

LEGISLATIVE FISCAL ESTIMATE

[First Reprint]

ASSEMBLY, No. 1079

STATE OF NEW JERSEY 219th LEGISLATURE

DATED: JULY 29, 2020

SUMMARY

- Synopsis:** Requires certain health care professionals to undergo implicit bias training.
- Type of Impact:** Indeterminate, likely minimal increase in State costs.
- Agencies Affected:** Department of Health, University Hospital.

Office of Legislative Services Estimate

Fiscal Impact	<u>Annual</u>
State Cost Increase	Indeterminate

- The Office of Legislative Services (OLS) finds that this bill will result in an indeterminate, and likely minimal, increase in State costs for the Department of Health (DOH) to develop regulations requiring every hospital that provides inpatient maternity services and every licensed birthing center to implement an evidence-based implicit bias training program for all health professionals who regularly provide perinatal treatment and care at the facility.
- The OLS also concludes that University Hospital, an independent non-profit legal entity that is an instrumentality of the State, will experience an indeterminate increase in expenditures to develop and implement the evidence-based training program, and the biennial refresher course, required under the bill.

BILL DESCRIPTION

This bill would require every hospital that provides inpatient maternity services and every birthing center licensed in the State to implement an evidence-based implicit bias training program for all health professionals who routinely provide perinatal treatment and care to pregnant women at the hospital or birthing center. The bill defines “implicit bias” as a bias in judgment or behavior that results from subtle cognitive processes, including implicit prejudice and implicit stereotypes, which often operate at a level below conscious awareness and without intentional control.

The bias training program would include, but not be limited to: identifying previous and current unconscious biases and misinformation when providing perinatal treatment and care to pregnant women; identifying personal, interpersonal, institutional, and cultural barriers to inclusion; information about cultural identity across racial and ethnic groups; information about communicating more effectively across racial, ethnic, religious, and gender identities; discussions on power dynamics and organizational decision-making and their effects on implicit bias, and on health inequities and racial and ethnic disparities within the field of perinatal care, and how implicit bias may contribute to pregnancy-related deaths and maternal and infant health outcomes; and corrective measures to decrease implicit bias at the interpersonal and institutional levels.

All health care professionals who regularly provide perinatal treatment and care to pregnant women at a hospital or birthing center would be required to complete the training program, as well as a biennial refresher course designed to provide updated information about racial, ethnic, and cultural identity, and best practices in decreasing interpersonal and institutional implicit bias. Upon successful completion of the training program, the health care professional would receive a certification from the hospital or birthing center.

Under the bill, a hospital that implements an implicit bias training program would be required to structure the program in a manner that would permit participating physicians to be eligible to receive continuing education credits.

FISCAL ANALYSIS

EXECUTIVE BRANCH

None received.

OFFICE OF LEGISLATIVE SERVICES

The OLS finds that this bill will result in an indeterminate, although likely minimal, increase in State costs for the DOH to develop regulations governing the development and implementation, by hospitals that provide maternity services and licensed birthing centers, of an evidence-based implicit bias training program, as well as a biennial refresher course, for all health professionals that regularly provide perinatal treatment and care to pregnant women. To the extent that the DOH can adapt existing regulations to meet the requirements under the bill, State costs are expected to be minimal.

In addition, University Hospital, an independent non-profit legal entity that is an instrumentality of the State, will experience an indeterminate increase in expenditures to develop and implement the evidence-based training program, and the refresher course, required under the bill. However, pursuant to State law, each New Jersey hospital and birthing facility must require its health care professionals who provide labor, delivery, and postpartum care to complete a “standardized maternal patient discharge education module,” designed to educate staff on the complications, and associated warning signs, of childbirth. To the extent that University Hospital has completed development of this maternal patient discharge educational model, and can expand the module to meet the implicit bias training requirements mandated under this bill, costs to University Hospital could potentially be minimized.

Section: Human Services

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This legislative fiscal estimate has been produced by the Office of Legislative Services due to the failure of the Executive Branch to respond to our request for a fiscal note.

This fiscal estimate has been prepared pursuant to P.L.1980, c.67 (C.52:13B-6 et seq.).