





MEMORANDUM

FROM: Christian Heiss, Executive Director

DATE: August 14, 2019

SUBJECT: Preparation of State Fiscal Year 2013-2017 Annual Reports to the Governor and

Legislature

This memorandum is to describe the process used to finalize the annual reports to the Governor and Legislature of New Jersey on the status of the Catastrophic Illness in Children Relief Fund, as required by N.J.S.A. 26:2-159, for State Fiscal Years 2013 through 2017, covering the period of July 1, 2012 through June 30, 2017.

During the period described above, draft reports were prepared by staff of the State Office of the Fund. These reports were not finalized and therefore were not transmitted to the Governor and Legislature in a timely manner.

Upon my appointment in April 2019, I reviewed these 5 years of reports and conducted light copyediting, but did not materially change the content of the draft reports as I received them. At their August 2019 meeting the Commission voted to approve and issue the annual reports from State Fiscal Years 2013 through 2017, with a few additional copy and name edits, with inclusion of this memorandum in each report.

CATASTROPHIC ILLNESS IN CHILDREN RELIEF FUND COMMISSION

PUBLIC MEMBERS OF THE COMMISSION

Janice Prontnicki, M.D., M.P.H., F.A.A.P., Chairperson Howard Weinberg, D.O. Carl Underland Ralph J. Condo Phyllis Shanley Hansell

Jennifer Velez, Commissioner of Human Services
Allison Blake, Commissioner of Children and Families
Mary O'Dowd, Commissioner of Health
Andrew P. Sidamon-Eristoff, State Treasurer
Kenneth Kobylowski, Commissioner of Banking and Insurance

EXECUTIVE DIRECTOR

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Honorable Chris Christie Governor State of New Jersey State House Trenton, New Jersey 08625

Dear Governor Christie:

Please see the enclosed Annual Report to the Governor and the Legislature of the State of New Jersey on the Catastrophic Illness in Children Relief Fund (CICRF) Act, July 2014 to June 2015.

In State Fiscal Year 2015, the Catastrophic Illness in Children Relief Fund Commission approved nearly \$7 million in grant awards for 424 families. Since the first grant awards were approved in December 1989, approximately \$163 million has been awarded to over 7,695 families.

The Commission continues to provide meaningful relief for families struggling to cope with the financial responsibilities that accompany a child's significant health problems. We ask that you join the Commission in communicating the program's message that families do not have to bear the high out-of-pocket costs of their children's care alone.

With best wishes,

Janice Prontnickí

Janice Prontnicki, M.D., M.P.H., F.A.A.P. Chairperson

EXECUTIVE SUMMARY

The Catastrophic Illness in Children Relief Fund Commission (the Fund) approved nearly \$7 million in grant awards for families in need during State Fiscal Year 2015 (SFY'15). The Commission has been providing meaningful financial relief for New Jersey families since grant awards first were approved in December 1989. As of June 30, 2015, approximately \$163 million has been awarded to New Jersey families.

The data on awards approved in SFY'15 demonstrates that financial help was available to meet the diverse needs of 424 New Jersey eligible families with awards ranging from \$1,282.00 to \$100,000.00. The average award per family was \$16,152.00. Financial assistance from the Fund provided relief for costs associated with a wide array of medical problems, from simple fractures to rare genetic disorders.

Knowing from experience that any family, regardless of income or insurance status, may be just one illness or accident away from personal and financial hardship, the Commission reached out to families through a comprehensive public information campaign. Working with volunteer parents, community and official agencies, schools, hospitals, employers, and print and broadcast media, the Commission disseminated program information throughout the State.

The Commission's cost savings initiatives through regulatory caps and negotiations of discounts with providers yielded savings of approximately over \$2 million in SFY'14. Since the inception of the Fund, the Commission has achieved over \$30 million in total discounts. This effort continues a long- standing practice of the Commission to reduce costs, whenever possible, to ensure it can continue to help New Jersey families in need.

The Commission looks forward to continuing its service to New Jersey families, making a difference in the lives of parents and children faced with extraordinary medical debt.

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ACKNOWLEDGEMENTS

The Catastrophic Illness in Children Relief Fund Commission (CICRF) would like to thank the NJ Department of Human Services for administrative support. The Commission also acknowledges the contributions of member designees in SFY'13, including:

- Riva Thomas of the NJ Department of Human Services
- Pauline Lisciotto of the NJ Department of Health
- John Megariotis of the NJ Department of Treasury
- Ellen DeRosa of the NJ Department of Banking and Insurance
- Latesha Holmes, of the NJ Department of Children and Families

This report was prepared by the State Office of the Catastrophic Illness in Children Relief Fund Commission.

The Catastrophic Illness in Children Relief Fund (The Fund)

The Catastrophic Illness in Children Relief Fund was established by statute (P.L.1987 c.370) to provide financial assistance to families whose children have experienced an illness or condition not fully covered by insurance, state or federal program, or any other resource. The Fund is designed to provide a financial safety net for families struggling with a child's previously incurred medical expenses.

Eligibility Requirements

The definition of a catastrophic illness in this program is economic and is measured in terms of the financial consequences of health care expenses on the family, rather than on traditional diagnostic classifications or acuity of illness. A catastrophic illness means any illness or condition in which the incurred medical expenses are not covered by any state or federal program, insurance contract or other resource, and exceed the established eligibility threshold. In this State Fiscal Year, a catastrophic illness was defined in statute to mean uncovered expenses incurred in the care of a child, which exceeded 10 percent of the first \$100,000 of annual income of a family, plus 15 percent of any income over \$100,000.

"Child" includes someone 21 years of age and younger, so that the Fund can continue to provide continuity in financial assistance for the young adult population.

The family must be legal permanent residents of New Jersey for at least three months prior to submission of an application. Temporary residents, including individuals coming to this state seeking medical care, are excluded from eligibility.

The Catastrophic Illness in Children Relief Fund is unique in that it reviews expenses on a retrospective basis. The Fund reviews expenses for a prior consecutive 12-month period of time dating back to 1988, which is the year the statute was enacted. All expenses are subject to established caps and program regulations.

State Significance

Although health coverage for children in low income families is available through NJ Family Care, the state and federally-funded Children's Health Insurance (CHIP) Program, some families may experience a lapse in coverage during which a child may have uncovered medical expenses. In addition, the Fund often pays for medical condition-related expenses that are not covered through NJ Family Care and other State programs, such as home modifications for accessibility and modified vehicles.

Since its inception in 1989, the Commission provided financial relief for families from a wide socio-economic range. A great majority of the families were employed, had some form of insurance, and yet were vulnerable to personal and financial distress from catastrophic medical costs.

Catastrophic Illness in Children Relief Fund Commission

In January 2008, the Commission's statute was amended by P.L.2007 c. 342, establishing it in the Executive Branch of the New Jersey State government and allocating it within the New Jersey Department of Human Services (DHS) for administrative purposes. Notwithstanding that allocation, the Commission is independent from any supervision or control by the Department or by any board or officer thereof.

In SFY'15, the Commission membership consisted of 12 members: five members ex officio and seven members appointed from the public by the Governor, with the advice and consent of the Senate for terms of five years. Two of the public members are providers of healthcare services for children in this state. The ex officio members are the Commissioners of DHS, the Department of Banking and Insurance, the Department of Treasury, the Department of Health, and the Department of Children and Families.

Responsibilities of the State Office of the Commission

The State Office of the Commission is responsible for administering The Fund on a day-to-day basis and maintaining confidential files on all applicant families. The Fund is operated within the intent and provisions of its statute, program regulations, and in compliance with Commission policies and decisions.

Staff in the State Office of the Commission provides families needed guidance to submit provider bills to insurance, seek Charity Care determinations, or otherwise utilize available resources before submitting an application for financial assistance. Staff also provides information to families for utilizing health care services and understanding reimbursement systems.

Coordination with Special Child, Adult and Early Intervention Services

The Fund works in collaboration with Special Child, Adult and Early Intervention Services (SCAEIS) in the Department of Health. The Commission has continued its grant to SCAEIS for contracted services from the Special Child Health Services (SCHS) Case Management Units in each county to ensure that families have access to program information and referral at the local level.

Collection and Accounting of the Fund

In accordance with the provisions of *P.L.2007 c.342*, a \$1.50 annual surcharge is collected per employee for all employers subject to the New Jersey Unemployment Compensation Law, *R.S.43:31-1 et seq* and deposited in a non-lapsing, revolving trust fund, used to pay for all CICRF operations and payments to providers and families. The surcharge is collected by the State Department of Labor and Workforce Development (LWD) and paid to the State Treasurer for deposit into the Fund. Interest earned on money collected is credited to the Fund.

CATASTROPHIC ILLNESS IN CHILDREN RELIEF FUND Fund Balance		
	ACTUAL FY'14	ACTUAL FY'15
REVENUES:		
FUND BALANCE JULY 1	\$2,654,116	\$3,122,144
SERVICES AND ASSESSMENTS INVESTMENT EARNINGS CONTRIBUTION (DONATIONS)	\$8,682,907 \$3,000 \$0	\$8,648,303 \$3,581 \$475
TOTAL REVENUE EXPENDITURES:	\$8,685,907 	\$8,652,359
DEPARTMENT OF HEALTH FAMILIES AND PROVIDERS OPERATING EXPENSES	\$107,927 \$7,175,961 \$933,991	\$83,497 \$7,354,477 \$1,721,296
TOTAL EXPENDITURES	\$8,217,879	\$9,159,270
FUND BALANCE JUNE 30	\$3,122,144	\$2,615,233

Financial Statements on revenue, expenditures and other financial issues of The Fund were prepared utilizing figures provided by the State Department of Treasury and annotated by fiscal staff of the Catastrophic Illness in Children Relief Fund Commission.

In SFY'15, the state office received 655 applications and processed 740 applications, with the inclusion of reconsiderations, ineligibles and appeals. Of those applications, the Commission approved nearly \$7M for 424 eligible applications.

TOTAL AWARDS APPROVED \$6,974,953.27 TOTAL APPLICATIONS APPROVED 424

Range of Awards \$1,282.40 - \$100,000.00

Average \$16,152.00

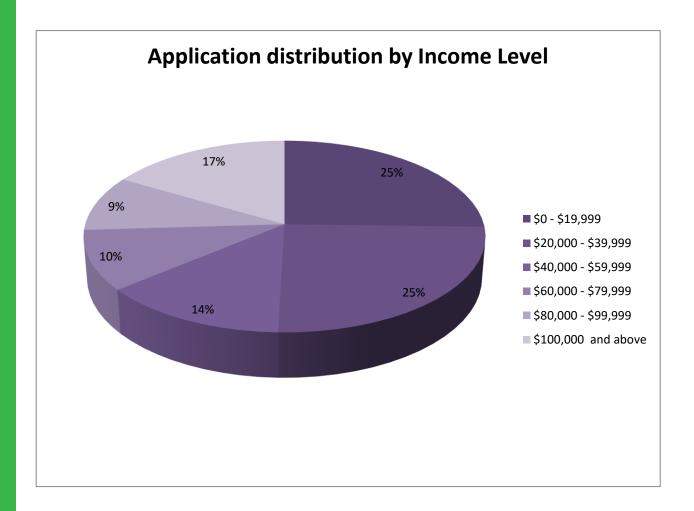
Range of Income \$0 - \$502,189.00 Average \$61,962.99

Average Expense: Income

The applications reviewed by the Commission reflected a range of uncovered expenses among families in need. Awards approved by the Commission in SFY'15 ranged from \$1,282.40 to \$100,000.00 with an average award of \$16,152.00.

46%

The Range of income status of applicant families continues to increase. Families with higher incomes realize that the fund is a viable resource when uncovered medical expenses become proportionately high for them. (See chart)

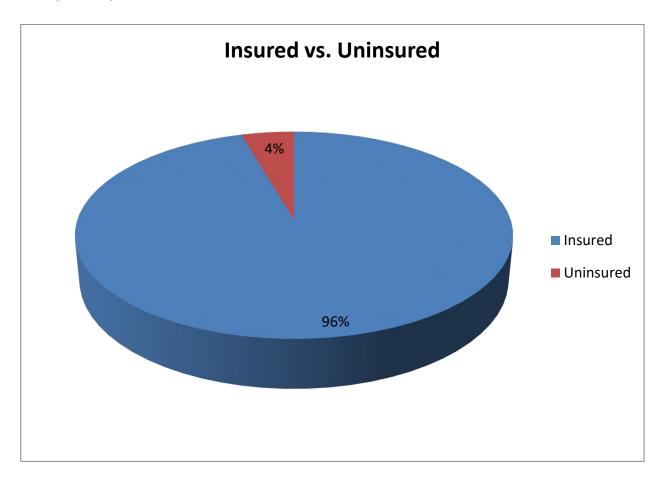


CATASTROPHIC ILLNESS IN CHILDREN RELIEF FUND COMMISSION APPLICATIONS BY COUNTY SFY' 15						
COUNTY	TOTAL E	LIGIBLE	INELIGIBLE	TOTAL	EXPENSES	EXPENSES WITH
RE	EVIEWED			EXPENSES	WITH CAPS	CAPS & DISCOUNTS
ATLANTIC	11	7	4	155,459.77	116,709.47	116,418.01
BERGEN	44	22	22	926,854.55	800,010.38	617,200.29
BURLINGTON	22	11	11	249,384.63	201,641.27	198,776.74
CAMDEN	32	20	12	644,334.82	525,325.53	513,971.02
CAPE MAY	7	2	5	62,030.03	52,240.25	50,439.56
CUMBERLAND	5	3	2	110,431.99	102,210.52	100,479.47
ESSEX	21	9	12	306,988.05	276,854.31	269,718.31
GLOUCESTER	14	10	4	177,844.61	136,151.40	131,625.17
HUDSON	18	8	10	237,544.99	210,701.53	174,844.74
HUNTERDON	7	4	3	172,427.28	118,226.57	116,313.79
MERCER	25	13	12	673,379.16	468,817.64	369,370.62
MIDDLESEX	53	23	30	809,999.70	620,870.33	593,999.22
MONMOUTH	41	31	10	647,614.51	515,309.94	509,190.55
MORRIS	41	27	14	1,065,616.99	786,413.05	780,096.21
OCEAN	214	169	45	1,799.624.66	1,451,102.19	1,424,592.83
PASSAIC	21	11	10	267,139.84	205,823.59	195,212.84
SALEM	3	2	1	88,706.59	61,113.33	61,113.33
SOMERSET	23	14	9	233,207.23	210,088.95	186,658.40
SUSSEX	14	10	4	136,441.03	117,593.66	110,119.34
UNION	33	19	14	354,150.07	303,779.82	274,291.23
WARREN	7	5	2	36,879.33	33,304.85	33,304.85
OUT OF STATE	7	4	3	173,418.26	172,214.21	147,216.75
TOTALS	663	424	239	9,329,478.09	7,486,502.79	6,974,953.27

^{*}Utilization of regulatory caps combined with standardized discounts saved The Fund nearly \$1 million in SFY'15.

Insurance Status of Eligible Parents, SFY'15

Some form of insurance covered the majority of families eligible for assistance, regardless of employment status. More than 96 percent of the families were insured and still had extraordinary out-of-pocket expenses incurred in the care of a child. (See Chart)



Review of Categories for Eligible Health Services

The Fund considers a broad range of health services that may not always be reimbursable under traditional health insurance policies. Additionally, the Fund is unique in that it considers non-traditional health expenses such as home modifications and the purchase of specialized, modified vehicles to accommodate a child's disability and modifications to subsequent vehicles purchased by a family. The Fund does not reimburse for elective cosmetic surgery or special education services required as a result of a medical condition.

N.J.A.C. 10:155 identifies the categories of health services that are considered to be eligible and for which a family may submit for review to the Commission. The following summarizes the percentage of total award amount for each category of eligible health services in applications approved by the Commission in SFY'15.

Category of Eligible Health Service	Average	Category of Eligible Health Service	Average
Transportation (purchase, modification of accessible vehicle; travel costs)	37%	Health Insurance	1%
Specialty Pediatric Ambulatory Care	13%	Durable Medical Equipment	3%
Home Modification	10%	Specialty Hospital, Out-of State	1%
Hospital, In-State	4%	Home Health Care	1%
Pharmacy	3%	Disposable Medical Supplies	1%
Ancillary Services	1%	Temporary Shelter	1%
Physician Services	13%	Hospital, Out-of-State	2%
Specialty Hospital, In-State	1%	Funeral Expenses	1%
Long Term Care	7%		

Review of Medical Conditions

Families apply to the Catastrophic Illness in Children Relief Fund for their children's already incurred medical expenses, which result from an illness or health related condition. The illness or condition is assigned the appropriate diagnostic code consistent with provider billing codes.

The International Classification of Diseases World Health Organization's, Clinical Modifications <u>ICD-9-CM</u> codes and descriptions are based on the official U.S. Department of Health and Human Services codes in effect for each year. <u>ICD-9-CM</u> classifies morbidity and mortality information for statistical purposes, indexing of hospital records by disease and operations, data storage and retrieval. It is designed with precise codes and a classification system that indexes health related conditions, diseases, and procedures, which help describe the clinical picture of the person and is used to classify morbidity data when compiling basic health statistics. The codes can contain up to five digits whenever a greater specificity of a diagnosis is required.

The following pages provide an unduplicated list of diagnoses and conditions presented to the Commission in SFY'15. The list is comprised of both physical and mental health diagnoses, which have generated medical expenses deemed eligible by the Catastrophic Illness in Children Relief Fund Commission.

C	Catastrophic Illness in Children Relief Fund Commission Unduplicated List of Diagnoses/Conditions In SFY'15 Eligible Applications		
Code	Diagnosis (N=300)		
054.9	Herpes Simplex Without Mention Of Complication		
075	Infectious Mononucleosis		
078.0	Molluscum Contagiosum		
078.10	Unspecified Viral Warts		
	Respiratory Syncytial Virus		
079.99	Unspecified Viral Infection		
087.1	Tick-Borne Relapsing Fever		
088	Other Arthropod-Borne Diseases		
0.880	Bartonellosis		
088.81	Lyme Disease		
088.82	Babesiosis		
112.5	Disseminated Candidiasis		
117.9	Other And Unspecified Mycoses		
132.0	Pediculus Capitis		

Code	Diagnosis (N=300)
136.1	Behcets Syndrome
15.6	Revision Of Extraocular Muscle Surgery
162.3	Malignant Neoplasm Upper Lobe Bronchus Or Lung
171.8	Malignant Neoplasm of Other Specified Sites Of Connective & Other Soft Tissue
171.9	Malignant Neoplasm Of Connective & Other Soft Tissue Site Unspecified
189	Malignant Neoplasm Kidney & Other & Unspecified Urinary Organs
190	Malignant Neoplasm Of Eye
191	Malignant Neoplasm Of Brain
191.0	Malignant Neoplasm Cerebrum Except Lobes & Ventricles
191.2	Malignant Neoplasm Of Temporal Lobe Of Brain
191.7	Malignant Neoplasm Of Brain Stem
191.9	Malignant Neoplasm Of Brain Unspecified Site
193	Malignant Neoplasm Of Thyroid Gland
194	Malignant Neoplasm Of Other Endocrine Glands & Related Structures
194.0	Malignant Neoplasm Of Adrenal Gland
200.2	Burkitts Tumor Or Lymphoma
202.7	Peripheral T-Cell Lymphoma
202.8	Other Malignant Lymphomas
204.0	Acute Lymphoid Leukemia
204.00	Acute Lymphoid Leukemia Without Achieved Remission
205.0	Acute Myeloid Leukemia
208.9	Unspecified Leukemia
215.0	Other Benign Neoplasm Of Connective & Other Soft Tissue Head, Face & Neck
215.2	Other Benign Neoplasm Of Connective & Other Soft Tissue Of Upper Limb, Including
	Shoulder
225.0	Benign Neoplasm Of Brain
236.6	Neoplasm Uncertain Behavior of Other & Unspecified Male Genital Organs
237.5	Neoplasm Uncertain Behavior Brain & Spinal Cord
237.71	Neurofibromatosis, Type 1
237.9	Neoplasm Of Uncertain Behavior Of Other & Unspecified Part Of Nervous System
239.6	Neoplasm Of Unspecified Nature Of Brain
242	Thyrotoxicosis With Or Without Goiter
242.0	Toxic Diffuse Goiter
244.8	Other Specified Acquired Hypothyroidism
244.9	Unspecified Hypothyroidism
246	Other Disorders Of Thyroid
250	Diabetes Mellitus
250.03	Diabetes Without Mention Of Complication, Type I [Juvenile Type] Uncontrolled
250.13	Diabetes With Ketoacidosis Type I [Juvenile] Uncontrolled
253.3	Pituitary Dwarfism
253.4	Other Anterior Pituitary Disorders
255.2	Adrenogenital Disorders
259.1	Precocious Sexual Development And Puberty, Not Elsewhere Classified
268	Vitamin D Deficiency
269.3	Mineral Deficiency Not Elsewhere Classified

Code	Diagnosis (N=300)
269.9	Unspecified Nutritional Deficiency
270.0	Disturbances Of Amino-Acid Transport
270.1	Phenylketonuria
270.4	Disturbances Sulphur-Bear Amino-Acid Metabolism
270.6	Disorders Of Urea Cycle Metabolism
270.8	Other Specified Disorders Amino-Acid Metabolism
270.9	Unspecified Disorder Of Amino-Acid Metabolism
272.1	Pure Hyperglyceridemia
272.4	Other And Unspecified Hyperlipidemia
275.2	Disorders Of Magnesium Metabolism
275.8	Other Specified Disorders Of Mineral Metabolism
276.0	Hyperosmolality And Or Hypernatremia
276.1	Hyposmolality And Or Hyponatremia
276.2	Acidosis
276.52	Hypovolemia
276.8	Hypopotassemia
277	Other And Unspecified Disorders Of Metabolism
277.4	Disorders Of Bilirubin Excretion
277.5	Mucopolysaccharidosis
277.89	Other Specified Disorders Of Metabolism
277.9	Unspecified Disorder Of Metabolism
278.03	Obesity Hypoventilation Syndrome
279.10	Unspecified Immunodeficiency With Predominant T-Cell Defect
279.2	Combined Immunity Deficiency
279.41	Autoimmune Lymphoproliferative Syndrome
279.49	Autoimmune Disease Not Elsewhere Classified
279.50	Graft-Versus-Host Disease Unspecified
279.8	Other Specifed Disorders Involving Immune Mechanism
279.9	Unspecified Disorder Of Immune Mechanism
280	Iron Deficiency Anemias
284.01	Constitutional Red Blood Cell Aplasia
285.9	Unspecified Anemia
286.4	Von Willebrands Disease
286.9	Other And Unspecified Coagulation Defects
287.5	Unspecified Thrombocytopenia
289.81	Primary Hypercoagulable State
294.9	Unspecified Persistent Mental Disorders Due To Conditions Classified Elsewhere
295.0	Simple Type Schizophrenia
296.04	Bipolar I Disorder, Single Manic Episode, Severe, Specified With Psychotic Behavior
296.2	Major Depressive Disorder Single Episode
296.22	Major Dprsv Disorder Single Episode Moderate
296.3	Major Depressive Disorder Recurrent Episode
296.32	Major Depressive Disorder Recurrent Episode Moderate
296.33	Major Depressive Disorder, Recurrent Episode, Severe, Without Psychotic Behavior

Code	Diagnosis (N=300)
296.53	Bipolar I Disorder, Most Recent Episode Depressed, Severe, Without Mention Of
	Psychotic Behavior
296.7	Bipolar I Disorder, Most Recent Episode Unspec
296.8	Other And Unspecified Bipolar Disorders
296.80	Bipolar Disorder Unspecified
296.89	Other And Unspecified Bipolar Disorders
296.9	Other And Unspecified Episodic Mood Disorder
296.90	Unspecified Episodic Mood Disorder
296.99	Other Specified Episodic Mood Disorder
298.9	Unspecified Psychosis
299	Pervasive Developmental Disorders
299.0	Autistic Disorder
299.00	Autistic Disorder Current Or Active State
299.8	Other Specified Pervasive Developmental Disorders
299.80	Other Specified Pervasive Developmental Disorders, Current or Active State
299.81	Other Specified Pervasive Developmental Disorders, Residual State
299.9	Unspecified Pervasive Developmental Disorder
300.0	Anxiety States
300.00	Anxiety State. Unspecified
300.01	Panic Disorder Without Agoraphobia
300.02	Generalized Anxiety Disorder
300.23	Generalized Anxiety Disorder
300.3	Obsessive-Compulsive Disorders
300.4	Dysthymic Disorder
301.3	Explosive Personality Disorder
301.4	Obsessive-Compulsive Personality Disorder
301.83	Borderline Personality Disorder
304.90	Unspecified Drug Dependence Unspecified Abuse
305.00	Nondependent Alcohol Abuse Unspecified Drunkenness
305.20	Nondependent Cannabis Abuse Unspecified
305.50	Nondependent Opioid Abuse Unspecified
305.90	Other Mixed, or Unspecified Drug Abuse, Nondependent Drug Abuse Unspecified
307.1	Anorexia Nervosa
307.42	Persistent Disorder Initiating/Maintaining Sleep
307.50	Eating Disorder, Unspecified
307.51	Bulimia Nervosa
307.59	Other Disorder Of Eating
307.6	Enuresis
307.9	Other & Unspecified Special Symptom/Syndrome Not Elsewhere Classified
309.0	Adjustment Disorder With Depressed Mood
309.24	Adjustment Disorder With Anxiety
309.28	Adjustment Disorder With Mixed Anxiety & Depressed Mood
309.3	Adjustment Disorder With Disturbance Of Conduct

Code	Diagnosis (N=300)
309.4	Adjustment Disorder With Mixed Disturbance Of Emotions & Conduct
309.81	Posttraumatic Stress Disorder
334.0	Friedreichs Ataxia
334.8	Other Spinocerebellar Diseases
335.1	Spinal Muscular Atrophy
335.10	Unspecified Spinal Muscular Atrophy
335.19	Other Spinal Muscular Atrophy
335.21	Progressive Muscular Atrophy
337.9	Unspecified Disorder Of Autonomic Nervous System
343	Infantile Cerebral Palsy
343.0	Displegic Infantile Cerebral Palsy
343.10	Hemiplegic Infantile Cerebral Palsy
343.2	Quadriplegic Infantile Cerebral Palsy
343.8	Other Specified Infantile Cerebral Palsy
343.9	Unspecified Infantile Cerebral Palsv
344.09	Other Quadriplegia And Quadriparesis
344.1	Paraplegia
345.	Epilepsy And Recurrent Seizures
345.0	Generalized Nonconvulsive Epilepsy
345.01	Generalized Nonconvulsive Epilepsy With Intractable Epilepsy
345.1	Generalized Convulsive Epilepsy
345.11	Generalized Convulsive Epilepsy With Intractable Epilepsy
345.2	Epileptic Petit Mal Status
345.3	Epileptic Grand Mal Status
345.40	Localization Related (Focal) (Partial) Epilepsy & Epileptic Syndromes With Complex
	Partial Seizures, Without Mention Of Intractable Epilepsy
345.41	Localization Related Epilepsy & Epileptic
345.5	Localization Related Epilepsy & Epileptic Syndromes With Simple Partial Seizures
345.51	Localization Related Epilepsy & Epileptic Syndromes With Simple Partial Seizures
	With Intractable Epilepsy
345.7	Epilepsia Partialis Continua
345.8	Other Forms Of Epilepsy And Recurrent Seizures
345.9	Unspecified Epilepsy
345.90	Unspecified Epilepsy Without Mention Intractable Epilepsy
345.91	Unspecified Epilepsy With Intractable Epilepsy
346	Migraine
348.0	Cerebral Cysts
348.1	Anoxic Brain Damage
348.3	Encephalopathy Unspecified
348.30	Encephalopathy, Unspecified
348.39	Other Encephalopathy
348.4	Compression Of Brain
349.82	Toxic Encephalopathy
349.9	Unspecified Disorders Of Nervous System
351.9	Unspecified Facial Nerve Disorder

355.71 Causalgia Of Lower Limb 357.1 Polyneuropathy In Collagen Vascular Disease 358. Myoneural Disorders 358.00 Myasthenia Gravis Without Exacerbation 358.8 Other Specified Myoneural Disorders 358.9 Unspecified Myoneural Disorders 359.0 Congenital Hereditary Muscular Dystrophy 359.1 Hereditary Progressive Muscular Dystrophy 359.1 Hereditary Progressive Muscular Dystrophy 359.89 Other Myopathies 362.20 Retinopathy Of Prematurity Unspecified 362.21 Retrolental Fibroplasia 362.25 Retinopathy Of Prematurity Stage 3 362.74 Pigmentary Retinal Dystrophy 364.0 Acute And Subacute Iridocyclitis 365 Glaucoma 365.00 Unspecified Preglaucoma 365.01 Primary Open-Angle Glaucoma 365.02 Unspecified Glaucoma With Ocular Hypertension 365.11 Primary Open-Angle Glaucoma 366.04 Duspecified Nonsenile Cataract 366.00 Unspecified Monsenile Cataract 366.01 Myopia 367.21 Rezular Astigmatism 368.01 Strabismic Amblyopia 368.03 Refractive Amblyopia 368.03 Sepression Of Binocular Vision Disorder 369.09 Profound Impairment, Both Eyes 369.09 Unspecified Visual Loss 370.9 Unspecified Tear Film Insufficiency 377.50 Jo Visual Corse Associated With Cortical Blindness 378.01 Unspecified Tear Film Insufficiency 378.00 Unspecified Esotropia 378.01 Monocular Esotropia	Code	Diagnosis (N=300)
357.1 Polyneuropathy In Collagen Vascular Disease 358.0 Myoneural Disorders 358.0 Other Specified Myoneural Disorders 358.9 Unspecified Myoneural Disorders 359.0 Congenital Hereditary Muscular Dystrophy 359.1 Hereditary Progressive Muscular Dystrophy 359.1 Myotonic Muscular Dystrophy 359.2 Other Myonathies 362.20 Retinopathy Of Prematurity Unspecified 362.21 Retrolental Fibroplasia 362.27 Retinopathy Of Prematurity Stage 3 362.28 Retinopathy Of Prematurity Stage 3 362.39 Pigmentary Retinal Dystrophy 364.0 Acute And Subacute Iridocyclitis 365 Glaucoma 365.00 Unspecified Preglaucoma 365.01 Primary Open-Angle Glaucoma 365.02 Unspecified Glaucoma 365.03 Unspecified Glaucoma 366.00 Unspecified Nonsenile Cataract 366.00 Unspecified Nonsenile Cataract 367.1 Myopia 367.21 Regular Astigmatism 368.01 Strabismic Amblyopia 368.03 Refractive Amblyopia 368.03 Refractive Amblyopia 368.03 Refractive Amblyopia 368.03 Refractive Amblyopia 369.09 Blindness Both Eyes Impair Levl Not Further Spec 369.09 Unspecified Visual Loss 370.0 Unspecified Tear Film Insufficiency 377.00 Unspecified Tear Film Insufficiency 377.75 D/O Visual Cortex Associated With Cortical Blindness 378.01 Unspecified Esotropia 378.01 Monocular Esotropia 378.01 Monocular Esotropia	355.71	Causalgia Of Lower Limb
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378.1 Exotropia		
378.24 Intermittent Exotropia, Alternating		
378.35 Accommodative Component In Esotropia		
378.41 Esophoria		·
378.61 Browns Sheath Syndrome		
378.9 Unspecified Disorder Of Eye Movements		

Code	Diagnosis (N=300)
379.31	Aphakia
379.5	Nystagmus And Other Irregular Eye Movements
379.50	Unspecified Nystagmus
379.51	Congenital Nystagmus
379.57	Nystagmus With Deficiencies Saccadic Eye Movements
379.58	Nystagmus With Deficiencies Smooth Pursuit Movements
380.10	Unspecified Infective Otitis Externa
381.81	Dysfunction Of Eustachian Tube
382.00	Acute Suppurative Otitis Media Without Rupture Of Eardrum
384.2	Perforation Of Tympanic Membrane
384.20	Unspecified Perforation Of Tympanic Membrane
388.45	Acquired Auditory Processing Disorder
389	Hearing Loss
389.0	Conductive Hearing Loss
389.03	Conductive Hearing Loss, Middle Ear
389.1	Sensorineural Hearing Loss
389.10	Unspecified Sensorineural Hearing Loss
389.11	Sensory Hearing Loss Bilateral
389.18	Sensorineural Hearing Loss Bilateral
389.9	Unspecified Hearing Loss
396.0	Mitral Valve Stenosis And Aortic Valve Stenosis
401	Essential Hypertension
416.0	Primary Pulmonary Hypertension
416.8	Other Chronic Pulmonary Heart Diseases
425.4	Other Primary Cardiomyopathies
425.8	Cardiomyopathy Other Diseases Classified Elsewhere
427.0	Paroxysmal Supraventricular Tachycardia
427.5	Cardiac Arrest
427.89	Other Specified Cardiac Dysrhythmias
428	Heart Failure
428.21	Acute Systolic Heart Failure
429.3	Cardiomegaly
429.4	Functional Disturbances Following Card Surgery
430	Subarachnoid Hemorrhage
431	Intracerebral Hemorrhage
432.9	Unspecified Intracranial Hemorrhage
434.01	Cerebral Thrombosis With Cerebral Infarction
434.91	Unspecified Cerebral Artery Occlusion With Infarct
437.3	Cerebral Aneurysm, Nonruptured
438.2	Hemiplegia/Hemiparesis Due To Cerebrovascular Disease
438.22	Hemiplegia Affects Of Cerebrovascular Disease, Hemiplegia Affecting Nondominant Side
438.81	Apraxia Due To Cerebrovascular Disease
438.82	Dysphagia Due To Cerebrovascular Disease

Code	Diagnosis (N=300)
452	Portal Vein Thrombosis
456.4	Scrotal Varices
462	Acute Pharyngitis
466.1	Acute Bronchiolitis
466.11	Acute Bronchiolitis Due To Respiratory Syncytial Virus (RSV)
474.11	Hypertrophy Of Tonsils Alone
474.12	Hypertrophy Of Adenoids Alone
477	Allergic Rhinitis
477.9	Allergic Rhinitis Cause Unspecified
478.19	Other Diseases Of Nasal Cavity And Sinuses
478.30	Unspecified Paralysis Of Vocal Cords Or Larynx
478.5	Other Diseases Of Vocal Cords
486	Pneumonia, Organism Unspecified
493	Asthma
493.0	Extrinsic Asthma
493.00	Extrinsic Asthma. Unspecified
493.9	Unspecified Asthma
493.90	Asthma, Unspecified, Unspecified Status
493.92 496	Asthma Unspecified With Exacerbation Chronic Airway Obstruction Not Elsewhere Classified
507.0	Pneumonitis Due To Inhalation Of Food Or Vomitus
518.0	Pulmonary Collapse
518.81	Acute Respiratory Failure
518.82	Other Pulmonary Insufficiency Not Elsewhere Classified
518.83	Chronic Respiratory Failure
518.89	Other Diseases Of Lung Not Elsewhere Classified
519.19	Other Diseases Of Trachea And Bronchus
520.0	Anodontia
520.5	Hereditary Disturbances In Tooth Structure Not Elsewhere Classified
520.6	Disturbances In Tooth Eruption
521.0	Dental Caries
522.8	Radicular Cvst Of Dental Pulp
523.0	Acute Gingivitis
524	Dentofacial Anomalies Including Malocclusion
524.03	Maxillary Hypoplasia
524.04	Mandibular Hypoplasia
524.10	Unspecified Anomaly Relationship Jaw Cranial Base
524.21	Malocclusion Angles Class I
524.22	Malocclusion Angles Class II
524.23	Malocclusion Angles Class Iii
524.24	Anomaly Dental Arch Related Open Anterior Occlusal Relationship
524.29	Other Anomalies Of Dental Arch Relationship
524.31	Crowding Of Teeth
524.4	Unspecified Malocclusion
524.51	Abnormal Jaw Closure

Code	Diagnosis (N=300)
564	Functional Digestive Disorders Not Elsewhere Classified
564.0	Constipation
564.7	Megacolon Other Than Hirschsprungs
564.81	Neurogenic Bowel
565.1	Anal Fistula
569.83	Perforation Of Intestine
571.42	Autoimmune Hepatitis
571.5	Cirrhosis Of Liver Without Mention Of Alcohol
572.3	Portal Hypertension
573	Other Disorders Of Liver
574	Cholelithiasis
575.11	Chronic Cholecystitis
576.1	Cholangitis
576.2	Obstruction Of Bile Duct
578	Gastrointestinal Hemorrhage
578.1	Blood In Stool
579.3	Other And Unspecified Postsurgical Nonabsorption
579.8	Other Specified Intestinal Malabsorption
579.9	Unspecified Intestinal Malabsorption
585	Chronic Kidney Disease
585.9	Chronic Kidney Disease Unspecified
591	Hydronephrosis
596.54	Neurogenic Bladder, Nos
596.55	Detrusor Sphincter Dyssynergia
596.59	Other Functional Disorder Of Bladder
599.0	Urinary Tract Infection Site Not Specified
599.60	Urinary Obstruction Unspecified
603.9	Unspecified Hydrocele
626.0	Absence Of Menstruation
644.2	Early Onset Of Delivery
644.21	Erly Onset Delivery. Delivered With Or Without Mention Of Antpartum Condition
656.23	Isoimmunization From Other And Unspecified Blood-Group Incompatibility,
	Antepartum Condition Or Complication
691.8	Other Atopic Dermatitis And Related Conditions
692	Contact Dermatitis And Other Eczema
692.9	Contact Dermatitis & Other Eczema Due Unspecified Cause
698.4	Dermatitis Factitia
701.8	Other Specified Hypertrophic & Atrophic Condition Skin
706.1	Other Acne
710.4	Polymyositis
714.30	Polyarticular Juvenile Rheumatoid Arthritis Chronic Or Unspecified
714.8	Other Specified Inflammatory Polyarthropathies
717.9	Unspecified Internal Derangement Of Knee
718.49	Contracture Of Joint Of Multiple Sites
722.0	Displacement Of Cervical Intervertebral Disc Without Myelopathy

Code	Diagnosis (N=300)
723.1	Cervicalgia
723.5	Torticollis, Unspecified
726.71	Achilles Bursitis Or Tendinitis
727.06	Tenosynovitis Of Foot And Ankle
727.81	Contracture Of Tendon
728.3	Other Specific Muscle Disorders
728.4	Laxity Of Ligament
728.5	Hypermobility Syndrome
728.87	Muscle Weakness (Generalized)
728.9	Unspecified Disorder Of Muscle Ligament & Fascia
729.1	Unspecified Myalgia And Myositis
729.2	Unspecified Neuralgia Neuritis And Radiculitis
729.5	Pain In Soft Tissues Of Limb
732.5	Juvenile Osteochondrosis Of Foot
732.9	Unspecified Osteochondropathy
733.00	Unspecified Osteoporosis
733.4	Aseptic Necrosis Of Bone
733.40	Aseptic Necrosis Of Bone Site Unspecified
733.90	Disorder Of Bone And Cartilage Unspecified
733.99	Other Disorders Of Bone And Cartilage Other
736.5	Genu Recurvatum
736.71	Acquired Equinovarus Deformity
736.79	Other Acquired Deformity Of Ankle And Foot Other
737	Curvature Of Spine
737.10	Kyphosis Acquired Postural
737.30	Scoliosis , Idiopathic
737.39	Other Kyphoscoliosis And Scoliosis
737.43	Scoliosis Associated With Other Condition
739.1	Nonallopathic Lesion Of Cervical Region Not Elsewhere Clasified
741	Spina Bifida
741.0	Spina Bifida With Hydrocephalus
741.90	Spina Bifida Without Mention Hydrocephalus, Unspecified Region
742.1	Microcephalus
742.2	Congenital Reduction Deformities Of Brain
742.3	Congenital Hydrocephalus
742.4	Other Specified Congenital Anomalies Of Brain
742.59	Other Specified Congenital Anomaly Spinal Cord
742.8 742.9	Other Specified Congenital Anomalies Nervous System Unspecified Congenital Anomaly Brain, Spinal Cord, & Nervous System
742.9	Unspecified Congenital Cataract
743.30 743.9	Unspecified Congenital Anomaly Of Eye
743.9 744.3	Unspecified Congenital Anomaly Of Ear
744.3 744.41	Congenital Branchial Cleft Sinus Or Fistula
	Other Specified Congenital Anomalies Face & Neck
744.8	Other Specified Congenital Anomalies race & Neck

Code	Diagnosis (N=300)
745.0	Common Truncus
745.10	Complete Transposition Of Great Vessels
745.11	Transposition Great Vessels Double Outlet Right Vent
745.2	Tetralogy Of Fallot
745.4	Ventricular Septal Defect
745.5	Ostium Secundum Type Atrial Septal Defect
745.69	Other Congenital Endocardial Cushion Defect
746	Other Congenital Anomalies Of Heart
746.01	Congenital Atresia Of Pulmonary Valve
746.02	Congenital Stenosis Of Pulmonary Valve
746.3	Congenital Stenosis Of Aortic Valve
746.6	Congenital Mitral Insufficiency
746.89	Other Specified Congenital Anomaly Heart Other
746.9	Unspecified Congenital Anomaly Of Heart
747.0	Patent Ductus Arteriosus
747.10	Coarctation Of Aorta Preductal Postductal
747.21	Congenital Anomaly Of Aortic Arch
747.3	Congenital Anomalies Of Pulmonary Artery
747.41	Total Congen Anomalous Pulmonary Venous Connect
747.81	Congenital Anomaly Of Cerebrovascular System
748.3	Other Congenital Anomaly Larynx Trachea & Bronchus
749	Cleft Palate And Cleft Lip
749.	Cleft Palate With Cleft Lip
749.0	Cleft Palate
749.00	Unspecified Cleft Palate
749.02	Unilateral Cleft Palate, Incomplete
749.21	Unilateral Cleft Palate With Cleft Lip Complete
750.0	Tongue Tie
750.29	Other Specified Congenital Anomaly Of Pharynx
750.3	Congenital Tracheoesoph Fist Esophageal Atresia & Stenosis
750.7	Pyloric Stenosis
751	Other Congenital Anomalies Of Digestive System
751.1	Congenital Atresia & Stenosis Of Small Intestine
751.2	Congenital Atresia & Stenosis Of Large Intestine, Rectum & Anal Canal
751.3	Hirschsprungs Disease & Other Congenital Functional Disorders Of Colon
751.4	Congenital Anomalies Of Intestinal Fixation
751.5	Other Congenital Anomalies Of Intestine
751.61	Congenital Biliary Atresia
752.5	Undescended And Retractile Testicle
752.51	Undescended Testis
752.52	Retractile Testis
752.61	Hypospadias
753.15	Congenital Renal Dysplasia
753.8	Other Specified Congenital Anomaly Of Bladder & Urethra
754.0	Congenital Musculoskeletal Deformities Of Skull, Face & Jaw
754.1	Congenital Musculoskeletal Deformities Of Strnocleidomstoid Muscle
754.3	Congenital Dislocation Of Hip

754.53	Congenital Metatarsus Varus
754.69	Other Congenital Valgus Deformity Of Feet
755.0	Polydactyly
755.1	Syndactyly
755.10	Syndactyly Of Multiple And Unspecified Sites
755.13	Syndactyly Of Toes Without Fusion Of Bone
755.30	Congenital Unspecified Reduction Deformity Lower Limb
755.59	Other Congenital Anomaly Upper Limb, Including Shoulder Girdle
755.66	Other Congenital Anomaly Of Toes
756.0	Congenital Anomalies Of Skull And Face Bones
756.14	Hemivertebra
756.4	Chondrodystrophy
756.51	Osteogenesis Imperfecta
756.8	Other Congenital Anomalies Of Muscle Tendon Fascia & Connective Tissue
756.83	Ehlers-Danlos Syndrome
756.9	Other & Unspecified Congenital Anomaly Musculoskeletal System
757.33	Congenital Pigmentary Anomaly Of Skin
758	Chromosomal Anomalies
758.0	Downs Syndrome
758.2	Edwards Syndrome
758.3	Autosomal Deletion Syndromes
758.39	Autosomal Deletion Syndromes, Other Autosomal Deletions
758.6	Gonadal Dysgenesis
758.9	Conditions Due To Anomaly Unspecified Chromosome
759	Other And Unspecified Congenital Anomalies
759.0	Congenital Anomalies Of Spleen
759.5	Tuberous Sclerosis
759.6	Other Congenital Hamartoses Not Elsewhere Classified
759.7	Multiple Congenital Anomalies So Described
759.81	Prader-Willi Syndrome
759.89	Other Specified Multiple Congenital Anomalies So Described
759.9	Unspecified Congenital Anomaly
764.9	Unspecified Fetal Growth Retardation
765	Disorders Relating To Short Gestation & Unspecified Low Birthweight
765.0	Extreme Fetal Immaturity
765.03	Extreme Fetal Immaturity 750-999 Grams
765.10	Other Preterm Infants, Unspecified
765.11	Other Preterm Infants Less Than 500 Grams
765.16	Other Preterm Infants 1500-1749 Grams
765.22	24 Completed Weeks Of Gestation
765.23	25-26 Completed Weeks Of Gestation
765.24	27-28 Completed Weeks Of Gestation
765.25	29-30 Completed Weeks Of Gestation
765.26	31-32 Completed Weeks Of Gestation
765.27	33-34 Completed Weeks Of Gestation
784.0	Headache
784.2	Swelling Mass Or Lump In Head And Neck
784.3	Aphasia
784.42	Dysphonia
784.43	Hypernasality
784.44	Hyponasality
784.5	Other Speech Disturbance
784.51	Dysarthria

784.59	Other Speech Disturbance
784.60	Symbolic Dysfunction, Unspecified
784.69	Other symbolic dysfunction
785.2	Undiagnosed Cardiac Murmurs
785.39	Phelan- McDermid Syndrome
786.03	Apnea
786.09	Other Dyspnea And Respiratory Abnormalities
787.2	Dysphagia
787.20	Dysphagia Unspecified
787.21	Dysphagia Oral Phase
787.22	Dysphagia Oropharyngeal Phase
787.29	Other Dysphagia
787.3	Flatulence Eructation And Gas Pain
787.6	Incontinence Of Feces
788.20	Unspecified Retention Of Urine
788.3	Urinary Incontinence
788.34	Incontinence Without Sensory Awareness
793.0	Nonspecific (Abnormal) Findings On Radiological & Other Examination Of Skull & Head
794.5	Nonspecific Abnormal Results Of Function Study Of Thyroid
794.6	Nonspecific Abnormal Results Other Endocrine Function Study
799.02	Hypoxemia
805.00	Closed Fracture Of Cervical Vertebra, Unspecified Level
808	Fracture Of Pelvis
810	Fracture Of Clavicle
821.00	Closed Fracture Of Unspecified Part Of Femur
823.00	Closed Fracture Of Upper End Of Tibia
823.82	Closed Fracture Of Unspecified Part Of Fibula With Tibia
829.0	Closed Fracture Of Unspecified Bone
843.0	Iliofemoral Sprain And Strain
845.00	Unspecified Site Of Ankle Sprain And Strain
845.1	Foot Sprains And Strains
847.0	Neck Sprain And Strain
850	Concussion
850.9	Unspecified Concussion
851.00	Cortex Contusion Without Of Open Intracranial Wound, Unspecified State Of
	Consciousness
852.49	Extradural Hemorrhage Following Injury Without Mention Of Open Intracranial
	Wound, With Consuccion, Unspecified
854	Intracranial Injury Of Other & Unspecified Nature
854.0	Intracranial Injury Of Other & Unspecified Natere Without Mention Of Open Intracranial
	Wound
873.1	Open Wound Of Scalp, Complicated
873.42	Open Wound Forehead Without Mention Complication
879	Open Wound Other & Unspecified Sites Except Limbs
918.2	Superficial Injury Of Conjunctiva
995.3	Allergy Unspecified Not Elsewhere Classified
995.7	Other Adverse Food Reactions Nec
995.91	Sepsis
996.85	Complications Of Bone Marrow Transplant
997.1	Cardiac Complications Not Elsewhere Classified
997.3	Respiratory Complications Not Elsewhere Classified
997.4	Digestive System Complication Not Elsewhere Classified
998.83	Non-Healing Surgical Wound Not Elsewhere Classified

V42.0	Kidney Replaced By Transplant
V61.20	Counseling For Parent-Child Problem Unspecified
V71.09	Observation Of Other Suspected Mental Condition

Legislative and Regulatory Changes

There were no amendments to the Commission's enabling legislation during the fiscal year. There were also no changes made to the Commission's regulations during the fiscal year.

Fiscal Issues

The Commission continued prudent fiscal practices in SFY'15 that preserved resources for families applying for financial assistance. In addition to implementing various regulatory caps, staff continued the practice of successfully negotiating discounts with outstanding providers. All families were held harmless from any of these balances. Implementation of these regulatory and non-regulatory provisions realized savings of approximately \$1 million in SFY'15. Since the discount policy was adopted in 1994, the Commission realized savings of over \$31 million

Public Information

Significant efforts have been made since the Fund's inception and will continue to be made to ensure that all New Jersey Families are aware of the Fund. In SFY'15, the Commission's Public Information Plan was designed to enhance public awareness of "The Fund" through paid advertising, community outreach and public relations efforts. The unique 800-phone number continued to be available for the public as the Family Information Line, 1-800-335-FUND. The Fund's website www.njcatastrophicfund.org is also available for the public to obtain information and submit an application.

The Fund continued to present to groups not familiar with the Fund or to those who are in contact with families. The Fund also exhibits at conferences and conventions. The practice of following up with community organizations, schools, individual families and small groups representing parents of children with disabilities continued and when possible presentations to these groups were made.

The Commission's Annual Meeting was held on June 24, 2015, during which the Commission joined members of the Family Advisory Committee (FAC) and guests. The meeting was held in the Masonic Temple and honored guests included Commission Members, staff, and many families and applicant children. The FAC supports the Commission in disseminating program information on the local level. In SFY'15, the FAC had 132 families.

The Fund has seen a significant increase in the number of requested and received applications. Program information requests were generated from a variety of sources, including but not limited to health care providers, schools, special children's programs, and other State programs. Special Child Health Services also has been instrumental in referring many families to the program. In addition, the Fund continues to receive requests for information through its website. On this site, interested parties can access information about The Fund, including a copy of our Annual Report. Families can now also submit their application online through the website. Information about the Fund also can be accessed through the 211 information and referral system, and through web links at various organizations and companies, including but not limited to Virtua Health Systems, Parent Partners Muscular Dystrophy, the Arc of NJ, Family Support Center of NJ and the CARES Foundation. The online screening tool of NJ Helps, Phase II takes basic information from a user and generates appropriate program referrals. It is hoped that this online tool will generate new referrals to the Fund as well.

Outreach efforts continued throughout the fiscal year. The Fund attended and/or exhibited at several conferences and fairs, including the American Academy of Pediatrics, NJ Conference of Mayors, NJ Association of Counties, Women in Municipal Government, Governor's Conference for Women, Dental Expo and the National Association of Social Workers. The Fund also initiated radio advertisements on local stations to raise awareness of this valuable resource. Additional outreach efforts included program information mailings to Family Advisory Committee members, county Special Child Health Case Management units, parents of ill children identified through our newspaper clipping service and to reporters who have written stories on ill children.



POLICY ISSUES

In the past, many of the applications received from families were initiated by health providers. It was decided that the Fund would expand outreach efforts in an attempt to connect with families who have high uncovered medical expenses from various sources rather than from one major provider. Since then, the Fund has made an effort to target advertising and educational materials towards families and small grassroots organizations, in order to facilitate more direct family reimbursements.

Testimonials

Families from all socio-economic backgrounds applied for assistance and expressed their gratitude for the financial support they received. The following testimonials from recipient families validate the success and effectiveness of the Catastrophic Illness in Children Relief Fund:





POLICY ISSUES

Conclusion

Any family in New Jersey may find needed financial assistance from the Catastrophic Illness in Children Relief Fund if their child's uncovered medical expenses are disproportionate to their earnings. Due to the fact that the Fund assists such a broad segment of the population, it is not possible to focus on a limited audience for dissemination of public information. Rather, it is necessary to identify a variety of target audiences involved with children's issues and to diversify advertising efforts as efficiently and cost effectively as possible.

There continues to be a pressing need for the assistance of the Fund, regardless of insurance status, employment, or eligibility for other State and federal programs. The Fund strives to fill the gaps in service that have caused hardship for many New Jersey families.

The public needs program information to be available directly as well as through traditional sources such as health care providers, state and community organizations. The Commission's public information plan in SFY'15 provided for such dissemination of information.

Combined efforts by the Commission, staff, FAC volunteer parents and advertising vendors provided the public with access to information on the help available through this valuable state resource. With an active public information plan in place, the Commission is committed to promoting the Fund to its expanding population.

Enabling Legislation

§ 26:2-148. Legislative findings and declarations

The Legislature finds and declares that:

- a. Although the majority of Americans are covered by some form of health insurance, families nevertheless lack protection against the high cost of chronic or single episodes of serious illness that may destroy their resources. An illness resulting in this potentially devastating financial consequence is referred to as a catastrophic illness.
- b. Catastrophic illnesses often threaten to push some families into bankruptcy and others toward seeking inferior medical care and present a major problem for this nation's health care system in that catastrophic illnesses account for over 20 percent of this nation's health expenditures.
- c. The impact of catastrophic illnesses on the family is especially acute in that children have the highest average medical costs among the population as a whole.
- d. It is the public policy of this State that each child of this State should have access to quality health care and adequate protection against the extraordinarily high costs of health care services which are determined to be catastrophic and severely impact upon a child and his family.
- e. To this end, it is incumbent upon the State to provide assistance to children and their families whose medical expenses extend beyond the families' available resources.

L. 1987, c. 370, § 1.

§ 26:2-149. Definitions relative to catastrophic illness in children

As used in this act:

- a. "Catastrophic illness" means any illness or condition the medical expenses of which are not covered by any other State or federal program or any insurance contract and exceed 10 percent of the first \$100,000 of annual income of a family plus 15 percent of the excess income over \$100,000.
- b. "Child" means a person 21 years of age and under.
- c. "Commission" means the Catastrophic Illness in Children Relief Fund Commission.
- d. "Family" means a child and the child's parent, parents or legal guardian, as the case may be, who is legally responsible for the child's medical expenses.
- e. "Fund" means the Catastrophic Illness in Children Relief Fund.
- f. "Income" means all income, from whatever source derived, actually received by a family.
- g. "Resident" means a person legally domiciled within the State for a period of three months immediately preceding the date of application for inclusion in the program. Mere seasonal or temporary residence within the State, of whatever duration, does not constitute domicile. Absence from this State for a period of 12 months or more is prima facie evidence of abandonment of domicile. The burden of establishing legal domicile within the State is upon the parent or legal guardian of a child.

L. 1987, c. 370, § 2; amended 1993, c. 103, § 1; 1998, c. 143, § 1, eff. Dec. 21, 1998, retroactive to Jan. 1, 1998; 2003, c. 260, § 1, eff. Jan. 14, 2004.



§ 26:2-150. Catastrophic Illness in Children Relief Fund

The "Catastrophic Illness in Children Relief Fund" is established as a non-lapsing, revolving fund. The fund shall be administered by the commission, and shall be credited with monies received pursuant to section 10 of this act. 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 chairman of the commission. 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.

L. 1987, c. 370, § 3.

§ 26:2-151. Catastrophic Illness in Children Relief Fund Commission

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 not withstanding 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 and Senior Services, 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 his department to represent him 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.

L. 1987, c. 370, § 4; amended 1993, c. 103, § 2; 1994, c. 149, § 1; 1998, c. 143, § 2, eff. Dec. 21, 1998, retroactive to Jan. 1, 1998; 2006, c. 47, § 105, eff. July 1, 2006; 2007, c. 342, § 1, eff. Jan. 13, 2008.



§ 26:2-152. Suspension; oaths; vacancies

Each member of the commission 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 the hearing. Each member of the commission before entering upon his duties shall take and subscribe an oath to perform the duties of his office faithfully, impartially and justly to the best of his ability. A record of the oaths shall be filed in the office of the Secretary of State.

Any vacancies in the membership of the commission occurring other than by the expiration of a term shall be filled in the same manner as the original appointment, but for the unexpired term only.

L. 1987, c. 370, § 5.

§ 26:2-153. Officers; quorum

The members shall elect a chairperson and chief executive officer of the commission who shall be one of the public members of the commission. The commission shall by rule determine the term of office of the chairperson and chief executive officer. The members shall elect a secretary and a treasurer who need not be members of the commission and the same person may be elected to serve both as secretary and treasurer.

The powers of the commission are vested in the members thereof in office from time to time and six members 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 thereof by the affirmative vote of at least six members of the commission. A vacancy in the membership of the commission shall not impair the right of a quorum to exercise all the powers and perform all the duties of the commission.

The members of the commission shall serve without compensation, but the commission shall reimburse its members for the reasonable expenses incurred in the performance of their duties based upon the monies available in the fund.

The commission shall be appointed within three months after the effective date of this act and shall organize as soon as may be practicable after the appointment of its members.

L. 1987, c. 370, § 6; amended L. 1994, c. 149, § 2.

§ 26:2-154. Powers; duties

The commission has, but is not limited to, the following powers and duties:

- a. Establish in conjunction with the Special Child Health Services program established pursuant to P.L. 1948, c. 444 (C. 26:1A-2 et seq.) a program for the purposes of this act, administer the fund and authorize the payment or reimbursement of the medical expenses of children with catastrophic illnesses;
- b. Establish procedures for application to the program, determining the eligibility for the payment or reimbursement of medical expenses for each child, and processing fund awards and appeals. The commission shall also establish procedures to provide that, in the case of an illness or condition for



which the family, after receiving assistance pursuant to this act, recovers damages for the child's medical expenses pursuant to a settlement or judgment in a legal action, the family shall reimburse the fund for the amount of assistance received, or that portion thereof covered by the amount of the damages less the expense of recovery;

- c. Establish the amount of reimbursement for the medical expenses of each child using a sliding fee scale based on a family's ability to pay for medical expenses which takes into account family size, family income and assets and family medical expenses and adjust the financial eligibility criteria established pursuant to subsection a. of section 2 of this act based upon the moneys available in the fund;
- d. Disseminate information on the fund and the program to the public;
- e. Adopt bylaws for the regulation of its affairs and the conduct of its business, adopt an official seal and alter the same at pleasure, maintain an office at the place within the State as it may designate, and sue and be sued in its own name;
- f. Appoint, retain or employ staff, experts or consultants on a contract basis or otherwise, who are deemed necessary, and employ investigators or other professionally qualified personnel who may be in the non-competitive division of the career service of the Civil Service, and as may be within the limits of funds appropriated or otherwise made available to it for its purposes;
- g. Maintain confidential records on each child who applies for assistance under the fund;
- h. Do all other acts and things necessary or convenient to carry out the purposes of this act; and
- i. Adopt rules and regulations in accordance with the "Administrative Procedure Act," P.L. 1968, c. 410 (C. 52:14B-1 et seq.) necessary to effectuate the purposes of this act.

L. 1987, c. 370, § 7; amended 1998, c. 143, § 3, eff. Dec. 21, 1998, retroactive to Jan. 1, 1998; 2003, c. 260, § 2, eff. Jan. 14, 2004.

§ 26:2-154.1. Settlement of claims; disposition of recovered moneys

The commission is authorized to negotiate or settle a claim that the fund maintains for reimbursement against a family who has received assistance for the medical expenses of a child with a catastrophic illness pursuant to P.L.1987, c.370 (C.26:2-148 et seq.) and has recovered damages in a legal action for the child's medical expenses. Money recovered pursuant to this section shall be deposited in the fund.

L. 1993, c. 103, § 3.

§ 26:2-155. Eligibility

- a. A child who is a resident of this State is eligible, through his parent or legal guardian, to apply to the program established pursuant to subsection a. of section 7 of P.L.1987, c.370 (C.26:2-154).
- b. In the event a family has more than one child with a catastrophic illness, as defined pursuant to section 2 of P.L.1987, c.370 (C.26:2-149), the commission shall waive the family responsibility, as established by regulation, for the other child if the family has met the family responsibility for the first child in a State fiscal year.

L. 1987, c. 370, § 8; amended 1998, c. 143, § 4, eff. Dec. 21, 1998, retroactive to Jan. 1, 1998. Amended P.L. 2010 c.84 eff. Dec. 3, 2010.



§ 26:2-156. Financial assistance

Whenever a child has a catastrophic illness and is eligible for the program, the child, through his parent or legal guardian, shall receive financial assistance from monies in the fund subject to the rules and regulations established by the commission and the availability of monies in the fund. The financial assistance shall include, but is not limited to, payments or reimbursements for the cost of medical treatment, hospital care, drugs, nursing care and physician services.

L. 1987, c. 370, § 9; amended 1998, c. 143, § 5, eff. Dec. 21, 1998, retroactive to Jan. 1, 1998; 2003, c. 260, § 3, eff. Jan. 14, 2004.

§ 26:2-157. Annual surcharge per employee under unemployment compensation fund for relief fund

For the purpose of providing the moneys necessary to establish and meet the purposes of the fund, the commission shall establish a \$ 1.50 annual surcharge per employee for all employers who are subject to the New Jersey "Unemployment Compensation Law," R.S. 43:21-1 et seq. The surcharge shall be collected by the controller for the New Jersey Unemployment Compensation Fund and paid over to the State Treasurer for deposit in the fund annually as provided by the commission.

L. 1987, c. 370, § 10; amended 2007, c. 342, § 2, eff. Jan. 13, 2008.

§ 26:2-158. Rules, regulations

The State Treasurer shall adopt rules and regulations in accordance with the "Administrative Procedure Act," P.L.1968, c. 410 (C. 52:14B-1 et seq.) establishing procedures for the collection of the surcharge.

L. 1987, c. 370, § 11.

§ 26:2-159. Annual reports

The commission shall report annually to the Governor and to each Senate and General Assembly committee with responsibility for issues affecting children, health and human services on the status of the program. The report shall include information about the number of participants in the program, average expenditures per participant, the nature and type of catastrophic illnesses for which the fund provided financial assistance, and the average income and expenditures of families who received financial assistance under the program. The commission also may make recommendations for changes in the law and regulations governing the fund.

L. 1987, c. 370, § 12; amended 1998, c. 143, § 6, eff. Dec. 21, 1998, retroactive to Jan. 1, 1998.



Regulations

§ 10:155-1.1 Purpose and scope

- (a) The purpose of this subchapter is to implement the provisions of P.L. 1987, c. 370 and to:
 - 1. Establish criteria for eligibility;
 - Establish a standard methodology for determining the amount of financial assistance to be allocated for services of a child's health providers and vendors for families in the State of New Jersey whose child experiences uncovered medical expenses for services required to treat or manage a catastrophic illness; and
 - 3. Specify the procedures that shall be followed by the Catastrophic Illness in Children Relief Fund Commission.

§ 10:155-1.2 Definitions

The following words and terms, as used in this subchapter, shall have the following meanings, unless the context clearly indicates otherwise.

"Act" means P.L. 1987, Chapter 370, N.J.S.A. 26:2-148 et seq. which establishes the Catastrophic Illness in Children Relief Fund.

"Batch" means a grouping of applications for the purpose of applying the provisions of N.J.A.C. 10:155-1.6, 1.7 and 1.8.

"Catastrophic Fund" or "Fund" means the Catastrophic Illness in Children Relief Fund.

"Catastrophic illness" means any illness or condition for which the incurred medical expenses not covered by any other source, which allows funds to provide for the medically related needs of a child, as defined in N.J.A.C. 10:155-1.14 including, but limited to, insurance contracts, trusts, proceeds from fundraising or settlements relative to the medical condition of a child, exceed 10 percent of the first \$ 100,000 of annual income of a family plus 15 percent of the excess income over \$ 100,000.

"Chairperson" means the chief executive officer of the Commission who is elected by the Commission membership from the public members for a term of one year.

"Child" means a person 21 years of age and under.

"Commission" means the 12 member Catastrophic Illness in Children Relief Fund Commission created by the Act and appointed by the Governor to administer the Fund. The Commission, chaired by a public member, is in the Executive Branch of the State government. For 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 of Human Services or by any board or officer thereof.



"Days" means calendar days.

"Eligibility standard" means that dollar amount greater than 10 percent of the first \$ 100,000 of annual income of a family plus 15 percent of the excess income over \$ 100,000.

"Executive director" means the professional employed by the Commission, in accordance with NJ Department of Personnel's procedures, to administer the Fund on a day-to-day basis on behalf of the Commission.

"Family" means a child and the child's parent, parents, or legal guardian, as the case may be, who is legally responsible for the child's medical expenses.

"Family responsibility" means the amount equal to 10 percent of the eligibility standard.

"Health coverage premium" means a premium for contracts, excluding automobile insurance contracts, whereby an insurer is obligated to pay or allow a benefit for the child who is covered under the policy or contract, due to bodily injury, disablement, sickness or because of any expense relating thereto or because of expense incurred in the prevention of sickness to include limited scope plans such as hospital, medical and prescriptions.

"Income" means the following:

- 1. Wages before deductions;
- 2. Public Assistance;
- 3. Social Security Benefits;
- 4. Supplemental Security Income;
- 5. Unemployment and Workman's Compensation;
- 6. Strike Benefits from Union Funds;
- 7. Veteran's Benefits;
- 8. Training Stipends;
- 9. Alimony;
- 10. Child Support;
- 11. Military Family Allotment;
- 12. Regular Support from Absent Family Member;
- 13. Pension Payments;
- 14. Insurance or Annuity Payments;
- 15. Income from Estates and Trusts;
- 16. Dividends;
- 17. Interest Income:
- 18. Rental Income;
- 19. Royalties; and
- 20. Other sources of income not mentioned above; however, income does not include the following money receipts: withdrawals from a bank; sale of property, house or car; tax refunds; gifts; one-time insurance payments; or compensation from injury, unless the injury directly relates to a child's condition which is the basis for an application being made to the Fund. Also disregarded is non-cash income and any money raised by fundraising.



"Local agency" means the agency responsible for assisting families in the application process, forwarding applications to the State Office, and making appropriate referrals to other state programs and benefits.

"State Office of Catastrophic Illness in Children Relief Fund" or "State Office" means the Office of the Executive Director of the Fund, which has responsibility for administering the Fund on a day-to-day basis on behalf of the Commission.

"Threshold" means the point at which a child's out-of-pocket medical expenses exceed 10 percent of the first \$100,000 of annual income of a family plus 15 percent of the excess income over \$100,000. After the child's medical expenses reach this threshold, a child has passed the initial screen for eligibility for assistance from the Fund.

§ 10:155-1.3 General requirements

Pursuant to the Act, the Fund will provide assistance to families having a child with a catastrophic illness. A child shall have passed the initial screen for eligibility for the Fund's assistance when a child's incurred and verified medical expenses as specified in this chapter for a prior consecutive 12-month period, exceed the amount equal to 10 percent of the first \$ 100,000 of verified annual income of a family plus 15 percent of the excess income over \$ 100,000.

- 1. Ten percent shall be the screen used for families whose income is \$100,000 or less.
- 2. Ten percent of the first \$100,000 of annual income of a family plus 15 percent of the excess income over \$100,000 shall be the screen used for families whose income is more than \$100,000.
 - (b) Though the child shall be referred to as being eligible at the point in the application process when the child has passed the initial screen, actual Fund disbursements on behalf of a child shall be limited by the monies available in the Fund and shall be guided by the policies and procedures outlined in the subchapter.
 - (c) To be eligible for assistance, a child must be a resident of the State of New Jersey. Resident means a person legally domiciled in New Jersey for a period of three months immediately preceding the initial date of application for assistance to the Fund.
 - 1. A child's state of residence is that of the parent (s) or legal guardian.
 - 2. Establishing proof of legal domicile within New Jersey is a responsibility of the parent or legal guardian of a child.
 - 3. Absence from New Jersey for a period of 12 months or more is prima facie evidence of abandonment of domicile.
 - 4. Seasonal or temporary residence within the State, of whatever duration, does not constitute domicile

§ 10:155-1.4 Initial application process

Applications may be submitted on a year-round basis to the local agency. The name, address, and phone number for the local agencies shall be available from the State Office. The local agency shall forward written applications on forms provided by the State Office.



§ 10:155-1.5 State Office and Commission review process

- (a) Upon receipt of the application from the local agency, the State Office shall consider the providers' and vendors' charges submitted.
- (b) Providers shall demonstrate licensure or certification by appropriate State or Federal agencies, if requested by State Office.
- (c) Prior to the Commission's batched review of applications, the State Office shall prepare a disbursement schedule for each application in accordance with N.J.A.C. 10:155-1.6, 1.7 and 1.8.
- (d) In a cycle of batch reviews, the Commission shall review the applications and the State Office's disbursement schedule for each application based on the annual cap and the sliding payment schedule. A decision on the Fund's level of assistance for each case will be determined. The calendar for the batch reviews shall be made available to the public by the State Office, as required by the Open Public Meetings Act.

§ 10:155-1.6 Eligibility standard

Incurred, out-of-pocket medical expenses greater than 10 percent of the first \$ 100,000 of annual income for a family plus 15 percent of the excess income over \$ 100,000 threshold shall be required for eligibility consideration. Those expenses above the family responsibility and up to the cap shall be considered for reimbursement after the eligibility standard is determined and met (see examples in Appendix I).

§ 10:155-1.7 Limits on Fund disbursements

- (a) The amount of Fund's disbursements on behalf of a child shall be capped at \$ 100,000 per year.
- (b) A one-time vehicle allowance will be capped at \$15,000 for the purchase of a lease or a specialized vehicle. The allowance does not include modifications, which can be considered separately. The one-time vehicle allowance of \$15,000 shall be included in the total disbursement cap, in the year the vehicle allowance was disbursed.
- (c) The amount of the home modification allowance shall be capped at \$25,000 per year.
- (d) The amount of the speech, language and hearing services allowance shall be capped at \$ 3,000 per year.
- (e) The amount of the applied behavioral analysis allowance shall be capped at \$6,000 per year.

§ 10:155-1.8 Sliding payment schedule

If adequate funds do not exist in the Fund at the point in time when a particular batch is being considered by the Commission to pay all applicants the amount of their expenses below the annual cap, a sliding payment schedule shall be used in an effort to distribute the available monies to applicants in an equitable way that considers a family's income, assets and other factors which impact the ability to pay for care.



§ 10:155-1.9 Allocation distribution plan

Because the Fund's actual level of assistance to families, as determined by the Commission, shall in most, if not all, cases be less than the child's medical expenses, the Commission shall determine how the Fund's available monies shall be distributed among eligible providers and vendors. Input from the family shall be sought in the analysis preceding this determination, with guidance from the State Office.

§ 10:155-1.10 Local agency responsibilities

The local agency shall make referrals and assist in the application process for other programs and benefits (for example, Medicaid, Hospital Charity Care, and other programs), where applicable.

§ 10:155-1.11 State office responsibilities

(a) The State office shall:

- 1. Screen applications to determine whether a child's eligible medical expenses exceed 10 percent of the first \$100,000 of annual income of a family plus 15 percent of the excess income over \$100,000;
- 2. Maintain oversight to the local agency responsible for assisting families with Program, accepting applications and providing local outreach/information;
- 3. Administer the Fund on a day-to-day basis on behalf of the Commission;
- 4. Monitor providers eligibility (that is, certification or other credentials);
- 5. Determine the reasonableness of providers and vendor charges;
- 6. Prepare application for review and consideration of the Commission;
- 7. Oversee payments to providers, vendors and, in some cases, to families; and
- 8. Negotiate or settle the recovery of funds disbursed in accordance with the provisions of this chapter.

§ 10:155-1.12 Commission responsibilities

- (a) The Catastrophic Illness in Children Relief Fund Commission shall be responsible to:
 - 1. Develop policies and procedures for operation of the Fund;
 - 2. Meet to review and make decisions on applications of families for financial assistance in regularly scheduled cycles.

§ 10:155-1.13 Time period for measuring expenses and income

In screening a child/family for eligibility for the Fund, expenses and income shall be measured by any prior consecutive 12-month time period. The income will be reported for the same prior consecutive 12-month time period back to January 1988. Applications shall be accepted any time throughout the year.

§ 10:155-1.14 Eligible health services

(a) Categories of incurred health expenses, which are related to the medical care of a child with an illness or condition eligible for consideration in assessing whether a family has reached its eligibility threshold of exceeding 10 percent of the first \$100,000 of annual income of a family plus exceeding 15 percent of the excess income over \$100,000 include, but are not limited to, the following:



- 1. Physician-authorized ancillaries (labs, x-rays);
- 2. Specialized pediatric ambulatory care, including physician-authorized rehabilitative therapies (for example, speech, occupational, and physical), physician-authorized care for treatment of addiction disorders and mental health care, dental care, eye care, chiropractic care;
- 3. Care in an acute hospital in New Jersey (treatment for acute and chronic conditions and treatment of addiction disorders and mental health conditions);
- 4. Care in acute hospitals in other states (treatment for acute and chronic conditions, and treatment of addiction disorders and mental health conditions as well as highly specialized care such as organ transplants);
- 5. Physicians and nursing services in all settings, including primary care (preventive care) and immunization services (for example, office, hospital);
- 6. Care in specialty hospitals (for example, rehabilitative, psychiatric);
- 7. Long term care (respite care, hospice care, residential care, or other care);
- 8. Home health care (physician-authorized home health aide, physician-authorized public health nurse, physician-authorized private duty nurse or other care);
- 9. Pharmaceuticals (physician-authorized Federal Drug Administration approved over-the-counter and prescription drugs related to the medical condition and physician-authorized Federal Drug Administration approved medical formulas);
- 10. Disposable medical supplies (physician-authorized over-the-counter and prescribed supplies);
- 11. Durable medical equipment (for example, physician-authorized ventilators, prostheses);
- 12. Home modification that is related to the medical condition of the child at the time the expenses were incurred;
- 13. Purchase of a specialized leased or specialized, modified vehicle and any subsequent modifications that are related to the medical condition of the child at the time the expenses were incurred;
- 14. Experimental medical treatment/experimental drugs in connection with an FDA-approved clinical trial, which are provided by licensed health care providers. Applications involving experimental treatment/experimental drugs may require additional review;
- 15. Reasonable funeral expenses, including professional services, arrangement and supervision, facility charges, transportation (hearse and one family car), casket costs and vault or cremation urn. Excluded items include, but are not limited to, flowers, prayer cards, books, headstones, name plates and soloist/organist; and
- 16. Family transportation and travel-related expenses including, but not limited to, mileage allowance, tolls, parking receipts, temporary shelter costs and telephone calls related to medical condition.
- (b) Fifty percent of a health coverage premium, including supplemental and dependent coverage that is paid by a family, not to exceed 50 percent of total eligible expenses, when accompanied by eligible expenses in (a) above shall be counted toward calculating eligibility, but shall not be considered an eligible expense for reimbursement from the Fund.



§ 10:155-1.15 Ineligible health services

Categories of health and health-related expenses that are not eligible for consideration shall include, but are not limited to, the following:

- 1. Special education required as result of medical condition;
- 2. Elective cosmetic surgery/treatment; and
- 3. Modifications to vacation and secondary homes.

§ 10:155-1.16 Administration of payments

- (a) The State Office shall oversee processing of payments from the Fund. Though in general payments shall be made directly to providers and vendors, consideration shall be given to making payments directly to families.
- (b) Items in N.J.A.C. 10:155-1.14, Eligible health services, shall be considered for payments.
- (c) For the purpose of providing the moneys necessary to establish and meet the purposes of the Fund, the Commission shall establish a \$ 1.50 annual surcharge per employee for all employers who are subject to the New Jersey "Unemployment Compensation Law," N.J.S.A. 43:21-1 et seq. The surcharge shall be collected by the Controller for the New Jersey Unemployment Compensation Fund and paid over to the State Treasurer for deposit in the Fund annually as provided by the statute.

§ 10:155-1.17 Appeal process

- (a) The following applies to the appeals:
 - 1. Upon receipt of a determination by the State Office, an applicant who disputes that determination may appeal to the Catastrophic Illness in Children Relief Fund Commission by filing a written appeal to:

New Jersey State Department of Human Services Catastrophic Illness in Children Relief Fund Commission PO Box 0728 Trenton, NJ 08625-0728 Attn: Chairperson

- Appeals must be postmarked and mailed to the above address no later than 30 days from the date of notice of the determination made by the State Office. The Commission may waive the deadline for cause.
- 3. The written appeal shall include all reasons and grounds for disputing the determination made by the State Office and all proof and documentation in support of the appeal.
- 4. The Commission shall conduct such review and analysis as is necessary to reach a decision on the appeal. At its discretion, the Commission may direct a conference to be convened with the applicant, or may refer the matter to the Office of Administrative law pursuant to the Administrative Procedure Act, N.J.S.A. 52:14 B-1 et seq., and the Uniform Administrative Procedure Rules, N.J.A.C. 1:1.



- 5. Except for appeals referred to the Office of Administrative Law, the Commission shall render a decision on the appeal within 180 days from the date of original receipt of the appeal. Appeals referred to the Office of Administrative Law shall be decided by the Commission within 45 days from the date of filing of the Initial Decision of the Administrative Law Judge, or at such later date as permitted by law
- 6. A decision made by the Commission shall be final. It may be appealed to the Superior Court of New Jersey as permitted by court rules.
- (b) Unless otherwise specifically ordered by the Commission, an applicant may not receive benefits from the Catastrophic Illness in Children Relief Fund while an appeal is pending at any level.

§ 10:155-1.18 Special cases

- (a) Special cases shall be referred to the Commission for its review and consideration. Special cases shall include, but are not limited to, the following:
 - 1. In special cases in which a family has more than one child with a catastrophic illness (as defined by expenses in excess of the 10 percent of the first \$ 100,000 of annual income of a family plus 15 percent of the excess income over \$ 100,000 threshold for each child), consideration shall be given to waiving the family responsibility as outlined in N.J.A.C. 10:155-1.2 for the other child/children given that the family would have already met the family responsibility for the first child in a State fiscal year.
 - 2. For special hardship cases that come before the Commission during a batch cycle, after the standard disbursement guidelines have been applied to each case in the batch and sufficient monies remain in the Fund, consideration shall be given to waiving the standard disbursement guidelines (that is, the family responsibility and the cap as outlined in N.J.A.C. 10:155-1.2 and 1.7).

§ 10:155-1.19 Confidentiality of information

Information received pursuant to the duties required by the Act shall not be disclosed publicly in such a manner as to identify individuals unless special circumstances require such disclosure and the proper notice is served and parent or legal guardian's consent is given, as may be necessary for pending legal proceedings.

§ 10:155-1.20 Recovery of Commission expenses

- (a) If a family receives assistance from the Fund for a child, in accordance with this chapter, and subsequently recovers damages or a financial award for the child's medical expenses, pursuant to a settlement or judgment in a legal action, the family shall reimburse the Fund for either:
 - 1. The amount of assistance received from the Fund; or
 - 2. The portion of assistance received for the injury, illness or condition covered by the damage or judgment, less the family's expenses of recovery.
- (b) The Commission may negotiate or settle the recovery of such claims, for cause presented by the family to the Commission.



Examples of Catastrophic Illness in Children Relief Fund Program*:

The examples below illustrate the extent to which the Fund would assist three families with different income levels.

FAMILY #1 (with income of \$ 30,000)

Family income:		
FAMILY #2 (with income of \$80,000)		
Family income: \$80,000		
Eligibility Standard (Exceeding 10 percent of income):8,000		
Amount of Eligible Medical Expenses not Covered by Insurance:15,000		
Family Responsibility (Exceeding 10 percent of Eligibility Standard):800		
Amount of Fund's Financial Assistance to Family:14,200		
Amount for which Family remains responsible:		
FAMILY #3 (with income of \$120,000)		
Family income:\$120,000		
Eligibility Standard:		
Exceeding 10 percent of the first \$ 100,000 or 10,000		
Exceeding 15 percent of the excess over \$100,000 or 3,000		
Amount of Eligible Medical Expenses not Covered by Insurance:15,000		
Family Responsibility (Exceeding 10 percent of Eligibility Standard):1,300		
Amount of Fund's Financial Assistance to Family:		
Amount for which Family remains responsible:		

^{*}Assuming: an annual \$100,000 cap; adequate monies available in Fund obviating need for additional restrictions and cost-sharing; and none of the cases are in the "special" category.



Catastrophic Illness in Children Relief Fund

Chris Christie, Governor

Kim Guadagno, Lieutenant Governor

Jennifer Velez, Commissioner of Human Services

Janice Prontnicki, MD, CICRF Chairperson

Claudia L. Marchese, Esq., CICRF

Executive Director