

Amended by R.1995 d.608, effective December 4, 1995.
See: 27 N.J.R. 3554(a), 27 N.J.R. 4890(b).

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.

Amended by R.1991 d.595, effective December 16, 1991.
See: 23 N.J.R. 2564(a), 23 N.J.R. 3754(b).
Local agency substituted for case manager.

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.

Amended by R.1991 d.595, effective December 16, 1991.
See: 23 N.J.R. 2564(a), 23 N.J.R. 3754(b).

State Office screens applications, oversees local agencies.

Amended by R.1993 d.438, effective September 7, 1993.

See: 25 N.J.R. 2169(a), 25 N.J.R. 4128(a).

Amended by R.1997 d.157, effective April 7, 1997.

See: 28 N.J.R. 5028(b), 29 N.J.R. 1317(a).

In (a)1, inserted "eligible" preceding "medical expenses".

Amended by R.1999 d.354, effective October 18, 1999.

See: 31 N.J.R. 2164(a), 31 N.J.R. 3090(a).

In (a)1, substituted a reference to 10 percent for a reference to 15 percent, and substituted a reference to 15 percent for a reference to 20 percent.

Amended by R.2010 d.032, effective May 17, 2010.

See: 41 N.J.R. 3360(a), 42 N.J.R. 937(a).

Section was "State office responsibilities". In the introductory paragraph of (a), substituted "Office" for "office"; in (a)5, substituted "Determine" for "Consider"; in (a)6, deleted "and" from the end; in (a)7, substituted "; and" for a period at the end; and added (a)8.

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; and

2. Meet to review and make decision on applications of families for financial assistance in regularly scheduled cycles.

Amended by R.1993 d.438, effective September 7, 1993.

See: 25 N.J.R. 2169(a), 25 N.J.R. 4128(a).

Amended by R.2010 d.032, effective May 17, 2010.

See: 41 N.J.R. 3360(a), 42 N.J.R. 937(a).

In (a)1, inserted "and" at the end; in (a)2, substituted a period for "; and" at the end; and deleted (a)3.

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.

Amended by R.1991 d.595, effective December 16, 1991.

See: 23 N.J.R. 2564(a), 23 N.J.R. 3754(b).

Income reported back to January 1988.

Amended by R.1997 d.157, effective April 7, 1997.

See: 28 N.J.R. 5028(b), 29 N.J.R. 1317(a).

Clarified time period used for measurement.

Amended by R.2010 d.032, effective May 17, 2010.

See: 41 N.J.R. 3360(a), 42 N.J.R. 937(a).

Deleted the third sentence.

10:155-1.14 Eligible health services

(a) Categories of incurred 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;

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; and

17. 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)1 through 16 above.

Amended by R.1991 d.595, effective December 16, 1991.
See: 23 N.J.R. 2564(a), 23 N.J.R. 3754(b).

Treatment for addiction and mental health disorders; travel-related expenses, 50% of health insurance, home modification, specialized vehicle and experimental drugs or treatment added to eligible health services.

Amended by R.1993 d.438, effective September 7, 1993.

See: 25 N.J.R. 2169(a), 25 N.J.R. 4128(a).

Amended by R.1994 d.572, effective November 7, 1994.

See: 26 N.J.R. 3573(a), 26 N.J.R. 4380(a).

Amended by R.1997 d.157, effective April 7, 1997.

See: 28 N.J.R. 5028(b), 29 N.J.R. 1317(a).

In (a)12 and (a)13, inserted "that is related to the medical condition of the child at the time the expenses were incurred"; and in (a)14, in the second sentence, inserted reference to experimental drugs.

Amended by R.1998 d.504, effective October 19, 1998.

See: 30 N.J.R. 2562(a), 30 N.J.R. 3837(a).

In (a), rewrote 1 and 5; and rewrote (c).

Amended by R.1999 d.354, effective October 18, 1999.

See: 31 N.J.R. 2164(a), 31 N.J.R. 3090(a).

In (a) and (b), substituted "exceeding 10 percent" for "15 percent", and substituted "exceeding 15 percent" for "20 percent" in the introductory paragraphs; and rewrote (a)9.

Amended by R.2004 d.352, effective September 20, 2004.

See: 36 N.J.R. 2974(a), 36 N.J.R. 4314(a).

In (a)9, inserted "and physician-authorized Federal Drug Administration approved medical formulas" following "drugs related to the medical condition".

Amended by R.2010 d.032, effective May 17, 2010.

See: 41 N.J.R. 3360(a), 42 N.J.R. 937(a).

In the introductory paragraph of (a), substituted "expenses," for "health expenses", substituted "related to the medical" for "medically-authorized in the"; in (a)13, deleted "and" from the end; in (a)14, substituted "in connection with an FDA-approved clinical trial, which are" for "which are recognized by Federal or State agencies and" and substituted a semicolon for a period at the end; added (a)15; deleted the former introductory paragraph of (b); recodified former (b)1 and (c) as (a)16 and (a)17; in (a)16, substituted "; and" for a period at the end; and in (a)17, substituted "coverage premium," for "insurance premium" and "(a)1 through (a)16" for "(a) or (b)".

10:155-1.15 Ineligible health services

(a) 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.

Amended by R.1991 d.595, effective December 16, 1991.

See: 23 N.J.R. 2564(a), 23 N.J.R. 3754(b).

Experimental drugs or treatment deleted.

Amended by R.1993 d.438, effective September 7, 1993.

See: 25 N.J.R. 2169(a), 25 N.J.R. 4128(a).

Amended by R.1999 d.354, effective October 18, 1999.

See: 31 N.J.R. 2164(a), 31 N.J.R. 3090(a).

In (a), substituted "exceeding 10 percent" for "15 percent" and substituted "exceeding 15 percent" for "20 percent" in the introductory paragraph, inserted a reference to treatment in 2, and added 3.

Amended by R.2010 d.032, effective May 17, 2010.

See: 41 N.J.R. 3360(a), 42 N.J.R. 937(a).

Rewrote the introductory paragraph of (a).

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.

Amended by R.1991 d.595, effective December 16, 1991.
See: 23 N.J.R. 2564(a), 23 N.J.R. 3754(b).

Condition added to insurance payment.
Amended by R.1993 d.438, effective September 7, 1993.
See: 25 N.J.R. 2169(a), 25 N.J.R. 4128(a).

Amended by R.1994 d.572, effective November 7, 1994.
See: 26 N.J.R. 3573(a), 26 N.J.R. 4380(a).

Amended by R.1995 d.608, effective December 4, 1995.
See: 27 N.J.R. 3554(a), 27 N.J.R. 4890(b).

Amended by R.2008 d.278, effective September 15, 2008.
See: 40 N.J.R. 2399(a), 40 N.J.R. 5239(a).

Added (c).
Amended by R.2010 d.032, effective May 17, 2010.
See: 41 N.J.R. 3360(a), 42 N.J.R. 937(a).

In (c), substituted "statute" for "Commission".

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

2. 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. 52:14B-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.

Amended by R.1991 d.595, effective December 16, 1991.
See: 23 N.J.R. 2564(a), 23 N.J.R. 3754(b).

Appeal deadline extended to 30 days; waiver permitted for cause.
Amended by R.1994 d.572, effective November 7, 1994.

See: 26 N.J.R. 3573(a), 26 N.J.R. 4380(a).

Amended by R.1995 d.608, effective December 4, 1995.

See: 27 N.J.R. 3554(a), 27 N.J.R. 4890(b).

Amended by R.1998 d.504, effective October 19, 1998.

See: 30 N.J.R. 2562(a), 30 N.J.R. 3837(a).

In (a)5, substituted a reference to 180 days for a reference to 90 days in the first sentence.

Amended by R.2004 d.352, effective September 20, 2004.

See: 36 N.J.R. 2974(a), 36 N.J.R. 4314(a).

In (a), amended the address in 1.

Amended by R.2010 d.032, effective May 17, 2010.

See: 41 N.J.R. 3360(a), 42 N.J.R. 937(a).

In (a)2, substituted "postmarked and mailed to" for "received at".

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).

Amended by R.1990 d.619, effective December 17, 1990.

See: 22 N.J.R. 2669(b), 22 N.J.R. 3754(a).

Provisions for deductible amount deleted; family responsibility added.

Amended by R.1993 d.438, effective September 7, 1993.

See: 25 N.J.R. 2169(a), 25 N.J.R. 4128(a).

Amended by R.1995 d.608, effective December 4, 1995.

See: 27 N.J.R. 3554(a), 27 N.J.R. 4890(b).

Amended by R.1998 d.504, effective October 19, 1998.

See: 30 N.J.R. 2562(a), 30 N.J.R. 3837(a).

In (a), added a reference to State fiscal years at the end of 1, deleted a former 2 and recodified former 3 as 2.

Amended by R.1999 d.354, effective October 18, 1999.

See: 31 N.J.R. 2164(a), 31 N.J.R. 3090(a).

In (a)1, substituted a reference to 10 percent for a reference to 15 percent, and substituted a reference to 15 percent for a reference to 20 percent.

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.

New Rule, R.1993 d.438, effective September 7, 1993.
See: 25 N.J.R. 2169(a), 25 N.J.R. 4128(a).

APPENDIX I

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:	\$30,000
Eligibility Standard (Exceeding 10% of income):	3,000
Amount of Eligible Medical Expenses not Covered by Insurance:.....	15,000
Family Responsibility (Exceeding 10% of Eligibility Standard):.....	300
Amount of Fund's Financial Assistance to Family:	14,700
Amount for which Family remains responsible:.....	300
FAMILY #2 (with income of \$80,000)	
Family income:	\$80,000
Eligibility Standard (Exceeding 10% of income):	8,000
Amount of Eligible Medical Expenses not Covered by Insurance:.....	15,000
Family Responsibility (Exceeding 10% of Eligibility Standard):.....	800
Amount of Fund's Financial Assistance to Family:	14,200
Amount for which Family remains responsible:.....	800
FAMILY #3 (with income of \$120,000)	
Family income:	\$120,000
Eligibility Standard:	13,000
Exceeding 10% of the first \$100,000 or 10,000	
Exceeding 15% of the excess over \$100,000 or 3,000	
Amount of Eligible Medical Expenses not Covered by Insurance:.....	15,000
Family Responsibility (Exceeding 10% of Eligibility Standard):.....	1,300
Amount of Fund's Financial Assistance to Family:	13,700
Amount for which Family remains responsible:.....	1,300

[†]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.

Amended by R.1990 d.619, effective December 17, 1990.
See: 22 N.J.R. 2669(b), 22 N.J.R. 3754(a).

All examples deleted; new examples added.
Amended by R.1993 d.438, effective September 7, 1993.
See: 25 N.J.R. 2169(a), 25 N.J.R. 4128(a).

Amended by R.1998 d.504, effective October 19, 1998.
See: 30 N.J.R. 2562(a), 30 N.J.R. 3837(a).
Substituted references to Eligibility Standards for references to Family Income and changed dollar amounts throughout.
Amended by R.1999 d.354, effective October 18, 1999.
See: 31 N.J.R. 2164(a), 31 N.J.R. 3090(a).
Rewrote the appendix.