Conclusion

The Department finds that the changed Hooper Avenue Core boundary approved by the Commission is consistent with the purposes of CAFA and the CZM Rules. Investigation has shown that the site does not contain apparent environmental resources or recorded occurrences of threatened and endangered species, though the site may require mitigation efforts for critical wildlife habitat, pending a formal review through the permit application process. Further, the area added to the Core by this notice will allow potential development to be located in an area with less risk of potentially significant soil erosion and potential water quality damage. Any proposed development for the site must still fully comply with all applicable Department regulatory requirements for tree preservation and impervious cover, as well as any potential permit conditions.

Upon the operative date of the approved changed Coastal Planning Area boundaries, the impervious cover limit for the nine-acre area will be increased from 30 percent afforded under a Coastal Suburban Planning Area within a sewer service area to 80 percent afforded under a CAFA Core. The increased impervious cover limit will enable any potential development on this site to provide a safe, healthy, well-planned coastal community as set forth at N.J.A.C. 7:7-1.1(c)(6) by promoting concentrated and dense development. Additionally, including this area in the Core boundary provides a more appropriate location for potential dense development that is not located on a steep slope, threatening soil stability and water quality. This is consistent with the coastal goal of promoting a healthy coastal ecosystem at N.J.A.C. 7:7-1.1(c)(1). Further, the coordination and cooperation required from multiple State, county, and local government offices to appropriately and comprehensively plan throughout this process is consistent with the coastal goal at N.J.A.C. 7:7-1.1(c)(1), which outlines the CZM Rules’ intent to achieve coordinated coastal decision-making, comprehensive planning, and research.

HIGHER EDUCATION

(a)

HIGHER EDUCATION STUDENT ASSISTANCE AUTHORITY

Student Loan and College Savings Programs

Behavioral Healthcare Provider Loan Redemption Program


Adopted: April 26, 2023, by the Higher Education Student Assistance Authority, Christy Van Horn, Chairperson.
Filed: May 10, 2023, as R.2023 d.074, with non-substantial changes not requiring additional public notice and comment (see N.J.A.C. 1:30-6.3) and with proposed new N.J.A.C. 9A:10-9.4 not adopted.

Effective Date: June 5, 2023.
Expiration Date: October 26, 2023.

Summary of Public Comments and Agency Responses:

The comment period officially ended on February 17, 2023. The Higher Education Student Assistance Authority (“HESAA” or “Authority”) received seven comments from Jennifer Galuppo, LPC LMHC Clinical Program Manager Children’s Behavioral Health, Hackensack Meridian Jersey Shore University Medical Center; Carly Kasten, LSW, LSW Clinical Therapist, Children’s Behavioral Health, Hackensack Meridian; Kenneth J. Gill, Ph.D., Associate Dean for Faculty Development, Chairperson, Professor Department of Psychiatric Rehabilitation and Counseling Professions Director, Ph.D., Psychiatric Rehabilitation Co-director, Region II Mental Health Technology Transfer Center, Rutgers School of Health Professions; Collan B. Rosier, Vice President of Government Relations, Pyramid Healthcare; Kathryn Campbell, LSW, Clinician I, SPIRIT Program; Debra L. Wentz, Ph.D. President and CEO, New Jersey Association of Mental Health and Addiction Agencies, Inc.; and Sara Moyano, Substance Abuse Counselor. The comments, along with the Higher Education Student Assistance Authority’s responses, are summarized below.

COMMENT: Jennifer Galuppo stated that behavioral health professionals deserve to be credited for the hard work, dedication, and sacrifices made over the past few years and should be permitted to submit requests for forgiveness retroactively to include time served during the pandemic, as early as March 2020.

RESPONSE: The purpose of the Behavioral Healthcare Provider Loan Redemption Program (Program) is to address the current need for qualified community providers of behavioral and mental health services in New Jersey by providing an incentive for professionals to both enter and remain in these fields going forward. Therefore, the Program provides redemption at the completion of a participant’s two years of service, after the participant’s application is accepted and the participant agrees to the prospective employment service obligation in the Program contract. Current behavioral healthcare providers are encouraged to apply for the Program and to provide their needed services for an additional two to six years in exchange for future loan redemption. Since the statute does not allow Program participants to receive loan redemption in exchange for years of service prior to Program’s start date, HESAA declines to adopt the commenter’s suggestion in the final rule.

2. COMMENT: Carly Kasten, Debra Wentz, and Kathryn Campbell request that eligibility for the Program be extended to licensed social workers and licensed associate counselors. Carly Kasten states that licensed social workers and licensed associate counselors receive master’s degrees in their respective majors and then must obtain a minimum amount of clinical hours to become a licensed clinical social worker or licensed professional counselor, respectively. She adds that since licensed social worker and licensed associate counselor are considered entry-level positions they are paid at a lower salary than licensed clinical social workers and licensed professional counselors. Debra Wentz states that licensed social workers and licensed associate counselors make up a significant portion of the behavioral health workforce and her association believes that their advanced degrees and licensure are in line with the intent and goals of the Program. Kathryn Camp stated that many new professionals are tasked with the difficult decision to accept lower wages at non-profit agencies or turn to private for-profit entities that provide higher compensation and that “Granting these individuals eligibility in the program will increase the financial flexibility of student loan borrowers and incentivize employment at these sites.”

Sara Moyano requests that eligibility for the Program be extended to certified alcohol and drug counselors. Ms. Moyano states that certified alcohol and drug counselors have the same scope of practice as licensed clinical alcohol drug counselors with the only difference being that certified counselors are required to practice with appropriate clinical supervision from a license holder.

Kenneth Gill requests that eligibility for the Program be extended to licensed associate counselors, licensed social workers, certified alcohol and drug counselors, certified psychiatric rehabilitation practitioners specially trained to work with persons with serious mental illnesses, certified rehabilitation counselors, licensed rehabilitation counselors, and licensed occupational therapy assistants.

Collan Rosier requests that eligibility for the Program be extended to include both direct care workers, client-facing workers, as well as those that support direct care workers, including the drivers that transport clients, behavioral health technicians, peer support specialists, and certified recovery specialists.

RESPONSE: HESAA appreciates these comments and is taking all of these requests under advisement. The statutory definition of eligible behavioral healthcare providers lists eligible professionals and authorizes the Executive Director to identify additional professionals for inclusion in the Program. However, the Executive Director must balance the expansion of the list of eligible professionals with the obligation to ensure that the limited funds designated to the Program are targeted to meeting the needs of the State. Therefore, HESAA will not adopt the definition for “eligible behavioral healthcare providers” at this time and will consider proposing a new definition as part of the forthcoming readoption of Chapter 10, after conducting additional research on which behavioral...
healthcare provider titles are most needed to fill the behavioral healthcare provider vacancies in the State.

3. COMMENT: Collan Rosier requests that an expansion of the definition of “approved site” to include private sector providers who serve public sector programs such as Medicaid, Medicare, the Children’s Health Insurance Program, the U.S. Department of Veterans Affairs, the U.S. military’s TRICARE system, or programs funded by state, county, or municipal governments. Collan Rosier states that insufficient state Medicaid fee-for-service schedule reimbursement rates have not been substantially increased to allow providers to pay more competitive wages to staff in order to be able to provide the capacity the State needs.

RESPONSE: HESAA appreciates this comment and agrees that the purpose of the Program is to provide capacity that the State needs. However, HESAA has determined that the State’s resources are best focused on ensuring capacity in government and non-profit settings.

Summary of Agency-Initiated Change Upon Adoption:
Additionally, HESAA went live with the pilot Behavioral Healthcare Provider Loan Redemption Program (Program) on January 18, 2022. Due to the overwhelming response to the Program, within a few weeks of initially accepting applications in January 2023, HESAA exhausted the appropriation and stopped taking new applications. For the pilot program, HESAA followed the selection process from the proposed rules, selecting participants on a first-come, first-served basis. HESAA observed that the earliest submitted applications did not necessarily address the areas of the State with the most severe shortages of behavioral healthcare providers. Therefore, HESAA determined that for this Program to best meet the State’s needs, applicants should be provided with a one-month window in which to apply and HESAA should select applicants based on predetermined scoring evaluation criteria, which can be updated annually, to address the most severe shortages in the State. As this change to the application procedure is substantive it cannot be made upon adoption.
Therefore, HESAA will not adopt the application and selection procedures at N.J.A.C. 9A:10-9.4 at this time.

Federal Standards Statement
A Federal standards analysis is not required since the adopted new rules are not subject to any Federal requirements or standards, with the exception of those governing health care practitioners’ student loan redemptions using Federal funds provided to the State through a matching grant pursuant to the Public Health Services Act, 42 U.S.C. § 254q-1. The rules governing the Program are consistent with, and do not exceed, the terms and conditions of contracts pursuant to the Public Health Services Act; therefore, a Federal standards analysis is not applicable.

Full text of the adopted new rules follows (addition to proposal indicated in boldface with asterisks *thus*; deletion from proposal indicated in brackets with asterisks *[thus]*):

SUBCHAPTER 9. BEHAVIORAL HEALTHCARE PROVIDER LOAN REDEMPTION PROGRAM

9A:10-9.1 Purpose and scope
The rules established by this subchapter provide the policies and procedures for participation in the Behavioral Healthcare Provider Loan Redemption Program administered by the Higher Education Student Assistance Authority. This Program shall provide redemptions not to exceed $50,000 of principal and interest of eligible student loan expenses for every two full years of service satisfactorily completed by the Program participant, for up to six years of service and a total loan redemption amount not to exceed $150,000.

9A:10-9.2 Definitions
The following words and terms, when used in this subchapter, shall have the following meanings, unless the context clearly indicates otherwise:

“Approved site” means a community provider of behavioral and mental health services in the State, identified by the Authority, in consultation with the Department, for inclusion in the Program. Approved sites include providers operated by a nonprofit; institutions of higher education; school district, county; the State; municipalities; and the Federal government.

“Authority” means the Higher Education Student Assistance Authority.

“Department” means the Department of Health.

“Eligible behavioral healthcare providers” means psychiatrists; licensed psychologists; licensed clinical social workers; psychiatric nurses; mental health clinical specialists; board certified behavior analysts; licensed criminology alcohol and drug counselors; and licensed professional counselors.*

“Eligible qualifying loan expenses” means the cumulative outstanding balance of student loans covering the cost of attendance at an undergraduate or graduate institution of higher education at the time an applicant is selected for the Program. Interest paid or due on qualifying loans that an applicant has taken out for use in paying the costs of undergraduate or graduate education shall be considered eligible for reimbursement pursuant to the Program.

“Executive Director” means the Executive Director of the Higher Education Student Assistance Authority.

“Program” means the Behavioral Healthcare Provider Loan Redemption Program established pursuant to N.J.S.A. 18A:71C-87 et seq.

“Program participant” means a behavioral healthcare provider who contracts with the Authority to engage in the clinical practice of mental or behavioral healthcare at an approved site in exchange for the redemption of eligible qualifying loan expenses provided pursuant to the program.

“Qualifying loan” means a government or commercial loan for the actual costs paid for tuition and reasonable education and living expenses relating to the obtaining of a degree for use in a mental or behavioral healthcare profession.

“Total and permanent disability” means a physical or mental disability that is expected to continue indefinitely or result in death and renders a Program participant unable to perform that person’s service obligation, as determined by the Executive Director, or the Executive Director’s designee.

9A:10-9.3 Eligibility requirements for Program participation
(a) To be eligible for participation in the Program, an applicant shall:
1. Be a New Jersey resident and maintain residency in the State during Program participation;
2. Be employed, or plan to be employed, as an eligible behavioral healthcare provider at an approved site;
3. Maintain a license, as applicable, to practice as a behavioral healthcare provider in the State of New Jersey throughout participation in the Program;
4. Agree to practice as a behavioral healthcare provider at an eligible site pursuant to the terms specified at N.J.A.C. 9A:10-9.5;
5. Not be in default on any eligible qualifying loan;
6. Not previously have been selected for participation in the Program; and
7. Not currently be participating in any other State tuition or loan redemption program or in the Federally administered National Health Service Corps Loan Repayment Program, section 338B of the Public Health Service Act (42 U.S.C. § 254I-1).

9A:10-9.4 *(Reserved)*

9A:10-9.5 Terms for loan redemption
(a) An applicant who has been selected for participation in the Program shall enter into a written contract with the Authority. The contract shall specify that the participant’s approved service obligation will be for two years and that applicants will be eligible for up to two additional two-year terms. The duration of the participant’s approved employment service obligation, with extensions, shall not exceed six years.

(b) Loan redemption pursuant to the Program shall not exceed $50,000 of principal and interest of eligible student loan expenses in exchange for each two-year term of service satisfactorily completed by the Program participant. 1. At the time an applicant is accepted as a Program participant and has entered into a written contract with the Authority for a two-year term, the Authority will encumber up to $150,000 of Program funds, as necessary, to provide for the redemption of the participant’s outstanding eligible student loan expenses. Total loan redemption for three two-year terms shall not exceed $150,000.
In order for a participant to qualify for a redemption payment, the participant shall submit to the Authority certification, in the form approved by the Authority, of full-time employment as an eligible behavioral healthcare provider at an approved site for the two years immediately preceding the participant's application for redemption.

No amount of loan redemption shall be provided for service performed for less than two full years.

Incentive grants shall not exceed $5,000.

(a) The Executive Director shall annually allocate a portion of the Program’s appropriation for incentive grants to be awarded to Program participants who work primarily with children and adolescents. The individual incentive grant amount awards will be determined by dividing the annual allocation by the number of Program participants who are anticipated to complete a full year of service, working primarily with children or adolescents, during that fiscal year. Annual individual incentive grants shall not exceed $5,000.

(b) To receive an incentive grant each year the participant remains in the Program, within 30 days of written request from the Authority, the Program participant must submit a certification from the participant’s employer of successful completion of a full year of full-time service primarily with children and adolescents.

(c) Program participants are eligible to receive up to six incentive grants, for a total of no more than $30,000.

Termination or suspension of the Program participant’s participation contract

(a) The Authority shall terminate the Program participant’s participation contract if it determines:
1. On the basis of a sworn affidavit of a qualified physician, that the participant has a total and permanent disability;
2. On the basis of a death certificate, or other evidence of death that is conclusive pursuant to State law, that the participant has died;
3. On the basis of substantiating documentation, as may be deemed necessary by the Authority upon specific case review, that continued enforcement of the employment service obligation may result in extreme hardship for the participant;
4. That the participant is no longer employed as an eligible behavioral healthcare provider at an approved site;
5. That the participant’s license to practice has been revoked;
6. That the participant has committed an act of gross negligence in the performance of his or her employment service obligation, or that the participant has not met the employer’s performance standards;
7. The participant has not submitted the certification required pursuant to N.J.A.C. 9A:10-9.5(c) to receive the loan redemption within 60 days of the written request for the required documents by the Authority.

(b) The Authority may suspend the Program participant’s participation contract if the Authority determines, on the basis of substantiating documentation, as may be deemed necessary by the Authority upon specific case review, that continued enforcement of the employment service obligation may result in extreme hardship for the participant. Extreme hardships include, but are not limited to, temporary disability, active duty military service, or temporary suspension of the participant’s professional license pending the outcome of an investigation.

1. The Authority may suspend the participant’s participation contract for a period of up to two calendar years from the date the suspension commences. At the end of the first year of suspension, the participant must provide the Authority with substantiating documentation, as defined in this subsection, to renew the suspension for a second year.
2. The suspension, as stipulated at (b) above, may be extended beyond two years for exceptional circumstances at the discretion of the Authority on the basis of substantiating documentation, as defined in this subsection.

(c) A participant may nullify the participation contract by notifying the Authority, in writing.

(d) The Authority shall have final decision-making authority to terminate a participant’s participation contract.

(e) Participants who nullify their participation agreement, or whose participation agreements are terminated by the Authority, are not eligible to reapply to participate in the Program.

Appeals process

(a) When an applicant has received a notification of ineligibility for Program participation, the applicant may submit a written appeal to the Authority within 30 days of the date of the notification. The written appeal must include the following:
1. A copy of the notification of ineligibility received by the applicant from the Authority; and
2. The reasons why the applicant believes the applicant is eligible to participate in the Program, along with any documentation that the applicant has obtained to support the appeal, if applicable.

(b) Within 30 days of the receipt of the appeal, the Authority shall provide the applicant with the Authority’s final determination of the appeal. Final decisions of the Authority can be appealed to the Appellate Division of the Superior Court.

DIVISION OF FAMILY DEVELOPMENT

Child Support Program

Flexibility, Efficiency, and Modernization in Child Support Enforcement Programs


Proposed: November 7, 2022, at 54 N.J.R. 2064(a).

Adopted: May 8, 2023, by Sarah Adelman, Commissioner, Department of Human Services.

Filed: May 8, 2023, as R.2023 d.073, without change.


Effective Date: June 5, 2023.

Expiration Date: January 18, 2030.

Summary of Public Comment and Agency Response:
The official comment period ended June 6, 2023. No comments were received.

Federal Standards Statement
The adopted amendments implement the Federal requirements in the Final Rule for Flexibility, Efficiency, and Modernization in Child Support Enforcement Programs. The Department of Human Services has reviewed the applicable Federal laws and regulations and that review indicates that the adopted amendments do not exceed the Federal standards for the Child Support Program. Therefore, a Federal standards analysis is not required.

Full text of the adoption follows:

SUBCHAPTER 1A. DEFINITIONS

10:110-1A.1 Definitions

The following words and terms, as used within this chapter, shall have the following meanings unless the context clearly indicates otherwise:

- “Cash medical support” means an amount ordered to be paid toward the cost of health care coverage provided by a public entity or by another parent through employment or otherwise, or for other medical costs not covered by insurance.

- “Health care coverage” includes fee for service, health maintenance organization, preferred provider organization, dental insurance, eye care, pharmaceutical assistance, and other types of private health insurance and public health care coverage under which medical services could be provided to the dependent child(ren).

- “Medical support” means medical coverage pursuant to a court order. Medical support includes private and public health care coverage, cash medical support, including payment of health insurance premiums, and payment of medical bills, including dental or eye care. Medical support