

requirements as set forth at N.J.A.C. 1:30-5.1(c)4. Accordingly, a Federal standards analysis is not required.

Full text of the adoption follows:

OFFICE OF ADMINISTRATIVE LAW NOTE: The New Jersey Small Employer Health Benefits Program Board is adopting 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 adopted, are not published in this notice of adoption, 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

(a)

DEPARTMENT OF BANKING AND INSURANCE SMALL EMPLOYER HEALTH BENEFITS PROGRAM Small Employer Health Benefit Plans Adopted Amendments: N.J.A.C. 11:21 Appendix Exhibits F, G, W, and Y

Proposed: November 22, 2024 (see 57 N.J.R. 9(a)).

Adopted: December 18, 2024, by the New Jersey Small Employer Health Benefits Program Board, Margaret Koller, Chairperson.

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

Filed: December 18, 2024, as R.2025 d.015, **without change**.

Effective Date: December 18, 2024.

Expiration Date: September 11, 2030.

Summary of Hearing Officer's Recommendations and Agency Responses:

The New Jersey Small Employer Health Benefits Program Board (SEH Board) held a hearing on Monday, December 9, 2024, by Zoom, to receive testimony with respect to the health benefits plans set forth at N.J.A.C. 11:21 Appendix Exhibits F, G, W, and Y. Ava Rimal, Regulatory Officer, served as the hearing officer.

The hearing officer made no recommendations regarding the proposed amendments. The hearing record may be reviewed by contacting the New Jersey Small Employer Health Benefits Program Board, PO Box 325, Trenton, NJ 08625-0325.

Summary of Public Comments and Agency Responses:

No comments were received.

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 to the standard plan documents consistent with Chapters 105 and 275 do not implicate any Federal standards, therefore, a Federal standards analysis is not required. The proposed amendments to the standard plan documents consistent with Chapter 194 do not exceed Federal standards, but require carriers to meet the Federal standards set forth in the ACA. Accordingly, a Federal standards analysis is not required.

Full text of the adoption follows:

OFFICE OF ADMINISTRATIVE LAW NOTE: The New Jersey Small Employer Health Benefits Program Board is adopting 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 adopted, are not published in this notice of adoption, but may be reviewed by contacting:

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(b)

DEPARTMENT OF BANKING AND INSURANCE INDIVIDUAL HEALTH COVERAGE PROGRAM

Notice of Readoption Individual Health Coverage Program Health Benefits Plans

Readoption: N.J.A.C. 11:20

Authority: N.J.S.A. 17:1-8.1, 17:1-15.e, and 17B:27A-2 et seq.

Authorized By: Justin Zimmerman, Commissioner, Department of Banking and Insurance; Sandi Kelly, Chairperson, Individual Health Coverage Program.

Effective Date: December 12, 2024.

New Expiration Date: December 12, 2031.

Take notice that pursuant to N.J.S.A. 52:14B-5.1, the rules at N.J.A.C. 11:20 were scheduled to expire on January 12, 2025. The rules set forth in this chapter implement the Individual Health Coverage (IHC) Program pursuant to N.J.S.A. 17B:27A-2 et seq., the Individual Health Insurance Reform Act (the Act). Some of the subchapters within this chapter were promulgated by the Department of Banking and Insurance (Department), specifically N.J.A.C. 11:20-3A, 6, 7, 11, and 18 and chapter Appendices Exhibits E and J; the remainder of the subchapters were promulgated by the IHC Board, specifically, N.J.A.C. 11:20-1, 2, 3, 8, 12, 17, 19, 20, 23, and 24, and chapter Appendices Exhibits A through D and K.

The rules promulgated by the Department and N.J.A.C. 11:20-3A set forth the requirements and procedures by which carriers seeking to enter the individual plan market and carriers issuing plans in the individual plan market shall certify substantial compliance with provisions in the approved individual plans, as required pursuant to N.J.S.A. 17B:27A-7(d). N.J.A.C. 11:20-6 establishes informational rate filing requirements and procedures for members issuing or renewing individual health benefits plans pursuant to N.J.S.A. 17B:27A-9(d). N.J.A.C. 11:20-7 implements the loss ratio and refund reporting requirements pursuant to N.J.S.A. 17B:27A-9(e). N.J.A.C. 11:20-11 establishes the informational and procedural requirements for members requesting relief from obligations to pay assessments pursuant to N.J.S.A. 17B:27A-12(a)(3) (including assessments for IHC Program losses and administrative expenses), or to offer coverage or accept applications to provide a standard health benefits plan to eligible persons, pursuant to N.J.S.A. 17B:27A-8. N.J.A.C. 11:20-18 establishes the requirements and procedures by which carriers issuing plans pursuant to the Act may cease doing business in the individual plan market in this State. Additionally, this subchapter establishes the requirements and procedures by which carriers may cease issuing and renewing: all individual plans; a specific plan, by issuing the same plan through a different delivery mechanism; a specific plan option, by offering an alternative approved plan option; or a specific deductible/copayment option that is optional pursuant to N.J.A.C. 11:20-3.1.

In addition, the following appendices are applicable to N.J.A.C. 11:20-3A, 6, 7, 11, and 18: Appendix Exhibit E, Certification of Compliance with Individual Health Coverage Plans, referenced at N.J.A.C. 11:20-