### 20. PHYSICAL AND MENTAL HEALTH 21. HEALTH SERVICES

# 4215. OFFICE OF VITAL STATISTICS AND REGISTRATION 01. VITAL STATISTICS

NICES A	IDD 4 (3)	D' 4044 6 '	(4) 1 ( 1 11	`
NJCFS Account No.	IPB Account No.	Direct State Services	(thousands of dollar	s)
44 400 046 4045 000	1017 100 010000 10	Personal Services:		
14-100-046-4215-002	4215-100-010000-12	Salaries and Wages	( 1,198)	
14-100-046-4215-003	4215-100-010000-2	Materials and Supplies		
14-100-046-4215-004	4215-100-010000-3	Services Other Than Personal	( 91)	
		Total Appropriation, Office of Vital Statistics and Registration		1,323
		4220. DIVISION OF FAMILY HEALTH SERVICES		
		02. FAMILY HEALTH SERVICES		
NJCFS Account No.	IPB Account No.	<u>Direct State Services</u>	(thousands of dollar	rs)
		Personal Services:		
14-100-046-4220-002	4220-100-020000-12	Salaries and Wages	( 530)	
14-100-046-4220-003	4220-100-020000-2	Materials and Supplies	(83)	
14-100-046-4220-004	4220-100-020000-3	Services Other Than Personal	( 69)	
14-100-046-4220-005	4220-100-020000-4	Maintenance and Fixed Charges	( 9)	
		Special Purpose:	,	
14-100-046-4220-219	4220-100-020010-5	WIC Farmers Market Program	( 87)	
14-100-046-4220-408	4220-100-020120-5	Breast Cancer Public Awareness Campaign	( 90)	
14-100-046-4220-310	4220-100-020530-5	Identification System for Children's Health and Disabilities	( 300)	
14-100-046-4220-485	4220-100-021090-5	Governor's Council for Medical Research and Treatment of Autism .	` /	
14-100-046-4220-286			( 500)	
	4220-100-021120-5	Public Awareness Campaign for Black Infant Mortality	,	
14-100-046-4220-329	4220-100-021340-5	Cancer Screening - Early Detection and Education Program	( 3,500)	
		Subtotal Appropriation, Direct State Services	·····	5,668
NJCFS Account No.	IPB Account No.	Grants-in-Aid	(thousands of dollar	·s)
14-100-046-4220-501	4220-140-020080-61	Maternal, Child and Chronic Health Services	( 26,756)	)
14-491-046-4220-011	4220-493-020150-61	Statewide Birth Defects Registry (CRFG)	( 529)	
14-100-046-4220-091	4220-140-020960-61	Poison Control Center	( 587)	
14-100-046-4220-460	4220-140-021040-61	Early Childhood Intervention Program	( 85,973)	
14-100-046-4220-496	4220-140-021690-61	Surveillance, Epidemiology, and End Results Expansion Program -	( 65,575)	
14-100-040-4220-490	4220-140-021090-01	CINJ	( 2,000)	
		Subtotal Appropriation, Grants-in-Aid		115,845
		Total Appropriation, Division of Family Health Services		121,513
		(From General Fund)		120,984 529
		(From Cusino Revenue Funa)	<del>-</del>	329
0 0	te Services - General Fur			00000
14-100-046-4220-483	4220-472-021090	Notwithstanding the provisions of any law or regulation to the contrary, the the Autism Medical Research and Treatment Fund for the operations of New		
14-100-046-4220-483	4220-472-021090	Notwithstanding the provisions of any law or regulation to the contrary, the the Autism Medical Research and Treatment Fund for the operations of the Research and Treatment of Autism.		
14-100-046-4220-483	4220-472-021090	Receipts deposited into the Autism Medical Research and Treatment Fund ar Council for Medical Research and Treatment of Autism, subject to the approof Budget and Accounting.		
14-100-046-4220-457 14-100-046-4220-483 14-100-046-4230-273	4220-472-024730 4220-472-021090 4220-750-020000 4230-468-034680	Notwithstanding the provisions of subsection c. of section 6 of P.L.1983, c section 5 of P.L.2003, c.200 (C.52:9EE-5), subsection c. of section 5 of F. section 4 of P.L.1999, c.105 (C.30:6D-59) or any other law or regulation therein above appropriated to the New Jersey State Commission on Cana Commission on Brain Injury Research, New Jersey Commission on Spinal C Council for Medical Research and Treatment of Autism are subject to the folleach appropriation, subject to the approval of the Director of the Division of used to pay the salary and other benefits of one person who shall serve as Execution with the services of such person allocated to the four entities as shall be determined.	P.L.1999, c.201 (C.52 on to the contrary, the Research, New Jord Research, and the owing condition: an at Budget and Account rutive Director for all f	he amounts ersey State Governor's mount from ing, may be our entities,
		1	, <del></del>	•

### 20. PHYSICAL AND MENTAL HEALTH 21. HEALTH SERVICES

### Language -- Direct State Services - General Fund

14-100-046-4220-483 4220-472-021090 Notwithstanding the provisions of any law or regulation to the contrary, there is appropriated \$250,000 from the Autism Medical Research and Treatment Fund for the Autism New Jersey Helpline.

Language Grants-In-Aid - General Fund				
14-100-046-4220-460	4220-140-021040-61	Receipts from the federal Medicaid (Title XIX) program for handicapped infants are appropriated, subject to the approval of the Director of the Division of Budget and Accounting.		
	4220-760-020000-61	There is appropriated \$570,000 from the Alcohol Education, Rehabilitation and Enforcement Fund to fund the Fetal Alcohol Syndrome Program.		
14-100-046-4220-501	4220-140-020080-61	Of the amount hereinabove appropriated for Maternal, Child and Chronic Health Services, an amount may be transferred to Direct State Services in the Department of Health to cover administrative costs of the program, subject to the approval of the Director of the Division of Budget and Accounting.		
14-100-046-4220-460	4220-140-021040-61	Notwithstanding the provisions of any law or regulation to the contrary, the amount hereinabove appropriated for the Early Childhood Intervention Program shall be conditioned on the Early Childhood Intervention Program's family cost sharing program involving a progressive charge for each hour of direct services provided to the child and/or the child's family in accordance with the child's Individualized Family Service Plan, based upon household size and gross income as set forth in the July 2012 or the next most recent published edition of the New Jersey Early Intervention System Family Cost Participation Handbook.		
14-100-046-4220-496	4220-140-021690-61	Of the amount hereinabove appropriated for the Surveillance, Epidemiology and End Results Expansion Program-CINJ account, an amount may be transferred to Direct State Services in the Department of Health to cover administrative costs of the program, subject to the approval of the Director of the Division of Budget and Accounting.		
14-100-046-4220-460	4220-140-021040-61	In addition to the amount hereinabove appropriated for the Early Childhood Intervention Program, such additional sums as may be necessary are appropriated for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.		
14-100-046-4220-208	4220-417-024620	Upon a determination by the Commissioner of Health, made in consultation with the State Treasurer, that additional State funding is necessary to reimburse centers for services to uninsured clients, the Director of the Division of Budget and Accounting shall authorize the appropriation of such sums as the commissioner determines are necessary for grants to federally qualified health centers.		
14-100-046-4220-460	4220-140-021040-61	Notwithstanding the provisions of any law or regulation to the contrary, the amount hereinabove appropriated for the Early Childhood Intervention Program shall be conditioned on adherence to the requirements of the "Individuals with Disabilities Education Improvement Act of 2004," Pub.L. 108-446 (20 U.S.C. s.1400 et seq.), and part 303 of Title 34, Code of Federal Regulations, as set forth in the State Plan filed by the Early Childhood Intervention Program with the U.S. Department of Education, Office of Special Education		

# 4230. DIVISION OF EPIDEMIOLOGY, ENVIRONMENTAL AND OCCUPATIONAL HEALTH 03. PUBLIC HEALTH PROTECTION SERVICES

Programs.

NJCFS Account No.	IPB Account No.	Direct State Services	(thousands of dollars)
		Personal Services:	
14-100-046-4230-002	4230-100-030000-12	Salaries and Wages	( 5,607)
14-100-046-4230-003	4230-100-030000-2	Materials and Supplies	( 1,404)
14-100-046-4230-004	4230-100-030000-3	Services Other Than Personal	( 392)
14-100-046-4230-005	4230-100-030000-4	Maintenance and Fixed Charges	( 69)
		Special Purpose:	
14-100-046-4230-282	4230-100-030250-5	Cancer Registry	( 400)
14-100-046-4230-374	4230-100-030260-5	Cancer Investigation and Education	( 500)
14-100-046-4230-376	4230-100-030420-5	Emergency Medical Services for Children	( 50)
14-100-046-4230-404	4230-100-031660-5	Animal Welfare	( 150)
14-100-046-4230-078	4230-101-034500-5	Worker and Community Right to Know	( 1,678)
14-100-046-4230-499	4230-100-034860-5	New Jersey Compassionate Use Medical Marijuana Act	( 1,607)
		Subtotal Appropriation, Direct State Services	11,857

## 20. PHYSICAL AND MENTAL HEALTH 21. HEALTH SERVICES

# 4230. DIVISION OF EPIDEMIOLOGY, ENVIRONMENTAL AND OCCUPATIONAL HEALTH 03. PUBLIC HEALTH PROTECTION SERVICES

NICFS Account No. 14-100-046-4230-434 14-100-046-4230-369 14-100-046-4230-392 14-100-046-4230-105	IPB Account No. 4230-140-030280-61 4230-140-031620-61 4230-140-031630-61 4230-141-034500-61	Grants-in-Aid(thousands of dollars)Implementation of Comprehensive Cancer Control Program( 1,200 )Cancer Institute of New Jersey( 28,000 )South Jersey Cancer Program - Camden( 23,783 )Worker and Community Right to Know( 281 )
		Subtotal Appropriation, Grants-in-Aid
		Total Appropriation, Division of Epidemiology, Environmental and Occupational Health 65,121
Language Direct Sta	te Services - General Fun	nd
14-100-046-4230-382	4220-783-027830-5 4230-416-034160	The unexpended balance at the end of the preceding fiscal year in the New Jersey Emergency Medical Service Helicopter Response Program account is appropriated.
14-100-046-4230-376	4230-100-030420-5	In addition to the amounts hereinabove appropriated, notwithstanding the provisions of any law or regulation to the contrary, there is appropriated \$150,000 from the "Emergency Medical Technician Training Fund" to fund the Emergency Medical Services for Children Program.
14-100-046-4230-385 14-100-046-4230-386	4230-461-030050-5 4230-461-030510-5	Notwithstanding the provisions of any law or regulation to the contrary, there is appropriated from the "Emergency Medical Technician Training Fund" \$79,000 for Emergency Medical Services and \$125,000 for the First Response EMT Cardiac Training Program.
14-100-046-4230-202	4230-443-034490	Notwithstanding the provisions of any law or regulation to the contrary, there are appropriated from the Pilot Clinic Fund such amounts as are necessary to pay the reasonable and necessary expenses of the Animal Population Control Fund, subject to the approval of the Director of the Division of Budget and Accounting.
14-100-046-4230-028	4230-100-030900-5	Amounts deposited into the "New Jersey Breast Cancer Research Fund" from the gross income tax check-offs pursuant to the provisions of P.L.1995, c.26 (C.54A:9-25.7 et al.) are appropriated to the New Jersey State Commission on Cancer Research for breast cancer research projects, subject to the approval of the Director of the Division of Budget and Accounting.
14-100-046-4230-078 14-100-046-4230-105	4230-101-034500-5 4230-141-034500-61	Notwithstanding the provisions of the "Worker and Community Right to Know Act," P.L.1983, c.315 (C.34:5A-1 et seq.), the amount hereinabove appropriated for the Worker and Community Right to Know account is payable from the "Worker and Community Right to Know Fund."
	4230-444-030190-5	Receipts from the agency surcharge on vehicle rentals pursuant to section 54 of P.L.2002, c.34 (C.App.A:9-78), not to exceed \$4,722,000, are appropriated for the Medical Emergency Disaster Preparedness for Bioterrorism program and shall be deposited into a dedicated account, the expenditure of which shall be subject to the approval of the Director of the Division of Budget and Accounting.
		Notwithstanding the provisions of any law or regulation to the contrary, \$1,000,000 from the Cancer Research Fund established pursuant to section 5 of P.L.1982, c.40 (C.54:40A-37.1) is transferred to the General Fund.
14-100-046-4230-387	4230-461-034170	In the event that amounts available in the "Emergency Medical Technician Training Fund" are insufficient to support increased reimbursement levels, from \$550 to \$750, for initial EMT Training, while at the same time continuing to ensure funding for continuing EMT education at current levels, there are appropriated such amounts as the Director of the Division of Budget and Accounting shall determine to be necessary to maintain these increased levels for initial and continuing EMT training and education.
Language Grants-In	-Aid - General Fund	
14-100-046-4230-369	4230-140-031620-61	From the amount hereinabove appropriated for the Cancer Institute of New Jersey, \$250,000 is appropriated to the Ovarian Cancer Research Fund.
14-100-046-4230-382	4230-416-034160-61	There are appropriated from the New Jersey Emergency Medical Service Helicopter Response Program Fund, established pursuant to section 2 of P.L.1992, c.87 (C.26:2K-36.1), such sums as are necessary to pay the reasonable and necessary expenses of the operation of the New Jersey Emergency Medical Service Helicopter Response Program, established pursuant to P.L.1986, c.106 (C.26:2K-35 et seq.), subject to the approval of the Director of the Division of Budget and Accounting.
		No funds hereinabove appropriated to the Department of Health shall be used for the Medical Waste Management Program. The Department of Health and the Department of Environmental Protection shall establish a transition plan to ensure provisions of the "Comprehensive Regulated Medical Waste Management Act," P.L.1989, c.34 (C.13:1E-48.1 et al.) are met.
14-100-046-4230-369	4230-140-031620-61	Notwithstanding the provisions of any law or regulation to the contrary, the amount hereinabove appropriated for the Cancer Institute of New Jersey (CINJ) shall be conditioned upon the following provision: no funds shall be expended except to support CINJ's infrastructure necessary to support cancer research, prevention, and treatment.

## 20. PHYSICAL AND MENTAL HEALTH 21. HEALTH SERVICES

### Language -- Grants-In-Aid - General Fund

14-100-046-4230-392 4230-140-031630-61

The unexpended balance at the end of the preceding fiscal year in the South Jersey Cancer Program - Camden account are appropriated to the program for cancer-related capital equipment, design, engineering, and construction expenses.

#### Language -- State Aid - General Fund

Notwithstanding the provisions of any law or regulation to the contrary, none of the monies appropriated to the Department of Health are appropriated to public health priority programs under P.L.1966, c.36 (C.26:2F-1 et seq.) as amended.

### 4245. DIVISION OF AIDS PREVENTION AND CONTROL 12. AIDS SERVICES

		12. AIDS SERVICES	
NJCFS Account No.	IPB Account No.	<u>Direct State Services</u>	(thousands of dollars)
14-100-046-4245-001 14-100-046-4245-002 14-100-046-4245-003 14-100-046-4245-004	4245-100-120000-12 4245-100-120000-2 4245-100-120000-3 4245-100-120000-4	Personal Services: Salaries and Wages Materials and Supplies Services Other Than Personal Maintenance and Fixed Charges	( 98)
		Subtotal Appropriation, Direct State Services	1,338
<u>NICFS Account No.</u> 14-100-046-4245-056	<u>IPB Account No.</u> 4245-140-120800-61	Grants-in-Aid AIDS Grants	(thousands of dollars) ( 21,651)
		Subtotal Appropriation, Grants-in-Aid	21,651
		Total Appropriation, Division of AIDS Prevention and Control	22,989
Language Grants-In 14-100-046-4245-159		Notwithstanding the provisions of any law or regulation to the contrary, in ore coverage under the Medicare Part D program established pursuant to the fede Improvement, and Modernization Act of 2003," the amounts hereinabove Distribution Program (ADDP) shall not be spent unless the ADDP is representative for the purposes of coordinating benefits with the Medie enrollment and appeals of coverage determinations. ADDP is authorized to in the pursuit of such coverage. ADDP representation shall not result in an behalf of such program beneficiaries and shall include, but need not be I application for the premium and cost-sharing subsidies on behalf of eligible appeals, grievances, or coverage determinations; and facilitated enrollment Medicare Advantage Prescription Drug plan. If any beneficiary declines en plan, that beneficiary shall be barred from all benefits of the ADDP Program	eral "Medicare Prescription Drug, appropriated for the AIDS Drug is designated as the authorized care Part D program, including o represent program beneficiaries ya additional financial liability on imited to, the following actions: program beneficiaries; pursuit of nt in a prescription drug plan or prollment in any Medicare Part D
14-100-046-4245-159	4245-140-120860-61	Notwithstanding the provisions of any law or regulation to the contrary, the ato the AIDS Drug Distribution Program (ADDP) is conditioned upon the Duthe benefits of ADDP with the prescription drug benefits of the Medicare Part to the federal "Medicare Prescription Drug, Improvement, and Moderniza payer. The ADDP benefit and reimbursement shall only be available to coin-network pharmacies and for deductible and coverage gap costs, as determined the temperature of the ADDP benefit premium costs for ADDP beneficiaries.	epartment of Health coordinating rt D program established pursuant tion Act of 2003" as the primary over the beneficiary cost share to ermined by the Commissioner of
14-100-046-4245-159	4245-140-120860-61	Notwithstanding the provisions of any law or regulation to the contrary, no Drug Distribution Program (ADDP) account shall be available as paym pharmacy that is not enrolled as a participating pharmacy in a pharmacy ne program established pursuant to the federal "Medicare Prescription Drug, I Act of 2003."	ent as an ADDP benefit to any twork under the Medicare Part D
14-100-046-4245-159	4245-140-120860-61	Commencing with the start of the fiscal year, and consistent with the require Prescription Drug, Improvement, and Modernization Act of 2003" (MMA), not the AIDS Drug Distribution Program (ADDP) account shall be expended the ADDP program unless the individual provides all data necessary to enrope the ADDP program established pursuant to the MMA, including data require outlined by the Centers for Medicare and Medicaid Services.	o funds hereinabove appropriated ded for any individual enrolled in oll the individual in the Medicare

# 20. PHYSICAL AND MENTAL HEALTH 21. HEALTH SERVICES

Language Grants-In	-Aid - General Fund	
14-100-046-4245-001 14-100-046-4245-002 14-100-046-4245-003 14-100-046-4245-034 14-100-046-4245-132 14-100-046-4245-158 14-100-046-4245-159	4245-100-120000-12 4245-100-120000-2 4245-100-120000-3 4245-100-120000-4 4245-140-120300-61 4245-140-120800-61 4245-140-120850-61 4245-140-120860-61	In order to permit flexibility in the handling of appropriations, amounts may be transferred to and from the various items of appropriation within the AIDS Services program classification in the Department of Health, subject to the approval of the Director of the Division of Budget and Accounting. Notice thereof shall be provided to the Legislative Budget and Finance Officer on the effective date of the approved transfer.
14-100-046-4245-056	4245-140-120800-61	Of the amount hereinabove appropriated for AIDS Grants, savings realized from reduced transportation costs may be transferred to the AIDS Drug Distribution Program account, subject to the approval of the Director of the Division of Budget and Accounting.
14-100-046-4245-159	4245-140-120860-61	Notwithstanding the provisions of any law or regulation to the contrary, no amounts hereinabove appropriated for the AIDS Drug Distribution Program shall be expended for drugs used for the treatment of erectile dysfunction, or cosmetic drugs, including but not limited to drugs used for baldness and weight loss.

#### 4280. DIVISION OF PUBLIC HEALTH AND ENVIRONMENTAL LABORATORIES 08. LABORATORY SERVICES

NJCFS Account No.	IPB Account No.	Direct State Services	(thousands of dollars)
		Personal Services:	
14-100-046-4280-002	4280-100-080000-12	Salaries and Wages	( 6,951)
14-100-046-4280-003	4280-100-080000-2	Materials and Supplies	( 630)
14-100-046-4280-004	4280-100-080000-3	Services Other Than Personal	( 3,926)
14-100-046-4280-005	4280-100-080000-4	Maintenance and Fixed Charges	( 1,240)
		Special Purpose:	
14-100-046-4280-066	4280-100-080390-5	West Nile Virus - Laboratory	( 640)
14-100-046-4280-006	4280-100-080000-7	Additions, Improvements and Equipment	( 1,826)
		Total Appropriation, Division of Public Health and Environmental Labora	tories

Language Direct Stat	te Services - General Fur	nd	
14-100-046-4280-002 14-100-046-4280-003 14-100-046-4280-004 14-100-046-4280-005 14-100-046-4280-070 14-100-046-4280-006	4280-100-080000	The Director of the Division of Budget and Accounting is empowered to transfer or credit approached the Department of Health for diagnostic laboratory services provided to any other agency or provided that funds have been appropriated or allocated to such agency or department for the purchasing these services.	department,
14-100-046-4280-002 14-100-046-4280-003 14-100-046-4280-004 14-100-046-4280-005 14-100-046-4280-070 14-100-046-4280-006	4280-100-080000	Receipts from fees established by the Commissioner of Health for licensing of clinical laborator to P.L.1975, c.166 (C.45:9-42.26 et seq.), and blood banks, pursuant to P.L.1963, c.33 (C.26:24 are appropriated.	
		Total Appropriation, Health Services	226,159 225,630 529

#### Language -- Direct State Services - General Fund

Receipts from licenses, permits, fines, penalties, and fees collected by the Department of Health in Health Services, in excess of those anticipated, are appropriated, subject to the approval of the Director of the Division of Budget and Accounting.

## 4260. DIVISION OF LONG TERM CARE SYSTEMS DEVELOPMENT & QUALITY ASSURANCE 06. LONG TERM CARE SYSTEMS

00. LONG TERM CARE SISTEMS			
NJCFS Account No.	IPB Account No.	<u>Direct State Services</u>	(thousands of dollars)
		Personal Services:	
14-100-046-4260-002	4260-100-060000-12	Salaries and Wages	( 2,735)
14-100-046-4260-003	4260-100-060000-2	Materials and Supplies	( 58)
14-100-046-4260-004	4260-100-060000-3	Services Other Than Personal	( 299)
14-100-046-4260-005	4260-100-060000-4	Maintenance and Fixed Charges	( 90)
		Special Purpose:	
14-100-046-4260-080	4260-100-060010-5	Nursing Home Background Checks/Nursing Aide Certification Program	( 979)
14-100-046-4260-099	4260-100-060090-5	Implement Patient Safety Act	( 400)
14-100-046-4260-064	4260-100-061000-7	Additions, Improvements and Equipment	( 37)
		Total Appropriation, Division of Long Term Care Systems Development &	Quality Assurance 4,598

#### Language -- Direct State Services - General Fund

Eungange Enter State Strikes Stri	A WI A MILE
14-100-046-4260-046 14-100-046-4260-104 4260-140-0645	Tr -r
<i>14-100-046-4260-045</i> 4260-446-0644	Receipts from fees charged for processing Certificate of Need applications and the unexpended balances at the

Receipts from fees charged for processing Certificate of Need applications and the unexpended balances at the end of the preceding fiscal year of such receipts are appropriated for the cost of this program, subject to the approval of the Director of the Division of Budget and Accounting.

## 4270. DIVISION OF HEALTH CARE SYSTEMS ANALYSIS 07. HEALTH CARE SYSTEMS ANALYSIS

NJCFS Account No.	IPB Account No.	Direct State Services	(thousands of dollars)	
		Personal Services:		
14-100-046-4270-001	4270-100-070000-12	Salaries and Wages	( 1,213)	
14-100-046-4270-002	4270-100-070000-2	Materials and Supplies	( 15)	
14-100-046-4270-003	4270-100-070000-3	Services Other Than Personal	( 142)	
14-100-046-4270-004	4270-100-070000-4	Maintenance and Fixed Charges	( 86)	
		Subtotal Appropriation, Direct State Services	<u> </u>	1,456
NJCFS Account No.	IPB Account No.	Grants-in-Aid	(thousands of dollars)	
MICE D'ACCOUNT 110.	H D Account No.	Giants in 7 tid	(illousalius of dollars)	
14-100-046-4270-077	4270-140-070020-61	Health Care Subsidy Fund Payments	'	
			( 20,404)	
14-100-046-4270-077	4270-140-070020-61	Health Care Subsidy Fund Payments	( 20,404) ( 1,541)	
14-100-046-4270-077 14-100-046-4270-147	4270-140-070020-61 4270-140-070210-61	Health Care Subsidy Fund Payments  Hospital Asset Transformation Program	( 20,404) ( 1,541) ( 62,645)	
14-100-046-4270-077 14-100-046-4270-147 14-100-046-4270-148	4270-140-070020-61 4270-140-070210-61 4270-140-073030-61	Health Care Subsidy Fund Payments  Hospital Asset Transformation Program  Hospital Delivery System Reform Incentive Payments - DSRIP	( 20,404) ( 1,541) ( 62,645) ( 50,000)	134,590
14-100-046-4270-077 14-100-046-4270-147 14-100-046-4270-148	4270-140-070020-61 4270-140-070210-61 4270-140-073030-61	Health Care Subsidy Fund Payments  Hospital Asset Transformation Program  Hospital Delivery System Reform Incentive Payments - DSRIP  Graduate Medical Education	( 20,404 ) ( 1,541 ) ( 62,645 ) ( 50,000 )	

#### Language -- Grants-In-Aid - General Fund

14-100-046-4270-077	4270-140-070020-61	Notwithstanding the provisions of any law or regulation to the contrary, all revenues collected from the tax on
		cosmetic medical procedures pursuant to P.L.2004, c.53 (C.54:32E-1) shall be deposited into the Health Care
		Subsidy Fund established pursuant to section 8 of P.L.1992, c.160 (C.26:2H-18.58) for the support of
		payments to federally qualified health centers.

Notwithstanding the provisions of any law or regulation to the contrary, as a condition of the receipt of any monies hereunder by an acute care hospital that is requesting an advance of charity care/Medicaid or payments from the "Health Care Facilities Improvement Fund" or any payments over and above this act, the hospital shall comply with a request by the Commissioner of Health for a review of its finances and operations to ensure that access to health care is maintained and public funds are utilized for their intended purposes. The cost of such review shall be borne by the acute care hospital and shall comply with any financial and operational performance requirements imposed by the commissioner as deemed necessary as a result of the review.

**Language -- Grants-In-Aid - General Fund**14-100-046-4270-077 4270-140-070020-61

Notwithstanding the provisions of section 3 of P.L.2004, c.113 (C.26:2H-18.59i) or any law or regulation to the contrary, the appropriation for Health Care Subsidy Fund Payments in State Fiscal Year (SFY) 2014 shall be calculated in the following manner: (a) source data used shall be from calendar years 2011 and 2010 for documented charity care claims data and hospital-specific gross revenue for charity care patients and shall include all adjustments and void claims related to calendar years (CY) 2011, 2010 and any prior year submitted claims, as submitted by each acute care hospital or determined by the Department of Health (DOH); (b) source data used for CY 2011 documented charity care for each hospital's total gross revenue for all patients shall be from the CY 2011 Acute Care Hospital Cost Report as defined by Form E4, Line 1, Column E data and shall be according to the DOH advance submission request dated February 13, 2012, as submitted by each acute care hospital by March 16, 2012, and source data used for Medicare Cost Report data shall be from CY 2010; (c) in the event that an eligible hospital failed to submit by March 16, 2012, its total gross revenue for all patients from the CY 2011 Acute Care Hospital Cost Report as defined by Form E4, Line 1, Column E data according to the DOH advance submission request dated February 13, 2012, source data from calendar year 2010 shall be used for hospital-specific gross revenue for charity care patients and for hospital total gross revenue for all patients as defined by Form E4, Line 1, Column E; (d) source data used for CY 2010 documented charity care for each hospital's total gross revenue for all patients shall be from the CY 2010 Acute Care Hospital Cost Report as defined by Form E4, Line 1, Column E data and shall be according to the DOH advance submission request dated February 10, 2011, as submitted by each acute care hospital by March 10, 2011, and source data used for Medicare Cost Report data shall be from calendar year 2009; (e) in the event that an eligible hospital failed to submit by March 10, 2011, its total gross revenue for all patients from the CY 2010 Acute Care Hospital Cost Report as defined by Form E4, Line 1, Column E data according to the DOH advance submission request dated February 10, 2011, source data from calendar year 2009 shall be used for hospital-specific gross revenue for charity care patients and for hospital total gross revenue for all patients as defined by Form E4, Line 1, Column E; (f) each eligible hospital's charity care subsidy allocation for SFY 2013 as announced by DOH in July 2012, for this calculation purpose only, shall be initially split into two pools, one that equals 80% of its SFY 2013 allocation and another that equals 20% of its SFY 2013 allocation; (g) for each eligible hospital the difference between its CY 2011 documented charity care and its CY 2010 documented charity care shall be calculated, then the percentage change in documented charity care for each eligible hospital shall be obtained by dividing this difference by its CY 2010 documented charity care; (h) for each eligible hospital the ratio of its CY 2011 documented charity care divided by the total CY 2011 documented charity care for all hospitals shall be calculated; (i) for each eligible hospital the percentage change in documented charity care as calculated in accordance with subsection g. above shall be multiplied by the CY 2011 documented charity care ratio calculated in subsection h. above; (j) for each eligible hospital the value calculated in accordance with subsection i. above shall be multiplied by the total of the 20% pool for all eligible hospitals as calculated in subsection f. above; (k) for each eligible hospital the value calculated in accordance with subsection j. above shall be added to its initial 20% pool value as calculated in subsection f. above; (1) for each eligible hospital the amount calculated in subsection f. above for its 80% pool and subsection k. above for its adjusted 20% pool shall be added together producing the SFY 2014 charity care subsidy allocation for each eligible hospital; (m) notwithstanding the provisions above, an eligible hospital shall not receive a lower SFY 2014 charity care subsidy allocation than its SFY 2013 charity care subsidy allocation if it had increased documented charity care as calculated in subsection g. above, and an eligible hospital shall not receive a greater SFY 2014 charity care subsidy allocation than its SFY 2013 charity care subsidy allocation if it had decreased documented charity care as calculated in subsection g. above; (n) if necessary, a proportionate increase or decrease shall be applied to the 20% pool value as calculated in subsection k. for each eligible hospital based on its percentage of total CY 2011 documented charity care such that the total calculated SFY 2014 charity care subsidy allocation for all hospitals shall equal \$675,000,000, except that the proration applied to the subsidy for any eligible hospital shall be modified as necessary to comply with subsection m. above; and (o) the resulting number will constitute each eligible hospital's SFY 2014 charity care subsidy allocation.

14-100-046-4270-077 4270-140-070020-61

Notwithstanding the provisions of any law or regulation to the contrary, any funds remaining as the result of a closure of a hospital eligible to receive Disproportionate Share Hospital (DSH) funds shall be redistributed at the discretion of the Commissioner of Health. Factors the commissioner will consider shall include, but not be limited to, maintenance of continued timely access to essential health services for persons eligible to participate in charity care, and continued operation in the same or adjoining municipality as the closed hospital of an acute care hospital, eligible to receive DSH funds, and serving substantially the same eligible population. Notice of such redistribution shall be provided to the Joint Budget Oversight Committee within five business days of each redistribution.

14-100-046-4270-077 4270-140-070020-61

The amounts hereinabove appropriated for Health Care Subsidy Fund Payments are conditioned upon the following provision: the Department of Health shall review, examine and/or audit any and all financial information maintained by an acute care hospital to ensure appropriate use of public funds.

14-100-046-4270-077 4270-140-070020-61

The amounts hereinabove appropriated for charity care or other funding to a health care facility is conditioned upon the following requirement: such health care facility shall participate in planning meetings supervised by the Department of Health for the planning of the provision of hospital, medical or health programs and services, and shall, to the extent permitted by State and federal law, share patient-level data as needed to facilitate such purposes.

Language -- Grants-In-Aid - General Fund

14-100-046-4270-077 4270-140-070020-61

14-100-046-4270-142 4270-140-073050-61

Notwithstanding the provisions of any law or regulation to the contrary, the amounts hereinabove appropriated from the Health Care Subsidy Fund for charity care payments are subject to the following condition: In a manner determined by the Commissioner of Health and subject to the approval of the Director of the Division of Budget and Accounting, eligible hospitals shall receive (1) their charity care subsidy payments beginning in July 2013, (2) their September 2013 payments in October 2013, and (3) their January 2014 payments in December 2013.

Notwithstanding the provisions of any law or regulation to the contrary, the amounts hereinabove appropriated for Graduate Medical Education (GME) are conditioned upon the following: except as otherwise provided and subject to such modifications as may be required by the Centers for Medicare and Medicaid Services in order to achieve any required federal approval, a hospital's GME distribution shall be calculated based on data from the hospital's 2011 Medicaid cost report and shall be comprised of two components calculated as described below. The first component shall be defined as an amount equal to 75% of each facility's aggregate State Fiscal Year (SFY) 2013 GME distribution. The sum of these first components for all hospitals shall be totaled and subtracted from the full appropriated GME subsidy amount of \$100,000,000 for SFY 2014, with the resulting amount representing the aggregate amount available for distribution as the second component. The aggregate amount of the second component shall be split into a Direct Medical Education (DME) allocation, which is calculated by multiplying the second component amount by the ratio of 2011 total Medicaid managed care DME costs-to-2011 total Medicaid managed care GME costs; and an Indirect Medical Education (IME) allocation, which is calculated by multiplying the second component amount by the ratio of 2011 total Medicaid managed care IME costs-to-2011 Medicaid managed care GME costs. Each hospital's percentage of total 2011 Medicaid managed care DME costs shall be multiplied by the DME allocation to calculate its DME payment. Each hospital's percentage of total 2011 Medicaid managed care IME costs shall be multiplied by the IME allocation to calculate its IME payment. The sum of a hospital's DME and IME payments equal its second component payment. The sum of the first and second components shall comprise the hospital's total SFY 2014 GME allocation, to be distributed in twelve monthly payments. The total amount of these payments shall not exceed \$100,000,000. In the event that a hospital reported less than twelve months of 2011 Medicaid costs, the number of reported months of data regarding days, costs, or payments shall be annualized. In the event that a hospital did not report its Medicaid managed care days on the cost report utilized in this calculation, the Department of Health (DOH) shall ascertain Medicaid Managed Care encounter days for Medicaid and NJ FamilyCare clients as reported by insurers to the State for the following reporting period: services dates between January 1, 2011 and December 31, 2011; payment dates between January 1, 2011 and December 31, 2012; and a run-date of January 17, 2013. Medicaid managed care DME cost is defined as the approved intern and residency program costs multiplied by the quotient of Medicaid managed care days divided by the quantity of total days less nursery days. Medicaid managed care IME cost is defined as the Medicare IME factor multiplied by Medicaid Managed Care encounter payments for Medicaid and NJ FamilyCare clients as reported by insurers to the State for the following reporting period: services dates between January 1, 2011 and December 31, 2011; payment dates between January 1, 2011 and December 31, 2012; and a run-date of January 17, 2013. The IME factor is calculated using the Medicare IME formula as follows:  $1.35 * [(1+x)^{0.405}]$ - 1], in which "x" is the quotient of submitted IME resident full-time equivalencies divided by the quantity of total available beds less nursery beds. In the event that a hospital believes that there are mathematical errors in the calculations, or data not matching the actual source documents used to calculate the subsidy as defined above, hospitals shall be permitted to file calculation appeals within 15 working days of receipt of the subsidy allocation letter. If upon review it is determined by the DOH that the error has occurred and would constitute at least a five percent change in the hospital's allocation amount, a revised industry-wide allocation shall be

*14-100-046-4270-147* 4270-140-070210-61

*14-100-046-4270-097* 4270-417-074690

14-100-046-4270-141 4270-140-073020-61

There are appropriated such additional sums as are required to pay all amounts due from the State pursuant to any contract entered into between the State Treasurer and the New Jersey Health Care Facilities Financing Authority pursuant to section 6 of P.L.2000, c.98 (C.26:2I-7.1) in connection with the Hospital Asset Transformation Program.

In addition to the amount hereinabove appropriated for Health Care Systems Analysis, an amount not to exceed \$1,000,000 is appropriated from amounts assessed and collected by the Department of Banking and Insurance pursuant to section 9 of P.L.2007, c.330 (C.17:1D-2), for the purpose of funding costs associated with the development and maintenance of the New Jersey Health Information Network, subject to a plan prepared by the Department of Health and approved by the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, the amounts hereinabove appropriated for the Hospital Delivery System Reform Incentive Payments Program are conditioned upon the following: a hospital's payment shall be calculated and distributed as set forth in the final approved version of New Jersey's Delivery System Reform Incentive Payments (DSRIP) funding and mechanics protocol filed on December 28, 2012 with the U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services, in connection with the New Jersey Comprehensive Medicaid 1115 Waiver, consistent with the Special Terms and Conditions of the approved Waiver, including but not limited to Section XIII, paragraphs 91 through 97 thereof. Until such time as such federal approval is obtained, monthly DSRIP payments to hospitals shall be calculated and distributed in the same manner as the Hospital Relief Subsidy Fund payments distributed in fiscal year 2013.

#### Language -- Grants-In-Aid - General Fund

14-100-046-4270-141 4270-140-073020-61

The amount hereinabove appropriated for the Hospital Delivery System Reform Incentive Payments (DSRIP) program is subject to the following condition: the Department of Human Services shall periodically file with the Presiding Officers of the Legislature a report that includes the status of each applicant hospital's plans for delivery system reform, including but not limited to whether or not a hospital has filed a DSRIP plan and whether approval of that plan has been granted or denied by the State and the federal Centers for Medicare and Medicaid Services (CMS). The department also shall provide copies of any reports or other determinations regarding DSRIP eligibility or plan performance, including but not limited to whether or not a hospital has satisfied any eligibility benchmarks required for receipt of DSRIP funding, which are made by the State or received from CMS.

Total Appropriation, Health Planning and Evaluation	 140,644

### 20. PHYSICAL AND MENTAL HEALTH 25. HEALTH ADMINISTRATION

### 4210. DIVISION OF MANAGEMENT AND ADMINISTRATION 99. ADMINISTRATION AND SUPPORT SERVICES

NICFS Account No.	IPB Account No.	Direct State Services (tho	ousands of dollars)
		Personal Services:	,
14-100-046-4210-008	4210-100-990000-12	Salaries and Wages (	2,312)
14-100-046-4210-009	4210-100-990000-2	Materials and Supplies	49)
14-100-046-4210-010	4210-100-990000-3	Services Other Than Personal ( Special Purpose:	226)
14-100-046-4210-100	4210-100-990010-5	Office of Minority and Multicultural Health (	1,500)
		Total Appropriation, Division of Management and Administration	4,087
Total Appropriation, Health Administration		4,087	
Total Appropriation, Department of Health			
Totals by Category: Direct State Services Grants-In-Aid			
		Totals by Fund: General Fund Casino Revenue Fund	370,361 529

#### DEPARTMENT OF HEALTH

#### Language -- Direct State Services - General Fund

Consistent with the provisions of P.L.2005, c.237, \$40,000,000 from the surcharge on each general hospital and each specialty heart hospital is appropriated to fund federally qualified health centers. Any unexpended balance at the end of the preceding fiscal year in the Health Care Subsidy Fund received through the hospital and other health care initiatives account during the preceding fiscal year is appropriated for payments to federally qualified health centers.

Receipts from licenses, permits, fines, penalties, and fees collected by the Department of Health, in excess of those anticipated, are appropriated, subject to a plan prepared by the department and approved by the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of section 7 of P.L.1992, c.160 (C.26:2H-18.57) or any law or regulation to the contrary, the first \$1,200,000 in per adjusted admission charge assessment revenues, attributable to \$10 per adjusted admission charge assessments made by the Department of Health, shall be anticipated as revenue in the General Fund available for health-related purposes. Furthermore, the remaining revenue attributable to this fee shall be available to carry out the provisions of section 7 of P.L.1992, c.160 (C.26:2H-18.57), as determined by the Commissioner of Health, and subject to the approval of the Director of the Division of Budget and Accounting.

#### Language -- Direct State Services - General Fund

Notwithstanding the provisions of any law or regulation to the contrary, the State Treasurer shall transfer to the Health Care Subsidy Fund, established pursuant to section 8 of P.L.1992, c.160 (C.26:2H-18.58), only those additional revenues generated from third party liability recoveries, excluding Medicaid, by the State arising from a review by the Director of the Division of Budget and Accounting of hospital payments reimbursed from the Health Care Subsidy Fund with service dates that are after the date of enactment of P.L.1996, c.29.

Any change in program eligibility criteria and increases in the types of services or rates paid for services to or on behalf of clients for all programs under the purview of the Department of Health, not mandated by federal law, first shall be approved by the Director of the Division of Budget and Accounting.

Notwithstanding the provisions of any law or regulation to the contrary, fees, fines, penalties and assessments owed to the Department of Health shall be offset against payments due and owing from other appropriated funds.

In addition to the amount hereinabove appropriated, receipts from the federal Medicaid (Title XIX) program for health services-related programs throughout the Department of Health are appropriated for the same purpose, subject to the approval of the Director of the Division of Budget and Accounting.