[First Reprint] SENATE, No. 2384

STATE OF NEW JERSEY

219th LEGISLATURE

INTRODUCED MAY 4, 2020

Sponsored by:

Senator LINDA R. GREENSTEIN District 14 (Mercer and Middlesex) Senator NIA H. GILL District 34 (Essex and Passaic)

Co-Sponsored by:

Senators Addiego, O'Scanlon and Diegnan

SYNOPSIS

Requires health care facilities to report certain coronavirus disease 2019 (COVID-19) data related to health care workers and certain first responders.

CURRENT VERSION OF TEXT

As reported by the Senate Budget and Appropriations Committee on July 28, 2020, with amendments.



(Sponsorship Updated As Of: 7/28/2020)

1 **AN ACT** concerning data reporting related to the coronavirus disease 2019 pandemic.

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

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- 7 1. a. (1) The Commissioner of Health shall require general 8 acute care hospitals, special hospitals, ambulatory care facilities, 9 ambulatory surgical centers, ¹assisted living facilities, home health agencies, and nursing homes licensed pursuant to P.L.1971, c.136 10 (C.26:2H-1 et seq.) ¹, as well as hospice programs licensed pursuant 11 to P.L.1997, c.78 (C.26:2H-79 et seq.), to report to the Department 12 of Health data on the number of health care professionals, ancillary 13 14 health care workers, and emergency medical services personnel affiliated with the facility who '[:]' tested positive for the 15 coronavirus disease 2019 ¹[;] and who ¹ died from the coronavirus 16 disease 2019 ¹[; and were admitted for treatment for the 17 coronavirus disease 2019]1. 18
 - (2) ¹The information required pursuant to this subsection shall be filed in a form and manner, and at such frequencies, as shall be required by the department. To ensure the integrity and accuracy of the information reported pursuant to this subsection, the department shall 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 set forth in this section.
 - (3) The department shall issue guidance concerning the specific health care professionals, ancillary health care workers, and emergency medical services personnel for whom reporting shall be required pursuant to this subsection.
 - (4) The department may require the reporting of any additional information as shall be appropriate to maximize the utility of the information reported pursuant to this subsection, including, but not limited to, requiring specific information be reported concerning the professional licensure or certification or specific job title or category of the individual who is the subject of the report.
- 38 (5)¹ The commissioner shall compile the data reported pursuant 39 to this subsection ¹ in the manner the commissioner determines to be 40 the most effective and utilitarian means of compiling and analyzing 41 the data, which may, but shall not be required to, include compiling

EXPLANATION – Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

the data¹ by facility type and by professional license or certification
type, if any, or by job title or category.

b. The department shall publish on its Internet website the occupational data received pursuant to subsection a. of this section. The department shall update its Internet website ¹ [on a daily basis 1 by publishing the latest data received by the department pursuant to subsection a. of this section ¹as those data become available 1. To the extent possible, the data reported by the department pursuant to this subsection may be merged and cross-referenced with the data published by the department pursuant to subsection b. of section 1 of P.L.2020, c.28.

¹c. Nothing in this section shall be construed to require disclosure of any private health information or personal identifying information in violation of any State or federal law, including the federal "Health Insurance Portability and Accountability Act of 1996," Pub.L.104-191 and any regulations promulgated thereunder by the Secretary of the U.S. Department of Health and Human Services.

¹2. a. The Commissioner of Health shall require general acute care hospitals, special hospitals, ambulatory care facilities, ambulatory surgical centers, assisted living facilities, home health agencies, and nursing homes licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.), as well as hospice programs licensed pursuant to P.L.1997, c.78 (C.26:2H-79 et seq.), to adopt standards, procedures, and protocols that incorporate current guidance issued by the Department of Health and by the federal Centers for Disease Control and Prevention to evaluate and mitigate the risk of exposure to, and spread of, coronavirus disease 2019 (COVID-19) in healthcare settings.

b. No later than 60 days after the end of both the state of emergency and the public health emergency declared in response to the COVID-19 pandemic, general acute care hospitals, special hospitals, ambulatory care facilities, ambulatory surgical centers, assisted living facilities, home health agencies, nursing homes, and hospice programs shall complete an analysis of COVID-19 exposures identified throughout their workforces during each month in which the state of emergency and public health emergency in response to COVID-19 were in effect, along with the measures taken by the facility to respond to or mitigate the risk of exposure, and shall submit a report of that analysis to the Department of Health concerning recommended best practices and protocols to mitigate the risk of exposure and spread of communicable disease among health care facility staff and personnel during a

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1 communicable disease outbreak, epidemic, or pandemic. Reports 2 submitted to the department pursuant to this subsection, and any 3 supporting data submitted with or in relation to a report, shall be 4 held as confidential and shall only be used by the department in the 5 development of strategies, plans, protocols, and best practices to improve the State's response in the event of future communicable 6 7 disease outbreaks, as well as for the purposes of preparing the 8 report required pursuant to subsection c. of this section. To this 9 end, reports and supporting data submitted pursuant to this 10 subsection shall not be subject to public disclosure, shall not be 11 considered a public record pursuant to P.L.1963, c.73 (C.47:1A-12 1 et seq.) or P.L.2001, c.404 (C.47:1A-5 et al.), and shall not be 13 used in any adverse licensure action or administrative disciplinary 14 action against the facility submitting the report or data. 15 c. No later than 120 days after the end of both the state of emergency and the public health emergency declared in response to 16 17 the COVID-19 pandemic, the commissioner shall submit a report to 18 the Governor and, pursuant to section 2 of P.L.1991, c.164 19 (C.52:14-19.1), to the Legislature, outlining the aggregated data and 20 findings reported by general acute care hospitals, special hospitals, 21 ambulatory care facilities, ambulatory surgical centers, assisted 22 living facilities, home health agencies, nursing homes, and hospice 23 programs pursuant to subsection b. of this section and outlining the 24 commissioner's findings and recommendations for legislation or other action to mitigate the risk of exposure and spread of 25 26 communicable disease among health care facility staff and 27 personnel during a communicable disease outbreak, epidemic, or pandemic.¹ 28

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¹[2.] 3. This act shall take effect immediately and shall expire one '[month] year' after the end of both the state of emergency and the public health emergency declared in response to the coronavirus disease 2019 pandemic.