

ASSEMBLY, No. 1072

STATE OF NEW JERSEY

219th LEGISLATURE

PRE-FILED FOR INTRODUCTION IN THE 2020 SESSION

Sponsored by:

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District 29 (Essex)

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District 31 (Hudson)

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Co-Sponsored by:

Assemblywoman Tucker and Assemblyman Wimberly

SYNOPSIS

Establishes the Working Group on End-of-Life Care and Palliative Care in DOH.

CURRENT VERSION OF TEXT

Introduced Pending Technical Review by Legislative Counsel.



1 **AN ACT** the Working Group on End-of-Life Care and Palliative
2 Care.

3

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

6

7 1. There is established the Working Group on End-of-Life Care
8 and Palliative Care in the Department of Health.

9 a. The working group shall include 23 members as follows:

10 (1) The Commissioners of Health, Human Services, and
11 Banking and Insurance, and the Ombudsperson for the
12 Institutionalized Elderly, or their designees, who shall serve ex
13 officio; and

14 (2) 19 public members appointed by the Commissioner of
15 Health who shall include: one representative each from the New
16 Jersey Hospital Association, the Health Care Association of New
17 Jersey, the Medical Society of New Jersey, the New Jersey
18 Association of Health Plans, AARP of New Jersey, the Home Care
19 and Hospice Association of New Jersey, the New Jersey Palliative
20 Advance Practice Nurse Consortium, the New Jersey Health Care
21 Quality Institute, the New Jersey Association of Mental Health and
22 Addiction Agencies, and the ARC of New Jersey; two physicians
23 licensed to practice in this State who have expertise in issues
24 relating to pain management or end-of-life care, at least one of
25 whom is an oncologist; one registered professional nurse licensed to
26 practice in this State; one person who is employed as a patient
27 advocate by a health care facility in this State; one person who
28 represents a faith-based organization; and four members of the
29 general public, two of whom have expertise or interest in the work
30 of the working group who are not licensed health care professionals,
31 and two of whom are family members of patients who have
32 received palliative and end-of-life care.

33 b. The working group shall organize as soon as practicable
34 following the appointment of its members, and shall select a
35 chairperson and vice-chairperson from among the members. The
36 chairperson shall appoint a secretary who need not be a member of
37 the working group.

38 c. The public members shall serve without compensation, but
39 shall be reimbursed for necessary expenses incurred in the
40 performance of their duties and within the limits of funds available
41 to the working group.

42 d. The working group shall be entitled to call to its assistance
43 and avail itself of the services of the employees of any State,
44 county, or municipal department, board, bureau, commission, or
45 agency as it may require and as may be available to it for its
46 purposes.

47 e. The Department of Health shall provide staff support to the
48 working group.

1 2. a. The purpose of the working group shall be to develop a
2 plan to:

3 (1) implement the legislative, administrative, and policy
4 recommendations for State agencies, policy makers, and third party
5 payers which are presented by the New Jersey Advisory Council on
6 End-of-Life Care in its report to the Governor and Legislature in
7 accordance with section 4 of P.L.2011, c.113;

8 (2) report on the performance goals and benchmarks developed
9 by the New Jersey Advisory Council on End-of-Life Care, pursuant
10 to P.L.2011, c.113, in order to measure the ability of the
11 Department of Health or other relevant State entities to provide
12 patient access to, and choice of, high quality, cost-effective
13 palliative care and end-of-life care, and assist patients and their
14 families in making informed health care decisions with regard to
15 such care; and

16 (3) study and make recommendations on strategies to further
17 improve the end-of-life care provided to the citizens of the State,
18 including, but not limited to, identifying and evaluating evidence
19 based best practices and standards for advancing palliative and
20 hospice care services for persons who are nearing end-of-life, and
21 minimizing disparities in the provision of palliative and end-of-life
22 care services.

23 b. Upon completion of the plan, the working group shall report
24 on its activities to the Senate Health, Human Services, and Senior
25 Citizens Committee and the Assembly Health Committee, or their
26 respective successors, and include a copy of the plan and any
27 recommendations for legislative action it deems appropriate. The
28 Commissioner of Health shall post the plan on the department's
29 Internet website.

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31 3. This act shall take effect immediately and shall expire upon
32 the completion of the plan by the working group pursuant to section
33 2 of this act.

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STATEMENT

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38 This bill establishes the 23-member Working Group on End-of-
39 Life Care and Palliative Care in the Department of Health (DOH).
40 The working group's membership would include: The
41 Commissioners of Health, Human Services, and Banking and
42 Insurance, and the Ombudsperson for the Institutionalized Elderly,
43 or their designees, who would serve ex officio; and 19 public
44 members appointed by the Commissioner of Health who would
45 include one representative each from the New Jersey Hospital
46 Association, the Health Care Association of New Jersey, the
47 Medical Society of New Jersey, the New Jersey Association of
48 Health Plans, AARP of New Jersey, the Home Care and Hospice

1 Association of New Jersey, the New Jersey Palliative Advance
2 Practice Nurse Consortium, the New Jersey Health Care Quality
3 Institute, the New Jersey Association of Mental Health and
4 Addiction Agencies, and the ARC of New Jersey; two physicians
5 licensed to practice in this State who have expertise in issues
6 relating to pain management or end-of-life care, at least one of
7 whom is an oncologist; one registered professional nurse licensed to
8 practice in this State; one person who is employed as a patient
9 advocate by a health care facility in this State; one person who
10 represents a faith-based organization; and four members of the
11 general public, two of whom have expertise or interest in the work
12 of the working group and are not licensed health care professionals,
13 and two of whom are family members of patients who have
14 received palliative and end-of-life care services.

15 The purpose of the working group would be to develop a plan to:
16 implement the legislative, administrative, and policy
17 recommendations for State agencies, policy makers, and third party
18 payers which are presented by the New Jersey Advisory Council on
19 End-of-Life Care in its report to the Governor and Legislature in
20 accordance with section 4 of P.L.2011, c.113; report on the
21 performance goals and benchmarks developed by the New Jersey
22 Advisory Council on End-of-Life Care to measure the ability of the
23 DOH or other relevant State entities to provide patient access to,
24 and choice of, high quality, cost-effective palliative care and end-
25 of-life care, and assist patients and their families in making
26 informed health care decisions with regard to such care; and study
27 and make recommendations on strategies to further improve the
28 end-of-life care provided to the citizens of the State.

29 The bill stipulates that upon the completion of the working
30 group's plan, the working group would report on its activities to the
31 Senate Health, Human Services, and Senior Citizens Committee and
32 the Assembly Health Committee, or their respective successors, and
33 include a copy of the plan and any recommendations for legislative
34 action it deems appropriate. The Commissioner of Health would
35 also post the plan on its Internet website.

36 The bill expires upon the completion of the plan by the working
37 group.