43:21-6

LEGISLATIVE HISTORY CHECKLIST

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LAWS OF: 2011 **CHAPTER:** 32

NJSA: 43:21-6 (Allows for unemployment insurance beneficiaries to file, reopen, cancel or close claims online)

BILL NO: S2498 (Substituted for A3494)

SPONSOR(S) Greenstein and others

DATE INTRODUCED: December 6, 2010

COMMITTEE: ASSEMBLY: ---

SENATE: Budget and Appropriations

AMENDED DURING PASSAGE: Yes

DATE OF PASSAGE: ASSEMBLY: January 10, 2011

SENATE: January 10, 2011

DATE OF APPROVAL: March 1, 2011

FOLLOWING ARE ATTACHED IF AVAILABLE:

FINAL TEXT OF BILL (Second reprint enacted)

S2498

SPONSOR'S STATEMENT: (Begins on page 7 of original bill)

Yes

COMMITTEE STATEMENT: ASSEMBLY: No

SENATE: Yes

(Audio archived recordings of the committee meetings, corresponding to the date of the committee statement, *may possibly* be found at www.njleg.state.nj.us)

FLOOR AMENDMENT STATEMENT: Yes

LEGISLATIVE FISCAL ESTIMATE: No

A3494

SPONSOR'S STATEMENT: (Begins on page 7 of original bill)

Yes

COMMITTEE STATEMENT: ASSEMBLY: Yes Labor

Budget

SENATE: No

FLOOR AMENDMENT STATEMENT: Yes

LEGISLATIVE FISCAL ESTIMATE: No

(continued)

	VETO MESSAGE:	No
	GOVERNOR'S PRESS RELEASE ON SIGNING:	No
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	HEARINGS:	No
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LAW/RWH		

P.L.2011, CHAPTER 32, approved March 1, 2011 Senate, No. 2498 (Second Reprint)

1 **AN ACT** concerning unemployment insurance benefit claims and amending R.S.43:21-6.

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BE IT ENACTED by the Senate and General Assembly of the State of New Jersey:

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- 1. R.S.43:21-6 is amended to read as follows:
- 8 43:21-6. (a) Filing. (1) Claims for benefits shall be made in 9 accordance with such regulations as the Director of the Division of Unemployment and Temporary Disability Insurance of the 10 Department of Labor and Workforce Development of the State of 11 12 New Jersey may approve. Each employer shall post and maintain 13 on his premises printed notices of his subject status, of such design, 14 in such numbers and at such places as the director of the division 15 may determine to be necessary to give notice thereof to persons in the employer's service. Each employer shall give to each individual 16 17 at the time he becomes unemployed a printed copy of benefit 18 instructions. Both the aforesaid notices and instructions shall be supplied by the division to employers without cost to them. 19
 - (2) Any claimant ², except for a claimant who has, for any period during his base year, served in the military, worked for the federal government, or worked outside the State of New Jersey, ² may choose to ²[file, reopen] certify², cancel or close his claim for unemployment insurance benefits ¹at any time, 24 hours a day and seven days a week, ¹ via the Internet on a website developed by the division ¹[, which shall be available for use by claimants 24 hours a day and seven days a week] ^{1 2}; however, any claim that is certified, cancelled or closed after 7:00 PM will not be processed by the division until the next scheduled posting date ².
 - ¹[(3) After filing or reopening a claim for unemployment insurance, an individual shall be required to report to the division in order to claim completed weeks of unemployment insurance benefits. The division shall promulgate rules and regulations providing that all claimants may report to claim completed weeks of unemployment benefits via a website that is available for use 24 hours a day and seven days a week. An individual shall be ineligible for completed weeks of unemployment insurance benefits unless he reports to the division via the website, or an alternative method of

EXPLANATION – Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined $\underline{\text{thus}}$ is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

¹Senate SBA committee amendments adopted December 20, 2010.

²Senate floor amendments adopted January 6, 2011.

reporting allowed by the division, within 90 days of the last day of the designated benefit period.

For purposes of this subparagraph, a "designated benefit period"

is the two consecutive calendar weeks that can be claimed for

benefit payment and which ends on the Saturday of the second

week. 1¹

(b) (1) Procedure for making initial determinations with respect to benefit years commencing on or after January 1, 1953.

A representative or representatives designated by the director of the division and hereafter referred to as a "deputy" shall promptly examine the claim, and shall notify the most recent employing unit and, successively as necessary, each employer in inverse chronological order during the base year. Such notification shall require said employing unit and employer to furnish such information to the deputy as may be necessary to determine the claimant's eligibility and his benefit rights with respect to the employer in question.

In his discretion, the director may appoint special deputies to make initial or subsequent determinations under subsection (f) of R.S.43:21-4 and subsection (d) of R.S.43-21-5.

If any employer or employing unit fails to respond to the request for information within 10 days after the mailing, or communicating by electronic means, of such request, the deputy shall rely entirely on information from other sources, including an affidavit to the best of the knowledge and belief of the claimant with respect to his wages and time worked. Except in the event of fraud, if it is determined that any information in such affidavit is erroneous, no penalty shall be imposed on the claimant.

The deputy shall promptly make an initial determination based upon the available information. The initial determination shall show the weekly benefit amount payable, the maximum duration of benefits with respect to the employer to whom the determination relates, and the ratio of benefits chargeable to the employer's account for benefit years commencing on or after July 1, 1986, and also shall show whether the claimant is ineligible or disqualified for benefits under the initial determination. The claimant and the employer whose account may be charged for benefits payable pursuant to said determination shall be promptly notified thereof.

Whenever an initial determination is based upon information other than that supplied by an employer because such employer failed to respond to the deputy's request for information, such initial determination and any subsequent determination thereunder shall be incontestable by the noncomplying employer, as to any charges to his employer's account because of benefits paid prior to the close of the calendar week following the receipt of his reply. Such initial determination shall be altered if necessary upon receipt of information from the employer, and any benefits paid or payable with respect to weeks occurring subsequent to the close of the

calendar week following the receipt of the employer's reply shall be paid in accordance with such altered initial determination.

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The deputy shall issue a separate initial benefit determination with respect to each of the claimant's base year employers, starting with the most recent employer and continuing as necessary in the inverse chronological order of the claimant's last date of employment with each such employer. If an appeal is taken from an initial determination, as hereinafter provided, by any employer other than the first chargeable base year employer or for benefit years commencing on or after July 1, 1986, that employer from whom the individual was most recently separated, then such appeal shall be limited in scope to include only one or more of the following matters:

- (A) The correctness of the benefit payments authorized to be made under the determination;
- (B) Fraud in connection with the claim pursuant to which the initial determination is issued; or
- (C) The refusal of suitable work offered by the chargeable employer filing the appeal;
- (D) Gross misconduct as provided in subsection (b) of R.S.43:21-5.

The amount of benefits payable under an initial determination may be reduced or canceled if necessary to avoid payment of benefits for a number of weeks in excess of the maximum specified in subsection (d) of R.S.43:21-3.

Unless the claimant or any interested party, within seven calendar days after delivery of notification of an initial determination or within 10 calendar days after such notification was mailed to his or their last-known address and addresses, files an appeal from such decision, such decision shall be final and benefits shall be paid or denied in accordance therewith, except for such determinations as may be altered in benefit amounts or duration as provided in this paragraph. Benefits payable for periods pending an appeal and not in dispute shall be paid as such benefits accrue; provided that insofar as any such appeal is or may be an appeal from a determination to the effect that the claimant is disqualified under the provisions of R.S.43:21-5 or any amendments thereof or supplements thereto, benefits pending determination of the appeal shall be withheld only for the period of disqualification as provided for in said section, and notwithstanding such appeal, the benefits otherwise provided by this act shall be paid for the period subsequent to such period of disqualification; and provided, also, that if there are two determinations of entitlement, benefits for the period covered by such determinations shall be paid regardless of any appeal which may thereafter be taken, but no employer's account shall be charged with benefits so paid, if the decision is finally reversed.

(2) Procedure for making initial determinations in certain cases of concurrent employment, with respect to benefit years commencing on or after January 1, 1953 and prior to benefit years commencing on or after July 1, 1986.

Notwithstanding any other provisions of this Title, if an individual shows to the satisfaction of the deputy that there were at least 13 weeks in his base period in each of which he earned wages from two or more employers totaling \$30.00 or more but in each of which there was no single employer from whom he earned as much as \$100.00, then such individual's claim shall be determined in accordance with the special provisions of this paragraph. In such case, the deputy shall determine the individual's eligibility for benefits, his average weekly wage, weekly benefit rate and maximum total benefits as if all his base year employers were a single employer. Such determination shall apportion the liability for benefit charges thereunder to the individual's several base year employers so that each employer's maximum liability for charges thereunder bears approximately the same relation to the maximum total benefits allowed as the wages earned by the individual from each employer during the base year bears to his total wages earned from all employers during the base year. Such initial determination shall also specify the individual's last date of employment within the base year with respect to each base year employer, and such employers shall be charged for benefits paid under said initial determination in the inverse chronological order of such last date of employment.

- (3) Procedure for making subsequent determinations with respect to benefit years commencing on or after January 1, 1953. The deputy shall make determinations with respect to claims for benefits thereafter in the course of the benefit year, in accordance with any initial determination allowing benefits, and under which benefits have not been exhausted, and each notification of a benefit payment shall be a notification of an affirmative subsequent determination. The allowance of benefits by the deputy on any such determination, or the denial of benefits by the deputy on any such determination, shall be appealable in the same manner and under the same limitations as is provided in the case of initial determinations.
- (c) Appeals. Unless such appeal is withdrawn, an appeal tribunal, after affording the parties reasonable opportunity for fair hearing, shall affirm or modify the findings of fact and the determination. The parties shall be duly notified of such tribunal's decision, together with its reasons therefor, which shall be deemed to be the final decision of the board of review, unless further appeal is initiated pursuant to subsection (e) of this section within 10 days after the date of notification or mailing of the decision for any decision made on or before December 1, 2010, or within 20 days

after the date of notification or mailing of such decision for any decision made after December 1, 2010.

- (d) Appeal tribunals. To hear and decide disputed benefit claims, including appeals from determinations with respect to demands for refunds of benefits under subsection (d) of R.S.43:21-16, the director with the approval of the Commissioner of Labor and Workforce Development shall establish impartial appeal tribunals consisting of a salaried body of examiners under the supervision of a Chief Appeals Examiner, all of whom shall be appointed pursuant to the provisions of Title 11A of the New Jersey Statutes, Civil Service and other applicable statutes.
- (e) Board of review. The board of review may on its own motion affirm, modify, or set aside any decision of an appeal tribunal on the basis of the evidence previously submitted in such case, or direct the taking of additional evidence, or may permit any of the parties to such decision to initiate further appeals before it. The board of review shall permit such further appeal by any of the parties interested in a decision of an appeal tribunal which is not unanimous and from any determination which has been overruled or modified by any appeal tribunal. The board of review may remove to itself or transfer to another appeal tribunal the proceedings on any claim pending before an appeal tribunal. Any proceedings so removed to the board of review shall be heard by a quorum thereof in accordance with the requirements of subsection (c) of this section. The board of review shall promptly notify the interested parties of its findings and decision.
- (f) Procedure. The manner in which disputed benefit claims, and appeals from determinations with respect to (1) claims for benefits and (2) demands for refunds of benefits under subsection (d) of R.S.43:21-16 shall be presented, the reports thereon required from the claimant and from employers, and the conduct of hearings and appeals shall be in accordance with rules prescribed by the board of review for determining the rights of the parties, whether or not such rules conform to common law or statutory rules of evidence and other technical rules of procedure. A full and complete record shall be kept of all proceedings in connection with a disputed claim. All testimony at any hearing upon a disputed claim shall be recorded, but need not be transcribed unless the disputed claim is further appealed.
- (g) Witness fees. Witnesses subpensed pursuant to this section shall be allowed fees at a rate fixed by the director. Such fees and all expenses of proceedings involving disputed claims shall be deemed a part of the expense of administering this chapter (R.S.43:21-1 et seq.).
- (h) Court review. Any decision of the board of review shall become final as to any party upon the mailing of a copy thereof to such party or to his attorney, or upon the mailing of a copy thereof to such party at his last-known address. The Division of

S2498 [2R]

Unemployment and Temporary Disability Insurance and any party to a proceeding before the board of review may secure judicial review of the final decision of the board of review. Any party not joining in the appeal shall be made a defendant; the board of review shall be deemed to be a party to any judicial action involving the review of, or appeal from, any of its decisions, and may be represented in any such judicial action by any qualified attorney, who may be a regular salaried employee of the board of review or has been designated by it for that purpose, or, at the board of review's request, by the Attorney General.

(i) Failure to give notice. The failure of any public officer or employee at any time heretofore or hereafter to give notice of determination or decision required in subsections (b), (c) and (e) of this section, as originally passed or amended, shall not relieve any employer's account of any charge by reason of any benefits paid, unless and until that employer can show to the satisfaction of the director of the division that the said benefits, in whole or in part, would not have been charged or chargeable to his account had such notice been given. Any determination hereunder by the director shall be subject to court review.

(cf: P.L.2010, c.82, s.1)

2. This act shall take effect on the ²[90th] 120th² day after enactment.

Allows for unemployment insurance beneficiaries to file, reopen, cancel or close claims online.

SENATE, No. 2498

STATE OF NEW JERSEY

214th LEGISLATURE

INTRODUCED DECEMBER 6, 2010

Sponsored by: Senator LINDA R. GREENSTEIN District 14 (Mercer and Middlesex) Senator JAMES BEACH District 6 (Camden)

SYNOPSIS

Allows for unemployment insurance beneficiaries to file, reopen, cancel or close claims online.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 12/21/2010)

AN ACT concerning unemployment insurance benefit claims and amending R.S.43:21-6.

BE IT ENACTED by the Senate and General Assembly of the State of New Jersey:

- 1. R.S.43:21-6 is amended to read as follows:
- (a) Filing. (1) Claims for benefits shall be made in accordance with such regulations as the Director of the Division of Unemployment and Temporary Disability Insurance of the Department of Labor and Workforce Development of the State of New Jersey may approve. Each employer shall post and maintain on his premises printed notices of his subject status, of such design, in such numbers and at such places as the director of the division may determine to be necessary to give notice thereof to persons in the employer's service. Each employer shall give to each individual at the time he becomes unemployed a printed copy of benefit instructions. Both the aforesaid notices and instructions shall be supplied by the division to employers without cost to them.
 - (2) Any claimant may choose to file, reopen, cancel or close his claim for unemployment insurance benefits at any time, 24 hours a day and seven days a week, via the Internet on a website developed by the division.
 - (3) After filing or reopening a claim for unemployment insurance, an individual shall be required to report to the division in order to claim completed weeks of unemployment insurance benefits. The division shall promulgate rules and regulations providing that all claimants may report to claim completed weeks of unemployment benefits via a website that is available for use 24 hours a day and seven days a week. An individual shall be ineligible for completed weeks of unemployment insurance benefits unless he reports to the division via the website, or an alternative method of reporting allowed by the division, within 45 days of the last day of the designated benefit period.
 - For purposes of this subparagraph, a "designated benefit period" is the two consecutive calendar weeks that can be claimed for benefit payment and which ends on the Saturday of the second week.
- (b) (1) Procedure for making initial determinations with respect to benefit years commencing on or after January 1, 1953.
- A representative or representatives designated by the director of the division and hereafter referred to as a "deputy" shall promptly examine the claim, and shall notify the most recent employing unit and, successively as necessary, each employer in inverse chronological order during the base year. Such notification shall

EXPLANATION – Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

require said employing unit and employer to furnish such information to the deputy as may be necessary to determine the claimant's eligibility and his benefit rights with respect to the employer in question.

In his discretion, the director may appoint special deputies to make initial or subsequent determinations under subsection (f) of R.S.43:21-4 and subsection (d) of R.S.43-21-5.

If any employer or employing unit fails to respond to the request for information within 10 days after the mailing, or communicating by electronic means, of such request, the deputy shall rely entirely on information from other sources, including an affidavit to the best of the knowledge and belief of the claimant with respect to his wages and time worked. Except in the event of fraud, if it is determined that any information in such affidavit is erroneous, no penalty shall be imposed on the claimant.

The deputy shall promptly make an initial determination based upon the available information. The initial determination shall show the weekly benefit amount payable, the maximum duration of benefits with respect to the employer to whom the determination relates, and the ratio of benefits chargeable to the employer's account for benefit years commencing on or after July 1, 1986, and also shall show whether the claimant is ineligible or disqualified for benefits under the initial determination. The claimant and the employer whose account may be charged for benefits payable pursuant to said determination shall be promptly notified thereof.

Whenever an initial determination is based upon information other than that supplied by an employer because such employer failed to respond to the deputy's request for information, such initial determination and any subsequent determination thereunder shall be incontestable by the noncomplying employer, as to any charges to his employer's account because of benefits paid prior to the close of the calendar week following the receipt of his reply. Such initial determination shall be altered if necessary upon receipt of information from the employer, and any benefits paid or payable with respect to weeks occurring subsequent to the close of the calendar week following the receipt of the employer's reply shall be paid in accordance with such altered initial determination.

The deputy shall issue a separate initial benefit determination with respect to each of the claimant's base year employers, starting with the most recent employer and continuing as necessary in the inverse chronological order of the claimant's last date of employment with each such employer. If an appeal is taken from an initial determination, as hereinafter provided, by any employer other than the first chargeable base year employer or for benefit years commencing on or after July 1, 1986, that employer from whom the individual was most recently separated, then such appeal shall be limited in scope to include only one or more of the following matters:

(A) The correctness of the benefit payments authorized to be made under the determination;

- (B) Fraud in connection with the claim pursuant to which the initial determination is issued; or
- (C) The refusal of suitable work offered by the chargeable employer filing the appeal;
- (D) Gross misconduct as provided in subsection (b) of R.S.43:21-5.

The amount of benefits payable under an initial determination may be reduced or canceled if necessary to avoid payment of benefits for a number of weeks in excess of the maximum specified in subsection (d) of R.S.43:21-3.

Unless the claimant or any interested party, within seven calendar days after delivery of notification of an initial determination or within 10 calendar days after such notification was mailed to his or their last-known address and addresses, files an appeal from such decision, such decision shall be final and benefits shall be paid or denied in accordance therewith, except for such determinations as may be altered in benefit amounts or duration as provided in this paragraph. Benefits payable for periods pending an appeal and not in dispute shall be paid as such benefits accrue; provided that insofar as any such appeal is or may be an appeal from a determination to the effect that the claimant is disqualified under the provisions of R.S.43:21-5 or any amendments thereof or supplements thereto, benefits pending determination of the appeal shall be withheld only for the period of disqualification as provided for in said section, and notwithstanding such appeal, the benefits otherwise provided by this act shall be paid for the period subsequent to such period of disqualification; and provided, also, that if there are two determinations of entitlement, benefits for the period covered by such determinations shall be paid regardless of any appeal which may thereafter be taken, but no employer's account shall be charged with benefits so paid, if the decision is finally reversed.

(2) Procedure for making initial determinations in certain cases of concurrent employment, with respect to benefit years commencing on or after January 1, 1953 and prior to benefit years commencing on or after July 1, 1986.

Notwithstanding any other provisions of this Title, if an individual shows to the satisfaction of the deputy that there were at least 13 weeks in his base period in each of which he earned wages from two or more employers totaling \$30.00 or more but in each of which there was no single employer from whom he earned as much as \$100.00, then such individual's claim shall be determined in accordance with the special provisions of this paragraph. In such case, the deputy shall determine the individual's eligibility for benefits, his average weekly wage, weekly benefit rate and maximum total benefits as if all his base year employers were a

single employer. Such determination shall apportion the liability for benefit charges thereunder to the individual's several base year employers so that each employer's maximum liability for charges thereunder bears approximately the same relation to the maximum total benefits allowed as the wages earned by the individual from each employer during the base year bears to his total wages earned from all employers during the base year. Such initial determination shall also specify the individual's last date of employment within the base year with respect to each base year employer, and such employers shall be charged for benefits paid under said initial determination in the inverse chronological order of such last date of employment.

- (3) Procedure for making subsequent determinations with respect to benefit years commencing on or after January 1, 1953. The deputy shall make determinations with respect to claims for benefits thereafter in the course of the benefit year, in accordance with any initial determination allowing benefits, and under which benefits have not been exhausted, and each notification of a benefit payment shall be a notification of an affirmative subsequent determination. The allowance of benefits by the deputy on any such determination, or the denial of benefits by the deputy on any such determination, shall be appealable in the same manner and under the same limitations as is provided in the case of initial determinations.
- (c) Appeals. Unless such appeal is withdrawn, an appeal tribunal, after affording the parties reasonable opportunity for fair hearing, shall affirm or modify the findings of fact and the determination. The parties shall be duly notified of such tribunal's decision, together with its reasons therefor, which shall be deemed to be the final decision of the board of review, unless further appeal is initiated pursuant to subsection (e) of this section within 10 days after the date of notification or mailing of the decision for any decision made on or before December 1, 2010, or within 20 days after the date of notification or mailing of such decision for any decision made after December 1, 2010.
- (d) Appeal tribunals. To hear and decide disputed benefit claims, including appeals from determinations with respect to demands for refunds of benefits under subsection (d) of R.S.43:21-16, the director with the approval of the Commissioner of Labor and Workforce Development shall establish impartial appeal tribunals consisting of a salaried body of examiners under the supervision of a Chief Appeals Examiner, all of whom shall be appointed pursuant to the provisions of Title 11A of the New Jersey Statutes, Civil Service and other applicable statutes.
- (e) Board of review. The board of review may on its own motion affirm, modify, or set aside any decision of an appeal tribunal on the basis of the evidence previously submitted in such case, or direct the taking of additional evidence, or may permit any

of the parties to such decision to initiate further appeals before it. The board of review shall permit such further appeal by any of the parties interested in a decision of an appeal tribunal which is not unanimous and from any determination which has been overruled or modified by any appeal tribunal. The board of review may remove to itself or transfer to another appeal tribunal the proceedings on any claim pending before an appeal tribunal. Any proceedings so removed to the board of review shall be heard by a quorum thereof in accordance with the requirements of subsection (c) of this section. The board of review shall promptly notify the interested parties of its findings and decision.

- (f) Procedure. The manner in which disputed benefit claims, and appeals from determinations with respect to (1) claims for benefits and (2) demands for refunds of benefits under subsection (d) of R.S.43:21-16 shall be presented, the reports thereon required from the claimant and from employers, and the conduct of hearings and appeals shall be in accordance with rules prescribed by the board of review for determining the rights of the parties, whether or not such rules conform to common law or statutory rules of evidence and other technical rules of procedure. A full and complete record shall be kept of all proceedings in connection with a disputed claim. All testimony at any hearing upon a disputed claim shall be recorded, but need not be transcribed unless the disputed claim is further appealed.
- (g) Witness fees. Witnesses subpensed pursuant to this section shall be allowed fees at a rate fixed by the director. Such fees and all expenses of proceedings involving disputed claims shall be deemed a part of the expense of administering this chapter (R.S.43:21-1 et seq.).
- (h) Court review. Any decision of the board of review shall become final as to any party upon the mailing of a copy thereof to such party or to his attorney, or upon the mailing of a copy thereof to such party at his last-known address. The Division of Unemployment and Temporary Disability Insurance and any party to a proceeding before the board of review may secure judicial review of the final decision of the board of review. Any party not joining in the appeal shall be made a defendant; the board of review shall be deemed to be a party to any judicial action involving the review of, or appeal from, any of its decisions, and may be represented in any such judicial action by any qualified attorney, who may be a regular salaried employee of the board of review or has been designated by it for that purpose, or, at the board of review's request, by the Attorney General.
- (i) Failure to give notice. The failure of any public officer or employee at any time heretofore or hereafter to give notice of determination or decision required in subsections (b), (c) and (e) of this section, as originally passed or amended, shall not relieve any employer's account of any charge by reason of any benefits paid,

S2498 GREENSTEIN, BEACH

unless and until that employer can show to the satisfaction of the director of the division that the said benefits, in whole or in part, would not have been charged or chargeable to his account had such notice been given. Any determination hereunder by the director shall be subject to court review.

(cf: P.L.2010, c.82, s.1)

2. This act shall take effect on the 90th day after enactment.

STATEMENT

This bill allows for any individual to file, reopen, cancel or close his claim for unemployment insurance (UI) benefits online. The bill requires the Director of the Division of Unemployment and Temporary Disability Insurance of the Department of Labor and Workforce Development to develop a website for the purpose of filing, reopening, cancelling or closing a claim for benefits. The website must be available for use by claimants at any time, 24 hours a day and seven days a week.

Currently, only UI beneficiaries who wish to file or reopen a claim may choose to do so online. However, to cancel or close a claim for benefits, the claimant must make an appointment to speak to a representative of the division, which may take several days, or possibly weeks. This delay keeps claims open longer than is needed and may result in unnecessary, unintentional or mistaken UI benefit payments. Further, many UI beneficiaries are excluded from using an online method of filing or reopening a claim. For example, individuals who are claiming extended benefits or have served in the military are currently ineligible to file or reopen a claim online.

The bill also requires individuals to report to the division in order to claim completed weeks of UI benefits, after they have filed an unemployment insurance claim. The bill provides that all claimants may report to claim completed weeks of unemployment benefits via a website that is available 24 hours a day and seven days a week. Currently, according to N.J.A.C.12:17-4.3, an individual is ineligible for benefits unless he reports to the division via a website, or an alternative method of reporting prescribed by the division, during the assigned week as determined by the division, or within 21 calendar days of the last day of the designated benefit period. This bill provides that a claimant may report to the division to claim benefits via a website, or an alternative method of reporting allowed by the division, within 45 days of the last day of the designated benefit period. For purposes of the bill, "designated benefit period" means the two consecutive calendar weeks that can be claimed for benefit payment and which ends on the Saturday of the second week.

SENATE BUDGET AND APPROPRIATIONS COMMITTEE

STATEMENT TO

SENATE, No. 2498

with committee amendments

STATE OF NEW JERSEY

DATED: DECEMBER 14, 2010

The Senate Budget and Appropriations committee reports favorably Senate Bill No. 2498, with committee amendments.

The bill allows for any individual to file, reopen, cancel or close the individual's claim for unemployment insurance (UI) benefits online. The bill requires the Director of the Division of Unemployment and Temporary Disability Insurance of the Department of Labor and Workforce Development to develop a website for the purpose of filing, reopening, cancelling or closing a claim for benefits by claimants at any time, 24 hours a day and seven days a week.

Currently, only UI beneficiaries who wish to file or reopen a claim may choose to do so online. However, to cancel or close a claim for benefits, the claimant must make an appointment to speak to a representative of the division, which may take several days, or possibly weeks. This delay keeps claims open longer than is needed and may result in unnecessary, unintentional or mistaken UI benefit payments. Further, many UI beneficiaries are excluded from using an online method of filing or reopening a claim. For example, individuals who are claiming extended benefits or have served in the military are currently ineligible to file or reopen a claim online.

This bill is identical to Assembly Bill No. 3494 (2R).

COMMITTEE AMENDMENTS:

The amendments omit provisions from the bill that would have otherwise required:

- an individual report to the Division of Unemployment and Temporary Disability Insurance after filing or reopening a UI claim, in order to claim completed weeks of UI benefits;
- the division to provide a website, available for use 24 hours a day and seven days a week, that all claimants may use to report to claim completed weeks of benefits; and
- an individual to be ineligible for benefits unless the individual reports to the division via a website, or an alternative method of reporting allowed by the division, within 90 days of the last day of the designated benefit period.

FISCAL IMPACT:

This bill was not certified as requiring a fiscal note.

STATEMENT TO

[First Reprint] **SENATE, No. 2498**

with Senate Floor Amendments (Proposed by Senator GREENSTEIN)

ADOPTED: JANUARY 6, 2011

Currently, the bill provides that claimants may access a UI claims website, developed by the Division of Unemployment and Temporary Disability Insurance of the Department of Labor and Workforce Development, 24 hours a day and seven days a week. This amendment provides that any claim completed on the website after 7:00 PM will not be processed until the next scheduled posting date.

The amendment also removes the provision that a claimant may use the website to "file" or "reopen" a claim, and adds the provision that a claimant may use the website to "certify" a claim. This is to clarify that the purpose of this bill is to provide increased Internet access to claimants that are certifying their completed weeks of unemployment in order to collect their unemployment benefits, which is different from filing an initial claim for unemployment insurance. A claimant currently has the ability to "file" a claim for unemployment insurance on the Internet 24 hours a day and seven days a week.

The amendment prohibits a claimant who has, for any period during his base year, served in the military, worked for the federal government, or worked outside the State of New Jersey from using the UI claims website.

Finally, the amendment changes the effective date of the bill from the 90th day to the 120th day after enactment.

ASSEMBLY, No. 3494

STATE OF NEW JERSEY

214th LEGISLATURE

INTRODUCED NOVEMBER 15, 2010

Sponsored by:

Assemblyman WAYNE P. DEANGELO

District 14 (Mercer and Middlesex)

Assemblywoman CELESTE M. RILEY

District 3 (Salem, Cumberland and Gloucester)

Assemblyman PETER J. BARNES, III

District 18 (Middlesex)

Assemblywoman CONNIE WAGNER

District 38 (Bergen)

Assemblywoman NELLIE POU

District 35 (Bergen and Passaic)

Co-Sponsored by:

Assemblywoman Evans and Assemblyman Albano

SYNOPSIS

Allows for unemployment insurance beneficiaries to file, reopen, cancel or close claims online.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 11/16/2010)

AN ACT concerning unemployment insurance benefit claims and amending R.S.43:21-6.

BE IT ENACTED by the Senate and General Assembly of the State of New Jersey:

- 1. R.S.43:21-6 is amended to read as follows:
- (a) Filing. (1) Claims for benefits shall be made in accordance with such regulations as the Director of the Division of Unemployment and Temporary Disability Insurance of the Department of Labor and Workforce Development of the State of New Jersey may approve. Each employer shall post and maintain on his premises printed notices of his subject status, of such design, in such numbers and at such places as the director of the division may determine to be necessary to give notice thereof to persons in the employer's service. Each employer shall give to each individual at the time he becomes unemployed a printed copy of benefit instructions. Both the aforesaid notices and instructions shall be supplied by the division to employers without cost to them.
 - (2) Any claimant may choose to file, reopen, cancel or close his claim for unemployment insurance benefits via the Internet on a website developed by the division, which shall be available for use by claimants 24 hours a day and seven days a week.
 - (3) After filing or reopening a claim for unemployment insurance, an individual shall be required to report to the division in order to claim completed weeks of unemployment insurance benefits. The division shall promulgate rules and regulations providing that all claimants may report to claim completed weeks of unemployment benefits via a website that is available for use 24 hours a day and seven days a week. An individual shall be ineligible for completed weeks of unemployment insurance benefits unless he reports to the division via the website, or an alternative method of reporting allowed by the division, within 90 days of the last day of the designated benefit period.
 - For purposes of this subparagraph, a "designated benefit period" is the two consecutive calendar weeks that can be claimed for benefit payment and which ends on the Saturday of the second week.
 - (b) (1) Procedure for making initial determinations with respect to benefit years commencing on or after January 1, 1953.
 - A representative or representatives designated by the director of the division and hereafter referred to as a "deputy" shall promptly examine the claim, and shall notify the most recent employing unit and, successively as necessary, each employer in inverse chronological order during the base year. Such notification shall

EXPLANATION – Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

require said employing unit and employer to furnish such information to the deputy as may be necessary to determine the claimant's eligibility and his benefit rights with respect to the employer in question.

In his discretion, the director may appoint special deputies to make initial or subsequent determinations under subsection (f) of R.S.43:21-4 and subsection (d) of R.S.43-21-5.

If any employer or employing unit fails to respond to the request for information within 10 days after the mailing, or communicating by electronic means, of such request, the deputy shall rely entirely on information from other sources, including an affidavit to the best of the knowledge and belief of the claimant with respect to his wages and time worked. Except in the event of fraud, if it is determined that any information in such affidavit is erroneous, no penalty shall be imposed on the claimant.

The deputy shall promptly make an initial determination based upon the available information. The initial determination shall show the weekly benefit amount payable, the maximum duration of benefits with respect to the employer to whom the determination relates, and the ratio of benefits chargeable to the employer's account for benefit years commencing on or after July 1, 1986, and also shall show whether the claimant is ineligible or disqualified for benefits under the initial determination. The claimant and the employer whose account may be charged for benefits payable pursuant to said determination shall be promptly notified thereof.

Whenever an initial determination is based upon information other than that supplied by an employer because such employer failed to respond to the deputy's request for information, such initial determination and any subsequent determination thereunder shall be incontestable by the noncomplying employer, as to any charges to his employer's account because of benefits paid prior to the close of the calendar week following the receipt of his reply. Such initial determination shall be altered if necessary upon receipt of information from the employer, and any benefits paid or payable with respect to weeks occurring subsequent to the close of the calendar week following the receipt of the employer's reply shall be paid in accordance with such altered initial determination.

The deputy shall issue a separate initial benefit determination with respect to each of the claimant's base year employers, starting with the most recent employer and continuing as necessary in the inverse chronological order of the claimant's last date of employment with each such employer. If an appeal is taken from an initial determination, as hereinafter provided, by any employer other than the first chargeable base year employer or for benefit years commencing on or after July 1, 1986, that employer from whom the individual was most recently separated, then such appeal shall be limited in scope to include only one or more of the following matters:

(A) The correctness of the benefit payments authorized to be made under the determination;

- (B) Fraud in connection with the claim pursuant to which the initial determination is issued; or
- (C) The refusal of suitable work offered by the chargeable employer filing the appeal;
- (D) Gross misconduct as provided in subsection (b) of R.S.43:21-5.

The amount of benefits payable under an initial determination may be reduced or canceled if necessary to avoid payment of benefits for a number of weeks in excess of the maximum specified in subsection (d) of R.S.43:21-3.

Unless the claimant or any interested party, within seven calendar days after delivery of notification of an initial determination or within 10 calendar days after such notification was mailed to his or their last-known address and addresses, files an appeal from such decision, such decision shall be final and benefits shall be paid or denied in accordance therewith, except for such determinations as may be altered in benefit amounts or duration as provided in this paragraph. Benefits payable for periods pending an appeal and not in dispute shall be paid as such benefits accrue; provided that insofar as any such appeal is or may be an appeal from a determination to the effect that the claimant is disqualified under the provisions of R.S.43:21-5 or any amendments thereof or supplements thereto, benefits pending determination of the appeal shall be withheld only for the period of disqualification as provided for in said section, and notwithstanding such appeal, the benefits otherwise provided by this act shall be paid for the period subsequent to such period of disqualification; and provided, also, that if there are two determinations of entitlement, benefits for the period covered by such determinations shall be paid regardless of any appeal which may thereafter be taken, but no employer's account shall be charged with benefits so paid, if the decision is finally reversed.

(2) Procedure for making initial determinations in certain cases of concurrent employment, with respect to benefit years commencing on or after January 1, 1953 and prior to benefit years commencing on or after July 1, 1986.

Notwithstanding any other provisions of this Title, if an individual shows to the satisfaction of the deputy that there were at least 13 weeks in his base period in each of which he earned wages from two or more employers totaling \$30.00 or more but in each of which there was no single employer from whom he earned as much as \$100.00, then such individual's claim shall be determined in accordance with the special provisions of this paragraph. In such case, the deputy shall determine the individual's eligibility for benefits, his average weekly wage, weekly benefit rate and maximum total benefits as if all his base year employers were a

single employer. Such determination shall apportion the liability for benefit charges thereunder to the individual's several base year employers so that each employer's maximum liability for charges thereunder bears approximately the same relation to the maximum total benefits allowed as the wages earned by the individual from each employer during the base year bears to his total wages earned from all employers during the base year. Such initial determination shall also specify the individual's last date of employment within the base year with respect to each base year employer, and such employers shall be charged for benefits paid under said initial determination in the inverse chronological order of such last date of employment.

- (3) Procedure for making subsequent determinations with respect to benefit years commencing on or after January 1, 1953. The deputy shall make determinations with respect to claims for benefits thereafter in the course of the benefit year, in accordance with any initial determination allowing benefits, and under which benefits have not been exhausted, and each notification of a benefit payment shall be a notification of an affirmative subsequent determination. The allowance of benefits by the deputy on any such determination, or the denial of benefits by the deputy on any such determination, shall be appealable in the same manner and under the same limitations as is provided in the case of initial determinations.
- (c) Appeals. Unless such appeal is withdrawn, an appeal tribunal, after affording the parties reasonable opportunity for fair hearing, shall affirm or modify the findings of fact and the determination. The parties shall be duly notified of such tribunal's decision, together with its reasons therefor, which shall be deemed to be the final decision of the board of review, unless further appeal is initiated pursuant to subsection (e) of this section within 10 days after the date of notification or mailing of the decision for any decision made on or before December 1, 2010, or within 20 days after the date of notification or mailing of such decision for any decision made after December 1, 2010.
- (d) Appeal tribunals. To hear and decide disputed benefit claims, including appeals from determinations with respect to demands for refunds of benefits under subsection (d) of R.S.43:21-16, the director with the approval of the Commissioner of Labor and Workforce Development shall establish impartial appeal tribunals consisting of a salaried body of examiners under the supervision of a Chief Appeals Examiner, all of whom shall be appointed pursuant to the provisions of Title 11A of the New Jersey Statutes, Civil Service and other applicable statutes.
- (e) Board of review. The board of review may on its own motion affirm, modify, or set aside any decision of an appeal tribunal on the basis of the evidence previously submitted in such case, or direct the taking of additional evidence, or may permit any

of the parties to such decision to initiate further appeals before it. The board of review shall permit such further appeal by any of the parties interested in a decision of an appeal tribunal which is not unanimous and from any determination which has been overruled or modified by any appeal tribunal. The board of review may remove to itself or transfer to another appeal tribunal the proceedings on any claim pending before an appeal tribunal. Any proceedings so removed to the board of review shall be heard by a quorum thereof in accordance with the requirements of subsection (c) of this section. The board of review shall promptly notify the interested parties of its findings and decision.

- (f) Procedure. The manner in which disputed benefit claims, and appeals from determinations with respect to (1) claims for benefits and (2) demands for refunds of benefits under subsection (d) of R.S.43:21-16 shall be presented, the reports thereon required from the claimant and from employers, and the conduct of hearings and appeals shall be in accordance with rules prescribed by the board of review for determining the rights of the parties, whether or not such rules conform to common law or statutory rules of evidence and other technical rules of procedure. A full and complete record shall be kept of all proceedings in connection with a disputed claim. All testimony at any hearing upon a disputed claim shall be recorded, but need not be transcribed unless the disputed claim is further appealed.
- (g) Witness fees. Witnesses subpensed pursuant to this section shall be allowed fees at a rate fixed by the director. Such fees and all expenses of proceedings involving disputed claims shall be deemed a part of the expense of administering this chapter (R.S.43:21-1 et seq.).
- (h) Court review. Any decision of the board of review shall become final as to any party upon the mailing of a copy thereof to such party or to his attorney, or upon the mailing of a copy thereof to such party at his last-known address. The Division of Unemployment and Temporary Disability Insurance and any party to a proceeding before the board of review may secure judicial review of the final decision of the board of review. Any party not joining in the appeal shall be made a defendant; the board of review shall be deemed to be a party to any judicial action involving the review of, or appeal from, any of its decisions, and may be represented in any such judicial action by any qualified attorney, who may be a regular salaried employee of the board of review or has been designated by it for that purpose, or, at the board of review's request, by the Attorney General.
- (i) Failure to give notice. The failure of any public officer or employee at any time heretofore or hereafter to give notice of determination or decision required in subsections (b), (c) and (e) of this section, as originally passed or amended, shall not relieve any employer's account of any charge by reason of any benefits paid,

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unless and until that employer can show to the satisfaction of the director of the division that the said benefits, in whole or in part, would not have been charged or chargeable to his account had such notice been given. Any determination hereunder by the director shall be subject to court review.

(cf: P.L.2010, c.82, s.1)

2. This act shall take effect on the 90th day after enactment.

STATEMENT

This bill allows for any individual to file, reopen, cancel or close his claim for unemployment insurance (UI) benefits online. The bill requires the Director of the Division of Unemployment Insurance of the Department of Labor and Workforce Development to develop a website for the purpose of filing, reopening, cancelling or closing a claim for benefits. The website must be available for use by claimants 24 hours a day and seven days a week.

Currently, only UI beneficiaries who wish to file or reopen a claim may choose to do so online. However, to cancel or close a claim for benefits, the claimant must make an appointment to speak to a representative of the division, which may take several days, or possibly weeks. This delay keeps claims open longer than is needed and may result in unnecessary, unintentional or mistaken UI benefit payments. Further, many UI beneficiaries are excluded from using an online method of filing or reopening a claim. For example, individuals who are claiming extended benefits or have served in the military are ineligible to file or reopen a claim online.

The bill also requires individuals to report to the division in order to claim completed weeks of UI benefits, after they have filed an unemployment insurance claim. The bill provides that all claimants may report to claim completed weeks of unemployment benefits via a website that is available 24 hours a day and seven days a week. Currently, according to N.J.A.C.12:17-4.3, an individual is ineligible for benefits unless he reports to the division via a website, or an alternative method of reporting prescribed by the division, during the assigned week as determined by the division, or within 21 calendar days of the last day of the designated benefit period.

ASSEMBLY LABOR COMMITTEE

STATEMENT TO

ASSEMBLY, No. 3494

with committee amendments

STATE OF NEW JERSEY

DATED: NOVEMBER 15, 2010

The Assembly Labor Committee reports favorably and with committee amendments Assembly Bill No. 3494.

As amended by the committee, this bill allows for any individual to file, reopen, cancel or close his claim for unemployment insurance (UI) benefits online. The bill requires the Director of the Division of Unemployment and Temporary Disability Insurance of the Department of Labor and Workforce Development to develop a website for the purpose of filing, reopening, cancelling or closing a claim for benefits. The website must be available for use by claimants at any time, 24 hours a day and seven days a week.

Currently, only UI beneficiaries who wish to file or reopen a claim may choose to do so online. However, to cancel or close a claim for benefits, the claimant must make an appointment to speak to a representative of the division, which may take several days, or possibly weeks. This delay keeps claims open longer than is needed and may result in unnecessary, unintentional or mistaken UI benefit payments. Further, many UI beneficiaries are excluded from using an online method of filing or reopening a claim. For example, individuals who are claiming extended benefits or have served in the military are currently ineligible to file or reopen a claim online.

The bill also requires individuals to report to the division in order to claim completed weeks of UI benefits, after they have filed an unemployment insurance claim. The bill provides that all claimants may report to claim completed weeks of unemployment benefits via a website that is available 24 hours a day and seven days a week. Currently, according to N.J.A.C.12:17-4.3, an individual is ineligible for benefits unless he reports to the division via a website, or an alternative method of reporting prescribed by the division, during the assigned week as determined by the division, or within 21 calendar days of the last day of the designated benefit period. This bill provides that a claimant may report to the division to claim benefits via a website, or an alternative method of reporting allowed by the division, within 45 days of the last day of the designated benefit period. For purposes of the bill, "designated benefit period" means the two

consecutive calendar weeks that can be claimed for benefit payment and which ends on the Saturday of the second week.

COMMITTEE AMENDMENTS

- 1) Clarify that any claimant who chooses to file, reopen, cancel or close his claim for UI benefits may do so at *any* time, 24 hours a day and seven days a week, via the Internet on a website developed by the division; and
- 2) Reduce the maximum number of days within which a claimant may report to the division in order to claim completed weeks of UI benefits from 90 to 45 days.

ASSEMBLY BUDGET COMMITTEE

STATEMENT TO

[First Reprint] **ASSEMBLY, No. 3494**

with committee amendments

STATE OF NEW JERSEY

DATED: DECEMBER 8, 2010

The Assembly Budget Committee reports favorably Assembly Bill No. 3494 (1R) with committee amendments.

Assembly Bill No. 3494 (1R), as amended, allows for any individual to file, reopen, cancel or close the individual's claim for unemployment insurance (UI) benefits online. The bill requires the Director of the Division of Unemployment and Temporary Disability Insurance of the Department of Labor and Workforce Development to develop a website for the purpose of filing, reopening, cancelling or closing a claim for benefits by claimants at any time, 24 hours a day and seven days a week.

Currently, only UI beneficiaries who wish to file or reopen a claim may choose to do so online. However, to cancel or close a claim for benefits, the claimant must make an appointment to speak to a representative of the division, which may take several days, or possibly weeks. This delay keeps claims open longer than is needed and may result in unnecessary, unintentional or mistaken UI benefit payments. Further, many UI beneficiaries are excluded from using an online method of filing or reopening a claim. For example, individuals who are claiming extended benefits or have served in the military are currently ineligible to file or reopen a claim online.

FISCAL IMPACT:

This bill was not certified as requiring a fiscal note.

COMMITTEE AMENDMENTS:

The amendments omit provisions from the bill that would have otherwise required that

- an individual report to the Division of Unemployment and Temporary Disability Insurance after filing or reopening a UI claim, in order to claim completed weeks of UI benefits;
- the division provide a website, available for use 24 hours a day and seven days a week, that all claimants may use to report to claim completed weeks of benefits; and

- an individual be ineligible for benefits unless the individual reports to the division via a website, or an alternative method of reporting allowed by the division, within 45 days of the last day of the designated benefit period.

STATEMENT TO

[Second Reprint] ASSEMBLY, No. 3494

with Assembly Floor Amendments (Proposed by Assemblyman DEANGELO)

ADOPTED: JANUARY 6, 2011

Currently, the bill provides that claimants may access a UI claims website, developed by the Division of Unemployment and Temporary Disability Insurance of the Department of Labor and Workforce Development, 24 hours a day and seven days a week. This amendment provides that any claim completed on the website after 7:00 PM will not be processed until the next scheduled posting date.

The amendment also removes the provision that a claimant may use the website to "file" or "reopen" a claim, and adds the provision that a claimant may use the website to "certify" a claim. This is to clarify that the purpose of this bill is to provide increased Internet access to claimants that are certifying their completed weeks of unemployment in order to collect their unemployment benefits, which is different from filing an initial claim for unemployment insurance. A claimant currently has the ability to "file" a claim for unemployment insurance on the Internet 24 hours a day and seven days a week.

The amendment prohibits a claimant who has, for any period during his base year, served in the military, worked for the federal government, or worked outside the State of New Jersey from using the UI claims website.

Finally, the amendment changes the effective date of the bill from the 90th day to the 120th day after enactment.