LEGISLATIVE FISCAL ESTIMATE

[First Reprint]

ASSEMBLY, No. 4129

STATE OF NEW JERSEY 219th LEGISLATURE

DATED: DECEMBER 21, 2020

SUMMARY

Synopsis: Requires health care facilities to report certain coronavirus disease

2019 (COVID-19) data related to health care workers and certain first

responders.

Type of Impact: Potential increase in State and county expenditures.

Agencies Affected: Department of Health, Division of Military and Veteran Affairs,

Bergen Regional Medical Center, University Hospital, certain county

governments.

Office of Legislative Services Estimate

Fiscal Impact	<u>Unknown Finite Period</u>
Potential State Cost Increase	Indeterminate
Potential County Cost Increase	Indeterminate

- The Office of Legislative Services (OLS) estimates that the Department of Health (DOH) may incur indeterminate expenses to collect and report the data required to be reported by health care facilities under the bill. The OLS is unable to quantify this amount, however, as the cost and the duration of these activities are unknown. The OLS does assume that the department will be capable of using existing staff and infrastructure to accomplish these goals, at least in part, thereby minimizing or eliminating any costs.
- The OLS also concludes that the following health care facilities may experience an increase in expenditures, albeit minimal, to comply with the bill's reporting requirements: 1) University Hospital, an independent non-profit legal entity that is an instrumentality of the State; 2) Bergen Regional Medical Center, a county-owned entity; and 3) nursing homes operated by the Division of Military and Veterans Affairs and certain county governments.
- The OLS notes that all costs associated with this bill are limited to an unknown period of time, commencing upon the bill's enactment and expiring one month after the DOH submits a report,



as required under the bill, which submission is triggered by the end of both the state of emergency and the public health emergency declared in response to the COVID-19 pandemic.

BILL DESCRIPTION

This bill requires general acute care hospitals, special hospitals, ambulatory care facilities, ambulatory surgical centers, assisted living facilities, home health agencies, nursing homes, and hospice programs to report to the Department of Health (DOH) either directly or through a non-profit trade association, on a bi-monthly basis, de-identified data on the number of health care professionals, ancillary health care workers, and emergency medical services personnel employed by the facility who tested positive for COVID-19 and who died from COVID-19.

The information to be reported under the bill is to be filed in a form and manner as the DOH requires. To ensure the integrity and accuracy of the information, the DOH is seek to identify and minimize duplicative reporting from multiple facilities concerning the same individual in the event that the individual is employed by, or affiliated with, more than one facility that is subject to the reporting requirements.

The DOH will be required to issue a report concerning the occupational data received pursuant to the bill no later than 12 months after the end of both the state of emergency and public health emergency declared in response to the COVID-19 pandemic. The bill will expire one month after the issuance of the DOH's report.

FISCAL ANALYSIS

EXECUTIVE BRANCH

None received.

OFFICE OF LEGISLATIVE SERVICES

The OLS estimates that the DOH may incur indeterminate expenses to collect and report the data required to be reported by health care facilities under the bill. The OLS is unable to quantify this amount, however, as the cost and the duration of these activities are unknown. The OLS does assume that the department will be capable of using existing staff and infrastructure to accomplish these goals, at least in part, thereby minimizing or eliminating any costs. For example, the utilization of existing communication channels may reduce any expenses associated with the collection of data from such facilities.

The OLS also concludes that the following health care facilities may experience an increase in expenditures, albeit minimal, to comply with the bill's reporting requirements: 1) University Hospital, an independent non-profit legal entity that is an instrumentality of the State; 2) Bergen Regional Medical Center, a county-owned entity; and 3) nursing homes operated by the Division of Military and Veterans Affairs and certain county governments. Currently, the DMAVA operates three facilities, while there are nine county facilities: three in Bergen County; two in Middlesex County; and one each in Atlantic County, Cape May County, Gloucester County, and Passaic County. The OLS assumes that the facilities currently gather the required data, and as such, the costs are likely to be insignificant.

The OLS notes that all costs associated with this bill are limited to an unknown period of time, commencing upon the bill's enactment and expiring one month after the DOH submits a report, as

required under the bill, which submission is triggered by the end of both the state of emergency and the public health emergency declared in response to the COVID-19 pandemic.

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This legislative fiscal estimate has been produced by the Office of Legislative Services due to the failure of the Executive Branch to respond to our request for a fiscal note.

This fiscal estimate has been prepared pursuant to P.L.1980, c.67 (C.52:13B-6 et seq.).