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OFFICE OF
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March 1, 1957

Honorable Edward J. Patten Secretary of State State House Trenton, New Jersey

Dear Secretary Patten:

Enclosed herewith for filing is the following regulation of the Bureau of Assistance of the Division of Welfare of this Department:

Municipal Aid Regulation 2.300A - General Assistance Allowances

Revised pages 7-8, and new page 8a

Very truly yours

DEPARTMENT OF INSTITUTIONS AND AGENCIES

John W. Tramburg, Commissioner

JWT:4

CC: Mr. Brendan T. Bryne, Secretary to the Governor Mr. Elmer V. Andrews, Director, Division of Welfare Mrs. Elizabeth Feehan, Assistant to the Commissioner

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State of New Jersey Department of Institutions and Agencies Division of Welfare

	ISSUED: (Date)
	REV.:
	. REV.: 3/57
	(Date)
TITLE: ADMINISTRATION	
SUBJECT: General Assistance Allowances	
STATUTORY REFERENCE: 44.2111	
MUNICIPAL AID REGULATION #2.300A	
Attached are revised page 7-8 and new page Sa to	replace existing page 7-8.
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	Lugelman, Chief
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	Bureau of Assistance
Approved;	



State of New Jersey

DEPARTMENT OF INSTITUTIONS AND AGENCIES

TRENTON 25

BUREAU OF ASSISTANCE 148 WEST STATE STREET

March 11, 1957

TO: MUNICIPAL WELFARE DIRECTORS

RE: Revision in M.A. 2.300A, Section X, Variable Needs

Attached is revised page 7-8, and new page 8a for regulation M.A. 2.300A. Sufficient copies for staff, where necessary, are enclosed.

The revision provides a new sub-section c, entitled "Certain Special Classes of Temporary Institutional Care", in item 6. Room and Board of Section X.

Our attention has been directed to situations not covered by previous policy in this regulation. The revised policy now provides for temporary care of any mentally deficient person, child or adult, in a private institution while awaiting admission to a State institution to which he has already been legally committed.

In addition, municipal welfare departments are receiving requests for payment for diagnostic evaluation at the Diagnostic Center, Menlo Park. Confusion has arisen because of the fact that while the Center is a State institution, unlike other State institutions, all admittees are charged for the service and care. The new policy in this regulation makes it clear that the costs for this service for recipients of General Assistance are proper expenditures from General Assistance funds and subject to State matching.

Please remove and destroy page 7-8, Rev. 11/56, from all copies of regulation M.A. 2.300A, and insert page 7-8, Rev. 3/57 and new page 8a.

Appropriate pen and ink amendments should be made on page #2 of the Table of Contents to identify this revised policy.

If you have any question concerning these revisions, please consult your Field Representative or this Eureau.

Very truly yours,

DEPARTMENT OF INSTITUTIONS AND AGENCIES

Irving Engelman, Chief
Bureau of Assistance

IE/MCRd

Approved
Elmer V. Andrews, Director
Division of Welfare

not have a room and board arrangement. In all such situations, the client's budget shall be itemized in accordance with the standard authorized allowances.

- 2) An allowance for room and board with or without personal services shall be understood to be a flat rate to include the purchase of food, shelter, fuel, utilities, household supplies, bed and bathroom linens and the incidental services and supplies that are necessary for providing these items.
- 3) When a client is paying or arranging to pay a flat rate for room and board without additional personal service, the monthly allowance shall be the contract amount agreed upon between the client and the proprietor but shall not exceed \$65. per month.
- 4) When it is necessary for a client who has a handicap or major infirmity (for example, certain blind persons, certain persons discharged from mental institutions, and other handicapped persons who require careful understanding, supervision and attention) to purchase, in addition to room and board extensive personal services on a regular and continuous basis, the monthly allowance for room and board plus such personal services as verified shall not exceed \$80,00.
- 5) Budget allowances for a client who is purchasing room and board, with or without personal services, shall include in addition to board, personal incidentals, clothing and any other variable need item as needed. Under such arrangements the allowable added cost of a prescribed therapeutic diet is authorized in addition to the allowance for board and care.

b. Children

When it is necessary to pay for room, board and care for children in the home of unrelated persons, or in the home of relatives other than parents or grandparents, the authorized allowance for this service is:

\$42.50 monthly for children up to and including age 12 47.50 monthly for children 13 years and older

In addition to the above allowance, appropriate allowances for clothing and other necessary variable needs shall be provided; and the allowable cost, if any, of a prescribed therapeutic diet is authorized.

Exception:

In the event that adequate care arrangements cannot be made at the above rates because of the special care problem presented by the child, the director of welfare may advise the Bureau of the facts in the case (by telephone if placement is urgent) and consideration will be given to approval of a higher allowance. The request for approval of a higher rate should include, whenever possible, a report from the physician, psychiatrist or psychologist, as appropriate, if the problem is related to a physical or mental disability.

Effect of Unauthorized Allowances

When the amount paid for board and care for adults or children exceed the maximum allowances authorized in this regulation, and regardless of whether or not the agency pays any part of this amount, any assistance payment to or on behalf of such client will not be subject to State matching unless specific prior approval has been secured from the Bureau

c. Certain Special Classes of Temporary Institutional Care

1) Mentally Deficient Person Pending Admission to State Institution

In the instance of a mentally deficient person (child or adult) who has been committed through the County Adjustor to a State institution, and who is awaiting placement therein, the municipal welfare department shall consult the Bureau of Mental Deficiency, Dr. Maurice J. Kott, Chief, [Export 2-2131, extension 511]. That Bureau will be able to recommend private institutional facilities suitable for the particular person, and will advise the minimum rate for care charged by the recommended institution.

The municipal welfare department is authorized to arrange for care of the person in any such private institutional facility so recommended at the minimum rate. The final plan should be cleared with the office of the County Adjustor of the county of the person's legal settlement. Ascertain whether the county will contribute toward the cost of the committed person's maintenance in the private institution, the amount which the county would otherwise be obligated to provide for maintenance in a State institution. In some counties it is the practice for the County Adjustor's Office to authorize such contribution.

The municipal welfare department is authorized to pay the minimum rate charged by the institution, reduced by the amount of any contribution by the county, and by the amount of any contribution available from the person's family or other sources. An allowance so arrived at will be subject to State matching as a proper expenditure from General Assistance funds.

2) For Diagnostic Evaluation (Menlo Park)

The Diagnostic Center at Menlo Park provides analysis of the personality and character of individuals referred to it by the courts, State institutions, and public and private agencies.

The in-patient department is open to children between eight and eighteen years of age. The maximum length of stay is ninety days and preference is given to Juvenile Court commitments. The charge is \$15.00 for the admittance examination plus \$7.00 per day for care, or \$22.00 for the first day and \$7.00 per subsequent day.

The out-patient department is open to any person (child or adult) referred by a county court; by a State, county or municipal institution or agency; or by a recognized private agency. The charge for diagnostic evaluation in the out-patient department is \$22.00.

When a child, eight to eighteen years of age, who is a recipient of General Assistance is admitted to the in-patient department of the Diagnostic Center for evaluation, the cost of his examination and care, at the above rates, is an authorized allowance for purposes of State matching as a proper expenditure from General Assistance funds.

Similarly, the charge of \$22.00 for diagnostic evaluation in the outpatient department for a child or adult who is a recipient of General Assistance, is an authorized allowance for purposes of State matching as a proper expenditure from General Assistance funds.

7. Medical Care Needs

General Policy: By law [44:8-124] medical care is specifically identified as an item of need authorized to be met. Furthermore the law [44:8-125] provides for the granting of assistance to supplement inadequate income. It shall therefore be understood that individuals or families who are normally self-supporting may receive assistance to defray the cost of medical care and related services, where there is insufficient income to meet such costs as determined by State budgetary standards.

a. Physician's Services (General Practitioners)

Allowances for physician's services are subject to the following maxima and conditions:

Office Visit	\$3.00	
Home Visit	4.00	
Multiple Visit - per patient for service to two or more clients during one visit [See additional instructions below regarding clients in congregate living arrangements.]	3.00	