

CHAPTER 402

AN ACT establishing a “Continued Access in Underserved Communities Pilot Program,” supplementing Title 26 of the Revised Statutes, and making an appropriation.

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

C.26:2H-12.111 Definitions.

1. As used in this act:

“Community access location” shall mean a facility that includes the following components and provides the following services to all patients without regard to their ability to pay: forty-eight medical surgical/observation beds with at least twelve acuity adaptable beds capable of providing intensive care; a full-service emergency department that complies with 42 U.S.C. 1395dd; inpatient and outpatient psychiatric services; surgical services with general anesthesia that can support more than twenty-four hours of recovery in a surgery center/surgical outpatient department with up to six operating rooms; outpatient clinics; and comprehensive diagnostic imaging services.

“Hospital” shall mean a general acute care hospital licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.).

“Underserved community” means a municipality with a population greater than 30,000 residents in calendar year 2024, according to the Department of Labor and Workforce Development, which has only one hospital within the municipality, and which: is within a Medically Underserved Area or includes a Medically Underserved Population, as designated by the Health Resources and Services Administration in the United States Department of Health and Human Services in 2025; has an Index of Medical Underservice Score, as designated by the Health Resources and Services Administration, that is less than, or equal to, 62.0 in 2025; and has been identified as a medically underserved municipality by the Commissioner of Health based on the New Jersey Medically Underserved Index.

C.26:2H-12.112 “Continued Access in Underserved Communities Pilot Program” established.

2. a. Notwithstanding the provision of any law or regulation to the contrary, in order to ensure continued access to care for patients residing in underserved communities, the Department of Health shall establish a pilot program known as the “Continued Access in Underserved Communities Pilot Program,” under which a hospital, for which the Department of Health has approved a certificate of need application to relocate from its original location in an underserved community to a property that was owned by the federal government on or before December 31, 2005, may maintain a community access location at the hospital’s original location for the duration of the pilot program.

b. The community access location shall operate at the relocated hospital’s original location in an underserved community and under the same license as the relocated hospital and may be:

(1) operated as a remote location of the relocated hospital as this term is defined by 42 C.F.R. 413.65; and

(2) overseen by the same administration, support departments, and clinical departments as apply to the relocated hospital.

c. The Department of Health shall have the authority to grant waivers from the mandatory requirements set forth in this act or any other applicable requirements set forth in N.J.A.C.8:43G-1 et seq., or its successor regulation, that may be necessary for the hospital to maintain a community access location at its original location in an underserved community pursuant to this act in a manner that facilitates integration with the relocated hospital.

C.26:2H-12.113 Requirements to receive financial assistance from the Department of Health.

3. a. Any hospital that participates in the pilot program shall apply for and receive financial assistance from the Department of Health to cover the anticipated costs associated with developing and maintaining the services and infrastructure of a community access location or with developing and implementing community health programs that support continued access to care in the underserved community, subject to the availability of appropriated funds, and provided that the participating hospital shall submit an application satisfying the requirements set forth in subsection b. of this section.

b. In support of its application pursuant to subsection a. of this section, the hospital shall provide the Department of Health with the following information:

(1) the financial data that was submitted in support of the hospital's approved certificate of need application;

(2) a description of the services to be provided at the community access location and the anticipated costs associated with developing and maintaining the services and infrastructure of a community access location at the hospital's original location; and

(3) a description of any proposed community health programs that support continued access to care in the underserved community and the anticipated costs associated with developing and implementing such community health programs.

4. The Commissioner of Health may, in accordance with the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), adopt rules and regulations as necessary to implement this act.

5. There is appropriated from the General Fund to the Department of Health the sum of \$3,000,000 to provide funding to eligible hospitals in accordance with section 3 of P.L.2025, c.402 (C.26:2H-12.113). In each fiscal year thereafter for the duration of the pilot program, the Legislature shall appropriate such sums as necessary to support the pilot program, and eligible hospitals shall apply for and receive such appropriations in accordance with section 3 of P.L.2025, c.402 (C.26:2H-12.113) (pending before the Legislature as this bill).

C.26:2H-12.114 Pilot program to expire; maintaining inpatient and outpatient psychiatric services.

6. a. This act shall take effect immediately, and the pilot program shall expire ten years from the date on which a participating hospital has obtained a certificate of occupancy for the relocated hospital, or upon the date on which appropriations are no longer available to support the pilot program, whichever occurs first. Subject to the requirements of this section, the Commissioner of Health may extend the pilot program.

b. Notwithstanding subsection a. of this section, upon expiration of the pilot program, a relocated hospital that participated in the pilot program may maintain inpatient and outpatient psychiatric services subject to N.J.A.C.8:33-1 et seq., or its successor regulation, at its original location in accordance with the terms and conditions of the pilot program until such time as the hospital seeks, and the Department of Health approves, an application to modify its license.

Approved January 20, 2026.