

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, 363 and 395, N.J.S.A. 30:1-12, 30:6-1 et seq., 52:14B-3(1) et seq.

Source and Effective Date

R.1995 d.425, effective August 7, 1995.
See: 27 N.J.R. 1931(a), 27 N.J.R. 2909(a).

Executive Order No. 66(1978) Expiration Date

Chapter 91, Organization and General Policy Provisions of the Commission for the Blind and Visually Impaired expires on August 7, 2000.

Chapter Historical Note

Chapter 91, formerly contained rules entitled "State Plan on Services to Families and Children," and became effective prior to September 1, 1969, pursuant to authority of N.J.S.A. 44:10-1 et seq. The rules were subsequently amended by R.1972 d.128, effective June 29, 1972. See: 4 N.J.R. 125(c), 4 N.J.R. 189(b). The chapter was repealed by R.1982 d.317, effective September 20, 1982. See: 14 N.J.R. 744(a), 14 N.J.R. 1057(b). Many of the rules have been covered in other parts of the Code, particularly under the Division of Youth and Family Services. Some of the rules were recodified by the 1990 promulgation to Chapter 131. A former Chapter 91, Organization and General Policy Provisions of the Commission for the Blind and Visually Impaired, was adopted as R.1990 d.432, effective September 4, 1990. See: 21 N.J.R. 2753(a), 22 N.J.R. 2716(a). Former Chapter 91 was repealed and the current Chapter 91 adopted as R.1995 d.425, effective August 7, 1995. See Source and Effective Date.

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 Advisory 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 Adaptive living skills and prevention services
- 10:91-2.2 Education services
- 10:91-2.3 Vocational rehabilitation services
- 10:91-2.4 Eye reports

- 10:91-2.5 Residency requirements
- 10:91-2.6 Notification of ineligibility for adaptive living skills services
- 10:91-2.7 Notification of ineligibility for education services
- 10:91-2.8 Ineligibility for vocational rehabilitation services
- 10:91-2.9 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, four 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 four regions are: Northern, which includes Bergen, Hudson, Morris, Passaic, Sussex and Warren Counties; Metropolitan, which includes Essex, Union and Somerset; Central,

which includes Hunterdon, Mercer, Middlesex, Monmouth and Ocean 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 systems services, monitoring and staff training. Policy and procedural manuals, and all other 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, 153 Halsey St., P.O. 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.

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 a job wherein the person is gainfully employed in an integrated labor market.

“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 not 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.

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

“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.

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

“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-competitive gainful employment” means that a person is employed within a controlled environment which uses work experience and related services to assist an individual with a disability to achieve a more productive vocational status.

“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 birth and a child’s sixth 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 a physical or mental disability which impedes an individual’s performance by preventing the obtaining, retaining, or preparing for employment, consistent with the individual’s capacities and disabilities.

“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 having a condition in which a person has a corrected visual acuity not exceeding 20/70, but not less than 20/200, in the person’s better eye, with correction, or in which the peripheral field of the person’s vision has contracted so that the diameter of the visual field subtends an angle no greater than 40 degrees but no less than 20 degrees.

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 assisting individuals with vision problems to reach their potential and promoting eye health by whatever means possible.

(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.

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, the use of specialized equipment and materials, and the use of accommodative techniques. 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 the 1994-95 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 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.

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, including mental retardation, emotional disturbance, neurological impairment, orthopedic impairment, deafness, etc.

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, preschool 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. 10:91-3.)

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 obtain and maintain suitable employment. Employment includes both wage earner positions (for example, competitive, non-competitive gainful employment or self employment), as well as homemaking. (See 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))

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, and the Education for All Handicapped Children Act of 1975, as amended.

(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 the blind 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 1993 (P.L. 103-73), 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 (P.L. 94-142), as amended by The Individuals with Disabilities Education Act of 1990 (IDEA) (PL 1010-476), 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.

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 Advisory Council

(a) Pursuant to Section 105 of the Rehabilitation Act of 1973, as amended by the Rehabilitation Act of 1993 (P.L. 103-73), the Commission has established a Rehabilitation Advisory Council (RAC).

(b) The functions of the RAC 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. Advise the designated State agency and assist in the preparation of, the State plan, the strategic plan and amendments to the plan, reports, needs assessments, and evaluations required under the Rehabilitation Act of 1993;

3. To the extent feasible, conduct a review and analysis of the effectiveness of, and consumer satisfaction with vocational rehabilitation services;

4. Prepare and submit an annual report to the Governor or appropriate State entity and the Commissioner of the Rehabilitation Services Administration on the status of vocational rehabilitation programs operated within the State;

5. Coordinate with other councils within the State, including the Statewide Independent Living Council established under section 705, the advisory panel established under section 613(a)(12) of the Individuals with Disabilities Education Act (20 U.S.C. 1413(a)(12)), the State Planning Council described in section 124 of the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 300x-4(e));

6. Perform other functions, consistent with the purpose of this title, as the State RAC determines to be appropriate;

7. Hold such hearings and forums as deemed necessary to carry out their duties; and

8. Prepare, in conjunction with the designated State unit, a plan for the provision of such resources, including such staff and other personnel, as may be necessary to carry out the functions of the RAC in accordance with Public Law 102-569 section 126.

(c) The members of the Rehabilitation Advisory Council (RAC) 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 Rehabilitation Advisory Council are outlined in section 105(b) of the Rehabilitation Act of 1973 as amended.

(e) The RAC 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 RAC may use certain funds appropriated under Title I of the Rehabilitation Act of 1973 as amended.

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 Advisory 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 Advisory 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.

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, P.O. Box 47017, Newark, NJ 07101.

SUBCHAPTER 2. ELIGIBILITY STANDARDS FOR COMMISSION SERVICES

10:91-2.1 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.

10:91-2.2 Educational services

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

1. Individuals whose best corrected visual acuity is 20/70 or less in their better eye shall be eligible for educational services.

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

3. Individuals whose best correction is between 20/50-1 and 20/69 in their better eye shall be ineligible for educational services; however, referral for vocational rehabilitation, adaptive living skills and prevention services shall be considered.

(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. 10:91-2.5; and

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

10:91-2.3 Vocational rehabilitation services

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

1. Individuals whose best corrected vision is 20/70-1 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 20/69 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.)

10:91-2.4 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.

10:91-2.5 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 and 2.3.)

(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 Written Rehabilitation Plan 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.

10:91-2.6 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. 10:91-2.1). 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.

10:91-2.7 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.

10:91-2.8 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.

(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. 10:91-6.2). 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.

10:91-2.9 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 2.5 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; or

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.

(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.

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.

(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.

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 Medical; ___ 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. _____ x B. _____ = C. _____
 Cost of Services Applicable percentage 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 not applicable yes*
Purchase of Maintenance 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%
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%

Family Size: TWO

Family Income		%
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 OR MORE

Family Income		%
0	\$60,000	
(Or More)		0%

(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. Payments by the client shall be made directly to the vendor. 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.

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's toll free number (1-800-962-1233), or by any customary means of communication.
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 glaucoma detection program provides follow-up for glaucoma suspects and others individually referred from screening.
5. 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.
6. The migrant eye examination program provides eye examinations and follow-up service to children of migrant laborers who are attending school.

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, neurophthalmologist, 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. 10:95-4.3(e), (f), (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. 10:91-5.6);

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.

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 1 and 2 below and are subject to comparable service provisions.

1. Children's services as follows:

i. Functional vision evaluation;

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

iii. Educational aids, that is, materials and/or adaptive devices on loan from the Meyer Center shall be provided to children birth to three;

iv. Educational aids on loan from the Meyer Center for children ages three to 21 shall be provided subject to contract with local school district;

v. Tuition payment:

(1) Nursery schools; and

(2) Specialized summer programs;

vi. Physical education/recreation consultation; and

vii. Reader service, which is payment to a person who reads printed material to and/or writes what is dictated by the client.

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;
- (2) Payment for "same day surgery" for clients who are admitted to the hospital as patients; and/or
- (3) Out-patient hospitalization, that is, payment for hospital care which is provided to a client who has not been admitted to the hospital facilities at which the treatment occurs.

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.
- (d) Referrals may use the toll-free number (1-800-962-1233) available to callers throughout the State.

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.

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 Written Rehabilitation Program (IWRP) 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 IWRP.
- (b) A statement indicating that choices were provided to the consumer will be included on every IWRP. This statement will be developed by the consumer, the parent or guardian, and the rehabilitation counselor, prior to the signature on the IWRP.

(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 IWRP shall be reviewed with the client at a meeting on an annual basis. Revision of the ISP or IWRP 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 IWRP shall be written.

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

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.

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) 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
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	100.00
Low vision exam for clients whose most recent eye report is over one year old	125.00
Up to three low vision exam follow-up visits which occur within four months of the date of the initial low vision exam, each	25.00
Low vision exam follow-up visit to fit fresnel prisms	22.00
Motility examination	60.00
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	60.00
Pleoptic evaluation	40.00
Pleoptic therapy, each session	20.00
Retinal examination	60.00
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
* Individual evaluation by the Commission.	
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
Embedded in Cornea	60.00
Keratotomy	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	Microscopic pathological evaluation of cataract after extraction	5.00
Cost of intraocular lens	370.00	15. Laboratory tests:	
Secondary lens implant	615.00	Bun, Urea	7.00
Discission of lens, surgical	300.00	CBC (complete blood count)	7.00
YAG laser posterior capsulotomy	300.00	Creatinine	7.00
Removal of intraocular lens	630.00	Blood sugar	7.00
8. Eyeball:		Hemoglobin	6.00
Excision:		Serology	7.00
Enucleation or evisceration	330.00	Urine	6.00
With non movable implant	330.00	SMA 12	60.00
With movable implant	375.00	Prothrombin (bleeding time)	6.00
Suture for wound or injury:		PTT (partial thromboplastin time)	7.00
Non-perforating	630.00	Pre-operative pre-admission testing, including chest x-ray, EKG, SMA 12 and urinalysis	130.00
Perforating	630.00	16. Price list for eyeglasses:	
9. Retina and vitreous:		Eyeglasses complete with frames prescribed as a result of a general vision examination, no dispensing fee:	
Scleral buckling	1,500.00	Single vision—distance or reading, spherical, hyperopia (+) or myopia (-)	60.00
Repair retinal detachment without buckle	1,124.00	Single vision—distance or reading, spherocylindrical, astigmatism in addition to hyperopia or myopia	70.00
Sealing of retinal tear by argon laser coagulation	630.00	Spherical bifocals, corrects both distance and reading	80.00
Focal/Argon or krypton photo-coagulation for Rx of diabetic retinopathy unilateral:		If bifocal "add" greater than + 3.00	95.00
Unilateral, initial treatment	290.00	Spherocylindrical bifocals (same as spherical bifocals, except also corrects for astigmatism)	85.00
Up to three additional treatments (each)	190.00	If bifocal "add" greater than + 3.00	100.00
Pan retinal photo-coagulation for vein occlusion, initial treatment	290.00	Single vision spherical cataract glass	100.00
One additional treatment	190.00	Single vision spherocylindrical cataract glass	140.00
Pan retinal photo-coagulation for diabetic retinopathy initial treatment	290.00	Bifocal—spherical cataract glass	140.00
Up to two additional treatments (each)	190.00	Bifocal—spherocylindrical cataract glass	150.00
Vitreotomy pars plana approach with or without lensectomy	1,035.00	Welsh 4 Drop or OSI cataract glass	180.00
Cryoblation of retina (blind eye)	240.00	Corning CPF UV lens	205.00
Gas fluid exchange	250.00	(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)	
Endophotocoagulation	250.00	17. Eyeglasses prescribed as a result of a low vision evaluation:	
10. Orbit:		For the first or only pair made, the Commission will pay invoice costs for lenses and frames including a \$25.00 dispensing fee. A copy of the actual invoice shall be submitted for lenses and frames.	
Plastic repair of orbit:		For each additional pair provided at the same time as the initial pair, the Commission will pay invoice costs and a \$12.50 dispensing fee. A copy of the actual invoice shall be submitted for lenses and frames.	
Fracture of floor	655.00	18. Eyeglass mounted bioptics or clip-on low vision aids or custom made eyeglasses:	
Orbitotomy	375.00	The Commission will pay invoice costs for lenses and frames and a \$50.00 dispensing fee. A copy of the actual invoice shall be submitted for lenses and frames.	
Removal of intra-orbital foreign body	425.00	19. Hard contact lenses:	
Orbitotomy (kroenlein) as in exophthalmos	750.00	Single lens	135.00
11. Ocular Muscles:		Two lens	225.00
Strabismus Surgery:		Replacement lens	45.00
One muscle	425.00	Hard pin hold contact lens (Aniridia)	335.00
Two muscles, one or both eyes	470.00		up to 390.00
Three or more muscles, one or both eyes	525.00	20. Soft contact lenses (shall be initially approved by Administrative Medical Consultant):	
12. Lacrimal procedures:		Single lens	180.00
Dacryocystorhinostomy	1,000.00	Two lens	270.00
Dacryocystectomy	375.00	Replacement lens (each)	67.00
Incision and drainage of lacrimal sac or lacrimal gland abscess	80.00	Perma lens	200.00
Plastic repair of torn canaliculi	415.00	Perma lens (pair)	225.00
Probing of naso-lacrimal duct	30.00	Replacement perma lens (each)	73.00
Subsequent (Max 4)	20.00	21. Gas permeable lenses (shall be initially approved by Administrative Medical Consultant):	
Probing of duct with tube insertion	150.00	Gas permeable lens (each)	200.00
13. X-ray:			
Skull—less than four views with or without stereo	25.00		
Skull—complete, four views	45.00		
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		

	Gas permeable lens (pair)	300.00
	Replacement gas permeable lens (each)	85.00
22.	Therapeutic lenses (shall be initially approved by Administrative Medical Consultant):	
	Soft contact bandage lens	200.00
	Collagen shield	75.00
23.	Ocular prosthesis:	
	Custom fitted, hand painted, plastic ocular prosthesis	335.00
	Custom fitted, hand painted, plastic scleral shell type ocular prosthesis	390.00
	Orbital impression	150.00
	Custom fitted temporary ocular prosthesis	55.00
	Narcissus lens	390.00
24.	Non-spectacle low vision aids:	
	The Commission will pay the price as listed in one of the following catalogs:	
	1. Coburn Optical Company;	
	2. Lighthouse;	
	3. American Optical Company; or	
	4. Designs for Vision	
	If an aid or device appears in a catalog distinct from those listed above, the Commission's payment shall be set by its low vision consultant.	
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	235.00
	Dark adapt gross rod	130.00
	Dark adapt rod and cone platau	160.00
	Electrooculography	100.00
	Electro retinography	100.00
	Endothelial cell count	100.00
	Fluorescein angiogram with interpretation and written report	232.00
	Fresnell prism monocular	20.00
	Fresnell prism binocular	30.00
	Fresnell prism adaption	15.00
	Gonioscopy	15.00

Goldman lens vitreous exam	15.00
Hess screen exam	60.00
Pachymetry	100.00
Perimetry (visual field)	25.00
Perimetry (threshold)	75.00
Perimetry (octopus)	100.00
Saccadic velocity evaluation	105.00
Services provided by an ambulatory surgical center	700.00
Surgery set up (minor surgery)	60.00
Tonography	35.00
Ultrasonography A (axial length measure monocular)	105.00
Ultrasonography A (axial length measure binocular)	180.00
Ultrasonography B (scan for vitreal and retinal pathology)	100.00
Use of laser and room (only in hospital or center)	200.00
Visual evoked response evaluation	115.00
Water bath ultrasound—monocular	170.00

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.