# ASSEMBLY, No. 3504 STATE OF NEW JERSEY 221st LEGISLATURE

**INTRODUCED FEBRUARY 5, 2024** 

Sponsored by: Assemblywoman SHANIQUE SPEIGHT District 29 (Essex and Hudson) Assemblyman STERLEY S. STANLEY District 18 (Middlesex)

#### **SYNOPSIS**

Establishes Health Care Workers COVID-19 Supplemental Benefits Program; appropriates \$30 million.

### **CURRENT VERSION OF TEXT**

As introduced.



(Sponsorship Updated As Of: 3/7/2024)

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AN ACT concerning workers' compensation for health care workers, supplementing chapter 15 of Title 34 of the Revised Statutes, and

2 supplementing chapter 15 of T3 making an appropriation.

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

8 The Health Care Workers COVID-19 Supplemental 1. a. 9 Benefits Program is established in the Division of Workers' 10 Compensation in the Department of Labor and Workforce 11 Development to provide supplemental benefits to each eligible 12 health care worker. The supplemental benefits shall be provided 13 from the Second Injury Fund for the time in which an eligible 14 health care worker qualifies for regular compensation awarded 15 pursuant to R.S.34:15-12 equal to 70 percent of the weekly wages 16 received at the time of injury subject to minimum and maximum 17 compensation stated in subsection a. of R.S.34:15-12, but shall not 18 commence until all benefits or compensation which is equal to the 19 health care worker's full salary as required or permitted by law or a 20 collective bargaining agreement have ended. The period in which 21 the supplemental benefits are provided shall continue as long as the 22 health care worker is unable to work because of illness or injury of 23 the worker arising from contracting COVID-19 but shall not exceed 24 a total of 180 weeks. The amount of the supplemental benefits 25 provided pursuant to this section shall be such that the sum of the 26 weekly regular compensation plus the weekly supplemental benefit 27 is equal to 100 percent of the weekly wages received at the time of 28 the injury, except that that sum shall not exceed \$1,800. If the 29 eligible health care worker is a volunteer who, pursuant to 30 R.S.34:15-75, is conclusively presumed to have received a salary 31 sufficient to be entitled to the maximum compensation authorized 32 by R.S.34:15-1 et seq., and compensation of the amount of 33 compensation calculated according to that presumption has been 34 paid to the volunteer healthcare worker, the weekly supplemental 35 benefits shall be such that, the sum of the weekly regular 36 compensation and the weekly supplemental benefit shall be equal to 37 100 percent of the of the amount of weekly wages the volunteer health care worker was presumed, pursuant to R.S. 34:15-75, to 38 39 have been paid to determine the amount of regular compensation, 40 except that sum shall not exceed \$1,800. The supplemental 41 benefits shall be provided only during the time the health care 42 worker is unable to work in any employment.

b. Supplemental benefits shall not be provided pursuant to this
section unless a claim is filed within two years following the end of
the public health emergency which was declared by the Governor in
Executive Order 103 of 2020 and extended by subsequent executive
orders. If a claim for supplemental benefits filed within that twoyear period is approved, the benefits shall be rewarded retroactively

to the beginning of the supplemental benefit period indicated in
 subsection a. of this section.

c. This section is intended to provide supplemental benefits to
eligible health care workers under the circumstances specified in
this section, and shall not be construed as reducing, limiting or
curtailing any rights of any worker or employee to any benefits
provided by R.S.34:15-1 et seq.i

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9 2. a. The commissioner shall, not later than October 31 of 10 2023 and each subsequent year until the commissioner determines that all eligible health care workers have received all supplemental 11 12 benefits to which they are entitled pursuant to section 1 of P.L., c. (C. ) (pending before the Legislature as this bill), 13 14 issue to the Legislature and the advisory council established 15 pursuant to pursuant to section 3 of P.L., c. (C. ) (pending 16 before the Legislature as this bill), and make public, a report 17 containing:

18 (1) available information regarding the number of claim 19 petitions with respect to which a determination was rendered by the 20 Division of Workers' Compensation that the claimant is an eligible 21 health care worker entitled to a supplemental benefit pursuant to 22 section 1 of P.L., c. (C. ) (pending before the Legislature as 23 this bill), the total amount of supplemental benefits awarded 24 pursuant to that section, the total anticipated costs, and the accrued 25 costs for the period of the report, of those supplemental benefits; 26 and

27 (2) an estimate of what portion of the funds appropriated 28 pursuant to section 5 of P.L., c. (C. ) (pending before the 29 Legislature as this bill) will be necessary to pay all benefits 30 awarded pursuant to section 1 of P.L., c. (C. ) (pending 31 before the Legislature as this bill), and a request to the Governor 32 and the Legislature for any additional appropriation which may be 33 required to make the payments.

b. Supplemental benefits paid pursuant to section 1
of P.L., c. (C.) (pending before the Legislature as this bill)
shall not be considered when:

37 (1) making a determination of the aggregate annual surcharge to
38 be levied upon policyholders and self-insured employers pursuant to
39 R.S. 34:15-94; or

(2) calculating an employer's Experience Modification Factor,
pursuant to the New Jersey Workers' Compensation and Employers
Liability and Insurance Manual administered by the Compensation
Rating and Inspection Bureau established by section 2 of P.L.1995,
c.393 (C.34:15-89.1) and section 1 of P.L.2008, c.97
(C. 34:15-90.1).

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47 3. a. There is established in the Division of Workers'48 Compensation in the Department of Labor and Workforce

Development the Health Care Workers COVID-19 Supplemental
 Benefits Program Advisory Council.

b. The advisory council shall consist of 12 members as follows:

4 (1) the Commissioner of Labor and Workforce Development or

5 a designee, who shall serve ex officio;

6 (2) the Commissioner of Human Services or a designee, who7 shall serve ex officio;

8 (3) the Commissioner of Health or a designee, who shall serve9 ex officio;

10 (4) the Executive Director of the New Jersey Compensation11 Rating and Inspection Bureau;

12 (5) for each of the following six organizations, one 13 representative selected by the organization from the part of the organization that represents health care workers in New Jersey: the 14 15 Health Professionals and Allied Employees; the Communications 16 Workers of America; JNESO, the Professional Health Care Union; 17 the Service Employees International Union; the American 18 Federation of State County and Municipal Employees; and the United Steelworkers Union; and 19

20 (6) two public members appointed by the Governor, each of21 whom shall have experience serving as a health care worker.

22 Public members of the advisory council shall serve until the c. 23 end of a term of three years and be eligible for reappointment, or 24 until the advisory council is dissolved pursuant to subsection f. of 25 this section, whichever occurs first. Vacancies in the membership 26 shall be filled in the same manner in which the original appointments were made. The members of the advisory council 27 shall serve without compensation, but may, within the limits of 28 29 funds appropriated or otherwise made available to the council, be 30 reimbursed for actual expenses necessarily incurred by the members 31 in the discharge of their official duties.

d. The advisory council shall be entitled to receive assistance
and services from any State, county, or municipal department,
board, commission, or agency as may be available to it for its
purposes. The division shall provide staff and administrative
support to the advisory council.

e. The advisory council shall organize within 30 days after the
appointment of its members. The members shall select one person
from among them to serve as the chairperson. The members also
shall select a secretary who need not be a member of the advisory
council.

42 f. The advisory council shall advise the division on best 43 practices and provide recommendations concerning the 44 administration the Health Care Workers of COVID-19 45 Supplemental Benefits Program. The advisory council shall issue 46 annual reports to the Governor and the Legislature, pursuant to 47 section 2 of P.L.1991, c.164 (C.52:14-19.1), summarizing its 48 activities and providing recommendations for administration of the

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1 The first annual report shall be issued not later than program. 2 March 31, 2024, and an annual reports shall be issued not later than 3 March 31 of each subsequent year until the commissioner 4 determines that all eligible health care workers have received all 5 supplemental benefits to which they are entitled pursuant to section 6 ) (pending before the Legislature as this 1 of P.L., c. (C. 7 bill). The advisory council shall dissolve on the 30th day after the 8 issuance of its final annual report.

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4. For the purposes of P.L. , c. (C. ) (now pending beforethe Legislature as this bill):

12 "Commissioner" means the "Commissioner of Labor and13 Workforce Development" or designees of the commissioner.

"Eligible health care worker" means a health care worker who is
eligible for workers' compensation because of illness or injury of
the worker arising from contracting COVID-19 and it has been
determined that the contraction is work-related and compensable
under the provisions of R.S.34:15-1 et seq., including a
determination made pursuant to section 2 of P.L.2020, c.84
(C.34:15-31.12) or section 6 of P.L2019, c.156 (C.34:15-31.7).

21 "Health care worker" means an individual who is employed by a 22 health care facility or is involved in providing medical and other 23 healthcare services, emergency transportation, social services, and 24 other care services, including services provided in health care 25 facilities, residential facilities, or homes.

26 "Health care facility" means any non-federal institution, building 27 or agency, or portion thereof, whether public or private, for profit or 28 nonprofit, that is used, operated or designed to provide health 29 services, medical or dental treatment or nursing, rehabilitative, or 30 preventive care to any person. Health care facility includes, but is 31 not limited to: an ambulatory surgical facility, home health agency, 32 hospice, hospital, infirmary, intermediate care facility, dialysis 33 center, long-term care facility, medical assistance facility, mental 34 health center, paid and volunteer emergency medical services, 35 outpatient facility, public health center, rehabilitation facility, 36 residential treatment facility, skilled nursing facility, and adult day 37 care center. Health care facility also includes, but is not limited to, 38 the following related property when used for or in connection with 39 the foregoing: a laboratory, research facility, pharmacy, laundry 40 facility, health personnel training and lodging facility, patient, guest 41 and health personnel food service facility, and the portion of an 42 office or office building used by persons engaged in health care 43 professions or services.

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5. There is appropriated from the federal "Coronavirus State
Fiscal Recovery Fund" established pursuant to the federal
"American Rescue Plan Act of 2021", Pub.L.117-2 to the Second
Injury Fund \$30,000,000 for the Health Care Workers COVID-19

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1 Supplemental Benefits Program in the Division of Workers' 2 Compensation in Department of Labor and Workforce 3 Development. The commissioner shall use the funds received pursuant to this section exclusively for the provision and 4 5 administration of supplemental benefits to eligible healthcare 6 workers as set forth in section 1 of P.L., c. (C. ) (pending 7 before the Legislature as this bill), and any expenses of the advisory 8 council established pursuant to section 3 of P.L., c. (C. ) 9 (pending before the Legislature as this bill) and its members 10 deemed necessary by the commissioner. A reasonable portion of 11 the appropriated amount, not to exceed 2.5 percent, may be used for 12 organizational, administrative, and other work and services, 13 including salaries, equipment, services, and materials necessary for 14 the provision and administration of the supplemental benefits. 15 Upon a determination by the commissioner that all eligible health 16 care workers have received all supplemental benefits to which they 17 are entitled pursuant to section 1 of P.L., c. (C. ) (pending 18 before the Legislature as this bill), any of the funds appropriated 19 from the General Fund to the Second Injury Fund for the Health 20 Care Workers COVID-19 Supplemental Benefits Program which 21 remain shall be returned to the federal "Coronavirus State Fiscal 22 Recovery Fund" established pursuant to the federal "American 23 Rescue Plan Act of 2021," Pub.L.117-2. 24 25 6. This act shall take effect immediately. 26 27 **STATEMENT** 28 29 30 This bill establishes the Health Care Workers COVID-19 31 Supplemental Benefits Program in the Division of Workers' 32 Compensation. 33 The bill provides supplemental benefits to health care workers determined to be eligible for workers' compensation because they

34 35 have contracted COVID-19 in the course of employment. The supplemental benefits are provided for the time in which an eligible 36 37 healthcare worker qualifies for regular workers' compensation 38 equal to 70 percent of the weekly wages received at the time of 39 injury subject to the stated minimum and maximum compensation 40 The supplemental benefits do not commence until all levels. 41 benefits which are equal to the health care worker's full salary have 42 ended. The supplemental benefits are provided as long as the health care worker is unable to work due to COVID-19 but not more than 43 44 180 weeks. The amount of the supplemental benefit is such that the 45 sum of the weekly regular workers' compensation plus the weekly 46 supplemental benefit equals 100 percent of the health care worker's 47 weekly wage, except that that sum shall not exceed \$1,800, with

similar adjustments made to compensation paid to volunteer health
 care workers.

3 The bill directs the Commissioner of Labor and Workforce Development to issue annual reports of available information 4 5 regarding the number of claims by health care workers entitled to the supplemental benefits, the total amount of benefits awarded, the 6 7 total anticipated and the accrued costs of the benefits, and an 8 estimate of what portion of the funds appropriated for the program 9 will be needed to pay all of the benefits, and a request to the 10 Governor and the Legislature for any additional appropriation 11 which may be required to make the payments. The supplemental 12 benefits are not to be considered in determining the annual 13 surcharge levied on policyholders and self-insured employers for 14 the Second Injury Fund or the experience ratings of individual 15 employers.

16 The bill establishes the Health Care Workers COVID-19 17 Supplemental Benefits Program Advisory Council in the Division of Workers' Compensation to advise the division and provide 18 19 recommendations concerning the administration of the program. 20 The advisory council will be dissolved, and the annual reports by 21 both the council and the commissioner will cease, upon a 22 determination that that all eligible health care workers have 23 received all supplemental benefits to which they are entitled.

The bill appropriates from the General Fund to the Second Injury Fund \$30,000,000 from the Health Care Workers COVID-19 Supplemental Benefits Program, to be used for the provision of the supplemental benefits and any necessary expenses of the advisory council.

29 The purpose of this legislation is to assist health care workers, 30 whose public service has rendered them particularly vulnerable to 31 COVID-19, by alleviating long-term economic hardships due to COVID-19. The support provided by the bill is especially 32 33 important in cases where health care workers become unable to 34 work for long periods of time because of persistent, long-term 35 symptoms following recovery from acute COVID-19, colloquially known as "long COVID." 36