

ASSEMBLY JOINT RESOLUTION

No. 80

STATE OF NEW JERSEY

219th LEGISLATURE

INTRODUCED FEBRUARY 3, 2020

Sponsored by:

Assemblyman DANIEL R. BENSON

District 14 (Mercer and Middlesex)

Assemblywoman VALERIE VAINIERI HUTTLE

District 37 (Bergen)

Assemblyman BENJIE E. WIMBERLY

District 35 (Bergen and Passaic)

Co-Sponsored by:

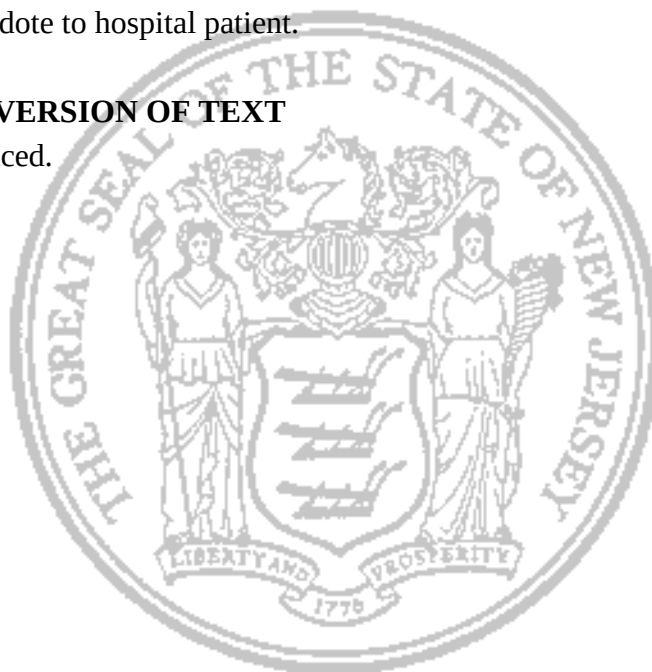
Assemblywoman Dunn

SYNOPSIS

Establishes temporary Commission on Opioid Antidote Administration and Aftercare to study and report on procedures to be used following administration of opioid antidote to hospital patient.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 7/23/2020)

1 **A JOINT RESOLUTION** establishing a temporary Commission on
2 Opioid Antidote Administration and Aftercare.

3

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

6

7 1. a. There is hereby established a Commission on Opioid
8 Antidote Administration and Aftercare.

9 b. The purpose of the commission shall be to:

10 (1) study and evaluate the various procedures that are used by
11 hospitals in this and other states when a patient is released from
12 hospital-based care following the administration of naloxone, or
13 other opioid antidote, thereto; and

14 (2) determine and recommend appropriate procedures and
15 protocols to be uniformly applied by hospitals in the State upon the
16 release of a patient under such circumstances. Such procedures and
17 protocols shall be designed to promote the health and facilitate the
18 recovery of the patient, to the maximum extent practicable.

19 c. The commission shall consist of 15 members, as follows:

20 (1) the Commissioner of Human Services; the Commissioner of
21 Health; the Director of the Division of Mental Health and Addiction
22 Services in the Department of Human Services; the Director of the
23 Division of Children's System of Care in the Department of
24 Children and Families; the Superintendent of State Police; the
25 President of the New Jersey Hospital Association; the President of
26 the New Jersey Chapter of the American Association of Healthcare
27 Administrative Management (AAHAM); and the President of the
28 Health Care Association of New Jersey, or the designees of such
29 persons; and

30 (2) seven public members, to be appointed as follows:

31 (a) two members to be appointed by the Senate President;

32 (b) one member to be appointed by the Senate Minority Leader;

33 (c) two members to be appointed by the Speaker of the General
34 Assembly;

35 (d) one member to be appointed by the Minority Leader of the
36 General Assembly; and

37 (e) one member to be appointed by the Governor.

38 The public members of the commission shall include persons
39 who have expertise or extensive experience in hospital-based care,
40 emergency medical services, or substance abuse treatment, or
41 persons who have successfully completed a substance abuse
42 treatment program, or who are the parents of persons who suffer
43 from substance abuse.

44 d. The members of the commission shall serve without
45 compensation, but shall be entitled to employ stenographic and
46 clerical assistance, and incur traveling and other miscellaneous
47 expenses as it may deem necessary to perform its duties, within the

1 limits of funds appropriated or otherwise made available to the
2 commission for its purposes.

3 e. Members of the commission shall be appointed within 60
4 days after the effective date of this resolution, and the commission
5 shall organize as soon as practicable after the appointment of its
6 members. Any vacancy in the membership of the commission shall
7 be filled in the same manner as the original appointment was made.
8 The commission shall select a chairperson from among its
9 members, and a secretary who need not be a member of the
10 commission. A majority of all the authorized members shall
11 constitute a quorum. The commission may conduct business
12 without a quorum, but may only vote on recommendations when a
13 quorum is present. The commission shall be entitled to call to its
14 assistance, and avail itself of the services of, the employees of any
15 State, county, or municipal department, board, bureau, commission,
16 authority, or agency as it may require, and as may be available to it
17 for its purposes.

18 f. The commission shall meet at the call of the chair, at the
19 times, and in the places, deemed appropriate to fulfill its duties.
20 The commission may also conduct public hearings, at the times and
21 places it designates, if deemed appropriate to fulfill its duties.

22 g. Within one year following the commission's organization, as
23 provided by subsection e. of this section, the commission shall
24 prepare and submit to the Governor, and, pursuant to section 2 of
25 P.L.1991, c.164 (C.52:14-19.1), to the Legislature, a report of its
26 findings and recommendations on the matters described in
27 subsection b. of this section. The commission shall expire on the
28 31st day following the date on which its report is issued under this
29 subsection.

30

31 2. This joint resolution shall take effect immediately, and shall
32 expire on the 31st day following the date of issuance of the
33 commission's report to the Governor and the Legislature, as
34 provided by section 1 of this resolution.

35

36

37

STATEMENT

38

39 This joint resolution would establish a Commission on Opioid
40 Antidote Administration and Aftercare. The commission would be
41 required to: (1) study and evaluate the various procedures that are
42 used by hospitals in this and other states when a patient is released
43 from hospital-based care following the administration of naloxone,
44 or other opioid antidote, thereto; and (2) determine and recommend
45 appropriate procedures and protocols to be uniformly applied by
46 hospitals in the State upon the release of a patient under such
47 circumstances. The bill would require such procedures and

1 protocols to promote the health and facilitate the recovery of the
2 patients involved, to the maximum extent practicable.

3 The commission would consist of 15 members, including the
4 Commissioner of Human Services; the Commissioner of Health; the
5 Director of the Division of Mental Health and Addiction Services in
6 the Department of Human Services; the Director of the Division of
7 Children's System of Care in the Department of Children and
8 Families; the Superintendent of State Police; the President of the
9 New Jersey Hospital Association; the President of the New Jersey
10 Chapter of the American Association of Healthcare Administrative
11 Management (AAHAM); and the President of the Health Care
12 Association of New Jersey, or the designees of these persons; and
13 seven public members, to be appointed as follows:

- 14 --two members appointed by the Senate President;
- 15 --one member appointed by the Senate Minority Leader;
- 16 --two members appointed by the Assembly Speaker;
- 17 --one member appointed by the Assembly Minority Leader; and
- 18 --one member appointed by the Governor.

19 The bill would require the commission's public members to
20 include persons who have expertise or extensive experience in
21 hospital-based care, emergency medical services, or substance
22 abuse treatment, or persons who have successfully completed a
23 substance abuse treatment program, or who are the parents of
24 persons who suffer from substance abuse.

25 The commission members would be appointed within 60 days
26 after the enactment of the resolution, and would be required to issue
27 a report of their findings and recommendations to the Governor and
28 Legislature within one year after the commission's organization.

29 The resolution and the commission would expire on the 31st day
30 following the submission of the commission's report.