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District 28 (Essex)

Co-Sponsored by:
Assemblywomen McKnight, DiMaso, Vainieri Huttle and Murphy

SYNOPSIS
Establishes public awareness campaign to promote early conversations about advance care planning and end-of-life care.

CURRENT VERSION OF TEXT
As reported by the Senate Health, Human Services, and Senior Citizens Committee on May 13, 2019, with amendments.

(Sponsorship Updated As Of: 12/17/2019)
AN ACT establishing an end-of-life care public awareness campaign and supplementing Title 26 of the Revised Statutes.

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

1. a. The Commissioner of Health shall establish a public awareness campaign to foster community-wide discussions and to promote early conversations about advance care planning and patient preferences to improve decision-making in relation to end-of-life care.

b. The commissioner, in establishing the public awareness campaign, shall develop outreach efforts and provide information and educational materials to the general public on various end-of-life care topics including, but not limited to:

   (1) how to effectively conduct advance care planning conversations with family members, friends, caregivers, healthcare providers, and other individuals involved in a patient’s care, regarding personal goals, preferences, and the type of care desired at the end-of-life during the final stages of the patient’s life;

   (2) how community leaders and members can appropriately, and in an ethnically, culturally, and linguistically sensitive way, facilitate community-wide discussions regarding advance care planning and end-of-life care;

   (3) definitions, procedures, and other information related to advance directives, established pursuant to P.L.1991, c.201 (C.26:2H-53 et seq.):

   (4) the differences between the two types of advance directives, namely proxy directives and instructive directives;

   (5) the importance of having an advance directive, or advance directives, and the differences between advance directives and Practitioner Physician Orders for Life-Sustaining Treatment (POLST) forms;

   (6) definitions, procedures, and other information related to Practitioner Orders for Life-Sustaining Treatment POLST forms, established pursuant to P.L.2011, c.145 (C.26:2H-129 et seq.);

   (7) standardized and approved definitions of, and differences between, palliative care, hospice care, comfort care, and other end-of-life-care terms; and

   (8) any other topics or matters related to advance care planning and end-of-life care as the commissioner may deem necessary.

c. Information provided under the public awareness campaign shall be disseminated using ethnically, culturally, and linguistically

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 thus is new matter.
Matter enclosed in superscript numerals has been adopted as follows:

Senate SHH committee amendments adopted May 13, 2019.
appropriate means, in a manner that demonstrates respect for individual dignity and sensitivity for ethnic, cultural, and linguistic differences. Where feasible and appropriate, the information shall be made available in a variety of languages.

d. As necessary, the commissioner shall partner with, and expand upon, community-based initiatives and training programs that educate the general public on advance care planning and end-of-life care.

2. This act shall take effect immediately.