and Banking and Insurance, as appropriate, shall prepare, to the extent data are available, an annual report on Access to Employer-Based Health Insurance, as provided in this act.

a. The report shall include the following information about each employer in the State with an aggregate of 50 or more NJ FamilyCare enrollees or Medicaid recipients:

(1) the employer's name and address, unless the employer has more than one work site, in which case the employer's name and the number of work sites and the counties in which the work sites are located;

(2) the number of NJ FamilyCare enrollees and Medicaid recipients who are employed by the employer;

(3) the number of NJ FamilyCare enrollees and Medicaid recipients who are spouses or dependents of employees of the employer;

(4) whether the employer offers health insurance coverage to its employees; and

(5) the cost to the State of providing NJ FamilyCare and Medicaid coverage for the employer's employees and their dependents.

The commissioner may include comparable information about recipients of other public health care coverage programs, and such other information as the commissioner deems appropriate regarding employer-based coverage for persons covered under public insurance programs.

The commissioner shall also include the information compiled by the Commissioner of Health concerning recipients of charity care pursuant to section 2 of P.L.2006, c.87 (C.26:2H-18.55a). With respect to the information provided by the Commissioner of Health, the commissioner, in consultation with the Commissioners of Labor and Workforce Development and Banking and Insurance, shall ascertain whether the employer of a recipient of charity care offers health insurance coverage to its employees. The commissioner shall include that information about employers in the report.

In addition, the commissioner may make any recommendations the commissioner deems appropriate for legislative action.

b. The report shall not include the name of any NJ FamilyCare enrollee or Medicaid recipient or any family member of an enrollee or recipient.

c. The commissioner shall submit the report by September 1 of each year to the Governor and the chairmen of the Senate and Assembly standing reference committees on human services, health, and appropriations.

397. Section 27 of P.L.2008, c.38 (C.30:4J-19) is amended to read as follows:

C.30:4J-19 Outreach, Enrollment, and Retention Working Group.

27. The Commissioner of Human Services shall establish an Outreach, Enrollment, and Retention Working Group to develop a plan to carry out ongoing and sustainable measures to strengthen outreach to low and moderate income families who may be eligible for Medicaid, NJ FamilyCare, or NJ FamilyCare Advantage, to maximize enrollment in these programs, and to ensure retention of enrollees in these programs.

a. The members of the working group shall include:

(1) The Commissioners of Human Services, Health, Banking and Insurance, Labor and Workforce Development, Education, and Community Affairs, and the Secretary of Agriculture, or their designees, who shall serve ex officio; and

(2) Six public members appointed by the Commissioner of Human Services who shall include: one person who represents racial and ethnic minorities in this State; one person who represents managed care organizations that participate in the Medicaid and NJ FamilyCare programs; one person who represents the vendor under contract with the Division of Medical Assistance and Health Services to provide NJ FamilyCare eligibility, enrollment, and health benefit coordinator services to the division; one person who represents New Jersey Policy Perspective; one person who represents the Advocates for Children of New Jersey; and one person who represents Legal Services of New Jersey.

b. As part of the plan, the working group shall:

(1) determine if there are obstacles to enrollment of minorities in the State in the Medicaid, NJ FamilyCare, and NJ FamilyCare Advantage programs due to ethnic and cultural differences and, if so, develop strategies for the Department of Human Services to overcome these obstacles and increase enrollment among minorities;

(2) recommend outreach strategies to identify and enroll all eligible children in the Medicaid, NJ FamilyCare, and NJ FamilyCare Advantage programs and to retain enrollment of children and their parents in the programs;

(3) establish monthly enrollment goals for the number of children who need to be enrolled in Medicaid, NJ FamilyCare, and NJ FamilyCare Ad-

vantage in order to ensure that as many children as possible who are eligible for these programs are enrolled within a reasonable period of time, in accordance with the mandate established pursuant to section 2 of P.L.2008, c.38 (C.26:15-2); and

(4) make such other recommendations to the Commissioner of Human Services as the working group determines necessary and appropriate to achieve the purposes of this section.

c. The working group shall organize as soon as practicable following the appointment of its members and shall select a chairperson and vice-chairperson from among the members. The chairperson shall appoint a secretary who need not be a member of the working group.

(1) The public members shall serve without compensation, but shall be reimbursed for necessary expenses incurred in the performance of their duties and within the limits of funds available to the working group.

(2) The working group shall be entitled to call to its assistance and avail itself of the services of the employees of any State, county, or municipal department, board, bureau, commission, or agency as it may require and as may be available to it for its purposes.

d. Upon completion of the plan, the working group shall report on its activities to the chairperson of the Senate and Assembly standing reference committees on health and human services, and include a copy of the plan and any recommendations for legislative action it deems appropriate.

e. The Commissioner of Human Services shall post the plan on the department's Internet website and include a table showing the monthly enrollment goals established in the plan and the actual new and continued enrollments for that month. The commissioner shall update the table monthly.

f. The Department of Human Services shall provide staff support to the working group.

C.30:1A-14 Division of Aging Services established.

398. a. There is established the Division of Aging Services in the Department of Human Services.

b. The functions, powers, and duties of the Department of Health and Senior Services, redesignated as the Department of Health pursuant to section 93 of P.L.2012, c.17 (C.26:1A-2.1), to the extent that they relate to the provision of programs or services for senior citizens, including the New Jersey State Commission on Aging established pursuant to section 1 of P.L.1957, c.72 (C.26:1A-107), the Division on Aging and Community Services, and any other division relating to senior benefits, are transferred to the Division of Aging Services, subject to the provisions of P.L.2012, c.17

(C.26:1A-2.1 et al.) and in accordance with the "State Agency Transfer Act," P.L.1971, c.375 (C.52:14D-1 et seq.).

c. All appropriations and other monies available, and to become available, that relate to the provision of programs or services for senior citizens are continued in the Division of Aging Services and shall be available for the objects and purposes for which these monies are appropriated, subject to the provisions of P.L.2012, c.17 (C.26:1A-2.1 et al.) and any other terms, restrictions, limitations, or other requirements imposed by law.

d. The administrator and head of the office shall be a director who shall be known as the Director of the Division of Aging Services. The director shall be a person qualified by training and experience to perform the duties of the office and shall devote his entire time to the performance of those duties. The director shall be appointed by the commissioner.

e. The commissioner shall appoint and remove officers and employees of the division subject to the provisions of Title 11A of the New Jersey Statutes and other applicable statutes as are necessary to enable the division to perform its duties pursuant to this act and shall fix their compensation within the limits of available appropriations and as is provided by law.

f. Whenever, in any law, rule, regulation, order, contract, document, judicial or administrative proceeding or otherwise, reference is made to the Division on Aging in either the Department of State, the Department of Community Affairs, or the Department of Health and Senior Services, the same shall mean and refer to the Division of Aging Services in the Department of Human Services.

399. Section 1 of P.L.1997, c.364 (C.34:5A-10.1) is amended to read as follows:

C.34:5A-10.1 Definitions relative to use, storage of hazardous substances in schools, child care centers.

1. As used in this act:

"Child care center" means a child care center licensed pursuant to the provisions of P.L.1983, c.492 (C.30:5B-1 et seq.);

"Hazardous substance" means any substance, or substance in a mixture, included on the hazardous substance list developed by the Department of Health pursuant to the "Worker and Community Right to Know Act," P.L.1983, c.315 (C.34:5A-1 et seq.).

"Hazardous substance" shall not include:

(1) Any article containing a hazardous substance if the hazardous substance is present in a solid form which does not pose any acute or chronic health hazard to any person exposed to it;

(2) Any hazardous substance constituting less than one percent of a mixture unless the hazardous substance is present in an aggregate amount of 500 pounds or more in a container in a public or private school or child care center building;

(3) Any hazardous substance which is a special health hazardous substance constituting less than the threshold percentage established by the Department of Health pursuant to P.L.1983, c.315 (C.34:5A-1 et seq.), for that special health hazardous substance when present in a mixture;

(4) Any hazardous substance present in the same form and concentration as a product packaged for distribution and use by consumers and which is not a product intended primarily for commercial use;

(5) Any fuel in a motor vehicle;

(6) Tobacco or tobacco products;

(7) Wood or wood products;

(8) Foods, drugs, or cosmetics;

(9) Hazardous substances which are an integral part of a building's structure or furnishings;

(10) Products which are personal property and are intended for personal use; and

(11) Any substance used in the routine maintenance of a public or private school or child care center building or its grounds, any substance used in a classroom science laboratory, any substance used in a school occupational training facility, including laboratories and shops, and any substance used in the normal operation of the classrooms or administrative offices of a public or private school or child care center, including any substance used in the heating or cooling of the school or child care center;

"Hazardous substance fact sheet" means the hazardous substance fact sheets prepared by the Department of Health pursuant to the "Worker and Community Right to Know Act," P.L.1983, c.315 (C.34:5A-1 et seq.);

"Public school or private school" has the same meaning as set forth in N.J.S.18A:1-1.

400. Section 2 of P.L.1997, c.364 (C.34:5A-10.2) is amended to read as follows:

C.34:5A-10.2 Use of hazardous substance prohibited when children are expected to be present; exceptions.

2. a. No person shall use or allow the use of any hazardous substance in or on any building or grounds used as a public school, a private school, or child care center at any time when children are expected to be present in the

building. The provisions of this subsection shall not apply when an emergency condition, as deemed by the Board of Education or the chief school administrator in the case of any public school, or the person having responsibility for the operation of any private school or child care center, necessitates the use of a hazardous substance when children are present.

b. Any person who uses or stores, or causes or allows the use or storage of any hazardous substance in or on any building or grounds used as a public school, a private school, or child care center shall ensure that the use or storage of that hazardous substance is in compliance with the regulations adopted by the Department of Health pursuant to section 5 of P.L.1997, c.364 (C.34:5A-10.5).

401. Section 5 of P.L.1997, c.364 (C.34:5A-10.5) is amended to read as follows:

C.34:5A-10.5 Regulations.

5. The Department of Health, in consultation with the Departments of Education, Human Services, Children and Families and Environmental Protection, and within 180 days of the enactment of P.L.1997, c.364 (C.34:5A-10.1 et seq.), shall adopt, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), regulations necessary to implement the provisions of this act which are consistent with federal and State indoor air quality standards and standards governing the exposure of children to hazardous substances as they are adopted by the federal government.

402. Section 14 of P.L.1983, c.315 (C.34:5A-14) is amended to read as follows:

C.34:5A-14 Labeling of containers.

14. a. Every employer shall have until October 30, 1985 to take any action necessary to assure that every container at the employer's facility containing a hazardous substance shall bear a label indicating the chemical name and Chemical Abstracts Service number of the hazardous substance or the trade secret registry number assigned to the hazardous substance. The labels on all containers except pipelines and underground storage tanks shall be designed and affixed in such a manner to ensure that if there is a flood or other natural disaster when the container is transported or stored, the label shall remain in place and visible. Employers may label containers in a research and development laboratory by means of a code or number system, if the code or number system will enable an employee to readily make a cross-reference to a hazardous substance fact sheet which will pro-

vide the employee with the chemical name and Chemical Abstracts Service number of the hazardous substance contained in the container, or the trade secret registry number assigned to the hazardous substance. The code or number system shall be designed to allow the employee free and ready access at all times to the chemical name and Chemical Abstracts Service number of the hazardous substance in the container, shall be designed to allow the employee access to this information without the permission or assistance of management, and shall be available to the employee at close proximity to the employee's specific job location or locations. Employers shall be required to label pipelines only at the valve or valves located at the point at which a hazardous substance enters a facility's pipeline system, and at normally operated valves, outlets, vents, drains, and sample connections designed to allow the release of a hazardous substance from the pipeline.

b. Within two years of the effective date of this act, every employer shall take any action necessary to assure that every container at the employer's facility bears a label indicating the chemical name and Chemical Abstracts Service number of the substance in the container, except as provided in subsection d. of this section, or the trade secret registry number assigned to the substance. Employers may label containers in a research and development laboratory by means of a code or number system, if the code or number system will enable an employee to readily make a cross-reference to documentary material retained on file by the employer at the facility which will provide the employee with the chemical name and Chemical Abstracts Service number of the substance contained in the container, except as provided in subsection d. of this section, or the trade secret registry number assigned to the substance. The code or number system shall be designed to allow the employee free and ready access at all times to the chemical name and Chemical Abstracts Service number of the substance in the container, shall be designed to allow the employee access to this information without the permission or assistance of management, and shall be available to the employee at close proximity to the employee's specific job location or locations. If a container contains a mixture, an employer shall be required to insure that the label identify the chemical names and Chemical Abstracts Service numbers, except as provided in subsection d. of this section, or the trade secret registry numbers, of the five most predominant substances contained in the mixture. The provisions of this subsection shall not apply to any substance constituting less than 1% of a mixture unless the substance is present at the facility in an aggregate amount of 500 pounds or more. Employers shall be required to label pipelines only at the valve or valves located at the point at which a substance enters a facility's pipeline system, and at normally operated valves,

outlets, vents, drains, and sample connections designed to allow the release of a substance from the pipeline. One year after the effective date of this act the Department of Health shall establish criteria for containers which, because of the finished and durable characteristics of their contents, shall be exempt from the provisions of this subsection. These standards shall be consistent with the intent of this subsection to provide for the labeling of every container which may contain a substance which is potentially hazardous.

c. The labeling requirements of subsections a. and b. of this section shall not apply to containers labeled pursuant to the "Federal Insecticide, Fungicide, and Rodenticide Act," 61 Stat. 163 (7 U.S.C. s.121 et al.), except that the label for any such container except pipelines and underground storage tanks shall be designed and affixed in such a manner to ensure that if there is a flood or other natural disaster when the container is transported or stored, the label shall remain in place and visible. The Department of Health may, by rule and regulation, certify containers labeled pursuant to any other federal act as labeled in compliance with the provisions of this section.

d. One year after the effective date of this act the Department of Health shall adopt, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), a list of substances the containers of which may be labeled with the common names and Chemical Abstracts Service numbers of their contents. The department shall include on the list adopted pursuant to this subsection only substances which are widely recognized by their common names. An employer shall provide the chemical name of a substance in a container labeled pursuant to this subsection within five working days of the request therefor.

403. Section 21 of P.L.1983, c.315 (C.34:5A-21) is amended to read as follows:

C.34:5A-21 Joint procedures concerning revision of workplace or environmental hazardous substance list.

21. The Department of Health, the Department of Environmental Protection, and the Department of Labor and Workforce Development shall jointly establish a procedure for annually receiving information from the public and any other interested party, concerning any revision of the workplace hazardous substance list and any revision of the environmental hazardous substance list. This procedure shall include a mechanism for revising the workplace hazardous substance list and the environmental hazardous substance list. Any revision of the workplace hazardous substance list or environmental hazardous substance list shall be based on documented scien-

tific evidence. The Department of Health and the Department of Environmental Protection shall publicly announce any revisions of the workplace hazardous substance list or the environmental hazardous substance list, and any such additions or revisions shall be made pursuant to the provisions of the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.).

404. Section 26 of P.L.1983, c.315 (C.34:5A-26) is amended to read as follows:

C.34:5A-26 "Worker and Community Right to Know Fund."

26. a. There is established in the Department of the Treasury a nonlapsing, revolving fund to be known as the "Worker and Community Right To Know Fund." The "Worker and Community Right To Know Fund" shall be credited with all fees collected pursuant to paragraph (1) of subsection b. of this section and interest on moneys in the "Worker and Community Right To Know Fund" shall be credited to the "Worker and Community Right To Know Fund" and all moneys in the "Worker and Community Right To Know Fund" are appropriated for the purposes of the "Worker and Community Right To Know Fund", and no moneys shall be expended for those purposes without the specific appropriation thereof by the Legislature. The State Treasurer shall be the administrator of the "Worker and Community Right To Know Fund", and all disbursements from the "Worker and Community Right To Know Fund" shall be made by the State Treasurer upon the warrant of the Director of the Division of Budget and Accounting.

b. (1) The Department of Labor and Workforce Development shall annually assess each employer a fee of not less than \$75.00 nor more than an amount equal to \$4.00 per employee to provide for the implementation of the provisions of this act. All fees collected by the department pursuant to this paragraph shall be deposited in the "Worker and Community Right To Know Fund".

(2) The Department of Labor and Workforce Development shall annually assess each employer a fee of \$2.00 per employee for the implementation of P.L.1991, c.235 (C.13:1D-35 et seq.). All fees collected by the department pursuant to this paragraph shall be deposited in the "Pollution Prevention Fund" established pursuant to section 16 of P.L.1991, c.235 (C.13:1D-50), and shall be used only for the implementation of P.L.1991, c.235 (C.13:1D-35 et seq.).

c. The moneys in the "Worker and Community Right To Know Fund" shall be disbursed only for the following purposes:

(1) Expenses approved by the Director of the Division of Budget and Accounting and incurred by the Department of Health, the Department of

Environmental Protection, the Department of Labor and Workforce Development, the Department of the Treasury, and the county health departments in implementing the provisions of this act; and

(2) Repayment to the General Fund of any moneys appropriated by law in order to implement the provisions of this act.

d. The State Treasurer shall annually disburse the moneys in the "Worker and Community Right To Know Fund" for expenditures approved by the Director of the Division of Budget and Accounting pursuant to paragraph (1) of subsection c. of this section, but in no case in an amount to the several departments that is greater than the following percentages of the "Worker and Community Right To Know Fund" available in any one year: the Department of Health, 40%; the Department of Environmental Protection, 20%; the county health departments, 15%; the Department of Labor and Workforce Development, 15%; and the Department of the Treasury, 10%.

e. Beginning two years after the effective date of this act, the State Treasurer shall make an annual audit of the "Worker and Community Right To Know Fund" to determine the adequacy of moneys on deposit in the "Worker and Community Right To Know Fund" to support the implementation of the provisions of this act. If the State Treasurer, in consultation with the Department of Health, the Department of Environmental Protection, and the Department of Labor and Workforce Development makes a determination that the revenues in the "Worker and Community Right To Know Fund" are sufficient to warrant a reduction in the fees imposed pursuant to paragraph (1) of subsection b. of this section for the ensuing year, the State Treasurer may reduce the amount of the fees imposed during that year by an amount warranted by the balance in the "Worker and Community Right To Know Fund" at the time of the determination.

405. Section 10 of P.L.1984, c.173 (C.34:5A-41) is amended to read as follows:

C.34:5A-41 Violations; penalties.

10. Any person who knowingly hinders or delays the Commissioners of Labor and Workforce Development or Health or the authorized representative thereof, in the performance of the duty to enforce this act, or knowingly submits false or misleading information on any license or permit application required by this act, or fails to obtain licenses or permits required by the provisions of this act, or refuses to make these licenses or permits accessible to either commissioner, or the authorized representative thereof, or otherwise violates any provision of this act or any regulation adopted

under this act, shall, upon conviction, be guilty of a crime of the third degree and, notwithstanding the provisions of N.J.S.2C:43-3, shall be subject to a fine of not more than \$25,000 in addition to any other appropriate disposition authorized by subsection b. of N.J.S.2C:43-2.

406. Section 8 of P.L.1983, c.516 (C.34:6A-32) is amended to read as follows:

C.34:6A-32 Promulgation of regulations.

8. The commissioner shall, in consultation with the Commissioner of Health and the Commissioner of Community Affairs and with the advice of the advisory board, promulgate all regulations which the commissioner deems necessary for the proper administration and enforcement of this act. A variance may be granted if the commissioner determines that the applicant is in compliance with the requirements for a permanent variance as set forth in subsection c. of section 15 of this act. The variance shall not be deemed to be a variation approved pursuant to the "State Uniform Construction Code Act," P.L.1975, c.217 (C.52:27D-119 et seq.) or the "Uniform Fire Safety Act," P.L.1983, c.383 (C.52:27D-192 et al.) or any other building or fire safety standard or code.

Space leased by a public employer shall be subject to current health or safety rules and regulations. Any deficiency, including a deficiency resulting either from occupant use or deferred maintenance by the lessor, shall be subject to correction in accordance with the governing rules and regulations at the time that the deficiency is cited by the commissioner or the Commissioner of Health. However, a lease of any duration may not be entered into unless the leased property is in conformance with such rules and regulations as are in effect at the time the lease is executed.

No fire company, first aid, or rescue squad, whether paid, part-paid, or volunteer, shall be required to pay to the Department of Labor and Workforce Development or the Department of Health any registration or inspection fee imposed by rule or regulation with regard to the filling of air cylinders for respiratory equipment used by the fire company, first aid, or rescue squad.

407. Section 1 of P.L.1997, c.92 (C.39:3-27.90) is amended to read as follows:

C.39:3-27.90 Issuance of "Conquer Cancer" license plates; fees; distribution.

1. a. The Chief Administrator of the New Jersey Motor Vehicle Commission may issue for a motor vehicle owned or leased and registered in the State special license plates bearing, in addition to the registration number

and other markings or identification otherwise prescribed by law, the slogan "Conquer Cancer." These plates may include an emblem, to be designed by the Commissioner of Health and approved by the chief administrator, indicating support for, or an interest in, finding new methods of treating and preventing cancer.

b. Application for issuance of a "Conquer Cancer" license plate shall be made to the chief administrator on forms and in a manner as may be prescribed by the chief administrator. The chief administrator shall collect for each set of plates issued an application fee of \$50, and an annual renewal fee of \$10, in addition to the fees otherwise prescribed by law for the registration of motor vehicles.

c. Monies collected from all fees for "Conquer Cancer" license plates shall be deposited in the Cancer Research Fund, established in the Department of Health pursuant to section 5 of P.L.1982, c.40 (C.54:40A-37.1). Any monetary donation made available to the State to support the provisions of P.L.1997, c.92 (C.39:3-27.90 et seq.) shall be deposited in the Cancer Research Fund for use as set forth in this section. Interest or other income earned on monies deposited under this act into the Cancer Research Fund shall be credited to the fund for use as set forth in this section.

Funds shall be utilized by the New Jersey State Commission on Cancer Research: (1) first to reimburse the commission for all costs, including those costs associated with computer programming changes, incurred in producing, issuing, renewing, and publicizing the availability of "Conquer Cancer" license plates; (2) to reimburse the Department of Health for the design and printing of notices, posters and signs to be utilized by the commission; and (3) for approved research projects as defined in section 3 of P.L.1983, c.6 (C.52:9U-3).

d. The chief administrator shall annually certify to the Commissioner of Health the average cost per license plate incurred in the immediately preceding year by the commission in producing, issuing, renewing, and publicizing the availability of "Conquer Cancer" license plates. The commissioner shall annually report the Department of Health's costs and the division's costs to the Office of Management and Budget.

e. The chief administrator shall notify eligible motorists of the opportunity to obtain "Conquer Cancer" license plates by including a notice with all motor vehicle registration renewals, and by posting appropriate posters or signs in all commission facilities and offices, as may be provided by the Department of Health. The notices, posters, and signs shall be designed by the Commissioner of Health after consulting with the New Jersey State Commission on Cancer Research. The designs shall be subject to the ap-

proval of the chief administrator. The Department of Health shall supply the commission with the notices, posters, and signs to be circulated or posted by the commission.

f. The Commissioner of Health, the New Jersey State Commission on Cancer Research, and the chief administrator shall develop and enter into an interagency memorandum of agreement setting forth the procedures to be followed by the Department of Health, the commission and the Motor Vehicle Commission in carrying out their respective responsibilities under this act.

g. In the event that the average cost per license plate, as certified by the chief administrator and approved by the Joint Budget Oversight Committee, or its successor, is greater than the \$50 application fee established in subsection b. of this section in two consecutive fiscal years, the chief administrator may discontinue the issuance of the "Conquer Cancer" license plate.

408. Section 6 of P.L.1970, c.248 (C.40:23-6.43) is amended to read as follows:

C.40:23-6.43 Appropriations and payments of State aid.

6. There shall be appropriated and paid annually to each county office on aging, subject to the approval of the Commissioner of Human Services, an amount equal to one-half of the amount of annual expense of the county office on aging; provided, however, that no county shall receive more than \$20,000 in State aid hereunder in any calendar year. Payments shall be made by the State Treasurer, upon certificate of the Commissioner of Human Services and warrant of the Director of the Division of Budget and Accounting, on or before December 31 of each calendar year. This payment shall constitute reimbursement to the county for the State aid portion of the annual expense of each county office on aging during the year in which the payment is made.

409. Section 12 of P.L.1989, c.300 (C.45:9-19.12) is amended to read as follows:

C.45:9-19.12 Issuance of permits, registration to practitioners in training.

12. The State Board of Medical Examiners shall, by regulation, provide for the issuance of permits to, or registration of, persons engaging in the practice of medicine or surgery or podiatric medicine while in training, and establish the scope of permissible practice by these persons within the context of an accredited graduate medical education program conducted at a

hospital licensed by the Department of Health. A permit holder shall be permitted to engage in practice outside the context of a graduate medical education program for additional remuneration only if that practice is:

- a. Approved by the director of the graduate medical education program in which the permit holder is participating; and
- b. With respect to any practice at or through a health care facility licensed by the Department of Health, supervised by a plenary licensee who shall either remain on the premises of the health care facility or be available through electronic communications; or
- c. With respect to any practice outside of a health care facility licensed by the Department of Health, supervised by a plenary licensee who shall remain on the premises.

410. Section 2 of P.L.1989, c.19 (C.45:9-22.5) is amended to read as follows:

C.45:9-22.5 Referral of patient by practitioner regulated.

2. a. A practitioner shall not refer a patient or direct an employee of the practitioner to refer a patient to a health care service in which the practitioner, or the practitioner's immediate family, or the practitioner in combination with the practitioner's immediate family has a significant beneficial interest; except that, in the case of a practitioner, a practitioner's immediate family, or a practitioner in combination with the practitioner's immediate family who had the significant beneficial interest prior to the effective date of P.L.1991, c.187 (C.26:2H-18.24 et al.), and in the case of a significant beneficial interest in a health care service that provides lithotripsy or radiation therapy pursuant to an oncological protocol that was held prior to the effective date of this section of P.L.2009, c.24, the practitioner may continue to refer a patient or direct an employee to do so if that practitioner discloses the significant beneficial interest to the patient.

b. If a practitioner is permitted to refer a patient to a health care service pursuant to this section, the practitioner shall provide the patient with a written disclosure form, prepared pursuant to section 3 of P.L.1989, c.19 (C.45:9-22.6), and post a copy of this disclosure form in a conspicuous public place in the practitioner's office.

c. The restrictions on referral of patients established in this section shall not apply to:

- (1) medical treatment or a procedure that is provided at the practitioner's medical office and for which a bill is issued directly in the name of the practitioner or the practitioner's medical office;

(2) renal dialysis; and

(3) ambulatory surgery or procedures requiring anesthesia performed at a surgical practice registered with the Department of Health pursuant to subsection g. of section 12 of P.L.1971, c.136 (C.26:2H-12) or at an ambulatory care facility licensed by the Department of Health to perform surgical and related services, if the following conditions are met:

(a) the practitioner who provided the referral personally performs the procedure;

(b) the practitioner's remuneration as an owner of or investor in the practice or facility is directly proportional to the practitioner's ownership interest and not to the volume of patients the practitioner refers to the practice or facility;

(c) all clinically-related decisions at a facility owned in part by non-practitioners are made by practitioners and are in the best interests of the patient; and

(d) disclosure of the referring practitioner's significant beneficial interest in the practice or facility is made to the patient in writing, at or prior to the time that the referral is made, consistent with the provisions of section 3 of P.L.1989, c.19 (C.45:9-22.6).

411. Section 4 of P.L.2009, c.24 (C.45:9-22.5a) is amended to read as follows:

C.45:9-22.5a Certain referrals for ambulatory surgery procedure involving anesthesia.

4. a. A referral for ambulatory surgery or a procedure requiring anesthesia made prior to the effective date of this section of P.L.2009, c.24 by a practitioner to a surgical practice or ambulatory care facility licensed by the Department of Health to perform surgical and related services shall be deemed to comply with the provisions of section 2 of P.L.1989, c.19 (C.45:9-22.5) if the practitioner personally performed the procedure that is the subject of the referral.

b. As used in this section, "surgical practice" means a structure or suite of rooms that has the following characteristics:

(1) has no more than one room dedicated for use as an operating room which is specifically equipped to perform surgery, and is designed and constructed to accommodate invasive diagnostic and surgical procedures;

(2) has one or more post-anesthesia care units or a dedicated recovery area where the patient may be closely monitored and observed until discharged; and

(3) is established by a physician, physician professional association surgical practice, or other professional practice form specified by the State Board of Medical Examiners pursuant to N.J.A.C.13:35-6.16(f) solely for the physician's, association's or other professional entity's private medical practice.

"Surgical practice" includes an unlicensed entity that is certified by the Centers for Medicare and Medicaid Services as an ambulatory surgery center provider.

412. Section 4 of P.L.2003, c.281 (C.48:2-29.16a) is amended to read as follows:

C.48:2-29.16a "Lifeline Credit Program," notification as to error in estimated annual income.

4. a. Notwithstanding the provisions of any other law to the contrary, a recipient of benefits under the "Lifeline Credit Program," established pursuant to P.L.1979, c.197 (C.48:2-29.15 et seq.), shall notify the Department of Human Services if the recipient unintentionally errs in estimating annual income to determine eligibility for the program due to an unanticipated payment which would render the recipient ineligible for the program. Notification to the department shall be made in the time and manner prescribed by the department office.

b. If the department determines that the payment was unanticipated, the recipient shall reimburse the program for only those benefits that were paid by the program after the recipient received the unanticipated payment.

c. If the department determines that the payment was not unanticipated, the recipient shall reimburse the program for all benefits that were paid by the program in the calendar year in which the payment was received.

d. Within 30 days of receipt of a determination by the department that the payment was not unanticipated, a recipient may request a hearing, which shall be conducted pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.).

e. Nothing in this section shall preclude a recipient from reapplying for benefits in the calendar year following the year in which the recipient notified the department pursuant to subsection a. of this section.

413. Section 5 of P.L.2003, c.281 (C.48:2-29.32a) is amended to read as follows:

C.48:2-29.32a "Tenants' Lifeline Assistance Program," notification as to error in estimated annual income.

5. a. Notwithstanding the provisions of any other law to the contrary, a recipient of benefits under the "Tenants' Lifeline Assistance Program," established pursuant to P.L.1981, c.210 (C.48:2-29.30 et seq.), shall notify the Department of Human Services if the recipient unintentionally errs in estimating annual income to determine eligibility for the program due to an unanticipated payment which would render the recipient ineligible for the program. Notification to the department shall be made in the time and manner prescribed by the department.

b. If the department determines that the payment was unanticipated, the recipient shall reimburse the program for only those benefits that were paid by the program after the recipient received the unanticipated payment.

c. If the department determines that the payment was not unanticipated, the recipient shall reimburse the program for all benefits that were paid by the program in the calendar year in which the payment was received.

d. Within 30 days of receipt of a determination by the department that the payment was not unanticipated, a recipient may request a hearing, which shall be conducted pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.).

e. Nothing in this section shall preclude a recipient from reapplying for benefits in the calendar year following the year in which the recipient notified the department pursuant to subsection a. of this section.

414. Section 1 of P.L.1987, c.133 (C.52:27D-29.17) is amended to read as follows:

C.52:27D-29.17 Definitions.

1. a. "Commissioner" means the Commissioner of Human Services.

b. "Department" means the Department of Human Services.

c. "Eligible participant" means a resident of this State who is 60 years of age or older and homebound by reason of illness, incapacitating disability, or is otherwise isolated.

d. "Home delivered nutrition services" means home delivered meals as defined by the "Older Americans Act of 1965," Pub.L. 89-73 (42 U.S.C. s. 3001 et seq.).

e. "Program" means the Home Delivered Meals Expansion Program in the Division of Aging Services, in the Department of Human Services.

415. Section 2 of P.L.1987, c.133 (C.52:27D-29.18) is amended to read as follows:

C.52:27D-29.18 Home Delivered Meals Expansion Program.

2. The commissioner shall establish a Home Delivered Meals Expansion Program in the Division of Aging Services, in the Department of Human Services, to provide home delivered nutrition services to eligible participants on weekends and holidays.

416. Section 6 of P.L.1987, c.133 (C.52:27D-29.22) is amended to read as follows:

C.52:27D-29.22 Allocation of appropriation.

6. a. There is appropriated \$1,000,000 from the Casino Revenue Fund to the Department of Human Services to effectuate the purposes of this act.

b. The department shall allocate not less than 95% of the funds appropriated for the purposes of this act to the county offices on aging, and these funds shall be disbursed to the county offices on aging according to the formula used to disburse funds for the home delivered nutrition services provided under Title III of the "Older Americans Act of 1965," Pub.L. 89-73 (42 U.S.C. s. 3001 et seq.).

c. The county shall match the State funds allocated to a county office on aging for this program with an amount equal to 20% of the State funds. The county share may be cash or in kind.

417. Section 2 of P.L.1993, c.4 (C.52:27D-29.33) is amended to read as follows:

C.52:27D-29.33 Definitions.

2. As used in this act:

"County office on aging" means a county office on aging which is also designated as an area agency on aging for funding under the "Older Americans Act of 1965," Pub.L.89-73 (42 U.S.C. s.3001 et seq.).

"Director" means the Director of the Division of Aging Services in the Department of Human Services.

"Senior citizen" means a person 60 years of age or older.

418. Section 3 of P.L.1993, c.4 (C.52:27D-29.34) is amended to read as follows:

C.52:27D-29.34 Senior Health Insurance Counseling Program.

3. a. There is established in the Division of Aging Services in the Department of Human Services a Senior Health Insurance Counseling Pro-

gram to provide health insurance information and assistance by trained volunteer counselors to senior citizens.

b. The Director of the Division of Aging Services shall establish the program in all counties in the State through the county offices on aging or other appropriate agencies designated by the director.

419. Section 6 of P.L.1993, c.4 (C.52:27D-29.36) is amended to read as follows:

C.52:27D-29.36 Legal representation program to assist Medicare beneficiaries.

6. The Director of the Division of Aging Services in the Department of Human Services shall establish a legal representation program to assist Medicare beneficiaries under Title XVIII of the Social Security Act who are 65 years of age or older, or disabled, in appeals of unfairly denied Medicare coverage. The services provided under this program shall include, but not be limited to, the following: outreach to Medicare beneficiaries, the development and dissemination of educational materials pertaining to the Medicare program and the claims appeal process, the development and dissemination of materials for Medicare beneficiaries to submit their own appeals, and the offer of direct legal representation to appeal unfairly denied coverage under Part A and Part B of the Medicare program. Such legal representation may include, but not be limited to, appeals within the administrative appeals structure and appeals to the United States District Court.

420. Section 40 of P.L.1966, c.293 (C.52:27D-40) is amended to read as follows:

C.52:27D-40 Definitions.

40. Whenever the term "Division of Local Government" occurs or any reference is made thereto in any law, contract or document, the same shall be deemed to mean or refer to the Division of Local Finance in the Department of Community Affairs established hereunder.

Whenever the term "Director of the Division of Local Government" occurs or any reference is made thereto in any law, contract or document, the same shall be deemed to mean or refer to the Director of the Division of Local Finance in the Department of Community Affairs established hereunder.

Whenever the term "Local Government Board" occurs or any reference is made thereto in any law, contract or document, the same shall be deemed to mean or refer to the Local Finance Board of the Division of Local Finance in the Department of Community Affairs established hereunder.

Whenever the term "public housing and development authority" occurs or any reference is made thereto in any law, contract or document, the same shall be deemed to mean or refer to the public housing and development authority in the Department of Community Affairs established hereunder.

Whenever the term "State Housing Council" occurs or any reference is made thereto in any law, contract or document, the same shall be deemed to mean or refer to the State Housing Council in the Department of Community Affairs established hereunder.

Whenever the term "Bureau of Tenement House Supervision" occurs or any reference is made thereto in any law, contract or document, the same shall be deemed to mean or refer to the Bureau of Housing Inspection of the Division of Housing and Urban Renewal in the Department of Community Affairs established hereunder.

Whenever the term "Board of Tenement House Supervision" occurs or any reference is made thereto in any law, contract or document, the same shall be deemed to mean or refer to the Board of Housing Inspection in the Division of Housing and Urban Renewal of the Department of Community Affairs established hereunder.

Whenever the term "office of supervisor of hotel fire safety" occurs or any reference is made thereto in any law, contract or document, the same shall be deemed to mean or refer to the office of supervisor of hotel fire safety in the Bureau of Housing Inspection of the Division of Housing and Urban Renewal in the Department of Community Affairs established hereunder.

Whenever the term "Division of State and Regional Planning" occurs or any reference is made thereto in any law, contract or document, the same shall be deemed to mean or refer to the Division of State and Regional Planning in the Department of Community Affairs established hereunder.

Whenever the term "Director of the Division of State and Regional Planning" occurs or any reference is made thereto in any law, contract or document, the same shall be deemed to mean or refer to the Director of the Division of State and Regional Planning in the Department of Community Affairs established hereunder.

Whenever the term "Division on Aging" occurs or any reference is made thereto in any law, contract, or document, the same shall be deemed to mean or refer to the Division of Aging Services in the Department of Human Services.

Whenever the term "Director of the Division on Aging" occurs or any reference is made thereto in any law, contract, or document, the same shall

be deemed to mean or refer to the Director of the Division of Aging Services in the Department of Human Services.

Whenever the term "New Jersey State Commission on Aging" occurs or any reference is made thereto in any law, contract, or document, the same shall be deemed to mean or refer to the New Jersey State Commission on Aging in the Division of Aging Services in the Department of Human Services.

Whenever the terms "Youth Division" or "Division of Youth" occur or any reference is made thereto in any law, contract or document, the same shall be deemed to mean or refer to the Division of Youth in the Department of Community Affairs established hereunder.

Whenever the terms "Director of the Youth Division" or "Director of the Division of Youth" occur or any reference is made thereto in any law, contract or document, the same shall be deemed to mean or refer to the Director of the Division of Youth in the Department of Community Affairs established hereunder.

Whenever the term "New Jersey State Youth Commission" occurs or any reference is made thereto in any law, contract or document, the same shall be deemed to mean or refer to the New Jersey State Youth Commission of the Division of Youth in the Department of Community Affairs established hereunder.

Whenever the term "New Jersey Office of Economic Opportunity" occurs or any reference is made thereto in any law, contract or document, the same shall be deemed to mean or refer to the New Jersey Office of Economic Opportunity in the Department of Community Affairs established hereunder.

421. Section 2 of P.L.2007, c.1 (C.52:27D-130.5) is amended to read as follows:

C.52:27D-130.5 Issuance of construction permit for child care, educational center for certain locations; certification required; remediation.

2. a. (1) No construction permit shall be issued pursuant to section 12 of P.L.1975, c.217 (C.52:27D-130) for the reconstruction, alteration, conversion, or repair of any building or structure to be used for a child care center licensed pursuant to the provisions of P.L.1983, c.492 (C.30:5B-1 et seq.), or for educational purposes, if that building or structure was previously used for industrial, storage, or high hazard purposes, as a nail salon, dry cleaning facility, or gasoline station, or is on a contaminated site, on a site on which there is suspected contamination, or on an industrial site that is subject to the provisions of the "Industrial Site Recovery Act," P.L.1983,

c.330 (C.13:1K-6 et al.), except upon the submission of the certification issued by the Department of Health pursuant to section 1 of P.L.2007, c.1 (C.52:27D-130.4) to the construction official by the applicant, that the building or structure has been evaluated and assessed for contaminants, and that the building or structure is safe for use as a child care center licensed pursuant to the provisions of P.L.1983, c.492, or for educational purposes.

(2) Notwithstanding the provisions of paragraph (1) of this subsection to the contrary, a construction permit may be issued for the construction or alteration of any building or structure to be used as a child care center licensed pursuant to the provisions of P.L.1983, c.492, or for educational purposes, if the construction permit is necessary to perform work in the building or structure in order to comply with the rules and regulations adopted pursuant to subsection a. of section 1 of P.L.2007, c.1 (C.52:27D-130.4) and obtain the certification issued by the Department of Health pursuant to subsection c. of section 1 of P.L.2007, c.1 (C.52:27D-130.4).

A construction permit issued pursuant to this paragraph shall be limited to the construction or alterations necessary to comply with the rules and regulations adopted pursuant to subsection a. of section 1 of P.L.2007, c.1 (C.52:27D-130.4).

(3) The appropriate enforcing agency shall not grant a certificate of occupancy for any building or structure to be used as a child care center licensed pursuant to the provisions of P.L.1983, c.492, or for educational purposes, that received a construction permit pursuant to paragraph (2) of this subsection, except upon the submission of the certification issued by the Department of Health pursuant to subsection c. of section 1 of P.L.2007, c.1 (C.52:27D-130.4) to the construction official by the applicant, that the building or structure has been evaluated and assessed for contaminants, and that the building or structure is safe for use as a child care center licensed pursuant to the provisions of P.L.1983, c.492, or for educational purposes.

b. (1) No construction permit shall be issued for the construction or alteration of any building or structure to be used as a child care center licensed pursuant to the provisions of P.L.1983, c.492, or for educational purposes, on a site that was previously used for industrial, storage, or high hazard purposes, as a nail salon, dry cleaning facility, or gasoline station, or on a contaminated site, on a site on which there is suspected contamination, or on an industrial site that is subject to the provisions of the "Industrial Site Recovery Act," P.L.1983, c.330 (C.13:1K-6 et al.), except after submission by the applicant to the construction official of documentation sufficient to establish that the Department of Environmental Protection has approved a remedial action workplan for the entire site or that the site has

been remediated consistent with the remediation standards and other remediation requirements established pursuant to section 35 of P.L.1993, c.139 (C.58:10B-12) and a no further action letter has been issued by the Department of Environmental Protection for the entire site.

(2) Notwithstanding the provisions of paragraph (1) of this subsection to the contrary, a construction permit may be issued for the construction or alteration of any building or structure to be used as a child care center licensed pursuant to the provisions of P.L.1983, c.492, or for educational purposes, on a site that was previously used for industrial, storage, or high hazard purposes, as a nail salon, dry cleaning facility, or gasoline station, or on a contaminated site, on a site on which there is suspected contamination, or on an industrial site that is subject to the provisions of the "Industrial Site Recovery Act," P.L.1983, c.330 (C.13:1K-6 et al.), if the construction permit is necessary to remediate the site consistent with the remediation standards and other remediation requirements established pursuant to section 35 of P.L.1993, c.139 (C.58:10B-12) in order to obtain a no further action letter from the Department of Environmental Protection.

A construction permit issued pursuant to this paragraph shall be limited to the construction or alterations necessary to develop a remedial action workplan to be submitted to the Department of Environmental Protection for approval or to remediate the site consistent with the remediation standards and other remediation requirements established pursuant to section 35 of P.L.1993, c.139 (C.58:10B-12) and receive a no further action letter from the Department of Environmental Protection.

(3) The appropriate enforcing agency shall not grant a certificate of occupancy for any building or structure to be used as a child care center licensed pursuant to the provisions of P.L.1983, c.492, or for educational purposes, that received a construction permit pursuant to paragraph (2) of this subsection, except after submission by the applicant to the construction official of documentation sufficient to establish that the site has been remediated consistent with the remediation standards and other remediation requirements established pursuant to section 35 of P.L.1993, c.139 (C.58:10B-12) and a no further action letter has been issued by the Department of Environmental Protection for the entire site.

c. As used in this section: "contaminated site" means any real property on which there is contamination; "contamination," "remediation" or "remediate," and "no further action letter" shall have the same meanings as provided in section 23 of P.L.1993, c.139 (C.58:10B-1); and "educational purposes" means for the purposes of a private school or public school as

defined in N.J.S.18A:1-1, or a charter school as defined pursuant to P.L.1995, c.426 (C.18A:36A-1 et seq.).

422. Section 1 of P.L.2011, c.125 (C.52:27D-191.1) is amended to read as follows:

C.52:27D-191.1 Bill of rights for recipients of Congregate Housing Services Program.

1. a. The Department of Human Services shall ensure that a person receiving services under the Congregate Housing Services Program including, but not limited to, meal preparation, housekeeping, shopping, laundry, linens change, companionship, and personal care, receives those services in a manner that promotes the dignity of and shows respect for the person.

b. A Congregate Housing Services Program shall make information related to its services available to the manager of a subsidized housing facility that has contracted with the State to provide a Congregate Housing Services Program. The manager shall be responsible for the distribution and dissemination of the information to its residents and shall include in that information a statement that the services provided by the program shall be provided to:

- (1) help meet the needs of a resident;
 - (2) foster the independence and individuality of a resident;
 - (3) treat a resident with respect, courtesy, consideration, and dignity;
- and
- (4) assure a resident the right to make choices with respect to services and lifestyle.

c. A Congregate Housing Services Program shall:

(1) advise a resident receiving congregate housing services, in writing, of the availability of information from the Division of Aging Services in the Department of Human Services about issues that may be of concern to a resident; and

(2) make available, upon request, the qualifications of a counselor or other professional who is providing services to residents under the Congregate Housing Services Program.

423. Section 28 of P.L.1986, c.103 (C.52:27D-357) is amended to read as follows:

C.52:27D-357 Continuing Care Advisory Council.

28. a. There is created a Continuing Care Advisory Council which consists of 13 members as follows: the Commissioners of Human Services,

Health, and Banking and Insurance, or their designees, who shall serve ex officio and shall be non-voting members; 10 public members appointed by the Governor, with the advice and consent of the Senate, who are residents of the State and two of whom are administrators of continuing care facilities in this State, one of whom is a representative of the business community and knowledgeable in the area of management, one of whom is a certified public accountant, one of whom is an attorney licensed to practice in this State, three of whom are residents of continuing care retirement communities in this State who are recommended by the Organization of Residents Associations of New Jersey, one of whom is a trustee or director of a continuing care retirement community in this State and one of whom is a representative of the New Jersey Association of Non-Profit Homes for the Aging.

b. The term of office for each public member is three years, or until the member's successor has been appointed; except that of the public members first appointed, two shall be appointed for a term of one year, two for a term of two years and three for a term of three years.

A vacancy in the membership of the council shall be filled in the same manner as the original appointment, but for the unexpired term. A member of the council is eligible for reappointment.

The members of the council shall serve without compensation, but the council shall reimburse the members for the reasonable expenses incurred in the performance of their duties.

c. The council shall hold an organizational meeting within 30 days after the appointment of its members. The members of the council shall elect from among them a chairperson, who shall be the chief executive officer of the council, and the members shall elect a secretary, who need not be a member of the council.

d. The council shall meet at least four times a year but may meet more frequently at the discretion of the chairperson or the commissioner.

e. The council may call to its assistance and avail itself of the services and assistance of any officials and employees of the Department of Community Affairs or other State agency and political subdivisions and their departments, boards, bureaus, commissions, and agencies as it requires and as is available to it for this purpose and may expend any funds that are appropriated or otherwise made available to it pursuant to this act.

f. The council shall:

(1) Advise and provide information to the commissioner on matters pertaining to the operation and regulation of continuing care retirement facilities, upon request of the commissioner;

(2) Review and comment upon, as appropriate, any proposed rules and regulations and legislation pertaining to continuing care retirement facilities;

(3) Make recommendations to the commissioner about any needed changes in rules and regulations and State and federal laws pertaining to continuing care retirement facilities; and

(4) Assist in the rehabilitation of a continuing care retirement facility, upon request of the commissioner.

g. The commissioner shall report annually to the Governor and the Legislature, the commissioner's and the council's findings and recommendations concerning continuing care retirement communities and the implementation of this act.

424. Section 2 of P.L.1993, c.249 (C.52:27D-407) is amended to read as follows:

C.52:27D-407 Definitions.

2. As used in this act:

"Abuse" means the willful infliction of physical pain, injury or mental anguish, unreasonable confinement, or the willful deprivation of services which are necessary to maintain a person's physical and mental health.

"Caretaker" means a person who has assumed the responsibility for the care of a vulnerable adult as a result of family relationship or who has assumed responsibility for the care of a vulnerable adult voluntarily, by contract, or by order of a court of competent jurisdiction, whether or not they reside together.

"Commissioner" means the Commissioner of Human Services.

"Community setting" means a private residence or any noninstitutional setting in which a person may reside alone or with others, but shall not include residential health care facilities, rooming houses or boarding homes or any other facility or living arrangement subject to licensure by, operated by, or under contract with, a State department or agency.

"County adult protective services provider" means a county Board of Social Services or other public or nonprofit agency with experience as a New Jersey provider of protective services for adults, designated by the county and approved by the commissioner. The county adult protective services provider receives reports made pursuant to this act, maintains pertinent records and provides, arranges, or recommends protective services.

"County director" means the director of a county adult protective services provider.

"Department" means the Department of Human Services.

"Emergency medical technician" means a person trained in basic life support services as defined in section 1 of P.L.1985, c.351 (C.26:2K-21) and who is certified by the Department of Health to provide that level of care.

"Exploitation" means the act or process of illegally or improperly using a person or his resources for another person's profit or advantage.

"Firefighter" means a paid or volunteer firefighter.

"Health care professional" means a health care professional who is licensed or otherwise authorized, pursuant to Title 45 or Title 52 of the Revised Statutes, to practice a health care profession that is regulated by one of the following boards or by the Director of the Division of Consumer Affairs: the State Board of Medical Examiners, the New Jersey Board of Nursing, the New Jersey State Board of Dentistry, the New Jersey State Board of Optometrists, the New Jersey State Board of Pharmacy, the State Board of Chiropractic Examiners, the Acupuncture Examining Board, the State Board of Physical Therapy, the State Board of Respiratory Care, the Orthotics and Prosthetics Board of Examiners, the State Board of Psychological Examiners, the State Board of Social Work Examiners, the State Board of Examiners of Ophthalmic Dispensers and Ophthalmic Technicians, the Audiology and Speech-Language Pathology Advisory Committee, the State Board of Marriage and Family Therapy Examiners, the Occupational Therapy Advisory Council, the Certified Psychoanalysts Advisory Committee, and the State Board of Polysomnography. "Health care professional" also means a nurse aide or personal care assistant who is certified by the Department of Health.

"Neglect" means an act or failure to act by a vulnerable adult or his caretaker which results in the inadequate provision of care or services necessary to maintain the physical and mental health of the vulnerable adult, and which places the vulnerable adult in a situation which can result in serious injury or which is life-threatening.

"Protective services" means voluntary or court-ordered social, legal, financial, medical or psychiatric services necessary to safeguard a vulnerable adult's rights and resources, and to protect a vulnerable adult from abuse, neglect or exploitation. Protective services include, but are not limited to: evaluating the need for services, providing or arranging for appropriate services, obtaining financial benefits to which a person is entitled, and arranging for guardianship and other legal actions.

"Vulnerable adult" means a person 18 years of age or older who resides in a community setting and who, because of a physical or mental illness, disability or deficiency, lacks sufficient understanding or capacity to make, communicate, or carry out decisions concerning his well-being and is the

subject of abuse, neglect or exploitation. A person shall not be deemed to be the subject of abuse, neglect or exploitation or in need of protective services for the sole reason that the person is being furnished nonmedical remedial treatment by spiritual means through prayer alone or in accordance with a recognized religious method of healing in lieu of medical treatment, and in accordance with the tenets and practices of the person's established religious tradition.

425. Section 21 of P.L.1993, c.249 (C.52:27D-426) is amended to read as follows:

C.52:27D-426 Transfer of funding, programs, positions.

21. a. All funding, programs, and positions created to provide adult protective services are continued and shall be transferred to the Department of Human Services. The Department of Community Affairs shall provide the Department of Human Services with such information as the Department of Human Services requires to fulfill its federal funding and reporting requirements.

b. The transfers directed by this act shall be made in accordance with the "State Agency Transfer Act," P.L.1971, c.375 (C.52:14D-1 et seq.).

426. Section 15 of P.L.1993, c.288 (C.52:27D-428) is amended to read as follows:

C.52:27D-428 Certification of business firms performing lead evaluation, abatement work.

15. a. A business firm shall neither directly nor indirectly perform lead evaluation or abatement work without first obtaining certification from the department. Certification may be issued to perform lead evaluation or abatement work if the business firm employs or will employ sufficient numbers and types of personnel certified by the Department of Health pursuant to section 3 of P.L.1993, c.288 (C.26:2Q-3) to perform lead abatement work and meets all other requirements that the commissioner may establish pursuant to section 23 of P.L.1993, c.288 (C.52:27D-436). The certification shall be in writing, shall contain an expiration date, and shall be signed by the commissioner.

b. A person or business firm shall not undertake a project involving lead abatement work without first obtaining a construction permit for that project pursuant to section 12 of P.L.1975, c.217 (C.52:27D-130). No permit shall be issued for lead abatement work, except to:

(1) an owner undertaking work on his own premises using his own employees, if those employees are certified by the Department of Health pursuant to section 3 of P.L.1993, c.288 (C.26:2Q-3);

(2) a homeowner proposing to perform lead abatement work himself on a dwelling unit that he owns and occupies as a primary place of residence; or

(3) a business firm certified pursuant to this section to perform such work.

The issuance of a construction permit to an individual homeowner proposing to perform lead abatement work on a dwelling unit that he owns and occupies as a primary place of residence shall be accompanied by written information developed by the department explaining the dangers of improper lead abatement, procedures for conducting safe lead abatement, and the availability of certified lead abatement contractors, or of any available training for homeowners.

c. Nothing in this section shall be construed to restrict or otherwise affect the right of any business firm to engage in painting, woodworking, structural renovation, or other indoor or outdoor contracting services that may result in the disturbance of paint, or to engage in lead safe maintenance work or lead hazard control work, but a business firm shall not hold itself out as certified by the department or otherwise represent that it has specialized competency to perform lead evaluation or abatement work unless it has been certified or otherwise specifically authorized pursuant to this section.

A business firm that seeks to engage in lead safe maintenance work or lead hazard control work shall do so using only persons who, prior to engaging in such work, shall have completed such training courses as may be prescribed by the commissioner and provided by a training provider accredited by the Commissioner of Health.

A business firm that utilizes interim controls to reduce the risk of lead-based paint exposure shall utilize only those methods approved by the appropriate federal agencies, including specialized cleaning, repairs, maintenance, painting, temporary containment, ongoing monitoring of lead-based paint hazards or potential hazards, as may be set forth under 42 U.S.C.s.4851b, or those methods set forth in guidelines established by the commissioner, but shall not be required to be certified pursuant to this section unless performing lead abatement.

427. Section 24 of P.L.2003, c.311 (C.52:27D-437.15) is amended to read as follows:

C.52:27D-437.15 Modification of regulations concerning lead hazards.

24. The Commissioner of Banking and Insurance and the Commissioner of Health shall consult with the Commissioner of Community Affairs and shall modify all regulations concerning lead hazards in accordance with the provisions of P.L.2003, c.311 (C.52:27D-437.1 et al.), to recognize lead hazard control work as an authorized alternative method to lead abatement in control of lead hazards.

428. Section 4 of P.L.1985, c.298 (C.52:27G-23) is amended to read as follows:

C.52:27G-23 Office of the Public Guardian for Elderly Adults.

4. There is created in the Executive Branch of the State Government the Office of the Public Guardian for Elderly Adults. For the purpose of complying with the provisions of Article V, Section IV, paragraph 1 of the New Jersey Constitution, the Office of the Public Guardian for Elderly Adults is allocated to the Department of Human Services, but notwithstanding this allocation, the office shall be independent of any supervision or control by the department or any board or officer thereof.

429. Section 15 of P.L.2005, c.37 (C.52:27G-42) is amended to read as follows:

C.52:27G-42 Registered Professional Guardian Fund.

15. a. There is established in the Department of Human Services a special non-lapsing fund to be known as the Registered Professional Guardian Fund, which shall be a dedicated fund to serve as a depository for monies collected from the estate of an incapacitated adult pursuant to this section. The fund shall be administered by the Office of the Public Guardian for Elderly Adults, and all interest on monies in the fund shall be credited to the fund. The monies in the fund shall be made available to the Office of the Public Guardian for Elderly Adults to be used exclusively for the implementation of this act.

b. Sixty days after receiving plenary letters of guardianship or letters of guardianship of property, a guardian appointed by the Superior Court of New Jersey, with the exception of the appointment of the public guardian pursuant to P.L.1985, c.298 (C.52:27G-20 et seq.), a guardian for a veteran pursuant to N.J.S.3B:13-1 et seq. and guardianship services provided by the Bureau of Guardianship Services in the Division of Developmental Disabilities in the Department of Human Services pursuant to P.L.1965, c.59

(C.30:4-165.1 et seq.), shall pay out of the estate of the incapacitated adult a fee of \$150 to the Office of the Public Guardian for Elderly Adults for deposit into the fund, except that no such charge shall be made to an incapacitated adult's estate for an incapacitated adult whose income is less than 150% of the federal poverty level and whose assets are less than \$50,000.

c. If the guardian seeks an exemption from the fee based on the ward's income or assets, as set forth in subsection b. of this section, the guardian shall make an application to the Office of the Public Guardian for Elderly Adults on forms adopted by that office.

d. If a guardian who is obligated to pay an assessment imposed pursuant to subsection b. of this section fails to pay the assessment, upon application by the Office of the Public Guardian for Elderly Adults, the court shall afford the guardian notice and an opportunity to be heard on the issue of default. Failure to make the assessed payment when due shall be considered a default. The standard of proof shall be by a preponderance of the evidence, and the burden of establishing good cause for a default shall be on the guardian who has defaulted. If the court finds that the guardian has defaulted without good cause, the court may:

- (1) compel the guardian of the estate to account and ascertain the financial condition of the incapacitated adult's estate;
- (2) remove the guardian;
- (3) enter judgment against the guardian of the estate for the amount of the assessment; or
- (4) take such other action as may be permitted by law.

430. Section 16 of P.L.2005, c.37 (C.52:27G-43) is amended to read as follows:

C.52:27G-43 Rules, regulations, Rules of Court.

16. a. The Commissioner of Human Services, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), may adopt rules and regulations necessary for the implementation of this act.

b. The Supreme Court may adopt Rules of Court for the implementation of this act.

431. Section 1 of P.L.1997, c.348 (C.54:4-8.67) is amended to read as follows:

C.54:4-8.67 Definitions relative to homestead property tax reimbursement.

1. As used in this act:

"Base year" means, in the case of a person who is an eligible claimant on or before December 31, 1997, the tax year 1997; and in the case of a person who first becomes an eligible claimant after December 31, 1997, the tax year in which the person first becomes an eligible claimant. In the case of an eligible claimant who subsequently moves from the homestead for which the initial eligibility was established, the base year shall be the first full tax year during which the person resides in the new homestead. Provided however, a base year for an eligible claimant after such a move shall not apply to tax years commencing prior to January 1, 2009.

"Commissioner" means the Commissioner of Community Affairs.

"Director" means the Director of the Division of Taxation.

"Condominium" means the form of real property ownership provided for under the "Condominium Act," P.L.1969, c.257 (C.46:8B-1 et seq.).

"Cooperative" means a housing corporation or association which entitles the holder of a share or membership interest thereof to possess and occupy for dwelling purposes a house, apartment or other unit of housing owned or leased by the corporation or association, or to lease or purchase a unit of housing constructed or to be constructed by the corporation or association.

"Disabled person" means an individual receiving monetary payments pursuant to Title II of the federal Social Security Act (42 U.S.C. s.401 et seq.) on December 31, 1998, or on December 31 in all or any part of the year for which a homestead property tax reimbursement under this act is claimed.

"Dwelling house" means any residential property assessed as real property which consists of not more than four units, of which not more than one may be used for commercial purposes, but shall not include a unit in a condominium, cooperative, horizontal property regime or mutual housing corporation.

"Eligible claimant" means a person who:

is 65 or more years of age, or who is a disabled person;

is an owner of a homestead, or the lessee of a site in a mobile home park on which site the applicant owns a manufactured or mobile home;

has an annual income of less than \$17,918 in tax year 1998, less than \$18,151 in tax year 1999, or less than \$37,174 in tax year 2000, if single, or, if married, whose annual income combined with that of the spouse is less than \$21,970 in tax year 1998, less than \$22,256 in tax year 1999, or less than \$45,582 in tax year 2000, which income eligibility limits for single and married persons shall be subject to adjustments in tax years 2001 through 2006 pursuant to section 9 of P.L.1997, c.348 (C.54:4-8.68);

has an annual income of \$60,000 or less in tax year 2007, \$70,000 or less in tax year 2008, or \$80,000 or less in tax year 2009, if single or mar-

ried, which income eligibility limits shall be subject to adjustments in subsequent tax years pursuant to section 9 of P.L.1997, c.348 (C.54:4-8.68);

as a renter or homeowner, has made a long-term contribution to the fabric, social structure and finances of one or more communities in this State, as demonstrated through the payment of property taxes directly, or through rent, on any homestead or rental unit used as a principal residence in this State for at least 10 consecutive years at least three of which as owner of the homestead for which a homestead property tax reimbursement is sought prior to the date that an initial application for a homestead property tax reimbursement is filed. A person who has been an eligible claimant for a previous tax year shall qualify as an eligible claimant beginning the second full tax year following a move to another homestead in New Jersey, despite not meeting the three-year minimum residency and ownership requirement required for initial claimants under this paragraph; provided that the person satisfies the income eligibility limits for the tax year. Provided however, eligibility beginning in a second full tax year after such a move shall not apply to tax years commencing prior to January 1, 2010.

"Homestead" means:

a dwelling house and the land on which that dwelling house is located which constitutes the place of the eligible claimant's domicile and is owned and used by the eligible claimant as the eligible claimant's principal residence;

a site in a mobile home park equipped for the installation of manufactured or mobile homes, where these sites are under common ownership and control for the purpose of leasing each site to the owner of a manufactured or mobile home for the installation thereof and such site is used by the eligible claimant as the eligible claimant's principal residence;

a dwelling house situated on land owned by a person other than the eligible claimant which constitutes the place of the eligible claimant's domicile and is owned and used by the eligible claimant as the eligible claimant's principal residence;

a condominium unit or a unit in a horizontal property regime or a continuing care retirement community which constitutes the place of the eligible claimant's domicile and is owned and used by the eligible claimant as the eligible claimant's principal residence.

In addition to the generally accepted meaning of "owned" or "ownership," a homestead shall be deemed to be owned by a person if that person is a tenant for life or a tenant under a lease for 99 years or more, is entitled to and actually takes possession of the homestead under an executory contract for the sale thereof or under an agreement with a lending institution

which holds title as security for a loan, or is a resident of a continuing care retirement community pursuant to a contract for continuing care for the life of that person which requires the resident to bear, separately from any other charges, the proportionate share of property taxes attributable to the unit that the resident occupies;

a unit in a cooperative or mutual housing corporation which constitutes the place of domicile of a residential shareholder or lessee therein, or of a lessee or shareholder who is not a residential shareholder therein, which is used by the eligible claimant as the eligible claimant's principal residence.

"Homestead property tax reimbursement" means payment of the difference between the amount of property tax or site fee constituting property tax due and paid in any year on any homestead, exclusive of improvements not included in the assessment on the real property for the base year, and the amount of property tax or site fee constituting property tax due and paid in the base year, when the amount paid in the base year is the lower amount; but such calculations shall be reduced by any current year property tax reductions or reductions in site fees constituting property taxes resulting from judgments entered by county boards of taxation or the State Tax Court.

"Horizontal property regime" means the form of real property ownership provided for under the "Horizontal Property Act," P.L.1963, c.168 (C.46:8A-1 et seq.).

"Manufactured home" or "mobile home" means a unit of housing which:

(1) Consists of one or more transportable sections which are substantially constructed off site and, if more than one section, are joined together on site;

(2) Is built on a permanent chassis;

(3) Is designed to be used, when connected to utilities, as a dwelling on a permanent or nonpermanent foundation; and

(4) Is manufactured in accordance with the standards promulgated for a manufactured home by the Secretary of the United States Department of Housing and Urban Development pursuant to the "National Manufactured Housing Construction and Safety Standards Act of 1974," Pub.L.93-383 (42 U.S.C. s.5401 et seq.) and the standards promulgated for a manufactured or mobile home by the commissioner pursuant to the "State Uniform Construction Code Act," P.L.1975, c.217 (C.52:27D-119 et seq.).

"Mobile home park" means a parcel of land, or two or more parcels of land, containing no fewer than 10 sites equipped for the installation of manufactured or mobile homes, where these sites are under common ownership and control for the purpose of leasing each site to the owner of a

manufactured or mobile home for the installation thereof, and where the owner or owners provide services, which are provided by the municipality in which the park is located for property owners outside the park, which services may include but shall not be limited to:

- (1) The construction and maintenance of streets;
- (2) Lighting of streets and other common areas;
- (3) Garbage removal;
- (4) Snow removal; and
- (5) Provisions for the drainage of surface water from home sites and common areas.

"Mutual housing corporation" means a corporation not-for-profit, incorporated under the laws of this State on a mutual or cooperative basis within the scope of section 607 of the Langham Act (National Defense Housing), Pub.L.849, (42 U.S.C. s.1521 et seq.), as amended, which acquired a National Defense Housing Project pursuant to that act.

"Income" means income as determined pursuant to P.L.1975, c.194 (C.30:4D-20 et seq.).

"Principal residence" means a homestead actually and continually occupied by an eligible claimant as his or her permanent residence, as distinguished from a vacation home, property owned and rented or offered for rent by the claimant, and other secondary real property holdings.

"Property tax" means the general property tax due and paid as set forth in this section, on a homestead, but does not include special assessments and interest and penalties for delinquent taxes. For the sole purpose of qualifying for a benefit under P.L.1997, c.348 (C.54:4-8.67 et seq.), property taxes paid by June 1 of the year following the year for which the benefit is claimed will be deemed to be timely paid.

"Site fee constituting property tax" means 18 percent of the annual site fee paid or payable to the owner of a mobile home park.

"Tax year" means the calendar year in which a homestead is assessed and the property tax is levied thereon and it means the calendar year in which income is received or accrued.

432. Section 4 of P.L.1999, c.129 (C.56:8-14.5) is amended to read as follows:

C.56:8-14.5 Educational program about consumer protection laws, rights.

4. The Director of the Division of Consumer Affairs in the Department of Law and Public Safety, in consultation with the Director of the Division of Aging Services in the Department of Human Services, the direc-

tors of the New Jersey Association of Area Agencies on Aging, and the New Jersey Association of County Offices for Disabled Persons, shall develop and implement an educational program to inform senior citizens and persons with disabilities about consumer protection laws and consumer rights, subject to funds made available pursuant to subsection b. of section 5 of P.L.1999, c.129 (C.56:8-14.6) or any other source. Functions of the program may include:

- a. The preparation of educational materials regarding consumer protection laws and consumer rights that are of particular interest to senior citizens and persons with disabilities and distribution of those materials to the appropriate State and county agencies for dissemination to senior citizens, persons with disabilities and the public; and
- b. The underwriting of educational seminars and other forms of educational projects for the benefit of senior citizens and persons with disabilities.

433. Section 5 of P.L.1999, c.336 (C.56:8-96) is amended to read as follows:

C.56:8-96 Certification from veterinarian, recourse.

5. a. Any consumer who purchases from a pet shop an animal that becomes sick or dies after the date of purchase may take the sick or dead animal to a veterinarian within the period of time required pursuant to the notification form provided upon the date of purchase, receive certification from the veterinarian of the health and condition of the animal, and pursue the recourse provided for under the circumstances indicated by the veterinarian certification, as required and provided for pursuant to section 4 of P.L.1999, c.336 (C.56:8-95).

b. Upon receipt of the certification from the veterinarian, the consumer may report the sickness or death of the animal and the pet shop where the animal was purchased to the local health authority with jurisdiction over the municipality in which the pet shop where the animal was purchased is located, and to the Director of the Division of Consumer Affairs in the Department of Law and Public Safety. The consumer shall provide a copy of the veterinarian certificate with any report. The director shall forward to the appropriate local health authority a copy of any report the division receives. The local health authority shall record and retain the records of any report and documentation submitted by a consumer.

c. By the May 1 immediately following the effective date of this act, and annually thereafter, the local health authority with jurisdiction over pet shops shall review any files it has concerning reports filed pursuant to subsection b. of this section and shall recommend to the municipality in which

the pet shop is located the revocation of the license of any pet shop with reports filed as follows:

(1) 15% of the total number of animals sold in a year by the pet shop were certified by a veterinarian to be unfit for purchase due to a congenital or hereditary cause or condition, or a sickness brought on by a congenital or hereditary cause or condition;

(2) 25% of the total number of animals sold in a year by the pet shop were certified by a veterinarian to be unfit for purchase due to a non-congenital cause or condition;

(3) 10% of the total number of animals sold in a year by the pet shop died and were certified by a veterinarian to have died from a non-congenital cause or condition; or

(4) 5% of the total number of animals sold in a year by the pet shop died and were certified by a veterinarian to have died from a congenital or hereditary cause or condition, or a sickness brought on by a congenital or hereditary cause or condition.

d. By the May 1 immediately following the effective date of this act, and annually thereafter, the local health authority with jurisdiction over pet shops shall review any files it has concerning reports filed pursuant to subsection b. of this section and shall recommend to the municipality in which the pet shop is located a 90-day suspension of the license of any pet shop with reports filed as follows:

(1) 10% of the total number of animals sold in a year by the pet shop were certified by a veterinarian to be unfit for purchase due to congenital or hereditary cause or condition, or a sickness brought on by a congenital or hereditary cause or condition;

(2) 15% of the total number of animals sold in a year by the pet shop were certified by a veterinarian to be unfit for purchase due to a non-congenital cause or condition;

(3) 5% of the total number of animals sold in a year by the pet shop died and were certified by a veterinarian to have died from a non-congenital cause or condition; or

(4) 3% of the total number of animals sold in a year by the pet shop died and were certified by a veterinarian to have died from a congenital or hereditary cause or condition, or a sickness brought on by a congenital or hereditary cause or condition.

e. Pursuant to the authority and requirements provided in section 8 of P.L.1941, c.151 (C.4:19-15.8), the owner of the pet shop shall be afforded a hearing and, upon the recommendation by the local health authority pursuant to subsection c. or d. of this section, the local health authority, in con-

sultation with the Department of Health, shall set a date for the hearing to be held by the local health authority or the Department of Health and shall notify the pet shop involved. The municipality may suspend or revoke the license, or part thereof, that authorizes the pet shop to sell cats or dogs after the hearing has been held and as provided in section 8 of P.L.1941, c.151 (C.4:19-15.8). At the hearing, the local health authority or the Department of Health, whichever entity is holding the hearing, shall receive testimony from the pet shop and shall determine if the pet shop: (1) failed to maintain proper hygiene and exercise reasonable care in safeguarding the health of animals in its custody, or (2) sold a substantial number of animals that the pet shop knew, or reasonably should have known, to be unfit for purchase.

f. No provision of subsection c. shall be construed to restrict the local health authority or the Department of Health from holding a hearing concerning any pet shop in the State irrespective of the criteria for recommendation of license suspension or revocation named in subsection c. or d., or from recommending to a municipality the suspension or revocation of the license of a pet shop within its jurisdiction for other violations under other sections of law, or rules and regulations adopted pursuant thereto.

g. No action taken by the local health authority or municipality pursuant to this section or section 8 of P.L.1941, c.151 (C.4:19-15.8) shall be construed to limit or replace any action, hearing or review of complaints concerning the pet shop by the Division of Consumer Affairs in the Department of Law and Public Safety to enforce consumer fraud laws or other protections to which the consumer is entitled.

h. The requirements of this section shall be posted in a prominent place in each pet shop in the State along with the name, address, and telephone number of the local health authority that has jurisdiction over the pet shop, and this information shall be provided in writing at the time of purchase to each consumer and to each licensed veterinarian contracted for services by the pet shop upon contracting the veterinarian.

i. The Director of the Division of Consumer Affairs may investigate and pursue enforcement against any pet shop reported by a consumer pursuant to subsection b. of this section.

Repealer.

434. Section 4 of P.L.1999, c.174 (C.26:1A-15.3), section 28 of P.L.1966 c.293 (C.52:27D-28), section 2 of P.L.1975, c.36 (C.52:27D-28.2), section 1 of P.L.1985, c.357 (C.52:27D-28.5), and section 29 of P.L.1966, c.293 (C.52:27D-29) are repealed.

435. This act shall take effect immediately.

Approved June 29, 2012.

CHAPTER 18

AN ACT making appropriations for the support of the State Government and the several public purposes for the fiscal year ending June 30, 2013 and regulating the disbursement thereof.

**ANTICIPATED RESOURCES
FOR THE FISCAL YEAR 2012-2013
GENERAL FUND**

Undesignated Fund Balance, July 1, 2012:..... \$568,509,000

Major Taxes

Sales.....	\$8,802,803,000
Less: Sales Tax Dedication	(654,000,000)
Corporation Business.....	2,666,000,000
Transfer Inheritance.....	725,000,000
Motor Fuels	565,000,000
Insurance Premium	575,000,000
Motor Vehicle Fees	466,388,000
Cigarette	271,601,000
Realty Transfer	240,000,000
Petroleum Products Gross Receipts.....	228,000,000
Corporation Banks and Financial Institutions.....	165,000,000
Alcoholic Beverage Excise.....	112,000,000
Tobacco Products Wholesale Sales	20,427,000
Public Utility Excise (Reform)	<u>14,000,000</u>
Total - Major Taxes	<u>\$14,197,219,000</u>

Miscellaneous Taxes, Fees, and Revenues

Executive Branch -

Department of Agriculture:

Fertilizer Inspection Fees \$366,000

Miscellaneous Revenue 3,000

Subtotal, Department of Agriculture..... \$369,000

Department of Banking and Insurance:

Actuarial Services..... \$70,000

Banking - Assessments..... 11,400,000

Banking - Licenses and Other Fees 1,800,000

Fraud Fines..... 1,500,000

HMO Covered Lives 1,394,000

Matter within summary of appropriations is not enacted as part of the law and is intended to be for the purpose of displaying summaries of the items of appropriations set forth elsewhere.

Insurance - Examination Billings	2,500,000
Insurance - Licenses and Other Fees	39,814,000
Insurance - Special Purpose Assessment	33,900,000
Insurance Fraud Prevention	25,000,000
Real Estate Commission	<u>11,000,000</u>
Subtotal, Department of Banking and Insurance	<u>\$128,378,000</u>
Department of Children and Families:	
Child Care Licensing/Adoption Law	\$310,000
Contract Recoveries	17,394,000
Divorce Filing Fees	1,395,000
Marriage License/Civil Union Fees	<u>1,150,000</u>
Subtotal, Department of Children and Families	<u>\$20,249,000</u>
Department of Community Affairs:	
Affordable Housing and Neighborhood Preservation -	
Fair Housing	\$228,159,000
Construction Fees	15,789,000
Fire Safety	16,983,000
Housing Inspection Fees	10,160,000
Planned Real Estate Development Fees	<u>610,000</u>
Subtotal, Department of Community Affairs	<u>\$271,701,000</u>
Department of Education:	
Audit Recoveries	\$500,000
Audit of Enrollments	473,000
Local School District Loan Recoveries - NJEDA	5,712,000
Nonpublic Schools Handicapped and Auxiliary Recoveries	3,500,000
Nonpublic Schools Textbook Recoveries	1,000,000
School Construction Inspection Fees	100,000
State Board of Examiners	<u>4,591,000</u>
Subtotal, Department of Education	<u>\$15,876,000</u>
Department of Environmental Protection:	
Air Pollution Fees - Minor Sources	\$6,300,000
Air Pollution Fees - Title V Operating Permits	7,060,000
Air Pollution Fines	2,250,000
Clean Water Enforcement Act	1,840,000
Coastal Area Facility Review Act	1,413,000
Endangered Species Tax Check-off	158,000
Environmental Infrastructure Financing Program Administrative	
Fee	5,000,000
Excess Diversion	160,000
Freshwater Wetlands Fees	2,519,000
Freshwater Wetlands Fines	300,000
Hazardous Waste Fees	3,115,000

Hazardous Waste Fines	450,000
Hunters' and Anglers' Licenses	11,740,000
Industrial Site Recovery Act.....	25,000
Laboratory Certification Fees.....	800,000
Laboratory Certification Fines.....	50,000
Marina Rentals	885,000
Marine Lands - Preparation and Filing Fees.....	145,000
Medical Waste	4,600,000
New Jersey Pollutant Discharge Elimination System/ Stormwater Permits.....	16,700,000
Parks Management Fees and Permits	4,300,000
Parks Management Fines.....	79,000
Pesticide Control Fees	4,400,000
Pesticide Control Fines.....	80,000
Radiation Protection Fees	4,750,000
Radiation Protection Fines	120,000
Radon Testers Certification	230,000
Solid Waste - Utility Regulation Assessments	3,100,000
Solid Waste Fines	650,000
Solid Waste Management Fees.....	10,885,000
Solid and Hazardous Waste Disclosure	150,000
Stream Encroachment.....	2,673,000
Toxic Catastrophe Prevention Fees	1,515,000
Toxic Catastrophe Prevention Fines	120,000
Treatment Works Approval	1,350,000
Underground Storage Tanks Fees.....	500,000
Water Allocation	2,423,000
Water Supply Management Regulations	1,300,000
Water/Wastewater Operators Licenses.....	210,000
Waterfront Development Fees.....	2,700,000
Waterfront Development Fines	20,000
Well Permits/Well Drillers/Pump Installers Licenses	1,100,000
Wetlands	44,000
Worker Community Right to Know - Fines	35,000
Subtotal, Department of Environmental Protection	<u>\$108,244,000</u>
Department of Health:	
Admission Charge Hospital Assessment	\$6,000,000
Licenses, Fines, Permits, Penalties and Fees	790,000
Health Care Reform.....	1,200,000
Miscellaneous Revenue	400,000
Subtotal, Department of Health	<u>\$8,390,000</u>
Department of Human Services:	
Early Periodic Screening, Diagnosis and Treatment	\$1,420,000

Medicaid Uncompensated Care - Acute	197,602,000
Medicaid Uncompensated Care - Mental Health	33,832,000
Medicaid Uncompensated Care - Psychiatric	179,372,000
Medical Assistance - Federal Match on PAAD/Medicaid Dual Eligibles	350,000
Miscellaneous Revenue	16,822,000
Patients' and Residents' Cost Recovery - Developmental Disabilities	18,684,000
Patients' and Residents' Cost Recovery - Psychiatric Hospitals	74,236,000
School Based Medicaid	31,940,000
Subtotal, Department of Human Services	<u>\$554,258,000</u>
Department of Labor and Workforce Development:	
Miscellaneous Revenue	\$155,000
Special Compensation Fund	1,883,000
Workers' Compensation Assessment	13,311,000
Workplace Standards - Licenses, Permits and Fines	<u>4,351,000</u>
Subtotal, Department of Labor and Workforce Development	<u>\$19,700,000</u>
Department of Law and Public Safety:	
Beverage Licenses	\$3,960,000
Charities Registration Section	695,000
Controlled Dangerous Substances	100,000
Forfeiture Funds	250,000
Legalized Games of Chance Control	1,200,000
Miscellaneous Revenue	20,000
New Jersey Cemetery Board	66,000
Pleasure Boat Licenses	2,280,000
Private Employment Agencies	258,000
Securities Enforcement	13,394,000
State Board of Architects	260,000
State Board of Audiology and Speech-Language Pathology Advisory	20,000
State Board of Certified Public Accountants	24,000
State Board of Chiropractors	30,000
State Board of Cosmetology and Hairstyling	2,080,000
State Board of Court Reporting	10,000
State Board of Dentistry	120,000
State Board of Electrical Contractors	160,000
State Board of HVAC Contractors	5,000
State Board of Marriage Counselor Examiners	420,000
State Board of Master Plumbers	370,000
State Board of Medical Examiners	7,040,000
State Board of Mortuary Science	160,000
State Board of Nursing	3,678,000

State Board of Occupational Therapists and Assistants	12,000
State Board of Ophthalmic Dispensers and Ophthalmic Technicians	12,000
State Board of Optometrists	136,000
State Board of Orthotics and Prosthetics	34,000
State Board of Pharmacy	1,300,000
State Board of Physical Therapy	16,000
State Board of Polysomnography	54,000
State Board of Professional Engineers and Land Surveyors	240,000
State Board of Professional Planners.....	4,000
State Board of Psychological Examiners.....	366,000
State Board of Real Estate Appraisers.....	22,000
State Board of Respiratory Care	10,000
State Board of Social Workers	180,000
State Board of Veterinary Medical Examiners	212,000
State Police - Fingerprint Fees.....	3,694,000
State Police - Other Licenses.....	348,000
State Police - Private Detective Licenses	200,000
Victims of Violent Crime Compensation	3,372,000
Weights and Measures - General	<u>2,612,000</u>
Subtotal, Department of Law and Public Safety	<u>\$49,424,000</u>
Department of Military and Veterans' Affairs:	
Soldiers' Homes	<u>\$45,500,000</u>
Subtotal, Department of Military and Veterans' Affairs.....	<u>\$45,500,000</u>
Department of State:	
Governor's Teaching Scholars Program Loan Repayment	<u>\$5,000</u>
Subtotal, Department of State	<u>\$5,000</u>
Department of Transportation:	
Air Safety Fund	\$680,000
Applications and Highway Permits	1,300,000
Autonomous Transportation Authorities	53,500,000
Drunk Driving Fines.....	400,000
Good Driver.....	77,000,000
Interest on Purchase of Right of Way	5,000
Logo Sign Program Fees	300,000
Maritime Program Receipts.....	2,200,000
Miscellaneous Revenue	10,000
Outdoor Advertising	<u>740,000</u>
Subtotal, Department of Transportation.....	<u>\$136,135,000</u>
Department of the Treasury:	
Assessment on Real Property Greater Than \$1 Million	\$100,000,000
Assessments - Cable TV	5,129,000
Assessments - Public Utility	30,634,000

Cable Television (CATV) Universal Access	5,000,000
Commercial Recording - Expedited	1,000,000
Commissions (Notary)	1,300,000
Dispute Settlement Mediation	50,000
Domestic Security	32,000,000
Dormitory Safety Trust Fund - Debt Service Recovery	5,653,000
Escrow Interest - Construction Accounts	6,000
General Revenue - Fees (Commercial Recording and UCC)	55,000,000
Higher Education Capital Improvement Fund - Debt Service Recovery	15,297,000
Hotel/Motel Occupancy Tax	95,000,000
Miscellaneous Revenue	750,000
NJ Economic Development Authority	12,500,000
NJ Public Records Preservation	29,800,000
Nuclear Emergency Response Assessment	4,415,000
Public Defender Client Receipts	3,400,000
Public Utility Fines	1,000,000
Public Utility Gross Receipts and Franchise Taxes (Water/Sewer)	110,000,000
Railroad Tax - Class II	4,650,000
Railroad Tax - Franchise	5,880,000
Rate Counsel	7,071,000
Surplus Property	1,900,000
Tax Referral Cost Recovery Fee	5,000,000
Telephone Assessment	124,000,000
Tire Clean-Up Surcharge	9,000,000
Transitional Energy Facilities Assessment	<u>121,500,000</u>
Subtotal, Department of the Treasury	<u>\$786,935,000</u>
Other Sources:	
Miscellaneous Revenue	<u>\$9,000,000</u>
Subtotal, Other Sources	<u>\$9,000,000</u>
Interdepartmental Accounts:	
Administration and Investment of Pension and Health Benefit	
Funds - Recoveries	\$2,754,000
Employee Maintenance Deductions	300,000
Fringe Benefit Recoveries from Colleges and Universities	198,272,000
Fringe Benefit Recoveries from Federal and Other Funds	329,207,000
Fringe Benefit Recoveries from School Districts	42,900,000
Indirect Cost Recoveries - DEP Other Funds	10,243,000
MTF Revenue Fund	15,500,000
Rent of State Building Space	3,100,000
Social Security Recoveries from Federal and Other Funds	<u>64,817,000</u>
Subtotal, Interdepartmental Accounts	<u>\$667,093,000</u>

The Judiciary:

Court Fees	<u>\$72,008,000</u>
Subtotal, Judicial Branch	<u>\$72,008,000</u>
Total - Miscellaneous Taxes, Fees, and Revenues	<u>\$2,893,265,000</u>

Interfund Transfers

Beaches and Harbor Fund	\$3,000
Clean Energy Fund	89,000,000
Correctional Facilities Construction Fund	1,000
Correctional Facilities Construction Fund of 1987	2,000
Dam, Lake, Stream and Flood Control Project Fund - 2003	26,000
Developmental Disabilities Waiting List Reduction Fund	7,000
Dredging and Containment Facility Fund	437,000
Energy Conservation Fund	1,000
Enterprise Zone Assistance Fund	100,403,000
Fund for the Support of Free Public Schools	4,612,000
Garden State Farmland Preservation Trust Fund	2,040,000
Garden State Green Acres Preservation Trust Fund	5,547,000
Garden State Historic Preservation Trust Fund	668,000
Global Warming Solutions Fund	473,000
Hazardous Discharge Fund	1,000
Hazardous Discharge Site Cleanup Fund	18,368,000
Housing Assistance Fund	9,000
Judiciary Bail Fund	100,000
Judiciary Child Support and Paternity Fund	60,000
Judiciary Probation Fund	50,000
Judiciary Special Civil Fund	20,000
Judiciary Superior Court Miscellaneous Fund	20,000
Legal Services Fund	11,000,000
Mortgage Assistance Fund	850,000
Mortgage Servicing Settlement Fund	75,000,000
Motor Vehicle Security Responsibility Fund	1,000
NJ Bridge Rehabilitation and Improvement and R.R. Right-of-Way Preservation Fund	10,000
Natural Resources Fund	4,000
New Jersey Spill Compensation Fund	16,316,000
New Jersey Workforce Development Partnership Fund	26,945,000
Pollution Prevention Fund	989,000
Public Purpose Buildings and Community-Based Facilities Construction Fund	3,000
Real Estate Guaranty Fund	1,000,000
Safe Drinking Water Fund	2,503,000
Sanitary Landfill Facility Contingency Fund	10,000,000

Shore Protection Fund	14,000
Solid Waste Service Tax Fund	1,000
State Disability Benefit Fund	38,157,000
State Land Acquisition and Development Fund	1,000
State Lottery Fund	1,095,000,000
State Lottery Fund - Administration	23,072,000
State of New Jersey Cash Management Fund	2,100,000
Statewide Transportation and Local Bridge Fund	42,000
Supplemental Workforce Fund for Basic Skills	2,000,000
Tobacco Settlement Fund	53,256,000
Unclaimed Personal Property Trust Fund	193,000,000
Unclaimed Utility Deposits Trust Fund	21,000
Unemployment Compensation Auxiliary Fund	18,057,000
Universal Service Fund	65,705,000
Wage and Hour Trust Fund	40,000
Water Conservation Fund	3,000
Water Supply Fund	4,243,000
Worker and Community Right to Know Fund	<u>2,698,000</u>
Total - Interfund Transfers	<u>\$1,863,879,000</u>
Total State Revenues, General Fund	<u>\$18,954,363,000</u>
Adjustments:	
Transfer to Gubernatorial Elections Fund	<u>(\$4,259,000)</u>
Transfer from Property Tax Relief Fund	<u>68,880,000</u>
Total Resources, General Fund	<u>\$19,587,493,000</u>

Property Tax Relief Fund

Gross Income	\$11,767,424,000
Sales Tax Dedication	<u>671,500,000</u>
Transfer to General Fund	<u>(68,880,000)</u>
Total Resources, Property Tax Relief Fund	<u>\$12,370,044,000</u>

Surplus Revenue Fund

Undesignated Fund Balance, July 1, 2012	<u>\$0</u>
Total Resources, Surplus Revenue Fund	<u>\$0</u>

Casino Control Fund

Undesignated Fund Balance, July 1, 2012	\$250,000
Investment Earnings	18,000
License Fees	<u>55,076,000</u>
Total Resources, Casino Control Fund	<u>\$55,344,000</u>

Casino Revenue Fund

Casino Simulcasting Fund	\$400,000
Gross Revenue Tax	269,109,000

Other Casino Taxes and Fees	<u>14,469,000</u>
Total Resources, Casino Revenue Fund	<u>\$283,978,000</u>

Gubernatorial Elections Fund

Undesignated Fund Balance, July 1, 2012	\$1,241,000
Taxpayers' Designations	\$700,000
Transfer from General Fund	<u>\$4,259,000</u>
Total Resources, Gubernatorial Elections Fund	<u>\$6,200,000</u>
Total Resources, All State Funds	<u>\$32,303,059,000</u>

Federal Revenue**Executive Branch -****Department of Agriculture:**

Asian Longhorned Beetle Monitoring	\$500,000
Child Care	76,080,000
Child Nutrition - School Breakfast	61,000,000
Child Nutrition - School Lunch	257,400,000
Child Nutrition - Special Milk	1,300,000
Child Nutrition - Summer Programs	9,647,000
Child Nutrition Administration	6,400,000
Cooperative Gypsy Moth Suppression	200,000
Farm Risk Management Education Program	282,000
Farmland Preservation	4,500,000
Fish Inspection Service	110,000
Food Stamp - The Emergency Food Assistance Program (TEFAP) ..	2,350,000
Fresh Fruit and Vegetable Program	3,985,000
Indemnities - Avian Influenza	450,000
Meal Pattern Technical Assistance Fund	877,000
Specialty Crop Block Grant Program	1,600,000
Various Federal Programs and Accruals	<u>1,171,000</u>
Subtotal, Department of Agriculture	<u>\$427,852,000</u>

Department of Banking and Insurance:

Affordable Care Act Exchange	\$2,674,000
Patient Protection and Affordable Care Act	<u>3,146,000</u>
Subtotal, Department of Banking and Insurance	<u>\$5,820,000</u>

Department of Children and Families:

Restricted Federal Grants	\$10,913,000
Title IV-B Child Welfare Services	5,500,000
Title IV-E Foster Care	156,619,000
Women's Services Grants	<u>325,000</u>
Subtotal, Department of Children and Families	<u>\$173,357,000</u>

Department of Community Affairs:

Community Services Block Grant	\$20,000,000

Emergency Shelter Grants Program	3,000,000
HUD Disaster Recovery Initiative	15,600,000
Low Income Home Energy Assistance Program	150,000,000
Moderate Rehabilitation Housing Assistance	13,291,000
National Affordable Housing - HOME Investment Partnerships	8,489,000
Neighborhood Stabilization Program	7,000,000
Rental Assistance for Non-Elderly Persons Disabilities	1,900,000
Section 8 Housing Voucher Program	214,431,000
Shelter Plus Care Program	4,655,000
Small Cities Block Grant Program	8,360,000
Transitional Housing - Homeless	70,000
Weatherization Assistance Program	<u>5,000,000</u>
Subtotal, Department of Community Affairs	<u>\$451,796,000</u>
Department of Corrections:	
Central Communications Upgrade -	
US Department of Commerce	\$1,000,000
Central Communications Upgrade -	
US Department of Homeland Security	1,000,000
Federal Re-Entry Initiative	500,000
Inmate Vocational Certifications	173,000
Promoting Responsible Fatherhood	1,039,000
Second Chance Re-Entry Project - US Department of Justice	500,000
Second Chance Statewide Recidivism Reduction -	
US Dept. of Justice	1,000,000
State Criminal Alien Assistance Program	4,856,000
Substance Abuse and Mental Health Services Administration	
Offender Re-Entry	400,000
Technology Enhancements	<u>500,000</u>
Subtotal, Department of Corrections	<u>\$10,968,000</u>
Department of Education:	
21st Century Schools	\$22,400,000
AIDS Prevention Education	700,000
Bilingual and Compensatory Education - Homeless Children and	
Youth	1,346,000
Head Start Collaboration	305,000
Improving America's Schools Act - Consolidated Administration	4,556,000
Improving Teacher Quality - Higher Education	1,415,000
Individuals with Disabilities Education Act Basic State Grants	361,000,000
Individuals with Disabilities Education Act Preschool Grants	11,193,000
Language Acquisition Discretionary Admin	21,095,000
Mathematics and Science Partnership Grants	2,550,000
Migrant Education - Administration/Discretionary	2,022,000
Public Charter Schools	5,210,000

School Improvement Grants	10,810,000
State Assessments.....	9,150,000
State Grants for Improving Teacher Quality	53,337,000
Statewide Longitudinal Data Systems Research Grant	4,000,000
Title I - Grants to Local Education Agencies	299,044,000
Title I - Part D, Neglected and Delinquent	2,140,000
Various Federal Programs and Accruals	1,264,000
Vocational Education -Basic Grants - Administration	<u>22,764,000</u>
Subtotal, Department of Education	<u>\$836,301,000</u>
Department of Environmental Protection:	
Air Pollution Maintenance Program.....	\$10,500,000
Artificial Reef Program - PSE&G/NJPDES Permit Fees	1,800,000
Asian Longhorned Beetle Project.....	2,300,000
Assistance to Firefighters - Wildfire and Arson Prevention	200,000
Atlantic Coastal Fisheries	300,000
Avian Influenza	150,000
Beach Monitoring and Notification	700,000
BioWatch Monitoring.....	750,000
Boat Access (Fish and Wildlife).....	1,000,000
Brownfields	2,000,000
Chronic Wasting Disease	150,000
Clean Diesel Retrofit	400,000
Clean Vessels	1,000,000
Clean Water State Revolving Fund	61,000,000
Coastal Estuarine Land Program	4,000,000
Coastal Zone Management Implementation	3,400,000
Community Assistance Program	250,000
Consolidated Forest Management	1,080,000
Cooperative Technical Partnership.....	4,000,000
Defensible Space	400,000
Drinking Water State Revolving Fund	23,200,000
Electronic Vessel Trip Reporting	170,000
Endangered Species	125,000
Endangered and Nongame Species Program State Wildlife Grants ...	1,000,000
Firewise in the Pines.....	200,000
Fish and Wildlife Action Plan	95,000
Fish and Wildlife Health	810,000
Fish and Wildlife Technical Guidance	200,000
Forest Legacy	7,040,000
Forest Resource Management - Cooperative Forest Fire Control	1,765,000
Green Energy	1,000,000
Gypsy Moth Suppression	420,000
Hazardous Waste - Resource Conservation Recovery Act.....	4,995,000

Historic Preservation Survey and Planning	1,000,000
Hudson River Walkway	4,000,000
Hunters' and Anglers' License Fund	10,570,000
Land and Water Conservation Fund	6,000,000
Marine Fisheries Investigation and Management	1,450,000
Multimedia	750,000
National Coastal Wetlands Conservation	4,000,000
National Dam Safety Program (FEMA)	120,000
National Geologic Mapping Program.....	290,000
National Recreational Trails	1,900,000
New Jersey's Landscape Project	400,000
Nonpoint Source Implementation (319H)	4,010,000
Northeast Wildlife Teamwork Strategy	60,000
Particulate Monitoring Grant	1,000,000
Pesticide Technology	550,000
Pinelands Grant - Acquisition.....	1,000,000
Preliminary Assessments/Site Inspections.....	1,900,000
Radon Program	500,000
Remedial Planning Support Agency Assistance	1,000,000
Scenic Byways.....	3,500,000
Severe Repetitive Loss- Lincoln Park Borough.....	2,000,000
Severe Repetitive Loss- Passaic River Basin.....	2,000,000
Southern Pine Beetle	300,000
State Recreational Trails.....	4,975,000
State Wetlands Conservation Plan.....	550,000
State Wildlife Grant Projects	1,000,000
State and EPA Data Management Grant.....	2,300,000
Superfund Grants	5,450,000
Underground Storage Tank Program Standard	
Compliance Inspections	1,250,000
Underground Storage Tanks	2,500,000
Urban Community Air Toxics Program	800,000
Various Federal Programs and Accruals	1,375,000
Water Monitoring and Planning	1,050,000
Water Pollution Control Program	4,275,000
Water Pollution S106 Enhancements	300,000
Wildland and Urban Interface II	100,000
Wildlife Habitat Incentives Program (WHIP)	<u>150,000</u>
Subtotal, Department of Environmental Protection	<u>\$210,775,000</u>
Department of Health:	
ACA-Maternal, Infant & Early Childhood Home Visit Program	\$9,430,000
AIDS Drug Assistance Program Relief	1,300,000
AIDS Drug Distribution Program.....	4,000,000

Abstinence Education - Family Health Services (FHS)	914,000
Adult Viral Hepatitis Prevention	200,000
Asthma Surveillance and Coalition Building	769,000
Bioterrorism Hospital Emergency Preparedness	14,786,000
Birth Defects Surveillance Program	508,000
Breastfeeding Peer Counseling	300,000
CDC Nutrition - Physical Activity & Obesity (NPAO)	900,000
Childhood Lead Poisoning	1,400,000
Chronic Disease Prevention and Health Promotion Programs -	
Public Health	3,350,000
Clinical Laboratory Improvement Amendments Program	490,000
Commodity Supplemental Food Program	210,000
Comprehensive AIDS Resources Grant	49,550,000
Core Injury Prevention and Control Program	300,000
Demonstration Program to Conduct Health Assessments	627,000
Developing Health Language 7 Standard Messaging Interface in	
NJ registry	888,000
Early Hearing Detection and Intervention (EHDI) Tracking,	
Research	210,000
Early Intervention for Infants and Toddlers with Disabilities	
(Part H) Multimedia	13,000,000
Eliminating Disparities in Perinatal Health	500,000
Emergency Medical Services for Children (EMSC) Partnership	
Grants	226,000
Emergency Preparedness for Bioterrorism	29,581,000
Enhanced HIV/AIDS Surveillance-Perinatal	213,000
Enhancing & Making Programs & Outcomes Work to End Rape	196,000
Family Planning Program - Title X	4,200,000
Federal Lead Abatement Program	440,000
Food Emergency Response Network - E. Coli in Ground Beef	165,000
Food Inspection	556,000
Fundamental & Expanded Occupational Health	985,000
H1N1 Public Health Emergency Response	18,404,000
HIV/AIDS Events without Care in New Jersey	373,000
HIV/AIDS Prevention and Education Grant	15,000,000
HIV/AIDS Surveillance Grant	3,318,000
Healthy Homes and Lead Poisoning Prevention Program	594,000
Heart Disease and Stroke Prevention	450,000
Housing Opportunities for Persons with AIDS	2,264,000
Housing Opportunities for Incarcerated Persons with AIDS	2,101,000
Immunization Project	8,774,000
Maternal and Child Health (MCH) Early Childhood Comprehensive	
System	140,000

Maternal and Child Health Block Grant	13,000,000
Maternal, Infant and Early Childhood Home Visiting Program	366,000
Medicare/Medicaid Inspections of Nursing Facilities	16,672,000
Morbidity and Risk Behavior Surveillance	725,000
NJ Personal Responsibility Reeducation Program	1,410,000
National Cancer Prevention and Control - Public Health	6,889,000
National HIV/AIDS Behavioral Surveillance	512,000
New Jersey's Reducing Health Disparities Initiative	160,000
Nurse Aid Certification Program	1,000,000
Pandemic Influenza Healthcare Preparedness	1,935,000
Pediatric AIDS Health Care Demonstration Project.....	2,850,000
Pregnancy Risk Assessment Monitoring System	750,000
Preventative Health and Health Services Block Grant	4,056,000
Public Employees Occupational Safety and Health - State Plan	900,000
Public Health Laboratory Biomonitoring Planning	2,156,000
Rape Prevention and Education Program	2,060,000
Ryan White Supplemental - Part B.....	1,500,000
SSDI	65,000
Senior Farmers Market Nutrition Program	1,000,000
Supplemental Food Program - Women, Infants, and Children (WIC)	152,000,000
Surveillance, Epidemiology and End Results (SEER).....	1,319,000
TASE-Tobacco Age of Sale Enforcement	825,000
Tuberculosis Control Program.....	6,095,000
Universal Newborn Hearing Screening	250,000
Various Federal Programs and Accruals	10,436,000
Venereal Disease Project	3,882,000
Vital Statistics Component	1,100,000
West Nile Virus - Laboratory	200,000
West Nile Virus - Public Health	1,942,000
Women, Infants, and Children (WIC) Farmer's Market Nutrition	<u>2,600,000</u>
Subtotal, Department of Health.....	<u>\$430,267,000</u>
Department of Human Services:	
Block Grant Mental Health Services	\$12,251,000
Child Care Block Grant	112,702,000
Child Support Enforcement Program	190,897,000
Development Disabilities Council	1,636,000
Electronic Health Records Provider Incentive Payments	125,645,000
FEMA Disaster Case Management Grant	6,097,000
Food Stamp Program	132,764,000
General Assistance Medicaid Waiver- Childless Adult Demonstration.....	15,000,000
Health Information Technology (HIT)	5,661,000

Independent Living.....	1,056,000
Medicaid Emergency Diversion Grant	2,328,000
National Family Caregiver Program.....	5,200,000
Nursing Facilities Transition Grant	600,000
Older Americans Act- Title III	34,065,000
Projects for Assistance in Transition from Homeless (PATH).....	2,339,000
Refugee Resettlement Program	4,591,000
Social Services Block Grant.....	48,226,000
Substance Abuse Block Grant	51,882,000
Supplemental Nutrition Assistance Program-Education	7,000,000
Temporary Assistance to Needy Families Block Grant.....	431,370,000
Temporary Assistance to Needy Families Contingency Fund.....	20,000,000
Title XIX Child Residential.....	92,891,000
Title XIX Community Care Waiver	384,370,000
Title XIX ICF/MR.....	323,432,000
Title XIX Medical Assistance	4,740,331,000
Title XIX Children's Health Insurance Program	700,031,000
United States Department of Agriculture Older Americans	4,350,000
Various Federal Programs and Accruals	11,279,000
Vocational Rehabilitation Act, Section 120	<u>11,524,000</u>
Subtotal, Department of Human Services	<u>\$7,479,518,000</u>
Department of Labor and Workforce Development:	
Adult Continuing Education - Workforce Investment Act	\$21,017,000
Comprehensive Services for Independent Living.....	600,000
Current Employee Statistics	2,913,000
Disability Determination Services.....	65,771,000
Disabled Veterans' Outreach Program	3,000,000
Employment Services.....	27,159,000
Employment Services Cost Reimbursable Grants - Migrant Housing	50,000
Employee Services Grants - Alien Labor Certification	2,221,000
Local Veterans' Employment Representatives.....	1,600,000
National Council on Aging - Senior Community Services Employment Project	5,000,000
Occupational Safety Health Act - On-Site Consultation	2,600,000
Old Age and Survivor Insurance Disability Determination Services	1,000,000
One Stop Labor Market Information	1,037,000
Public Employees Occupational Safety and Health Act.....	2,250,000
Redesigned Occupational Safety and Health (ROSH)	300,000
Rehabilitation of Supplemental Security Income Beneficiaries	2,000,000
Supported Employment.....	975,000
Technical Assistance Training.....	1,700,000
Technology Related Assistance Project.....	550,000

Trade Adjustment Assistance Project	4,200,000
Unemployment Insurance	194,065,000
Various Federal Programs and Accruals	190,000
Vocational Rehabilitation Act of 1973	50,325,000
Work Opportunity Tax Credit	750,000
Workforce Investment Act	94,143,000
Workforce Investment Act Title IIID Discretionary Funding	<u>8,000,000</u>
Subtotal, Department of Labor and Workforce Development ..	<u>\$493,416,000</u>
Department of Law and Public Safety:	
Anti Trafficking Task Force	\$200,000
Bulletproof Vest Partnership	625,000
Byrne CJ Innovation Program	1,000,000
Child Safety/Child Booster Seats	4,000,000
Collaborative Model- Combat Human Trafficking	500,000
Community Oriented Policing (COPS) Hiring Program	7,000,000
Distracted Driver Incentive.....	1,200,000
Domestic Marijuana Eradication Suppression Program	75,000
Drunk Driver Prevention	8,507,000
Emergency Management Performance Grant - Non Terrorism	8,500,000
Enhancement of Data Analysis Center	50,000
Equal Employment Opportunity Commission	325,000
Fatality Analysis Reporting System (FARS)	240,000
Flood Mitigation Assistance	26,570,000
Hazardous Materials Emergency Preparedness	575,000
Hazardous Materials Transportation.....	500,000
Highway Traffic Safety	10,040,000
Homeland Security Grant Program.....	6,230,000
Incident Command	1,500,000
Internet Crimes Against Children	400,000
Justice Assistance Grant (JAG)	5,000,000
Juvenile Accountability Incentive Block Grant (JAIBG)	1,179,000
Juvenile Justice Delinquency Prevention	1,524,000
Medicaid Fraud Unit.....	4,700,000
Motorcycle Safety	800,000
National Criminal History Program - Office of the Attorney General	4,000,000
Occupant Protection Grant	4,500,000
Paul Coverdell National Forensic Science Improvement	500,000
Port Security Grant Program- Delaware Bay (Camden/Phila)	1,000,000
Pre-Disaster Mitigation Grant (Competitive)	26,155,000
Prescription Drug Monitoring.....	400,000
Project Safe Neighborhoods	500,000
Recreational Boating Safety	4,000,000

Repetitive Flood Claim Program - FEMA	2,000,000
Residential Treatment for Substance Abuse	250,000
Safety Belt Performance Grants	8,992,000
Severe Repetitive Loss - FEMA	27,151,000
Sex Offender Registration and Notification Act (SORNA)	400,000
Solving Cold Cases	310,000
State Traffic Safety Information System	1,500,000
Title V Funding	35,000
UASI Nonprofit Security Grant Program (NSGP)	1,800,000
Urban Area Security Initiative	21,663,000
Various Federal Programs and Accruals	550,000
Victim Assistance Grants	12,200,000
Victim Compensation Award	2,300,000
Violence Against Women Act-Criminal Justice	<u>3,500,000</u>
Subtotal, Department of Law and Public Safety	<u>\$214,946,000</u>
Department of Military and Veterans' Affairs:	
Administrative Services Activities	\$60,000
Antiterrorism Program Manager	120,000
Armory Renovations and Improvements	4,500,000
Army Facilities Service Contracts	2,877,000
Army National Guard Electronic Security System	100,000
Army National Guard Statewide Security Agreement	600,000
Army National Guard Sustainable Range Problem	100,000
Army Training and Technology Lab	700,000
Atlantic City Air Base - Service Contracts	3,500,000
Atlantic City Environmental	90,000
Atlantic City Operations and Maintenance	150,000
Atlantic City Sustainment, Restoration and Modernization	750,000
Brigadier General Doyle Memorial Cemetery Building Project	7,000,000
Coyle Field Atlantic City	40,000
Dining Facility Operations	150,000
Facilities Support Contract	9,000,000
Federal Distance Learning Program	180,000
Fire Fighter/Crash Rescue Service Cooperative	
Funding Agreement	2,000,000
Hazardous Waste Environmental Protection Program	1,000,000
McGuire Air Force Base - Service Contracts	3,250,000
McGuire Air Force Base Environmental	90,000
McGuire Operations and Maintenance	150,000
Medicare Part A Receipts for Resident Care	
and Operational Costs	10,900,000
National Guard Communications Agreement	950,000
Natural and Cultural Resources Management	5,000

New Jersey National Guard Challenge Youth Program	3,200,000
Sea Girt Regional Training Institute-Construction	34,000,000
Training Site Facilities Maintenance Agreements	70,000
Training and Equipment - Pool Sites	600,000
Transitional Housing	164,000
Various Federal Programs and Accruals	4,000,000
Veterans' Education Monitoring	600,000
Warren Grove Sustainment Restoration & Modernization	7,000
Warren Grove/Coyle Field	<u>70,000</u>
Subtotal, Department of Military and Veterans' Affairs	<u>\$90,973,000</u>
Department of State:	
Americorps Grants	\$4,420,000
College Access Challenge Grant Program	2,100,000
Election Assistance for Persons with Disabilities	325,000
Federal Voting Assistance Program	605,000
Foster Grandparent Program	800,000
Gaining Early Awareness and Readiness for Undergraduate Programs (GEAR UP)	3,979,000
National Endowment for the Arts Partnership	900,000
National Health Service Corps - Student Loan Repayment Program	240,000
State Trade and Export Promotion Pilot Grant Program	650,000
Student Loan Administrative Cost Deduction and Allowance	<u>14,314,000</u>
Subtotal, Department of State	<u>\$28,333,000</u>
Department of Transportation:	
Airport Fund	\$1,500,000
Boating Infrastructure Program (New Jersey Maritime Program)	1,600,000
Commercial Drivers' License Program	1,500,000
Driver's License Security Grant Program	1,200,000
Motor Carrier Safety Assistance Program	10,500,000
National Oceanic and Atmospheric Administration Geodetic Survey	325,000
New Jersey Maritime Program - Ferry Boat	<u>5,000,000</u>
Subtotal, Department of Transportation	<u>21,625,000</u>
Department of the Treasury:	
Division of Gas Expansion	\$826,000
Money Follows the Person Program	702,000
State Energy Conservation Program	<u>3,783,000</u>
Subtotal, Department of the Treasury	<u>\$5,311,000</u>
The Judiciary:	
Various Federal Programs and Accruals	<u>\$1,400,000</u>
Subtotal, The Judiciary	<u>\$1,400,000</u>

Special Transportation Trust Fund

Department of Transportation:

Federal Highway Administration	1,090,032,000
Federal Transit Administration	<u>395,593,000</u>
Subtotal, Special Transportation Fund - Federal	<u>1,485,625,000</u>
Total - Federal Revenue	<u>\$12,368,283,000</u>
Grand Total Resources, All Funds	<u>\$44,671,342,000</u>

BE IT ENACTED *by the Senate and General Assembly of the State of New Jersey:*

1. The appropriations herein or so much thereof as may be necessary are hereby appropriated out of the General Fund, or such other sources of funds specifically indicated or as may be applicable, for the respective public officers and spending agencies and for the several purposes herein specified for the fiscal year ending on June 30, 2013. Unless otherwise provided, the appropriations herein made shall be available during said fiscal year and for a period of one month thereafter for expenditures applicable to said fiscal year. Unless otherwise provided, at the expiration of said one-month period, all unexpended balances shall lapse into the State Treasury or to the credit of trust, dedicated or non-State funds as applicable, except those balances held by encumbrances on file as of June 30, 2013 with the Director of the Division of Budget and Accounting or held by pre-encumbrances on file as of June 30, 2013 as determined by the Director of the Division of Budget and Accounting. The Director of the Division of Budget and Accounting shall provide the Legislative Budget and Finance Officer with a listing of all pre-encumbrances outstanding as of July 31, 2013 together with an explanation of their status. Nothing contained in this section or in this act shall be construed to prohibit the payment due upon any encumbrance or pre-encumbrance made under any appropriation contained in any appropriation act of the previous year or years. Furthermore, balances held by pre-encumbrances as of June 30, 2012 are available for payments applicable to fiscal year 2012 as determined by the Director of the Division of Budget and Accounting. The Director of the Division of Budget and Accounting shall provide the Legislative Budget and Finance Officer with a listing of all pre-encumbrances outstanding as of July 31, 2012 together with an explanation of their status. On or before December 1, 2012, the State Treasurer, in accordance with the provisions of section 37 of article 3 of P.L.1944, c.112 (C.52:27B-46), shall transmit to the Legislature the Annual Financial Report of the State of New Jersey for the fiscal year ending June 30, 2012, depicting the financial condition of the State and the results of operation for the fiscal year ending June 30, 2012.

01 LEGISLATURE**70 Government Direction, Management, and Control****71 Legislative Activities****0001 Senate****DIRECT STATE SERVICES**

01-0001Senate	<u>\$11,700,000</u>
Total Direct State Services Appropriation, Senate	<u>\$11,700,000</u>

Direct State Services:

Personal Services:

Senators (40)	(\$1,990,000)
Salaries and Wages	(4,590,000)
Members' Staff Services	(4,400,000)
Materials and Supplies	(135,000)
Services Other Than Personal	(486,000)
Maintenance and Fixed Charges	(72,000)
Additions, Improvements and Equipment	(27,000)

The unexpended balance at the end of the preceding fiscal year in this account is appropriated.

0002 General Assembly**DIRECT STATE SERVICES**

02-0002 General Assembly \$18,217,000

Total Direct State Services Appropriation, General Assembly \$18,217,000

Direct State Services:

Personal Services:

Assemblypersons (80)	(\$3,937,000)
Salaries and Wages	(4,702,000)
Members' Staff Services	(8,800,000)
Materials and Supplies	(108,000)
Services Other Than Personal	(576,000)
Maintenance and Fixed Charges	(90,000)
Additions, Improvements and Equipment	(4,000)

The unexpended balance at the end of the preceding fiscal year in this account is appropriated.

0003 Office of Legislative Services**DIRECT STATE SERVICES**

03-0003 Legislative Support Services \$30,700,000

Total Direct State Services Appropriation, Office of

Legislative Services \$30,700,000

Direct State Services:

Personal Services:

Salaries and Wages	(\$23,443,000)
Materials and Supplies	(1,065,000)
Services Other Than Personal	(2,527,000)
Maintenance and Fixed Charges	(3,181,000)

Special Purpose:

03 State House Express Civics Education Program	(30,000)
03 Henry J. Raimondo Legislative Fellows Program	(69,000)
03 Affirmative Action and Equal Employment Opportunity	(29,000)

03 Senator Wynona Lipman Chair in Women's Political

Leadership, Eagleton Institute(100,000)

Additions, Improvements and Equipment(256,000)

Such sums as may be required for the cost of information system audits performed by the State Auditor are funded from the departmental data processing accounts of the department in which the audits are performed.

Such sums as are required, as determined by the Technology Executive Group of the Legislative Information Systems Committee of the Legislative Services Commission, for the continuation and expansion of existing and emerging computer and information technologies for the Legislature including but not limited to interactive video conferencing, telecommunication capabilities, electronic copying and facsimile transmissions, training and such other technologies in order to sustain a coordinated and comprehensive legislative technology infrastructure that the Legislature deems necessary are appropriated. No amounts so determined shall be obligated, expended or otherwise made available without the written prior authorization of the Senate President and the Speaker of the General Assembly.

Such sums as are required for Master Lease payments are appropriated, subject to the approval of the Director of the Division of Budget and Accounting and the Legislative Budget and Finance Officer.

Receipts derived from fees and charges for public access to legislative information systems and the unexpended balance at the end of the preceding fiscal year of such receipts are appropriated and shall be credited to a non-lapsing revolving fund established in and administered by the Office of Legislative Services for the purpose of continuing to modernize, maintain, and expand the dissemination and availability of legislative information.

The unexpended balance at the end of the preceding fiscal year in this account is appropriated.

77 Legislative Commissions and Committees***DIRECT STATE SERVICES***

09-0010 Intergovernmental Relations Commission \$400,000

09-0014 Joint Committee on Public Schools..... 335,000

09-0018 State Commission of Investigation..... 4,643,000

09-0053 New Jersey Law Revision Commission 321,000

09-0058 State Capitol Joint Management Commission..... 9,838,000

Total Direct State Services Appropriation, Legislative

Commissions and Committees \$15,537,000***Direct State Services:***

Intergovernmental Relations Commission:

09 The Council of State Governments.....(\$155,000)

09 National Conference of State Legislatures.....(184,000)

09 Eastern Trade Council - The Council of
State Governments(36,000)

09 Northeast States Association for Agriculture Stewardship - The Council of State Governments.....	(25,000)
Joint Committee on Public Schools:	
09 Expenses of Commission	(335,000)
State Commission of Investigation:	
09 Expenses of Commission	(4,643,000)
New Jersey Law Revision Commission:	
09 Expenses of Commission	(321,000)
State Capitol Joint Management Commission:	
09 Expenses of Commission	(9,838,000)
The unexpended balances at the end of the preceding fiscal year in these accounts are appropriated.	
Receipts from the rental of the Cafeteria and the Welcome Center and any other facility under the jurisdiction of the State Capitol Joint Management Commission are appropriated to defray custodial, security, maintenance and other related costs of these facilities.	
Such sums as are required for the establishment and operation of the Apportionment Commission and the Legislative Redistricting Commission are appropriated, subject to the approval of the Director of the Division of Budget and Accounting and the Legislative Budget and Finance Officer.	
Legislature, Total State Appropriation	<u>\$76,154,000</u>

Summary of Legislature Appropriations
(For Display Purposes Only)

Appropriations by Category:

Direct State Services.....\$76,154,000

Appropriations by Fund:

General Fund.....\$76,154,000

06 OFFICE OF THE CHIEF EXECUTIVE
70 Government Direction, Management, and Control
76 Management and Administration
DIRECT STATE SERVICES

01-0300 Executive Management	<u>\$6,013,000</u>
Total Direct State Services Appropriation, Management and Administration	<u>\$6,013,000</u>

Direct State Services:

Personal Services:

Salaries and Wages (\$5,186,000)

Special Purpose:

01 National Governors' Association..... (158,000)

01 Education Commission of the States..... (108,000)

01 National Conference of Commissioners on Uniform State Laws	(42,000)
01 Brian Stack Intern Program	(10,000)
01 Allowance to the Governor of Funds Not Otherwise Appropriated, For Official Reception on Behalf of the State, Operation of an Official Residence, and other Expenses	(95,000)
Materials and Supplies	(89,000)
Services Other Than Personal	(284,000)
Maintenance and Fixed Charges	(41,000)
The unexpended balance at the end of the preceding fiscal year in this account is ap- propriated.	
Office of the Chief Executive, Total State Appropriation	<u>\$6,013,000</u>

Summary of The Office of the Chief Executive Appropriations
(For Display Purposes Only)

Appropriations by Category:

Direct State Services.....\$6,013,000

Appropriations by Fund:

General Fund

10 DEPARTMENT OF AGRICULTURE
40 Community Development and Environmental Management
49 Agricultural Resources, Planning, and Regulation

DIRECT STATE SERVICES

01-3310 Animal Disease Control	\$1,134,000
02-3320 Plant Pest and Disease Control	1,673,000
03-3330 Agriculture and Natural Resources	538,000
05-3350 Food and Nutrition Services	343,000
06-3360 Marketing and Development Services	827,000
08-3380 Farmland Preservation	2,006,000
99-3370 Administration and Support Services	814,000
Total Direct State Services Appropriation, Agricultural Resources, Planning, and Regulation	<u>\$7,335,000</u>

Direct State Services:

Personal Services:

Salaries and Wages

Materials and Supplies

Services Other Than Personal

Maintenance and Fixed Charges

Special Purpose:

05 The Emergency Food Assistance Program.....	(343,000)
06 Promotion/Market Development	(150,000)
08 Agricultural Right-to-Farm Program.....	(85,000)
08 Open Space Administrative Costs	(1,921,000)

Receipts from laboratory test fees are appropriated to support the Animal Health Laboratory program. The unexpended balance at the end of the preceding fiscal year in the Animal Health Laboratory receipt account is appropriated for the same purpose.

Receipts from the seed laboratory testing and certification programs are appropriated for the cost of these programs. The unexpended balance at the end of the preceding fiscal year in the seed laboratory testing and certification receipt account is appropriated for the same purpose.

Receipts from Nursery Inspection fees are appropriated for the cost of that program. The unexpended balance at the end of the preceding fiscal year in the Nursery Inspection program is appropriated for the same purpose.

Receipts from the sale or studies of beneficial insects are appropriated to support the Beneficial Insect Laboratory. The unexpended balance at the end of the preceding fiscal year in the Sale of Insects account is appropriated for the same purpose.

Receipts from Stormwater Discharge Permit program fees are appropriated for the cost of that program. The unexpended balance at the end of the preceding fiscal year in the Stormwater Discharge Permit program account is appropriated for the same purpose.

Receipts derived from the distribution of commodities, sale of containers, and salvage of commodities, in accordance with applicable federal regulations, are appropriated for Commodity Distribution expenses.

Receipts in excess of the amount anticipated from feed, fertilizer, and liming material registrations and inspections are appropriated for the cost of that program.

Receipts from dairy licenses and inspections are appropriated for the cost of that program.

Receipts from agriculture chemistry fees not to exceed \$75,000 are appropriated to support the organic certification program.

Receipts from organic certification program fees are appropriated for the cost of that program.

Receipts from inspection fees derived from fruit, vegetable, fish, red meat, and poultry inspections are appropriated for the cost of conducting fruit, vegetable, fish, red meat, and poultry inspections.

An amount equal to receipts generated at the rate of \$0.47 per gallon of wine, vermouth, and sparkling wine sold by plenary winery and farm winery licensees licensed pursuant to R.S.33:1-10, and certified by the Director of the Division of Taxation, are appropriated to the Department of Agriculture from the alcoholic beverage excise tax for expenses of the Wine Promotion Program.

Receipts derived from the surcharge on vehicle rentals pursuant to section 54 of P.L.2002, c.34 (C.App.A:9-78), not to exceed \$278,000, are appropriated to support the Agro-Terrorism program within the Department of Agriculture.

Notwithstanding the provisions of any law or regulation to the contrary, the amount hereinabove appropriated for the Open Space Administrative Costs account is trans-

ferred from the Garden State Farmland Preservation Trust Fund and the 2007 Farmland Preservation Fund to the General Fund, together with an amount not to exceed \$1,029,000, and is appropriated to the Department of Agriculture for the State Agriculture Development Committee's administration of the Farmland Preservation program, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, an amount not to exceed \$200,000 shall be transferred from the appropriate funds established in the "Open Space Preservation Bond Act of 1989," P.L.1989, c.183, to the State Transfer of Development Rights Bank account and is appropriated to the State Agriculture Development Committee for Transfer of Development Rights administrative costs.

GRANTS-IN-AID

05-3350 Food and Nutrition Services	<u>\$6,818,000</u>
Total Grants-in-Aid Appropriation, Agricultural	
Resources, Planning, and Regulation	<u>\$6,818,000</u>

Grants-in-Aid:

05 Hunger Initiative/Food Assistance Program(\$6,818,000)

Notwithstanding the provisions of any law or regulation to the contrary, \$540,000 shall be transferred from the Department of Environmental Protection's Water Resources Monitoring and Planning - Constitutional Dedication special purpose account and is appropriated to support the Conservation Cost Share Program in the Department of Agriculture on or before September 1, 2012. Further additional sums may be transferred pursuant to a Memorandum of Understanding between the Department of Environmental Protection and the Department of Agriculture from the Department of Environmental Protection's Water Resources Monitoring and Planning - Constitutional Dedication special purpose account to support nonpoint source pollution control programs in the Department of Agriculture, subject to the approval of the Director of the Division of Budget and Accounting. The unexpended balance of this program at the end of the preceding fiscal year is appropriated for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.

The expenditure of funds for the Conservation Cost Share Program hereinabove appropriated shall be based upon an expenditure plan, subject to the approval of the Director of the Division of Budget and Accounting.

The unexpended balances at the end of the preceding fiscal year in the Conservation Assistance Program are appropriated for the same purpose.

Notwithstanding the provisions of any law or regulation to the contrary, \$250,000 shall be transferred from the Department of Environmental Protection's Water Resources Monitoring and Planning - Constitutional Dedication special purpose account and is appropriated for the Animal Waste Management portion of the Conservation Assistance Program in the Division of Agricultural and Natural Resources in the Department of Agriculture.

STATE AID

05-3350 Food and Nutrition Services	<u>\$5,613,000</u>

08-3380 Farmland Preservation	<u>10,000</u>
Total State Aid Appropriation, Agricultural Resources, Planning, and Regulation	<u>\$5,623,000</u>

State Aid:

05 School Lunch Aid - State Aid Grants	(\$5,613,000)
08 Payments in Lieu of Taxes	(10,000)

The unexpended balances at the end of the preceding fiscal year in the School Lunch Aid - State Aid Grants accounts are appropriated for the same purpose.

Notwithstanding the provisions of any law or regulation to the contrary, the amount necessary to reimburse State and local government entities for participating in the School Lunch Program shall be paid from the School Lunch Aid - State Aid Grants account, subject to the approval of the Director of the Division of Budget and Accounting.

Of the amounts hereinabove appropriated for the Department of Agriculture, such sums as the Director of the Division of Budget and Accounting shall determine from the schedule included in the Governor's Budget Message and Recommendations first shall be charged to the State Lottery Fund.

Department of Agriculture, Total State Aid Appropriation	<u>\$19,776,000</u>

Summary of Department of Agriculture Appropriations
(For Display Purposes Only)

Appropriations by Category:

Direct State Services	\$7,335,000
Grants-in-Aid	6,818,000
State Aid	5,623,000

Appropriations by Fund:

General Fund	\$19,776,000

14 DEPARTMENT OF BANKING AND INSURANCE**50 Economic Planning, Development, and Security****52 Economic Regulation****DIRECT STATE SERVICES**

01-3110 Consumer Protection Services and Solvency Regulation	\$21,112,000
02-3120 Actuarial Services	5,887,000
03-3130 Regulation of the Real Estate Industry	3,157,000
04-3110 Public Affairs, Legislative and Regulatory Services	2,260,000
06-3110 Bureau of Fraud Deterrence	22,786,000
07-3170 Supervision and Examination of Financial Institutions	4,018,000
99-3150 Administration and Support Services	<u>4,230,000</u>

Total Direct State Services Appropriation, Economic Regulation . \$63,450,000

Direct State Services:

Personal Services:

Salaries and Wages	(\$42,157,000)
Materials and Supplies.....	(306,000)
Services Other Than Personal.....	(7,095,000)
Maintenance and Fixed Charges.....	(208,000)
Special Purpose:	
01 Rate Counsel - Insurance	(149,000)
02 Actuarial Services	(600,000)
06 Insurance Fraud Prosecution Services.....	(12,896,000)
Additions, Improvements and Equipment	(39,000)

Department of Banking and Insurance, Total State Appropriation \$63,450,000

The unexpended balance at the end of the preceding fiscal year in the Public Adjusters' Licensing account, together with receipts derived from the "Public Adjusters' Licensing Act," P.L.1993, c.66 (C.17:22B-1 et seq.), are appropriated for the administration of the act, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts from the investigation of out-of-State land sales are appropriated for the conduct of those investigations.

There are appropriated from the Real Estate Guaranty Fund such sums as may be necessary to pay claims.

There are appropriated from the assessments imposed by the New Jersey Individual Health Coverage Program Board, created pursuant to P.L.1992, c.161 (C.17B:27A-2 et seq.), and by the New Jersey Small Employer Health Benefits Program Board, created pursuant to P.L.1992, c.162 (C.17B:27A-17 et seq.), those sums as may be necessary to carry out the provisions of those acts, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts in excess of anticipated revenues from licensing fees, bank assessments, fines and penalties, and the unexpended balances at the end of the preceding fiscal year, not to exceed \$400,000, are appropriated to the Division of Banking, subject to the approval of the Director of the Division of Budget and Accounting.

Proceeds from the sale of credits by the Pinelands Development Credit Bank pursuant to P.L.1985, c.310 (C.13:18A-30 et seq.) are appropriated to the Pinelands Development Credit Bank to administer the "Pinelands Development Credit Bank Act." The unexpended balance at the end of the preceding fiscal year in the Pinelands Development Credit Bank is appropriated to administer the operations of the bank.

In addition to the amounts hereinabove appropriated, such other sums, as the Director of the Division of Budget and Accounting shall determine, are appropriated from the assessments of the insurance industry pursuant to P.L.1995, c.156 (C.17:1C-19 et seq.) and from the assessments of the banking and consumer finance industries pursuant to P.L.2005, c.199 (C.17:1C-33 et seq.) for the purpose of implementing the requirements of those statutes.

The amount hereinabove appropriated for the Division of Insurance accounts is payable from receipts received from the Special Purpose Assessment of insurance companies pursuant to section 2 of P.L.1995, c.156 (C.17:1C-20). If the Special Purpose Assessment cap calculation is less than the amount hereinabove appropriated for this

purpose for the Division of Insurance, the appropriation shall be reduced to the level of funding supported by the Special Purpose Assessment cap calculation.

Summary of Department of Banking and Insurance Appropriations
(For Display Purposes Only)

Appropriations by Category:

Direct State Services.....\$63,450,000

Appropriations by Fund:

General Fund\$63,450,000

16 DEPARTMENT OF CHILDREN AND FAMILIES

50 Economic Planning, Development, and Security

55 Social Services Programs

DIRECT STATE SERVICES

01-1610 Child Protection and Permanency Services \$433,211,000

(From General Fund\$192,733,000)

(From Federal Funds 240,066,000)

(From All Other Funds 412,000)

02-1620 Child Integrated System of Care Services 1,964,000

(From General Fund 1,756,000)

(From Federal Funds 208,000)

03-1630 Family and Community Partnership Services 2,101,000

(From General Fund 1,889,000)

(From Federal Funds 137,000)

(From All Other Funds 75,000)

04-1600 Education Services 30,514,000

(From General Fund 8,237,000)

(From Federal Funds 1,233,000)

(From All Other Funds 21,044,000)

05-1600 Child Welfare Training Academy Services and Operations 8,240,000

(From General Fund 6,181,000)

(From Federal Funds 2,059,000)

06-1600 Safety and Security Services 3,775,000

99-1600 Administration and Support Services 59,297,000

(From General Fund 42,474,000)

(From Federal Funds 16,823,000)

Total Appropriation, State, Federal and All Other Funds \$539,102,000

(From General Fund\$257,045,000)

(From Federal Funds 260,526,000)

(From All Other Funds 21,531,000)

Less:

Federal Funds.....\$260,526,000

All Other Funds	21,531,000
Total Deductions	<u>\$282,057,000</u>
Total Direct State Services Appropriation, Social Services Programs	<u>\$257,045,000</u>
Direct State Services:	
Personal Services:	
Salaries and Wages	(\$452,875,000)
Materials and Supplies.....	(4,409,000)
Services Other Than Personal.....	(18,483,000)
Maintenance and Fixed Charges.....	(36,995,000)
Special Purpose:	
05 NJ Partnership for Public Child Welfare.....	(3,500,000)
06 Safety and Security Services	(3,775,000)
99 Information Technology.....	(1,524,000)
99 Safety and Permanency in the Courts	(11,345,000)
Additions, Improvements and Equipment	(6,196,000)
Less:	
Federal Funds	260,526,000
All Other Funds	21,531,000

Of the amounts hereinabove appropriated for Salaries and Wages for the Child Welfare Training Academy Services and Operations, such sums as may be necessary shall be used to train the Department of Children and Families' staff who serve children and families in the field, who have not already received training in cultural competence, in cultural competency. The Department of Children and Families shall also offer training opportunities in cultural competency to staff of community-based organizations serving children and families under contract to the Department of Children and Families.

Of the amount hereinabove appropriated for Safety and Permanency in the Courts, an amount not to exceed \$10,845,000 shall be reimbursed to the Department of Law and Public Safety and is appropriated for legal services implementing the approved child welfare settlement with the federal court, subject to the approval of the Director of the Division of Budget and Accounting.

GRANTS-IN-AID

01-1610 Child Protection and Permanency Services.....	\$479,876,000
(From General Fund	\$428,862,000)
(From Federal Funds	44,160,000)
(From All Other Funds	6,854,000)
02-1620 Child Integrated System of Care Services	428,770,000
(From General Fund	290,485,000)
(From Federal Funds	138,285,000)
03-1630 Family and Community Partnership Services	84,384,000
(From General Fund	61,077,000)

	(From Federal Funds	22,484,000)	
	(From All Other Funds	823,000)	
04-1600	Education Services	24,910,000	
	(From Federal Funds	937,000)	
	(From All Other Funds	23,973,000)	
99-1610	Administration and Support Services	699,000	
	(From Federal Funds	699,000)	
	Total Appropriation, State, Federal and All Other Funds	\$1,018,639,000	
	(From General Fund	\$780,424,000)	
	(From Federal Funds	206,565,000)	
	(From All Other Funds	31,650,000)	
Less:			
	Federal Funds	\$206,565,000	
	All Other Funds	31,650,000	
	Total Deductions	\$238,215,000	
	Total Grants-in-Aid Appropriation, Social Services		
	Programs	\$780,424,000	
Grants-in-Aid:			
01	Substance Abuse Services	(\$14,000,000)	
01	Court Appointed Special Advocates	(1,150,000)	
01	Independent Living and Shelter Care	(14,656,000)	
01	Out-of-Home Placements	(27,961,000)	
01	Family Support Services	(79,573,000)	
01	Child Abuse Prevention	(12,324,000)	
01	Foster Care	(89,133,000)	
01	Subsidized Adoption	(126,810,000)	
01	Foster Care and Permanency Initiative	(7,558,000)	
01	New Jersey Homeless Youth Act	(1,556,000)	
01	Wynona M. Lipman Child Advocacy		
	Center, Essex County	(537,000)	
01	Purchase of Social Services	(61,342,000)	
01	Child Health Units	(35,516,000)	
01	Restricted Federal Grants	(7,760,000)	
02	Care Management Organizations	(65,867,000)	
02	Out-of-Home Treatment Services	(249,395,000)	
02	Family Support Services	(15,944,000)	
02	Mobile Response	(20,517,000)	
02	Intensive In-Home Behavioral Assistance	(49,070,000)	
02	Youth Incentive Program	(5,849,000)	
02	Outpatient	(11,842,000)	
02	Contracted Systems Administrator	(7,986,000)	
02	State Children's Health Insurance		
	Program Administration	(2,300,000)	

03 Early Childhood Services	(12,917,000)
03 School Linked Services Program.....	(32,040,000)
03 Family Support Services.....	(17,311,000)
03 Women's Services	(18,700,000)
03 Community Based Child Abuse Prevention	(2,766,000)
03 Children's Trust Fund.....	(210,000)
03 Children's Justice Act.....	(440,000)
04 Educational Program Services	(24,910,000)
99 National Center for Child Abuse and Neglect	(699,000)

Less:

Federal Funds 206,565,000

All Other Funds 31,650,000

Notwithstanding the provisions of any law or regulation to the contrary, the amounts hereinabove appropriated in the Out-of-Home Placements account is subject to the following condition: amounts that become available as a result of the return of persons from in-State and out-of-State residential placements to community programs within the State may be transferred from the Residential Placements account to the appropriate Child Protection and Permanency Services account, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, the sums hereinabove appropriated for the Out-of-Home Placements, Group Homes, Treatment Homes, Other Residential Services, Foster Care, Subsidized Adoption, and Family Support Services accounts are available for the payment of obligations applicable to prior fiscal years.

The amounts hereinabove appropriated for Foster Care and Subsidized Adoption are subject to the following condition: any change by the Department of Children and Families in the rates paid for foster care and adoption subsidy programs shall be approved by the Director of the Division of Budget and Accounting.

Receipts in the Marriage and Civil Union License Fee Fund in excess of the amount anticipated are appropriated for Domestic Violence Prevention Services.

Funds recovered under P.L.1951, c.138 (C.30:4C-1 et seq.) during the current fiscal year are appropriated for resource families and other out-of-home placements.

Receipts from counties for persons under the care and supervision of the Division of Child Protection and Permanency are appropriated for the purpose of providing State Aid to the counties, subject to the approval of the Director of the Division of Budget and Accounting.

Of the amount hereinabove appropriated for the Purchase of Social Services account, \$1,000,000 is appropriated for the programs administered under the "New Jersey Homeless Youth Act," P.L.1999, c.224 (C.9:12A-2 et seq.), and the Division of Child Protection and Permanency shall prioritize the expenditure of this allocation to address transitional living services in the division's region that is experiencing the most severe over-capacity.

Notwithstanding the provisions of any law or regulation to the contrary, no funds hereinabove appropriated for Treatment Homes and Emergency Behavioral Health Ser-

vices, Youth Case Managers, Care Management Organizations, Youth Incentive Program, and Mobile Response shall be expended for any individual served by the Division of Child Integrated System of Care Services, with the exception of court-ordered placements or to ensure services necessary to prevent risk of harm to the individual or others, unless that individual makes a full and complete application for Medicaid or NJ FamilyCare, as applicable. Individuals receiving services from appropriations covered by the exceptions above shall apply for Medicaid or NJ FamilyCare, as applicable, in a timely manner, as shall be defined by the Commissioner of Children and Families, after receiving services.

Of the amounts hereinabove appropriated for the School Linked Services Program, there shall be available \$400,000 for the After School Reading Initiative, \$200,000 for the After School Start-Up Fund, \$400,000 for School Health Clinics, and \$530,000 for Positive Youth Development.

Of the amount hereinabove appropriated for the Domestic Violence Prevention Services, \$1,100,000 is payable out of the Marriage and Civil Union License Fee Fund. If receipts to that fund are less than anticipated, the appropriation shall be reduced by the amount of the shortfall.

Of the amounts hereinabove appropriated for Substance Abuse Services, an amount not to exceed \$14,000,000 shall be transferred to the Department of Human Services Division of Mental Health and Addiction Services to fund the Division of Child Protection and Permanency Child Welfare Substance Abuse Treatment Services contracts as specified in the Memorandum of Agreement between the Department of Children and Families and the Department of Human Services Division of Mental Health and Addiction Services, subject to the approval of the Director of the Division of Budget and Accounting.

Of the amounts hereinabove appropriated for the Purchase of Social Services, an amount as specified in the Memorandum of Agreement between the Department of Children and Families and the Department of Human Services Division of Family Development shall be transferred to the Department of Human Services Division of Family Development to fund the Post Adoption Child Care Program, subject to the approval of the Director of the Division of Budget and Accounting.

Of the amounts hereinabove appropriated for Early Childhood Services, an amount as specified in the Memorandum of Agreement between the Department of Children and Families and the Department of Human Services Division of Family Development shall be transferred to the Department of Human Services Division of Family Development to fund the Strengthening Families Initiative Training Program, subject to the approval of the Director of the Division of Budget and Accounting.

In order to permit flexibility in the handling of appropriations and ensure the timely payment of claims to providers of medical services, amounts may be transferred among accounts in the Child Integrated System of Care Services program classification. Amounts may also be transferred to and from various items of appropriation within the General Medical Services program classification of the Division of Medical Assistance and Health Services in the Department of Human Services and the Child Integrated System of Care Services program classification in the Department of Children and Families. All such transfers are subject to the approval of the Direc-

tor of the Division of Budget and Accounting. Notice of the Director of the Division of Budget and Accounting's approval shall be provided to the Legislative Budget and Finance Officer on the effective date of the approved transfer.

Of the amounts hereinabove appropriated for Out-of-Home Placements and Independent Living and Shelter Care, such amounts as determined by the Department of Children and Families may be transferred between such accounts to properly align expenditures based upon changes in client placements, subject to the approval of the Director of the Division of Budget and Accounting.

Of the amounts hereinabove appropriated for Foster Care and Subsidized Adoption, such amounts as determined by the Department of Children and Families may be transferred between such accounts to address the movement of children from foster care to a permanent adoption setting, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, receipts derived from the increases in divorce filing fees enacted in the amendment to N.J.S.22A:2-12 by section 41 of P.L.2003, c.117, are appropriated for transfer to the General Fund as general State revenue, subject to the approval of the Director of the Division of Budget and Accounting.

Department of Children and Families, Total State

Appropriation \$1,037,469,000

Summary of Department of Children and Families Appropriations

(For Display Purposes Only)

Appropriations by Category:

Direct State Services.....\$257,045,000

Grants-in-Aid.....780,424,000

Appropriations by Fund:

General Fund\$1,037,469,000

22 DEPARTMENT OF COMMUNITY AFFAIRS

40 Community Development and Environmental Management

41 Community Development Management

DIRECT STATE SERVICES

01-8010 Housing Code Enforcement \$8,131,000

02-8020 Housing Services..... 3,062,000

06-8015 Uniform Construction Code 11,986,000

13-8027 Codes and Standards 399,000

18-8017 Uniform Fire Code 7,312,000

Total Direct State Services Appropriation, Community

Development Management..... \$30,890,000

Direct State Services:

Personal Services:

Salaries and Wages	(\$26,250,000)
Employee Benefits	(249,000)
Materials and Supplies	(86,000)
Services Other Than Personal	(563,000)
Maintenance and Fixed Charges	(363,000)
Special Purpose:	
02 Affordable Housing	(1,725,000)
02 Local Planning Services	(1,279,000)
18 Local Fire Fighters' Training	(375,000)

The amount hereinabove appropriated for the Housing Code Enforcement program classification is payable out of the fees and penalties derived from bureau activities. The unexpended balance at the end of the preceding fiscal year, together with any receipts in excess of the amounts anticipated, is appropriated for expenses of code enforcement activities, subject to the approval of the Director of the Division of Budget and Accounting. If the receipts are less than anticipated, the appropriation shall be reduced proportionately.

The amount hereinabove appropriated for the Uniform Construction Code program classification is payable out of the fees and penalties derived from code enforcement activities. The unexpended balance at the end of the preceding fiscal year, together with any receipts in excess of the amounts anticipated, is appropriated for expenses of code enforcement activities, subject to the approval of the Director of the Division of Budget and Accounting. If the receipts are less than anticipated, the appropriation shall be reduced proportionately.

The unexpended balance at the end of the preceding fiscal year in the Planned Real Estate Development Full Disclosure Act fees account, together with any receipts in excess of the amount anticipated, is appropriated for code enforcement activities, subject to the approval of the Director of the Division of Budget and Accounting.

The amounts received by the Uniform Construction Code Revolving Fund attributable to that portion of the surcharge fee in excess of \$0.0006, and to surcharges on other construction, shall be dedicated to the general support of the Uniform Construction Code program and, notwithstanding the provisions of section 2 of P.L.1979, c.121 (C.52:27D-124.1), shall be available for training and non-training purposes. Notwithstanding the provision of any law or regulation to the contrary, unexpended balances at the end of the preceding fiscal year in the Uniform Construction Code Revolving Fund are appropriated for expenses of code enforcement activities.

Such sums as may be required for the registration of builders and reviewing and paying claims under "The New Home Warranty and Builders' Registration Act," P.L.1977, c.467 (C.46:3B-1 et seq.), are appropriated from the New Home Warranty Security Fund in accordance with section 7 of P.L.1977, c.467 (C.46:3B-7), subject to the approval of the Director of the Division of Budget and Accounting.

The amount hereinabove appropriated for the Uniform Fire Code program classification is payable out of the fees and penalties derived from code enforcement activities. The unexpended balance at the end of the preceding fiscal year, together with any receipts in excess of the amounts anticipated, is appropriated for expenses of code enforcement activities, subject to the approval of the Director of the Division of

Budget and Accounting. If the receipts are less than anticipated, the appropriation shall be reduced proportionately.

Notwithstanding the provisions of any law or regulation to the contrary, receipts derived from fees associated with the Fire Protection Contractor's Certification program pursuant to P.L.2001, c.289 (C.52:27D-25n et seq.), are appropriated to the Department of Community Affairs Division of Fire Safety, in such sums as are necessary to operate the program, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, the Division of Fire Safety may transfer within its own Division between a Direct State Services appropriations account and a Grants-In-Aid appropriations account, such sums as are necessary for expenses of code enforcement activities, subject to the approval of the Director of the Division of Budget and Accounting.

The amount hereinabove appropriated for the Local Planning Services and Affordable Housing accounts shall be payable from the receipts of the portion of the realty transfer fee directed to be credited to the New Jersey Affordable Housing Trust Fund pursuant to section 4 of P.L.1968, c.49 (C.46:15-8) and from the receipts of the portion of the realty transfer fee directed to be credited to the New Jersey Affordable Housing Trust Fund pursuant to section 4 of P.L.1975, c.176 (C.46:15-10.1). Any receipts in excess of the amount anticipated, and any unexpended balance at the end of the preceding fiscal year are appropriated, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, the Division of Housing and Community Resources may transfer between the Affordable Housing State Aid appropriations account, the Local Planning Services Direct State Services appropriations account and the Affordable Housing Direct State Services appropriations account, such sums as are necessary, subject to the approval of the Director of the Division of Budget and Accounting. The Director of the Division of Budget and Accounting shall provide written notice of such a transfer to the Joint Budget Oversight Committee within 10 working days of making such a transfer.

Pursuant to section 15 of P.L.1983, c.530 (C.55:14K-15), the Commissioner of Community Affairs shall determine, at least annually, the eligibility of each boarding house resident for rental assistance payments; and notwithstanding the provisions of P.L.1983, c.530 (C.55:14K-1 et seq.) to the contrary, moneys held in the Boarding House Rental Assistance Fund that were originally appropriated from the General Fund may be used by the Commissioner for the purpose of providing life safety improvement loans, and any moneys held in the Boarding House Rental Assistance Fund may be used for the purpose of providing rental assistance for repayment of such loans. Notwithstanding any provision of P.L.1983, c.530 (C.55:14K-1 et seq.), the Commissioner shall have authority to disburse funds from the Boarding House Rental Assistance Fund established pursuant to section 14 of P.L.1983, c.530 (C.55:14K-14) for the purpose of repaying, through rental assistance or otherwise, loans made to the boarding house owners for the purpose of rehabilitating boarding houses.

The unexpended balance at the end of the preceding fiscal year in the Truth in Renting account, and receipts from the sale of truth in renting statements, including fees, fines, and penalties, are appropriated for the Truth in Renting program, subject to the approval of the Director of the Division of Budget and Accounting.

There is appropriated from the Petroleum Overcharge Reimbursement Fund the sum of \$300,000 for the expenses of the Green Homes Office in the New Jersey Housing and Mortgage Finance Agency, subject to the approval of the Director of the Division of Budget and Accounting.

Any receipts from the Boarding Home Regulation and Assistance program, including fees, fines, and penalties, are appropriated for the Boarding Home Regulation and Assistance program.

Notwithstanding the provisions of any law or regulation to the contrary, receipts appropriated from the Department of Community Affairs' code enforcement activities in excess of the amount anticipated and in excess of the amounts required to support the code enforcement activity for which they were collected may be transferred as necessary to cover shortfalls in other Department of Community Affairs' code enforcement accounts, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, receipts derived from the additional fee established by section 10 of P.L.2003, c.311 (C.52:27D-437.10) are appropriated to the Housing Code Enforcement program classification for expenses of code enforcement activities, subject to the approval of the Director of the Division of Budget and Accounting.

GRANTS-IN-AID

01-8010 Housing Code Enforcement.....	\$919,000
02-8020 Housing Services	27,660,000
18-8017 Uniform Fire Code	<u>8,571,000</u>
Total Grants-in-Aid Appropriation, Community	
Development Management	<u>\$37,150,000</u>

Grants-in-Aid:

01 Cooperative Housing Inspection	(\$919,000)
02 Shelter Assistance	(2,300,000)
02 Prevention of Homelessness	(4,360,000)
02 State Rental Assistance Program	(21,000,000)
18 Uniform Fire Code - Local Enforcement Agency Rebates	(8,425,000)
18 Uniform Fire Code - Continuing Education	(146,000)

The amount hereinabove appropriated for the Housing Code Enforcement program classification is payable out of the fees and penalties derived from bureau activities. The unexpended balance at the end of the preceding fiscal year, together with any receipts in excess of the amounts anticipated, is appropriated for expenses of code enforcement activities, subject to the approval of the Director of the Division of Budget and Accounting. If the receipts are less than anticipated, the appropriation shall be reduced proportionately.

The amount hereinabove appropriated for the Uniform Fire Code program classification is payable out of the fees and penalties derived from code enforcement activities. The unexpended balance at the end of the preceding fiscal year, together with any receipts in excess of the amounts anticipated, is appropriated for expenses of code enforcement activities, subject to the approval of the Director of the Division of Budget and Accounting. If the receipts are less than anticipated, the appropriation shall be reduced proportionately.

In addition to the amount hereinabove appropriated for the State Rental Assistance Program (SRAP), an amount not less than \$20,000,000 is appropriated from the New Jersey Affordable Housing Trust Fund to SRAP for the purposes of subsections a. and c. of section 1 of P.L.2004, c.140 (C.52:27D-287.1).

The unexpended balance at the end of the preceding fiscal year in the State Rental Assistance Program account is appropriated for the expenses of the State Rental Assistance Program.

Notwithstanding the provisions of any law or regulation to the contrary, such sums as may be received from the New Jersey Housing and Mortgage Finance Agency for the State Rental Assistance Program are appropriated to the Department of Community Affairs for the purposes of providing rental assistance.

The amount hereinabove appropriated for the Shelter Assistance program and the Prevention of Homelessness program shall be payable from the receipts of the portion of the realty transfer fee directed to be credited to the New Jersey Affordable Housing Trust Fund pursuant to section 4 of P.L.1968, c.49 (C.46:15-8) and from the receipts of the portion of the realty transfer fee directed to be credited to the New Jersey Affordable Housing Trust Fund pursuant to section 4 of P.L.1975, c.176 (C.46:15-10.1). If the receipts are less than anticipated, the appropriation shall be reduced proportionately.

Upon determination by the Commissioner of Community Affairs that all eligible shelter assistance projects have received funding from the amount appropriated for Shelter Assistance from receipts of the portions of the realty transfer fee dedicated to the New Jersey Affordable Housing Trust Fund, any available balance in the Shelter Assistance account may be transferred to the Affordable Housing account, subject to the approval of the Director of the Division of Budget and Accounting.

There is appropriated to the Revolving Housing Development and Demonstration Grant Fund an amount not to exceed 50% of the penalties derived from bureau activities in the Housing Code Enforcement program classification, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts from repayment of loans from the Downtown Business Improvement Loan Fund, together with the unexpended balance at the end of the preceding fiscal year of such loan fund and any interest thereon, are appropriated for the purposes of P.L.1998, c.115 (C.40:56-71.1 et seq.).

Notwithstanding the provisions of section 35 of P.L.1975, c.326 (C.13:17-10.1), sections 10 and 11 of P.L.1981, c.306 (C.13:1E-109 and C.13:1E-110), section 8 of P.L.1985, c.368 (C.13:1E-176), or any rules and regulations adopted pursuant thereto, or any order issued by the Board of Public Utilities to the contrary, an amount equal to \$100,000 shall be withdrawn from the escrow accounts by the New

Jersey Meadowlands Commission and paid to the State Treasurer for deposit in the General Fund and the amount so deposited shall be appropriated to the New Jersey Meadowlands Commission to cover operational costs of the Hackensack Meadowlands Municipal Committee.

Notwithstanding the provisions of any law or regulation to the contrary, Revolving Housing Development and Demonstration Grant funds are appropriated to support loans and grants to non-profit entities for the purpose of economic development and historic preservation.

Notwithstanding the provisions of any law or regulation to the contrary, such sums as are necessary shall be available from the Prevention of Homelessness Grants-In-Aid appropriation for program administrative expenses, subject to the approval of the Director of the Division of Budget and Accounting.

STATE AID

Notwithstanding the provisions of any law or regulation to the contrary, such amounts as may be required to fund relocation costs of boarding home residents are appropriated from the Boarding Home Rental Assistance Fund.

The unexpended balance at the end of the preceding fiscal year in the Relocation Assistance account, not to exceed \$250,000, is appropriated for the expenses of the Relocation Assistance program, subject to the approval of the Director of the Division of Budget and Accounting.

Of the sum hereinabove appropriated for the Affordable Housing program, a sum not to exceed \$400,000 may be used for matching, on a 50/50 basis, for the federal share of the administrative costs of the federal Community Development Block Grant.

Of the sum hereinabove appropriated for the New Jersey Affordable Housing Trust Fund, such sums as are necessary may be pledged as a match for the HOME Investment Partnership Program to ensure adherence to the federal matching requirements for affordable housing production.

Notwithstanding the provisions of any law or regulation to the contrary, the amount hereinabove appropriated for the Affordable Housing program may be used to provide technical assistance grants to non-profit housing organizations and authorities for creating and supporting affordable housing and community development opportunities.

Notwithstanding the provisions of any law or regulation to the contrary, funds appropriated for the Affordable Housing program may be provided directly to the housing project being assisted; provided however, that any such project has the support by resolution of the governing body of the municipality in which it is located.

50 Economic Planning, Development, and Security

55 Social Services Programs

DIRECT STATE SERVICES

05-8050 Community Resources..... \$100,000

Total Direct State Services Appropriation, Social Services Programs \$100,000

Direct State Services:

Personal Services:

Salaries and Wages(\$76,000)
 Services Other Than Personal (24,000)
 Additional funds as may be allocated by the federal government for New Jersey's Low
 Income Home Energy Assistance Block Grant Program (LIHEAP) are appropriated,
 subject to the approval of the Director of the Division of Budget and Accounting.

GRANTS-IN-AID

05-8050 Community Resources \$990,000
 Total Grants-In-Aid Appropriation, Social Services Programs..... \$990,000

Grants-In-Aid:

05 Recreation for the Handicapped(\$585,000)
 05 Special Olympics(405,000)

Notwithstanding the provisions of P.L.2003, c.311 (C.52:27D-437.1 et seq.), or any law
 or regulation to the contrary, the amount hereinabove appropriated for the Lead
 Hazard Control Assistance Fund is payable from receipts of the portion of the sales
 tax directed to be credited to the Lead Hazard Control Assistance Fund pursuant to
 section 11 of P.L.2003, c.311 (C.52:27D-437.11), and there is further appropriated
 from such receipts an amount not to exceed \$8,000,000, subject to the approval of
 the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of section 4 of the "Lead Hazard Control Assistance
 Act," P.L.2003, c.311 (C.52:27D-437.4), such sums as are necessary are appropri-
 ated from the Lead Hazard Control Assistance Fund for administrative costs, sub-
 ject to the approval of the Director of the Division of Budget and Accounting.

70 Government Direction, Management, and Control

75 State Subsidies and Financial Aid

DIRECT STATE SERVICES

04-8030 Local Government Services \$4,092,000
 Total Direct State Services Appropriation, State Subsidies
 and Financial Aid \$4,092,000

Direct State Services:

Personal Services:

Local Finance Board Members (\$84,000)
 Salaries and Wages (3,716,000)
 Materials and Supplies..... (40,000)
 Services Other Than Personal (227,000)
 Maintenance and Fixed Charges (25,000)

Receipts received by the Division of Local Government Services are appropriated, sub-
 ject to the approval of the Director of the Division of Budget and Accounting.

STATE AID

04-8030 Local Government Services \$674,321,000
 (From General Fund \$114,260,000)
 (From Property Tax Relief Fund 560,061,000)

Total State Aid Appropriation, State Subsidies and
 Financial Aid \$674,321,000
(From General Fund \$114,260,000)
(From Property Tax Relief Fund 560,061,000)

State Aid:

04 Consolidated Municipal Property Tax
 Relief Aid (PTRF).....(\$553,587,000)
 04 County Prosecutors and Officials Salary
 Increase (P.L.2007, c.350) (1,600,000)
 04 County Prosecutor Funding Initiative
 Pilot Program (4,000,000)
 04 Transitional Aid to Localities..... (108,660,000)
 04 Open Space Payments in Lieu of Taxes (PTRF)..... (6,474,000)

Notwithstanding the provisions of any law or regulation to the contrary, no appropriation shall be made for municipal aid from the amounts credited to the Extraordinary Aid account from receipts of the supplemental fee established pursuant to section 2 of P.L.2003, c.113 (C.46:15-7.1).

The amount hereinabove appropriated for the County Prosecutor Funding Initiative Pilot Program shall be distributed as follows: Camden County, \$895,000; Essex County, \$1,811,000; Hudson County, \$802,500; and Mercer County, \$491,500.

Notwithstanding the provisions of any law or regulation to the contrary, the amount hereinabove appropriated for Transitional Aid to Localities shall be allocated to provide short-term financial assistance where needed to help a municipality which is in serious fiscal distress to meet immediate budgetary needs and regain financial stability. A municipality shall be deemed to be eligible for transitional aid if the municipality is identified by the Director of the Division of Local Government Services (Director) as experiencing serious fiscal distress where the Director determines that, despite local officials having implemented substantive cost reduction strategies, there continues to exist conditions of serious fiscal distress, which may include but not be limited to, substantial structural or accumulated deficits, ongoing reliance on non-recurring revenues, limited ability to raise supplemental non-property tax revenues, extraordinary demands for public safety appropriations, and other factors indicating a constrained ability to raise sufficient revenues to meet budgetary requirements that substantially jeopardizes the fiscal integrity of the municipality. Municipalities seeking transitional aid shall file an application on a form prescribed by the Director which application, among other things, shall set forth the minimum criteria which must be met in order for an application to be considered by the Director for a determination of eligibility. The Director shall determine whether a municipality which files an application meeting such minimum criteria is in serious fiscal distress, and, if so, what amount of transitional aid should be provided to address the municipality's serious fiscal distress. The transitional aid shall be provided to the municipality subject to the provisions of subsection a. of section 1 of P.L.2011, c.144 (C.52:27D-118.42a); provided however, that an amount of Transitional Aid to Localities as determined by the Director of the

Division of Local Government Services for a municipality may be deemed to constitute Consolidated Municipal Property Tax Relief Aid in an amount not in excess of the amount of Transitional Aid to Localities such municipality received in fiscal year 2012 and shall not reduce the amount of Consolidated Municipal Property Tax Relief Aid such municipality shall receive for fiscal year 2013. Provided however, if the Director of the Division of Local Government Services deems an amount of Transitional Aid to Localities for a municipality as constituting Consolidated Municipal Property Tax Relief Aid pursuant to this provision that municipality is not relieved from compliance with the requirements for transitional aid.

The amount hereinabove appropriated for Transitional Aid to Localities is subject to the following condition: notwithstanding the provisions of R.S.43:21-14 or any other law or regulation to the contrary, the Commissioner of Labor and Workforce Development, in consultation with the Commissioner of Community Affairs, is authorized to enter into individualized payment plan agreements with municipalities that receive Transitional Aid for the reimbursement of unemployment benefits paid to former employees of such municipal government units, at reasonable interest rates based on current market conditions, and on such other terms and conditions as may be determined to be appropriate by the Commissioner of Labor and Workforce Development. Any municipality that enters into an individualized payment plan agreement pursuant to this section shall be required to expend all funds budgeted for this activity remaining as of the last day of its budget year for the repayment of outstanding obligations under the plan.

Notwithstanding the provisions of any law or regulation to the contrary, any qualifying municipality, as defined in section 1 of P.L.1978, c.14 (C.52:27D-178) for the previous fiscal year, shall continue to be a qualifying municipality thereunder during the current fiscal year.

The amount hereinabove appropriated for Consolidated Municipal Property Tax Relief Aid shall be distributed on the following schedule: on or before August 1, 45% of the total amount due; September 1, 30% of the total amount due; October 1, 15% of the total amount due; November 1, 5% of the total amount due; December 1 for municipalities operating under a calendar fiscal year, 5% of the total amount due; and June 1 for municipalities operating under the State fiscal year, 5% of the total amount due.

Notwithstanding the provisions of any law or regulation to the contrary, from the amounts received from the appropriation to the Consolidated Municipal Property Tax Relief Aid program and received from amounts transferred from Consolidated Municipal Property Tax Relief Aid to the Energy Tax Receipts Property Tax Relief Fund account, each municipality shall be required to distribute to each fire district within its boundaries the amount received by the fire district from the Supplementary Aid for Fire Services program pursuant to the provisions of the fiscal year 1995 annual appropriations act, P.L.1994, c.67, less an amount proportional to reductions in the combined total amount received by the municipality from Consolidated Municipal Property Tax Relief Aid and from the Energy Tax Receipts Property Tax Relief Fund since fiscal year 2008.

Notwithstanding the provisions of any law or regulation to the contrary, the amount hereinabove appropriated for Consolidated Municipal Property Tax Relief Aid shall be distributed in the same amounts, and to the same municipalities which received funding pursuant to the previous fiscal year's annual appropriations act, provided further, however, that from the amount hereinabove appropriated there is transferred to the Energy Tax Receipts Property Tax Relief Fund account such sums as were determined for fiscal year 2003, fiscal year 2006, fiscal year 2007, fiscal year 2008, fiscal year 2009, fiscal year 2010, fiscal year 2012, and fiscal year 2013 pursuant to subsection e. of section 2 of P.L.1997, c.167 (C.52:27D-439) as amended by P.L.1999, c.168; and except that, the amount of Consolidated Municipal Property Tax Relief Aid received by a municipality shall be increased by such amounts of Transitional Aid to Localities deemed to constitute Consolidated Municipal Property Tax Relief Aid by the Director of the Division of Local Government Services in the previous fiscal year.

Notwithstanding the provisions of any law or regulation to the contrary, the Director of the Division of Local Government Services shall take such actions as may be necessary to ensure that proportional amounts of the Consolidated Municipal Property Tax Relief Aid and the amounts transferred from Consolidated Municipal Property Tax Relief Aid to the Energy Tax Receipts Property Tax Relief Fund account, appropriated to offset losses from business personal property tax that would have otherwise been used for the support of public schools, will be used to reduce the school property tax levy for those affected school districts with the remaining State Aid used as municipal property tax relief. The chief financial officer of the municipality shall pay to the school districts such amounts as may be due by December 31.

Notwithstanding the provisions of any law or regulation to the contrary, the release of the final 5% or \$500, whichever is greater, of the total annual amount due for the current fiscal year from Consolidated Municipal Property Tax Relief Aid to municipalities is subject to the following condition: the municipality shall submit to the Director of the Division of Local Government Services a report describing the municipality's compliance with the "Best Practices Inventory" established by the Director of the Division of Local Government Services and shall receive at least a minimum score on such inventory as determined by the Director of the Division of Local Government Services; provided, however, that the Director may take into account the particular circumstances of a municipality in computing such score. In preparing the Best Practices Inventory, the Director shall identify best municipal practices in the areas of general administration, fiscal management, and operational activities, as well as the particular circumstances of a municipality, in determining the minimum score acceptable for the release of the final 5% or \$500, whichever is greater, of the total annual amount due for the current fiscal year, but in no event shall amounts be withheld with respect to municipal practices occurring prior to the issuance of the Best Practices Inventory unless related to a municipal practice identified in the Best Practices Inventory established in the previous fiscal year.

The Director of the Division of Local Government Services may permit any municipality that received Regional Efficiency Aid Program funds pursuant to the annual

appropriations act for fiscal year 2010, P.L.2009, c.68, to use a portion of Consolidated Municipal Property Tax Relief Aid to provide Regional Efficiency Aid Program benefits pursuant to P.L.1999, c.61 (C.54:4-8.76 et seq.).

Notwithstanding the provisions of any law or regulation to the contrary, payments to municipalities in lieu of taxes for lands acquired by the State and non-profit organizations for recreation and conservation purposes shall be provided only to municipalities whose payments received in fiscal year 2010 exceeded \$5,000 and shall be provided at two-thirds of the payment amount provided in fiscal year 2010.

Notwithstanding the provisions of subsection d. of section 29 of P.L.1999, c.152 (C.13:8C-29) or subsection d. of section 30 of P.L.1999, c.152 (C.13:8C-30), or any law or regulation to the contrary, all payments to municipalities in lieu of taxes for lands acquired by the State and non-profit organizations for recreation and conservation purposes shall be retained by the municipality and not apportioned in the same manner as the general tax rate of the municipality.

In addition to the amounts hereinabove appropriated for the Department of Community Affairs, in the case of municipalities that consolidate pursuant to any law, including but not limited to P.L.2007, c.63 (C.40A:65-25 et seq.) or a municipality that is wholly annexed by another municipality pursuant to N.J.S.40A:7-1 et seq., there is appropriated such additional sums for non-recurring costs that the Director of the Division of Local Government Services determines necessary to implement such consolidation or annexation, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, whenever funds are appropriated as State Aid and payable to any municipality, which municipality requests and receives the approval of the Local Finance Board, such funds may be pledged as a guarantee for payment of principal and interest on any bond anticipation notes issued pursuant to section 11 of P.L.2003, c.15 (C.40A:2-8.1) and any tax anticipation notes issued pursuant to N.J.S.40A:4-64 by such municipality. Such funds, if so pledged, shall be made available by the State Treasurer upon receipt of a written notification by the Director of the Division of Local Government Services that the municipality does not have sufficient funds available for prompt payment of principal and interest on such notes, and shall be paid by the State Treasurer directly to the holders of such notes at such time and in such amounts as specified by the Director, notwithstanding that payment of such funds does not coincide with any date for payment otherwise fixed by law.

The State Treasurer, in consultation with the Commissioner of Community Affairs, is empowered to direct the Director of the Division of Budget and Accounting to transfer appropriations from any State department to any other State department as may be necessary to provide a loan for a term not to exceed 30 days to a municipality faced with a fiscal crisis, including but not limited to a potential default on tax anticipation notes. Extension of the term of the loan shall be conditioned on the municipality being an "eligible municipality" pursuant to P.L.1987, c.75 (C.52:27D-118.24 et seq.).

70 Government Direction, Management, and Control**76 Management and Administration****DIRECT STATE SERVICES**

49-8049 Historic Trust.....	\$630,000
99-8070 Administration and Support Services	<u>2,745,000</u>
Total Direct State Services Appropriation, Management and Administration	<u>\$3,375,000</u>

Direct State Services:**Personal Services:**

Salaries and Wages	(\$2,020,000)
Materials and Supplies.....	(8,000)
Services Other Than Personal	(74,000)
Maintenance and Fixed Charges	(21,000)

Special Purpose:

49 Historic Trust/Open Space Administrative Costs.....	(630,000)
99 Government Records Council	(622,000)

The amount hereinabove appropriated for the Historic Trust/Open Space Administrative Costs program is appropriated for all administrative costs and expenses pursuant to the "New Jersey Cultural Trust Act," P.L.2000, c.76 (C.52:16A-72 et seq.); the "Garden State Preservation Trust Act," P.L.1999, c.152 (C.13:8C-1 et seq.); the "Historic Preservation Revolving Loan Fund," P.L.1991, c.41 (C.13:1B-15.115a et seq.); the "Green Acres, Clean Water, Farmland and Historic Preservation Bond Act of 1992," P.L.1992, c.88; the "Green Acres, Farmland and Historic Preservation, and Blue Acres Bond Act of 1995," P.L.1995, c.204; the "Green Acres, Farmland, Blue Acres, and Historic Preservation Bond Act of 2007," P.L.2007, c.119, and the "Green Acres, Water Supply and Floodplain Protection, and Farmland and Historic Preservation Bond Act of 2009," P.L.2009, c.117, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, the amount hereinabove appropriated for the Historic Trust/Open Space Administrative Costs account is transferred from the Garden State Historic Preservation Trust Fund, the 2007 Historic Preservation Fund, and the 2009 Historic Preservation Fund to the General Fund, together with an amount not to exceed \$5,000, and is appropriated to the Department of Community Affairs for Historic Trust/Open Space Administrative Costs, subject to the approval of the Director of the Division of Budget and Accounting.

Department of Community Affairs, Total State Appropriation..... \$750,918,000

All moneys comprising original bond proceeds or the repayment of loans or advances from the Mortgage Assistance Fund established under the "New Jersey Mortgage Assistance Bond Act of 1976," P.L.1976, c.94, are appropriated in accordance with the purposes set forth in section 5 of that act.

Notwithstanding the provisions of any law or regulation to the contrary, deposits of any funds into the Revolving Housing Development and Demonstration Grant Fund are subject to prior approval of the Director of the Division of Budget and Accounting.

Summary of Department of Community Affairs Appropriations
(For Display Purposes Only)

Appropriations by Category:

Direct State Services.....	\$38,457,000
Grants-in-Aid.....	38,140,000
State Aid.....	674,321,000

Appropriations by Fund:

General Fund.....	\$190,857,000
Property Tax Relief Fund	560,061,000

26 DEPARTMENT OF CORRECTIONS

10 Public Safety and Criminal Justice

16 Detention and Rehabilitation

DIRECT STATE SERVICES

07-7040 Institutional Control and Supervision.....	\$497,144,000
08-7040 Institutional Care and Treatment	234,117,000
99-7040 Administration and Support Services	<u>76,412,000</u>
Total Direct State Services Appropriation, Detention and Rehabilitation.....	<u>\$807,673,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$547,966,000)
Food in Lieu of Cash.....	(2,506,000)
Materials and Supplies.....	(70,311,000)
Services Other Than Personal.....	(146,229,000)
Maintenance and Fixed Charges.....	(11,232,000)

Special Purpose:

07 Civilly Committed Sexual Offender Program	(28,314,000)
08 State Match - Residential Substance Abuse Treatment Grant.....	(26,000)
08 State Match - Social Services Block Grant	(33,000)
08 State Match - Violence Against Women Grant.....	(26,000)

Additions, Improvements and Equipment

(1,030,000)
The unexpended balances at the end of the preceding fiscal year in the Civilly Committed Sexual Offender Program account is appropriated for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts derived from the Upholstery Program at the Albert C. Wagner Youth Correctional Facility, and any unexpended balance at the end of the preceding fiscal year are appropriated for the operation of the program with surplus funds being credited to the institution's Inmate Welfare Fund, subject to the approval of the Director of the Division of Budget and Accounting.

Of the amount hereinabove appropriated in the Detention and Rehabilitation various institutional accounts, an amount may be transferred to the Purchase of Community Services account or to other programs that reduce the number of inmates housed in State facilities, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, the amounts hereinabove appropriated for payment of inmate health care are available for the payment of obligations applicable to prior fiscal years.

7025 System-Wide Program Support

DIRECT STATE SERVICES

07-7025 Institutional Control and Supervision	\$25,821,000
13-7025 Institutional Program Support	<u>35,963,000</u>
Total Direct State Services Appropriation, System-Wide	
Program Support	<u>\$61,784,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$36,910,000)
Materials and Supplies	(1,169,000)
Services Other Than Personal	(12,278,000)

Special Purpose:

13 Integrated Information Systems	(8,039,000)
13 State Match - Prison Rape Elimination Grant	(200,000)
13 Offender Re-entry Program	(1,000,000)
13 Mutual Agreement Program	(1,162,000)
13 DOC/DOT Work Details	(537,000)
13 Video Teleconferencing	(172,000)
13 Additions, Improvements and Equipment	(317,000)

GRANTS-IN-AID

13-7025 Institutional Program Support	<u>\$68,759,000</u>
Total Grants-in-Aid Appropriation, System-Wide	
Program Support	<u>\$68,759,000</u>

Grants-in-Aid:

13 Purchase of Service for Inmates	
Incarcerated in County Penal Facilities	(\$4,125,000)
13 Purchase of Service for Inmates	
Incarcerated In Out-Of-State Facilities	(80,000)
13 Purchase of Community Services	(64,554,000)

Of the amount hereinabove appropriated for Purchase of Service for Inmates Incarcerated in County Penal Facilities, an amount may be transferred for operational costs of State facilities for inmate housing, which become ready for occupancy and other programs which reduce the number of State inmates in county facilities, subject to the approval of the Director of the Division of Budget and Accounting.

The unexpended balance at the end of the preceding fiscal year in the Purchase of Service for Inmates Incarcerated in County Penal Facilities account is appropriated for the same purpose.

Notwithstanding the provisions of any law or regulation to the contrary, the amount hereinabove appropriated for Purchase of Community Services shall be subject to the following condition: in order to permit flexibility and efficiency in the housing of State inmates, the operational capacity of the Residential Community Release Program, as a place of confinement, shall be determined by the Commissioner of Corrections as authorized by section 2 of P.L.1969, c.22 (C.30:4-91.2), subject to the approval of the Director of the Division of Budget and Accounting.

The amounts hereinabove appropriated for the Purchase of Community Services is conditioned upon the following: the Commissioner of Corrections shall report to the Presiding Officers of the Legislature in accordance with section 2 of P.L.1991, c.164 (C.52:14-19.1) on the operation of each Community Based Residential Placement. The report shall include, but not be limited to, the following: (a) the total reimbursement provided, (b) the rate of reimbursement received per client, (c) the number of clients for which reimbursement was received, (d) the number of clients imprisoned for violent crimes and the total number of days such clients were imprisoned, (e) the number of clients imprisoned for non-violent crimes and the total number of days such clients were imprisoned, (f) the number of escapes by clients imprisoned for violent crimes and the number of escapes by clients imprisoned for non-violent crimes, (g) the number of incidents involving physical violence documented.

STATE AID

13-7025 Institutional Program Support	<u>\$20,500,000</u>
Total State Aid Appropriation, System-Wide Program Support	<u>\$20,500,000</u>

State Aid:

13 Essex County - County Jail Substance Abuse Programs	(\$18,000,000)
13 Union County Inmate Rehabilitation Services	(2,500,000)

10 Public Safety and Criminal Justice

17 Parole

DIRECT STATE SERVICES

03-7010 Parole.....	\$45,877,000
05-7280 State Parole Board	14,359,000
99-7280 Administration and Support Services	<u>3,784,000</u>
Total Direct State Services Appropriation, Parole.....	<u>\$64,020,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$39,432,000)
Materials and Supplies.....	(535,000)
Services Other Than Personal	(2,310,000)
Maintenance and Fixed Charges	(1,029,000)

Special Purpose:

03 Parolee Electronic Monitoring Program.....	(4,165,000)
03 Supervision, Surveillance, and Gang Suppression Program	(1,580,000)
03 Sex Offender Management Unit.....	(9,271,000)
03 Satellite-based Monitoring of Sex Offenders	(2,619,000)
03 Parole Violator Assessment and Treatment Program	(3,029,000)
03 Additions, Improvements and Equipment	(50,000)

GRANTS-IN-AID

03-7010 Parole.....	<u>\$36,082,000</u>
Total Grants-in-Aid Appropriation, Parole	<u>\$36,082,000</u>

Grants-in-Aid:

03 Re-Entry Substance Abuse Program	(\$8,889,000)
03 Mutual Agreement Program (MAP).....	(2,618,000)
03 Community Resource Center Program (CRC)	(11,581,000)
03 Stages to Enhance Parolee Success Program (STEPS).....	(12,994,000)

Any change by the Division of Parole in the per diem rates affecting Special Caseload accounts shall first be approved by the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, the New Jersey State Parole Board is authorized to expend the amounts appropriated for the Re-Entry Substance Abuse Program, the Stages to Enhance Parolee Success Program, the Mutual Agreement Program, and the Community Resource Center Program to provide services to ex-offenders who are age 18 or older and under juvenile or adult parole supervision, subject to the approval of the Director of the Division of Budget and Accounting.

Of the amounts hereinabove appropriated for the Mutual Agreement Program (MAP), the amount of \$175,000 shall be transferred to the Department of Human Services, Division of Mental Health and Addiction Services for the reimbursement of salaries and to fund other related administrative costs for the Mutual Agreement Program, subject to the approval of the Director of the Division of Budget and Accounting.

To permit flexibility and ensure the appropriate levels of services are provided, appropriated amounts may be transferred between the following accounts: Parole Viola-

tor Assessment and Treatment Program, Re-Entry Substance Abuse Program, Mutual Agreement Program, Community Resource Center Program, and Stages to Enhance Parolee Success Program, subject to the approval of the Director of the Division of Budget and Accounting.

Of the amounts hereinabove appropriated for the Community Resource Center Program, an amount not to exceed \$3,000,000 may be transferred to the Department of Labor and Workforce Development, Employment and Training Services Program, for parolee employment services from contracted providers, subject to the approval of the Director of the Division of Budget and Accounting.

Of the amounts hereinabove appropriated for Grants-In-Aid, an amount not to exceed \$3,000,000 may be transferred to other State departments or agencies as directed by the Chairman of the State Parole Board to provide services to parolees as requested by the Governor's Task Force on Recidivism Reduction, subject to the approval of the Director of the Division of Budget and Accounting.

10 Public Safety and Criminal Justice

19 Central Planning, Direction, and Management

DIRECT STATE SERVICES

99-7000 Administration and Support Services \$18,163,000

Total Direct State Services Appropriation, Central

Planning, Direction, and Management \$18,163,000

Direct State Services:

Personal Services:

Salaries and Wages (\$14,239,000)

Materials and Supplies.....(583,000)

Services Other Than Personal.....(719,000)

Maintenance and Fixed Charges.....(676,000)

Special Purpose:

99 DOC State Match Account.....(50,000)

Additions, Improvements and Equipment(1,896,000)

Receipts derived from the Culinary Arts Vocational Program, and any unexpended balance at the end of the preceding fiscal year in that account, are appropriated for the operation of the program, subject to the approval of the Director of the Division of Budget and Accounting.

Department of Corrections, Total State Appropriation \$1,076,981,000

The unexpended balance at the end of the preceding fiscal year of funds held for the benefit of inmates in the several institutions, and such funds as may be received, are appropriated for the benefit of such inmates.

Payments received by the State from employers of prisoners on their behalf, as part of any work release program, are appropriated for the purposes provided under section 4 of P.L.1969, c.22 (C.30:4-91.4 et seq.).

Summary of Department of Corrections Appropriations
(For Display Purposes Only)

Appropriations by Category:

Direct State Services.....	\$951,640,000
Grants-in-Aid.....	104,841,000
State Aid.....	20,500,000

Appropriations by Fund:

General Fund	\$1,076,981,000

34 DEPARTMENT OF EDUCATION**30 Educational, Cultural, and Intellectual Development****31 Direct Educational Services and Assistance****GRANTS-IN-AID**

03-5120 Miscellaneous Grants-in-Aid.....	<u>\$30,000</u>
Total Grants-in-Aid Appropriation, Direct Educational Services and Assistance	<u>\$30,000</u>
Grants-in-Aid :	
03 Community Relations Committee of the United Jewish Federation of Metrowest	(\$30,000)

STATE AID

01-5120 General Formula Aid	\$7,525,695,000
(From General Fund	<u>\$616,482,000</u>)
(From Property Tax Relief Fund	<u>6,909,213,000</u>)
02-5120 Nonpublic School Aid	82,503,000
03-5120 Miscellaneous Grants-in-Aid.....	53,238,000
(From General Fund	<u>200,000</u>)
(From Property Tax Relief Fund	<u>53,038,000</u>)
07-5120 Special Education	<u>920,202,000</u>
(From General Fund	<u>50,000,000</u>)
(From Property Tax Relief Fund	<u>870,202,000</u>)
Total State Aid Appropriation, Direct Educational Services and Assistance	<u>\$8,581,638,000</u>
(From General Fund	<u>\$749,185,000</u>)
(From Property Tax Relief Fund	<u>7,832,453,000</u>)
Less:	
Assessment of EDA Debt Service	\$20,991,000
Growth Savings - Payment Changes	14,976,000
Total Deductions	<u>\$35,967,000</u>

Total State Aid Appropriation, Direct Educational
 Services and Assistance \$8,545,671,000
(From General Fund \$749,185,000)
(From Property Tax Relief Fund 7,796,486,000)

State Aid:

01 Equalization Aid (\$616,482,000)
 01 Equalization Aid (PTRF) (5,413,578,000)
 01 Educational Adequacy Aid (PTRF) (82,397,000)
 01 Security Aid (PTRF) (190,404,000)
 01 Adjustment Aid (PTRF) (556,064,000)
 01 Preschool Education Aid (PTRF) (633,670,000)
 01 School Choice (PTRF) (33,100,000)
 02 Nonpublic Textbook Aid (7,993,000)
 02 Nonpublic Handicapped Aid (26,240,000)
 02 Nonpublic Auxiliary Services Aid (31,649,000)
 02 Nonpublic Auxiliary/Handicapped
 Transportation Aid (2,469,000)
 02 Nonpublic Nursing Services Aid (11,152,000)
 02 Nonpublic Technology Initiative (3,000,000)
 03 Charter School Aid (PTRF) (13,100,000)
 03 Bridge Loan Interest and Approved
 Borrowing Cost (200,000)
 03 Payments for Institutionalized Children -
 Unknown District of Residence (PTRF) (39,938,000)
 07 Special Education Categorical Aid (PTRF) (757,471,000)
 07 Extraordinary Special Education Costs Aid (50,000,000)
 07 Extraordinary Special Education
 Costs Aid (PTRF) (112,731,000)

Less:

Deductions 35,967,000

Of the amount hereinabove appropriated for Equalization Aid, an amount equal to the total earnings of investments of the Fund for the Support of Free Public Schools shall first be charged to such fund.

Receipts from nonpublic schools handicapped and auxiliary recoveries are appropriated for the payment of additional aid in accordance with section 17 of P.L.1977, c.192 (C.18A:46A-14) and section 14 of P.L.1977, c.193 (C.18A:46-19.8).

Notwithstanding the provisions of section 14 of P.L.1977, c.193 (C.18A:46-19.8), for the purpose of computing Nonpublic Handicapped Aid for pupils requiring the following services, the per pupil amounts for the 2012-2013 school year shall be: \$1,326.17 for an initial evaluation or reevaluation for examination and classification; \$380 for an annual review for examination and classification; \$930 for speech correction; and \$826 for supplementary instruction services, provided however,

that the commissioner may adjust the per pupil amounts based upon the nonpublic pupil population and the need for services.

Notwithstanding the provisions of section 9 of P.L.1977, c.192 (C.18A:46A-9), the per pupil amount for compensatory education for the 2012-2013 school year for the purposes of computing Nonpublic Auxiliary Services Aid shall equal \$995.33 and the per pupil amount for providing the equivalent service to children of limited English-speaking ability shall be \$1,015, provided however, that the commissioner may adjust the per pupil amounts based upon the nonpublic pupil population and the need for services.

Notwithstanding the provisions of section 9 of P.L.1991, c.226 (C.18A:40-31), the amount hereinabove appropriated for Nonpublic Nursing Services Aid shall be made available to local school districts based upon the number of pupils enrolled in each nonpublic school on the last day prior to October 16, 2011 and the rate per pupil shall be \$77.20.

Items purchased for the use of nonpublic school students with Nonpublic Technology Initiative funds in previous budget cycles shall remain the property of the local education agency; provided however, that they shall remain on permanent loan for the use of nonpublic school students for the balance of the technologies' useful life.

Notwithstanding the provisions of any other law or regulation to the contrary, Nonpublic Technology Initiative Aid shall be paid to school districts and allocated for nonpublic school pupils at the rate of \$20 per pupil in a manner that is consistent with the provisions of the federal and State constitutions.

Notwithstanding the provisions of any law or regulation to the contrary, there are appropriated to the Emergency Fund account such additional sums as may be required, not to exceed \$650,000, to fund approved applications for emergency aid in accordance with the provisions of N.J.S.18A:58-11, subject to the approval of the Director of the Division of Budget and Accounting.

Such sums received in the "School District Deficit Relief Account," established pursuant to section 5 of P.L.2006, c.15 (C.18A:7A-58), including loan repayments, are appropriated, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of P.L.1999, c.12 (C.54A:9-25.12 et seq.), there is appropriated from the Drug Abuse Education Fund, the sum of \$50,000, to be used for the NJSIAA Steroid Testing program.

The amount hereinabove appropriated for Extraordinary Special Education Costs Aid shall be charged first to receipts of the supplemental fee established pursuant to section 2 of P.L.2003, c.113 (C.46:15-7.1) credited to the Extraordinary Aid Account. Notwithstanding the provisions of that law to the contrary, the amount appropriated for Extraordinary Special Education Costs Aid from receipts deposited in the Extraordinary Aid Account shall not exceed the amount hereinabove appropriated. Notwithstanding the provisions of any law or regulation to the contrary, of the amount hereinabove appropriated for Extraordinary Special Education Costs Aid, such sums as the Director of the Division of Budget and Accounting may determine

shall be charged first to the Property Tax Relief Fund instead of receipts deposited in the Extraordinary Aid Account.

Notwithstanding the provisions of any law or regulation to the contrary, the allocation of the amount hereinabove appropriated for Equalization Aid to an "SDA district" shall be reduced by the amount of proceeds received by the district from the sale of district surplus property, which shall be appropriated by the district for regular education operations. Surplus property means that property which is not being replaced by other property under a grant agreement with the New Jersey Schools Development Authority.

Notwithstanding the provisions of any law or regulation to the contrary, the preschool per pupil aid amounts set forth in subsection d. of section 12 of P.L.2007, c.260 (C.18A:7F-54) shall be adjusted by the geographic cost adjustment developed by the commissioner pursuant to P.L.2007, c.260.

Notwithstanding the provisions of any law or regulation to the contrary, amounts hereinabove appropriated for Preschool Education Aid shall be used for such sums as are necessary: (1) in the case of a district that received Early Launch to Learning Initiative aid in the 2007-2008 school year, an amount equal to the district's 2007-2008 allocation of Early Launch to Learning Initiative aid; (2) in the case of a school district that received a 2008-2009 allocation of Preschool Education Aid based on its 2007-2008 Early Childhood Program Aid allocation, an aid amount equal to the district's 2011-2012 per pupil allocation of Preschool Education Aid, inflated by CPI and multiplied by the district's projected preschool enrollment; and (3) in the case of any other district with an allocation of Preschool Education Aid in the 2011-2012 school year calculated using the provisions of section 12 of P.L.2007, c.260 (C.18A:7F-54), an amount calculated in accordance with those provisions based upon 2012-2013 projected enrollments.

Notwithstanding the provisions of any law or regulation to the contrary, amounts hereinabove appropriated for Charter School Aid shall be used for such sums as are necessary: (1) in the case of a charter school with higher enrollment in the 2012-2013 school year than in the 2007-2008 school year, to provide that in the 2012-2013 school year, the charter school receives no less total support from the State and the resident district than the sum of the total 2007-2008 payments from the resident district and the 2007-2008 payments of Charter School Aid and Charter Schools - Council on Local Mandates Aid and to ensure that such total payments provide a 2012-2013 per pupil amount that is no less than the 2007-2008 per pupil amount based on average daily enrollment; (2) in the case of a charter school with lower enrollment in the 2012-2013 school year than in the 2007-2008 school year, to ensure that such total payments provide a 2012-2013 per pupil amount that is no less than the 2007-2008 per pupil amount based on average daily enrollment; and (3) to provide amounts pursuant to section 12 of P.L.1995, c.426 (C.18A:36A-12).

Notwithstanding the provisions of section 3 of P.L.1971, c.271 (C.18A:46-31), a portion of the district tuition amounts payable to a county special services school district operating an extended school year program may be transferred to the county special services school district prior to the first of September in the event the board shall file a written request with the Commissioner of Education stating the need for

the funds. The commissioner shall review the board's request and determine whether to grant the request after an assessment of whether the district needs to spend the funds prior to September and after considering the availability of district surplus. The commissioner shall transfer the payment for the portion of the tuition payable for which need has been demonstrated.

32 Operation and Support of Educational Institutions

DIRECT STATE SERVICES

12-5011 Marie H. Katzenbach School for the Deaf \$13,736,000
 (From General Fund \$3,590,000)
 (From All Other Funds 10,146,000)

13-5011 Positive Learning Understanding Support Program 879,000
 (From All Other Funds 879,000)

Total Appropriation, State and All Other Funds \$14,615,000
 (From General Fund \$3,590,000)
 (From All Other Funds 11,025,000)

Less:

All Other Funds \$11,025,000

Total Deductions \$11,025,000

Total Direct State Services Appropriation, Operation
 and Support of Educational Institutions \$3,590,000

Direct State Services:

Personal Services:

 Salaries and Wages (\$12,128,000)

Materials and Supplies (1,070,000)

Services Other Than Personal (446,000)

Maintenance and Fixed Charges (800,000)

Special Purpose:

 12 Transportation Expenses for Students (40,000)

Additions, Improvements and Equipment (131,000)

Less:

All Other Funds 11,025,000

Notwithstanding the provisions of N.J.S.18A:61-1 and N.J.S.18A:46-13, or any law or regulation to the contrary, in addition to the amount hereinabove appropriated to the Marie H. Katzenbach School for the Deaf for the current academic year, payments from local boards of education to the school at an annual rate and payment schedule adopted by the Commissioner of Education and the Director of the Division of Budget and Accounting are appropriated.

Any income from the rental of vacant space at the Marie H. Katzenbach School for the Deaf is appropriated for the operation and maintenance cost of the facility and for capital costs at the school, subject to the approval of the Director of the Division of Budget and Accounting.

The unexpended balance at the end of the preceding fiscal year in the receipt account of the Marie H. Katzenbach School for the Deaf is appropriated for expenses of operating the school.

The unexpended balance at the end of the preceding fiscal year in the receipt account of the Positive Learning Understanding Support (PLUS) Program is appropriated for the expenses of operating the Marie H. Katzenbach School for the Deaf.

CAPITAL CONSTRUCTION

Notwithstanding the provisions of any law or regulation to the contrary, accumulated and current year interest earnings in the State Facilities for Handicapped Fund established pursuant to section 12 of P.L.1973, c.149 are appropriated for capital improvements and maintenance of facilities for the ten regional day schools throughout the State and the Marie H. Katzenbach School for the Deaf as authorized in the State Facilities for Handicapped Bond Act, P.L.1973, c.149, subject to the approval of the Director of the Division of Budget and Accounting.

33 Supplemental Education and Training Programs

DIRECT STATE SERVICES

20-5062 General Vocational Education \$786,000

Total Direct State Services Appropriation,

Supplemental Education and Training Programs \$786,000

Direct State Services:

Personal Services:

Salaries and Wages (\$736,000)

Materials and Supplies (26,000)

Services Other Than Personal (24,000)

STATE AID

20-5062 General Vocational Education \$4,860,000

Total State Aid Appropriation,

Supplemental Education and Training Programs \$4,860,000

State Aid:

20 Vocational Education (\$4,860,000)

Of the amount hereinabove appropriated for General Vocational Education, an amount not to exceed \$367,000 is available for transfer to Direct State Services for the administration of vocational education programs, subject to the approval of the Director of the Division of Budget and Accounting.

34 Educational Support Services

DIRECT STATE SERVICES

30-5063 Standards, Assessments and Curriculum \$22,739,000

31-5060 Grants Management 546,000

32-5061 Teacher and Leader Effectiveness 4,310,000

33-5067 Service to Local Districts 6,282,000

34-5068 Innovation.....	1,647,000
35-5069 Early Childhood Education	1,618,000
36-5120 Student Transportation	424,000
37-5069 School Improvement	3,407,000
38-5120 Facilities Planning and School Building Aid.....	1,722,000
40-5064 Student Services	<u>1,437,000</u>
Total Direct State Services Appropriation, Educational Support Services.....	<u>\$44,132,000</u>

Direct State Services:**Personal Services:**

Salaries and Wages	(\$20,929,000)
Materials and Supplies.....	(244,000)
Services Other Than Personal	(1,987,000)
Maintenance and Fixed Charges	(63,000)

Special Purpose:

30 Statewide Assessment Program.....	(20,394,000)
30 General Education Development.....	(351,000)
40 New Jersey Commission on Holocaust Education	(159,000)
40 Military Interstate Children's Compact Commission.....	(5,000)

Receipts from the State Board of Examiners' fees in excess of those anticipated, not to exceed \$1,200,000, and the unexpended program balances at the end of the preceding fiscal year, are appropriated for the operation of the Professional Development and Licensure programs.

GRANTS-IN-AID

30-5063 Standards, Assessments and Curriculum	\$1,620,000
40-5064 Student Services	<u>1,750,000</u>
Total Grants-in-Aid Appropriation, Educational Support Services.....	<u>\$3,370,000</u>

Grants-in-Aid:

30 Liberty Science Center - Educational Services	(\$1,350,000)
30 Governor's Literacy Initiative	(270,000)
40 New Jersey After 3	(750,000)
40 Grants for After School and Summer Activities for At-Risk Children	(1,000,000)

The amount hereinabove appropriated for the Liberty Science Center - Educational Services shall be used to provide educational services to districts with high concentrations of at-risk students in the science education component of the core curriculum content standards as established by law.

The amount hereinabove appropriated for the Governor's Literacy Initiative shall be used for a grant for the Learning Through Listening program at the New Jersey Unit of Learning Ally, formerly known as Recording for the Blind and Dyslexic.

STATE AID

36-5120 Student Transportation	\$184,930,000
<i>(From Property Tax Relief Fund</i>	<i>\$184,930,000)</i>
38-5120 Facilities Planning and School Building Aid.....	560,611,000
<i>(From General Fund</i>	<i>112,000,000)</i>
<i>(From Property Tax Relief Fund</i>	<i>448,611,000)</i>
39-5095 Teachers' Pension and Annuity Assistance	<u>2,416,787,000</u>
<i>(From Property Tax Relief Fund</i>	<i>2,416,787,000)</i>
Total State Aid Appropriation, Educational	
Support Services	<u>\$3,162,328,000</u>
<i>(From General Fund</i>	<i>\$112,000,000)</i>
<i>(From Property Tax Relief Fund</i>	<i>3,050,328,000)</i>

State Aid:

36 Transportation Aid (PTRF)	(\$184,930,000)
38 School Building Aid (PTRF)	(73,739,000)
38 School Construction Debt Service Aid (PTRF)	(58,033,000)
38 School Construction and Renovation Fund	(112,000,000)
38 School Construction and Renovation Fund	
(PTRF)	(316,839,000)
39 Teachers' Pension and Annuity Fund -	
Post Retirement Medical (PTRF)	(722,362,000)
39 Teachers' Pension and Annuity Fund (PTRF)	(612,433,000)
39 Social Security Tax (PTRF)	(738,500,000)
39 Teachers' Pension and Annuity Fund -	
Non-contributory Insurance (PTRF)	(32,564,000)
39 Post Retirement Medical Other Than TPAF	
(PTRF)	(155,341,000)
39 Debt Service on Pension Obligation Bonds	
(PTRF)	(155,587,000)

In addition to the sum hereinabove appropriated for the School Construction and Renovation Fund account to make payments under the contracts authorized pursuant to section 18 of P.L.2000, c.72 (C.18A:7G-18), there are hereby appropriated such other sums as the Director of the Division of Budget and Accounting shall determine are required to pay all amounts due from the State pursuant to such contracts.

The unexpended balance at the end of the preceding fiscal year in the School Construction and Renovation Fund account is appropriated for the same purpose.

Notwithstanding the provisions of section 1 of P.L.1997, c.53 (C.18A:39-11.1) districts shall not be reimbursed for administrative fees paid to Cooperative Transportation Service Agencies.

For any school district receiving amounts from the amount hereinabove appropriated for Transportation Aid, and notwithstanding the provisions of any law or regulation to the contrary, if the school district is located in a county of the third class or a county of the second class with a population of less than 235,000, according to

the 1990 federal decennial census, transportation shall be provided to school pupils residing in this school district in going to and from any remote school other than a public school, not operated for profit in whole or in part, located within the State not more than 30 miles from the residence of the pupil.

Notwithstanding the provisions of section 2 of P.L.1981, c.57 (C.18A:39-1a) or any other law or regulation to the contrary, the maximum amount of nonpublic school transportation costs per pupil provided for in N.J.S.18A:39-1 shall equal \$884.00.

Of the amounts hereinabove appropriated for School Building Aid and School Construction Debt Service Aid, the calculation of each eligible district's allocation shall include the amount based on school bond and lease purchase agreement payments for interest and principal payable during the 2012-2013 school year pursuant to sections 9 and 10 of P.L.2000, c.72 (C.18A:7G-9 and C.18A:7G-10) and the adjustments required for prior years based on the difference between the amounts calculated using actual principal and interest amounts in a prior year and the amounts allocated and paid in that prior year.

Notwithstanding the provisions of any law or regulation to the contrary, an eligible district's allocation of the amounts hereinabove appropriated for School Construction Debt Service Aid and School Building Aid shall be 85% of the district's approved November 1, 2011 application amount.

Notwithstanding the provisions of any law or regulation to the contrary, of the amounts hereinabove appropriated for School Building Aid, a district's district aid percentage calculated for purposes of the provisions of section 10 of P.L.2000, c.72 (C.18A:7G-10) shall equal the percentage calculated for the 2001-2002 school year.

Notwithstanding the provisions of any law or regulation to the contrary, when calculating a district's allocation of the amount hereinabove appropriated for School Construction Debt Service Aid, the provisions of subsection d. of section 9 of P.L.2000, c.72 (C.18A:7G-9) shall also be applicable for a school facilities project approved by the commissioner and by the voters in a referendum after the effective date of P.L.2000, c.72 (C.18A:7G-1 et al.) and prior to the effective date of P.L.2008, c.39 (C.18A:7G-14.1 et al.).

Notwithstanding the provisions of section 9 of P.L.2000, c.72 (C.18A:7G-9) or any other law or regulation to the contrary, for the purpose of calculating a district's State debt service aid, "M", the maintenance factor, shall equal 1.

In addition to the sum hereinabove appropriated for the School Construction and Renovation Fund account to make payments under the contracts authorized pursuant to section 18 of P.L.2000, c.72 (C.18A:7G-18), there are hereby appropriated such other sums as the Director of the Division of Budget and Accounting shall determine are required to pay all amounts due from the State pursuant to such contracts.

The unexpended balance at the end of the preceding fiscal year in the School Construction and Renovation Fund account is appropriated for the same purpose.

Such additional sums as may be required for Teachers' Pension and Annuity Fund - Post Retirement Medical are appropriated, as the Director of the Division of Budget and Accounting shall determine.

Notwithstanding the provisions of any law or regulation to the contrary, of the amount hereinabove appropriated for Social Security Tax, there is appropriated such amounts, as determined by the Director of the Division of Budget and Accounting, to make payments on behalf of school districts that do not receive sufficient State formula aid payments under this act, for amounts due and owing to the State including out-of-district placements and such amounts shall be recognized by the school district as State revenue.

In addition to the amounts hereinabove appropriated for Social Security Tax, there are appropriated such sums as are required for payment of Social Security Tax on behalf of members of the Teachers' Pension and Annuity Fund.

Such additional sums as may be required for the Teachers' Pension and Annuity Fund - Non-contributory Insurance and Post Retirement Medical Other Than TPAF are appropriated, as the Director of the Division of Budget and Accounting shall determine.

35 Education Administration and Management

DIRECT STATE SERVICES

41-5092 Data, Research Evaluation and Reporting	\$683,000
42-5120 School Finance	3,281,000
43-5092 Office of Fiscal Accountability and Compliance	2,976,000
99-5095 Administration and Support Services	<u>12,247,000</u>
Total Direct State Services Appropriation, Education	
Administration and Management	<u>\$19,187,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$17,330,000)
Materials and Supplies.....	(200,000)
Services Other Than Personal.....	(1,056,000)
Maintenance and Fixed Charges.....	(36,000)

Special Purpose:

43 Internal Auditing	(500,000)
99 State Board of Education Expenses	(65,000)

Receipts derived from fees for school district personnel background checks and unexpended balances at the end of the preceding fiscal year of such receipts are appropriated for the operation of the criminal history review program.

The unexpended balance at the end of the preceding fiscal year in the Student Registration and Record System account is appropriated for the same purpose.

Costs attributable to EdSmart and EasyIEP, as well as required enhancements to the Statewide longitudinal data system, shall be paid from revenue received from the Special Education Medicaid Initiative (SEMI) program and are appropriated for these purposes to the Student Registration and Record System account upon recommendation from the Commissioner of Education, subject to the approval of the Director of the Division of Budget and Accounting.

In the event that revenues received from the Special Education Medicaid Initiative (SEMI) program are insufficient to satisfy costs attributable to EdSmart and EasyIEP, as well as required enhancements to the Statewide longitudinal data system, there are appropriated to the Student Registration and Record System account such sums as may be required as the Director of the Division of Budget and Accounting shall determine.

Department of Education, Total State Appropriation..... \$11,783,954,000

Of the amount hereinabove appropriated from the General Fund for the Department of Education, or otherwise available from federal sources, there are appropriated funds to establish a School Security Planning and Assurance Unit within the Department of Education, staffed to plan, coordinate, and conduct an on-going comprehensive security assessment and vulnerability reduction program for school sites Statewide, in collaboration with schools and law enforcement, subject to the approval of the Director of the Division of Budget and Accounting.

Of the amount hereinabove appropriated for the Department of Education, such sums as the Director of the Division of Budget and Accounting shall determine from the schedule included in the Governor's Budget Message and Recommendations shall first be charged to the State Lottery Fund.

In the event that sufficient funds are not appropriated to fully fund any State Aid item, the Commissioner of Education shall apportion such appropriation among the districts in proportion to the State Aid each district would have been apportioned had the full amount of State Aid been appropriated.

Notwithstanding the provisions of any law or regulation to the contrary, should appropriations in the Property Tax Relief Fund exceed available revenues, the Director of the Division of Budget and Accounting is authorized to transfer General Fund revenues into the Property Tax Relief Fund, provided that unrestricted balances are available from the General Fund, as determined by the Director of the Division of Budget and Accounting.

The Director of the Division of Budget and Accounting may transfer from one State Aid appropriations account for the Department of Education in the General Fund to another appropriations account in the same department in the Property Tax Relief Fund such funds as are necessary to effect the intent of the provisions of the appropriations act governing the allocation of State Aid to local school districts and to effect the intent of legislation enacted subsequent to the enactment of the appropriations act, provided that sufficient funds are available in the appropriations for that department.

Notwithstanding the provisions of section 8 of P.L.1996, c.138 (C.18A:7F-8), the June school aid payments are subject to the approval of the State Treasurer.

From the amounts hereinabove appropriated, such sums as are required to satisfy delayed June 2012 school aid payments are appropriated and the State Treasurer is hereby authorized to make such payment in July 2012, as adjusted for any amounts due and owing to the State as of June 30, 2012.

- Notwithstanding the provisions of any law or regulation to the contrary, payments from amounts hereinabove appropriated for State Aid may be made directly to the district bank account for the repayment of principal and interest and other costs, when authorized under the terms of a promissory note entered into under the provisions of section 1 of P.L.2003, c.97 (C.18A:22-44.2).
- Notwithstanding the provisions of any law or regulation to the contrary, "non-SDA" districts that received their State support for approved project costs through the New Jersey Schools Development Authority will be assessed an amount that represents 15% of their proportionate share of the required interest and principal payments in fiscal 2013 on the bonds issued as of December 31, 2011 by the New Jersey Economic Development Authority for the program. The district's assessment will be determined by the commissioner based on the district's proportionate share of the amounts expended by the New Jersey Schools Development Authority from the inception of the program through December 31, 2011, less reimbursements for those costs funded by school districts. District allocations will be withheld from 2012-2013 formula aid payments and the assessment cannot exceed the total of those payments.
- Notwithstanding the provisions of any other law or regulation to the contrary, a district's 2012-2013 allocation of the amount hereinabove appropriated for Equalization Aid, Special Education Categorical Aid, Security Aid, Preschool Education Aid, Transportation Aid, Adjustment Aid, and School Choice Aid shall be as set forth in the February 23, 2012 State aid notice issued by the Commissioner of Education, or in the case of School Choice Aid, as adjusted by the Commissioner of Education as of March 6, 2012.
- Notwithstanding the provisions of subsection a. of section 5 of P.L.1996, c.138 (C.18A:7F-5) or any other law or regulation to the contrary, no adjustments shall be made to State Aid amounts payable during the 2012-2013 school year based on adjustments to the 2011-2012 allocations using actual pupil counts.
- Notwithstanding the provisions of any law or regulation to the contrary, any school district receiving a final judgment or order against the State to assume the fiscal responsibility for the residential placement of a special education student shall have the amount of the judgment or order deducted from the State aid to be allocated to that district.
- Notwithstanding the provisions of any law or regulation to the contrary, the Commissioner of Education may reduce the total State Aid amount payable for the 2012-2013 school year for a district in which an independent audit of the 2011-2012 school year conducted pursuant to N.J.S.18A:23-1 identifies any deviation from the Uniform Minimum Chart of Accounts after the recalculation of the district's actual Total Administrative Costs pursuant to N.J.A.C.6A:23A-8.3.
- Notwithstanding the provisions of any law or regulation to the contrary, the Commissioner of Education may withhold State Aid payments to a school district that has not submitted in final form the data elements requested for inclusion in a Statewide data warehouse within 60 days of the department's initial request or its request for additional information, whichever is later.

In the event that sufficient balances are not available in the "School District Deficit Relief Account" for amounts recommended by the Commissioner of Education to the State Treasurer for advance State Aid payments in accordance with P.L.2006, c.15 (C.18A:7A-54 et seq.), the Director of the Division of Budget and Accounting is authorized to transfer such sums as required from available balances in State Aid accounts.

Notwithstanding the provisions of "The State Facilities Education Act of 1979," P.L.1979, c.207 (C.18A:7B-1 et al.) and section 24 of P.L.1996, c.138 (C.18A:7F-24), or any law or regulation to the contrary, the amount of the Department of Education State aid appropriations made available to the Department of Human Services, the Department of Children and Families, the Department of Corrections or the Juvenile Justice Commission pursuant to P.L.1979, c.207 (C.18A:7B-1 et al.) to defray the costs of educating eligible children in approved facilities under contract with the applicable department shall be made at annual rate and payment schedule adopted by the Commissioner of Education and the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, tuition for pupils under contract for services at the Marie H. Katzenbach School for the Deaf, the Commission for the Blind and Visually Impaired, or in a regional day school operated by or under contract with the Department of Human Services or the Department of Children and Families shall be withheld from State Aid and paid to the respective department.

Notwithstanding the provisions of "The State Facilities Education Act of 1979," P.L.1979, c.207 (C.18A:7B-1 et al.) or any other law or regulation to the contrary, funding forwarded to the Juvenile Justice Commission pursuant to subsection c. of section 6 of P.L.1979, c.207 (C.18A:7B-2) may be used to support the costs of any student enrolled in a vocational education program or a General Educational Development Program.

The Director of the Division of Budget and Accounting may transfer from one appropriations account for the Department of Education in the Property Tax Relief Fund to another account in the same department and fund such funds as are necessary to effect the intent of the provisions of the appropriations act governing the allocation of State Aid to local school districts, provided that sufficient funds are available in the appropriations for that department.

Summary of Department of Education Appropriations
(For Display Purposes Only)

Appropriations by Category:

Direct State Services.....	\$67,695,000
Grants-in-Aid.....	3,400,000
State Aid	11,712,859,000

Appropriations by Fund:

General Fund	\$937,140,000
Property Tax Relief Fund	10,846,814,000

42 DEPARTMENT OF ENVIRONMENTAL PROTECTION**40 Community Development and Environmental Management****42 Natural Resource Management****DIRECT STATE SERVICES**

11-4870 Forest Resource Management	\$8,691,000
12-4875 Parks Management	32,563,000
13-4880 Hunters' and Anglers' License Fund	13,772,000
14-4885 Shellfish and Marine Fisheries Management	954,000
20-4880 Wildlife Management	364,000
21-4895 Natural Resources Engineering	1,218,000
24-4876 Palisades Interstate Park Commission	<u>2,707,000</u>
Total Direct State Services Appropriation, Natural Resource Management	<u>\$60,269,000</u>

Direct State Services:**Personal Services:**

Salaries and Wages	(\$38,346,000)
Employee Benefits	(3,192,000)
Materials and Supplies	(5,223,000)
Services Other Than Personal	(2,829,000)
Maintenance and Fixed Charges	(1,610,000)

Special Purpose:

11 Fire Fighting Costs	(2,259,000)
12 Green Acres/Open Space Administration	(5,228,000)
20 Endangered Species Tax Check-Off Donations	(364,000)
21 Dam Safety	(1,218,000)

In addition to the amount hereinabove appropriated for Forest Resource Management, an amount not to exceed \$500,000 shall be made available from the Water Resources Monitoring and Planning - Constitutional Dedication special purpose account to support nonpoint source pollution and watershed management programs in the Bureau of Forestry.

Notwithstanding the provisions of any law or regulation to the contrary, the amount hereinabove for the Green Acres/Open Space Administration account is transferred from the Garden State Preservation Trust Fund Account to the General Fund, together with an amount not to exceed \$272,000, and is appropriated to the Department of Environmental Protection for Green Acres/Open Space Administration, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts in excess of the amount anticipated from fees and permit receipts from the use of State park and marina facilities, and the unexpended balance at the end of the preceding fiscal year of such receipts, are appropriated for Parks Management, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts from police court, stands, concessions, and self-sustaining activities operated or supervised by the Palisades Interstate Park Commission, and the unexpended balance at the end of the preceding fiscal year of such receipts, are appropriated for the same purpose.

Of the amount hereinabove for the Hunters' and Anglers' License Fund, the first \$11,500,000 is appropriated out of that fund and any amount remaining therein and the unexpended balance at the end of the preceding fiscal year of the receipts in the Hunters' and Anglers' License Fund, together with any receipts in excess of the amount anticipated, are appropriated for the same purpose. If receipts to that fund are less than anticipated, the appropriation from the fund shall be reduced proportionately.

Pursuant to section 2 of P.L.1993, c.303 (C.23:3-1f), there are appropriated such sums as may be necessary to offset revenue losses associated with the issuance of free waterfowl stamps and hunting and fishing licenses to active members of the New Jersey National Guard and disabled veterans. The amount to be appropriated shall be certified by the Division of Fish and Wildlife and is subject to the approval of the Director of the Division of Budget and Accounting.

The amount hereinabove for the Endangered Species Tax Check-Off Donations account is payable out of receipts, and the unexpended balances in the Endangered Species Tax Check-Off Donations account at the end of the preceding fiscal year, together with receipts in excess of the amount anticipated, are appropriated for the same purpose. If receipts are less than anticipated, the appropriation shall be reduced proportionately.

In addition to the amount hereinabove appropriated for Shellfish and Marine Fisheries Management, an amount not to exceed \$1,100,000 is appropriated from balances in the Nuclear Emergency Response account for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.

An amount not to exceed \$4,442,000 is appropriated from the capital construction appropriation for Shore Protection Fund Projects for costs attributable to planning, operation, and administration of the shore protection program, subject to the approval of the Director of the Division of Budget and Accounting.

An amount not to exceed \$1,158,000 is appropriated from the capital construction appropriation for HR-6 Flood Control for costs attributable to the operation and administration of the State flood control program, subject to the approval of the Director of the Division of Budget and Accounting.

An amount not to exceed \$440,000 is appropriated from the capital construction appropriation for Shore Protection Fund Projects for the operation and maintenance of the Bayshore Flood Control facility.

In accordance with the "Dam, Lake, Stream, Flood Control, Water Resources, and Wastewater Treatment Project Bond Act of 2003," P.L.2003, c.162, an amount not to exceed \$68,000 is appropriated from the 2003 Dam, Lake, Stream and Flood Control Project Fund - Flood Control account for administrative costs attributable to flood control and an amount not to exceed \$255,000 is appropriated from the 2003 Dam, Lake and Stream Project Revolving Loan Fund - Dam Safety account for administrative costs attributable to dam safety, subject to the approval of the Director of the Division of Budget and Accounting.

Of the amount hereinabove appropriated for the Recreational Land Development and Conservation - Constitutional Dedication account, an amount not to exceed five percent of the appropriation shall be allocated for costs associated with the admini-

stration of the program pursuant to the amendments effective December 7, 2006 to Article VIII, Section II, paragraph 6 of the State Constitution.

The unexpended balance at the end of the preceding fiscal year in the Recreational Land Development and Conservation - Constitutional Dedication administrative account is appropriated for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.

There is appropriated to the Delaware and Raritan Canal Commission such sums as may be collected from permit review fees pursuant to P.L.2007, c.142, subject to the approval of the Director of the Division of Budget and Accounting.

There is appropriated to the Department of Environmental Protection from penalties collected under the "Safe Dam Act," P.L.1981, c.249 (C.58:4-8.1 et al.) and R.S.58:4-1 et seq., such sums as may be necessary to remove dams that may be abandoned, have disputed ownership, or are not in compliance with current inspection requirements or repair. The unexpended balance at the end of the preceding fiscal year of such receipts are appropriated to the Department of Environmental Protection for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.

In addition to the amount hereinabove appropriated for Forest Resource Management, there is appropriated \$800,000 from the New Jersey Motor Vehicle Commission.

GRANTS-IN-AID

12-4875 Parks Management	<u>\$2,125,000</u>
Total Grants-in-Aid Appropriation, Natural Resource Management	<u>\$2,125,000</u>

Grants-in-Aid:

12 Public Facility Programming	(\$2,125,000)

Loan repayments received from dam rehabilitation projects pursuant to P.L.1999, c.347, and any unexpended balance at the end of the preceding fiscal year are appropriated for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.

CAPITAL CONSTRUCTION

21-4895 Natural Resources Engineering	\$31,500,000
29-4875 Environmental Management - CBT Dedication	<u>16,840,000</u>
Total Capital Construction Appropriation, Natural Resource Management	<u>\$48,340,000</u>

Capital Construction:

Bureau of Parks:

29 Recreational Land Development and Conservation - Constitutional Dedication	(\$16,840,000)

Natural Resources Engineering:

21 Shore Protection Fund Projects	(25,000,000)
21 HR-6 Flood Control	(6,500,000)

The amount hereinabove appropriated for Shore Protection Fund Projects is payable from the receipts of the portion of the realty transfer fee directed to be credited to the Shore Protection Fund pursuant to section 1 of P.L.1992, c.148 (C.13:19-16.1).

An amount not to exceed \$500,000 is allocated from the capital construction appropriation for Shore Protection Fund Projects for repairs to the Bayshore Flood Control facility.

The amounts hereinabove appropriated for Recreational Land Development and Conservation - Constitutional Dedication shall be provided from revenue received from the corporation business tax, pursuant to the Corporation Business Tax Act (1945), P.L.1945, c.162 (C.54:10A-1 et seq.), as dedicated by Article VIII, Section II, paragraph 6 of the State Constitution.

Of the amount hereinabove appropriated for the Recreational Land Development and Conservation - Constitutional Dedication account, an amount not to exceed \$310,000 is appropriated to the Palisades Interstate Park Commission for costs associated with the capital improvement of recreational land, subject to the approval of the Director of the Division of Budget and Accounting.

40 Community Development and Environmental Management

43 Science and Technical Programs

DIRECT STATE SERVICES

05-4840 Water Supply	\$7,826,000
15-4890 Land Use Regulation	12,108,000
18-4810 Office of Science Support.....	250,000
29-4850 Environmental Management - CBT Dedication	<u>16,840,000</u>
Total Direct State Services Appropriation, Science and Technical Programs	<u>\$37,024,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$7,648,000)
Materials and Supplies.....	(38,000)
Services Other Than Personal	(2,170,000)
Maintenance and Fixed Charges	(69,000)

Special Purpose:

05 Administrative Costs Water Supply Bond Act of 1981 - Management	(2,433,000)
05 Administrative Costs Water Supply Bond Act of 1981 - Watershed and Aquifer	(1,810,000)
05 Water/Wastewater Operators Licenses.....	(43,000)
05 Safe Drinking Water Fund	(2,503,000)
15 Tidelands Peak Demands	(3,220,000)
18 Hazardous Waste Research	(250,000)
29 Water Resources Monitoring and Planning - Constitutional Dedication	(16,840,000)

- The amounts hereinabove appropriated for the Administrative Costs Water Supply Bond Act of 1981 - Management and Watershed and Aquifer accounts are appropriated from the "Water Supply Bond Act of 1981," P.L.1981, c.261, together with an amount not to exceed \$23,000, for costs attributable to administration of water supply programs, subject to the approval of the Director of the Division of Budget and Accounting.
- The amount hereinabove appropriated for the Safe Drinking Water Fund account is appropriated from receipts received pursuant to the "Safe Drinking Water Act," P.L.1977, c.224 (C.58:12A-1 et seq.), together with an amount not to exceed \$36,000, for administration of the Safe Drinking Water program, subject to the approval of the Director of the Division of Budget and Accounting. If receipts are less than anticipated, the appropriation shall be reduced proportionately.
- The amount hereinabove for the Hazardous Waste Research account is appropriated from interest earned by the New Jersey Spill Compensation Fund for research on the prevention and the effects of discharges of hazardous substances on the environment and organisms, on methods of pollution prevention and recycling of hazardous substances, and on the development of improved cleanup, removal, and disposal operations, subject to the approval of the Director of the Division of Budget and Accounting.
- The amount hereinabove appropriated for the Environmental Management - CBT Dedication program classification shall be provided from revenue received from the corporation business tax, pursuant to the Corporation Business Tax Act (1945), P.L.1945, c.162 (C.54:10A-1 et seq.), as dedicated by Article VIII, Section II, paragraph 6 of the State Constitution. The unexpended balance at the end of the preceding fiscal year in the Water Resources Monitoring and Planning - Constitutional Dedication special purpose account is appropriated to be used in a manner consistent with the requirements of the constitutional dedication.
- Notwithstanding the provisions of any law or regulation to the contrary, funds appropriated in the Water Resources Monitoring and Planning - Constitutional Dedication special purpose account shall be made available to support nonpoint source pollution and watershed management programs, consistent with the constitutional dedication, within the Department of Environmental Protection in the amounts of \$1,536,000 for Water Monitoring and Standards, \$1,007,000 for New Jersey Geological Survey, \$542,000 for Watershed Management, \$500,000 for Forest Resource Management, and \$790,000 for the Department of Agriculture to support the Conservation Cost Share program, at a level of \$540,000, and the Conservation Assistance Program, at a level of \$250,000, on or before September 1, 2012.
- Notwithstanding the provisions of the "Spill Compensation and Control Act," P.L.1976, c.141 (C.58:10-23.11 et seq.) and the "Safe Drinking Water Act," P.L.1977, c.224 (C.58:12A-1 et seq.), the Commissioner of the Department of Environmental Protection may utilize from the funds appropriated from those sources hereinabove such sums as the Commissioner may determine as necessary to broaden the department's research efforts to address emerging environmental issues.

In addition to the federal funds amount hereinabove appropriated for the Water Supply program classification, such additional sums that may be received from the federal government for the Drinking Water State Revolving Fund program are appropriated for the same purpose.

Receipts in excess of those anticipated for Water Allocation Fees, and the unexpended balance at the end of the preceding fiscal year of such receipts, are appropriated to the Department of Environmental Protection to offset the costs of the Water Supply program, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts in excess of the individual amounts anticipated for "Coastal Area Facility Review Act," P.L.1973, c.185 (C.13:19-1), Freshwater Wetlands, Stream Encroachment, Waterfront Development, and Wetlands fees, and the unexpended balance at the end of the preceding year of such receipts, are appropriated for administrative costs associated with Land Use Regulation, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts in excess of the amounts anticipated for Well Permits, Well Driller, Pump Installers Licenses, and the unexpended balances at the end of the preceding year of such receipts, are appropriated to the Department of Environmental Protection for the Water Supply program and for the private well testing program, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts in excess of the amount anticipated from fees from the water and wastewater operators licensing program, and the unexpended balances at the end of the preceding year of such receipts, are appropriated subject to the approval of the Director of the Division of Budget and Accounting.

In addition to the amount hereinabove appropriated for the Office of Science Support, an amount not to exceed \$1,263,000 is appropriated from the Hazardous Discharge Site Cleanup Fund for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provision of any law or regulation to the contrary, an amount not greater than \$2,152,000 is appropriated from the State Recycling Fund to support the Office of Sustainability and Green Energy, subject to the approval of the Director of the Division of Budget and Accounting.

GRANTS-IN-AID

The unexpended balance at the end of the preceding fiscal year in the Stormwater Management Grants account is appropriated for the same purpose.

The unexpended balance at the end of the preceding fiscal year in the Watershed Restoration Projects account is appropriated for the same purpose.

There is appropriated to the Lake Hopatcong Commission such sums as may be collected from a boat registration surcharge, or other fee as may be authorized pursuant to separate legislation, for the purposes of continuing operations of the Commission.

Of the amount hereinabove appropriated for the Stormwater Management Grants and Watershed Restoration Projects programs, such sums as are necessary or required may be transferred to the Water Resources Monitoring and Planning - Constitu-

tional Dedication special purpose account, subject to the approval of the Director of the Division of Budget and Accounting.

40 Community Development and Environmental Management

44 Site Remediation and Waste Management

DIRECT STATE SERVICES

23-4910 Solid and Hazardous Waste Management	\$5,102,000
27-4815 Remediation Management and Response	32,328,000
29-4815 Environmental Management - CBT Dedication	<u>10,105,000</u>
Total Direct State Services Appropriation, Site Remediation and Waste Management	<u>\$47,535,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$15,121,000)
Materials and Supplies.....	(144,000)
Services Other Than Personal.....	(2,834,000)
Maintenance and Fixed Charges.....	(424,000)

Special Purpose:

23 Office of Dredging and Sediment Technology	(437,000)
27 Hazardous Discharge Site Cleanup Fund - Responsible Party	(18,368,000)
29 Cleanup Projects Administrative Costs - Constitutional Dedication	(10,105,000)
Additions, Improvements and Equipment	(102,000)

The amount hereinabove appropriated for the Office of Dredging and Sediment Technology is appropriated from the 1996 Dredging and Containment Facility Fund, created pursuant to section 18 of P.L.1996, c.70, the "Port of New Jersey Revitalization, Dredging, Environmental Cleanup, Lake Restoration, and Delaware Bay Area Economic Development Bond Act of 1996," together with an amount not to exceed \$565,000 for the administration of the dredging and sediment technology program, subject to the approval of the Director of the Division of Budget and Accounting.

In addition to site specific charges, the amounts hereinabove for the Remediation Management and Response program classification, excluding the Hazardous Discharge Site Cleanup Fund - Responsible Party and the Underground Storage Tanks accounts, are appropriated from the New Jersey Spill Compensation Fund, in accordance with the provisions of P.L.1976, c.141 (C.58:10-23.11 et seq.), together with an amount not to exceed \$7,739,000 for administrative costs associated with the cleanup of hazardous waste sites, subject to the approval of the Director of the Division of Budget and Accounting.

The amount hereinabove for the Hazardous Discharge Site Cleanup Fund - Responsible Party account is appropriated from responsible party cost recoveries deposited in the Hazardous Discharge Site Cleanup Fund, together with an amount not to exceed \$12,328,000 for administrative costs associated with the cleanup of hazardous

waste sites, subject to the approval of the Director of the Division of Budget and Accounting.

In addition to the amount hereinabove, there is appropriated to the Hazardous Discharge Site Cleanup Fund - Responsible Party account such additional sums, as necessary, received from cost recoveries and from the licensed site remediation professionals fees and deposited in the Hazardous Discharge Site Cleanup Fund, for the cleanup of hazardous waste sites and the costs associated with the "Site Remediation Reform Act," P.L.2009, c.60 (C.58:10C-1 et seq.), subject to the approval of the Director of the Division of Budget and Accounting.

In addition to the federal funds amount for the Publicly-Funded Site Remediation program classification and the Remediation Management and Response program classification, such additional sums that may be received from the federal government for the Superfund Grants program are hereby appropriated for the same purpose.

Notwithstanding the provisions of any law or regulation to the contrary, from the amounts hereinabove appropriated from the Hazardous Discharge Site Cleanup Fund and from the New Jersey Spill Compensation Fund, such sums as are necessary are appropriated for costs associated with the Administration and Support Services program, subject to the approval of the Director of the Division of Budget and Accounting.

The amount hereinabove appropriated for the Environmental Management - CBT Dedication program classification shall be provided from revenue received from the corporation business tax, pursuant to the Corporation Business Tax Act (1945), P.L.1945, c.162 (C.54:10A-1 et seq.), as dedicated by Article VIII, Section II, paragraph 6 of the State Constitution. The unexpended balance at the end of the preceding fiscal year in the Cleanup Projects Administrative Costs - Constitutional Dedication account is appropriated, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts in excess of the amount anticipated from Solid Waste Utility Regulation, and the unexpended balance at the end of the preceding fiscal year of such receipts, are appropriated to the Solid and Hazardous Waste Management program classification and "County Environmental Health Act," P.L.1977, c.443 (C.26:3A2-21) agencies for costs incurred to oversee the State's recycling efforts and other solid waste program activities.

Receipts derived from the sale of salvaged materials are appropriated to offset costs incurred in the cleanup and removal of hazardous substances.

Notwithstanding the provisions of P.L.1954, c.48 (C.52:34-6 et seq.) or any other law to the contrary, monies appropriated to the Department of Environmental Protection from the Clean Communities Program Fund shall be provided by the Department to the New Jersey Clean Communities Council pursuant to a contract between the Department and the New Jersey Clean Communities Council to implement the requirements of the Clean Communities Program pursuant to subsection d. of section 6 of P.L.2002, c.128 (C.13:1E-218).

There is hereby appropriated from the Petroleum Underground Storage Tank Remediation, Upgrade, and Closure Fund an amount not to exceed \$1,000,000 for costs associated with the Department's administration of the loan and grant program for

the upgrade, replacement, or closure of underground storage tanks that store or were used to store hazardous substances pursuant to the amendments effective December 8, 2005 to Article VIII, Section II, paragraph 6 of the State Constitution. The unexpended balance at the end of the preceding fiscal year in the Private Underground Storage Tank Administrative Costs - Constitutional Dedication account is appropriated, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any other law or regulation to the contrary, future cost recoveries from litigation related to the Passaic River cleanup, not to exceed \$30,000,000, shall be reimbursed first to the New Jersey Spill Compensation Fund in the amount of \$12,000,000 and second to the Hazardous Discharge Site Cleanup Fund in the amount of \$18,000,000, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any other law or regulation to the contrary, there is appropriated from the Hazardous Discharge Site Cleanup Fund an amount of \$6,000,000 for the direct and indirect costs of legal and consulting services associated with litigation related to the Passaic River cleanup, subject to the approval of the Director of the Division of Budget and Accounting.

CAPITAL CONSTRUCTION

29-4815 Environmental Management - CBT Dedication	<u>\$49,397,000</u>
Total Capital Construction Appropriation, Site Remediation and Waste Management.....	<u>\$49,397,000</u>

Capital Construction:

29 Hazardous Substance Discharge Remediation - Constitutional Dedication.....	(\$21,331,000)
29 Private Underground Storage Tank Remediation - Constitutional Dedication	(15,436,000)
29 Hazardous Substance Discharge Remediation Loans & Grants - Constitutional Dedication	(12,630,000)

The amounts hereinabove appropriated for Hazardous Substance Discharge Remediation - Constitutional Dedication and Hazardous Substance Discharge Remediation Loans and Grants - Constitutional Dedication shall be provided from revenue received from the corporation business tax, pursuant to the Corporation Business Tax Act (1945), P.L.1945, c.162 (C.54:10A-1 et seq.), as dedicated by Article VIII, Section II, paragraph 6 of the State Constitution.

Of the amount hereinabove appropriated for Hazardous Substance Discharge Remediation - Constitutional Dedication, such sums as necessary, as determined by the Director of the Division of Budget and Accounting, are appropriated for site remediation costs associated with State-owned properties and State-owned underground storage tanks.

All natural resource and other associated damages recovered by the State shall be deposited in the Hazardous Discharge Site Cleanup Fund established pursuant to section 1 of P.L.1985, c.247 (C.58:10-23.34), and are appropriated for: direct and in-

direct costs of remediation, restoration, and clean up; costs for consulting, expert, and legal services incurred in pursuing claims for damages; and grants to local governments and nonprofit organizations to further implement restoration activities of the Office of Natural Resource Restoration.

Funds made available for the remediation of the discharges of hazardous substances pursuant to the amendments effective December 4, 2003, to Article VIII, Section II, paragraph 6 of the State Constitution and hereinabove appropriated, shall be appropriated to the New Jersey Economic Development Authority's Hazardous Discharge Site Remediation Fund and the Department of the Treasury's Brownfield Site Reimbursement Fund, subject to the approval of the Director of the Division of Budget and Accounting.

40 Community Development and Environmental Management

45 Environmental Regulation

DIRECT STATE SERVICES

01-4820 Radiation Protection	\$6,138,000
02-4892 Air Pollution Control	13,884,000
08-4891 Water Pollution Control	7,631,000
09-4860 Public Wastewater Facilities	<u>2,772,000</u>
Total Direct State Services Appropriation, Environmental Regulation	
	<u>\$30,425,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$17,656,000)
Materials and Supplies	(136,000)
Services Other Than Personal	(3,644,000)
Maintenance and Fixed Charges	(171,000)

Special Purpose:

01 Nuclear Emergency Response	(2,559,000)
01 Quality Assurance - Lab Certification Programs ...	(1,646,000)
02 Pollution Prevention	(989,000)
02 Toxic Catastrophe Prevention	(784,000)
02 Worker and Community Right To Know Act	(734,000)
02 Oil Spill Prevention	(2,106,000)

The amount hereinabove appropriated for the Nuclear Emergency Response account is payable from receipts received pursuant to the assessments of electrical utility companies under P.L.1981, c.302 (C.26:2D-37 et seq.), and the unexpended balances at the end of the preceding fiscal year in the Nuclear Emergency Response account, together with receipts in excess of the amount anticipated, not to exceed \$881,000, are appropriated, subject to the approval of the Director of the Division of Budget and Accounting.

There is appropriated from the Commercial Vehicle Enforcement Fund, established pursuant to section 17 of P.L.1995, c.157 (C.39:8-75), such sums as may be neces-

- sary to fund the costs of the regulation of the diesel exhaust emissions program, subject to the approval of the Director of the Division of Budget and Accounting.
- The amount hereinabove appropriated for the Pollution Prevention account is payable from receipts received pursuant to the "Pollution Prevention Act," P.L.1991, c.235 (C.13:1D-35 et seq.), together with an amount not to exceed \$472,000, for administration of the Pollution Prevention program, subject to the approval of the Director of the Division of Budget and Accounting. If receipts are less than anticipated, the appropriation shall be reduced proportionately.
- Notwithstanding the provisions of the "Worker and Community Right to Know Act," P.L.1983, c.315 (C.34:5A-1 et seq.), the amount hereinabove appropriated for the Worker and Community Right to Know Act account is payable out of the Worker and Community Right to Know Fund, and the receipts in excess of the amount anticipated, not to exceed \$445,000, are appropriated. If receipts to that fund are less than anticipated, the appropriation shall be reduced proportionately.
- The amount hereinabove appropriated for the Oil Spill Prevention account is payable out of the New Jersey Spill Compensation Fund, and the receipts in excess of those anticipated, not to exceed \$879,000, from the New Jersey Spill Compensation Fund for the Oil Spill Prevention program are appropriated, in accordance with the provisions of P.L.1990, c.76 (C.58:10-23.11f2 et seq.), P.L.1990, c.78 (C.58:10-23.11d1 et seq.), and P.L.1990, c.80 (C.58:10-23.11f1), subject to the approval of the Director of the Division of Budget and Accounting.
- Any funds received by the New Jersey Environmental Infrastructure Trust from any State agency to offset the Trust's annual operating expenses are appropriated for the same purpose.
- In addition to the federal funds amount for the Public Wastewater Facilities program classification, such additional sums that may be received from the federal government for the Clean Water State Revolving Fund program are appropriated.
- Receipts in excess of those anticipated from air permitting minor source fees, and the unexpended balance at the end of the preceding fiscal year of such receipts, are appropriated to the Department of Environmental Protection for expansion of the Air Pollution Control program, and for "County Environmental Health Act," P.L.1977, c.443 (C.26:3A2-21) agencies to inspect non-major source facilities, subject to the approval of the Director of the Division of Budget and Accounting.
- Notwithstanding the provisions of subsection b. of section 1 of P.L.2005, c.202 (C.58:11B-10.2) or any other law or regulation to the contrary, in addition to the amount anticipated to the General Fund from the New Jersey Environmental Infrastructure Financing Program administrative fee, there is appropriated \$2,024,000 to the Department of Environmental Protection for associated administrative and operating expenses, subject to the approval of the Director of the Division of Budget and Accounting.
- Of the amount hereinabove appropriated for the Diesel Risk Mitigation Fund - Constitutional Dedication, an amount not to exceed \$1,150,000 shall be appropriated for costs associated with the administration of the program pursuant to the amendments effective December 8, 2005, to Article VIII, Section II, paragraph 6 of the State Constitution. The unexpended balance at the end of the preceding fiscal year

in the Diesel Risk Mitigation Fund Administrative Costs - Constitutional Dedication account is appropriated for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.

GRANTS-IN-AID

29-4892 Environmental Management - CBT Dedication	<u>\$19,085,000</u>
Total Grants-in-Aid Appropriation, Environmental Regulation.....	<u>\$19,085,000</u>

Grants-in-Aid:

29 Diesel Risk Mitigation Fund - Constitutional Dedication	(\$19,085,000)

The amount hereinabove appropriated for the Diesel Risk Mitigation Fund - Constitutional Dedication shall be provided from revenue received from the corporation business tax, pursuant to the Corporation Business Tax Act (1945), P.L.1945, c.162 (C.54:10A-1 et seq.), as dedicated by Article VIII, Section II, paragraph 6 of the State Constitution. The unexpended balance at the end of the preceding fiscal year in the Diesel Risk Mitigation Fund - Constitutional Dedication account is appropriated, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, funds hereinabove appropriated from the Diesel Risk Mitigation Fund - Constitutional Dedication account may be used to reimburse the owner of a regulated vehicle or regulated equipment as defined by section 2 of P.L.2005, c.219 (C.26:2C-8.27) for the cost of repowering or rebuilding a diesel engine if repowering or rebuilding results in a reduction of fine particle diesel emissions from that engine as approved by the Department of Environmental Protection and in accordance with rules adopted pursuant thereto. Any reimbursement shall be subject to conditions and limitations provided in P.L.2005, c.219 (C.26:2C-8.26 et seq.) and rules adopted pursuant thereto and shall not exceed the amount of the lowest priced retrofit device on the State contract at the prescribed best available retrofit technology level for the subject vehicle or equipment type.

40 Community Development and Environmental Management

46 Environmental Planning and Administration

DIRECT STATE SERVICES

26-4805 Regulatory and Governmental Affairs.....	\$1,691,000
99-4800 Administration and Support Services	<u>15,428,000</u>
Total Direct State Services Appropriation, Environmental Planning and Administration	<u>\$17,119,000</u>

Direct State Services:

Personal Services:	
Salaries and Wages	(\$14,764,000)
Materials and Supplies.....	(102,000)
Services Other Than Personal	(683,000)

Maintenance and Fixed Charges.....(170,000)

Special Purpose:

99 New Jersey Environmental Management System(1,400,000)

The unexpended balance at the end of the preceding fiscal year in the Office of the Records Custodian - Open Public Records Act account is appropriated for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.

STATE AID

99-4800 Administration and Support Services \$6,130,000

Total State Aid Appropriation, Environmental Planning
and Administration \$6,130,000

State Aid:

99 Mosquito Control, Research, Administration
and Operations(\$1,346,000)

99 Administration and Operations of the
Highlands Council(2,315,000)

99 Administration, Planning and Development
Activities of the Pinelands Commission(2,469,000)

Receipts derived from permit fees imposed by the Pinelands Commission on behalf of the Department of Environmental Protection, pursuant to a memorandum of agreement between the Pinelands Commission and the Department of Environmental Protection, are hereby appropriated to the Pinelands Commission.

The unexpended balance at the end of the preceding fiscal year in the Mosquito Control, Research, Administration and Operations account is appropriated for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.

40 Community Development and Environmental Management

47 Compliance and Enforcement

DIRECT STATE SERVICES

02-4855 Air Pollution Control \$4,127,000

04-4835 Pesticide Control 2,216,000

08-4855 Water Pollution Control 5,962,000

15-4855 Land Use Regulation 2,443,000

23-4855 Solid and Hazardous Waste Management 5,867,000

Total Direct State Services Appropriation, Compliance and
Enforcement \$20,615,000

Direct State Services:

Personal Services:

Salaries and Wages(\$15,665,000)

Materials and Supplies.....(129,000)

Services Other Than Personal.....(3,117,000)

Maintenance and Fixed Charges.....(637,000)

Special Purpose:

15 Tidelands Peak Demands (1,067,000)

Notwithstanding the provisions of any law or regulation to the contrary, receipts deposited into the Coastal Protection Trust Fund pursuant to P.L.1993, c.168 (C.39:3-27.47 et seq.) shall be allocated in the following priority order and are appropriated in the amount of \$485,000 for the cleanup or maintenance of beaches or shores, the amount of \$90,000 for a program of grants for the operation of a sewage pump-out boat and the construction of sewage pump-out devices for marine sanitation devices and portable toilet emptying receptacles at public and private marinas and boatyards in furtherance of the provisions of P.L.1988, c.117 (C.58:10A-56 et seq.), the amount of \$65,000 for the cost of providing monitoring, surveillance and enforcement activities for the Cooperative Coastal Monitoring Program, and the amount of \$10,000 for the implementation of the "New Jersey Adopt a Beach Act," P.L.1992, c.213 (C.13:19-22 et seq.). Receipts deposited into the Coastal Protection Trust Fund in excess of \$650,000, but not to exceed \$1,000,000, will be distributed proportionately among the programs listed above in accordance with P.L.1993, c.168 (C.39:3-27.47 et seq.). Receipts deposited into the Coastal Protection Trust Fund in excess of \$1,000,000 are appropriated to finance emergency shore protection projects and the cleanup of discharges into the ocean, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts in excess of the amount anticipated for pesticide fees, and the unexpended balance at the end of the preceding fiscal year of such receipts, are appropriated to the Department of Environmental Protection for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.

There is appropriated to the Department of Environmental Protection, pursuant to P.L.2007, c.246 (C.12:5-6 et al.) all penalties, fines, recoveries of costs, and interest deposited to the Cooperative Coastal Monitoring, Restoration and Enforcement Fund, established pursuant to subsection h. of section 18 of P.L.1973, c.185 (C.13:19-18), for the costs of coastal restoration projects, providing aircraft overflights for coastal monitoring and surveillance, and enforcement activities conducted by the department, subject to the approval of the Director of the Division of Budget and Accounting.

STATE AID

08-4855 Water Pollution Control..... \$2,700,000
 Total State Aid Appropriation, Compliance and
 Enforcement \$2,700,000

State Aid:

08 County Environmental Health Act (\$2,700,000)
 Department of Environmental Protection,
 Total State Appropriation \$340,764,000

The amounts hereinabove appropriated for the Tidelands Peak Demands accounts are payable from receipts derived from the sales, grants, leases, licensing, and rentals of State riparian lands. If receipts are less than anticipated, the appro-

priation shall be reduced proportionately. In addition, there is appropriated an amount not to exceed \$3,037,000 from the same source for other administrative costs, including legal services, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, with regard to the fee-related appropriations provided hereinabove, the Commissioner of the Department of Environmental Protection shall obtain concurrence from the Director of the Division of Budget and Accounting before altering fee schedules or any other revenue-generating mechanism under the Department's purview.

Notwithstanding the provisions of the "Environmental Fee Accountability Act of 1991," P.L.1991, c.426 (C.52:27B-20.1 et seq.) and P.L.1991, c.427 (C.13:1D-9.1 et seq.), all revenues from fees and fines collected by the Department of Environmental Protection, unless otherwise herein dedicated, shall be deposited into the General Fund without regard to their specific dedication.

Notwithstanding the provisions of any law or regulation to the contrary, of the federal fund amounts hereinabove appropriated for the programs included in the Performance Partnership Grant Agreement with the United States Environmental Protection Agency, the Department of Environmental Protection is authorized to reallocate the appropriations, in accordance with the Grant Agreement and subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of P.L.1954, c.48 (C.52:34-6 et seq.) or any law or regulation to the contrary, of the amounts appropriated for site remediation, the Department of Environmental Protection may enter into a contract with the United States Environmental Protection Agency (EPA) to provide the State's statutory matching share for EPA-led Superfund remedial actions pursuant to the State Superfund contract.

Receipts in excess of \$7,210,000 anticipated for Air Pollution, Clean Water Enforcement, Land Use, Solid Waste, and Hazardous Waste fines, not to exceed \$1,500,000, and the unexpended balance at the end of the preceding fiscal year are appropriated for the expansion of compliance, enforcement, and permitting efforts in the Department, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts in excess of the amount anticipated from New Jersey Pollutant Discharge Elimination System/Stormwater Permits, and the unexpended balance at the end of the preceding fiscal year of such receipts, are appropriated to the Department of Environmental Protection to offset the costs of the Water Pollution Control Program, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of P.L.1954, c.48 (C.52:34-6 et seq.) or any law or regulation to the contrary, of the amounts hereinabove appropriated for water resource evaluation studies and monitoring, the Department of Environmental

Protection may enter into contracts with the United States Geological Survey to provide the State's match to joint funding agreements for water resource evaluation studies and monitoring analyses.

Of the amount hereinabove appropriated for the Hazardous Substance Discharge Remediation Loans and Grants - Constitutional Dedication account, an amount not to exceed \$2,000,000 shall be allocated for costs associated with the State Underground Storage Tank Inspection Program, pursuant to the amendments effective December 4, 2003, to Article VIII, Section II, paragraph 6 of the State Constitution. The unexpended balance at the end of the preceding fiscal year in the Underground Storage Tank Inspection Program account is appropriated for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of P.L.1954, c.48 (C.52:34-6 et seq.) or any other law to the contrary, of the amounts hereinabove appropriated for environmental restoration and mitigation, the Department of Environmental Protection may enter into agreements with the United States Army Corps of Engineers to provide the State's matching share to any federally authorized restoration or mitigation projects.

In the event that revenues are received in excess of the amount of revenues anticipated from Solid Waste Utility Regulation, Water Allocation, New Jersey Pollutant Discharge Elimination System/Stormwater Permits, Coastal Area Facility Review Act, Freshwater Wetlands, Stream Encroachment, Waterfront Development, Wetlands, Well Permits, Well Driller, Pump Installers Licenses, Water and Wastewater Operators Licensing Program, Air Permitting Minor Source, and Pesticide fees, if the amounts of such unanticipated revenues exceed \$7,973,000, the amounts of such unanticipated revenues in excess of \$7,973,000 are appropriated for information technology enhancements in the Department of Environmental Protection, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, an amount not to exceed \$6,778,736 from the settlement accounts associated with natural resource damages deposited in the Hazardous Discharge Site Cleanup Fund is appropriated to the Department of Environmental Protection to pay for the costs of replanting trees and impacts of the deforestation from the New Jersey Turnpike Authority's roadway widening project from Interchange 6 to Interchange 9. Of this amount, \$4,176,300 shall be granted by the Department of Environmental Protection to the Townships of Robbinsville, East Windsor, and Hamilton in accordance with the Stipulation of Settlement between the Townships of Robbinsville, East Windsor, and Hamilton and the Department, \$423,233 shall be granted by the Department of Environmental Protection to the Township of Chesterfield in accordance with the Stipulation of Settlement between the Township of Chesterfield and the Department, \$1,067,089 shall be granted by the Department of Environmental Protection to the Township of

Cranbury in accordance with the Stipulation of Settlement between the Township of Cranbury and the Department, and \$1,112,114 shall be granted by the Department of Environmental Protection to the Township of Mansfield in accordance with the Stipulation of Settlement between the Township of Mansfield and the Department.

Summary of Department of Environmental Protection Appropriations
(For Display Purposes Only)

Appropriations by Category:

Direct State Services.....	\$212,987,000
Grants-in-Aid.....	21,210,000
State Aid	8,830,000
Capital Construction	97,737,000

Appropriations by Fund:

General Fund	\$340,764,000

46 DEPARTMENT OF HEALTH

20 Physical and Mental Health

21 Health Services

DIRECT STATE SERVICES

01-4215 Vital Statistics	\$1,323,000
02-4220 Family Health Services	5,668,000
03-4230 Public Health Protection Services	11,679,000
08-4280 Laboratory Services.....	14,207,000
12-4245 AIDS Services	<u>1,338,000</u>
Total Direct State Services Appropriation, Health Services	<u>\$34,215,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$14,832,000)
Materials and Supplies.....	(2,229,000)
Services Other Than Personal.....	(3,543,000)
Maintenance and Fixed Charges.....	(1,606,000)

Special Purpose:

02 WIC Farmers Market Program.....	(87,000)
02 Breast Cancer Public Awareness Campaign	(90,000)
02 Identification System for Children's Health and Disabilities	(300,000)
02 Governor's Council for Medical Research and Treatment of Autism	(500,000)
02 Public Awareness Campaign for Black Infant Mortality	(500,000)

- 02 Cancer Screening - Early Detection
And Education Program (3,500,000)
 - 03 New Jersey State Commission on Cancer
Research (1,000,000)
 - 03 Cancer Registry (400,000)
 - 03 Cancer Investigation and Education (500,000)
 - 03 Emergency Medical Services for Children (50,000)
 - 03 Animal Welfare (150,000)
 - 03 Worker and Community Right to Know (1,678,000)
 - 03 New Jersey Compassionate Use Medical
Marijuana Act (784,000)
 - 08 West Nile Virus - Laboratory (640,000)
 - Additions, Improvements and Equipment (1,826,000)
- The unexpended balance at the end of the preceding fiscal year in the New Jersey Emergency Medical Service Helicopter Response Program account is appropriated.
- In addition to the amounts hereinabove appropriated, notwithstanding the provisions of any law or regulation to the contrary, there is appropriated \$150,000 from the "Emergency Medical Technician Training Fund" to fund the Emergency Medical Services for Children Program.
- Notwithstanding the provisions of any law to the contrary, there is appropriated \$500,000 from the Autism Medical Research and Treatment Fund for the operations of New Jersey's Autism Registry.
- Notwithstanding the provisions of any law or regulation to the contrary, there is appropriated from the "Emergency Medical Technician Training Fund" \$79,000 for Emergency Medical Services and \$125,000 for the First Response EMT Cardiac Training Program.
- Notwithstanding the provisions of any law to the contrary, there is appropriated \$500,000 from the Autism Medical Research and Treatment Fund for the operations of the Governor's Council for Medical Research and Treatment of Autism.
- Receipts deposited in the Autism Medical Research and Treatment Fund are appropriated for the Governor's Council for Medical Research and Treatment of Autism, subject to the approval of the Director of the Division of Budget and Accounting.
- Amounts deposited in the "New Jersey Breast Cancer Research Fund" from the gross income tax check-offs pursuant to the provisions of P.L.1995, c.26 (C.54A:9-25.7 et al.) are appropriated to the New Jersey State Commission on Cancer Research for breast cancer research projects, subject to the approval of the Director of the Division of Budget and Accounting.
- Notwithstanding the provisions of the "Worker and Community Right to Know Act," P.L.1983, c.315 (C.34:5A-1 et seq.), the amount hereinabove appropriated for the Worker and Community Right to Know account is payable from the "Worker and Community Right to Know Fund."
- Receipts derived from the agency surcharge on vehicle rentals pursuant to section 54 of P.L.2002, c.34 (C.App.A:9-78), not to exceed \$4,722,000, are appropriated for the

- Medical Emergency Disaster Preparedness for Bioterrorism program and shall be deposited into a dedicated account, the expenditure of which shall be subject to the approval of the Director of the Division of Budget and Accounting.
- The Director of the Division of Budget and Accounting is empowered to transfer or credit appropriations to the Department of Health for diagnostic laboratory services provided to any other agency or department, provided that funds have been appropriated or allocated to such agency or department for the purpose of purchasing these services.
- Receipts from fees established by the Commissioner of Health for licensing of clinical laboratories, pursuant to P.L.1975, c.166 (C.45:9-42.26 et seq.), and blood banks, pursuant to P.L.1963, c.33 (C.26:2A-2 et seq.), are appropriated.
- Receipts from licenses, permits, fines, penalties, and fees collected by the Department of Health in Health Services, in excess of those anticipated, are appropriated, subject to the approval of the Director of the Division of Budget and Accounting.
- Notwithstanding the provisions of any law or regulation to the contrary, \$1,000,000 from the Cancer Research Fund established pursuant to section 5 of P.L.1982, c.40 (C.54:40A-37.1) is transferred to the General Fund.
- Notwithstanding the provisions of subsection c. of section 6 of P.L.1983, c.6 (C.52:9U-6), subsection c. of section 5 of P.L.2003, c.200 (C.52:9EE-5), subsection c. of section 5 of P.L.1999, c.201 (C.52:9E-5) and section 4 of P.L.1999, c.105 (C.30:6D-59) or any other law or regulation to the contrary, the amounts hereinabove appropriated to the New Jersey State Commission on Cancer Research, New Jersey State Commission on Brain Injury Research, New Jersey Commission on Spinal Cord Research, and the Governor's Council for Medical Research and Treatment of Autism are subject to the following condition: an amount from each appropriation, subject to the approval of the Director of the Division of Budget and Accounting, may be used to pay the salary and other benefits of one person who shall serve as Executive Director for all four entities, with the services of such person allocated to the four entities as shall be determined by the four entities.

GRANTS-IN-AID

02-4220 Family Health Services	\$119,137,000
<i>(From General Fund.....)</i>	<i>\$118,608,000)</i>
<i>(From Casino Revenue Fund.....)</i>	<i>529,000)</i>
03-4230 Public Health Protection Services	37,566,000
12-4245 AIDS Services	<u>28,160,000</u>
Total Grants-in-Aid Appropriation, Health Services	<u>\$184,863,000</u>
<i>(From General Fund.....)</i>	<i>\$184,334,000)</i>
<i>(From Casino Revenue Fund.....)</i>	<i>529,000)</i>

Grants-in-Aid:

Special Purpose:

02 Maternal, Child and Chronic Health	(\$26,756,000)
02 Statewide Birth Defects Registry (CRF)	(529,000)
02 Poison Control Center	(587,000)

02 Early Childhood Intervention Program	(88,373,000)
02 Early Intervention Contracts	(892,000)
02 Surveillance, Epidemiology, and End Results Expansion Program - CINJ	(2,000,000)
03 Implementation of Comprehensive Cancer Control Program	(1,200,000)
03 Hospital Asset Transformation Program - Debt Service	(1,541,000)
03 Cancer Institute of New Jersey	(18,000,000)
03 Cancer Institute of New Jersey, South Jersey Program	(16,544,000)
03 Worker and Community Right to Know	(281,000)
12 AIDS Grants	(21,651,000)
12 AIDS Drug Distribution Program	(6,509,000)

Receipts from the federal Medicaid (Title XIX) program for handicapped infants are appropriated, subject to the approval of the Director of the Division of Budget and Accounting.

There is appropriated \$570,000 from the Alcohol Education, Rehabilitation and Enforcement Fund to fund the Fetal Alcohol Syndrome Program.

Of the amount hereinabove appropriated for Maternal, Child and Chronic Health Services, an amount may be transferred to Direct State Services in the Department of Health to cover administrative costs of the program, subject to the approval of the Director of the Division of Budget and Accounting.

From the amount hereinabove appropriated for the Cancer Institute of New Jersey, \$250,000 is appropriated to the Ovarian Cancer Research Fund.

There are appropriated from the New Jersey Emergency Medical Service Helicopter Response Program Fund, established pursuant to section 2 of P.L.1992, c.87 (C.26:2K-36.1), such sums as are necessary to pay the reasonable and necessary expenses of the operation of the New Jersey Emergency Medical Service Helicopter Response Program, established pursuant to P.L.1986, c.106 (C.26:2K-35 et seq.), subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, in order to maximize prescription drug coverage under the Medicare Part D program established pursuant to the federal "Medicare Prescription Drug, Improvement, and Modernization Act of 2003," the amounts hereinabove appropriated for the AIDS Drug Distribution Program (ADDP) shall not be spent unless the ADDP is designated as the authorized representative for the purposes of coordinating benefits with the Medicare Part D program, including enrollment and appeals of coverage determinations. ADDP is authorized to represent program beneficiaries in the pursuit of such coverage. ADDP representation shall not result in any additional financial liability on behalf of such program beneficiaries and shall include, but need not be limited to, the following actions: application for the premium and cost-sharing subsidies on behalf of eligible program beneficiaries; pursuit of appeals,

grievances, or coverage determinations; and facilitated enrollment in a prescription drug plan or Medicare Advantage Prescription Drug plan. If any beneficiary declines enrollment in any Medicare Part D plan, that beneficiary shall be barred from all benefits of the ADDP Program.

Notwithstanding the provisions of any law or regulation to the contrary, the amount hereinabove appropriated to the AIDS Drug Distribution Program (ADDP) is conditioned upon the Department of Health coordinating the benefits of ADDP with the prescription drug benefits of the Medicare Part D program established pursuant to the federal "Medicare Prescription Drug, Improvement, and Modernization Act of 2003" as the primary payer. The ADDP benefit and reimbursement shall only be available to cover the beneficiary cost share to in-network pharmacies and for deductible and coverage gap costs, as determined by the Commissioner of Health, associated with enrollment in Medicare Part D for ADDP beneficiaries, and for Medicare Part D premium costs for ADDP beneficiaries.

Notwithstanding the provisions of any law or regulation to the contrary, no funds appropriated in the AIDS Drug Distribution Program (ADDP) account shall be available as payment as an ADDP benefit to any pharmacy that is not enrolled as a participating pharmacy in a pharmacy network under the Medicare Part D program established pursuant to the federal "Medicare Prescription Drug, Improvement, and Modernization Act of 2003."

Commencing with the start of the fiscal year, and consistent with the requirements of the federal "Medicare Prescription Drug, Improvement, and Modernization Act of 2003" (MMA), no funds hereinabove appropriated from the AIDS Drug Distribution Program (ADDP) account shall be expended for any individual enrolled in the ADDP program unless the individual provides all data necessary to enroll the individual in the Medicare Part D program established pursuant to the MMA, including data required for the subsidy assistance, as outlined by the Centers for Medicare and Medicaid Services.

In order to permit flexibility in the handling of appropriations, amounts may be transferred to and from the various items of appropriation within the AIDS Services program classification in the Department of Health, subject to the approval of the Director of the Division of Budget and Accounting. Notice thereof shall be provided to the Legislative Budget and Finance Officer on the effective date of the approved transfer.

Notwithstanding the provisions of any law or regulation to the contrary, the amount hereinabove appropriated for the Early Childhood Intervention Program shall be conditioned on the Early Childhood Intervention Program's family cost sharing program involving a progressive charge for each hour of direct services provided to the child and/or the child's family in accordance with the child's Individualized Family Service Plan, based upon household size and gross income as set forth in the July 2011 or the next most recent published edition of the New Jersey Early Intervention System Family Cost Participation Handbook.

There are appropriated such additional sums as are required to pay all amounts due from the State pursuant to any contract entered into between the State Treasurer and the New Jersey Health Care Facilities Financing Authority pursuant to section

6 of P.L.2000, c.98 (C.26:2I-7.1) in connection with the Hospital Asset Transformation Program.

No funds hereinabove appropriated to the Department of Health shall be used for the Medical Waste Management Program. The Department of Health and the Department of Environmental Protection shall establish a transition plan to ensure provisions of the "Comprehensive Regulated Medical Waste Management Act," P.L.1989, c.34 (C.13:1E-48.1 et al.) are met.

Notwithstanding the provisions of any law or regulation to the contrary, the amount hereinabove appropriated for the Cancer Institute of New Jersey (CINJ) shall be conditioned upon the following provision: no funds shall be expended except to support CINJ's infrastructure necessary to support cancer research, prevention, and treatment.

Of the amount hereinabove appropriated for the Surveillance, Epidemiology and End Results Expansion Program-CINJ account, an amount may be transferred to Direct State Services in the Department of Health to cover administrative costs of the program, subject to the approval of the Director of the Division of Budget and Accounting.

The unexpended balance at the end of the preceding fiscal year in the Cancer Institute of New Jersey, South Jersey Program account are appropriated to the program for cancer-related capital equipment, design, engineering, and construction expenses.

In addition to the amount hereinabove appropriated for the Early Childhood Intervention Program, such additional sums as may be necessary are appropriated for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.

Of the amount hereinabove appropriated for AIDS Grants, savings realized from reduced transportation costs may be transferred to the AIDS Drug Distribution Program account, subject to the approval of the Director of the Division of Budget and Accounting.

Upon a determination by the Commissioner of Health, made in consultation with the State Treasurer, that additional State funding is necessary to reimburse centers for services to uninsured clients, the Director of the Division of Budget and Accounting shall authorize the appropriation of such sums as the Commissioner determines are necessary for grants to federally qualified health centers.

Notwithstanding the provisions of any law or regulation to the contrary, no amounts hereinabove appropriated for the AIDS Drug Distribution Program shall be expended for drugs used for the treatment of erectile dysfunction, or cosmetic drugs, including but not limited to drugs used for baldness and weight loss.

Notwithstanding the provisions of any law or regulation to the contrary, the amount hereinabove appropriated for the Early Childhood Intervention Program shall be conditioned on adherence to the requirements of the "Individuals with Disabilities Education Improvement Act of 2004," 20 U.S.C. 1400 et seq., and part 303 of Title 34, Code of Federal Regulations, as set forth in the State Plan filed by the Early Childhood Intervention Program with the U.S. Department of Education, Office of Special Education Programs.

STATE AID

Notwithstanding the provisions of any law or regulation to the contrary, none of the monies appropriated to the Department of Health are appropriated to public health priority programs under P.L.1966, c.36 (C.26:2F-1 et seq.) as amended.

22 Health Planning and Evaluation**DIRECT STATE SERVICES**

06-4260 Long Term Care Systems	\$4,598,000
07-4270 Health Care Systems Analysis.....	<u>1,456,000</u>
Total Direct State Services Appropriation, Health Planning and Evaluation	<u>\$6,054,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$3,948,000)
Materials and Supplies.....	(73,000)
Services Other Than Personal	(441,000)
Maintenance and Fixed Charges.....	(176,000)

Special Purpose:

06 Nursing Home Background Checks/Nursing Aide Certification Program.....	(979,000)
06 Implement Patient Safety Act	(400,000)
Additions, Improvements and Equipment	(37,000)

There are appropriated such sums as are required to the "Health Care Facilities Improvement Fund" to provide available resources in an emergency situation at a health care facility, as defined by the Commissioner of Health, or for closure of a health care facility, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts derived from fees charged for processing Certificate of Need applications and the unexpended balances at the end of the preceding fiscal year of such receipts are appropriated for the cost of this program, subject to the approval of the Director of the Division of Budget and Accounting.

GRANTS-IN-AID

07-4270 Health Care Systems Analysis.....	<u>\$135,858,000</u>
Total Grants-in-Aid Appropriation, Health Planning and Evaluation.....	<u>\$135,858,000</u>

Grants-in-Aid:

Special Purpose:

07 Health Care Subsidy Fund Payments	(\$28,213,000)
07 Hospital Relief Offset Payments	(62,645,000)
07 Graduate Medical Education	(45,000,000)

Notwithstanding the provisions of any law or regulation to the contrary, all revenues collected from the tax on cosmetic medical procedures pursuant to P.L.2004, c.53

(C.54:32E-1) shall be deposited in the Health Care Subsidy Fund established pursuant to section 8 of P.L.1992, c.160 (C.26:2H-18.58) for the support of payments to federally qualified health centers.

Notwithstanding the provisions of any law or regulation to the contrary, as a condition of the receipt of any monies hereunder by an acute care hospital that is requesting an advance of charity care/Medicaid or payments from the "Health Care Facilities Improvement Fund" or any payments over and above this act, the hospital shall comply with a request by the Commissioner of Health for a review of its finances and operations to ensure that access to health care is maintained and public funds are utilized for their intended purpose, the cost of such review to be borne by the acute care hospital and shall comply with any financial and operational performance requirements imposed by the Commissioner as deemed necessary as a result of the review.

Notwithstanding the provisions of section 3 of P.L.2004, c.113 (C.26:2H-18.59i) or any law or regulation to the contrary, the appropriation for Health Care Subsidy Fund Payments in State Fiscal Year (SFY) 2013 shall be calculated in the following manner: (a) source data used shall be from calendar years 2009 and 2010 for documented charity care claims data and hospital-specific gross revenue for charity care patients and shall include all adjustments and void claims related to calendar years 2009, 2010, and any prior year submitted claims, as submitted by each acute care hospital or determined by the Department of Health (DOH); (b) source data used for calendar year 2010 documented charity care for each hospital's total gross revenue for all patients shall be from the calendar year 2010 Acute Care Hospital Cost Report as defined by Form E4, Line 1, Column E data and shall be according to the DOH advance submission request dated February 10, 2011, as submitted by each acute care hospital by March 10, 2011, and source data used for Medicare Cost Report data shall be from calendar year 2009; (c) in the event that an eligible hospital failed to submit by March 10, 2011, its total gross revenue for all patients from the calendar year 2010 Acute Care Hospital Cost Report as defined by Form E4, Line 1, Column E data according to the DOH advance submission request dated February 10, 2011, source data from calendar year 2009 shall be used for hospital-specific gross revenue for charity care patients and for hospital total gross revenue for all patients as defined by Form E4, Line 1, Column E; (d) source data used for calendar year 2009 documented charity care for each hospital's total gross revenue for all patients shall be from the calendar year 2009 Acute Care Hospital Cost Report as defined by Form E4, Line 1, Column E data and shall be according to the DOH advance submission request dated February 11, 2010, as submitted by each acute care hospital by March 11, 2010, and source data used for Medicare Cost Report data shall be from calendar year 2008; (e) in the event that an eligible hospital failed to submit by March 11, 2010, its total gross revenue for all patients from the calendar year 2009 Acute Care Hospital Cost Report as defined by Form E4, Line 1, Column E data according to the DOH advance submission request dated February 11, 2010, source data from calendar year 2008 shall be used for hospital-specific gross revenue for charity care patients and for hospital total gross revenue for all patients as defined by Form E4, Line 1, Column

E; (f) each eligible hospital's charity care subsidy allocation for SFY 2012 as announced by DOH in July 2011, for this calculation purpose only, shall be initially split into two pools, one that equals 90% of its SFY 2012 allocation and another that equals 10% of its SFY 2012 allocation; (g) for each eligible hospital the difference between its calendar year 2010 documented charity care and its calendar year 2009 documented charity care shall be calculated. Then the percentage change in documented charity care for each eligible hospital shall be obtained by dividing this difference by its calendar year 2009 documented charity care; (h) each eligible hospital, whose percentage change in documented charity care as initially calculated in accordance with subsection g. above that is greater than 15% shall be reduced to 15% for purposes of this calculation only and that is less than -50% shall be increased to -40% for purposes of this calculation only; (i) for each eligible hospital, the ratio of its calendar year 2010 documented charity care divided by the total calendar year 2010 documented charity care for all hospitals shall be calculated; (j) for each eligible hospital, the percentage change in documented charity care as calculated in accordance with subsection g. above, unless modified in accordance with subsection h. above in such case the modified percentage from subsection h. above shall be used, shall be multiplied by the calendar year 2010 documented charity care ratio calculated in subsection (i) above; (k) for each eligible hospital the value calculated in accordance with subsection j. above shall be multiplied by the total of the 10% pool for all eligible hospitals as calculated in subsection f. above; (l) for each eligible hospital the value calculated in accordance with subsection (k) above shall be added to its initial 10% pool value as calculated in subsection f. above; (m) for each eligible hospital, the amount calculated in subsection (f) above for its 90% pool and subsection (l) above for its adjusted 10% pool shall be added together producing the SFY 2013 charity care subsidy allocation for each eligible hospital; (n) notwithstanding the provisions above, an eligible hospital shall not receive a lower SFY 2013 charity care subsidy allocation than its SFY 2012 charity care subsidy allocation if it had increased documented charity care as calculated in subsection (g) above, and an eligible hospital shall not receive a greater SFY 2013 charity care subsidy allocation than its SFY 2012 charity care subsidy allocation if it had decreased documented charity care as calculated in subsection (g) above; (o) if necessary, a proportionate increase or decrease shall be applied to the 10% pool value as calculated in subsection (l) for each eligible hospital based on its percentage of total calendar year 2010 documented charity care such that the total calculated SFY 2013 charity care subsidy allocation for all hospitals shall equal \$675,000,000, except that the proration applied to the subsidy for any eligible hospital shall be modified as necessary to comply with subsection (n) above; and (p) the resulting number will constitute each eligible hospital's SFY 2013 charity care subsidy allocation.

Of the amount hereinabove appropriated for Health Care Subsidy Fund Payments, any amounts not allocated to a hospital-specific State fiscal year 2013 charity care subsidy is appropriated, subject to the approval of the Director of the Division of Budget and Accounting, to the Health Care Stabilization Fund established pursuant to P.L.2008, c.33 (C.26:2H-18.74 et seq.) and applied as set forth in such act.

Combined funding for charity care and the Health Care Stabilization Fund shall not exceed \$705,000,000.

Notwithstanding the provisions of any law or regulation to the contrary, any funds remaining as the result of closure of a hospital eligible to receive Disproportionate Share Hospital (DSH) funds shall be redistributed at the discretion of the Commissioner of Health. Factors the Commissioner will consider shall include, but not be limited to, maintenance of continued timely access to essential health services for persons eligible to participate in charity care, and continued operation in the same or adjoining municipality as the closed hospital of an acute care hospital, eligible to receive DSH funds, and serving substantially the same eligible population. Notice of such redistribution shall be provided to the Joint Budget Oversight Committee within five business days of each redistribution.

The amounts hereinabove appropriated for Health Care Subsidy Fund Payments are conditioned upon the following provision: the Department of Health shall review, examine and/or audit any and all financial information maintained by an acute care hospital to ensure appropriate use of public funds.

The amounts hereinabove appropriated for charity care or other funding to a health care facility is conditioned upon the following requirement: such health care facility shall participate in planning meetings supervised by the Department of Health for the planning of the provision of hospital, medical or health programs and services, and shall, to the extent permitted by State and federal law, share patient-level data as needed to facilitate such purposes.

Notwithstanding the provisions of any law or regulation to the contrary, the amounts hereinabove appropriated from the Health Care Subsidy Fund for charity care payments are subject to the following condition: In a manner determined by the Commissioner of Health and subject to the approval of the Director of the Division of Budget and Accounting, eligible hospitals shall receive (1) their charity care subsidy payments beginning in July 2012, (2) an aggregate amount of \$10,000,000 of their July and August 2012 payments in October 2012, (3) their September 2012 payments in October 2012, and (4) their January 2013 payments in December 2012.

In addition to the amounts hereinabove appropriated for Health Care Subsidy Fund Payments, such additional funds as paid by the New Jersey Medical Malpractice Reinsurance Association are appropriated to the Health Care Subsidy Fund for charity care payments.

Notwithstanding the provisions of any law or regulation to the contrary, the amounts hereinabove appropriated for Graduate Medical Education payments shall be distributed using the hospital specific allocation established and adjusted during the preceding fiscal year.

Notwithstanding the provisions of any law or regulation to the contrary, the amounts hereinabove appropriated for Hospital Relief Offset Payments shall be distributed using the hospital specific allocation established and adjusted during the preceding fiscal year.

25 Health Administration
DIRECT STATE SERVICES

99-4210 Administration and Support Services	<u>\$4,379,000</u>
Total Direct State Services Appropriation, Health Administration	<u>\$4,379,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$2,604,000)
Materials and Supplies	(49,000)
Services Other Than Personal	(226,000)

Special Purpose:

99 Office of Minority and Multicultural Health	(1,500,000)
Department of Health, Total State Appropriation	<u>\$365,369,000</u>

Consistent with the provisions of P.L.2005, c.237, \$40,000,000 from the surcharge on each general hospital and each specialty heart hospital is appropriated to fund federally qualified health centers. Any unexpended balance at the end of the preceding fiscal year in the Health Care Subsidy Fund received through the hospital and other health care initiatives account during the preceding fiscal year is appropriated for payments to federally qualified health centers.

Receipts from licenses, permits, fines, penalties, and fees collected by the Department of Health, in excess of those anticipated, are appropriated, subject to a plan prepared by the Department and approved by the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of section 7 of P.L.1992, c.160 (C.26:2H-18.57) or any law or regulation to the contrary, the first \$1,200,000 in per adjusted admission charge assessment revenues, attributable to \$10 per adjusted admission charge assessments made by the Department of Health, shall be anticipated as revenue in the General Fund available for health-related purposes. Furthermore, the remaining revenue attributable to this fee shall be available to carry out the provisions of section 7 of P.L.1992, c.160 (C.26:2H-18.57), as determined by the Commissioner of Health, and subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, the State Treasurer shall transfer to the Health Care Subsidy Fund, established pursuant to section 8 of P.L.1992, c.160 (C.26:2H-18.58), only those additional revenues generated from third party liability recoveries, excluding Medicaid, by the State arising from a review by the Director of the Division of Budget and Accounting of hospital payments reimbursed from the Health Care Subsidy Fund with service dates that are after the date of enactment of P.L.1996, c.29.

Any change in program eligibility criteria and increases in the types of services or rates paid for services to or on behalf of clients for all programs under the purview of the Department of Health, not mandated by federal law, shall first be approved by the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, fees, fines, penalties and assessments owed to the Department of Health shall be offset against payments due and owing from other appropriated funds.

In addition to the amount hereinabove appropriated, receipts from the federal Medicaid (Title XIX) program for health services-related programs throughout the Department of Health are appropriated for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.

Summary of Department of Health Appropriations
(For Display Purposes Only)

Appropriations by Category:

Direct State Services.....	\$44,648,000
Grants-in-Aid.....	320,721,000

Appropriations by Fund:

General Fund.....	\$364,840,000
Casino Revenue Fund.....	529,000

54 DEPARTMENT OF HUMAN SERVICES

20 Physical and Mental Health

23 Mental Health Services

DIRECT STATE SERVICES

10-7710 Patient Care and Health Services.....	\$264,611,000

99-7710 Administration and Support Services	<u>65,936,000</u>

Total Direct State Services Appropriation, Mental Health

Services	<u>\$330,547,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$289,883,000)

Materials and Supplies.....	(21,503,000)

Services Other Than Personal	(10,837,000)

Maintenance and Fixed Charges.....	(5,916,000)

Special Purpose:

10 Interim Assistance	(809,000)

Additions, Improvements and Equipment	(1,599,000)

Receipts recovered from advances made under the Interim Assistance program in the mental health institutions are appropriated for the same purpose.

The unexpended balances at the end of the preceding fiscal year in the Interim Assistance program accounts in the mental health institutions are appropriated for the same purpose.

The amount hereinabove appropriated for the Division of Mental Health and Addiction Services for State facility operations and the amount appropriated as State Aid for the costs of county facility operations are first charged to the federal dispropor-

tionate share hospital (DSH) reimbursements anticipated as Medicaid uncompensated care. As such, DSH revenues earned by the State related to services provided by county psychiatric hospitals which are supported through this State Aid appropriation, shall be considered as the first source supporting the State Aid appropriation.

7700 Division of Mental Health and Addiction Services

DIRECT STATE SERVICES

99-7700 Administration and Support Services	<u>\$16,242,000</u>
Total Direct State Services Appropriation, Division of Mental Health and Addiction Services	<u>\$16,242,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$15,007,000)
Materials and Supplies.....	(91,000)
Services Other Than Personal	(494,000)
Maintenance and Fixed Charges	(170,000)
Additions, Improvements and Equipment	(480,000)

There are appropriated from the Alcohol Education, Rehabilitation and Enforcement Fund such sums as may be necessary to carry out the provisions of P.L.1983, c.531 (C.26:2B-32 et seq.).

There is appropriated from the "Drug Enforcement and Demand Reduction Fund" \$350,000 to carry out the provisions of P.L.1995, c.318 (C.26:2B-36 et seq.) to establish an "Alcohol and Drug Abuse Program for the Deaf, Hard of Hearing and Disabled" in the Department of Human Services, subject to the approval of the Director of the Division of Budget and Accounting.

GRANTS-IN-AID

08-7700 Community Services	\$355,822,000
09-7700 Addiction Services	<u>38,525,000</u>
Total Grants-in-Aid Appropriation, Division of Mental Health and Addiction Services	<u>\$394,347,000</u>

Grants-in-Aid:

08 Olmstead Support Services	(\$78,953,000)
08 Community Care	(258,924,000)
08 University Behavioral Healthcare Centers - University of Medicine and Dentistry - Newark	(6,165,000)
08 University Behavioral Healthcare Centers - University of Medicine and Dentistry - Piscataway	(11,780,000)
09 Substance Abuse Treatment for DCP&P/WorkFirst Mothers.....	(1,421,000)

- 09 Community Based Substance Abuse Treatment
and Prevention - State Share (24,265,000)
- 09 Medication Assisted Treatment Initiative (11,296,000)
- 09 Compulsive Gambling..... (650,000)
- 09 Mutual Agreement Parolee Rehabilitation Project
for Substance Abusers..... (893,000)

The amounts hereinabove appropriated for the University Behavioral Healthcare Centers (UBHC) - University of Medicine and Dentistry - Newark and Piscataway are first charged to the federal disproportionate share hospital reimbursements anticipated as Medicaid uncompensated care, and, as a condition for such appropriation, the University of Medicine and Dentistry of New Jersey shall be required to provide fiscal reports to the Division of Mental Health and Addiction Services and the Office of the State Comptroller, including all applicable expenses incurred for programs supported in whole or in part with the above appropriations, as well as all applicable revenues generated from the provision of such program services, as well as any other revenues used to support such services, in such a format and frequency as required by the Division of Mental Health and Addiction Services. In addition, the annual audit report and Consolidated Financial Statements for the University of Medicine and Dentistry of New Jersey must include supplemental schedules of Statements of Net Assets and Statements of Revenue, Expenses and Changes in Net Assets for the two UBHC Centers separately and UBHC as a whole.

With the exception of disproportionate share hospital revenues that may be received, federal and other funds received for the operation of the University Behavioral Healthcare Centers at Newark and Piscataway are appropriated to the University of Medicine and Dentistry of New Jersey for the operation of the centers.

An amount not to exceed \$2,490,000 may be transferred from the Olmstead Support Services account to the Health Care Subsidy Fund Payments account in the Department of Health, to increase the Mental Health Subsidy Fund portion of this account in order to maintain an amount not to exceed the fiscal 2008 per bed allocation for Short-Term Care Facility (STCF) beds, for new STCF beds which opened between January 1, 2008 and June 30, 2013, subject to the approval of the Director of the Division of Budget and Accounting.

The unexpended balance at the end of the preceding fiscal year of appropriations made to the Department of Human Services by section 20 of P.L.1989, c.51 for State-licensed or approved drug abuse prevention and treatment programs is appropriated for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, there is appropriated \$1,000,000 to the Department of Human Services from the "Drug Enforcement and Demand Reduction Fund" for drug abuse services.

In addition to the amount hereinabove appropriated for Community Based Substance Abuse Treatment and Prevention - State Share, there is appropriated \$1,500,000 from the "Drug Enforcement and Demand Reduction Fund" for the same purpose.

Notwithstanding the provisions of any law or regulation to the contrary, there is appropriated \$500,000 to the Department of Human Services from the "Drug Enforcement and Demand Reduction Fund" for the Sub-Acute Residential Detoxification Program.

In addition to the amount hereinabove appropriated for Compulsive Gambling, an amount not to exceed \$200,000 is appropriated from the annual assessment against permit holders to the Department of Human Services for prevention, education, and treatment programs for compulsive gambling pursuant to the provisions of section 34 of P.L.2001, c.199 (C.5:5-159), subject to the approval of the Director of the Division of Budget and Accounting.

There is appropriated \$420,000 from the Alcohol Education, Rehabilitation, and Enforcement Fund to fund the Local Alcoholism Authorities - Expansion program.

Notwithstanding the provisions of any law or regulation to the contrary, monies in the "Alcohol Treatment Programs Fund" established pursuant to section 2 of P.L.2001, c.48 (C.26:2B-9.2), not to exceed \$12,500,000, and the amounts hereinabove appropriated for Community Based Substance Abuse Treatment and Prevention - State Share, not to exceed \$2,200,000, are hereby appropriated, as determined by the Assistant Commissioner or designee of the Department of Human Services, subject to the approval of the Director of the Division of Budget and Accounting, for grants to providers of addiction services for capital construction projects selected and approved by the Assistant Commissioner of the Division of Mental Health and Addiction Services provided that: (1) such grants are made only after the Division of Property Management and Construction (DPMC) has reviewed and approved the proposed capital projects for validity of estimated costs and scope of the project; (2) the capital projects selected by the Assistant Commissioner of the Division of Mental Health and Addiction Services shall be based upon the need to retain existing capacity, complete the construction of previously funded projects which are currently under contract and necessary for the delivery of addiction services, or to relocate existing facilities to new sites; (3) the capital projects may consist of new construction and/or renovation to maintain and increase capacity at existing sites or at new sites; (4) the grant agreement entered into between the Assistant Commissioner of the Division of Mental Health and Addiction Services and the Grantee, or the governmental entity, as the case may be, described below, shall follow all applicable grant procedures which shall include, in addition to all other provisions, requirements for oversight by DPMC; (5) receipt of grant monies pursuant to this appropriation shall not obligate or require the Division of Mental Health and Addiction Services to provide any additional funding to the provider of addiction services to operate their existing facilities or the facility being funded through the construction grant; and (6) instead of the grant being made to the eligible provider for the approved capital project, the grant may be made to a governmental entity to undertake the approved capital project on behalf of the provider of addiction services. Prior to the end of calendar year 2012 and again prior to the end of the fiscal year, the Commissioner of Human Services shall notify the Joint Budget Oversight Committee of each grant awarded, the amount of each grant, and the recipients of the grants.

Notwithstanding the provisions of P.L.1983, c.531 (C.26:2B-32 et seq.) or any law or regulation to the contrary, the unexpended balance at the end of the preceding fiscal year in the Alcohol Education, Rehabilitation and Enforcement Fund is appropriated and shall be distributed to counties for the treatment of alcohol and drug abusers and for education purposes.

Notwithstanding any other law or regulation to the contrary, monies in the "Alcohol Treatment Programs Fund" established pursuant to section 2 of P.L.2001, c.48 (C.26:2B-9.2), and the amounts hereinabove appropriated for Community Based Substance Abuse Treatment and Prevention - State Share, are hereby appropriated, subject to the approval of the Director of the Division of Budget and Accounting, for the purpose of engaging the Division of Property Management and Construction (DPMC) to retain architects and consultants as deemed necessary by DPMC to review the proposed plans for capital construction projects for facilities providing addiction treatment services submitted by providers of addiction treatment services to the Division of Mental Health and Addiction Services to enable DPMC to determine the best facility layout at the lowest possible cost, to monitor the capital projects during design and construction, to provide assistance to the grantee with respect to the undertaking of the capital projects and to advise the Assistant Commissioner or designee of the Department of Human Services as may be required.

There is appropriated \$1,000,000 from the "Drug Enforcement and Demand Reduction Fund" to the Department of Human Services for a grant to Partnership for a Drug-Free New Jersey.

In addition to the amount hereinabove appropriated for Compulsive Gambling, an amount equal to one-half of forfeited winnings collected by the Casino Control Commission, not to exceed \$50,000 annually, shall be deposited into the State General Fund for appropriation to the Department of Human Services to provide funds for compulsive gambling treatment and prevention programs, pursuant to section 2 of P.L.2001, c.39 (C.5:12-71.3), subject to the approval of the Director of the Division of Budget and Accounting.

In order to permit flexibility in the handling of appropriations and assure timely payment to service providers, funds may be transferred within the Grants-In-Aid accounts within the Division of Mental Health and Addiction Services, in a cumulative amount not to exceed \$2,000,000, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of P.L.1998, c.149 or any law or regulation to the contrary, \$400,000 is appropriated from the Body Armor Replacement Fund to the Division of Mental Health and Addiction Services for the purposes of the "Law Enforcement Officer Crisis Intervention Services" Hotline and the reporting and operations of the Cop 2 Cop program.

STATE AID

08-7700 Community Services	<u>\$133,486,000</u>
Total State Aid Appropriation, Division of Mental Health and Addiction Services	<u>\$133,486,000</u>

State Aid:

08 Support of Patients in County Psychiatric

Hospitals(\$133,486,000)

The unexpended balance at the end of the preceding fiscal year in the Support of Patients in County Psychiatric Hospitals account is appropriated for the same purpose.

Notwithstanding the provisions of R.S.30:4-78, or any law or regulation to the contrary, the State share of payments from the Support of Patients in County Psychiatric Hospitals account to the several county psychiatric facilities on behalf of the reasonable cost of maintenance of patients deemed to be county indigents shall be at the rate of 125% of the established State House Commission rate for the period July 1, 2012 to December 31, 2012 and at the rate of 45% of the rate established by the Commissioner of Human Services for the period January 1, 2013 to June 30, 2013 such that the total amount to be paid by the State on behalf of county indigent patients for fiscal year 2013 shall not exceed 85% of the total reasonable per capita cost; and further provided that the rate at which the State will reimburse the county psychiatric hospitals shall not exceed 100% of the per capita rate at which each county pays to the State for the reasonable cost of maintenance and clothing of each patient residing in a State psychiatric facility, excluding the depreciation, interest, and carry-forward adjustment components of this rate, and including the depreciation, interest, and carry-forward adjustment components of each individual county psychiatric hospital's rate established for the period July 1, 2012 to December 31, 2012 by the State House Commission and for the period January 1, 2013 to June 30, 2013 by the Commissioner of Human Services.

Notwithstanding the provisions of any other law or regulation to the contrary, the amount hereinabove appropriated for Support of Patients in County Psychiatric Hospitals is conditioned upon the following provision: payments to county psychiatric hospitals will only be made after receipt of their claims by the Division of Mental Health and Addiction Services. County psychiatric hospitals shall submit such claims no less frequently than quarterly and within 15 days of the close of each quarter.

With the exception of all past, present, and future revenues representing federal financial participation received by the State from the United States that is based on payments to hospitals that serve a disproportionate share of low-income patients, which shall be retained by the State, the sharing of revenues received to defray the State Aid appropriation for the costs of maintaining patients in State and county psychiatric hospitals shall be based on the same percent as costs are shared between the State and counties.

The amount hereinabove appropriated for State Aid reimbursement payments for maintenance of patients in county psychiatric facilities shall be limited to inpatient services only, except that such reimbursement shall be paid to a county for outpatient and partial hospitalization services as defined by the Department of Human Services, if outpatient and/or partial hospitalization services had been previously provided at the county psychiatric facility prior to January 1, 1998. These outpatient and partial hospitalization payments shall not exceed the amount of State Aid

funds paid to reimburse outpatient and partial hospitalization services provided during calendar year 1997. In addition, any revision or expansion to the number of inpatient beds or inpatient services provided at such hospitals which will have a material impact on the amount of State Aid payments made for such services, must first be approved by the Department of Human Services before such change is implemented.

The amount hereinabove appropriated for the Division of Mental Health and Addiction Services for State facility operations and the amount appropriated as State Aid for the costs of county facility operations are first charged to the federal Disproportionate Share Hospital (DSH) reimbursements anticipated as Medicaid uncompensated care. Accordingly, DSH revenues earned by the State related to services provided by county psychiatric hospitals which are supported through this State Aid appropriation shall be considered as the first source supporting the State Aid appropriation.

In addition to the amounts hereinabove appropriated for the Support of Patients in County Psychiatric Hospitals, in the event that the Assistant Commissioner of the Division of Mental Health and Addiction Services determines that, in order to provide the least restrictive setting appropriate, a patient should be admitted to a county psychiatric hospital in a county other than the one in which the patient is domiciled rather than to a State psychiatric hospital, there are hereby appropriated such additional sums as may be required, as determined by the Assistant Commissioner to reimburse a county for the extra costs, if any, which were incurred in connection with the care of such patient in a county psychiatric hospital which exceeded the cost of care which would have been incurred had the patient been placed in a State psychiatric hospital, subject to the approval of the Director of the Division of Budget and Accounting.

The amount hereinabove appropriated for Support of Patients in County Psychiatric Hospitals is conditioned upon the following provisions: County psychiatric hospitals shall: (1) enroll and continue to maintain enrollment as providers in the State's Medicaid program; (2) complete or pursue in good faith the completion of eligibility applications for patients who could be Medicaid eligible; (3) bill the Medicaid program for all applicable services; and (4) neither admit nor discharge patients based upon Medicaid eligibility.

Notwithstanding the provisions of any other law or regulation to the contrary, the amount hereinabove appropriated for Support of Patients in County Psychiatric Hospitals is conditioned upon the county psychiatric hospitals providing and certifying all information that is required by the State to prepare a complete, accurate, and timely claim to federal authorities for Medicaid Disproportionate Share (DSH) claim revenues.

Notwithstanding the provisions of R.S.30:4-78, or any other law or regulation to the contrary, the amount hereinabove appropriated for Support of Patients in County Psychiatric Hospitals is conditioned upon the following provisions: for rates effective January 1, 2013, and any prior year rate adjustments that may be required beginning January 1, 2013, the approval of the State House Commission shall not be required for the setting of such rates and the Commissioner of Human Services

shall set the per capita cost rates to be paid by the State to the several counties on behalf of the reasonable cost of maintenance of State and county patients in any county psychiatric facility, including outpatient psychiatric services, the per capita rates which each county shall pay to the Treasurer for the reasonable cost of maintenance and clothing of each patient residing in a State psychiatric facility having a legal settlement in such county ("County Patients"), the rates to be paid for the reasonable cost of maintenance and clothing of the convict and criminal mentally ill in any State psychiatric facility and the cost of maintenance of County Patients residing in State developmental centers or receiving other residential functional services for the developmentally disabled. Such rates will be fixed no later than October 1 of each calendar year. Notice of such rates shall be provided by the Commissioner of Human Services to the clerk of the respective boards of chosen freeholders.

In the event that the Division of Mental Health and Addiction Services is notified that a county psychiatric hospital will cease operations for the current fiscal year, or any portion thereof, in order to assure continuity of care for patients who otherwise would have been served by the county hospital, as well as to preserve patient and public safety, the Division shall have the authority to transfer funds from the Support of Patients in County Psychiatric Hospitals account to Direct State Services and Grants-In-Aid accounts in the Division of Mental Health and Addiction Services, in amounts not to exceed \$33,200,000 for the fiscal year, subject to a plan approved by the Director of the Division of Budget and Accounting.

24 Special Health Services

7540 Division of Medical Assistance and Health Services

DIRECT STATE SERVICES

21-7540 Health Services Administration and Management	<u>\$30,471,000</u>
Total Direct State Services Appropriation, Division of Medical Assistance and Health Services	<u>\$30,471,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$11,874,000)
Materials and Supplies.....	(109,000)
Services Other Than Personal.....	(2,636,000)
Maintenance and Fixed Charges.....	(63,000)

Special Purpose:

21 Payments to Fiscal Agents	(15,410,000)
21 Professional Standards Review Organization - Utilization Review	(200,000)
21 Drug Utilization Review Board - Administrative Costs.....	(10,000)

Additions, Improvements and Equipment(169,000)

The unexpended balances at the end of the preceding fiscal year, in the Payments to Fiscal Agents account are appropriated for the same purpose.

Such funds as are necessary from the Health Care Subsidy Fund are appropriated to the Division of Medical Assistance and Health Services for payment to disproportionate share hospitals for uncompensated care costs as defined in P.L.1991, c.187 (C.26:2H-18.24 et seq.), and for subsidized children's health insurance in the NJ FamilyCare Program established in P.L.2005, c.156 (C.30:4J-8 et al.) to maximize federal Title XXI funding, subject to the approval of the Director of the Division of Budget and Accounting.

Additional federal Title XIX revenue generated from the claiming of uncompensated care payments made to disproportionate share hospitals shall be deposited in the General Fund as anticipated revenue.

Notwithstanding the provisions of any law or regulation to the contrary, any third party as defined in subsection m. of section 3 of P.L.1968, c.413 (C.30:4D-3), or in 42 U.S.C. 1396a(a)(25)(A), including but not limited to a pharmacy benefit manager, writing health, casualty, workers' compensation, or malpractice insurance policies in the State or covering residents of this State, shall enter into an agreement with the Division of Medical Assistance and Health Services to permit and assist the matching no less frequently than on a monthly basis of the Medicaid, NJ FamilyCare, Charity Care, and Work First New Jersey General Assistance eligibility files and/or adjudicated claims files against that third party's eligibility file, including indication of coverage derived from the Medicare Prescription Drug, Improvement, and Modernization Act of 2003, and/or adjudicated claims file for the purpose of coordination of benefits, utilizing, if necessary, social security numbers as common identifiers.

Notwithstanding the provisions of any law or regulation to the contrary, all past, present, and future revenues representing federal financial participation received by the State from the United States and that are based on payments made by the State to hospitals that serve a disproportionate share of low-income patients shall be deposited in the General Fund and may be expended only upon appropriation by law.

Notwithstanding the provisions of any law or regulation to the contrary, all revenues received from health maintenance organizations shall be deposited in the General Fund.

GRANTS-IN-AID

22-7540 General Medical Services	<u>\$3,002,292,000</u>
Total Grants-in-Aid Appropriation, Division of Medical	
Assistance and Health Services	<u>\$3,002,292,000</u>

Grants-in-Aid:

22 Payments for Medical Assistance Recipients -	
Adult Mental Health Residential	(\$31,483,000)
22 Managed Care Initiative	(1,797,741,000)
22 Payments for Medical Assistance Recipients -	
ICF/MR	(5,289,000)
22 Payments for Medical Assistance Recipients -	
Inpatient Hospital	(171,530,000)

22 Payments for Medical Assistance Recipients - Prescription Drugs	(271,520,000)
22 Payments for Medical Assistance Recipients - Outpatient Hospital	(61,920,000)
22 Payments for Medical Assistance Recipients - Physician Services	(14,357,000)
22 Payments for Medical Assistance Recipients - Home Health Care	(1,866,000)
22 Payments for Medical Assistance Recipients - Medicare Premiums	(160,966,000)
22 Payments for Medical Assistance Recipients - Dental Services	(3,654,000)
22 Payments for Medical Assistance Recipients - Psychiatric Hospital	(13,343,000)
22 Payments for Medical Assistance Recipients - Medical Supplies	(2,502,000)
22 Payments for Medical Assistance Recipients - Clinic Services	(70,175,000)
22 Payments for Medical Assistance Recipients - Transportation Services	(50,253,000)
22 Payments for Medical Assistance Recipients - Other Services	(3,627,000)
22 Eligibility Determination Services	(13,048,000)
22 Health Benefit Coordination Services	(9,689,000)
22 General Assistance Medical Services	(70,622,000)
22 NJ FamilyCare - Affordable and Accessible Health Coverage Benefits	(238,906,000)
22 Programs for Assertive Community Treatment	(9,801,000)
The amounts hereinabove appropriated for Payments for Medical Assistance Recipients are available for the payment of obligations applicable to prior fiscal years.	
In order to permit flexibility in the handling of appropriations and ensure the timely payment of claims to providers of medical services, amounts may be transferred to and from Payments for Medical Assistance Recipients - Adult Mental Health Residential and Payments for Medical Assistance Recipients - Other Services accounts within the General Medical Services program classification in the Division of Medical Assistance and Health Services and the Payments for Medical Assistance Recipients - Personal Care and the Payments for Medical Assistance Recipients - Other Services accounts in the Division of Disability Services in the Department of Human Services. Amounts may also be transferred to and from various items of appropriation within the General Medical Services program classification of the Division of Medical Assistance and Health Services in the Department	

of Human Services and the Medical Services for the Aged program classification in the Division of Aging Services in the Department of Human Services. All such transfers are subject to the approval of the Director of the Division of Budget and Accounting. Notice thereof shall be provided to the Legislative Budget and Finance Officer on the effective date of the approved transfer.

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

Notwithstanding the provisions of any law or regulation to the contrary, all object accounts appropriated in the General Medical Services program classification shall be conditioned upon the following provision: the Commissioner of Human Services shall have the authority to convert individuals enrolled in a State-funded program who are also eligible for a federally matchable program, to the federally matchable program without the need for regulations.

In addition to the amounts hereinabove appropriated for payments to providers on behalf of medical assistance recipients, such additional sums as may be required are appropriated from the General Fund to cover costs consequent to the establishment of presumptive eligibility for children and pregnant women in the Medicaid (Title XIX) program and the NJ FamilyCare Program as defined in P.L.2005, c.156 (C.30:4J-8 et al.).

Notwithstanding the provisions of P.L.1962, c.222 (C.44:7-76 et seq.), no funds are appropriated to the medical assistance for the aged program, which has been eliminated.

Notwithstanding the provisions of any law or regulation to the contrary, all object accounts appropriated in the General Medical Services program classification shall be conditioned upon the following provision: when any action by a county welfare agency, whether alone or in combination with the Division of Medical Assistance and Health Services, results in a recovery of improperly granted medical assistance, the Division of Medical Assistance and Health Services may reimburse the county welfare agency in the amount of 25% of the gross recovery.

All funds recovered pursuant to P.L.1968, c.413 (C.30:4D-1 et seq.) and P.L.1975, c.194 (C.30:4D-20 et seq.) during the current fiscal year are appropriated for payments to providers in the same program class from which the recovery originated.

Notwithstanding the provisions of any law or regulation to the contrary, and subject to federal approval, of the amounts appropriated in the General Medical Services program class, the Commissioner of Human Services is authorized to develop and introduce optional service plan innovations to enhance client choice for users of Medicaid optional services, while containing expenditures.

The amount hereinabove appropriated for the Division of Medical Assistance and Health Services first is to be charged to the federal disproportionate share hospital reimbursements anticipated as Medicaid uncompensated care.

The appropriations within the General Medical Services program class shall be conditioned upon the following: the Division of Medical Assistance and Health Services (DMAHS), in coordination with the county welfare agencies, shall continue

a program to outstation eligibility workers in disproportionate share hospitals and federally qualified health centers.

Notwithstanding the provisions of any law or regulation to the contrary, the amounts hereinabove appropriated in the Managed Care Initiative account are subject to the following condition: Non-contracted hospitals providing emergency services to Medicaid or NJ FamilyCare members enrolled in the managed care program shall accept as payment in full 95% of the amounts that the non-contracted hospital would receive from Medicaid for the emergency services and/or any related hospitalization if the beneficiary were enrolled in Medicaid fee-for-service.

Notwithstanding the provisions of any law or regulation to the contrary, effective January 1, 2009, payments for the Payments for Medical Assistance Recipients - Outpatient Hospital account for outpatient hospital reimbursement for all psychiatric services provided as an outpatient hospital service to all eligible individuals regardless of age, shall be paid at the lower of charges or the prospective hourly rates as defined in N.J.A.C.10:52. Costs related to such services shall be excluded from outpatient hospital cost settlements. Hospitals may provide continued services to all eligible individuals in partial hospitalization programs in need of additional care beyond the 24 month limit and shall bill for these extended services at the community partial care rate.

Notwithstanding the provisions of any law or regulation to the contrary, a sufficient portion of receipts generated or savings realized in Medical Assistance Grants-In-Aid accounts from initiatives may be transferred to the Health Services Administration and Management accounts to fund costs incurred in realizing these additional receipts or savings, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, effective commencing at the beginning of the current fiscal year and subject to federal approval, of the amounts hereinabove appropriated to Payments for Medical Assistance Recipients - Inpatient Hospital, inpatient medical services provided through the Division of Medical Assistance and Health Services shall be conditioned upon the following provision: No funds shall be expended for hospital services during which a preventable hospital error occurred or for hospital services provided for the necessary inpatient treatment arising from a preventable hospital error, as shall be defined by the Commissioner of Human Services.

Of the amount hereinabove appropriated to Payments for Medical Assistance Recipients - Inpatient Hospital, the Division of Medical Assistance and Health Services is authorized to competitively bid and contract for performance of federally mandated inpatient hospital utilization reviews, and the funds necessary for the contracted utilization review of these hospital services are made available from the Payments for Medical Assistance Recipients - Inpatient Hospital account, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, and subject to the notice provisions of 42 CFR 447.205, of the amount hereinabove appropriated for Payments for Medical Assistance Recipients - Adult Mental Health Residen-

tial, personal care assistant services shall be limited to no more than 25 hours per week, per recipient.

Of the amount hereinabove appropriated to Eligibility Determination Services, the Division of Medical Assistance and Health Services, subject to federal approval, shall implement policies that would limit the ability of persons who have the financial ability to provide for their own long-term care needs to manipulate current Medicaid rules to avoid payment for that care. The Division shall require, in the case of a married individual requiring long-term care services, that the portion of the couple's resources that is not protected for the needs of the community spouse be used solely for the purchase of long-term care services.

Of the amount hereinabove appropriated for Payments for Medical Assistance Recipients - Prescription Drugs, the Commissioners of Human Services and Health shall establish a system to utilize unopened and unexpired prescription drugs previously dispensed but not administered to individuals residing in nursing facilities.

The unexpended balance at the end of the preceding fiscal year in the NJ FamilyCare - Affordable and Accessible Health Coverage Benefits account is appropriated for the same purpose.

Of the amount hereinabove appropriated for the NJ FamilyCare Program, there shall be transferred to various accounts, including Direct State Services and State Aid accounts, such amounts, not to exceed \$6,000,000, as are necessary to pay for the administrative costs of the program, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, commencing at the beginning of the fiscal year, of the amounts hereinabove appropriated to NJ FamilyCare - Affordable and Accessible Health Coverage Benefits, premiums will no longer be required for children from families with incomes at or below 200% of the federal poverty level.

Of the revenues received as a result of sanctions to health maintenance organizations participating in Medicaid Managed Care, an amount not to exceed \$500,000 is appropriated to the Managed Care Initiative or NJ KidCare A - Administration account to improve access to medical services and quality care through such activities as outreach, education, and awareness, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, State funding for the New Jersey Health ACCESS program shall cease, and all enrollment shall be terminated as of July 1, 2001, or at such later date as shall be established by the Commissioner of Human Services.

Rebates from pharmaceutical manufacturing companies during the current fiscal year for prescription expenditures made to providers on behalf of Medicaid clients are appropriated for the Payments for Medical Assistance Recipients - Prescription Drugs account.

Notwithstanding the provisions of any law or regulation to the contrary, the appropriation in the General Assistance Medical Services account hereinabove shall be conditioned upon the following provisions which shall apply to the dispensing of prescription drugs through that account: (a) all Maximum Allowable Cost (MAC)

drugs dispensed shall state "Brand Medically Necessary" in the prescriber's own handwriting if the prescriber determines that it is necessary to override generic substitution of drugs; and (b) each prescription order shall follow the requirements of P.L.1977, c.240 (C.24:6E-1 et seq.). The list of drugs substituted shall conform to all requirements pertaining to drug substitution and federal upper limits for MAC drugs as administered by the State Medicaid Program.

Notwithstanding the provisions of any law or regulation to the contrary, the hereinabove appropriation for Payments for Medical Assistance Recipients - Prescription Drugs shall be conditioned upon the following provision: no funds shall be appropriated for the refilling of a prescription drug until such time as the original prescription is 85% finished.

Notwithstanding the provisions of any law or regulation to the contrary, and subject to the notice provisions of 42 CFR 447.205 where applicable, the appropriation in the Payments for Medical Assistance Recipients - Physician Services account shall be conditioned upon the following provisions: (a) reimbursement for the cost of physician-administered drugs shall be consistent with reimbursement for legend and non-legend drugs; and (b) reimbursement for physician-administered drugs shall be limited to those drugs supplied by manufacturers who have entered into the federal Medicaid Drug Rebate Agreement and are subject to drug rebate rules and regulations consistent with this agreement. The Division of Medical Assistance and Health Services shall collect and submit utilization and coding information to the Secretary of the United States Department of Health and Human Services for all single source drugs administered by physicians.

Notwithstanding the provisions of any law or regulation to the contrary, and subject to the notice provisions of 42 CFR 447.205, approved nutritional supplements which are funded hereinabove in the Payments for Medical Assistance Recipients - Prescription Drug program shall be consistent with reimbursement for legend and non-legend drugs.

Notwithstanding the provisions of any law or regulation to the contrary, the appropriations in the Payments for Medical Assistance Recipients - Prescription Drugs, General Assistance Medical Services, and NJ FamilyCare accounts shall be conditioned upon the following provision: each prescription order for protein nutritional supplements and specialized infant formulas dispensed shall be filled with the generic equivalent unless the prescription order states "Brand Medically Necessary" in the prescriber's own handwriting.

Notwithstanding the provisions of any law or regulation to the contrary, of the amounts hereinabove appropriated to the Payments for Medical Assistance Recipients - Prescription Drugs account, the capitated dispensing fee payments to providers of pharmaceutical services for residents of nursing facilities shall be adjusted to reflect the reduced prescription volume disbursed by Medicaid as a primary payer since the implementation of the Medicare Part D program; provided that subject to the execution of a signed agreement by all affected long-term care pharmacies and the Division of Medical Assistance and Health Services and the payment by all affected long-term care pharmacies pursuant to such agreement, the capitated dispensing fee payments to providers of pharmaceutical services for residents of nurs-

ing facilities shall be modified and paid at the per diem equivalent of the retail pharmacy rate for the average number of prescriptions filled when Medicaid is the primary payer.

Notwithstanding the provisions of any law or regulation to the contrary, of the amounts hereinabove appropriated to Payments for Medical Assistance Recipients - Prescription Drugs and General Assistance Medical Services, no payment shall be expended for drugs used for the treatment of erectile dysfunction, select cough/cold medications as defined by the Commissioner of Human Services, or cosmetic drugs, including but not limited to: drugs used for baldness, weight loss, and purely cosmetic skin conditions.

Of the amount hereinabove appropriated for Payments for Medical Assistance Recipients - Outpatient Hospital, an amount not to exceed \$1,900,000 is allocated for limited prenatal medical care for New Jersey pregnant women who, except for financial requirements, are not eligible for any other State or federal health insurance program.

Of the amount hereinabove appropriated for Payments for Medical Assistance Recipients - Clinic Services, an amount not to exceed \$1,900,000 is allocated for limited prenatal medical care provided by clinics, or in the case of radiology and clinical laboratory services ordered by a clinic, for New Jersey pregnant women who, except for financial requirements, are not eligible for any other State or federal health insurance program.

In accordance with the "Family Health Care Coverage Act," P.L.2005, c.156 (C.30:4J-8 et al.), rebates collected during the current fiscal year from the pharmaceutical manufacturing companies for prescription expenditures made to providers on behalf of General Assistance Medical Services clients are appropriated to NJ FamilyCare - Affordable and Accessible Health Coverage Benefits.

The amount hereinabove appropriated to Payments for Medical Assistance Recipients - Clinic Services shall be conditioned upon the following: notwithstanding the provisions of subsection (b) of N.J.A.C.10:60-5.3 and subsection (a) of N.J.A.C.10:60-5.4 to the contrary, a person receiving the maximum number of Early and Periodic Screening, Diagnosis and Treatment/Private Duty Nursing (EPSDT/PDN) services, that is, 16 hours in any 24-hour period, may be authorized to receive additional PDN hours if private health insurance is available to cover the cost of the additional hours and appropriate medical documentation is provided that indicates that additional PDN hours are required and that the primary caregiver is not qualified to provide the additional PDN hours.

Notwithstanding the provisions of subsection (a) of N.J.A.C.10:60-5.7 and subsection (e) of N.J.A.C.10:60-11.2 to the contrary, the amount hereinabove appropriated for Payments for Medical Assistance Recipients - Clinic Services is conditioned upon the Commissioner of Human Services increasing the hourly nursing rates for Early and Periodic Screening, Diagnosis and Treatment/Private Duty Nursing (EPSDT/PDN) services by \$10 per hour above the fiscal year 2008 rate.

The amount hereinabove appropriated for Payments for Medical Assistance Recipients - Other Services, NJ FamilyCare, and NJ KidCare may be used to pay financial rewards to individuals or entities who report instances of health care-related fraud

and/or abuse involving the programs administered by the Division of Medical Assistance and Health Services (DMAHS) (including, but not limited to, the New Jersey Medicaid and NJ FamilyCare programs), or the Pharmaceutical Assistance to the Aged and Disabled (PAAD) or Work First New Jersey General Public Assistance programs. Rewards may be paid only when the reports result in a recovery by DMAHS, and only if other conditions established by DMAHS are met, and shall be limited to 10% of the recovery or \$1,000, whichever is less. Notwithstanding the provisions of any law or regulation to the contrary, but subject to any necessary federal approval and/or change in federal law, receipt of such rewards shall not affect an applicant's individual financial eligibility for the programs administered by DMAHS, or for PAAD or Work First New Jersey General Public Assistance programs.

The amount hereinabove appropriated for Payments for Medical Assistance Recipients - Clinic Services, may be used to reimburse Federally Qualified Health Centers (FQHCs) the higher of their Medicaid PPS encounter rate or the fee-for-service rate for specified deliveries and ob/gyn surgeries for clients not enrolled in managed care. Reimbursement for surgical assistants shall be at the fee-for-service rate for clients not enrolled in managed care. Managed care organizations shall reimburse FQHCs for these services and the FQHCs shall be carved out of wrap-around reimbursement for these services.

Notwithstanding the provisions of any law or regulation to the contrary, no funds appropriated for the Medicaid program as hereinabove appropriated in the Payments for Medical Assistance Recipients - Prescription Drugs account are available to any pharmacy that does not agree to allow Medicaid to bill on its behalf any third party, as defined in subsection m. of section 3 of P.L.1968, c.413 (C.30:4D-3), by participating in a billing agreement executed between the State and the pharmacy.

Notwithstanding the provisions of any law or regulation to the contrary, effective January 1, 2005, inpatient hospital reimbursements for Medical Assistance services for dually eligible individuals shall exclude Medicare Part A crossover payments according to a plan designed by the Commissioner of Human Services and approved by the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any other law or regulation to the contrary, the amounts expended from Payments for Medical Assistance Recipients - Medical Supplies shall be conditioned upon the following: reimbursement for adult incontinence briefs and oxygen concentrators shall be set at 70% of reasonable and customary charges.

Notwithstanding the provisions of any law or regulation to the contrary, the appropriation in the Payments for Medical Assistance Recipients - Clinic Services, Payments for Medical Assistance Recipients - Physician Services, Payments for Medical Assistance Recipients - Medical Supplies and Payments for Medical Assistance Recipients - Other Services shall be conditioned upon the following provision: no funds shall be expended for partial care services, chiropractic services, medical supplies except those sold in a pharmacy, or podiatry services to any provider who was not a Medicaid/NJ FamilyCare approved provider of partial care services, chiropractic services, medical supplies except those sold in a pharmacy, or podiatry

services, respectively, prior to July 1, 2006 with the exception of new providers whose services are deemed necessary to meet special needs by the Division of Medical Assistance and Health Services.

Notwithstanding the provisions of any State law or regulation to the contrary, effective July 1, 2009, no payments for partial care services in mental health clinics, as hereinabove appropriated in Payments for Medical Assistance Recipients - Clinic Services shall be provided unless the services are prior authorized by professional staff designated by the Department of Human Services.

Notwithstanding the provisions of any law or regulation to the contrary, the appropriation hereinabove for Payments for Medical Assistance Recipients - Outpatient Hospital shall be conditioned upon the following provision: certifications shall not be granted for new or relocating offsite hospital-based entities in accordance with N.J.A.C.10:52-1.3 with the exception of providers whose services are deemed necessary to meet special needs by the Division of Medical Assistance and Health Services.

The amounts hereinabove appropriated for the General Medical Services program classification are conditioned upon the Commissioner of Human Services making changes to such programs to make them consistent with the federal Deficit Reduction Act of 2005.

Notwithstanding the provisions of any law or regulation to the contrary, all financial recoveries obtained through the efforts of any entity authorized to undertake the prevention and detection of Medicaid fraud, waste and abuse, are appropriated to General Medical Services in the Division of Medical Assistance and Health Services.

Such sums as may be necessary are appropriated from enhanced audit recoveries obtained by the Division of Medical Assistance and Health Services to fund the costs of enhanced audit recovery efforts of the division within the General Medical Services program classification, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of subsection d. of section 5 of P.L.2005, c.156 (C.30:4J-12) or any other law or regulation to the contrary, the appropriations hereinabove for Medicaid and NJ FamilyCare are subject to the following condition: the Department of Human Services may determine eligibility for the Medicaid and NJ FamilyCare programs by verifying income through any means authorized by the Children's Health Insurance Program Reauthorization Act of 2009, Pub.L.111-3, including through electronic matching of data files provided that any consents if required under State or federal law for such matching are obtained.

Notwithstanding the provisions of any other law or regulation to the contrary, and subject to any federal approval that may be necessary, the amounts hereinabove appropriated in the Managed Care Initiative account are subject to the following condition: Effective July 1, 2011, assuming receipt of any applicable federal approval, the following services, which were previously covered by Medicaid fee-for-service, shall be covered and provided instead through a managed care delivery system for all clients served by and/or enrolled in that system: 1) home health agency services; 2) medical day care, including both adult day health services and

pediatric medical day care; 3) prescription drugs; and 4) rehabilitation services, including occupational, physical, and speech therapies. The above condition shall be effective for personal care assistant services.

Notwithstanding the provisions of any law or regulation to the contrary, the amounts hereinabove appropriated to NJ FamilyCare - Affordable and Accessible Health Coverage Benefits are subject to the following conditions:

(a) as of July 1, 2011, all parents or caretakers whose applications to enroll in the NJ FamilyCare Program were received on or after March 1, 2010: (i) whose family gross income does not exceed 200% of the federal poverty level; (ii) who have no health insurance, as determined by the Commissioner of Human Services; and (iii) who are ineligible for Medicaid shall not be eligible for enrollment in the NJ FamilyCare Program and there shall be no future enrollments of such persons in the NJ FamilyCare Program; and

(b) as of July 1, 2011, any adult alien lawfully admitted for permanent residence, but who has lived in the United States for less than five full years after such lawful admittance and whose enrollment in the NJ FamilyCare Program was terminated on or before July 1, 2010 shall not be eligible to be enrolled in the NJ FamilyCare Program, provided however, that this termination of enrollment and benefits shall not apply to such persons who are either (i) pregnant or (ii) under the age of 19.

Notwithstanding the provisions of any other law or regulation to the contrary, and subject to any federal approval that may be necessary, the amounts hereinabove appropriated in the Managed Care Initiative account are subject to the following condition: only the following individuals shall be excluded from mandatory enrollment in the Medicaid/NJ FamilyCare managed care program: (1) individuals who are institutionalized in an inpatient psychiatric institution, or an inpatient psychiatric program for children under the age of 21 or in a residential facility including facilities characterized by the federal government as ICFs/MR, except that individuals who are eligible through the Division of Child Placement and Permanency (DCP&P) and are placed in a DCP&P non-Joint Committee on Accreditation of Healthcare Organizations (JCAHO) accredited children's residential care facility and individuals in a mental health or substance abuse residential treatment facility shall not be excluded from enrollment pursuant to this paragraph; (2) individuals in out-of-State placements; (3) special low-income Medicare beneficiaries (SLMBs); and (4) individuals in the Program of All-Inclusive Care for the Elderly (PACE) program.

Notwithstanding the provisions of any law or regulation to the contrary, and subject to the notice provisions of 42 CFR 447.205 where applicable, the amounts hereinabove appropriated for fee-for-service prescription drugs in the Payments for Medical Assistance Recipients - Prescription Drugs or General Assistance Medical Services account are subject to the following conditions: (1) the maximum allowable cost for legend and non-legend drugs shall be calculated based on the lowest of (i) the Estimated Acquisition Cost (EAC), defined as a drug's Wholesale Acquisition Cost less a volume discount of one (1) percent; (ii) the federal upper limit (FUL); or (iii) the State upper limit (SUL); and (iv) cost acquisition data submitted by providers of pharmaceutical services for single-source or brand-name multi-source drugs where

an alternative pricing benchmark is not available; (2) pharmacy reimbursement for legend and non-legend drugs shall be calculated based on the (i) the lowest of the EAC, FUL or SUL plus a dispensing fee of \$3.73 to \$3.99; or a provider's usual and customary charge; or (ii) the lower of cost acquisition data submitted by providers of pharmaceutical services for single-source or brand-name multi-source drugs, where an alternative pricing benchmark is not available, plus a professional fee; or a provider's usual and customary charge. To effectuate the calculation of SUL rates and/or the calculation of single-source and brand-name multi-source legend and non-legend drug costs where an alternative pricing benchmark is not available, which is intended to be budget neutral, the Department of Human Services shall mandate ongoing submission of current drug acquisition data by providers of pharmaceutical services. No funds hereinabove appropriated shall be paid to any entity that fails to submit required data.

Premiums received from families enrolled in the NJ FamilyCare Program established pursuant to P.L.2005, c.156 (C.30:4J-8 et al.) are appropriated for NJ FamilyCare payments.

Notwithstanding the provisions of any law or regulation to the contrary, of the amounts hereinabove appropriated to Payments for Medical Assistance Recipients - Inpatient Hospital, effective January 1, 2013, the Medicaid inpatient fee-for-service payment rates will not be adjusted to incorporate the annual excluded hospital inflation factor, also referred to as the economic factor recognized under the Centers for Medicare and Medicaid Services Tax Equity and Fiscal Responsibility Act, Pub.L. 97-248 (TEFRA) target limitations.

Notwithstanding the provisions of any law or regulation to the contrary, the amounts hereinabove appropriated in Payments for Medical Assistance Recipients - Inpatient Hospital and Payments for Medical Assistance Recipients - Outpatient Hospital are subject to the following condition: for an out-of-State hospital participating in the New Jersey Medicaid or NJ FamilyCare Program, other than an out-of-State hospital for which payment is based on a binding settlement agreement between the State and such hospital, payment for claims with Date of Discharge on or after July 1, 2012, shall be equal to the lowest of the following three amounts: (i) the amount charged by the billing hospital for the rendered services; (ii) the rate of payment for out-of-State hospitals as described at N.J.A.C.10:52-4.5(a) through (d); or (iii) the average Statewide rate of payment for New Jersey hospitals as described at N.J.A.C.10:52-4.3 (outpatient services) or the rate of payment as described at N.J.A.C.10:52-14.10 through N.J.A.C.10:52-14.16 (inpatient services) utilizing the Statewide base rate as the hospital's final rate and an average hospital inpatient cost-to-charge ratio.

26 Division of Aging Services

DIRECT STATE SERVICES

20-7530 Medical Services for the Aged	\$3,939,000
24-7530 Pharmaceutical Assistance to the Aged and Disabled	6,062,000
55-7530 Programs for the Aged.....	1,234,000
(From General Fund	\$363,000)
(From Casino Revenue Fund.....	871,000)

57-7530 Office of the Public Guardian.....	634,000
Total Direct State Services Appropriation, Division of	
Aging Services	\$11,869,000
<i>(From General Fund</i>	<i>\$10,998,000)</i>
<i>(From Casino Revenue Fund.....</i>	<i>871,000)</i>

Direct State Services:

Personal Services:

Salaries and Wages	(\$7,715,000)
Salaries and Wages (CRF)	(658,000)
Employee Benefits (CRF)	(138,000)
Materials and Supplies.....	(163,000)
Materials and Supplies (CRF)	(14,000)
Services Other Than Personal	(2,540,000)
Services Other Than Personal (CRF).....	(47,000)
Maintenance and Fixed Charges.....	(437,000)
Maintenance and Fixed Charges (CRF).....	(2,000)

Special Purpose:

55 Federal Programs for the Aged	(143,000)
Additions, Improvements and Equipment (CRF)	(12,000)

When any action by a county welfare agency, whether alone or in combination with the Department of Human Services, results in a recovery of improperly granted medical assistance, the Department of Human Services may reimburse the county welfare agency in the amount of 25% of the gross recovery.

Notwithstanding the provisions of any law or regulation to the contrary, the amount hereinabove appropriated for the Pharmaceutical Assistance to the Aged and Disabled (PAAD) program is subject to the following condition: any third party, as defined in subsection m. of section 3 of P.L.1968, c.413 (C.30:4D-3), or in 42 U.S.C. s.1396a(a)(25)(A), including but not limited to a pharmacy benefit manager writing health, casualty, or malpractice insurance policies in the State or covering residents of this State, shall enter into an agreement with the Department of Human Services to permit and assist the matching of the Department of Human Services' program eligibility and/or adjudication claims files against that third party's eligibility and/or adjudicated claims files for the purpose of the coordination of benefits, utilizing, if necessary, social security numbers as common identifiers.

Receipts from the Office of the Public Guardian for Elderly Adults are appropriated to the Office of the Public Guardian.

GRANTS-IN-AID

20-7530 Medical Services for the Aged	\$815,527,000
<i>(From General Fund</i>	<i>\$715,407,000)</i>
<i>(From Casino Revenue Fund.....</i>	<i>100,120,000)</i>
24-7530 Pharmaceutical Assistance to the Aged and Disabled	85,138,000
<i>(From General Fund</i>	<i>22,100,000)</i>
<i>(From Casino Revenue Fund.....</i>	<i>63,038,000)</i>

55-7530 Programs for the Aged.....	<u>45,148,000</u>
(From General Fund	<u>30,400,000</u>)
(From Casino Revenue Fund.....	<u>14,748,000</u>)
Total Grants-in-Aid Appropriation, Division of Aging	
Services	<u>\$945,813,000</u>
(From General Fund	<u>\$767,907,000</u>)
(From Casino Revenue Fund.....	<u>177,906,000</u>)

Grants-in-Aid:

20 Global Budget for Long Term Care	(\$40,695,000)
20 Global Budget for Long Term Care (CRF)	(100,000,000)
20 Payments for Medical Assistance Recipients -	
Nursing Homes	(671,429,000)
20 Medical Day Care Services	(3,283,000)
20 Hearing Aid Assistance for the Aged and	
Disabled (CRF)	(120,000)
24 Pharmaceutical Assistance to the Aged - Claims	(2,750,000)
24 Pharmaceutical Assistance to the Aged and	
Disabled - Claims.....	(11,406,000)
24 Pharmaceutical Assistance to the Aged	
and Disabled - Claims (CRF)	(63,038,000)
24 Senior Gold Prescription Discount Program	(7,944,000)
55 Community Based Senior Programs	(30,400,000)
55 Community Based Senior Programs (CRF)	(14,748,000)

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

In order to permit flexibility in the handling of appropriations and ensure the timely payment of claims to providers of medical services, amounts may be transferred between the various items of appropriation within the Medical Services for the Aged and Programs for the Aged program classifications to ensure the continuity of long-term care support services for beneficiaries receiving services within the Medical Services for the Aged program classification in the Division of Aging Services in the Department of Human Services, subject to the approval of the Director of the Division of Budget and Accounting. Notice thereof shall be provided to the Legislative Budget and Finance Officer on the effective date of the approved transfer.

All funds recovered pursuant to P.L.1968, c.413 (C.30:4D-1 et seq.) and P.L.1975, c.194 (C.30:4D-20 et seq.) during the preceding fiscal year are appropriated for

payments to providers in the same program class from which the recovery originated.

Notwithstanding the provisions of any law or regulation to the contrary, a sufficient portion of receipts generated or savings realized in the Medical Services for the Aged or Pharmaceutical Assistance to the Aged and Disabled Grants-In-Aid accounts from initiatives included in the current fiscal year appropriations act may be transferred to administration accounts to fund costs incurred in realizing these additional receipts or savings, subject to the approval of the Director of the Division of Budget and Accounting.

Subject to federal approval, the appropriations for those programs within the Medical Services for the Aged program classification are conditioned upon the Department of Human Services implementing policies that would limit the ability of persons who have the financial ability to provide for their own long-term care needs to manipulate current Medicaid rules to avoid payment for that care. The Division of Medical Assistance and Health Services and the Division of Aging Services shall require, in the case of a married individual requiring long-term care services, that the portion of the couple's resources which are not protected for the needs of the community spouse be used solely for the purchase of long-term care services.

Such sums as may be necessary are appropriated from enhanced audit recoveries obtained by the Department of Human Services to fund the costs of enhanced audit recovery efforts of the Department within the Medical Services for the Aged program classification, subject to the approval of the Director of the Division of Budget and Accounting.

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

Such sums as may be necessary are appropriated from the General Fund for the payment of increased nursing home rates to reflect the costs incurred due to the payment of a nursing home provider assessment, pursuant to the "Nursing Home Quality of Care Improvement Fund Act," P.L.2003, c.105 (C.26:2H-92 et seq.), and P.L.2004, c.41, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of N.J.A.C.8:85 or any law or other regulation to the contrary, the amounts hereinabove appropriated for Payments for Medical Assistance Recipients - Nursing Homes and Global Budget for Long Term Care shall be conditioned upon the following: (1) the per diem rate for each nursing home shall not be less than the per diem rate last received by that facility for Fiscal Year 2012 and (2) monies designated pursuant to subsection c. of section 6 of P.L.2003, c.105 (C.26:2H-97) for distribution to nursing homes less the portion of those funds to be paid as pass-through payments in accordance with paragraph 1 of subsection d. of section 6 of P.L.2003, c.105 (C.26:2H-97) shall be combined with amounts hereinabove appropriated for Payments for Medical Assistance Recipients - Nursing Homes and Global Budget for Long Term Care for the purpose of Medicaid reimbursement to nursing facilities according to the rate setting methodology established in N.J.A.C.8:85. For the purposes of this paragraph, a nursing facility's per

diem reimbursement rate shall not include, if the nursing facility is eligible for reimbursement, the difference between the full calculated provider tax add-on and the quality of care portion of the provider tax add-on.

Notwithstanding the provisions of any law or regulation to the contrary, no payment for Medicaid Adult or Pediatric Medical Day Care services, as hereinabove appropriated in the Medical Day Care Services account, shall be provided unless the services are prior authorized by professional staff designated by the Department of Human Services.

Notwithstanding the provisions of any law or regulation to the contrary, the amounts hereinabove appropriated for Medical Day Care Services shall be conditioned upon the following provision: the per diem reimbursement rate for adult Medical Day Care providers shall be set at \$78.50.

Notwithstanding the provisions of any law or regulation to the contrary, the amounts hereinabove appropriated for Medical Day Care Services shall be conditioned on the following provision: physical therapy, occupational therapy and speech therapy shall no longer serve as a permissible criteria for eligibility in the adult Medical Day Care Program.

Notwithstanding the provisions of any law or regulation to the contrary, the amounts hereinabove appropriated for Medical Day Care Services shall be conditioned on the following provision: effective August 15, 2010, no payments for Medicaid adult medical day care services shall be provided on behalf of any beneficiary who received prior authorization for these services based exclusively on the need for medication administration.

Notwithstanding the provisions of any law or regulation to the contrary, the amounts hereinabove appropriated for Medical Day Care Services shall be conditioned on the following provision: no licensed facility in the adult Medical Day Care Program may serve or receive reimbursement for more than 200 Medicaid beneficiaries per day. Furthermore, no reimbursement will be provided for any claim in excess of a given facility's licensed capacity as established by the Department of Health.

Notwithstanding the provisions of N.J.A.C.8:87 or any other law or regulation to the contrary, the amounts hereinabove appropriated for Medical Day Care Services shall be subject to the following condition: the daily reimbursement for fee-for-service pediatric medical day care shall remain at the rate established in the preceding fiscal year.

Notwithstanding the provisions of any law or regulation to the contrary, no funds appropriated in the Pharmaceutical Assistance to the Aged and Disabled program classification and the Senior Gold Prescription Discount Program account shall be expended for fee-for-service prescription drug claims with no Medicare Part D coverage except under the following conditions: (1) the maximum allowable cost for legend and non-legend drugs shall be calculated based on the lowest of (i) the Estimated Acquisition Cost (EAC), defined as a drug's Wholesale Acquisition Cost less a volume discount of one (1) percent; (ii) the federal upper limit (FUL); or (iii) the State upper limit (SUL); and (iv) cost acquisition data submitted by providers of pharmaceutical services for single-source or brand-name multi-source drugs where an alternative pric-

ing benchmark is not available; (2) pharmacy reimbursement for legend and non-legend drugs shall be calculated based on the (i) the lowest of the EAC, FUL, or SUL plus a dispensing fee of \$3.73 to \$3.99; or a provider's usual and customary charge; or (ii) the lower of cost acquisition data submitted by providers of pharmaceutical services for single-source or brand-name multi-source drugs, where an alternative pricing benchmark is not available, plus a professional fee; or a provider's usual and customary charge. To effectuate the calculation of SUL rates and/or the calculation of single-source and brand-name multi-source legend and non-legend drug costs where an alternative pricing benchmark is not available, which is intended to be budget neutral, the Department of Human Services shall mandate ongoing submission of current drug acquisition data by providers, of pharmaceutical services. No funds hereinabove appropriated shall be paid to any entity that fails to submit required data.

The amounts hereinabove appropriated for payments for the Pharmaceutical Assistance to the Aged and Disabled Program, P.L.1975, c.194 (C.30:4D-20 et seq.), and the Senior Gold Prescription Discount Program, P.L.2001, c.96 (C.30:4D-43 et seq.), are available for the payment of obligations applicable to prior fiscal years.

Benefits provided under the Pharmaceutical Assistance to the Aged and Disabled (PAAD) program, P.L.1975, c.194 (C.30:4D-20 et seq.), and the Senior Gold Prescription Discount Program, P.L.2001, c.96 (C.30:4D-43 et seq.), shall be the last resource benefits, notwithstanding any provisions contained in contracts, wills, agreements, or other instruments. Any provision in a contract of insurance, will, trust agreement, or other instrument which reduces or excludes coverage or payment to an individual because of that individual's eligibility for, or receipt of, PAAD or Senior Gold Prescription Discount Program benefits shall be void, and no PAAD and Senior Gold Prescription Discount Program payments shall be made as a result of any such provision.

Of the amount hereinabove appropriated in the Pharmaceutical Assistance to the Aged and Disabled - Claims program, notwithstanding the provisions of section 3 of P.L.1975, c.194 (C.30:4D-22) to the contrary, the copayment in the Pharmaceutical Assistance to the Aged and Disabled program shall be \$5 for generic drugs and \$7 for brand name drugs.

Notwithstanding the provisions of any law or regulation to the contrary, subject to the approval of a plan by the Commissioner of Human Services, no funds appropriated for the Pharmaceutical Assistance to the Aged and Disabled (PAAD) program, pursuant to P.L.1975, c.194 (C.30:4D-20 et seq.), or the Senior Gold Prescription Discount Program (Senior Gold), pursuant to P.L.2001, c.96 (C.30:4D-43 et seq.), shall be expended, when PAAD or Senior Gold is the primary payer, unless participating pharmaceutical manufacturing companies execute contracts with the Department of Human Services. Name brand manufacturers must provide for the payment of rebates to the State on the same basis as provided for in subsections (a) through (c) of section 1927 of the federal Social Security Act, 42 U.S.C. s.1396r-8.

Notwithstanding the provisions of any law or regulation to the contrary, no funds appropriated for the Pharmaceutical Assistance to the Aged and Disabled (PAAD) program, pursuant to P.L.1975, c.194 (C.30:4D-20 et seq.), and the Senior Gold Pre-

scription Discount Program, pursuant to P.L.2001, c.96 (C.30:4D-43 et seq.), shall be expended unless participating pharmaceutical manufacturing companies execute contracts with the Department of Human Services, providing for the payment of rebates to the State. Furthermore, rebates from pharmaceutical manufacturing companies for prescriptions purchased by the PAAD program and the Senior Gold Prescription Discount Program shall continue during the current fiscal year, provided that the manufacturer's rebates for PAAD claims paid as secondary to Medicare Part D and for the Senior Gold Prescription Discount Program shall apply only to the amount paid by the State under the PAAD and Senior Gold Prescription Discount Program. All revenues from such rebates during the current fiscal year are appropriated for the PAAD program and the Senior Gold Prescription Discount Program.

In addition to the amount hereinabove appropriated for the Pharmaceutical Assistance to the Aged and Disabled and the Senior Gold Prescription Discount programs, there are appropriated from the General Fund and available federal matching funds such additional sums as may be required for the payment of claims, credits, and rebates, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, the appropriations for the Pharmaceutical Assistance to the Aged and Disabled program and the Senior Gold Prescription Discount Program are conditioned upon the Department of Human Services coordinating benefits with any voluntary prescription drug mail-order or specialty pharmacy in a Medicare Part D provider network or private third party liability plan network for beneficiaries enrolled in a Medicare Part D program or beneficiaries with primary prescription coverage that requires use of mail order. The mail-order program may waive, discount, or rebate the beneficiary copayment and mail-order pharmacy providers may dispense up to a 90-day supply on prescription refills with the voluntary participation of the beneficiary, subject to the approval of the Commissioner of Human Services and the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, the amounts hereinabove appropriated for the Pharmaceutical Assistance to the Aged and Disabled (PAAD) programs are conditioned upon the Department of Human Services coordinating the benefits of the PAAD programs with the prescription drug benefits of the federal "Medicare Prescription Drug, Improvement, and Modernization Act of 2003" as the primary payer due to the current federal prohibition against State automatic enrollment of PAAD recipients in the federal program. The PAAD program benefit and reimbursement shall only be available to cover the beneficiary cost share to in-network pharmacies and for deductible and coverage gap costs (as determined by the Commissioner of Human Services) associated with enrollment in Medicare Part D for beneficiaries of the PAAD and Senior Gold Prescription Discount programs, and for Medicare Part D premium costs for PAAD beneficiaries.

Notwithstanding the provisions of any law or regulation to the contrary, no funds appropriated in the Pharmaceutical Assistance to the Aged or Pharmaceutical Assistance to the Aged and Disabled (PAAD) program and Senior Gold Prescription

Discount Program accounts shall be available as payment as a PAAD program or Senior Gold Prescription Discount Program benefit to any pharmacy that is not enrolled as a participating pharmacy in a pharmacy network under Medicare Part D.

Consistent with the requirements of the federal "Medicare Prescription Drug, Improvement, and Modernization Act of 2003" and the current federal prohibition against State automatic enrollment of Pharmaceutical Assistance to the Aged and Pharmaceutical Assistance to the Aged and Disabled (PAAD) program and Senior Gold Prescription Discount Program recipients, no funds hereinabove appropriated to the PAAD program or Senior Gold Prescription Discount Program accounts shall be expended for any individual unless the individual enrolled in the PAAD program or Senior Gold Prescription Discount Program provides all data necessary to enroll the individual in Medicare Part D, including data required for the subsidy assistance, as outlined by the Centers for Medicare and Medicaid Services.

Notwithstanding the provisions of any law or regulation to the contrary, the amount hereinabove appropriated for the Pharmaceutical Assistance to the Aged and Pharmaceutical Assistance to the Aged and Disabled programs, and Senior Gold Prescription Discount Program shall be conditioned upon the following provision: no funds shall be appropriated for the refilling of a prescription drug until such time as the original prescription is 85% finished.

Notwithstanding the provisions of any law or regulation to the contrary, in order to maximize drug coverage under Medicare Part D, the appropriation for the Senior Gold Prescription Discount Program is conditioned on the Senior Gold Prescription Discount Program being designated the authorized representative for the purpose of coordinating benefits with the Medicare drug program, including appeals of coverage determinations. The Senior Gold Prescription Discount Program is authorized to represent program beneficiaries in the pursuit of such coverage. Senior Gold Prescription Discount Program representation shall include, but not to be limited to, the following actions: pursuit of appeals, grievances, and coverage determinations.

Notwithstanding the provisions of any law or regulation to the contrary, no amounts hereinabove appropriated for the Pharmaceutical Assistance to the Aged and Disabled (PAAD) program or the Senior Gold Prescription Discount Program shall be expended to cover medications not on the formulary of a PAAD program or Senior Gold Prescription Discount Program beneficiary's Medicare Part D plan. This exclusion shall not apply to those drugs covered by the PAAD program and Senior Gold Prescription Discount Program which are specifically excluded by the federal "Medicare Prescription Drug, Improvement, and Modernization Act of 2003" (MMA). In addition, this exclusion shall not impact the beneficiary's rights, guaranteed by the MMA, to appeal the medical necessity of coverage for drugs not on the formulary of a Medicare Part D plan.

Notwithstanding the provisions of any law or regulation to the contrary, no amounts hereinabove appropriated for the Pharmaceutical Assistance to the Aged and Disabled (PAAD) program or the Senior Gold Prescription Discount Program shall be expended for diabetic testing materials and supplies which are covered under the federal Medicare Part B program, or for vitamins, cough/cold medications, drugs

used for the treatment of erectile dysfunction, or cosmetic drugs, including but not limited to: drugs used for baldness, weight loss, and skin conditions.

From the amount hereinabove appropriated for the Pharmaceutical Assistance to the Aged - Claims and Senior Gold Prescription Discount Program, an amount not to exceed \$3,850,000 may be transferred to various accounts as required, including Direct State Services accounts, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, all financial recoveries obtained through the efforts of any entity authorized to undertake the prevention and detection of Medicaid fraud, waste, and abuse, are appropriated to Medical Services for the Aged in the Division of Aging Services.

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

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

Notwithstanding the provisions of section 2 of P.L.1988, c.114 (C.26:2M-10) or any other law or regulation to the contrary, the amount appropriated for Community Based Senior Programs is subject to the following condition: private for-profit agencies shall be eligible grantees for funding from the Community Based Senior Programs account for Alzheimer's Disease activities.

Notwithstanding the provisions of any law or regulation to the contrary, the amounts hereinabove appropriated for Payments for Medical Assistance Recipients - Nursing Homes and Global Budget for Long Term Care are subject to the following condition: nursing facilities shall not receive payments for bed hold or therapeutic leave days for Medicaid beneficiaries; provided that nursing facilities shall continue to reserve beds for Medicaid beneficiaries who are hospitalized or on therapeutic leave as required by N.J.A.C.8:85-1.14.

Notwithstanding the provisions of any law or regulation to the contrary, the amount hereinabove appropriated for Payments for Medical Assistance Recipients - Nursing Homes and Global Budget for Long Term Care is subject to the following condition: if nursing facility reimbursement is shifted to managed long term care during fiscal year 2013 under the Medicaid Comprehensive Waiver, the managed care organizations for the State shall maintain the reimbursement rates last calculated pursuant to N.J.A.C.8:85, effective in fiscal year 2013, through the end of fiscal year 2013.

- In addition to the amounts hereinabove appropriated for Pharmaceutical Assistance to the Aged and Disabled and Hearing Aid Assistance for the Aged and Disabled (CRF), there are appropriated from the Casino Revenue Fund and available federal matching funds such additional sums as may be required for the payment of claims, credits, and rebates, subject to the approval of the Director of the Division of Budget and Accounting.
- All funds recovered under P.L.1968, c.413 (C.30:4D-1 et seq.) and P.L.1975, c.194 (C.30:4D-20 et seq.), during the current fiscal year are appropriated for payments to providers in the same program class from which the recovery originated.
- In order to permit flexibility in the handling of appropriations and ensure the timely payment of claims to providers of medical services, amounts may be transferred to and from the various items of appropriation within the Medical Services for the Aged program classification, subject to the approval of the Director of the Division of Budget and Accounting. Notice thereof shall be provided to the Legislative Budget and Finance Officer on the effective date of the approved transfer.
- For the purposes of account balance maintenance, all object accounts in the Medical Services for the Aged program classification shall be considered as one object. This will allow timely payment of claims to providers of medical services, but ensure that no overspending will occur in the program classification.
- Notwithstanding the provisions of P.L.1988, c.92 (C.30:4E-5 et seq.) to the contrary, funds appropriated for the Home Care Expansion Program (HCEP) shall be paid only for individuals enrolled in the program as of June 30, 1996 who are not eligible for the Global Budget for Long Term Care or alternative programs, and only for so long as those individuals require services covered by the HCEP.
- Notwithstanding the provisions of any law or regulation to the contrary, a sufficient portion of receipts generated or savings realized in Casino Revenue Fund, Medical Services for the Aged, or Pharmaceutical Assistance to the Aged and Disabled Grants-In-Aid accounts from initiatives included in the current fiscal year's annual appropriations act may be transferred to administration accounts to fund costs incurred in realizing these additional receipts or savings, subject to the approval of the Director of the Division of Budget and Accounting.
- The amounts hereinabove appropriated for payments for the Pharmaceutical Assistance to the Aged and Disabled program, P.L.1975, c.194 (C.30:4D-20 et seq.), are available for the payment of obligations applicable to prior fiscal years.
- Benefits provided under the Pharmaceutical Assistance to the Aged and Disabled (PAAD) program, P.L.1975, c.194 (C.30:4D-20 et seq.), shall be the last resource benefits, notwithstanding any provision contained in contracts, wills, agreements, or other instruments. Any provision in a contract of insurance, will, trust agreement, or other instrument which reduces or excludes coverage or payment to an individual because of that individual's eligibility for or receipt of PAAD benefits shall be void, and no PAAD payments shall be made as a result of any such provision.
- Of the amount hereinabove appropriated in the Pharmaceutical Assistance to the Aged and Disabled - Claims program, notwithstanding the provisions of section 3 of P.L.1975, c.194 (C.30:4D-22) to the contrary, the copayment in the Pharmaceuti-

cal Assistance to the Aged and Disabled program shall be \$5 for generic drugs and \$7 for brand name drugs.

Notwithstanding the provisions of any law or regulation to the contrary, no State funds are appropriated for the Drug Utilization Review Council in the Department of Human Services, and therefore, the functions of the Council shall cease.

Notwithstanding the provisions of any law or regulation to the contrary, subject to the approval of a plan by the Commissioner of Human Services, no funds appropriated for the Pharmaceutical Assistance to the Aged and Disabled (PAAD) program, pursuant to P.L.1975, c.194 (C.30:4D-20 et seq.), shall be expended, when PAAD is the primary payer, unless participating pharmaceutical manufacturing companies execute contracts with the Department of Human Services. Name brand manufacturers must provide for the payment of rebates to the State on the same basis as provided for in subsections (a) through (c) of section 1927 of the federal Social Security Act, 42 U.S.C. s.1396r-8.

Notwithstanding the provisions of any law or regulation to the contrary, no funds appropriated for the Pharmaceutical Assistance to the Aged and Disabled (PAAD) program, pursuant to P.L.1975, c.194 (C.30:4D-20 et seq.), shall be expended unless participating pharmaceutical manufacturing companies execute contracts with the Department of Human Services, providing for the payment of rebates to the State. Furthermore, rebates from pharmaceutical manufacturing companies for prescriptions purchased by the PAAD program shall continue during the current fiscal year, provided that the manufacturers' rebates for PAAD claims paid as secondary to Medicare Part D shall apply only to the amount paid by the State under the PAAD program. All revenues from such rebates during the current fiscal year are appropriated for the PAAD program.

Notwithstanding the provisions of any law or regulation to the contrary, the appropriations for the Pharmaceutical Assistance to the Aged and Disabled program are conditioned upon the Department of Human Services coordinating benefits with any voluntary prescription drug mail-order or specialty pharmacy in a Medicare Part D provider network or private third party liability plan network for beneficiaries enrolled in a Medicare Part D program or beneficiaries with primary prescription coverage that requires use of mail order. The mail-order program may waive, discount, or rebate the beneficiary copayment and mail-order pharmacy providers may dispense up to a 90-day supply on prescription refills with the voluntary participation of the beneficiary, subject to the approval of the Commissioner of Human Services and the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, the amount hereinabove appropriated to the Pharmaceutical Assistance to the Aged and Disabled (PAAD) program is conditioned upon the Department of Human Services coordinating the benefits of the PAAD program with the prescription drug benefits of the federal "Medicare Prescription Drug, Improvement, and Modernization Act of 2003" as the primary payer due to the current federal prohibition against State automatic enrollment of PAAD program recipients in the federal program. The PAAD program benefit and reimbursement shall only be available to cover the beneficiary cost share to in-network pharmacies and for deductible and coverage gap costs (as determined

by the Commissioner of Human Services) associated with enrollment in Medicare Part D for beneficiaries of the PAAD and the Senior Gold Prescription Discount Program, and for Medicare Part D premium costs for PAAD program beneficiaries.

Notwithstanding the provisions of any law or regulation to the contrary, no funds appropriated in the Pharmaceutical Assistance to the Aged and Disabled (PAAD) program and the Senior Gold Prescription Discount Program accounts shall be available as payment as a PAAD program or Senior Gold Prescription Discount Program benefit to any pharmacy that is not enrolled as a participating pharmacy in a pharmacy network under Medicare Part D.

Consistent with the requirements of the federal “Medicare Prescription Drug, Improvement, and Modernization Act of 2003” and the current federal prohibition against State automatic enrollment of Pharmaceutical Assistance to the Aged and Disabled (PAAD) program recipients, no funds hereinabove appropriated from the PAAD account shall be expended for any individual enrolled in the PAAD program unless the individual provides all data that may be necessary to enroll the individual in Medicare Part D, including data required for the subsidy assistance, as outlined by the Centers for Medicare and Medicaid Services.

Notwithstanding the provisions of any law or regulation to the contrary, the amount hereinabove appropriated for the Pharmaceutical Assistance to the Aged and Disabled (PAAD) program shall be conditioned upon the following provision: no funds shall be appropriated for the refilling of a prescription drug until such time as the original prescription is 85% finished.

Notwithstanding the provisions of any law or regulation to the contrary, no amounts hereinabove appropriated for the Pharmaceutical Assistance to the Aged and Disabled (PAAD) program shall be expended to cover medications not on the formulary of a PAAD program beneficiary’s Medicare Part D plan. This exclusion shall not apply to those drugs covered by PAAD which are specifically excluded by the federal “Medicare Prescription Drug, Improvement, and Modernization Act of 2003” (MMA). In addition, this exclusion shall not impact the beneficiary’s rights, guaranteed by the MMA, to appeal the medical necessity of coverage for drugs not on the formulary of a Medicare Part D plan.

Notwithstanding the provisions of any law or regulation to the contrary, no amounts hereinabove appropriated for the Pharmaceutical Assistance to the Aged and Disabled (PAAD) program shall be expended for diabetic testing materials and supplies which are covered under the federal Medicare Part B program, or for vitamins, cough/cold medications, drugs used for the treatment of erectile dysfunction, or cosmetic drugs including but not limited to: drugs used for baldness, weight loss, and skin conditions.

Notwithstanding the provisions of any law or regulation to the contrary, no funds appropriated in the Pharmaceutical Assistance to the Aged and Disabled program classification shall be expended for fee-for-service prescription drug claims with no Medicare Part D coverage except under the following conditions: (1) the maximum allowable cost for legend and non-legend drugs shall be calculated based on the lowest of (i) the Estimated Acquisition Cost (EAC), defined as a drug’s wholesale acquisition cost less a volume discount of one (1) percent; (ii) the federal up-

per limit (FUL); or (iii) the State upper limit (SUL); and (iv) cost acquisition data submitted by providers of pharmaceutical services for single-source or brand-name multi-source drugs where an alternative pricing benchmark is not available; (2) pharmacy reimbursement for legend and non-legend drugs shall be calculated based on the (i) the lowest of the EAC, FUL or SUL plus a dispensing fee of \$3.73 to \$3.99; or a provider's usual and customary charge; or (ii) the lower of cost acquisition data submitted by providers of pharmaceutical services for single-source or brand-name multi-source drugs, where an alternative pricing benchmark is not available, plus a professional fee; or a provider's usual and customary charge. To effectuate the calculation of SUL rates and/or the calculation of single-source and brand-name multi-source legend and non-legend drug costs where an alternative pricing benchmark is not available, which is intended to be budget neutral, the Department of Human Services shall mandate ongoing submission of current drug acquisition data by providers, of pharmaceutical services. No funds hereinabove appropriated shall be paid to any entity that fails to submit required data.

Notwithstanding the provisions of any law or regulation to the contrary, of the amount hereinabove appropriated for the Community Based Senior Programs (CRF) account, \$400,000 shall be charged to the Casino Simulcasting Fund.

Notwithstanding the provisions of section 2 of P.L.1988, c.114 (C.26:2M-10) or any other law or regulation to the contrary, the amount appropriated for Community Based Senior Programs is subject to the following condition: private for-profit agencies shall be eligible grantees for funding from the Community Based Senior Programs account for Alzheimer's Disease activities.

STATE AID

55-7530 Programs for the Aged.....	<u>\$7,152,000</u>
Total State Aid Appropriation, Division of Aging Services	<u>\$7,152,000</u>

State Aid:

55 County Offices on Aging	(\$2,498,000)
55 Older Americans Act - State Share	(4,654,000)

27 Disability Services

7545 Division of Disability Services

DIRECT STATE SERVICES

27-7545 Disability Services.....	<u>\$1,351,000</u>
Total Direct State Services Appropriation, Division of Disability Services.....	<u>\$1,351,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$1,181,000)
Materials and Supplies.....	(4,000)
Services Other Than Personal	(157,000)
Maintenance and Fixed Charges	(9,000)

GRANTS-IN-AID

27-7545 Disability Services.....	\$54,667,000
<i>(From General Fund.....)</i>	<i>\$34,431,000)</i>
<i>(From Casino Revenue Fund.....)</i>	<i>20,236,000)</i>
Total Grants-in-Aid Appropriation, Division of	
Disability Services	\$54,667,000
<i>(From General Fund.....)</i>	<i>\$34,431,000)</i>
<i>(From Casino Revenue Fund.....)</i>	<i>20,236,000)</i>
Grants-in-Aid:	
27 Personal Assistance Services Program.....	(\$7,383,000)
27 Personal Assistance Services Program (CRF).....	(3,734,000)
27 Community Supports to Allow Discharge from	
Nursing Homes	(2,000,000)
27 Payments for Medical Assistance Recipients -	
Personal Care	(18,149,000)
27 Payments for Medical Assistance Recipients -	
Waiver Initiatives.....	(3,910,000)
27 Payments for Medical Assistance Recipients -	
Waiver Initiatives (CRF).....	(16,502,000)
27 Payments for Medical Assistance Recipients -	
Other Services.....	(914,000)
27 Transportation/Vocational Services for the	
Disabled	(2,075,000)

In order to permit flexibility in the handling of appropriations and ensure the timely payment of claims to providers of medical services, amounts may be transferred to and from Payments for Medical Assistance Recipients - Adult Mental Health Residential and Payments for Medical Assistance Recipients - Other Services accounts within the General Medical Services program classification in the Division of Medical Assistance and Health Services and the Payments for Medical Assistance Recipients - Personal Care and the Payments for Medical Assistance Recipients - Other Services accounts in the Division of Disability Services in the Department of Human Services. Amounts may also be transferred to and from various items of appropriations within the General Medical Services program classification of the Division of Medical Assistance and Health Services in the Department of Human Services and the Medical Services for the Aged program classification in the Division of Aging Services in the Department of Human Services. All such transfers are subject to the approval of the Director of the Division of Budget and Accounting. Notice thereof shall be provided to the Legislative Budget and Finance Officer on the effective date of the approved transfer.

Notwithstanding the provisions of any law or regulation to the contrary, and subject to the notice provisions of 42 CFR 447.205, of the amount hereinabove appropriated for Payments for Medical Assistance Recipients - Personal Care, personal care assistant services shall be authorized prior to the beginning of services by the Direc-

tor of the Division of Disability Services. The hourly rate for fee-for-service personal care services shall be \$15.50.

Notwithstanding the provisions of subsection (a) of N.J.A.C.10:60-5.10 and subsection (c) of N.J.A.C. 10:60-11.2 to the contrary, the amount hereinabove appropriated for Payments for Medical Assistance Recipients - Waiver Initiatives is conditioned upon the Commissioner of Human Services increasing the hourly nursing rates for AIDS Community Care Alternatives Program (ACCAP) and Community Resources for People With Disabilities (CRPD) Private Duty Nursing (PDN) services by \$10 per hour above the fiscal year 2008 rate. The rate for ACCAP and CRPD PDN services shall be equal to the rate for the Early and Periodic Screening, Diagnostic and Treatment PDN services of similar magnitude. Of the amounts appropriated hereinabove for Payments for Medical Assistance Recipients - Waiver Initiatives the Commissioner shall transfer \$2,174,000 to appropriate accounts to effectuate this provision.

30 Educational, Cultural, and Intellectual Development

32 Operation and Support of Educational Institutions

DIRECT STATE SERVICES

05-7610 Residential Care and Habilitation Services	\$413,311,000
<i>(From General Fund</i>	<i>\$92,582,000)</i>
<i>(From Federal Funds</i>	<i>320,729,000)</i>
99-7610 Administration and Support Services	<u>55,920,000</u>
<i>(From General Fund</i>	<i>26,675,000)</i>
<i>(From Federal Funds</i>	<i>29,245,000)</i>
Total Appropriation, State and Federal Funds	<u>\$469,231,000</u>
<i>(From General Fund</i>	<i>\$119,257,000)</i>
<i>(From Federal Funds</i>	<i>349,974,000)</i>

Less:

<i>Federal Funds</i>	<i>\$349,974,000</i>
<i>Total Deductions</i>	<i><u>\$349,974,000</u></i>
Total Direct State Services Appropriation, Operation and Support of Educational	<u>\$119,257,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$422,360,000)
Materials and Supplies	(23,293,000)
Services Other Than Personal	(16,417,000)
Maintenance and Fixed Charges	(5,510,000)

Special Purpose:

05 Family Care	(6,000)
Additions, Improvements and Equipment	(1,645,000)

Less:

<i>Federal Funds</i>	<i>349,974,000</i>

The State appropriation for the State's developmental centers is based on ICF/MR revenues of \$323,432,000 provided that if the ICF/MR revenues exceed \$323,432,000, an amount equal to the excess ICF/MR revenues may be deducted from the State appropriation for the developmental centers, subject to the approval of the Director of the Division of Budget and Accounting.

In addition to the amount hereinabove appropriated for Operation and Support of Educational Institutions of the Division of Developmental Disabilities, such other sums provided in Inter-Departmental accounts for Employee Benefits, as the Director of the Division of Budget and Accounting shall determine, are considered as appropriated on behalf of the developmental centers and are available for matching federal funds.

7600 Division of Developmental Disabilities

DIRECT STATE SERVICES

99-7600 Administration and Support Services	<u>\$15,660,000</u>
<i>(From General Fund</i>	<i>\$6,644,000)</i>
<i>(From Federal Funds</i>	<i>9,016,000)</i>
Total Appropriation, State and Federal Funds	<u>\$15,660,000</u>
<i>(From General Fund</i>	<i>\$6,644,000)</i>
<i>(From Federal Funds</i>	<i>9,016,000)</i>

Less:

Federal Funds	\$9,016,000
Total Deductions	<u>\$9,016,000</u>
Total Direct State Services Appropriation, Division of	
Developmental Disabilities	<u>\$6,644,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$14,271,000)
Materials and Supplies	(64,000)
Services Other Than Personal	(895,000)
Maintenance and Fixed Charges	(99,000)

Special Purpose:

99 Developmental Disabilities Council	(306,000)
Additions, Improvements and Equipment	(25,000)

Less:

Federal Funds	9,016,000

An amount not to exceed \$60,000 from receipts from individuals for whom the Division of Developmental Disabilities in the Department of Human Services collects contribution to care reimbursements is appropriated for participation in the Senior Companions program.

GRANTS-IN-AID

99-7600 Administration and Support Services	<u>\$573,000</u>

Total Grants-in-Aid Appropriation, Division of
Developmental Disabilities..... \$573,000

Grants-in-Aid:

99 Office for Prevention of Developmental
Disabilities (\$573,000)

7601 Community Programs
DIRECT STATE SERVICES

01-7601 Purchased Residential Care \$8,239,000
(From General Fund \$4,264,000)
(From Federal Funds 3,975,000)
02-7601 Social Supervision and Consultation 40,277,000
(From General Fund 24,877,000)
(From Federal Funds 15,400,000)
03-7601 Adult Activities 3,866,000
(From General Fund 3,580,000)
(From Federal Funds 286,000)
Total Appropriation, State and Federal Funds \$52,382,000
(From General Fund \$32,721,000)
(From Federal Funds 19,661,000)

Less:

Federal Funds \$19,661,000
Total Deductions \$19,661,000
Total Direct State Services Appropriation, Community Programs \$32,721,000

Direct State Services:**Personal Services:**

Salaries and Wages (\$49,904,000)
Materials and Supplies..... (76,000)
Services Other Than Personal (681,000)
Maintenance and Fixed Charges (464,000)
Additions, Improvements and Equipment (1,257,000)

Less:

Federal Funds 19,661,000

GRANTS-IN-AID

01-7601 Purchased Residential Care \$731,170,000
(From General Fund \$335,803,000)
(From Casino Revenue Fund..... 47,934,000)
(From Federal Funds 293,436,000)
(From All Other Funds 53,997,000)
02-7601 Social Supervision and Consultation 42,058,000
(From General Fund 30,747,000)
(From Casino Revenue Fund..... 2,208,000)

	<i>(From Federal Funds</i>	<i>9,103,000)</i>
03-7601 Adult Activities		<u>243,987,000</u>
	<i>(From General Fund</i>	<i>152,676,000)</i>
	<i>(From Casino Revenue Fund</i>	<i>7,374,000)</i>
	<i>(From Federal Funds</i>	<i>83,937,000)</i>
Total Appropriation, State, Federal and All Other Funds		<u>\$1,017,215,000</u>
	<i>(From General Fund</i>	<i>\$519,226,000)</i>
	<i>(From Casino Revenue Fund</i>	<i>57,516,000)</i>
	<i>(From Federal Funds</i>	<i>386,476,000)</i>
	<i>(From All Other Funds</i>	<i>53,997,000)</i>
Less:		
	<i>Federal Fund</i>	<i>\$386,476,000</i>
	<i>All Other Funds</i>	<i>53,997,000</i>
	<i>Total Deductions</i>	<i><u>\$440,473,000</u></i>
Total Grants-in-Aid Appropriation, Community Programs		<u>\$576,742,000</u>
	<i>(From General Fund</i>	<i>\$519,226,000)</i>
	<i>(From Casino Revenue Fund</i>	<i>57,516,000)</i>
Grants-in-Aid:		
01 Community Services Waiting List Placements		(\$2,476,000)
01 Dental Program for Non-Institutionalized Children		(564,000)
01 Private Residential Facilities		(10,163,000)
01 Private Institutional Care		(49,263,000)
01 Private Institutional Care (CRF)		(1,311,000)
01 Skill Development Homes		(17,408,000)
01 Skill Development Homes (CRF)		(1,269,000)
01 Group Homes		(556,052,000)
01 Group Homes (CRF)		(45,354,000)
01 Olmstead Residential Services		(24,087,000)
01 Emergency Placements		(23,223,000)
02 Addressing the Needs of the Autism Community		(4,000,000)
02 Essex ARC - Expanded Respite Care Services for Families with Autistic Children		(75,000)
02 Autism Respite Care		(1,000,000)
02 Developmental Disabilities Council		(1,183,000)
02 Home Assistance		(28,206,000)
02 Home Assistance (CRF)		(1,657,000)
02 Purchase of After School and Camp Services		(1,339,000)
02 Purchase of After School and Camp Services (CRF)		(551,000)
02 Social Services		(3,576,000)
02 Case Management		(471,000)
03 Purchase of Adult Activity Services		(189,068,000)
03 Purchase of Adult Activity Services (CRF)		(7,374,000)
03 Day Program Age Outs		(1,493,000)

03 Self Directed Services	(46,052,000)
Less:	
Federal Funds	386,476,000
All Other Funds.....	53,997,000

Notwithstanding the provisions of Title 30 of the Revised Statutes or any other law or regulation to the contrary, the Assistant Commissioner of the Division of Developmental Disabilities is authorized to waive statutory, regulatory, or licensing requirements in the use of funds appropriated hereinabove for the operation of the self-determination program including participants from the Community Services Waiting List Reduction Initiatives - FY1997 through FY2002, subject to the approval of a plan by the Assistant Commissioner of the Division of Developmental Disabilities, which allowed an individual to be removed from the waiting list. This waiver also applies to those persons identified as part of the Community Transition Initiative - FY2001 and FY2002, and the Community Nursing Care Initiative - FY2002, who chose self-determination.

Such sums as may be necessary are appropriated from the General Fund for the payment of any provider assessments to State ICF/MR facilities, subject to the approval of the Director of the Division of Budget and Accounting of a plan to be submitted by the Commissioner of Human Services. Notwithstanding the provisions of any law or regulation to the contrary, only the federal share of funds anticipated from these assessments shall be available to the Department of Human Services for the purposes set forth in P.L.1998, c.40 (C.30:6D-43 et seq.).

Notwithstanding the provisions of any law or regulation to the contrary, \$384,370,000 of federal Community Care Waiver funds is appropriated for community-based programs in the Division of Developmental Disabilities. The appropriation of federal Community Care Waiver funds above this amount is conditional upon the approval of a plan submitted by the Department of Human Services that must be approved by the Director of the Division of Budget and Accounting.

In order to permit flexibility in the handling of appropriations and assure timely payment to service providers, funds may be transferred within the Grants-In-Aid accounts within the Division of Developmental Disabilities, subject to the approval of the Director of the Division of Budget and Accounting.

Cost recoveries from consumers with developmental disabilities collected during the current fiscal year, not to exceed \$53,997,000, are appropriated for the continued operation of the Division of Developmental Disabilities community-based residential programs, subject to the approval of the Director of the Division of Budget and Accounting.

Amounts required to return persons with developmental disabilities presently residing in out-of-State institutions to community residences within the State may be transferred from the Private Institutional Care account to other Casino Revenue Fund Grants-In-Aid accounts within the Division of Developmental Disabilities, subject to the approval of the Director of the Division of Budget and Accounting.

**33 Supplemental Education and Training Programs
7560 Commission for the Blind and Visually Impaired**

DIRECT STATE SERVICES

11-7560 Services for the Blind and Visually Impaired.....	\$8,068,000
99-7560 Administration and Support Services	<u>2,948,000</u>
Total Direct State Services Appropriation, Commission for the Blind and Visually Impaired	<u>\$11,016,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$8,706,000)
Materials and Supplies.....	(126,000)
Services Other Than Personal	(785,000)
Maintenance and Fixed Charges.....	(456,000)

Special Purpose:

11 Technology for the Visually Impaired	(765,000)
Additions, Improvements and Equipment	(178,000)

There is appropriated from funds recovered from audits or other collection activities, an amount sufficient to pay vendors' fees to compensate the recoveries and the administration of the State's vending machine program, subject to the approval of the Director of the Division of Budget and Accounting. Receipts in excess of \$130,000 are appropriated for the purpose of expanding vision screening services and other prevention services, subject to the approval of the Director of the Division of Budget and Accounting. The unexpended balance at the end of the preceding fiscal year of such receipts is appropriated.

Notwithstanding the provisions of N.J.S.18A:61-1 and N.J.S.18A:46-13, or any law or regulation to the contrary, local boards of education shall reimburse the Commission for the Blind and Visually Impaired for the documented costs of providing services to children who are classified as "educationally handicapped," provided however, each local board of education shall pay that portion of cost which the number of children classified "educationally handicapped" bears to the total number of such children served, provided further, however, that payments shall be made by each local board in accordance with a schedule adopted by the Commissioners of Education and Human Services, and further, the Director of the Division of Budget and Accounting is authorized to deduct such reimbursements from the State Aid payments to the local boards of education.

The unexpended balances at the end of the preceding fiscal year in the Technology for the Visually Impaired account are appropriated for the Commission for the Blind and Visually Impaired, subject to the approval of the Director of the Division of Budget and Accounting.

GRANTS-IN-AID

11-7560 Services for the Blind and Visually Impaired.....	<u>\$3,305,000</u>
Total Grants-in-Aid Appropriation, Commission for the Blind and Visually Impaired.....	<u>\$3,305,000</u>

Grants-in-Aid:

11 State Match for Federal Grants	(\$617,000)
11 Educational Services for Children	(1,670,000)
11 Services to Rehabilitation Clients	(1,018,000)

50 Economic Planning, Development, and Security**53 Economic Assistance and Security****7550 Division of Family Development****DIRECT STATE SERVICES**

15-7550 Income Maintenance Management	<u>\$177,219,000</u>
(From General Fund	<u>\$35,730,000</u>)
(From Federal Funds	<u>141,489,000</u>)
Total Appropriation, State and Federal Funds	<u>\$177,219,000</u>
(From General Fund	<u>\$35,730,000</u>)
(From Federal Funds	<u>141,489,000</u>)

Less:

Federal Funds	<u>\$141,489,000</u>
Total Deductions	<u>\$141,489,000</u>
Total Direct State Services Appropriation, Division of Family Development	<u>\$35,730,000</u>

Direct State Services:**Personal Services:**

Salaries and Wages	(\$23,818,000)
Materials and Supplies	(2,878,000)
Services Other Than Personal	(33,735,000)
Maintenance and Fixed Charges	(3,639,000)

Special Purpose:

15 Electronic Benefit Transfer/Distribution System	(6,621,000)
15 Work First New Jersey - Technology Investment	(104,136,000)
Additions, Improvements and Equipment	(2,392,000)

Less:

Federal Funds	<u>141,489,000</u>

In order to permit flexibility, amounts may be transferred between various items of appropriation within the Income Maintenance Management program classification, subject to the approval of the Director of the Division of Budget and Accounting. Notice thereof shall be provided to the Legislative Budget and Finance Officer on the effective date of the approved transfer.

The unexpended balances at the end of the preceding fiscal year in accounts where expenditures are required to comply with Maintenance of Effort requirements as specified in the federal "Personal Responsibility and Work Opportunity Reconciliation Act of 1996," Pub.L.104-193, are appropriated, subject to the approval of the Director of the Division of Budget and Accounting.

GRANTS-IN-AID

15-7550 Income Maintenance Management	\$468,484,000
<i>(From General Fund</i>	<i>\$162,154,000)</i>
<i>(From Federal Funds</i>	<i>271,330,000)</i>
<i>(From All Other Funds</i>	<i>35,000,000)</i>
Total Appropriation, State, Federal and All Other Funds	\$468,484,000
<i>(From General Fund</i>	<i>\$162,154,000)</i>
<i>(From Federal Funds</i>	<i>271,330,000)</i>
<i>(From All Other Funds</i>	<i>35,000,000)</i>
Less:	
<i>Federal Funds</i>	<i>\$271,330,000</i>
<i>All Other Funds</i>	<i>35,000,000</i>
<i>Total Deductions</i>	<i><u>\$306,330,000</u></i>
Total Grants-in-Aid Appropriation, Division of Family	
Development	<u>\$162,154,000</u>

Grants-in-Aid:

15 Work First New Jersey - Training	
Related Expenses	(\$17,121,000)
15 Work First New Jersey Support Services.....	(77,911,000)
15 Work First New Jersey - Breaking the Cycle	(1,319,000)
15 Work First New Jersey Child Care	(309,684,000)
15 Kinship Care Initiatives	(5,555,000)
15 Wage Supplement Program.....	(1,909,000)
15 Kinship Care Guardianship and Subsidy	(2,500,000)
15 FEMA Disaster Case Management Grant	(5,897,000)
15 Social Services for the Homeless	(16,872,000)
15 SSI Attorney Fees	(2,914,000)
15 Substance Abuse Initiatives	(26,802,000)

Less:

<i>Federal Funds</i>	<i>271,330,000</i>
<i>All Other Funds</i>	<i>35,000,000</i>

In order to permit flexibility, amounts may be transferred between various items of appropriation within the Income Maintenance Management program classification, subject to the approval of the Director of the Division of Budget and Accounting. Notice thereof shall be provided to the Legislative Budget and Finance Officer on the effective date of the approved transfer.

The unexpended balances at the end of the preceding fiscal year in accounts where expenditures are required to comply with Maintenance of Effort requirements as specified in the federal "Personal Responsibility and Work Opportunity Reconciliation Act of 1996," Pub.L.104-193 are appropriated, subject to the approval of the Director of the Division of Budget and Accounting.

Of the amounts appropriated for Work First New Jersey, amounts may be transferred to the various departments in accordance with the Division of Family Development's

agreements, subject to the approval of the Director of the Division of Budget and Accounting. Any unobligated balances remaining from funds transferred to the departments shall be transferred back to the Division of Family Development, subject to the approval of the Director of the Division of Budget and Accounting.

The amounts hereinabove appropriated for the Income Maintenance Management program classification are subject to the following condition: the Commissioner of Human Services shall provide the Director of the Division of Budget and Accounting, the Senate Budget and Appropriations Committee, and the Assembly Appropriations Committee, or the successor committees thereto, with quarterly reports, due within 60 days after the end of each quarter, containing written statistical and financial information on the Work First New Jersey program and any subsequent welfare reform program the State may undertake.

Notwithstanding any law or regulation to the contrary, in addition to the amounts hereinabove appropriated for Work First New Jersey Child Care, an amount not to exceed \$35,000,000 is appropriated from the Workforce Development Partnership Fund established pursuant to section 9 of P.L.1992, c.43 (C.34:15D-9), subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, no funds hereinabove appropriated for before-school, after-school, and summer "wrap around" child care shall be expended except in accordance with the following condition: Effective September 1, 2010, families with incomes between 101% and 250% of the federal poverty level who reside in districts who received Preschool Expansion Aid or Education Opportunity Aid in the 2007-2008 school year shall be subject to a copayment for "wrap around" child care, based upon a schedule approved by the Department of Human Services and published in the New Jersey Register, and effective September 1, 2010, families who reside in districts who received Preschool Expansion Aid or Education Opportunity Aid in the 2007-2008 school year must meet the eligibility requirements under the New Jersey Cares for Kids child care program (N.J.A.C.10:15-5.1 et seq.) in order to receive free or subsidized "wrap around" child care.

STATE AID

15-7550 Income Maintenance Management	<u>\$857,757,000</u>
<i>(From General Fund</i>	<i>\$387,786,000)</i>
<i>(From Federal Funds</i>	<i>463,071,000)</i>
<i>(From All Other Funds</i>	<i>6,900,000)</i>
Total Appropriation, State, Federal and All Other Funds	<u>\$857,757,000</u>
<i>(From General Fund</i>	<i>\$387,786,000)</i>
<i>(From Federal Funds</i>	<i>463,071,000)</i>
<i>(From All Other Funds</i>	<i>6,900,000)</i>
Less:	
Federal Funds	\$463,071,000
All Other Funds	6,900,000
Total Deductions	<u>\$469,971,000</u>

Total State Aid Appropriation, Division of Family Development ... \$387,786,000

State Aid:

15 County Administration Funding	(\$271,721,000)
15 Work First New Jersey - Client Benefits.....	(141,865,000)
15 Earned Income Tax Credit Program.....	(18,393,000)
15 General Assistance Emergency Assistance Program.....	(76,113,000)
15 Payments for Cost of General Assistance	(62,741,000)
15 Work First New Jersey - Emergency Assistance ...	(123,534,000)
15 Payments for Supplemental Security Income	(85,533,000)
15 State Supplemental Security Income Administrative Fee to SSA	(23,464,000)
15 General Assistance County Administration	(29,678,000)
15 Supplemental Nutrition Assistance Program Administration - State	(24,225,000)
15 Fair Labor Standards Act - Minimum Wage Requirements (TANF)	(490,000)

Less:

Federal Funds **463,071,000**

All Other Funds **6,900,000**

The net State share of reimbursements and the net balances remaining after full payment of sums due the federal government of all funds recovered under P.L.1997, c.38 (C.44:10-55 et seq.), and P.L.1950, c.166 (C.30:4B-1 et seq.), at the end of the preceding fiscal year are appropriated for the Work First New Jersey Program.

Receipts from State administered municipalities during the preceding fiscal year are appropriated for the same purpose.

Notwithstanding the provisions of any law or regulation to the contrary, the sums hereinabove appropriated for Income Maintenance Management are available for payment of obligations applicable to prior fiscal years.

The amounts hereinabove appropriated for Income Maintenance Management are conditioned upon the following provision: any change by the Department of Human Services in the standards upon which or from which grants of categorical public assistance are determined, shall first be approved by the Director of the Division of Budget and Accounting.

In order to permit flexibility and ensure the timely payment of benefits to welfare recipients, amounts may be transferred between the various items of appropriation within the Income Maintenance Management program classification, subject to the approval of the Director of the Division of Budget and Accounting. Notice thereof shall be provided to the Legislative Budget and Finance Officer on the effective date of the approved transfer.

Notwithstanding the provisions of any law or regulation to the contrary, the Director of the Division of Budget and Accounting is authorized to withhold State Aid payments to municipalities to satisfy any obligations due and owing from audits of that municipality's General Assistance program.

The unexpended balances at the end of the preceding fiscal year in accounts where expenditures are required to comply with Maintenance of Effort requirements as specified in the federal "Personal Responsibility and Work Opportunity Reconciliation Act of 1996," Pub.L.104-193, and in the Payments for Cost of General Assistance and General Assistance-Emergency Assistance Program accounts are appropriated, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts from counties for persons receiving Old Age Assistance, Disability Assistance, and Assistance for the Blind under the Supplemental Security Income (SSI) program are appropriated for the purpose of providing State Aid to the counties, subject to the approval of the Director of the Division of Budget and Accounting.

There is appropriated an amount equal to the difference between actual revenue loss reflected in the Earned Income Tax Credit Program and the amount anticipated as the revenue loss from the Earned Income Tax Credit to meet federal Maintenance of Effort requirements to allow the Department of Human Services to comply with the Maintenance of Effort requirements as specified in the federal "Personal Responsibility and Work Opportunity Reconciliation Act of 1996," Pub.L.104-193, and as legislatively required by the Work First New Jersey program established pursuant to section 4 of P.L.1997, c.38 (C.44:10-58), subject to the approval of the Director of the Division of Budget and Accounting.

In addition to the amounts hereinabove appropriated, to the extent that federal child support incentive earnings are available, such additional sums are appropriated from federal child support incentive earnings to pay on behalf of individuals on whom is imposed a \$25 annual child support user fee, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, in addition to the amounts hereinabove appropriated for Work First New Jersey - Client Benefits and General Assistance Emergency Assistance Programs, an amount not to exceed \$6,900,000 is appropriated from the Universal Service Fund for utility payments for Work First New Jersey recipients, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, no funds hereinabove appropriated for Work First New Jersey - Client Benefits shall be expended for supplemental living support payments.

Notwithstanding the provisions of any law or regulation to the contrary, the amounts hereinabove appropriated for Payments for Cost of General Assistance and General Assistance Emergency Assistance Program are subject to the following condition: no funds shall be expended to provide benefits to recipients enrolled in college. For purposes of this provision, "college" is defined as that term is defined in N.J.A.C.9A:1-1.2.

50 Economic Planning, Development, and Security

55 Social Services Programs

7580 Division of the Deaf and Hard of Hearing

DIRECT STATE SERVICES

23-7580 Services for the Deaf	<u>\$1,037,000</u>
Total Direct State Services Appropriation, Division of the Deaf and Hard of Hearing	<u>\$1,037,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$657,000)
Services Other Than Personal	(40,000)
Maintenance and Fixed Charges	(1,000)

Special Purpose:

23 Services to Deaf Clients	(284,000)
23 Communication Access Services	(55,000)

70 Government Direction, Management, and Control**76 Management and Administration****7500 Division of Management and Budget****DIRECT STATE SERVICES**

96-7500 Institutional Security Services	\$8,204,000
99-7500 Administration and Support Services	<u>27,489,000</u>
Total Direct State Services Appropriation, Division of Management and Budget	<u>\$35,693,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$25,581,000)
Materials and Supplies	(365,000)
Services Other Than Personal	(6,453,000)
Maintenance and Fixed Charges	(160,000)

Special Purpose:

99 Health Care Billing System	(95,000)
99 Transfer to State Police for Fingerprinting/Background Checks of Job Applicants	(1,633,000)

Additions, Improvements and Equipment(1,406,000)

Revenues representing receipts to the General Fund from charges to residents' trust accounts for maintenance costs are appropriated for use as personal needs allowances for patients/residents who have no other source of funds for these purposes; except that the total amount herein for these allowances shall not exceed \$750,000 and any increase in the maximum monthly allowance shall be approved by the Director of the Division of Budget and Accounting.

Revenues received from fees derived from the licensing of all community mental health programs as specified in N.J.A.C.10:190-1.1 et seq. are appropriated to the Division of Management and Budget to offset the costs of performing the required reviews.

GRANTS-IN-AID

99-7500 Administration and Support.....	<u>\$9,197,000</u>
Total Grants-in-Aid Appropriation, Division of Management and Budget	<u>\$9,197,000</u>
Grants-in-Aid:	
99 United Way 2-1-1 System	(\$490,000)
99 Unit Dose Contracting Services	(4,419,000)
99 Consulting Pharmacy Services	(4,288,000)
 Department of Human Services, Total State Appropriation.....	<u>\$6,310,092,000</u>

Of the amount hereinabove appropriated for the Department of Human Services, such sums as the Director of the Division of Budget and Accounting shall determine from the schedule included in the Governor's Budget Message and Recommendations first shall be charged to the State Lottery Fund.

Balances on hand at the end of the preceding fiscal year of funds held for the benefit of patients in the several institutions, and such funds as may be received, are appropriated for the use of the patients.

Funds received from the sale of articles made in occupational therapy departments of the several institutions are appropriated for the purchase of additional material and other expenses incidental to such sale or manufacture.

Notwithstanding the provisions of any law or regulation to the contrary, the amounts hereinabove appropriated to the Department of Human Services shall be conditioned upon the following provision: any change in program eligibility criteria and increases in the types of services or rates paid for services to or on behalf of clients for all programs under the purview of the Department of Human Services, not mandated by federal law, shall first be approved by the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, receipts from payments collected from clients receiving services from the Department of Human Services and collected from their chargeable relatives, are appropriated to offset administrative and contract expenses related to the charging, collecting, and accounting of payments from clients receiving services from the Department and from their chargeable relatives pursuant to R.S.30:1-12, subject to the approval of the Director of the Division of Budget and Accounting.

Payment to vendors for their efforts in maximizing federal revenues is appropriated and shall be paid from the federal revenues received, subject to the approval of the Director of the Division of Budget and Accounting. The unexpended balance at the end of the preceding fiscal year in this account is appropriated.

Unexpended State balances may be transferred among Department of Human Services accounts in order to comply with the State Maintenance of Effort requirements as specified in the federal "Personal Responsibility and Work Opportunity Reconciliation Act of 1996," Pub.L.104-193, and as legislatively re-

quired by the Work First New Jersey program established pursuant to section 4 of P.L.1997, c.38 (C.44:10-58), subject to the approval of the Director of the Division of Budget and Accounting. Notice of such transfers that would result in appropriations or expenditures exceeding the State's Maintenance of Effort requirement obligation shall be subject to the approval of the Joint Budget Oversight Committee. In addition, unobligated balances remaining from funds allocated to the Department of Labor and Workforce Development for Work First New Jersey as of June 1 of each year are to be reverted to the Work First New Jersey-Client Benefits account in order to comply with the federal "Personal Responsibility and Work Opportunity Reconciliation Act of 1996" and as legislatively required by the Work First New Jersey program.

Notwithstanding the provisions of R.S.30:4-78, or any law or regulation to the contrary, with respect to the amount hereinabove appropriated for Support of Patients in County Psychiatric Hospitals, commencing January 1, 2010, the State shall pay to each county an amount equal to 35% of the total per capita costs for the reasonable cost of maintenance and clothing of county patients in State psychiatric facilities.

Notwithstanding the provisions of any law or regulation to the contrary, the Department of Human Services is authorized to identify opportunities for increased recoveries to the General Fund and to the Department. Such funds collected are appropriated, subject to the approval of the Director of the Division of Budget and Accounting, in accordance with a plan prepared by the Department, and approved by the Director of the Division of Budget and Accounting.

To effectuate the orderly consolidation or closure of a developmental center or psychiatric hospital, amounts hereinabove appropriated for the State developmental centers and State psychiatric hospitals may be transferred to accounts throughout the Department of Human Services in accordance with the plan adopted pursuant to section 2 of P.L.1996, c.150 (C.30:1-7.4) to consolidate or close a developmental center or State psychiatric hospital, subject to the approval of the Director of the Division of Budget and Accounting.

The unexpended balances at the end of the preceding fiscal year due to opportunities for increased recoveries in the Department of Human Services are appropriated, subject to the approval of the Director of the Division of Budget and Accounting. These recoveries may be transferred to the Division of Developmental Disabilities for operating costs in the developmental centers and to the Group Homes account, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, all object accounts appropriated in the General Medical Services program classification are subject to the following condition: the Commissioner of Human Services shall implement immediately those provisions contained in the Comprehensive Medicaid Waiver approved by the United States Department of Health and Human Services for the Centers for Medicare and Medicaid Services (CMS) and any amendments to such waiver as CMS requires to be implemented pursuant to such waiver.

Summary of Department of Human Services Appropriations
(For Display Purposes Only)

Appropriations by Category:

Direct State Services	\$632,578,000
Grants-in-Aid	5,149,090,000
State Aid	528,424,000

Appropriations by Fund:

General Fund	\$6,053,563,000
Casino Revenue Fund	256,529,000

62 DEPARTMENT OF LABOR AND WORKFORCE DEVELOPMENT**50 Economic Planning, Development, and Security****51 Economic Planning and Development****DIRECT STATE SERVICES**

99-4565 Administration and Support Services	<u>\$1,143,000</u>
Total Direct State Services Appropriation, Economic Planning and Development	<u>\$1,143,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$882,000)
Materials and Supplies	(17,000)
Services Other Than Personal	(211,000)
Maintenance and Fixed Charges	(33,000)

Of the amount hereinabove appropriated for the Administration and Support Services program classification, \$538,000 is appropriated from the Unemployment Compensation Auxiliary Fund.

In addition to the amount hereinabove appropriated for the Administration and Support Services program, an amount not to exceed \$550,000 is appropriated from the Unemployment Compensation Auxiliary Fund, subject to the approval of the Director of the Division of Budget and Accounting.

Of the amount hereinabove appropriated for the Administration and Support Services program, \$31,000 is payable out of the State Disability Benefits Fund and, in addition to the amount hereinabove appropriated for the Administration and Support Services program, there are appropriated out of the State Disability Benefits Fund such additional sums as may be required to administer the program, subject to the approval of the Director of the Division of Budget and Accounting.

The amount necessary to provide administrative costs incurred by the Department of Labor and Workforce Development to meet the statutory requirements of the "New Jersey Urban Enterprise Zones Act," P.L.1983, c.303 (C.52:27H-60 et seq.) is appropriated from the Enterprise Zone Assistance Fund, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of the "New Jersey Urban Enterprise Zones Act," P.L.1983, c.303 (C.52:27H-60 et seq.), there is appropriated to the Department of Labor and Workforce Development from the Enterprise Zone Assistance Fund, subject to the approval of the Director of the Division of Budget and Accounting, such sums as are necessary to pay for employer rebate awards as approved by the Commissioner of Community Affairs.

Fines and penalties collected pursuant to violations of P.L.1945, c.169 (C.10:5-1 et seq.) are hereby appropriated for program costs.

53 Economic Assistance and Security

DIRECT STATE SERVICES

03-4520 State Disability Insurance Plan.....	\$32,050,000
04-4520 Private Disability Insurance Plan	4,876,000
05-4525 Workers' Compensation.....	13,311,000
06-4530 Special Compensation	<u>1,883,000</u>
Total Direct State Services Appropriation, Economic Assistance and Security	<u>\$52,120,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$31,526,000)
Materials and Supplies.....	(269,000)
Services Other Than Personal.....	(5,895,000)
Maintenance and Fixed Charges.....	(3,137,000)

Special Purpose:

03 State Disability Insurance Plan	(300,000)
03 Reimbursement to Unemployment Insurance for Joint Tax Functions.....	(5,500,000)
03 Family Leave Insurance	(5,040,000)
04 Private Disability Insurance	(50,000)
05 Workers' Compensation.....	(363,000)
06 Special Compensation.....	(40,000)

The amounts hereinabove appropriated for the State Disability Insurance Plan and Private Disability Insurance Plan are payable out of the State Disability Benefits Fund.

In addition to the amounts hereinabove appropriated for the State Disability Insurance Plan and Private Disability Insurance Plan, there are appropriated out of the State Disability Benefits Fund such additional sums as may be required to pay disability benefits, subject to the approval of the Director of the Division of Budget and Accounting.

In addition to the amount hereinabove appropriated for administrative costs associated with the State Disability Insurance Plan, there is appropriated from the State Disability Benefits Fund an amount not to exceed \$10,000,000, such amount to include \$1,000,000 for a reengineering study of the business process, subject to the approval of the Director of the Division of Budget and Accounting.

- In addition to the amounts hereinabove appropriated for the State Disability Insurance Plan and the Private Disability Insurance Plan, there are appropriated from the State Disability Benefits Fund such additional sums as may be required to administer the Private Disability Insurance Plan.
- In addition to the amounts hereinabove appropriated for the State Disability Insurance Plan, there are appropriated from the Family Temporary Disability Leave Account within the State Disability Benefits Fund such sums as may be required to pay benefits during periods of family temporary disability leave and the associated administrative costs subject to the approval of the Director of the Division of Budget and Accounting.
- In addition to the amounts hereinabove appropriated for the Workers' Compensation program, there are appropriated receipts in excess of the amount anticipated for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.
- In addition to the amounts hereinabove appropriated for the Special Compensation program, there are appropriated receipts in excess of the amount anticipated for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.
- The amount hereinabove appropriated for the Special Compensation program shall be payable out of the Second Injury Fund and, notwithstanding the \$12,500 limitation set forth in R.S.34:15-95, in addition to the amounts hereinabove appropriated for the Special Compensation program, there are appropriated from the Second Injury Fund such additional sums as may be required for costs of administration and beneficiary payments.
- There is appropriated out of the balance in the Second Injury Fund an amount not to exceed \$1,000,000 to be deposited to the credit of the Uninsured Employer's Fund for the payment of benefits as determined in accordance with section 11 of P.L.1966, c.126 (C.34:15-120.2). Any amount so transferred shall be included in the next Uninsured Employer's Fund surcharge imposed in accordance with section 10 of P.L.1966, c.126 (C.34:15-120.1) and any amount so transferred shall be returned to the Second Injury Fund without interest and shall be included in net assets of the Second Injury Fund pursuant to paragraph (4) of subsection c. of R.S.34:15-94.
- Notwithstanding the provisions of any law or regulation to the contrary, the funds appropriated for Second Injury Fund benefits are available for the payment of obligations applicable to prior fiscal years.
- Amounts to administer the Uninsured Employer's Fund are appropriated from the Uninsured Employer's Fund, subject to the approval of the Director of the Division of Budget and Accounting.
- An amount not to exceed \$150,000 for the cost of notifying unemployment compensation recipients of the availability of New Jersey Earned Income Tax Credit information, pursuant to section 1 of P.L.2005, c.210 (C.43:21-4.2), is appropriated from the Unemployment Compensation Auxiliary Fund, subject to the approval of the Director of the Division of Budget and Accounting.

In addition to the amounts hereinabove appropriated, there is appropriated out of the Unemployment Compensation Auxiliary Fund, an amount not to exceed \$2,500,000 to support collection activities in the program as well as costs associated with certain State required notifications to Unemployment Insurance claimants and for the support of the workforce development system, subject to the approval of the Director of the Division of Budget and Accounting.

The amount necessary to pay interest due on any advances made from the federal unemployment account under Title XII of the Social Security Act (42 U.S.C. 1321 et seq.) is hereby appropriated from the Unemployment Compensation Interest Repayment Fund established in the Department of Labor and Workforce Development subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of R.S.34:15-49 to the contrary, including the reference therein to salaries of judges of the Division of Workers' Compensation determined as a percentage of the annual salary of judges of Superior Court, there shall be no increase paid from appropriations made herein for an annual salary increase for judges of the Division of Workers' Compensation.

54 Manpower and Employment Services

DIRECT STATE SERVICES

07-4535 Vocational Rehabilitation Services	\$2,446,000
09-4545 Employment Services	9,905,000
12-4550 Workplace Standards	4,285,000
16-4555 Public Sector Labor Relations	3,573,000
17-4560 Private Sector Labor Relations	<u>484,000</u>
Total Direct State Services Appropriation, Manpower and Employment Services	<u>\$20,693,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$15,889,000)
Materials and Supplies	(38,000)
Services Other Than Personal	(290,000)
Maintenance and Fixed Charges	(28,000)

Special Purpose:

09 Workforce Development Partnership Program	(1,909,000)
09 Workforce Development Partnership - Counselors	(81,000)
09 Workforce Literacy and Basic Skills Program	(2,000,000)
12 Worker and Community Right to Know Act	(5,000)
12 Public Works Contractor Registration	(450,000)
12 Safety Commission	(3,000)

Notwithstanding the provisions of the "New Jersey Employer-Employee Relations Act," P.L.1941, c.100 (C.34:13A-1 et seq.), the cost of fact-finding shall be borne equally by the public employer and the exclusive employee representative.

Notwithstanding the provisions of any law or regulation to the contrary, the amount hereinabove appropriated for the Vocational Rehabilitation Services program classification is available for the payment of obligations applicable to prior fiscal years.

The amount hereinabove appropriated for the Vocational Rehabilitation Services program classification is appropriated from the Unemployment Compensation Auxiliary Fund.

The amounts hereinabove appropriated for the Workforce Development Partnership Program and Workforce Development Partnership - Counselors shall be appropriated from receipts received pursuant to P.L.1992, c.44 (C.34:15D-12 et seq.), together with such additional sums as may be required to administer the Workforce Development Partnership Program, subject to the approval of the Director of the Division of Budget and Accounting.

The amounts hereinabove appropriated for the Workforce Literacy and Basic Skills Program shall be appropriated from receipts received pursuant to P.L.2001, c.152 (C.34:15D-21 et seq.), together with such additional sums as may be required to administer the Workforce Literacy Program, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of the "Supplemental Workforce Fund for Basic Skills," P.L.2001, c.152 (C.34:15D-21 et seq.), or any law or regulation to the contrary, the unexpended balance at the end of the preceding fiscal year in the Supplemental Workforce Fund for Basic Skills is appropriated to such fund, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of P.L.1992, c.44 (C.34:15D-12 et seq.), or any other law or regulation to the contrary, the unexpended balance at the end of the preceding fiscal year in the Workforce Development Partnership Fund is appropriated to such fund, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts in excess of the amount anticipated for the Workplace Standards program are appropriated for the same program, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts in excess of the amount anticipated for the Public Works Contractor Registration program and the unexpended balance at the end of the preceding fiscal year are appropriated for the Public Works Contractor Registration program, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of the "Worker and Community Right To Know Act," P.L.1983, c.315 (C.34:5A-1 et seq.), the amount hereinabove appropriated for the Worker and Community Right To Know Act account is payable from the Worker and Community Right To Know Fund. If receipts to that fund are less than anticipated, the appropriation shall be reduced proportionately.

In addition to the amounts hereinabove appropriated for the Employment and Training Services program classification, an amount not to exceed \$50,000 is appropriated from the Unemployment Compensation Auxiliary Fund for costs incurred by the Disadvantaged Youth Employment Opportunities Council, subject to the approval of the Director of the Division of Budget and Accounting.

There are appropriated out of the Wage and Hour Trust Fund and the Prevailing Wage Act Trust Fund such sums as may be necessary for payments.

The amount hereinabove appropriated for the Private Sector Labor Relations program classification is appropriated from the Unemployment Compensation Auxiliary Fund.

From the appropriation provided hereinabove in support of office leases, and notwithstanding the provisions of P.L.1992, c.130 (C.52:18A-191.1 et seq.), the State Treasurer, in consultation with the Commissioner of Labor and Workforce Development, is hereby authorized to enter into cost-sharing agreements with any authorized non-State partner that offers programs and activities supported primarily by federal funds from the United States Departments of Labor and Education in the State's one-stop centers for the purpose of co-locating such partner in an office with the Department of Labor and Workforce Development providing rent costs shall be equitably shared in accordance with a cost allocation plan approved by the Commissioner of Labor and Workforce Development.

Notwithstanding the provisions of any law or regulation to the contrary, in addition to the amount hereinabove appropriated for the Council on Gender Parity, an amount not to exceed \$72,000 is appropriated from the Unemployment Compensation Auxiliary Fund for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.

Any excess receipts that are appropriated to the Workplace Standards program and that are available may be used by the Department as match for any federal programs requiring a State match.

GRANTS-IN-AID

07-4535 Vocational Rehabilitation Services	\$36,876,000
<i>(From General Fund.....)</i>	<i>\$34,680,000)</i>
<i>(From Casino Revenue Fund.....)</i>	<i>2,196,000)</i>
10-4545 Employment and Training Services	<u>30,076,000</u>
Total Grants-in-Aid Appropriation, Manpower and	
Employment Services.....	<u>\$66,952,000</u>
<i>(From General Fund.....)</i>	<i>\$64,756,000)</i>
<i>(From Casino Revenue Fund.....)</i>	<i>2,196,000)</i>

Grants-in-Aid:

07 Vocational Rehabilitation Services	(\$30,394,000)
07 Vocational Rehabilitation Services (CRF)	(2,196,000)
07 Services to Clients (State Share)	(4,286,000)
10 New Jersey Youth Corps.....	(2,325,000)
10 Work First New Jersey Work Activities	(27,751,000)

Notwithstanding the provisions of any law or regulation to the contrary, the amount hereinabove appropriated for the Vocational Rehabilitation Services program classification is available for the payment of obligations applicable to prior fiscal years.

- Of the amount hereinabove appropriated for the Vocational Rehabilitation Services program classification, an amount not to exceed \$14,114,000 is appropriated from the Unemployment Compensation Auxiliary Fund.
- Notwithstanding the provision of any law or regulation to the contrary, of the amount hereinabove appropriated for Vocational Rehabilitation Services, there is appropriated \$9,000,000 from the Workforce Development Partnership Fund.
- Notwithstanding the provisions of any law or regulation to the contrary, in addition to the amounts hereinabove appropriated for the Work First New Jersey Work Activities and Work First New Jersey-Training Related Expenses accounts, an amount not to exceed \$21,500,000 is appropriated from the Workforce Development Partnership Fund, section 9 of P.L.1992, c.43 (C.34:15D-9), subject to the approval of the Director of the Division of Budget and Accounting.
- Notwithstanding the provisions of any law or regulation to the contrary, of the amounts hereinabove appropriated for Work First New Jersey Work Activities and Work First New Jersey-Training Related Expenses, \$8,190,000 is appropriated from the Workforce Development Partnership Fund, section 9 of P.L.1992, c.43 (C.34:15D-9), subject to the approval of the Director of the Division of Budget and Accounting.
- Of the amounts hereinabove appropriated for Work First New Jersey Work Activities, an amount not to exceed 3% shall be made available for administrative costs incurred by the Department of Labor and Workforce Development.
- Notwithstanding the provisions of any law or regulation to the contrary, of the amount hereinabove appropriated for New Jersey Youth Corps, \$1,850,000 is appropriated from the Workforce Development Partnership Fund, section 9 of P.L.1992, c.43 (C.34:15D-9) and an amount not to exceed 10% from all funds available to the program shall be made available for administrative costs incurred by the Department of Labor and Workforce Development.
- Notwithstanding the provisions of any law or regulation to the contrary, in addition to the amounts hereinabove appropriated for New Jersey Youth Corps, there is appropriated an amount not to exceed \$2,200,000 from the Supplemental Workforce Fund for Basic Skills, P.L.2001, c.152 (C.34:15D-21 et seq.), subject to the approval of the Director of the Division of Budget and Accounting.
- Of the amount hereinabove appropriated for the New Jersey Youth Corps program, \$475,000 is appropriated from the Unemployment Compensation Auxiliary Fund.
- Notwithstanding the provisions of any law or regulation to the contrary, up to 15% of the amount available from the Workforce Development Partnership Fund for the Supplemental Workforce Development Benefits program shall be appropriated as necessary to fund additional administrative costs relating to the processing and payment of benefits, subject to the approval of the Director of the Division of Budget and Accounting.

74 General Government Services

DIRECT STATE SERVICES

22-4575 General Administration, State and Local Operations, and
Selection Services \$16,835,000

24-4580 Merit Systems Practices and Labor Relations 2,046,000
 Total State Aid Appropriation, General Government Services \$18,881,000

Direct State Services:

Personal Services

Civil Service Commission(\$5,000)

Salaries and Wages(15,361,000)

Materials and Supplies.....(192,000)

Services Other Than Personal.....(2,657,000)

Maintenance and Fixed Charges.....(143,000)

Special Purpose:

22 Microfilm Service Charges(29,000)

22 Test Validation/Police Testing(434,000)

22 Americans with Disabilities Act(60,000)

Receipts derived from fees charged to applicants for open competitive or promotional examinations, and the unexpended fee balance at the end of the preceding fiscal year, collected from firefighter and law enforcement examination receipts, are appropriated for the costs of administering these exams, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts derived from fees charged for appeals to the Merit System Board are appropriated for the costs of administering the appeals process, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts derived from Workforce Initiatives and Employment Development and any unexpended balance at the end of the preceding fiscal year are appropriated for costs related to that program, subject to the approval of the Director of the Division of Budget and Accounting.

Department of Labor and Workforce Development,

Total State Appropriation \$159,789,000

Summary of Department of Labor and Workforce Development Appropriations

(For Display Purposes Only)

Appropriations by Category:

Direct State Services\$92,837,000

Grants-in-Aid 66,952,000

Appropriations by Fund:

General Fund.....\$157,593,000

Casino Revenue Fund 2,196,000

66 DEPARTMENT OF LAW AND PUBLIC SAFETY**10 Public Safety and Criminal Justice****12 Law Enforcement****DIRECT STATE SERVICES**

06-1200 State Police Operations.....	\$260,662,000
09-1020 Criminal Justice	31,613,000
11-1050 State Medical Examiner.....	438,000
30-1460 Gaming Enforcement.....	46,754,000
(From Casino Control Fund	\$46,754,000)
99-1200 Administration and Support Services	30,210,000
Total Direct State Services Appropriation, Law Enforcement	<u>\$369,677,000</u>
(From General Fund	\$322,923,000)
(From Casino Control Fund	46,754,000)

Direct State Services:**Personal Services:**

Salaries and Wages	(\$201,560,000)
Salaries and Wages (CCF)	(39,767,000)
Cash in Lieu of Maintenance	(28,840,000)
Cash in Lieu of Maintenance (CCF)	(819,000)
(From General Fund	\$230,400,000)
(From Casino Control Fund	40,586,000)

Materials and Supplies.....	(11,799,000)
Materials and Supplies (CCF).....	(576,000)
Services Other Than Personal	(9,197,000)
Services Other Than Personal (CCF).....	(1,431,000)
Maintenance and Fixed Charges.....	(4,438,000)
Maintenance and Fixed Charges (CCF).....	(2,633,000)

Special Purpose:

06 Nuclear Emergency Response Program	(1,591,000)
06 Drunk Driver Fund Program	(350,000)
06 Camden Initiative	(1,500,000)
06 Enhanced DNA Testing	(450,000)
06 State Police DNA Laboratory Enhancement	(1,150,000)
06 Urban Search and Rescue.....	(1,000,000)
06 Rural Section Policing.....	(53,398,000)
09 Division of Criminal Justice - State Match	(750,000)
09 Expenses of State Grand Jury	(356,000)
09 Medicaid Fraud Investigation - State Match	(500,000)
30 Gaming Enforcement (CCF)	(1,028,000)
99 Hamilton TechPlex Maintenance	(1,616,000)
99 N.C.I.C. 2000 Project	(2,000,000)

Additions, Improvements and Equipment

Additions, Improvements and Equipment (CCF)

Notwithstanding the provisions of any law or regulation to the contrary, funds in excess of \$250,000 obtained through seizure, forfeiture, or abandonment pursuant to any federal or State statutory or common law and proceeds of the sale of any such confiscated property or goods, except for such funds as are dedicated pursuant to

- N.J.S.2C:64-6, are appropriated for law enforcement purposes designated by the Attorney General.
- Notwithstanding the provisions of any law or regulation to the contrary, receipts derived from the recovery of costs associated with the implementation of the "Criminal Justice Act of 1970," P.L.1970, c.74 (C.52:17B-97 et seq.), are appropriated for the purpose of offsetting the costs of the Division of Criminal Justice, and the unexpended balance at the end of the preceding fiscal year in the Criminal Justice Cost Recovery account is appropriated for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.
- The unexpended balance at the end of the preceding fiscal year in the Victim and Witness Advocacy Fund account, together with receipts derived pursuant to section 2 of P.L.1979, c.396 (C.2C:43-3.1) is appropriated.
- Such additional amounts as may be required to carry out the provisions of the "New Jersey Antitrust Act" P.L.1970, c.73 (C.56:9-1 et seq.) are appropriated from the General Fund, provided however, that any expenditures therefrom shall be subject to the approval of the Director of the Division of Budget and Accounting.
- Receipts derived pursuant to the requirements to act as Joint Negotiation Representatives under P.L.2001, c.371 (C.52:17B-196 et seq.) are appropriated to the Division of Criminal Justice to offset operating costs of the program, subject to the approval of the Director of the Division of Budget and Accounting.
- Receipts in excess of the amount anticipated from license fees and/or audits conducted to insure compliance with "The Private Detective Act of 1939," P.L.1939, c.369 (C.45:19-8 et seq.), are appropriated to defray the cost of this activity.
- All fees and receipts collected, pursuant to paragraph (7) of subsection 1. of N.J.S.2C:39-6, the Retired Officer Handgun Permits program, and the unexpended balance at the end of the preceding fiscal year, are appropriated to offset the costs of administering the application process, subject to the approval of the Director of the Division of Budget and Accounting.
- The amount hereinabove appropriated for the Nuclear Emergency Response Program account is payable from receipts received pursuant to the assessment of electrical utility companies under P.L.1981, c.302 (C.26:2D-37 et seq.). The unexpended balance at the end of the preceding fiscal year in the Nuclear Emergency Response Program account is appropriated for the same purpose.
- The unexpended balance at the end of the preceding fiscal year in the Drunk Driver Fund program account, together with any receipts in excess of the amount anticipated in the Drunk Driving Fines account in the Department of Transportation, are appropriated to the Drunk Driver Fund Program account in the Department of Law and Public Safety, subject to the approval of the Director of the Division of Budget and Accounting.
- The amount hereinabove appropriated for the Drunk Driver Fund Program is payable out of the Drunk Driver Enforcement Fund established pursuant to section 1 of P.L.1984, c.4 (C.39:4-50.8) designated for this purpose and any amount remaining therein. If receipts to the fund are less than anticipated, the appropriation shall be reduced proportionately.

Notwithstanding the provisions of section 3 of P.L.1985, c.69 (C.53:1-20.7), the unexpended balance at the end of the preceding fiscal year, in the Noncriminal Records Checks account, together with any receipts in excess of the amount anticipated are appropriated for use of the Division of State Police, subject to the approval of the Director of the Division of Budget and Accounting.

In addition to the amount hereinabove appropriated for State Police Operations, such amounts as may be required for the purpose of offsetting costs of the provision of State Police services are appropriated from indirect cost recoveries received from the New Jersey Highway Authorities and other agencies, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, receipts derived pursuant to the New Jersey Emergency Medical Service Helicopter Response Act, under subsection a. of section 1 of P.L.1992, c.87 (C.39:3-8.2) are appropriated to the Division of State Police and the Department of Health to defray the operating costs of the New Jersey Emergency Medical Service Helicopter Response Program as authorized under P.L.1986, c.106 (C.26:2K-35 et seq.) and the general aviation program. The unexpended balance at the end of the preceding fiscal year is appropriated to the special capital maintenance reserve account for capital replacement and major maintenance of medevac and general aviation helicopter equipment and any expenditures therefrom shall be subject to the approval of the Director of the Division of Budget and Accounting. Receipts derived pursuant to the New Jersey Emergency Medical Service Helicopter Response Act under subsection c. of section 1 of P.L.1992, c.87 (C.39:3-8.2) are appropriated to the Division of State Police to fund the costs of new State Police recruit training classes. The unexpended balance at the end of the preceding fiscal year is appropriated for this purpose subject to the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, receipts and available balances pursuant to the New Jersey Emergency Medical Service Helicopter Response Act under subsection a. of section 1 of P.L.1992, c.87 (C.39:3-8.2), not to exceed \$3,820,000 are appropriated for State Police salaries, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, receipts and available balances pursuant to the New Jersey Emergency Medical Service Helicopter Response Act under subsection a. of section 1 of P.L.1992, c.87 (C.39:3-8.2), not to exceed \$6,700,000 are appropriated for State Police vehicles, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts in the "Commercial Vehicle Enforcement Fund" established pursuant to section 17 of P.L.1995, c.157 (C.39:8-75) are appropriated to offset all reasonable and necessary expenses of the Division of State Police and the New Jersey Motor Vehicle Commission in the performance of commercial truck safety and emission inspections, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts and available balances derived from the agency surcharge on vehicle rentals pursuant to section 54 of P.L.2002, c.34 (C.App.A:9-78), not to exceed \$8,205,000 for State Police salaries related to Statewide security services, are appropriated for

those purposes and shall be deposited into a dedicated account, the expenditure of which shall be subject to the approval of the Director of the Division of Budget and Accounting.

All fees, penalties and receipts collected, pursuant to the "Security Officer Registration Act," P.L.2004, c.134 (C.45:19A-1 et seq.) and the unexpended balance at the end of the preceding fiscal year, are appropriated to offset the costs of administering this process, subject to the approval of the Director of the Division of Budget and Accounting.

In addition to the amounts hereinabove appropriated to the Divisions of State Police and Criminal Justice and the Office of the State Medical Examiner, there are appropriated to the respective State departments and agencies such sums as may be received or receivable from any instrumentality, municipality, or public authority for direct and indirect costs of all services furnished thereto, except as to such costs for which funds have been included in appropriations otherwise made to the respective State departments and agencies as the Director of the Division of Budget and Accounting shall determine; provided however, that payments from such instrumentalities, municipalities, or authorities for employer contributions to the State Police and Public Employees' Retirement Systems shall be deposited into the General Fund.

There is appropriated, an amount up to \$25,000, from the General Fund, to pay for each award or each tip for information that prevents, frustrates, or favorably resolves acts of international or domestic terrorism against New Jersey persons or property, as well as tips related to the identification of illegal guns, drugs and gangs. Rewards may also be paid for information leading to the arrest or conviction of terrorists and/or gang members attempting, committing, conspiring to commit or aiding and abetting in the commission of such acts or to the identification or location of an individual who holds a key leadership position in a terrorist and/or gang organization, subject to the approval of the Attorney General and the Director of the Division of Budget and Accounting.

Of the amounts hereinabove appropriated to the Division of State Police, there shall be credited against such amounts such monies as are received by the Division of State Police pursuant to a Memorandum of Understanding between the Division of State Police and the New Jersey Schools Development Authority for services rendered by the Division of State Police in connection with the school construction program.

In addition to the amount hereinabove appropriated for the Drunk Driver Fund Program, there is appropriated \$612,000 from the New Jersey Motor Vehicle Commission for the Drunk Driver Fund Program.

Notwithstanding the provisions of any other law or regulation to the contrary, none of the monies appropriated to the Division of State Police shall be used to provide police protection to the inhabitants of rural sections pursuant to R.S.53:2-1 in a municipality in which such services were not provided in the previous fiscal year or to expand such services in a municipality beyond the level at which such services were provided in the previous fiscal year.

Of the amounts hereinabove appropriated in the Rural Section Policing account, amounts may be transferred to salary and other operating accounts within the Division of State Police, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, receipts derived from the sale of a State Police helicopter shall be deposited into the General Fund.

Notwithstanding the provisions of any law or regulation to the contrary, in order to provide flexibility in administering the amounts provided for the State Police Emergency Operations Center and Hamilton TechPlex Maintenance programs, such sums as may be necessary can be transferred to support operations, subject to the approval of the Director of the Division of Budget and Accounting.

In addition to the amount hereinabove appropriated for Gaming Enforcement, there are appropriated from the Casino Control Fund such additional sums as may be required for gaming enforcement, subject to the approval of the Director of the Division of Budget and Accounting.

GRANTS-IN-AID

06-1200 State Police Operations.....	<u>\$265,000</u>
Total Grants-in-Aid Appropriation, Law Enforcement	<u>\$265,000</u>

Grants-in-Aid:

06 Nuclear Emergency Response Program	(\$265,000)

13 Special Law Enforcement Activities

DIRECT STATE SERVICES

03-1160 Office of Highway Traffic Safety	\$598,000
17-1420 Election Law Enforcement	4,254,000
20-1450 Review and Enforcement of Ethical Standards	<u>1,520,000</u>
Total Direct State Services Appropriation, Special Law	
Enforcement Activities	<u>\$6,372,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$5,248,000)
Materials and Supplies	(70,000)
Services Other Than Personal	(431,000)
Maintenance and Fixed Charges	(10,000)

Special Purpose:

03 Federal Highway Safety Program - State Match	(598,000)
17 Per Diem Payment to Members of Election Law	
Enforcement Commission	(15,000)

Notwithstanding the provisions of section 14 of P.L.1992, c.188 (C.33:1-4.1) or any law to the contrary, an amount not to exceed \$3,960,000 from receipts derived from fees and penalties collected by the Division of Alcoholic Beverage Control shall be deposited in the General Fund as State revenue.

From the receipts derived from uncashed pari-mutuel winning tickets and the regulation, supervision, licensing, and enforcement of all New Jersey Racing Commission activities and functions, such sums as may be required are appropriated for the purpose of offsetting the costs of the administration and operation of the New Jersey Racing Commission, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts derived from breakage monies and uncashed pari-mutuel winning tickets resulting from off-track and account wagering and any reimbursement assessment against permit holders or successors in interest to permit holders shall be distributed to the New Jersey Racing Commission in accordance with the provisions of the "Off Track and Account Wagering Act," P.L.2001, c.199 (C.5:5-127 et seq.), subject to the approval of the Director of the Division of Budget and Accounting.

All fees, fines, and penalties collected pursuant to P.L.1973, c.83 (C.19:44A-1 et al.) and section 11 of P.L.1991, c.244 (C.52:13C-23.1) are appropriated for the purpose of offsetting additional operational costs of the New Jersey Election Law Enforcement Commission, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, amounts received pursuant to P.L.1971, c.183 (C.52:13C-18 et seq.) are appropriated for the purpose of offsetting additional operational costs of the New Jersey Election Law Enforcement Commission, subject to the approval of the Director of the Division of Budget and Accounting.

Of the receipts derived from the regulation, supervision, and licensing of all State Athletic Control Board activities and functions, an amount is appropriated for the purpose of offsetting the costs of the administration and operation of the State Athletic Control Board, subject to the approval of the Director of the Division of Budget and Accounting.

There are appropriated from the Gubernatorial Elections Fund such sums as may be required for payments to persons qualifying for additional public funds pursuant to section 5 of P.L.1974, c.26 (C.19:44A-30); provided however, that should the amount available in the Gubernatorial Elections Fund be insufficient to support such an appropriation, there are appropriated from the General Fund to the Gubernatorial Elections Fund such sums as may be required.

Of the amount hereinabove appropriated for the Election Law Enforcement Gubernatorial Elections Fund, an amount not to exceed \$480,000 may be used for administrative purposes, subject to the approval of the Director of the Division of Budget and Accounting.

GRANTS-IN-AID

17-1420 Election Law Enforcement	<u>\$6,200,000</u>
<i>(From Gubernatorial Elections Fund.....\$6,200,000)</i>	
Total Grants-in-Aid Appropriation, Special Law	
Enforcement Activities	<u>\$6,200,000</u>
<i>(From Gubernatorial Elections Fund.....\$6,200,000)</i>	

Grants-in-Aid:

17 Election Law Enforcement (GEF)..... (\$6,200,000)

18 Juvenile Services**DIRECT STATE SERVICES**

34-1500 Juvenile Community Programs \$25,579,000
 35-1505 Institutional Control and Supervision 34,813,000
 36-1505 Institutional Care and Treatment 19,730,000
 40-1500 Juvenile Parole and Transitional Services 6,245,000
 99-1500 Administration and Support Services 16,260,000
 Total Direct State Services Appropriation, Juvenile
 Services \$102,627,000

Direct State Services:**Personal Services:**

Salaries and Wages (\$80,535,000)
 Food in Lieu of Cash (203,000)
 Materials and Supplies (7,499,000)
 Services Other Than Personal (10,155,000)
 Maintenance and Fixed Charges (1,805,000)

Special Purpose:

34 Juvenile Justice Initiatives (745,000)
 34 Social Services Block Grant - State Match (42,000)
 34 Female Substance Abuse Program (305,000)
 99 Johnstone Facility Maintenance (687,000)
 99 Juvenile Justice - State Matching Funds (322,000)
 99 Custody and Civilian Staff Training (185,000)

Additions, Improvements and Equipment (144,000)

Receipts derived from the eyeglass program at the New Jersey Training School for Boys and any unexpended balance at the end of the preceding fiscal year are appropriated for the operation of the program.

GRANTS-IN-AID

34-1500 Juvenile Community Programs \$16,983,000
 Total Grants-in-Aid Appropriation, Juvenile Services \$16,983,000

Grants-in-Aid:

34 Juvenile Detention Alternative Initiative (\$1,900,000)
 34 Alternatives to Juvenile Incarceration Programs (2,008,000)
 34 Crisis Intervention Program (4,292,000)
 34 State/Community Partnership Grants (8,470,000)
 34 Purchase of Services for Juvenile Offenders (313,000)

Of the amounts hereinabove appropriated for the Juvenile Detention Alternative Initiative, such sums as may be required may be transferred to various Direct State Ser-

vice operating accounts, subject to the approval of the Director of the Division of Budget and Accounting.

Of the amounts hereinabove appropriated in the various grant-in-aid accounts, the Juvenile Justice Commission shall assure that Grants-In-Aid recipients demonstrate cultural competency to serve clients within their respective communities and offer training opportunities in cultural competence to staff of community-based organizations the recipients may serve.

19 Central Planning, Direction, and Management

DIRECT STATE SERVICES

13-1005 Homeland Security and Preparedness \$3,695,000

99-1000 Administration and Support Services 12,446,000

Total Direct State Services Appropriation, Central

Planning, Direction, and Management \$16,141,000

Direct State Services:

Personal Services:

Salaries and Wages (\$7,928,000)

Materials and Supplies (74,000)

Services Other Than Personal (54,000)

Maintenance and Fixed Charges (22,000)

Special Purpose:

13 Office of Homeland Security and Preparedness (3,695,000)

99 Emergency Operations Center - Operating (2,157,000)

99 Atlantic City Tourism District (290,000)

99 Office of Law Enforcement Professional

Standards (1,900,000)

Additions, Improvements and Equipment (21,000)

Notwithstanding the provisions of any law or regulation to the contrary, funds obtained through seizure, forfeiture, or abandonment pursuant to any federal or State statutory or common law and the proceeds of the sale of any such confiscated property or goods, except for such funds as are dedicated pursuant to N.J.S.2C:64-6, are appropriated for law enforcement purposes designated by the Attorney General.

The Attorney General shall provide the Director of the Division of Budget and Accounting, the Senate Budget and Appropriations Committee and the Assembly Appropriations Committee, or the successor committees thereto, with written reports on August 1, 2012 and February 1, 2013, of the use and disposition by State law enforcement agencies, including the offices of the county prosecutors, of any interest in property or money seized, or proceeds resulting from seized or forfeited property, and any interest or income earned thereon, arising from any State law enforcement agency involvement in a surveillance, investigation, arrest or prosecution involving offenses under N.J.S.2C:35-1 et seq. and N.J.S.2C:36-1 et seq. leading to such seizure or forfeiture. The reports shall specify for the preceding period of the fiscal year the type, approximate value, and disposition of the property seized and the amount of any proceeds received or expended, whether obtained di-

rectly or as contributive share, including but not limited to the use thereof for asset maintenance, forfeiture prosecution costs, costs of extinguishing any perfected security interest in seized property and the contributive share of property and proceeds of other participating local law enforcement agencies. The reports shall provide an itemized accounting of all proceeds expended and shall specify with particularity the nature and purpose of each such expenditure.

Penalties, fines, and other fees collected pursuant to N.J.S.2C:35-20 and deposited in the State Forensic Laboratory Fund, together with the unexpended balance at the end of the preceding fiscal year, are appropriated to defray additional laboratory related administration and operational expenses of the "Comprehensive Drug Reform Act of 1987," N.J.S.2C:35-1 et al., subject to the approval of the Director of the Division of Budget and Accounting.

The unexpended balance at the end of the preceding fiscal year in the Office of Homeland Security and Preparedness is appropriated, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts derived from the agency surcharge on vehicle rentals pursuant to section 54 of P.L.2002, c.34 (C.App.A:9-78), not to exceed \$7,200,000, are appropriated for the Office of Homeland Security and Preparedness and shall be deposited into a dedicated account, the expenditure of which shall be subject to the approval of the Director of the Division of Budget and Accounting.

In addition to the amount hereinabove appropriated for the Office of Homeland Security and Preparedness, such additional sums as may be required are appropriated for the purposes of providing State matching funds for federal grants related to homeland security and such amounts may be transferred to other departments and State agencies for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.

STATE AID

The unexpended balance at the end of the preceding fiscal year in the Capital for Homeland Security Critical Infrastructure account is appropriated and such amounts may be transferred to other departments and State agencies for any State and/or local homeland security purpose, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law, regulation, or Executive Order to the contrary, any purchase by the State or by a State agency or local government unit of equipment, goods, or services related to homeland security and domestic preparedness, that is paid for or reimbursed by State funds appropriated in this fiscal year, to the Department of Law and Public Safety, for Homeland Security and Preparedness under program classification, may be made through the receipt of public bids or as an alternative to public bidding and subject to the provisions of this paragraph, through direct purchase without advertising for bids or rejecting bids already received but not awarded. Purchases made without public bidding shall be from vendors that shall: (1) be holders of a current State contract for the equipment, goods, or services sought, or (2) be participating in a federal procurement program established by a federal department or agency, or (3) have been approved

by the State Treasurer in consultation with the Director of the Office of Homeland Security and Preparedness. The equipment, goods or services purchased by a local government unit receiving such State funds by subgrant, shall be referred to in the grant agreement issued by the Office of Homeland Security and Preparedness and shall be authorized by resolution of the governing body of the local government unit entering into the grant agreement. Such resolution may, without subsequent action of the local governing body, simultaneously accept the grant from the State administrative agency, authorize the insertion of the revenue and offsetting appropriation in the budget of the local government unit, and authorize the contracting agent of the local government unit to procure the equipment, goods, or services. A copy of such resolution shall be filed with the chief financial officer of the local government unit and the Division of Local Government Services in the Department of Community Affairs.

70 Government Direction, Management, and Control

74 General Government Services

DIRECT STATE SERVICES

12-1010 Legal Services	<u>\$71,262,000</u>
Subtotal Direct State Services, General Government Services	<u>\$71,262,000</u>

Less:

Legal Services	<u>\$56,219,000</u>

Total Income Deductions	<u>\$56,219,000</u>

Total Direct State Services Appropriation, General

Government Services	<u>\$15,043,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$12,812,000)

Materials and Supplies	(89,000)

Services Other Than Personal	(462,000)

Maintenance and Fixed Charges	(238,000)

Special Purpose:

12 Legal Services	(56,219,000)

12 Child Welfare Unit	(1,442,000)

Less:

Income Deductions	<u>56,219,000</u>

In addition to the \$56,219,393 attributable to Reimbursements from Other Sources and the corresponding additional amount associated with employee fringe benefit costs, there are appropriated such sums as may be received or receivable from any State agency, instrumentality or public authority for direct or indirect costs of legal services furnished thereto and attributable to a change in or the addition of a client agency agreement, subject to the approval of the Director of the Division of Budget and Accounting.

The Director of the Division of Budget and Accounting is empowered to credit or transfer to the General Fund from any other department, branch, or non-State fund

source, out of funds appropriated thereto, such funds as may be required to cover the costs of legal services attributable to that other department, branch, or non-State fund source as the Director of the Division of Budget and Accounting shall determine. Receipts in any non-State fund are appropriated for the purpose of such transfer.

Notwithstanding the provisions of any law or regulation to the contrary, revenues derived from penalties, cost recoveries, restitution or other recoveries to the State are appropriated to offset unbudgeted, extraordinary costs of legal, investigative, administrative, expert witnesses and other services incurred by the Division of Law related to litigation and acting on behalf of the State and State agencies. Such sums shall first be charged to any revenues derived from recoveries collected by the State but may also be provided from the General Fund, subject to the approval of the Director of the Division of Budget and Accounting.

80 Special Government Services

82 Protection of Citizens' Rights

DIRECT STATE SERVICES

14-1310 Consumer Affairs	\$7,357,000
15-1319 Operation of State Professional Boards	17,633,000
<i>(From General Fund</i>	<i>\$17,541,000)</i>
<i>(From Casino Revenue Fund.....</i>	<i>92,000)</i>
16-1350 Protection of Civil Rights	4,527,000
19-1440 Victims of Crime Compensation Office	<u>4,534,000</u>
Total Direct State Services Appropriation, Protection of Citizens' Rights	<u>\$34,051,000</u>
<i>(From General Fund</i>	<i>\$33,959,000)</i>
<i>(From Casino Revenue Fund.....</i>	<i>92,000)</i>

Direct State Services:

Personal Services:

Salaries and Wages	(\$6,762,000)
Salaries and Wages (CRF)	(80,000)
Employee Benefits (CRF)	(6,000)
<i>(From General Fund</i>	<i>\$6,762,000)</i>
<i>(From Casino Revenue Fund.....</i>	<i>86,000)</i>
Materials and Supplies.....	(98,000)
Services Other Than Personal	(16,764,000)
Services Other Than Personal (CRF).....	(6,000)
Maintenance and Fixed Charges	(1,202,000)
Special Purpose:	
14 Consumer Affairs Legalized Games of Chance	(1,200,000)
14 Securities Enforcement Fund	(893,000)
14 Consumer Affairs Weights and Measures Program	(2,612,000)

14 Consumer Affairs Charitable Registrations Program.....	(556,000)
15 Personal Care Attendants - Background Checks.....	(500,000)
19 Claims - Victims of Crime	(3,372,000)

In addition to the amount hereinabove appropriated for Consumer Affairs, receipts in excess of the amount anticipated, attributable to changes in fee structure or fee increases, are appropriated, subject to the approval of the Director of the Division of Budget and Accounting.

All fees, penalties, and costs collected pursuant to P.L.1988, c.123 (C.56:12-29 et seq.) are appropriated for the purpose of offsetting costs associated with the handling and resolution of consumer automotive complaints.

Fees and cost recoveries collected pursuant to P.L.1989, c.331 (C.34:8-43 et al.) are appropriated in an amount not to exceed additional expenses associated with mandated duties of the Division of Consumer Affairs, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts derived from penalties and the unexpended balance at the end of the preceding fiscal year in the Consumer Fraud Education Fund program account pursuant to P.L.1999, c.129 (C.56:8-14.2 et seq.) are appropriated for the purpose of offsetting the cost of operating the program, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts in excess of the amount anticipated derived pursuant to P.L.1954, c.7 (C.5:8-1 et seq.) from the operations of the Division of Consumer Affairs Legalized Games of Chance program and the unexpended balances at the end of the preceding fiscal year, are appropriated for the purpose of offsetting the operational costs of the program, subject to the approval of the Director of the Division of Budget and Accounting.

The amount hereinabove appropriated for the Securities Enforcement Fund account is payable from receipts from fees and penalties deposited in the Securities Enforcement Fund pursuant to section 15 of P.L.1985, c.405 (C.49:3-66.1). Notwithstanding the provisions of any law or regulation to the contrary, an amount not less than that anticipated as General Fund revenue from receipts derived from fees and penalties collected by the Securities Enforcement Fund shall be transferred to the General Fund as State revenue by April 1. The unexpended balance at the end of the preceding fiscal year is appropriated to the Securities Enforcement Fund program account to offset the cost of operating this program and for use by the Department of Law and Public Safety to support departmental efforts related to suicide and violence prevention, fire safety, anti-gang activities, background checks and investigations required by law, critical equipment or facility needs, and unanticipated public safety or citizen protection needs, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any other law or regulation to the contrary, receipts in excess of the amount anticipated and the unexpended balances at the end of the preceding fiscal year are appropriated to the Controlled Dangerous Substance Registration program for the purpose of offsetting the costs of the administration and

operation of the program, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts derived from the assessment and recovery of costs, fines, and penalties as well as other receipts received pursuant to the Consumer Fraud Act, P.L.1960, c.39 (C.56:8-1 et seq.), are appropriated and may be transferred for additional operational costs of the Division of Consumer Affairs, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts in excess of the amount anticipated derived pursuant to R.S.51:1-1 et seq. from the operations of the Division of Consumer Affairs, Office of Weights and Measures program and the unexpended balances at the end of the preceding fiscal year, are appropriated for the purposes of offsetting the operational costs of the program, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts in excess of the amount anticipated derived pursuant to P.L.1994, c.16 (C.45:17A-18 et seq.) from the operations of the Division of Consumer Affairs Charitable Registration and Investigation program and the unexpended balances at the end of the preceding fiscal year, are appropriated for the purpose of offsetting the operational costs of the program, subject to the approval of the Director of the Division of Budget and Accounting.

The amount hereinabove appropriated for each of the several State professional boards, advisory boards, and committees shall be payable from receipts of those entities, and any receipts in excess of the amounts specifically provided to each of the entities, and the unexpended balances at the end of the preceding fiscal year are appropriated, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts derived from the sale of films, pamphlets, and other educational materials developed or produced by the Division on Civil Rights are appropriated to offset operational costs of the Division.

Notwithstanding the provisions of section 2 of P.L.1983, c.412 (C.10:5-14.1a) any receipts derived from the assessment of fines, fees, and penalties pursuant to P.L.1945, c.169 (C.10:5-1 et seq.) are appropriated to the Division on Civil Rights for operational costs, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts derived from the provision of copies of transcripts and other materials related to officially docketed cases are appropriated.

The unexpended balances at the end of the preceding fiscal year in the Office of Victim - Witness Assistance pursuant to section 2 of P.L.1979, c.396 (C.2C:43-3.1) are appropriated for the same purpose.

The amount hereinabove appropriated for Claims - Victims of Crime is available for payment of awards applicable to claims filed in prior fiscal years.

Receipts derived from assessments pursuant to section 2 of P.L.1979, c.396 (C.2C:43-3.1) and the unexpended balance at the end of the preceding fiscal year in the Criminal Disposition and Revenue Collection Fund program account, are appropriated for the purpose of offsetting the costs of the design, development, implementation and operation of the Criminal Disposition and Revenue Collection Fund

program and payment of claims of victims of crime, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts derived from assessments under section 2 of P.L.1979, c.396 (C.2C:43-3.1) in excess of the amount anticipated and the unexpended balance at the end of the preceding fiscal year are appropriated for payment of claims of victims of crime pursuant to P.L.1971, c.317 (C.52:4B-1 et seq.) and additional Victims of Crime Compensation Office operational costs up to \$1,425,000, and \$98,000 for the Office's Strategic IT Automation Initiative, subject to the approval of the Director of the Division of Budget and Accounting.

The amount hereinabove is appropriated from the Casino Revenue Fund for the costs associated with the operation of the New Jersey Board of Nursing.

Department of Law and Public Safety, Total State

Appropriation \$567,359,000

Receipts derived from the provision of copies, the processing of credit cards and other materials related to compliance with section 6 of P.L.2001, c.404 (C.47:1A-5), are appropriated for the purpose of offsetting costs related to the public access of government records.

All registration fees, tuition fees, training fees, and all other fees received for reimbursement for attendance at courses conducted by any division in the Department of Law and Public Safety are appropriated for the purposes of offsetting the operating expenses of the courses, subject to the approval of the Director of the Division of Budget and Accounting.

Summary of Department of Law and Public Safety Appropriations

(For Display Purposes Only)

Appropriations by Category:

Direct State Services.....\$543,911,000
Grants-in-Aid.....23,448,000

Appropriations by Fund:

General Fund.....\$514,313,000
Casino Control Fund.....46,754,000
Casino Revenue Fund.....92,000
Gubernatorial Elections Fund.....6,200,000

67 DEPARTMENT OF MILITARY AND VETERANS' AFFAIRS

10 Public Safety and Criminal Justice

14 Military Services

DIRECT STATE SERVICES

40-3620 New Jersey National Guard Support Services.....\$3,672,000
60-3600 Joint Training Center Management and Operations 228,000
99-3600 Administration and Support Services 3,740,000

Total Direct State Services Appropriation, Military Services \$7,640,000

Direct State Services:

Personal Services:

Salaries and Wages (\$3,701,000)
 Materials and Supplies..... (603,000)
 Services Other Than Personal (735,000)
 Maintenance and Fixed Charges..... (1,079,000)

Special Purpose:

40 National Guard - State Active Duty (50,000)
 40 New Jersey National Guard Challenge
 Youth Program (265,000)
 40 Joint Federal-State Operations and
 Maintenance Contracts (State Share) (1,152,000)

Additions, Improvements and Equipment (55,000)

The unexpended balance at the end of the preceding fiscal year in the National Guard-State Active Duty account is appropriated for the same purpose.

The unexpended balance at the end of the preceding fiscal year in the Joint Federal-State Operations and Maintenance Contracts (State Share) account is appropriated for the same purpose.

Receipts derived from the rental and use of armories and the unexpended balance at the end of the preceding fiscal year in the receipt account are appropriated for the operation and maintenance thereof, subject to the approval of the Director of the Division of Budget and Accounting.

In addition to the amount hereinabove appropriated for New Jersey National Guard Support Services, funds received for Distance Learning Program use are appropriated for the same purposes, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts derived from the sale of solar energy credits and the unexpended balance at the end of the preceding fiscal year in the receipt account are appropriated for the operation and maintenance of other energy program projects.

80 Special Government Services

83 Services to Veterans

3610 Veterans' Program Support

DIRECT STATE SERVICES

50-3610 Veterans' Outreach and Assistance \$3,806,000

51-3610 Veterans Haven 2,526,000

70-3610 Burial Services..... 2,304,000

Total Direct State Services Appropriation, Veterans'

Program Support..... \$8,636,000

Direct State Services:

Personal Services:

Salaries and Wages (\$5,582,000)

Materials and Supplies.....	(1,472,000)
Services Other Than Personal.....	(369,000)
Maintenance and Fixed Charges.....	(100,000)
Special Purpose:	
50 Payment of Military Leave Benefits.....	(150,000)
50 Veterans' State Benefits Bureau.....	(150,000)
50 Maintenance for Memorials.....	(390,000)
70 Honor Guard Support Services.....	(423,000)

Funds collected by and on behalf of the Korean Veterans' Memorial Fund are hereby appropriated for the purposes of the fund.

Funds received for Veterans' Transitional Housing from the U.S. Department of Veterans Affairs and the individual residents, and the unexpended balance at the end of the preceding fiscal year, in the receipt account are appropriated for the same purpose.

Funds received for plot interment allowances from the U.S. Department of Veterans Affairs, burial fees collected, and the unexpended program balances at the end of the preceding fiscal year are appropriated for perpetual care and maintenance of burial plots and grounds at the Brigadier General William C. Doyle Veterans' Memorial Cemetery in North Hanover Township, Burlington County, New Jersey.

Notwithstanding the provisions of any law or regulation to the contrary, no State funds are appropriated to the Department of Military and Veterans' Affairs for the purpose of reforestation or in lieu of payments under the P.L.1993, c.106 (C.13:1L-14.1 et seq.) in conjunction with the current or future operation, maintenance and construction of the Brigadier General William C. Doyle Veterans' Memorial Cemetery in North Hanover Township, Burlington County, New Jersey.

Notwithstanding the provisions of section 4 of P.L.2001, c.351 (C.52:13H-2.1) or any other law or regulation to the contrary, the amount hereinabove appropriated for Payment of Military Leave Benefits is subject to the following conditions: it shall be the responsibility of the Department of Military and Veterans' Affairs to accept, review, and approve applications by a county, municipal governing body, or board of education for reimbursement of eligible costs incurred as a result of the provisions of P.L.2001, c.351, and to reimburse such costs from the Payment of Military Leave Benefits account.

From the amount hereinabove appropriated for the Support Services for Returning Veterans, such sums as may be required may be transferred to Veterans' Outreach and Assistance-Direct State Services, Veterans Haven-Direct State Services and Veterans' Transportation-Grants-In-Aid, subject to the approval of the Director of the Division of Budget and Accounting. The unexpended balance at the end of the preceding fiscal year, in the Support Services for Returning Veterans account is appropriated for the Veterans Haven program.

GRANTS-IN-AID

50-3610 Veterans' Outreach and Assistance \$2,509,000

Total Grants-in-Aid Appropriation, Veterans'	
Program Support	<u>\$2,509,000</u>
Grants-In-Aid:	
50 Support Services for Returning Veterans	(\$600,000)
50 Veterans' Tuition Credit Program	(8,000)
50 POW/MIA Tuition Assistance	(1,000)
50 Vietnam Veterans' Tuition Aid	(2,000)
50 Veterans' Transportation	(335,000)
50 Veterans' Orphan Fund - Education Grants	(3,000)
50 Blind Veterans' Allowances	(40,000)
50 Paraplegic and Hemiplegic Veterans' Allowance	(220,000)
50 Post Traumatic Stress Disorder	(1,300,000)

3630 Menlo Park Veterans' Memorial Home

DIRECT STATE SERVICES

20-3630 Domiciliary and Treatment Services	\$19,594,000
99-3630 Administration and Support Services	<u>5,568,000</u>
Total Direct State Services Appropriation, Menlo Park	
Veterans' Memorial Home	<u>\$25,162,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$21,045,000)
Materials and Supplies	(2,207,000)
Services Other Than Personal	(1,536,000)
Maintenance and Fixed Charges	(260,000)
Additions, Improvements and Equipment	(114,000)

GRANTS-IN-AID

20-3630 Domiciliary and Treatment Services	<u>\$55,000</u>
Total Grants-in-Aid Appropriation, Menlo Park Veterans'	
Memorial Home	<u>\$55,000</u>

Grants-In-Aid:

20 Prescription Drug Program	(\$55,000)

3640 Paramus Veterans' Memorial Home

DIRECT STATE SERVICES

20-3640 Domiciliary and Treatment Services	\$19,501,000
99-3640 Administration and Support Services	<u>4,641,000</u>
Total Direct State Services Appropriation, Paramus	
Veterans' Memorial Home	<u>\$24,142,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$20,994,000)

Materials and Supplies.....	(1,588,000)
Services Other Than Personal.....	(1,335,000)
Maintenance and Fixed Charges.....	(184,000)
Additions, Improvements and Equipment	(41,000)

GRANTS-IN-AID

20-3640 Domiciliary and Treatment Services	<u>\$55,000</u>
Total Grants-in-Aid Appropriation, Paramus Veterans'	
Memorial Home	<u>\$55,000</u>

Grants-In-Aid:

20 Prescription Drug Program	(\$55,000)

3650 Vineland Veterans' Memorial Home**DIRECT STATE SERVICES**

20-3650 Domiciliary and Treatment Services	\$21,531,000
99-3650 Administration and Support Services	<u>5,646,000</u>
Total Direct State Services Appropriation, Vineland	
Veterans' Memorial Home	<u>\$27,177,000</u>

Direct State Services:**Personal Services:**

Salaries and Wages	(\$22,472,000)
Materials and Supplies.....	(1,800,000)
Services Other Than Personal.....	(2,467,000)
Maintenance and Fixed Charges.....	(314,000)
Additions, Improvements and Equipment	(124,000)

Balances on hand at the end of the preceding fiscal year for the benefit of residents in the several veterans' homes and such funds as may be received, are appropriated for the use of such residents.

Revenues representing receipts to the General Fund from charges to residents' trust accounts for maintenance costs are appropriated for use as personal needs allowances for patients/residents who have no other source of funds for such purposes; provided however, that the allowance shall not exceed \$50 per month for any eligible resident of an institution and provided further, that the total amount herein for such allowances shall not exceed \$100,000, and that any increase in the maximum monthly allowance shall be approved by the Director of the Division of Budget and Accounting.

Funds received from the sale of articles made in occupational therapy departments of the several veterans' homes are appropriated for the purchase of additional material and other expenses incidental to such sale or manufacture.

Forty percent of the receipts in excess of the amount anticipated derived from resident contributions and the U.S. Department of Veterans' Affairs at the end of the preceding fiscal year are appropriated for veterans' program initiatives, subject to the approval of the Director of the Division of Budget and Accounting of an itemized

plan for the expenditure of these amounts, as shall be submitted by the Adjutant General.

Fees charged to residents for personal laundry services provided by the veterans' homes are appropriated to supplement the operational and maintenance costs of these laundry services.

GRANTS-IN-AID

20-3650 Domiciliary and Treatment Services \$55,000
 Total Grants-in-Aid Appropriation, Vineland Veterans'
 Memorial Home..... \$55,000

Grants-In-Aid:

20 Prescription Drug Program (\$55,000)
 Department of Military and Veterans' Affairs, Total State
 Appropriation \$95,431,000

Of the amount hereinabove appropriated for the Department of Military and Veterans' Affairs, such sums as the Director of the Division of Budget and Accounting shall determine from the schedule included in the Governor's Budget Message and Recommendations shall first be charged to the State Lottery Fund.

Summary of Department of Military and Veterans' Affairs Appropriations (For Display Purposes Only)

Appropriations by Category:

Direct State Services.....\$92,757,000
 Grants-in-Aid.....2,674,000

Appropriations by Fund:

General Fund\$95,431,000

74 DEPARTMENT OF STATE

30 Educational, Cultural, and Intellectual Development

36 Higher Educational Services

DIRECT STATE SERVICES

80-2400 Statewide Planning and Coordination for Higher Education \$1,376,000
 81-2400 Educational Opportunity Fund Programs 380,000
 Total Direct State Services Appropriation, Higher
 Educational Services..... \$1,756,000

Direct State Services:

Personal Services:

Salaries and Wages (\$1,568,000)
 Materials and Supplies..... (9,000)
 Services Other Than Personal (117,000)
 Maintenance and Fixed Charges (12,000)

Additions, Improvements and Equipment(50,000)

GRANTS-IN-AID

80-2400 Statewide Planning and Coordination for Higher Education.... \$1,800,000

81-2401 Educational Opportunity Fund Programs 38,974,000

Total Grants-in-Aid Appropriation, Higher Educational Services \$40,774,000

Grants-in-Aid:

80 College Bound(\$1,700,000)

80 Governor's School(100,000)

81 Opportunity Program Grants.....(26,019,000)

81 Supplementary Education Program Grants(12,803,000)

81 Martin Luther King Physician-Dentist
Scholarship Act of 1986.....(152,000)

An amount not to exceed 5% of the total hereinabove appropriated for College Bound is available for transfer to Direct State Services for the administrative expenses of this program, subject to the approval of the Director of the Division of Budget and Accounting.

Refunds from prior years to the College Bound Program are appropriated to that account.

Refunds from prior years to the Educational Opportunity Fund Programs accounts are appropriated to those accounts.

2405 Higher Education Student Assistance Authority

DIRECT STATE SERVICES

At any time prior to the issuance and sale of bonds or other obligations by the Higher Education Student Assistance Authority, the State Treasurer is authorized to transfer from any available monies in any fund of the Treasury of the State to the credit of any fund of the authority such sums as the State Treasurer deems necessary. Any sums so transferred shall be returned to the same fund of the Treasury of the State by the State Treasurer from the proceeds of the sale of the first issue of authority bonds or other authority obligations.

In furtherance of the "Higher Education Student Assistance Authority Law," N.J.S.18A:71A-1 et seq., in the event of a draw upon a debt service reserve surety bond or any other debt service reserve cash equivalent instrument or any insufficiency of such instruments to pay debt service on the bonds issued by the Higher Education Student Assistance Authority, there are appropriated to the Higher Education Student Assistance Authority such sums as are necessary to repay the issuer of such surety bond or such other cash equivalent instrument for such draw or to satisfy such insufficiency, subject to the approval of the Director of the Division of Budget and Accounting.

GRANTS-IN-AID

45-2405 Student Assistance Programs \$354,231,000

Total Grants-in-Aid Appropriation, Higher Education

Student Assistance Authority \$354,231,000

Grants-in-Aid:

45 Veterinary Medicine Education Program	(\$51,000)
45 Tuition Aid Grants	(325,043,000)
45 Part-Time Tuition Aid Grants for County Colleges	(10,360,000)
45 Survivor Tuition Benefits	(38,000)
45 Coordinated Garden State Scholarship Programs	(1,630,000)
45 Part-Time Tuition Aid Grants - EOF Students	(558,000)
45 Governor's Urban Scholarship Program	(1,000,000)
45 New Jersey World Trade Center Scholarship Program	(202,000)
45 New Jersey Student Tuition Assistance Reward Scholarship (NJSTARS I & II)	(13,849,000)
45 Primary Care Practitioner Loan Redemption Program	(1,500,000)

The unexpended balances at the end of the preceding fiscal year in Student Assistance Programs are appropriated to such programs, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, the sums provided hereinabove in Student Assistance Programs shall be available for payment of liabilities applicable to prior fiscal years.

Notwithstanding the provisions of any law or regulation to the contrary, funds hereinabove appropriated for Survivor Tuition Benefits, Coordinated Garden State Scholarship Programs, Teaching Fellows Program, and Social Services Student Loan Redemption Program shall only be used to fund awards to students who have received awards in the same program prior to fiscal year 2011.

Notwithstanding the provisions of N.J.S.18A:71B-47 through N.J.S.18A:71B-49, or any other law or regulation to the contrary, the amounts hereinabove appropriated to the Higher Education Student Assistance Authority are subject to the following condition: commencing on or after July 1, 2007, any newly-admitted student attending a school of veterinary medicine in a reserved space for New Jersey residents through contractual agreements between the Higher Education Student Assistance Authority and participating out-of-State schools of veterinary medicine shall be required, through a contract with the Higher Education Student Assistance Authority, upon graduation to practice veterinary medicine in New Jersey for a period of one year for each year of contract funding provided on their behalf. Such service requirement must commence within one year of completion of the recipient's veterinary education, including American Veterinary Medical Association-approved internships or residencies. If such service requirement is not met, in part or in full, after documented best efforts to find a position, said recipient must refund to the Higher Education Student Assistance Authority that portion of the amounts expended for the recipient's contract seat that is not offset by practicing in New Jersey.

The amount hereinabove appropriated for the Veterinary Medicine Education Program shall not be expended for any student not attending a school of veterinary medicine

prior to July 1, 2010 in a reserved space for New Jersey residents through contractual agreements between the Higher Education Student Assistance Authority and participating out-of-State schools of veterinary medicine.

Notwithstanding the provisions of any law or regulation to the contrary, the Higher Education Student Assistance Authority shall provide to students enrolled in public institutions of higher education who are eligible for maximum awards under the Tuition Aid Grant program an award amount which shall not exceed the in-State undergraduate 2010-2011 tuition rate for the institution with comparable awards provided to students eligible for maximum awards enrolled at nonpublic institutions. All other award amounts provided under the Tuition Aid Grant program shall not exceed the in-State undergraduate tuitions in effect at institutions in academic year 2008-2009. The unexpended balances reappropriated to the Tuition Aid Grant account shall be available to fund increases in the number of applicants qualifying for full-time Tuition Aid Grant awards, to fund increases in award amounts, and to fund shifts in the distribution of awards that result in an increase in program costs.

In addition to the amount hereinabove appropriated for Tuition Aid Grants, there are appropriated such sums as are required to cover the costs of increases in the number of applicants qualifying for full-time Tuition Aid Grant awards or to fund shifts in the distribution of awards that result in an increase in total program costs, subject to the approval of the Director of the Division of Budget and Accounting.

The amount hereinabove appropriated for Part-Time Tuition Aid Grants for County Colleges shall be used to provide funds for tuition aid grants for eligible, qualified part-time students enrolled at the county colleges established pursuant to N.J.S.18A:64A-1 et seq. The tuition aid grants shall be used to pay the tuition at a county college established pursuant to N.J.S.18A:64A-1 et seq. Within the limits of available appropriations as determined by the Higher Education Student Assistance Authority, part-time grant awards shall be pro-rated against the full-time grant award for the applicable institutional sector established pursuant to N.J.S.18A:71B-21 as follows: an eligible student enrolled with six to eight credits shall receive one-half of the value of a full-time award and an eligible student enrolled with nine to eleven credits shall receive three-quarters of a full-time award. Students shall apply first for all other forms of federal student assistance grants and scholarships; student eligibility for the Tuition Aid Grant program for part-time enrollment at a community college shall in other respects be determined by the authority in accordance with the criteria established pursuant to N.J.S.18A:71B-20, other than the criterion for full-time enrollment.

The unexpended balances reappropriated to the Part-Time Tuition Aid Grants for County Colleges account shall be available to fund increases in the number of applicants qualifying for Part-Time Tuition Aid Grants for County Colleges awards, to fund increases in award amounts, and to fund shifts in the distribution of awards that result in an increase in program costs.

Receipts derived from voluntary contributions by taxpayers on New Jersey gross income tax returns for the New Jersey World Trade Center Scholarship Fund are appropriated for the purpose of providing scholarships for eligible recipients as defined in

N.J.S.18A:71B-23, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of P.L.2005, c.359 (C.18A:71B-86.1 et seq.), as amended by P.L.2008, c.124, or any law or regulation to the contrary, the funds hereinabove appropriated for the New Jersey Student Tuition Assistance Reward Scholarships to fund the NJ STARS II scholarship program are subject to the following conditions: (1) the amount of the award to qualifying NJ STARS I graduates who have not previously received a NJ STARS II award and attend any New Jersey four-year college or university that participates in the Tuition Aid Grant Program shall be \$1,250 per semester, to be paid for completely by the State appropriation, thereby suspending the obligation of the public institutions of higher education to fund their share of the cost of the scholarships as set forth in P.L.2005, c.359 (C.18A:71B-86.1 et seq.), as amended by P.L.2008, c.124, for this fiscal year; and (2) students who received NJ STARS II funds during the 2011-2012 academic year, students who were considered "non-funded" due to other federal and/or State grants and scholarships received during the 2011-2012 academic year, and students who were on an approved leave of absence during the 2011-2012 academic year, shall receive awards during the 2012-2013 academic year as specified in section 4 of P.L.2005, c.359 (C.18A:71B-86.4), as amended by P.L.2008, c.124, provided however, that no such student shall receive an award in excess of \$1,250 per semester beyond the 2012-2013 academic year.

Notwithstanding the provisions of subsection b. of section 5 of P.L.2004, c.59 (C.18A:71B-85), none of the funds hereinabove appropriated for the New Jersey Student Tuition Assistance Reward Scholarships shall be used to fund summer semester NJ STARS scholarship awards.

Notwithstanding the provisions of section 5 of P.L. 2004, c.59 (C.18A:71B-85), none of the funds hereinabove appropriated for the New Jersey Student Tuition Assistance Reward Scholarships shall be used to cover the cost of fees for eligible students who graduated from high school in 2010 or in years thereafter.

Notwithstanding the provisions of any law or regulation to the contrary, participation in the Tuition Aid Grant program hereinabove appropriated shall be limited to those institutions that had previously participated in the Tuition Aid Grant program, or had applied in writing to the Higher Education Student Assistance Authority to participate in the Tuition Aid Grant program prior to September 1, 2009 and met all eligibility requirements prior to September 1, 2009.

2410 Rutgers, The State University
GRANTS-IN-AID

82-2410 Institutional Support	\$2,075,452,000
Subtotal General Operations	<u>\$2,075,452,000</u>

Less:

Receipts from Tuition Increase	\$329,000
General Services Income	723,356,000
Auxiliary Funds Income	301,943,000
Special Funds Income	600,051,000

Employee Fringe Benefits	208,755,000
Total Income Deductions	<u>\$1,834,434,000</u>
Total Grants-in-Aid Appropriation, Rutgers, The State University	<u>\$241,018,000</u>

Grants-in-Aid:

Special Purpose:

82 General Institutional Operations	(\$2,075,052,000)
82 Clinical Legal Programs for the Poor - Camden Law School	(200,000)
82 Clinical Legal Programs for the Poor - Newark Law School	(200,000)

Less:

Income Deductions	<u>1,834,434,000</u>

For the purpose of implementing the appropriations act for the current fiscal year, the number of State-funded positions at Rutgers, The State University shall be 6,361.

2415 Agricultural Experiment Station**GRANTS-IN-AID**

82-2415 Institutional Support	<u>\$93,916,000</u>
Subtotal General Operations	<u>\$93,916,000</u>

Less:

Special Funds Income	<u>\$53,071,000</u>
Federal Research and Extension Funds Income	<u>7,652,000</u>
Employee Fringe Benefits	<u>11,451,000</u>
Total Income Deductions	<u>\$72,174,000</u>
Total Grants-In-Aid Appropriation, Agricultural Experiment Station	<u>\$21,742,000</u>

Grants-In-Aid:

Special Purpose:

82 General Institutional Operations	(\$93,916,000)

Less:

Income Deductions	<u>72,174,000</u>

For the purpose of implementing the appropriations act for the current fiscal year, the number of State-funded positions at the Agricultural Experiment Station shall be 404.

For the purpose of implementing the appropriations act for the current fiscal year, the fringe benefits for 120 positions, funded by the federal Hatch and Smith/Lever programs, are funded by the State.

Rutgers, The State University of New Jersey is authorized to reallocate appropriations from the General University to the Agricultural Experiment Station, as needed, to assure that there are sufficient funds in the Agricultural Experiment Station to meet federal requirements for the Hatch and Smith/Lever programs.

2420 University of Medicine and Dentistry of New Jersey
GRANTS-IN-AID

82-2420 Institutional Support \$1,332,686,000
 Subtotal General Operations \$1,332,686,000

Less:

Hospital Services Income \$472,859,000
Core Affiliates Income 3,230,000
General Services Income 205,686,000
Auxiliary Funds Income 20,075,000
Special Funds Income 266,554,000
Employee Fringe Benefits 199,979,000
Total Income Deductions \$1,168,383,000

Total Grants-in-Aid Appropriation, University
 of Medicine and Dentistry of New Jersey \$164,303,000

Grants-in-Aid:

Special Purpose:

82 General Institutional Operations (\$1,325,986,000)
 82 Cancer Institute of New Jersey and Ancillary
 Facilities (5,000,000)
 82 Child Health Institute (1,700,000)

Less:

Income Deductions 1,168,383,000

In addition to the sums hereinabove appropriated to the University of Medicine and Dentistry of New Jersey, all revenues from lease agreements between the university and contracted organizations are appropriated.

From the amount hereinabove appropriated for the University of Medicine and Dentistry of New Jersey, the Director of the Division of Budget and Accounting may transfer such amounts as deemed necessary to the Division of Medical Assistance and Health Services to maximize federal Medicaid funds.

The University of Medicine and Dentistry of New Jersey is authorized to operate its continuing medical-dental education program as a revolving fund and the revenue collected therefrom, and any unexpended balance therein, is retained for such fund.

For the purpose of implementing the appropriations act for the current fiscal year, the number of State-funded positions at the University of Medicine and Dentistry of New Jersey shall be 6,582.

For the purpose of implementing the appropriations act for the current fiscal year, the fringe benefits for not more than 1,238 positions, funded by medical services contracts with the Department of Health or the Department of Human Services, are funded by the State.

The unexpended balances of appropriations at the end of the preceding fiscal year to Robert Wood Johnson Medical School, Camden, for the purpose of faculty support of affiliate hospital (Cooper University Hospital) are appropriated for those purposes.

**2430 New Jersey Institute of Technology
GRANTS-IN-AID**

82-2430 Institutional Support \$326,547,000
 Subtotal General Operations \$326,547,000

Less:

General Services Income \$130,261,000
Auxiliary Funds Income 15,519,000
Special Funds Income 110,745,000
Employee Fringe Benefits 32,326,000
Total Income Deductions \$288,851,000
 Total Grants-in-Aid Appropriation, New Jersey
 Institute of Technology \$37,696,000

Grants-in-Aid:

Special Purpose:

82 General Institutional Operations (\$326,547,000)

Less:

Income Deductions 288,851,000

For the purpose of implementing the appropriations act for the current fiscal year, the number of State-funded positions at the New Jersey Institute of Technology shall be 1,187.

**2440 Thomas Edison State College
GRANTS-IN-AID**

82-2440 Institutional Support \$64,677,000
 Subtotal General Operations \$64,677,000

Less:

Self Sustaining Income \$20,489,000
General Services Income 31,497,000
Employee Fringe Benefits 7,470,000
State-Supported Facilities Cost 3,400,000
Total Income Deductions \$62,856,000
 Total Grants-in-Aid Appropriation, Thomas A.
 Edison State College \$1,821,000

Grants-in-Aid:

Special Purpose:

82 Subtotal General Operations (\$64,677,000)

Less:

Income Deductions 62,856,000

For the purpose of implementing the appropriations act for the current fiscal year, the number of State-funded positions at Thomas A. Edison State College shall be 228.

**2445 Rowan University
GRANTS-IN-AID**

82-2445 Institutional Support \$298,365,000
 Subtotal General Operations \$298,365,000

Less:

General Services Income.....\$118,699,000
Auxiliary Funds Income 39,583,000
Special Funds Income.....50,060,000
Employee Fringe Benefits.....35,210,000
Total Income Deductions\$243,552,000
 Total Grants-in-Aid Appropriation, Rowan University \$54,813,000

Grants-in-Aid:

Special Purpose:

82 General Institutional Operations(\$274,268,000)
 82 Cooper Medical School of Rowan University (7,800,000)
 82 Cooper Medical School - Cooper University
 Hospital Support (16,297,000)

Less:

Income Deductions.....243,552,000

For the purpose of implementing the appropriations act for the current fiscal year, the number of State-funded positions at Rowan University shall be 1,087.

For the purpose of implementing the appropriations act for the current fiscal year, the fringe benefits for not more than 47 positions at Cooper Medical School of Rowan University are funded by the State.

**2450 New Jersey City University
GRANTS-IN-AID**

82-2450 Institutional Support \$144,044,000
 Subtotal General Operations \$144,044,000

Less:

General Services Income.....\$42,424,000
A.H. Moore Program Receipts.....7,808,000
Auxiliary Funds Income 7,439,000
Special Funds Income.....33,550,000
Employee Fringe Benefits.....26,767,000
Total Income Deductions\$117,988,000
 Total Grants-in-Aid Appropriation, New Jersey City University ... \$26,056,000

Grants-in-Aid:

Special Purpose:

82 General Institutional Operations(\$144,044,000)

Less:

Income Deductions.....117,988,000

For the purpose of implementing the appropriations act for the current fiscal year, the number of State-funded positions at New Jersey City University shall be 1,129.

2455 Kean University

GRANTS-IN-AID

82-2455 Institutional Support \$244,528,000

Subtotal General Operations \$244,528,000

Less:

General Services Income \$147,588,000

Auxiliary Funds Income 21,860,000

Special Funds Income..... 11,608,000

Employee Fringe Benefits..... 30,635,000

Total Income Deductions \$211,691,000

Total Grants-in-Aid Appropriation, Kean University \$32,837,000

Grants-in-Aid:

Special Purpose:

82 General Institutional Operations (\$244,528,000)

Less:

Income Deductions..... 211,691,000

For the purpose of implementing the appropriations act for the current fiscal year, the number of State-funded positions at Kean University shall be 1,074.

2460 William Paterson University of New Jersey

GRANTS-IN-AID

82-2460 Institutional Support \$218,826,000

Subtotal General Operations \$218,826,000

Less:

General Services Income \$81,833,000

Auxiliary Funds Income 34,879,000

Special Funds Income..... 36,100,000

Employee Fringe Benefits..... 33,266,000

Total Income Deductions \$186,078,000

Total Grants-in-Aid Appropriation, William Paterson

University of New Jersey \$32,748,000

Grants-in-Aid:

Special Purpose:

82 General Institutional Operations (\$218,826,000)

Less:

Income Deductions..... 186,078,000

For the purpose of implementing the appropriations act for the current fiscal year, the number of State-funded positions at William Paterson University of New Jersey shall be 1,111.

**2465 Montclair State University
GRANTS-IN-AID**

82-2465 Institutional Support	<u>\$351,227,000</u>
Subtotal General Operations	<u>\$351,227,000</u>

Less:

<i>General Services Income</i>	<i>\$137,860,000</i>
<i>Conservation School Receipts</i>	<i>445,000</i>
<i>Auxiliary Funds Income</i>	<i>64,897,000</i>
<i>Special Funds Income</i>	<i>64,330,000</i>
<i>Employee Fringe Benefits</i>	<i>45,082,000</i>
<i>Total Income Deductions</i>	<u><i>\$312,614,000</i></u>
Total Grants-in-Aid Appropriation, Montclair State University	<u>\$38,613,000</u>

Grants-in-Aid:

Special Purpose:

82 General Institutional Operations	(\$351,227,000)

Less:

<i>Income Deductions</i>	<i>312,614,000</i>

For the purpose of implementing the appropriations act for the current fiscal year, the number of State-funded positions at Montclair State University shall be 1,316.

**2470 The College of New Jersey
GRANTS-IN-AID**

82-2470 Institutional Support	<u>\$217,820,000</u>
Subtotal General Operations	<u>\$217,820,000</u>

Less:

<i>General Services Income</i>	<i>\$78,362,000</i>
<i>Auxiliary Funds Income</i>	<i>47,791,000</i>
<i>Special Funds Income</i>	<i>33,534,000</i>
<i>Employee Fringe Benefits</i>	<i>28,816,000</i>
<i>Total Income Deductions</i>	<u><i>\$188,503,000</i></u>
Total Grants-in-Aid Appropriation, The College of New Jersey	<u>\$29,317,000</u>

Grants-in-Aid:

Special Purpose:

82 General Institutional Operations	(\$217,820,000)

Less:

<i>Income Deductions</i>	<i>188,503,000</i>

For the purpose of implementing the appropriations act for the current fiscal year, the number of State-funded positions at The College of New Jersey shall be 859.

**2475 Ramapo College of New Jersey
GRANTS-IN-AID**

82-2475 Institutional Support	<u>\$135,397,000</u>
Subtotal General Operations	<u>\$135,397,000</u>

Less:

General Services Income	\$51,539,000
Auxiliary Funds Income	35,933,000
Special Funds Income.....	13,126,000
Employee Fringe Benefits.....	18,669,000
Total Income Deductions	<u>\$119,267,000</u>
Total Grants-in-Aid Appropriation, Ramapo College of New Jersey.....	<u>\$16,130,000</u>

Grants-in-Aid:

Special Purpose:

82 General Institutional Operations(\$135,397,000)

Less:

Income Deductions..... **119,267,000**

For the purpose of implementing the appropriations act for the current fiscal year, the number of State-funded positions at Ramapo College of New Jersey shall be 573.

2480 The Richard Stockton College of New Jersey**GRANTS-IN-AID**

82-2480 Institutional Support	<u>\$189,241,000</u>
Subtotal General Operations	<u>\$189,241,000</u>

Less:

General Services Income	\$81,664,000
Auxiliary Funds Income	35,809,000
Special Funds Income.....	28,500,000
Employee Fringe Benefits.....	23,429,000
Total Income Deductions	<u>\$169,402,000</u>
Total Grants-in-Aid Appropriation, The Richard Stockton College of New Jersey	<u>\$19,839,000</u>

Grants-in-Aid:

Special Purpose:

82 General Institutional Operations(\$189,241,000)

Less:

Income Deductions..... **169,402,000**

For the purpose of implementing the appropriations act for the current fiscal year, the number of State-funded positions at The Richard Stockton College of New Jersey shall be 764.

Higher Educational Services

Notwithstanding the provisions of any law or regulation to the contrary, from the sums hereinabove appropriated for Higher Educational Services-Institutional Support in each of the senior public institutions of higher education, there are allocated such sums as are required to provide the reimbursement to cover tuition costs of the Na-

tional Guard members pursuant to subsection b. of section 21 of P.L.1999, c.46 (C.18A:62-24).

Notwithstanding the provisions of any law or regulation to the contrary, from the sums hereinabove appropriated for Higher Educational Services-Institutional Support in each of the senior public institutions of higher education, there are allocated such sums as may be required to fund lease or rental costs which may be charged by such senior public institutions for any State department, agency, authority or commission facilities located on the campus of any senior public institution of higher education. Public colleges and universities are authorized to provide a voluntary employee furlough program.

Notwithstanding the provisions of any law or regulation to the contrary, any funds appropriated as Grants-In-Aid and payable to any senior public college or university which requests approval from the Educational Facilities Authority and the Director of the Division of Budget and Accounting may be pledged as a guarantee for payment of principal and interest on any bonds issued by the Educational Facilities Authority or by the college or university. Such funds, if so pledged, shall be made available by the State Treasurer upon receipt of written notification by the Educational Facilities Authority or the Director of the Division of Budget and Accounting that the college or university does not have sufficient funds available for prompt payment of principal and interest on such bonds, and shall be paid by the State Treasurer directly to the holders of such bonds at such time and in such amounts as specified by the bond indenture, notwithstanding that payment of such funds does not coincide with any date for payment otherwise fixed by law.

Of the amount hereinabove appropriated for Higher Educational Services, such sums as the Director of the Division of Budget and Accounting shall determine from the schedule included in the Governor's Budget Recommendation Document first shall be charged to the State Lottery Fund.

Notwithstanding the provisions of any law or regulation to the contrary, the amounts hereinabove appropriated for the senior public institutions of higher education shall be paid to each institution in twelve equal installments on the last business day of each month.

Notwithstanding the provisions of any law or regulation to the contrary, no amount hereinabove appropriated for any senior public institution of higher education shall be paid until the institution remits its quarterly fringe benefit reimbursement for positions in excess of the number of State-funded positions provided in this act, by the deadline and in the manner required by the Director of the Division of Budget and Accounting.

**2541 Division of State Library
DIRECT STATE SERVICES**

51-2541 Library Services.....	<u>\$5,194,000</u>
Total Direct State Services Appropriation, Division of	
State Library	<u>\$5,194,000</u>

Direct State Services:

Personal Services:

Salaries and Wages(\$4,056,000)
 Materials and Supplies.....(418,000)
 Services Other Than Personal.....(193,000)
 Maintenance and Fixed Charges.....(27,000)

Special Purpose:

51 Supplies and Extended Services.....(500,000)

Notwithstanding the provisions of any law or regulation to the contrary, the amounts hereinabove appropriated for Direct State Services for the New Jersey State Library, excluding amounts appropriated to Special Purpose accounts, shall be paid in twelve equal installments, on the last business day of each month.

STATE AID

51-2541 Library Services \$7,975,000
 Total State Aid Appropriation, Division of State Library \$7,975,000

State Aid:

51 Per Capita Library Aid(\$3,676,000)
 51 Library Network.....(4,299,000)

30 Educational, Cultural, and Intellectual Development

37 Cultural and Intellectual Development Services

DIRECT STATE SERVICES

05-2530 Support of the Arts \$397,000
 06-2535 Museum Services 2,234,000
 07-2540 Development of Historical Resources 285,000

Total Direct State Services Appropriation, Cultural and
 Intellectual Development Services \$2,916,000

Direct State Services:

Personal Services:

Salaries and Wages(\$2,400,000)
 Materials and Supplies.....(102,000)
 Services Other Than Personal.....(320,000)
 Maintenance and Fixed Charges.....(94,000)

GRANTS-IN-AID

05-2530 Support of the Arts \$16,000,000
 07-2540 Development of Historical Resources 2,700,000

Total Grants-in-Aid Appropriation, Cultural and
 Intellectual Development Services \$18,700,000

Grants-in-Aid:

05 Cultural Projects.....(\$16,000,000)
 07 New Jersey Historical Commission -
 Agency Grants(2,700,000)

- Of the amount hereinabove appropriated for Cultural Projects, an amount not to exceed \$75,000 may be used for administrative purposes, and an amount not to exceed \$125,000 may be used for the assessment and oversight of cultural projects, including administrative costs attendant to this function, in compliance with all pertinent State and federal laws and regulations including the "Single Audit Act of 1984," Pub.L. 98-502 (31 U.S.C. s.7501 et seq.), subject to the approval of the Director of the Division of Budget and Accounting.
- Of the amount hereinabove appropriated for Cultural Projects, the value of project grants awarded within each county shall total not less than \$50,000.
- Of the amount hereinabove appropriated for Cultural Projects, funds may be used for the purpose of matching federal grants.
- Notwithstanding the provisions of any law or regulation to the contrary, of the amount appropriated for Cultural Projects, 25% shall be awarded to cultural groups or artists based in the eight southernmost counties (Cape May, Salem, Cumberland, Gloucester, Camden, Ocean, Atlantic, and Burlington), provided however, that the calculation of such 25% allocation shall not include the first \$1,000,000 of any grants that may be awarded to the New Jersey Performing Arts Center or the Rutgers Camden Performing Arts Center.
- Notwithstanding the provisions of section 4 of P.L.1999, c.131 (C.18A:73-22.4), from the amount appropriated for New Jersey Historical Commission - Agency Grants, an amount not to exceed \$200,000 is appropriated for administrative costs, subject to the approval of the Director of the Division of Budget and Accounting.

70 Government Direction, Management, and Control

74 General Government Services

DIRECT STATE SERVICES

01-2505 Office of the Secretary of State	\$3,376,000
02-2510 Business Action Center	4,096,000
04-2511 New Jersey Sports and Exposition Authority	9,450,000
08-2545 Records Management	824,000
25-2525 Election Management and Coordination	<u>635,000</u>
Total Direct State Services Appropriation, General	
Government Services	<u>\$18,381,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$6,399,000)
Materials and Supplies	(149,000)
Services Other Than Personal	(665,000)
Maintenance and Fixed Charges	(26,000)

Special Purpose:

01 Personal Responsibility Programs	(75,000)
01 Office of Volunteerism	(79,000)
01 Office of Programs	(434,000)
02 Office of Economic Growth	(1,104,000)

04 Travel and Tourism Advertising and Promotion.....(9,000,000)

04 New Jersey Motion Picture and
Television Commission(450,000)

Of the amount hereinabove appropriated to the Business Action Center, an amount up to \$250,000 is appropriated for New Jersey Small Business Development Centers, pursuant to a spending plan approved by the Secretary of State.

The Secretary of State shall report semi-annually on the expenditure during the preceding six months of State funds hereinabove appropriated for Travel and Tourism Advertising and Promotion and private contributions to this program. The first semi-annual report shall be completed not later than 30 days following the end of the second quarter of the fiscal year, the second semi-annual report shall be completed not later than 30 days following the end of the fiscal year, and both reports shall be submitted to the State Treasurer, the Director of the Division of Budget and Accounting, and the Joint Budget Oversight Committee.

Receipts derived from the examination of voting machines by Election Management and Coordination and the unexpended balance at the end of the preceding fiscal year of those receipts are appropriated for the costs of making such examinations.

The unexpended balance at the end of the preceding fiscal year in the Help America Vote Act - State Match account is appropriated for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.

GRANTS-IN-AID

01-2505 Office of the Secretary of State \$3,025,000

Total Grants-in-Aid Appropriation, Program Classification \$3,025,000

Grants-in-Aid:

01 Office of Programs(\$1,350,000)

01 Center for Hispanic Policy, Research
and Development(1,175,000)

01 Cultural Trust(500,000)

Of the amount hereinabove appropriated for the Office of Programs, an amount not to exceed \$50,000 may be used for administrative purposes, including the oversight of cultural projects, to ensure their compliance with all applicable State and federal laws and regulations including the "Single Audit Act of 1984," Pub.L. 98-502 (31 U.S.C. s.7501 et seq.), subject to the approval of the Director of the Division of Budget and Accounting.

GRANTS-IN-AID

25-2525 Election Management and Coordination \$7,030,000

Total State Aid Appropriation, Program Classification \$7,030,000

State Aid:

Special Purpose:

25 Extended Polling Place Hours.....(\$7,030,000)

In addition to the amount hereinabove appropriated for Extended Polling Place Hours, there are appropriated such sums as are required to provide required reimbursements

to county Boards of Election, subject to the approval of the Director of the Division of Budget and Accounting.

Department of State, Total State Appropriation \$1,176,915,000

Pursuant to the provisions of P.L.2003, c.114 (C.54:32D-1 et al.), the amounts herein-above appropriated for the purpose of promoting cultural and tourism activities in this State shall first be charged to revenues derived from the hotel and motel occupancy fee.

Summary of Department of State Appropriations
(For Display Purposes Only)

Appropriations by Category:

Direct State Services.....\$28,247,000
Grants-in-Aid.....1,133,663,000
State Aid.....15,005,000

Appropriations by Fund:

General Fund\$1,176,915,000

78 DEPARTMENT OF TRANSPORTATION

10 Public Safety and Criminal Justice

11 Vehicular Safety

Notwithstanding the provisions of the "Motor Vehicle Inspection Fund" established pursuant to subsection j. of R.S.39:8-2, balances in the fund are available for Other - Clean Air purposes, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, \$5,000,000 of monies received in the "Commercial Vehicle Enforcement Fund" established pursuant to section 17 of P.L.1995, c.157 (C.39:8-75) shall be deposited in the General Fund as State revenue, and existing Commercial Vehicle Enforcement Fund balances are appropriated to offset all reasonable and necessary expenses of the Division of State Police, the New Jersey Motor Vehicle Commission, the Department of Transportation, and the Department of Environmental Protection in the performance of commercial vehicle safety and emission inspections and Other - Clean Air purposes, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, of the amount appropriated for New Jersey Transit, \$5,000,000 thereof shall be paid from Commercial Vehicle Enforcement Fund receipts pursuant to section 17 of P.L.1995, c.157 (C.39:8-75), as shall be determined by the Director of the Division of Budget and Accounting.

Receipts derived pursuant to the New Jersey emergency medical service helicopter response act under subsection a. of section 1 of P.L.1992, c.87 (C.39:3-8.2), are appro-

priated to the Division of State Police and the Department of Health to defray the operating costs of the program as authorized under P.L.1986, c.106 (C.26:2K-35 et seq.). The unexpended balance at the end of the preceding fiscal year is appropriated to the special capital maintenance reserve account for capital replacement and major maintenance of helicopter equipment and any expenditures therefrom shall be subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of section 105 of P.L.2003, c.13 (C.39:2A-36) or any law to the contrary, pursuant to P.L.2006, c.39 (C.39:3-8.3 et seq.), receipts that are derived from the surcharge on luxury and fuel-inefficient vehicles shall be deposited in the General Fund as State revenue.

Notwithstanding the provisions of section 105 of P.L.2003, c.13 (C.39:2A-36) or any law to the contrary, an amount not to exceed \$10,000,000 from receipts derived from the increase in motor vehicle fees imposed in 2009 shall be deposited in the General Fund as State revenue.

The amount appropriated to the New Jersey Motor Vehicle Commission is based on proportional revenue collections for that fiscal year pursuant to the statutes listed in subsection a. of section 105 of P.L.2003, c.13 (C.39:2A-36). Of that amount, \$2,500,000 is appropriated for transfer to the Inter-Departmental property rental and household and security accounts, \$5,150,000 is appropriated for transfer to the Department of Transportation for the maintenance and operations program, \$4,800,000 is appropriated for transfer to the Division of Revenue within the Department of the Treasury, \$612,000 is appropriated for transfer to the Division of State Police, and \$800,000 is appropriated for transfer to the Bureau of Forestry within the Department of Environmental Protection for its Forest Fire Fighting Program. In addition, the New Jersey Motor Vehicle Commission shall pay the non-State hourly rate charged by the Office of Administrative Law for hearing services, or an amount no less than \$500,000, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of section 105 of P.L.2003, c.13 (C.39:2A-36) or any law to the contrary, \$31,388,000 is appropriated from the revenues appropriated to the New Jersey Motor Vehicle Commission for deposit in the General Fund to reflect continuing savings initiatives, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of section 105 of P.L.2003, c.13 (C.39:2A-36) or any law to the contrary, \$10,940,000 is appropriated from the revenues appropriated to the New Jersey Motor Vehicle Commission for transfer to the Inter-Departmental property rentals account to reflect savings from implementation of management and procurement efficiencies, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of section 105 of P.L.2003, c.13 (C.39:2A-36) or any law to the contrary, \$30,000,000 is appropriated from the revenues appropriated to the New Jersey Motor Vehicle Commission for deposit in the General Fund as State revenue, subject to the approval of the Director of the Division of Budget and Accounting.

60 Transportation Programs
61 State and Local Highway Facilities
DIRECT STATE SERVICES

06-6100 Maintenance and Operations	\$37,649,000
08-6120 Physical Plant and Support Services.....	<u>5,866,000</u>
Total Direct State Services Appropriation, State and Local	
Highway Facilities	<u>\$43,515,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$22,095,000)
Materials and Supplies.....	(12,235,000)
Services Other Than Personal	(1,891,000)
Maintenance and Other Fixed Charges	(7,294,000)

The unexpended balances at the end of the preceding fiscal year in the accounts hereinabove are appropriated for Maintenance and Operations, subject to the approval of the Director of the Division of Budget and Accounting.

In addition to the amount hereinabove appropriated for Maintenance and Operations, such additional sums as may be required are appropriated for winter operations, including snow removal costs, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, of the amounts hereinabove appropriated for the Department of Transportation from the General Fund, \$12,500,000 thereof shall be paid from funds received from the various transportation-oriented authorities pursuant to contracts between the authorities and the State as are determined to be eligible for such funding pursuant to such contracts, as shall be determined by the Director of the Division of Budget and Accounting.

Receipts in excess of the amount anticipated from the Logo Sign Program fees and the Tourist Oriented Directional Signs Program fees are appropriated for the purpose of administering the programs, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts in excess of the amount anticipated derived from highway application and permit fees pursuant to subsection (h) of section 5 of P.L.1966, c.301 (C.27:1A-5) are appropriated for the purpose of administering the Access Permit Review program, subject to the approval of the Director of the Division of Budget and Accounting.

Of the amount hereinabove appropriated for Maintenance and Operations, \$9,000,000 for winter operations, including snow removal costs, is appropriated from the receipts of the New Tire Surcharge pursuant to P.L.2004, c.46 (C.54:32F-1 et seq.).

In addition to the amount hereinabove appropriated for Maintenance and Operations, there is appropriated \$5,150,000 from the New Jersey Motor Vehicle Commission for Maintenance and Fixed Charges, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of section 12 of P.L.1962, c.73 (C.12:7-34.47), of the amount hereinabove appropriated for Maintenance and Operations, \$2,200,000 is payable from the revenue derived from the fee increase pursuant to the amendatory

provisions of section 12 of P.L.2002, c.34 (C.12:7-34.47) deposited into the "Maritime Industry Fund."

Revenue received from fees or other payments made for the placement of sponsorship acknowledgment and advertising on signs, equipment, materials, and vehicles used for a safety service patrol or emergency service patrol program pursuant to section 5 of P.L.1966, c.301 (C.27:1A-5), are appropriated to the Department of Transportation for transportation purposes, including contract incentives for heavy duty towing contracts that support the clearance of traffic incidents. Use of the funds is subject to any federal requirements. The unexpended balance at the end of the preceding fiscal year is appropriated for the same purpose.

CAPITAL CONSTRUCTION

60-6200 Trust Fund Authority - Revenues and other funds
 available for new projects \$1,094,536,000
 Total Capital Construction Appropriation, State and
 Local Highway Facilities \$1,094,536,000

Capital Projects:

60 Transportation Trust Fund - Subaccount
 for Debt Service for Prior Bonds (\$1,016,836,000)
 60 Transportation Trust Fund - Subaccount
 for Debt Service for Transportation Program
 Bonds (77,700,000)

The amount hereinabove appropriated for the Transportation Trust Fund Subaccount for Debt Service for Prior Bonds and for the Transportation Trust Fund Subaccount for Debt Service for Transportation Program Bonds shall be provided from revenues received from (i) motor fuel taxes, which are hereby appropriated for such purposes pursuant to Article VIII, Section II, paragraph 4 of the State Constitution; (ii) \$228,000,000 from the petroleum products gross receipts tax, which is hereby appropriated for such purposes pursuant to Article VIII, Section II, paragraph 4 of the State Constitution; and (iii) \$314,536,000 from the sales and use tax which is hereby appropriated for such purposes pursuant to Article VIII, Section II, paragraph 4 of the State Constitution.

In addition, the amount hereinabove appropriated for the Transportation Trust Fund Subaccount for Debt Service for Prior Bonds may also be provided from (i) \$12,000,000 of funds received from the various transportation-oriented authorities pursuant to contracts between such transportation-oriented authorities and the State; and (ii) such additional sums pursuant to P.L.1984, c.73 (C.27:1B-1 et al.) as may be necessary and are hereby appropriated to satisfy all fiscal year 2013 debt service, bond reserve requirements, and other fiscal obligations of the New Jersey Transportation Trust Fund Authority relating to the Prior Bonds.

Notwithstanding anything to the contrary contained in any other laws or regulations, in the event that some of the amounts hereinabove appropriated are not required to pay amounts due under the State contract between the State Treasurer and the New Jersey Transportation Trust Fund Authority for the Prior Bonds as the result of the re-

ceipt of federal subsidies for debt service on the Prior Bonds, or other obligations issued by the New Jersey Transportation Trust Fund Authority in connection with the Prior Bonds the amount hereinabove appropriated from the sales and use tax revenues in clause (iii) of the first paragraph above shall be reduced by such corresponding amount.

Notwithstanding anything to the contrary contained in any other laws or regulations, in the event that some of the amounts hereinabove appropriated are not required to pay amounts due under the State contract between the State Treasurer and the Transportation Trust Fund Authority for the Prior Bonds or the State contract between the State Treasurer and the New Jersey Transportation Trust Fund Authority for the Transportation Program Bonds as the result of refundings, restructurings, lowered interest rates or any other action which reduces the amounts required to make the payments under such State contracts, the amount hereinabove appropriated from the sales and use tax revenues in clause (iii) of the first paragraph above for the Transportation Program Bonds or the Prior Bonds shall be reduced by such corresponding amounts.

Notwithstanding the provisions of any law or regulation to the contrary, from amounts hereinabove appropriated the Department of Transportation may expend necessary sums for improvements to streets and roads providing access to State facilities within the capital city without local participation.

Receipts representing the State share from the rental or lease of property, and the unexpended balances at the end of the preceding fiscal year of such receipts are appropriated for maintenance or improvement of transportation property, equipment, and facilities.

Notwithstanding any other provision of law or regulation to the contrary, the Department of Transportation may transfer Transportation Trust Fund monies to contracted federal projects until such time as federal funds become available for those projects, subject to the approval of the Director of the Division of Budget and Accounting and the Legislative Budget and Finance Officer. Subject to the receipt of federal funds, the Transportation Trust Fund may be reimbursed for all the monies that were transferred to advance federally funded projects.

Notwithstanding the provisions of any other law or regulation to the contrary, the amounts hereinabove appropriated to the Department of Transportation (DOT) for its capital projects from the revenues and other funds of the New Jersey Transportation Trust Fund Authority are hereby subject to the following condition: if the Department of Environmental Protection (DEP) determines that the issuance of any permit to the DOT regarding any capital project is conditioned upon the providing of new or enhanced public access with respect to coastal zone management (public access project), the DOT may fund the cost of such public access project from the monies hereinabove appropriated. In the alternative, if the DEP and DOT determine that it is in the best interest of the public access project for it to be undertaken by the DEP or another governmental entity, the DOT may provide funding for such public access project from the monies hereinabove appropriated to the DEP or such other governmental entity pursuant to an agreement between DOT and the DEP or other governmental entity, as applicable.

Notwithstanding the provisions of P.L.1984, c.73 (C.27:1B-1 et al.), there is appropriated the sum of \$657,500,000 from the revenues and other funds of the New Jersey Transportation Trust Fund Authority for capital purposes as follows:

<u>Description</u>	<u>County</u>	<u>Amount</u>
Acquisition of Right of Way	Various	(\$500,000)
Airport Improvement Program	Various	(5,000,000)
Asbestos Surveys and Abatements	Various	(500,000)
Barneгат Bay Watershed Storm Water Basin Study	Ocean, Monmouth	(500,000)
Betterments, Bridge Preservation	Various	(22,000,000)
Betterments, Dams	Various	(350,000)
Betterments, Roadway Preservation	Various	(10,195,000)
Betterments, Safety	Various	(7,000,000)
Bicycle & Pedestrian Facilities/ Accommodations	Various	(1,000,000)
Bridge Painting Program	Various	(9,955,000)
Bridge, Emergency Repair	Various	(30,000,000)
Capital Contract Payment Audits	Various	(1,500,000)
Congestion Relief, Intelligent Transportation System Improvements (Smart Move Program)	Various	(2,000,000)
Congestion Relief, Operational Improvements (Fast Move Program)	Various	(4,000,000)
Construction Inspection	Various	(7,600,000)
Construction Program IT System (TRNS.PORT)	Various	(500,000)
Culvert Inspection Program, Locally-owned Structures	Various	(4,500,000)
Culvert Inspection Program, State-owned Structures	Various	(800,000)
Culvert Replacement Program	Various	(2,000,000)
Design, Emerging Projects	Various	(5,000,000)
Design, Geotechnical Engineering Tasks	Various	(500,000)
Drainage Rehabilitation and Maintenance, State	Various	(9,554,000)
Duck Island Landfill, Site Remediation	Mercer	(100,000)
Electrical Facilities	Various	(5,446,000)
Electrical Load Center Replacement, Statewide	Various	(2,000,000)
Environmental Investigations	Various	(2,000,000)
Environmental Project Support	Various	(300,000)
Equipment (Vehicles, Construction, Safety)	Various	(10,000,000)
Freight Program	Various	(10,000,000)

Intelligent Transportation Systems	Various	(500,000)
Interstate Service Facilities	Various	(100,000)
Legal Costs for Right of Way Condemnation	Various	(1,600,000)
Local Aid Grant Management System	Various	(100,000)
Local Aid, Infrastructure Fund	Various	(7,500,000)
Local Bridges, Future Needs	Various	(25,000,000)
Local County Aid, DVRPC	Various	(15,464,000)
Local County Aid, NJTPA	Various	(53,762,000)
Local County Aid, SJTPO	Various	(9,523,000)
Local Municipal Aid, DVRPC	Various	(13,705,000)
Local Municipal Aid, NJTPA	Various	(53,847,000)
Local Municipal Aid, SJTPO	Various	(6,199,000)
Local Municipal Aid, Urban Aid	Various	(5,000,000)
Maintenance & Fleet Management System	Various	(1,000,000)
Maritime Transportation System	Various	(1,000,000)
Minority and Women Workforce Training Set Aside	Various	(1,000,000)
North Avenue Corridor Improvement Project (NACI)	Union	(4,440,000)
Orphan Bridge Reconstruction	Various	(1,000,000)
Park and Ride/Transportation Demand Management Program	Various	(1,000,000)
Pedestrian Safety Improvement Design and Construction	Various	(4,000,000)
Physical Plant	Various	(6,500,000)
Planning and Research, State	Various	(1,000,000)
Program Implementation Costs, NJDOT	Various	(97,000,000)
Project Development: Concept Development and Preliminary Engineering	Various	(5,000,000)
Project Enhancements	Various	(100,000)
Rail-Highway Grade Crossing Program, State	Various	(4,200,000)
Regional Action Program	Various	(500,000)
Restriping Program & Line Reflectivity Management System	Various	(15,000,000)
Resurfacing Program	Various	(70,000,000)
Right of Way Database/Document Management System	Various	(100,000)
Right of Way Full-Service Consultant Term Agreements	Various	(50,000)
Safe Streets to Transit Program	Various	(1,000,000)
Sign Structure Inspection Program	Various	(1,600,000)
Sign Structure Rehabilitation Program	Various	(2,000,000)
Signs Program, Statewide	Various	(2,000,000)
South Inlet Transportation Improvement Project	Atlantic	(1,504,000)

State Police Enforcement and Safety Services	Various	(5,000,000)
Statewide Traffic Management/Information Program	Various	(200,000)
Traffic Monitoring Systems	Various	(1,000,000)
Traffic Signal Replacement	Various	(9,111,000)
Transit Village Program	Various	(1,000,000)
Unanticipated Design, Right of Way and Construction Expenses, State	Various	(19,455,000)
Underground Exploration for Utility Facilities	Various	(200,000)
University Transportation Research Technology	Various	(500,000)
Utility Reconnaissance and Relocation	Various	(2,000,000)
Route 10, WB, Jefferson Road to West Northfield Avenue, Pavement	Essex, Morris	(2,953,000)
Route 17, SB, Cameron Road to Airmount Ave (CR 83), Pavement	Bergen	(2,872,000)
Route 22, WB, I-78 to Oldwick Road (CR 523), Pavement	Hunterdon	(3,172,000)
Route 27, Parillo Drive to Sandford Street, Pavement	Somerset, Middlesex	(2,680,000)
Route 29, Bank Stabilization, Ewing and Delaware Twps.	Mercer, Hunterdon	(1,620,000)
Route 36, South of Miller Avenue to North of Union Avenue (CR 39), Resurfacing	Monmouth	(6,820,000)
Route 46 EB, Lower Notch Road to Rock Hill Road, Pavement	Passaic	(1,148,000)
Route 202, Headquarters Road to Old York Road, Pavement	Hunterdon	(3,500,000)
Route 206 Bypass, Mountain View Road to Old Somerville Road (Sections 14A & 15A)	Somerset	(10,000,000)
Route 284, Route 23 to the New York State Line, Pavement	Sussex	(3,829,000)
Route 295, Paulsboro Brownfields Access	Gloucester	(1,000,000)
Route 322, Corridor Congestion Relief Project	Gloucester	(1,500,000)
Route 322, Eighth Street to Watering Race Brook, Pavement	Atlantic	(9,846,000)
Notwithstanding the provisions of P.L.1984, c.73 (C.27:1B-1 et al.), there is appropriated the sum of \$589,500,000 from the revenues and other funds of the New Jersey Transportation Trust Fund Authority for the specific projects identified as follows:		

New Jersey Transit Corporation

<u>Description</u>	<u>County</u>	<u>Amount</u>
ADA-Platforms/Stations	Various	(\$910,000)
Bridge and Tunnel Rehabilitation	Various	(31,100,000)

Building Capital Leases	Various	(5,700,000)
Bus Acquisition Program	Various	(153,119,000)
Bus Passenger Facilities/Park and Ride	Various	(800,000)
Bus Support Facilities and Equipment	Various	(4,430,000)
Bus Vehicle and Facility Maintenance/ Capital Maintenance	Various	(34,900,000)
Capital Program Implementation	Various	(21,470,000)
Claims Support	Various	(2,000,000)
Environmental Compliance	Various	(3,000,000)
Hudson-Bergen LRT System	Hudson	(7,025,000)
Immediate Action Program	Various	(11,204,000)
Light Rail Infrastructure Improvements	Various	(6,827,000)
Light Rail Vehicle Rolling Stock	Various	(15,422,000)
Locomotive Overhaul	Various	(22,360,000)
Miscellaneous	Various	(500,000)
NEC Improvements	Various	(35,680,000)
Other Rail Station/Terminal Improvements	Various	(12,010,000)
Physical Plant	Various	(1,670,000)
Private Carrier Equipment Program	Various	(3,000,000)
Rail Capital Maintenance	Various	(63,900,000)
Rail Fleet Overhaul	Various	(13,237,000)
Rail Rolling Stock Procurement	Various	(13,264,000)
Rail Support Facilities and Equipment	Various	(13,313,000)
River LINE LRT	Camden, Burlington, Mercer	(52,907,000)
Security Improvements	Various	(2,610,000)
Signals and Communications/Electric Traction Systems	Various	(12,960,000)
Small/Special Services Program	Various	(2,072,000)
Study and Development	Various	(4,810,000)
Technology Improvements	Various	(16,850,000)
Track Program	Various	(20,200,000)
Transit Rail Initiatives	Various	(250,000)

Notwithstanding the provisions of any law or regulation to the contrary, the amounts hereinabove appropriated from the revenues and other monies of the New Jersey Transportation Trust Fund Authority for the Department of Transportation and the New Jersey Transit Corporation, respectively, for salary and overhead costs of employees of the Department of Transportation and the New Jersey Transit Corporation, respectively, associated with the construction of capital projects by the Department of Transportation and the New Jersey Transit Corporation, respectively, shall not be subject to any percentage limitation.

The unexpended balances at the end of the preceding fiscal year of appropriations from the New Jersey Transportation Trust Fund Authority are appropriated.

Notwithstanding the provisions of subsection d. of section 21 of P.L.1984, c.73 (C.27:1B-21), approval by the Joint Budget Oversight Committee of transfers among appro-

priations by project shall not be required. Notice of a transfer approved by the Director of the Division of Budget and Accounting pursuant to that section shall be provided to the Legislative Budget and Finance Officer on the effective date of the approved transfer.

Federal funds received in conjunction with the Route 52 Causeway Replacement Contract A Construction Fund are hereby appropriated to the Transportation Trust Fund Authority to pay debt service and other costs related to the Grant Anticipation Revenue Vehicles (GARVEE).

Notwithstanding the provisions of any law or regulation to the contrary, there is appropriated to the Department of Transportation, such sums as shall be approved by the Director of the Division of Budget and Accounting, from the revenues and other funds of the New Jersey Transportation Trust Fund Authority received in connection with the issuance of the Authority's Grant Anticipation Revenue Vehicles (GARVEE) Bonds for the capital projects listed above. Federal funds received in conjunction with the capital projects funded through the issuance of these GARVEE Bonds are appropriated to the Authority to pay debt service and other costs related to the GARVEE Bonds.

Notwithstanding the provisions of any law or regulation to the contrary, funds derived from the sale or conveyance of any lands held by the Department of Transportation are appropriated for the acquisition of land for highway projects or to refund the Federal Highway Administration (FHWA) where required by federal law. Funds derived from the sale of all fill material held by the Department of Transportation are appropriated for demolition, acquisition of land, rehabilitation or improvement of existing facilities and construction of new facilities, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, funds received from the Port Authority of New York and New Jersey pursuant to a contract with the State for transportation system improvements are appropriated to the Department of Transportation for such improvements.

Notwithstanding the provisions of any law or regulation to the contrary, the Commissioner of Transportation, upon approval of the Director of the Division of Budget and Accounting, may transfer Transportation Trust Fund Authority monies to the Pulaski Skyway, Route 7/Wittpenn Bridge, and New Road projects which are to be funded by the Port Authority of New York and New Jersey pursuant to an agreement between the Port Authority of New York and New Jersey and the Commissioner of Transportation dated July 29, 2011, until such time as funding from the Port Authority of New York and New Jersey is paid to the State pursuant to such agreement. Subject to the receipt of those funds, the Transportation Trust Fund Authority shall be reimbursed for all monies transferred to advance these projects. In the event that all of such transfers are not reimbursed by the Port Authority of New York and New Jersey pursuant to the agreement, an amount equivalent to such unreimbursed monies are hereby appropriated from the Transportation Trust Fund Authority to such projects and such amounts shall constitute line item appropriations approved by the Legislature.

60 Transportation Programs**62 Public Transportation****GRANTS-IN-AID**04-6050 Railroad and Bus Operations \$1,903,873,000Subtotal Grants-In-Aid Appropriation, Public Transportation \$1,903,873,000**Less:****Farebox Revenue** \$894,200,000**Other Commercial Revenue** 109,800,000**Other Reimbursements** 826,700,000**Total Income Deductions** \$1,830,700,000Total Grants-In-Aid Appropriation, Public Transportation \$73,173,000**Grants-In-Aid:**

Personal Services:

Salaries and Wages (\$1,094,000,000)

Materials and Supplies (360,100,000)

Services Other Than Personal (119,300,000)

Special Purpose:

04 Purchased Transportation (208,373,000)

04 Insurance and Claims (31,200,000)

04 Tolls, Taxes, and Other Operating Expenses (90,900,000)

Less:**Income Deductions** 1,830,700,000

Notwithstanding the provision of any law or regulation to the contrary, in addition to the amount hereinabove appropriated for New Jersey Transit Corporation, there are appropriated such sums as are received from the New Jersey Turnpike Authority, pursuant to a contract between the Authority and the State for such transportation purposes.

Notwithstanding the provisions of any law or regulation to the contrary, of the amounts hereinabove appropriated for New Jersey Transit Corporation from the General Fund, an amount not to exceed \$29,000,000 thereof shall be paid from funds received or receivable from the various transportation-oriented authorities pursuant to contracts between the authorities and the State for transportation purposes.

STATE AID04-6050 Railroad and Bus Operations \$24,632,000**(From Casino Revenue Fund** \$24,632,000)Total State Aid Appropriation, Public Transportation \$24,632,000**(From Casino Revenue Fund** \$24,632,000)**State Aid:**04 Transportation Assistance for Senior Citizens
and Disabled Resident (CRF) (\$24,632,000)

Counties which provide para-transit services for sheltered workshop clients may seek reimbursement for such services pursuant to P.L.1987, c.455 (C.34:16-51 et seq.).

CAPITAL CONSTRUCTION

Notwithstanding the provisions of any law or regulation to the contrary, the Commissioner of Transportation, upon approval of the Director of the Division of Budget and Accounting, may transfer funds made available from the New Jersey Transportation Trust Fund Authority for public transportation projects under the program headings "New Jersey Transit Corporation" to the line-item under that same program heading entitled "Federal Transit Administration Projects" for any federally funded public transportation project shown in this act or any previous appropriation acts until such time as federal funds become available for the projects. Subject to the receipt of federal funds, the Transportation Trust Fund Account shall be reimbursed for all the monies that were transferred to advance Federal Transit Administration projects. Any transfer of funds which returns funds from the line-item "Federal Transit Administration Projects" to the account of origin shall be deemed approved.

From the amounts appropriated from the revenues and other funds of the New Jersey Transportation Trust Fund Authority for the current fiscal year transportation capital program, the Commissioner of Transportation may allocate \$4,000,000 of the amount listed for the Private Carrier Equipment Program to New Jersey Transit Corporation's Private Carrier Capital Improvement Program (PCCIP). The amount provided herein shall be allocated to the private motorbus carriers consistent with the formula used to administer the PCCIP and shall be restricted to those carriers that currently qualify for participation in the PCCIP. These funds may be used for the procurement of any goods or services currently approved under New Jersey Transit Corporation's PCCIP, as well as: facility improvements, vehicle procurement, and capital maintenance that comports with subsection r. of section 3 of P.L.1984, c.73 (C.27:1B-3). Such maintenance and equipment procurements shall apply to vehicles owned by the private motorbus carriers and used in public transportation service, as well as to New Jersey Transit Corporation owned vehicles. Private motorbus carriers receiving an allocation of such funds shall be required to submit to the New Jersey Transit Corporation a full accounting for all expenditures, demonstrating that the funds were used to increase or maintain the current level of public transportation service provided by the carrier or to improve revenue vehicle maintenance. Under no circumstances shall these funds be used to provide compensation of any officer or owner of a private motorbus carrier.

60 Transportation Programs**64 Regulation and General Management****DIRECT STATE SERVICES**

05-6070 Multimodal Services.....	\$902,000
99-6000 Administration and Support Services	<u>744,000</u>
Total Direct State Services Appropriation, Regulation and General Management	<u>\$1,646,000</u>

Direct State Services:

Materials and Supplies.....	(\$147,000)
Services Other Than Personal.....	(616,000)

Maintenance and Fixed Charges (70,000)

Special Purpose:

05 Office of Maritime Resources (248,000)

05 Airport Safety Fund Administration..... (565,000)

Receipts in excess of the amount anticipated derived from outdoor advertising application and permit fees are appropriated for the purpose of administering the Outdoor Advertising Permit and Regulation Program, subject to the approval of the Director of the Division of Budget and Accounting.

The unexpended balance at the end of the preceding fiscal year in the Airport Safety Fund account together with any receipts in excess of the amount anticipated are appropriated for the same purpose.

Notwithstanding the provisions of any law or regulation to the contrary, the amount hereinabove appropriated for the Airport Safety Fund is payable out of the "Airport Safety Fund" established pursuant to section 4 of P.L.1983, c.264 (C.6:1-92). If receipts to that fund are less than anticipated, the appropriation shall be reduced proportionately.

Receipts derived from fees on placarded rail freight cars transporting hazardous materials in this State are appropriated to defray the expenses of the Placarded Rail Freight Car Transporting Hazardous Materials Program, subject to the approval of the Director of the Division of Budget and Accounting.

GRANTS-IN-AID

The unexpended balance at the end of the preceding fiscal year in the Airport Safety Fund account together with any receipts in excess of the amount anticipated are appropriated for the same purpose.

Department of Transportation, Total State Appropriation \$1,237,502,000

Summary of Department of Transportation Appropriations

(For Display Purposes Only)

Appropriations by Category:

Direct State Services.....\$45,161,000

Grants-in-Aid.....73,173,000

State Aid.....24,632,000

Capital Construction 1,094,536,000

Appropriations by Fund:

General Fund\$1,212,870,000

Casino Revenue Fund.....24,632,000

82 DEPARTMENT OF THE TREASURY
30 Educational, Cultural, and Intellectual Development
36 Higher Educational Services
GRANTS-IN-AID

47-2155 Support to Independent Institutions.....	\$1,237,000
49-2155 Miscellaneous Higher Education Programs.....	<u>50,621,000</u>
Total Grants-In-Aid Appropriation, Higher Educational Services.....	<u>\$51,858,000</u>

Grants-In-Aid:

47 Research Under Contract with the Institute of Medical Research, Camden	(\$1,037,000)
47 Clinical Legal Programs for the Poor - Seton Hall University.....	(200,000)
49 Higher Education Capital Improvement Program - Debt Service.....	(43,879,000)
49 Dormitory Safety Trust Fund - Debt Service	(6,742,000)
The sums hereinabove appropriated for Research Under Contract with the Institute of Medical Research, Camden (Coriell Institute) shall be expended on support for re- search activities, and the Institute shall submit an annual audited financial statement to the Department of the Treasury which shall include a schedule showing the use of these funds.	

STATE AID

48-2155 Aid to County Colleges	<u>\$214,163,000</u>
(From General Fund	<u>\$176,804,000</u>)
(From Property Tax Relief Fund	<u>37,359,000</u>)
Total State Aid Appropriation, Higher Educational Services	<u>\$214,163,000</u>
(From General Fund	<u>\$176,804,000</u>)
(From Property Tax Relief Fund	<u>37,359,000</u>)

Less:

Supplemental Workforce Fund - Basic Skills	\$21,300,000
Total Income Deductions	<u>\$21,300,000</u>
Total State Appropriation, Higher Educational Services	<u>\$192,863,000</u>
(From General Fund	<u>\$155,504,000</u>)
(From Property Tax Relief Fund	<u>37,359,000</u>)

State Aid:

48 Operational Costs	(\$134,786,000)
48 Debt Service for Chapter 12, P.L.1971, c.12 (N.J.S.18A:64A-22.1) (PTRF)	(37,359,000)
48 Alternate Benefit Program - Employer Contributions	(19,992,000)
48 Alternate Benefit Program - Non-contributory Insurance	(2,456,000)

48 Teachers' Pension and Annuity Fund	
- Non-contributory Insurance	(8,000)
48 Employer Contributions – Teacher's	
Pension and Annuity Fund	(141,000)
48 Teachers' Pension and Annuity Fund -	
Post Retirement Medical	(1,144,000)
48 Post Retirement Medical Other Than TPAF	(17,910,000)
48 Employer Contributions - FICA for County College	
Members of TPAF	(215,000)
48 Debt Service on Pension Obligation Bonds	(152,000)

Less:

Income Deductions.....21,300,000

In addition to the amount hereinabove appropriated for Operational Costs, there is appropriated \$21,300,000 from the Supplemental Workforce Fund for Basic Skills for remedial courses provided at county colleges and all other monies in the Supplemental Workforce Fund for Basic Skills are appropriated in the proportions set forth in section 1 of P.L.2001, c.152 (C.34:15D-21).

Notwithstanding the provisions of any law or regulation to the contrary, from the sums hereinabove appropriated for county college Operational Costs, there are allocated such sums as are required to provide the reimbursement to cover tuition costs of the National Guard members pursuant to subsection b. of section 21 of P.L.1999, c.46 (C.18A:62-24).

Such additional sums as may be required for Alternate Benefit Program - Employer Contributions, Alternate Benefit Program - Non-contributory Insurance, Teachers' Pension and Annuity Fund – Non-contributory Insurance, Teachers' Pension and Annuity Fund - Post Retirement Medical, Post Retirement Medical Other Than TPAF, and Employer Contributions - FICA for County College Members of TPAF are appropriated, as the Director of the Division of Budget and Accounting shall determine.

In addition to the sum hereinabove appropriated for Debt Service on Pension Obligation Bonds to make payments under the State Treasurer's contracts authorized pursuant to section 6 of P.L.1997, c.114 (C.34:1B-7.50), there are appropriated such other sums as the Director of the Division of Budget and Accounting shall determine are required to pay all amounts due from the State pursuant to such contracts.

Such sums as may be necessary for the payment of interest or principal or both, due from the issuance of any bonds authorized under the provisions of section 1 of P.L.1971, c.12 (C.18A:64A-22.1) are appropriated.

Higher Educational Services

Of the amount hereinabove appropriated for Higher Educational Services, such sums as the Director of the Division of Budget and Accounting shall determine from the schedule included in the Governor's Budget Message and Recommendations first shall be charged to the State Lottery Fund.

50 Economic Planning, Development, and Security**51 Economic Planning and Development****GRANTS-IN-AID**

38-2043 Economic Development	<u>\$200,313,000</u>
Total Grants-in-Aid Appropriation, Economic Planning and Development.....	<u>\$200,313,000</u>

Grants-in-Aid:

- 38 Fort Monmouth Economic Revitalization Authority ..(\$263,000)
- 38 Economic Redevelopment and Growth Grants, EDA (3,600,000)
- 38 Brownfield Site Reimbursement Fund(21,450,000)
- 38 Business Employment Incentive Program, EDA ...(175,000,000)

Funds made available for the remediation of the discharges of hazardous substances pursuant to the amendments effective December 4, 2003, to Article VIII, Section II, paragraph 6 of the State Constitution, shall be appropriated to the Brownfield Site Reimbursement Fund, established pursuant to section 38 of P.L.1997, c.278 (C.58:10B-30), in an amount to be determined by the Director of the Division of Taxation, and subject to the approval of the Director of the Division of Budget and Accounting. If such sums for the remediation of discharges of hazardous substances are insufficient, there are appropriated such sums as necessary to the Brownfield Site Reimbursement Fund, subject to the approval of the Director of the Division of Budget and Accounting. The unexpended balance at the end of the preceding fiscal year in the Brownfield Site Reimbursement Fund account is appropriated for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.

In addition to the amount hereinabove appropriated for the Business Employment Incentive Program, EDA, there is appropriated from the General Fund to the Department of the Treasury for transfer to the New Jersey Economic Development Authority such sums as may be necessary to fund the Business Employment Incentive Program, the amount of which, when combined with the amount hereinabove appropriated and with prior year disbursements, shall not exceed the total amount of revenues received as withholdings, as defined in section 2 of P.L.1996, c.26 (C.34:1B-125), during the prior calendar years from all businesses receiving grants pursuant to the "Business Employment Incentive Program Act," P.L.1996, c.26 (C.34:1B-124 et seq.), as certified by the Director of the Division of Taxation, subject to the approval of the Director of the Division of Budget and Accounting.

In addition to the amount hereinabove appropriated for the Fort Monmouth Economic Revitalization Authority, there is appropriated such additional sums as are necessary to secure federal matching funds for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.

In addition to the amount hereinabove appropriated for the Economic Redevelopment and Growth Grants, EDA, there are appropriated such sums as may be necessary to fund the Economic Redevelopment and Growth Grant program, pursuant to the "New Jersey Economic Stimulus Act of 2009," P.L.2009, c.90 (C.52:27D-489a et

seq.), subject to the approval of the Director of the Division of Budget and Accounting.

52 Economic Regulation

DIRECT STATE SERVICES

54-2008 Utility Regulation	\$8,259,000
55-2004 Regulation of Cable Television	2,253,000
88-2058 Energy Assistance Programs	1,865,000
97-2016 Regulatory Support Services	4,513,000
99-2003 Administration and Support Services	<u>9,935,000</u>
Total Direct State Services Appropriation, Economic Regulation	<u>\$26,825,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$24,981,000)
Materials and Supplies	(329,000)
Services Other Than Personal	(984,000)
Maintenance and Fixed Charges	(398,000)
Additions, Improvements and Equipment	(133,000)

Receipts derived from fees are appropriated for the administrative costs of the Board of Public Utilities.

The unexpended balances at the end of the preceding fiscal year in the programs administered by the Board of Public Utilities are appropriated for use by those respective programs, subject to the approval of the Director of the Division of Budget and Accounting.

There are appropriated from interest earned by the Petroleum Overcharge Reimbursement Fund such sums as may be required for costs attributable to the administration of the fund, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, the balances from the Petroleum Overcharge Reimbursement Fund and the Secondary Stage Refunds and the monies required to be deposited in that fund from projects which have been completed or are no longer viable are reappropriated for new projects consistent with the court rulings which served as the basis for the original awards, subject to the approval of the Director of the Division of Budget and Accounting and the Director of the Office of Energy Savings.

The amounts hereinabove appropriated, not to exceed \$1,865,000, for the Energy Assistance Programs account may be transferred to the Department of Human Services, Lifeline account to fund the costs associated with administering the Lifeline Credits Program and Tenants' Assistance Rebate Program and shall be applied in accordance with a Memorandum of Understanding between the President of the Board of Public Utilities and the Commissioner of Human Services, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, the investment earnings derived from the funds deposited in the Clean Energy Fund and Universal

Service Fund shall accrue to the funds and are available to pay the costs of the various programs of the Board of Public Utilities Clean Energy Program and Universal Service Fund.

Notwithstanding the provisions of paragraph (3) of subsection a. of section 12 of the "Electric Discount and Energy Competition Act," P.L.1999, c.23 (C.48:3-60) and any other laws to the contrary, receipts from the Clean Energy Fund are appropriated for the actual administrative salary and operating costs for the Office of Clean Energy as requested by the President of the Board of Public Utilities and approved by the Director of the Division of Budget and Accounting.

All revenue received in the CATV Universal Access Fund is appropriated for transfer to the General Fund as State revenue.

GRANTS-IN-AID

88-2058 Energy Assistance Programs \$63,840,000
Total Grants-In-Aid Appropriation, Economic Regulation..... \$63,840,000

Grants-In-Aid:

88 Payments for Lifeline Credits(\$29,199,000)

88 Tenants' Assistance Rebate Program.....(34,641,000)

Notwithstanding the provisions of P.L.1979, c.197 (C.48:2-29.15 et seq.), P.L.1981, c.210 (C.48:2-29.30 et seq.), or any law or regulation to the contrary, the benefits of the Lifeline Credits Program and the Tenants' Assistance Rebate Program may be distributed throughout the entire year from July through June, and are not limited to an October to March heating season; therefore, applications for Lifeline benefits and benefits from the Pharmaceutical Assistance to the Aged and Disabled program may be combined.

Notwithstanding the provisions of any law or regulation to the contrary, the amounts hereinabove appropriated for Payments for Lifeline Credits and Tenants' Assistance Rebate Program are available for the payment of obligations applicable to prior fiscal years.

In order to permit flexibility in the handling of appropriations and ensure the timely payment of Lifeline claims, amounts may be transferred from the various items of appropriation within the Energy Assistance Programs classification, subject to the approval of the Director of the Division of Budget and Accounting.

In addition to the amount hereinabove appropriated, such sums as may be required for the payment of claims, credits, and rebates, are appropriated, subject to the approval of the Director of the Division of Budget and Accounting.

Any supplemental appropriation for the Payments for Lifeline Credits and the Tenants' Assistance Rebate Program may be recovered from the Universal Service Fund through transfer to the General Fund as State revenue, subject to the approval of the Director of the Division of Budget and Accounting.

The amounts hereinabove appropriated, not to exceed \$63,840,000, for Payments for Lifeline Credits and the Tenants' Assistance Rebate Program are available to the Department of Human Services to fund the payments associated with the Lifeline Credits and Tenants' Assistance programs and shall be applied in accordance with a Memorandum of Understanding between the President of the Board of Public Utili-

ties and the Commissioner of Human Services, subject to the approval of the Director of the Division of Budget and Accounting.

70 Government Direction, Management, and Control

72 Governmental Review and Oversight

DIRECT STATE SERVICES

03-2015 Employee Relations and Collective Negotiations.....	\$841,000
07-2040 Office of Management and Budget.....	<u>14,991,000</u>
Total Direct State Services Appropriation, Governmental Review and Oversight.....	<u>\$15,832,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$12,780,000)
Materials and Supplies.....	(114,000)
Services Other Than Personal	(1,662,000)
Maintenance and Fixed Charges.....	(7,000)

Special Purpose:

07 Independent Audits	(1,269,000)

Such sums as may be necessary for administrative expenses incurred in processing federal benefit payments are appropriated from such sums as may be received or receivable for this purpose.

In addition to the amounts hereinabove appropriated for the Office of Management and Budget, there are appropriated such additional sums as may be necessary for an independent audit of the State's general fixed asset account group, management, performance, and operational audits, and the single audit.

There are appropriated, out of receipts derived from the investment of State funds, such sums as may be necessary for interest costs, bank service charges, custodial costs, mortgage servicing fees, and advertising bank balances under section 1 of P.L.1956, c.174 (C.52:18-16.1).

2066 Office of the State Comptroller

DIRECT STATE SERVICES

08-2066 Office of the State Comptroller	<u>\$9,851,000</u>
Total Direct State Services Appropriation, Office of the State Comptroller	<u>\$9,851,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$8,901,000)
Materials and Supplies.....	(55,000)
Services Other Than Personal	(750,000)
Maintenance and Fixed Charges.....	(45,000)
Additions, Improvements and Equipment	(100,000)

Notwithstanding the provisions of any law or regulation to the contrary, all financial recoveries obtained through the efforts of any entity authorized to undertake the prevention and detection of Medicaid fraud, waste and abuse, are appropriated to General Medical Services in the Division of Medical Assistance and Health Services in the Department of Human Services.

73 Financial Administration

DIRECT STATE SERVICES

15-2080 Taxation Services and Administration	\$106,210,000
16-2090 Administration of State Lottery	23,072,000
17-2105 Administration of State Revenues	18,802,000
19-2120 Management of State Investments	1,787,000
25-2095 Administration of Casino Gambling	8,590,000
(From Casino Control Fund\$8,590,000)	
50-2105 Business Services Bureau	<u>4,685,000</u>
Total Direct State Services Appropriation, Financial Administration	<u>\$163,146,000</u>
(From General Fund\$154,556,000)	
(From Casino Control Fund 8,590,000)	

Direct State Services:

Personal Services:

Chairman and Commissioners (CCF)	(\$391,000)
Salaries and Wages	(116,001,000)
Salaries and Wages (CCF)	(4,075,000)
Employee Benefits (CCF)	(1,636,000)
(From General Fund\$116,001,000)	
(From Casino Control Fund 6,102,000)	
Materials and Supplies	(3,066,000)
Materials and Supplies (CCF)	(102,000)
Services Other Than Personal	(32,401,000)
Services Other Than Personal (CCF)	(547,000)
Maintenance and Fixed Charges	(1,888,000)
Maintenance and Fixed Charges (CCF)	(1,683,000)
Special Purpose:	
17 Wage Reporting/Temporary Disability Insurance	(1,200,000)
25 Administration of Casino Gambling (CCF)	(45,000)
Additions, Improvements and Equipment (CCF)	(111,000)

Receipts derived from the sale of confiscated equipment, materials, and supplies under the "Cigarette Tax Act," P.L.1948, c.65 (C.54:40A-1 et seq.) are appropriated as may be necessary for confiscation, storage, disposal, and other related expenses thereof.

Upon certification of the Director of the Division of Taxation, the State Treasurer shall pay, upon warrants of the Director of the Division of Budget and Accounting, such

claims for refund as may be necessary under the provisions of Title 54 of the Revised Statutes, as amended and supplemented.

Such sums as are required for the acquisition of equipment essential to the modernization of processing tax returns, are appropriated from tax collections, subject to the approval of the Joint Budget Oversight Committee and the Director of the Division of Budget and Accounting.

The amount necessary to provide administrative costs incurred by the Division of Taxation and the Division of Revenue to meet the statutory requirements of the "New Jersey Urban Enterprise Zones Act," P.L.1983, c.303 (C.52:27H-60 et seq.) is appropriated from the Enterprise Zone Assistance Fund, subject to the approval of the Director of the Division of Budget and Accounting.

Pursuant to the provisions of section 12 of P.L.1992, c.165 (C.40:54D-12) there are appropriated such sums as may be required to compensate the Department of the Treasury for costs incurred in administering the "Tourism Improvement and Development District Act," P.L.1992, c.165 (C.40:54D-1 et seq.).

Notwithstanding the provisions of any law or regulation to the contrary, there are available out of fees derived from the cost of collection imposed pursuant to section 8 of P.L.1987, c.76 (C.54:49-12.1) such sums as may be required for compliance and enforcement activities associated with the collection process as promulgated by the Taxpayers' Bill of Rights under P.L.1992, c.175.

In addition to the amounts hereinabove appropriated for Taxation Services and Administration, such additional sums as may be necessary are appropriated to fund costs of the collecting and processing of debts, taxes, and other fees and charges owed to the State, including but not limited to the services of auditors and attorneys and enhanced compliance programs, subject to the approval of the Director of the Division of Budget and Accounting. The Director of the Division of Budget and Accounting shall provide the Joint Budget Oversight Committee with written reports on the detailed appropriation and expenditure of sums appropriated pursuant to this provision.

Notwithstanding any other provision of law to the contrary, receipts derived from agreements entered into by the Director of the Division of Taxation pursuant to P.L.1992, c.172 (C.54:49-12.2 et seq.) are appropriated as may be necessary for contingency fees stipulated in such agreements and any other related expenses thereof.

Notwithstanding the provisions of section 4 of the "Lead Hazard Control Assistance Act," P.L.2003, c.311 (C.52:27D-437.4), such sums as are necessary are appropriated from the Lead Hazard Control Assistance Fund for the Department of the Treasury's administrative costs, subject to the approval of the Director of the Division of Budget and Accounting.

There are appropriated, out of revenues derived from escheated property under the various escheat acts, such sums as may be necessary to administer such acts and such sums as may be required for refunds.

There are hereby appropriated from the Dedicated Cigarette Tax Revenue Fund established pursuant to P.L.2004, c.68 (C.34:1B-21.16 et seq.) such sums as are required under the contract between the State Treasurer and the New Jersey Eco-

conomic Development Authority entered into pursuant to section 6 of P.L.2004, c.68 (C.34:1B-21.21).

Pursuant to the provisions of section 54 of P.L.2002, c.34 (C.App.A:9-78) deposits made to the New Jersey Domestic Security Account are appropriated for transfer to the Department of Health to support medical emergency disaster preparedness for bioterrorism, to the Department of Law and Public Safety for State Police salaries related to statewide security services and counter-terrorism programs, and to the Department of Agriculture for the Agro-Terrorism program, subject to the approval of the Director of the Division of Budget and Accounting.

There are appropriated out of the State Lottery Fund such sums as may be necessary for costs required to implement the "State Lottery Law," P.L.1970, c.13 (C.5:9-1 et seq.) and for payment for commissions, prizes, and expenses of developing and implementing games pursuant to section 7 of P.L.1970, c.13 (C.5:9-7).

State Lottery Fund receipts in excess of anticipated contributions to education and State institutions, and reimbursement of administrative expenditures, are appropriated for the same purposes, subject to the approval of the Director of the Division of Budget and Accounting and the Joint Budget Oversight Committee.

Notwithstanding the provisions of any law or regulation to the contrary, there are appropriated out of receipts derived from communications fees such sums as may be necessary for telecommunications costs required in the administration of the State Lottery.

Notwithstanding the provisions of any law or regulation to the contrary, there are appropriated out of receipts derived from the sale of advertising and/or promotional products by the State Lottery, such sums as may be necessary for advertising costs required in the administration of the State Lottery pursuant to P.L.1970, c.13 (C.5:9-1 et seq.).

There are appropriated such sums as are necessary to fund the hospitals' share of monies collected pursuant to the hospital care payment act, P.L.2003, c.112 (C.17B:30-41 et seq.), subject to the approval of the Director of the Division of Budget and Accounting.

In addition to the amount hereinabove appropriated for the Division of Revenue, there is appropriated to the Division of Revenue \$4,800,000 from the New Jersey Motor Vehicle Commission for document processing charges.

The Director of the Division of Budget and Accounting is hereby authorized to transfer or credit such sums as are necessary between the Department of Labor and Workforce Development and the Department of the Treasury for the administration of revenue collection and processing functions related to Unemployment Insurance, Temporary Disability Insurance, Workers' Compensation, Special Compensation Programs, the Health Care Subsidy Fund, and the Workforce Development Partnership program.

The amount hereinabove appropriated for the Wage Reporting/Temporary Disability Insurance program is payable out of the State Disability Benefits Fund, and in addition to the amounts hereinabove, there are appropriated out of the State Disability Benefits Fund such additional sums as may be required to administer revenue

collection associated with the Temporary Disability Insurance program, subject to the approval of the Director of the Division of Budget and Accounting.

Receipts received from New Jersey Public Records Preservation fees, not to exceed \$1,300,000, are appropriated for the operations of the microfilm or other storage media unit in the Division of Revenue within the Department of the Treasury, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, no monies from the receipts deposited in the New Jersey Public Records Preservation Account in the Department of the Treasury are appropriated for grants to counties and municipalities.

The amount hereinabove appropriated for the Records Management program is payable from receipts deposited in the New Jersey Public Records Preservation Account.

Receipts in excess of those anticipated from the over-the-counter surcharges are appropriated to meet the costs of the Division of Revenue's commercial recording function, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law, regulation or Executive Order to the contrary, any receipts received from Nextel Corporation in accordance with a Plan Funding Agreement approved by Nextel and the 800 MHz Transition Administrator for costs of rebanding incurred by State agencies, and any local units of government that have entered into a Memorandum of Understanding with the Attorney General authorizing the State to receive Nextel funds on behalf of such local unit, pursuant to Federal Communications Commission-ordered reconfiguration of the 800 MHz band, are appropriated to the Department of the Treasury for costs related to that program. Such sums shall be expended or transferred to the various departments and agencies to reimburse administrative and procurement costs in accordance with the Plan Funding Agreement and in consultation with the Attorney General, subject to the approval of the Director of the Division of Budget and Accounting.

Funds necessary to defray the cost of collection to implement the provisions of P.L.1994, c.64 (C.17:29A-35 et seq.), as well as the cost of billing and collection of surcharges levied on drivers in accordance with the New Jersey Automobile Insurance Reform Act of 1982 - Merit Rating System Surcharge Program, P.L.1983, c.65 (C.17:29A-33 et seq.) as amended, are appropriated from fees in lieu of actual cost of collection receipts and from surcharges derived, subject to the approval of the Director of the Division of Budget and Accounting.

There are appropriated, out of receipts derived from service fees billed to authorities for the handling of investment transactions, such sums as may be necessary to administer the Management of State Investments program.

Notwithstanding the provisions of any law or regulation to the contrary, the expenses of administration for the various retirement systems and employee benefit programs administered by the Division of Pensions and Benefits and the Division of Investment shall be charged to the pension and health benefits funds established by law to receive employer contributions or payments or to make benefit payments under the programs, as the case may be. In addition to the amounts hereinabove, there are

appropriated such sums as may be necessary for administrative costs, which shall include bank service charges, investment services, and other such costs as are related to the management of the pension and health benefit programs, as the Director of the Division of Budget and Accounting shall determine.

74 General Government Services

DIRECT STATE SERVICES

02-2069 Garden State Preservation Trust	\$476,000
09-2050 Purchasing and Inventory Management	10,207,000
26-2067 Property Management and Construction - Property Management Services	15,234,000
37-2051 Risk Management	<u>3,552,000</u>
Total Direct State Services Appropriation, General Government Services	<u>\$29,469,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$23,315,000)
Materials and Supplies	(280,000)
Services Other Than Personal	(3,097,000)
Maintenance and Fixed Charges	(2,221,000)

Special Purpose:

02 Garden State Preservation Trust	(476,000)
Additions, Improvements and Equipment	(80,000)

In addition to the amount appropriated hereinabove to the Division of Purchase and Property, there is appropriated to the Division of Purchase and Property, an amount equal to 50% of the amount of the total rebates on procurement card purchases for costs of the Division, subject to the approval of the Director of the Division of Budget and Accounting. In addition, an amount equal to the remaining 50% of total rebates on procurement card purchases is appropriated for transfer to the various using departments and agencies for their costs, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, there are appropriated, out of the receipts derived from third party subrogation and service fees billed to authorities for the handling of insurance procurement and risk management services, such sums as may be necessary for the administrative expenses of the Risk Management program.

Fees collected pursuant to P.L.1975, c.127 (C.10:5-31 et seq.), are appropriated to the Division of Purchase and Property for program costs, subject to allotment by the Director of the Division of Budget and Accounting.

The Director of the Division of Budget and Accounting is empowered to transfer or credit to the Print Shop revolving fund any appropriation made to any department for printing costs appropriated or allocated to such departments for their share of costs to the Print Shop and the Office of Printing Control.

The Director of the Division of Budget and Accounting is empowered to transfer or credit to the Property Management and Construction program classification, from appropriations for construction and improvements an amount sufficient to pay for the cost of architectural work, superintendence and other expert services in connection with such work.

In addition to the amount hereinabove appropriated for Property Management and Construction, there are appropriated such additional sums as may be required for the costs incurred in order to preserve and maintain the value and condition of State real property that has been declared surplus and for costs incurred in the selling of the real property, including appraisal, survey, advertising, maintenance, security and other costs related to the preservation and disposal, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, there are appropriated out of receipts derived from the pre-qualification service fees billed to contractors, architects, engineers, and professionals sufficient sums for expenses related to the administration of pre-qualification activities undertaken by the Division of Property Management and Construction.

Receipts derived from the leasing of State surplus real property are appropriated for the maintenance of leased property subject to the approval of the Director of the Division of Budget and Accounting, provided that a sum not to exceed \$100,000 shall be available for the administrative expenses of the program.

Receipts derived from the leasing of Department of Environmental Protection real properties are appropriated for the costs incurred for maintenance, repairs and utilities on the properties.

There are appropriated such additional sums as may be necessary for the purchase of expert witness services related to the State's defense against inverse condemnation claims related to the Department of Environmental Protection's Land Use Regulation program.

Receipts from employee maintenance charges in excess of \$300,000 are appropriated for maintenance of employee housing and associated relocation costs; provided, however, that a sum not to exceed \$25,000 shall be available for management of the program, the expenditure of which shall be subject to the approval of the Director of the Division of Budget and Accounting.

There are appropriated out of receipts derived from lease proceeds billed to the occupants of the James J. Howard Marine Sciences Laboratory, such sums as may be required to operate and maintain the facility and for the payment of interest or principal due from the issuance of bonds for this facility.

Notwithstanding the provisions of any law or regulation to the contrary, an amount not to exceed \$476,000 is transferred from the Garden State Farmland Preservation Trust Fund, the Garden State Green Acres Preservation Trust Fund and the Garden State Historic Preservation Trust Fund to the General Fund in an allocation to be determined by the Garden State Preservation Trust and approved by the Director of the Division of Budget and Accounting and such amount is appropriated to the Garden State Preservation Trust.

Notwithstanding the provisions of any law or regulation to the contrary, administrative expenses for the various retirement systems and employee benefit programs administered by the Division of Pensions and Benefits are appropriated from the pension and health benefits funds established by law to receive employer contributions or payments or to make benefit payments under the programs, as the case may be, subject to the approval of the Director of the Division of Budget and Accounting. Administrative costs shall include bank service charges, investment services, and any other such costs as are related to the management of the pension and health benefit programs, as the Director of the Division of Budget and Accounting shall determine.

2026 Office of Administrative Law

DIRECT STATE SERVICES

45-2026 Adjudication of Administrative Appeals \$8,731,000
 (From General Fund \$3,610,000
 (From All Other Funds 5,121,000)

Total Direct State Services Appropriation, Office of
 Administrative Law \$8,731,000
 (From General Fund \$3,610,000
 (From All Other Funds 5,121,000)

Less:

All Other Funds \$5,121,000
 Total Deductions \$5,121,000
 Total State Appropriation, Office of Administrative Law \$3,610,000

Direct State Services:

Personal Services:

 Salaries and Wages (\$7,775,000)
 Materials and Supplies.....(75,000)
 Services Other Than Personal.....(781,000)
 Maintenance and Fixed Charges.....(90,000)
 Additions, Improvements and Equipment(10,000)

Less:

All Other Funds 5,121,000

In addition to the amount hereinabove appropriated for the Office of Administrative Law, such sums as may be received or receivable from any department or non-State fund source for administrative hearing costs or rule-making costs by the Office of Administrative Law and the unexpended balance at the end of the preceding fiscal year of such sums are appropriated for the Office's administrative costs, subject to the approval of the Director of the Division of Budget and Accounting.

The Director of the Division of Budget and Accounting is empowered to transfer or credit to the Office of Administrative Law any appropriation made to any department for administrative hearing costs which had been appropriated or allocated to such department for its share of such costs.

Receipts derived from annual license fees, payable to the Office of Administrative Law, and the unexpended balance at the end of the preceding fiscal year of such receipts, are appropriated for the Office's administrative costs.

Receipts derived from royalties, payable to the Office of Administrative Law, and the unexpended balance at the end of the preceding fiscal year of such receipts, are appropriated for the Office's administrative costs.

Of the amounts appropriated to the New Jersey Motor Vehicle Commission, such appropriation is conditioned upon paying the non-State hourly rate charged by the Office of Administrative Law for hearing services, or an amount not less than \$500,000.

Notwithstanding the provisions of section 4 of P.L.1978, c.67 (C.52:14F-4) to the contrary, including the reference therein to salaries of administrative law judges determined as a percentage of the annual salary of judges of Superior Court, there shall be no increase paid from appropriations made herein for annual salary increases for administrative law judges.

2034 Office of Information Technology

DIRECT STATE SERVICES

40-2034 Office of Information Technology	\$111,540,000
65-2034 Emergency Telecommunication Services	<u>13,272,000</u>
Total Direct State Services Appropriation, Office of Information Technology	<u>\$124,812,000</u>

Less:

<i>OIT - Other Resources</i>	<i>\$66,400,000</i>
<i>Total Income Deductions</i>	<i><u>\$66,400,000</u></i>
Total State Appropriation, Office of Information Technology	<u>\$58,412,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$27,444,000)
Materials and Supplies	(207,000)
Services Other Than Personal	(15,895,000)
Maintenance and Fixed Charges	(94,000)

Special Purpose:

40 Office of Information Technology	(66,400,000)
65 Statewide 911 Emergency Telecommunication System	(12,372,000)
65 Office of Emergency Telecommunication Services	(900,000)
Additions, Improvements and Equipment	(1,500,000)

Less:

<i>Income Deductions</i>	<i>66,400,000</i>

In addition to the \$66,400,000 attributable to OIT Other Resources, there are appropriated such sums as may be received or receivable from any State agency, instrumentality or public authority for increases or changes in Office of Information

Technology services, subject to the approval of the Director of the Division of Budget and Accounting.

As a condition to the appropriations made in this act, specifically with regard to the allocation of employees performing information technology infrastructure functions and the establishment of deputy chief technology officers and related staff as authorized in P.L.2007, c.56 (C.52:18A-219 et al.), the Office of Information Technology shall identify the specific Direct State Services appropriations and positions that should be transferred between various departments and the Office of Information Technology, subject to the approval of the Director of the Division of Budget and Accounting.

From amounts appropriated to various departments, such sums as are necessary may be transferred to the Office of Information Technology for enterprise initiatives, subject to the establishment of a formal agreement between the Office of Information Technology and those departments to support enterprise projects, subject to the approval of the Director of the Division of Budget and Accounting. The unexpended balance at the end of the preceding fiscal year in the Enterprise Initiatives account is appropriated for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.

In addition to the amount hereinabove appropriated for the Statewide 911 Emergency Telecommunication System, there are appropriated such additional sums as may be necessary for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.

There are appropriated such sums for Geographic Information System (GIS) Integration as may be received from federal, county, municipal governments or agencies and nonprofit organizations for orthoimagery and parcel data mapping.

75 State Subsidies and Financial Aid

GRANTS-IN-AID

33-2078 Homestead Exemptions \$612,000,000

(From Property Tax Relief Fund \$612,000,000)

Total Grants-in-Aid Appropriation, State Subsidies

and Financial Aid \$612,000,000

(From Property Tax Relief Fund \$612,000,000)

Grants-in-Aid:

33 Homestead Benefit Program (PTRF) (\$398,500,000)

33 Senior and Disabled Citizens' Property

Tax Freeze (PTRF) (213,500,000)

The amount hereinabove appropriated for the Homestead Benefit Program shall be available to provide homestead benefits only to eligible homeowners pursuant to the provisions of section 3 of P.L.1990, c.61 (C.54:4-8.59) as amended by P.L.2004, c.40 and by P.L.2007, c.62, as may be amended from time to time except that, notwithstanding the provisions of such laws to the contrary: (i) residents who are 65 years of age or older at the close of the tax year, or residents who are allowed to claim a personal deduction as a blind or disabled taxpayer pursuant to

subsection b. of N.J.S.54A:3-1, with (a) gross income in excess of \$150,000 for tax year 2011 are excluded from the program; (b) gross income in excess of \$100,000 but not in excess of \$150,000 for tax year 2011 are eligible for a benefit in the amount of 5% of the first \$10,000 of property taxes paid, and (c) gross income not in excess of \$100,000 for tax year 2011 are eligible for a benefit in the amount of 10% of the first \$10,000 of property taxes paid; (ii) residents who are not 65 years of age or older at the close of the tax year, or residents who are not allowed to claim a personal deduction as a blind or disabled taxpayer pursuant to subsection b. of N.J.S.54A:3-1, with (a) gross income in excess of \$75,000 for tax year 2011 are excluded from the program; (b) gross income in excess of \$50,000 but not in excess of \$75,000 for tax year 2011 are eligible for a benefit in the amount of 6.67% of the first \$10,000 of property taxes paid; and (c) gross income not in excess of \$50,000 for tax year 2011 are eligible for a benefit in the amount of 10% of the first \$10,000 of property taxes paid. These benefits listed pursuant to this paragraph will be calculated based on the 2006 property tax amounts assessed or as would have been assessed on the October 1, 2011 principal residence of eligible applicants. The total homestead benefit provided to an eligible applicant in a given State fiscal year shall not exceed the homestead rebate amount paid to such eligible applicant for tax year 2006, absent a change in an applicant's filing characteristics. The homestead benefit shall be made in one or more installments after the application for the benefit has been approved, at the dates and in the form as the Director of the Division of Taxation shall determine. If the amount hereinabove appropriated for the Homestead Benefit Program is not sufficient, there is appropriated from the Property Tax Relief Fund such additional sums as may be required to provide such homestead benefits, subject to the approval of the Director of the Division of Budget and Accounting.

From the amount hereinabove appropriated for the Homestead Benefit Program, there are appropriated such sums as may be necessary for the administration of the program, subject to the approval of the Director of the Division of Budget and Accounting.

From the amount hereinabove appropriated for the Homestead Benefit Program, there are appropriated such sums as may be required for payments of homestead benefits that have been approved but not paid pursuant to the annual appropriations act for the fiscal year the claimant applied for such homestead benefit, subject to the approval of the Director of the Division of Budget and Accounting.

From the amount hereinabove appropriated for the Homestead Benefit Program, there are appropriated from the Property Tax Relief Fund such sums as may be required for payments of property tax credits to homeowners and tenants pursuant to the "Property Tax Deduction Act," P.L.1996, c.60 (C.54A:3A-15 et seq.).

Notwithstanding the provisions of P.L.1997, c.348 (C.54:4-8.67 et seq.), the amount hereinabove appropriated for Senior and Disabled Citizens' Property Tax Freeze, and any additional sum which may be required for this purpose, is appropriated from the Property Tax Relief Fund.

Notwithstanding the provisions of any law or regulation to the contrary, the amount hereinabove appropriated for Senior and Disabled Citizens' Property Tax Freeze is

subject to the following condition: eligibility for the property tax reimbursement program shall be determined pursuant to section 1 of P.L.1997, c.348 (C.54:4-8.67), except that any citizen with an annual income of more than \$70,000 shall not be eligible to receive a property tax reimbursement benefit payment in the current fiscal year.

STATE AID

28-2078	County Boards of Taxation	\$1,903,000
29-2078	Locally Provided Assistance	31,395,000
34-2078	Senior/Disabled Citizens' and Veterans' Property Tax Deductions	77,000,000
	<i>(From Property Tax Relief Fund</i>	<i>\$77,000,000)</i>
35-2078	Police and Firemen's Retirement System	<u>103,371,000</u>
	<i>(From General Fund</i>	<i>49,561,000)</i>
	<i>(From Property Tax Relief Fund</i>	<i>53,810,000)</i>
	Total State Aid Appropriation, State Subsidies and Financial Aid	<u>\$213,669,000</u>
	<i>(From General Fund</i>	<i>\$82,859,000)</i>
	<i>(From Property Tax Relief Fund</i>	<i>130,810,000)</i>

State Aid:

28	County Boards of Taxation	(\$1,903,000)
29	South Jersey Port Corporation Debt Service Reserve Fund	(18,129,000)
29	South Jersey Port Corporation Property Tax Reserve Fund	(5,101,000)
29	Highlands Protection Fund - Planning Grants	(2,182,000)
29	Highlands Protection Fund - Watershed Moratorium Offset Aid	(2,218,000)
29	Public Library Project Fund	(3,765,000)
34	Senior and Disabled Citizens' Property Tax Deductions (PTRF)	(16,000,000)
34	Veterans' Property Tax Deductions (PTRF)	(61,000,000)
35	State Contribution to Consolidated Police and Firemen's Pension Fund	(897,000)
35	Debt Service on Pension Obligation Bonds (PTRF)	(15,346,000)
35	Police and Firemen's Retirement System - Post Retirement Medical (PTRF)	(38,464,000)
35	Police and Firemen's Retirement System	(29,413,000)
35	Police and Firemen's Retirement System (P.L.1979, c.109)	(19,251,000)

There are appropriated such additional sums as may be certified to the Governor by the South Jersey Port Corporation as necessary to meet the requirements of the South Jersey Port Corporation Debt Service Reserve Fund under section 14 of P.L.1968,

c.60 (C.12:11A-14), and the South Jersey Port Corporation Property Tax Reserve Fund under section 20 of P.L.1968, c.60 (C.12:11A-20), the expenditure of which shall be subject to the approval of the Director of the Division of Budget and Accounting.

The amounts hereinabove appropriated for the Highlands Protection Fund are payable from the receipts of the portion of the realty transfer fee directed to be credited to the Highlands Protection Fund and the unexpended balances at the end of the preceding fiscal year in the Highlands Protection Fund accounts are appropriated, subject to the approval of the Director of the Division of Budget and Accounting. Further, the Department of the Treasury may transfer funds as necessary between the Highlands Protection Fund - Incentive Planning Aid account and the Highlands Protection Fund - Planning Grants account, subject to the approval of the Director of the Division of Budget and Accounting.

The amount hereinabove appropriated for Solid Waste Management - County Environmental Investment Aid is appropriated to subsidize county and county authority debt service payments for environmental investments incurred and other repayment obligations owed pursuant to the "Solid Waste Management Act," P.L.1970, c.39 (C.13:1E-1 et seq.) and the "Solid Waste Utility Control Act," P.L.1970, c.40 (C.48:13A-1 et seq.) as determined by the State Treasurer based upon the need for such financial assistance after taking into account all financial resources available or attainable to pay such debt service and such other repayment obligations. Such additional sums as may be necessary shall be appropriated subject to the approval of the Director of the Division of Budget and Accounting and shall be provided upon such terms and conditions as the State Treasurer may determine. The unexpended balance at the end of the preceding fiscal year is appropriated, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of the "Corporation Business Tax Act (1945)," P.L.1945, c.162 (C.54:10A-1 et seq.), the sum apportioned to the several counties of the State shall not be distributed and shall be anticipated as revenue for general State purposes.

Notwithstanding the provisions of the "Corporation Business Tax Act (1945)," P.L.1945, c.162 (C.54:10A-1 et seq.), the amounts collected from banking corporations pursuant to the "Corporation Business Tax Act (1945)" shall not be distributed to the counties and municipalities and shall be anticipated as revenue for general State purposes.

There is appropriated from the Energy Tax Receipts Property Tax Relief Fund the sum of \$788,492,000 and an amount not to exceed \$297,901,000 from Consolidated Municipal Property Tax Relief Aid is appropriated and shall be allocated to municipalities in accordance with the provisions of subsection b. of section 2 of P.L.1997, c.167 (C.52:27D-439), provided further, however, that from the amounts hereinabove appropriated, each municipality shall also receive such additional sums from the Energy Tax Receipts Property Tax Relief Fund as provided in the previous fiscal year. Each municipality that receives an allocation from the amount so transferred from the Consolidated Municipal Property Tax Relief Aid program

shall have its allocation from the Consolidated Municipal Property Tax Relief Aid program reduced by the same amount.

Notwithstanding the provisions of paragraph (1) of subsection c. of section 2 of P.L.1997, c.167 (C.52:27D-439) or any other law or regulation to the contrary, the amount hereinabove appropriated for Energy Tax Receipts Property Tax Relief Fund payments shall be distributed on the following schedule: on or before August 1, 45% of the total amount due; September 1, 30% of the total amount due; October 1, 15% of the total amount due; November 1, 5% of the total amount due; December 1 for municipalities operating under a calendar fiscal year, 5% of the total amount due; and June 1 for municipalities operating under the State fiscal year, 5% of the total amount due.

Notwithstanding the provisions of any law or regulation to the contrary, the release of the final 5% or \$500, whichever is greater, of the total annual amount due for the current fiscal year from the Energy Tax Receipts Property Tax Relief Fund to municipalities is subject to the following condition: the municipality shall submit to the Director of the Division of Local Government Services a report describing the municipality's compliance with the "Best Practices Inventory" established by the Director of the Division of Local Government Services and shall receive at least a minimum score on such inventory as determined by the Director of the Division of Local Government Services; provided, however, that the Director may take into account the particular circumstances of a municipality in computing such score. In preparing the Best Practices Inventory, the Director shall identify best municipal practices in the areas of general administration, fiscal management, and operational activities, as well as the particular circumstances of a municipality, in determining the minimum score acceptable for the release of the final 5% or \$500, whichever is greater, of the total annual amount due for the current fiscal year, but in no event shall amounts be withheld with respect to municipal practices occurring prior to the issuance of the Best Practices Inventory unless related to a municipal practice identified in the Best Practices Inventory established in the previous fiscal year.

There is appropriated from taxes collected from certain insurance companies, pursuant to the insurance tax act, so much as may be required for payments to counties pursuant to P.L.1945, c.132 (C.54:18A-1 et seq.).

The unexpended balance at the end of the preceding fiscal year from the taxes collected pursuant to P.L.1940, c.5 (C.54:30A-49 et seq.) shall lapse.

The Director of the Division of Budget and Accounting shall reduce amounts provided to any municipality from the amount hereinabove appropriated by the difference, if any, between pension contribution savings, and the amount of Consolidated Municipal Property Tax Relief Aid payable to such municipality.

In addition to the amount hereinabove appropriated for Senior and Disabled Citizens' Property Tax Deductions and Veterans' Property Tax Deductions, there are appropriated from the Property Tax Relief Fund such additional sums as may be required for State reimbursement to municipalities for senior and disabled citizens' and veterans' property tax deductions.

In addition to the sum hereinabove appropriated for Debt Service on Pension Obligation Bonds to make payments under the State Treasurer's contracts authorized pursuant to section 6 of P.L.1997, c.114 (C.34:1B-7.50), there are appropriated such other sums as the Director of the Division of Budget and Accounting shall determine are required to pay all amounts due from the State pursuant to such contracts. Such additional sums as may be required for Police and Firemen's Retirement System - Post Retirement Medical are appropriated, as the Director of the Division of Budget and Accounting shall determine.

76 Management and Administration

DIRECT STATE SERVICES

99-2000 Administration and Support Services	<u>\$11,568,000</u>
Total Direct State Services Appropriation, Management and Administration	<u>\$11,568,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$11,145,000)
Materials and Supplies.....	(42,000)
Services Other Than Personal	(342,000)
Maintenance and Fixed Charges	(23,000)

Special Purpose:

99 Federal Liaison Office, Washington, D.C.	(16,000)

There are appropriated such additional sums as may be required to pay for the operating expenses of the Casino Revenue Fund Advisory Commission, subject to the approval of the Director of the Division of Budget and Accounting.

There are appropriated from the investment earnings of general obligation bond proceeds such sums as may be necessary for the payment of debt service administrative costs.

There is appropriated from revenue estimated to be received as a fee in connection with the issuance of debt an amount not to exceed \$700,000 to provide funds for public finance activities.

There are appropriated from revenue to be received from investment earnings of State funds, from fees in connection with the cost of debt issuance and from service fees billed to State authorities, such sums as may be required for public finance activities. The unexpended balance at the end of the preceding fiscal year from such investment earnings and service fees is appropriated to the Office of Public Finance.

Pursuant to the provisions of P.L.1999, c.12 (C.54A:9-25.12 et seq.) deposits made to the "Drug Abuse Education Fund" and the unexpended balance at the end of the preceding fiscal year of such deposits are appropriated for collection or administration costs of the Department of the Treasury and for transfer to the Department of Education such sums as are necessary for Project DARE (Drug Abuse Resistance Education) and the Steroid Use and Prevention Program, and to the Department of Human Services for substance abuse treatment and prevention programs, subject to the approval of the Director of the Division of Budget and Accounting.

An amount equivalent to the amount due to be paid in this fiscal year to the State by the Port Authority of New York and New Jersey pursuant to the regional economic development agreement dated January 1, 1990 among the States of New York and New Jersey and the Port Authority of New York and New Jersey is appropriated to the Economic Recovery Fund established pursuant to section 3 of P.L.1992, c.16 (C.34:1B-7.12) for the purposes of P.L.1992, c.16 (C.34:1B-7.10 et seq.).

Notwithstanding the provisions of any law or regulation to the contrary, there are appropriated from the "Drug Enforcement and Demand Reduction Fund" such sums as may be required to provide for the administrative expenses of the Governor's Council on Alcoholism and Drug Abuse and for programs and grants to other agencies, subject to the approval of the Director of the Division of Budget and Accounting.

80 Special Government Services

82 Protection of Citizens' Rights

DIRECT STATE SERVICES

06-2024	Appellate Services to Indigents	\$9,923,000
57-2021	Trial Services to Indigents	67,132,000
58-2022	Mental Health Advocacy	4,484,000
61-2023	Dispute Settlement	533,000
66-2021	Office of Law Guardian.....	20,101,000
67-2021	Office of Parental Representation.....	15,467,000
99-2025	Administration and Support Services	<u>2,809,000</u>
Total Direct State Services Appropriation, Protection		
of Citizens' Rights		<u>\$120,449,000</u>

Direct State Services:

Personal Services:

Salaries and Wages	(\$90,956,000)
Materials and Supplies.....	(1,088,000)
Services Other Than Personal.....	(25,969,000)
Maintenance and Fixed Charges.....	(1,869,000)
Additions, Improvements and Equipment	(567,000)

Sums provided for legal and investigative services are available for payment of obligations applicable to prior fiscal years.

In addition to the amount hereinabove appropriated for the operation of the Office of the Public Defender there are appropriated additional sums as may be required for Trial and Appellate services to indigents, the expenditure of which shall be subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, no State funds are appropriated to fund the expenses associated with the legal representation of persons before the State Parole Board or the Parole Bureau.

Lawsuit settlements and legal costs awarded by any court to the Office of the Public Defender are appropriated for the expenses associated with the representation of indigent clients.

The amount hereinabove appropriated to the Office of the Public Defender is available for expenses associated with pool attorneys hired by the Office of the Public Defender for the representation of indigent clients.

Receipts in excess of the amount anticipated for the Dispute Settlement Office of the Office of the Public Defender are appropriated, subject to the approval of the Director of the Division of Budget and Accounting.

2048 State Legal Services Office

GRANTS-IN-AID

89-2048 Civil Legal Services for the Poor..... \$14,900,000
Total Grants-In-Aid Appropriation, State Legal Services Office..... \$14,900,000

Grants-In-Aid:

89 Legal Services of New Jersey - Legal Assistance in Civil
Matters (\$14,900,000)

2096 Corrections Ombudsperson

DIRECT STATE SERVICES

51-2096 Corrections Ombudsperson \$760,000
Total Direct State Services Appropriation, Corrections Ombudsperson \$760,000

Direct State Services:

Personal Services:

Salaries and Wages (\$676,000)
Materials and Supplies..... (4,000)
Services Other Than Personal (73,000)
Maintenance and Fixed Charges (7,000)

2097 Division of Elder Advocacy

DIRECT STATE SERVICES

81-2097 Elder Advocacy \$1,902,000
Total Direct State Services Appropriation, Division of
Elderly Advocacy \$1,902,000

Direct State Services:

Personal Services:

Salaries and Wages (\$1,604,000)
Materials and Supplies..... (23,000)
Services Other Than Personal (180,000)
Maintenance and Fixed Charges (53,000)
Additions, Improvements and Equipment (42,000)

Notwithstanding the provisions of any law or regulation to the contrary, receipts collected from fines and penalties pursuant to subsection f. of section 2 of P.L.1983, c.43 (C.52:27G-7.1) and subsection b. of section 14 of P.L.1977, c.239 (C.52:27G-14) are appropriated to the Division of Elder Advocacy, subject to the approval of the Director of the Division of Budget and Accounting.

**2098 Division of Rate Counsel
DIRECT STATE SERVICES**

53-2098 Rate Counsel \$5,927,000
 Total Direct State Services Appropriation, Division of
 Rate Counsel..... \$5,927,000

Direct State Services:

Personal Services:

Salaries and Wages(\$2,933,000)
 Materials and Supplies.....(52,000)
 Services Other Than Personal.....(2,573,000)
 Maintenance and Fixed Charges.....(350,000)
 Additions, Improvements and Equipment(19,000)

Receipts of the Division of Rate Counsel in excess of those anticipated are appropriated
 for the Division of Rate Counsel to defray the costs of the Division of Rate Coun-
 sel function.

The unexpended balances at the end of the preceding fiscal year in the Division of Rate
 Counsel accounts are appropriated for the same purpose.

Department of the Treasury, Total State Appropriation..... \$1,797,194,000

**Summary of Department of the Treasury Appropriations
 (For Display Purposes Only)**

Appropriations by Category:

Direct State Services\$447,751,000
 Grants-in-Aid 942,911,000
 State Aid 406,532,000

Appropriations by Fund:

General Fund.....\$1,008,435,000
 Property Tax Relief Fund..... 780,169,000
 Casino Control Fund 8,590,000

90 MISCELLANEOUS COMMISSIONS

40 Community Development and Environmental Management

43 Science and Technical Programs

9130 Interstate Environmental Commission

DIRECT STATE SERVICES

03-9130 Interstate Environmental Commission \$15,000
 Total Direct State Services Appropriation, Interstate
 Environmental Commission \$15,000

Direct State Services:

Special Purpose:

03 Expenses of the Commission(\$15,000)

9140 Delaware River Basin Commission**DIRECT STATE SERVICES**

02-9140 Delaware River Basin Commission	<u>\$893,000</u>
Total Direct State Services Appropriation, Delaware River Basin Commission	<u>\$893,000</u>

Direct State Services:

Special Purpose:

02 Expenses of the Commission	(\$893,000)

70 Government Direction, Management, and Control**72 Governmental Review and Oversight****9148 Council On Local Mandates****DIRECT STATE SERVICES**

92-9148 Council On Local Mandates	<u>\$68,000</u>
Total Direct State Services Appropriation, Council On Local Mandates	<u>\$68,000</u>

Direct State Services:

Special Purpose:

92 Council On Local Mandates	(\$68,000)

The unexpended balance at the end of the preceding fiscal year in this account is appropriated

Miscellaneous Commissions, Total State Appropriation	<u>\$976,000</u>

Summary of Miscellaneous Commissions Appropriations

(For Display Purposes Only)

Appropriations by Category:

Direct State Services	\$976,000

Appropriations by Fund:

General Fund	\$976,000

94 INTERDEPARTMENTAL ACCOUNTS**70 Government Direction, Management, and Control****74 General Government Services****DIRECT STATE SERVICES**

01-9400 Property Rentals	\$226,077,000
02-9400 Insurance and Other Services	137,552,000
06-9400 Utilities and Other Services	<u>12,496,000</u>
Subtotal Direct State Services Appropriation, General Government Services	<u>\$376,125,000</u>

Less:

<i>Direct Rent Charges and Charges for</i>	
<i>Operational Efficiencies</i>	<i>\$88,904,000</i>
<i>Total Deductions</i>	<i>\$88,904,000</i>
Total Direct State Services Appropriation, General	
Government Services.....	<u>\$287,221,000</u>
<i>Direct State Services:</i>	
Property Rentals:	
01 Existing and Anticipated Leases	(\$186,547,000)
01 Economic Development Authority.....	(7,665,000)
01 Other Debt Service Leases and Tax Payments.....	(31,854,000)
<i>Less:</i>	
<i>Total Deductions</i>	<i>88,904,000</i>
Additions, Improvements and Equipment.....	(11,000)
Insurance and Other Services:	
02 Tort Claims Liability Fund (C.59:12-1)	(15,000,000)
02 Workers' Compensation Self-Insurance Fund	(102,990,000)
02 Property Insurance Premium Payments	(3,576,000)
02 Casualty Insurance Premium Payments	(693,000)
02 Special Insurance Policy Premium Payment	(168,000)
02 UMDNJ Self-Insurance Reserve Fund.....	(10,000,000)
02 Vehicle Claims Liability Fund	(3,500,000)
02 Self-Insurance Deductible Fund	(1,500,000)
02 Self-Insurance Fund - Foster Parents	(125,000)
Utilities and Other Services:	
06 Public Health, Environmental and Agricultural	
Laboratory	(6,075,000)
06 Fuel and Utilities	(1,210,000)
06 Household and Security	(5,211,000)
The Director of the Division of Budget and Accounting is empowered to allocate to any State agency occupying space in any State-owned building equitable charges for the rental of such space to include, but not be limited to, the costs of operation and maintenance thereof, and the amounts so charged shall be credited to the General Fund; and, to the extent that such charges exceed the amounts appropriated for such purposes to any agency financed from any fund other than the General Fund, the required additional appropriation shall be made out of such other fund.	
Receipts derived from direct charges and charges to non-State fund sources are appropriated for the rental of property, including the costs of operation and maintenance of such properties.	
Notwithstanding the provisions of any law or regulation to the contrary, and except for leases negotiated by the Division of Property Management and Construction and subject to the approval or disapproval by the State Leasing and Space Utilization Committee pursuant to P.L.1992, c.130 (C.52:18A-191.1 et al.), and except as hereinafter provided, no lease for the rental of any office or building, except for	

legislative district offices, shall be executed without the prior written consent of the State Treasurer and the Director of the Division of Budget and Accounting. Legislative district office leases may be executed by personnel in the Office of Legislative Services so directed by the Executive Director, provided the lease complies with the Joint Rules Governing Legislative District Offices adopted by the presiding officers. Leases which do not comply with the Joint Rules Governing Legislative District Offices may be executed by personnel in the Office of Legislative Services, District Office Services so directed by the Executive Director with the prior written consent of the President of the Senate and the Speaker of the General Assembly.

To the extent that sums appropriated for property rental payments are insufficient, there are appropriated such additional sums, not to exceed \$3,000,000 as may be required to pay property rental obligations, subject to the approval of the Director of the Division of Budget and Accounting.

An amount not to exceed \$2,500,000 shall be appropriated for the costs of security, maintenance, utilities, and other operating expenses related to the closure of State-owned buildings, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, the Division of Property Management and Construction is empowered to renegotiate lease terms, provided that such renegotiations result in cost savings to the State for the current fiscal year and for the term of the lease. Any lease amendments made as a result of these renegotiations are subject to the review and approval of the State Leasing and Space Utilization Committee. Receipts from such renegotiations are appropriated to the Property Rentals account to offset the cost of leases, subject to the approval of the Director of the Division of Budget and Accounting.

There are appropriated such additional sums as may be required to pay for office renovations associated with the consolidation of office space, subject to the approval of the Director of the Division of Budget and Accounting.

There are appropriated such additional sums as may be required to pay debt service costs for the Greystone Park Psychiatric Hospital Project, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of section 105 of P.L.2003, c.13 (C.39:2A-36) or any law to the contrary, \$10,940,000 is appropriated from the revenues appropriated to the Motor Vehicle Commission for transfer to the Inter-Departmental property rentals account to reflect savings from implementation of management and procurement efficiencies, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, the Director of the Division of Budget and Accounting shall transfer from departmental accounts and credit to the Property Rentals account such sums as necessary to reflect savings from post warranty product maintenance initiatives. This additional sum is appropriated for Property Rentals.

The unexpended balance at the end of the preceding fiscal year in the Master Lease Program Fund is appropriated for the same purpose.

- In order to permit flexibility, amounts may be transferred between various items of appropriation within the Insurance and Other Services program classification, subject to the approval of the Director of the Division of Budget and Accounting. Notice thereof shall be provided to the Legislative Budget and Finance Officer on the effective date of the approved transfer.
- There are appropriated such additional sums as may be required to pay tort claims under N.J.S.59:12-1, as recommended by the Attorney General and as the Director of the Division of Budget and Accounting shall determine.
- The funds appropriated to the Tort Claims Liability Fund are available for the payment of claims of a tortious nature, for the indemnification of pool attorneys engaged by the Public Defender for the defense of indigents, for the indemnification of designated pathologists engaged by the State Medical Examiner, and for direct costs of legal, administrative and medical services related to the investigation, mitigation and litigation of tort claims under N.J.S.59:12-1, as recommended by the Attorney General and as the Director of the Division of Budget and Accounting shall determine.
- Notwithstanding the provisions of any law or regulation to the contrary, claims paid from the Tort Claims Liability Fund on behalf of entities funded, in whole or in part, from non-State funds, may be reimbursed from such non-State fund sources as determined by the Director of the Division of Budget and Accounting.
- There are appropriated such additional sums as may be required to pay claims not payable from the Tort Claims Liability Fund or payable under the "New Jersey Contractual Liability Act," N.J.S.59:13-1 et seq., as recommended by the Attorney General and as the Director of the Division of Budget and Accounting shall determine. The funds appropriated are available for the payment of direct costs of legal, administrative and medical services related to the investigation, mitigation and litigation of claims not payable from the Tort Claims Liability Fund or payable under the "New Jersey Contractual Liability Act," N.J.S.59:13-1 et seq., as recommended by the Attorney General and as the Director of the Division of Budget and Accounting shall determine. Notwithstanding the provisions of any law or regulation to the contrary, claims or costs paid from the monies appropriated under this paragraph on behalf of entities funded, in whole or in part from non-State funds, may be reimbursed from such non-State funds sources as determined by the Director of the Division of Budget and Accounting. Appropriations under this paragraph shall not be available to pay punitive damages and shall not be deemed a waiver of any immunity by the State.
- To the extent that sums appropriated to pay Workers' Compensation claims under R.S.34:15-1 et seq., are insufficient, there are appropriated such additional sums as may be required to pay Workers' Compensation claims, subject to the approval of the Director of the Division of Budget and Accounting.
- The amount hereinabove appropriated for the Workers' Compensation Self-Insurance Fund under R.S.34:15-1 et seq. is available for the payment of direct costs of legal, investigative, administrative and medical services related to the investigation, mitigation, litigation, and administration of claims against the fund, subject to the approval of the Director of the Division of Budget and Accounting.

- Notwithstanding the provisions of any law or regulation to the contrary, benefits provided to community work experience participants shall be borne by the Work First New Jersey program funded through the Department of Human Services and any costs related to administration, mitigation, litigation and investigation of claims will be reimbursed to the Division of Risk Management within the Department of the Treasury by the Work First New Jersey program funded through the Department of Human Services, subject to the approval of the Director of the Division of Budget and Accounting.
- Providing that expenditures during the current fiscal year on Workers' Compensation claims attributable to the Departments of Human Services, Transportation, Corrections, and Law and Public Safety are less than the respective amounts expended by those Departments for claims attributable to the preceding fiscal year, all or a portion of that savings is appropriated to those Departments or the Division of Risk Management within the Department of the Treasury for the purpose of improving worker safety and reducing workers' compensation costs, subject to the approval of the Director of the Division of Budget and Accounting.
- To the extent that sums appropriated to pay auto insurance claims are insufficient, there are appropriated such additional sums as may be required to pay auto insurance claims, subject to the approval of the Director of the Division of Budget and Accounting.
- The amount hereinabove appropriated for the Vehicle Claims Liability Fund is available for the payment of direct costs of legal, investigative, and medical services related to the investigation, mitigation, and litigation of claims against the fund.
- The unexpended balance at the end of the preceding fiscal year in the Self-Insurance Deductible Fund is appropriated for the same purposes.
- The amount hereinabove appropriated for the Self-Insurance Fund - Foster Parents is available for the payment of direct costs of legal, investigative, and medical services related to the investigation, mitigation, and litigation of claims against the fund.
- Notwithstanding the provisions of any law or regulation to the contrary, the sums hereinabove appropriated are available for payment of obligations applicable to prior fiscal years.
- There are appropriated out of revenues received from utility companies such sums as may be required for implementation and administration of the Energy Conservation Initiatives Program, subject to the approval of the Director of the Division of Budget and Accounting.
- Of the amount hereinabove appropriated for fuel and utility costs, amounts may be transferred to or from State departments to meet fuel and utility needs, subject to the approval of the Director of the Division of Budget and Accounting; and, in addition to the sums hereinabove appropriated for fuel and utility costs and for the Public Health, Environmental, and Agricultural Laboratory fuel and utility costs, there are appropriated such additional sums as may be required to pay fuel and utility costs, subject to the approval of the Director of the Division of Budget and Accounting.

Revenue generated from the sale of Solar Renewable Energy Certificates is appropriated to fund energy-related savings initiatives as determined by the Director of Energy Savings within the Department of the Treasury, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, in addition to the amount hereinabove appropriated for Fuel and Utilities, there is appropriated \$42,500,000 from the Clean Energy Fund for utility costs in State facilities.

Receipts derived from fees charged for public parking at the Bangs Avenue Parking Garage in Asbury Park, and the unexpended balance from the preceding fiscal year, are appropriated for the costs incurred for maintenance and operation of the garage, subject to the approval of the Director of the Division of Budget and Accounting.

In addition to the amount hereinabove appropriated for the Household and Security account, there is appropriated to the Household and Security account \$2,500,000 from the New Jersey Motor Vehicle Commission for utility, security, and building maintenance costs.

In addition to the amount hereinabove appropriated for Utilities and Other Services, of the unexpended balances in the Petroleum Overcharge Reimbursement Fund, there is appropriated such sums as are required to fund the energy tracking and invoice payment system, as determined by the Director of Energy Savings within the Department of the Treasury, subject to the approval of the Director of the Division of Budget and Accounting.

In accordance with the "Recycling Enhancement Act," P.L.2007, c.311 (C.13:1E-96.2 et al.), an amount not to exceed \$358,000 is appropriated from the State Recycling Fund - Recycling Administration account to the Department of the Treasury for administrative costs attributable to the State recycling program, subject to the approval of the Director of the Division of Budget and Accounting.

GRANTS-IN-AID

09-9460 Aid to Independent Authorities	\$152,703,000
Total Grants-in-Aid Appropriation, General Government	
Services	\$152,703,000

Grants-in-Aid:

09 New Jersey Sports and Exposition Authority -	
Debt Service.....	(\$89,753,000)
09 New Jersey Performing Arts Center, EDA	(5,565,000)
09 Business Employment Incentive Program, EDA -	
Debt Service.....	(28,069,000)
09 Liberty Science Center.....	(11,036,000)
09 Municipal Rehabilitation and Economic Recovery,	
EDA	(14,144,000)
09 Designated Industries Economic Growth &	
Development - EDA	(4,136,000)

In addition to the amounts hereinabove appropriated for the Sports and Exposition Authority, there are appropriated such additional sums as are necessary to satisfy debt service obligations and to maintain the core operating functions of the Authority, subject to the approval of the Director of the Division of Budget and Accounting.

The amount hereinabove appropriated for the New Jersey Performing Arts Center, EDA account shall be used to pay the State's obligations pursuant to a lease with the New Jersey Economic Development Authority, for the lease of real property and infrastructure improvements and the New Jersey Performing Arts Center structure constructed thereon purchased by the Authority for the State in the City of Newark, for the purpose of constructing buildings to comprise a Performing Arts Center. Notwithstanding the provisions of any law or regulation to the contrary, the State Treasurer may enter into a lease with the New Jersey Economic Development Authority to lease the real property and improvements thereon purchased or caused to be constructed by the Authority for the State in the City of Newark for the New Jersey Performing Arts Center, subject to the prior written consent of the Director of the Division of Budget and Accounting, the President of the Senate and the Speaker of the General Assembly. Upon the final payment of the State's obligations pursuant to the lease for the real property and infrastructure improvements purchased by the Authority, the title to the real property and improvements shall revert to the State. The State may sublease the land and facilities for the purpose of operating, maintaining, or financing a Performing Arts Center in Newark. Any sublease for use of land and improvements acquired for the State by the New Jersey Economic Development Authority for the New Jersey Performing Arts Center shall be subject to the prior written approval of the Director of the Division of Budget and Accounting and the Joint Budget Oversight Committee, or its successor. There are appropriated such additional sums as may be necessary to pay debt service for the New Jersey Performing Arts Center.

The amounts hereinabove appropriated for debt service payments attributable to the New Jersey Performing Arts Center, EDA program and to the Municipal Rehabilitation and Economic Recovery, EDA program may be paid by the New Jersey Economic Development Authority from resources available from unexpended balances, and in such instances the amounts appropriated for the New Jersey Performing Arts Center, EDA program and for the Municipal Rehabilitation and Economic Recovery, EDA program shall be reduced by the same amount. There are appropriated such additional sums as may be necessary to pay debt service and other costs for the Municipal Rehabilitation and Economic Recovery, EDA program, subject to the approval of the Director of the Division of Budget and Accounting.

The amount hereinabove appropriated for the Liberty Science Center is allocated for debt service obligations and for the operations of the Liberty Science Center, the amount of such operational support to be determined by the State Treasurer on such terms and conditions as the State Treasurer requires pursuant to an agreement between the State Treasurer and the Liberty Science Center, subject to the approval of the Director of the Division of Budget and Accounting. In addition, there are appropriated such additional sums as may be necessary to satisfy debt service obligations subject to the approval of the Director of the Division of

Budget and Accounting. Furthermore, there are also appropriated such additional sums for support of the operations of the center, as determined by the State Treasurer on such terms and conditions as the State Treasurer requires pursuant to an agreement between the State Treasurer and the Liberty Science Center, subject to the approval of the Director of the Division of Budget and Accounting.

CAPITAL CONSTRUCTION

08-9450 Capital Projects - Statewide.....	<u>\$191,309,000</u>
Total Capital Construction Appropriation, General	
Government Services.....	<u>\$191,309,000</u>

Capital Projects:

Statewide Capital Projects:

08 New Jersey Building Authority.....(\$113,309,000)

Open Space Preservation Program:

08 Garden State Preservation Trust Fund Account(78,000,000)

There are appropriated such additional sums as may be required to pay future debt service costs for projects undertaken by the New Jersey Building Authority, subject to the approval of the Director of the Division of Budget and Accounting.

In addition to the amounts appropriated under P.L.2004, c.71, donations for the 9/11 Memorial Design Costs from public and private sources, including those collected from the Port Authority of New York and New Jersey, for the purposes of planning, designing, maintaining and constructing a memorial to the victims of the terrorist attacks of September 11, 2001, on the World Trade Center in New York City, the Pentagon in Washington, D.C., and United Airlines Flight 93 in Somerset County, Pennsylvania, shall be deposited by the State Treasurer in a dedicated account established for this purpose and are appropriated for the purposes set forth under P.L.2004, c.71 and there are appropriated or transferred such sums as are necessary for the 9/11 Memorial project, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, in order to provide flexibility in administering the amounts provided for Statewide Fire, Life Safety and Renovations Projects; Roof Repairs-Statewide; American's with Disabilities Act Compliance Projects-Statewide; Hazardous Materials Removal Projects-Statewide; Statewide Security Projects; and Energy Efficiency-Statewide Projects; such sums as may be necessary may be transferred to individual project line items within various departments, subject to the approval of the Director of the Division of Budget and Accounting.

Of the amounts hereinabove appropriated for Hazardous Materials Removal Projects - Statewide and Statewide Security Projects, funds may be transferred to the Fuel Distribution Systems / Underground Storage Tank Replacements - Statewide account for the removal of underground storage tanks at State facilities, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, an amount not to exceed \$5,000,000 from monies received from the sale of real property that are

deposited in the State-Owned Real Property Fund pursuant to section 1 of P.L.2007, c.108 (C.52:31-1.3b) are appropriated for Statewide Roofing Repairs and Replacements.

Notwithstanding the provisions of any law or regulation to the contrary, any monies received from the sale of real property that are deposited in the State-Owned Real Property Fund pursuant to section 1 of P.L.2007, c.108 (C.52:31-1.3b) are appropriated for capital projects that increase energy efficiency, improve work place safety or for information technology systems or other capital investments that will generate an operating budget savings, subject to the approval of the Director of the Division of Budget and Accounting.

In addition to the amount hereinabove appropriated for the Garden State Preservation Trust Fund Account, interest earned and accumulated commencing with the start of this fiscal year is appropriated.

The amount hereinabove appropriated for the Garden State Preservation Trust Fund Account is subject to the provisions of the "Garden State Preservation Trust Act," P.L.1999, c.152 (C.13:8C-1 et seq.) and the constitutional amendment on open space (Article VIII, Section II, paragraph 7).

9410 Employee Benefits
DIRECT STATE SERVICES

03-9410 Employee Benefits.....	<u>\$2,149,760,000</u>
Total Direct State Services Appropriation, Employee Benefits ... <u>\$2,149,760,000</u>	

Direct State Services:

Special Purpose:

03 Public Employees' Retirement System	(\$242,092,000)
03 Public Employees' Retirement System -	
Post Retirement Medical	(299,331,000)
03 Public Employees' Retirement System -	
Non-contributory Insurance	(27,515,000)
03 Police and Firemen's Retirement System.....	(57,215,000)
03 Police and Firemen's Retirement System -	
Non-contributory Insurance	(7,551,000)
03 Police and Firemen's Retirement System	
(P.L.1979, c.109)	(1,785,000)
03 Alternate Benefit Program -Employer	
Contributions.....	(1,335,000)
03 Alternate Benefit Program - Non-contributory	
Insurance	(184,000)
03 Defined Contribution Retirement Program	(902,000)
03 Defined Contribution Retirement Program -	
Non-contributory Insurance	(310,000)
03 State Police Retirement System	(25,582,000)
03 State Police Retirement System	
Non-contributory Insurance	(1,763,000)

- 03 Judicial Retirement System.....(11,643,000)
 - 03 Judicial Retirement System - Non-contributory Insurance.....(919,000)
 - 03 Teachers' Pension and Annuity Fund(1,641,000)
 - 03 Teachers' Pension and Annuity Fund - Post Retirement Medical - State.....(3,600,000)
 - 03 Teachers' Pension and Annuity Fund - Non-contributory Insurance.....(57,000)
 - 03 Pension Adjustment Program.....(1,098,000)
 - 03 Veterans Act Pensions(63,000)
 - 03 Debt Service on Pension Obligation Bonds(115,698,000)
 - 03 Volunteer Emergency Survivor Benefit.....(113,000)
 - 03 State Employees' Health Benefits.....(693,002,000)
 - 03 Other Pension Systems - Post Retirement Medical(103,350,000)
 - 03 State Employees' Prescription Drug Program.....(200,988,000)
 - 03 State Employees' Dental Program - Shared Cost.....(22,992,000)
 - 03 State Employees' Vision Care Program.....(1,000,000)
 - 03 Social Security Tax - State.....(308,834,000)
 - 03 Temporary Disability Insurance Liability(11,341,000)
 - 03 Unemployment Insurance Liability.....(7,856,000)
- Such additional sums as may be required for Public Employees' Retirement System - Post Retirement Medical, Public Employees' Retirement System - Non-contributory Insurance, Police and Firemen's Retirement System - Non-contributory Insurance, Alternate Benefit Program - Employer Contributions, Alternate Benefit Program - Non-contributory Insurance, Defined Contribution Retirement Program, Defined Contribution Retirement Program - Non-contributory Insurance, Teachers' Pension and Annuity Fund - Post Retirement Medical - State, Teachers' Pension and Annuity Fund - Non-contributory Insurance, State Police Retirement System - Non-contributory Insurance, Judicial Retirement System - Non-contributory Insurance, State Employees' Health Benefits, Other Pension Systems - Post Retirement Medical, State Employees' Prescription Drug Program, State Employees' Dental Program - Shared Cost, State Employees' Vision Care Program, Social Security Tax - State, Temporary Disability Insurance Liability, and Unemployment Insurance Liability are appropriated, as the Director of the Division of Budget and Accounting shall determine.
- No monies hereinabove appropriated shall be used to provide additional health insurance coverage to a State or local elected official when that official receives health insurance coverage as a result of holding other public office or employment.
- Notwithstanding the provisions of the "Pension Adjustment Act," P.L.1958, c.143 (C.43:3B-1 et seq.), pension adjustment benefits for State members and beneficiaries of the Consolidated Police and Firemen's Pension Fund, Prison Officers' Pension Fund, and Central Pension Fund shall be paid by the respective pension funds. The amounts hereinabove appropriated for the Pension Adjustment Program for

these benefits as required under the act shall be paid to the Pension Adjustment Fund.

In addition to the sum hereinabove appropriated for Debt Service on Pension Obligation Bonds to make payments under the State Treasurer's contracts authorized pursuant to section 6 of P.L.1997, c.114 (C.34:1B-7.50), there are appropriated such other sums as the Director of the Division of Budget and Accounting shall determine are required to pay all amounts due from the State pursuant to such contracts. The unexpended balance at the end of the preceding fiscal year in the Debt Service on Pension Obligation Bonds account is appropriated for the same purpose.

Such additional sums as may be required for State Employees' Health Benefits may be transferred from the various departmental operating appropriations to this account, as the Director of the Division of Budget and Accounting shall determine.

Such additional sums as may be required for Social Security Tax - State may be transferred from the various departmental operating appropriations to this account, as the Director of the Division of Budget and Accounting shall determine.

Notwithstanding the provisions of any law or regulation to the contrary, fees due to the third party administrator for the Section 125 Tax Savings Program established in 1996 pursuant to section 7 of P.L.1996, c.8 (C.52:14-15.1a) and the Section 132(f) Commuter Transportation Benefit Program established in 2003 pursuant to section 1 of P.L.2001, c.162 (C.52:14-15.1b) shall be paid from amounts hereinabove appropriated for the Social Security Tax - State account, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, fees due to the third party administrator for the Unemployment Compensation Management and Cost Control Program, which was established pursuant to N.J.A.C.17:1-9.6, shall be paid from amounts hereinabove appropriated for the Unemployment Insurance Liability account, subject to the approval of the Director of the Division of Budget and Accounting.

GRANTS-IN-AID

03-9410 Employee Benefits.....	<u>\$878,002,000</u>
Total Grants-in-Aid Appropriation, Employee Benefits	<u>\$878,002,000</u>

Grants-in-Aid:

Special Purpose:

03 Public Employees' Retirement System	(\$22,032,000)
03 Public Employees' Retirement System - Post Retirement Medical	(45,731,000)
03 Public Employees' Retirement System - Non-contributory Insurance	(2,836,000)
03 Police and Firemen's Retirement System.....	(4,804,000)
03 Police and Firemen's Retirement System - Non-contributory Insurance	(336,000)
03 Alternate Benefit Program - Employer Contributions.....	(132,425,000)

- 03 Alternate Benefit Program - Non-contributory Insurance(18,806,000)
 - 03 Teachers' Pension and Annuity Fund(367,000)
 - 03 Teachers' Pension and Annuity Fund - Post Retirement Medical - State(5,000,000)
 - 03 Teachers' Pension and Annuity Fund - Non-contributory Insurance(10,000)
 - 03 Debt Service on Pension Obligation Bonds(6,675,000)
 - 03 State Employees' Health Benefits(343,123,000)
 - 03 Other Pension Systems - Post Retirement Medical(31,725,000)
 - 03 State Employees' Prescription Drug Program(96,170,000)
 - 03 State Employees' Dental Program - Shared Cost(10,739,000)
 - 03 Social Security Tax - State(144,827,000)
 - 03 Temporary Disability Insurance Liability(6,570,000)
 - 03 Unemployment Insurance Liability(5,826,000)
- Such additional sums as may be required for Public Employees' Retirement System - Post Retirement Medical, Public Employees' Retirement System - Non-contributory Insurance, Police and Firemen's Retirement System - Non-contributory Insurance, Alternate Benefit Program - Employer Contributions, Alternate Benefit Program - Non-contributory Insurance, Teachers' Pension and Annuity Fund - Post Retirement Medical - State, Teachers' Pension and Annuity Fund - Non-contributory Insurance, State Employees' Health Benefits, Other Pension Systems - Post Retirement Medical, State Employees' Prescription Drug Program, State Employees' Dental Program - Shared Cost, Social Security Tax - State, Temporary Disability Insurance Liability, and Unemployment Insurance Liability are appropriated, as the Director of the Division of Budget and Accounting shall determine.
- No monies hereinabove appropriated shall be used to provide additional health insurance coverage to a State or local elected official when that official receives health insurance coverage as a result of holding other public office or employment.
- The unexpended balance at the end of the preceding fiscal year in the Debt Service on Pension Obligation Bonds account is appropriated for the same purpose.
- In addition to the sum hereinabove appropriated for Debt Service on Pension Obligation Bonds to make payments under the State Treasurer's contracts authorized pursuant to section 6 of P.L.1997, c.114 (C.34:1B-7.50), there are appropriated such other sums as the Director of the Division of Budget and Accounting shall determine are required to pay all amounts due from the State pursuant to such contracts.
- Notwithstanding the provisions of any law or regulation to the contrary, fees due to the third party administrator for the Unemployment Compensation Management and Cost Control Program, which was established pursuant to N.J.A.C.17:1-9.6, shall be paid from amounts hereinabove appropriated for the Unemployment Insurance Liability account, subject to the approval of the Director of the Division of Budget and Accounting.

9420 Other Interdepartmental Accounts**DIRECT STATE SERVICES**

04-9420 Other Interdepartmental Accounts.....	<u>\$12,425,000</u>
Total Direct State Services Appropriation, Other	
Inter-Departmental Accounts.....	<u>\$12,425,000</u>

Direct State Services:**Special Purpose:**

- 04 To the Governor, for allotment to the various departments or agencies, to meet any condition of emergency or necessity; provided however, that a sum not in excess of \$5,000 shall be available for expenses, including lunches for non-salaried board members and others for whom official reception shall be beneficial to the State (\$375,000)
- 04 Contingency Funds..... (625,000)
- 04 Interest on Short Term Notes (6,000,000)
- 04 Banking Services..... (4,000,000)
- 04 Debt Issuance - Special Purpose (1,100,000)
- 04 Catastrophic Illness in Children Relief Fund - Employer Contributions (225,000)
- 04 Interest on Interfund Borrowing..... (100,000)

Unless otherwise indicated, funds hereinabove appropriated may be allotted by the Director of the Division of Budget and Accounting to the various departments and agencies.

Notwithstanding the provisions of N.J.S.2A:153-1 et seq., there is allocated at the discretion of the Governor, an amount up to \$50,000, from the Special Purpose amount hereinabove appropriated to meet any condition of emergency or necessity, as a reward for the capture and return of Joanne Chesimard.

There are appropriated to the Emergency Services Fund such sums as are required to meet the costs of any emergency occasioned by aggression, civil disturbance, sabotage, or disaster as recommended by the Governor's Advisory Council for Emergency Services and approved by the Governor, and subject to the approval of the Director of the Division of Budget and Accounting. In the event that the Governor's Advisory Council for Emergency Services is unable to convene due to any such emergency described above, there shall be appropriated to the Emergency Service Fund such sums as are required to meet the costs of any such emergency described above, and payments from the Fund shall be made by the State Treasurer upon approval of the Governor and the Director of the Division of Budget and Accounting.

The unexpended balance at the end of the preceding fiscal year in the Governor's Contingency Fund is appropriated for the same purpose.

Such sums as may be necessary for payment of expenses incurred by issuing officials appointed under the several bond acts of the State are appropriated for the purposes and from the sources defined in those acts.

9430 Salary Increases and Other Benefits**DIRECT STATE SERVICES**

05-9430 Salary Increases and Other Benefits	<u>\$32,500,000</u>
Total Direct State Services Appropriation, Salary	
Increases and Other Benefits	<u>\$32,500,000</u>

Direct State Services:

Special Purpose:

05 Salary Increases and Other Benefits.....(\$20,000,000)

05 Unused Accumulated Sick Leave Payments(12,500,000)

The sums hereinabove appropriated to the various State departments, agencies or commissions for the cost of salaries, wages, or other benefits shall be allotted as the Director of the Division of Budget and Accounting shall determine.

Notwithstanding the provisions of any law or regulation to the contrary, including R.S.34:15-49 and section 1 of P.L.1981, c.353 (C.34:15-49.1), the State Treasurer, the Chairperson of the Civil Service Commission, and the Director of the Division of Budget and Accounting shall establish directives governing salary ranges and rates of pay, including salary increases. The implementation of such directives shall be made effective at the first full pay period of the fiscal year as determined by such directives, with timely notification of such directives to the Joint Budget Oversight Committee or its successor. Such directives shall not be considered an "administrative rule" or "rule" within the meaning of subsection (e) of section 2 of P.L.1968, c.410 (C.52:14B-2), but shall be considered exempt under paragraphs (1) and (2) of subsection (e) of section 2 of P.L.1968, c.410 (C.52:14B-2), and shall not be subject to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.). Nothing herein shall be construed as applicable to the Presidents of the State Colleges, Rutgers, The State University, the University of Medicine and Dentistry of New Jersey and the New Jersey Institute of Technology.

No salary range or rate of pay shall be increased or paid in any State department, agency, or commission without the approval of the Director of the Division of Budget and Accounting. Nothing herein shall be construed as applicable to unclassified personnel of the Legislative Branch or unclassified personnel of the Judicial Branch.

Any sums appropriated for Salary Increases and Other Benefits shall be made available for any person holding State office, position or employment whose compensation is paid directly or indirectly, in whole or in part, from State funds, including any person holding office, position or employment under the Palisades Interstate Park Commission.

The unexpended balance at the end of the preceding fiscal year in the Salary Increases and Other Benefits account is appropriated for the same purposes.

In addition to the amount hereinabove appropriated for Unused Accumulated Sick Leave Payments, there are appropriated such sums as may be necessary for payments of unused accumulated sick leave.

Interdepartmental Accounts, Total State Appropriation \$3,703,920,000

Summary of Interdepartmental Accounts Appropriations
(For Display Purposes Only)

Appropriations by Category:

Direct State Services.....	\$2,481,906,000
Grants-in-Aid.....	1,030,705,000
Capital Construction.....	191,309,000

Appropriations by Fund:

General Fund	\$3,703,920,000

98 THE JUDICIARY**10 Public Safety and Criminal Justice****15 Judicial Services****DIRECT STATE SERVICES**

01-9710 Supreme Court.....	\$6,891,000
02-9715 Superior Court - Appellate Division.....	21,351,000
03-9720 Civil Courts	106,982,000
04-9725 Criminal Courts	131,719,000
05-9730 Family Courts	118,123,000
06-9735 Municipal Courts	1,598,000
07-9740 Probation Services	137,763,000
08-9745 Court Reporting	8,898,000
09-9750 Public Affairs and Education.....	2,953,000
10-9755 Information Services	18,169,000
11-9760 Trial Court Services.....	107,195,000
12-9765 Management and Administration	<u>11,339,000</u>
Total Direct State Services Appropriation, Judicial Services.....	<u>\$672,981,000</u>

Direct State Services:**Personal Services:**

Chief Justice	(\$193,000)
Associate Justices.....	(1,113,000)
Judges.....	(71,244,000)
Salaries and Wages	(437,655,000)
Materials and Supplies	(7,755,000)
Services Other Than Personal	(32,423,000)
Maintenance and Fixed Charges	(1,852,000)

Special Purpose:

01 Rules Development	(200,000)
04 Drug Court Treatment/Aftercare.....	(26,508,000)
04 Drug Court Operations	(16,777,000)
04 Drug Court Judgeships	(2,569,000)

05 Family Crisis Intervention.....	(1,076,000)
05 Child Placement Review Advisory Council.....	(82,000)
05 Kinship Legal Guardianship	(3,711,000)
05 Child Support and Paternity Program Title IV-D (Family Court)	(15,112,000)
07 Intensive Supervision Program	(15,757,000)
07 Juvenile Intensive Supervision Program	(2,269,000)
07 Child Support and Paternity Program Title IV-D (Probation)	(29,393,000)
11 Child Support and Paternity Program Title IV-D (Trial)	(2,561,000)
12 Affirmative Action and Equal Employment Opportunity	(770,000)
Additions, Improvements and Equipment	(3,961,000)
The unexpended balances at the end of the preceding fiscal year in the Civil Arbitration Program and Drug Court Programs are appropriated subject to the approval of the Director of the Division of Budget and Accounting.	
Notwithstanding the provisions of any law or regulation to the contrary, receipts der- ived from fees under the Special Civil Part service of process via certified mailers are appropriated for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.	
The amounts hereinabove appropriated in the Drug Court Treatment/Aftercare account shall be transferred to the Department of Human Services to fund treatment, after- care and administrative services associated with the Drug Court Program, subject to the approval of the Director of the Division of Budget and Accounting.	
Receipts derived from the increase in fees collected by the Judiciary pursuant to P.L.2002, c.34 and related increases provided by operation of N.J.S.22A:2-5 and section 2 of P.L.1993, c.74 (C.22A:5-1) are appropriated from the Court Technol- ogy Improvement Fund for the purpose of offsetting the costs of development, es- tablishment, operation and maintenance of the Judiciary computerized court in- formation systems, subject to the approval of the Director of the Division of Budget and Accounting.	
The Judiciary, Total State Appropriation	<u>\$672,981,000</u>
Receipts from charges to certain Special Purpose accounts listed hereinabove are ap- propriated for services provided from these funds.	
Receipts from charges to the Superior Court Trust Fund, New Jersey Lawyers Fund for Client Protection, Disciplinary Oversight Committee, Board on Attorney Certifica- tion, Bar Admission Financial Committee, Parents' Education Fund, Automated Traffic System Fund, Municipal Court Administrator Certification Program, Com- prehensive Enforcement Program, Courts Computerized Information Systems Fund, County Corrections Information Systems, and Mandatory Continuing Legal Education Program are appropriated for services provided from these funds.	

The unexpended balances at the end of the preceding fiscal year not to exceed \$10,000,000 in these respective accounts are appropriated, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, in addition to the amount hereinabove appropriated, revenues in excess of \$10,100,000 in the 21st Century Justice Improvement Fund are appropriated to Judiciary for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.

Summary of Judiciary Appropriations
(For Display Purposes Only)

Appropriations by Category:

Direct State Services.....\$672,981,000

Appropriations by Fund:

General Fund\$672,981,000

DEBT SERVICE

42 DEPARTMENT OF ENVIRONMENTAL PROTECTION

40 Community Development and Environmental Management

46 Environmental Planning and Administration

99-4800 Interest on Bonds\$8,931,000

99-4800 Bond Redemption 10,395,000

Total Direct State Services Appropriation, Department of

Environmental Protection\$19,326,000

Debt Service:

Special Service:

Interest:

Clean Waters Bonds (P.L.1976, c.92) (\$33,000)

State Land Acquisition and Development Bonds

(P.L.1978, c.118) (47,000)

Natural Resources Bonds (P.L.1980, c.70) (232,000)

Water Supply Bonds (P.L.1981, c.261)..... (209,000)

Pinelands Infrastructure Trust Bonds (P.L.1985, c.302) (13,000)

Green Acres, Cultural Centers and Historic Preservation

Bonds (P.L.1987, c.265) (197,000)

New Jersey Open Space Preservation Bonds

(P.L.1989, c.183) (55,000)

Stormwater Management and Combined Sewer Overflow

Abatement Bonds (P.L.1989, c.181)..... (195,000)

Green Acres, Clean Water, Farmland and Historic

Preservation Bonds (P.L.1992, c.88) (411,000)

Green Acres, Farmland and Historic Preservation and Blue Acres Bonds (P.L.1995, c.204).....	(523,000)
Port of New Jersey Revitalization, Dredging Bonds (P.L.1996, c.70)	(2,247,000)
Dam, Lake, Stream, Water Resources, and Wastewater Treatment Project Bonds (P.L.2003, c.162)	(3,317,000)
Green Acres, Farmland, Blue Acres, and Historic Preservation Bonds (P.L.2007, c.119)	(1,452,000)
Redemption:	
Clean Waters Bonds (P.L.1976, c.92)	(95,000)
State Land Acquisition and Development Bonds (P.L.1978, c.118)	(90,000)
Green Acres, Cultural Centers and Historic Preservation Bonds (P.L.1987, c.265)	(155,000)
Stormwater Management and Combined Sewer Overflow Abatement Bonds (P.L.1989, c.181)	(105,000)
Green Acres, Clean Water, Farmland and Historic Preservation Bonds (P.L.1992, c.88)	(75,000)
Green Acres, Farmland and Historic Preservation and Blue Acres Bonds (P.L.1995, c.204)	(210,000)
Port of New Jersey Revitalization Dredging Bonds (P.L.1996, c.70)	(1,555,000)
Dam, Lake, Stream, Water Resources, and Wastewater Treatment Project Bonds (P.L.2003, c.162)	(8,110,000)
Total Debt Service Appropriation, Department of Environmental Protection	<u>\$19,326,000</u>

82 DEPARTMENT OF THE TREASURY

70 Government Direction, Management, and Control

76 Management and Administration

99-2000 Interest on Bonds	\$94,261,000
99-2000 Bond Redemption	<u>318,360,000</u>
Total Debt Service Appropriation, Department of the Treasury	<u>\$412,621,000</u>

Debt Service:

Special Purpose:

Interest:

Energy Conservation Bonds (P.L.1980, c.68)	(\$2,000)
Refunding Bonds (P.L.1985, c.74, as amended by P.L.1992, c.182)	(92,057,000)
Jobs, Education and Competitiveness Bonds (P.L.1988, c.78)	(42,000)
Public Purpose Buildings and Community-Based Facilities Construction Bonds (P.L.1989, c.184)	(48,000)

Developmental Disabilities Waiting List Reduction and Human Services Facilities Construction Bonds (P.L.1994, c.108)	(290,000)
Statewide Transportation and Local Bridge Bond Act of 1999 (P.L.1999, c.181)	(1,822,000)
Redemption:	
Refunding Bonds (P.L.1985, c.74, as amended by P.L.1992, c.182)	(318,265,000)
Developmental Disabilities Waiting List Reduction and Human Services Facilities Construction Bonds (P.L.1994, c.108)	(95,000)
Total Debt Service Appropriation, Department of the Treasury	<u>\$412,621,000</u>
Total, Debt Service	<u>\$431,947,000</u>
Less:	
Savings From Debt Refinancing	(\$20,000,000)
Total Appropriation, Debt Service	<u>\$411,947,000</u>

Notwithstanding the provisions of any law or regulation to the contrary, such sums as may be needed for the payment of interest and principal due from the issuance of any bonds authorized under the several bond acts of the State, or bonds issued to refund such bonds, are appropriated and shall first be charged to the earnings from the investments of such bond proceeds, or repayments of loans, or any other monies in the applicable bond funds, or all of these, established under such bond acts, and monies are appropriated from such bond funds for the purpose of paying interest and principal on the bonds issued pursuant to such bond acts. Where required by law, such sums shall be used to fund a reserve for the payment of interest and principal on the bonds authorized under the bond act. Furthermore, where required by law, the amounts hereinabove appropriated are allocated to the projects heretofore approved by the Legislature pursuant to those bond acts. The Director of the Division of Budget and Accounting is authorized to reallocate amounts hereinabove appropriated among the various debt service accounts to permit the proper debt service payments.

There are appropriated such sums as may be needed for the payment of debt service administrative costs.

Subsequent to the refunding of bonds in the current fiscal year, the Director of the Division of Budget and Accounting is authorized to allocate amounts hereinabove appropriated among the various debt service accounts to reflect the debt service savings of the refunding and to permit the proper debt service payments.

Summary of Appropriations - All Departments

(For Display Purposes Only)

Appropriations by Category:

Direct State Services	\$6,764,529,000
Grants-in-Aid	9,698,170,000

State Aid	13,396,726,000
Capital Construction	1,383,582,000
Debt Service	411,947,000
<i>Appropriation by Fund:</i>	
General Fund	\$19,122,388,000
Property Tax Relief Fund	12,187,044,000
Casino Revenue Fund	283,978,000
Casino Control Fund	55,344,000
Gubernatorial Elections Fund	6,200,000

Total Appropriation, All State Funds \$31,654,954,000

FEDERAL FUNDS

10 DEPARTMENT OF AGRICULTURE

40 Community Development and Environmental Management

49 Agricultural Resources, Planning, and Regulation

01-3310 Animal Disease Control	\$575,000
02-3320 Plant Pest and Disease Control	1,342,000
03-3330 Agriculture and Natural Resources	100,000
05-3350 Food and Nutrition Services	418,942,000
06-3360 Marketing and Development Services	2,276,000
08-3380 Farmland Preservation	<u>4,520,000</u>

Total Appropriation, Agricultural Resources, Planning, and

Regulation \$427,755,000

Personal Services:

Salaries and Wages	(\$4,620,000)
Employee Benefits	(1,650,000)
Materials and Supplies	(367,000)
Services Other Than Personal	(2,614,000)

Maintenance and Fixed Charges (950,000)

Special Purpose:

Plant Pest Survey and Detection Program	(65,000)
Emerald Ash Borer Detection	(25,000)
Biological Control of Garlic Mustard	(85,000)
Child Nutrition Administration	(1,367,000)
Child Care Administration	(78,000)
Food Distribution Administration Expense Fund	(19,000)
Fresh Fruit and Vegetable Program	(56,000)
Meal Pattern Technical Assistance Fund	(877,000)
Country of Origin Labeling (COOL)	(105,000)
Cooperative Inspection Service	(9,000)
Fish Inspection Service	(105,000)

Other Special Purpose	(120,000)
State Aid and Grants:	
Food Stamp - TEFAP	(500,000)
Farmland Preservation	(4,500,000)
Fresh Fruit and Vegetable Program	(3,801,000)
Child Nutrition - School Lunch	(257,400,000)
Child Nutrition - Special Milk	(1,300,000)
Child Nutrition - School Breakfast	(61,000,000)
Child Care Food	(70,000,000)
Child Care Sponsor	(1,100,000)
Cash in Lieu of Commodities	(3,990,000)
Child Nutrition - Summer Programs	(8,400,000)
Summer Sponsor Administration	(840,000)
State Aid and Grants	(1,047,000)
Additions, Improvements and Equipment	(765,000)
Total Appropriation, Department of Agriculture	<u>\$427,755,000</u>

14 DEPARTMENT OF BANKING AND INSURANCE

50 Economic Planning, Development, and Security

52 Economic Regulation

02-3120 Actuarial Services	<u>\$5,820,000</u>
Total Appropriation, Economic Regulation	<u>\$5,820,000</u>
Special Purpose:	
Patient Protection and Affordable Care Act	(\$3,146,000)
Affordable Care Act Exchange	(2,674,000)
Total Appropriation, Department of Banking and Insurance	<u>\$5,820,000</u>

16 DEPARTMENT OF CHILDREN AND FAMILIES

50 Economic Planning, Development, and Security

55 Social Services Programs

01-1610 Child Protection and Permanency Services	\$281,970,000
02-1620 Child Integrated System of Care Services	138,493,000
03-1630 Family and Community Partnership Services	24,877,000
04-1600 Education Services	2,170,000
05-1600 Child Welfare Training Academy Services and Operations	2,059,000
99-1600 Administration and Support Services	1,369,000
99-1610 Administration and Support Services	15,352,000
99-1620 Administration and Support Services	801,000
Total Appropriation, Social Services Programs	<u>\$467,091,000</u>
Personal Services:	
Salaries and Wages	(\$222,973,000)
Materials and Supplies	(2,620,000)

Services Other Than Personal	(11,401,000)
Maintenance and Fixed Charges	(16,956,000)
Special Purpose:	
Safety and Permanency in the Courts	(500,000)
State Aid and Grants	(206,565,000)
Additions, Improvements and Equipment	(6,076,000)
Total Appropriation, Department of Children and Families	<u>\$467,091,000</u>

22 DEPARTMENT OF COMMUNITY AFFAIRS

40 Community Development and Environmental Management

41 Community Development Management

02-8020 Housing Services	\$279,261,000
06-8015 Uniform Construction Code	<u>30,000</u>
Total Appropriation, Community Development Management	<u>\$279,291,000</u>
Personal Services:	
Salaries and Wages	(\$14,726,000)
Employee Benefits	(5,586,000)
Materials and Supplies	(260,000)
Services Other Than Personal	(3,369,000)
Maintenance and Fixed Charges	(2,343,000)
Special Purpose:	
Shelter Plus Care Program	(13,000)
Moderate Rehabilitation Housing Assistance	(85,000)
Section 8 Housing Voucher Program	(1,244,000)
Housing Opportunities for Persons with AIDS	(6,000)
Small Cities Block Grant Program	(32,000)
National Affordable Housing - HOME Investment	
Partnerships	(29,000)
Lead Abatement Certification	(2,000)
Other Special Purpose	(165,000)
State Aid and Grants:	
Transitional Housing - Homeless	(70,000)
Housing Opportunities for Persons with AIDS Post -	
Incarcerated	(1,126,000)
State Aid and Grants	(250,235,000)

50 Economic Planning, Development, and Security

55 Social Services Programs

05-8050 Community Resources	<u>\$175,000,000</u>
Total Appropriation, Social Services Programs	<u>\$175,000,000</u>
Personal Services:	
Salaries and Wages	(\$1,967,000)

Employee Benefits	(748,000)
Materials and Supplies.....	(71,000)
Services Other Than Personal	(1,019,000)
Maintenance and Fixed Charges	(21,000)
Special Purpose:	
Other Special Purpose	(206,000)
State Aid and Grants	(170,968,000)
Total Appropriation, Department of Community Affairs	<u>\$454,291,000</u>

26 DEPARTMENT OF CORRECTIONS

10 Public Safety and Criminal Justice

16 Detention and Rehabilitation

08-7080 Institutional Care and Treatment	\$98,000
08-7110 Institutional Care and Treatment	466,000
08-7120 Institutional Care and Treatment	233,000
08-7130 Institutional Care and Treatment	224,000
13-7025 Institutional Program Support	<u>10,468,000</u>
Total Appropriation, Detention and Rehabilitation	<u>\$11,489,000</u>

Personal Services:

Salaries and Wages	(\$4,556,000)
Employee Benefits	(432,000)

Special Purpose:

Edna Mahan Visitation Program	(80,000)
Title I - Neglected and Delinquent	(63,000)
Title I - Neglected and Delinquent	(48,000)
Title I - Neglected and Delinquent	(33,000)
Promoting Responsible Fatherhood	(514,000)
State Criminal Alien Assistance Program	(1,190,000)
Second Chance Re-Entry Project - US Department of Justice	(500,000)
Substance Abuse and Mental Health Services Administration Offender.....	(400,000)
Second Chance Statewide Recidivism Reduction - US Department of Justice	(1,000,000)
Inmate Vocational Certifications	(173,000)
Central Communications Upgrade - US Department of Homeland Security	(1,000,000)
Central Communications Upgrade - US Department of Commerce.....	(1,000,000)
Technology Enhancements	(500,000)

17 Parole

03-7010 Parole	<u>\$500,000</u>

Total Appropriation, Parole \$500,000
 State Aid and Grants (\$500,000)

19 Central Planning, Direction, and Management

99-7000 Administration and Support Services \$1,105,000
 Total Appropriation, Central Planning, Direction, and Management .. \$1,105,000

Personal Services:

Salaries and Wages (\$683,000)

Employee Benefits (253,000)

Services Other Than Personal (10,000)

Special Purpose:

Perkins - Vocational Education (159,000)

Total Appropriation, Department of Corrections \$13,094,000

34 DEPARTMENT OF EDUCATION

30 Educational, Cultural, and Intellectual Development

31 Direct Educational Services and Assistance

05-5064 Bilingual Education \$21,095,000

06-5064 Programs for Disadvantaged Youth 313,327,000

07-5065 Special Education 369,970,000

Total Appropriation, Direct Educational Services and Assistance .. \$704,392,000

Personal Services:

Salaries and Wages (\$8,407,000)

Employee Benefits (3,839,000)

Materials and Supplies (50,000)

Services Other Than Personal (12,254,000)

Special Purpose:

Language Acquisition Discretionary Administration (98,000)

Migrant Education - Administration/Discretionary (82,000)

Migrant Coordination Program (77,000)

MSix State Data Quality Grants (28,000)

Bilingual and Compensatory Education - Homeless

Children and Youth (10,000)

Title I - Administration Program Improvement (24,000)

Individuals with Disabilities Education Act Basic State

Grant (1,894,000)

Individuals with Disabilities Education Act Preschool

Grants (277,000)

IDEA Part B - Discretionary Administration (956,000)

State Aid and Grants (676,394,000)

Additions, Improvements and Equipment (2,000)

32 Operation and Support of Educational Institutions

12-5011 Marie H. Katzenbach School for the Deaf	<u>\$1,184,000</u>
Total Appropriation, Operation and Support of Educational Institutions	<u>\$1,184,000</u>
Personal Services:	
Salaries and Wages	(\$607,000)
Employee Benefits	(230,000)
Materials and Supplies	(13,000)
Services Other Than Personal	(111,000)
Special Purpose:	
Vocational Education Program	(34,000)
IDEA (State Institutions), Handicapped	(149,000)
IDEA, Handicapped: Katzenbach/Deaf/Blind and CSPD	(30,000)
Preschool Entitlement - Katzenbach School	(8,000)
Additions, Improvements and Equipment	(2,000)

33 Supplemental Education and Training Programs

20-5062 General Vocational Education	<u>\$22,486,000</u>
Total Appropriation, Supplemental Education and Training Programs	<u>\$22,486,000</u>
Personal Services:	
Salaries and Wages	(\$1,495,000)
Employee Benefits	(568,000)
Materials and Supplies	(48,000)
Services Other Than Personal	(580,000)
Special Purpose:	
Vocational Education - Basic Grants - Administration	(382,000)
Vocational Education - Title II B Leadership Activities	(513,000)
State Aid and Grants	(18,900,000)

34 Educational Support Services

30-5063 Standards, Assessments and Curriculum	\$72,524,000
32-5061 Teacher and Leader Effectiveness	205,000
35-5069 Early Childhood Education	305,000
40-5064 Student Services	<u>22,969,000</u>
Total Appropriation, Educational Support Services	<u>\$96,003,000</u>
Personal Services:	
Salaries and Wages	(\$2,482,000)
Employee Benefits	(943,000)
Materials and Supplies	(8,000)
Services Other Than Personal	(8,109,000)
Special Purpose:	

State Assessments	(197,000)
State Grants for Improving Teacher Quality	(445,000)
Advanced Placement Incentive Program	(17,000)
National Assessment of Educational Progress State Coordinator	(6,000)
Foreign Language Assistance	(175,000)
Public Charter Schools	(77,000)
Troops-to-Teachers Program	(11,000)
Head Start Collaboration	(156,000)
21st Century Schools	(382,000)
AIDS Prevention Education	(216,000)
National Community Service - Learn and Serve America	(3,000)
State Aid and Grants	(82,776,000)

35 Education Administration and Management

41-5092 Data, Research Evaluation and Reporting	\$4,000,000
99-5093 Administration and Support Services	71,000
99-5095 Administration and Support Services	<u>4,556,000</u>
Total Appropriation, Education Administration and Management	<u>\$8,627,000</u>
Personal Services:	
Salaries and Wages	(\$2,864,000)
Employee Benefits	(1,097,000)
Special Purpose:	
Statewide Longitudinal Data Systems Research Grant	(4,000,000)
NCES Performance Based Data Management Initiative	(71,000)
Improving America's Schools Act - Consolidated Administration	(595,000)
Total Appropriation, Department of Education	<u>\$832,692,000</u>

42 DEPARTMENT OF ENVIRONMENTAL PROTECTION

40 Community Development and Environmental Management

42 Natural Resource Management

11-4870 Forest Resource Management	\$7,095,000
12-4875 Parks Management	32,940,000
13-4880 Hunters' and Anglers' License Fund	14,685,000
14-4885 Shellfish and Marine Fisheries Management	4,770,000
20-4880 Wildlife Management	1,000,000
21-4895 Natural Resources Engineering	<u>4,370,000</u>
Total Appropriation, Natural Resource Management	<u>\$64,860,000</u>
Personal Services:	
Salaries and Wages	(\$5,459,000)
Employee Benefits	(1,901,000)
Special Purpose:	

Rural Community Fire Protection Program	(193,000)
Forest Resource Management - Cooperative Forest Fire	
Control	(1,323,000)
Asian Longhorned Beetle Project.....	(2,300,000)
Southern Pine Beetle	(300,000)
Gypsy Moth Suppression	(420,000)
Countywide Wildfire Defense.....	(50,000)
Consolidated Forest Management	(751,000)
Assistance to Firefighters - Wildfire and Arson	
Prevention.....	(200,000)
Firewise in the Pines	(200,000)
Wildland and Urban Interface II	(100,000)
Defensible Space	(400,000)
Stewardship Land Type Association	(30,000)
Conservation Education	(50,000)
Incentives Program.....	(200,000)
Forest Health Monitoring	(80,000)
Land and Water Conservation Fund.....	(6,000,000)
Pinelands Grant - Acquisition	(1,000,000)
Historic Preservation Survey and Planning	(178,000)
Endangered Plant Species Supplemental Funding	(17,000)
Sussex Branch Trail Improvements	(500,000)
Seashore Line	(500,000)
Delaware and Raritan Canal East Side Path (ISTEA)	(565,000)
Forest Legacy	(4,000,000)
Forest Legacy Administration.....	(4,000)
Highlands Conservation	(3,000,000)
National Recreational Trails.....	(1,800,000)
Severe Repetitive Loss - Passaic River Basin	(2,000,000)
Severe Repetitive Loss - Lincoln Park Borough	(2,000,000)
Scenic Byways	(3,500,000)
National Coastal Wetlands Conservation	(3,000,000)
Cape May Point State Park Bikeway (ISTEA).....	(200,000)
Liberty State Park Ferry Slip Restoration (ISTEA).....	(1,600,000)
Delaware and Raritan Canal State Park Old Rose to	
Mulberry St. (ISTEA)	(900,000)
Liberty State Park Archival Facility (ISTEA)	(660,000)
Appalachian Trail Improvement (ISTEA).....	(50,000)
Bog Turtle Recovery Acquisition.....	(500,000)
Hunters' and Anglers' License Fund.....	(925,000)
Hunter Safety Training.....	(781,000)
Endangered Species	(84,000)

Council for the Advancement of Hunting and Shooting	
Sports.....	(50,000)
Species of Greater Conservation Need (SGCN) Research..	(400,000)
White Nose Syndrome Grants to States	(39,000)
Assessment of the Vulnerability of NJ's Habitat and	
Wildlife to Climate Change.....	(100,000)
Hunters' and Anglers' License Fund/N.J. Statewide	
Fisheries Development	(2,084,000)
Northeast Wildlife Teamwork Strategy	(60,000)
Boat Access (Fish and Wildlife)	(1,000,000)
Wildlife Habitat Incentives Program (WHIP).....	(150,000)
Fish and Wildlife Input to Activities - Projects of Others...	(230,000)
State Wildlife Grant Projects	(1,000,000)
Avian Influenza.....	(150,000)
Fish and Wildlife Technical Guidance	(45,000)
Fish and Wildlife Action Plan.....	(16,000)
New Jersey's Landscape Project	(369,000)
Chronic Wasting Disease	(110,000)
White Nose Syndrome	(24,000)
NJ Fish, Wildlife and Anadromous Fishery Coordination....	(66,000)
Research In Freshwater Fisheries Management	(283,000)
Fish Culture and Stocking Project.....	(1,101,000)
Aquatic Recreational Resource Awareness and	
Education Project	(159,000)
Wildlife Research and Management	(698,000)
Fish and Wildlife Health	(78,000)
Marine Fisheries Investigation and Management	(341,000)
Electronic Vessel Trip Reporting	(170,000)
Fisheries Management Council	(50,000)
Atlantic Coastal Fisheries	(74,000)
Inventory of New Jersey Surf Clam Resources.....	(153,000)
Artificial Reef Program - PSE&G/NJPDES Permit Fees....	(300,000)
Clean Vessels	(884,000)
Marine Fisheries Law Enforcement	(900,000)
Endangered and Nongame Species Program State Wildlife	
Grants	(590,000)
Community Assistance Program	(33,000)
Cooperative Technical Partnership	(3,801,000)
National Dam Safety Program (FEMA).....	(93,000)
Other Special Purpose	(1,538,000)

43 Science and Technical Programs

05-4840 Water Supply..... \$23,200,000

07-4850 Water Monitoring and Standards	4,350,000
15-4801 Land Use Regulation	9,800,000
15-4890 Land Use Regulation	1,550,000
18-4810 Office of Science Support.....	1,550,000
22-4861 New Jersey Geological Survey	360,000
90-4801 Environmental Policy and Planning	<u>8,208,000</u>
Total Appropriation, Science and Technical Programs.....	<u>\$49,018,000</u>
Personal Services:	
Salaries and Wages	(\$4,755,000)
Employee Benefits	(1,420,000)
Services Other Than Personal	(20,000)
Special Purpose:	
Drinking Water State Revolving Fund	(583,000)
Drinking Water State Revolving Fund	(21,000,000)
Water Pollution Control Program	(1,570,000)
Water Pollution S106 Enhancements	(300,000)
Risk Communication Shellfish Consumption	(50,000)
Coastal Zone Management Implementation.....	(646,000)
Coastal Estuarine Land Program	(4,000,000)
State Wetlands Conservation Plan	(550,000)
Hudson River Walkway	(4,000,000)
Coastal Zone Management Grant - Section 309.....	(351,000)
Coastal Zone Management - 310	(200,000)
Urban Community Air Toxics Program	(800,000)
Multimedia	(477,000)
National Geologic Mapping Program	(12,000)
Earthquake Hazard Reduction.....	(20,000)
Geological and Geophysical Data Preservation USGS	(30,000)
Water Pollution Control	(4,000)
Coastal Wetlands Conservation (Land Acquisition)	(1,000,000)
Environmental and Health Effects Tracking	(223,000)
Green Energy	(1,000,000)
Water Monitoring and Planning.....	(634,000)
Nonpoint Source Implementation (319H)	(4,010,000)
Beach Monitoring and Notification.....	(568,000)
Other Special Purpose	(795,000)

44 Site Remediation and Waste Management

19-4815 Publicly-Funded Site Remediation	\$5,450,000
23-4815 Solid and Hazardous Waste Management	360,000
23-4910 Solid and Hazardous Waste Management	2,035,000
27-4815 Remediation Management and Response.....	<u>7,400,000</u>
Total Appropriation, Site Remediation and Waste Management	<u>\$15,245,000</u>

Personal Services:

Salaries and Wages(\$2,590,000)
 Employee Benefits(982,000)

Special Purpose:

Superfund Core Grant - Cpc(417,000)
 Superfund Grants(5,000,000)
 Hazardous Waste - Resource Conservation Recovery
 Act(1,327,000)
 Preliminary Assessments/Site Inspections(1,223,000)
 Brownfields(1,310,000)
 Remedial Planning Support Agency Assistance(550,000)
 Underground Storage Tanks(1,077,000)
 Other Special Purpose(769,000)

45 Environmental Regulation

01-4820 Radiation Protection \$500,000
 02-4892 Air Pollution Control 10,150,000
 09-4860 Public Wastewater Facilities 61,000,000
 16-4891 Water Monitoring and Planning 125,000
 Total Appropriation, Environmental Regulation..... \$71,775,000

Personal Services:

Salaries and Wages(\$2,725,000)
 Employee Benefits(1,026,000)

Special Purpose:

Radon Program(230,000)
 Air Pollution Maintenance Program(4,648,000)
 BioWatch Monitoring(276,000)
 Particulate Monitoring Grant(619,000)
 Clean Diesel Retrofit.....(400,000)
 Clean Water State Revolving Fund(61,000,000)
 Underground Injection Control(48,000)
 Other Special Purpose(803,000)

46 Environmental Planning and Administration

26-4805 Regulatory and Governmental Affairs \$150,000
 99-4800 Administration and Support Services 2,450,000
 Total Appropriation, Environmental Planning and Administration \$2,600,000

Special Purpose:

New Jersey Classroom Reform Grant(\$150,000)
 National Information Exchange Network(2,300,000)
 National Spatial Data Infrastructure.....(150,000)

47 Compliance and Enforcement

02-4855 Air Pollution Control	\$2,500,000
04-4835 Pesticide Control	550,000
08-4855 Water Pollution Control.....	1,250,000
15-4855 Land Use Regulation	600,000
23-4855 Solid and Hazardous Waste Management	<u>2,600,000</u>
Total Appropriation, Compliance and Enforcement	<u>\$7,500,000</u>

Personal Services:

Salaries and Wages	(\$3,336,000)
Employee Benefits	(1,231,000)

Special Purpose:

Air Pollution Maintenance Program.....	(992,000)
Pesticide Control Consolidated	(136,000)
Underground Storage Tank Program Standard Compliance Inspections.....	(456,000)
Coastal Zone Management Implementation.....	(83,000)
Hazardous Waste - Resource Conservation Recovery Act	(290,000)
Other Special Purpose	(976,000)
Total Appropriation, Department of Environmental Protection	<u>\$210,998,000</u>

46 DEPARTMENT OF HEALTH**20 Physical and Mental Health****21 Health Services**

01-4215 Vital Statistics.....	\$1,100,000
02-4220 Family Health Services.....	245,534,000
03-4230 Public Health Protection Services	97,732,000
08-4280 Laboratory Services	5,877,000
12-4245 AIDS Services	<u>80,614,000</u>
Total Appropriation, Health Services.....	<u>\$430,857,000</u>

Personal Services:

Salaries and Wages	(\$36,175,000)
Employee Benefits	(13,323,000)
Materials and Supplies.....	(2,798,000)
Services Other Than Personal	(20,524,000)
Maintenance and Fixed Charges.....	(1,053,000)

Special Purpose:

Supplemental Food Program - Women, Infants, and Children (WIC).....	(121,070,000)
N.J. Project: Providing a MED Home in a Neighborhood of Services	(137,000)
SSDI	(65,000)
Women, Infants, and Children (WIC) Farmer's Market Nutrition Program.....	(2,200,000)

Early Hearing Detection and Intervention (EHDI)	
Tracking, Research	(21,000)
USDA Incentive Program	(144,000)
Maternal and Child Health (MCH) Early Childhood	
Comprehensive System	(23,000)
Child Nutrition Program - Inspection Services	(97,000)
Food Inspection	(79,000)
Environmental Health Education	(196,000)
Adult Blood Lead Surveillance	(12,000)
Adult Viral Hepatitis Prevention	(51,000)
Public Employees Occupational Safety and Health -	
State Plan	(286,000)
Surveillance of Hazardous Substance Emergency Events ..	(113,000)
National Cancer Prevention and Control - Public	
Health	(1,161,000)
Pandemic Influenza Healthcare Preparedness	(1,935,000)
National Violent Death Reporting System	(16,000)
H1N1 Public Health Emergency Response	(18,404,000)
Fundamental and Expanded Occupational Health	(587,000)
West Nile Virus - Laboratory	(190,000)
Tuberculosis Control Program	(19,000)
Clinical Laboratory Improvement Amendments Program ..	(163,000)
Emergency Preparedness For Bioterrorism - Laboratories ..	(162,000)
Food Emergency Response Network -E. Coli in Ground	
Beef	(109,000)
HIV/AIDS Surveillance Grant	(20,000)
HIV/AIDS Events without Care in New Jersey	(30,000)
Enhanced HIV/AIDS Surveillance - Perinatal	(143,000)
Minority AIDS Initiatives	(24,000)
Other Special Purpose	(10,093,000)
State Aid and Grants:	
Preventative Health and Health Services Block Grant	(1,057,000)
State Office of Rural Health	(180,000)
NJ Personal Responsibility Education Program	(1,410,000)
Abstinence Education - Family Health Services (FHS)	(853,000)
Asthma Surveillance and Coalition Building	(465,000)
National Cancer Prevention and Control	(2,750,000)
Commodity Supplemental Food Program	(200,000)
TASE - Tobacco Age of Sale Enforcement	(260,000)
West Nile Virus - Public Health	(761,000)
Immunization Project	(2,624,000)
Emergency Preparedness For Bioterrorism	(16,536,000)
Expanded and Integrated HIV Testing	(1,470,000)

Federal Lead Abatement Program	(8,000)
State Aid and Grants	(167,988,000)
Additions, Improvements and Equipment	(2,872,000)

22 Health Planning and Evaluation

06-4260 Long Term Care Systems	\$19,493,000
07-4270 Health Care Systems Analysis	<u>284,403,000</u>
Total Appropriation, Health Planning and Evaluation	<u>\$303,896,000</u>

Personal Services:

Salaries and Wages	(\$7,116,000)
Employee Benefits	(2,738,000)
Materials and Supplies	(73,000)
Services Other Than Personal	(863,000)
Maintenance and Fixed Charges	(1,069,000)

Special Purpose:

Long Term Care - Medicaid	(1,084,000)
Implement Patient Safety Act	(200,000)
Nurse Aide Certification Program	(1,000,000)
HCSA - Medicaid	(1,511,000)
Other Special Purpose	(5,971,000)

State Aid and Grants:

State Office of Rural Health	(150,000)
Hospital Health Care Subsidy	(20,655,000)
Hospital Relief Offset Payments	(62,645,000)
Graduate Medical Education	(45,000,000)
State Aid and Grants	(153,253,000)
Additions, Improvements and Equipment	(568,000)

25 Health Administration

99-4210 Administration and Support Services	<u>\$4,385,000</u>
Total Appropriation, Health Administration	<u>\$4,385,000</u>

Personal Services:

Salaries and Wages	(\$668,000)
Employee Benefits	(206,000)
Materials and Supplies	(30,000)
Services Other Than Personal	(432,000)

Special Purpose:

Strengthening Public Health Infrastructure Grant	(580,000)
Immunization Program	(933,000)
New Jersey's Reducing Health Disparities Initiative	(160,000)
Other Special Purpose	(64,000)

State Aid and Grants:

Preventative Health and Health Services Block Grant	(841,000)

State Aid and Grants	(471,000)
Total Appropriation, Department of Health	<u>\$739,138,000</u>

54 DEPARTMENT OF HUMAN SERVICES**20 Physical and Mental Health****23 Mental Health Services**

08-7700 Community Services	\$15,008,000
09-7700 Addiction Services	53,521,000
99-7700 Administration and Support Services	<u>915,000</u>
Total Appropriation, Mental Health Services	<u>\$69,444,000</u>
Personal Services:	
Salaries and Wages	(\$5,311,000)
Employee Benefits	(61,000)
Materials and Supplies.....	(31,000)
Services Other Than Personal.....	(2,898,000)
Special Purpose:	
Mental Health Preparedness Activities Bioterrorism	(2,000)
Other Special Purpose	(7,000)
State Aid and Grants:	
Substance Abuse Block Grant.....	(45,462,000)
State Aid and Grants	(15,672,000)

24 Special Health Services

21-7540 Health Services Administration and Management	\$245,280,000
22-7540 General Medical Services	<u>3,498,675,000</u>
Total Appropriation, Special Health Services	<u>\$3,743,955,000</u>
Personal Services:	
Salaries and Wages	(\$22,982,000)
Materials and Supplies.....	(98,000)
Services Other Than Personal.....	(10,799,000)
Maintenance and Fixed Charges.....	(1,931,000)
Special Purpose:	
Payments to Fiscal Agents	(70,631,000)
Professional Standards Review Organization -	
Utilization Review	(862,000)
Drug Utilization Review Board - Administrative Costs.....	(23,000)
Health Information Technology (HIT).....	(5,661,000)
Electronic Health Records Provider Incentive	
Payments	(125,645,000)
NJ Kidcare - Administration	(4,000,000)
NJ Kidcare B-C-D - Administration	(4,757,000)
State Aid and Grants:	

Payments for Medical Assistance Recipients - Adult	
Mental Health	(29,887,000)
Hospital Health Care Subsidy	(12,327,000)
Payments for Medical Assistance Recipients - ICF/MR ..	(5,021,000)
Payments for Medical Assistance Recipients - Inpatient	
Hospital	(164,071,000)
Payments for Medical Assistance Recipients -	
Prescription Drugs	(10,000,000)
Payments for Medical Assistance Recipients -	
Outpatient Hospital	(58,782,000)
Payments for Medical Assistance Recipients -	
Physician Services	(18,307,000)
Payments for Medical Assistance Recipients - Home	
Health Care	(1,771,000)
Payments for Medical Assistance Recipients -	
Medicare Premiums	(169,895,000)
Payments for Medical Assistance Recipients -	
Dental Services	(3,469,000)
Payments for Medical Assistance Recipients -	
Psychiatric Hospital	(12,667,000)
Payments for Medical Assistance Recipients -	
Medical Supplies	(2,375,000)
Payments for Medical Assistance Recipients -	
Clinic Services	(80,289,000)
Payments for Medical Assistance Recipients -	
Transportation Services	(47,706,000)
Payments for Medical Assistance Recipients -	
Other Services	(3,443,000)
Home Health Background Checks - Title XIX	
federal matching funds	(1,800,000)
Eligibility Determination Services	(12,387,000)
Health Benefit Coordination Services	(9,198,000)
NJ Family Care II - Affordable and Accessible Health	
Coverage Benefits	(418,488,000)
Managed Care Initiative	(2,118,222,000)
State Aid and Grants	(316,242,000)
Additions, Improvements and Equipment	(219,000)

26 Aging Services

20-7530 Medical Services for the Aged	\$1,121,691,000
55-7530 Program for the Aged	50,028,000
57-7530 Office of the Public Guardian	<u>1,500,000</u>
Total Appropriation, Aging Services	<u>\$1,173,219,000</u>

Personal Services:

Salaries and Wages	(\$10,386,000)
Employee Benefits	(3,024,000)
Materials and Supplies.....	(230,000)
Services Other Than Personal.....	(2,518,000)
Maintenance and Fixed Charges.....	(458,000)

Special Purpose:

Administration of US Department of Health and Human Services	(5,646,000)
ADM DHS Federal Programs - SBUM.....	(1,790,000)
Elder Abuse - Older Americans Act Title III	(168,000)
Empowering Older People to Take More Control of Their Health.....	(193,000)
Other Special Purpose	(3,798,000)

State Aid and Grants:

Alternate Family Care	(1,000,000)
Comprehensive Personal Care	(7,500,000)
Global Budget for Long Term Care	(145,976,000)
Counseling on Health Insurance for Medicare Enrollees	(546,000)
Social Services Block Grant - Senior Services	(2,422,000)
Medicaid Match County Offices on Aging	(480,000)
Empowering Older People to Take More Control of Their Health.....	(220,000)
State Aid and Grants.....	(986,505,000)
Additions, Improvements and Equipment	(359,000)

27 Disability Services**7545 Division of Disability Services**

27-7545 Disability Services.....	<u>\$43,127,000</u>
Total Appropriation, Division of Disability Services	<u>\$43,127,000</u>

Personal Services:

Salaries and Wages	(\$981,000)
Materials and Supplies.....	(4,000)
Services Other Than Personal.....	(31,000)

State Aid and Grants.....	(42,111,000)

30 Educational, Cultural, and Intellectual Development**32 Operation and Support of Educational Institutions**

01-7601 Purchased Residential Care	\$297,411,000
02-7601 Social Supervision and Consultation	24,503,000
03-7601 Adult Activities	84,223,000

05-7610 Residential Care and Habilitation Services	11,038,000
05-7620 Residential Care and Habilitation Services	55,895,000
05-7630 Residential Care and Habilitation Services	49,604,000
05-7640 Residential Care and Habilitation Services	46,161,000
05-7650 Residential Care and Habilitation Services	58,747,000
05-7660 Residential Care and Habilitation Services	48,519,000
05-7670 Residential Care and Habilitation Services	50,765,000
99-7600 Administration and Support Services	9,016,000
99-7610 Administration and Support Services	2,596,000
99-7620 Administration and Support Services	3,032,000
99-7630 Administration and Support Services	3,509,000
99-7640 Administration and Support Services	6,103,000
99-7650 Administration and Support Services	5,974,000
99-7660 Administration and Support Services	1,880,000
99-7670 Administration and Support Services	<u>6,151,000</u>
Total Appropriation, Operation and Support of Educational Institutions	<u>\$765,127,000</u>
Personal Services:	
Salaries and Wages	(\$354,694,000)
Materials and Supplies	(12,452,000)
Services Other Than Personal	(9,577,000)
Maintenance and Fixed Charges	(1,527,000)
State Aid and Grants	(386,476,000)
Additions, Improvements and Equipment	(401,000)

33 Supplemental Education and Training Programs

11-7560 Services for the Blind and Visually Impaired	\$10,433,000
99-7560 Administration and Support Services	<u>2,091,000</u>
Total Appropriation, Supplemental Education and Training Programs	<u>\$12,524,000</u>
Personal Services:	
Salaries and Wages	(\$6,647,000)
Materials and Supplies	(35,000)
Services Other Than Personal	(338,000)
Maintenance and Fixed Charges	(100,000)
State Aid and Grants	(5,266,000)
Additions, Improvements and Equipment	(138,000)

50 Economic Planning, Development, and Security

53 Economic Assistance and Security

15-7550 Income Maintenance Management	<u>\$897,890,000</u>
Total Appropriation, Economic Assistance and Security	<u>\$897,890,000</u>
Personal Services:	

Salaries and Wages	(\$9,752,000)
Materials and Supplies.....	(2,581,000)
Services Other Than Personal	(32,185,000)
Maintenance and Fixed Charges	(3,296,000)
Special Purpose:	
Work First New Jersey Technology Investment - Food	
Stamps	(9,000,000)
EBT - Operational Food Stamp Match for CWA's.....	(3,087,000)
Work First New Jersey - Benefits Transfer -	
Operational	(470,000)
Work First New Jersey - Technology Investments	(7,000,000)
Work First New Jersey - Technology Investment -	
TANF/CCDF	(2,400,000)
Child Support Incentive Funding	(1,356,000)
EBT Operational - Child Care Discretionary	(80,000)
EBT Operational - Child Care M&M	(470,000)
EBT Operational - Child Care TANF	(500,000)
Work First New Jersey - Technology Investments -	
Title XIX	(46,000,000)
Work First New Jersey - Technology Investment -	
Title IV-D	(21,000,000)
State Aid and Grants:	
Faith Based Initiatives.....	(1,319,000)
SSBG CWA Administration TANF Transfer	(2,814,000)
State Aid and Grants	(752,268,000)
Additions, Improvements and Equipment	(2,312,000)

70 Government Direction, Management, and Control

76 Management and Administration

99-7500 Administration and Support Services	<u>\$27,588,000</u>
Total Appropriation, Management and Administration	<u>\$27,588,000</u>
Personal Services:	
Salaries and Wages	(\$6,112,000)
Services Other Than Personal	(1,826,000)
Special Purpose:	
Child Support Enforcement Program	(3,000,000)
Title XIX Medical Assistance	(9,760,000)
Refugee Resettlement Program	(135,000)
Vocational Rehabilitation Act - Section 120.....	(581,000)
Food Stamp Program	(1,500,000)
Temporary Assistance to Needy Families Block Grant ...	(1,731,000)
Transfer to State Police for Fingerprinting/Background	
Checks	(2,174,000)

State Aid and Grants (769,000)

Department of Human Services, Total State Appropriation..... \$6,732,874,000

62 DEPARTMENT OF LABOR AND WORKFORCE DEVELOPMENT

50 Economic Planning, Development, and Security

51 Economic Planning and Development

18-4570 Planning and Analysis \$9,929,000

Total Appropriation, Economic Planning and Development \$9,929,000

Personal Services:

Salaries and Wages (\$4,336,000)

Employee Benefits (1,576,000)

Materials and Supplies..... (270,000)

Services Other Than Personal (875,000)

Maintenance and Fixed Charges (463,000)

Special Purpose:

Reports and Analysis - Unemployment Insurance (314,000)

E S 202 Covered Employment and Wages (100,000)

Current Employment Statistics..... (175,000)

Local Area Unemployment Statistics..... (18,000)

Occupational Employment Statistics..... (70,000)

Labor Market Information - Es (130,000)

ES Cost Reimbursable Grants - Alien Labor Certification .. (32,000)

Permanent Mass Layoff Plant Closings (25,000)

Redesigned Occupational Safety and Health (ROSH) (12,000)

One Stop Labor Market Information..... (385,000)

JTPA Title III LMI-PROS..... (878,000)

Other Special Purpose (57,000)

State Aid and Grants:

JTPA Title III CIDS (62,000)

Additions, Improvements and Equipment (151,000)

53 Economic Assistance and Security

01-4510 Unemployment Insurance \$191,665,000

02-4515 Disability Determination 66,771,000

Total Appropriation, Economic Assistance and Security \$258,436,000

Personal Services:

Salaries and Wages (\$91,969,000)

Employee Benefits (34,082,000)

Materials and Supplies..... (6,246,000)

Services Other Than Personal (50,099,000)

Maintenance and Fixed Charges (17,558,000)

Special Purpose:

Unemployment Insurance	(31,898,000)
Reed Act Improvements	(5,000,000)
Employment Security Revenue	(4,200,000)
Disability Determination Services	(3,620,000)
Old Age and Survivor Insurance Disability Determination Services	(1,000,000)
State Aid and Grants	(11,464,000)
Additions, Improvements and Equipment	(1,300,000)

54 Manpower and Employment Services

07-4535 Vocational Rehabilitation Services	\$54,530,000
09-4545 Employment Services	37,869,000
10-4545 Employment and Training Services	154,451,000
12-4550 Workplace Standards	<u>4,960,000</u>
Total Appropriation, Manpower and Employment Services	<u>\$251,810,000</u>
Personal Services:	
Salaries and Wages	(\$52,621,000)
Employee Benefits	(12,010,000)
Materials and Supplies	(1,191,000)
Services Other Than Personal	(8,671,000)
Maintenance and Fixed Charges	(8,841,000)
Special Purpose:	
Vocational Rehabilitation Act of 1973	(2,089,000)
Employment Services	(1,057,000)
Disabled Veterans' Outreach Program	(669,000)
Local Veterans' Employment Representatives	(149,000)
Trade Adjustment Assistance Project	(20,000)
Employment Services Grants - Alien Labor Certification ..	(715,000)
Work Opportunity Tax Credit	(100,000)
Employment Services Cost Reimbursable Grants - Migrant Housing	(5,000)
Agricultural Wage Surveys	(42,000)
Workforce Investment Act	(350,000)
Employment Services Rapid Response Team	(150,000)
National Council on Aging - Senior Community Services Employment	(67,000)
Adult and Continuing Education - Workforce Investment Act	(220,000)
Adult Basic Education Leadership	(1,279,000)
Adult Basic Education Civics Administration	(99,000)
Adult Basic Education Civics Leadership	(331,000)
Occupational Safety Health Act - On-Site Consultation	(581,000)
Other Special Purpose	(1,748,000)

State Aid and Grants:

Technology Related Assistance Project	(550,000)
Adult Basic Education Non-Administration	(12,800,000)
Adult Basic Education Civics Non-Administration	(3,730,000)
State Aid and Grants	(141,208,000)
Additions, Improvements and Equipment	(517,000)
Total Appropriation, Department of Labor and Workforce Development.....	<u>\$520,175,000</u>

66 DEPARTMENT OF LAW AND PUBLIC SAFETY***10 Public Safety and Criminal Justice******12 Law Enforcement***

06-1200 State Police Operations.....	\$107,026,000
09-1020 Criminal Justice	<u>28,525,000</u>
Total Appropriation, Law Enforcement	<u>\$135,551,000</u>

Personal Services:

Salaries and Wages	(\$3,000,000)
Employee Benefits	(1,539,000)

Special Purpose:

Fatality Analysis Reporting System (FARS)	(240,000)
Paul Coverdell National Forensic Science Improvement... ..	(500,000)
Domestic Marijuana Eradication Suppression Program.....	(75,000)
Flood Mitigation Assistance.....	(26,570,000)
Recreational Boating Safety	(4,000,000)
Internet Crimes Against Children.....	(400,000)
Hazardous Materials Transportation	(500,000)
Pre-Disaster Mitigation - Competitive	(26,155,000)
Repetitive Flood Claim Program - FEMA	(2,000,000)
Severe Repetitive Loss - FEMA.....	(27,151,000)
NIEHS Worker Health Safety Training	(150,000)
Incident Command	(1,500,000)
Emergency Management Performance Grant -	
Non-Terrorism	(8,500,000)
Solving Cold Cases	(310,000)
Port Security - Delaware Bay (South)	(1,000,000)
Hazardous Materials Emergency Preparedness.....	(575,000)
Sex Offender Registration and Notification Act (SORNA) ..	(400,000)
Community Oriented Policing (COPS) Hiring Program ..	(7,000,000)
Bulletproof Vest Partnership	(625,000)
Medicaid Fraud Unit	(161,000)
Victim Assistance Grants	(12,200,000)
Project Safe Neighborhoods.....	(500,000)
Anti-Trafficking Task Force	(200,000)

Enhancement of Data Analysis Center.....	(50,000)
Justice Assistance Grant (JAG).....	(5,000,000)
Residential Treatment for Substance Abuse	(250,000)
Collaborative Model to Combat Human Trafficking	(500,000)
Byrne Criminal Justice Innovation Program	(1,000,000)
State Aid and Grants	(3,500,000)

13 Special Law Enforcement Activities

03-1160 Office of Highway Traffic Safety	<u>\$39,539,000</u>
Total Appropriation, Special Law Enforcement Activities	<u>\$39,539,000</u>

Special Purpose:

Federal Highway Safety Program - State Match	(\$600,000)
Highway Safety - Traffic Records	(500,000)
Planning and Administration Section 406	(200,000)
Safe Passage on Our Highways.....	(100,000)
Occupant Protection Section 406 Seat Belt	
Enforcement	(1,000,000)
Police Traffic Services Section 406	(1,972,000)
Roadway Safety Section 406	(500,000)
Emergency Services	(10,000)
Pedestrian Safety Study	(500,000)
FHWA Program Management	(400,000)
Motorcycle Training Program	(10,000)
Training Grant - Section 402.....	(75,000)
Motorcycle Safety Program	(20,000)
Pedestrian Safety Grant	(700,000)
Occupant Protection Grant	(4,500,000)
Highway Safety Performance Plan	(200,000)
Selective Enforcement Management.....	(2,500,000)
School Bus Set Aside Program	(20,000)
Community Traffic Safety	(3,300,000)
Highway Safety - Alcohol Education and Public	
Awareness Coordinator	(550,000)
Highway Safety - Safety Restraints Program	
Management	(900,000)
Safety Belt Performance Grants	(4,500,000)
Drunk Driver Prevention.....	(8,507,000)
Paid Advertising.....	(325,000)
State Traffic Safety Information System.....	(1,500,000)
Motorcycle Safety	(800,000)
Child Safety/Child Booster Seats.....	(4,000,000)
Motorcycle Incentive	(150,000)
Distracted Driver Incentive	(1,200,000)

18 Juvenile Services

34-1500 Juvenile Community Programs	\$2,635,000
99-1500 Administration and Support Services	<u>559,000</u>
Total Appropriation, Juvenile Services	<u>\$4,194,000</u>

Personal Services:

Salaries and Wages	(\$550,000)
Employee Benefits	(193,000)

Special Purpose:

IDEA - Handicapped	(458,000)
Juvenile Mentoring Programs - Juvenile Justice Initiative...	(60,000)
Juvenile Aftercare Programs	(98,000)
Title I - Part D, Neglected and Delinquent	(602,000)
Juvenile Accountability Incentive Block Grant (JAIBG) (1,179,000)	
Title V Funding	(35,000)
Juvenile Justice Delinquency Prevention	(1,019,000)

19 Central Planning, Direction, and Management

13-1005 Homeland Security and Preparedness	\$29,693,000
99-1000 Administration and Support Services	<u>4,000,000</u>
Total Appropriation, Central Planning, Direction, and Management	<u>\$33,693,000</u>

Special Purpose:

Homeland Security Grant Program	(\$6,230,000)
Urban Area Security Initiative	(21,663,000)
UASI Nonprofit Security Grant Program (NSGP)	(1,800,000)
National Criminal History Program - Office of the Attorney General	(4,000,000)

80 Special Government Services**82 Protection of Citizens' Rights**

14-1310 Consumer Affairs	\$400,000
16-1350 Protection of Civil Rights	725,000
19-1440 Victims of Crime Compensation Office	<u>2,300,000</u>
Total Appropriation, Protection of Citizens' Rights	<u>\$3,425,000</u>

Personal Services:

Salaries and Wages	(\$325,000)

Special Purpose:

Prescription Drug Monitoring	(400,000)
Housing and Urban Development	(400,000)

State Aid and Grants	(2,300,000)

Total Appropriation, Department of Law and Public Safety	<u>\$216,402,000</u>

67 DEPARTMENT OF MILITARY AND VETERANS' AFFAIRS***10 Public Safety and Criminal Justice******14 Military Services***

40-3620 New Jersey National Guard Support Services	\$34,309,000

99-3600 Administration and Support Services	<u>38,000,000</u>

Total Appropriation, Military Services	<u>\$72,309,000</u>

Personal Services:

Salaries and Wages	(\$8,283,000)

Employee Benefits	(1,146,000)

Materials and Supplies	(15,818,000)

Services Other Than Personal	(2,519,000)

Maintenance and Fixed Charges	(250,000)

Special Purpose:

Dining Facility Operations	(150,000)

Natural and Cultural Resources Management	(5,000)

Federal Distance Learning Program	(180,000)

Administrative Services Activities	(60,000)

Training and Equipment - Pool Sites	(16,000)

Army Training and Technology Lab	(465,000)

Facilities Support Contract	(92,000)

Army Facilities Service Contracts	(59,000)

Atlantic City Air Base - Service Contracts	(57,000)

McGuire Air Force Base - Service Contract	(33,000)

Air National Guard Security Agreement - Atlantic City	(107,000)

Air National Guard Security Agreement - McGuire	(173,000)

Army National Guard Electronic Security System	(100,000)

McGuire Air Force Base Environmental	(40,000)

Atlantic City Environmental	(39,000)

Warren Grove Sustainment Restoration and Modernization...	(7,000)

Antiterrorism Program Manager	(47,000)

Atlantic City Sustainment, Restoration and Modernization	(750,000)

Armory Renovations and Improvements	(3,706,000)

New Jersey National Guard Challenge Youth Program	(207,000)

NJNG Photovoltaic Sea Girt Program	(1,000,000)

Photovoltaic - MAVA HQ	(3,000,000)

Sea Girt Regional Training Institute - Construction	(34,000,000)

80 Special Government Services***83 Services to Veterans***

20-3630 Domiciliary and Treatment Services	\$3,400,000

20-3640 Domiciliary and Treatment Services	4,700,000

20-3650 Domiciliary and Treatment Services	2,800,000

50-3610 Veterans' Outreach and Assistance	764,000
70-3610 Burial Services.....	<u>7,000,000</u>
Total Appropriation, Services to Veterans	<u>\$18,664,000</u>
Personal Services:	
Salaries and Wages	(\$2,482,000)
Employee Benefits	(131,000)
Materials and Supplies.....	(7,000,000)
Special Purpose:	
Medicare Part A Receipts for Resident Care and	
Operational Costs	(8,762,000)
Veterans' Education Monitoring	(125,000)
Transitional Housing	(164,000)
Total Appropriation, Department of Military and Veterans'	
Affairs.....	<u>\$90,973,000</u>

74 DEPARTMENT OF STATE

30 Educational, Cultural, and Intellectual Development

36 Higher Educational Services

45-2405 Student Assistance Programs.....	\$14,554,000
80-2400 Statewide Planning and Coordination for Higher Education.....	<u>6,079,000</u>
Total Appropriation, Higher Educational Services	<u>\$20,633,000</u>
Personal Services:	
Salaries and Wages	(\$6,247,000)
Employee Benefits	(2,752,000)
Materials and Supplies.....	(367,000)
Services Other Than Personal	(2,821,000)
Maintenance and Fixed Charges.....	(1,106,000)
Special Purpose:	
Student Loan Administrative Cost Deduction and	
Allowance	(1,519,000)
Gaining Early Awareness and Readiness for	
Undergraduate Programs	(295,000)
State Aid and Grants:	
National Health Service Corps - Student Loan Repayment	
Program	(240,000)
State Aid and Grants.....	(5,202,000)
Additions, Improvements and Equipment	(84,000)

37 Cultural and Intellectual Development Services

05-2530 Support of the Arts	<u>\$900,000</u>
Total Appropriation, Cultural and Intellectual Development Services ...	<u>\$900,000</u>
Special Purpose:	

National Endowment for the Arts Partnership(\$900,000)

70 Government Direction, Management, and Control

74 General Government Services

01-2505 Office of the Secretary of State \$5,220,000
 02-2510 Business Action Center 650,000
 25-2525 Election Management and Coordination 930,000
 Total Appropriation, General Government Services..... \$6,800,000

Special Purpose:

AMERICOR Competitive Grants(\$750,000)
 Foster Grandparent Program(800,000)
 Americorps - VISTA Grant Program(40,000)
 Americorps Grants(3,000,000)
 State Commission(410,000)
 Professional Development(140,000)
 Disability(80,000)
 State Trade and Export Promotion Pilot Grant Program(650,000)
 Federal Voting Assistance Program(605,000)
 Election Assistance for Persons with Disabilities(325,000)
 Total Appropriation, Department of State..... \$28,333,000

78 DEPARTMENT OF TRANSPORTATION

10 Public Safety and Criminal Justice

11 Vehicular Safety

01-6400 Motor Vehicle Services \$3,200,000
 Total Appropriation, Vehicular Safety \$3,200,000

Special Purpose:

Commercial Bus Inspection Unit(500,000)
 Driver's License Security Grant Program(1,200,000)
 Commercial Drivers' License Program.....(1,500,000)

60 Transportation Programs

61 State and Local Highway Facilities

00-6300 Federal Highway Administration \$956,532,000
 Total Appropriation, State and Local Highway Facilities \$956,532,000

Federal Highway Administration

<u>Description</u>	<u>County</u>	<u>Amount</u>
ADA Curb Ramp Implementation	Various	(\$1,000,000)
Bears Head Road, Resurfacing	Atlantic	(2,700,000)
Betterments, Bridge Preservation	Various	(5,000,000)
Bicycle & Pedestrian Facilities/Accommodations	Various	(5,000,000)
Bridge Deck/Superstructure Replacement Program	Various	(48,000,000)

Bridge Inspection, Local Bridges	Various	(12,850,000)
Bridge Inspection, State NBIS Bridges	Various	(15,550,000)
Bridge Management System	Various	(400,000)
Bridge Painting Program	Various	(7,045,000)
Bridge Scour Countermeasures	Various	(6,000,000)
Camden County Bus Purchase	Camden	(100,000)
Camp Meeting Avenue Bridge over Trenton Line, CR 602	Somerset	(500,000)
Church Street Bridge, CR 579	Hunterdon	(525,000)
Clove Road/Long Hill Road Improvements, CR 620/631	Passaic	(2,400,000)
Commissioners Pike (CR 581), Woodstown- Daretown Road to Route 40, Phase IV	Salem	(1,000,000)
Commissioners Pike, Phase III, Woodstown Road to Watson Mill Road, CR 581	Salem	(1,400,000)
County Route 517, Route 23 to Route 94	Sussex	(3,000,000)
County Route 528 Roundabout	Burlington	(1,000,000)
County Route 655 Lincoln Avenue from Route 555 (Main Road) to Chestnut Avenue	Cumberland	(2,000,000)
Crash Reduction Program	Various	(4,850,000)
Culvert Replacement Program	Various	(1,000,000)
Cumberland County Mill & Overlay Resurfacing Program	Cumberland	(150,000)
DBE Supportive Services Program	Various	(500,000)
Delancy Street, Avenue I to Avenue P	Essex	(1,900,000)
Disadvantaged Business Enterprise	Various	(100,000)
Drainage Rehabilitation & Improvements	Various	(4,000,000)
DVRPC, Future Projects	Various	(1,184,000)
Egg Harbor Road, Hurffville-Cross Keys Road to Hurffville-Grenloch Road, CR 630	Gloucester	(7,000,000)
Eighth Street Bridge	Passaic	(15,000,000)
Ferry Program	Various	(10,000,000)
Fifth Avenue Bridge (AKA Fair Lawn Avenue Bridge) over Passaic River	Passaic	(200,000)
Garden State Parkway Interchange 91 Improvements and Burnt Tavern Road	Ocean	(12,740,000)
Garden State Parkway Interchange Improvements in Cape May	Cape May	(28,009,000)
Gloucester County Bus Purchase	Gloucester	(70,000)
Highway Safety Improvement Program Planning	Various	(4,000,000)
Intelligent Transportation Systems	Various	(1,000,000)
Intersection Improvement Program	Various	(1,000,000)
ITS Earmark Funding	Various	(500,000)

JFK Boulevard Reconstruction (CR 625)	Cape May	(676,000)
Landing Road Bridge Over Morristown Line, CR 631	Morris	(800,000)
Landis Avenue, Myrtle Street to Boulevards, Resurfacing	Cumberland	(1,056,000)
Landis Avenue, Union Rd to Cumberland County Line, Repaving (CR 540)	Atlantic	(50,000)
Local Aid Consultant Services	Various	(1,500,000)
Local CMAQ Initiatives	Various	(4,820,000)
Local Preliminary Engineering	Various	(2,000,000)
Local Project Development Support	Various	(1,000,000)
Local Safety/High Risk Rural Roads Program	Various	(4,000,000)
McClellan Street Underpass	Essex	(600,000)
Median Crossover Protection Contract #12	Various	(400,000)
Median Crossover Protection Contract #13	Various	(200,000)
Mercer County Roadway Safety Improvements	Mercer	(500,000)
Mercer County Signal Project, CR 533	Mercer	(3,500,000)
Metropolitan Planning	Various	(23,837,000)
Motor Vehicle Crash Record Processing	Various	(4,000,000)
New Brunswick Station Elevator Improvements (Liberty Corridor), Phase 2	Middlesex	(2,000,000)
New Brunswick Station Pedestrian Access Improvements (Liberty Corridor)	Middlesex	(4,500,000)
New Jersey Scenic Byways Program	Various	(2,250,000)
NY Susquehanna and Western Rail Line Bicycle/ Pedestrian Path	Morris, Passaic	(2,000,000)
Oak Tree Road Bridge, CR 604	Middlesex	(1,000,000)
Ozone Action Program in New Jersey	Various	(40,000)
Pavement Preservation	Various	(5,000,000)
Pedestrian Safety Corridor Program	Various	(500,000)
Planning and Research, Federal-Aid	Various	(27,022,000)
Pre-Apprenticeship Training Program for Minorities and Women	Various	(500,000)
Princeton - Hightstown Road Improvements, CR 571	Mercer	(800,000)
Rail-Highway Grade Crossing Program, Federal	Various	(10,800,000)
Recreational Trails Program	Various	(1,411,000)
Resurfacing, Federal	Various	(34,525,000)
Right of Way Full-Service Consultant Term Agreements	Various	(200,000)
RIMIS - Phase II Implementation	Various	(100,000)
Rockfall Mitigation	Various	(2,000,000)

Rutgers Transportation Safety Resource Center (TSRC)	Various	(1,300,000)
Safe Corridors Program	Various	(2,500,000)
Safe Routes to School Program	Various	(5,587,000)
Safety Service Patrol	Various	(4,200,000)
Sign Structure Rehabilitation Program	Various	(1,000,000)
SJTPO, Future Projects	Various	(310,000)
Smithville Road Bridge over Rancocas Creek, CR 684	Burlington	(2,500,000)
South Orange Avenue, Traffic, Operational and Roadway Improvements, CR 510	Essex	(9,223,000)
State Police Safety Patrols	Various	(2,000,000)
Statewide Incident Management Program	Various	(5,800,000)
Statewide Traffic Management/Information Program	Various	(4,000,000)
Sussex Turnpike, CR 617	Morris	(6,500,000)
Traffic Monitoring Systems	Various	(12,910,000)
Traffic Operations Center (North)	Various	(5,950,000)
Traffic Operations Center (South)	Various	(5,500,000)
Traffic Signal Replacement	Various	(2,500,000)
Traffic Signal Timing and Optimization	Various	(2,900,000)
Training and Employee Development	Various	(1,800,000)
TransitChek Mass Marketing Efforts - New Jersey	Various	(40,000)
Transportation and Community Development Initiative (TCDI) DVRPC	Various	(1,080,000)
Transportation and Community System Preservation Program	Various	(4,000,000)
Transportation Demand Management Program Support	Various	(230,000)
Transportation Enhancements	Various	(10,000,000)
Transportation Management Associations	Various	(5,955,000)
Trenton Amtrak Bridges	Mercer	(600,000)
Wertsville Road Bridge (E-174) over Tributary of Back Brook, CR 602	Hunterdon	(3,400,000)
West Brook Road Bridge over Wanaque Reservoir	Passaic	(13,139,000)
Youth Employment and TRAC Programs	Various	(250,000)
Route 1, South Brunswick, Drainage Improvements	Middlesex	(3,020,000)
Route 1, Southbound Nassau Park Boulevard to Quaker Bridge Mall Overpass	Mercer	(1,300,000)
Route 3, over Northern Secondary & Ramp A	Hudson	(500,000)
Route 4, Bridge over Palisade Avenue, Windsor Road and CSX Railroad	Bergen	(500,000)
Route 4, Grand Avenue Bridge	Bergen	(1,000,000)

Route 4, Pedestrian Mobility Improvements, Teaneck	Bergen	(1,050,000)
Route 7, Kearney, Drainage Improvements	Hudson	(1,000,000)
Route 9, Bridge over Waretown Creek	Ocean	(600,000)
Route 9, Green Street Interchange, Woodbridge	Middlesex	(6,065,000)
Route 9, Jobs Creek Bridge	Burlington	(500,000)
Route 9, Northfield Sidewalk Replacement	Atlantic	(1,225,000)
Route 9, Pavement Rehabilitation, Middlesex/ Monmouth Counties	Middlesex, Monmouth	(49,191,000)
Route 9, South Mill Street and Bay Avenue to Longboat Avenue	Ocean	(5,160,000)
Route 10, Passaic River	Morris	(3,500,000)
Route 18, East Brunswick, Drainage and Pavement Rehabilitation	Middlesex	(1,000,000)
Route 19, CR 609 to Route 46 & Route 46, Van Houten Ave to Broad St, Drainage Improvements	Passaic	(1,050,000)
Route 21, Southbound Viaduct and Chester Avenue Bridge	Essex	(15,800,000)
Route 22, Bloy Street to Liberty Avenue	Union	(2,800,000)
Route 22, Hilldale Place/Broad Street	Union	(1,800,000)
Route 22, Middle Brook to Westfield Road	Somerset, Union	(12,330,000)
Route 22, W. of Robin Hood Rd., to E. of Fairway Dr., Pavement Various Locations	Union	(6,280,000)
Route 22, Westbound, Vicinity of Vaux Hall Road to West of Bloy Street	Union	(750,000)
Route 23, Bridge over Branch of Wallkill River	Sussex	(400,000)
Route 23, Sussex Borough Realignment & Papakating Creek Bridge	Sussex	(27,876,000)
Route 29, Cass Street to Calhoun Street, Drainage	Mercer	(350,000)
Route 30, Blue Anchor Dam	Camden	(10,100,000)
Route 30, E. Of Brand Ave to E. of London Ave Pavement Rehab	Camden	(3,850,000)
Route 30, Elmwood Rd/Weymouth Rd (CR 623) to Haddon Ave, Pavement	Atlantic	(400,000)
Route 30, Evesham Road Intersection Improvements	Camden	(6,805,000)
Route 31, NB, Minneakoning Road to MP 24.92	Hunterdon	(1,553,000)
Route 31, Pennington Circle Safety Improvements	Mercer	(800,000)
Route 31, South of Rt. 78 to North of CR 634	Warren, Hunterdon	(7,380,000)
Route 31/202, Flemington Circle	Hunterdon	(6,380,000)

Route 33, Manalapan Brook to Halls Mill Rd., Pavement	Monmouth	(5,640,000)
Route 33, Operational and Pedestrian Improvements, Neptune	Monmouth	(500,000)
Route 34, Colts Neck, Intersection Improvements (CR 537)	Monmouth	(2,800,000)
Route 34, CR 537 to Washington Ave, Pavement	Monmouth	(8,370,000)
Route 35, Restoration, Mantoloking to Point Pleasant (MP 9 - 12.5)	Ocean	(16,278,000)
Route 40/322, Median Closures, Ivins Avenue to Spruce Avenue	Atlantic	(1,600,000)
Route 46, Passaic Avenue to Willowbrook Mall	Essex, Passaic	(2,888,000)
Route 46, Rockfall Mitigation, MP 1.4-2.4	Warren	(5,525,000)
Route 48, Layton Lake Dam	Salem	(2,330,000)
Route 52, Causeway Replacement, Contract A	Cape May	(14,900,000)
Route 54, Route 322 over Cape May Point Branch	Atlantic	(13,320,000)
Route 57, CR 519 Intersection Improvement	Warren	(2,504,000)
Route 57/182/46, Hackettstown Mobility Improvements	Warren, Morris	(500,000)
Route 72, Manahawkin Bay Bridges, Contract 2	Ocean	(35,351,000)
Route 77, Swedesboro-Hardingville Road, Intersection Improvements (CR 538)	Gloucester	(2,455,000)
Route 78, Pittstown Road (Exit 15), Interchange Improvements (CR 513)	Hunterdon	(1,750,000)
Route 80, EB Express M.P. 45.6 - 53.0; Route 80 Local EB M.P. 45.6 - 46.1 Resurfacing	Morris, Essex, Passaic	(10,300,000)
Route 80, Parsippany-Troy Hills Roadway Improvement	Morris	(2,000,000)
Route 80, Route 15 Interchange	Morris	(1,500,000)
Route 88, Bridge over Beaver Dam Creek	Ocean	(500,000)
Route 109, Garden State Parkway Intersection	Cape May	(500,000)
Route 130, Brooklawn Circles	Camden	(3,685,000)
Route 130, Camden County, Drainage	Camden	(500,000)
Route 130, Hollywood Avenue (CR 618)	Salem	(1,250,000)
Route 130, Westfield Ave. To US Rt. 1, Pavement	Mercer, Middlesex	(15,000,000)
Route 168, Bridge over Big Timber Creek	Gloucester	(700,000)
Route 168, Newton Lake Dam	Camden	(200,000)
Route 173, Bridge over Pohatcong Creek	Warren	(500,000)
Route 202, First Avenue Intersection Improvements	Somerset	(500,000)

Route 206, Bridge over Clarks Creek and Sleepers Brook	Atlantic	(750,000)
Route 206, North Wood Thrush Lane to North of Brown Ave., Pavement	Somerset	(7,800,000)
Route 206, S. of Paterson Ave. to Old Union Tpk. & Cooke Rd., Pavement Rehabilitation	Sussex	(7,900,000)
Route 206, Southbound Merge Improvements with I-287 Ramp	Somerset	(200,000)
Route 206, Whitehorse Circle (CR 533, 524)	Mercer	(500,000)
Route 287/78, I-287/202/206 Interchange Improvements	Somerset	(1,000,000)
Route 295, Northbound Approach to Route 1 Exits, ITS Improvements	Mercer	(500,000)
Route 295/42/I-76, Direct Connection, Contract 1	Camden	(39,472,000)
Route 295/42/I-76, Direct Connection, Contract 2	Camden	(94,415,000)
Route 322, Kings Highway (CR 551)	Gloucester	(400,000)

62 Public Transportation

Federal Highway Administration	\$133,500,000
Federal Transit Administration	<u>395,593,000</u>
Total Appropriation, Public Transportation	<u>\$529,093,000</u>

<u>Description</u>	<u>County</u>	<u>Amount</u>
<u>Federal Highway Administration</u>		
Preventive Maintenance-Bus	Various	(\$32,500,000)
Preventive Maintenance-Rail	Various	(50,000,000)
Rail Rolling Stock Procurement	Various	(50,000,000)
Transit Enhancements	Various	(1,000,000)
<u>Federal Transit Administration</u>		
Bus Acquisition Program	Various	(\$41,363,000)
Job Access and Reverse Commute Program	Various	(4,000,000)
Light Rail Vehicle Rolling Stock	Various	(6,760,000)
New Freedom Program	Various	(2,291,000)
Preventive Maintenance-Bus	Various	(80,183,000)
Preventive Maintenance-Rail	Various	(161,110,000)
Rail Rolling Stock Procurement	Various	(84,966,000)
Section 5310 Program	Various	(4,800,000)
Section 5311 Program	Various	(6,300,000)
Small/Special Services Program	Various	(1,120,000)
Transit Enhancements	Various	(2,700,000)

Notwithstanding the provisions of subsection d. of section 21 of P.L.1984, c.73 (C.27:1B-21), approval by the Joint Budget Oversight Committee of transfers among federal appropriations by project shall not be required. Notice of a transfer approved by the Director of the Division of Budget and Accounting pursuant to that section shall be provided to the Legislative Budget and Finance Officer on the effective date of the approved transfer.

60 Transportation Programs

64 Regulation and General Management

05-6070 Multimodal Services..... \$18,425,000

Total Appropriation, Regulation and General Management \$18,425,000

Special Purpose:

Motor Carrier Safety Assistance Program..... (\$10,000,000)

National Oceanic and Atmospheric Administration

Geodetic Survey (325,000)

Airport Fund..... (1,500,000)

Boating Infrastructure Program (New Jersey Maritime

Program) (1,600,000)

New Jersey Maritime Program - Ferry Boat (5,000,000)

Total Appropriation, Department of Transportation \$1,507,250,000

82 DEPARTMENT OF THE TREASURY

50 Economic Planning, Development, and Security

52 Economic Regulation

54-2007 Utility Regulation \$826,000

56-2014 Energy Resource Management 3,783,000

Total Appropriation, Economic Regulation \$4,609,000

Personal Services:

Salaries and Wages (\$305,000)

Employee Benefits (195,000)

Materials and Supplies..... (51,000)

Services Other Than Personal (3,072,000)

Maintenance and Fixed Charges (110,000)

Special Purpose:

Division of Gas Expansion..... (826,000)

Additions, Improvements and Equipment (50,000)

70 Government Direction, Management, and Control

72 Governmental Review and Oversight

08-2066 Office of the State Comptroller \$3,265,000

Total Appropriation, Governmental Review and Oversight..... \$3,265,000

Personal Services:

Salaries and Wages(\$3,123,000)
 Special Purpose:
 Medicaid(142,000)

80 Special Government Services

82 Protection of Citizens' Rights

58-2022 Mental Health Advocacy \$223,000
 81-2097 Elder Advocacy 1,158,000
 89-2048 Civil Legal Services for the Poor 1,228,000
 Total Appropriation, Protection of Citizens' Rights \$2,609,000

Personal Services:

Salaries and Wages(\$877,000)
 Employee Benefits(177,000)
 Materials and Supplies.....(15,000)
 Services Other Than Personal.....(35,000)
 Maintenance and Fixed Charges.....(3,000)

Special Purpose:

Medicaid Reimbursement(223,000)
 Money Follows the Person Program(170,000)
 Civil Legal Services for the Poor(5,000)
 State Aid and Grants.....(1,104,000)

Total Appropriation, Department of the Treasury..... \$10,483,000

98 THE JUDICIARY

10 Public Safety and Criminal Justice

15 Judicial Services

03-9720 Civil Courts \$75,000
 05-9730 Family Courts..... 35,295,000
 07-9740 Probation Services..... 70,944,000
 11-9760 Trial Court Services..... 4,600,000
 Total Appropriation, Judicial Services..... \$110,914,000

Special Purpose:

Electronic Records Project/Archives Start Up(\$75,000)
 NJ Court Improvement Database(300,000)
 NJ Court Improvement Training(300,000)
 Child Support and Paternity Program Title IV-D
 (Family Court).....(33,970,000)
 NJ State Court Improvement Grant.....(400,000)
 State Access and Visitation Program(325,000)
 Child Support and Paternity Program Title IV-D
 (Probation).....(70,944,000)
 Child Support and Paternity Program Title IV-D (Trial) .(4,600,000)

Total Appropriation, The Judiciary \$110,914,000

Total Appropriation, Federal Funds \$12,368,283,000

Notwithstanding the provisions of any State law or regulation to the contrary, no State agency shall accept or expend federal funds except as appropriated by the Legislature or otherwise provided in this act.

In addition to the federal funds appropriated in this act, there are appropriated the following federal funds, subject to the approval of the Director of the Division of Budget and Accounting: emergency disaster aid funds including grants for preventive measures; pass-through grants to political subdivisions of the State over which the State is not permitted to exercise discretion in the use or distribution of the funds and for which no State matching funds are required; the first 25% of unanticipated grant awards, and up to 25% of increases in previously anticipated grant awards for which no State matching funds are required except, for the purpose of this section, federal funds received by one executive agency that are ultimately expended by another executive agency shall not be considered pass-through grants; federal financial aid funds for students attending post-secondary educational institutions in excess of the amount specifically appropriated, and any such grants intended to prevent threats to homeland security up to 100% of previously anticipated or unanticipated grant award amounts for which no State matching funds are required, provided however, that the Director of the Division of Budget and Accounting shall notify the Legislative Budget and Finance Officer of such grants; and all other grants of \$500,000 or less.

For the purposes of federal funds appropriations, "political subdivisions of the State" means counties, municipalities, school districts, or agencies thereof, regional, county or municipal authorities, or districts other than interstate authorities or districts; "discretion" refers to any action in which an agency may determine either the amount of funds to be allocated or the recipient of the allocation; and "grants" refers to one-time, or time limited awards, which are received pursuant to submission of a grant application in competition with other grant applications.

The unexpended balances at the end of the preceding fiscal year of federal funds are appropriated for the same purposes. The Director of the Division of Budget and Accounting shall inform the Legislative Budget and Finance Officer by November 1, 2012 of any unexpended balances which are continued.

Out of the appropriations herein, the Director of the Division of Budget and Accounting is empowered to approve payments to liquidate any unrecorded liabilities for materials delivered or services rendered in prior fiscal years, upon the written recommendations of any department head or the department head's designated representative. The Director of the Division of Budget and Accounting shall reject any recommendations for payment which the Director deems improper.

The sum herein appropriated to the Department of Transportation for the Hudson-Bergen Light Rail Transit System is hereby appropriated, to the extent necessary, to pay the principal of and interest on the grant anticipation notes issued by the New Jersey Transit Corporation.

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

Notwithstanding the provisions of any law, regulation or Executive Order to the contrary, any purchase by the State or by a State agency or local government unit of equipment, goods or services related to homeland security and domestic preparedness, that is paid for or reimbursed by federal funds awarded by the U.S. Department of Homeland Security or other federal agency, appropriated in the current fiscal year, may be made through the receipt of public bids or as an alternative to public bidding and subject to the provisions of this paragraph, through direct purchase without advertising for bids or rejecting bids already received but not awarded. The equipment, goods or services purchased by a local government unit shall be referred to in the grant agreement issued by the State administrative agency administering such funds and shall be authorized by resolution of the governing body of the local government unit entering into the grant agreement. Such resolution may, without subsequent action of the local governing body, simultaneously accept the grant from the State administrative agency, authorize the insertion of the revenue and offsetting appropriation in the budget of the local government unit, and authorize the contracting agent of the local government unit to procure the equipment, goods or services. A copy of such resolution shall be filed with the chief financial officer of the local government unit, the State administrative agency and the Division of Local Government Services in the Department of Community Affairs. Purchases made without public bidding shall be from vendors that shall either (1) be holders of a current State contract for the equipment, goods or services sought, or (2) be participating in a federal procurement program established by a federal department or agency, or (3) have been approved by the State Treasurer in consultation with the New Jersey Domestic Security Preparedness Task Force. All homeland security purchases herein shall continue to be subject to all grant requirements and conditions approved by the State administrative agency. The Director of the Division of Purchase and Property may enter into or participate in purchasing agreements with one or more other states, or political subdivisions or compact agencies thereof, for the purchase of such equipment, goods or services, using monies appropriated under this act, to meet the domestic preparedness and homeland security needs of this State. Such purchasing agreement may provide for the sharing of costs and the methods of payments relating to such purchases. Furthermore, a county government awarding a contract for Homeland Security equipment, goods or services, may, with the approval of the vendor, extend the

terms and conditions of the contract to any other county government that wants to purchase under that contract, subject to notice and documentation requirements issued by the Director of the Division of Local Government Services.

Of the amounts appropriated for Income Maintenance Management, amounts may be transferred to the various departments in accordance with the Division of Family Development's agreements, subject to the approval of the Director of the Division of Budget and Accounting. Any unobligated balances remaining from funds transferred to the departments shall be transferred back to the Division of Family Development subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, in addition to the federal funds hereinabove appropriated, there are appropriated to the appropriate executive agencies, subject to the approval of the Director of the Division of Budget and Accounting, such additional federal funds received during this fiscal year pursuant to any federal law authorizing a federal economic stimulus program or any other similar federal program for the purposes, projects, and programs set forth in such law; provided, however, that if the federal law does not delineate the specific purposes, projects, and programs to be funded by the federal funds, the purposes, projects, and programs to be funded by the federal funds shall be subject to the approval of the Joint Budget Oversight Committee, and further provided, however, that the State Treasurer shall report to the President of the Senate, the Speaker of the General Assembly, the Chair of the Senate Budget and Appropriations Committee, and the Chair of the Assembly Budget Committee at least quarterly on the receipt and utilization of all additional federal funds received during this fiscal year pursuant to any federal law authorizing a federal economic stimulus program.

Officials from the appropriate executive agencies are hereby authorized to take such steps, if any, as may be necessary to qualify for, apply for, receive and expend such federal funds and to make such commitments, representations and other agreements as may be required by the federal government to receive federal funds under federal law authorizing the federal economic stimulus program or any other similar federal law. Furthermore, and notwithstanding any other law or regulation to the contrary, officials from the appropriate executive agencies may encumber any of these federal funds appropriated pursuant to this provision prior to entering into any contract, grant or other agreement obligating the federal funds, subject to the approval of the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, federal funds provided under the State Energy Program (SEP) and the Energy Efficiency and Conservation Block Grant Program (Block Grant Program), pursuant to the American Recovery and Reinvestment Act, Pub.L. 111-5 and any other similar type of federal stimulus law which may be hereinafter enacted (collectively referred to as ARRA), are appropriated. Subject to the approval of the Director of the Division of Budget and Accounting as set forth below, such appropriations are to include the administrative costs of the respective agencies in administering the specified programs provided such use is consistent with ARRA and federal ap-

provals. In the event that the administrative costs are not permitted to be paid from the ARRA monies received by the State, there is hereby appropriated from the Clean Energy Fund, subject to the approval of the Director of the Division of Budget and Accounting such sums as shall be necessary to pay for the administrative costs of the agencies administering the specified programs listed below. Notwithstanding the specific appropriations made below, in the event that the federal funds received under ARRA are not in their entirety or in part allocated to the specific purposes listed below, to permit flexibility in the handling of appropriations, amounts may be transferred to and from the various items of the appropriations listed below or may be used for such other purposes permitted under ARRA subject to the approval of the Director of the Division of Budget and Accounting and upon the recommendation of the State Treasurer. The federal funds provided pursuant to ARRA with respect to the SEP shall be used only for purposes allowed under part D of Title III of the Energy Policy and Conservation Act (42 U.S.C. 6321 et seq.), and the federal funds provided pursuant to ARRA with respect to the Block Grant Program shall be used only for implementation of programs authorized under subtitle E of Title V of the Energy Independence and Security Act of 2007 (42 U.S.C. 17151 et seq.). With respect to all federal funds which are appropriated pursuant to this provision, NJEDA, HMFA, the Office of Energy Savings and the BPU shall prepare and timely submit to the United States Department of Energy (USDOE) the reports required under subsection (c) of section 1512 of Pub.L. 111-5, including without limitation the detailed information required with respect to all projects or activities for which such federal funds were expended or obligated.

a. SEP. SEP monies received by the State under ARRA are hereby appropriated to the Clean Energy Fund and shall be allocated by the Board of Public Utilities (BPU) as follows. The BPU shall enter into memoranda of understanding with the applicable agencies listed below which memoranda of understanding shall provide for the transfer of such monies to the applicable agencies for the purposes listed below.

(1) \$14,216,606 to the New Jersey Economic Development Authority (NJEDA) for a grant and loan program to be developed and administered by the NJEDA to fund public and private renewable energy, energy efficiency and alternative energy projects, with applications prioritized based on the ability to create jobs, reduce greenhouse gas emissions, save or create energy, and provide for innovative technology;

(2) \$20,187,801 for a program to be developed and administered by the BPU for grants to State departments, agencies, authorities and public colleges and universities for renewable and energy efficiency projects at such entities, including but not limited to, wind, solar, or hydro energy, biofuels, geothermal, and energy storage applications, with applications prioritized by an interagency evaluation team consisting of one representative from each of the following, BPU, NJEDA, Office of Economic Growth, New Jersey Commission on Science and Technology, and the Office of Energy Savings, based on the ability to create jobs, reduce greenhouse gas emissions, save or create energy, and provide for innovative technology;

(3) \$9,110,306.50 to the New Jersey Housing Mortgage and Finance Agency (HMFA) for a program to be developed and administered by the HMFA to provide financing for the construction of solar energy projects on qualified multi-family housing financed through the HMFA, such funds to be leveraged with existing State energy rebate programs and the federal investment tax credit, with grants prioritized based on the ability to create jobs, generate energy, provide benefits to property residents and to meet HMFA time frames, and with HMFA retaining ownership of all related solar renewable energy certificates for the purpose of establishing a revolving fund to support additional solar energy projects at HMFA-supported residential properties;

(4) \$1,331,402 to the HMFA for a low-interest loan program to be developed and administered by the HMFA for energy efficiency upgrades at single-family and multi-family facilities that are at or below 250% of the area median income (the higher of statewide or county median income) based on a family of four, and affordable multi-family housing owners which meet HMFA's affordability requirements, and which are not eligible for equivalent financing programs offered by the utilities or the Clean Energy Program;

(5) \$15,500,870.50 to the Clean Energy Program for energy efficiency programs administered by the BPU, to be issued to public and private entities on a first-come, first-served basis and specifically targeting customers who are either not currently eligible for Clean Energy Fund incentives or whose energy consumption patterns do not make them likely applicants;

(6) \$6,328,000 to the Office of Energy Savings in the Department of the Treasury for the purposes of energy efficiency and renewable energy programs and projects in State facilities, including State offices, State health facilities and State prisons;

(7) \$4,871,651 to the State Energy Office for implementing energy conservation measures in State-owned and operated facilities; and

(8) \$2,093,363 for grants administered by the BPU to State departments, agencies, authorities and public colleges and universities for energy efficient equipment purposes which will reduce energy demand and greenhouse gas emissions by replacing aging, energy intense equipment with new, more efficient models.

In the event that any of the SEP monies appropriated pursuant to the preceding paragraph are not expended by the date required by the USDOE, the appropriations of such funds pursuant to the preceding paragraph are hereby cancelled, and such unexpended funds are hereby appropriated, subject to the approval of the USDOE and the Director of the Division of Budget and Accounting to the New Jersey Department of the Treasury to establish a revolving energy efficiency project fund (Energy Efficiency Project Fund) for the purposes of funding energy efficiency and renewable energy programs and projects in State facilities, including but not limited to State offices, State health facilities and State prisons. The monies appropriated from the Energy Efficiency Project Fund shall be repaid to the Energy Efficiency Project Fund by the department receiving such monies as follows: of the amounts hereinabove appropriated in this Act to each department receiving monies

from the Energy Efficiency Project Fund, there is hereby appropriated for deposit in the Energy Efficiency Project Fund an amount equivalent to the annual repayment due to the Energy Efficiency Project Fund or the actual savings achieved, whichever is greater.

b. Block Grant Program. Block Grant monies received by the State under ARRA are hereby appropriated as follows:

(1) \$4,160,700 to the Office of Energy Savings in the Department of the Treasury for the purposes of energy efficiency and renewable energy programs and projects in State facilities, including State offices, State health facilities and State prisons; and

(2) \$10,240,000 to the BPU for grants to cities, counties and other local units of government which are not eligible to receive directly from the federal government funds under the Block Grant Program.

Notwithstanding the provisions of any law or regulation to the contrary, the Department of Labor and Workforce Development shall consider consistent with applicable federal law a formal association of community based organizations to be a "local consortium" for the purposes of receiving funding for the delivery of English as a Second Language or Civics education/training.

In order to permit flexibility in the handling of appropriations and ensure the timely payment of claims to providers of medical services, amounts may be transferred among accounts in the Child Integrated System of Care Services program classification. Amounts may also be transferred to and from various items of appropriation within the General Medical Services program classification of the Division of Medical Assistance and Health Services in the Department of Human Services and the Child Integrated System of Care Services program classification in the Department of Children and Families. All such transfers are subject to the approval of the Director of the Division of Budget and Accounting. Notice thereof shall be provided to the Legislative Budget and Finance Officer on the effective date of the approved transfer.

Notwithstanding the provisions of any law or regulation to the contrary, in order to permit flexibility in the management of federal grant funds, amounts appropriated or transferred from such federal funds to State departments as subgrantees of other State departments may be transferred back to an item of appropriation in the original grant recipient department upon completion of the funded activity, subject to the approval of the Director of the Division of Budget and Accounting. Notice thereof shall be provided to the Legislative Budget and Finance Officer on the effective date of the approved transfer.

Grand Total Appropriation, All Funds \$44,023,237,000

2. All dedicated funds are hereby appropriated for their dedicated purposes. There are appropriated, subject to allotment by the Director of the Division of Budget and Accounting and with the approval of the Legislative Budget and Finance Officer, private contributions, revolving funds and dedicated funds received, receivable or estimated to be received for the use of the State or its agencies in excess of those anti-

pated, unless otherwise provided herein. The unexpended balances at the end of the preceding fiscal year of such funds, or any portion thereof, are appropriated, subject to the approval of the Director of the Division of Budget and Accounting. In the event a person or entity wishes to make a monetary donation to the State for a particular purpose, the head of the State agency or department to which such monetary donation is made is hereby authorized to accept such monetary donation.

3. There are appropriated, subject to allotment by the Director of the Division of Budget and Accounting, the following: sums required to refund amounts credited to the State Treasury which do not represent State revenue; sums received representing insurance to cover losses by fire and other casualties and the unexpended balance at the end of the preceding fiscal year of such sums; sums received by any State department or agency from the sale of equipment, when such sums are received in lieu of trade-in value in the replacement of such equipment; and sums received in the State Treasury representing refunds of payments made from appropriations provided in this act.

4. There are appropriated, subject to allotment by the Director of the Division of Budget and Accounting, sums required to satisfy receivables previously established from which non-reimbursable costs and ineligible expenditures have been incurred.

5. There are appropriated, subject to allotment by the Director of the Division of Budget and Accounting, from federal or other non-State sources amounts not to exceed the cost of services necessary to document and support retroactive claims.

6. There are appropriated such sums as may be required to pay interest liabilities to the federal government as required by the Treasury/State agreement pursuant to the provisions of the "Cash Management Improvement Act of 1990," Pub.L. 101-453 (31 U.S.C. s.6501 et seq.), subject to the approval of the Director of the Division of Budget and Accounting.

7. There are appropriated, subject to the approval of the Director of the Division of Budget and Accounting, from interest earnings of the various bond funds such sums as may be necessary for the State to comply with the federal "Tax Reform Act of 1986," Pub.L. 99-514 (26 U.S.C. s.1 et seq. as amended), which requires issuers of tax-exempt debt obligations to rebate any arbitrage earnings to the federal government.

8. There are appropriated from the General Fund, subject to the approval of the Director of the Division of Budget and Accounting, such sums as are necessary to pay interest, at the average rate of earnings during the fiscal year from the State's general investments, to those bond funds that have borrowed money from the General Fund or other bond funds and that have insufficient resources to accrue and pay the interest expense on such borrowing.

9. In addition to the amounts appropriated hereinabove, such additional sums as may be necessary are appropriated to fund the costs of the collection of debts, taxes and other fees and charges owed to the State, including but not limited to the services of auditors and attorneys and enhanced compliance programs, subject to the approval of the Director of the Division of Budget and Accounting.

10. There are appropriated from the Legal Services Fund established pursuant to section 6 of P.L.1996, c.52 (C.22A:2-51), for transfer to the General Fund as State revenue such funds as are necessary to support the appropriations for the following programs contained in this act: Legal Services of New Jersey grant, ten judgeships in

the Judiciary, and for Clinical Legal Programs for the Poor at the Rutgers-Camden Law School, the Rutgers-Newark Law School, and Seton Hall Law School.

11. The unexpended balances at the end of the preceding fiscal year in the accounts of the several departments and agencies heretofore appropriated or established in the category of Additions, Improvements and Equipment are appropriated, subject to the approval of the Director of the Division of Budget and Accounting.

12. The unexpended balances at the end of the preceding fiscal year in the Capital Construction accounts for all departments and agencies are appropriated, subject to the approval of the Director of the Division of Budget and Accounting.

13. Unless otherwise provided, unexpended balances at the end of the preceding fiscal year in accounts of appropriations enacted subsequent to April 1 of the preceding fiscal year, are appropriated.

14. The unexpended balances at the end of the preceding fiscal year in accounts that are funded by Interfund Transfers are appropriated, subject to the approval of the Director of the Division of Budget and Accounting.

15. Notwithstanding any provisions in this act or the provisions of any law or regulation to the contrary, no unexpended balances at the end of the preceding fiscal year are appropriated without the approval of the Director of the Division of Budget and Accounting, except that the Legislative Branch of State government shall be exempt from this provision. The Director of the Division of Budget and Accounting shall notify the Legislative Budget and Finance Officer of those instances in which unexpended balances are not appropriated pursuant to this section.

16. The administrative costs of the Special Education Medicaid Initiative (SEMI) and the Medicaid Administrative Claiming (MAC) program, including the participation of a consultant, are appropriated and shall be paid from the revenue received, subject to the approval of the Director of the Division of Budget and Accounting.

17. The following transfer of appropriations rules are in effect for the current fiscal year:

a. To permit flexibility in the handling of appropriations, any department or agency that receives an appropriation by law, may, subject to the provisions of this section, or unless otherwise provided in this act, apply to the Director of the Division of Budget and Accounting for permission to transfer funds from one item of appropriation to a different item of appropriation. For the purposes of this section, "item of appropriation" means the spending authority identified by an organization code, appropriation source, and program code, unique to the item. If the director consents to the transfer, the amount transferred shall be credited by the director to the designated item of appropriation and notice thereof shall be provided to the Legislative Budget and Finance Officer on the effective date of the approved transfer. However, the director, after consenting thereto, shall submit the following transfer requests to the Legislative Budget and Finance Officer for legislative approval or disapproval unless otherwise provided in this act:

(1) Requests for the transfer of State and other non-federal funds, in amounts greater than \$300,000, to or from any item of appropriation;

(2) Requests for the transfer of State and other nonfederal funds, in amounts greater than \$50,000, to or from any Special Purpose account, as defined by major ob-

ject 5, or Grant account, as defined by major object 6, within an item of appropriation, from or to a different item of appropriation;

(3) Requests for the transfer of State and other nonfederal funds, in amounts greater than \$50,000, to or from any Special Purpose or Grant account in which the identifying organization code, appropriation source, and program code, remain the same, provided that the transfer would effect a change in the legislative intent of the appropriations;

(4) Requests for the transfer of State funds, in amounts greater than \$50,000, between items of appropriation in different departments or between items of appropriation in different appropriation classifications herein entitled as Direct State Services, Grants-In-Aid, State Aid, Capital Construction and Debt Service;

(5) Requests for the transfer of federal funds, in amounts greater than \$300,000, from one item of appropriation to another item of appropriation, if the amount of the transfer to an item in combination with the amount of the appropriation to that item would result in an amount in excess of the appropriation authority for that item, as defined by the program class;

(6) Requests for such other transfers as are appropriate in order to ensure compliance with the legislative intent of this act.

b. The Joint Budget Oversight Committee or its successor may review all transfer requests submitted for legislative approval and may direct the Legislative Budget and Finance Officer to approve or disapprove any such transfer request. Transfers submitted for legislative approval pursuant to paragraph (4) of subsection a. of this section shall be made only if approved by the Legislative Budget and Finance Officer at the direction of the committee.

c. The Legislative Budget and Finance Officer shall approve or disapprove requests for the transfer of funds submitted for legislative approval within 10 working days of the physical receipt thereof and shall return them to the director. If any provision of this act or any supplement thereto requires the Legislative Budget and Finance Officer to approve or disapprove requests for the transfer of funds, the request shall be deemed to be approved by the Legislative Budget and Finance Officer if, within 20 working days of the physical receipt of the request, he has not disapproved the request and so notified the requesting officer. However, this time period shall not pertain to any transfer request under review by the Joint Budget Oversight Committee or its successor, provided notice of such review has been given to the director.

d. No amount appropriated for any capital improvement shall be used for any temporary purpose except extraordinary snow removal or extraordinary transportation maintenance, subject to the approval of the Director of the Division of Budget and Accounting. However, an amount from any appropriation for an item of capital improvement may be transferred to any other item of capital improvement subject to the approval of the director, and, if in an amount greater than \$300,000, subject to the approval of the Legislative Budget and Finance Officer.

e. The provisions of subsections a. through d. of this section shall not apply to appropriations made to the Legislative or Judicial branches of State government. To permit flexibility in the handling of these appropriations, amounts may be transferred to

and from the various items of appropriation by the appropriate officer or designee with notification given to the director on the effective date thereof.

f. Notwithstanding any provisions of this section to the contrary, transfers to and from the Special Purpose appropriation to the Governor for emergency or necessity under the Other Inter-Departmental Accounts program classification and transfers from the appropriations to the various accounts in the category of Salary Increases and Other Benefits, both in the Inter-Departmental Accounts, shall not be subject to legislative approval or disapproval.

18. The Director of the Division of Budget and Accounting shall make such correction of the title, text or account number of an appropriation necessary to make such appropriation available in accordance with legislative intent. Such correction shall be by written ruling, reciting in appropriate detail the facts thereof, and reasons therefore, attested by the signature of the Director of the Division of Budget and Accounting and filed in the Division of Budget and Accounting of the Department of the Treasury as an official record thereof, and any action thereunder, including disbursement and the audit thereof, shall be legally binding and of full force and virtue. An official copy of each such written ruling shall be transmitted to the Legislative Budget and Finance Officer, upon the effective date of the ruling.

19. The Legislative Budget and Finance Officer with the cooperation and assistance of the Director of the Division of Budget and Accounting is authorized to adjust this appropriations bill to reflect any reorganizations which have been implemented since the presentation of the Governor's Budget Message and Recommendations that were proposed for this fiscal year.

20. None of the funds appropriated to the Executive Branch of State government for Information Processing, Development, Telecommunications, and Related Services and Equipment shall be available to pay for any of these services or equipment without the review of the Office of Information Technology, and compliance with statewide policies and standards and an approved department Information Technology Strategic Plan.

21. If the sum provided in this act for a State aid payment pursuant to formula is insufficient to meet the full requirements of the formula, all recipients of State aid shall have their allocation proportionately reduced, subject to the approval of the Director of the Division of Budget and Accounting.

22. When the duties or responsibilities of any department or branch, except for the Legislature and any of its agencies, are transferred to any other department or branch, it shall be the duty of the Director of the Division of Budget and Accounting and the director is hereby empowered to transfer funds appropriated for the maintenance and operation of any such department or branch to such department or branch as shall be charged with the responsibility of administering the functions so transferred. The Director of the Division of Budget and Accounting shall have the authority to create such new accounts as may be necessary to carry out the intent of the transfer. Information copies of such transfers shall be transmitted to the Legislative Budget and Finance Officer upon the effective date thereof. If such transfers may be required among appropriations made to the Legislature and its agencies, the Legislative Budget and Finance Officer, subject to the approval of the President of the Senate and the

Speaker of the General Assembly, is hereby empowered and it shall be that officer's duty to effect such transactions hereinabove described and to notify the Director of the Division of Budget and Accounting upon the effective date thereof.

23. The Director of the Division of Budget and Accounting is empowered and it shall be the director's duty in the disbursement of funds for payment of expenses classified as salary increases and other benefits, employee benefits, debt service, rent, telephone, data processing, motor pool, insurance, travel, postage, lease payments on equipment purchases, additions, improvements and equipment, and compensation awards, to credit or transfer to the Department of the Treasury, to an Inter-Departmental account, or to the General Fund, as applicable, from any other department, branch or non-State fund source out of funds appropriated or credited thereto, such sums as may be required to cover the costs of such payment attributable to such other department, branch or non-State fund source, or to reimburse the Department of the Treasury, an Inter-Departmental account, or the General Fund for reductions made representing statewide savings in the above expense classifications, as the director shall determine. Receipts in any non-State funds are appropriated for the purpose of such transfer.

24. The Governor is empowered to direct the State Treasurer to transfer from any State department to any other State department such sums as may be necessary for the cost of any emergency occasioned by aggression, civil disturbance, sabotage, or disaster. In addition, there are appropriated such additional sums as may be necessary for emergency repairs and reconstruction of State facilities or property, subject to the approval of the Director of the Division of Budget and Accounting and the Joint Budget Oversight Committee. Appropriations referred to the Joint Budget Oversight Committee shall be deemed approved, unless a resolution of disapproval is adopted within 10 working days of receipt of notification of the proposed appropriation.

25. Upon request of any department receiving non-State funds, the Director of the Division of Budget and Accounting is empowered to transfer such funds from that department to other departments as may be charged with the responsibility for the expenditure thereof.

26. The Director of the Division of Budget and Accounting is empowered to transfer or credit appropriations to any State agency for services provided, or to be provided, by that agency to any other agency or department; provided further, however, that funds have been appropriated or allocated to such agency or department for the purpose of purchasing these services.

27. Notwithstanding the provisions of any law or regulation to the contrary, should appropriations in the Property Tax Relief Fund exceed available revenues, the Director of the Division of Budget and Accounting is authorized to transfer General Fund unreserved, undesignated fund balances into the Property Tax Relief Fund, providing unreserved, undesignated fund balances are available from the General Fund, as determined by the Director of the Division of Budget and Accounting.

28. Notwithstanding the provisions of any law or regulation to the contrary, should appropriations in the Casino Revenue Fund exceed available revenues, the Director of the Division of Budget and Accounting is authorized to transfer General Fund unreserved, undesignated fund balances into the Casino Revenue Fund, providing unre-

served, undesignated fund balances are available from the General Fund, as determined by the Director of the Division of Budget and Accounting.

29. Notwithstanding the provisions of P.L.1954, c.48 (C.52:34-6 et seq.), sums appropriated for services for the various State departments and agencies may be expended for the purchase of contract services from the New Jersey Sea Grant Consortium as if it were a State government agency pursuant to subsection (a) of section 5 of P.L.1954, c.48 (C.52:34-10).

30. Out of the amounts hereinabove appropriated, the Director of the Division of Budget and Accounting is empowered to approve payment of obligations applicable to prior fiscal years, upon the written recommendation of any department head, or the department head's designated representative. The Director of the Division of Budget and Accounting shall reject any recommendations for payment which the Director deems improper.

31. Whenever any county, municipality, school district or a political subdivision thereof withholds funds from a State agency, or causes a State agency to make payment on behalf of a county, municipality, school district or a political subdivision thereof, then the Director of the Division of Budget and Accounting may withhold State aid payments and transfer the same as payment for such funds, as the Director of the Division of Budget and Accounting shall determine.

32. The Director of the Division of Budget and Accounting is empowered to establish revolving and dedicated funds as required. Notice of the establishment of such funds shall be transmitted to the Legislative Budget and Finance Officer upon the effective date thereof.

33. The Director of the Division of Budget and Accounting may, upon application therefore, allot from appropriations made to any official, department, commission or board, a sum to establish a petty cash fund for the payment of expenses under rules and regulations established by the director. Allotments thus made by the Director of the Division of Budget and Accounting shall be paid to such person as shall be designated as the custodian thereof by the official, department, commission or board making a request therefore, and the money thus allotted shall be disbursed by such custodian who shall require a receipt therefore from all persons obtaining money from the fund. The director shall make regulations governing disbursement from petty cash funds.

34. From appropriations to the various departments of State government, the Director of the Division of Budget and Accounting is empowered to transfer sums sufficient to pay any obligation due and owing in any other department or agency.

35. Notwithstanding the provisions of any law or regulation to the contrary, the State Treasurer may transfer from any fund in the State Treasurer's custody, deposited with the State Treasurer pursuant to law, sufficient sums to enable payments from any appropriation made herein for any obligations due and owing. Any such transfer shall be restored out of the taxes or other revenue received in the Treasury in support of this act. Except for transfers from the several funds established pursuant to statutes that provide for interest earnings to accrue to those funds, all such transfers shall be without interest. If the statute provides for interest earnings, it shall be calculated at the average rate of earnings during the fiscal year from the State's general investments and such

sums as are necessary shall be appropriated, subject to the approval of the Director of the Division of Budget and Accounting.

36. Any qualifying State aid appropriation, or part thereof, made from the General Fund may be transferred and recorded as an appropriation from the Property Tax Relief Fund, as deemed necessary by the State Treasurer, in order that the Director of the Division of Budget and Accounting may warrant the necessary payments; provided, however, that the available unreserved, undesignated fund balance in the Property Tax Relief Fund, as determined by the State Treasurer, is sufficient to support the expenditure.

37. Notwithstanding any other provisions of this act, the State Treasurer, upon warrant of the Director of the Division of Budget and Accounting, shall pay any claim not exceeding \$4,000 out of any appropriations made to the several departments, provided such claim is recommended for payment by the head of such department. The Legislative Budget and Finance Officer shall be notified of the amount and description of any such claim at the time such payment is made. Any claimant who has presented a claim not exceeding \$4,000, which has been denied or not recommended by the head of such department, shall be precluded from presenting said claim to the Legislature for consideration.

38. Unless otherwise provided, federal grant and project receipts representing reimbursement for agency and central support services, indirect and administrative costs, as determined by the Director of the Division of Budget and Accounting, shall be transmitted to the Department of the Treasury for credit to the General Fund; provided, however, that a portion of the indirect and administrative cost recoveries received which are in excess of the amount anticipated may be reclassified into a dedicated account and returned to State departments and agencies, as determined by the Director of the Division of Budget and Accounting, who shall notify the Legislative Budget and Finance Officer of the amount of such funds returned, the departments or agencies receiving such funds and the purpose for which such funds will be used, within 10 working days of any such transaction. Such receipts shall be forwarded to the Director of the Division of Budget and Accounting upon completion of the project or at the end of the fiscal year, whichever occurs earlier.

39. Notwithstanding the provisions of any law or regulation to the contrary, each local school district that participates in the Special Education Medicaid Initiative (SEMI) shall receive a percentage of the federal revenue realized for current year claims. The percentage share shall be 17.5% of claims approved by the State by June 30.

40. Notwithstanding the provisions of any law or regulation to the contrary, each local school district that participates in the Medicaid Administrative Claiming (MAC) initiative shall receive a percentage of the federal revenue realized for current year claims. The percentage share shall be 17.5% of claims approved by the State by June 30.

41. Notwithstanding the provisions of P.L.1943, c.188 (C.52:14-17.1 et seq.), the rate of reimbursement for mileage allowed for employees traveling by personal automobile on official business shall be \$.31 per mile.

42. State agencies shall prepare and submit a copy of their agency or departmental budget requests for the next ensuing fiscal year to the Director of the Division of

Budget and Accounting by the deadline and in the manner required by the Director. In addition, State agencies shall prepare and submit a copy of their spending plans involving all State, federal and other non-State funds to the Director of the Division of Budget and Accounting and the Legislative Budget and Finance Officer by November 1, and updated spending plans on February 1 and May 1 of this fiscal year. The spending plans shall account for any changes in departmental spending which differ from this appropriations act and all supplements to this act. The spending plans shall be submitted on forms specified by the Director of the Division of Budget and Accounting.

43. The Director of the Division of Budget and Accounting shall provide the Legislative Budget and Finance Officer with copies of all BB-4s, Application for non-State Funds, and accompanying project proposals or grant applications, which require a State match and that may commit or require State support after the grant's expiration.

44. In order to provide effective cash flow management for revenues and expenditures of the General Fund and the Property Tax Relief Fund in the implementation of this annual appropriations act, there are appropriated from the General Fund such sums as may be required to pay the principal of and interest on tax and revenue anticipation notes including notes in the form of commercial paper (hereinafter collectively referred to as short-term notes), together with any costs or obligations relating to the issuance thereof or contracts related thereto, according to the terms set forth hereinabove. Provided further that, to the extent that short-term notes are issued for cash flow management purposes in connection with the Property Tax Relief Fund, there are appropriated from the Property Tax Relief Fund such sums as may be required to pay the principal of those short-term notes.

45. The State Treasurer is authorized to issue short-term notes, which notes shall not constitute a general obligation of the State or a debt or a liability within the meaning of the State Constitution, and the State Treasurer is authorized to pay any costs or obligations relating to the issuance of such short-term notes or contracts relating thereto. Such short-term notes shall be issued in such amounts and at such times as the State Treasurer shall deem necessary for the above stated purposes and for the payment of related costs, and on such terms and conditions, sold in such manner and at such prices, bearing interest at such fixed or variable rate or rates, renewable at such time or times, and entitled to such security, and using such paying agents as shall be determined by the State Treasurer. The State Treasurer is authorized to enter into such contracts and to take such other actions, all as determined by the State Treasurer to be appropriate to carry out the above cash flow management purposes. The State Treasurer shall give consideration to New Jersey-based vendors in entering into such contracts. Whenever the State Treasurer issues such short-term notes, the State Treasurer shall report on each such issuance to the Chairman of the Senate Budget and Appropriations Committee and the Chairman of the Assembly Appropriations Committee.

46. The Tobacco Settlement Fund, created and established in the Department of the Treasury as a separate non-lapsing fund pursuant to section 53 of P.L.1999, c.138, is reestablished and continued. The unexpended balances at the end of the preceding fiscal year in the Tobacco Settlement Fund are appropriated. The Tobacco Settlement Fund shall be the repository for payments made by the tobacco manufacturers pursuant to the settlement agreement entered into by the tobacco manufacturers and the State on

November 23, 1998 that resolved the State's pending claims against the tobacco industry and all other monies, including interest earnings on balances in the fund, credited or transferred thereto from any other fund or source pursuant to law. Balances in the Tobacco Settlement Fund shall be deposited in such depositories as the State Treasurer may select. Amounts transferred from the Tobacco Settlement Fund to the General Fund as anticipated revenue shall be excluded when calculating deposits to the Surplus Revenue Fund pursuant to P.L.1990, c.44 (C.52:9H-14 et seq.).

47. Notwithstanding the provisions of section 29 of P.L.1983, c.303 (C.52:27H-88), or any law or regulation to the contrary, interest earned in the current fiscal year on balances in the Enterprise Zone Assistance Fund, shall be credited to the General Fund.

48. There is appropriated \$400,000 from the Casino Simulcasting Fund for transfer to the Casino Revenue Fund.

49. In all cases in which language authorizes the appropriation of additional receipts not to exceed a specific amount, and the specific amount is insufficient to cover the amount due for fringe benefits and indirect costs, there are appropriated from receipts such additional amounts as are required to fully cover the amount due for fringe benefits and indirect costs, subject to the approval of the Director of the Division of Budget and Accounting.

50. There are appropriated, out of receipts derived from any structured financing transaction, such sums as may be necessary to satisfy any obligation incurred in connection with any structured financing agreement, subject to the approval of the Director of the Division of Budget and Accounting. In addition, there are appropriated such sums as may be necessary to pay costs incurred in connection with any proposed structured financing transaction, subject to the approval of the Director of the Division of Budget and Accounting.

51. Notwithstanding the provisions of any departmental language or statute, receipts in excess of those anticipated or appropriated as provided in the Departmental Revenue Statements (BB-103s) in the budget submission for this fiscal year are not available for expenditure until a comprehensive expenditure plan is submitted to and approved by the Director of the Division of Budget and Accounting.

52. Such sums as may be necessary are appropriated or transferred from existing appropriations for the purpose of promoting awareness to increase participation in programs that are administered by the State, including but not limited to programs to preserve or promote public health and safety, subject to the approval of the Director of the Division of Budget and Accounting.

53. There are appropriated such additional sums as may be required to pay the amount of any civil penalty imposed on a State officer, employee or custodian pursuant to section 12 of P.L.2001, c.404 (C.47:1A-11), as recommended by the Attorney General and as the Director of the Division of Budget and Accounting shall determine.

54. Receipts derived from the provision of copies and other materials related to compliance with section 12 of P.L.2001, c.404 (C.47:1A-11), are appropriated for the purpose of offsetting agency and departmental expenses of complying with the public access law, subject to the approval of the Director of the Division of Budget and Accounting.

55. Notwithstanding the provisions of any law or regulation to the contrary, there is appropriated from the Universal Service Fund \$65,705,000 for transfer to the General Fund as State revenue.

56. Any qualifying State aid or Grants-In-Aid appropriation, or part thereof, made from the General Fund may be transferred and recorded as an appropriation from the Casino Revenue Fund, as deemed necessary by the State Treasurer, in order that the Director of the Division of Budget and Accounting may warrant the necessary payments; provided, however, that the available unreserved, undesignated fund balance in the Casino Revenue Fund, as determined by the State Treasurer, is sufficient to support the expenditure.

57. Providing that the contributions made during the current fiscal year by the University of Medicine and Dentistry of New Jersey and its affiliates to the University of Medicine and Dentistry of New Jersey Self-Insurance Reserve Fund is equal to the amount established in a memorandum of agreement between the Department of the Treasury and the University, and, if after such amount having been contributed, the receipts deposited within the University of Medicine and Dentistry of New Jersey Self-Insurance Reserve Fund are insufficient to pay claims expenditures, there is appropriated from the General Fund to the Self-Insurance Reserve Fund such sums as may be necessary to pay the remaining claims, subject to the approval of the Director of the Division of Budget and Accounting.

58. In addition to any amounts hereinabove appropriated to pay debt service on bonds, notes and other obligations by the various independent authorities, payment of which is to be made by the State subject to appropriation pursuant to a contract with the State Treasurer or pursuant to a lease with a State department, there are hereby appropriated such additional sums as the Director of the Division of Budget and Accounting shall determine are required to pay all amounts due from the State pursuant to such contracts or leases, as applicable.

59. Such sums as may be required to initiate the implementation of information systems development or modification during the current fiscal year to support fees, fines or other revenue enhancements, or to initiate cost savings or budget efficiencies that are to be implemented during the subsequent fiscal year, and that are proposed in the Governor's Budget Message and Recommendations for the subsequent fiscal year, shall be transferred between appropriate accounts, subject to the approval of the Director of the Division of Budget and Accounting.

60. Notwithstanding the provisions of any law or regulation to the contrary, no funding shall be provided by any program supported in part or in whole by State funding for erectile dysfunction medications for individuals who are registered on New Jersey's Sex Offender Registry.

61. For the purposes of the "State Appropriations Limitation Act," P.L.1990, c.94 (C.52:9H-24 et seq.), the amounts appropriated to the developmental centers in the Department of Human Services due to opportunities for increased recoveries, amounts carried forward in the State Employees' Health Benefits accounts, and amounts representing balances deemed available in the State Health Benefits Fund shall be deemed a "Base Year Appropriation."

62. The amounts hereinabove appropriated for employee fringe benefits in Inter-Departmental Direct State Services and Grants-In-Aid; Department of Education State Aid; and Department of the Treasury State Aid may be transferred between accounts for the same purposes, as the Director of the Division of Budget and Accounting shall determine.

63. Notwithstanding the provisions of P.L.2004, c.68 (C.34:1B-21.16 et seq.) or any law or regulation to the contrary, funds remaining in the Dedicated Cigarette Tax Revenue Fund at the end of the current fiscal year are appropriated from such fund for transfer to the General Fund as State revenue.

64. Unless otherwise provided in this act, all unexpended balances at the end of the preceding fiscal year that are appropriated by this act are appropriated for the same purpose.

65. Notwithstanding the provisions of section 14 of Article 3 of P.L.1944, c.112 (C.52:27B-23) or any law or regulation to the contrary, copies of the budget message shall be made available to the State library, public libraries, newspapers and citizens of the State only through the State of New Jersey website.

66. There are appropriated such sums as are necessary, not to exceed \$750,000, to fund costs incurred by the State, including attorneys' costs, in connection with arbitration/litigation relating to claims by participating tobacco manufacturers that they are entitled to reductions in payments they make under the Tobacco Master Settlement Agreement, subject to the approval of the Director of the Division of Budget and Accounting.

67. The Director of the Division of Budget and Accounting is empowered and it shall be the director's duty in the disbursement of funds for payment of expenses classified as debt service, to credit or transfer among the various departments, as applicable, out of funds appropriated or credited thereto for debt service payments, such sums as may be required to cover the costs of such payment attributable to debt service or to reimburse the various departments for reductions made representing Statewide savings resulting from bond retirements or defeasances in debt service accounts, as the director shall determine. If the director consents to the transfer, the amount transferred shall be credited by the director to the designated item of appropriation and notice thereof shall be provided to the Legislative Budget and Finance Officer on the effective date of the approved transfer.

68. The unexpended balances at the end of the preceding fiscal year in accounts that provide matching State funds in the various departments and agencies are appropriated in order to provide State authority to match federal grants that have project periods extending beyond the current State fiscal year.

69. Notwithstanding the provisions of any law or regulation to the contrary, it is not possible in Fiscal Year 2013 to appropriate monies to fund all programs authorized or required by statute. As a result, the Governor's Budget Message and Recommendations for Fiscal Year 2013 recommended, and the Legislature agrees, that either no State funding or less than the statutorily required amount be appropriated for certain of these statutory programs. To the extent that these or other statutory programs have not received all or some appropriations for Fiscal Year 2013 in this Appropriations Act which would be required to carry out these statutory programs, such lack of appropria-

tions represents the intent of the Legislature to suspend in full or in part the operation of the statutory programs, including any statutorily imposed restrictions or limitations on the collection of State revenue that is related to the funding of those programs.

70. Notwithstanding the provisions of section 21 of P.L.1983, c.303 (C.52:27H-80), or any other law or regulation to the contrary, crediting of revenues to each account for each enterprise zone in the Enterprise Zone Assistance Fund shall be reduced by the amount of revenues credited from the General Fund into a special account in the Property Tax Relief Fund pursuant to Article VIII, Section I, paragraph 7b of the New Jersey Constitution derived from sales tax collected in such enterprise zone.

71. Notwithstanding the provisions of any other law or regulation to the contrary, there is appropriated as revenue to the General Fund the revenue credited in the current fiscal year to each account for each enterprise zone in the Enterprise Zone Assistance Fund attributable to local projects and the local costs for administering the Urban Enterprise Zone program, as defined by section 29 of P.L.1983, c.303 (C.52:27H-88). Further, there is appropriated as revenue to the General Fund the unexpended balances in the portion of the Enterprise Zone Assistance Fund designated for the State costs for administering the Urban Enterprise Zone program, as defined by section 29 of P.L.1983, c.303 (C.52:27H-88), subject to the approval of the Director of the Division of Budget and Accounting.

72. Notwithstanding the provisions of P.L.2000, c.12, or any other law or regulation to the contrary, funds may be transferred from the Tobacco Settlement Fund to the General Fund during this fiscal year, which transfer amount shall be based upon the available balances in the Tobacco Settlement Fund, subject to the approval of the Director of the Division of Budget and Accounting.

73. Notwithstanding the provisions of section 16 of Article 3 of P.L.1944, c.112 (C.52:27B-25), or any other law or regulation to the contrary, the Director of the Division of Budget and Accounting shall not be required to allot appropriations on a quarterly basis.

74. The funding by a State department in the Executive Branch for a contract for drug screening tests or other laboratory screening tests shall be conditioned upon the following provision: the State department as part of the contract procurement and award process shall notify the Department of Health (DOH) of the proposed contract and provide an opportunity for DOH to submit a proposal, provided, however, the State Department shall not be required to make the award to DOH if DOH is the lowest bidder as factors other than cost may be considered in the evaluation of the proposals, subject to the approval of the Director of the Division of Budget and Accounting.

75. Notwithstanding the provisions of any law or regulation to the contrary, the amounts hereinabove appropriated to the New Jersey Real Estate Commission, Civil Service Commission, New Jersey Maritime Pilot and Docking Pilot Commission, State Athletic Control Board, Public Employment Relations Commission and Appeal Board, New Jersey State Board of Mediation, New Jersey Racing Commission, Council on Local Mandates, Garden State Preservation Trust, the various State professional boards, the Certified Psychoanalysts Advisory Committee and the Audiology and Speech-Language Pathology Advisory Committee in the Department of Law and Public Safety, shall be subject to the following conditions: 1) the base salary, per diem salary,

or any other form of compensation, including that for expenses, for the board members or commissioners paid for out of State funds shall not exceed \$100 per month; and 2) no State monies shall be used to pay for participation in the State Health Benefits Program by board members or commissioners. No other compensation shall be paid; provided, however, that this paragraph shall not apply to the Commissioner/Chief Executive Officer of the State Athletic Control Board, the Chairperson/Chief Executive Officer of the Civil Service Commission, the Chairman of the Public Employment Relations Commission, and any commissioner or board member of any other State board, commission or independent authority who, in addition to being a member of the board or commission also hold a full time staff position for such entity.

76. Notwithstanding the provisions of any law or regulation to the contrary, of the amounts hereinabove appropriated no grant monies shall be paid to a grantee for the costs of any efforts by the grantee or on behalf of the grantee for lobbying activities.

77. Notwithstanding the provisions of subsection c. of section 145 of P.L.1977, c.110 (C.5:12-145) and section 22 of P.L.1970, c.13 (C.5:9-22) or any law or regulation to the contrary, such monies as are required are appropriated to the State Treasurer to publish via the internet reports accounting for the total revenues received in the Casino Revenue Fund and the State Lottery Fund and the specific amounts of money appropriated therefrom for specific expenditures during the preceding fiscal year ending June 30.

78. Notwithstanding the provisions of any other law or regulation to the contrary, and in furtherance of the purposes of P.L.2010, c.104 (C.48:23-18 et al.), there are hereby appropriated, subject to the approval of the Director of the Division of Budget and Accounting, such sums as are necessary for the operation of the New Jersey Public Broadcasting Authority (NJPBA) as required by the Federal Communications Commission (FCC) to maintain the FCC licenses owned by the NJPBA, to oversee any agreements with private operators, and to carry out any other duties and responsibilities that the NJPBA has under P.L.2010, c.104 and as the FCC licensee of broadcast stations, including the costs of employees, office space, equipment, consultants, professional advisors including lawyers, and any other costs determined to be necessary to carry out the NJPBA mission under P.L.2010, c.104 consistent with FCC requirements.

79. Notwithstanding the provisions of sections 5 and 6 of P.L.1990, c.44 (C.52:9H-18 and 52:9H-19) or any other law or regulation to the contrary, there may be transferred from the Surplus Revenue Fund to the General Fund an amount up to the credit made to the Surplus Revenue Fund during the immediately preceding fiscal year, subject to the approval of the Director of the Division of Budget and Accounting.

80. Notwithstanding any provision of law or regulation to the contrary, in order to implement the provisions of the Comprehensive Medicaid Waiver submitted by the State in 2011 to the U.S. Department of Health and Human Services' Centers for Medicare and Medicaid Services (CMS), as well as any amendments or supplements to the Comprehensive Medicaid Waiver (collectively referred to as Waiver), including all items contained in the Waiver awaiting federal approval and those that eventually receive federal approval, amounts may be transferred to and from various items of appropriation within the General Medical Services program classification of the Division of Medical Assistance and Health Services, the Community and Addictions Services pro-

gram classifications in the Division of Mental Health and Addiction Services, the Disability Services program classification in the Division of Disability Services, the Purchased Residential Care, Social Supervision and Consultation, and Adult Activities program classifications in the Division of Developmental Disabilities in the Department of Human Services, the Medical Services for the Aged program classification in the Division of Aging Services in the Department of Human Services, the Child Integrated System of Care Services program classification in the Division of Child Integrated System of Care Services in the Department of Children and Families. A portion of receipts generated or savings realized in Medical Assistance Grants-In-Aid accounts from Waiver initiatives may be transferred to the Health Services Administration and Management accounts in the Department of Human Services, as determined by the Commissioner of Human Services to be required to fund costs incurred in realizing these additional receipts or savings. All such transfers are subject to the approval of the Director of the Division of Budget and Accounting. Notice of the Director of the Division of Budget and Accounting's approval shall be provided to the Legislative Budget and Finance Officer on the effective date of the approved transfer.

81. Notwithstanding the provisions of any law or regulation to the contrary, there is appropriated an amount not to exceed \$89,000,000 from the Clean Energy Fund for transfer to the General Fund as State revenue, subject to the approval of the Director of the Division of Budget and Accounting.

82. Notwithstanding the provisions of any law or regulation to the contrary, there is appropriated the available balance from the Global Warming Solutions Fund for transfer to the General Fund as State revenue.

83. Notwithstanding the provisions of any law or regulation to the contrary, there is appropriated an amount not to exceed \$10,000,000 from the Sanitary Landfill Facility Contingency Fund for transfer to the General Fund as State revenue, subject to the approval of the Director of the Division of Budget and Accounting.

84. Notwithstanding the provisions of any law or regulation to the contrary, there is appropriated \$1,000,000 from the Real Estate Guaranty Fund for transfer to the General Fund as State revenue.

85. Notwithstanding the provisions of any law or regulation to the contrary, there is hereby appropriated to the General Fund as State revenue an amount not to exceed \$12,500,000 transferred by the New Jersey Economic Development Authority to the State from the proceeds of monies which have not been committed by the Authority pursuant to P.L.2007, c.340.

86. Notwithstanding the provisions of section 20 of P.L.1985, c.222 (C.52:27D-320), section 8 of P.L.2008, c.46 (C.52:27D-329.2), section 9 of P.L.2008, c.46 (C.52:27D-329.3), or any other law or regulation to the contrary, an amount not to exceed \$200,000,000 of monies received in the "New Jersey Affordable Housing Trust Fund" consisting of payments of development fees or payments-in-lieu of constructing affordable units pursuant to section 8 of P.L.2008, c.46 (C.52:27D-329.2) or section 9 of P.L.2008, c.46 (C.52:27D-329.3) that have not been committed shall be deposited in the General Fund as State revenue, subject to the approval of the Director of the Division of Budget and Accounting. Amounts appropriated in this Act for the provision of programs for affordable housing for households and individuals with low and moderate

incomes shall be credited against such funds as determined by the Director of the Division of Budget and Accounting. Such programs shall include but not be limited to State programs for: rental assistance; homelessness prevention; residential services for individuals with developmental disabilities or mental illness, parolees and other individuals in the criminal justice system; shelter assistance; and emergency assistance for individuals and families facing homelessness.

87. Notwithstanding the provisions of any law or regulation to the contrary, there is appropriated from the Mortgage Servicing Settlement Fund for transfer to the General Fund as State revenue the proceeds obtained by the State and deposited into such fund from the Consent Judgment entered into in connection with the settlement of litigation involving allegations of foreclosure abuses, fraud and unacceptable business practices by the country's five largest mortgage servicers.

88. Notwithstanding the provisions of any law or regulation to the contrary, such sums as were appropriated from the Mortgage Servicing Settlement Fund for transfer to the General Fund as State revenue are hereby appropriated, subject to the approval of the Director of the Division of Budget and Accounting, for the following purposes: attorneys fees, investigation and other expenses related to the investigation and resolution of the mortgage servicing settlement, Affordable Housing, Local Planning Services, Developmental Disabilities Residential Services, State Rental Assistance Program, Homelessness Prevention, Shelter Assistance, Community Based Senior Programs, Mental Health Residential Programs, Social Services for the Homeless, and Temporary Assistance for Needy Families.

89. In order to permit flexibility in the handling of appropriations, to promote the timely and effective implementation of the reorganization of the Departments of Children and Families, Community Affairs, Health, and Human Services, as proposed in the Governor's FY 2013 budget recommendations, to ensure that appropriate levels of services are provided, to safeguard continuity of care, and to ensure that timely payments are made to providers, amounts may be transferred to and from the various items of appropriation within the affected program classifications of the above-referenced departments, including but not limited to items of appropriation within the following program classifications: Child Integrated System of Care Services, in the Department of Children and Families; Purchased Residential Care, Social Supervision and Consultation, Addiction Services, and Community Services in the Department of Human Services; and Administration and Support Services in all above-referenced Departments. All such transfers are subject to the approval of the Director of the Division of Budget and Accounting. Notice thereof shall be provided to the Legislative Budget and Finance Officer on the effective date of the approved transfer.

90. Notwithstanding the provisions of any law or regulation to the contrary, the amounts hereinabove appropriated, to the extent not inconsistent with federal law or regulation, are subject to the following conditions: in recognition of the limited continuing availability of federal American Recovery and Reinvestment Act (ARRA), Pub.L. 111-5, funding during FY 2013 and the pending federal deadlines for spending such funds or else forfeiting them back to the federal government, to the maximum extent possible, all available federal ARRA dollars uncommitted as of the effective date of this act shall be spent first, wherever available, in support of qualifying activities

before any appropriated State dollars are expended for the same purpose or purposes; and (2) in the event that ARRA dollars are available for use in FY2013, the Director of the Division of Budget and Accounting may reserve an amount of excess appropriated State funds.

91. This act shall take effect July 1, 2012.

