

[Third Reprint]

**SENATE, No. 2759**

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**STATE OF NEW JERSEY**

**219th LEGISLATURE**

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INTRODUCED JULY 30, 2020

**Sponsored by:**

**Senator JOSEPH F. VITALE**

**District 19 (Middlesex)**

**Senator FRED H. MADDEN, JR.**

**District 4 (Camden and Gloucester)**

**Co-Sponsored by:**

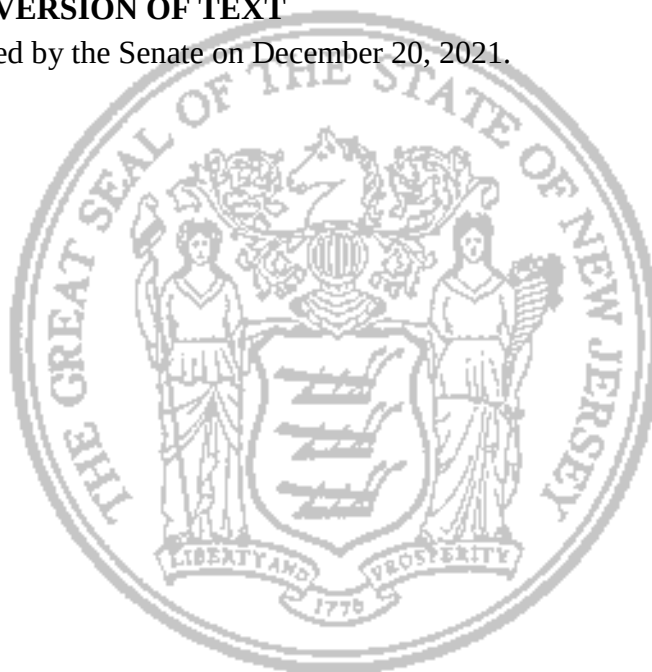
**Senators Pou and Singleton**

**SYNOPSIS**

Establishes additional requirements for DOH to assess sanctions and impose penalties on nursing homes; revises reporting requirements for nursing homes.

**CURRENT VERSION OF TEXT**

As amended by the Senate on December 20, 2021.



**(Sponsorship Updated As Of: 1/21/2021)**

1 AN ACT concerning <sup>1</sup>**[long-term care facilities]** nursing homes<sup>1</sup> and  
 2 supplementing Title 26 of the Revised Statutes.

3  
 4 **BE IT ENACTED** by the Senate and General Assembly of the State  
 5 of New Jersey:

6  
 7 <sup>2</sup>**[1. <sup>1</sup>No later than 60 days after the effective date of this act,**  
 8 **the]** a. The<sup>1</sup> Department of Health shall develop a system of scaling  
 9 actions and penalties for repeat violations of State and federal  
 10 requirements for <sup>1</sup>**[long-term care facility]** nursing home<sup>1</sup>  
 11 administration and operations, which actions and penalties shall  
 12 include:

13 <sup>1</sup>**[a. Conducting a licensure survey of a long-term care facility]**  
 14 (1) Developing a special focus survey program for nursing homes<sup>1</sup>  
 15 with <sup>1</sup>[three or more] a history, over the past three inspection cycles,  
 16 of chronic, repeat<sup>1</sup> violations <sup>1</sup>**[in a single year at least once every two**  
 17 **years for the next four years, or at more frequent intervals for a period**  
 18 **longer than four years, if circumstances warrant greater or more**  
 19 **frequent oversight]** of State or federal requirements for nursing home  
 20 administration and operations or a history of noncompliance with  
 21 corrective plans or other disciplinary actions instituted by the  
 22 department, which program shall include the use of additional, focused  
 23 surveys to determine whether the nursing home is taking appropriate  
 24 steps to remediate the conditions that contributed to the violations that  
 25 resulted in the nursing home being included in the program and  
 26 violations occurring while the nursing home is in the program. The  
 27 program shall incorporate more-stringent penalties, sanctions, and  
 28 corrective measures, including suspension or revocation of the nursing  
 29 home's license or issuing a recommendation that the nursing home's  
 30 contract with the federal Centers for Medicare and Medicaid Services  
 31 be terminated, for issues that are of longer duration or where the  
 32 nursing home fails to demonstrate improvement following the  
 33 imposition of less-stringent penalties, sanctions, or corrective  
 34 measures. A nursing home included in the program shall remain in the  
 35 program for a period of at least 18 months. Any nursing home that  
 36 qualifies for inclusion in the federal Centers for Medicare and  
 37 Medicaid Services' Special Focus Facility Program that is not placed  
 38 in that program shall be automatically included in the special focus  
 39 survey program established pursuant to this subsection<sup>1</sup> ; and

40 <sup>1</sup>**[b.] (2)**<sup>1</sup> Assessing enhanced sanctions and other penalties for  
 41 continued or repeat noncompliance with department regulations,  
 42 particularly when the <sup>1</sup>**[facility]** nursing home<sup>1</sup> is cited <sup>1</sup>**[multiple]**  
 43 two or more<sup>1</sup> times for the same violation <sup>1</sup>within a six-month period<sup>1</sup>  
 44 or when violations involve noncompliance with infection control

**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:

<sup>1</sup>Senate SBA committee amendments adopted January 21, 2021.

<sup>2</sup>Senate floor amendments adopted December 2, 2021.

<sup>3</sup>Senate floor amendments adopted December 20, 2021.

1 requirements, which enhanced sanctions and penalties shall include:

2 <sup>1</sup>[(1)] (a) a series of escalating fines for repeated violations or  
3 multiple violations by the same <sup>1</sup>[facility] nursing home<sup>1</sup>, as well as  
4 increased fines when a violation results in severe adverse health  
5 consequences for a resident or staff member of the <sup>1</sup>[facility] nursing  
6 home<sup>1</sup>; and

7 <sup>1</sup>[(2)] (b) a series of escalating licensure actions for repeated  
8 violations or multiple violations by the same <sup>1</sup>[facility] nursing home<sup>1</sup>  
9, particularly in cases where a violation results in severe adverse health  
10 consequences for a resident or staff member at the <sup>1</sup>[facility] nursing  
11 home<sup>1</sup>, which licensure actions shall include: suspending,  
12 terminating, or revoking the <sup>1</sup>[facility's] nursing home's<sup>1</sup> license;  
13 issuing a recommendation that the nursing home's contract with the  
14 federal Centers for Medicare and Medicaid Services be terminated;  
15 requiring the appointment of an independent manager to assume  
16 control over operations at the nursing home on a temporary basis;  
17 denying payment for all Medicaid claims submitted by the nursing  
18 home;<sup>1</sup> restricting new admissions to the <sup>1</sup>[facility] nursing home,  
19 which may include prohibiting the nursing home from accepting any  
20 new residents who are Medicaid beneficiaries<sup>1</sup>; requiring the transfer  
21 of residents to another <sup>1</sup>[facility] nursing home; requiring closure of  
22 the nursing home and immediate transfer of all the nursing home's  
23 residents to another nursing home; requiring additional monitoring of  
24 the nursing home, which may include placing the nursing home in the  
25 special focus survey program established pursuant to paragraph (1) of  
26 this subsection; establishing a directed plan of correction; requiring  
27 nursing home staff and administrators to undergo directed in-service  
28 training<sup>1</sup>; <sup>1</sup>[Or, in the case of a nursing home,]<sup>1</sup> petitioning a court of  
29 competent jurisdiction for appointment of a receiver in accordance  
30 with the provisions of P.L.1977, c.238 (C.26:2H-36 et seq.) <sup>1</sup>; or  
31 taking any other administrative or disciplinary actions as may be  
32 established by the Commissioner of Health by regulation, which may  
33 be subject to approval by the federal Centers for Medicare and  
34 Medicaid Services, if such approval is required<sup>1</sup>.

35 <sup>1</sup>[c.] b. The department shall <sup>1</sup>[evaluate staffing levels and  
36 competency by resident acuity and complexity, and]<sup>1</sup> establish a  
37 system to impose greater responsibility on each <sup>1</sup>[long-term care  
38 facility's] nursing home's<sup>1</sup> medical director for quality outcomes at  
39 the <sup>1</sup>[facility, including imposing specific penalties or sanctions  
40 against the medical director for repeated failure to produce  
41 improvements in quality outcomes at the facility] nursing home,  
42 consistent with standards and guidelines promulgated by the federal  
43 Centers for Medicare and Medicaid Services for state surveys of  
44 nursing home medical directors<sup>1</sup>.]<sup>2</sup>

45  
46 <sup>2</sup>1. A nursing home, as defined under section 1 of P.L.1975,  
47 c.397 (C.26:2H-29), cited for the same or a substantially similar F-

1 level deficiency or higher, as outlined in federal Centers for  
2 Medicare and Medicaid Services guidance, at any point over a  
3 three-year period during any standard or special survey conducted  
4 pursuant to 42 U.S.C. s.488.308 or any other inspection conducted  
5 by the Department of Health, or any third-party contractor or  
6 instrumentality thereof, pursuant to State or federal law or  
7 regulation, including in response to a complaint, shall be subject to  
8 a penalty that shall be more severe than the penalty imposed for the  
9 previous violation. The department may impose additional  
10 penalties, sanctions, or corrective measures pursuant to regulation  
11 when such deficiencies or violations involve noncompliance with  
12 infection control requirements or result in severe adverse health  
13 consequences for a resident or staff member of the nursing home.  
14 This section shall not be construed to diminish any authority of the  
15 Department of Health or any other department that exists pursuant  
16 to any other law, rule, or regulation.<sup>2</sup>

17  
18 2. To facilitate enforcement of department rules and requirements  
19 concerning <sup>1</sup>‘[long-term care facility] nursing home<sup>1</sup> operations, <sup>1</sup>‘[no  
20 later than 60 days after the effective date of this act,]’ the department  
21 shall request and consolidate data concerning <sup>1</sup>‘[long-term care  
22 facilities] nursing homes<sup>1</sup> reported to other State and federal  
23 authorities, including the federal Centers for Medicare and Medicaid  
24 Services, the Department of Human Services, Medicaid managed care  
25 <sup>1</sup>‘[plans] organizations<sup>1</sup>, and the Long-Term Care Ombudsman, in  
26 order to identify <sup>1</sup>‘[long-term care facilities] nursing homes<sup>1</sup> with  
27 consistent or repeated performance issues, ongoing compliance issues,  
28 or high numbers of substantiated complaints. The department shall  
29 make the consolidated data collected under this subsection available  
30 upon request to other State and federal entities having jurisdiction over  
31 <sup>1</sup>‘[long-term care facilities] nursing homes<sup>1</sup> in the State.

32  
33 3. a. <sup>1</sup>‘[No later than 60 days after the effective date of this act,  
34 the] The<sup>1</sup> the department shall undertake a review of reporting  
35 requirements for <sup>1</sup>‘[long-term care facilities] nursing homes<sup>1</sup> and  
36 shall take steps to standardize and consolidate the reporting  
37 requirements for the purpose of: reducing the administrative  
38 demand on <sup>1</sup>‘[the facilities of] nursing homes in<sup>1</sup> complying with  
39 reporting requirements; developing updated standardized data  
40 reporting requirements; and improving the utility of the reported  
41 data and the ability to share the data across systems, including <sup>2</sup>, as  
42 appropriate,<sup>2</sup> systems maintained by other State departments and  
43 agencies, county and local agencies, and federal authorities. The  
44 department’s review shall include:

- 45 (1) identifying and eliminating duplicative reporting;  
46 (2) establishing standardized formats, requirements, protocols,  
47 and systems for data reporting, which may include requiring

1   <sup>1</sup>‘[facilities] nursing homes<sup>1</sup> to report data in machine-readable  
2   formats to facilitate the processing and analysis of reported data;  
3   (3) establishing a centralized, cross-agency workgroup to  
4   monitor <sup>1</sup>‘[long-term care facility] nursing home<sup>1</sup> reporting;  
5   (4) assessing State health information technology needs to  
6   support technology-enabled and data-driven regulatory oversight  
7   across State departments and agencies, anticipate potential uses for  
8   the enhanced technologies and systems, enable systems to readily  
9   accept and analyze additional data metrics required pursuant to  
10   subsection b. of this section, and identify opportunities to centralize  
11   and modernize State health data infrastructure, processes, and  
12   analytic capabilities;  
13   (5) assessing <sup>1</sup>‘[long-term care facility] nursing home<sup>1</sup> health  
14   information technology needs to support population health  
15   management, interoperability, and modernized reporting  
16   requirements; and  
17   (6) identifying and applying for federal funding to support  
18   health information technology infrastructure development.  
19   b. (1) The department shall require all <sup>1</sup>‘[long-term care  
20   facilities to file with the department monthly and quarterly  
21   unaudited financial information, quarterly unaudited financial  
22   statements, annual audited financial statements, and such other  
23   financial information as the department may request. The  
24   information and statements reported by facilities pursuant to this  
25   paragraph shall be posted on the department’s] nursing homes to  
26   post on their<sup>1</sup> Internet <sup>1</sup>‘[website and updated as the information or  
27   statements become available] websites annual owner-certified  
28   financial statements along with the nursing home’s most recent cost  
29   reports submitted to the federal Centers for Medicare and Medicaid  
30   Services. The department shall include on its Internet website a  
31   link to the page where each nursing home’s certified financial  
32   statements and cost reports are posted. Nursing homes that are part  
33   of a health care system may post financial statements and cost  
34   reports pursuant to this paragraph that aggregate the financial data  
35   across all nursing homes that are a part of that health care system<sup>1</sup> .  
36   <sup>3</sup>A nonprofit nursing home that posts a copy of its most recent  
37   Internal Revenue Service Form 990 on its Internet website shall be  
38   deemed to have met the requirement for the nursing home to post an  
39   owner-certified financial statement on its Internet website pursuant  
40   to this paragraph, and the nursing home’s posted Internal Revenue  
41   Service Form 990 shall be considered an owner-certified financial  
42   statement for the purposes of this paragraph and subparagraph (d)  
43   of paragraph (1) of subsection f. of this section.<sup>3</sup>  
44   (2) The department shall require all <sup>1</sup>‘[long-term care facilities]  
45   nursing homes<sup>1</sup> to <sup>2</sup>‘[annually report to the department the  
46   number]<sup>2</sup> <sup>1</sup>‘[and severity]<sup>1</sup> <sup>2</sup>‘[of facility-acquired infections  
47   occurring among residents of the]<sup>2</sup> <sup>1</sup>‘[long-term care facility]  
48   <sup>2</sup>‘[nursing home]<sup>1</sup> in the preceding year involving]<sup>2</sup> :

- 1 (a) <sup>2</sup>**[Methicillin-resistant Staphylococcus aureus (MRSA);**  
2 (b) Clostrum difficile (C.Diff);  
3 (c) Surgical Site Infections After Colon Surgery (SSi-Colon);  
4 (d) Central Line-Associated Bloodstream Infections (CLABSI);  
5 (e) Catheter-Associated Urinary Tract Infections (CAUTI); and  
6 (f) any other facility-acquired infection for which the  
7 department requires annual reporting pursuant to regulations  
8 adopted by the Commissioner of Health**]** participate in the National  
9 Health Care Safety Network's Long-term Care Facility Component;  
10 (b) complete the network's long-term care facility annual facility  
11 survey; and  
12 (c) participate in the network's long-term care facility monthly  
13 reporting plan, including:  
14 (i) the healthcare-associated infection reporting modules for  
15 urinary tract infections, the laboratory-identified event module for  
16 Clostrum difficile (C.diff) infection and multidrug-resistant  
17 organisms, and prevention measures; and  
18 (ii) the monthly reporting plan for prevention process measures,  
19 including hand hygiene, gloves, and gown adherence<sup>2</sup> .  
20 c. The department <sup>2</sup>**[shall]** may<sup>2</sup> develop additional data  
21 reporting requirements for <sup>1</sup>**[long-term care facilities]** nursing  
22 homes<sup>1</sup> as are necessary to improve <sup>2</sup>**[market]**<sup>2</sup> transparency and  
23 facilitate the department's ability to oversee and regulate operations  
24 in <sup>1</sup>**[long-term care facilities]** nursing homes<sup>1</sup> , including, but not  
25 limited to, data related to occupancy, operating expenses and other  
26 appropriate financial metrics, and utilization and staffing data. In  
27 developing additional reporting requirements pursuant to this  
28 subsection, the department shall solicit feedback from <sup>1</sup>**[long-term**  
29 **care facilities]** nursing homes<sup>1 2</sup> , advocacy groups for nursing home  
30 residents and their families, the New Jersey Long-Term Care  
31 Ombudsman,<sup>2</sup> and <sup>1</sup>Medicaid<sup>1</sup> managed care <sup>1</sup>**[plans]**  
32 organizations<sup>1</sup> concerning proposed new data metrics, methods of  
33 maximizing the efficiency of data collection and specification,  
34 minimizing duplicative data reporting, and identifying ways to  
35 consolidate, automate, or streamline the data required to be reported  
36 by State and federal agencies and managed care <sup>1</sup>**[plans]**  
37 organizations<sup>1</sup> .  
38 d. <sup>1</sup>**[No later than 30 days after the effective date of this act,**  
39 **the]** The<sup>1</sup> department shall establish centralized State protocols for  
40 <sup>1</sup>**[long-term care facility]** nursing home<sup>1</sup> communications to reduce  
41 duplicative outreach and enhance information sharing capabilities.  
42 e. The department shall require <sup>1</sup>**[long-term care facilities]**  
43 nursing homes<sup>1</sup> to:  
44 (1) post on their Internet websites <sup>1</sup>**[any policies or plans**  
45 **required to be in place at the facility pursuant to State law]** a link to  
46 the dashboard developed and maintained by the department  
47 pursuant to paragraph (1) of subsection f. of this section<sup>1</sup> ; and

1 (2) <sup>1</sup> **have a dedicated** designate a<sup>1</sup> staff person <sup>1</sup> **available at**  
2 **all times to respond** who shall be responsible for responding<sup>1</sup> to  
3 questions from the public concerning the <sup>1</sup> nursing home, including  
4 questions about the nursing home's<sup>1</sup> policies <sup>1</sup> **and plans required**  
5 **to be posted on the facility's Internet website under paragraph (1) of**  
6 **this subsection** , procedures, and operations<sup>1</sup> . The contact  
7 information for <sup>1</sup> **the facility's designated staff person** members of  
8 the public to direct questions and request information<sup>1</sup> shall be  
9 posted on the <sup>1</sup> **facility's** nursing home's<sup>1</sup> Internet website.

10 f. <sup>2</sup> **(1)**<sup>2</sup> The department shall <sup>2</sup> **analyze data reported by**<sup>2</sup>  
11 <sup>1</sup> **long-term care facilities** <sup>2</sup> nursing homes<sup>1</sup> for oversight  
12 purposes and shall make the results of its analysis public whenever  
13 possible <sup>1</sup> , provided that in no case shall the department make  
14 public any data or information it deems to be confidential or  
15 proprietary in nature or that it deems to be a trade secret<sup>1</sup> . At a  
16 minimum, the department shall:

17 (1)<sup>2</sup> develop, make available on its Internet website, and  
18 update at least <sup>1</sup> **monthly** quarterly<sup>1</sup> , a data dashboard that  
19 <sup>2</sup> **includes the** provides a separate page or listing for each nursing  
20 home licensed in the State with links to the sites where information  
21 and<sup>2</sup> data <sup>2</sup> **reported by each** relevant to the<sup>2</sup> <sup>1</sup> **long-term care**  
22 **facility** nursing home<sup>1</sup> <sup>2</sup> **licensed in the State, including** may be  
23 found, as well as a description of the data and information that is  
24 accessible through each link. The data dashboard shall be  
25 searchable by nursing home. The data and information links  
26 available through the dashboard shall include, at a minimum, for  
27 each nursing home<sup>2</sup> :

28 (a) <sup>1</sup> **an overall performance score** the nursing home's star  
29 rating issued by the federal Centers for Medicare and Medicaid  
30 Services<sup>1</sup> ;

31 (b) the total number of complaints involving the <sup>1</sup> **facility**  
32 nursing home<sup>1</sup> , the number and nature of substantiated complaints  
33 involving the <sup>1</sup> **facility** nursing home<sup>1</sup> , the number of open  
34 investigations of complaints involving <sup>1</sup> **facility** the nursing  
35 home<sup>1</sup> , and the total number of outstanding complaints involving  
36 the <sup>1</sup> **facility** nursing home<sup>1</sup> that have not been investigated or  
37 resolved;

38 (c) <sup>1</sup> **the facility's star rating issued by the federal Centers for**  
39 **Medicare and Medicaid Services**;

40 (d)<sup>1</sup> the dates and results of inspections <sup>1</sup> and surveys<sup>1</sup> of the  
41 <sup>1</sup> **facility** nursing home<sup>1</sup> by the Department of Health, the  
42 Department of Human Services, and the federal Centers for  
43 Medicare and Medicaid Services, including links to any deficiencies  
44 or violations for which the <sup>1</sup> **facility** nursing home<sup>1</sup> was cited and  
45 to any corrective action plans in place at the <sup>1</sup> **facility** nursing  
46 home<sup>1</sup> ;

1       <sup>1</sup>[(e)] (d)<sup>1</sup> a <sup>1</sup>breakdown of any costs and financial data  
2 reported by the facility link to the website where each nursing  
3 home's certified financial statements and the nursing home's cost  
4 reports submitted to the federal Centers for Medicare and Medicaid  
5 Services are posted<sup>1</sup> ;

6       <sup>1</sup>[(f)] (e)<sup>1</sup> general staffing levels at the <sup>1</sup>facility nursing  
7 home<sup>1</sup> and <sup>2</sup>, to the extent feasible,<sup>2</sup> rates of compliance with  
8 mandatory staffing ratios <sup>2</sup>[, along with the average and overall  
9 number of shifts during which the <sup>1</sup>facility nursing home<sup>1</sup> was  
10 out of compliance with staffing ratios]<sup>2</sup> ;

11       <sup>1</sup>[(g)] (f)<sup>1</sup> the frequency with which antipsychotic medication  
12 was administered to <sup>1</sup>facility<sup>1</sup> residents <sup>1</sup>of the nursing home<sup>1</sup> ;

13       <sup>1</sup>[(h)] (g)<sup>1</sup> the number of residents who developed a pressure  
14 ulcer, including the number of residents who developed multiple  
15 pressure ulcers;

16       <sup>1</sup>[(i)] (h)<sup>1</sup> the number of <sup>2</sup>each type of<sup>2</sup> facility-acquired  
17 <sup>2</sup>infections infection<sup>2</sup> at the <sup>1</sup>facility nursing home<sup>1</sup> as reported  
18 <sup>2</sup>to the National Health Care Safety Network's Long-term Care  
19 Facility Component<sup>2</sup> pursuant to paragraph (2) of subsection b. of  
20 this section <sup>1</sup>[, including details concerning the relative severity of  
21 the facility-acquired infections]<sup>1</sup> ; and

22       <sup>1</sup>[(j)] (i)<sup>1</sup> such other data as the department determines  
23 appropriate to allow the public to make informed choices when  
24 evaluating and selecting a <sup>1</sup>long-term care facility nursing home<sup>1</sup>  
25 <sup>2</sup>[-; and] <sup>2</sup>.

26       (2) <sup>2</sup>The department shall<sup>2</sup> prepare and publish on its Internet  
27 website annual reports on New Jersey's <sup>1</sup>long-term care nursing  
28 home<sup>1</sup> system of care.

29       <sup>2</sup>[<sup>1</sup>g. The department shall utilize the data dashboard established  
30 pursuant to paragraph (1) of subsection f. of this section to develop  
31 a performance improvement plan for all nursing homes throughout  
32 the State, as well as to identify areas in need of improvement and  
33 strategies to facilitate performance improvement in individual  
34 nursing homes. In developing a Statewide performance  
35 improvement plan, the department may consult with the Nursing  
36 Home Advisory Council established pursuant to section 4 of this  
37 act.<sup>1</sup>]

38       (3) For the purposes of making available to the public the data  
39 described in subparagraph (h) of paragraph (1) of this subsection,  
40 the department shall: request from the National Healthcare Safety  
41 Network, on a quarterly basis, data concerning the number of  
42 infections reported to the network by New Jersey nursing homes  
43 pursuant to paragraph (2) of subsection b. of this section; make the  
44 data available on the department's Internet website; and update the  
45 data at least quarterly using the most current data obtained from the  
46 National Healthcare Safety Network. The data shall provide details  
47 concerning the number of reported infections, by infection type, for

1 each nursing home licensed in the State. The department shall  
 2 additionally provide on its Internet website data concerning the  
 3 Statewide and national averages for each type of reported infection  
 4 in nursing homes.<sup>2</sup>

5  
 6 <sup>2</sup>[4. a. There is established in the Department of Health the  
 7 <sup>1</sup>["Long-Term Care Facility"] "Nursing Home<sup>1</sup> Advisory Council."  
 8 The purpose of the council shall be to advise the department on  
 9 matters related to the oversight of <sup>1</sup>[long-term care facilities] nursing  
 10 homes<sup>1</sup> and on issues concerning <sup>1</sup>[long-term care facility] nursing  
 11 home<sup>1</sup> residents and their families, as well as to foster communication  
 12 with the public regarding <sup>1</sup>[long-term care facilities] nursing homes<sup>1</sup> .  
 13 The responsibilities of the advisory council shall include:

14 (1) analyzing and reviewing the results of inspections <sup>1</sup>and  
 15 surveys<sup>1</sup> of <sup>1</sup>[long-term care facility] nursing homes<sup>1</sup> conducted by  
 16 the department, including the penalties assessed against <sup>1</sup>[long-term  
 17 care facilities] nursing homes<sup>1</sup> and the department's adherence to  
 18 federal guidance concerning state inspections of <sup>1</sup>[long-term care  
 19 facilities] nursing homes<sup>1</sup> ;

20 (2) receiving public comment on the results of <sup>1</sup>[long-term care  
 21 facility] nursing home<sup>1</sup> inspections <sup>1</sup>and surveys<sup>1</sup> ; <sup>1</sup>[and]<sup>1</sup>

22 (3) consulting with the New Jersey Long-Term Care Ombudsman  
 23 as necessary <sup>1</sup>; and

24 (4) reviewing the data dashboard established pursuant to paragraph  
 25 (1) of subsection f. of section 3 of this act to identify areas of concern  
 26 within the nursing home industry and develop recommendations for  
 27 policies, plans, or strategies to foster improvements in quality of care,  
 28 resident and staff safety, and overall performance in nursing homes  
 29 licensed in the State<sup>1</sup> .

30 b. The advisory council shall consist of <sup>1</sup>[seven] nine<sup>1</sup> members,  
 31 as follows:

32 (1) the New Jersey Long-Term Care Ombudsman and the  
 33 Assistant Commissioner for the Division of Medical Assistance and  
 34 Health Services in the Department of Human Services, or their  
 35 designees, who shall serve ex officio;

36 (2) one <sup>1</sup>nursing home surveyor employed by the Department of  
 37 Health, to be named by the Commissioner of Health, who shall serve  
 38 ex officio;

39 (3) two<sup>1</sup> public <sup>1</sup>[member] members<sup>1</sup> , to be appointed by the  
 40 Governor, <sup>1</sup>[who shall be a representative of the long-term care  
 41 facility industry] one of whom shall be a representative of a for-profit  
 42 nursing home and one of whom shall be a representative of a nonprofit  
 43 nursing home<sup>1</sup> ; and

44 <sup>1</sup>[(3)] (4)<sup>1</sup> four public members who are advocates for residents  
 45 of <sup>1</sup>[long-term care facilities] nursing homes<sup>1</sup> , with two of the public  
 46 members to be appointed by the Senate President and two of the public  
 47 members to be appointed by the Speaker of the General Assembly.

1 c. The public members of the advisory council shall be appointed,  
2 and the advisory council shall first organize, no later than 45 days after  
3 the effective date of this act. Upon organizing, the advisory council  
4 shall select a chairperson and a vice-chairperson from among its  
5 members. The chairperson shall appoint a secretary to the advisory  
6 council, who need not be a member of the advisory council.

7 d. Public members of the advisory council shall serve for a term  
8 of five years, except that, of the members first appointed, '~~one~~ two'<sup>1</sup>  
9 shall serve for a term of three years, two shall serve for a term of four  
10 years, and two shall serve for a term of five years. Vacancies in the  
11 membership shall be filled in the same manner in which the original  
12 appointments were made. Public members shall be eligible for  
13 reappointment to the advisory council.

14 e. The advisory council shall meet on a quarterly basis at such  
15 times and places as shall be designated by the chairperson. A majority  
16 of the authorized membership shall constitute a quorum for the  
17 purposes of the advisory council taking official action. All meetings  
18 of the advisory council shall be open to the public. Agendas, minutes,  
19 documents, and testimony from '~~all~~ each' meeting shall be posted  
20 on the Internet website of the Department of Health. The advisory  
21 council shall invite the Attorney General or a representative of the  
22 Office of the Attorney General, the State Auditor, the State  
23 Comptroller, and a representative of the Department of Health to be  
24 present at each meeting.

25 f. The members of the advisory council shall serve without  
26 compensation, but shall be eligible for reimbursement for necessary  
27 and reasonable expenses incurred in the performance of their duties on  
28 the council, within the limits of funds appropriated or otherwise made  
29 available to the advisory council for its purposes.

30 g. The advisory council shall be entitled to receive assistance and  
31 services from any State, county, or municipal department, board,  
32 commission, or agency, as may be available to it for its purposes. The  
33 Department of Health shall provide staff and administrative support to  
34 the advisory council.

35 h. The advisory council shall biannually prepare and submit a  
36 report concerning its analysis of the Department of Health's oversight  
37 and inspections of '~~long-term care facilities~~ nursing homes' along  
38 with any recommendations for legislative or administrative action to  
39 the Governor and, pursuant to section 2 of P.L.1991, c.164 (C.52:14-  
40 19.1), to the Legislature. The advisory council may provide additional  
41 recommendations to the Department of Health at any time upon  
42 request by the department. <sup>2</sup>

43  
44 <sup>2</sup>4. The department may adopt any regulations necessary to  
45 effectuate the purposes of this act on an expedited basis, which  
46 regulations shall be effective immediately upon filing with the  
47 Office of Administrative Law for a period not to exceed 18 months,  
48 and may, thereafter, be amended, adopted or readopted in

1 accordance with the provisions of the "Administrative Procedure  
2 Act," P.L.1968, c.410 (C.52:14B-1 et seq.).<sup>2</sup>

3

4 5. <sup>1</sup>**["This"]** <sup>2</sup>**["Sections 1 through 3 of this"]** This<sup>2</sup> act shall take  
5 effect <sup>2</sup>**["180 days"]** on the first day of the 10th month<sup>2</sup> after the date  
6 of enactment, <sup>2</sup>**["and"]** except that<sup>2</sup> section 4 of this<sup>1</sup> act shall take  
7 effect immediately.