

ASSEMBLY COMMERCE AND ECONOMIC DEVELOPMENT COMMITTEE

STATEMENT TO

ASSEMBLY COMMITTEE SUBSTITUTE FOR **ASSEMBLY, Nos. 4803 and 4811**

STATE OF NEW JERSEY

DATED: OCTOBER 21, 2020

The Assembly Commerce and Economic Development Committee reports favorably an Assembly Committee Substitute for Assembly Bill Nos. 4803 and 4811.

This committee substitute would require the New Jersey Office of Emergency Management to establish a process to evaluate, provide feedback on, and approve personal protective equipment (PPE) for use during public health emergencies. The committee substitute would also require the State to create PPE stockpiles for the State.

The approval process to be established under the committee substitute would allow businesses, that are not in the business of creating PPE, to create PPE during an emergency if those businesses are approved by the New Jersey Office of Emergency Management. During the COVID-19 pandemic, many businesses were not able to transition to creating PPE because the businesses were not approved by federal agencies. This issue exacerbated the shortage of PPE in the State.

The committee substitute would provide an entity or person a limited protection against liability for injury or death that may be attributable to the entity's or person's use of PPE approved through the process established under the committee substitute if the entity or person used the PPE for approved purposes.

The committee substitute would require the State to create two stockpiles of PPE. One stockpile would consist of federally approved PPE, and the other would consist of New Jersey Office of Emergency Management-approved PPE. To the extent feasible, 50 percent of each stockpile would consist of PPE made in New Jersey, and at least 66 percent of each stockpile would consist of PPE made in the United States.

During public health emergencies, the PPE in the stockpiles would be made available for free to the State and its political subdivisions. The remainder of the stockpiled PPE would be made available for purchase by private entities at market price, except that non-profits would pay 75% of market price during public health emergencies.