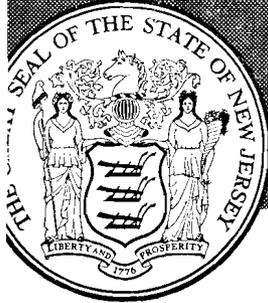


NEW JERSEY REGISTER



THE STATE'S OFFICIAL MONTHLY RULES PUBLICATION

BRENDAN T. BYRNE, Governor

Howard H. Kestin, Director, Office of Administrative Law

G. Duncan Fletcher, Director of Administrative Procedure

Peter J. Gorman, Rules Analyst

VOLUME 12 • NUMBER 1
Jan. 10, 1980 • Indexed 12 N.J.R. 1-60
(Includes rules filed through December 14, 1979)

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NOTICES OF RULE-MAKING ACTIVITIES OF STATE AGENCIES

(a)

AGRICULTURE

STATE BOARD OF AGRICULTURE

Proposed Amendments Concerning Bond Requirements

The State Board of Agriculture in the Department of Agriculture, pursuant to authority of N.J.S.A. 4:11-20 and 4:11-33.1, proposes to amend N.J.A.C. 2:72-1.1 concerning bond requirements.

Full text of the proposal follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

2:72-1.1 Bond requirement

The bond required in Title 4, Chapter 11, Article 2, Section 20 of the Revised Statutes shall be equal to the maximum [monthly] calendar month purchases multiplied by the number of days before payment is made on those purchases divided by 30.

Interested persons may present statements or arguments in writing relevant to the proposed action on or before January 30, 1980 to:

Kathryn A. Clark
Chief, Hearings and Administrative Practices
N.J. Department of Agriculture
Health-Agriculture Building
John Fitch Plaza
Trenton, N.J. 08625

The State Board of Agriculture may thereafter adopt rules concerning this subject without further notice.

Phillip Alampi
Secretary of Agriculture
Secretary, State Board of Agriculture

(b)

BANKING

THE COMMISSIONER

Proposed Rules on Advertising By Financial Institutions

Angelo R. Bianchi, Commissioner of Banking, pursuant

to authority of N.J.S.A. 17:16H-1 et seq., proposes to adopt new rules concerning advertising by financial institutions subject to supervision, regulation or licensing by the Department of Banking.

Full text of the proposal follows.

SUBCHAPTER 1 ADVERTISING BY FINANCIAL INSTITUTIONS

3:2-1.1 Authority scope and enforcement

(a) This regulation is promulgated pursuant to the provisions of chapter 193, Public Laws of 1979. This regulation applies to financial institutions subject to supervision, regulation or licensing by the Department of Banking.

(b) Compliance with this regulation and chapter 193, Public Laws of 1979 shall be enforced by the Commissioner of Banking of the State of New Jersey.

3:2-1.2 Definitions

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

"Act" means chapter 193, Public Laws of 1979, approved September 13, 1979. (N.J.S.A. 17:16H-1 et seq.)

"Disclaimer" means any statement in any advertisement which affects, limits or in any way modifies the offer that is the subject of the advertisement.

"Financial institution" means any bank, savings bank, state association, credit union, secondary mortgage lender, small loan company, or any other institution, corporation, partnership or individual subject to the supervision, regulation or licensing by the Department of Banking.

"Advertisement" means any announcement, statement, assertion or representation which is placed before the public in a newspaper, magazine, or other publication or in the form of a notice, circular, pamphlet, letter or poster or over any radio or television station or in any other way.

3:2-1.3 Disclosure of interest rates

(a) The advertising by a financial institution of maximum interest rates and yield on certificates of deposit must comply with the advertising rules established by either the Federal Home Loan Bank Board or Federal Deposit Insurance Corporation, whichever is applicable.

(b) All gift offerings must fully disclose whether the gift is in lieu of, in addition to, or in reduction of interest otherwise payable to the account.

NEW JERSEY REGISTER

The official publication containing notices of proposed rules and rules adopted by State agencies pursuant to the New Jersey Constitution, Art. V, Sec. IV, Para. 6 and the Administrative Procedure Act, N.J.S.A. 52:14B-1 et seq. Issued monthly since September, 1969.

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The New Jersey Register (USPS 442-950) is published the first Thursday after the first Monday of each month by the Division of Administrative Procedure of the Office of Administrative Law, 10 North Stockton Street, Trenton, New Jersey 08608. Telephone: (609) 292-6060. Subscriptions, payable in advance, are one year, \$15.00, monthly back issues when available, \$1.50. Make checks payable to: Division of Administrative Procedure.

Controlled Circulation Postage paid at Trenton, New Jersey.

POSTMASTER: Send address changes to: New Jersey Register, 10 North Stockton Street, Trenton, New Jersey 08608.

The NEW JERSEY ADMINISTRATIVE CODE is published on a continuing basis by the same Division. Subscription rates for this 29-volume, regularly-updated set of all State administrative rules are available on request. The Code is sold either in the full set or in one to three volumes depending on the Departmental coverage desired.

3:2-1.4 Violations of the Act

No financial institution shall make, publish, disseminate, circulate, or place before the public, or cause directly or indirectly, to be made, published, disseminated, circulated, or placed before the public, in a newspaper, magazine or other publication, or in the form of a notice, circular, pamphlet, letter or poster, or over any radio or television station, or in any other way, an advertisement, announcement or statement containing any assertion, representation or statement with respect to the business of banking, lending or being a financial institution or with respect to any person in the conduct of such business, which is inaccurate, untrue, deceptive or misleading, or which negatively affects the public's confidence in such financial institution or financial institutions in general.

3:2-1.5 Cease and desist order; grounds; content; hearing; service

(a) If it appears to the commissioner, based upon his examination of the advertisement of a financial institution, that the financial institution is in violation of the Act or N.J.A.C. 3:2-1.4, he shall order such financial institution to show cause why a cease and desist order should not be issued.

(b) The order to show cause shall be returnable in not less than 20 days from the date of service hereof. The order to show cause shall contain:

1. A statement that the financial institution may request a hearing before an administrative law judge;
2. A reference to the particular section of the statute or rule charged to have been violated;
3. A short and plain statement of the facts giving rise to the alleged statutory or rule violation.

(c) Service of the order to show cause shall be made by certified mail, return receipt requested.

3:2-1.6 Hearings

Upon notification of a request for a hearing by a financial institution in response to an order to show cause issued pursuant to section 3:2-1.5 hereof, the commissioner shall file with the clerk of the Office of Administrative Law the order to show cause and the transmittal form as required. An administrative hearing will then be conducted pursuant to the procedures established for the Office of Administrative Law.

3:2-1.7 Continued violation of Act; penalty

A financial institution which continues to violate the provisions of section 3:2-1.4 hereof after being ordered by the Commissioner to cease such practices shall be subject to a penalty not to exceed \$500 for each violation.

3:2-1.8 Disclaimer; size of type

Any disclaimer shall be printed in not less than ten point type.

3:2-1.9 Administrative Procedure Act

Except as otherwise provided in the Act and these regulations, the procedures followed by the commissioner shall conform to the Administrative Procedure Act (N.J. S.A. 52:14B-1 et seq.).

Interested persons may present statements or arguments in writing relevant to the proposed action on or before January 30, 1980 to:

Adrenee G. Freeman
Deputy Commissioner
Division of Consumer Complaints,
Legal and Economic Research
Department of Banking
P.O. Box CN 040
Trenton, N.J. 08625

The Department of Banking may thereafter adopt rules concerning this subject without further notice.

Angelo R. Bianchi
Commissioner
Department of Banking

(a)

CIVIL SERVICE

CIVIL SERVICE COMMISSION

Amendments to State Service Personnel Manual Concerning Sick Leave Injury Benefits

On November 8, 1979, the New Jersey Civil Service Commission, pursuant to authority of N.J.S.A. 11:5-1 et seq. and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments to subparts 17:9.103, 17:9-104 and 17:9-105 in the Civil Service Personnel Manual (State Service) concerning sick leave injury benefits.

Full text of the adoption follows.

17-9.103 Sick leave injury benefits: procedures at departmental leave

17-9.103a Subject:

This subpart sets forth the procedures to be followed by individuals in filing requests for sick leave injury benefits and by appointing authorities in reviewing and passing upon those requests.

17-9.103b Procedures:

1. The employee shall report any injury or illness which s/he claims is the result of or arising from the employment to his/her supervisor at the time the injury/illness occurs or is discovered, or as soon thereafter as possible.

2. Where the employee wishes to receive sick leave injury benefits, s/he shall file a report with the appointing authority on the injury or illness which contains a statement of when, where and how the illness or injury occurred, as well as statements of any witnesses to the incident and copies of existing medical reports on the injury/illness, within 5 days of the injury/illness or as soon thereafter as is possible.

3. The appointing authority shall promptly review the request for sick leave injury benefits and, when it determines that the injury/illness is compensable, forward its recommendation for sick leave injury benefits to the Department of Civil Service for its review. Where the appointing authority determines the injury/illness is not compensable, the appointing authority shall so advise the appellant in writing, listing the reasons for its determination. The appointing authority must complete its review of the request for sick leave injury benefits within 20 days of receipt of that request. Where additional medical reports are necessary, the appointing authority may require that the employee be examined by a physician of its own choice. Where appropriate circumstances exist, extensions of time for reviewing the SLI request may be permitted.

4. When the appointing authority determines not to recommend sick leave injury benefits for the employee, or where the Department of Civil Service notifies the appointing authority that it has denied its request for benefits, the appointing authority shall so advise the employee. The appointing authority shall further advise the employee that this determination may be appealed within twenty days of receipt of notification of denial to:

Civil Service Commission
c/o Division of Administrative
Practices and Labor Relations
215 East State Street
Trenton, New Jersey 08625

5. In arriving at its determination to recommend or deny sick leave injury benefits, the appointing authority shall be governed by the standards established by C.S.P.M. 17-9.104.

Subpart 17-9.104 Sick leave injury benefits: standards

17-9.104a Subject:

This subpart sets forth the standards to be applied in determining whether sick leave injury benefits (SLI) should be granted to an employee. In particular, these standards strictly limit the definition of work relatedness for purposes of determining sick leave injury benefits.

17-9.104b Standards:

1. Causation: The employee's disability must be an injury or illness resulting from, or arising from, the employment.

(a) Injuries which would clearly not have occurred but for a specific work-related accident or a condition of employment are compensable.

(b) Pre-existing physical illnesses, diseases or defects aggravated by the employment shall not be compensable where such aggravated injury was a condition of the job that was foreseeable by the employees.

(c) Psychological or psychiatric illness shall not be compensable, except where such illness may be traced to a specific work-related accident or occurrence which traumatized the employee, thereby creating the illness, and the claim is supported by medical documentation.

(d) Illnesses such as heart disorder, not clearly caused by the employment or the work environment are not compensable.

2. Physical area: Any accident resulting in injury for which the employee seeks compensation must occur on the work premises.

(a) Work premises shall be defined as the physical area of operation of the employer, e.g. hospital and hospital grounds, building and parking facilities provided by the State for the benefit of its employees, etc.

(b) The employee shall be compensated for any injury which occurs off the normal work premises while he or she is clearly acting within the scope of the employment.

3. Time: For an injury to be compensable, it must occur during the employee's normal working hours or during approved overtime hours.

4. Burden of proof: In all cases, the burden of proof is on the employee.

17-9.105 Sick leave injury benefits: appeal procedures

17-9.105a Subject:

This subpart will detail the procedures to be followed where denial of sick leave injury benefits is appealed by the employee, or where either the employee or the appointing authority appeals the disapproval by the Department of Civil Service of the employer's recommendation that sick leave injury benefits be granted.

17-9.105b Appeal rights

An employee may appeal the denial of sick leave injury benefits by his/her appointing authority to the Civil Service Commission within 20 days of notification of the denial. Either the appointing authority or the employee may appeal the disapproval of sick leave injury benefits by the Department of Civil Service to the Civil Service

Commission through the Division of Administrative Practices and Labor Relations within 20 days of final notification of denial. Appeals should be sent to:

Department of Civil Service
Division of Administrative Practices
and Labor Relations
215 East State Street
Trenton, New Jersey 08625

17-9.105c Procedures:

1. Letters of appeal must contain detailed background information on the incident causing the injury or illness, including the relationship of the injury or illness to the employee's job, the nature and extent of the injury or illness, supporting documentation including doctors' certificates and other medical records, time off from work as a result of the injury or illness, the specific relief sought, statements of witnesses to the injury and a copy of the formal notice of denial or disapproval.

2. All parties shall be notified by letter that the matter is being treated as a sick leave injury appeal, and that the opportunity to inspect and supplement the file is available for a period of 20 days following receipt of that letter.

3. The appointing authority shall be required to submit all information used to arrive at its recommendation within 20 days of notification that an appeal is being processed, including the following:

(a) All personal injury reports.

(b) A record of the injured employee's lost time.

(c) An explanation of the incident, in detail.

(d) An explanation of why the appointing authority determined the incident was not related to work.

(e) Any doctor's certificates which were submitted.

(f) Any statements from doctors on job relatedness.

4. Upon receipt of the preceding information, the Chief Examiner and Secretary will either:

(a) Forward the appeal to the Civil Service Commission for a review of the written record to determine the job relatedness and compensability of the injury, or

(b) Where a dispute of material fact is present, forward the appeal to the Civil Service Commission recommending a hearing, or

(c) Where it is necessary to determine the probable extent of the injury and its cause, schedule a review before the Civil Service Medical Examiners Board.

1) The appellant will be notified of the review date. Any necessary additional physical examinations will be conducted by a member of the Board prior to the time of the review. In cases where the Civil Service Medical Examiners Board determines that additional medical examinations or laboratory tests are required, the member of the Board examining the appellant may authorize such tests. The cost of such tests shall be absorbed by the Department of Civil Service.

2) The report and recommendation of the Civil Service Medical Examiners Board will be submitted within 10 days after the review.

3) Copies of the report and recommendation will be forwarded to the appellant and the appointing authority.

(4) Exceptions may be filed within 10 days of receipt of the report and recommendation.

5) The report and recommendation and any exceptions filed will be submitted to the Civil Service Commission for review and final administrative determination.

17-9.105d Burden of proof

The burden shall be on the appellant to show by a preponderance of the evidence that denial of sick leave

injury benefits for the injury or illness in question was improper.

An order adopting these amendments was filed and became effective on November 16, 1979 as R.1979 d.455 (Exempt, Procedure Rule). Take notice that these amendments are not subject to codification and will not appear in Title 4 of the New Jersey Administrative Code.

Howard H. Kestin
Director
Office of Administrative Law

(a)

CIVIL SERVICE

CIVIL SERVICE COMMISSION

Amendments to State Service Personnel Manual Concerning Duration of Eligible Lists

On October 23, 1979, the New Jersey Civil Service Commission, pursuant to authority of N.J.S.A. 11:5-1(a) and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments to subpart 11-4.101 of the Civil Service Personnel Manual (State Service) concerning the duration of eligible lists.

Full text of the adoption follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

Subpart 11-4.101 Duration of employment lists resulting from promotional procedures

11-4.101a Subject:

This subpart specifies the Civil Service Commission regulations regarding the period for promulgation of promotional employment lists in State service.

11-4.101b Requirements:

1. All promotional employment lists for State service promulgated subsequent to October 7, 1975, shall have a duration of three [two] years from the date of promulgation.

An order adopting these amendments was filed and became effective on November 16, 1979 as R.1979 d.456 (Exempt, Procedure Rule). Take notice that these amendments are not subject to codification and will not appear in Title 4 of the New Jersey Administrative Code.

Howard H. Kestin
Director
Office of Administrative Law

(b)

COMMUNITY AFFAIRS

THE COMMISSIONER

Proposed Redoption of Current Rules On Tax Abatement on Added Assessments

Joseph A. LeFante, Commissioner of Community Affairs, pursuant to authority of N.J.S.A. 54:4-3.72 et seq., proposes to readopt verbatim N.J.A.C. 5:22 concerning tax abatement on added assessments for improvements to dwellings more than 20 years old and municipal appeal to the Commissioner for a declaration establishing municipal qualification for such a program.

Unless readopted, these rules will expire on April 1, 1980.

Copies of the full text of this proposal may be found in the New Jersey Administrative Code in chapter 22 in title 5 therein.

Interested persons may present statements or arguments in writing relevant to the proposed actions on or before January 30, 1980 to:

James R. Jager
Supervising Program Development Specialist
Department of Community Affairs
Box 2768
Trenton, New Jersey 08625

The Department of Community Affairs may thereafter adopt rules concerning this subject without further notice.

Joseph A. LeFante
Commissioner
Department of Community Affairs

(c)

EDUCATION

STATE BOARD OF EDUCATION

Proposed Amendments on County Substitute Certificate

The State Board of Education, pursuant to authority of N.J.S.A. 18A:6-38, proposes to amend N.J.A.C. 6:11-4.7, concerning rules on the issuance of a county substitute certificate.

The proposed amendments would permit a district to employ the holder of a regular New Jersey certificate as a substitute teacher, and such person would not need to pay the \$20 fee for the county substitute certificate. The proposal would also require a district to record such certification with the Office of the County Superintendent of Schools.

Full text of the proposed amendments follows (additions indicated in boldface thus; deletions indicated in brackets [thus]):

6:11-4.7 County substitute certificate

(a) Persons who do not hold a [teaching] regular or permanent instructional certificate issued by the State Board of Examiners [and who are not eligible to receive one], but who can present a minimum of 60 semester-hour credits completed in an accredited college, may be granted a county substitute certificate for day-to-day substitute teaching in the county which grants the certificate.

(b) Each local board of education shall submit to the county superintendent for review and approval, each applicant's official transcripts, oath of allegiance, and credentials, together with a statement that such a person would be employed on an emergency basis as the supply of regularly certificated teachers is inadequate to staff the school.

(c) The certificate will be issued for a three-year period, but the holder may serve for no more than 20 consecutive days in the same position in one school district during the school year. Such certificates, which are issued by the county superintendent of schools, are designed only for emergency purposes when the supply of properly certificated substitutes is inadequate to staff the school. They carry none of the accrued benefits, such as pension and tenure, to which a regularly employed teacher is

entitled, and are intended only for persons temporarily performing the duties of a fully certificated and regularly employed teacher.

(d) For specific vocational-technical skills, a vocational county substitute certificate may be issued to an applicant on the basis of appropriate work experience in lieu of 60 semester-hour college credits. Such work experience shall be substantiated by a notarized statement of previous employment.

(e) Applicants for the county substitute teaching certificate shall submit with transcripts and credentials, the appropriate fee in accordance with N.J.S.A. 18A:6-38.

(f) Persons who hold a regular or permanent New Jersey instructional certificate issued by the State Board of Examiners may serve as a day-to-day substitute in areas outside the scope of this certificate, for no more than 20 consecutive days in the same position in one school district during the school year. A substitute certificate will not be needed for this service. Such service will carry none of the accrued benefits, such as pension and tenure, to which a regularly employed teacher is entitled.

(g) The holders of a regular teaching certificate who is to be employed by a local district as a substitute teacher must record such certification with the Office of the County Superintendent of Schools prior to employment in accordance with N.J.A.C. 6:11-3.1.

Interested persons may present statements or arguments in writing relevant to the proposed action on or before January 30, 1980 to:

Lorraine L. Colavita
Executive Assistant for Administrative
Practice and Procedure
Department of Education
225 West State Street
Trenton, New Jersey 08625

The State Board of Education may thereafter adopt these revisions substantially as proposed without further notice.

Fred G. Burke
Commissioner of Education
Secretary, State Board of Education

(a)

EDUCATION

STATE BOARD OF EDUCATION

**Amendments on Qualifications, Debarment,
Suspension and Disqualification of
Person(s) Concerning Contract Administration**

On December 5, 1979, Fred G. Burke, Commissioner of Education and Secretary of the State Board of Education, pursuant to authority of N.J.S.A. 18A:18A-27, Executive Order No. 34 (1976) and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments to N.J.A.C. 6:20-7 concerning the qualifications, debarment, suspension and disqualification of person(s) concerning contract administration as proposed in the Notice published October 4, 1979, at 11 N.J.R. 498(b).

An order adopting these amendments was filed and became effective on December 7, 1979 as R.1979 d.478.

Howard H. Kestin
Director
Office of Administrative Law

(b)

EDUCATION

STATE BOARD OF EDUCATION

**Emergency Rules on Additional
State School Building Aid**

On December 5, 1979, the State Board of Education, pursuant to authority of N.J.S.A. 18A:58-33.39 and in accordance with applicable provisions of the Administrative Procedure Act, adopted emergency rules concerning additional State school building aid.

Full text of the adoption follows.

6:20-5.4 Additional State school building aid

(a) Local boards of education receiving entitlements in accordance with the provisions of N.J.S.A. 18A:58-33.22 et seq., must establish a separate bank account to disburse moneys for projects approved under the provisions of this Act. All proceeds of financing must be deposited initially in the account established for this purpose. Monthly bank statements must be submitted to the Division of Finance and Regulatory Services.

(b) If temporary financing is used for additional vocational facilities for the handicapped, State aid will be paid based upon a pro rata share of the debt service in accordance with N.J.S.A. 18A:58-33.24.

(c) Local boards of education must expend the district's portion of the cost of approved projects first, except for additional vocational facilities for the handicapped.

(d) Local boards of education must use temporary financing, only as required, after a request to temporarily finance the funds has been submitted to and approved by the Commissioner of Education.

(e) Proceeds of bonds sold subject to the provisions of N.J.S.A. 18A:58-33.22 et seq., which are not immediately required, must be invested and the earnings returned to the State on or before January 10 of each year. Investments must be made in the State of New Jersey Cash Management Fund pursuant to N.J.S.A. 52:18A-90.4.

(f) Local boards of education must submit a report to the Division of Finance and Regulatory Services by July 10 of each year listing any additional temporary financing, bonds sold, investments and interest earned from investments during the preceding six months.

(g) Local boards of education must submit a report to the Division of Finance and Regulatory Services on or before January 10 of each year showing a schedule by month of anticipated cash requirements for the following year and listing any additional temporary financing, bonds sold, investments and interest earned from investments during the preceding six months. Districts will refund interest earned from the investment of funds during the preceding year when such report is filed.

(h) Local boards of education must submit annual reports concerning construction progress until such time as the facilities are completed and occupied and comply with the requirements of N.J.A.C. 6:22-1.1 et seq.

(i) Local boards of education shall return all balances remaining after the completion of the approved project, if such project was funded exclusively with State funds.

An order adopting these rules was filed and became effective on December 7, 1979 as R.1979 d.479 (Exempt, Emergency Rule).

Howard H. Kestin
Director
Office of Administrative Law

(a)

EDUCATION

STATE BOARD OF EDUCATION

Rules on Evaluation of Tenured Chief School Administrators

On December 5, 1979, Fred G. Burke, Commissioner of Education and Secretary of the State Board of Education, pursuant to authority of N.J.S.A. 18A:4-15, 18A:6-10 et seq., 18A:7A-1 et seq., 18A:29-14 and in accordance with applicable provisions of the Administrative Procedure Act, adopted new rules, to be cited as N.J.A.C. 6:3-1.22, concerning the evaluation of tenured chief school administrators substantially as proposed in the Notice published November 8, 1979, at 11 N.J.R. 536(b) but with subsequent, substantive changes not detrimental to the public in the opinion of the Department of Education.

An order adopting these rules was filed and became effective on December 7, 1979 as R.1979 d.480. Take notice that these rules shall become operational on September 1, 1980.

Howard H. Kestin
Director
Office of Administrative Law

(b)

ENVIRONMENTAL PROTECTION

THE COMMISSIONER

Proposed Rules on Motor Vehicles Using Ice-Covered Waters

Jerry Fitzgerald English, Commissioner of Environmental Protection, pursuant to authority of N.J.S.A. 12:7E-1 et seq., proposes to adopt new rules, known within the Department of Environmental Protection as Docket No. DEP 057-79-11, concerning motor vehicles using ice-covered waters.

Full text of the proposal follows.

SUBCHAPTER 8. MOTOR VEHICLES ON ICE-COVERED WATERS

7:6-8.1 Scope

The following rules shall govern the operation of motor vehicles on ice-covered waters of New Jersey.

7:6-8.2 Definition of snowmobile

"Snowmobile" means any motor vehicle designed primarily to travel over ice or snow, of a type which uses sled-type runners, skis, an endless belt, tread, cleats, or any combination of these or other similar means of contact with the surface upon which it is operated, but does not include any farm tractor, highway, or other construction equipment, or any military vehicle.

7:6-8.3 Prohibited operation

No person shall operate a motor vehicle, other than a snowmobile, upon the ice-covered waters of the State at any time.

7:6-8.4 Violations

Violations of these regulations shall be subject to penalties as provided by N.J.S.A. 12:7-34.51.

Interested persons may present statements or arguments in writing relevant to the proposed action on or before January 30, 1980 to:

David N. Kinsey
Director, Division of Coastal Resources
N.J. Department of Environmental Protection
P.O. Box 1889
Trenton, N.J. 08625

The Department of Environmental Protection may thereafter adopt rules concerning this subject without further notice.

Jerry Fitzgerald English
Commissioner
Department of Environmental Protection

(c)

ENVIRONMENTAL PROTECTION

THE COMMISSIONER

Proposed Rules Concerning Wastewater Treatment Report

Jerry Fitzgerald English, Commissioner of Environmental Protection, pursuant to authority of N.J.S.A. 13:1D-1 et seq. and 58:10A-1 et seq., proposes to adopt new rules concerning the wastewater treatment report.

This rule confirms an existing procedure of the Construction Grants Administration within the Division of Water Resources. This procedure requires a person, with a license to operate a wastewater treatment plant, to furnish the Department with all applicable data as required on the monthly Wastewater Treatment Report provided for that particular plant.

Full text of the proposed rules follows.

7:14-2.26 Wastewater treatment report

It shall be the duty of the persons authorized to be in charge of and holding the licenses to operate wastewater treatment plants to furnish the department, on or before the tenth day of the month following the one which the report is made and upon forms provided by the department for that purpose, a monthly wastewater treatment report describing the operation of wastewater treatment plants. The wastewater treatment report shall include all the applicable data required on the stated form as provided for that particular plant.

Interested persons may present statements or arguments in writing relevant to the proposed action on or before January 30, 1980 to:

Office of the Commissioner
Administrative Practice Officer
N.J. Department of Environmental Protection
P.O. Box 1390
Trenton, N.J. 08625

The Department of Environmental Protection may thereafter adopt rules concerning this subject without further notice.

Jerry Fitzgerald English
Commissioner
Department of Environmental Protection

(a)

ENVIRONMENTAL PROTECTION

THE COMMISSIONER

Proposed Amendments Concerning Oyster Seed Beds

Jerry Fitzgerald English, Commissioner of Environmental Protection, pursuant to authority of N.J.S.A. 50:1-5 and 50:3-8, proposes to amend certain rules concerning oyster seed beds. Such proposal is known within the Department of Environmental Protection as Docket No. DEP 061-79-12.

Full text of the proposal follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

7:25-7.2 Oyster seed beds

(a) The season for the taking of seed oysters from the natural seed beds above the Southwest Line in Delaware Bay for [1979] 1980 shall be scheduled for a period of time beginning 7:00 a.m., [May 28, 1979] June 2, 1980 and shall close as determined by subsection (b) of this section.

(b) Physical tests of all areas opened by this regulation shall be made near the end of each week by an advisory committee appointed by the Director of the Division of Fish, Game and [Shellfisheries] Wildlife. These tests will be the determining factor to close any or all beds opened by the regulation.

(c) The committee shall be composed of two members of the Maurice River Cove Shellfisheries Council, two members of the Oyster Research Laboratory at Rutgers University, and the Director of the Division of Fish, Game and [Shellfisheries] Wildlife or his designate.

(d) Nothing in this regulation shall be construed to affect any existing regulations concerning areas condemned for the taking of shellfish by the State of New Jersey.

(e) Based upon the data and test referred to in subsection (b) of this section and the recommendation of the advisory committee referred to in section 3 of this subchapter, the Council, pursuant to N.J.S.A. 50:1-5, may immediately close those beds as may be necessary for the preservation and improvement of the shellfish industry.

A public hearing on this proposed amendment will be held at the Haleyville School, Route 649, Commercial Township, Cumberland County, New Jersey on Thursday, January 24th at 7:00 p.m.

Interested persons may present statements or arguments in writing relevant to the proposal on or before Friday, March 7, 1980 to:

Russell A. Cookingham, Director
Division of Fish, Game and Wildlife
P.O. Box 1809
Trenton, N.J. 08625

The Department of Environmental Protection may thereafter adopt rules concerning this subject without further notice.

Jerry Fitzgerald English
Commissioner
Department of Environmental Protection

(b)

ENVIRONMENTAL PROTECTION

THE COMMISSIONER

Proposed Rules on Oyster Dredging Prohibition

Jerry Fitzgerald English, Commissioner of Environmental Protection, pursuant to authority of N.J.S.A. 50:3-8, proposes to adopt new rules concerning the prohibition of shellfish dredging below the Southwest Line. Such proposal is known within the Department of Environmental Protection as Docket No. DEP 063-79-12.

Full text of the proposal follows.

7:25-7.4 Southwest Line; prohibition on dredging

During the period the natural seed beds above the Southwest Line are open as determined by N.J.A.C. 7:25-7.2 and until September 1 of the same calendar year, no person shall dredge for oysters below the Southwest Line. The Southwest Line is described in N.J.S.A. 50:3-11.

A public hearing on this proposed amendment will be held at the Haleyville School, Route 649, Commercial Township, Cumberland County, New Jersey on Thursday, January 24th at 8:00 p.m.

Interested persons may present statements or arguments in writing relevant to the proposal on or before Friday, March 7, 1980 to:

Russell A. Cookingham, Director
Division of Fish, Game and Wildlife
P.O. Box 1809
Trenton, N.J. 08625

The Department of Environmental Protection may thereafter adopt rules concerning this subject without further notice.

Jerry Fitzgerald English
Commissioner
Department of Environmental Protection

(c)

ENVIRONMENTAL PROTECTION

THE COMMISSIONER

Proposed Amendments Concerning Relay of Hard Clams

Jerry Fitzgerald English, Commissioner of Environmental Protection, pursuant to authority of N.J.S.A. 24:14-3, 50:1-5 and 50:1-31, proposes to amend N.J.A.C. 7:25-15.1 concerning the relay of hard clams. This proposal is known within the Department of Environmental Protection as Docket No. DEP 062-79-12.

Full text of the proposal follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

7:25-15.1(b) The general intent of these rules is to control the relaying of hard clams (*Mercenaria mercenaria*) from specified Special Restricted or Condemned Waters [within Atlantic and Cape May Counties, which are] within the Atlantic Coastal section (see N.J.S.A. 50:1-18), to specially designated leased shellfish relay grounds also situated in the Atlantic Coast Section. Such designated Special Restricted or Condemned Waters will be charted

by the department and such charts will be issued to the participants and available to the public on demand. Application for the shellfish relay program will be open to all citizens. If limitations must be imposed on the number of participants as the result of practical considerations, selection will be made on the basis of the time the application is received.

7:25-1.15.1(c) Any person who wishes to participate in this program must comply with these rules and conditions in order to remain eligible for participation.

1. Possess a current, valid, shellfish harvesting license issued by the Division of Fish, Game and [Shellfisheries] Wildlife. (See N.J.S.A. 50:2-1 et seq.)

2. Hold one of the following special permits issued by the Division of Water Resources (N.J.S.A. 24:14-3 and N.J.A.C. 7:12-1.2 et seq.) to harvest and/or buy and/or sell oysters, clams or mussels from Condemned Waters; (a fee of \$25.00 is required for each permit issued, chapter 156, Public Law of 1971, N.J.S.A. 24:14-3).

i. Permit 5a: SPECIAL PERMIT TO HARVEST, BUY, SELL AND RELAY OYSTERS, CLAMS OR MUSSELS FROM SPECIFIED SPECIAL RESTRICTED OR CONDEMNED WATERS IN CONJUNCTION WITH A STATE APPROVED SHELLFISH RELAY PROGRAM.

ii. Permit 5b: SPECIAL PERMIT TO HARVEST OYSTERS, CLAMS OR MUSSELS FROM SPECIFIED SPECIAL RESTRICTED OR CONDEMNED WATERS FOR SALE PURPOSES ONLY IN CONJUNCTION WITH A STATE APPROVED SHELLFISH RELAY PROGRAM.

iii. Permit 5c: SPECIAL [JUVENILE] MINOR'S PERMIT TO HARVEST AND RELAY OYSTERS, CLAMS OR MUSSELS FROM SPECIFIED SPECIAL RESTRICTED OR CONDEMNED WATERS IN CONJUNCTION WITH A STATE APPROVED SHELLFISH RELAY PROGRAM. The Minor [Juvenile] Permit allows a minor member of the immediate family to work in the presence of a parent or guardian who holds a valid Permit 5a issued by the Division of Water Resources.

3. (No change.)

7:21-15.1(d) Any person applying for permit 5a must have acquired a special relay lease from the department for three one-half acre plots of shellfish cleansing grounds designated by the Department of Environmental Protection [in Great Bay or Little Egg Harbor Bay] on which the relayed shellfish are to be deposited by the means hereinafter set forth. No person shall hold more than one lease to the designated shellfish cleansing grounds. [above mentioned] series of three one-half acre plots [in Great Bay or Little Egg Harbor Bay].

1. Applications for leases must be made in person at the Nacote Creek Shellfish Office of the Department. The lease shall be subject to the following additional conditions.

i. This special relay lease shall be issued for only one year and can be reapplied for annually.

ii. The fee for this lease, to be paid at the time of application, shall be \$50.00. [which shall include the survey and marking fee.]

iii. Once the leased plots have been marked by the Division, the lessee shall be solely responsible for the placement and maintenance of the stakes marking same, or their necessary replacement.

iv. One foot by one foot (1' x 1') signs having a white background with legible black lettering, giving the participants first initial and last name and special relay leased lot number, shall be placed and maintained (amidships) on both sides of the participant's harvest boat while participating in any phase of the program.

v. This special relay lot shall be used for relay plant-

ing from the specified harvest areas only, and shall be marked by the lessee with its number.

vi. [(1)] This lease shall not be renewed if the lessee was not actively engaged in the relay program during a minimum of $\frac{1}{3}$ of the days during the previous year's program, unless such inactivity was due to legitimate health reasons. The purpose of this special provision is to insure that only active participants are issued leases under this special relaying program.

vii. [vi.] Any lessee who is convicted of an offense which results in the revocation of a Shellfish Harvesting License [(N.J.S.A. 50:2-6, N.J.A.C. 7:25-16)] or Special Permit mentioned in paragraph (c)1 and (c)2 of this section (N.J.A.C. 7:12-2) shall have his lease voided by the Department; provided, however, that upon notice to the Division of Fish, Game and [Shellfisheries] Wildlife within a 10 day period the lessee shall be given the opportunity to show why the lease should not be voided. If notice is given within the 10 day period no action may be taken on the lease until the next regularly scheduled meeting of the Atlantic Coast Shellfisheries Council. The Atlantic Coast Shellfisheries Council shall have the authority to permanently suspend the voiding of the lease for good cause shown. Nothing in this section shall allow the voiding of a lease because of a violation of N.J.S.A. 50:2-1 or 50:2-5.

viii. [vii.] A lessee[s] vacating a relay lot for any reason shall have six months following during which to remove clams planted on it. During this removal period no clams shall be planted upon the lot; clams may only be removed.

7:25-15.1(e) Clams taken from the specified Special Restricted or Condemned harvest areas shall be bagged by the participant and such bags shall be identified with the lot number of the permitted lease holder on whose lot the clams are to be planted. Said number shall be at least 10 inches tall and painted on the side of each bag. Unmarked bags will not be accepted for transportation to the lots, but will be seized and their contents returned to condemned waters by the New Jersey Marine Police.

1. At the close of the day's harvest the bags shall be placed on a state designated vessel or in closed trucks to be provided by industry participants, (said vessel or trucks to be approved by the applicable area Station Commander, New Jersey Marine Police) for transportation to the relay lots, or in the case of clams carried by truck, to a designated landing.

i. Bagged clams delivered to relay lots by state designated vessel will be off loaded by industry participants to their own plots.

ii. A fee of \$25.00 for the season is required of all permit holders who load their clams on the State's vessel.

iii. Bagged clams delivered to the designated landing in sealed trucks shall be relayed to the leased plots of the participants by a state designated vessel or vessels (to be approved by the applicable area Station Commander New Jersey Marine Police) under the supervision of the New Jersey Marine Police and/or the Division of Fish, Game and [Shellfisheries] Wildlife. Industry participants shall be responsible for providing the necessary labor for off-loading the clams from the trucks to the planting vessel or vessels and off-loading the planting vessel or vessels onto the proper relay lots.

7:25-15.1(h) The department shall establish a schedule of dates when the Special Restricted or Condemned Waters shall be opened to participants in this program for the harvest of clams [and when the State's vessel shall be available to participants to carry clams to Great Bay.]

- 1. (No change.)
- 2. (No change.)

7:25-15.1(i) The Department may terminate this program at any time for just cause and upon notice to all participants. Just cause shall include, but not be limited to excessive depletion, or threat thereof, of shellfish stocks, lack of shellfish industry participation and excessive numbers of violations of the rules of the relay program. [Fewer than 10 participants planting in Great Bay, or fewer than 5 participants planting in Little Egg Harbor Bay for 3 consecutive days shall be considered lack of industry participation.]

7:25-15.1(j) The participants shall be responsible for the appointment of one of their number to the position of relay coordinator (remuneration for this position, if any, shall be assumed by the participants). The relay coordinator will act as liaison with the applicable area Station Commander, New Jersey Marine Police, the Shellfish Control Unit of the Division of Water Resources and the Shellfish Section of the Division of Fish, Game and Wildlife [Shellfisheries], for scheduling areas for harvest.

Public hearings on the proposal will be held:

Wednesday, January 16, 1980, 7:00 P.M. at
Stockton State College, Pomona, N.J. and

Thursday, January 17, 1980, 7:00 P.M. at
Henry Hudson Regional High School, Highlands, N.J.

Interested persons may present statements or arguments in writing relevant to the proposal on or before Friday, March 7, 1980 to:

Russell A. Cookingham, Director
Division of Fish, Game and Wildlife
P.O. Box 1809
Trenton, N.J. 08625

The Department of Environmental Protection may thereafter adopt rules concerning this subject without further notice.

Jerry Fitzgerald English
Commissioner
Department of Environmental Protection

(a)

**ENVIRONMENTAL PROTECTION
THE COMMISSIONER**

**Notice of Correction Concerning Date of Public
Hearing on Proposed Rules Concerning County
Environmental Health Services**

Take notice that, in the proposal concerning the new rules concerning county environmental health services appearing in the December 6, 1979, issue of the New Jersey Register at 11 N.J.R. 616(a), the date of the public hearing to be held at the New Jersey State Department of Health, Northern Region Office, 7 Glenwood Avenue, East Orange, New Jersey was incorrectly stated as January 15, 1980. The correct date for the public hearing to be held at the above address is January 16, 1980.

This Notice is published as a matter of public information.

Howard H. Kestin
Director
Office of Administrative Law

(b)

**ENVIRONMENTAL PROTECTION
THE COMMISSIONER**

Amendments Concerning Sea Clams

On November 30, 1979, Jerry Fitzgerald English, Commissioner of Environmental Protection, pursuant to authority of N.J.S.A. 50:1-5 and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments to N.J.A.C. 7:25-12.1 and 7:25-12.4 concerning sea clams substantially as proposed in the Notice published November 8, 1979, at 11 N.J.R. 539(c) but with subsequent, substantive changes not detrimental to the public in the opinion of the Department of Environmental Protection.

An order adopting these amendments was filed on November 30, 1979 as R.1979 d.472 to become effective on December 1, 1979.

Howard H. Kestin
Director
Office of Administrative Law

(c)

**ENVIRONMENTAL PROTECTION
PINELANDS COMMISSION**

**Amendments to the Interim Rules for Review and
Approval of Applications for Development
Or Construction**

On November 8, 1979, the Pinelands Commission in the Department of Environmental Protection, pursuant to authority of L.1979, c.111, section 13(e) and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments to N.J.A.C. 7:1G-1.11 concerning the interim rules for review and approval of applications for development or construction substantially as proposed in the Notice published October 4, 1979, at 11 N.J.R. 501(c) but with subsequent, substantive changes not detrimental to the public in the opinion of the Pinelands Commission.

An order adopting these amendments was filed and became effective on November 19, 1979 as R.1979 d.458.

Howard H. Kestin
Director
Office of Administrative Law

(d)

**HEALTH
THE COMMISSIONER**

**Proposed New Rules Concerning
Newborn Hearing Screening Program**

Allen N. Koplin, Acting Commissioner of Health, pursuant to authority of N.J.S.A. 26:2-101 et seq., proposes to adopt new rules, to be cited as N.J.A.C. 8:19, concerning the newborn hearing screening program.

Full text of the proposed rules follows.

8:19-1.1 Hearing development literature supplied to
parents

Prior to discharge from any hospital in the State of

New Jersey, the hospital shall provide all parents or legal guardians of the newborn with literature provided by the Department of Health describing the normal development of auditory function. Such literature will be designed to provide parents with an understanding of the need for effective auditory system and provide a checklist for normal auditory development. All literature shall be furnished free of charge to hospitals by the Department.

8:19-1.2 Newborn hearing screening report form required

(a) The hospital shall complete a Newborn Hearing Screening Report Form on all newborns in their facility. This Newborn Hearing Screening Report Form contains seven high risk categories that are associated with possible hearing impairment. These high risk categories are defined in section 5 of this subchapter. This Newborn Hearing Screening Report Form is composed of three identical copies. Registered nurses in the hospital nursery shall complete the Newborn Screening Report Form.

(b) The hospital where discharge occurs shall forward one copy of all completed Newborn Hearing Screening Report Forms to the Maternal and Child Health Program, New Jersey State Department of Health, Box 1540, Trenton, New Jersey 08625, on a monthly basis. The second copy of the Newborn Hearing Screening Report Form shall be placed in the newborn's permanent medical record. The third copy shall be given to the infant's physician.

(c) Parents of newborns with one or more high risk factors shall be provided with literature describing the high risk registry program prior to discharge from the hospital. Such literature shall be provided free of charge to the hospitals by the Department.

8:19-1.3 High risk infant registry

The Maternal and Child Health Program shall maintain a registry of high risk infants for hearing impairment so as to remind parents of high risk infants for the need for six month medical evaluation of the (high risk) infant by a licensed physician. The physician will determine necessary follow-up procedure for these high risk infants.

8:19-1.4 Six month medical evaluation report

New Jersey physicians completing six month medical evaluations on infants at high risk for hearing impairment are requested to report their results to the Maternal and Child Health Program, New Jersey State Department of Health, Box 1540, Trenton, New Jersey 08625. Response forms shall be provided to New Jersey physicians by the Maternal and Child Health Program.

8:19-1.5 High risk conditions

(a) The literature required by section 2 of this subchapter shall describe the following high risk conditions:

1. Family history of deafness which affected an individual during childhood;
2. Rubella or other non-bacterial intrauterine fetal infections;
3. Malformed, low set or absent pinnae; cleft palate or lip (includes submucous cleft): any residual abnormality of the otorhinolaryngeal system;
4. Serum bilirubin level of 20 mg/100 mg and over;
5. Newborn in Intensive Care Unit;
6. Ototoxic drugs in pregnancy or newborn (gentamycin or kanamycin);
7. Physical or mental abnormalities - (i.e. Cerebral Palsy, Mental Retardation, Downs Syndrome, etc.).

8:19-1.6 Confidentiality of reports

Any forms and reports furnished to the Department as required by this chapter shall not be made public so as to disclose the identity of the person to whom they relate.

Information obtained from forms and reports furnished to the Department will be confidentially shared with participating local health service agencies to provide follow-up for high risk infants. All parents shall have the option to deny release to any information to local health service agencies.

Interested persons may present statements or arguments in writing relevant to the proposed action on or before January 30, 1980 to:

Ron Rothberg
Consultant, Maternal and Child Health
N.J. Department of Health
P.O. Box 1540
Room 706D
Trenton, N.J. 08625

The Department of Health may thereafter adopt rules concerning this subject without further notice.

Allen N. Koplin
Acting Commissioner
Department of Health

(a)

HEALTH

THE COMMISSIONER

Proposed Rules on Labeling, Sale And Distribution of Cosmetics For Professional Use Only

Dr. Joanne E. Finley, Commissioner of Health, pursuant to authority of N.J.S.A. 24:2-1, proposes to adopt new rules concerning the labeling, sale and distribution of cosmetics for professional use only.

Take notice that this proposal is a re-draft of the proposal concerning the same subject appearing in the New Jersey Register on September 6, 1979, at 11 N.J.R. 434(c). This proposal incorporates many of the comments and suggestions received regarding the prior proposal and resulted in several substantial changes necessitating these new proposed rules.

Full text of the proposal follows.

8:21-1.29 Rules on the labeling, sale and distribution of cosmetics for professional use only

(a) As used herein, the following terms shall have the following meanings:

1. "Consumer" means an individual who secures a cosmetic for his or her self application and has not received any special training or experience in its use.
2. "Cosmetic" means "cosmetic" as defined in N.J.S.A. 24:1-1h.
3. "Label" means "label" as defined in N.J.S.A. 24:1-1j.
4. "Labeling" means "labeling" as defined in N.J.S.A. 24:1-1k.
5. "Person" means an individual or firm, partnership, company, corporation, trustee, association, or any public or private entity.
6. "Professional" means an individual qualified through special training and experience and licensed by the State to perform beauty culture services.
7. "Professional use only" means professional use only or words of similar import.
8. "Retail" means sale or distribution directly to the consumer.
9. "Retail establishment" means any place used in the

production, preparation, processing, manufacture, packaging, storage, or handling of cosmetics for sale or distribution directly to the consumer.

10. "Wholesale establishment" means any place used in the production, preparation, processing, manufacture, packing, storage, or handling of cosmetics for sale or distribution to a person other than the consumer.

(b) For the purposes of this regulation, a cosmetic labeled for professional use only which is offered for sale or distribution to a consumer shall be deemed to be misbranded within the meaning of N.J.S.A. 24:5-18.1 at the time such cosmetic is offered for such sale or distribution.

(c) No person shall distribute or sell, or have in his or her possession with intent to distribute or sell, any cosmetic labeled for professional use only except to professional barbers, professional beauticians, licensed beauty salons, licensed schools of beauty culture, other beauty culture professionals, or licensed wholesale establishments.

(d) Any person who offers a cosmetic labeled for professional use only for sale or distribution shall make reasonable inquiries regarding a person's professional status or affiliation as necessary to determine their qualifications to purchase such products so that the retail sale or distribution of such cosmetic may be prevented. This requirement shall not apply to the sale or distribution of cosmetics labeled for professional use only between wholesale establishments.

(e) Cosmetics labeled for professional use only when displayed for sale in a combined retail-wholesale establishment shall be kept separate and apart from retail merchandise. Where such cosmetics are accessible to the general public, posters measuring at least 8½ by 11 inches with lettering measuring at least ½ inch in height shall be conspicuously displayed in all such display areas and contain the following statement, "NOTICE—FOR SALE ONLY TO LICENSED PROFESSIONALS."

(f) A cosmetic labeled for professional use only shall be exempt from all the provisions of this regulation if it can be shown through factual and scientific evidence in the possession of the person offering such product for sale or distribution prior to such offering that:

1. Such cosmetic does not require professional skill or knowledge for its safe or effective use; and
2. Such cosmetic does contain necessary warnings, cautions, and directions for its safe and effective use in such terms as to render it likely to be read and understood by the consumer under customary conditions of purchase and use; and
3. Such cosmetic is labeled in compliance with all State and Federal requirements for retail sale.

(g) A cosmetic labeled for professional use only which has a retail counterpart identical in name, chemical composition, packaging (size, etc.) and labeling (directions, cautions, etc.) shall be exempt from all provisions of this regulation.

Interested persons may present statements or arguments in writing relevant to the proposed action on or before January 30, 1980 to:

Donald J. Foley
Chief, Drug Control
N.J. Department of Health
1911 Princeton Ave.
Trenton, N.J. 08648

The Department of Health may thereafter adopt rules concerning this subject without further notice.

Dr. Joanne E. Finley
Commissioner
Department of Health

(a)

HEALTH

THE COMMISSIONER

Proposed Revisions to the 1976-1977 (Interim) New Jersey State Medical Facilities Plan Long-Term Care Bed Need Methodology And Formula

Dr. Joanne Finley, Commissioner of Health, pursuant to authority of N.J.S.A. 26:2H-1 et seq. and with the approval of the Health Care Administration Board proposes to amend N.J.A.C. 8:32, the 1976-1977 (Interim) New Jersey State Medical Facilities Plan Long-Term Care Bed Need Methodology and Formula. Revisions are offered to achieve greater accuracy in determining long-term care bed need in the State. An "ideal" formula and methodology is described, the additional variables for which will be phased in as the necessary data becomes available.

Copies of the 20 pages of full text of the proposed revisions may be obtained from or made available for review by contacting:

John A. Calabria
Acting Coordinator
Health Planning Services
Department of Health - Room 802
P.O. Box 1540
Trenton, N.J. 08625

Interested persons may present statements or arguments in writing relevant to the proposed action on or before January 30, 1980 to the Department of Health at the above address.

The Department of Health may thereafter adopt rules concerning this subject without further notice.

Dr. Joanne E. Finley
Commissioner
Department of Health

(b)

HEALTH

THE COMMISSIONER

Proposed Amendments Concerning Use of Antibiotics

Dr. Joanne E. Finley, Commissioner of Health, pursuant to authority of N.J.S.A. 26:2H-1 et seq. and with the approval of the Health Care Administration Board, proposes to amend N.J.A.C. 8:35-1.3(g)3. concerning the standards for licensure of hospital services regarding the use of perioperative prophylactic antibiotics in the criteria for mixed obstetrical and gynecological floors.

Full text of the proposal follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

8:35-1.3(g)3. Perioperative prophylactic antibiotics in patients otherwise free of infection who are undergoing surgery or in mid-trimester abortions. They may not be administered more than six hours pre-operatively nor continued for more than [twelve] 72 hours following surgery.

Interested persons may present statements or arguments

in writing relevant to the proposed action on or before January 30, 1980 to:

Wanda J. Marra
Coordinator, Standards
N.J. Department of Health
P.O. Box 1540
Trenton, N.J. 08625

The Department of Health may thereafter adopt rules concerning this subject without further notice.

Dr. Joanne E. Finley
Commissioner
Department of Health

(a)

HEALTH

THE COMMISSIONER

Proposed Amendments Concerning Licensure of Animal Care Facilities To Use Controlled Dangerous Substances

Allen N. Koplin, Acting Commissioner of Health, pursuant to authority of N.J.S.A. 24:21-1 et seq., proposes to amend the provisions of Chapter 204, P.L. 1979, providing for the licensing of Humane Societies or licensed animal care facilities to use controlled dangerous substances.

To implement the provisions of Chapter 204, Public Laws of 1979, which amended Section II of Chapter 21 of Title 24 it is necessary to amend existing regulations concerning Controlled Dangerous Substances contained in N.J.A.C. 8:65-1 et seq. The existing regulations used terms that were contained and defined in N.J.S.A. 24:21-1.

For purposes of consistency and uniformity, wherever possible, the same terms are used in the regulations pertaining to Chapter 204, P.L. 1979.

To permit greater knowledge and understanding of the provisions of Chapter 204 and regulations promulgated thereunder, certain selected terms and their meanings or definition are reproduced, as follows:

"Agent" means an authorized person who acts on behalf of or at the direction of a manufacturer, distributor, or dispenser but does not include a common or contract carrier, public warehouseman, or employee thereof.

"Deliver" or "delivery" means the actual, constructive, or attempted transfer from one person to another of a controlled dangerous substance, whether or not there is an agency relationship.

"Dispense" means to deliver a controlled dangerous substance to an ultimate user or research subject by or pursuant to the lawful order of a practitioner, including the prescribing, administering, packaging, labeling, or compounding necessary to prepare the substance for that delivery. "Dispenser" means a practitioner who dispenses.

"Person" means any corporation, association, partnership, trust, other institution or entity or one or more individuals.

"Ultimate user" means a person who lawfully possesses a controlled dangerous substance for his own use or for the use of a member of his household or for administration to an animal owned by him or by a member of his household.

"Certified individual" means an individual certified by a licensed New Jersey veterinarian to be proficient in the use of Sodium Pentobarbital in animal euthanasia.

Full text of the proposal follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

8:65-1.1(e)[(d)] A separate fee shall be paid for each separate place of business or professional practice for which registration is required.

8:65-1.1(d) Incorporated Humane Societies or licensed animal control facilities registered to purchase and administer Sodium Pentobarbital for the purpose of animal euthanasia shall pay an annual fee of \$10.00 for registration or renewal of registration as a Dispenser in the category of Hospital/Clinic.

Reletter the following: 8:65-1.1(e) and (f) to 8:65-1.1(f) and (g) respectively.

8:65-1.2(g) Every person or duly authorized agent who dispenses or proposes to dispense Sodium Pentobarbital for purposes of animal euthanasia, unless specifically exempted by statute or specifically waived by the Commissioner of Health, shall apply for a registration within 30 days of the adoption of the regulations, and shall obtain a renewal of registration on or before July 1 of every year thereafter.

1. Applications for registration to use Sodium Pentobarbital for animal euthanasia may be obtained from the Drug Control Program, Consumer Health Services, 1911 Princeton Avenue, Trenton, N.J. 08648. Upon receipt of said application by this Department, the security, safeguards, record keeping requirement and personnel training requirements shall be inspected and/or reviewed, and upon satisfactory compliance with the statute and regulations, a registration certificate shall be issued to the applicant.

8:65-1.2(h) Every person or duly authorized agent required to register pursuant to subsection (g) of this section shall be required to provide evidence of a current general liability insurance policy. A certified individual shall be deemed to be acting in behalf of and at the direction of the duly authorized agent.

8:65-1.2(i) Every person or duly authorized agent required to register pursuant to subsection (g) of this section shall be limited to the use of Sodium Pentobarbital only. Registration granted under subsection (g) of this section shall not entitle a registrant to buy, possess and/or dispense controlled dangerous substances other than that specified in the registration.

8:65-1.2(j) Every individual, as directed by the registered duly authorized agent to use Sodium Pentobarbital in animal euthanasia, shall be required to be trained in, and demonstrate proficiency with, the use of Sodium Pentobarbital in animal euthanasia, to the satisfaction of a New Jersey Licensed Veterinarian. Said New Jersey Licensed Veterinarian shall, in writing and filed with the registered Incorporated Humane Society or licensed animal care facility, so certify the training and demonstrated proficiency of the individual in the use of Sodium Pentobarbital in animal euthanasia.

8:65-1.2(k) Every person or duly authorized agent required to register pursuant to subsection (g) of this section shall prepare written procedures and protocol, approved by a New Jersey Licensed Veterinarian, for the administration of Sodium Pentobarbital in animal euthanasia. Such written procedure and protocol must be on file at the licensed premise and readily available for review by a Department representative.

8:65-1.3(i) A person or duly authorized agent registered as a dispenser for the purposes of purchasing and dispensing Sodium Pentobarbital for the purpose of animal euthanasia shall be limited to registration in Schedule II

(Sodium Pentobarbital) and may possess or have under his control such amounts as are reasonably necessary to administer euthanasia on the premise of the registered location.

8:65-2.5(f) This section shall apply to those persons or duly authorized agents registered for the purposes of purchasing and dispensing Sodium Pentobarbital for animal euthanasia. Safeguards and security to the Sodium Pentobarbital shall be in compliance with N.J.A.C. 8:65-2.1.

8:65-5.3(g) A person or duly authorized agent registered to use Sodium Pentobarbital for purposes of animal euthanasia shall maintain records and inventories and shall file the reports required by this subchapter.

8:65-5.4(e) A person or duly authorized agent registered to use Sodium Pentobarbital for purposes of animal euthanasia and required to keep records shall maintain inventories and records of controlled substances in the manner prescribed in subsection (b) of this section.

8:65-5.11(b) A person or duly authorized agent registered to use Sodium Pentobarbital for purposes of animal euthanasia and required to keep records, shall maintain a quarterly inventory (last day of March, June, September, December) on forms provided by this Department in the manner prescribed in subsection (a) of this section. A copy of such inventory shall be received in the department within seven (7) days after such required report is completed.

8:65-5.17(b) Each person or duly authorized agent registered to use Sodium Pentobarbital for purposes of animal euthanasia shall make, keep and maintain records of the use of Sodium Pentobarbital on forms provided by the Department.

8:65-6.6(f) The registered agent of a Humane Society or licensed animal shelter may apply for Federal Purchase Order Forms in the manner described in sections 6.4 and 6.5 of this subchapter. Execution of such Order Forms shall be in the manner set forth in subsections (a) through (e) of this section.

8:65-8.12 Humane societies and animal care facilities

(a) Incorporated Humane Societies or licensed animal care facilities authorized to purchase, possess and to dispense Sodium Pentobarbital for animal euthanasia pursuant to N.J.S.A. 24:21-11(f) shall:

1. Be authorized to dispense any commercially prepared Sodium Pentobarbital drug product for animal euthanasia, approved for interstate sale by the United States Food and Drug Administration, provided the registrant complies with the approved recommended dosage regime in the labeling.

2. Be authorized to dispense a standard compounded formula of Sodium Pentobarbital for animal euthanasia established by the Department as follows:

i. Sodium Pentobarbital injection (for animal euthanasia): formula non-sterile solution:

U.S.P. Pentobarbital Sodium (powder)	460 grams
Isopropyl Alcohol	250 cc
Methyl Violet	1 drop
U.S.P. water for injection	
Quantity sufficient to make	1000 milliliters

ii. Using the above formula, the strength of this mixture will provide 460 milligrams of Pentobarbital Sodium per milliliter.

iii. Lethal dose: 1 milliliter per 10 pounds of body weight for small animals; horses and other large animals - 1

milliliter per 10 pounds of body weight subject to a maximum dose of 100 milliliters.

iv. Package and storage: Package in tight containers with rubber stoppers and store under refrigeration. Solutions decompose on standing, heat accelerates the decomposition.

v. Expiration date, five (5) days from date of manufacture.

(b) Labeling: Sample labeling is as follows:

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.

1. Name and address, city, state of registrant.
2. Name of preparation:
"Pentobarbital Sodium injection"
(for animal euthanasia)
3. Strength of the preparation:
"460 milligrams per 1 milliliter"
4. "Lethal dose: 1 milliliter per 10 pounds of body weight for small animals; horses and other large animals - 1 milliliter per 10 pounds of body weight subject to a maximum dose of 100 milliliters."
5. "Batch number"
6. "Net contents"
7. "Expiration date"
8. "Keep under refrigeration."
9. "Warning: Do not use the injection if it contains a precipitate."

(c) A master formula and production record must be made and retained on file at the formulating (compounding) site. This record shall contain:

1. Name, address, city and state of the registrant.
2. Name and strength of the product and a description of the dosage form.
3. The name and weight or measure of each active ingredient including the control number of each ingredient.
4. A statement of the theoretical yield of the finished product.
5. A statement describing the equipment and utensils used in the formulating (compounding).
6. A description of the finished drug product containers and closures including a specimen or copy of each label and all other labeling signed and dated by the person or persons responsible for approval of such labeling.
7. Complete manufacturing and control instructions, procedures, special notations and precautions to be followed.

(d) Batch production records shall be prepared for each batch of drug product produced, and shall include complete information relating to the production of each batch. These records shall include:

1. An accurate reproduction of the appropriate master formula production record, checked for accuracy, dated and signed.
2. Documentation that each significant step in the manufacture, processing, packaging or holding of the batch was accomplished, including:
 - i. Dates.
 - ii. Identity of the individual equipment used.
 - iii. Specific identification of each batch of component or material used.
 - iv. Weights and/or measures of components used in processing.

- v. Copy of all labeling used.
- vi. Identification of the person performing each step in the process and identification of the person checking the weights, measures and operations.
- vii. A statement of the theoretical yield.
- viii. A statement of the actual yield.

Interested persons may present statements or arguments in writing relevant to the proposed action on or before January 30, 1980 to:

Donald J. Foley
Chief, Drug Control
N.J. Department of Health
1911 Princeton Ave.
Trenton, N.J. 08648

The Department of Health may thereafter adopt rules concerning this subject without further notice.

Allen N. Koplin
Acting Commissioner
Department of Health

(a)

HEALTH

DRUG UTILIZATION REVIEW COUNCIL

Amendments on Manufacturer's Name Appearing on Drug Labels

On December 12, 1979, Robert Kowalski, Chairman of the Drug Utilization Review Council in the Department of Health, pursuant to authority of N.J.S.A. 24:6E-6(g) and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments to N.J.A.C. 8:70-1.4(d) concerning the manufacturer's name appearing on drug labels as proposed in the Notice published June 7, 1979 at 11 N.J.R. 278(c).

An order adopting these amendments was filed and became effective on December 14, 1979 as R.1979 d.483.

Howard H. Kestin
Director
Office of Administrative Law

(b)

HEALTH

THE COMMISSIONER

Amendments on Procedural and Methodological Rules for Implementation of Chapter 83, P.L. 1978

On December 13, 1979, Allen N. Koplin, Acting Commissioner of Health, pursuant to authority of N.J.S.A. 26:2H-1 et seq., with the approval of the Health Care Administration Board and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments cited as N.J.A.C. 8:31B-3.8(b)1., concerning procedural and methodological rules for implementation of Chapter 83, P.L. 1978, as proposed in the Notice published November 8, 1979 at 11 N.J.R. 545(b).

An order adopting these amendments was filed and became effective on December 14, 1979 as R.1979 d.484.

Howard H. Kestin
Director
Office of Administrative Law

(c)

HEALTH

THE COMMISSIONER

Amendments to Definition Of Governing Authority

On December 13, 1979, Allen N. Koplin, Acting Commissioner of Health, pursuant to authority of N.J.S.A. 26:2H-1 et seq., with the approval of the Health Care Administration Board and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments to N.J.A.C. 8:42-1.1 concerning the definition of governing authority in the Standards for Licensure of Home Health Agencies as proposed in the Notice published November 8, 1979 at 11 N.J.R. 545(d).

An order adopting these amendments was filed on December 14, 1979 as R.1979 d.485 to become effective on February 1, 1980.

Howard H. Kestin
Director
Office of Administrative Law

(d)

HEALTH

THE COMMISSIONER

Amendments to Expiration Date Concerning Manual of Standards For Licensure of Alcohol Abuse Inpatient Treatment Facilities

On December 13, 1979, Allen N. Koplin, Acting Commissioner of Health, pursuant to authority of N.J.S.A. 26:2H-1 et seq., with the approval of the Health Care Administration Board and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments to N.J.A.C. 8:42-3.1 et seq. which extended the expiration date of the standards for licensure of alcohol abuse inpatient treatment facilities from December 31, 1979, to June 30, 1980, as proposed in the Notice published November 8, 1979 at 11 N.J.R. 546(a).

An order adopting these amendments was filed on December 14, 1979 as R.1979 d.486 to become effective on December 31, 1979.

Howard H. Kestin
Director
Office of Administrative Law

(e)

HEALTH

THE COMMISSIONER

Amendments Concerning Computerized Axial Tomography Services

On December 13, 1979, Allen N. Koplin, Acting Commissioner of Health, pursuant to authority of N.J.S.A. 26:2H-1 et seq., with the approval of the Health Care Administra-

tion Board and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments to N.J.A.C. 8:43A-1.71 concerning computerized axial tomography services substantially as proposed in the Notice published November 8, 1979, at 11 N.J.R. 546(b) but with subsequent, substantive changes not detrimental to the public in the opinion of the Department of Health.

An order adopting these amendments was filed on December 14, 1979, as R.1979 d.487.

Howard H. Kestin
Director
Office of Administrative Law

(a)

HEALTH

THE COMMISSIONER

Amendments Concerning Emergency Medical Care and Defibrillators

On December 13, 1979, Allen N. Koplin, Acting Commissioner of Health, pursuant to authority of N.J.S.A. 26:2H-1 et seq., with the approval of the Health Care Administration Board and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments to N.J.A.C. 8:43A-1.21(b) concerning emergency medical care and defibrillators as proposed in the Notice published November 8, 1979 at 11 N.J.R. 546(c).

An order adopting these amendments was filed on December 14, 1979 as R.1979 d.488 to become effective on February 1, 1980.

Howard H. Kestin
Director
Office of Administrative Law

(b)

HEALTH

THE COMMISSIONER

Amendments to Expiration Date Concerning Standards of Licensure Of Ambulatory Care Facilities - Alcohol Abuse Treatment Services

On December 13, 1979, Allen N. Koplin, Acting Commissioner of Health, pursuant to authority of N.J.S.A. 26:2H-1 et seq., with the approval of the Health Care Administration Board and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments to N.J.A.C. 8:43A-1.72 which extended the expiration date of the standards for licensure of ambulatory care facilities - alcohol abuse treatment services from December 31, 1979, to June 30, 1980, as proposed in the Notice published November 8, 1979 at 11 N.J.R. 547(a).

An order adopting these amendments was filed on December 14, 1979 as R.1979 d.489 to become effective on December 31, 1979.

Howard H. Kestin
Director
Office of Administrative Law

(c)

HEALTH

THE COMMISSIONER

Amendments Concerning the Number of Physicians and Cardiac Diagnostic and Surgical Services

On December 13, 1979, Allen N. Koplin, Acting Commissioner of Health, pursuant to authority of N.J.S.A. 26:2H-1 et seq., with the approval of the Health Care Administration Board and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments to N.J.A.C. 8:43B-17.12(c)1., 8:43B-17.13(a) and 8:43B-17.16 concerning the number of physicians and cardiac diagnostic and surgical services as proposed in the Notice published November 8, 1979 at 11 N.J.R. 548(a).

An order adopting these amendments was filed on December 14, 1979 as R.1979 d.490 to become effective on February 1, 1980.

Howard H. Kestin
Director
Office of Administrative Law

(d)

HEALTH

THE COMMISSIONER

Amendments Concerning Respiratory Therapists

On December 13, 1979, Allen N. Koplin, Acting Commissioner of Health, pursuant to authority of N.J.S.A. 26:2H-1 et seq., with the approval of the Health Care Administration Board and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments to N.J.A.C. 8:43B-7.2(c)10 concerning respiratory therapists substantially as proposed in the Notice published November 8, 1979, at 11 N.J.R. 548(b) but with subsequent, substantive changes not detrimental to the public in the opinion of the Department of Health.

An order adopting these amendments was filed on December 14, 1979 as R.1979 d.491 to become effective on February 1, 1980.

Howard H. Kestin
Director
Office of Administrative Law

(e)

HEALTH

THE COMMISSIONER

Amendments to Standards For the Licensure of Long Term Care Facilities

On December 13, 1979, Allen N. Koplin, Acting Commissioner of Health, pursuant to authority of N.J.S.A. 26:2H-1 et seq., with the approval of the Health Care Administration Board and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments

to the standards for the licensure of long term care as proposed in the Notice published November 8, 1979 at 11 N.J.R. 547(c).

Take notice that these amendments were incorrectly cited as N.J.A.C. 8:43B-3.1(f) instead of the correct citation of N.J.A.C. 8:39-1.33.

Full text of the adoption follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

8:39-1.33 Construction

Standards for new buildings, additions, alterations and renovations to existing building shall be in accordance with the Uniform Construction Code and the standards imposed by the United States Department of Health, Education and Welfare (HEW), the Department of Health and the Department of Community Affairs, specifically the HEW Minimum Requirements of Construction and Equipment for Hospital and Medical Facilities (HEW Publication No. HRA [14-4000] 79-14500). In order to avoid conflict, Sections 302 (except as it pertains to area limitations), 1202.7, 1216.0, Article 5 except Sections 513.0, 519.0, 520.0, 521.0 and Article 6 except Section 618.7 through 618.9.3 of the building subcode of the New Jersey Uniform Code shall not govern with respect to health care facilities. The HEW HRA [74-4000] 79-14500 shall serve as the Uniform Code of the State in all matters regulated by the sections herein specified.

Note: HEW Publication No. HRA [74-4000] 79-14500 may be obtained from the U.S. Government Printing Office, Washington, D.C. at a cost of \$[1.45] 3.00.

An order adopting these amendments was filed and became effective on December 14, 1979 as R.1979 d.492.

Howard H. Kestin
Director
Office of Administrative Law

(a)

HEALTH

THE COMMISSIONER

**Amendments Concerning
Construction Standards Regarding
Ambulatory Care Facilities**

On December 13, 1979, Allen N. Koplin, Acting Commissioner of Health, pursuant to authority of N.J.S.A. 26:2H-1 et seq., with the approval of the Health Care Administration Board and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments concerning construction standards regarding ambulatory care facilities as proposed in the Notice published November 8, 1979, at 11 N.J.R. 547(b).

Take notice that these amendments were incorrectly cited as N.J.A.C. 8:43A-1.73 in the Notice of Proposal. These amendments now replace the current text of N.J.A.C. 8:43A-1.66.

Full text of the new text follows:

8:43A-1.66 Construction standards

(a) Standards for new buildings, additions, alterations, and renovations to existing buildings for ambulatory health care facilities under 6,000 square feet shall be in accordance with the Uniform Construction Code and the Standards imposed by the United States Department of

Health, Education and Welfare (HEW), the Department of Health, and the Department of Community Affairs, specifically the HEW Minimum Requirements of Construction and Equipment for Hospital and Medical Facilities (HEW Publication No. (HRA) 79-14500 - Section 14). In order to avoid conflict Sections 302 (except as it pertains to area limitations), 1202.7 and 1216.0, Article 5 except Sections 513.0, 519.0, 520.0, and 521.0, and Article 6 except Sections 618.7 through 618.9.3 of the building subcode of the New Jersey Code shall not govern with respect to health care facilities. The HEW (HRA) 79-14500 shall serve as the Uniform Code of the State in all matters regulated by the sections herein specified.

(b) Standards for new buildings, additions, alterations, and renovations to existing buildings for ambulatory health care facilities over 6,000 square feet shall be in accordance with the Uniform Construction Code and the Standards imposed by the United States Department of Health, Education and Welfare (HEW) the Department of Health, and the Department of Community Affairs, specifically the HEW Minimum Requirements of Construction and Equipment for Hospital and Medical Facilities (HEW Publication No. (HRA) 79-14500, Section 9). In order to avoid conflict Sections 302 (except as it pertains to area limitations), 1202.7 and 1216.0, Article 5 except Sections 513.0, 519.0, 520.0 and 521.0, and Article 6 except Sections 618.7 through 618.9.3 of the building subcode of the New Jersey Code shall not govern with respect to health care facilities. The HEW (HRA) 79-14500 shall serve as the Uniform Code of the State in all matters regulated by the sections herein specified.

Note: HEW Publication No. (HRA) 79-14500 may be obtained from the United States Government Printing Office, Washington, D.C. at a cost of \$3.00.

An order adopting these amendments was filed and became effective on December 14, 1979 as R.1979 d.493.

Howard H. Kestin
Director
Office of Administrative Law

(b)

HEALTH

THE COMMISSIONER

**Amendments Concerning
Construction Standards and
Cardiac Diagnostic and
Surgical Services**

On December 13, 1979, Allen N. Koplin, Acting Commissioner of Health, pursuant to authority of N.J.S.A. 26:2H-1 et seq., with the approval of the Health Care Administration Board and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments concerning construction standards and cardiac diagnostic and surgical services as proposed in the Notice published November 8, 1979, at 11 N.J.R. 548(c).

Take notice that the Notice of Proposal incorrectly cited these amendments as N.J.A.C. 8:43B-17.18 rather than the correct citation of N.J.A.C. 8:43B-17.17.

Full text of the adoption follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

8:43B-17.17(a) Cardiac Catheterization/Coronary Angiography Laboratory. A facility dedicated completely to Cardiac Catheterization/Coronary Angiographic Laboratories Suite shall comply with the State of New Jersey Uniform Construction Code, chapter 23, title 5, New Jersey Administrative Code and the [August 1, 1977] amendments to this Code, Use Group I-2.

8:43B-17.17(c) A facility dedicated completely to cardiovascular surgical services shall comply with the State of New Jersey Uniform Construction Code, chapter 23, title 5, New Jersey Administrative Code and the [August 1, 1977] amendments to this Code, Use Group I-2.

8:43B-17.17(e) The construction standards for this unit shall be the State of New Jersey Uniform Construction Code, chapter 23, title 5, New Jersey Administrative Code and the [August 1, 1977] amendments to this Code, Use Group I-2.

Note: (HRA) 74-4000 and (HRA)7[4]9-14500 Minimum Requirements of Construction and Equipment for Hospital and Medical Facilities can be purchased from:

Superintendent of Documents
U.S. Government Printing Office
Washington, D.C. 20402

An order adopting these amendments was filed and became effective on December 14, 1979 as R.1979 d.494.

Howard H. Kestin
Director
Office of Administrative Law

(a)

HIGHER EDUCATION

BOARD ASSISTANCE BOARD

Proposed Amendments Concerning Verification of Enrollment and Academic Performance of Tuition Aid Grant and Garden State Scholarship Recipients

The Student Assistance Board in the Department of Higher Education, pursuant to the authority of N.J.S. 18A:71-26.8 and 18A:71-48, proposes to amend N.J.A.C. 9:71-48, academic performance of recipients of tuition Aid Grants and/or Garden State Scholarships.

Full text of the proposal follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

9:7-2.10 Verification of enrollment and academic performance

Before payment may be made to an eligible student, [the Department of Higher Education must receive certification from the college that the student is an enrolled full-time undergraduate as of the end of the college's period for changing course load without penalty] the institution must have satisfactory evidence that the student is eligible for State grant and/or scholarship assistance, and has registered as a full-time student for an academic term, and that the student is meeting the minimum standards for academic performance and academic progress at the institution. Each institution must provide copies of its minimum standards for academic performance and satisfactory academic progress to the Department of Higher Education at the beginning of each academic year.

Interested persons may present statements or arguments

in writing relative to the proposed action on or before January 30, 1980 to:

Eric M. Perkins
Administrative Practice Officer
N.J. Department of Higher Education
225 West State Street
Trenton, N.J. 08625

The Student Assistance Board may thereafter adopt rules concerning this subject without further notice.

Lynn R. Goldthwaite
Chairman, Student Assistance Board
Department of Higher Education

(b)

HIGHER EDUCATION

BOARD OF HIGHER EDUCATION

Proposed Amendments Concerning Implementation of the Independent College And University Assistance Act

The New Jersey State Board of Higher Education in the Department of Higher Education, pursuant to authority of N.J.S.A. 18A:72B-15 et seq., proposes to delete the current text of Chapter 14 in Title 9 of the New Jersey Administrative Code and adopt new text therein concerning the implementation of the Independent College and University Assistance Act.

Full text of the proposed new rules follows.

CHAPTER 14. INDEPENDENT COLLEGE AND UNIVERSITY ASSISTANCE ACT

SUBCHAPTER 1. IMPLEMENTATION; GENERAL PROVISIONS

9:14-1.1 Definitions

The following words and terms, when used in the Act pursuant to which these regulations are promulgated, shall have the following meanings, unless the context clearly indicates otherwise:

"Credit hours" means the number of credits generated by full-time and part-time undergraduate New Jersey students who have received instruction offered on the main New Jersey campus or at other locations approved by the Board or Chancellor of Higher Education and who were:

1. Enrolled in associate or baccalaureate programs in eligible institutions chartered by the Legislature;
2. Enrolled in associate or baccalaureate programs approved by the Board of Higher Education in eligible institutions requiring such approval;
3. Enrolled in certificate or diploma programs of at least 24 credits at any eligible institution, or enrolled in a program, authorized by the institution's Board of Trustees, requiring 18 or more credits preparatory to certification or licensure by the State.

Note: For the purpose of this Act one credit hour shall be equal to one regularly scheduled contact hour of classroom instruction or the equivalent, or three contact hours of laboratory instruction per week per semester, or as consistent with institutional practice as of July 1979, or the equivalent as recognized by the Department of Higher Education. The total number of credit hours generated shall be counted at the time the institution takes its official census.

"New Jersey student" means an individual who is a legal resident of the State of New Jersey pursuant to N.J.A.C. 9:7-2.2, 9:7-2.3 and 9:7-2.6, residency regulations for State student assistance.

9:14-1.2 Auditing standards

(a) The audits required pursuant to N.J.S.A. 18A:72B-15 et seq. shall be conducted in accordance with generally accepted auditing standards. The auditor should follow the procedures indicated in the most recent edition of Audits of Colleges and Universities of the Committee on College and University Accounting and Auditing of the American Institute of Certified Public Accountants.

(b) The auditor shall become familiar with the applicable requirements set forth in N.J.S.A. 18A:72B-15 et seq. and N.J.A.C. 9:14-1 et seq.

(c) The auditor shall conduct such tests of the accounting, enrollment, and financial aid records and utilize such other auditing procedures which are considered necessary to render an opinion as to the fairness of presentation of the financial statement of the institution, the financial statement associated with the State funds received pursuant to N.J.S.A. 18:72B-15 et seq., the required full-time equivalent enrollment data, and the required headcount data of students receiving student financial aid.

(d) Each institution shall submit the required audit reports including the audit of the annual financial statements to the Chancellor of Higher Education on or before November 1 of each year.

9:14-1.3 Audit of full-time equivalent enrollment

(a) The audited full-time equivalent enrollment data should be displayed on the schedule as provided by the Department of Higher Education.

(b) For institutions having multiple campuses, and/or approved off-campus locations, the auditor shall designate the campuses and locations covered by the examination.

(c) The credit hours generated in calculating the full-time equivalent enrollment figures shall be verified as to total enrollment: eligible New Jersey enrollment; other New Jersey enrollment; out-of-state enrollment.

9:14-1.4 Audit of students receiving financial aid

The audited headcount of students receiving financial aid should be displayed on the schedule as provided by the Department of Higher Education.

Interested persons may present statements or arguments in writing relevant to the proposed action on or before January 30, 1980 to:

Eric Perkins
Administrative Practice Officer
N.J. Department of Higher Education
225 West State St.
Trenton, N.J. 08625

The State Board of Higher Education may hereafter adopt rules concerning this subject without further notice.

T. Edward Hollander
Secretary, State Board of Higher Education
Chancellor of Higher Education

(a)

HIGHER EDUCATION

BOARD OF HIGHER EDUCATION

Amendments to Personnel Policies for State Colleges

On November 19, 1979, T. Edward Hollander, Chancellor

of Higher Education and Secretary of the State Board of Higher Education, pursuant to authority of N.J.S.A. 18A:3-14 and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments to N.J.A.C. 9:2-2.7, 9:2-2.10, 9:2-2.12, 9:2-9.7 through 9:2-9.10 and 9:6-1.1 through 9:6-1.4 concerning personnel policies for State colleges substantially as proposed in the Notice published July 5, 1979, at 11 N.J.R. 332(c) with only inconsequential structural or language changes in the opinion of the Department of Higher Education.

Take notice that further amendments to N.J.A.C. 9:3-1.3 (now to be cited as N.J.A.C. 9:2-9.9), Contracts for professional staff (nonfaculty), were proposed in the December 6, 1979, issue of the New Jersey Register at 11 N.J.R. 622(e) and those proposed amendments are not affected by this adoption.

An order adopting these amendments was filed and became effective on November 21, 1979 as R.1979 d.460.

Howard H. Kestin
Director
Office of Administrative Law

(b)

HUMAN SERVICES

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

Proposed Amendments Concerning Disclosure of Information

Ann Klein, Commissioner of Human Services, pursuant to authority of N.J.S.A. 30:4D-1 et seq., proposes to amend N.J.A.C. 10:49-1.3 concerning requirements that Medicaid providers submit information on disclosure of ownership.

Full text of the proposal follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

10:49-1.3 Eligible providers

(a) An eligible provider of services is any individual, partnership, association, corporation, institution or any other public or private entity designated below, meeting applicable requirements and standards for participation in the New Jersey Medicaid Program. Providers are required to complete a provider application form, to sign a provider participation agreement (FD-62) or a specialized agreement, depending on the nature of the provider (see exhibit VI at the end of this section). All provider applicants and reapplicants defined as disclosing entities (all Medicaid providers other than an individual practitioner or group of practitioners) are required to complete a HCFA form 1513, Ownership and Control Interest Disclosure Statement. Providers prior to 1973 were not required to utilize provider agreement forms, however, they must comply with all applicable State and Federal Medicaid laws, policies, rules and regulations.

1. As a condition of continued participation in the New Jersey Medicaid Program, a provider may, from time to time, be required to:

i. Complete a provider application form and sign a provider participation agreement.

ii. Complete a disclosure of ownership and control interest information statement on forms prescribed by the Medicaid Agency. NOTE: This requirement is applicable only to providers who are disclosing entities.

2. A provider who is surveyed annually, by the State survey agency (New Jersey Department of Health), is required, upon request, to furnish ownership and control interest information. The New Jersey Medicaid Agency will not approve any provider agreement and will terminate any existing agreement or contract if the provider fails to disclose information required by paragraph (a) of subchapter 10:49-1.3.

3. Enrollment documentation requested by the Medicaid Agency must be furnished within 35 days of the date of the written request.

(b) Providers eligible to participate in the New Jersey Medicaid Program are:

1. Medical and surgical supply dealers;
2. Certified independent clinical laboratories;
3. Dentists and/or dental groups;
4. Hearing aid dealers;
5. Home health agencies;
6. General hospitals;
7. Special hospitals;
8. Long-term care facilities (limited to skilled nursing facilities, [and] intermediate care facilities and intermediate care facilities for the mentally retarded);
9. Opticians;
10. Optometrists;
11. Approved clinics (independent outpatient health facilities);
12. Certified orthotists;
13. Certified prosthetists;
14. Pharmacies;
15. Physicians and/or physician groups;
16. Podiatrist and/or podiatric groups;
17. Psychologist and/or psychology groups;
18. Chiropractors and/or chiropractic groups;
19. Transportation providers (limited to ambulance and invalid coach).

10:49-1.3 EXHIBIT VI

PROVIDER AGREES:

1. To comply with all applicable State and Federal "Medicaid" laws and policy, and rules and regulations promulgated pursuant thereto;

2. To keep such records as are necessary to fully disclose the extent of the services provided to individuals receiving assistance under the Medicaid Program;

[3. To furnish the Division of Medical Assistance and Health Services with such information regarding any payments claimed for providing services under the Medicaid Program as the Division may from time to time request.]

3. To furnish the Division of Medical Assistance and Health Services, the Secretary of Health, Education and Welfare and the State Medicaid Investigation Unit with such information regarding any payments claimed for providing services under the Medicaid Program as may be requested from time to time.

The provider may, on thirty days written notice to the Division, terminate this Agreement.

.....
DATE.....

.....
Signature of Provider

.....
Title

Interested persons may present statements or arguments in writing relevant to the proposed action on or before January 30, 1980 to:

Administrative Practice Officer
Division of Medical Assistance
and Health Services
Department of Human Services
P.O. Box 2486
Trenton, New Jersey 08625

The Department of Human Services may thereafter adopt rules concerning this subject without further notice.

Ann Klein
Commissioner
Department of Human Services

(a)

HUMAN SERVICES

**DIVISION OF MEDICAL ASSISTANCE
AND HEALTH SERVICES**

**Proposed Amendments Concerning
Timely Submission of Claims and
Claims Inquiries**

Ann Klein, Commissioner of the Department of Human Services, pursuant to N.J.S.A. 30:4D-1 et seq., proposes to amend N.J.A.C. 10:49-1.12 concerning timely submission of claims and claims inquiries.

Full text of the proposed amendments follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

10:49-1.12 Timely submission of claims and claim inquiries
(a) Rules concerning non-institutional provider claims (90 day time limitation).

1. This policy applies to all providers except hospitals, special hospitals, home health agencies and long term care facilities.

2. All claims for payment of non-institutional goods and services must be [submitted to] received by the contractor no later than 90 days after the last date the goods or services were rendered and no later than 12 months from any date of service indicated on the claim form.

(b) Rules concerning long-term care provider claims (six month time limitation).

1. This policy applies to long-term care facilities (LTCF) only:

i. [Claims for long-term care facility services (skilled nursing or intermediate care facilities)] All claims for skilled nursing and/or intermediate care facilities services (including ICF/MR and State and County Psychiatric Hospitals) and/or authorized therapies provided in a LTCF [that are older than six months will be rejected] must be received by the Division of Medical Assistance and Health Services no later than:

(1) Five months from the last day of the billing month in which services were initially provided; or

(2) Five months from the last day of the billing month in which an improperly submitted claim was rejected; but never later than eleven months from the last day of the billing month in which services were initially provided.

(c) Rules concerning institutional provider claims (12 month time limitations):

1. This policy applies to hospitals, [and] special hospitals and home health agencies.

i. All claims for inpatient and outpatient hospital services and home health agency services rendered to eligible Medicaid recipients must be received by the Contractor [within] no later than:

(1) Twelve months from the day of discharge for inpatient claims; or

(2) [The last day of service billed] Twelve months from any date of service on the claim forms for outpatient or home health [agency] services.

(d) Rules concerning inquiries to the contractor:

1. Submitted claims inquiries must be made no later than 180 days after the last date of service entered on the queried claim.

2. Processed claims inquiries must be made no later than 180 days after the date shown as paid or denied on the Statement of Claims Payment or Denial Letter.

Interested persons may present statements or arguments in writing relevant to the proposed action on or before January 30, 1979 to:

Administrative Practice Officer
Division of Medical Assistance and
Health Services

P.O. Box 2486
Trenton, New Jersey 08625

The Department of Human Services may thereafter adopt rules concerning this subject without further notice.

Ann Klein
Commissioner
Department of Human Services

(a)

HUMAN SERVICES

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

Proposed Amendments Concerning Transportation Services

Ann Klein, Commissioner of the Department of Human Services, pursuant to N.J.S.A. 30:4D-1 et seq., proposes to amend N.J.A.C. 10:50-1.2, 1.3, 1.4 and 10:50-2.2, 2.5 and 2.6 concerning transportation services.

Full text of the proposed amendments follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

10:50-1.2 Definitions

"Physician" means a doctor of medicine or osteopathy licensed to practice medicine and surgery by the New Jersey State Board of Medical Examiners, or similarly licensed by comparable agencies of the state in which he practices.

"Prescription" means a transportation request certifying to the medical need for ambulance or invalid coach services. The prescription must include:

1. The Medicaid recipient's name and health services program (HSP) number.

2. The Medicaid recipient's illness or injury that necessitates transportation by ambulance or invalid coach.

3. The reason(s) the trip is necessary.

4. The name and address of the Medical care provider at the destination point.

5. The certifying physician's name (printed or typed), individual Medicaid practitioner (IMP) number and signature.

...

10:50-1.3 General policies

(a) If a transportation service is operated by an organization which has established a policy of providing service without cost for a specific class of individuals, or indi-

viduals living within a given area, then it shall be understood that such service is also available without cost to patients falling within such category who are covered under the New Jersey Medicaid Program.

(b) Ambulance service is reimbursable only under the following conditions:

[1. When the use of any other method of transportation is medically contraindicated; or

2. When such service is not free and available in the community.]

1. When such service is not free and available in the community: or

2. When the use of any other method of transportation is medically contraindicated. Transportation by any other method is considered medically contraindicated when, at the time the service is provided, one or more of the following conditions exist, regarding the Medicaid eligible individual:

i. Is transported in an emergency situation, e.g., as a result of accident, injury, or acute illness; or

ii. Is unconscious or in shock; or

iii. Requires oxygen, ventilation, or other emergency treatment enroute; or

iv. Has to remain immobile because of a fracture that has not been set or the possibility of a fracture; or

v. Has sustained an acute stroke or myocardial infarction; or

vi. Is experiencing severe hemorrhage; or

vii. Has suffered severe brain damage; or

viii. Requires intravenous therapy; or

ix. Is post cardiac catheterization; or

x. Is suffering from uncontrolled seizure disorders; or

xi. Is confined in a total body cast; or

xii. Condition includes hip spicas and/or other casts preventing hip flexion; or

xiii. Is confined in an isolette (incubator); or

xiv. Has undergone a tracheostomy (requiring suction); or

xv. Is heavily sedated; or

xvi. Is comatose; or

xvii. Is post pneumoencephalogram; or

xviii. Is suffering life threatening third degree burns; or

xix. Needs to be restrained due to likelihood of serious harm: (1) Substantial risk of physical harm to the person himself as manifested by evidence of threats of, or attempts at, suicide or serious bodily harm; (2) A substantial risk of physical harm to other persons as manifested by evidence of homicidal or other violent behavior or evidence that others are placed in reasonable fear of violent behavior and serious physical harm to them; or (3) A very substantial risk of physical impairment or injury to the person himself as manifested by evidence that such person's judgment is so affected that he is unable to protect himself in the community and that reasonable provision for his protection is not available in the community; or

xx. Is an American Heart Association Class IV patient with diseases of the heart. (Patients with cardiac disease resulting in inability to carry on any physical activity without discomfort. Symptoms of cardiac insufficiency of the anginal syndrome may be present even at rest. If any physical activity is undertaken, discomfort is increased.)

3. Note: It is recognized that there will be isolated instances necessitating ambulance transportation which do not meet the criteria above. Claims for these services will be honored providing the documentation of medical need is sufficient. Please note, however, that unavailability of other means of suitable transportation, such as an invalid coach, or the need for assistance in getting to or from the vehicle will not constitute medical necessity.

4. Although a physician must request transportation by ambulance, it is the responsibility of the transportation provider to ensure that each trip is justified in accordance with paragraph 2 of this subchapter. If, upon review, the information on the transportation claim form shows that the Medicaid recipient's medical condition did not warrant travel by ambulance, the claim will be rejected.

10:50-1.4 Prior authorization

(a) Prior authorization from the patient's local medical assistance unit is required for transportation except [in emergency conditions] for ambulance service. [See section 2 of this subchapter.]

(b) Procedures for obtaining prior authorization are as follows (also see pertinent prior authorization procedure throughout this chapter).

1. Written request: Submit [an ambulance and] a transportation claim (MC-12) together with a certification of medical necessity (prescription) from the prescribing physician [or practitioner]. Upon receipt of this information, the local medical assistance unit medical consultant will review the [date submitted,] information to verify medical necessity, check the mode of transportation [(ambulance or invalid carrier)] (invalid coach, air or other) and, if authorized, will sign the MC-12 in item [14] 16. If denied, however, the medical consultant will indicate in the provided space, the reason for the denial. The local medical assistance unit will retain the third copy for its files and forward the contractor and provider copies to the provider. After rendering the authorized service, the provider will forward the completed claim (contractor's copy) within 90 days to the contractor for payment. (See subchapter 2, Billing Procedures.)

10:50-2.2 General policy

Billing should be done on a monthly basis. In all cases, claims must be submitted to the Prudential Insurance Company no later than 90 days after the last date services were rendered. Always furnish the [prescription of the physician or practitioner] physician's prescription.

10:50-2.4 Prior authorization

(a) Services requiring prior authorization should not be provided until the authorization is granted. When submitting claims for payment make certain that item [17] 16 on form MC-12 [C3] is signed by a Medicaid medical consultant and that the appropriate mode of transportation [(ambulance or invalid carrier)] (invalid coach, air or other) has been checked off. To assure prompt claim consideration and to avoid claim rejection, always furnish the prescribing physician's [or practitioner's] name and individual Medicaid practitioner's number.

(b) Since no prior authorization is required for [emergency,] ambulance service, provider must submit those claims directly to Prudential for reimbursement.

10:50-2.5 Combination Medicare/Medicaid claims

[(a)] Services covered under Medicare to a Medicare/Medicaid eligible person shall be billed on form SSA-1491, Request for Medicare payment, and the claims sent directly to the Medicare intermediary, Prudential, Medicare B Division, P.O. Box 3000, Linwood, New Jersey 08221. The provider must record the health insurance claim number in item 2 and the New Jersey Health Services case and person number in item 5 on the SSA-1491 form.

[Note: In cases where prior authorization is required for Medicaid (nonemergency), submit three copies of the SSA-1491 (5/72) and the physician's order (prescription) to the appropriate local medical assistance unit for au-

thorization. If authorized, the Medicaid medical consultant will describe the terms of the authorization and affix his signature and date to the 1491 in item 5, and return two copies and the prescription to the provider. The provider submits the original authorized copy of the 1491 and the prescription to the Medicare intermediary for payment.]

[(b) If denied, the medical consultant will notify the provider of the reason(s), will write "Medicaid authorization denied" and sign his name in item 16, and return two copies of the claim and the prescription to the provider. If the provider renders the service when the authorization request has been denied, the claim may be submitted to Medicare for consideration, but there will not be any payment forthcoming from Medicaid.]

10:50-2.6 [Ambulance and other] Transportation claim (MC-12[C3])

(a) Transportation claim form MC-12 should be used when submitting a claim for transportation services, including the providing of oxygen when necessary.

1. Instructions for completion of form MC-12 [C3]:

10:50-2.6(a)1. (vi. Item 10: EPSDT Program referral. "Early Periodic screening diagnosis and treatment" is the Medicaid program wherein children under 21 are referred for additional services by the primary physician as medical necessity dictates. Indicate if this patient is such a referral by checking the appropriate block.]

vi. Item 10:[vii. Item 11:] Indicate whether injury resulted from an automobile accident, by checking appropriate block.

vii. Item 11: Physician ordering transportation. Enter the name and individual medical practitioner (IMP) number of the physician who ordered the transportation. Note: claims will be rejected if the information, above, is not entered in item 11.

10:50-2.6(a)1.viii.(4) Under origin and destination give the street address and city, or in the case of an institution such as a hospital or long term care facility, the name of the institution. Indicate other services rendered; for example, oxygen. When submitting your claim for payment show the distance traveled one way, from the origin to the destination. Indicate waiting time, if any, in accordance with subchapter 1 of this chapter and attach an explanation of the need for waiting time to the MC-12 [C3] claim form.

10:50-2.6(a)1. ix. Item 13: [Information required] Required information. 13A [B and C] and B must be completed as part of the request for prior authorization.

[(1). Self-explanatory. The claim will be rejected without the name and individual Medicaid practitioner number of the physician ordering transportation.]

(1) [(2)] Indicate the primary diagnosis.

(2) [(3)] Reason for transportation should indicate the nature and degree of the limitation(s) which necessitates such mode of transportation and the specific purpose of the trip(s).

(3) [(4)] Self-explanatory. (For the definition of emergency conditions, see N.J.A.C. 10:50-1.2.)

(4) [(5)] Self-explanatory.

10:50-2.6(a)1. [xi. Item 15: The transportation provider is required to obtain the patient's signature on a standard Medicaid Patient Certification Form. (See section 8 of this subchapter.) The provider must certify in item 15 of the claim form that a signed Medicaid Patient Certification Form is on file for each service billed.]

10:50-2.6(a)1. xi. Item 15: [xii. Item 16:] Provider Certification and penalties for fraud. Please read the provider certification carefully. Note that the certification states that mileage can be charged only for one patient in a multiple load and a Medicaid Patient-Certification Form, signed by the patient, is on file for each service billed. The provider must sign and date the claim. Note that the billing date is the date the claim is mailed.

Note: Payments for services rendered to Medicaid-eligible persons will be from both Federal and State funds and any false claims, statements or documents, or concealment of a material fact, is punishable under Federal and State laws. Under Federal law, whoever furnishes items or services to an individual for which payment is or may be made in whole or in part out of Federal funds under a State Medicaid plan approved under Title XIX of the Social Security Act, and who solicits, offers or receives any kickback or bribe in connection with the furnishing of such items of services or the making or receipt of such payment, or rebate or any fee or charge for referring any such individual to another person for the furnishing of such items or services, shall be guilty of a misdemeanor and upon conviction thereof shall be fined not more than \$10,000 or imprisoned not more than one year, or both.

xiii. Item 16: [xiii. Item 17:] For division use only. Authorization or denial: Make certain that you have obtained the approval of the Medicaid medical consultant for those claims requiring prior authorization, before submitting the claim for payment.

Interested persons may present statements in writing relevant to the proposed amendments on or before January 30, 1980 to:

Administrative Practice Officer
Division of Medical Assistance and
Health Services
324 East State Street
Trenton, New Jersey 08625

The Department of Human Services may thereafter adopt rules concerning this subject without further notice.

Ann Klein
Commissioner
Department of Human Services

(a)

HUMAN SERVICES

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

Proposed Amendments Concerning Covered and Non-Covered Inpatient Hospital Services

Ann Klein, Commissioner of Human Services, pursuant to authority of N.J.S.A. 30:4D-1 et seq., proposes to amend portions of N.J.A.C. 10:52-1.2 and 10:52-1.3 concerning covered and non-covered inpatient hospital services.

Full text of the proposal follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

10:52-1.2(a)[18. Inpatient hospital services rendered after the day it is medically necessary, except when special circumstances prevent the discharge or transfer of the patient:

Note: The contractors may reimburse a hospital up to 12 calendar days following the period established as being medically necessary if special circumstances (social necessity) prevent the discharge or transfer of the patient to his/her home or sheltered boarding home and the hospital has taken effective action to stimulate placement of the patient.

i. Effective action is defined as telephone notification to the county welfare board, Division of Youth and Family Services district office or other responsible officials within one working day of the time that the stay has been determined to be no longer medically necessary. This telephone contact must be then confirmed in writing.

ii. A copy of the written notification must be submitted with all claims for which reimbursement is claimed for special circumstances (social necessity)].

[19]18. Sterilization, inpatient services: Payment will be made for sterilization procedures and hysterectomies only if the following requirements are met:

i. The individual is at least 21 years old at the time of consent is obtained;

ii. The individual is not mentally incompetent or institutionalized;

iii. The individual has voluntarily given informed consent;

iv. At least 30 days, but not more than 180 days, have passed between the date of informed consent and the date of the sterilization, except in the case of premature delivery or emergency abdominal surgery. An individual may consent to be sterilized at the time of premature delivery or emergency abdominal surgery, if at least 72 hours have passed since he or she gave informed consent for sterilization. In the case of premature delivery, the informed consent must be given at least 30 days before the expected date of delivery;

v. The Medicaid agency obtained documentation showing that all of these requirements were met. This documentation must include a consent form or an acknowledgement of receipt of hysterectomy information.

10:52-1.2[(b) Payment for special circumstances (social necessity) is specifically precluded for:

1. Patients awaiting placement in a skilled nursing home or intermediate care facility;

2. Patients for whom a claim has been denied for lack of medical necessity;

3. Patients who were not eligible recipients as of the date of admission.]

10:52-1.3(a)[9. Inpatient hospital services rendered after the day it is medically necessary, except when special circumstances prevent the discharge or transfer of the patient. Authorization must be obtained from the local medical assistance unit for reimbursement of additional hospital stay,]

9. In patient hospital services rendered after the day it is medically necessary, except under the following condition:

i. Except for patients awaiting placement in a long term care facility, a hospital may be reimbursed the Statewide average per diem for Medicaid participating long term care facilities for up to 12 calendar days following the period established as being medically necessary for acute care, if special circumstances (social necessity) prevent the discharge or transfer of the patient, and the hospital has taken effective action to stimulate discharge of the patient.

(i) Effective action is defined as telephone notification to the County Welfare Agency, Division of Youth and

Family Services District Office or other responsible officials within 48 hours of the time that the stay has been determined to be no longer medically necessary. This telephone contact must be confirmed in writing.

(2) A copy of the written notification must be submitted with all claims for which reimbursement is claimed for special circumstances (social necessity).

ii. Payment is specifically precluded for: (1) Patients for whom the entire inpatient hospital claim has been denied for lack of any medical necessity; (2) Patients who were not eligible recipients.

10:52-13(a)16. Inpatient hospital services rendered after the day it is medically necessary, except under the following condition:

i. Payment will be made for patients awaiting placement in a long term care facility (Skilled Nursing Facility, Intermediate Care Facility A or B) if the hospital can demonstrate that:

(1) All possible third party liability, including Medicare benefits, have been utilized;

(2) The care and services provided are medically necessary, i.e., the patient requires care in a long term care facility;

(3) Discharge planning was initiated upon admission of the patient to the hospital and reviewed and updated regularly;

(4) The attending physician has written a discharge order from acute care;

(5) Placement could not be made in a long term care facility as substantiated by timely and continuous contact with family members, long term care facilities and placement agencies;

(6) Notification to the Medicaid Local Medical Assistance Unit in the hospital area that the patient requires placement in a long term care facility. Verbal notification must take place within 48 hours of the time that acute inpatient care is no longer medically necessary, to be followed by a written notification.

ii. Upon satisfaction of all the conditions set forth above, reimbursement will be made for each eligible patient at the Statewide average per diem rate of Medicaid participating long term care facilities (pending approval by the U.S. Department of Health and Human Services) as determined on January 1 and July 1 of each calendar year.

(1) For those hospitals that have a long term care certified unit, payment is limited to the Statewide average per diem rate of payment established for each level of care in that unit.

(2) Reimbursement shall be reduced by available patient income.

iii. Ancillary services provided to patients who meet all conditions of subparagraph i of this paragraph may be billed as a hospital outpatient service.

iv. Payment is specifically precluded for:

(1) Patients for whom the entire inpatient hospital claim has been denied for lack of any medical necessity.

(2) Patients who were not eligible recipients.

Interested persons may present statements or arguments in writing relevant to the proposed action on or before January 30, 1980 to:

Administrative Practice Officer
Division of Medical Assistance
and Health Services
Department of Human Services
P.O. Box 2486
Trenton, N.J. 08625

The Department of Human Services may thereafter adopt rules concerning this subject without further notice.

Ann Klein
Commissioner
Department of Human Services

(a)

HUMAN SERVICES

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

Proposed Rules on Out-of-State Hospital Reimbursement

Ann Klein, Commissioner of Human Services, pursuant to N.J.S.A. 30:4D-1 et seq., proposes to adopt rules concerning the reimbursement of out-of-State hospitals, to be cited as N.J.A.C. 10:52-1.16 and 10:52-1.17.

Full text of the proposed rules follows:

10:52-1.16 Out-of-State inpatient hospital services

(a) Reimbursement of inpatient services in out-of-State approved hospitals will be based on the following criteria:

1. Interim reimbursement will be the lesser of the hospital's per diem approved by the Title XIX (Medicaid) agency in its respective state or a weighted per diem based upon New Jersey hospitals' Title XIX costs and Title XIX days adjusted prospectively for inflation;

2. Final reimbursement will be the lesser of the hospitals final audited per diem in its respective state or the actual weighted Medicaid per diem based upon New Jersey hospitals' Title XIX costs and Title XIX days.

(b) Reimbursement of inpatient services in out-of-State non-approved hospitals will be based on the following criteria:

1. Service will be limited to emergency services.

2. Interim reimbursement will be based upon the lesser of the hospitals per diem approved by the Title XIX agency in its respective state or a weighted per diem based upon New Jersey hospitals' Title XIX costs and Title XIX days adjusted prospectively for inflation;

3. Final reimbursement will be the lesser of the hospitals final, audited per diem in its respective state or the actual weighted Medicaid per diem based upon New Jersey hospitals' Title XIX costs and Title XIX days.

(c) The Medicaid program offers out-of-State hospitals the option of selecting the weighted Medicaid per diem adjusted for inflation or a per diem rate based upon the Standard Hospital Accounting and Rate Evaluation (SHARE) System.

1. The weighted Medicaid per diem rate may be obtained by contacting:

Director, Provider Reimbursement
Hospital Service Plan of New Jersey
33 Washington Street
Newark, New Jersey 07102

2. If out-of-State hospitals wish to receive a SHARE rate, the following procedures should be followed:

i. Out-of-State hospitals must contact
Director, Health Economic Services
New Jersey Department of Health
P.O. Box 1540
John Fitch Plaza
Trenton, New Jersey 08625
Telephone: (609) 292-8710

and request a copy of the necessary SHARE budget forms and instructions for filing.

ii. Based on the information provided in the SHARE

budget, the Department of Health will notify the hospital, the Hospital Service Plan of New Jersey (New Jerseys Medicaid's contractor for out-of-State hospitals) and the New Jersey Medicaid program of the approved rate of reimbursement. Appropriate procedures included in this SHARE system may be followed if the hospital wishes to appeal the rate.

iii. For SHARE rates, settlement will be based upon actual costs. Hospitals electing the SHARE option must submit a SHARE actual cost study to the Director, Health Economics Services, and a Cost Report form SSA-2552 to the Hospital Service Plan of New Jersey.

iv. The Department of Health will notify the Hospital Service Plan of New Jersey, the out-of-State hospital and the New Jersey Medicaid program of the final payment rate; and the Hospital Service Plan of New Jersey will make final settlement with the out-of-State hospital for the New Jersey Medicaid program.

10:52-1.17 Out-of-State outpatient hospital services

(a) Reimbursement for outpatient services in out-of-State approved hospitals will be based on the rate of reasonable covered charges approved in the state in which the hospital is located.

(b) Reimbursement for outpatient services in out-of-State non-approved hospitals is limited to an initial visit for emergency services and will be based on the rate of reasonable covered charges approved in the state in which the hospital is located.

Interested persons may present statements or arguments in writing relevant to the proposed action on or before January 30, 1980 to:

Administrative Practice Officer
Division of Medical Assistance
and Health Services
P.O. Box 2486
Trenton, New Jersey 08625

The Department of Human Services may thereafter adopt rules concerning this subject without further notice.

Ann Klein
Commissioner
Department of Human Services

(a)

HUMAN SERVICES

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

Proposed Amendments Concerning Repair of Durable Medical Equipment

Ann Klein, Commissioner of Human Services, pursuant to authority of N.J.S.A. 30:4D-1 et seq., proposes to amend certain rules concerning requirements that Medicaid pay for repair of medical equipment items.

Full text of the proposal follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

10:59-1.7 Prior authorization

(a) Suppliers providing any of the following items must first obtain prior authorization from the appropriate LMAU.

...

4. Orthopedic shoes are covered only under the following conditions:

...
iii. When used to correct or adapt to gross foot deformities;

...
20. Parts used for repair of durable medical equipment for which the charge to the program exceeds \$30.00.

(b) Suppliers repairing durable medical equipment and requesting reimbursement for labor charges must obtain prior authorization.

10:59-1.8 Procedures for requesting prior authorization

(a) Complete the following items on the Medical Supplies and Equipment Claim (MC-11-C4): 1, 2, 3, 4, 5, 6, 7, 8, 9, 14 (B, C, D, E, F), 16 and 17. Mail the claim form and the written prescription (a legible photocopy is acceptable) to the appropriate LMAU. For repairs, a written prescription is not required.

(b) If the request is authorized, item 15 will be signed and dated by a Medicaid Medical Consultant and the contractor's and provider's copies will be returned to the provider. The LMAU will retain the LMAU copy and the prescriber's written order. The provider may then proceed to supply the authorized item and/or service to the recipient. (See Subchapter 2 for billing instructions.)

(c) If the request is denied, the provider will receive written notification from the LMAU.

Note: See section 2.8 for prior authorization procedures for Medicare/Medicaid eligible persons.

10:59-1.10(b) When rental is authorized:

...
2. If a medical equipment item has an approved purchase price under the Program of \$100.00 or more, the monthly rental will be the amount billed or 12 percent of the approved purchase price[, whichever is less. [After ten such payments, the item shall be deemed to be purchased and no further payments shall be required.] Ten such payments shall be deemed to be the full purchase price and no further payments shall be made.

3. If a medical equipment item has an approved purchase price under the program of less than \$100.00, the monthly rental payment will be the amount billed or 20 percent of the approved purchase price[, whichever is less. Six such payments shall be deemed to be the full purchase price and no further payments shall be made.

...
7. If the purchase of a rental item is authorized before the maximum rental to purchase conversion period (See paragraph 2 or 3 of this subsection), a final payment will be made not to exceed the difference between the total rental payments [and either the approved purchase price of a new or of a used item, whichever is applicable.] made and the total amount eligible as per maximum rental to purchase conversion period.

...
9. Exceptions include the following:

i. Demurrage (rental) charges for oxygen cylinders not replaced within 30 days do not require a prior authorization, but may be billed to the New Jersey Medicaid Program by submitting the contractor's copy of the claim form to the contractor and the LMAU copy to the appropriate LMAU.

ii. Respiratory equipment such as, but not limited to, IPPB machines, ventilators and respirators, shall not be considered purchased after rental payments reach 120 percent of the approved purchase price as described in paragraph 2 and 3 of this subsection. (Purchase of such equipment can be approved at any time). Except:

(1) Note: Rental of ancillary equipment such as regulators and oxygen equipment will qualify under paragraphs 2 and 3 of this subsection (120% = paid).

10:59-1.11 Repair policy

(a) Medical equipment items may be repaired and suppliers reimbursed for replacement parts and/or labor charges when, in the judgment of the Medicaid Medical Consultant, the medical need for the item will continue to exist for a period of time and repair is more economical than purchase.

(b) When repair is authorized:

1. Reimbursement for replacement parts shall be based on one of the following standards, whichever is less:

i. The provider's usual and customary charge to the general public; or

ii. An allowance determined reasonable by the Commissioner of Human Services, within the limitations set by Federal policy relative to reimbursement to individual providers.

2. Reimbursement for labor charge shall be \$10.00 per hour, divided into quarter hour increments of \$2.50.

3. Exceptions:

i. Reimbursement for repairs, both parts cost and labor charge, will not be authorized for durable medical equipment under warranty.

ii. When combined parts cost and labor charge exceed 50 percent of replacement value, repair will not be authorized.

iii. Reimbursement for travel time will not be authorized.

(c) When an emergency situation occurs and repairs are made without obtaining prior authorization, the supplier must obtain prior authorization within two LMAU working days of such repair.

10:59-2.11 Medical supplies and equipment claim (MC-11-C4)

The form MC-11-C4 is to be used for the purpose of billing for medical supplies and equipment and repairs to durable medical equipment. For services requiring prior authorization, item 15 must be signed and dated by a Medicaid Medical Consultant, before the claim may be considered for payment.

(a) Instructions for completion of form MC-11-C4 (Exhibit II) follow:

Item 14.A.—Enter date(s) item and/or repair service was provided.

Item 14.C.—Describe item(s) provided, including name of manufacturer and model number. Indicate whether item is new or used by checking appropriate box.

—Indicating in quarter hour increments actual time spent repairing equipment.

Interested persons may present statements or arguments in writing relevant to the proposed action on or before January 30, 1980 to:

Administrative Practice Officer
Division of Medical Assistance
and Health Services
Department of Human Services
P.O. Box 2486
Trenton, N.J. 08625

The Department of Human Services may thereafter adopt rules concerning this subject without further notice.

Ann Klein
Commissioner
Department of Human Services

(a)

HUMAN SERVICES

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

Proposed Amendments Concerning Changes of Reimbursement for Independent Clinics

Ann Klein, Commissioner of Human Services, pursuant to authority of N.J.S.A. 30:4D-1 et seq., proposes to amend N.J.A.C. 10:66-1.15 concerning changes of reimbursement for independent clinics.

Full text of the proposal follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

10:66-1.15 Basis for reimbursement

[(a) Except where otherwise indicated, reimbursement for covered services furnished under the health services program shall be the customary charge of the provider, not to exceed a \$5.00 all inclusive per diem rate unless a rate has been negotiated. In no event shall the payment exceed the customary charge to other individuals receiving the specific service.]

(a) Reimbursement for covered services in approved independent clinics shall be determined by the Commissioner of the Department of Human Services. Except where a set fee schedule exists, reimbursement to independent clinics shall be based on the same fees, conditions and definitions, for corresponding services, utilized for the reimbursement of individual Medicaid participating practitioners and providers in "private" practice.

[(b) The per diem rate stated in subsection (a) of this section shall include transportation when provided.]

(b) In no event shall the charge to the New Jersey Medicaid Program exceed the charge by the provider for identical services to other governmental agencies or other group or individuals in the community.

Interested persons may present statements or arguments in writing relevant to the proposed action on or before March 9, 1980 to:

Administrative Practice Officer
Division of Medical Assistance
and Health Services
Department of Human Services
P.O. Box 2486
Trenton, New Jersey 08625

The Department of Human Services may thereafter adopt rules concerning this subject without further notice.

Ann Klein
Commissioner
Department of Human Services

(b)

HUMAN SERVICES

DIVISION OF PUBLIC WELFARE

Proposed Amendments Concerning Residence Requirements and Assignment of Support Rights

Ann Klein, Commissioner, Department of Human Services, pursuant to authority of N.J.S.A. 44:7-6 and 44:10-3, proposes to amend Section 3510, Appendix D; Sections 201.b, 220 and 221.5a of the Public Assistance Manual con-

cerning residence requirements; completion of Form PA-10G (Assignment of Support Rights) as a condition of eligibility in all AFDC-C and -F segment cases, and routing of Form PA-10G (N.J.A.C. 10:81-3.21 and Appendix D).

Full text of the proposal follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

10:81-3.21 Residence requirements

The law requires that an applicant for or recipient of assistance shall reside in New Jersey. Any person who responds affirmatively to the question on the application "Do you plan to continue living in New Jersey?" fulfills this requirement. The requirement is also satisfied when the person resides in the State having entered with a job commitment or is seeking employment even if he/she is currently unemployed.

10:81 Appendix D 201b. Assignment of support rights

[An] AFDC-C and -F applicants shall assign to the CWA all rights to support from the children's absent parent(s) or any other person to which the eligible children, or the applicant when he/she is included in the eligible unit, may be entitled (see App. D 220).

220. Assignment of support rights

The law requires that all applicants for AFDC-C and -F shall be required to sign Form PA-10G, "Assignment of Support Rights" [...] except those cases in which the only legally responsible relative is a member of the eligible unit or is the incapacitated parent in an AFDC-C case.

221. Form PA-10G

221.5 Routing of Form PA-10G

a. Cases that do not involve an absent parent, but still require completion of Form PA-10G, shall be completed in triplicate. One copy of the form shall be given to the AFDC applicant/recipient and two copies shall be placed in the case record.

Interested persons may present statements or arguments in writing relevant to the proposal on or before January 30, 1980 to:

G. Thomas Riti, Director
Division of Public Welfare
Box 1627
Trenton, New Jersey 08625

The Division of Public Welfare may, thereafter, adopt rules concerning this subject without further notice.

Ann Klein
Commissioner
Department of Human Services

(a)

HUMAN SERVICES

DIVISION OF PUBLIC WELFARE

Proposed Amendments Concerning Recovery of Assistance Granted on Behalf of a Child Pending Settlement of a Claim

Ann Klein, Commissioner, Department of Human Services, pursuant to authority of N.J.S.A. 44:7-6 and 44:10-3 proposes to amend Section 3951(b)(1) of the Public Assistance Manual concerning clarification of procedures

regarding recovery of assistance granted on behalf of a child pending settlement of a claim (N.J.A.C. 10:81-3.41).

Full text of the proposal follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

10:81-3.41(a)2.i. The amount of assistance paid on behalf of a child shall be the difference between the actual grant(s) received and the amount which would have been granted to the family if the child had not been included in the eligible unit.

Interested persons may present statements or arguments in writing relevant to the proposal on or before January 30, 1980 to:

G. Thomas Riti, Director
Division of Public Welfare
Box 1627
Trenton, New Jersey 08625

The Division of Public Welfare may, thereafter, adopt rules concerning this subject without further notice.

Ann Klein
Commissioner
Department of Human Services

(b)

HUMAN SERVICES

DIVISION OF PUBLIC WELFARE

Proposed Amendments Concerning Retention and Destruction of Case Records

Ann Klein, Commissioner, Department of Human Services, pursuant to authority of N.J.S.A. 44:7-6 and 44:10-3, proposes to amend Section 7270 of the Public Assistance Manual concerning retention and destruction of case records. (N.J.A.C. 10:81-7.13.) The current text of N.J.A.C. 10:81-7.13 and 7.14 is to be deleted and replaced with new text.

Full text of the proposed new rules follows.

10:81-7.13 Retention and destruction of case records

(a) Each county welfare agency will retain all material normally kept in the "case folder" for the time periods indicated in subsection (b) of this section. At the expiration of such time period the CWA may, at its option, destroy records in accordance with subsections (c) and (d) of this section, continuing to retain those portions indicated. In permanent available archives the CWA will retain information showing the date and manner of destruction of each "case folder" destroyed.

1. "Case folder" shall be construed to mean the entire set of income maintenance records related to eligibility determinations for one person or household in one program of assistance. Each such case folder may be reviewed as a single unit without reference to the fact that the person(s) involved may have received assistance or may be receiving assistance under another program.

(b) Retention periods are:

1. No Reimbursement Owing: In destroying records in this category, the agency should provide for the permanent retention of information by which to assure itself in the future of the absence of a claim and the reason(s) therefor.

Case Folders

- a. Cases denied or rejected without a grant of assistance
- b. Cases in which all assistance has been repaid in full
- c. Cases in which no repayment was ever due (Most AB, AFDC)
- d. Cases in which no further repayment is due (most AFWP, repaid fraud restitution, and other overpayments in all programs, repaid "suits and claims" matters in AFDC, fully paid assigned support rights)
- e. Cases in which a specific agency decision has resulted in abandonment of a claim(s)

Retention Period

Three (3) years after the last official agency action or court action which influences the granting or recovery of assistance or the receipt of the final recovery payment, whichever is later.

2. Reimbursement owing:

i. In all instances of unresolved fraud or other payment matters, unresolved "suits and claims" overpayment matters, unresolved "suits and claims" rights, retain all records in each case until the matter(s) in question is resolved and the case falls into one of the groups listed below or in Section 7272.1 above; then retain accordingly.

ii. In destroying records of cases in which reimbursement is owing, the agency must retain enough information in permanent archives to provide clear identification of debtors, to document the amounts, and to allow the taking of any legal or administrative action which may become necessary in the future by either the agency or by DMAHS.

iii. Retain records in cases in which reimbursement is owing as follows:

Case Folders	Retention Period
OAA, DA, MAA, Medicaid Only	
a. client still living	indefinite
b. client deceased (see note below)	
(1) probable recovery pending	indefinite
(2) all known or probable recovery completed or none possible	three (3) years after death or last official action, whichever is later

Note: In accordance with actuarial practice, persons not known to be deceased may be presumed dead at age 100 unless information to the contrary exists.

(c) Requests for destruction of case records will be submitted on State Form ED-6, Request and Authorization for Records Disposal, which may be obtained from the Bureau of Business Services, Division of Public Welfare. Form ED-6 will be completed as follows:

- 1. Request Number and Date—each county welfare agency shall assign its own number to each request and the date upon which it was submitted;
- 2. Authorization Number and Date—for use of the Bureau of Archives and History;
- 3. From: provide complete address of county welfare agency;
 - i. Item: number the items in sequence beginning with number 1;
 - ii. Records Title and Description: indicate the number of case records by categorical program and provide sufficient information to show where they are in the Record Retention Schedule;
 - iii. Inclusive Dates: indicate the inclusive dates to which the material applies (e.g., the earliest application was taken and the most recent year a case was closed);

iv. Volume: volume is to be measured in cubic feet (one file drawer equals two cubic feet). Measurements should be rounded to the nearest cubic foot—do not use a measurement less than one cubic foot;

v. Retention Period: complete in accordance with 7272; and

vi. Requested by: signature of CWA director or authorized agent.

vii. (All other items will be completed by the appropriate State Agency.)

4. All copies of the completed Form ED-6 will be forwarded to the Bureau of Business Services for approval. The county welfare agency shall not destroy any records until such approval has been received by CWA in writing.

d) When disposal is authorized, records must be destroyed in fact and should not be allowed to fall into unauthorized hands. Nonconfidential records may be sold for waste, providing that they will eventually be processed to destroy their identity. Confidential records must be destroyed by burning, shredding or pulping, and a responsible official shall supervise such disposal or accompany the records, if they have to be transported, to see that they are in fact totally destroyed.

10:81-7.14 (Reserved)

Interested persons may present statements or arguments in writing relevant to the proposal on or before January 30, 1980 to:

G. Thomas Riti, Director
Division of Public Welfare
Box 1627
Trenton, New Jersey 08625

The Division of Public Welfare may, thereafter, adopt rules concerning this subject without further notice.

Ann Klein
Commissioner
Department of Human Services

(a)

HUMAN SERVICES

DIVISION OF PUBLIC WELFARE

Proposed Amendments Concerning Cross-References to the Public Assistance Manual And Incorporation of Existing Policy Into the Manual

Ann Klein, Commissioner, Department of Human Services, pursuant to authority of N.J.S.A. 44:7-6 and 44:10-3 proposes to amend sections 126 and 324.4a of the Assistance Standards Handbook concerning cross-references to the Public Assistance Manual and incorporation of existing policy into the manual (N.J.A.C. 10:82-1.4 and 10:82-3.7).

Full text of the proposal follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

10:82-1.4(e) When it is necessary to identify the allowance for an individual member of the eligible unit, such as when this information is required by a court order for support, his/her per capita share of the eligible unit's public assistance allowance is determined from the Per Capita Table following section 230. (See N.J.A.C. 10:81-3.41(a)2i. for policy relative to settlement of claims.)

10:82-3.7(a)4.i. Where assistance is extended during the period that the receipt or liquidation of such interest is pending, an agreement shall be made whereby the eligible unit will, when liquidation occurs, repay the agency the amount of assistance granted since the incident or claim occurred, or the amount received as the result of the claim, whichever is less. (See N.J.A.C. 10:81-3.41(a)2.i. for determination of amount of assistance granted.)

ii. The following are not subject to repayment to the CWA: Retroactive Social Security payments, [or] SSI payments (except as indicated in N.J.A.C. 10:81-2.7(c)5, 10:81-3.8(e)2.i., 10:81-3.40(b)3 and 10:81-3.46), Veteran's benefits, [Workmen's] Workers' Compensation and Temporary Disability benefits.

Interested persons may present statements or arguments in writing relevant to the proposal on or before January 30, 1980 to:

G. Thomas Riti, Director
Division of Public Welfare
Box 1627
Trenton, New Jersey 08625

The Division of Public Welfare may, thereafter, adopt rules concerning this subject without further notice.

Ann Klein
Commissioner
Department of Human Services

(a)

HUMAN SERVICES

DIVISION OF PUBLIC WELFARE

Proposed Amendments Concerning the Determination of Monthly Income of AFDC Clients Employed on a Contractual Basis

Ann Klein, Commissioner, Department of Human Services, pursuant to authority of N.J.S.A. 44:7-6 and 44:10-3 proposes to amend Section 246 of the Assistance Standards Handbook concerning the determination of monthly income of AFDC clients employed on a contractual basis. (N.J.A.C. 10:82-2.19.)

Full text of the proposal follows (additions indicated in boldface thus).

10:82-2.19(g) Earned income of a teacher or other professional or nonprofessional school employee shall be considered on a yearly basis. So long as the individual is employed at the end of the school term and there is no indication that he/she will not be employed at the beginning of the following term, total earnings shall be prorated over a 12-month period regardless of frequency of payment.

Interested persons may present statements or arguments in writing relevant to the proposal on or before January 30, 1980 to:

G. Thomas Riti, Director
Division of Public Welfare
Box 1627
Trenton, New Jersey 08625

The Division of Public Welfare may, thereafter, adopt rules concerning this subject without further notice.

Ann Klein
Commissioner
Department of Human Services

(b)

HUMAN SERVICES

DIVISION OF PUBLIC WELFARE

Proposed Amendments Concerning Increase in Monthly Rates for Foster Care as Established by The Division of Youth and Family Services

Ann Klein, Commissioner, Department of Human Services, pursuant to authority of N.J.S.A. 44:7-6 and 44:10-3 proposes to amend Section 418.2 of the Assistance Standards Handbook concerning increase in monthly rates for foster care as established by the Division of Youth and Family Services (N.J.A.C. 10:82-4.9).

Full text of the proposal follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

10:82-4.9(c) The basic monthly rates for foster care as established by the Division of Youth and Family Services are as follows:

1. Child under 6 years[\$110]\$116 per month;
2. 6 through 10 years[116] 122 per month;
3. 11 through 14 years[125] 132 per month;
4. 15 years and over[135] 144 per month.

Interested persons may present statements or arguments in writing relevant to the proposal on or before January 30, 1980 to:

G. Thomas Riti, Director
Division of Public Welfare
Box 1627
Trenton, New Jersey 08625

The Division of Public Welfare may, thereafter, adopt rules concerning this subject without further notice.

Ann Klein
Commissioner
Department of Human Services

(c)

HUMAN SERVICES

DIVISION OF PUBLIC WELFARE

Proposed Amendments Concerning Recording of Social Security Numbers, Declination of State Reimbursement, Inpatient Hospital Care and Cross-Reference Concerning Period of Eligibility

Ann Klein, Commissioner, Department of Human Services, pursuant to authority of N.J.S.A. 44:8-111 proposes to amend sections 323, 326, 510 and 634.2 of the General Assistance Manual concerning clarification of existing manual language concerning recording of Social Security numbers, declination of State reimbursement, inpatient hospital care and cross-reference concerning period of eligibility (N.J.A.C. 10:85-3.2, 10:85-5.2 and 10:85-6.3).

Full text of the proposal follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

10:85-3.2(c)4. Social Security number: The Social Security number of every recipient of General Assistance must

be recorded on the application form (Form GA-1) and elsewhere in the record as may be appropriate to the facts of the case. Any person who has a number and whose number is not disclosed and recorded is not eligible for assistance. (This regulation is not applicable to undocumented aliens because they are not permitted to have Social Security accounts.)

10:85-3.2(f)1. A person in a hospital, nursing home, intermediate care facility, maternity home or in drug treatment center shall be considered a resident of the last municipality in which he/she was a resident prior to entering the facility. Only facilities which are licensed by the New Jersey Department of Health in the stated categories are to be recognized as being a temporary residence of an applicant or recipient for medical care.

i. For a person in such a facility who is a resident elsewhere in New Jersey, the MWD in the municipality in which the facility is located will process all parts of the application except the making of payments. The local MWD will send the results of such eligibility determinations to the MWD of the responsible municipality for payment and/or other appropriate action.

ii. Whenever state reimbursement of a payment is declined as having been improper or not in accord with regulations (see N.J.A.C. 10:85-1.3, 2.1(b) and 6.2) the decline will apply to the responsible (paying) municipality, errors by the servicing municipality notwithstanding. Any further adjustments are matters between or among the municipalities involved.

10:85-5.2(a) The Director of Welfare may authorize payment for inpatient care and services in an approved hospital if such has been prescribed by a fully licensed physician, dentist or podiatrist for medical, surgical or psychiatric treatment, diagnosis, and/or rehabilitation. Such payment(s) must be authorized for eligible persons living in municipalities located in First Class Counties (currently, Essex, Bergen, and Hudson) and entering hospitals in such counties.

10:85-5.2(c) To the extent that they are prescribed by a physician, dentist or podiatrist as necessary for the diagnosis and/or treatment of the condition for which hospitalization is required, the following hospital care and services [qualify for State aid:] are included in the all-inclusive hospital per diem:

10:85-6.3(b)2. Promptness of payment: Those municipalities which issue checks in direct payment of assistance to eligible persons shall arrange their fiscal procedures so as to result in the delivery of all initial and regular checks on the first day of each period of eligibility and the delivery of replacement checks which are issued in accordance with N.J.A.C. 10:85-2.4(c) within the time period required in that section. (See N.J.A.C. 10:85-4.2 for periods of eligibility.)

Interested persons may present statements or arguments in writing relevant to the proposal on or before January 30, 1980 to:

G. Thomas Riti, Director
Division of Public Welfare
Box 1627
Trenton, New Jersey 08625

The Division of Public Welfare may, thereafter, adopt rules concerning this subject without further notice.

Ann Klein
Commissioner
Department of Human Services

(a)

HUMAN SERVICES

DIVISION OF PUBLIC WELFARE

Proposed Amendments Concerning the Determination of Monthly Income for Persons Employed on Contractual Basis

Ann Klein, Commissioner of Human Services, pursuant to authority of N.J.S.A. 44:8-111, proposes to amend Section 333.8 of the General Assistance Manual concerning the determination of monthly income for persons employed on contractual basis. (N.J.A.C. 10:85-3.3.)

Full text of the proposal follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

10:85-3.3(c)8. Earnings of teachers and other school employees: Earned income of a teacher or other professional or nonprofessional school employee shall be considered on a yearly basis. So long as the individual is employed at the end of the school term and there is no indication that he/she will not be employed at the beginning of the following term, total earnings shall be prorated over a 12 month period regardless of frequency of payment.

Interested persons may present statements or arguments in writing relevant to the proposal on or before January 30, 1980 to:

G. Thomas Riti, Director
Division of Public Welfare
Box 1627
Trenton, New Jersey 08625

The Division of Public Welfare may, thereafter, adopt rules concerning this subject without further notice.

Ann Klein
Commissioner
Department of Human Services

(b)

HUMAN SERVICES

DIVISION OF PUBLIC WELFARE

Proposed Amendments Concerning Retention Period for Computer Operations Source Documents

Ann Klein, Commissioner of Human Services, pursuant to authority of N.J.S.A. 30:4B-2, proposes to amend section 1021.1 of the Food Stamp Manual concerning retention period for computer operations source documents. Such rules are referenced in N.J.A.C. 10:87-10.1 et seq.

Full text of the proposal follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

1020. MISCELLANEOUS FISCAL OPERATIONAL INSTRUCTIONS

1021. Retention of Fiscal Records - Retention regulations for FSP fiscal records at the CWA-FSCO divide into two categories:

1021.1 (Category I) - Computer operations source documents
The CODES 105 A and B [Forms] source documents are

(Continued on Page 39)

INTERIM INDEX FOR NEW JERSEY ADMINISTRATIVE CODE

This regular monthly listing provides an interim service for subscribers to the New Jersey Administrative Code, as a check-list of rules most recently adopted.

It includes all rules adopted from receipt of the last individual transmittals as indicated through December 14, 1979.

RULES NOT YET IN PRINT IN CODE (May be found in N.J. Register beginning with April 5, 1979):
(Full text (in proposal form), if published, may be found in N.J. Register beginning with Sept. 6, 1978.)

<u>N.J.A.C.</u> <u>CITATION</u>	<u>DOCUMENT</u> <u>CITATION</u>	<u>ADOPTION NOTICE</u> <u>(N.J.R. CITATION)</u>
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AGRICULTURE — TITLE 2

2:3-2.12	Amend exemption from pseudorabies test (Title 2, Transmittal 15 dated July 19, 1979 includes all rules through August 9, 1979 N.J. Register.)	R.1979 d.304	11 N.J.R. 426(a)
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BANKING — TITLE 3

3:1-1.2	Interest rates on other loans	R.1979 d.290	11 N.J.R. 429(b)
3:1-9	Amend red-lining	R.1979 d.415	11 N.J.R. 534(b)
3:11-1.1	Amend approval to exceed ten per cent limitation (Title 3, Transmittal 14 dated July 19, 1979 includes all rules through August 9, 1979 N.J. Register.)	R.1979 d.298	11 N.J.R. 429(c)

CIVIL SERVICE — TITLE 4

(Title 4, Transmittal 13 dated June 1, 1979 includes all rules to date.)

COMMUNITY AFFAIRS — TITLE 5

5:10	Amend maintenance of hotels and multiple dwellings	R.1979 c.259	11 N.J.R. 366(b)
5:11	Amend relocation assistance and eviction	R.1979 d.383	11 N.J.R. 535(c)
5:11-1.8	Eviction and relocation	R.1979 d.103	11 N.J.R. 167(a)
5:23-2.5(b)	Amend construction permits	R.1979 d.292	11 N.J.R. 431(b)
5:23-3.3, 4.9	Amend Uniform Construction Code	R.1979 d.342	11 N.J.R. 498(a)
5:25	New Home Warranty and Builder's Registration Act rules	R.1979 d.147	11 N.J.R. 223(c)
5:26-1.3, 2.2, 2.17, 3.1, 4.2, 6.5, 8.4, 11.7, 11.9	Amend planned real estate development full disclosure	R.1979 d.439	11 N.J.R. 610(b)
5:30-6.1	Uniform accounting system for various statutory offices in county governments	R.1979 d.294	11 N.J.R. 431(c)
5:100	Ombudsman practices and procedures; public notice requirements	R.1979 d.166	11 N.J.R. 274(a)
5:100	Amend rules of practice and procedure (Title 5, Transmittal 12 dated March 15, 1979 includes all rules through March 8, 1979 N.J. Register.)	R.1979 d.386	11 N.J.R. 536(a)

EDUCATION — TITLE 6

6:3-1.22	Evaluation of tenured chief school administrators	R.1979 d.480	12 N.J.R. 7(a)
6:8-4.6	Amend school and community relations; T and E	R.1979 d.303	11 N.J.R. 432(a)
6:11-12.5, 12.6, 12.23	Repeal teacher-librarian and school librarian; amend issuance of certificates in educational media	R.1979 d.355	11 N.J.R. 501(b)
6:20-5.4	Additional State school building aid	R.1979 d.479	12 N.J.R. 6(b)
6:20-7	Amend qualifications, debarment, suspension and disqualification of person(s) concerning contract administration	R.1979 d.478	12 N.J.R. 6(a)
6:21-5.32, 6.49	Implementation of school bus chassis, bus body and equipment specifications	R.1979 d.269	11 N.J.R. 367(a)
6:39	Amend Statewide assessment	R.1979 d.443	11 N.J.R. 615(a)
6:80	Rule on educational improvement centers (Title 6, Transmittal 14 dated May 17, 1979 includes all rules through July 5, 1979 N.J. Register.)	R.1979 d.272	11 N.J.R. 368(a)

ENVIRONMENTAL PROTECTION — TITLE 7

7:1G-1	Interim rules for review and approval of applications for development or construction	R.1979 d.333	11 N.J.R. 502(b)
7:1G-1.11	Amend review and approval of applications for development or construction	R.1979 d.458	12 N.J.R. 10(c)
7:1G-1.11(a)2	Amend water quality standards	R.1979 d.395	11 N.J.R. 543(b)
7:1G-2	Procedures for processing applications for development	R.1979 d.332	11 N.J.R. 504(a)
7:1G-2.1(d)	Amend procedures for processing applications for development	R.1979 d.394	11 N.J.R. 543(a)
7:4	Rules on the New Jersey Register of Historic Places	R.1979 d.328	11 N.J.R. 434(a)
7:13-1.11(d)	Amend floodway delineations of streams within the Passaic River Basin	R.1979 d.430	11 N.J.R. 545(a)
7:13-1.11(d)	Amend floodway delineation of streams within the Raritan and Rahway River Basin	R.1979 d.418	11 N.J.R. 544(d)
7:14-4	Sludge quality assurances	R.1979 d.419	11 N.J.R. 544(e)
7:25-5	Amend 1979-80 Game Code	R.1979 d.329	11 N.J.R. 434(b)
7:25-5	Amend 1979-80 Game Code	R.1979 d.404	11 N.J.R. 544(a)
7:25-6	1980 Fish Code	R.1979 d.403	11 N.J.R. 543(c)
7:25-12.1, 12.4	Amend sea clams	R.1979 d.472	12 N.J.R. 10(b)
7:25-16.1	Amend upstream lines requiring licenses	R.1979 d.405	11 N.J.R. 544(c)
7:27-16-17	Amend control and prohibition of air pollution by volatile organic and toxic substances	R.1979 d.414	11 N.J.R. 544(b)

(Title 7, Transmittal 13 dated July 19, 1979 includes all rules through August 9, 1979 N.J. Register.)

HEALTH — TITLE 8

8:8	Amend collecting, processing, storing and distributing blood	R.1979 d.248	11 N.J.R. 376(a)
8:15	Rules on smoking in certain public places	R.1979 d.153	11 N.J.R. 237(c)
8:21-3.14	Delete rules	R.1979 d.454	11 N.J.R. 622(d)
8:21-3.15-3.18	Repeal of certain rules concerning Uniform Narcotic Act	R.1979 d.451	11 N.J.R. 622(a)
8:21-4.31—4.34	Amend control of laetrile	R.1979 d.299	11 N.J.R. 440(c)
8:21-7	Amend frozen desserts	R.1979 d.322	11 N.J.R. 441(d)
8:21-10.12	Expiration dates for fluid milk products	R.1979 d.143	11 N.J.R. 236(a)
8:21A	Rules on good drug manufacturing	R.1979 d.453	11 N.J.R. 622(c)
8:25-2.2, 2.5, 3.1, 4.4, 4.5, 6.1, 6.7	Amend Youth Camp Safety Act standards	R.1979 d.199	11 N.J.R. 279(c)
8:31-8 App. B	Amend standards and general criteria for the planning, certification of need and designation of perinatal services	R.1979 d.369	11 N.J.R. 549(c)
8:31-9	Amend standards and general criteria for the planning of certification of need of CAT units	R.1979 d.316	11 N.J.R. 441(a)
8:31-25.1(a)23	Add dexamethasone to list of therapeutic agents	R.1979 d.409	11 N.J.R. 550(c)
8:31A-5.5	Temporary reporting procedures; implementation of S446	R.1979 d.368	11 N.J.R. 549(b)
8:31A-7	1980 hospital rate review guidelines	R.1979 d.317	11 N.J.R. 441(b)
8:31A-9.1, 9.2, 10.5	Amend economic factor in SHARE Manual	R.1979 d.284	11 N.J.R. 439(b)
8:31B-1	Quantifiable economic benefits	R.1979 d.285	11 N.J.R. 439(c)
8:31B-2	Rules on hospital reporting of uniform bill-patient summaries (in-patient)	R.1979 d.450	11 N.J.R. 621(a)
8:31B-3	Procedural and methodological regulations to implement Chapter 83, P.L. 1978	R.1979 d.408	11 N.J.R. 550(b)
8:31B-3.8(b)	Amend procedural and methodological rules for implementing chapter 83, P.L. 1978	R.1979 d.484	12 N.J.R. 15(b)
8:31B-4	Financial elements and reporting	R.1979 d.407	11 N.J.R. 550(a)
8:31-26.2	Self locking doors in health facilities	R.1979 d.241	11 N.J.R. 331(d)
8:33	Amend guidelines and criteria for submission of applications for certificate of need	R.1979 d.283	11 N.J.R. 439(a)
8:34-1.15(c)	Amend internships and nursing home administrators	R.1979 d.200	11 N.J.R. 279(d)
8:39-1.14, 1.16, 1.18	Amend effective dates on parts of Standards for Long-Term Care	R.1979 d.243	11 N.J.R. 332(a)
8:39-1.22	Amend dental services in long-term care facilities	R.1979 d.238	11 N.J.R. 331(a)
8:39-1.33	Amend standards for licensure of long term care facilities	R.1979 d.492	12 N.J.R. 16(e)
8:41-1	Amend planning and application for designation of cardiac diagnostic facilities	R.1979 d.286	11 N.J.R. 439(d)

8:41-2	Amend planning and certification of need of regional cardiac surgical centers	R.1979 d.287	11 N.J.R. 440(a)
8:42-1.1	Amend definition of governing authority	R.1979 d.485	12 N.J.R. 15(c)
8:42-3	Rules on residential and in-patient alcohol abuse treatment facilities	R.1979 d.240	11 N.J.R. 331(c)
8:42-3	Extend expiration date of standards to June 30, 1980	R.1979 d.486	12 N.J.R. 15(d)
8:43A-1.16(e)	Amend standards for licensure of ambulatory care facilities	R.1979 d.116	11 N.J.R. 180(b)
8:43A-1.21(b)	Amend emergency medical care and defibrillators	R.1979 d.488	12 N.J.R. 16(a)
8:43A-1.52, 1.59, 1.63	Amend hours of counseling and availability of hours	R.1979 d.406	11 N.J.R. 549(e)
8:43A-1.66	Amend construction standards	R.1979 d.493	12 N.J.R. 17(a)
8:43A-1.71	Amend computerized axial tomography services	R.1979 d.487	12 N.J.R. 15(e)
8:43A-1.72	Free-standing ambulatory care facilities - drug abuse treatment services	R.1979 d.239	11 N.J.R. 331(b)
8:43A-1.72	Extend expiration date for standards to June 30, 1980	R.1979 d.489	12 N.J.R. 16(b)
8:43B-1.11(q)7	Amend waiver of emergency room services	R.1979 d.410	11 N.J.R. 550(d)
8:43B-7.2(c)	Amend verbal orders accepted by physical therapist	R.1979 d.113	11 N.J.R. 179(b)
8:43B-7.2(c)	Amend verbal orders accepted by physical therapist	R.1979 d.113	11 N.J.R. 179(b)
8:43B-7.2(d)	Amend authentication and countersigning of physician's order	R.1979 d.115	11 N.J.R. 180(a)
8:43B-7.2(c)	Amend respiratory therapists	R.1979 d.491	12 N.J.R. 16(d)
8:43B-7.4(c)	Amend availability of records	R.1979 d.114	11 N.J.R. 179(c)
8:43B-17.12, 17.13, 17.16	Amend number of physicians and cardiac diagnostic and surgical services	R.1979 d.490	12 N.J.R. 16(c)
8:43B-17.17	Amend construction standards and cardiac diagnostic and surgical services	R.1979 d.494	12 N.J.R. 17(b)
8:43F	Manual of Standards for Licensure of Non-Residential Medical Day Care Facilities	R.1979 d.452	11 N.J.R. 622(b)
8:45-1.3	Amend clinical laboratories licensure fees	R.1979 d.398	11 N.J.R. 549(d)
8:45-2.1, 2.2	Amendments increasing certain laboratory fees	R.1979 d.411	11 N.J.R. 550(e)
8:48	Amend public health funding and local health board standards	R.1979 d.300	11 N.J.R. 440(d)
8:49	Amend public health funding and local health board standards	R.1979 d.300	11 N.J.R. 440(d)
8:53	Amend public health funding and local health board standards	R.1979 d.300	11 N.J.R. 440(d)
8:58	Rules on standards for ambulatory or outpatient tuberculosis control	R.1979 d.149	11 N.J.R. 236(b)
8:611-2	Delete rules	R.1979 d.453	11 N.J.R. 622(c)
8:65-7.6	Amend person entitled to fill prescriptions	R.1979 d.152	11 N.J.R. 237(b)
8:65-7.7	Administering or dispensing of narcotic drugs	R.1979 d.151	11 N.J.R. 237(a)
8:65-10.3, 10.4	Amend calculation of narcotic content in any controlled dangerous substances preparations	R.1979 d.301	11 N.J.R. 440(e)
8:65-10.4	Add pentazocine to Schedule IV of Controlled Dangerous Substances	R.1979 d.150	11 N.J.R. 236(c)
8:65-10.5	Amend narcotic content in any controlled dangerous substances preparations	R.1979 d.301	11 N.J.R. 440(e)
8:65-10.8(b)	Amend chemical preparations exempt from the controlled Dangerous Substances Act	R.1979 d.244	11 N.J.R. 332(b)
8:65-10.8(b)	Amend exempt chemical preparations	R.1979 d.361	11 N.J.R. 505(b)
8:70-1.1(c), 1.4	Amend drug evaluation and acceptance criteria	R.1979 d.412	11 N.J.R. 551(a)
8:70-1.4(d)	Amend manufacturer's name appearing on drug labels	R.1979 d.483	12 N.J.R. 15(a)
8:71	List of interchangeable drug products	R.1979 d.104	11 N.J.R. 179(a)
8:71	Amend list of interchangeable drug products	R.1979 d.318	11 N.J.R. 441(c)
8:71	Deletions of non-prescription medicines from list of interchangeable drug products	R.1979 d.288	11 N.J.R. 440(b)
8:71 Preface	Delete distributors from list of interchangeable drug products	R.1979 d.242	11 N.J.R. 331(e)

(Title 8, Transmittal 11 dated March 15, 1979 includes all rules through March 8, 1979 N.J. Register.)

HIGHER EDUCATION — TITLE 9

9:1-6.1, 6.4	Amend petitions from out-of-State institutions	R.1979 d.441	11 N.J.R. 623(a)
9:2-2.7, 2.10, 2.12, 9.7—9.10	Amend personnel policies for State colleges	R.1979 d.460	12 N.J.R. 19(a)
9:3-2.14	Amend personnel policies for State colleges	R.1979 d.460	12 N.J.R. 19(a)
9:6-1.1—1.4	Amend personnel policies for State colleges	R.1979 d.460	12 N.J.R. 19(a)
9:7-2.2	Amend residency, dependent and independent students and grant renewals	R.1979 d.442	11 N.J.R. 623(b)
9:7-2.4	Amend determination of eligibility for and value of student assistance	R.1979 d.313	11 N.J.R. 443(a)
9:7-2.5, 2.6	Amend student eligibility and award tables	R.1979 d.236	11 N.J.R. 343(b)
9:7-2.6	Amend residency, dependent and independent students and grant renewals	R.1979 d.442	11 N.J.R. 623(b)

9:7-2.10	Amend verification of enrollment and academic performance and eligibility requirements	R.1979 d.314	11 N.J.R. 443(b)
9:7-3.1, 3.2	Amend student eligibility and award tables	R.1979 d.236	11 N.J.R. 343(b)
9:7-3.3	Amend residency, dependent and independent students and grant renewals	R.1979 d.442	11 N.J.R. 623(b)
9:7-4.1	Amend verification of enrollment and academic performance and eligibility requirements	R.1979 d.314	11 N.J.R. 443(b)
9:9-1.12(a), 5.3	Amend loan amounts and eligibility requirements	R.1979 d.401	11 N.J.R. 551(c)
9:11-1.4, 1.5, 1.8, 1.9	Amend financial guidelines and award tables	R.1979 d.230	11 N.J.R. 342(c)
9:12-2	Rules on summer programs	R.1979 d.235	11 N.J.R. 343(a)
(Title 9, Transmittal 12 dated March 15, 1979 includes all rules through June 7, 1979 N.J. Register.)			

HUMAN SERVICES — TITLE 10

10:49-10	Contracting for prepaid health care services for Title XIX eligibles	R.1979 d.231	11 N.J.R. 346(b)
10:51-1.9(a)	Amend pharmaceutical services	R.1979 d.413	11 N.J.R. 559(c)
10:52-1.16	Medicaid—reimbursed abortions	R.1979 d.245	11 N.J.R. 347(a)
10:53-1.14	Medicaid—reimbursed abortions	R.1979 d.245	11 N.J.R. 347(a)
10:54-1.23	Medicaid—reimbursed abortions	R.1979 d.245	11 N.J.R. 347(a)
10:54-3, 54-4	Amend the Physician's Procedure Code Manual	R.1979 d.218	11 N.J.R. 348(a)
10:57-1.1	Amend definition of podiatry specialist	R.1979 d.293	11 N.J.R. 448(b)
10:59	Amend Medical Supplies and Equipment Manual	R.1979 d.324	11 N.J.R. 448(d)
10:63-3	Amend longterm care facilities rate review guidelines	R.1979 d.482	12 N.J.R. 42(b)
10:63-4, -5	Delete text	R.1979 d.325	11 N.J.R. 448(e)
10:65	Amend medical day care	R.1979 d.325	11 N.J.R. 448(e)
10:66-1.18	Medicaid—reimbursed abortions	R.1979 d.245	11 N.J.R. 347(a)
10:69A	Amend pharmaceutical assistance to the aged	R.1979 d.209	11 N.J.R. 345(b)
10:69A-2.1	Amend definition of lifeline credit program	R.1979 d.375	11 N.J.R. 558(c)
10:81-1.1	Amend non-discrimination of handicap & statement of client rights	R.1979 d.278	11 N.J.R. 383(b)
10:81-1.1(d)	Amend statement of principles	R.1979 d.426	11 N.J.R. 560(d)
10:81-1.4, 1.7, 1.8	Amend non-discrimination of handicap and statement of client rights	R.1979 d.278	11 N.J.R. 383(b)
10:81-2	Amend forms used in AFDC	R.1979 d.428	11 N.J.R. 560(e)
10:81-2.2	Amend nondiscrimination of handicap and statement of client rights	R.1979 d.278	11 N.J.R. 383(b)
10:81-2.2, 2.3	Amend updating of forms and signing of income tax waiver	R.1979 d.277	11 N.J.R. 383(a)
10:81-2.7	Amend eligibility of an applicant for AFDC-F or -N benefits pending a determination of incapacity	R.1979 d.423	11 N.J.R. 559(e)
10:81-3.5	Amend Public Assistance Manual	R.1979 d.444	11 N.J.R. 626(a)
10:81-3.9(a)5	Amend Medicaid special and unborn children	R.1979 d.233	11 N.J.R. 346(d)
10:81-3.22, 3.24	Amend abandonment of State residency and timely notice of adverse action	R.1979 d.445	11 N.J.R. 626(b)
10:81-3.35	Amend legally responsible relatives	R.1979 d.427	11 N.J.R. 560(c)
10:81-5.2	Amend disregard of RSDI benefits received by full-time students and redetermination time interval	R.1979 d.444	11 N.J.R. 626(a)
10:81-7.1	Amend Public Assistance Manual	R.1979 d.445	11 N.J.R. 626(b)
10:81-7.36, 7.38, 7.41	Amend nondiscrimination of handicap and statement of client rights	R.1979 d.278	11 N.J.R. 383(b)
10:81-8.22—8.24	Amend Medicaid special and provisions relative to unborn children	R.1979 d.233	11 N.J.R. 346(d)
10:81-8.22, 8.23	Amend extension of medical benefits to a newborn child and a cross reference regarding LRR's	R.1979 d.425	11 N.J.R. 560(b)
10:82-1.2	Amend AFDC allowance standards	R.1979 d.256	11 N.J.R. 382(a)
10:82-1.7	Amend Assistance Standards Handbook	R.1979 d.424	11 N.J.R. 560(a)
10:82-1.7, 1.8	Amend disregard of work-study income, treatment of stipends and child care payments	R.1979 d.232	11 N.J.R. 346(c)
10:82-2.1, 2.2, 2.4, 2.9	Amend computer input forms and child care deductions	R.1979 d.363	11 N.J.R. 519(d)
10:82-2.14	Amend Assistance Standards Handbook	R.1979 d.424	11 N.J.R. 560(a)
10:82-3.8	Amend legally responsible relatives	R.1979 d.427	11 N.J.R. 560(c)
10:82-4.6, 4.15	Amend Assistance Standards Handbook	R.1979 d.424	11 N.J.R. 560(a)
10:82-5.9	Amend computer input forms and child care deductions	R.1979 d.363	11 N.J.R. 519(d)
10:85-2.4	Amend establishment of public assistance fiscal practices	R.1979 d.281	11 N.J.R. 383(d)
10:85-3.1	Amend medical payments	R.1979 d.365	11 N.J.R. 519(f)
10:85-3.2(c)	Amend Social Security numbers in the General Assistance Program	R.1979 d.280	11 N.J.R. 383(c)

10:85-3.2	Amend General Assistance Manual	R.1979 d.326	11 N.J.R. 449(a)
10:85-3.2	Amendments on fair hearings and medical payments	R.1979 d.496	12 N.J.R. 43(b)
10:85-3.3(e)	Amend VISTA payments	R.1979 d.365	11 N.J.R. 519(f)
10:85-3.3(e)	Amend exclusion of relocation payments as income or resources	R.1979 d.446	11 N.J.R. 627(a)
10:85-3.3(e)	Amend exclusion of certain income	R.1979 d.447	11 N.J.R. 627(b)
10:85-3.3(f)	Amend drug and alcohol treatment centers	R.1979 d.366	11 N.J.R. 520(a)
10:85-3.3(f)	Amend licensed boarding homes for sheltered care	R.1979 d.448	11 N.J.R. 627(c)
10:85-3.4(c)	Amend exclusion of relocation payments	R.1979 d.446	11 N.J.R. 627(a)
10:85-4.3	Amend assistance orders	R.1979 d.365	11 N.J.R. 519(f)
10:85-4.6	Amend victims of domestic violence	R.1979 d.323	11 N.J.R. 448(c)
10:85-5.3	Amend fair hearing and medical payments	R.1979 d.496	12 N.J.R. 43(b)
10:85-5.3, 5.5	Amendments on medical payments	R.1979 d.495	12 N.J.R. 43(a)
10:85-5.7	Amend payments: SSI application pending	R.1979 d.365	11 N.J.R. 519(f)
10:85-6.3	Amend establishment of public assistance fiscal practices	R.1979 d.281	11 N.J.R. 383(d)
10:85-6.7	Amend exemptions from work requirements, resources, savings and destruction of records	R.1979 d.326	11 N.J.R. 449(a)
10:85-7.1—7.3, 7.6	Amend fair hearing and medical payments	R.1979 d.496	12 N.J.R. 43(b)
10:87-2.21, 2.29	Amend Food Stamp Manual	R.1979 d.459	12 N.J.R. 40(c)
10:87-3.12	Amend Food Stamp Manual	R.1979 d.422	11 N.J.R. 559(d)
10:87-3.20(b)	Voluntary quit; Food Stamp Manual	R.1979 d.247	11 N.J.R. 380(c)
10:87-5.10	Amend Food Stamp Manual	R.1979 d.387	11 N.J.R. 559(a)
10:87-5.10, 6.9, 6.11, 6.13, 6.15	Amend Food Stamp Manual	R.1979 d.459	12 N.J.R. 40(c)
10:87-6.22	Amend Food Stamp Manual	R.1979 d.422	11 N.J.R. 559(d)
10:87-9.7	Amend Food Stamp Manual	R.1979 d.459	12 N.J.R. 40(c)
10:87-9.3, 11.15, 11.20	Amend Food Stamp Manual	R.1979 d.422	11 N.J.R. 559(d)
10:87-12.1	Amend Food Stamp Manual	R.1979 d.387	11 N.J.R. 559(a)
10:87-12	Amend Tables in Food Stamp Manual	R.1979 d.477	12 N.J.R. 42(a)
10:87 Appendix A	Amend Food Stamp Manual	R.1979 d.234	11 N.J.R. 346(e)
10:94-3.11, 3.13	Amend medical eligibility for Medicaid Only Program	R.1979 d.364	11 N.J.R. 519(e)
10:94-3.13(m)	Amend maximum allowances for consultant evaluation services	R.1979 d.449	11 N.J.R. 627(d)
10:94-4.33	Amend income eligibility levels	R.1979 d.257	11 N.J.R. 382(b)
10:98	Fiscal Years 1980-1982 State Plan for Vocational Rehabilitation	R.1979 d.340	11 N.J.R. 518(c)
10:100-1.23	Amend SSI payment schedule	R.1979 d.258	11 N.J.R. 382(c)
10:104-1.19	Pre-adoption home studies in cases of foreign born children	R.1979 d.457	12 N.J.R. 40(b)
10:109	Amend to Ruling 11, Parts I and II	R.1979 d.362	11 N.J.R. 519(c)
10:122-2.3, 2.7	Amend child care licensing rules	R.1979 d.249	11 N.J.R. 381(a)
10:122-4	Family day care standards	R.1979 d.359	11 N.J.R. 519(b)
10:123-2.1	Social services for boarding home residents	R.1979 d.350	11 N.J.R. 519(a)
10:129	Child abuse and neglect cases; DYFS to inform prosecutors in certain cases	R.1979 d.400	11 N.J.R. 559(b)

(Title 10, Transmittal 12 dated May 17, 1979 includes all rules through June 7, 1979 N.J. Register.)

CORRECTIONS — TITLE 10A

10A:31	Standards for adult county correctional facilities	R.1979 d.438	11 N.J.R. 627(e)
10A:70-2.6	Amend notification	R.1979 d.341	11 N.J.R. 520(b)

(Title 10, Transmittal 12 dated May 17, 1979 includes all rules through June 7, 1979 N.J. Register.)

INSURANCE — TITLE 11

11:1-5.8	Taxes paid to Firemen's Relief Associations	R.1979 d.356	11 N.J.R. 520(c)
11:4-20.1, 20.2	Unfair discrimination on basis of impairment	R.1979 d.434	11 N.J.R. 627(f)
11:5-1.15—1.17, 1.23	Amend advertising, contracts and obligations	R.1979 d.461	12 N.J.R. 44(b)

(Title 11, Transmittal 13 dated July 19, 1979 includes all rules through September 6, 1969 N.J. Register.)

LABOR AND INDUSTRY — TITLE 12

12:15-1.3	Amend maximum weekly benefit rates; unemployment compensation and temporary disability benefits	R.1979 d.321	11 N.J.R. 449(d)
12:15-1.4	Amend taxable wage base under unemployment compensation law	R.1979 d.320	11 N.J.R. 449(c)
12:15-1.5	Amend contribution rate of governmental entities and instrumentalities	R.1979 d.327	11 N.J.R. 450(a)
12:175	Amendments ski lifts	R.1979 d.360	11 N.J.R. 521(a)
12:235-1.5	Amend worker's compensation rate	R.1979 d.319	11 N.J.R. 449(b)

(Title 12, Transmittal 11 dated July 19, 1979 includes all rules through August 9, 1979 N.J. Register.)

LAW AND PUBLIC SAFETY — TITLE 13

13:2-17.14, 19.6	Amend elimination of requirement for oral argument	R.1979 d.393	11 N.J.R. 580(f)
13:2-31.4	Amend elimination of requirement for oral argument	R.1979 d.393	11 N.J.R. 580(f)
13:19-4	Amend cardiovascular disorders	R.1979 d.367	11 N.J.R. 579(b)
13:20-12.2	Amend driver reexamination	R.1979 d.435	11 N.J.R. 628(c)
13:21-5.10	Surrender of registration plates	R.1979 d.315	11 N.J.R. 466(b)
13:21-8.2	Amend proof of identity and date of birth	R.1979 d.382	11 N.J.R. 580(d)
13:21-15.3	Amend motor vehicle dealers	R.1979 d.371	11 N.J.R. 580(a)
13:24-2.5, 2.7, 4.1, 4.2, 5.1	Amend emergency vehicle equipment	R.1979 d.372	11 N.J.R. 580(b)
13:25-8.5, 8.6	Rules on notarized bicycles	R.1979 d.481	12 N.J.R. 48(d)
13:33-4.1	Contact lenses dispensing	R.1979 d.462	12 N.J.R. 47(a)
13:35-5.2	Amend contact lenses	R.1979 d.463	12 N.J.R. 48(a)
13:35-6.6	Amend requirements for issuing a prescription	R.1979 d.421	11 N.J.R. 582(a)
13:36-8.11	Multiple burials	R.1979 d.420	11 N.J.R. 582(b)
13:37-3.9	Foreign nursing applicants	R.1979 d.464	12 N.J.R. 48(b)
13:38-6.1(b)	Amend release of patient record of contact lens specifications	R.1979 d.465	12 N.J.R. 48(c)
13:45A-6	Automotive sales practices	R.1979 d.392	11 N.J.R. 580(e)
13:45A-7.2	Amend repair of automobiles	R.1979 d.402	11 N.J.R. 581(a)
13:47B-1.23	Amend half-price sales of gasoline	R.1979 d.335	11 N.J.R. 522(a)
13:47C-4	Rules on the industry standard for New Jersey Atlantic White Cedar	R.1979 d.373	11 N.J.R. 580(c)
13:48	Rules concerning Charitable Fund Raising Act of 1971	R.1979 d.311	11 N.J.R. 466(a)
13:71-17.3	Amend vacancy in a tier	R.1979 d.349	11 N.J.R. 522(b)

(Title 13, Transmittal 14 dated July 19, 1979 includes all rules through August 9, 1979 N.J. Register.)

PUBLIC UTILITIES—TITLE 14

ENERGY—TITLE 14A

14:3-7.5(c)	Amend interest paid by utility on customer accounts	R.1979 d.289	11 N.J.R. 467(a)
14:3-7.9(b)	Estimated bills for residential customers	R.1979 d.474	12 N.J.R. 49(b)
14:3-7.15	Notification to municipalities; discontinuance of service to residential customers	R.1979 d.352	11 N.J.R. 522(c)
14:5-3.2(c)	Amend periodic testing of commercial and industrial electric meters	R.1979 d.374	11 N.J.R. 585(c)

14A:2-3.4, 3.15	Amend regulation and control of motor gasoline sales	R.1979 d.468	12 N.J.R. 48(e)
14A:8	Energy Facility Review Board	R.1979 d.473	12 N.J.R. 49(a)
14A:11-3	Rules on bulk terminal operating companies	R.1979 d.417	11 N.J.R. 585(d)

(Title 14, Transmittal 12 dated July 19, 1979 includes all rules through August 9, 1979 N.J. Register.)

(Title 14A, Transmittal 4 dated July 19, 1979 includes all rules through October 4, 1979 N.J. Register.)

STATE — TITLE 15

(Title 15, Transmittal 11 dated May 17, 1979 includes all rules to date.)

PUBLIC ADVOCATE — TITLE 15A

(Title 15A, Transmittal 1 dated March 20, 1978 includes all rules to date.)

TRANSPORTATION — TITLE 16

16:16-4.3	Amend rescission of allocated but unexpended local State aid funds	R.1979 d.279	11 N.J.R. 410(e)
16:26-3.4	Amend reimbursed highway safety lighting	R.1979 d.466	12 N.J.R. 52(a)
16:17-43	Amend rescission of allocated but unexpended local State aid funds	R.1979 d.279	11 N.J.R. 410(e)
16:28-1.18	Amend speed limits	R.1979 d.266	11 N.J.R. 410(d)
16:28-1.81	Amend speed limits	R.1979 d.266	11 N.J.R. 410(d)
16:28-3.48	Amend restricted parking on parts of Routes 44, 52, 152 and 35	R.1979 d.344	11 N.J.R. 523(c)
16:28-3.97	Amend restricted parking	R.1979 d.265	11 N.J.R. 410(c)
16:28-3.107, 3.112	Amend restricted parking: Routes 94 and 3	R.1979 d.345	11 N.J.R. 524(a)
16:28-3.121	Amend restricted parking	R.1979 d.344	11 N.J.R. 523(c)
16:28-3.194	Restricted parking on Route 7	R.1979 d.265	11 N.J.R. 410(c)
16:28-3.198, 3.199	Amend restricted parking	R.1979 d.344	11 N.J.R. 523(c)
16:28-3.201, 3.202	Restricted parking on parts of Routes 29 and 179	R.1979 d.390	11 N.J.R. 589(b)
16:28-7.6	Lane usage on parts of Route 35	R.1979 d.296	11 N.J.R. 471(a)
16:28-12.7, 12.21	Amend right turns on red signals	R.1979 d.470	12 N.J.R. 52(b)
12.22, 12.25, 12.33, 12.34, 12.36, 12.37, 12.48, 12.59, 12.71			
16:29-1.8	Amend no passing zones on parts of Route U.S. 46	R.1979 d.346	11 N.J.R. 524(b)
16:29-1.20	No-passing zones on parts of Route U.S. 40	R.1979 d.264	11 N.J.R. 410(b)
16:30-3.1, 3.4	Amend lane usage on parts of Routes 35 and U.S. 9	R.1979 d.471	12 N.J.R. 52(c)
16:30-3.5, 3.6	High occupancy vehicle lanes on parts of Routes I-95 and 444	R.1979 d.312	11 N.J.R. 471(c)
16:30-1.7	One-way traffic on parts of Eisenhower Avenue in Dover Township	R.1979 d.347	11 N.J.R. 524(c)
16:31-1.13	Amend no left turns on parts of Route 71	R.1979 d.348	11 N.J.R. 524(d)
16:31-1.14	Rules on no-left turns on parts of Route 35	R.1979 d.389	11 N.J.R. 589(a)
16:41-16	Permits allowing use or occupancy of State-owned railroad property	R.1979 d.331	11 N.J.R. 523(a)
16:53A	Rules on financial and accounting conditions and criteria for bus operating assistance program	R.1979 d.302	11 N.J.R. 471(b)
16:53B	Delegation of authority by Computer Operating Agency	R.1979 d.334	11 N.J.R. 523(b)
16:65-3.1, 3.2	Amend distribution and sale of construction plans and supplementary specifications	R.1979 d.388	11 N.J.R. 588(b)

(Title 16, Transmittal 13 dated June 14, 1979 includes all rules through June 7, 1979 N.J. Register.)

TREASURY-GENERAL — TITLE 17

17:1-1.15, 1.21, 4.23	Amend certain rules of the Division of Pensions	R.1979 d.169	11 N.J.R. 304(d)
17:2-1.8, 2.2, 2.4, 3.1, 3.6, 4.11, 4.14, 5.7, 6.2, 6.19, 7.1, 7.2	Amend Public Employees' Retirement System	R.1979 d.399	11 N.J.R. 596(b)
17:3-1.8, 2.1, 3.1, 4.11	Amend Teachers' Pension and Annuity Fund	R.1979 d.205	11 N.J.R. 359(a)
17:3-6.15	Amend compulsory retirement	R.1979 d.397	11 N.J.R. 596(a)
17:6-1.8	Amend the suspension of pension checks	R.1979 d.476	12 N.J.R. 57(a)
17:7-1.8(a)2.	Amend suspension of pension checks	R.1979 d.308	11 N.J.R. 476(a)
17:9-1.4, 2.11	Amend State Health Benefits Program	R.1979 d.159	11 N.J.R. 304(c)
17:9-5.5	Amend State Health Benefits Program	R.1979 d.396	11 N.J.R. 595(c)
17:9-7.2	Amend State Health Benefits Program	R.1979 d.261	11 N.J.R. 415(a)
17:10-1.7, 3.6	Amend Judicial Retirement System	R.1979 d.431	11 N.J.R. 649(b)

17:12	Amend Purchase Bureau's rules	R.1979 d.132	11 N.J.R. 264(a)
17:16-5.5	Amend classification of funds, temporary reserve group	R.1979 d.204	11 N.J.R. 358(b)
17:16-5.6	Amend trust group; classification of funds	R.1979 d.305	11 N.J.R. 475(b)
17:16-27	Amend certificates of deposit	R.1979 d.436	11 N.J.R. 650(c)
17:16-31.9	Amend calculation of daily income per participating unit	R.1979 d.437	11 N.J.R. 651(a)
17:16-42	Rules on covered call options	R.1979 d.306	11 N.J.R. 475(c)
17:16-43	Rules on mortgage backed pass-through certificates	R.1979 d.307	11 N.J.R. 475(d)
17:21-11	Lottery Derby Instant Lottery Game	R.1979 d.196	11 N.J.R. 305(d)
17:21-11.1	Meadowlands Sports Lottery	R.1979 d.381	11 N.J.R. 594(b)
17:21-12.1, 12.2, 13.1	Amend Pick-It and Pick-4 lotteries	R.1979 d.343	11 N.J.R. 529(a)
17:27-7.4	Amend affirmative action requirements for public contracts	R.1979 d.191	11 N.J.R. 305(c)

(Title 17, Transmittal 12 dated March 29, 1979 includes all rules through April 5, 1979 N.J. Register.)

TREASURY-TAXATION — TITLE 18

18:6-1.1	Amend Unfair Cigarette Sales Act	R.1979 d.416	11 N.J.R. 596(c)
18:12-7.1(d)	Amendments concerning homestead tax rebate	R.1979 d.432	11 N.J.R. 650(a)
18:12-7.12(c)	Extend filing date for 1980 homestead tax rebate claims	R.1979 d.467	12 N.J.R. 56(b)
18:12A-1.12	Amend determination and judgments	R.1979 d.385	11 N.J.R. 595(b)
18:24-25.2	Amend electronic data processing transactions; Sales and Use Tax Act	R.1979 d.384	11 N.J.R. 595(a)
18:35-1.12	Computation of tax credit under the gross income tax	R.1979 d.433	11 N.J.R. 650(b)
18:35-1.13	One-time election to exclude up to \$100,000 of gain on sale of principal residence: rollover	R.1979 d.475	12 N.J.R. 56(c)

(Title 18, Transmittal 13 dated July 19, 1979 includes all rules through August 9, 1979 N.J. Register.)

OTHER AGENCIES — TITLE 19

19:8-1.2	Amend speed limits on the Garden State Parkway	R.1979 d.339	11 N.J.R. 530(a)
19:8-1.9(b), 3.1(b)	Amend use of Garden State Parkway and tolls	R.1979 d.469	12 N.J.R. 57(c)
19:25-4.8	Political action committees	R.1979 d.391	11 N.J.R. 597(b)
19:30-3	Payment of prevailing wages	R.1979 d.337	11 N.J.R. 530(b)
19:30-4	Targeting authority assistance	R.1979 d.338	11 N.J.R. 530(c)
19:40-2.1, 2.2	Rules on child labor laws	R.1979 d.378	11 N.J.R. 599(d)
19:41-1.3	Amend employee licenses applications	R.1979 d.379	11 N.J.R. 559(e)
19:41-7.16	Amend applications and additional copies	R.1979 d.357	11 N.J.R. 530(e)
19:43-1.14	Rules on Casino service industry licenses	R.1979 d.376	11 N.J.R. 599(b)
19:45	Amend internal and accounting controls	R.1979 d.336	11 N.J.R. 530(d)
19:46-1.1	Amend chip specifications	R.1979 d.358	11 N.J.R. 531(a)
19:46-1.13	Amend Big Six Wheel Game rules	R.1979 d.429	11 N.J.R. 600(b)
19:47-2.6—2.9	Amend Blackjack and peek rules	R.1979 d.380	11 N.J.R. 600(a)
19:47-5.5	Amend Big Six Wheel Game	R.1979 d.429	11 N.J.R. 600(b)
19:47-5.7	Amend rules on minimum and maximum wagers	R.1979 d.377	11 N.J.R. 599(c)

(Title 19, Transmittal 13 dated July 19, 1979 includes all rules through September 6, 1979 N.J. Register.)

(Continued from Page 30)

to be retained [until a turnaround 105 document is generated to replace the original] for a period of 3 months.

Interested persons may present statements or arguments in writing relevant to the proposal on or before January 30, 1980 to:

G. Thomas Riti, Director
Division of Public Welfare
Box 1627

Trenton, New Jersey 08625

The Division of Public Welfare may, thereafter, adopt rules concerning this subject without further notice.

Ann Klein
Commissioner
Department of Human Services

(a)

HUMAN SERVICES

DIVISION OF YOUTH AND FAMILY SERVICES

Proposed Amendments Concerning Child Care Licensing Rules

Ann Klein, Commissioner of Human Services, pursuant to authority of N.J.S.A. 18A:70-1 et seq. and 30:1-25, proposes to amend Chapter 122 in Title 10 of the New Jersey Administrative Code concerning child care licensing rules.

The proposed amendments concern the deletion of the current text of subchapters 1 and 2 of chapter 122 in Title 10 of the New Jersey Administrative Code and the adoption of new text therein. Take notice the current text of subchapter 3 of this chapter will not be deleted but will now be cited as N.J.A.C. 10:122-8.1 et seq. Subchapter 3 is entitled AFDC Foster Care Plan.

The proposed regulations, among other things, would:

1. Establish for the first time appropriate and differential program and life-safety standards for four distinct types of child care centers—pre-school, drop-in, night care and special needs. (At present, the same regulations apply to all centers regardless of the needs of the children served, the time of day the center is operating or the program of care offered);

2. Require for the first time minimum staff/child ratios for each program category. (At present, the only requirement is that two adults are present, regardless of the center's enrollment);

3. Spell out specific criteria governing the suitability of child care staff;

4. Clarify and make more specific the life-safety, programmatic and health requirements for all centers;

5. Prescribe administrative, processing and enforcement policies and procedures governing the licensing of a center;

6. Improve the administration of a child care center and the program offered to the children.

The revisions do not deal with two specific areas of the existing regulations: The Transportation section, which was completely revised and adopted in the spring of this year, and the section on Staff Qualifications for Head Teacher, which are still being reviewed and assessed as part of our interdepartmental and community effort. Also, the section on Food Program and Nutrition, which was revised in 1978, contains only minor changes to reflect differences by program category.

Copies of the 74 pages of the full text of these proposed new rules may be obtained from or made available for review by contacting:

Richard Crane
Bureau of Licensing
Division of Youth and Family Services
Department of Human Services
1 South Montgomery St.
Trenton, N.J. 08625

Interested persons may present statements or arguments in writing relevant to the proposed action on or before February 14, 1980 to the Division of Youth and Family Services at the above address.

The Division of Youth and Family Services may thereafter adopt rules concerning this subject without further notice.

Ann Klein
Commissioner
Department of Human Services

(b)

HUMAN SERVICES

DIVISION OF YOUTH AND FAMILY SERVICES

Proposed Rules Concerning Dependent/Neglected Children's Shelters

Ann Klein, Commissioner of Human Services, pursuant to authority of N.J.S.A. 30:1-14, 30:1-15 and 30:4C-4(d), proposes to adopt new rules concerning the operation of shelters for dependent/neglected children utilized by the Division of Youth and Family Services.

The proposed rules are intended to govern the establishment and operation of shelters accepting dependent/neglected children and would establish minimum standards for such facilities and concern such areas as general provisions; administration and organization; program requirements; staffing requirements; life-safety requirements; and transportation requirements.

Such rules, if adopted, will be cited as N.J.A.C. 10:130.

Copies of the 67 pages of the full text of this proposal may be obtained from or made available for review by contacting:

Richard Crane
Bureau of Licensing
Division of Youth and Family Services
Department of Human Services
1 South Montgomery Street
Trenton, N.J. 08625

Interested persons may present statements or arguments in writing relevant to the proposed action on or before February 14, 1980 to the Division of Youth and Family Services at the above address.

The Division of Youth and Family Services may thereafter adopt rules concerning this subject without further notice.

Ann Klein
Commissioner
Department of Human Services

(a)

HUMAN SERVICES

COMMISSION FOR THE BLIND AND VISUALLY IMPAIRED

Notice Concerning Availability of the Proposed Interim State Plan for Independent Living Rehabilitation Services

Take notice that Ann Klein, Commissioner of the Department of Human Services, pursuant to authority of N.J.S.A. 30:1-12, announces the availability of the proposed Interim State Plan for Independent Living Rehabilitation Services.

This interim state plan has been prepared as a condition to receipt of Federal funds under Title VII of the Rehabilitation Act of 1973, as amended through 1978, for independent living rehabilitation services and projects for independent living centers. The Commission for the Blind and Visually Impaired will be submitting this plan to DHEW and will agree to administer the program in accordance with this plan, the Rehabilitation Act of 1973 as amended in 1978, and all applicable regulations, policies and procedures established by DHEW.

Copies of the 26 pages of the full text of the plan may be obtained or made available for review by contacting the person indicated below.

Interested persons may present arguments in writing relevant to the proposal on or before February 24, 1980 to:

Norma F. Krajczar, Executive Director
Commission for the Blind and Visually Impaired
1100 Raymond Boulevard
Newark, New Jersey 07102

This Notice is published as a matter of public information.

Howard H. Kestin
Director
Office of Administrative Law

(b)

HUMAN SERVICES

DIVISION OF YOUTH AND FAMILY SERVICES

Rules Concerning Pre-Adoption Home Studies In Cases of Foreign Born Children

On November 12, 1979, Ann Klein, Commissioner of Human Services, pursuant to authority of N.J.S.A. 9:3-37 et seq. and in accordance with applicable provisions of the Administrative Procedure Act, adopted new rules, to be cited as N.J.A.C. 10:104-1.19, concerning pre-adoption home studies in cases of foreign born children as proposed in the Notice published October 4, 1979 at 11 N.J.R. 518(b).

An order adopting these rules was filed and became effective on November 16, 1979 as R.1979 d.457.

Howard H. Kestin
Director
Office of Administrative Law

(c)

HUMAN SERVICES

DIVISION OF PUBLIC WELFARE

Amendments to Food Stamp Manual

On November 20, 1979, Ann Klein, Commissioner of Human Services, pursuant to authority of N.J.S.A. 30:4B-2 and in accordance with applicable provisions of the Administrative Procedure Act, adopted emergency amendments to various sections of the Food Stamp Manual.

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

10:87-2.21(a)4. **Medical expenses:** The amount of any medical expenses (including the amount of reimbursements) deductible under N.J.A.C. 10:87-5.10(a)3 shall be verified prior to initial certification. Verification of other factors including whether or not the services provided are allowable under N.J.A.C. 10:87-5.10(a)3.i. or the eligibility of the person incurring the cost, shall be required if questionable.

(Renumber paragraphs 4 and 5 as 5 and 6.)

10:87-2.29 Verification subsequent to initial certification

(a) At recertification, the CWA shall verify a change in income, medical expenses or [a change in] actual utility expenses claimed by a household if the source has changed or the amount has changed by more than \$25 since the last time [income or utility expenses] they were verified.

1. Questionable information: The CWA may verify income, actual utility expenses or medical expenses claimed by households which are unchanged or have changed by \$25 or less, only if the information is questionable as defined in N.J.A.C. 10:87-2.21(a)[4.i.]5.i.

All other changes reported at the time of recertification shall be subject to the same verification procedures that apply at initial certification.

i. Unchanged information: Unchanged information, other than income and medical or utility expenses, shall not be verified unless the information is questionable as defined in N.J.A.C. 10:87-2.21(a)[4.i.] 5.i.

2. Changes: Changes reported during the certification period shall be subject to the same verification procedures that apply at initial certification, except that the CWA is not required to verify income, medical expenses or actual utility expenses if the source has not changed and the amount has changed by \$25 or less since the last time they were verified.

10:87-5.10(a)3. **Excess medical deduction:** That portion of medical expenses in excess of \$35 per month, excluding the cost of special diets, incurred by any household member who is 60 years of age or over or who receives supplemental security income (SSI) benefits under Title XVI of the Social Security Act or disability benefits under Title II of the Social Security Act. Spouses or other persons (i.e., essential persons) receiving benefits as dependents of the SSI or disability recipient are not eligible to receive this deduction but persons receiving "emergency" SSI benefits based on presumptive eligibility are eligible for this deduction.

i. Allowable medical costs: The following items are allowable medical costs:

(1) Medical and dental care: Medical and dental care including psychotherapy and rehabilitation services provided by a licensed practitioner authorized by State law or other qualified health professional;

(2) **Hospitalization:** Hospitalization or outpatient treatment, nursing care, and nursing home care including payments by the household for an individual who was a household member immediately prior to entering a hospital or nursing home provided by a facility recognized by the State;

(3) **Prescription drugs:** Prescription drugs when prescribed by a licensed practitioner authorized under State law and other over-the-counter medication (including insulin) when approved by a licensed practitioner or other qualified health professional; in addition, costs of medical supplies, sick-room equipment (including rental) or other prescribed equipment are deductible;

(4) **Health and hospital insurance:** Health and hospitalization insurance policy premiums. The costs of health and accident policies such as those payable in lump sum settlements for death or dismemberment or income maintenance policies such as those that continue mortgage or loan payments while the beneficiary is disabled are not deductible;

(5) **Medicare premiums:** Medicare premiums related to coverage under title XVIII of the Social Security Act;

(6) **Dentures, hearing aids, and prosthetics:** Dentures, hearing aids, and prosthetics;

(7) **Seeing eye or hearing dog:** Securing and maintaining a seeing eye or hearing dog including the cost of dog food and veterinarian bills;

(8) **Eye glasses:** Eye glasses prescribed by a physician skilled in eye disease or by an optometrist;

(9) **Transportation and lodging:** Reasonable cost of transportation and lodging to obtain medical treatment or services;

(10) **Attendant care:** Maintaining an attendant, homemaker, home health aide, housekeeper, or child care services, necessary because of age, infirmity, or illness. In addition, an amount equal to the one person coupon allotment shall be deducted if the household furnishes the majority of the attendant's meals. The allotment for this meal related deduction shall be that in effect at the time of initial certification. The CWA shall update the allotment amount no later than the next scheduled recertification. It is not necessary for the CWA to update this deduction at the time of the semi-annual allotment adjustment. If a household incurs attendant care costs that could qualify under both the medical deduction and dependent care deduction, the CWA shall treat the cost as a medical expense.

(Renumber paragraph 3 as 4.)

[4.] 5. **Shelter cost deduction:** Monthly shelter costs in excess of 50 per cent of the household's income after the deductions in paragraphs 1, 2, [and] 3, and 4 of this subsection have been allowed, shall be deducted. However, in no event shall the shelter deduction alone or in combination with the dependent care deduction in paragraph [3.] 4. of this subsection exceed the amount in N.J.A.C. 10:87-12.1 unless the household contains a member who is age 60 or over, or who receives SSI (including emergency benefits based on presumptive eligibility) or disability payments under Title II of the Social Security Act. These households shall receive an excess shelter deduction for the monthly cost that exceeds 50 per cent of the household's monthly income after all other applicable deductions.

.....

10:87-6.9(a)3.i. **Conversion to monthly income:** Whenever a full month's income is anticipated but is received on a weekly or bi-weekly basis, the CWA shall convert the income to a monthly amount by multiplying weekly amounts by 4.333 and bi-weekly amounts by 2.167.

10:87-6.11(a)1. **Expense covered by excluded income:** An expense covered by an excluded reimbursement or vendor payment (see N.J.A.C. 10:87-5.8) shall not be deductible. For example, that portion of rent covered by excluded vendor payments shall not be calculated as part of the household's shelter cost. However, that portion of an allowable medical expense which is not reimbursable shall be included as part of the household's medical expenses. Households entitled to the medical deduction shall have the nonreimbursable portion considered at the time the amount of reimbursement is received or can otherwise be verified.

10:87-6.13(b) **One-time only expenses:** The household may elect to have a one-time only expense, such as installation charge for utilities, averaged over the entire certification period in which it is billed. Households reporting one-time only medical expenses during their certification period may elect to have a one-time deduction or to have the expense averaged over the remaining months of their certification period. Averaging would begin the month the change would become effective. The CWA worker shall explain to the household the advantages of averaging the expense or treating it as a one-time deduction.

10:87-6.14(d) **Conversion of deductions:** The income conversion procedures in N.J.A.C. 10:87-6.9(a)3.i. shall also apply to expenses billed on a weekly or biweekly basis.

10:87-6.15(a)1.v. **Step 5** If the household is entitled to an excess medical deduction as provided in N.J.A.C. 10:87-5.10(a)3., determine if total medical expenses exceed \$35. If so, subtract that portion which exceeds \$35.

[v.] vi. **Step [5] 6** Subtract monthly dependent care expenses, if any, up to the maximum (see N.J.A.C. 10:87-12.1). If dependent care costs equal or exceed the maximum, the household's net monthly income has been determined [(determine eligibility and benefits in accordance with paragraph 3 of this subsection). If not, the household's adjusted income has been determined and shall be used to compute excess shelter expenses in Step [6] 7. [(See N.J.A.C. 10:87-5.106(a)4.)] unless the household is entitled to the full amount of its excess shelter deduction (see N.J.A.C. 10:87-5.10(a)5). If the dependent care expenses are less than the maximum or if the household is entitled to the full amount of its excess shelter expenses (that portion over 50 per cent of its monthly net income pursuant to N.J.A.C. 10:87-5.10(a)5), compute the household's excess shelter expenses in accordance with Step 7.

[vi.] vii. **Step [6] 7** Total the allowable shelter expenses to determine [if] shelter costs. [exceed 50 per cent of the adjusted income (the household's monthly income after all the above deductions have been subtracted).] **Subtract 50 per cent of the household's monthly income (after all the above deductions have been subtracted) from the total shelter costs.** The remaining amount [above 50 per cent of the adjusted income], if any, is the excess shelter cost. If there is no excess shelter cost, the net monthly income has been determined. If there is excess shelter cost, compute the shelter deduction in Step [7] 8.

[vii.] viii. **Step [7] 8** Subtract [from the adjusted income in Step 5 of this section the excess shelter cost up to the maximum. The maximum amount for excess shelter is the maximum used in Step 5 of this section, minus the amount of dependent care expenses, if any.] the excess shelter cost up to the maximum (unless the household is entitled to the full amount of its excess shelter expenses) from the household's monthly income after all other applicable deductions. The maximum amount allowed for

shelter (for those households subject to a shelter maximum) is the maximum used in Step 6 minus the amount of dependent care expenses, if any. Households not subject to a capped shelter expense shall have the full amount exceeding 50 per cent of their net income subtracted. The household's net monthly income has been determined.

10:87-9.7(a)1.i.(6) Medical expenses: When the household's monthly medical expenses change by more than \$25.

An order adopting these amendments was filed on November 21, 1979 as R.1979 d.459 (Exempt, Emergency Rule).

Howard H. Kestin
Director
Office of Administrative Law

(a)

HUMAN SERVICES

DIVISION OF PUBLIC WELFARE

Amendments to Tables in the Food Stamp Manual

On December 4, 1979, Ann Klein, Commissioner of Human Services, pursuant to authority of N.J.S.A. 30:4B-2 and in accordance with applicable provisions of the Administrative Procedure Act, adopted emergency amendments to tables in the Food Stamp Manual in N.J.A.C. 10:87-12. These amendments reflect the federal semiannual adjustments in the standard income deduction and the monthly coupon allotments.

Copies of the 15 pages of the full text of this adoption may be obtained from or made available for review by contacting:

G. Thomas Riti
Director
Division of Public Welfare
Box 1627
Trenton, N.J. 08625

An order adopting these amendments was filed on December 6, 1979 as R.1979 d.477 (Exempt, Emergency Rule) to become effective on January 1, 1980.

Howard H. Kestin
Director
Office of Administrative Law

(b)

HUMAN SERVICES

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

Amendments to Long Term Care Facilities Rate Review Guidelines

On December 13, 1979, Ann Klein, Commissioner of Human Services, pursuant to authority of N.J.S.A. 30:4D-1 et seq. and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments to N.J.A.C. 10:63-3.1 et seq. concerning long term care facilities rate review guidelines substantially as proposed in the Notice published November 8, 1979, at 11 N.J.R. 552(a) but with subsequent, substantive changes not detrimental to the public in the opinion of the Department of Human Services.

Full text of the adoption follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

10:63-3.1 Timing

Commencing with Fiscal Years ending with November 30, 1977, LTCF's are to furnish required cost studies to the Department of Health, Health Economics Services within [105] 90 days of the close of each fiscal year. For rate review purposes, the period for which these actual data are reported will constitute the "base period" for establishing prospective per diem reimbursement rates to be in effect for one full year commencing six months after the end of the base period, or [75] 90 days after the receipt of the report, whichever is later. These rates will not be subject to routine retroactive adjustments except for matters as specified in the Guidelines.

10:63-3.2 Rate components

(a) The prospective rates will be established at the lower of actual historical costs per day plus a return on net equity (except for voluntary and governmental facilities) after adjustments to the Management, Administrator, Assistant Administrator, and Legal Fees cost areas as explained in 10:63-3.5(b)2., 3., 4., [to] or "screened" rates per day calculated by applying standards and reasonableness criteria ("screens") to the following six rate components as identified on reporting Schedule A.

1. Raw food costs;
2. General service expenses;
3. Property-operating costs;
4. Amortization of special expenditures;
5. Patient care expenses;
6. Property-capital costs (including return on investment)

(b) A provision for inflation will be added to reasonable base period costs in calculating the prospective rates as described in Section 18 of this subchapter. Finally, a working capital provision will be added as described in Section 19 of this subchapter.

10:63-3.4 Raw food costs

(a) Raw food costs per patient day for voluntary and proprietary LTCF's which provide their own food service and which had over 20% Medicaid patient days in the base period will be determined. LTCF's which contract for their dietary operations will be excluded. These per diem costs will be ranked in descending order on a State-wide basis. The reasonableness limit will be set at 120% of the median cost per day.

(b) For LTCF's below this limit, prospective rates will be based upon actual costs. Where homes report unit costs 15% or more below the median, the Department of Health, Health Facilities Inspection, will be asked to inspect the food operations for compliance with State standards.

(c) For LTCF's above that limit, actual raw food costs will be added to other general service expenses and subjected to a screen of the combined total [as described in Section 5 of this subchapter].

10:63-3.5 General service expenses

[(a) Three levels of reasonableness limits will be developed for the purpose of screening base period general service costs.

1. Level I—The median equalized per diem costs, excluding raw food, of proprietary and voluntary LTCF's which had over 20% Medicaid patient days in the base period;

2. Level II—105% of Level I;

3. Level III—Level II plus the reasonableness limit developed for raw food costs as described in Section 4 of this subchapter.]

[(b) For LTCF's whose equalized general service costs excluding raw food are above the Level I limit, the following base period costs will be considered unreasonable to the extent that they contribute to the excess above the Level I limit.

1. All costs in the Management Cost Centers;
2. Administrator costs in excess of 110% of the median costs in comparably sized LTCF's where such positions are filled by personnel unrelated to owners.]

[(c) For LTCF's whose base period raw food costs are less than the limit developed per Section 4 of this subchapter, the Level II reasonableness limit will be applied to total general service expenses excluding raw food.]

[(d) For LTCF's whose base period raw food costs, exceed the limit developed per Section 4 of this subchapter, the Level III limit will be applied to total general service expenses including raw food.]

[(e) The five percent latitude will be reduced to the extent that compensation rates of individuals in a LTCF exceed 125 percent of the compensation rates of comparable positions in other LTCF's.]

(a) For purposes of screening reported base period costs, the general services category will be segregated into the following cost components:

1. Food
2. Administrator
3. Assistant Administrator
4. Other general services/legal fees

Reasonableness limits will be developed for each of these components of cost. Reimbursement rates will include the lower of actual costs or reasonable limits developed for each component. No trade-offs among cost components will be allowed with the exception of raw food (See Section D.)

(b) The bases for screen development, and reported costs subject to applicable screens, are as follows:

1. Food—as indicated in Section D, Raw food costs.
2. Administrator—reasonable compensation of unrelated administrators as determined by the regression analysis formula utilized by the Division of Health Economics Services.

i. The Administrator screen will be applied to the aggregate reported costs of management, administrator, and assistant administrator, for facilities with less than 240 licensed long term care beds.

ii. Compensation and special fringe benefits of all owners, officers, related parties, and other employees acting in an administrative capacity must be reported as Management unless such parties specifically carry out the function of Administrator or Assistant Administrator.

iii. Non-working officer, owner, or related party compensation and special fringe benefits are non-allowable.

3. Assistant Administrator—Limited to 125% of median unrelated assistant administrator compensation.

This cost category will apply only to facilities which exceed 239 licensed long term care beds.

4. Other general services/legal fees—This category will consist of the following cost elements:

- Other Administrative
- Dietary
- Laundry and linen
- Housekeeping
- Other general services

5. Reasonableness limits for the category in paragraph 5 of this subsection will be established at a statistically reliable percentage of median costs as reported by proprietary and voluntary facilities which had over 20 per cent Medicaid patient days.

i. A level of reasonableness will also be established for legal fees, consistent with the method employed for the other general services cost category.

ii. Reasonableness tests will exclude from rate calculations the greater of excess other general services or legal fee costs.

iii. The following examples illustrate this procedure assuming reasonableness limits are established at \$100,000, and \$5,000 for other general services and legal fees respectively:

	Reported costs	Excess
Case #1		
Other general services	\$110,000	\$10,000
Legal fees	\$ 7,000	
Case #2		
Other general services	\$ 98,000	\$ 2,000
Legal fees	\$ 7,000	
Case #3		
Other general services	\$ 99,000	— 0 —
Legal fees	\$ 4,500	

Historical, unscreened, rates (after management, Administrator, Assistant Administrator adjustments) would reflect eliminations in the legal fee area of \$2,000, \$2000, and zero in the above example.

An order adopting these amendments was filed on December 14, 1979, as R.1979 d.482 to become effective on January 1, 1980.

Howard H. Kestin
Director
Office of Administrative Law

(a)

HUMAN SERVICES

DIVISION OF PUBLIC WELFARE

Amendments Concerning Medical Payments

On December 14, 1979, Ann Klein, Commissioner of Human Services, pursuant to authority of N.J.S.A. 44:8-111 and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments to N.J.A.C. 10:85-5.3 and 10:85-5.5 concerning medical payments as proposed in the Notice published October 4, 1979 at 11 N.J.R. 516(c).

An order adopting these amendments was filed and became effective on December 14, 1979 as R.1979 d.495.

Howard H. Kestin
Director
Office of Administrative Law

(b)

HUMAN SERVICES

DIVISION OF PUBLIC WELFARE

Amendments on Fair Hearings And Medical Payments

On December 14, 1979, Ann Klein, Commissioner of Human Services, pursuant to authority of N.J.S.A. 44:8-111

and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments to N.J. A.C. 10:85-3.2, 10:85-5.3, 10:85-7.1 through 10:85-7.3 and 10:85-7.6 concerning fair hearings and medical payments substantially as proposed in the Notice published October 4, 1979, at 11 N.J.R. 507(b) with only inconsequential structural or language changes in the opinion of the Department of Human Services.

An order adopting these amendments was filed and became effective on December 14, 1979 as R.1979 d.496.

Howard H. Kestin
Director
Office of Administrative Law

(a)

INSURANCE

REAL ESTATE COMMISSION

Proposed Amendments Concerning Advertising

The New Jersey Real Estate Commission in the Department of Insurance, pursuant to authority of N.J.S.A. 45:15-17, proposes to amend portions of N.J.A.C. 11:5-1.15 concerning advertising.

Full text of the proposal follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

11:5-1.15(1) [Any advertisement which contains a home warranty offer] Any home warranty offer contained in any advertisement shall comply with all Federal and State warranty legislation, including the New Home Warranty and Builder's Registration Act, c. 467, L. 1977, N.J.S.A. 46:3B-1 et seq., and the Magnuson-Moss Warranty Act, P.L. 93-637, 15 U.S.C. 2301 et seq. Such advertising shall specify clearly whether the warranty is by inspection or non-inspection of the premises, whether the warranty is mandatory, and whether the purchaser is responsible for payment for the warranty. No advertisement shall contain an offer for a warranty unless a warranty may be secured for the property being advertised.

11:5-1.15(m)1. Nothing herein shall be construed as prohibiting the use of such words as "included" or "included in the purchase price" in reference to items included by owner in the sale of any real property or interest therein.

Interested persons may present statements or arguments in writing relevant to the proposed action on or before January 30, 1980 to:

Joan Haberle
Director
N.J. Real Estate Commission
201 East State St.
P.O. Box 1510
Trenton, N.J. 08625

The New Jersey Real Estate Commission may thereafter adopt rules concerning this subject without further notice.

Joan Haberle
Director, Real Estate Commission
Department of Insurance

(b)

INSURANCE

REAL ESTATE COMMISSION

Amendments Concerning Advertising Rules, Contracts of Sale and Listing Agreements, Participation in Trade Association or Listing Services, and Obligations of Licensees to the Public and Each Other

On October 23, 1979, the New Jersey Real Estate Commission in the Department of Insurance, pursuant to authority of N.J.S.A. 45:15-6, 45:15-10.1 and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments to N.J.A.C. 11:5-1.15 through 11:5-1.17 and 11:5-1.23 concerning advertising rules, contracts of sale and listing agreements, participation in trade association or listing services, and obligations of the licensee to the public and to each other substantially as proposed in the Notice published November 9, 1978, at 10 N.J.R. 499(a) but with subsequent, substantive changes not detrimental to the public in the opinion of the New Jersey Real Estate Commission.

An order adopting these amendments was filed and became effective on November 26, 1979 as R.1979 d.461.

Howard H. Kestin
Director
Office of Administrative Law

(c)

LAW AND PUBLIC SAFETY

DIVISION OF CONSUMER AFFAIRS

BOARD OF PHARMACY

Proposed Rules on Availability of Records

Edward Tarloski, President of the Board of Pharmacy in the Division of Consumer Affairs in the Department of Law and Public Safety, pursuant to the authority of N.J.S.A. 45:14-1 et seq., proposes to adopt a new rule concerning the availability of records when a practice terminates.

Full text of the revisions follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

13:39-6. Availability of records

(a) Where a pharmacist's practice is terminated by suspension, retirement, death, sale or other cause including insolvency, the licensee, or the one responsible for supervising the disposition of the practice shall make efforts to notify customers of the right to retrieve their prescriptions which are currently valid and the location thereof for a six months' period following notice, using all of the following methods:

1. Notification in writing to the State Board of Pharmacy;
2. Notification in writing to the professional licensee society, such as the pharmaceutical society of the county, region or state in which the licensee formerly practiced;
3. Publication once weekly for two successive weeks in a newspaper whose circulation encompasses the major area of the licensee's former practice of a notice advising customers of the right to retrieve the prescriptions and the location thereof for a six months' period following publication; and
4. A sign placed in the pharmacy location informing the

customers of the right to retrieve the prescriptions and the location thereof.

Interested persons may present statements or arguments in writing relevant to the proposed action on or before January 31, 1980 to:

Jay Church, Secretary
New Jersey State Board of Pharmacy
1100 Raymond Boulevard, Room 325
Newark, New Jersey 07102
Tel. No. (201) 648-2433

The New Jersey State Board of Pharmacy upon its own motion or at the instance of any interested party, may thereafter adopt the above amendment as proposed without further notice.

Edward Tarloski
President, Board of Pharmacy
Department of Law and Public Safety

(a)

LAW AND PUBLIC SAFETY

DIVISION OF CONSUMER AFFAIRS

Proposed Amendments on Merchandise Advertising

John J. Degnan, Attorney General of New Jersey, pursuant to authority of N.J.S.A. 56:8-4, proposes to repeal in its entirety the current Division of Consumer Affairs regulations governing advertising and marketing practices, N.J.A.C. 13:45A-9 and to adopt new regulations regarding merchandise advertising. The present proposal supersedes the proposed regulation published at 11 N.J.R. 387(a) on November 8, 1979.

Full text of the proposed new rules follows.

SUBCHAPTER 9. MERCHANDISE ADVERTISING

13:45A-9.1 Definitions

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

"Advertisement" means any attempt by an advertiser, other than by use of a price tag, catalogue or any offering for the sale of a motor vehicle subject to the requirements of N.J.A.C. 13:45A-2.1 et seq., to directly or indirectly induce the purchase or rental of merchandise at retail, appearing in any newspaper, magazine, periodical, circular, in-store or out-of-store sign or other written matter placed before the consuming public, or in any radio or television broadcast.

"Advertiser" means any person as defined by N.J.S.A. 56:8-1(d), other than a public utility regulated by the Board of Public Utilities, who in the ordinary course of business is engaged in the sale or rental of merchandise at retail and who places, either directly or through an advertising agency, an advertisement before the public.

"Catalogue" means a multi-page solicitation in which a seller offers goods for sale or rental for a seasonal or specified period of time, from which consumers can order goods directly without going to the seller's place of business. An advertising circular, distributed through inclusion in a newspaper, representing a seller's partial offering of goods for sale or rental for a period of time not to exceed two weeks, shall not be considered a catalogue.

"Closeout sale" means a sale in which an advertiser

offers for sale at a reduced price items of merchandise remaining at one or more specified locations which the advertiser will not have available for sale within a reasonable period of time after all such items have been sold.

"Division" means the Division of Consumer Affairs.

"Home appliance" means any electrical, mechanical or thermal article produced or distributed for sale to a consumer for use in or around a permanent or temporary household or residence, including, but not limited to, air conditioners, dehumidifiers, dishwashers, dryers, electric blankets, electronic games, fans, freezers, motorized kitchen aids, ovens, radios, ranges, refrigerators, stereophonic equipment, televisions and washers.

"Merchandise" means any objects, wares, goods, commodities, services or anything offered directly or indirectly to the public for sale or rental at retail.

"Price advertisement" means any advertisement in which a specific dollar price is stated with regard to particular advertised merchandise.

"Price reduction advertisement" means an advertisement which in any way states or suggests directly or indirectly that merchandise is being offered or made available for sale at a price less than that at which it has been routinely sold or offered for sale in the past or at which it will be sold or offered for sale in the future. The following words and terms or their substantial equivalent, when used in any advertisement except when used exclusively as part of the advertiser's corporate, partnership or trade name, shall be deemed to indicate a price reduction advertisement: sale, discount, special savings, price cut, bargain, reduced, prices slashed, clearance, regularly, usually, cut rate, originally, formerly, warehouse or factory clearance, buy one get one free, at cost, below cost, wholesale.

"Rain check" means a written statement issued by an advertiser allowing the purchase of designated merchandise at a previously advertised price.

"Reference price" means a price or price range set forth in a price reduction advertisement for the purpose of establishing an advertised selling price as a reduction from a usual selling price of the advertised merchandise.

"Trade area" means that geographical area in which an advertiser solicits or makes a substantial number of sales.

13:45A-9.2 General advertising practices

(a) Without limiting the application of N.J.S.A. 56:8-1, et seq., the following practices shall be unlawful with respect to all advertisements:

1. The failure of an advertiser to maintain and offer for immediate purchase advertised merchandise in a quantity sufficient to meet reasonably anticipated consumer demand therefor. When an advertisement states a specific period of time during which merchandise will be available for sale, a sufficient quantity of such merchandise shall be made available to meet reasonably anticipated consumer demand during the stated period. When no stated period appears in the advertisement, a sufficient quantity of merchandise shall be made available to meet reasonably anticipated consumer demand during three consecutive business days commencing with the effective date of the advertisement.

i. The requirement of this subsection shall not be applicable to merchandise which is advertised:

(1) On an in-store sign only with no corresponding out-of-store sign;

(2) As being available in a specific quantity; or

(3) As being available in a "limited supply," pursuant to a "closeout sale" or pursuant to a "clearance sale" if such offering meets the definition of a closeout sale.

2. When a particular period of time for an offering is

specified in any advertisement in which merchandise is advertised as being available in a "limited supply" or as being available pursuant to a "closeout sale" or a "clearance sale" meeting the definition of a closeout sale, the failure to offer the advertised merchandise in a quantity sufficient to meet reasonably anticipated consumer demand during such stated period.

3. The failure of an advertiser to specifically designate within an advertisement which merchandise items possess special or limiting factors relating to price, quality, condition or availability. By way of illustration, and not by limitation, the following shall be deemed violative of this sub-paragraph:

i. The failure to specifically designate which merchandise items are below cost, if any amount less than all advertised items are below cost, when a statement of below cost sales is set forth in an advertisement;

ii. The failure to specifically designate which merchandise items, if any, are damaged or in any way less than first quality condition;

iii. The failure to specifically designate merchandise as floor models, discontinued models or one of a kind, when applicable;

iv. The failure to specifically designate retail outlets at which advertised merchandise will not be available. Such information need not be disclosed on any in-store advertisement.

4. The failure to conspicuously post notice of advertised merchandise, on the business premises to which the advertisement applies, in proximity to the advertised merchandise or at all entrances to the business premises. Such notice may consist of a copy of the advertisement or may take the form of any sign with such terms as "sale," "as advertised," "20 per cent off."

5. In any price advertisement in which a home appliance is offered for sale, the failure of an advertiser to disclose the following information relating to the advertised merchandise: the manufacturer's name or the merchandise trade name, the model or series number and such other information as may be necessary to clearly delineate the advertised item from other similar merchandise produced by the same manufacturer.

6. The use of any type, size, location, lighting, illustration, graphic depiction or color resulting in the obscuring of any material fact.

7. The use of the terms "Public Notice," "Public Sale" or words or terms of similar meaning in any advertisement offering merchandise for sale, where such sale is not required by court order or by operation of law, other than a sale conducted by an auctioneer on behalf of a non-business entity.

8. Describing the advertiser through the use of the terms "warehouse," "factory outlet," "discount," "bargain," "clearance," "liquidators," "unclaimed freight," or other words or terms of similar meaning, whether in the advertiser's corporate, partnership or trade name or otherwise, where such terms do not reflect a bona fide description of the advertiser being described.

9. Whenever an advertiser provides a raincheck for an advertised item which is not available for immediate purchase, the failure to:

i. Honor or satisfy such raincheck within 60 days of issuance unless an extension of such time period is agreed to by the holder thereof; and

ii. Give written or telephonic notice to the holder thereof when the merchandise is available and hold such merchandise for a reasonable time after giving such notice, for all merchandise with an advertised price greater than \$15 per unit; and

iii. Offer a raincheck to all customers who are unable,

due to the unavailability thereof, to purchase the advertised merchandise during the period of time during which the merchandise has been advertised as available for sale.

10. The making of false or misleading representations of facts concerning the reasons for, existence or amounts of price reductions, the nature of an offering or the quantity of advertised merchandise available for sale.

11. The failure of an advertiser to substantiate through documents, records or other written proof any claim made regarding the safety, performance, availability, efficiency, quality or price of the advertised merchandise, nature of the offering or quantity of advertised merchandise available for sale. Such records shall be made available upon request for inspection by the Division or its designee at the advertiser's option, the Division's designated offices, for a period of 90 days following the effective date of the advertisement.

13:45A-9.3 Price reduction advertisements

(a) Without limiting the application of N.J.S.A. 56:8-1 et seq., in addition to those practices referred to in section 2 of this subchapter, the following practices shall be unlawful with respect to price reduction advertisements:

1. The failure to state with specificity the period of time during which the price reduction shall be applicable, except on those advertisements to which section 2(a) of this subchapter is not applicable.

2. The failure to set forth the retail selling price or price range for all advertised merchandise.

3. For any specifically advertised merchandise items advertised for sale at a price of \$100.00 or more, the failure to conspicuously set forth a reference price or price range based upon either:

i. The advertiser's usual selling price or price range for the identical merchandise or for comparable merchandise of like grade or quality; or

ii. A usual selling price charged by competitors in the advertiser's trade area for the identical merchandise or for comparable merchandise of like grade or quality; or

iii. The manufacturer's suggested retail price for the identical merchandise or for comparable merchandise of like grade quality.

4. The failure of the disclosure of the reference price or price range to adhere to the following conditions:

i. The reference price or price range shall be set forth in close proximity to the retail selling price and the advertised item and shall be established on the basis of a substantial number of sales or offers of sale in the regular course of business, made at any time within the most recent 60 days during which the advertised merchandise was available for sale prior to, or to be made in the first 60 days during which the advertised merchandise will be available for sale following, the effective date of the advertisement.

ii. When, and only when, an advertiser operates more than one retail outlet at which advertised merchandise has been or will be available for purchase in the ordinary course of business at different prices, such advertiser may set forth a price range, based on the sales or offers of sales at its retail outlets, as its reference price for a particular item. For example, an advertisement reading: "Regular price \$110 to \$125 - On sale for \$100" would comply with this regulation.

iii. When an advertiser advertises two or more items of comparable merchandise as available at reduced prices, such advertiser may set forth a price range, based on the reference prices for the advertised products. For example, an advertisement reading: "Fur Coats - Regularly \$250 to \$300. Now \$150 to \$200" would comply with this regulation.

iv. With regard to the price comparison required by this subsection, the advertisement shall clearly and conspicuously disclose in close proximity to the reference price or price range the basis for such reference as set forth in subparagraphs (c) 1, 2, and 3 hereof. In this regard, terms such as "comparable value," "competitor's price," "manufacturer's list price," "our regular price" or words of similar import shall be used to designate the basis for the reference price.

5. The failure of an advertiser to prove the validity of its claim of a price reduction based on one of the bases therefor as set forth in subparagraphs (c) 1, 2 and 3 hereof to the Division or its designee, regardless of whether or not a reference price need be set forth in the advertisement. This substantiation shall adhere to the 60 day periods established by this section.

6. In any advertisement consisting of a general announcement of a price reduction characterized as savings of a particular percentage or a range of percentages (such as "save 20 per cent" or "20 per cent to 50 per cent off"), the failure to:

- i. State the minimum per cent reduction as conspicuously as the maximum per cent reduction, when applicable; and
- ii. Base the advertised per cent reduction on one of the categories set out in subsection (c) of this section, disclosing such basis in the advertisement.

7. The use of the terms "cost," "wholesale" or other similar terms to describe an advertised price where such price is not equal to or less than the price per unit paid by the advertiser to the manufacturer or distributor of the merchandise. In the computation of the price per unit of the advertised merchandise, freight may be included if the advertiser pays for same and is not reimbursed therefor, but handling and all overhead or operating expenses shall be excluded.

8. The use or statement of any false, deceptive or misleading reference price comparison. A reference price or price comparison shall be deemed false, misleading, and deceptive where it is not based upon a substantial number of sales or offers of sale which have been or will be made within the advertiser's trade area at that price at any time within the 60 day periods established by this section.

13:45A-9.4 Application of regulation

(a) These rules shall apply to the following advertisements:

1. Any advertisement uttered, issued, printed, disseminated or distributed within this State concerning goods and services advertised as available at locations exclusively within this State; and

2. Any advertisement, other than radio and television broadcasts, issued, printed, disseminated or distributed to any substantial extent within this State concerning goods and services advertised as available at locations within this State and outside this State; and

3. Any advertisement, other than radio and television broadcasts, issued, printed, disseminated or distributed primarily within this State concerning goods and services advertised as available at locations exclusively outside this State; and

4. Any radio and television broadcasts uttered, issued, disseminated or distributed primarily within this State concerning goods and services advertised as available at locations within this State and outside this State, or at locations exclusively outside this State.

(b) An advertising agency and the owner or publisher of a newspaper, magazine, periodical, circular, billboard or radio or television station acting on behalf of an advertising seller shall be deemed an advertiser within the meaning of this regulation, when such entity prepares

or places an advertisement for publication. No such entity shall be liable for a violation of this regulation when the entity reasonably relies upon data, information or materials supplied by an advertising seller for whom the advertisement is prepared or placed or when the violation is caused by an act, error or omission beyond the entity's control, including but not limited to, the post-publication performance of the advertising seller. Notwithstanding that an advertisement has been prepared or placed for publication by one of the aforementioned entities, the advertiser on whose behalf such advertisement was placed may be liable for any violation of this regulation.

(c) An advertiser has no liability under this regulation for a failure to comply with any requirement thereof if the advertiser shows by a preponderance of evidence that failure to comply resulted from actions of persons other than the advertiser which were not, or should not have been, reasonably anticipated by the advertiser.

(d) If any provisions of this regulation or the application thereof to any person or circumstances is held unconstitutional or beyond the statutory powers of the Attorney General, the remainder of this regulation and the application of such provisions to other persons or circumstances shall not be effected.

Interested persons may present statements or arguments in writing relevant to the proposed action on or before January 31, 1980 to:

Adam K. Levin, Director
New Jersey Division of Consumer Affairs
1100 Raymond Blvd. - Room 504
Newark, N.J. 07102

The Attorney General may thereafter adopt rules concerning this subject without further notice.

John J. Degnan
Attorney General of New Jersey
Department of Law and Public Safety

(a)

LAW AND PUBLIC SAFETY

DIVISION OF CONSUMER AFFAIRS

BOARD OF EXAMINERS OF OPHTHALMIC DISPENSERS AND OPHTHALMIC TECHNICIANS

Rules on Contact Lenses Dispensing

On October 3, 1979, Ann Crumidy, Acting President of the State Board of Examiners of Ophthalmic Dispensers and Ophthalmic Technicians in the Division of Consumer Affairs in the Department of Law and Public Safety, pursuant to authority of N.J.S.A. 52:17B-41 and in accordance with applicable provisions of the Administrative Procedure Act, adopted new rules, to be cited as N.J.A.C. 13:33-4.1, concerning contact lenses dispensing as proposed in the Notice published September 6, 1979 at 11 N.J.R. 454(a).

An order adopting these rules was filed and became effective on November 27, 1979 as R.1979 d.462.

Howard H. Kestin
Director
Office of Administrative Law

(a)

LAW AND PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
BOARD OF MEDICAL EXAMINERS

Amendments Concerning Contact Lenses

On October 24, 1979, Edwin H. Albano, President of the State Board of Medical Examiners in the Division of Consumer Affairs in the Department of Law and Public Safety, pursuant to authority of N.J.S.A. 45:9-2 and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments to N.J.A.C. 13:35-5.2 concerning contact lenses as proposed in the Notice published September 6, 1979 at 11 N.J.R. 454(b).

An order adopting these amendments was filed and became effective on November 27, 1979 as R.1979 d.463.

Howard H. Kestin
Director
Office of Administrative Law

(b)

LAW AND PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
BOARD OF NURSING

Rules on Foreign Nursing Applicants

On November 16, 1979, Richard E. David, Executive Director of the State Board of Nursing in the Division of Consumer Affairs in the Department of Law and Public Safety, pursuant to authority of N.J.S.A. 45:11-24(d)(19) and in accordance with applicable provisions of the Administrative Procedure Act, adopted new rules, to be cited as N.J.A.C. 13:37-3.9, concerning foreign nursing applicants as proposed in the Notice published September 6, 1979 at 11 N.J.R. 462(a).

An order adopting these rules was filed and became effective on November 27, 1979 as R.1979 d.464.

Howard H. Kestin
Director
Office of Administrative Law

(c)

LAW AND PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
BOARD OF OPTOMETRISTS

Amendments Concerning the Release of Patient Record of Contact Lens Specifications

On October 17, 1979, Maxwell M. Kaye, President of the State Board of Optometrists in the Division of Consumer Affairs in the Department of Law and Public Safety, pursuant to authority of N.J.S.A. 52:17B-41 and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments to N.J.A.C. 13:38-6.1(b) concerning the release of patient records of contact lens specifications as proposed in the Notice published September 6, 1979 at 11 N.J.R. 462(b).

An order adopting these amendments was filed and became effective on November 27, 1979 as R.1979 d.465.

Howard H. Kestin
Director
Office of Administrative Law

(d)

LAW AND PUBLIC SAFETY
DIVISION OF MOTOR VEHICLES

Rules Concerning Motorized Bicycles

On November 14, 1979, John A. Waddington, Director of the Division of Motor Vehicles in the Department of Law and Public Safety, pursuant to authority of N.J.S.A. 39:4-14.3a. and c. and in accordance with applicable provisions of the Administrative Procedure Act, adopted new rules, to be cited as N.J.A.C. 13:25-8.5 and 13:25-8.6, concerning motorized bicycles as proposed in the Notice published September 6, 1979 at 11 N.J.R. 452(a).

An order adopting these rules was filed and became effective on December 10, 1979 as R.1979 d.481.

Howard H. Kestin
Director
Office of Administrative Law

(e)

ENERGY
THE COMMISSIONER

Emergency Amendments Concerning the Regulation and Control of the Sale Of Motor Gasoline

On November 28, 1979, Joel R. Jacobson, Commissioner of Energy, pursuant to authority of N.J.S.A. 52:27F-1 et seq. and in accordance with applicable provisions of the Administrative Procedure Act, adopted emergency amendments to N.J.A.C. 14A:2-3.4 and 14A:2-3.15 concerning the regulation and control of the sale of motor gasoline.

Full text of the adoption follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

14A:2-3.4 Methods for notifying public

(a) Every retail dealer of motor gasoline shall conspicuously display a flag, so that it is easily visible to the public, during such time that his place of business is open, as follows:

1. A red flag shall be displayed when motor gasoline is not available for sale to members of the general public;

2. A green flag shall be displayed when all grades of motor gasoline are available for sale to members of the general public without limitations in regard to the maximum amount which may be purchased;

3. A yellow flag shall be displayed when motor gasoline is available to members of the general public but such sales are limited in regard to the maximum amount which may be purchased, or there is a grade of gasoline which is unavailable for sale to members of the general public[;].

(b) Whenever a retail dealer displays a yellow flag, he shall post in a conspicuous place and manner the limitations applicable to sales of motor gasoline.

(c) Every retail dealer of motor gasoline shall post in a conspicuous place and manner the hours during which

he shall be selling motor gasoline to members of the general public.

(d) All signs posted by a retail dealer relating to the price of motor gasoline being sold must be properly maintained and accurately reflect the current selling price.

(e) Every retail dealer must prominently indicate the last motor vehicle eligible to receive motor gasoline from the retail dealer prior to closing.

(f) If a minimum purchase or minimum sale requirement is in effect, every retail dealer of motor gasoline shall post in a conspicuous place and manner the requirement which is in effect at that time.

14A:2-3.15 Minimum sale requirements

(a) With the exception of those sales of motor fuel on the Garden State Parkway, New Jersey Turnpike, or the Atlantic City Expressway, no gasoline retailer may sell to any passenger vehicle any motor fuel in an amount less than \$5.00 for a 4-cylinder vehicle or in an amount less than \$7.00 for any other vehicle.

(b) With the exception of purchases of motor fuel on the Garden State Parkway, the New Jersey Turnpike, or the Atlantic City Expressway, no operator of a motor vehicle shall purchase motor fuel in an amount less than \$5.00 for a four-cylinder vehicle or in an amount less than \$7.00 for any other vehicle.

An order adopting these amendments was filed and became effective on November 29, 1979 as R.1979 d.468 (Exempt, Emergency Rule).

Howard H. Kestin
Director
Office of Administrative Law

(a)

ENERGY

THE COMMISSIONER

Rules Concerning the Energy Facility Review Board

On December 3, 1979, Joel R. Jacobson, Commissioner of Energy, pursuant to authority of N.J.S.A. 52:27F-1 et seq. and in accordance with applicable provisions of the Administrative Procedure Act, adopted new rules, to be cited as N.J.A.C. 14A:8, concerning the Energy Facility Review Board as proposed in the Notice published February 8, 1979 at 11 N.J.R. 80(a).

An order adopting these rules was filed on December 3, 1979 as R.1979 d.473 to become effective on February 15, 1980.

Howard H. Kestin
Director
Office of Administrative Law

(b)

ENERGY

BOARD OF PUBLIC UTILITIES

Rules on Estimated Bills For Residential Customers

On November 28, 1979, the Board of Public Utilities in the Department of Energy, pursuant to authority of N.J.S.A. 48:2-12 and in accordance with applicable provisions of the Administrative Procedure Act, adopted rules concerning estimated bills for residential customers substan-

tially as proposed in the Notice published August 9, 1979, at 11 N.J.R. 402(b) but with subsequent, substantive changes not detrimental to the public in the opinion of the Department of Energy.

Full text of the adoption follows (additions to the proposal indicated in boldface thus; deletions to the proposal indicated in brackets [thus]).

14:3-7.9(b) Rules concerning estimated bills for residential customers are as follows:

1. Utility companies shall maintain a regular meter reading schedule and make a reasonable effort to read all meters.

2. Utility companies, upon request, must make available to all customers a postage paid business reply card on which the customer may mark the meter reading. Said card shall have appropriate explanation. The utility must permit the customer to telephone the meter reading to the utility. The customer reading is to be used in lieu of an estimated reading, provided the reading is received in time for billing.

3. When a utility company estimates an account for [three] four consecutive billing periods (monthly accounts), or two consecutive billing periods (bi-monthly accounts), the company must initiate a program to mail [an important notice] a notice marked "Important Notice" to the customer on the fifth and seventh months explaining that a meter reading must be obtained and said notice must explain the penalty for failure to complete an actual meter reading. After all reasonable means to obtain a meter reading have been exhausted, the company may discontinue service provided at least eight months have passed since the last meter reading was obtained, the Board of Public Utility Commissioners have been so notified by prior mailing. If service is discontinued and subsequently restored, the utility may charge a reconnection charge equal to the reconnection charge for restoring service after discontinuance for non-payment.

4. Utility companies must admit to the Board of Public Utilities a statement detailing their estimating procedures.

5. An estimated bill must be clearly designated as such.

6. If low estimates result in a customer receiving an actual bill that is at least twenty-five per cent greater than the prior estimated bill, the company shall [notify] allow the customer [that he may request an amortization of] to amortize the excess amount. The amortization will be in equal installments over a period of time equal to the period when no actual reading was taken by the customer or the company.

7. Annually, the company shall notify all customers of their rights to amortize as outlined in paragraph 6 of this subsection.

An order adopting these rules was filed on December 5, 1979, as R.1979 d.474 to become effective on January 1, 1980.

Howard H. Kestin
Director
Office of Administrative Law

(c)

TRANSPORTATION

THE COMMISSIONER

Proposed Amendments Concerning Speed Zones on Parts of Route U.S. 9

Louis J. Gambaccini, Commissioner of Transportation,

pursuant to authority of N.J.S.A. 39:4-98, proposes to delete the current text of N.J.A.C. 16:28-1.41(b) concerning the establishment of legal speed zones along certain portions of Route U.S. 9 in Burlington and Ocean Counties.

The proposal concerns the deletion of the current text of N.J.A.C. 16:28-1.41(a) and (b); the renumbering of N.J.A.C. 16:28-1.41(c) and (d) to now be cited as N.J.A.C. 16:28-1.41(a) and (b) respectively; and the adoption of new text therein to be cited as N.J.A.C. 16:28-1.41(c).

Full text of the proposed new rules follows.

16:28-1.41(c) The rate of speed designated for State Highway Route U.S. 9, including parts of Route 444 (and excluding Garden State Parkway Authority sections) described herein below shall be and hereby is established and adopted as the maximum legal rate of speed for both directions of traffic:

1. 45 m.p.h. in Bass River Township between the Garden State Parkway and Route 542 (milepost 55.05 to 56.00); thence

2. 40 m.p.h. to Green Bush Road (Co. Rd. 654) in Bass River Township (milepost 57.28); thence

3. 50 m.p.h. to Gifford Road, Little Egg Harbor Township (milepost 61.65); thence

4. 40 m.p.h. to Maple Avenue, Tuckerton Borough (milepost 62.22); thence

5. 35 m.p.h. to the bridge at Pohatcong Lake, Tuckerton Borough (milepost 62.50); thence

6. 30 m.p.h. to 200 feet south of Pine Street, Tuckerton Borough (milepost 62.92); thence

7. 40 m.p.h. to 900 feet north of Locust Street, Tuckerton Borough (milepost 63.20); thence

8. 50 m.p.h. to Brook Street, Little Egg Harbor Township (milepost 64.62); thence

9. 40 m.p.h. to Willets Avenue, Eagleswood Township, Little Egg Harbor Township (milepost 65.30); thence

10. 35 m.p.h. to Mill Street, Eagleswood Township (milepost 65.72); thence

11. 45 m.p.h. in Eagleswood Township to Route 72, Stafford Township (milepost 70.40); thence

12. 35 m.p.h. to Lakewood Avenue, Stafford Township (milepost 70.86); thence

13. 40 m.p.h. to Manor Drive, Stafford Township (milepost 71.14), except 25 m.p.h. in the Stafford Township elementary school zone during recess or while children are going to or leaving school, during opening or closing hours; thence

14. 50 m.p.h. to Lower Shore Road, Barnegat Township (milepost 74.40); thence

15. 35 m.p.h. to Rose Hill Road, Barnegat Township (milepost 75.38), except 25 m.p.h. in the Barnegat Elementary School Zone, during recess or while children are going to or leaving school, during opening or closing hours; thence

16. 45 m.p.h. in Barnegat Township, Ocean Township and Lacey Township to Lakeside Drive (milepost 81.10); thence

17. 35 m.p.h. to 800 feet north of Lacey Road, Lacey Township (milepost 81.72); thence

18. 45 m.p.h. to Berkeley Township, southerly Pine Beach Borough Line (Avon Road), (milepost 88.76); thence

19. 35 m.p.h. to northerly Pine Beach Borough-Beachwood Borough Line (Mizzen Avenue) to Route 166 in Beachwood Borough (milepost 89.60); thence

20. 40 m.p.h. to 400 feet north of Conrail (C.R.R. N.J.) grade crossing in Beachwood Borough (milepost 90.00); thence

21. 50 m.p.h. in Beachwood Borough and to the Garden State Parkway (Route 444, also Route U.S. 9) in South Toms River Borough (milepost 90.80); thence

22. 55 m.p.h. in South Toms River Borough, Berkeley Township and Dover Township to Route 166 - Route U.S. 9 (milepost 94.40); thence

23. 50 m.p.h. to Lakewood Township Line (Route 70) (milepost 98.59); thence

24. 45 m.p.h. to 200 feet south of High Street, Lakewood Township (milepost 100.15); thence

25. 40 m.p.h. to 400 feet south of Central Avenue, Lakewood Township (milepost 101.24); thence

26. 35 m.p.h. to Seventh Avenue, Lakewood Township (milepost 102.04); thence

27. 40 m.p.h. in Lakewood Township to Alexander Road, Howell Township (milepost 103.40); thence

28. 45 m.p.h. to Locust Avenue, Howell Township (milepost 105.00); thence

29. 40 m.p.h. to Howell Lane, Howell Township (milepost 106.40); thence

30. 50 m.p.h. to Hulses Corner Road - Georgia Tavern Road, Howell Township (milepost 107.10); thence

31. 40 m.p.h. to White Street, Howell Township (milepost 107.98); thence

32. 50 m.p.h. to West Farm Road, Howell Township (milepost 108.50); thence

33. 55 m.p.h. in Howell Township to Elton-Adelphia Road, County Road 524, in Freehold Township (milepost 111.20); thence

34. 50 m.p.h. in Freehold Township and Freehold Borough to the Route 9 - Route 33 Traffic Circle (milepost 114.20); thence

35. 55 m.p.h. to Old Mill Road (milepost 126.3); thence

36. 50 m.p.h. in Madison Township, Sayreville Borough, City of South Amboy and Woodbridge Township to Route U.S. 1 (milepost 136.25).

Interested persons may present statements or arguments in writing relevant to the proposed action on or before January 30, 1980 to:

Charles L. Meyers
Administrative Practice Officer
N.J. Department of Transportation
1035 Parkway Ave.
Trenton, N.J. 08625

The Department of Transportation may thereafter adopt rules concerning this subject without further notice.

Louis J. Gambaccini
Commissioner
Department of Transportation

(a)

TRANSPORTATION

THE COMMISSIONER

Proposed Amendments Concerning Speed Zones Along Parts of Route U.S. 130

Louis J. Gambaccini, Commissioner of Transportation, pursuant to authority of N.J.S.A. 39:4-98, proposes to amend the current text of N.J.A.C. 16:28-1.69(a)2 and (a)4 concerning speed zones along parts of Route U.S. 130.

Full text of the proposed new rules follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

16:28-1.69(a)2.ii. West Deptford Township and Westville Borough:

[(1) 55 mph from the Paulsboro Township Line to the Route I-295 underpass: (milepost 18.85 to 23.9);

(2) Zone 8: 50 mph from the Route I-295 underpass to Route 45 except 35 mph in the Westville School Zone during recess or while children are going to or leaving school during opening or closing hours: (milepost 23.9 to 25.05);]

(1) 55 mph between the Paulsboro Township Line and 425 feet south of Delaware Street (Route 534) underpass: (milepost 18.85 to 21.7);

(2) Zone 8: 50 mph between 425 feet south of Delaware Street (Route 534) underpass and Route 45 except 35 mph in Westville School Zone during recess or while children are going to or leaving school during opening or closing hours: (milepost 21.7 to 25.05);

....

16:28-1.69(a)4.iii.(4) Zone 18: 50 mph [from Dugan Drive to Neck Road] between Dugan Drive and the Florence Township line: (milepost 47.5 to [48.25] 49.1).

[(5) Zone 19: 55 mph from Neck Road to the Florence Township line: milepost 48.25 to 49.1.]

iv. Florence Township and Mansfield Township:

(1) [55] 50 mph within all corporate limits: (milepost 49.1 to [54.45] 53.45).

v. Bordentown Township and City of Bordentown:

[(1) 55 mph from the Mansfield Township line to Farnsworth Avenue (Rt. 545): (milepost 53.45 to 55.4);

(2) Zone 20: 50 mph from Farnsworth Avenue (Rt. 545) to the northernmost intersection of Route U.S. 206. (Includes Rt. U.S. 206): (milepost 55.4 to 56.4);

(3) Zone 21: 55 mph from the northernmost intersection of Route U.S. 206 to Hamilton Township line: (milepost 56.4 to 58.25).]

(1) 50 mph between the Mansfield Township line and 900 feet south of Rising Sun Road: (milepost 53.45 to 54.15);

(2) Zone 19: 55 mph between 900 feet south of Rising Sun Road and Farnsworth Avenue (Rt. 545): (milepost 54.15 to 55.4);

(3) Zone 20: 40 mph between Farnsworth Avenue (Rt. 545) and the northernmost intersection of Route U.S. 206 (includes Route U.S. 206): (milepost 55.4 to 56.4);

(4) Zone 21: 55 mph between the northernmost intersection of Route U.S. 206 and Hamilton Township line: (milepost 56.4 to 58.25).

Interested persons may present statements or arguments in writing relevant to the proposed action on or before January 30, 1980 to:

Charles L. Meyers
Administrative Practice Officer
N.J. Department of Transportation
1035 Parkway Avenue
Trenton, N.J. 08625

The Department of Transportation may thereafter adopt rules concerning this subject without further notice.

Louis J. Gambaccini
Commissioner
Department of Transportation

(a)

TRANSPORTATION

THE COMMISSIONER

Proposed Amendments Concerning Restricted Parking on Parts of Routes 27, 49, 166, 3 and 152

Louis J. Gambaccini, Commissioner of Transportation, pursuant to authority of N.J.S.A. 39:4-138.1, proposes to amend various rules concerning restricted parking on parts of Routes 27, 49, 166, 3 and 152.

This proposal concerns amendments to N.J.A.C. 16:28-3.39, 16:28-3.75, 16:28-3.95, 16:28-3.107 and 16:28-3.199.

Full text of the proposed amendments follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

16:28-3.39(a)4. **No stopping or standing in Hopewell Township, Cumberland County:**

i. **Along both sides of Route 49 between County Road 661 (Barrett Run Road) and the Hopewell Township-Bridgeton City corporate line.**

(Renumber paragraphs 4 and 5 as 5 and 6.)

16:28-3.75(a)1.iii. **From the southerly curb line of Broad Street to a point 100 feet south therefrom.**

16:28-3.75(a)2. **Along the northbound side of Route 166**

i. **From the northerly curb line of Dover Street to a point 100 feet north therefrom.**

[i.] ii. **From a point 155 feet south of the southerly curb line of Route 37 to a point 265 feet south of the southerly curb line of Route 37.**

[ii.] iii. **From a point 70 feet south of the southerly curb line of James Street to a point 145 feet south of the southerly curb line of James Street.**

16:28-3.95(b)1. **Along the northbound side of Route 27 in South Brunswick and Franklin Townships:**

i. **Far side bus stops:**

- (1) Allston Road: **105 feet;**
- (2) Stanworth Road: **105 feet;**
- (3) Sand Hill Road: **105 feet;**
- (4) Stillwell Road: **105 feet.**

ii. **Near side bus stops:**

- (1) New Road: **120 feet;**
- (2) Henderson Road: **120 feet.**

2. **Along the southbound side of Route 27 in South Brunswick Township:**

i. **Far side bus stops:**

- (1) Allston Road: **105 feet;**
- (2) Henderson Road: **105 feet.**

ii. **Near side bus stops:**

- (1) Stillwell Road: **120 feet;**
- (2) Sand Hill Road: **120 feet;**
- (3) Stanworth Road: **120 feet;**
- (4) Bunker Hill Road: **120 feet.**

iii. **Mid-block bus stop: From a point 220 feet south of the southerly curb line of Henderson Road to a point 120 feet southerly therefrom.**

3. **Along both sides of Route 27 in South Brunswick and Franklin Townships:**

i. **Mid-block bus stop: Beginning 800 feet north of the northerly curb line of Allston Road and extending 135 feet northerly therefrom.**

(Renumber paragraphs 1 and 2 as 4 and 5.)

6. **Along the southbound side of Route 27 (Lincoln Highway) in Edison:**

i. **Near side bus stops:**

- (1) Evergreen Road: **120 feet;**
- (2) Paisenage Road: **120 feet;**
- (3) Vineyard Road: **120 feet;**
- (4) Talmage Road: **120 feet;**
- (5) Schuyler Place: **120 feet.**

7. **Along the northbound side of Route 27 (Lincoln Highway) in Edison:**

i. **Near side bus stops:**

- (1) Wood Avenue: **120 feet;**
- (2) Stoney Road: **120 feet;**
- (3) Plainfield Avenue: **120 feet;**

(4) **Calton Road:** 120 feet.
(Renumber paragraph 3 as paragraph 8.)

16:28-3.107(a)1. No stopping or standing along both sides for the entire length within the corporate limits of Rutherford Borough and the City of Clifton including all ramps and connections thereto which are under the jurisdiction of the Commissioner of Transportation.

16:28-3.199(a)1. No stopping or standing along both sides of Route 152 for its entire length within the corporate limits of the City of Somers Point and the Township of Egg Harbor.

Interested persons may present statements or arguments in writing relevant to the proposed action on or before January 30, 1980 to:

Charles L. Meyers
Administrative Practice Officer
N.J. Department of Transportation
1035 Parkway Ave.
Trenton, N.J. 08625

The Department of Transportation may thereafter adopt rules concerning this subject without further notice.

Louis J. Gambaccini
Commissioner
Department of Transportation

(a)

TRANSPORTATION THE COMMISSIONER

Emergency Amendments Concerning Reimbursed Highway Safety Lighting

On November 28, 1979, Russell H. Mullen, Assistant Commissioner of Transportation, pursuant to authority of N.J. S.A. 27:1A-5, 27:1A-6 and in accordance with applicable provisions of the Administrative Procedure Act, adopted emergency amendments to a portion of the rules concerning reimbursed highway safety lighting.

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

16:26-3.4(d) Incandescent lighting units will not be approved for reimbursement [until] after December 31, 1979[.] [Units not converted to the arc discharge type lamp at least 7,000 lumen intensity prior to January 1, 1980, will be eliminated from reimbursement agreements for calendar year 1980 and thereafter.] unless local or county government authorizes their conversion through the utility company to the arc discharge type lamp of at least 7,000 lumen intensity prior to December 15, 1979.

An order adopting these amendments was filed and became effective on November 28, 1979 as R.1979 d.466 (Exempt, Emergency Rule).

Howard H. Kestin
Director
Office of Administrative Law

(b)

TRANSPORTATION THE COMMISSIONER

Amendments on Right Turns on Red Signals on Certain State Highways

On November 29, 1979, Russell H. Mullen, Assistant Commissioner of Transportation, pursuant to authority of N.J. S.A. 39:4-183.27 and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments to N.J.A.C. 16:28-12.7, 16:28-12.21, 16:28-12.22, 16:28-12.25, 16:28-12.33, 16:28-12.34, 16:28-12.36, 16:28-12.37, 16:28-12.48, 16:28-12.59 and 16:28-12.71 concerning right turns on red signals on certain State highways as proposed in the Notice published November 8, 1979 at 11 N.J.R. 587(a).

An order adopting these amendments was filed and became effective on November 30, 1979 as R.1979 d.470.

Howard H. Kestin
Director
Office of Administrative Law

(c)

TRANSPORTATION THE COMMISSIONER

Amendments Concerning Lane Usage on Parts of Routes 35 and U.S. 9

On November 29, 1979, Louis J. Gambaccini, Commissioner of Transportation, pursuant to authority of N.J.S.A. 39:4-6 and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments to N.J.A.C. 16:30-3.1 and 16:30-3.4 concerning lane usage on parts of Routes 35 and U.S. 9 as proposed in the Notice published November 8, 1979 at 11 N.J.R. 588(a).

An order adopting these amendments was filed and became effective on November 30, 1979 as R.1979 d.471.

Howard H. Kestin
Director
Office of Administrative Law

(d)

TREASURY DIVISION OF PENSIONS

Proposed Amendments Concerning General Administration

William J. Joseph, Director, Division of Pensions in the Department of the Treasury, pursuant to authority of Chapter 70, Public Law 1955 proposes to amend the Foreword of Chapter 1 and 17:4-21, 9.1, 9.2, 9.3, 9.4, 9.5, 9.6 and 11.9, concerning the Division of Pensions.

Full text of the proposal follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

CHAPTER 1 GENERAL ADMINISTRATION FOREWORD

The Division of Pensions is the successor to the former Bureau of Public Employees' Pensions which was created in June, 1952. To this Bureau were assigned all adminis-

trative functions of the various State pension funds and retirement systems. Prior to this date, these retirement systems had been administered independently, having been located within one central area only since 1951.

Under the general reorganization acts of 1948, the pension funds were originally located within the State Division of Budget and Accounting. Later they were transferred to the Division of Investment under the 1950 statute creating that Division. The Bureau of Public Employees' Pension was, therefore, located within the Division of Investment. In 1954, as a result of the enactment of N.J. S.A. 43:15A-1 et seq., Chapter 84, P.L. 1954, an expansion in staff was required in the State Employees' Retirement System. Separate offices were found for this agency, which remained apart from the other pension fund staffs until September, 1956. In July, 1955, the Division of Pensions was created by virtue of N.J.S.A. 52:18A-95 through 104, Chapter 70, P.L. 1955. To this Division were assigned all administrative functions of the various State pension funds, except for investment records and proceedings retained by the Division of Investment. In September, 1956, there was a consolidation of the staff at central quarters in Trenton.

In addition to State pension plans, the Division of Pensions has been responsible for the operation of the State agency for Social Security since its inception in 1951, the Pension Increase Program beginning in 1958, the Supplemental Variable Annuity System first established in 1963, the State Health Benefits Program with its extension to include local government employers for the first time in 1964, the State Police Retirement System as established in 1965, and the alternate benefit programs for State and county colleges as authorized in 1968, and as expanded to include the group life and long-term disability benefits for all public institutions of higher education in New Jersey as a result of legislation enacted in 1969, [and] Unemployment Compensation for certain State employees in 1972[.] , which was extended to all eligible employees in 1978, the Judicial Retirement System in 1973, the State Employees' Prescription Drug Program in 1976 and the State Employees' Dental Expense Program in 1978.

The Division of Pensions administers the laws governing the Public Employees' Retirement System, the Teachers' Pension and Annuity Fund, the Consolidated Police and Firemen's Pension Fund, the Police and Firemen's Retirement System, the Prison Officers' Pension Fund, the State Police Retirement System, Central Pension Fund, Judicial Retirement System, Alternate Benefit Programs of public institutions of higher education, the Supplemental Variable Annuity System, the State Health Benefits Plan, the State Employees' Prescription Drug and Dental Expense Programs, the State Agency for Social Security and the Pension Increase Program, subject to rules, regulations and decisions of the respective boards of trustees and commissions of these systems as such may be altered from time to time by legislation, court decisions and opinions of the Attorney General.

In the regulations governing the general administration of the Division of Pensions there are those which are common to all employee benefit programs administered by the division as well as those which are unique to specific systems, such as the alternate benefit programs of State and county colleges, the Central Pension Fund, Judicial Retirement System, Pension Increase Program[,] and the State Agency for Social Security. [and the office of the hearing officer.]

[The alternate benefit program for State colleges was authorized by N.J.S.A. 18A:66-142 through 152, Chapter 281, P.L. 1967 while the comparable program for the coun-

ty colleges was established by N.J.S.A. 18A:66-154 through 165, Chapter 181, P.L. 1968. These programs provide full-time faculty members with annuities purchased by employer and employee contributions and group life insurance comparable to that provided by the State retirement systems. These benefits can be vested immediately and thereby provide the mobility of pension credit which is necessary for this group of public employees. The benefits are coordinated with Social Security.]

In the years 1965-68 legislation was enacted successively to permit the establishment of Alternate Benefit programs for full-time faculty members of public institutions of higher education, including the New Jersey College of Medicine and Dentistry, Rutgers, the State University, the New Jersey Institute of Technology, and the State and County colleges. These programs provide full-time faculty members with annuities comparable to that provided by the State retirement systems. These benefits can be vested immediately and thereby provide the mobility of pension credit which is necessary for this group of public employees. The benefits are coordinated with Social Security.

The Central Pension Fund consists of the administration of a series of noncontributory pension acts. No reserves are established for the payment of these pensions. These benefits are administered by the Division of Pensions in accordance with the governing statute and the rules and regulations of the State House Commission, where applicable. The scope of the fund extends to: [Health] Health Act Pensioners, in accordance with N.J.S.A. 43:5-1 to 5-4, consisting of persons employed by the State as of January, 1921; Veterans Act pensioners, in accordance with N.J. S.A. 43:4-1 to 4-6; Annuity for Widows of Governors, in accordance with N.J.S.A. 43:8-2; Special Pensioners, in accordance with various laws of the State authorizing payments to designated individuals.

All controversies which may arise from decisions of any board or commission are subject to appeal action upon the request of the member [of] or his attorney as filed with the respective board or commission. If the request is filed on a timely basis and the member or his attorney raises a question of fact or of law, the board may authorize a hearing. If so, the matter is referred to the [hearing officer of the Division of Pensions who arranges for all hearings on behalf of members of the State-administered retirement programs.] Division of Administrative Law where such hearing will be conducted. Following the hearing, the [hearing officer] administrative law judge makes his recommendations to the respective board or commission and transmits a transcript of the hearing along with any statement of exceptions prepared by the Attorney General or the member's legal representative. Thereby a record has been established upon which the board can review its original decision and also serves as a record which can provide the petitioner with a basis for an appeal to the appellate division of the superior court.

The Pension Increase Program was established pursuant to N.J.S.A. 43:3B-1 through 6, Chapter 143, P.L. 1958, and it covers all eligible pensioners of the State-administered retirement programs.

The State agency for Social Security was initially established by N.J.S.A. 43:22-1 et seq., Chapter 253, P.L. 1951, and became effective with the execution of a Federal-State compact on Social Security coverage in December, 1952. Pursuant to N.J.S.A. 43:15A-1 et seq., Article 1 of Chapter 84, P.L. 1954, all eligible public employees in New Jersey were required to be covered by Social Security pursuant to the terms of the Federal-State agreement effective January 1, 1955. Under terms of the State statute the State Treasurer is the State agency and his responsibility is delegated to the Director of the Division of Pensions.

Unemployment Compensation for certain public employees was made possible for the first time under the provisions of Chapter 346, P.L. 1971, effective January 1, 1972. Coverage was extended to employees of the State or any of its instrumentalities employed in a hospital or institution of higher education. The Division of Pensions was requested by the Treasury Department to coordinate the administration of the program and specifically the receipt and transmittal of payroll deductions for State employees to the Division of Unemployment Compensation. [Aside from this accounting function, the Division will monitor and audit the claims paid by Unemployment Compensation in order to verify the State's experience under the program.] With the extension of Unemployment Compensation to all eligible employees in 1978, the State designated a contractor to monitor and audit the claims paid by Unemployment Compensation in order to verify the State's experience under the program. The contractor reports to the Division of Pensions which is responsible for this activity as well as the accounting function.

The State Prescription Drug Program was initially made available to certain State employees pursuant to a contract of insurance which became effective on December 1, 1974. On November 1, 1976, the administration of the program was transferred to the Division of Pensions. The Prescription Drug Program covers all eligible State employees and dependents who are also eligible to participate in the State Health Benefits Program.

The State Dental Expense Program was initially made available to certain State employees pursuant to a contract which became effective on February 1, 1978. The administration is performed by the Division of Pensions. The Dental Expense Program is available to most eligible State employees and dependents who are also eligible to participate in the State Health Benefits Program.

17:1-4.21 Disability retirants; reexaminations

A person receiving a disability retirement allowance and who [is under] has not attained the normal retirement age, will not be subject to the periodic medical reexamination, if he reaches the normal retirement age in the year in which the examination is to be performed, provided he has had at least one reexamination.

17:1-9.1 Due dates for contributions and reports

State [hospitals and institutions of higher education] employing subgroups participating in the Unemployment Insurance Program whose employees are not paid by the State Centralized Payroll Unit shall file the required data and reports of unemployment insurance contributions with the Division of Pensions by the 15th day following the end of each calendar quarter, together with the remittance for the deductions taken from their eligible employees' salaries or wages. State Centralized payroll will remit weekly an Unemployment Tax Register report which summarizes the Unemployment Compensation information for covered employees in each of the biweekly payroll units. The register is due within five days of the date the payroll is prepared.

17:1-9.2 Employer responsibility; benefit claims

[Covered State hospitals and institutions of higher education shall respond to communications with respect to benefit claims from the Division of Unemployment and Disability Insurance, in accordance with the rules and regulations of that Division.]

State payroll units and subgroups shall respond with respect to benefit claims from the Division of Unemployment and Disability Insurance as well as the contractor designated by the State to handle unemployment claims and related activities.

17:1-9.3 Employer verification of claim payments

[The covered State hospitals and institutions of higher education shall review and verify the benefit claims paid to their employees or former employees by the Division of Unemployment and Disability Insurance and, upon receipt, shall certify such verification to the Division of Pensions.]

The designated contractor auditing the program will send the chief personnel or administrative officers a monthly report identifying employees who have filed claims and are in receipt of benefits. The reports must be reviewed by the employing unit to determine if they are correct and any discrepancies must be brought to the attention of the contractor.

17:1-9.4 Employee eligibility for coverage

Determinations will be made by the Division of [Pensions, subject to review by the Division of] Unemployment and Disability Insurance relative to an employee's eligibility for coverage in the Unemployment Insurance Program.

17:1-9.5 Termination of employment; separation notice

All employing units must immediately, upon the termination of an employee's services, complete a separation notice and send it to the designated contractor.

17:1-9.6 Designated contractor

A contractor will be designated to develop and maintain a cost control program in accordance with the terms of the contract awarded by the State. The Division of Pensions will coordinate the contractor's activities with respect to State employing units and review quarterly reports of claims activity prepared by the contractor.

SUBCHAPTER 10. PRESCRIPTION DRUG PROGRAM

[FOREWORD]

[The State prescription drug program was initially made available to certain State employees pursuant to a contract which became effective on December 1, 1974. On November 1, 1976, the administration of the program was transferred to the Division of Pensions. The prescription drug program covers all eligible State employees and dependents who are also eligible to participate in the State health benefits program.]

SUBCHAPTER 11. DENTAL EXPENSE PROGRAM

[FOREWORD]

[The State dental expense program was initially made available to certain State employees pursuant to a contract of insurance which became effective on February 1, 1978. The administration is performed by the Division of Pensions. The dental expense program is available to most eligible State employees and dependents who are also eligible to participate in the State Health Benefits Program.]

17:1-11.9 Dependents; extension of coverage

(a) Upon the death of an insured employee, the dental insurance for his covered dependents can be continued for 180 days provided such dependents continue to be eligible for coverage subject to the following:

1. A request for the extension of coverage is received from an eligible dependent within 30 days following the death of the insured.

2. A completed enrollment card and a check for the total amount of premiums due on a quarterly basis is received from the dependent within 15 days from the date the request for payment is mailed to the dependent.

Interested persons may present statements or arguments in writing relevant to the proposals on or before January 30, 1980 to:

William J. Joseph, Director
Division of Pensions
20 West Front Street
Trenton, New Jersey 08625

The Division of Pensions may thereafter adopt rules concerning this subject without further notice.

William J. Joseph
Director, Division of Pensions
Department of the Treasury

(a)

TREASURY

DIVISION OF PENSIONS

Proposed Rule on Normal Retirement Age

William J. Joseph, Director, Division of Pensions in the Department of the Treasury, pursuant to authority of Chapter 70, Public Law 1955 proposed to adopt a new rule, to be cited as N.J.A.C. 17:1-4.31, concerning normal retirement age.

Full text of the proposal follows:

17:1-4.31 Normal retirement age

(a) The normal retirement age for the respective systems are as follows:

1. As per N.J.S.A. 43:15A-47, age 60 in the Public Employees' Retirement System.
2. As per N.J.S.A. 18A:66-43, age 60 in the Teachers' Pension and Annuity Fund.
3. As per N.J.S.A. 43:16A-5, age 55 in the Police and Firemen's Retirement System.
4. As per N.J.S.A. 53:5A-8, age 55 in the State Police Retirement System.
5. As per N.J.S.A. 43:6A-9.2, age 60 in the Judicial Retirement System.

Interested persons may present statements or arguments in writing relevant to the proposal on or before January 30, 1980 to:

William J. Joseph, Director
Division of Pensions
20 West Front Street
Trenton, New Jersey 08625

The Division of Pensions may thereafter adopt the rule concerning this subject without further notice.

William J. Joseph, Director
Division of Pensions
Department of the Treasury

(b)

TREASURY

DIVISION OF PENSIONS

TEACHERS' PENSION AND ANNUITY FUND

BOARD OF TRUSTEES

Proposed Amendments Concerning the Teachers' Pension and Annuity Fund

A. Steven LaBrutte, Secretary of the Teachers' Pension

and Annuity Fund Board of Trustees in the Division of Pensions in the Department of the Treasury, pursuant to authority of N.J.S.A. 18A:66-56, proposes to amend N.J.A.C. 17:3-1.8, 1.11, 2.1, 2.7, 3.1, 5.2, 6.7, 6.11, 6.13 and 6.14, concerning the Teachers' Pension and Annuity Fund.

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

17:3-1.8(a)2. If a disability retirant [under age 60] fails to timely file a report with the fund of his annual earned income;

17:3-1.11(a) All members may be required to establish proof of their age with the Fund. A person enrolling [at age 45 or older] may be [required] requested to submit [evidence] proof at time of enrollment[; under age 45,] and will be required to submit such proof before a period of [five] six years has elapsed from date of enrollment.

17:3-2.1(a) With the exception of the public institutions and the Department of Higher Education, any person, [under 70 years of age,] who is appointed by the State or a local board of education in the State, as a regular full-time employee to one of the following teaching or professional staff positions shall be required to become a member of the Fund effective as of the date of their employment:

17:3-2.7(a) The membership account under which a member elected deferred retirement, who resumes regular service prior to the normal retirement age [60], shall be reinstated.

17:3-3.1(a) For the purpose of contributory insurance, all eligible compulsory enrollees[, including veterans, under age 60, at the time their enrollment application is filed] shall be required to participate in the contributory insurance program for one year (12 calendar months) from the date of enrollment, or the effective date of insurance premium deduction, whichever is later. Proof of insurability shall be required of all compulsory [and optional] enrollees[, age 60 or older,] who filed an enrollment application beyond the year they first became eligible for membership in order to qualify for non-contributory and contributory insurance coverage.

17:3-3.1(b) Optional enrollees[, under age 60,] may qualify for non-contributory and contributory insurance coverage, only if they were actively at work performing all of the duties that the position requires at the time they made application for enrollment and such application was filed within one year from the date they first became eligible for enrollment in the fund. If an application for an optional enrollee is not received within one year after he became eligible for enrollment, evidence of insurability will be required for noncontributory and contributory coverage.

17:3-5.2(a)3.iii. Extra deductions equal to at least ½ of the full regular pension deduction for a maximum period of ten years. Class A to Class B conversions, compulsory and temporary service purchases must be liquidated by the attainment of the normal retirement age [60; if such member has attained the age of 58 or more at the time of purchase,] or at least two years will be specified;

17:3-6.7(a)1. The member was under the normal retirement age [of 60] at the time of filing application for a disability retirement allowance; and

17:3-6.11(b) Retirement on the first of the month in which a member attains age [60] 55 shall be classed as "early"

retirement[.], although a reduction is not applied if his 55th birthday occurs before the middle of such month.

17:3-6.13(a) All disability retirants, under the normal retirement age [60], may be required to undergo a medical examination each year for a maximum period of five years by a physician designated by the Fund as of the anniversary date of their retirement, unless such examination requirement has been waived by the Board.

17:3-6.14(a) All disability retirants, under the normal retirement age [60], shall be required to file a report with the Fund indicating the type of employment they are engaged in, if any, and the gross earned income realized therefrom as of December 31 of each year:

Interested persons may present statements or arguments in writing relevant to the proposals on or before January 30, 1980 to:

A. Steven LaBrutte, Secretary
Teachers' Pension and Annuity Fund
Board of Trustees
Division of Pensions
20 West Front Street
Trenton, New Jersey 08625

The Teachers' Pension and Annuity Fund Board of Trustees may thereafter adopt rules concerning this subject without further notice.

A. Steven LaBrutte, Secretary
Teachers' Pension and Annuity Fund
Division of Pensions
Department of the Treasury

(a)

TREASURY

DIVISION OF TAXATION

Proposed Amendments Concerning Categories Of Nonusable Deed Transactions

Sidney Glaser, Director of the Division of Taxation in the Department of the Treasury, pursuant to authority of N.J.S.A. 54:1-35.1 et seq., proposes to amend N.J.A.C. 18:12-1.1(a)25. concerning the categories of nonusable deed transactions.

Full text of the proposal follows (additions indicated in boldface thus; deletions indicated in brackets [thus]).

18:12-1.1(a)25. [Transactions in which only \$0.55 in revenue stamps are affixed to the conveyance unless the actual consideration has been determined;] Transactions in which the full consideration as defined in the "Realty Transfer Fee Act" is less than \$100.00;

Interested persons may present statements or arguments in writing relevant to the proposed action on or before January 30, 1980 to:

J. Henry Ditmars
Superintendent
Local Property and Public Utility
Division of Taxation
West State and Willow Sts.
Trenton, N.J. 08646

The Department of the Treasury may thereafter adopt rules concerning this subject without further notice.

Sidney Glaser
Director, Division of Taxation
Department of the Treasury

(b)

TREASURY

DIVISION OF TAXATION

Emergency Amendments Concerning Extension Of Filing Date for Homestead Tax Rebate Claims

On November 28, 1979, Sidney Glaser, Director of the Division of Taxation in the Department of the Treasury, pursuant to authority of P.L. 1976, c.72 and in accordance with applicable provisions of the Administrative Procedure Act, adopted emergency amendments to N.J.A.C. 18:12-7.12 which extended the filing date for 1980 homestead tax rebate claims.

Full text of the adoption follows.

18:12-7.12(c) The time for property owners to file their applications for a homestead rebate payable in 1980 pursuant to P.L. 1976, c. 72, including applications by shareholders in cooperative associations and those residing in properties of certain mutual housing corporations, has been extended to March 1, 1980.

An order adopting these amendments was filed and became effective on November 28, 1979 as R.1979 d.467 (Exempt, Emergency Rule).

Howard H. Kestin
Director
Office of Administrative Law

(c)

TREASURY

DIVISION OF TAXATION

Rules on One-Time Election to Exclude Up to \$100,000 of Gain on Sale of Principal Residence; Rollovers

On December 4, 1979, Sidney Glaser, Director of the Division of Taxation in the Department of the Treasury, pursuant to authority of N.J.S.A. 54A:1-1 et seq. and in accordance with applicable provisions of the Administrative Procedure Act, adopted new rules, to be cited as N.J. A.C. 18:35-1.13, concerning the one-time election to exclude up to \$100,000 of gain on the sale of principal residences and rollovers as proposed in the Notice published November 8, 1979 at 11 N.J.R. 594(a).

An order adopting these rules was filed and became effective on December 5, 1979 as R.1979 d.475.

Howard H. Kestin
Director
Office of Administrative Law

(a)

TREASURY

DIVISION OF PENSIONS

CONSOLIDATED POLICE AND FIREMEN'S PENSION FUND

Amendments Concerning the Suspension of Pension Checks

On December 4, 1979, Elmer G. Baggaley, Secretary of the Consolidated Police and Firemen's Pension Fund Commission in the Division of Pensions in the Department of the Treasury, pursuant to authority of N.J.S.A. 43:16-7 and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments to N.J.A.C. 17:6-1.8 concerning the suspension of checks as proposed in the Notice published October 4, 1979 at 11 N.J.R. 524(e).

An order adopting these amendments was filed and became effective on December 6, 1979 as R.1979 d.476.

Howard H. Kestin
Director
Office of Administrative Law

- ii. Two hundred dollars (\$200) where the odds are two to one;
- iii. Eighty dollars (\$80) where the odds are five to one;
- iv. Fifty dollars (\$50) where the odds are ten to one;
- v. Fifty dollars (\$50) where the odds are twenty to one;
- vi. Fifty dollars (\$50) where the odds are forty-five to one.

Interested persons may present statements or arguments in writing relevant to the proposal on or before January 30, 1980 to:

Joseph P. Lordi, Chairman
Casino Control Commission
379 West State Street
Trenton, New Jersey 08625

The New Jersey Casino Control Commission may thereafter adopt rules concerning this subject without further notice.

Joseph P. Lordi
Chairman
Casino Control Commission

(b)

CASINO CONTROL COMMISSION

Proposed Amendments on Minimum Wagers on the Big Six Wheel

Joseph P. Lordi, Chairman of the New Jersey Casino Control Commission, pursuant to authority of N.J.S.A. 5:12-1 et seq., proposes to amend N.J.A.C. 19:47-5.7(d)4 concerning minimum wagers regarding the Big Six Wheel game.

Full text of the proposal follows (additions indicated in boldface thus):

19:47-5.7(d)4. Big six wheel: The minimum wager shall be one dollar (\$1) and the maximum wagers shall be at least:

- i. Four hundred dollars (\$400) on a wager where the odds are even money;

(c)

NEW JERSEY HIGHWAY AUTHORITY

GARDEN STATE PARKWAY

Amendments Governing the Use of the Garden State Parkway and Tolls

On November 29, 1979, F. Joseph Carragher, Executive Director of the New Jersey Highway Authority, pursuant to authority of N.J.S.A. 27:12B-1 et seq. and in accordance with applicable provisions of the Administrative Procedure Act, adopted amendments to N.J.A.C. 19:8-1.9(b)15. and 19:8-3.1(b) concerning limitations on the use of the Garden State Parkway and tolls as proposed in the Notice published November 8, 1979 at 11 N.J.R. 596(d).

An order adopting these amendments was filed and became effective on November 29, 1979 as R.1979 d.469.

Howard H. Kestin
Director
Office of Administrative Law

The New Jersey Administrative Code

**OFFICIAL COMPILATION OF
ALL RULES AND REGULATIONS
OF THE STATE OF NEW JERSEY**

PUBLICATION of the first five volumes of the New Jersey Administrative Code was in 1972, to bring together for the first time all rules and regulations of the State of New Jersey.

BY mid-1973 the full Code had been issued—in 22 volumes. Since then it has grown to its present 30 volumes covering all State administrative rules.

The NEW JERSEY REGISTER, the State's monthly publication of all new rules and proposed rules, is available at \$15 ANNUALLY to supplement the Administrative Code prior to publication of current rules in the Code. Like the Code, it is published by the Division of Administrative Procedure.

OFFICIAL ORDER FORM

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Titles available in the New Jersey Administrative Code cover all Departments of the State, with Treasury split into two Titles for its general and taxation rules.

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Mailing was completed last month for the July 19, 1979 update of nine Titles of the New Jersey Administrative Code.

Titles included were: 2—Agriculture, 3—Banking, 7—Environmental Protection, 11—Insurance, 12—Labor and Industry, 13—Law and Public Safety, 14/14A—Energy and Public Utilities, 18—Treasury-Taxation, and 19—Other Agencies.

If subscribers have not yet received the July 19, 1979 update, within two weeks they should contact the Division of Administrative Procedure, 10 North Stockton Street, Trenton, New Jersey 08608, or phone (609) 292-6060.

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