SENATE, No. 3670

STATE OF NEW JERSEY

219th LEGISLATURE

INTRODUCED APRIL 26, 2021

Sponsored by:
Senator TROY SINGLETON
District 7 (Burlington)

SYNOPSIS

Establishes the "Kidney Disease Prevention and Education Task Force."

CURRENT VERSION OF TEXT

As introduced.

AN ACT establishing the "Kidney Disease Prevention and Education Task Force."

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

1. The Legislature finds and declares that:

a. Chronic kidney disease is the ninth leading cause of death in the United States and among New Jersey residents, with about 1,600 deaths occurring in the State each year.

b. An estimated 37 million people in the United State have chronic kidney disease and over 200,000 people in the State of New Jersey are living with the disease.

c. African-Americans develop kidney failure at a rate of nearly four to one compared to Caucasians, and Hispanics have a 30 percent higher risk of developing kidney failure compared to Caucasians.

d. Early stage chronic kidney disease has no signs or symptoms and without early detection, can progress to kidney failure.

e. Although dialysis is a life-extending treatment, the best and most cost-effective treatment for kidney failure is a kidney transplant. Currently, the average waiting time for a transplant can last upwards of three to five years at most transplant centers; and nationally, 12 people die each day from kidney disease while waiting.

f. If chronic kidney disease is detected early and managed appropriately, the individual can receive treatment sooner to help protect the kidneys, slow or even stop deterioration in kidney function, and reduce the risk of associated cardiovascular complications.

g. In light of the coronavirus disease 2019 (COVID-19) pandemic and the increased risk of infection for patients with pre-existing conditions and of COVID-19 patients developing acute kidney disease, it is imperative to provide support to individuals with kidney disease.

2. a. There is established in the Department of Health, the "Kidney Disease Prevention and Education Task Force." The purpose of this task force is to:

(1) develop and implement a public awareness campaign about the benefits of the early detection and treatment of kidney disease that includes, but is not limited to, health education programs, preventative screenings, and social media, television, and radio outreach;

(2) examine racial disparities in the rates of chronic kidney disease, kidney transplantations, and living and deceased kidney donations and identify opportunities to promote health equity; and

(3) make recommendations in the implementation of a cost-effective plan for early screening, diagnosis, and treatment of chronic kidney disease Statewide.

b. The task force shall consist of 11 members as follows:

(1) one member of the General Assembly, appointed by the Speaker of the General Assembly, who shall serve as co-chairperson;

(2) one member of the General Assembly, appointed by the Assembly Minority Leader;

(3) one member of the Senate, appointed by the President of the Senate, who shall serve as co-chairperson;

(4) one member of the Senate, appointed by the Senate Minority Leader;

(5) the Commissioner of Health or the commissioner's designee, who shall serve ex officio;

(6) the Director of the Office of Minority and Multicultural Health or the director's designee, who shall serve ex officio; and

(7) five public members, who shall be appointed by the Governor, as follows: one nephrologist; one primary care physician; one member who is a pharmaceutical representative that works with existing kidney medication; one member who is a representative from a leading dialysis center; and one member who has chronic kidney disease between Stages 2-4 that is healthy enough to participate and is not in one of the previous membership categories set forth in this paragraph. Vacancies in the membership of the task force shall be filled in the same manner provided for the original appointments.

c. The members of this task force shall be appointed within 30 days after the effective date of this act. The task force shall organize as soon as practicable following the appointment of its members. The presence of six members shall constitute a quorum.

d. The task force will meet regularly as the task force determines, or at the call of a majority of the task force's membership.

e. All meetings of the task force shall be open to the public. Agendas, minutes, documents, and testimony from all meetings shall be posted on the Department of Health's Internet website.

f. The public members shall serve without compensation.

g. The Department of Health shall provide stenographic, clerical, and other administrative assistants and professional staff as the task force requires to carry out its work. The task force shall be entitled to call to its assistance and avail of the services of the employees of any State, county, or municipal department, board, bureau, commission, or agency as the task force may require and as may be available for the task force's purposes.

3. The task force shall present a report of its findings and recommendations to the Governor and, pursuant to section 2 of

P.L.1991, c.164 (C.52:14-19.1), to the Legislature no later than two years after the organization of the task force.

4. This act shall take effect immediately, and the task force shall expire 30 days after the issuance of its report.

STATEMENT

This bill establishes the Kidney Disease Prevention and Education Task Force. The purpose of this task force is to:

1) develop and implement a public awareness campaign about the benefits of the early detection and treatment of kidney disease that includes, but is not limited to, health education programs, preventative screenings, and social media, television, and radio outreach;

(2) examine racial disparities in the rates of chronic kidney disease, kidney transplantations, and living and deceased kidney donations and identify opportunities to promote health equity; and

(3) make recommendations in the implementation of a cost-effective plan for early screening, diagnosis, and treatment of chronic kidney disease Statewide.

The task force will consist of 11 members as follows: one member of the General Assembly, appointed by the Speaker of the General Assembly, who shall serve as co-chairperson; one member of the General Assembly, appointed by the Assembly Minority Leader; one member of the Senate, appointed by the President of the Senate, who shall serve as co-chairperson; one member of the Senate, appointed by the Senate Minority Leader; the Commissioner of Health or the commissioner's designee, who shall serve ex officio; the Director of the Office of Minority and Multicultural Health or the director's designee, who shall serve ex officio; and five public members, who will be appointed by the Governor, that include: one nephrologist; one primary care physician; one member who is a pharmaceutical representative that works with existing kidney medication; one member who is a representative from a leading dialysis center; and one member who has chronic kidney disease between Stages 2-4 that is healthy enough to participate and is not already in one of the previous membership categories listed.

The task force will present a report of its findings and recommendations to the Governor to the Legislature no later than two years after the organization of the task force. The task force will expire 30 days after the issuance of its report.