

[Second Reprint]
SENATE, No. 2410

STATE OF NEW JERSEY
219th LEGISLATURE

INTRODUCED MAY 7, 2020

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District 31 (Hudson)

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SYNOPSIS

Establishes Coronavirus Disease 2019 (COVID-19) Pandemic Task Force on Racial and Health Disparities.

CURRENT VERSION OF TEXT

As amended by the Senate on October 29, 2020.



(Sponsorship Updated As Of: 11/19/2020)

1 AN ACT establishing the Coronavirus Disease 2019 (COVID-19)
 2 Pandemic Task Force on Racial and Health Disparities.

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 Coronavirus Disease 2019 (COVID-
 8 19) Pandemic Task Force on Racial and Health Disparities in the
 9 Department of Health.

10 a. The task force shall consist of ¹~~15~~ 21¹ members as
 11 follows:

12 (1) the Chief Diversity Officer ²~~of New Jersey~~²; a
 13 representative of the Department of Health whose duties or
 14 expertise includes expanding access by minority populations to
 15 clinically appropriate healthcare services or eliminating
 16 discrimination in the implementation of healthcare programs,
 17 policies, or initiatives; ¹a representative of the Department of
 18 Community Affairs; a representative of the Department of Human
 19 Services; a representative of the Department of Children and
 20 Families; a representative of the Housing and Mortgage Financing
 21 Agency;¹ and a representative of the Office of Emergency
 22 Management;

23 (2) two members of the Senate, one of whom shall be a member
 24 of the New Jersey Black Legislative Caucus, and one of whom shall
 25 be a member of the New Jersey Latino Caucus, appointed by the
 26 Senate President;

27 (3) two members of the General Assembly, one of whom shall
 28 be a member of the New Jersey Black Legislative Caucus, and one
 29 whom shall be a member of the New Jersey Latino Caucus,
 30 appointed by the Speaker of the General Assembly; and

31 (4) ¹~~8~~ ten¹ public members appointed by the Governor, who
 32 shall include: a representative of the New Jersey Institute for Social
 33 Justice; a representative of a federally qualified health center; a
 34 physician licensed to practice in this State who specializes in providing
 35 care to patients in the State's minority and vulnerable communities; a
 36 nurse licensed to practice in this State who specializes in providing
 37 care to patients in the State's minority and vulnerable communities
 38 who may be a school nurse; a representative of a general hospital
 39 located in the State's minority and vulnerable communities ¹with
 40 direct experience working with minority and vulnerable communities;
 41 a representative of the Maternal and Child Health Consortia¹; a
 42 representative of the New Jersey Urban Mayor's Association; and
 43 ¹~~two~~ three¹ representatives of ¹~~two~~ three¹ different non-profit
 44 organization that conduct research, education, and training on, and

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:

¹Senate SHH committee amendments adopted October 8, 2020.

²Senate floor amendments adopted October 29, 2020.

- 1 develop policy initiatives to **1**, **1** address¹,¹ health equity in this
2 State.
- 3 b. Vacancies in the membership of the task force shall be filled
4 in the same manner provided for the original appointments. The
5 public members of the task force shall serve without compensation
6 but may be reimbursed for traveling and other miscellaneous
7 expenses necessary to perform their duties within the limits of funds
8 made available to the task force for its purposes.
- 9 c. The task force shall organize as soon as practicable after the
10 appointment of its members and shall select a chairperson and vice-
11 chairperson from among its members. The chairperson shall
12 appoint a secretary who need not be a member of the task force.
- 13 d. The task force may meet at the call of its chairperson and
14 hold 'at a minimum, three public' hearings, 'with at least one
15 hearing to be held in each of the northern, southern, and central
16 regions of the State, which hearings shall be conducted' remotely,
17 as appropriate, by telephone, computer, or other means of live audio
18 or video communication, at the times and in the places it deems
19 appropriate and necessary to fulfill its charge. The task force shall
20 be entitled to call to its assistance, and avail itself of the services of
21 the employees of, any State, county, or municipal department,
22 board, bureau, commission, or agency as it may require and as may
23 be available to it for its purposes.
- 24 e. ²**1**The Chief Diversity Officer of New Jersey shall consult
25 with members of the Governor's cabinet on matters related to the
26 functions of the task force, and shall invite representatives of any
27 State department to attend hearings called by the chairperson of the
28 task force, as appropriate.
- 29 f. ²**1**The Department of Health shall provide staff services to the
30 task force.
- 31
- 32 2. The purpose of the task force shall be to:
- 33 a. conduct a thorough and comprehensive study on the 'ways
34 in which, and the' reasons **1**how why, the **1**COVID-19
35 coronavirus disease 2019 (COVID-19)' pandemic has
36 disproportionately affected the State's minority and vulnerable
37 communities, and the short-term and long-term consequences of the
38 pandemic on these communities;
- 39 b. improve existing data systems to ensure that the health
40 information that is collected relating to COVID-19 infections and
41 deaths, **1**include includes' specific race, ethnicity, and
42 demographic identifiers to develop a better statistical understanding
43 of how the COVID-19 pandemic has affected the State's minority
44 and vulnerable communities;
- 45 c. evaluate the issues relating to the quality of, and access to,
46 'physical and mental health' treatment and services provided to

1 various racial and ethnic populations in the State during the
2 COVID-19 pandemic; ¹**and**¹

3 d. ¹solicit and receive testimony from members of the State's
4 minority and vulnerable communities concerning their experiences
5 during the COVID-19 pandemic;

6 e.¹ develop effective strategies to:

7 (1) address the racial, ethnic, and health disparities, and
8 historical and systematic inequalities pertaining to race and
9 ethnicity that have amplified the death rate in the State's minority
10 and vulnerable communities during the COVID-19 pandemic; and

11 (2) reduce and eliminate disparities among the various racial
12 and ethnic populations within the State's minority and vulnerable
13 communities with respect to health status, access to high-quality
14 health care, and utilization of health care services ¹;

15 f. evaluate the communication, messaging, and dissemination
16 of information regarding testing, contact tracing, and other related
17 public health approaches necessary to achieve health care equity
18 and cultural competence in the provision of physical and mental
19 health treatment and services to the State's minority and vulnerable
20 communities during the COVID-19 pandemic;

21 g. evaluate impediments that may interfere with an individual's
22 ability to quarantine or isolate during the COVID-19 pandemic;

23 h. analyze the distribution of resources, including personal
24 protective equipment and food, in the State's minority and
25 vulnerable communities;

26 i. examine the impact of the COVID-19 pandemic on the
27 physical and mental health of essential employees from the State's
28 minority and vulnerable communities;

29 j. examine the impact of the COVID-19 pandemic on access to
30 child care services in the State's minority and vulnerable
31 communities;

32 k. investigate the prevalence of intimate partner violence in the
33 State's minority and vulnerable communities during the COVID-19
34 pandemic; and

35 l. identify best practices, opportunities for shared services, or
36 potential partnerships that would increase the communication of
37 health care information and materials in multiple languages for
38 members of the State's minority and vulnerable communities,
39 including persons with developmental disabilities and senior
40 citizens¹ .

41
42 3. a. No later than one year after the public health emergency
43 declared ¹**pursuant to P.L.2005, c.222 (C.26:13-1 et seq.)**¹ in
44 response to the coronavirus disease 2019 (COVID-19) is lifted, the
45 task force shall report to the Governor and, pursuant to section 2 of
46 P.L.1991, c.164 (C.52:14-19.1), to the Legislature, on the activities

- 1 of the task force and its findings and recommendations on strategies
2 to:
- 3 (1) address the racial, ethnic, and health disparities and
4 historical and systematic inequalities pertaining to race and
5 ethnicity that have amplified the death rate in the State's minority
6 and vulnerable communities during the COVID-19 pandemic;
- 7 (2) address the short- and long-term consequences of the
8 COVID-19 pandemic on the State's minority and vulnerable
9 communities; and
- 10 (3) reduce and eliminate disparities among the various racial
11 and ethnic populations within the State's minority and vulnerable
12 communities with respect to health status, access to high-quality
13 health care, and utilization of health care services.
- 14 b. The task force shall expire 30 days after the issuance of its
15 report.
- 16
- 17 4. This act shall take effect immediately.