

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

29 U.S.C. § 701 et seq.; 34 CFR Parts 74, 76, 77, 78, 79, 80, 361 and 395; and N.J.S.A. 30:1-12, 30:6-1 et seq. and 52:14B-3(1) et seq.

Source and Effective Date

R.2000 d.313, effective July 6, 2000.
See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

Chapter Expiration Date

In accordance with N.J.S.A. 52:14B-5.1c, Chapter 91, Organization and General Policy Provisions of the Commission for the Blind and Visually Impaired, expires on January 2, 2006. See: 37 N.J.R. 2343(a).

Chapter Historical Note

Chapter 91, State Plan on Services to Families and Children, became effective prior to September 1, 1969.

Chapter 91, State Plan on Services to Families and Children, was repealed by R.1982 d.317, effective September 20, 1982. See: 14 N.J.R. 744(a), 14 N.J.R. 1057(b).

Chapter 91, Organization and General Policy Provisions of the Commission for the Blind and Visually Impaired, was adopted as new rules by R.1990 d.432, effective September 4, 1990. See: 21 N.J.R. 2753(a), 22 N.J.R. 2716(a).

Chapter 91, Organization and General Policy Provisions of the Commission for the Blind and Visually Impaired, was repealed and Chapter 91, Organization and General Policy Provisions of the Commission for the Blind and Visually Impaired, was adopted as new rules by R.1995 d.425, effective August 7, 1995. See: 27 N.J.R. 1931(a), 27 N.J.R. 2909(a).

Pursuant to Executive Order No. 66(1978), Chapter 91, Organization and General Policy Provisions of the Commission for the Blind and Visually Impaired, was readopted as R.2000 d.313, effective July 6, 2000. See: Source and Effective Date. See, also, section annotations.

CHAPTER TABLE OF CONTENTS**SUBCHAPTER 1. PURPOSE AND SCOPE OF COMMISSION SERVICES**

- 10:91-1.1 Administration of the Commission
- 10:91-1.2 Definitions
- 10:91-1.3 General purpose and scope of services
- 10:91-1.4 Purpose and scope of educational services
- 10:91-1.5 Purpose and scope of adaptive living skills services
- 10:91-1.6 Purpose and scope of prevention services
- 10:91-1.7 Purpose and scope of vocational rehabilitation (VR) services
- 10:91-1.8 Legal authority to provide services
- 10:91-1.9 Purpose and scope of the New Jersey blind register
- 10:91-1.10 Composition and functions of the Commission's State Rehabilitation Council
- 10:91-1.11 Composition and functions of the Commission's consumer advisory boards
- 10:91-1.12 Purpose and responsibilities of the Commission's consumer service representative

SUBCHAPTER 2. ELIGIBILITY STANDARDS FOR COMMISSION SERVICES

- 10:91-2.1 General
- 10:91-2.2 Adaptive living skills and prevention services
- 10:91-2.3 Education services
- 10:91-2.4 Vocational rehabilitation services
- 10:91-2.5 Eye reports
- 10:91-2.6 Residency requirements
- 10:91-2.7 Notification of ineligibility for adaptive living skills services
- 10:91-2.8 Notification of ineligibility for education services
- 10:91-2.9 Ineligibility for vocational rehabilitation services
- 10:91-2.10 Presumption of eligibility

SUBCHAPTER 3. FINANCIAL STANDARD

- 10:91-3.1 Financial need standard and survey
- 10:91-3.2 Financial need standard applied to adaptive living skills/prevention and education services
- 10:91-3.3 Financial need standard applied to vocational rehabilitation services
- 10:91-3.4 Financial participation by clients
- 10:91-3.5 Commission as last dollar resource

SUBCHAPTER 4. DESCRIPTION OF SERVICES

- 10:91-4.1 Services available to New Jersey residents
- 10:91-4.2 Services available to applicants
- 10:91-4.3 Services available to all eligible clients
- 10:91-4.4 Additional services available to eligible clients

SUBCHAPTER 5. CASE MANAGEMENT PRACTICES

- 10:91-5.1 Referral procedures
- 10:91-5.2 Intake procedures
- 10:91-5.3 Individual Client Service Plans
- 10:91-5.4 Purchase of services; immediate need situations
- 10:91-5.5 Referral to provider agencies
- 10:91-5.6 Release of information and access to records
- 10:91-5.7 Communicable diseases of Commission clients
- 10:91-5.8 Reporting institutional abuse of elderly persons
- 10:91-5.9 Reporting suspected child abuse or neglect
- 10:91-5.10 Critical incidents involving clients

SUBCHAPTER 6. CLIENT APPEAL RIGHTS

- 10:91-6.1 Recording of concerns by clients
- 10:91-6.2 Administrative review

SUBCHAPTER 7. MEDICAL POLICIES AND FEE SCHEDULES

- 10:91-7.1 Fee schedule
- 10:91-7.2 Liability of Commission for missed medical appointments

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

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

(b) The Commission's entire service delivery system is vested in one Statewide, three regional, and one satellite offices. The Statewide office provides Statewide vocational

and specialized services. Educational, adaptive living skills, prevention and vocational rehabilitation services are provided through the regional, and satellite office. The three regions are: Northern, which includes Bergen, Essex, Hudson, Morris, Passaic, Sussex and Warren Counties; Central, which includes Hunterdon, Mercer, Middlesex, Monmouth, Ocean, Somerset and Union Counties; and Southern, which includes Atlantic, Burlington, Camden, Cape May, Cumberland, Gloucester and Salem Counties.

(c) The Commission is coordinated by an Administrative Office, located in Newark, that includes staff headed by an Executive Director appointed by the Commissioner of Human Services. The Administrative Office provides support functions to the Statewide, regional, and satellite offices. Some of these functions are policy and procedure development and publication, management and fiscal services, contract and information system services, monitoring and staff training. Documents referred to in this chapter shall be available to the public upon request in the media of choice. Such requests shall be made in writing and directed to the attention of the Executive Director, New Jersey Commission for the Blind and Visually Impaired, 153 Halsey St., PO Box 47017, Newark, New Jersey 07101.

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

(e) In addition, the Commission operates:

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

Amended by R.2000 d.313, effective August 7, 2000.

See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

In (b), changed "four" to "three" throughout, removed reference to the Metropolitan region, added Essex County to the Northern region, and added Somerset and Union Counties to the Central region; in (c), replaced "Policy and procedural manuals, and all other documents" with "Documents".

Amended by R.2001 d.349, effective October 1, 2001.

See: 33 N.J.R. 2066(a), 33 N.J.R. 3449(a).

In (c), inserted "and Visually Impaired" following "Blind".

10:91-1.2 Definitions

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

"Accommodation" means a process by which a person with a visual impairment uses alternative techniques.

"Active status" means that a person has been found eligible to receive Commission services.

"Adaptive skills" means those skills which will enable a visually impaired person to perform tasks that normally involve the use of the visual sense.

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

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

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

"Blind" see legally blind.

"Client" refers to a person who has been found eligible to receive Commission services.

"Comparable services" means any service or financial assistance for the same services from any other source(s); also known as similar benefits.

"Competitive employment" means work in the competitive labor market that is performed on a full or part time basis in an integrated setting and for which an individual is compensated at or above the minimum wage, but not less than the customary wage and level of benefits paid by an employer for the same or similar work performed by individuals who are not disabled.

"Contested case" means an adversary proceeding, including any licensing proceeding, in which the legal rights, duties, obligations, privileges, benefits or other legal relations of specific parties are required by constitutional right or by statute to be determined by an agency by decisions, determinations, or orders, addressed to them or disposing of their interests, after opportunity for an agency hearing (see N.J.S.A. 52:14B-2). The required hearing must be designed to result in an adjudication concerning the rights, duties, obligations, privileges, benefits or other legal relations of specific parties over which there exist disputed questions of fact, law or disposition relating to past, current or proposed activities or interests. Contested cases are neither informational nor intended to provide a forum for the expression of public sentiment on proposed agency action or broad policy issues affecting entire industries or large, undefined classes of people.

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

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

“Duly authorized representative” means an individual who is empowered to speak on behalf of another.

“Early intervention” means the period of time between birth and a child’s third birthday.

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

“Eye practitioner” means a licensed ophthalmologist or licensed optometrist.

“Family income” means gross wages before deductions, pensions, income from property and trusts, disability payments, interest and dividends, public assistance payments, and any other income, not including loans, available to a client or legally responsible person. Dividends or interest from savings or insurance policies are counted as income.

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

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

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

“Intake” means the process by which the Commission gathers information and shares information regarding agency services pursuant to an application.

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

“Legally blind” means central visual acuity that does not exceed 20/200 in the better eye with best correction or fields

of vision that are so limited that the widest diameter of visual field subtends an angle no greater than 20 degrees.

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

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

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

“Non-immigrant aliens” are individuals admitted for a particular purpose or time period and are expected to return to their home country upon completion of a specific purpose or time period.

“Orientation and mobility services” are techniques designed to teach methods for safe, independent indoor or outdoor travel.

“Preschool” means the period of time between age three and a child’s fifth birthday.

“Primary caseworker” means the Commission staff person who coordinates service delivery on behalf of an individual client.

“Referral” means a person, or someone on their behalf, has contacted the Commission seeking services.

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

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

“Severe field of vision defect” means a field of vision that is limited to an angle of 40 degrees or less.

“Substantial impediment to employment” means that a physical or mental disability (in light of attendant medical, psychological, vocational, educational, and other related factors) hinders an individual from preparing for, entering into, engaging in, or retaining employment, consistent with the individual’s capacities and abilities.

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

“Visual impairment” means visual acuity that may range from 20/70 to 20/200 in the better eye with correction, or in which the peripheral field has contracted so that the diameter of the visual field subtends an angle no greater than 40 degrees but no less than 20 degrees.

Amended by R.2000 d.313, effective August 7, 2000.

See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

Rewrote “Competitive employment” and “Substantial impediment to employment”.

Amended by R.2001 d.349, effective October 1, 2001.

See: 33 N.J.R. 2066(a), 33 N.J.R. 3449(a).

Inserted “Early intervention”; deleted “Non-competitive gainful employment”; in “Preschool”, substituted “age three” for “birth” and “fifth” for “sixth”; rewrote “Visual impairment”.

10:91-1.3 General purpose and scope of services

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

(b) The Commission defines its mission as promoting and providing services in the areas of education, employment, independence and eye health through informed choice and partnership with persons who are blind or visually impaired, their families and the community.

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

1. Providing client services to persons (that is, children and adults) with vision problems; and
2. Advocating on a local, State and national level.

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

(e) To achieve its mission, the Commission has established the following goals:

1. Independent Living Goal: The Commission shall provide the opportunity to persons (that is, children and adults) who are blind or visually impaired to achieve their maximum level of independence and productive functioning in the most appropriate and inclusive setting.
2. Prevention Goal: Because 50 percent of all blindness and loss of vision can be prevented or minimized, the Commission shall use its resources to publicize, maximize, and coordinate efforts to conduct programs of education and detection to prevent blindness, to retain or restore vision, and to increase public awareness of the causes and treatment of vision loss.

Amended by R.2001 d.349, effective October 1, 2001.

See: 33 N.J.R. 2066(a), 33 N.J.R. 3449(a).

Rewrote (b).

10:91-1.4 Purpose and scope of educational services

(a) The New Jersey Commission for the Blind and Visually Impaired operates a Statewide itinerant services program for eligible children which facilitates their inclusion in the least restrictive, most appropriate, educational setting. These services shall be provided in educational and/or other appropriate settings. Depending on individual needs, these services may include, but are not limited to, instruction in appropriate media, functional vision assessment, the use of specialized equipment and materials, and the use of accommodative techniques (see N.J.A.C. 10:92-3.1). Three Commission Programs are described below:

1. Itinerant Education Services (Reimbursement) for eligible children facilitates their inclusion in the least restrictive, most appropriate, educational setting. For the school aged students, these services are provided in collaboration with local school districts through provider service agreements. The Appropriations Act for each State fiscal year directs the State Department of Education to deduct funds from each district’s State aid payments and reimburse the Commission for the Blind and Visually Impaired for educational services provided.

2. Services to Infants and Toddlers are specialized vision services provided in partnership with the Department of Health and Senior Services to children, aged birth-three, who are blind and visually impaired, as well as to their families and community early intervention programs. By law, school districts are not responsible for children under age three (see N.J.A.C. 10:92-3.2).

3. Services to children with visual impairments and multiple disabilities are specialized vision services provided to school aged children who are visually impaired with significant multiple disabilities (see N.J.A.C. 10:92-3.3).

Amended by R.2000 d.313, effective August 7, 2000.

See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

In (a), inserted a reference to functional vision assessment and inserted a reference to N.J.A.C. 10:92-3.1 in the introductory paragraph; in inserted “in partnership with the Department of Health and Senior Services” following “provided” and added a reference to N.J.A.C. 10:92-3.2 in 2; and rewrote 3.

Amended by R.2001 d.349, effective October 1, 2001.

See: 33 N.J.R. 2066(a), 33 N.J.R. 3449(a).

In (a)1, substituted “each State” for “the 1994-95”.

10:91-1.5 Purpose and scope of adaptive living skills services

The major objectives of the Commission’s adaptive living skills services are the provision of services related to the instruction of visually impaired individuals by rehabilitation instructors in techniques for performing activities of daily living; traveling skills by orientation and mobility instructors; and meeting social service needs by social workers. These tasks are included within that group of activities which are a part of one’s daily routine, and which permit people to live independently. (See N.J.A.C. 10:93.)

10:91-1.6 Purpose and scope of prevention services

(a) The major objective of the Commission's prevention services is to prevent, delay the onset of, correct and/or stabilize the effects of a visual problem.

(b) The Commission includes programs within its prevention services which make available to New Jersey residents free eye screenings or examinations to members of specific target populations, for example, persons with diabetes, pre-school children, and children of migrant laborers. (See N.J.A.C. 10:91-4.)

(c) The Commission makes available medical casework services to eligible persons in need of vision related medical treatment as well as visually impaired individuals who are in need of either health education (that is, instruction in techniques for self-administration of insulin) and/or low vision services. (See N.J.A.C. 10:91-4.)

Amended by R.2001 d.349, effective October 1, 2001.

See: 33 N.J.R. 2066(a), 33 N.J.R. 3449(a).

In (c), amended the N.J.A.C. reference.

10:91-1.7 Purpose and scope of vocational rehabilitation (VR) services

(a) The primary goal of the programs included within vocational rehabilitation (VR) services is to assist eligible visually impaired individuals to achieve an employment outcome, as defined in N.J.A.C. 10:95-1.2.

(b) Vocational rehabilitation services may be any services necessary to assist an eligible individual in obtaining his or her vocational goal. (See N.J.A.C. 10:95-1.1(b))

Amended by R.2000 d.313, effective August 7, 2000.

See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

Rewrote (a).

10:91-1.8 Legal authority to provide services

(a) The Commission for the Blind and Visually Impaired operates under State and Federal laws. These include the State legislation which created the Commission and made it a division of the Department of Human Services, as well as the Federal Rehabilitation Act of 1973 as amended by the Rehabilitation Act of 1998 (Pub.L. 105-220), and the Education for All Handicapped Children Act of 1975 as amended by the Individuals with Disabilities Education Act of 1997 (IDEA) (Pub.L.105-17).

(b) Pursuant to N.J.S.A. 30:6-1 et seq., the Commission for the Blind and Visually Impaired is legally authorized to:

1. Maintain a register of all blind individuals within the State;
2. Fund and provide vocational training;
3. Pay for medical and surgical treatment;
4. Study the causes of blindness and undertake prevention programs;

5. Administer a vending stand program;

6. Provide instruction and facilitate least restrictive educational programs for blind and visually impaired children; and

7. Promote the sale and distribution of products made by people who are blind and visually impaired.

(c) The Rehabilitation Act of 1973 (P.L. 93-112), as amended by the Rehabilitation Act Amendments of 1998 (P.L. 105-220), is the Federal statute governing the state administration of Federally funded vocational rehabilitation services.

(d) In the State Plan submitted by the Department of Human Services, the Commission is designated the "sole state agency for the blind" in New Jersey. This designation means that the Commission is the only State agency which is legally authorized to provide vocational rehabilitation services to persons who are blind and visually impaired.

(e) The New Jersey Department of Labor, Division of Vocational Rehabilitation Services (DVRS), and the Commission share the Federal VR Grant annually allotted to New Jersey. The Commission and DVRS have a written agreement pursuant to 34 CFR 361.5. to clarify what agency will be responsible for client services. A copy of the agreement may be obtained by contacting the Commission's Administrative Office at 153 Halsey Street, P.O. Box 47017, Newark, New Jersey 07101.

(f) The Education of All Handicapped Children Act of 1975 (Pub.L. 94-142), as amended by the Individuals with Disabilities Education Act of 1997 (IDEA) (Pub.L. 105-17), is the Federal statute guaranteeing children with disabilities, ages three through 21, a "free appropriate public education emphasizing special education and related services." The IDEA and its implementing regulation apply to all agencies having direct or delegated authority for the education of children with disabilities regardless of whether they receive funds under the Act. In New Jersey, these agencies include the New Jersey Department of Education, local school districts, State-operated facilities and the Commission.

Amended by R.2000 d.313, effective August 7, 2000.

See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

In (b), changed Rehabilitation Act Amendments reference.

Amended by R.2001 d.349, effective October 1, 2001.

See: 33 N.J.R. 2066(a), 33 N.J.R. 3449(a).

In (a), rewrote the second sentence; in (f), substituted "1997" for "1990" and "Pub.L. 105-17" for "P.L. 1010-476".

Law Review and Journal Commentaries

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

Case Notes

Administrative law judge did not have jurisdiction to conduct "due process" hearing to determine financial responsibility of State Department of Human Services and its subagency, Commission for the Blind

and Visually Impaired, for special education costs of blind, retarded child, as mandated by Individuals with Disabilities Education Act (IDEA); obligation to provide free and appropriate public education (FAPE) had been imposed exclusively on local boards of education through State Department of Education, which had been designated to handle petitions for due process review of local school board decisions regarding provision of FAPE. L.P. v. Edison Bd. of Educ., 265 N.J.Super. 266, 626 A.2d 473 (L.1993).

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

10:91-1.9 Purpose and scope of the New Jersey blind register

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

(b) In accordance with N.J.S.A. 30:6-15, the Commission is empowered to make inquiries concerning the causes of blindness and the proportion of cases within the State which is preventable, and to cooperate with the State, the Department of Health and other interested boards, bodies and officials in enforcing proper preventive measures.

10:91-1.10 Composition and functions of the Commission's State Rehabilitation Council

(a) Pursuant to Section 105 of the Rehabilitation Act of 1973, as amended by the Rehabilitation Act of 1998 (P.L. 105-220), the Commission has established a State Rehabilitation Council (SRC).

(b) The functions of the SRC after consulting with the State Workforce Investment Board shall be:

1. To review, analyze, and advise the designated State Unit regarding performance of the responsibilities of the unit under Title I of the Rehabilitation Act;
2. In partnership with the designated State unit, develop, agree to and review State goals and priorities, and evaluate the effectiveness of the vocational rehabilitation program;
3. Advise the designated State agency and assist in the preparation of, the State plan and amendments to the plan, applications, reports, needs assessments, and evaluations required under the Rehabilitation Act amendments of 1998;
4. To the extent feasible, conduct a review and analysis of the effectiveness of, and consumer satisfaction with vocational rehabilitation services;

5. Prepare and submit an annual report to the Governor and the Commissioner of the Rehabilitation Services Administration on the status of vocational rehabilitation programs operated within the State and make the report available to the public;

6. Coordinate with other councils within the State, including the Statewide Independent Living Council established under section 705, the advisory panel established under section 612(a)(21) of the Individuals with Disabilities Education Act (20 U.S.C. § 1413(a)(12)), as amended by the Individuals with Disabilities Education Act Amendments of 1997, Public Law 105-17, the State Developmental Disabilities Council described in section 124 of the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. § 6024), the State Mental Health Planning Council established under section 1914(a) of the Public Health Service Act (42 U.S.C. § 300x-4(a)), and the State Workforce Investment Board;

7. Provide for coordination and the establishment of working relationships between the designated State agency and the Statewide Independent Living Council and centers for independent living within the State; and

8. Perform other functions, consistent with the purpose of this title, as the State SRC determines to be appropriate, that are comparable to the other functions performed by the Council.

(c) The members of the State Rehabilitation Council (SRC) shall be appointed by the Governor. The Governor shall select members after soliciting recommendations from individuals or organizations representing a broad range of persons with disabilities and organizations interested in services to persons with disabilities.

(d) The composition and terms of office of the State Rehabilitation Council are outlined in section 105 of the Rehabilitation Act of 1998 as amended.

(e) The SRC shall convene at least four meetings a year in such places as it determines to be necessary to conduct Council business. The meetings, hearings, and forums shall be publicly announced. The meetings shall be open and accessible to the general public unless there is a valid reason for an executive session.

(f) The SRC may use certain funds appropriated under Title I of the Rehabilitation Act of 1998 as amended.

Amended by R.2000 d.313, effective August 7, 2000.
See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

Substituted references to the State Rehabilitation Council for references to the Rehabilitation Advisory Council throughout; and rewrote (a).

10:91-1.11 Composition and functions of the Commission's consumer advisory boards

(a) At the discretion of the Executive Director, the Commission may establish consumer advisory boards in order to provide consumers and interested persons the opportunity to evaluate, comment upon and impact on services provided by Commission.

(b) The purpose of the consumer advisory boards is to focus on service areas and service delivery that are not mandated to the State Rehabilitation Council.

(c) The board(s) shall consist of members appointed by the Commission's Executive Director and/or designee. The following persons shall not be eligible for consumer advisory board membership:

1. Commission employees;
2. Paid Commission consultants;
3. Individuals employed by an agency under contract with the Commission; or
4. Individuals who are related to Commission employees.

(d) Individuals who are related to current board members may serve as ex officio members of the board.

(e) The consumer advisory boards shall:

1. Comply with Open Public Meetings Act, N.J.S.A. 10:4-6 et seq.;
2. Elect a member as chairperson. The chairperson shall be required to meet as necessary with the Executive Director and the chairperson of the State Rehabilitation Council and report on the activities of the Board;
3. Develop bylaws governing operation of the board; and
4. Meet as needed to conduct the business of the board.

(f) Board duties and responsibilities shall be:

1. To advocate for individuals who are blind and visually impaired;
2. To advise Commission administration with regard to the development and improvement of services for individuals who are blind and visually impaired;
3. To review Commission policy;
4. To comment on State and Federal legislative proposals; and
5. To establish liaison with existing Commission boards, councils and task forces.

Amended by R.2000 d.313, effective August 7, 2000.

See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

In (b) and (e)2, deleted "Advisory" following "Rehabilitation".

10:91-1.12 Purpose and responsibilities of the Commission's consumer service representative

(a) The Commission's consumer service representative shall assist applicants and clients to assure quality and timely services.

(b) The consumer service representative is an advocate who directs blind or visually impaired persons to appropriate Federal, State or local agencies that are mandated to provide services to persons with disabilities.

(c) The consumer services representative can be reached by contacting the Commission's Administrative offices located at 153 Halsey Street, PO Box 47017, Newark, NJ 07101 or calling (973) 648-3333.

Amended by R.2001 d.349, effective October 1, 2001.

See: 33 N.J.R. 2066(a), 33 N.J.R. 3449(a).

In (c), inserted "or calling (973) 648-3333" following "07101".

SUBCHAPTER 2. ELIGIBILITY STANDARDS FOR COMMISSION SERVICES

10:91-2.1 General

To be eligible for services, an individual shall have a visual acuity of 20/70 or less in the better eye, with correction, or a severe visual defect or field restriction.

New Rule, R.2000 d.313, effective August 7, 2000.

See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

Former N.J.A.C. 10:91-2.1, Adoptive living skills and preventive policies, recodified to N.J.A.C. 10:91-2.2.

10:91-2.2 Adaptive living skills and prevention services

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

(b) Individuals who have severe field of vision defects shall be eligible for all adaptive living skills and prevention services (see N.J.A.C. 10:91-1.2).

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

(d) Individuals shall be ineligible for non-surgery or treatment related services if their best corrected vision is 20/50-1 to 20/69 in their better eye except with the approval of the regional manager on a case-by-case basis and based upon observation and/or documentation of need for agency services together with ineligibility for comparable benefits.

(e) Adaptive living skills/prevention services clients shall meet additional financial criteria as set forth in N.J.A.C. 10:91-3.

Recodified from N.J.A.C. 10:91-2.1 by R.2000 d.313, effective August 7, 2000.

See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

Former N.J.A.C. 10:91-2.2, Educational services, recodified to N.J.A.C. 10:91-2.3.

10:91-2.3 Educational services

(a) Visual eligibility standards for educational services are as follows:

1. Children whose best corrected visual acuity is 20/70 or less in their better eye and children with severe visual defects shall be eligible for educational services (see N.J.A.C. 10:91-1.2).

2. For very young children, or children with significant multiple disabilities, the determination of visual impairment may be made by a medical doctor.

(b) Educational services' clients shall also meet the following additional criteria:

1. Be 21 years of age or younger and have not completed secondary school;

2. Meet the residency requirements as set forth in N.J.A.C. 10:91-2.6; and

3. Meet the financial needs standards as outlined in N.J.A.C. 10:91-3.

Recodified from N.J.A.C. 10:91-2.2 and amended by R.2000 d.313, effective August 7, 2000.

See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

Rewrote (a). Former N.J.A.C. 10:91-2.3, Vocational rehabilitation services, recodified to N.J.A.C. 10:91-2.4.

Amended by R.2001 d.349, effective October 1, 2001.

See: 33 N.J.R. 2066(a), 33 N.J.R. 3449(a).

In (b)2, amended N.J.A.C. reference.

10:91-2.4 Vocational rehabilitation services

(a) Visual eligibility standards for vocational rehabilitation services are as follows:

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

2. Individuals with severe field of vision defects shall be eligible for vocational rehabilitation services (see N.J.A.C. 10:91-1.2).

3. Individuals shall be eligible for vocational rehabilitation services if their best corrected vision is better than 20/70 in their better eye, and vision is deteriorating or there is a substantial impediment to employment because of vision dysfunction.

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

(c) To be eligible for the Vending Facility Program, a person shall meet the definition of legal blindness. (See N.J.A.C. 10:97.)

Recodified from N.J.A.C. 10:91-2.3 and amended by R.2000 d.313, effective August 7, 2000.

See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

In (a), changed vision references in 1 and 3. Former N.J.A.C. 10:91-2.4, Eye reports, recodified to N.J.A.C. 10:91-2.5.

10:91-2.5 Eye reports

(a) Eye reports shall be completed by eye practitioners. The eye report shall include a visual classification, treatment recommendation, and, where appropriate, a report of any follow-up visits, and a post-operative report.

(b) The Commission shall request an eye report when there is evidence that an eye condition is deteriorating and/or if the applicant/client has not received an eye examination within the past year. Where such reports are not readily available, the Commission shall authorize payment for this examination report.

(c) If applicant does not have an eye doctor, the Commission shall provide the applicant with a list of available practitioners.

Recodified from N.J.A.C. 10:91-2.4 by R.2000 d.313, effective August 7, 2000.

See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

Former N.J.A.C. 10:91-2.5, Residency requirements, recodified to N.J.A.C. 10:91-2.6.

10:91-2.6 Residency requirements

(a) New Jersey residents who meet visual and other eligibility standards shall be considered for all Commission services. (See N.J.A.C. 10:91-2.1, 2.2, 2.3 and 2.4).

(b) Residents of other states who meet the visual eligibility standards shall be considered for Commission services while in New Jersey as follows:

1. Orientation and mobility training;
2. Educational services (see N.J.A.C. 10:91-2.2); and
3. Vocational rehabilitation (see N.J.A.C. 10:95).

(c) Resident aliens who meet the visual and other eligibility standards shall be considered for all Commission services.

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

1. Orientation and mobility;
2. Educational services if attending preschool, elementary school or high school; and
3. Other training and job placement related services shall be provided to foreign students attending college full time if funds are available pursuant to N.J.A.C. 10:95 and if the individual is available to complete an Individualized Plan for Employment and the individual is qualified for employment in the U.S.

(e) The Executive Director or his or her designee shall grant exceptions to the Commission's residency requirements for physical restoration in situations where an applicant/client will suffer irreversible damage to their vision if services are not provided.

Recodified from N.J.A.C. 10:91-2.5 and amended by R.2000 d.313, effective August 7, 2000.

See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

In (d)3, substituted "Individualized Plan for Employment" for "Individualized Written Rehabilitation Plan". Former N.J.A.C. 10:91-2.6, Notification of ineligibility for education services, recodified to N.J.A.C. 10:91-2.7.

Amended by R.2001 d.349, effective October 1, 2001.

See: 33 N.J.R. 2066(a), 33 N.J.R. 3449(a).

In (a), added N.J.A.C. reference.

10:91-2.7 Notification of ineligibility for adaptive living skills services

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

(b) The ineligibility notice shall state:

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

(c) Appropriate explanations for any case closure shall be included in the case record.

Recodified from N.J.A.C. 10:91-2.6 by R.2000 d.313, effective August 7, 2000.

See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

Former N.J.A.C. 10:91-2.7, Notification of ineligibility for education services, recodified to N.J.A.C. 10:91-2.8.

Amended by R.2001 d.349, effective October 1, 2001.

See: 33 N.J.R. 2066(a), 33 N.J.R. 3449(a).

In (a), amended N.J.A.C. reference.

10:91-2.8 Notification of ineligibility for education services

(a) The Commission shall notify by mail the parent or guardian of any child who applied or was referred for Commission education services whenever such child has been found to be ineligible.

(b) In the event that a school district does not enter into a Service Provider Agreement with the Commission, the school district remains responsible for all necessary vision services, including assistive technology services.

1. The parent or guardian will be notified, in writing, that educational services by the Commission cannot be provided.

2. Children closed from educational services because a school district did not comply with the Provider Agreement may be referred for other services (vocational rehabilitation or adaptive living skills) within the Commission.

(c) The ineligibility notice shall state:

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

(d) Appropriate explanations for any case closure shall be included in the case record.

Recodified from N.J.A.C. 10:91-2.7 by R.2000 d.313, effective August 7, 2000.

See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

Former N.J.A.C. 10:91-2.8, Ineligibility for vocational rehabilitation services, recodified to N.J.A.C. 10:91-2.9.

10:91-2.9 Ineligibility for vocational rehabilitation services

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

1. An individual does not have a visual disability which renders him or her eligible for Commission services;
2. The visual impairment or legal blindness does not result in a substantial impediment to employment; or
3. There is clear and convincing evidence that such individual is incapable of benefiting from vocational rehabilitation services in terms of an employment outcome in accordance with the Rehab Act of 1973 as amended by the Rehabilitation Act of 1998 (P.L. 105-220).

(b) The individual shall be notified within two weeks in writing of an ineligibility decision, including the reasons for the decision, the effective date of the decision and the means for expressing any dissatisfaction and seeking remedy, including the procedures for an administrative review and fair hearing (see N.J.A.C. 10:95-19). The client shall receive a copy of the certification of ineligibility letter.

(c) Appropriate explanations for any case closure shall be included in the case record.

Recodified from N.J.A.C. 10:91-2.8 and amended by R.2000 d.313, effective August 7, 2000.

See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

In (b), inserted "of an ineligibility decision, including the reasons for decision, the effective", following "writing", and changed N.J.A.C. reference. Former N.J.A.C. 10:91-2.9, Presumption of eligibility, recodified to N.J.A.C. 10:91-2.10.

Amended by R.2001 d.349, effective October 1, 2001.

See: 33 N.J.R. 2066(a), 33 N.J.R. 3449(a).

In (a)3, added "by the Rehabilitation Act of 1998 (P.L. 105-220)".

10:91-2.10 Presumption of eligibility

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

1. The person is a former client of the Commission who was previously found eligible pursuant to N.J.A.C. 10:91-2.1 through 2.6 and the date on which the person was most recently referred to the Commission is not more than one year after the date on which the person's most recent case was closed;
 2. The person is a former client of the Commission who was previously found eligible pursuant to N.J.A.C. 10:91-2.1 through 2.5, and whose eye condition, as reported on the most recent Commission eye report is one which generally remains stable;
 3. The person is a client of another Federal, State, local or community-based agency and is being referred to the Commission by that agency's staff person who has documentation from an eye practitioner on file that the person being referred is visually impaired. Such documentation shall be requested by Commission staff within 14 days of receipt of referral; or
 4. The visually impaired person is a recipient of SSI benefits and is interested in achieving an employment outcome, consistent with their unique strengths, resources, priorities, concerns, abilities, capabilities, and interests.
- (b) A person shall not be presumed eligible for those Commission services for which there is a financial needs standard (see N.J.A.C. 10:91-3.1 through 3.3).
- (c) If, at any time, a Commission caseworker receives information which suggests a person who has been presumed eligible may not be eligible, then the caseworker will commence a full eligibility determination.

Recodified from N.J.A.C. 10:91-2.9 and amended by R.2000 d.313, effective August 7, 2000.

See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

In (a), changed N.J.A.C. reference in 1, and added 4.

Amended by R.2001 d.349, effective October 1, 2001.

See: 33 N.J.R. 2066(a), 33 N.J.R. 3449(a).

In (a)4, inserted "visually impaired" preceding "person is a recipient".

- (b) The following concerns the Financial Survey Form:

1. A financial survey form shall be completed for each new and readmitted client at the time of the first authorization for any services subject to financial need. The client supplies the information and the primary caseworker completes the form.
2. Survey forms shall not be mailed to clients for completion.
3. Income may be verified by pay stubs, or check stubs from pensions or benefits. The caseworker may request the previous year's income tax forms to identify any additional income or to verify the number of individuals reported as dependent on family income. Dependent refers to the total number of individuals dependent on family income, consistent with what is reported on IRS income tax forms.
4. A home occupied by a client as a residence is not counted as a resource. Income from property shall be counted after deducting the cost of operation and maintenance from the gross income received.
5. Existing insurance policies shall not be counted as a resource but clients are advised to check to see whether they are eligible for disability payments. Disability payments received shall be counted as income at the time they are received.
6. Personal effects such as personal apparel, jewelry, and household effects shall not be counted as a resource.
7. The client or parents shall be told that the financial survey form and financial participation worksheet shall become part of the client's confidential case record.
8. Client or parent refusal to provide financial information or to sign the financial survey form shall be noted in the client's case record.
9. A copy of the completed survey shall be offered to the client, and mailed if requested.
10. The Financial Survey Form is as follows:

SUBCHAPTER 3. FINANCIAL STANDARD

10:91-3.1 Financial need standard and survey

(a) The financial need standard is a test which shall be used to determine a client's ability to pay for certain services. For those clients who qualify, the Commission shall provide the cost of these services. For clients who do not qualify, the standard establishes the level of their responsibility toward the cost of those services. The Financial Survey Form and the Financial Participation Worksheet are the documents used to gather and analyze information needed to determine financial eligibility. The exception is college tuition assistance where the Commission utilizes the standard forms required by many college applicants for financial aid.

FINANCIAL SURVEY FORM

1. Client Name and SS# _____
2. Counselor and date _____

ANNUAL FAMILY INCOME:

3. Amount of Gross Pay of Client (Before Deductions) — _____
4. Amount of Husband/Father Gross Pay (If applicable) _____
5. Amount of Wife/Mother Gross Pay (If applicable) _____
6. Amount of Guardian and/or other contributing family member Gross Pay _____

In items 7 through 16, list the amount, how often paid and when benefits will cease:

7. Unemployment/Temporary Disability Insurance _____
8. Worker's Compensation _____
9. VA Pension _____
10. Supplemental Security Income _____
11. Social Security Retirement or Disability _____
12. Welfare _____
13. Income from property _____
14. Alimony or child support _____
15. Other income (specify) _____
16. GROSS TOTAL CASH INCOME FROM ALL SOURCES (TOTAL LINES 3-15) _____
17. Total Number of Persons Depending on Family Income, Including Client _____

MEDICAL INSURANCE: (Check appropriate Space) —
 Blue Cross; — Blue Shield; — Rider J or Major Medi-
 cal; — Medicare—Part A — or Part B —; — Medicaid;
 — Other; Specify —

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

Signature of Client/Guardian _____

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

Date No. 1: _____

Date No. 2: _____

Date No. 3: _____

Date No. 4: _____

(c) The Financial Participation Scale at N.J.A.C. 10:91-3.4(a) establishes the client's level of financial responsibility toward the cost of the service(s) or equipment.

(d) The Financial Participation Worksheet includes the following instructions and calculation:

1. Enter the cost of the services in the space "A" below;
2. Locate the Sliding Fee scale corresponding to the family size and identify the income range into which the annual gross income fits. (See line 16 on the Financial Survey Form);
3. Locate the applicable percentage to the right of that range. Enter that percentage in the space "B" below;
4. Multiply the cost of the services by that percentage; and

5. The result obtained is to be written at "C" below. This is the amount of the consumer's financial participation in the acquisition of the services.

$$A. \frac{\text{Cost of Services}}{\text{Cost of Services}} \times B. \frac{\text{Applicable percentage}}{\text{Applicable percentage}} = C. \frac{\text{Amount of Consumer's Participation}}{\text{Amount of Consumer's Participation}}$$

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

10:91-3.2 Financial need standard applied to adaptive living skills/prevention and education services

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

	Adaptive Living Skills/ Prevention Services	Education Services
Purchase of:		
Maintenance	yes	not applicable
Training Equipment	yes	yes*
Homemaking:		
Daily Living Aids	yes	yes*
Optical or Accessory Low Vision Aids	yes	yes*
Projection or Electronic Low Vision Aids	yes	yes
Transportation	yes (except when provided for evaluation purposes)	yes (except when provided for evaluation purposes)
Hospitalization	yes	yes
Surgery and Treatment	yes	yes
Mental Restoration Services	yes	yes
Diagnostic Evaluations	no	no
Prosthetics	yes	yes
Eye Glasses and Lenses	yes	yes
Textbooks and Materials	not applicable	no
Other Training and Job Placement Related Services	not applicable	not applicable

* except when provided by the Meyer Center

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

VR services subject to the needs test standards are identified in N.J.A.C. 10:95.

10:91-3.4 Financial participation by clients

(a) Participation by a client in the cost of services subject to financial need shall be required up to the calculated participation amount as follows:

FINANCIAL PARTICIPATION SCALE

This schedule establishes the client's level of responsibility (%) towards the cost of the service or equipment, etc.

Family Size: ONE		
Family Income		%
0	\$15,000	0%
\$15,001	25,000	2%
25,001	35,000	7%
35,001	40,000	10%
40,001	45,000	20%
45,001	50,000	30%
50,001	55,000	40%

Family Size: ONE		
Family Income		%
55,001	60,000	50%
60,001	65,000	60%
65,001	70,000	70%
70,001	75,000	80%
75,001	85,000	90%
85,001	Above	100%

Family Size: TWO		
Family Income		%
0	\$20,000	0%
\$20,001	30,000	2%
30,001	40,000	7%
40,001	47,000	10%
47,001	53,000	30%
53,001	60,000	40%
60,001	65,000	50%
65,001	70,000	60%
70,001	80,000	70%
80,001	85,000	80%
85,001	90,000	90%
90,001	Above	100%

Family Size: THREE		
Family Income		%
0	\$25,000	0%
\$25,001	38,000	2%
38,001	45,000	7%
45,001	50,000	10%
50,001	55,000	20%
55,001	60,000	30%
60,001	65,000	40%
65,001	70,000	50%
70,001	75,000	60%
75,001	80,000	70%
80,001	85,000	80%
85,001	90,000	90%
90,001	Above	100%

Family Size: FOUR		
Family Income		%
0	\$30,000	0%
\$30,001	40,000	3%
40,001	50,000	7%
50,001	60,000	15%
60,001	70,000	35%
70,001	80,000	55%
80,001	90,000	75%
90,001	95,000	95%
95,001	Above	100%

Family Size: FIVE		
Family Income		%
0	\$ 35,000	0%
\$ 35,001	45,000	3%
45,001	50,000	7%
50,001	60,000	10%
60,001	70,000	30%
70,001	80,000	45%
80,001	90,000	65%
90,001	100,000	95%
100,001	Above	100%

Family Size: SIX		
Family Income		%
0	\$40,000	0%
\$40,001	55,000	3%
55,001	65,000	10%
65,001	80,000	30%
80,001	95,000	50%
95,001	115,000	75%
115,001	Above	100%

Family Size: SEVEN		
Family Income		%
0	\$40,000	0%
\$40,001	55,000	2%
55,001	65,000	6
65,001	80,000	20
80,001	95,000	35
95,001	115,000	60
115,001	135,000	80
135,001	155,000	100
155,001	175,000	100
175,001	195,000	100
195,001	215,000	100

Family Size: EIGHT		
Family Income		%
0	\$40,000	0%
\$40,001	55,000	1%
55,001	65,000	3
65,001	80,000	15
80,001	95,000	25
95,001	115,000	50
115,001	135,000	70
135,001	155,000	90
155,001	175,000	100
175,001	195,000	100
195,001	215,000	100

Family Size: NINE		
Family Income		%
0	\$40,000	0%
\$40,001	55,000	0%
55,001	65,000	1
65,001	80,000	8
80,001	95,000	15
95,001	115,000	35
115,001	135,000	60
135,001	155,000	80
155,001	175,000	90
175,001	195,000	100
195,001	215,000	100

Family Size: TEN		
Family Income		%
0	\$40,000	0%
\$40,001	55,000	0%
55,001	65,000	0
65,001	80,000	4
80,001	95,000	10
95,001	115,000	25
115,001	135,000	50
135,001	155,000	70
155,001	175,000	80
175,001	195,000	90
195,001	215,000	100

The financial participation of a family size 11 or more shall be based on the schedule for a family size of 10.

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

(c) The client and the primary caseworker shall mutually agree upon the financial participation arrangement, which shall be documented in the case file. Clients shall be expected to participate up to the calculated participation amounts as first dollar payments.

(d) The Financial Needs Survey shall be reviewed annually.

Amended by R.2000 d.313, effective August 7, 2000.

See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

In (c), deleted a former second sentence.

Amended by R.2001 d.349, effective October 1, 2001.

See: 33 N.J.R. 2066(a), 33 N.J.R. 3449(a).

In (a), added Income Schedules for a family size of seven through eleven.

10:91-3.5 Commission as last dollar resource

(a) Commission funds shall not be used until all other sources (comparable services) have been exhausted.

1. All applicants/clients shall be required to use or apply for comparable services for which they are eligible to cover, in whole or in part, the cost of services unless this will cause a significant delay in the provision of services.

SUBCHAPTER 4. DESCRIPTION OF SERVICES

10:91-4.1 Services available to New Jersey residents

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

1. The regional offices shall provide outreach, information/referral services and process applications for anyone contacting the Commission.

2. The diabetic eye disease detection program promotes the early detection and monitoring of retinal and other ocular changes in known diabetics.

3. The pre-school vision screening program provides visual acuity and muscle imbalance screening to preschool and kindergarten children, to detect symptoms of amblyopia and other eye conditions that may cause visual impairment or loss.

4. The mobile eye examination program provides eye examinations to individuals for whom eye care is unavailable or available on a limited basis at sites such as housing projects, senior citizens centers, nursing homes, institutions, and community based programs.

5. The migrant eye examination program provides eye examinations and follow-up service to migrant laborers and their families.

Amended by R.2000 d.313, effective August 7, 2000.

See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

In (a); rewrote 1, deleted former 4, recodified 5 and 6 as 4 and 5, and rewrote the new 5.

10:91-4.2 Services available to applicants

(a) Referral to vision related diagnostic services is available to applicants as follows:

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

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

3. Evaluation by other vision specialists, such as, an examination by a corneal specialist, neuroophthalmologist, retinal specialist, or pediatric ophthalmologist.

(b) Additional assessment and/or referral services may be provided to applicants for whom a caseworker determines there is a health and safety issue. These assessment services may include, but are not limited to:

1. A daily living skills evaluation, that is, a written assessment relative to a client's ability to perform personal management tasks (for example, grooming, cooking);

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

3. An eye health skills evaluation, that is, a written assessment relative to a client's ability to secure or carry out the appropriate treatment for an eye condition; or

4. An evaluation by a social worker, that is, a written assessment relative to housing, health care, nutrition, adequate income, family and social supports.

(c) Additional services which ensure the provision of diagnostic and evaluation services as specified in (a) and (b) above are available to applicants as follows:

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

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

(d) All services specified in (a) through (c) above are subject to the provisions for comparable services as indicated in N.J.A.C. 10:91-3.5.

10:91-4.3 Services available to all eligible clients

(a) Once a determination of visual eligibility has been made by the Commission, the client may receive appropriate services as specified in (a)1 through 15 below. These services may require additional eligibility standards as identified in N.J.A.C. 10:95 and 10:97.

1. Vision related diagnostics as follows:

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

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

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

2. Non-vision related diagnostics as follows:

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

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

iii. Audiological exam, that is, an audiogram (hearing test) performed by an audiologist.

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

v. A psychological evaluation that is, an assessment provided by a psychologist which may include the following areas as needed: auditory, visual and visual motor, language, gross motor, personality and adjustment.

3. Skills assessment at the Joseph Kohn Rehabilitation Center in a program of assessment and instruction in areas such as, but not limited to, personal communication, orientation and mobility, arts and crafts, and home and personal management and/or vocational assessment as appropriate;

4. Vision related restorative treatment, which services include those listed in N.J.A.C. 10:91-7.1;

5. Non-vision related restorative treatment services (short term) by a psychiatrist, or other psychotherapist (see N.J.A.C. 10:95-6.3(e), (f) and (g));

6. Provision of prosthetics and aids including those for near and distance tasks, closed circuit TV's standard and bifocal eye glasses;

7. Provision of training materials or equipment including orientation and mobility aids, activities of daily living aids and health aids designed to help a blind person accommodate to vision loss when performing health maintenance tasks;

8. Skills acquisition instruction including communication skills, use and care of low vision aids, use of adaptive and specialized aids and devices, techniques for accomplishing activities of daily living including home and personal management, orientation and mobility techniques, method of caring for the eyes and use of residual vision;

9. Transportation, services related to transporting a client, and escorts or attendants as necessary, related to the provision of eligible services, including costs of travel and subsistence while in transit;

10. Room and board expenses in conjunction with attendance at the Joseph Kohn Rehabilitation Center or community based programs;

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

12. Services to families which facilitate the achievement of the client's service goals. These services may include: psychiatric, psychological or counseling services, training/instructional services, medical consultation and/or child care;

13. Commission contracted programs which meet the special needs of Commission clients (see N.J.A.C. 10:91-5.7);

14. Special services requests as follows:

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

ii. The Commission for the Blind and Visually Impaired, in coordination with other New Jersey State agencies, provides certain special services to those of its clients who are legally blind. These services may include:

- (1) Division of Motor Vehicles identification card;
- (2) Fishing license;
- (3) Income tax certification letter;
- (4) Transit Reduced Fare Program;
- (5) Guide transportation pass;
- (6) Theater identification card;
- (7) Park, forest, or reservation (free) admission pass;
- (8) Handicapped parking placard; and/or

(9) Telephone directory assistance 411 charge exemption.

15. Client Assistance Fund:

i. The Client Assistance Fund shall be available to assist clients of the Commission in meeting certain financial emergencies. A caseworker shall request money from the Client Assistance Fund only when there are no other financial resources available to the client.

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

(1) Monies from the Client Assistance Fund shall be provided to clients on a loan basis. Exact payment terms and any other relevant terms shall be stipulated to the client orally and in writing before the funds are issued. The client shall sign a standard promissory note which specifies the terms of the loan agreement.

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

Amended by R.2000 d.313, effective August 7, 2000.

See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

In (a)5, changed N.J.A.C. reference.

Amended by R.2001 d.349, effective October 1, 2001.

See: 33 N.J.R. 2066(a), 33 N.J.R. 3449(a).

In (a)13, amended N.J.A.C. reference.

10:91-4.4 Additional services available to eligible clients

(a) In addition to services specified in N.J.A.C. 10:91-4.1 through 4.3, services may be made available to eligible clients as described in (a)1 and 2 below and are subject to comparable service provisions.

1. Children's services as follows:

i. Summer camp experience for children with a visual disability;

ii. Specialized summer programs;

iii. Physical education/recreation, in-service training (workshops); and

iv. Reader service, that is, payment to a person (other than a family member) who provides a service designed to equalize the student's participation in their other education program.

2. Prevention services are as follows:

i. Other vision related medical services:

(1) Initial payment for prescribed medications, or supplies which are incident to the restorative services; and

(2) Payment for care which is provided to a client at free-standing, same-day surgical centers at which the treatment occurs.

Amended by R.2000 d.313, effective August 7, 2000.

See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

Rewrote (a).

Amended by R.2001 d.349, effective October 1, 2001.

See: 33 N.J.R. 2066(a), 33 N.J.R. 3449(a).

In (a)1iv, substituted "their" for "his".

SUBCHAPTER 5. CASE MANAGEMENT PRACTICES

10:91-5.1 Referral procedures

(a) Referrals shall be accepted from a variety of sources in either written or electronic media, including telephone.

(b) Referrals will be contacted within 10 working days from the date of initial referral to the Commission.

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

Amended by R.2000 d.313, effective August 7, 2000.

See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

Deleted (d).

10:91-5.2 Intake procedures

(a) The purpose of the intake interview shall be:

1. To gain an initial assessment of the applicant's total needs;

2. To familiarize the applicant with Commission services;

3. To respond to the applicant's most immediate or emergency needs;

4. To determine whether eligibility should be pursued; and

5. To initiate together with the applicant, the development of a comprehensive service plan.

(b) The applicant survey is completed during the intake interview by the caseworker. After completion, the caseworker and the applicant, or his or her parent or guardian, shall sign the survey. The completed survey becomes a part of the applicant case record.

(c) Caseworkers, who provide face-to-face intake services to clients, shall, at the time the applicant survey is completed, make clients aware of the Voter Registration Act of 1993. The client shall be made aware of the opportunity to register to vote but shall not be advised, in any way, to sign up for or not to sign up to vote.

Amended by R.2000 d.313, effective August 7, 2000.

See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

Added (c).

10:91-5.3 Individual Client Service Plans

(a) The client and primary caseworker shall discuss and agree to an Individual Client Service Plan (ISP) which addresses the client's needs. Vocational rehabilitation (VR) clients have an alternate plan called the Individualized Plan for Employment (IPE) which is developed once eligibility for VR services has been determined (see N.J.A.C. 10:95-1.1(c)). Both the client and caseworker shall sign the ISP or IPE.

(b) A statement indicating that choices were provided to the consumer will be included on every IPE. This statement will be developed by the consumer, the parent or guardian, prior to the signature on the IPE. The rehabilitation counselor has the option of commenting on the plan.

(c) The ISP shall be completed as soon as possible after the applicant survey. The ISP should include the type of services to be provided, the timeframes for their completion and the applicant's comments, if any.

(d) The ISP or IPE shall be reviewed with the client at a meeting on an annual basis. Revision of the ISP or IPE may be necessary due to change in a client's goals or objectives, change in a client's condition and/or situation, progress, achievement of objectives, newly identified problems or needs, or unobtainable objectives. For VR clients, an amendment to the IPE shall be written.

(e) At case closure, the current ISP or IPE shall be annotated to reflect which objectives were or were not achieved.

Amended by R.2000 d.313, effective August 7, 2000.
See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

Substituted references to Individualized Plan for Employment for references to Individualized Written Rehabilitation Program throughout; and in (b), deleted a reference to rehabilitation counselors, and added a third sentence.

10:91-5.4 Purchase of services; immediate need situations

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

(b) Client financial participation toward the expense of Commission purchased services shall be based on the level of responsibility set forth in detail in the financial need standard and survey (see N.J.A.C. 10:91-3).

(c) The Commission has established an alternate method to purchase services to meet immediate needs. Rapid payment allows the payment for a service within 48 hours.

10:91-5.5 Referral to provider agencies

(a) The Commission shall administer community based programs through contracts with provider agencies to meet the needs of Commission clients.

(b) Clients shall be referred to a provider agency for the purpose of achieving specific objectives or goals. Information concerning a client shall be released to the provider agency, as needed, in accordance with 10:91-5.6.

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

10:91-5.6 Release of information and access to records

(a) Client information shall not be released without the written consent of Commission clients or their parents or guardians, or an order of a court of competent jurisdiction.

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

(c) Client information shall only be released to an organization, agency, or individual engaged in audit, evaluation, or research when the organization, agency, or individual assures that:

1. The information will be used only for the purposes for which it is being provided;
2. The information will be released only to persons officially connected with the audit, evaluation or research; and
3. The information will be managed to safeguard confidentiality.

(d) A Commission client over the age of 18, or a parent or guardian of a client under the age of 18, shall have access to and/or copy of his or her own records.

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

(f) Clients or their representatives shall be charged the fees, pursuant to N.J.S.A. 47:1A-1 et seq., for photocopying materials from the client's case records.

(g) Reader services shall be provided if the client requires them in order to review his or her case record.

Cross References

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

10:91-5.7 Communicable diseases of Commission clients

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

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

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

10:91-5.8 Reporting institutional abuse of elderly persons

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

10:91-5.9 Reporting suspected child abuse or neglect

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

10:91-5.10 Critical incidents involving clients

(a) A critical incident means the occurrence of serious accidental injuries to clients or suspected offenses involving injury to clients or their property. Such incidents may include professional medical treatment, loss of consciousness or restriction of activity or motion.

(b) Incidents shall be verbally reported immediately to the Commission's Executive Director or designee. This initial verbal notification, which is to be followed by a written report within 24 hours, shall be the responsibility of the Commission staff person who first learns of the occurrence of a critical incident, or his or her supervisor or manager and shall include:

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

(c) All critical incidents shall be reported immediately by the Commission to the Commissioner of the Department of Human Services and the Office of Public Information.

SUBCHAPTER 6. CLIENT APPEAL RIGHTS

10:91-6.1 Recording of concerns by clients

Clients of the Commission for the Blind and Visually Impaired, their parents, guardians, advocates or legal representative may record their concerns or problems regarding the timeliness of delivery of services or the adequacy of

service by contacting their caseworker, their caseworker's supervisor or, in their absence, the office manager. The client also has the option of recording their concerns or problems with the Commission's Client Service Representative (see N.J.A.C. 10:91-1.12). Clients requesting an administrative appeal of their case may also do this through the Client Service Representative (see N.J.A.C. 10:91-6.2).

10:91-6.2 Administrative review

(a) A client/applicant (claimant) or his or her parent or guardian shall have the right to request an administrative review after all informal means of dispute resolution have been unsuccessful. The claimant may initiate an Administrative Review Request by notifying the caseworker or the client service representative (see N.J.A.C. 10:91-1.12). The claimant shall indicate which type of administrative review is requested:

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

(b) Upon receipt of a request for an administrative review, the Executive Director shall assign a supervisory employee to conduct the administrative review. Neither the reviewer assigned this task nor his or her immediate supervisor shall have had any direct part in the dispute under review. The assigned reviewer shall have experience and knowledge of the client's program area.

(c) The appeal reviewer shall complete the administrative review within 30 working days of the client's request. This time limitation applies to both types of administrative review.

(d) When the claimant requests an administrative review of the case record, the reviewer shall conduct an interview with the claimant, and other involved individuals as needed.

(e) When the claimant has requested an in-person administrative review the reviewer shall communicate with him or her to arrange a mutually convenient day, time and place. The reviewer will function as chairperson. If the client is unable to arrange for transportation to be present at the review, the Commission will make arrangements to provide transportation and reasonable accommodations.

(f) The claimant, during an in-person administrative review, will be permitted:

1. To represent himself or herself or to be represented by an attorney or another individual; and
2. To submit additional documents; however, such documents shall be provided to the appeal reviewer at least five working days prior to the date of the administrative review.

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

(h) A claimant who wishes to be represented by counsel shall assume full responsibility for the selection of an attorney and for all legal costs incurred. A claimant who cannot afford a private attorney will be referred to a local legal services office or to the NJ Protection and Advocacy, Inc. Commission claimants who are also vocational rehabilitation services clients shall be advised of the opportunity to receive assistance from the Client Assistance Program (CAP). The CAP, located in the NJ Protection and Advocacy, Inc. program, may be reached by telephone at 1-800-922-7233 (see N.J.A.C. 10:95-19).

(i) All correspondence with a claimant will be in a medium accessible to the claimant.

(j) Within 25 working days of completing an administrative review, the reviewer shall submit a written report of findings and recommendations to the Executive Director.

(k) The Executive Director, upon reviewing the report of the investigation, will inform by registered letter, within 20 days, the claimant, parent or guardian whether the matter will be disposed of pursuant to (m) or (n) below.

(l) The claimant, parent or guardian has the right to request an administrative hearing before an administrative law judge if they disagree with the recommended decision. A request for hearing by an Administrative Law Judge shall be in writing by registered mail from the claimant, parent or guardian to the Executive Director.

(m) If the Executive Director determines that the administrative appeal represents a contested case (see N.J.A.C. 10:91-1.2), the matter is immediately forwarded to the Office of Administrative Law pursuant to the Administrative Procedures Act, N.J.S.A. 52:14B-1 et seq., N.J.S.A. 52:14F-1 et seq., and the Uniform Administrative Procedure Rules, N.J.A.C. 1:1. The Executive Director will advise the claimant, parent or guardian of this action by registered letter.

(n) If the Executive Director determines that the administrative appeal represents a non-contested case (see N.J.A.C. 10:91-1.2), then the Executive Director shall issue a final decision and forward this decision by registered letter to the claimant, parent or guardian. The letter will contain a statement that any further appeal of this decision shall be made to the Appellate Division of the Superior Court of New Jersey.

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

Amended by R.2001 d.349, effective October 1, 2001.

See: 33 N.J.R. 2066(a), 33 N.J.R. 3449(a).

In (a), substituted "review" for "investigation"; in (f)2, substituted "reviewer" for "investigator" and "administrative review" for "appeal investigation"; in (h), inserted "located in the NJ Protection Advocacy, Inc. program" following "CAP" and added N.J.A.C. reference.

SUBCHAPTER 7. MEDICAL POLICIES AND FEE SCHEDULES

10:91-7.1 Fee schedule

(a) All services shall be provided with prior authorization from the Commission.

(b) The vendor shall provide to the client's caseworker a written report which details the services rendered by the vendor before payment is made.

(c) The Commission's Medical Consultant shall review exceptions to the Commission's medical fee schedule and establish non-listed fees on a case-by-case basis. In determining exceptions to the Commission's fee schedule the Medical Consultant shall consider factors such as, but not limited to:

1. The availability of a specific service within a client's geographic area; and
2. The uniqueness of the required medical procedure.

(d) A vendor who accepts Commission fees shall not charge the Commission client more than what the Commission fee is for a specific service as indicated in its fee schedule.

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

1. General examinations:	
General vision exam to determine classification including evaluation to determine need for field test	\$ 50.00
Follow-up treatment examination up to four each	25.00
Exam under anesthesia	200.00
General medical examination includes for medical exam and report	50.00
for urinalysis	5.00
and for hemoglobin test	5.00
In-hospital pre-operative medical examination or consultation	60.00
In-hospital follow-up visits up to five each	30.00
Out of hospital pre-operative medical examination or consultation	60.00
Otological examination, including audiogram	85.00
Audiogram only	25.00
Hearing aid evaluation	60.00
Tympanogram	5.00
Dental examination with full mouth X-rays	45.00

Neurological evaluation	100.00	* Individual evaluation by the Commission.	
Physical therapy per session, as approved by administrative medical consultant	55.00		
Psychiatric, psychological or other psychotherapeutic evaluation, three sessions, each up to	100.00		
Individual therapy, one hour	100.00		
Speech therapy, per session	55.00		
2. Vision related consultative specialty examinations:			
Corneal examination	60.00		
Glaucoma examination and report	60.00		
Hereditary evaluation	60.00		
Low vision exam for clients whose most recent eye report is one year old or less	150.00		
Low vision exam for clients whose most recent eye report is over one year old	175.00		
Up to three low vision exam follow-up visits which occur within six months of the date of the initial low vision exam, each	35.00		
Neuro-ophthalmological examination	130.00		
Neuro-ophthalmological follow-up exam, up to three allowed	30.00 each		
In-hospital consultations, first consultation with detailed report	130.00		
Each succeeding day	30.00		
Oculo-plastic examination	60.00		
Ocular trauma examination	60.00		
Orthoptic evaluation	40.00		
Orthoptic follow-up exam	25.00 each		
Orthoptic therapy, each session	20.00		
Out of hospital pre-operative ophthalmic examination or consult	45.00		
Pediatric ophthalmological examination	110.00		
Follow-up treatment examination, up to three each	80.00		
Pleoptic evaluation	40.00		
Pleoptic therapy, each session	20.00		
Retinal examination	100.00		
Follow-up treatment examination up to three each	35.00		
Uveitis, tumor evaluation	60.00		
Uveitis evaluation follow-up	25.00		
3. Specialized eye procedures:			
Eyelids:			
Excision of cyst	73.00		
Chalazion (multiple \$156.00)	80.00		
Lesion (tumor)	150.00		
Plastic repair of lid laceration:			
Without graft	185.00		
With graft	370.00		
Surgical correction of entropion or ectropion	345.00		
Ptosis surgical repair	I.C.*		
Extensive plastic repair of lids and orbits	I.C.*		
Incision and drainage of abscess	75.00		
Canthotomy	200.00		
Canthoplasty	515.00		
Excision of xanthoma:			
Unilateral	160.00		
Bilateral	320.00		
Tarsorrhaphy	200.00		
Canthorrhaphy	300.00		
Punctal Occlusion	160.00		
Punctal occlusion, bilateral	320.00		
4. Conjunctiva:			
Incision and removal of foreign body:			
Surface	35.00		
Imbedded	50.00		
Excision—lesion of conjunctiva:			
Biopsy	50.00		
Excision of cyst or nevus	80.00		
Excision of pterygium	200.00		
Repair:			
Conjunctivoplasty with free graft:			
Conjunctival graft	375.00		
Buccal mucosa membrane graft	425.00		
Suture laceration	50.00		
5. Glaucoma procedures:			
Goniotomy	280.00		
Peripheral iridectomy, laser or surgical	330.00		
Filter operation of any kind	400.00		
Iridotomy by stab incision for iris bombe	200.00		
Laser iridotomy	345.00		
Cyclo diathermy	230.00		
Cyclo dialysis	370.00		
Cyclo cyro therapy	240.00		
Argon laser or surgical trabeculectomy	400.00		
Shunt to extraocular reservoir	945.00		
6. Cornea:			
Keratotomy:			
Removal of foreign body from surface	35.00		
Imbedded in Cornea	60.00		
Keratectomy	240.00		
Keratoplasty (corneal transplant)	915.00		
Radial keratotomy (as approved by Administrative Medical Consultant)	635.00		
Epikeratophakia	635.00		
Removal of foreign body anterior chamber	370.00		
Delimiting keratotomy	95.00		
Cauterization or cryotherapy of lesion of cornea	50.00		
7. Crystalline lens:			
Cataract extraction by phaco	615.00		
Cataract extraction with intraocular lens insertion	915.00		
Cost of intraocular lens	370.00		
Secondary lens implant	615.00		
Discission of lens, surgical	300.00		
YAG laser posterior capsulotomy	300.00		
Removal of intraocular lens	630.00		
8. Eyeball:			
Excision:			
Enucleation or evisceration	330.00		
With non movable implant	330.00		
With movable implant	375.00		
Suture for wound or injury:			
Non-perforating	630.00		
Perforating	630.00		
9. Retina and vitreous:			
Scleral buckling	1,500.00		
Repair retinal detachment without buckle	1,124.00		
Sealing of retinal tear by argon laser coagulation	630.00		
Focal/Argon or krypton photo-coagulation for Rx of diabetic retinopathy:			
Unilateral, initial treatment	390.00		
Up to three additional treatments (each)	290.00		

Pan retinal photo-coagulation for vein occlusion, initial treatment	390.00	Prothrombin (bleeding time)	6.00
One additional treatment	290.00	PTT (partial thromboplastin time)	7.00
Pan retinal photo-coagulation for diabetic retinopathy initial treatment	390.00	Pre-operative pre-admission testing, including chest x-ray, EKG, SMA 12 and urinalysis	130.00
Up to two additional treatments (each)	290.00	16. Price list for eyeglasses:	
Vitrectomy pars plana approach with or without lensectomy	1,035.00	Eyeglasses complete with frames prescribed as a result of a general vision examination, no dispensing fee:	
Cryoablation of retina (blind eye)	240.00	Single vision—distance or reading, spherical, hyperopia (+) or myopia (—)	60.00
Gas fluid exchange	250.00	Single vision—distance or reading, spherocylindrical, astigmatism in addition to hyperopia or myopia	70.00
Endophotocoagulation	250.00	Spherical bifocals, corrects both distance and reading	80.00
10. Orbit:		If bifocal "add" greater than + 3.00	95.00
Plastic repair of orbit:		Sphero-cylindrical bifocals (same as spherical bifocals, except also corrects for astigmatism)	85.00
Fracture of floor	655.00	If bifocal "add" greater than + 3.00	100.00
Orbitotomy	375.00	Single vision spherical cataract glass	100.00
Removal of intra-orbital foreign body	425.00	Single vision sphero-cylindrical cataract glass	140.00
Orbitotomy (kroenlein) as in exophthalmos	750.00	Bifocal—spherical cataract glass	140.00
11. Ocular Muscles:		Bifocal—sphero-cylindrical cataract glass	150.00
Strabismus Surgery:		Welsh 4 Drop or OSI cataract glass	180.00
One muscle	425.00	Corning CPF UV lens—laboratory invoice costs plus \$25.00 dispensing fee	
Two muscles, one or both eyes	470.00	(Commission low vision consultants suggest that the examining doctor consider prescribing less expensive alternatives to these Corning lenses, that is, YOUNGER PLS 530, 540 and 550)	
Three or more muscles, one or both eyes	525.00	17. Eyeglasses prescribed as a result of a low vision evaluation:	
12. Lacrimal procedures:		For the first or only pair made, the Commission will pay laboratory invoice costs for lenses and frames including a \$25.00 dispensing fee. A copy of the original laboratory invoice shall be submitted for lenses and frames.	
Dacryocystorhinostomy	1,000.00	For each additional pair provided at the same time as the initial pair, the Commission will pay laboratory invoice costs and a \$12.50 dispensing fee. A copy of the original laboratory invoice shall be submitted for lenses and frames.	
Dacryocystectomy	375.00	18. Custom spectacle mounted devices and biotics:	
Incision and drainage of lacrimal sac or lacrimal gland abscess	80.00	The Commission will pay laboratory invoice costs for lenses and frames and a \$50.00 dispensing fee. A copy of the original laboratory invoice shall be submitted for lenses and frames.	
Plastic repair of torn canaliculi	415.00	19. Hard contact lenses:	
Probing of naso-lacrimal duct	30.00	Single lens	135.00
Subsequent (Max 4)	20.00	Two lens	225.00
Probing of duct with tube insertion	150.00	Replacement lens	45.00
13. X-ray:		Hard pin hold contact lens (Aniridia)	335.00
Skull—less than four views with or without stereo	25.00	up to 390.00	
Skull—complete, four views	45.00	20. Soft contact lenses (shall be initially approved by Administrative Medical Consultant):	
Chest—single view	45.00		
Interpretation	15.00		
Chest two views or stereo	30.00		
Interpretation of chest—two views or stereo	15.00		
Chest—three views	40.00		
Chest—four views	45.00		
GI series—upper gastrointestinal tract	95.00		
CAT computerized tomography	200.00		
Interpretation of CAT Scan	45.00		
Magnetic Resonance Imaging (MRI) of skull, including interpretation	500.00		
14. Special clinical tests:			
ECG, EKG, Electrocardiogram	25.00		
ECG, EKG interpretation	15.00		
ERG electro retinogram	55.00		
VER electro encephalogram	55.00		
Cardiovascular stress test	85.00		
Electroencephalogram	55.00		
Microscopic pathological evaluation of cataract after extraction	5.00		
15. Laboratory tests:			
Bun, Urca	7.00		
CBC (complete blood count)	7.00		
Creatinine	7.00		
Blood sugar	7.00		
Hemoglobin	6.00		
Serology	7.00		
Urine	6.00		
SMA 12	60.00		

Single lens	180.00	Fresnell prism monocular	20.00
Two lens	270.00	Fresnell prism binocular	30.00
Replacement lens (each)	67.00	Fresnell prism adaption	15.00
Perma lens	200.00	Gonioscopy	15.00
Perma lens (pair)	225.00	Goldman lens vitreous exam	15.00
Replacement perma lens (each)	73.00	Hess screen exam	60.00
21. Gas permeable lenses (shall be initially approved by Administrative Medical Consultant):		Pachymetry	100.00
Gas permeable lens (each)	200.00	Perimetry (visual field)	25.00
Gas permeable lens (pair)	300.00	Perimetry (threshold)	75.00
Replacement gas permeable lens (each)	85.00	Perimetry (octopus)	100.00
22. Therapeutic lenses (shall be initially approved by Administrative Medical Consultant):		Saccadic velocity evaluation	105.00
Soft contact bandage lens	200.00	Services provided by an ambulatory surgical center	700.00
Collagen shield	75.00	Surgery set up (minor surgery)	60.00
23. Ocular prosthesis:		Tonography	35.00
Custom fitted, hand painted, plastic ocular prosthesis	643.00	Ultrasonography A (axial length measure monocular)	105.00
Custom fitted, hand painted, plastic scleral shell type ocular prosthesis	878.00	Ultrasonography A (axial length measure binocular)	180.00
Orbital impression	300.00	Ultrasonography B (scan for vitreal and retinal pathology)	100.00
Custom fitted temporary ocular prosthesis	171.00	Use of laser and room (only in hospital or hospital surgical care center, where the doctor is not an employee)	200.00
Narcissus lens	390.00	Visual evoked response evaluation	115.00
24. Non-spectacle low vision aids:		Water bath ultrasound—monocular	170.00
The Commission will pay the price as listed in one of the following catalogs:			
1. Coburn Optical Company;			
2. Lighthouse;			
3. American Optical Company;			
4. Designs for Vision; or			
5. Other catalogs			
A copy of the applicable page which stipulates the cost of the low vision aid or a copy of the actual invoice must be submitted by the low vision doctor.			
25. Hospital clinic and office specialty procedures:			
Beta radiation therapy following excision of pterygium (up to three treatments)	50.00		
Bronson ultrasound B scan (intraocular foreign body)	95.00		
Color perimetry	90.00		
Color fundus photos	45.00		
Corneal transplant tissue	750.00		
Dark adapt gross rod	130.00		
Dark adapt rod and cone plateau	160.00		
Electrooculography	100.00		
Electro retinography	100.00		
Endothelial cell count	100.00		
Fluorescein angiogram with interpretation and written report	232.00		

Amended by R.2000 d.313, effective August 7, 2000.

See: 32 N.J.R. 1482(a), 32 N.J.R. 2902(a).

In (d), rewrote 2, 9, 16, 18, 23 and 24, and increase corneal transplant tissue fee in 25.

Amended by R.2001 d.349, effective October 1, 2001.

See: 33 N.J.R. 2066(a), 33 N.J.R. 3449(a).

Inserted new (d); recodified former (d) as (e) with substantive changes.

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

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

(b) In the event that an education, independent living or prevention services client fails to appear for a scheduled medical appointment or fails to cancel a scheduled appointment, the Commission shall be liable for one half of the health provider's customary fee.

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