

SENATE HEALTH, HUMAN SERVICES AND SENIOR CITIZENS COMMITTEE

STATEMENT TO

SENATE, No. 2410

with committee amendments

STATE OF NEW JERSEY

DATED: OCTOBER 8, 2020

The Senate Health, Human Services and Senior Citizens Committee reports favorably and with committee amendments Senate Bill No. 2410.

As amended by the committee, this bill establishes the Coronavirus Disease 2019 (COVID-19) Pandemic Task Force on Racial and Health Disparities (task force) in the Department of Health.

The task force is to consist of 21 members as follows: (1) the Chief Diversity Officer of New Jersey; a representative of the Department of Health whose duties or expertise includes expanding access by minority populations to clinically appropriate healthcare services or eliminating discrimination in the implementation of healthcare programs, policies, or initiatives; a representative of the Department of Community Affairs; a representative of the Department of Human Services; a representative of the Department of Children and Families; a representative of the Housing and Mortgage Financing Agency; and a representative of the Office of Emergency Management; (2) two members of the Senate, one of whom is to be a member of the New Jersey Black Legislative Caucus, and one of whom is to be a member of the New Jersey Latino Caucus, appointed by the Senate President; (3) two members of the General Assembly, one of whom is to be a member of the New Jersey Black Legislative Caucus, and one whom is to be a member of the New Jersey Latino Caucus, appointed by the Speaker of the General Assembly; and (4) 10 public members appointed by the Governor, who are to include: a representative of the New Jersey Institute for Social Justice; a representative of a federally qualified health center; a physician licensed to practice in New Jersey who specializes in providing care to patients in the State's minority and vulnerable communities; a nurse licensed to practice in this State who specializes in providing care to patients in the State's minority and vulnerable communities who may be a school nurse; a representative of a general hospital located in the State's minority and vulnerable communities with direct experience working with minority and vulnerable communities; a representative of the Maternal and Child Health Consortia; a representative of the

New Jersey Urban Mayor's Association; and three representatives of three different non-profit organizations that conduct research, education, and training on, and develop policy initiatives to address, health equity in this State.

The purpose of the task force is to: conduct a thorough and comprehensive study on the reasons how the COVID-19 pandemic has disproportionately affected the State's minority and vulnerable communities, and the short-term and long-term consequences of the pandemic on these communities; improve existing data systems to ensure that the health information that is collected relating to COVID-19 infections and deaths includes specific race, ethnicity, and demographic identifiers to develop a better statistical understanding of how the COVID-19 pandemic has affected the State's minority and vulnerable communities; evaluate the issues relating to the quality of, and access to, physical and mental health treatment and services provided to various racial and ethnic populations in the State during the COVID-19 pandemic; solicit and receive testimony from members of the State's minority and vulnerable communities concerning their experiences during the COVID-19 pandemic; develop effective strategies to: address the racial, ethnic, and health disparities, and historical and systematic inequalities pertaining to race and ethnicity, that have amplified the death rate in the State's minority and vulnerable communities during the COVID-19 pandemic; reduce and eliminate disparities among the various racial and ethnic populations within the State's minority and vulnerable communities with respect to health status, access to high-quality health care, and utilization of health care services; evaluate communication, messaging, and dissemination of information regarding testing, contact tracing, and other related public health approaches necessary to achieve health care equity and cultural competence in the provision of physical and mental health treatment and services to the State's minority and vulnerable communities during the COVID-19 pandemic; evaluate impediments that may interfere with an individual's ability to quarantine or isolate; analyze the distribution of resources, including personal protective equipment and food, in the State's minority and vulnerable communities; examine the impact of the COVID-19 pandemic on the physical and mental health of essential employees from the State's minority and vulnerable communities; examine the impact of the COVID-19 pandemic on access to child care services in the State's minority and vulnerable communities; investigate the prevalence of intimate partner violence in the State's minority and vulnerable communities during the COVID-19 pandemic; and identify best practices, opportunities for shared services, or potential partnerships that would increase the communication of health care information and materials in multiple languages for members of the State's minority and vulnerable communities, including persons with developmental disabilities and senior citizens.

As reported by the committee with amendments, Senate Bill No. 2410 is identical to Assembly Bill No. 4004 (1R), which was also amended and reported by the committee on this date.

COMMITTEE AMENDMENTS

The committee amended the bill to increase the membership of the task force from 15 to 21 members. The additional members include: one representative each of the Department of Community Affairs, the Department of Human Services, the Department of Children and Families, and the Housing and Mortgage Financing Agency; a representative of the Maternal and Child Health Consortia; and one additional representative of a non-profit organization that conducts research, education, and training on, develop policy initiatives to address health equity in the State.

The committee amendments clarify that the task force member who is a representative of a general hospital located in the State's minority and vulnerable communities is to have direct experience working with minority and vulnerable communities.

The committee amendments stipulate that the task force is to hold, at a minimum, three public hearings, with at least one hearing to be held in each of the northern, southern, and central regions of the State.

The amendments expand and clarify the duties of the task force, including to clarify that the task force is to: evaluate issues relating to both physical and mental health, develop outreach strategies to achieve equity and cultural competence in health services provided, analyze the distribution of available resources, assess specific populations and behavioral trends, and identify best practices with regard to the effects of the COVID-19 pandemic on minority and vulnerable communities.

The committee amendments also make technical changes as to grammar, punctuation, syntax, and usage, including a change to the synopsis.