

# ASSEMBLY, No. 3210

## STATE OF NEW JERSEY 220th LEGISLATURE

INTRODUCED MARCH 7, 2022

**Sponsored by:**

**Assemblywoman SHANIQUE SPEIGHT**

**District 29 (Essex)**

**Assemblywoman ANGELA V. MCKNIGHT**

**District 31 (Hudson)**

**SYNOPSIS**

Establishes the Working Group on End-of-Life Care and Palliative Care in DOH.

**CURRENT VERSION OF TEXT**

As introduced.



(Sponsorship Updated As Of: 3/7/2022)

1 AN ACT the Working Group on End-of-Life Care and Palliative  
2 Care.

3

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

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7 1. There is established the Working Group on End-of-Life Care  
8 and Palliative Care in the Department of Health.

9 a. The working group shall include 23 members as follows:

10 (1) The Commissioners of Health, Human Services, and  
11 Banking and Insurance, and the Ombudsperson for the  
12 Institutionalized Elderly, or their designees, who shall serve ex  
13 officio; and

14 (2) 19 public members appointed by the Commissioner of  
15 Health who shall include: one representative each from the New  
16 Jersey Hospital Association, the Health Care Association of New  
17 Jersey, the Medical Society of New Jersey, the New Jersey  
18 Association of Health Plans, AARP of New Jersey, the Home Care  
19 and Hospice Association of New Jersey, the New Jersey Palliative  
20 Advance Practice Nurse Consortium, the New Jersey Health Care  
21 Quality Institute, the New Jersey Association of Mental Health and  
22 Addiction Agencies, and the ARC of New Jersey; two physicians  
23 licensed to practice in this State who have expertise in issues  
24 relating to pain management or end-of-life care, at least one of  
25 whom is an oncologist; one registered professional nurse licensed to  
26 practice in this State; one person who is employed as a patient  
27 advocate by a health care facility in this State; one person who  
28 represents a faith-based organization; and four members of the  
29 general public, two of whom have expertise or interest in the work  
30 of the working group who are not licensed health care professionals,  
31 and two of whom are family members of patients who have  
32 received palliative and end-of-life care.

33 b. The working group shall organize as soon as practicable  
34 following the appointment of its members, and shall select a  
35 chairperson and vice-chairperson from among the members. The  
36 chairperson shall appoint a secretary who need not be a member of  
37 the working group.

38 c. The public members shall serve without compensation, but  
39 shall be reimbursed for necessary expenses incurred in the  
40 performance of their duties and within the limits of funds available  
41 to the working group.

42 d. The working group shall be entitled to call to its assistance  
43 and avail itself of the services of the employees of any State,  
44 county, or municipal department, board, bureau, commission, or  
45 agency as it may require and as may be available to it for its  
46 purposes.

47 e. The Department of Health shall provide staff support to the  
48 working group.

- 1 2. a. The purpose of the working group shall be to develop a  
2 plan to:
- 3 (1) implement the legislative, administrative, and policy  
4 recommendations for State agencies, policy makers, and third party  
5 payers which are presented by the New Jersey Advisory Council on  
6 End-of-Life Care in its report to the Governor and Legislature in  
7 accordance with section 4 of P.L.2011, c.113;
  - 8 (2) report on the performance goals and benchmarks developed  
9 by the New Jersey Advisory Council on End-of-Life Care, pursuant  
10 to P.L.2011, c.113, in order to measure the ability of the  
11 Department of Health or other relevant State entities to provide  
12 patient access to, and choice of, high quality, cost-effective  
13 palliative care and end-of-life care, and assist patients and their  
14 families in making informed health care decisions with regard to  
15 such care; and
  - 16 (3) study and make recommendations on strategies to further  
17 improve the end-of-life care provided to the citizens of the State,  
18 including, but not limited to, identifying and evaluating evidence  
19 based best practices and standards for advancing palliative and  
20 hospice care services for persons who are nearing end-of-life, and  
21 minimizing disparities in the provision of palliative and end-of-life  
22 care services.
- 23 b. Upon completion of the plan, the working group shall report  
24 on its activities to the Senate Health, Human Services, and Senior  
25 Citizens Committee and the Assembly Health Committee, or their  
26 respective successors, and include a copy of the plan and any  
27 recommendations for legislative action it deems appropriate. The  
28 Commissioner of Health shall post the plan on the department's  
29 Internet website.
- 30
- 31 3. This act shall take effect immediately and shall expire upon  
32 the completion of the plan by the working group pursuant to section  
33 2 of this act.  
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#### STATEMENT

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38 This bill establishes the 23-member Working Group on End-of-  
39 Life Care and Palliative Care in the Department of Health (DOH).  
40 The working group's membership would include: The  
41 Commissioners of Health, Human Services, and Banking and  
42 Insurance, and the Ombudsperson for the Institutionalized Elderly,  
43 or their designees, who would serve ex officio; and 19 public  
44 members appointed by the Commissioner of Health who would  
45 include one representative each from the New Jersey Hospital  
46 Association, the Health Care Association of New Jersey, the  
47 Medical Society of New Jersey, the New Jersey Association of  
48 Health Plans, AARP of New Jersey, the Home Care and Hospice

1 Association of New Jersey, the New Jersey Palliative Advance  
2 Practice Nurse Consortium, the New Jersey Health Care Quality  
3 Institute, the New Jersey Association of Mental Health and  
4 Addiction Agencies, and the ARC of New Jersey; two physicians  
5 licensed to practice in this State who have expertise in issues  
6 relating to pain management or end-of-life care, at least one of  
7 whom is an oncologist; one registered professional nurse licensed to  
8 practice in this State; one person who is employed as a patient  
9 advocate by a health care facility in this State; one person who  
10 represents a faith-based organization; and four members of the  
11 general public, two of whom have expertise or interest in the work  
12 of the working group and are not licensed health care professionals,  
13 and two of whom are family members of patients who have  
14 received palliative and end-of-life care services.

15 The purpose of the working group would be to develop a plan to:  
16 implement the legislative, administrative, and policy  
17 recommendations for State agencies, policy makers, and third party  
18 payers which are presented by the New Jersey Advisory Council on  
19 End-of-Life Care in its report to the Governor and Legislature in  
20 accordance with section 4 of P.L.2011, c.113; report on the  
21 performance goals and benchmarks developed by the New Jersey  
22 Advisory Council on End-of-Life Care to measure the ability of the  
23 DOH or other relevant State entities to provide patient access to,  
24 and choice of, high quality, cost-effective palliative care and end-  
25 of-life care, and assist patients and their families in making  
26 informed health care decisions with regard to such care; and study  
27 and make recommendations on strategies to further improve the  
28 end-of-life care provided to the citizens of the State.

29 The bill stipulates that upon the completion of the working  
30 group's plan, the working group would report on its activities to the  
31 Senate Health, Human Services, and Senior Citizens Committee and  
32 the Assembly Health Committee, or their respective successors, and  
33 include a copy of the plan and any recommendations for legislative  
34 action it deems appropriate. The Commissioner of Health would  
35 also post the plan on its Internet website.

36 The bill expires upon the completion of the plan by the working  
37 group.