

(b) A participating county must specify in its ordinance or resolution, the frequency of collection of the fee (for example, quarterly, monthly, biannually, etc.).

(c) The participating county must provide written notice of the fee amount to each participating hospital postmarked at least 20 days in advance of the due date or define the due date in its ordinance or resolution.

(d) Each participating hospital will pay the fee amount indicated by the county on the specified due date.

(e) Each participating county will provide for refunding of overpayments, or amounts otherwise in error, to the participating hospitals within 15 days of identifying the overpayment or error. The participating county shall specify in its ordinance or resolution the maximum time limit by which a hospital must identify overpayments or amounts otherwise in error.

(f) In the event the Department returns to the participating county any of the transferred funds, the participating county will refund the full amount returned by the Department to the participating hospitals based on the pro rata share of the total fees paid, within 15 days after receipt by the county of the funds from the Department.

10:52B-3.5 Penalties

A participating county may impose reasonable penalties or interest if an affected hospital fails to remit the full amount of the payment owed by the due date specified, not to exceed 1.5 percent of the outstanding payment amount per month. Any enforcement provision must be defined in the county’s ordinance or resolution enacting the Department-approved fee and expenditure reports and include provisions for written notice to the participating hospitals and intended use of the funds consistent with the purpose of this chapter.

10:52B-3.6 Appeal of assessment or enforcement action

(a) A participating county must specify a process for an appeal of the fee amount. The appeal shall be filed with the county within 15 days after the participating hospital receives notice of the fee amount due.

(b) A participating county must specify a process for an appeal of the decision to impose penalties and/or the amount of the penalties assessed pursuant to N.J.A.C. 10:52B-3.5.

(c) A hospital filing an appeal of either the amount of the fee or the penalty imposed by the county, or both, must provide any additional information requested by the county as part of the appeal process.

10:52B-3.7 Reports and access

(a) Participating counties, affected hospitals, and managed care organizations are required to retain supporting documents and shall provide access to and shall furnish such reports to the Department, without charge, as the Department may specify, in order for the Department to:

1. Determine the amount of increased funding required to be paid by the managed care organizations to the hospitals;
2. Verify that the managed care organization has calculated and paid the correct amount due; or
3. Respond to inquiries from governmental entities with oversight of the pilot program, including CMS.

(b) Information and records submitted to the Department under this section shall be used only for the purposes specified in this section.

(a)

OFFICE OF PROGRAM INTEGRITY AND ACCOUNTABILITY

**Notice of Readoption
Manual of Standards for Community Care Residences**

Readoption: N.J.A.C. 10:44B

Authority: N.J.S.A. 30:11B-1 et seq., specifically 30:11B-4.4.
 Authorized By: Carole Johnson, Commissioner, Department of Human Services.
 Effective Date: February 19, 2020.

New Expiration Date: February 19, 2027.

Take notice that this chapter, which was scheduled to expire on March 19, 2020, pursuant to N.J.S.A. 52:14B-5.1.c, is being readopted pursuant to the Administrative Procedure Act, N.J.S.A. 52:14B-1 et seq. This chapter contains the rules to establish minimum requirements for the provision of residential services to individuals with developmental disabilities residing in Community Care Residences.

The Department of Human Services (Department) recognizes that further rulemaking is necessary to update this chapter to be consistent with best practices and to include the provisions of the Fee for Services Initiative; the Centers for Medicare and Medicaid Services guidelines for funding; the Central Registry of Offenders Against Individuals with Developmental Disabilities (N.J.S.A. 30:4D-77); P.L. 2017 c. 328 (an act concerning background checks and licensing of certain entities); Stephen Komminos’ Law (P.L. 2017 c. 238); and updated organizational changes. To that end, the Department is preparing a rulemaking with substantive amendments to be published in a future issue of the New Jersey Register.

The Department has reviewed the rules and has determined them to be necessary, reasonable, and proper for the purposes for which they were originally promulgated. The rules set minimum requirements that are necessary to implement the Department’s statutory mandate to license Community Care Residences for individuals with developmental disabilities. In accordance with N.J.S.A. 52:14B-5.1.c(1), these rules should be readopted and continue in effect for a seven-year period (and as anticipated to be revised).

The following are summaries of the subchapters of N.J.A.C. 10:44B:

Subchapter 1, General Provisions, provides the purpose and scope of the chapter which is to protect the health, safety, welfare, and rights of individuals with developmental disabilities when living in community care residences. Terms used throughout the chapter are defined. The subchapter also includes rules for licensing, including inspection, as well as negative licensing actions, such as: denial, suspension, or revocation due to non-compliance with State and/or Federal laws that govern community care residences.

Subchapter 2, Management of the Residence, includes rules that detail the requirements for licensees, the process and boundaries for the placement and departure of a community care resident, the requirements regarding an alternate who will assume the role and responsibility of a community care residence when the licensee is absent, as well as the licensee’s reporting/disclosure requirements including, but not limited to: mistreatment, hospitalization, death, police activity in the residence, changes to the contact information of the residence, and/or whether the licensee has plans to voluntarily discontinue operation of a community care residence.

Subchapter 2A, Records, includes rules setting forth the requirements for maintaining licensee records that must be kept at the residence, as well as the documentation, maintenance, and confidentiality requirements for the records of the community care residents.

Subchapter 3, Care of the Individual, provides rules to ensure individuals in community residences are not prohibited from exercising their human, legal, and civil rights and that they are provided information about their rights. This subchapter also includes rules governing the community care resident’s personal funds, health, and hygiene, as well as the provision of food and clothing.

Subchapter 4, Habilitation, includes rules that provide the requirements for service plans developed for each community care individual by the interdisciplinary team, as well as guidance for daily activities, such as education, employment, rehabilitation, and/or chores in the home.

Subchapter 5, Health Services, sets forth requirements for medical and health care including requirements that individuals in the community care residences have appropriate medical providers (that is, doctors, advance practice nurses, dentists, etc.), have had the appropriate medical screening exams and keep up with necessary follow ups, as well as the compliance with the requirement for the residence to have a first aid kit available on-site. This subsection also provides requirements for medication including administration when the IDT and service plan state that the individual cannot take their medication on their own, storage, and documentation and recordkeeping.

Subchapter 6, Physical Plant and Safety, provides rules that govern the physical exterior and interior maintenance of the residence, as well as the safety requirements for the residence and any vehicles used by licensees to transport community care residents.

LAW AND PUBLIC SAFETY

(a)

DIVISION OF CONSUMER AFFAIRS
STATE BOARD OF MARRIAGE AND FAMILY THERAPY EXAMINERS
Licensed Associate Marriage and Family Therapist Rules; Continuing Education; Professional Misconduct

Adopted Amendments: N.J.A.C. 13:34-1.1, 1.8, 2, 3.1, 3.3, 3.4, 4.3, 5.1, 5.2, 6.1, 6.7, 7.1, 9.3, 9.4, 9.5, and 9A

Adopted New Rules: N.J.A.C. 13:34-2.2, 2.7, and 5.2A

Adopted Repeal: N.J.A.C. 13:34-3.2

Proposed: August 19, 2019, at 51 N.J.R. 1337(a).
Adopted: November 14, 2019, by the State Board of Marriage and Family Therapy Examiners, Lorraine M. Barry, Ed.S., President.
Filed: February 19, 2020, as R.2020 d.034, 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. 45:8B-13; and P.L. 2017, c. 341 and P.L. 2017, c. 350.

Effective Date: March 16, 2020.
Expiration Date: March 3, 2024.

Summary of Public Comment and Agency Response:
The official comment period ended on October 18, 2019. No comments were received.

Federal Standards Statement

A Federal standards analysis is not required because the adopted amendments, repeal, and new rules are governed by N.J.S.A. 45:8B-1 et seq., and 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 1. GENERAL PROVISIONS

- 13:34-1.1 License fees and charges
(a) There shall be paid to the State Board of Marriage and Family Therapy Examiners the following fees:
1. (No change.)
2. Initial license fee
i. Marriage and family therapist
Recodify existing i.-ii. as (1)-(2) (No change in text.)
ii. Associate marriage and family therapist
(1) If paid during the first year of a biennial renewal period.....\$180.00
(2) If paid during the second year of a biennial renewal period.....\$90.00
3. (Reserved)
4. (No change.)
5. (Reserved)
6. License renewal fee, biennial
i. Marriage and family therapist.....\$250.00
ii. Associate marriage and family therapist.....\$180.00
7.-11. (No change.)

- 13:34-1.8 Notification of address; service of process; notification of disciplinary action
(a) A licensee shall notify the Board in writing within 30 days of any change in the address of record and shall specify whether the address is a residence or an employment address.
(b) Service of an administrative complaint or other process initiated by the Board, the Attorney General, or the Division of Consumer Affairs at the address of record shall be deemed adequate notice for the commencement of any inquiry or disciplinary proceeding.
(c) (No change.)
(d) For purposes of this section, "address of record" means an address designated by a licensee that is part of the public record and may be disclosed upon request. "Address of record" may be a licensee's home, business, or mailing address, but shall not be a post office box, unless the licensee also provides another address that includes a street, city, state, and zip code.

SUBCHAPTER 2. REQUIREMENTS FOR LICENSURE; APPLICATION PROCEDURES

- 13:34-2.1 Marriage and family therapist: requirements for licensure; licensure procedure
(a)-(e) (No change.)
13:34-2.2 Associate marriage and family therapist: requirements for licensure; licensure procedure
(a) An applicant for licensure as a practicing associate marriage and family therapist shall satisfy the following requirements:
1. The applicant shall be at least 21 years of age;
2. The applicant shall submit a completed application for licensure;
3. The applicant shall submit evidence of good moral character, which shall be an ongoing requirement for licensure;
4. The applicant shall not be engaged in any practice or conduct upon which the Board shall have grounds to refuse to issue, suspend, or revoke a license that it issues pursuant to N.J.S.A. 45:1-21 et seq.;
5. The applicant shall have satisfied the educational requirements set forth in N.J.A.C. 13:34-2.3. An official transcript documenting satisfaction of the educational requirements shall be sent to the Board directly from the accredited institution and shall indicate the degree awarded, the applicant's field of study, and the specific courses completed toward the degree;
6. The applicant shall submit a clinical marriage and family therapy plan of supervision, which shall include a detailed job description and the location(s) where client contact and supervision will occur;
7. The applicant shall submit the supervisor's resume or curriculum vitae, which shall document that the supervisor has no less than five full-time years of professional marriage and family therapy practice experience or the equivalent and holds either a current, active New Jersey license to practice as a marriage and family therapist or has satisfied the educational requirements set forth in N.J.A.C. 13:34-2.4;
8. The applicant shall submit a Certification and Authorization Form for a Criminal History Background Check; and
9. The applicant shall submit the application fee set forth at N.J.A.C. 13:34-1.1.
(b) An applicant for licensure shall submit the licensing fee set forth at N.J.A.C. 13:34-1.1 upon receipt of notification from the Board that his or her application for licensure has been approved.
(c) An application shall be deemed abandoned and closed if the application has not been completed by the applicant within 12 months after it was received by the Board.
(d) An application submitted subsequent to the abandonment of a prior application shall be treated as a new application and shall comply with the requirements of (a) above.
(e) Pursuant to N.J.S.A. 45:8B-18.1, an associate marriage and family therapist license shall be renewed no more than two times.
13:34-2.3 Educational requirements for licensure
(a) (No change.)
(b) An applicant for licensure shall complete a minimum of:
1. Eight courses from Areas I, II, and III as specified in (c) below;
2. (No change.)