

SUBCHAPTER 17. DISCIPLINARY DETENTION

10A:31-17.4 Security checks

Security and visual observation checks in Disciplinary Detention shall take place in staggered and irregular intervals that are no more than 30 minutes apart.

10A:31-17.7 Correspondence, visits, and telephone calls

- (a)-(b) (No change.)
- (c) (No change in text.)

SUBCHAPTER 19. MAIL

10A:31-19.3 Processing mail

(a)-(b) (No change.)
 (c) Incoming correspondence will be delivered to the inmate within 24 hours after the correspondence has been received at the facility, excluding weekends and holidays and when precluded by an emergency incident.

10A:31-19.10 (Reserved)

SUBCHAPTER 20. VISITS

10A:31-20.3 Contact visits

An area shall be provided for contact visits, for those inmates who do not represent a substantial security risk, and the area shall meet the conditions set forth in N.J.A.C. 10A:31-3.14(f).

10A:31-20.4 Non-contact visits

An area shall be provided for non-contact visits, for those inmates classified as high risk inmates, and the area shall meet the conditions set forth in N.J.A.C. 10A:31-3.14(f).

10A:31-20.6 Registering and search of visitors

(a) (No change.)
 (b) Circumstances under which a visitor may be searched shall be specified in written visit regulations (N.J.A.C. 10A:31-20.1). The facility Administrator, or designee, should refer to N.J.A.C. 10A:18-6.14 when developing policies and procedures regarding searches of visitors.

10A:31-20.8 Special visits

- (a) (No change.)
- (b) Special visits may include, but are not limited to:
 - 1.-3. (No change.)
 - 4. Visits between inmates and:
 - i.-iv. (No change.)
 - v. Parole advisors;
 - vi. Foreign counsels; and
 - vii. Representatives of the media.

10A:31-20.9 (Reserved)

SUBCHAPTER 21. ADMISSION, SEARCH, ORIENTATION, PROPERTY CONTROL, AND RELEASE

10A:31-21.9 Disposition of property when an inmate is released from custody

(a) When an inmate is released from the adult county correctional facility, the inmate shall:

1. Take the personal property when leaving the correctional facility; or
2. Arrange for a family member(s) or friend(s) to pick up the personal property from the county correctional facility within 30 calendar days after the inmate's release.

(b) In circumstances where property remains at the facility or the inmate or designee fails to have the property removed within 30 calendar days of the inmate's release, correctional facility personnel shall forward written notification to the ex-inmate's last known address stating that:

1. The property will be held for a maximum of 30 additional calendar days;
2. The property will be disposed of if not removed by the specified date; and

3. The correctional facility is not responsible for property held longer than 60 days.

(c) If the written notification sent to the ex-inmate's last known address is not responded to within 30 calendar days, correctional facility personnel may dispose of the personal property by:

1. Donating the personal property to any recognized public charitable organization;
2. Retaining the personal property for use by the general inmate population, if the item(s) has been approved by the facility Administrator or designee; or
3. Destroying the personal property.

(d) The facility Administrator or designee shall approve any property that is to be donated or destroyed.

(e) Perishable items are subject to donation or being destroyed at any time when property is left at the facility and it creates a health hazard or pest control issue.

(f) Copies of written notices to the ex-inmate about personal property shall become a permanent part of the ex-inmate's record file.

SUBCHAPTER 22. CLASSIFICATION

10A:31-22.2 Classification and housing of inmates

(a) The classification and housing of inmates shall be based upon available space and either:

1. (No change.)
 2. The reception classification system, which shall be based upon the following factors regarding the inmate:
 - i. Gender;
 - ii.-xi. (No change.)
- (b)-(d) (No change.)

INSURANCE

(a)

DEPARTMENT OF BANKING AND INSURANCE OFFICE OF LIFE AND HEALTH

Actuarial Services

Minimum Reserve Standards for Individual and Group Health Insurance Contracts

Adopted Amendments: N.J.A.C. 11:4-6.1 and 6.2

Proposed: June 19, 2017, at 49 N.J.R. 1657(a).

Adopted: November 6, 2017, by Richard J. Badolato, Commissioner, Department of Banking and Insurance.

Filed: November 6, 2017, as R.2017 d.222, **with non-substantial changes** not requiring additional public notice and comment (see N.J.A.C. 1:30-6.3).

Authority: N.J.S.A. 17:1-8.1, 17:1-15.e, and 17B:19-5.

Effective Date: December 4, 2017.

Expiration Date: September 28, 2018.

Summary of Public Comment and Agency Response:

The Department of Banking and Insurance (Department) received a timely written comment from the American Council of Life Insurers (ACLI).

COMMENT: The commenter supported the proposed amendments and the Department's efforts to update the rules to reflect the recent adoption of the Valuation Manual, the new 2012 Long-Term Disability Income Valuation Table, and the new 2013 Individual Disability Income (IDI) Valuation Table. However, the commenter suggested changing some of the wording in proposed N.J.A.C. 11:4-6.1, Purpose and scope, as follows (commenter's recommended addition to the Department's proposal indicated in boldface **thus**; commenter's recommended deletions to the Department's proposal indicated in brackets [thus]):

"(a) This subchapter applies to all insurers authorized to write health insurance in this State. These standards apply to all individual and group health insurance coverages issued prior to

January 1, 2017. [Claim reserves] **Reserve standards** for such coverages issued prior to January 1, 2017, [for] **including** claims incurred on and after January 1, 2017 **on those policies**, shall follow the requirements in the NAIC Accounting Practices and Procedures Manual (APPM), Appendix A, A-010. [Claim reserves] **Reserve standards** for such coverages issued prior to January 1, 2017, for claims incurred prior to January 1, 2017, but which are still open claims on or after January 1, 2017, shall follow applicable requirements for such open claims in the APPM, Appendix A, A-010. For all such coverages issued on and after January 1, 2017, the standards and reserve requirements provided in the Valuation Manual shall apply. These standards do not apply to credit insurance.”

RESPONSE: The Department agrees and is changing the rule upon adoption as suggested by the commenter. The change made upon adoption does not expand the scope of the rules and more accurately reflects the original intent of the proposed amendments. As noted in the notice of proposal Summary, the intent of the proposed amendments is to utilize the national standard set forth in the APPM with respect to reserve standards in general. Moreover, this is consistent with the structure of the amendment to the purpose and scope of the subchapter, which applies to reserve standards in general, not only “claim reserves.”

Federal Standards Statement

A Federal standards analysis is not required because the adopted amendments are not subject to any Federal requirements or standards.

Full text of the adoption follows (additions to proposal indicated in boldface with asterisks ***thus***; deletions from proposal indicated in brackets with asterisks ***[thus]***):

SUBCHAPTER 6. MINIMUM RESERVE STANDARDS FOR INDIVIDUAL AND GROUP HEALTH INSURANCE CONTRACTS

11:4-6.1 Purpose and scope

(a) This subchapter applies to all insurers authorized to write health insurance in this State. These standards apply to all individual and group health insurance coverages issued prior to January 1, 2017. *[Claim reserves]* ***Reserve standards*** for such coverages issued prior to January 1, 2017, *[for]* ***including*** claims incurred on and after January 1, 2017, ***on those policies***, shall follow the requirements in the NAIC Accounting Practices and Procedures Manual (APPM), Appendix A, A-010. *[Claim reserves]* ***Reserve standards*** for such coverages issued prior to January 1, 2017, for claims incurred prior to January 1, 2017, but which are still open claims on or after January 1, 2017, shall follow applicable requirements for such open claims in the APPM, Appendix A, A-010. For all such coverages issued on and after January 1, 2017, the standards and reserve requirements provided in the Valuation Manual shall apply. These standards do not apply to credit insurance.

(b)-(g) (No change.)

11:4-6.2 Definitions

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

...

“Valuation Manual” means the manual of valuation instructions adopted by the National Association of Insurance Commissioners, as specified in N.J.S.A. 17B:19-1.1, 17B:19-2.1, 17B:19-11, 17B:19-12, 17B:19-13, and 17B:19-14 or as subsequently amended.

...

(a)

DEPARTMENT OF BANKING AND INSURANCE INDIVIDUAL HEALTH COVERAGE PROGRAM BOARD

Individual Health Coverage Program Individual Health Benefits Plans

Adopted Amendments: N.J.A.C. 11:20-1.2, 12.4, 24.2A, and 24.4 and 11:20 Appendix Exhibits A and B

Proposed: August 17, 2017 (see 49 N.J.R. 3093(a)).

Adopted: October 10, 2017, by the New Jersey Individual Health Coverage Program Board, Ellen DeRosa, Executive Director.

Filed: November 6, 2017, as R.2017 d.225, **with non-substantial changes** not requiring additional public notice and comment (see N.J.A.C. 1:30-6.3).

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

Effective Date: December 4, 2017.

Operative Date: January 1, 2018.

Expiration Date: May 12, 2018.

Summary of Hearing Officer Recommendations and Agency’s Responses:

The New Jersey Individual Health Coverage Program Board (IHC Board) held a hearing on Thursday, August 31, 2017, at 9:00 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 proposed amendments to the standard 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 came to the hearing. The hearing officer made no recommendations regarding the proposed amendments. 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 Comment and Agency Response:

The IHC Board accepted comments on the notice of proposal through September 6, 2017. **No comments were received.**

Summary of Agency-Initiated Changes:

Upon further review of the requirements of 45 CFR 155.420(d), the IHC Board noted that the triggering event associated with an NJ FamilyCare determination of ineligibility applies only if that determination is made after the open enrollment period or special enrollment period ends. On adoption, the IHC Board is changing item 7 of N.J.A.C. 11:20-1.2 and item 7 of N.J.A.C. 11:20-24.2A(b), as well as item g in the triggering event definition in N.J.A.C. 11:20 Appendix Exhibits A and B to include the qualification that the determination is made after the open enrollment period or special enrollment period ends.

The IHC Board notes that although the notice of proposal Summary described a number of amendments to the list of triggering events in N.J.A.C. 11:20-1.2 and 24.2A(b), as well as the definition of triggering event as it appears in N.J.A.C. 11:20 Appendix Exhibits A and B, the revisions were not consistently made in the Exhibits. On adoption, the IHC Board is correcting the triggering event definitions in N.J.A.C. 11:20 Appendix Exhibits A and B as follows:

- a) The missing word “carrier” is added to item j.
- b) The term “dependent” replaces the term “eligible person” in item k. (Exhibit B only)
- c) The reference to “state regulatory agency” is added to item l.

The IHC Board notes that although the notice of proposal Summary stated that the definition of virtual visit was being deleted, it was inadvertently retained in N.J.A.C. 11:20 Appendix Exhibit B. The definition is being deleted upon adoption.

The IHC Board determined that the following changes to N.J.A.C. 11:20 Appendix Exhibits A and B are necessary to better align with the requirements of P.L. 2017, c. 117: