PROPOSALS INSURANCE

coverage, will have a positive social impact in that it will ensure all carriers are providing the appropriate covered supplies and services at the appropriate cost to consumers.

Economic Impact

The IHC Board expects that the proposed amendments will provide a positive economic impact for consumers.

The IHC Board expects the coverage of colorectal cancer screenings, and the expanded definition of "practitioner" in the context of self-administered hormonal contraceptives will help facilitate affordable access to needed services, resulting in a positive economic impact.

In addition, clarifying standard plan documents to reflect CMS's guidance prohibiting carriers from taking non-primary coverage into account when paying for covered services or supplies; limiting or excluding coverage based on eligibility for other coverage; and providing that coordination of benefits will only occur when the covered person is enrolled in other coverage will have a positive economic impact for consumers, who will be better able to discern how their standard plan will pay for covered services or supplies and at what cost, while also ensuring coordination of benefits takes place only when the appropriate coverages are in place.

The proposed amendments will not incur any additional administrative, enforcement, or oversight costs for implementing agencies.

Federal Standards Statement

State agencies that propose to adopt or amend State rules that exceed Federal standards regarding the same subject matter are required to include in the rulemaking document a Federal standards analysis. The proposed amendments comply with the May 24, 2023 CMS guidance regarding Benefit Coordination and Medicare Eligibility and 45 CFR 155.430(b)(3), and do not exceed those Federal standards. Accordingly, a Federal standards analysis is not required.

Jobs Impact

The IHC Board does not anticipate that any jobs will be generated or lost as a result of the proposed amendments.

Agriculture Industry Impact

The IHC Board does not believe the proposed amendments will have any impact on the agriculture industry in New Jersey.

Regulatory Flexibility Analysis

The IHC Board believes the proposed amendments may apply to one or more carriers that are "small businesses," as that term is defined in the Regulatory Flexibility Act, N.J.S.A. 52:14B-16 through 21. The proposed amendments do not establish new or additional reporting or recordkeeping requirements, but have the effect of establishing new compliance requirements, as described in the Summary above.

No differentiation in compliance requirements is provided based on business size. The requirements of, and the goals to be achieved by, the laws in question do not vary based on the business size of a carrier, and the IHC Board would not be at liberty to make such a distinction, even if the IHC Board were to consider such a distinction warranted. Accordingly, the proposed amendments provide no differentiation in compliance requirements based on business size. No additional professional services would have to be employed in order to comply with the proposed amendments.

Housing Affordability Impact Analysis

The IHC Board does not believe the proposed amendments will have an impact on housing affordability in this State or evoke a change in the average costs of housing in this State because the proposed amendments relate to the terms of standard health benefits plans offered in New Jersey for purchase by individuals.

Smart Growth Development Impact Analysis

The IHC Board does not believe the proposed amendments will have an impact on smart growth in the State or that the proposed amendments will have an effect on smart growth development in Planning Areas 1 or 2, or within designated centers, under the State Development and Redevelopment Plan. The proposed amendments relate to the terms of standard health benefits plans offered in New Jersey.

Racial and Ethnic Community Criminal Justice and Public Safety Impact

The IHC Board has evaluated this rulemaking and determined that it will not have an impact on pretrial detention, sentencing, probation, or parole policies concerning adults and juveniles in the State. Accordingly, no further analysis is required.

Full text of the proposal follows:

OFFICE OF ADMINISTRATIVE LAW NOTE: The New Jersey Individual Health Coverage Program Board is proposing amendments at N.J.A.C. 11:20 Appendix Exhibits A and B. Pursuant to N.J.S.A. 52:14B-7(c) and N.J.A.C. 1:30-5.2(a)2, the Exhibits, as proposed, are not published herein, but may be reviewed by contacting:

New Jersey Individual Health Coverage Program

20 West State Street, 11th Floor

PO Box 325

Trenton, NJ 08625-0325

ihcsehprograms@dobi.nj.gov

or

New Jersey Office of Administrative Law

9 Quakerbridge Plaza

PO Box 049

Trenton, NJ 08625-0049

oal.comments@oal.nj.gov

(a)

DEPARTMENT OF BANKING AND INSURANCE SMALL EMPLOYER HEALTH BENEFITS PROGRAM Small Employer Health Benefit Plans

Proposed Amendments: N.J.A.C. 11:21 Appendix Exhibits F. G. W. and Y

Authorized By: New Jersey Small Employer Health Benefits Program Board of Directors, Margaret Koller, Chairperson.

Authority: N.J.S.A. 17B:27A-17 through 56

Calendar Reference: See Summary below for the explanation of the inapplicability of the calendar requirement.

Proposal Number: PRN 2024-003.

As required pursuant to N.J.S.A. 17B:27A-51, interested parties may testify with respect to the standard health benefits plans, set forth at N.J.A.C. 11:21 Appendix Exhibits F, G, W, and Y at a virtual **public hearing** using Zoom to be held on December 13, 2023 at 10:00 A.M. The meeting may be accessed as follows:

https://www.zoomgov.com/j/1615007014?pwd=RXBwWkRKZGIV

<u>UDlkemZtZXp5eUFoUT09</u> Meeting ID: 161 500 7014

Passcode: 867963

Dial by your location

+1 669 254 5252 US (San Jose)

+1 646 828 7666 US (New York)

+1 646 964 1167 US (US Spanish Line)

+1 669 216 1590 US (San Jose)

+1 415 449 4000 US (US Spanish Line)

+1 551 285 1373 US (New Jersey)

Submit comments by December 19, 2023, to:

New Jersey Small Employer Health Benefits Program Board

PO Box 325

Trenton, NJ 08625-0325

Fax: 609-633-2030

Email: ihcsehprograms@dobi.nj.gov

The agency proposal follows:

Summary

The Small Employer Health Benefits (SEH) Program Board of Directors ("SEH Board" or "Board") establishes the standard health benefits plans (standard plans) that may be offered in the small employer

INSURANCE PROPOSALS

market in New Jersey, pursuant to authority at P.L. 1992, c. 162 (codified at N.J.S.A. 17B:27A-17 through 56), as subsequently amended and supplemented. The SEH Board has set forth the requirements with which carriers must comply in offering standard plans in rules at N.J.A.C. 11:21, and has set forth standard plan language for policies, contracts, certificates, and evidence of coverage at N.J.A.C. 11:21 Appendix. Specifically, the language for the policy forms for the standard plans known as Plans B, C, D, and E are at Exhibit F of the Appendix, while the language of the certificates is at Exhibit W; and the language for the contract form for the HMO Plan is at Exhibit G, while the language for the HMO evidence of coverage is at Exhibit Y. In developing their policies/contracts and certificates/evidences of coverage, carriers also refer to Exhibit K, which provides explanations about how carriers may use certain variable language in the standard plans.

The SEH Board proposes the following amendments to the standard plans at N.J.A.C. 11:21 Appendix Exhibits F, G, W, and Y.

To comply with P.L. 2023, c. 2, which permits pharmacists to furnish self-administered hormonal contraceptives, in accordance with protocols established by the State Board of Pharmacy and the State Board of Medical Examiners, the Board proposes amendments to the definition of "practitioner" used in the standard plan documents.

To comply with P.L. 2023, c. 8, which requires health insurance carriers to cover colorectal cancer screenings recommended by the United States Preventive Services Task Force and eliminates cost-sharing requirements for certain colonoscopies, the Board proposes amendments throughout the standard plan documents, including updated language to the "Colorectal Cancer Screening Charges" provision.

In accordance with guidance released by the United States Centers for Medicare & Medicaid Services (CMS) in May 2023, the Board proposes amendments that state that in the absence of enrollment in other primary coverage, such as Medicare, a standard plan will not take that other coverage into account when paying for covered services or supplies. In addition, the Board proposes language mandating that a standard plan will not limit or exclude coverage based on eligibility for other coverage and that coordination of benefits occurs only when the Covered Person is enrolled in other coverage.

SEH Rulemaking Procedures

The SEH Board is proposing these amendments in accordance with the special action process established at N.J.S.A. 17B:27A-51, as an alternative to the common rulemaking process specified at N.J.S.A. 52:14B-1 et seq. Pursuant to N.J.S.A. 17B:27A-51, the SEH Board may expedite adoption of certain actions, including modification of the SEH Program's health benefits plans and policy forms, if the SEH Board provides interested parties a minimum 20-day period during which to comment on the Board's intended action following notice of it in three newspapers of general circulation, with instructions for obtaining a detailed description of the proposed action and the manner for submitting comments to the Board. Concurrently, the SEH Board must forward notice of the proposed action to the Office of Administrative Law (OAL) for publication in the New Jersey Register (note, however, that the comment period runs from the date the notice of the proposed action is submitted to the newspapers and the OAL, not from the date of publication of the notice in the New Jersey Register). The SEH Board is also required to send notice of the intended action to affected trade and professional associations, carriers, and other interested persons who may request such notice. In addition, for intended modifications to the health benefits plans, the SEH Board must allow for testimony to be presented at a public hearing prior to adopting any such modifications. The date, time, and place of the public hearing for these specific proposed amendments is presented at the beginning of this notice.

Subsequently, the SEH Board may adopt its proposed action immediately upon the close of the comment period or the public hearing (whichever occurs later) by submitting the adopted action to the OAL for publication. The adopted action is effective upon the date of its submission to the OAL, or such later date as the Board may designate. The SEH Board need not respond to commenters as part of the notice of adoption, but if the Board does not, the Board will respond to (timely submitted) comments shortly thereafter in a separately-prepared report,

which will be submitted to the OAL for publication in the New Jersey Register.

As expedited actions adopted by the SEH Board pursuant to N.J.S.A. 17B:27A-51 are accomplished, notwithstanding the provisions of the Administrative Procedure Act, the quarterly calendar requirement established by the Administrative Procedure Act and set forth at N.J.A.C. 1:30-3.1 is not applicable when the SEH Board uses its special rulemaking procedures. Please note that the unique provisions at N.J.S.A. 17B:27A-51 may result in the publication of this rule proposal in the New Jersey Register after the comment period has concluded.

Social Impact

The SEH Board anticipates that compliance with the newly enacted laws expanding definition of "practitioner" in the context of self-administered hormonal contraceptives and providing coverage for colorectal cancer screenings recommended by the United States Preventive Services Task Force and eliminating cost-sharing requirements for certain colonoscopies will have a positive social impact for those consumers who will benefit from the coverage the laws require. Further, the Board anticipates the updated language reflecting CMS's recent guidance, which prohibits carriers from taking non-primary coverage into account when paying for covered services or supplies; limiting or excluding coverage based on eligibility for other coverage; and providing that coordination of benefits will only occur when the covered person is enrolled in other coverage, will have a positive social impact in that it will ensure all carriers are providing the appropriate covered supplies and services at the appropriate cost to consumers.

Economic Impact

The SEH Board expects that the proposed amendments will provide a positive economic impact for consumers.

The SEH Board expects the coverage of colorectal cancer screenings and the expanded definition of "practitioner" in the context of self-administered hormonal contraceptives will help facilitate affordable access to needed services, resulting in a positive economic impact.

In addition, clarifying standard plan documents to reflect CMS's guidance prohibiting carriers from taking non-primary coverage into account when paying for covered services or supplies; limiting or excluding coverage based on eligibility for other coverage; and providing that coordination of benefits will only occur when the covered person is enrolled in other coverage will have a positive economic impact for consumers, who will be better able to discern how their standard plan will pay for covered services or supplies and at what cost, while also ensuring coordination of benefits takes place only when the appropriate coverages are in place.

The proposed amendments will not incur any additional administrative, enforcement, or oversight costs for implementing agencies.

Federal Standards Analysis

State agencies that propose to adopt or amend State rules that exceed Federal standards regarding the same subject matter are required to include in the rulemaking document a Federal standards analysis. The proposed amendments comply with the May 24, 2023 CMS guidance regarding Benefit Coordination and Medicare Eligibility and 45 CFR 155.430(b)(3), and do not exceed those Federal standards. Accordingly, a Federal standards analysis is not required.

Jobs Impact

The SEH Board does not anticipate that any jobs will be generated or lost as a result of the proposed amendments. Commenters may submit data or studies on the potential jobs impact of the proposed amendments together with their comments on other aspects of the notice of proposal.

Agriculture Industry Impact

The SEH Board does not believe the proposed amendments will have any impact on the agriculture industry in New Jersey.

Regulatory Flexibility Analysis

The SEH Board does not believe the proposed amendments apply to "small businesses," as that term is defined in the Regulatory Flexibility Act, N.J.S.A. 52:14B-16 through 21, but acknowledges the possibility that one or more carriers might meet that definition. The proposed amendments do not establish new or additional reporting or recordkeeping

PROPOSALS TREASURY—GENERAL

requirements, but have the effect of establishing new compliance requirements, as described in the Summary above.

No differentiation in compliance requirements is provided based on business size. The requirements of and the goals to be achieved by the Federal and State laws in question do not vary based on business size of a carrier, and the SEH Board would not be at liberty to make such a distinction, even if the SEH Board were to consider such a distinction warranted. Accordingly, the proposed amendments provide no differentiation in compliance requirements based on business size. No additional professional services would have to be employed in order to comply with the proposed amendments.

The SEH Board notes that compliance with the new mandates, and, thus, implementation of the proposed amendments, can be achieved using current technology.

Housing Affordability Impact Analysis

The SEH Board does not believe the proposed amendments will have an impact on housing affordability in this State or evoke a change in the average costs of housing in this State in that the proposed amendments relate to the terms of standard health benefits plans offered in New Jersey.

Smart Growth Development Impact Analysis

The SEH Board does not believe the proposed amendments will have an impact on smart growth in the State, or that the proposed amendments will have an effect on smart growth development in Planning Areas 1 or 2, or within designated centers, under the State Development and Redevelopment Plan. The proposed amendments relate to the terms of standard health benefits plans offered in New Jersey.

Racial and Ethnic Community Criminal Justice and Public Safety Impact

The SEH Board has evaluated this rulemaking and determined that it will not have an impact on pretrial detention, sentencing, probation, or parole policies concerning adults and juveniles in the State. Accordingly, no further analysis is required.

Full text of the proposal follows:

OFFICE OF ADMINISTRATIVE LAW NOTE: The New Jersey Small Employer Health Benefits Program Board is proposing amendments at N.J.A.C. 11:21 Appendix Exhibits F, G, W, and Y. Pursuant to N.J.S.A. 52:14B-7(c) and N.J.A.C. 1:30-5.2(a)2, the Exhibits, as proposed, are not published herein, but may be reviewed by contacting:

New Jersey Small Employer Health Benefits Program

20 West State Street, 11th Floor
PO Box 325
Trenton, NJ 08625-0325
ihcsehprograms@dobi.nj.gov
or
New Jersey Office of Administrative Law
9 Quakerbridge Plaza
PO Box 049
Trenton, NJ 08625-0049
oal.comments@oal.nj.gov

TREASURY—GENERAL

(a)

DIVISION OF REVENUE AND ENTERPRISE SERVICES

Centralized Non-Tax Debt Collection Proposed New Rules: N.J.A.C. 17:48

Authorized By: Elizabeth Maher Muoio, State Treasurer.Authority: N.J.S.A. 52:18-36 through 41 and 2A:16-11.1.Calendar Reference: See Summary below for explanation of exception to calendar requirement.

Proposal Number: PRN 2024-002.

Submit comments by March 2, 2024, to:

Peter Lowicki, Deputy Director New Jersey Division of Revenue and Enterprise Services PO Box 308 33 West State Street, 5th Floor Trenton, NJ 08646 Attn: Non-Tax Debt Collection Fax: 609-984-6832 peter.lowicki@treas.nj.gov

The agency proposal follows:

Summary

The Department of the Treasury proposes new rules at N.J.A.C. 17:48. The proposed new rules are designed to implement the State statutes governing the collection of delinquent non-tax debt in a uniform fashion, through the Division of Revenue and Enterprise Services (Division). Delinquent non-tax debt is defined as a fee, fine, cost, penalty, or assessment that has been due and owing a State department or agency for 91 days or more. Delinquent debt does not include inter-agency debts or debts associated with loans, notes, grants, or contracts.

Pursuant to the centralized program, executive branch agencies are required to collect amounts due from fees, fines, penalties, costs, or other assessments. If an agency is unable to collect a debt within 90 days, it must transfer the debtor file to the Division in an electronic format on the 91st day for further collection efforts. In addition, each fiscal year, the Division must submit, to the Governor and the Legislature, a cumulative report reflecting the non-tax debt inventory information supplied by each agency.

A summary of the proposed new rules follows.

Proposed new N.J.A.C. 17:48-1.1 sets forth definitions of key terms in the proposed new rules, including the most important terms—"debt," "debt file," and "State department or agency." The term "debt" is drawn from the statutory definition found at N.J.S.A. 2A:16-11. In turn, "debt file" is based on, and operationalizes, the department/agency inventory report requirement set forth at N.J.S.A. 52:18-40.3.b. "State department or agency" provides clarity with respect to which public entities are subject to the mandatory provisions of the non-tax debt collection program. The section also defines the terms "delinquent debt" and "Division."

Proposed new N.J.A.C. 17:48-1.2 sets forth the actions that all executive branch departments or agencies must take to collect amounts due from fines, fees, penalties, and other assessments (non-tax debt) prior to the transfer of non-tax debt cases to the centralized program through the Division. Collectively, the actions constitute normal due diligence in agency billing/collection operations.

The actions include developing and establishing written procedures and guidelines to be followed by all staff assigned to the debt collection function, as well as attempting to collect by taking, at a minimum, the following steps: prepare and issue an initial bill (invoice) by regular mail or electronic means if available; if the amount is not paid after 30 days, send a written reminder letter through regular and/or certified mail, supplemented by an electronic communication, if available; and, if the amount is not paid after 60 days, send a second reminder letter through regular and/or certified mail.

Proposed new N.J.A.C. 17:48-1.3 sets forth the requirement for executive branch departments and agencies to transfer non-tax debt cases to the Division if they are unable to collect the amounts due after 90 days. N.J.S.A. 52:18-40.3.a and b establish the requirement to promulgate rules in this area. Accordingly, the proposed new rules specify the timeframe for transferring debt cases and the informational content for transferred cases.

Proposed new N.J.A.C. 17:48-1.4 sets forth exception to the 90-day transfer rule set forth at N.J.A.C. 17:48-1.3. If a debt has reached the 90-day cutoff point, but has been submitted by the agency for litigation, the account shall not be submitted to the Division until such litigation has been concluded and the debt remains due and owing. If the debt remains unpaid for 90 days after an agreed upon court order for payment, the debt then must be transferred to the Division.

Proposed new N.J.A.C. 17:48-1.5 states the requirements for the chief administrative officer of each agency, or his or her designee, to submit, to