

nitrate/nitrogen calculated pursuant to the Pinelands dilution model dated December, 1993, as amended, (Appendix A) subject to the provisions of (a)5v below and based on the following assumptions and requirements. For purposes of this section, the entire contiguous parcel may include any contiguous lands to be dedicated as open space as part of the proposed development but may not include previously dedicated road rights-of-way or any contiguous lands that have been deed restricted pursuant to N.J.A.C. 7:50-5.30 or 5.47:

- (1) (No change.)
- (2) For Amphidrome, Bioclere, and FAST systems:
  - (A)-(E) (No change.)
  - (F) The manufacturer or its agent shall provide to each owner an operation and maintenance manual and shall provide a five-year warranty consistent with the requirements of N.J.A.C. 7:50-10.22(a)5viii;
  - (G)-(J) (No change.)
  - (3) Other on-site septic waste water treatment systems shall only be credited with reducing total nitrogen concentration to the extent authorized by an experimental monitoring program approved by the Pinelands Commission. Such an experimental monitoring program shall only be approved if:
    - (A)-(E) (No change.)
    - (F) The system meets all the requirements in N.J.A.C. 7:50-10.22(a)5i through x; and
    - (G) (No change.)
    - v.-ix. (No change.)
    - 6. (No change.)

#### SUBCHAPTER 10. PILOT PROGRAMS

##### PART IV—ALTERNATE DESIGN TREATMENT SYSTEMS PILOT PROGRAM

###### 7:50-10.22 General standards

(a) Alternate design pilot program treatment systems shall be authorized for residential use in all municipalities provided that the following standards are met:

- 1.-3. (No change.)
- 4. The Executive Director shall submit an annual report to the Commission describing installation, maintenance, and performance data for each technology. The Executive Director also shall submit an interim report to the Commission if it is determined there is a significant installation, maintenance, or performance issue with one or more technologies that needs to be addressed before the issuance of the next annual report. Copies of each annual and interim report shall be provided to each manufacturer and agent of a technology that is discussed in that report. If it is determined in a report either that a manufacturer or its agent is not adhering to any of the requirements of this pilot program or that any one of the technologies, based on maintenance or installation issues or on an evaluation of all the monitoring results for that technology under this pilot program, is not meeting the minimum water quality standards in N.J.A.C. 7:50-6.83 or the two parts per million total nitrogen requirement in (a)5x below on all lots smaller than 3.2 acres or on lots smaller than a particular size because the effluent exiting the system is higher than was anticipated in establishing the lot sizes in (a)3 above:
  - i.-ii. (No change.)
  - 5. Conditions for use of alternate design pilot program treatment systems are as follows:
    - i.-iv. (No change.)
    - v. The manufacturer or its agent and a New Jersey licensed professional engineer shall certify to the Commission and the local board of health that installation of each system has been properly completed and that the system and all of its components are operating properly. The manufacturer or its agent shall include in the certification the cost of the installation and a description of any problem encountered during the installation;
      - vi.-xiii. (No change.)
      - (b)-(c) (No change.)
- 7:50-10.23 Pinelands Commission approval and evaluation
  - (a)-(g) (No change.)

(a)

#### SITE REMEDIATION AND WASTE MANAGEMENT PROGRAM

##### Notice of Administrative Correction Underground Storage Tanks

###### N.J.A.C. 7:14B-7.2

**Take notice** that the Department of Environmental Protection (Department) discovered an error in the text of N.J.A.C. 7:14B-7.2. Effective January 16, 2018, the Department adopted amendments to the underground storage tanks rules, specifically changing all instances of “owner or operator” to “owner and operator” in N.J.A.C. 7:14B-7.2(b) (see 49 N.J.R. 1121(a); 50 N.J.R. 409(a)) (Rulemaking 1). While Rulemaking 1 was proposed, but not yet adopted, the Department proposed amendments to the heating oil tank system remediation rules (see 49 N.J.R. 2055(a); 50 N.J.R. 1715(b)) (Rulemaking 2). Rulemaking 2 proposed to add language that the Department later determined to not adopt upon adoption (except for a technical change of no consequence to the instant notice) of the rulemaking as part of the Department’s non-substantive changes upon adoption. As Rulemaking 1 was still pending when Rulemaking 2 was proposed, the rule text depicted in the New Jersey Register for N.J.A.C. 7:14B-7.2(b) in Rulemaking 2 was “owner or operator.”

In conforming the rule text to integrate and combine the changes from Rulemaking 1 (effective January 16, 2018) and Rulemaking 2 (effective August 6, 2018), the then-existing rule text (as of the 01-16-18 Code Update) of “owner and operator” was inadvertently reflected as “owner or operator.” The Department has requested, and the Office of Administrative Law has agreed to, such correction be made administratively. This notice of administrative change is published pursuant to N.J.A.C. 1:30-2.7.

**Full text** of the changed rule follows (additions indicated in boldface **thus**; deletions indicated in brackets [thus]):

#### SUBCHAPTER 7. RELEASE REPORTING AND INVESTIGATION

##### 7:14B-7.2 Investigating a suspected release

- (a) (No change.)
- (b) If the investigation conducted in accordance with (a) above is inconclusive in confirming or disproving a suspected release, the owner and operator shall, in accordance with the schedule in the Technical Requirements for Site Remediation, at N.J.A.C. 7:26E-3.14, conduct and complete a site investigation designed to confirm or disprove a suspected discharge in accordance with the Technical Requirements for Site Remediation, at N.J.A.C. 7:26E-3.3. If a discharge is confirmed, the owner [or] **and** operator shall initiate action pursuant to N.J.A.C. 7:14B-7.3. The owner [or] **and** operator shall keep documentation of an investigation in accordance with this section that disproves a suspected discharge at the facility and make it available for inspection by the Department for the operational life of the underground storage tank system.
  - (c)-(d) (No change.)

## HUMAN SERVICES

(b)

#### DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

##### Notice of Redoption Medicaid Only

###### Redoption: N.J.A.C. 10:71

Authority: N.J.S.A. 30:4D-1 et seq., and 30:4J-8 et seq.

Authorized By: Carole Johnson, Commissioner, Department of Human Services.

Agency Control Number: 18-A-07.

Effective Date: October 23, 2018.

New Expiration Date: October 23, 2025.

**Take notice** that pursuant to N.J.S.A. 52:14B-5.1, the rules at N.J.A.C. 10:71, Medicaid Only, were scheduled to expire on December 29, 2018. The Medicaid Only chapter regulates the eligibility process used to determine eligibility for the Medicaid Only program for aged, blind, and disabled individuals.

The Department of Human Services is readopting the chapter before expiration, while it works on changes to reflect Federal requirements under the Affordable Care Act. These changes will be published under as a separate rulemaking. The Department of Human Services has reviewed the rules and has determined them to be necessary, reasonable, and proper for the purpose for which they were originally promulgated, as required by Executive Order No. 66 (1978). Therefore, pursuant to N.J.S.A. 30:4D-1 et seq., and 30:4J-8 et seq., and in accordance with N.J.S.A. 52:14B-5.1.c(1), these rules are readopted and shall continue in effect for a seven-year period.

## INSURANCE

### (a)

#### NEW JERSEY INDIVIDUAL HEALTH COVERAGE PROGRAM BOARD

##### Individual Health Coverage Program

##### Readoption with Amendments: N.J.A.C. 11:20-1, 2, 3, 8, 12, 17, 19, 20, 23, and 24 and 11:20 Appendix Exhibits A through D and K

##### Adopted Repeals: N.J.A.C. 11:20-2.17 and 11:20 Appendix Exhibits F, G, and H

Proposed: May 11, 2018, (see 50 N.J.R. 1412(a)).

Adopted: June 12, 2018, by the New Jersey Individual Health Coverage Program Board, Ellen DeRosa, Executive Director.

Authority: N.J.S.A. 17B:27A-2 et seq.

Filed: November 23, 2018, as R.2018 d.197, **without change**.

Effective Date: June 12, 2018.

Expiration Date: January 12, 2025.

##### Summary of Hearing Officer's Recommendation and Agency's Response:

The New Jersey Individual Health Coverage Program Board (IHC Board) held a hearing on Wednesday, May 23, 2018, at 10:00 A.M. at the Department of Banking and Insurance, 11th floor Conference Room, 20 West State Street, Trenton, New Jersey to receive testimony with respect to the Plan of Operation, set forth at N.J.A.C. 11:20-2, and the health benefits plans, set forth in N.J.A.C. 11:20 Appendix Exhibits A and B. Ellen DeRosa, Executive Director of the IHC Board, served as hearing officer.

No persons attended the hearing and thus no testimony was provided during the hearing. The hearing officer made no recommendations regarding the rulemaking. The hearing record may be reviewed by contacting Ellen DeRosa, Executive Director, New Jersey Individual Health Coverage Program Board, PO Box 325, Trenton, NJ 08625-0325.

##### Summary of Public Comments and Agency Responses:

**No comments were received.**

##### Federal Standards Statement

The rules readopted with amendments and repeals comply with the following Federal laws: the Federal Health Insurance Portability and Accountability Act of 1996, Pub. L. 104-191; Section 1862(b) of the Social Security Act (Medicare as Secondary Payor), 42 U.S.C. § 1395y(b) (1994) and implementing regulations at 45 CFR Part 411; the Public Health Service Act, 42 U.S.C. §§ 300gg et seq., (incorporating the Federal Health Insurance Portability and Accountability Act of 1996, Pub.L. 104-

191; the Newborns' and Mother's Health Care Protection Act of 1998, Pub.L. 104-204, 110 Stat. 2935 (1996); and the Women's Health and Cancer Rights Act of 1998, Pub.L. 105-277, Title IX, §903, 112 Stat.) and implementing regulations at 45 CFR Parts 145 and 146; and the Federal Patient Protection and Affordable Care Act, Pub. Law 111-148, as amended and supplemented by the Health Care and Reconciliation Act, Pub. Law 111-152. The rules do not expand upon the requirements set forth in the above Federal laws. There are no other Federal laws that apply to the rules readopted with amendments and repeals.

**Full text** of the readopted rules can be found in the New Jersey Administrative Code at N.J.A.C. 11:20-1, 2, 3, 8, 12, 17, 19, 20, 22, 23, and 24 and N.J.A.C. 11:20 Appendix Exhibits A, B, C, D, and K.

**Full text** of the adopted amendments follows:

#### SUBCHAPTER 1. GENERAL PROVISIONS

##### 11:20-1.2 Definitions

Words and terms contained in the Act, when used in this chapter, shall have the meanings as defined in the Act, unless the context clearly indicates otherwise, or as such words and terms are further defined by this chapter.

...  
 "Group health benefits plan" means a health benefits plan covering at least one employee.

...  
 "Health benefits plan" means a hospital and medical expense insurance policy; health service corporation contract; hospital service corporation contract; medical service corporation contract; health maintenance organization subscriber contract; or other plan for medical care delivered or issued for delivery in this State. For purposes of this chapter, health benefits plan shall not include one or more, or any combination of, the following: coverage only for accident, or disability income insurance, or any combination thereof; coverage issued as a supplement to liability insurance; liability insurance, including general liability insurance and automobile liability insurance; stop loss or excess risk insurance; workers' compensation or similar insurance; automobile medical payment insurance; credit-only insurance; coverage for on-site medical clinics; and other similar insurance coverage, as specified in Federal regulations, under which benefits for medical care are secondary or incidental to other insurance benefits. Health benefits plans shall not include the following benefits if they are provided under a separate policy, certificate, or contract of insurance or are otherwise not an integral part of the plan: limited scope dental or vision benefits; benefits for long-term care, nursing home care, home health care, community-based care, or any combination thereof; and such other similar, limited benefits as are specified in Federal regulations. Health benefits plan shall not include hospital confinement indemnity coverage if the benefits are provided under a separate policy, certificate, or contract of insurance, there is no coordination between the provision of the benefits and any exclusion of benefits under any group health benefits plan maintained by the same plan sponsor, and those benefits are paid with respect to an event without regard to whether benefits are provided with respect to such an event under any group health plan maintained by the same plan sponsor. Health benefits plan shall not include the following if it is offered as a separate policy, certificate, or contract of insurance: Medicare supplemental health insurance as defined under section 1882(g)(1) of the Federal Social Security Act (42 U.S.C. § 1395ss(g)(1)); coverage supplemental to the coverage provided under Chapter 55 of Title 10, United States Code (10 U.S.C. §§ 1071 et seq.); and similar supplemental coverage provided to coverage under a group health plan. The term "health benefits plan" specifically includes:

1.-4. (No change.)

5. All prescription drug plans whether or not written on a stand-alone basis;

6.-7. (No change.)

...  
 "Hospital confinement indemnity coverage" means coverage that is provided on a stand-alone basis, contains no elimination period greater than three days, provides coverage for no less than 31 days during one