

Catastrophic Illness in Children Relief Fund

Administrative Code

N.J.A.C 10:155

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Statutory Authority

CHAPTER AUTHORITY:

N.J.S.A. 26:2-148 et seq., specifically 26:2-159.

History

CHAPTER SOURCE AND EFFECTIVE DATE:

R.2018 d.103, effective May 21, 2018.
See: 49 N.J.R. 317(a), 50 N.J.R. 1278(a).

§ 10:155-1.1 Purpose and scope

- (a)** The purpose of this subchapter is to implement the provisions of P.L. 1987, c. 370 and to:
- 1.** Establish criteria for eligibility;
 - 2.** Establish a standard methodology for determining the amount of financial assistance to be allocated for services of a child's health providers and vendors for families in the State of New Jersey whose child experiences uncovered medical expenses for services required to treat or manage a catastrophic illness; and
 - 3.** Specify the procedures that shall be followed by the Catastrophic Illness in Children Relief Fund Commission.

History

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

§ 10:155-1.2 Definitions

The following words and terms, as used in this subchapter, shall have the following meanings, unless the context clearly indicates otherwise.

"Act" means P.L. 1987, Chapter 370, codified at N.J.S.A. 26:2-148 et seq., which establishes the Catastrophic Illness in Children Relief Fund.

"Batch" means a grouping of applications for the purpose of applying the provisions of [N.J.A.C. 10:155-1.6](#), [1.7](#) and [1.8](#).

"Catastrophic Fund" or "Fund" means the Catastrophic Illness in Children Relief Fund.

"Catastrophic illness" means any illness or condition for which the incurred medical expenses are not covered by any other source, including, but not limited to, other State or Federal agency programs, insurance contracts, trusts, proceeds from fundraising, or settlements relative to the medical condition of a child that is equal to 10 percent of the first \$ 100,000 of annual income of a family plus 15 percent of the excess income over \$ 100,000.

"Chairperson" means the chief executive officer of the Commission who is elected by the Commission membership from the public members for a term of one year.

"Child" means a person 21 years of age and under.

"Commission" means the 12 member Catastrophic Illness in Children Relief Fund Commission created by the Act and appointed by the Governor to administer the Fund. The Commission, chaired by a public member, is in the Executive Branch of the State government. For purposes of complying with the provisions of Article V, section IV, paragraph 1 of the New Jersey Constitution, the Commission is allocated within the Department of Human Services, but notwithstanding that allocation, the Commission shall be independent of any supervision or control by the Department of Human Services or by any board or officer thereof.

"Days" means calendar days.

"Eligibility standard" means that dollar amount equal to 10 percent of the first \$ 100,000 of annual income of a family plus 15 percent of the excess income over \$ 100,000.

"Executive director" means the professional employed by the Commission, in accordance with New Jersey Civil Service Commission procedures, to administer the Fund on a day-to-day basis on behalf of the Commission.

"Family" means a child and the child's parent, parents, or legal guardian, as the case may be, who is legally responsible for the child's medical expenses.

"Family responsibility" means the amount equal to 10 percent of the eligibility standard.

"Health coverage premium" means a premium for contracts, excluding automobile insurance contracts, whereby an insurer is obligated to pay or allow a benefit for the child who is covered under the policy or contract, due to bodily injury, disablement, sickness or because of any expense relating thereto or because of expense incurred in the prevention of sickness to include limited scope plans, such as hospital, medical and prescription.

"Income" means the following:

1. Wages before deductions;
2. Public Assistance;
3. Social Security Benefits;
4. Supplemental Security Income;
5. Unemployment and Workers' Compensation;
6. Strike Benefits from Union Funds;
7. Veteran's Benefits;
8. Training Stipends;
9. Alimony;
10. Child Support;
11. Military Family Allotment;
12. Regular Support from Absent Family Member;
13. Pension Payments;
14. Insurance or Annuity Payments;
15. Income from Estates and Trusts;
16. Dividends;
17. Interest Income;
18. Rental Income;
19. Royalties; and
20. Other sources of income not mentioned above. However, income does not include the following money receipts: withdrawals from a bank; sale of property, house or car; tax refunds; gifts; one-time insurance payments; or compensation from injury, unless the injury directly relates to a child's condition, which is the basis for an application being made to the Fund. Also disregarded is non-cash income and any money raised by fundraising.

"Local agency" means the Special Child Health Services Office responsible for assisting families in the application process, forwarding applications to the State Office, and making appropriate referrals to other State programs and benefits.

"State Office of Catastrophic Illness in Children Relief Fund" or "State Office" means the Office of the Executive Director of the Fund, which has responsibility for administering the Fund on a day-to-day basis on behalf of the Commission.

History

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

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

Definition for deductible deleted; definitions of eligibility standard and family responsibility added.

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

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

Definition for county case manager deleted; local agency added; money raised by fundraising excluded from definition of income.

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

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

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

See: [27 N.J.R. 3554\(a\)](#), [27 N.J.R. 4890\(b\)](#).

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

See: [30 N.J.R. 2562\(a\)](#), [30 N.J.R. 3837\(a\)](#).

Inserted "Chairperson" and "Health insurance"; and in "Family responsibility", substituted a reference to the eligibility standard for reference to a family's income.

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

See: [31 N.J.R. 2164\(a\)](#), [31 N.J.R. 3090\(a\)](#).

In "Catastrophic Illness" and "Threshold", substituted references to 10 percent for references to 15 percent, and substituted references to 15 percent for references to 20 percent; and in "Eligibility standard", substituted "greater than 10 percent" for "equal to 15 percent" following "amount", and substituted a reference to 15 percent for a reference to 20 percent.

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

See: [36 N.J.R. 2974\(a\)](#), [36 N.J.R. 4314\(a\)](#).

In "Catastrophic illness" substituted "which allows funds to provide for the medically related needs of a child as defined in [N.J.A.C. 10:155-1.4](#)" for "funds"; in "Child" substituted a reference to 21 years of age and younger for a reference to under 19 years of age.

Amended by R.2008 d.278, effective September 15, 2008.

See: [40 N.J.R. 2399\(a\)](#), [40 N.J.R. 5239\(a\)](#).

Rewrote definition "Commission".

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

See: [41 N.J.R. 3360\(a\)](#), [42 N.J.R. 937\(a\)](#).

In definition "Act", inserted "codified at" and inserted a comma following "et seq."; rewrote definition "Catastrophic illness"; substituted definition "Health coverage premium" for "Health insurance";

rewrote definition "Health coverage premium"; in definition "Income", in paragraph 5, substituted "Workers" for "Workman's", recodified paragraph 21 as part of paragraph 20, and in paragraph 20, substituted a period for "; however," following "above" and substituted "However, income" for "Income"; and in definition "State Office of Catastrophic Illness in Children Relief Fund", inserted "or" and substituted " 'State Office' " for "(State Office)".

Amended by R.2018 d.103, effective May 21, 2018.

See: [49 N.J.R. 317\(a\)](#), 50 N.J.R. 1278(a).

Rewrote definition "Catastrophic illness"; in definition "Eligibility standard", substituted "equal to" for "greater than"; in definition "Executive director", substituted "New Jersey Civil Service Commission" for "NJ Department of Personnel's"; in definition "Local agency", substituted "Special Child Health Services Office" for "agency", and substituted the second occurrence of "State" for "state"; and, deleted definition "Threshold".

Case Notes

Court determined that the Fund correctly determined that the availability of the trust rendered the applicant ineligible for reimbursement due to the existence of the trust itself, as well as the settlement which compensated the son for his injuries and contemplated the special needs that the son would experience throughout his lifetime, N.J.A.C. 10:155-1.2. *Lewis v. Catastrophic Illness in Children Relief Fund Comm'n*, 336 N.J. Super. 361, 764 A.2d 1035, 2001 N.J. Super. LEXIS 18 (2001).

§ 10:155-1.3 General requirements

(a) Pursuant to the Act, the Fund will provide assistance to families having a child with a catastrophic illness. A child shall have passed the initial screen for eligibility for the Fund's assistance when a child's incurred and verified medical expenses, as specified in this chapter for a prior consecutive 12-month period, exceed the amount equal to 10 percent of the first \$ 100,000 of verified annual income of a family plus 15 percent of the excess income over \$ 100,000.

1. Ten percent shall be the screen used for families whose income is \$ 100,000 or less.
2. Ten percent of the first \$ 100,000 of annual income of a family plus 15 percent of the excess income over \$ 100,000 shall be the screen used for families whose income is more than \$ 100,000.

(b) Though the child shall be referred to as being eligible at the point in the application process when the child has passed the initial screen, actual Fund disbursements on behalf of a child shall be limited by the monies available in the Fund and shall be guided by the policies and procedures outlined in the subchapter.

(c) To be eligible for assistance, a child must be a resident of the State of New Jersey. Resident means a person legally domiciled in New Jersey for a period of three months immediately preceding the date of application for assistance to the Fund.

1. A child's state of residence is that of the parent(s) or legal guardian.
2. Establishing proof of legal domicile within New Jersey is a responsibility of the parent or legal guardian of a child.
3. Absence from New Jersey for a period of 12 months or more is prima facie evidence of abandonment of domicile.
4. Seasonal or temporary residence within the State, of whatever duration, does not constitute domicile.

History

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

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

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

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

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

See: [28 N.J.R. 5028\(b\)](#), [29 N.J.R. 1317\(a\)](#).

In (a), inserted references to verification of medical expenses.

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

See: [31 N.J.R. 2164\(a\)](#), [31 N.J.R. 3090\(a\)](#).

In (a), substituted references to 10 percent for references to 15 percent and substituted references to 15 percent for references to 20 percent throughout; and in (b), deleted "enrolled or" following

"being".

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

See: [36 N.J.R. 2974\(a\)](#), [36 N.J.R. 4314\(a\)](#).

In (a), substituted "as specified in this chapter" for "(not covered by private insurance or other public programs)" in the introductory paragraph, and substituted "of" for "or" in 2.

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

See: [41 N.J.R. 3360\(a\)](#), [42 N.J.R. 937\(a\)](#).

In the introductory paragraph of (a), inserted a comma following "expenses" and "period", and substituted "equal to" for "represented by"; in the introductory paragraph of (c), deleted "initial" preceding "date"; and rewrote (c)4.

§ 10:155-1.4 Initial application process

Applications may be submitted on a year-round basis to the local agency. The name, address, and phone number for the local agencies shall be available from the State Office. The local agency shall forward written applications on forms provided by the State Office. Applications also may be submitted online through the State website: www.njcatastrophicfund.org.

History

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

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

Local agency substituted for case manager; State Office screens applications.

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

See: [41 N.J.R. 3360\(a\)](#), [42 N.J.R. 937\(a\)](#).

Deleted a comma following "address" and deleted "for those children who have applied to the State Office" following the second occurrence of "State Office".

Amended by R.2018 d.103, effective May 21, 2018.

See: [49 N.J.R. 317\(a\)](#), 50 N.J.R. 1278(a).

Inserted a comma following "address" and added the last sentence.

§ 10:155-1.5 State Office and Commission review process

- (a) Upon receipt of the paper application from the local agency, or the web application from the family, the State Office shall consider the providers' and vendors' charges submitted.
- (b) Providers shall demonstrate licensure or certification by appropriate State or Federal agencies, if requested by the State Office.
- (c) Prior to the Commission's batched review of applications, the State Office shall prepare a disbursement schedule for each application in accordance with [N.J.A.C. 10:155-1.6](#), [1.7](#) and [1.8](#).
- (d) In a cycle of batch reviews, the Commission shall review the applications and the State Office's disbursement schedule for each application based on the annual cap and the sliding payment schedule. A decision on the Fund's level of assistance for each case will be determined. The calendar for the batch reviews shall be made available to the public by the State Office, as required by the Open Public Meetings Act.

History

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

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

Provisions for deductible amounts deleted.

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

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

State Office screens applications; Out-of-State provider rate ceiling deleted.

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

See: [27 N.J.R. 3554\(a\)](#), [27 N.J.R. 4890\(b\)](#).

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

See: [41 N.J.R. 3360\(a\)](#), [42 N.J.R. 937\(a\)](#).

In (b), deleted "be able to" following "shall" and inserted "the"; and in (d), substituted ". A" for "and make a" and ", as required by the Open Public Meetings Act" for "in advance of each year" and inserted "will be determined".

Amended by R.2018 d.103, effective May 21, 2018.

See: [49 N.J.R. 317\(a\)](#), 50 N.J.R. 1278(a).

In (a), inserted "paper" and "or the web application from the family,".

§ 10:155-1.6 Eligibility standard

Incurred, out-of-pocket medical expenses greater than 10 percent of the first \$ 100,000 of annual income for a family plus 15 percent of the excess income over \$ 100,000 threshold shall be required for eligibility consideration. Those expenses above the family responsibility and up to the cap shall be considered for reimbursement after the eligibility standard is determined and met (see examples in Appendix I).

History

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

See: 22 New Jersey Register 2669(b), 22 New Jersey Register 3754(a).

Provisions for deductible amount deleted; family responsibility added.

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

See: 25 New Jersey Register 2169(a), 25 New Jersey Register 4128(a).

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

See: [31 New Jersey Register 2164\(a\)](#), [31 New Jersey Register 3090\(a\)](#).

Substituted "greater than 10 percent" for "equal to the 15 percent" following "expenses", and substituted a reference to 15 percent for a reference to 20 percent in the first sentence.

§ 10:155-1.7 Limits on Fund disbursements

- (a) The amount of Fund's disbursements on behalf of a child shall be capped at \$ 100,000 per year.
- (b) A one-time vehicle allowance will be capped at \$ 7,500 for the purchase or lease of a specialized vehicle. The allowance does not include modifications, which can be considered separately. The one-time vehicle allowance of \$ 7,500 shall be included in the total disbursement cap, in the year the vehicle allowance was disbursed.
- (c) The amount of the home modification allowance shall be capped at \$ 25,000 per year.
- (d) The amount of the speech, language and hearing services allowance shall be capped at \$ 3,000 per year.
- (e) The amount of the applied behavioral analysis services shall be capped at \$ 6,000 per year.

History

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

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

Cap increased to \$ 100,000 per year.

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

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

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

See: [27 N.J.R. 3554\(a\)](#), [27 N.J.R. 4890\(b\)](#).

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

See: [28 N.J.R. 5028\(b\)](#), [29 N.J.R. 1317\(a\)](#).

In (c), increased allowance cap from \$ 15,000 to \$ 25,000; and added (d).

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

See: [36 N.J.R. 2974\(a\)](#), [36 N.J.R. 4314\(a\)](#).

In (b) substituted "\$ 15,000" for "\$ 25,000" throughout.

Amended by R.2009 d.121, effective April 20, 2009.

See: [41 N.J.R. 68\(a\)](#), [41 N.J.R. 1866\(a\)](#).

Section was "Annual cap and vehicle allowance; home modification allowance; speech, language and hearing allowance". Added (e).

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

See: [41 N.J.R. 3360\(a\)](#), [42 N.J.R. 937\(a\)](#).

Section was "Annual cap and vehicle allowance; home modification allowance; speech, language and hearing allowance; applied behavioral analysis allowance". In (e), substituted "services" for "allowance" and "per year" for "annually".

Amended by R.2018 d.103, effective May 21, 2018.

See: [49 N.J.R. 317\(a\)](#), 50 N.J.R. 1278(a).

In (b), substituted "or lease of" for "of a lease or".

Amended by R.2021 d.021, effective March 15, 2021.

See: 52 N.J.R. 1989(a), 53 N.J.R. 427(a).

In (b), substituted "\$ 7,500" for "\$ 15,000" twice.

§ 10:155-1.8 Sliding payment schedule

If adequate funds do not exist in the Fund at the point in time when a particular batch is being considered by the Commission to pay all applicants the amount of their expenses below the annual cap, a sliding payment schedule shall be used in an effort to distribute the available monies to applicants in an equitable way that considers a family's income, assets and other factors which impact the ability to pay for care.

History

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

See: 22 New Jersey Register 2669(b), 22 New Jersey Register 3754(a).

Provisions for deductible amount deleted.

§ 10:155-1.9 Allocation distribution plan

Because the Fund's actual level of assistance to families, as determined by the Commission, shall in most, if not all, cases be less than the child's medical expenses, the Commission shall determine how the Fund's available monies shall be distributed among eligible providers and vendors. Input from the family shall be sought in the analysis preceding this determination, with guidance from the State Office.

History

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

See: [27 New Jersey Register 3554\(a\)](#), [27 New Jersey Register 4890\(b\)](#).

§ 10:155-1.10 Local agency responsibilities

The local agency shall make referrals and assist in the application process for other programs and benefits (for example, Medicaid, Hospital Charity Care, and other programs), where applicable.

History

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

See: 23 New Jersey Register 2564(a), 23 New Jersey Register 3754(b).

Local agency substituted for case manager.

§ 10:155-1.11 State Office responsibilities

(a) The State Office shall:

1. Screen applications to determine whether a child's eligible medical expenses meet the eligibility standard.
2. Maintain oversight to the local agency responsible for assisting families with Program, accepting applications and providing local outreach/information;
3. Administer the Fund on a day-to-day basis on behalf of the Commission;
4. Monitor providers eligibility (that is, certification or other credentials);
5. Determine the reasonableness of providers and vendor charges;
6. Prepare application for review and consideration of the Commission;
7. Oversee payments to providers, vendors, and, in some cases, families; and
8. Negotiate or settle the recovery of funds disbursed in accordance with the provisions of this chapter.

History

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

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

State Office screens applications, oversees local agencies.

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

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

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

See: [28 N.J.R. 5028\(b\)](#), [29 N.J.R. 1317\(a\)](#).

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

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

See: [31 N.J.R. 2164\(a\)](#), [31 N.J.R. 3090\(a\)](#).

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

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

See: [41 N.J.R. 3360\(a\)](#), [42 N.J.R. 937\(a\)](#).

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

Amended by R.2018 d.103, effective May 21, 2018.

See: [49 N.J.R. 317\(a\)](#), 50 N.J.R. 1278(a).

In (a)1, substituted "meet the eligibility standard." for "exceed 10 percent of the first \$ 100,000 of annual income of a family plus 15 percent of the excess income over \$ 100,000;"; and in (a)7, inserted a comma following "vendors" and deleted "to" preceding "families".

§ 10:155-1.12 Commission responsibilities

(a) The Catastrophic Illness in Children Relief Fund Commission shall be responsible to:

1. Develop policies and procedures for operation of the Fund; and
2. Meet to review and make decision on applications of families for financial assistance in regularly scheduled cycles.

History

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

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

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

See: [41 N.J.R. 3360\(a\)](#), [42 N.J.R. 937\(a\)](#).

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

§ 10:155-1.13 Time period for measuring expenses and income

In screening a child/family for eligibility for the Fund, expenses and income shall be measured by any prior consecutive 12-month time period. The income will be reported for the same prior consecutive 12-month time period back to January 1988. Applications may be accepted any time throughout the year.

History

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

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

Income reported back to January 1988.

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

See: [28 N.J.R. 5028\(b\)](#), [29 N.J.R. 1317\(a\)](#).

Clarified time period used for measurement.

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

See: [41 N.J.R. 3360\(a\)](#), [42 N.J.R. 937\(a\)](#).

Deleted the third sentence.

Amended by R.2018 d.103, effective May 21, 2018.

See: [49 N.J.R. 317\(a\)](#), 50 N.J.R. 1278(a).

Substituted "may" for "shall".

§ 10:155-1.14 Eligible health services

(a) Categories of incurred expenses, which are related to the medical care of a child with an illness or condition eligible for consideration in assessing whether a family has reached its eligibility standard include, but are not limited to, the following:

1. Physician-authorized ancillaries (labs, x-rays);
2. Specialized pediatric ambulatory care, including physician-authorized rehabilitative therapies (for example, speech, occupational, and physical), physician-authorized care for treatment of substance use disorders and behavioral health care, dental care, eye care, and chiropractic care;
3. Care in an acute hospital in New Jersey (treatment for acute and chronic conditions and treatment of substance use disorders and behavioral health conditions);
4. Care in acute hospitals in other states (treatment for acute and chronic conditions and treatment of behavioral health conditions, including substance use disorders);
5. Physicians and nursing services, including immunization services, in all settings;
6. Care in specialty hospitals (for example, rehabilitative, psychiatric);
7. Long term care (respite care, hospice care, residential care, or other care);
8. Home health care (physician-authorized home health aide, physician-authorized public health nurse, physician-authorized private duty nurse or other care);
9. Pharmaceuticals (physician-authorized Federal Drug Administration approved over-the-counter and prescription drugs related to the medical condition and physician-authorized Federal Drug Administration approved medical formulas);
10. Disposable medical supplies (physician-authorized over-the-counter and prescribed supplies);
11. Durable medical equipment (for example, physician-authorized ventilators, prostheses);
12. Home modification that is related to the medical condition of the child at the time the expenses were incurred;
13. Purchase of a specialized, modified vehicle and any subsequent modifications that are related to the medical condition of the child at the time the expenses were incurred;
14. Experimental medical treatment/experimental drugs in connection with an FDA-approved clinical trial, which are provided by licensed health care providers. Applications involving experimental treatment/experimental drugs may require additional review;
15. Reasonable funeral expenses, including professional services, arrangement and supervision, facility charges, transportation (hearse and one family car), casket costs and vault or cremation urn. Excluded items include, but are not limited to, flowers, prayer cards, books, headstones, name plates and soloist/organist; and

16. Family transportation and travel-related expenses including, but not limited to, mileage allowance, tolls, parking receipts, and temporary shelter costs related to the medical condition.

(b) Fifty percent of a health coverage premium, including supplemental and dependent coverage that is paid by a family, not to exceed 50 percent of total eligible expenses, when accompanied by eligible expenses in (a) above shall be counted toward calculating eligibility, but shall not be considered an eligible expense for reimbursement from the Fund.

History

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

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

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

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

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

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

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

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

See: [28 N.J.R. 5028\(b\)](#), [29 N.J.R. 1317\(a\)](#).

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

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

See: [30 N.J.R. 2562\(a\)](#), [30 N.J.R. 3837\(a\)](#).

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

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

See: [31 N.J.R. 2164\(a\)](#), [31 N.J.R. 3090\(a\)](#).

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

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

See: [36 N.J.R. 2974\(a\)](#), [36 N.J.R. 4314\(a\)](#).

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

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

See: [41 N.J.R. 3360\(a\)](#), [42 N.J.R. 937\(a\)](#).

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

Amended by R.2010 d.269, effective December 6, 2010 (operative January 1, 2011).

See: [42 N.J.R. 1840\(a\)](#), [42 N.J.R. 2959\(a\)](#).

In (a)15, inserted "and" at the end; in (a)16, substituted a period for "; and" at the end; recodified (a)17 as (b); and in (b), deleted "1 through 16" following "(a)", and inserted "shall be counted toward calculating eligibility, but shall not be considered an eligible expense for reimbursement from the Fund".

Amended by R.2018 d.103, effective May 21, 2018.

See: [49 N.J.R. 317\(a\)](#), 50 N.J.R. 1278(a).

Rewrote (a).

§ 10:155-1.15 Ineligible health services

(a) Categories of health and health-related expenses that are not eligible for consideration shall include, but are not limited to, the following:

1. Special education required as result of medical condition;
2. Elective cosmetic surgery/treatment; and
3. Modifications to vacation and secondary homes.

History

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

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

Experimental drugs or treatment deleted.

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

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

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

See: [31 N.J.R. 2164\(a\)](#), [31 N.J.R. 3090\(a\)](#).

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

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

See: [41 N.J.R. 3360\(a\)](#), [42 N.J.R. 937\(a\)](#).

Rewrote the introductory paragraph of (a).

§ 10:155-1.16 Administration of payments

(a) The State Office shall oversee processing of payments from the Fund. Though in general payments shall be made directly to providers and vendors, consideration shall be given to making payments directly to families.

(b) Items in [N.J.A.C. 10:155-1.14](#), Eligible health services, shall be considered for payments.

(c) For the purpose of providing the moneys necessary to establish and meet the purposes of the Fund, the Commission shall establish a \$ 1.50 annual surcharge per employee for all employers who are subject to the New Jersey "Unemployment Compensation Law," N.J.S.A. 43:21-1 et seq. The surcharge shall be collected by the Controller for the New Jersey Unemployment Compensation Fund and paid over to the State Treasurer for deposit in the Fund annually as provided by the statute.

History

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

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

Condition added to insurance payment.

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

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

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

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

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

See: [27 N.J.R. 3554\(a\)](#), [27 N.J.R. 4890\(b\)](#).

Amended by R.2008 d.278, effective September 15, 2008.

See: [40 N.J.R. 2399\(a\)](#), [40 N.J.R. 5239\(a\)](#).

Added (c).

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

See: [41 N.J.R. 3360\(a\)](#), [42 N.J.R. 937\(a\)](#).

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

§ 10:155-1.17 Appeal process

(a) The following applies to the appeals:

1. Upon receipt of a determination by the State Office, an applicant who disputes that determination may appeal to the Catastrophic Illness in Children Relief Fund Commission by filing a written appeal to:

New Jersey State Department of Human Services
Catastrophic Illness in Children Relief Fund Commission
PO Box 0728
Trenton, NJ 08625-0728
Attn: Chairperson

2. Appeals must be postmarked and mailed to the above address no later than 30 days from the date of notice of the determination made by the State Office. The Commission may waive the deadline for cause.

3. The written appeal shall include all reasons and grounds for disputing the determination made by the State Office and all proof and documentation in support of the appeal.

4. The Commission shall conduct such review and analysis as is necessary to reach a decision on the appeal. At its discretion, the Commission may direct a conference to be convened with the applicant, or may refer the matter to the Office of Administrative Law pursuant to the Administrative Procedure Act, N.J.S.A. 52:14B-1 et seq., and the Uniform Administrative Procedure Rules, [N.J.A.C. 1:1](#).

5. Except for appeals referred to the Office of Administrative Law, the Commission shall render a decision on the appeal within 180 days from the date of original receipt of the appeal. Appeals referred to the Office of Administrative Law shall be decided by the Commission within 45 days from the date of filing of the Initial Decision of the Administrative Law Judge, or at such later date as permitted by law.

6. A decision made by the Commission shall be final. It may be appealed to the Superior Court of New Jersey as permitted by court rules.

(b) Unless otherwise specifically ordered by the Commission, an applicant may not receive benefits from the Catastrophic Illness in Children Relief Fund while an appeal is pending at any level.

History

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

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

Appeal deadline extended to 30 days; waiver permitted for cause.

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

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

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

See: [27 N.J.R. 3554\(a\)](#), [27 N.J.R. 4890\(b\)](#).

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

See: [30 N.J.R. 2562\(a\)](#), [30 N.J.R. 3837\(a\)](#).

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

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

See: [36 N.J.R. 2974\(a\)](#), [36 N.J.R. 4314\(a\)](#).

In (a), amended the address in 1.

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

See: [41 N.J.R. 3360\(a\)](#), [42 N.J.R. 937\(a\)](#).

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

§ 10:155-1.18 Special cases

(a) Special cases shall be referred to the Commission for its review and consideration. Special cases shall include, but are not limited to, the following:

1. In special cases in which a family has more than one child with a catastrophic illness (as defined by expenses in excess of the 10 percent of the first \$ 100,000 of annual income of a family plus 15 percent of the excess income over \$ 100,000 threshold for each child), consideration shall be given to waiving the family responsibility as outlined in [N.J.A.C. 10:155-1.2](#) for the other child/children given that the family would have already met the family responsibility for the first child in a State fiscal year.

2. For special hardship cases that come before the Commission during a batch cycle, after the standard disbursement guidelines have been applied to each case in the batch and sufficient monies remain in the Fund, consideration shall be given to waiving the standard disbursement guidelines (that is, the family responsibility and the caps as outlined in [N.J.A.C. 10:155-1.2](#) and [1.7](#)).

History

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

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

Provisions for deductible amount deleted; family responsibility added.

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

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

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

See: [27 N.J.R. 3554\(a\)](#), [27 N.J.R. 4890\(b\)](#).

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

See: [30 N.J.R. 2562\(a\)](#), [30 N.J.R. 3837\(a\)](#).

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

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

See: [31 N.J.R. 2164\(a\)](#), [31 N.J.R. 3090\(a\)](#).

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

Amended by R.2018 d.103, effective May 21, 2018.

See: [49 N.J.R. 317\(a\)](#), 50 N.J.R. 1278(a).

In (a)2, substituted "caps" for "cap".

§ 10:155-1.19 Confidentiality of information

Information received pursuant to the duties required by the Act shall not be disclosed publicly in such a manner as to identify individuals unless special circumstances require such disclosure and the proper notice is served and parent or legal guardian's consent is given, as may be necessary for pending legal proceedings.

§ 10:155-1.20 Recovery of Commission expenses

(a) If a family receives assistance from the Fund for a child, in accordance with this chapter, and subsequently recovers damages or a financial award for the child's medical expenses, pursuant to a settlement or judgment in a legal action, the family shall reimburse the Fund for either:

1. The amount of assistance received from the Fund; or
2. The portion of assistance received for the injury, illness or condition covered by the damage or judgment, less the family's expenses of recovery.

(b) The Commission may negotiate or settle the recovery of such claims, for cause presented by the family to the Commission.

History

New Rule, R.1993 d.438, effective September 7, 1993.

See: 25 New Jersey Register 2169(a), 25 New Jersey Register 4128(a).