

CHAPTER 88

AN ACT establishing the New Jersey Task Force on Long-Term Care Quality and Safety.

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

1. a. There is established the New Jersey Task Force on Long-Term Care Quality and Safety, which shall be tasked with developing recommendations to make changes to the long-term system of care to drive improvements in person-centered care, resident and staff safety, improvements in quality of care and services, workforce engagement and sustainability, and any other appropriate aspects of the long-term system of care in New Jersey as the task force elects to review. The task force shall specifically focus on:

(1) expanding home and community-based services and recommending strategies to improve the balance between facility-based services and home and community-based services and supports;

(2) nursing home reforms, including implementing new care models, optimizing nursing home size and configurations to foster resident wellness and infection control, increasing clinical presence in nursing homes, and identifying appropriate nursing home staffing levels for certain resident acuity and special population needs;

(3) maintaining the objectivity of the nursing home survey inspections and the cited deficiency appeals process;

(4) identifying the capital investments needed to support physical plant, technology, and workforce development initiatives in nursing homes; and

(5) broader reforms to the long-term system of care, including developing technology requirements to enable enhanced use of telemedicine and telehealth, instituting workforce engagement and advancement models including career laddering options and structures, increasing the use of Medicaid managed care to drive improvements in quality and oversight of nursing homes, and establishing acuity adjustments for Medicaid managed care payments to nursing homes.

b. The task force shall comprise 27 members as follows:

(1) the Commissioner of Health, the Commissioner of Human Services, the Commissioner of Military and Veterans' Affairs, and the New Jersey Long-Term Care Ombudsman, or their designees, who shall serve *ex officio*;

(2) seven public members to be appointed by the Governor, which public members shall include at least one member representing each of the following, with at least two members being from urban communities: a non-profit nursing home; a for-profit nursing home; a not-for-profit assisted living facility; a nurse with significant experience in long-term care; a consumer rights advocate with experience or background related to long-term care; a Medicaid managed care organization; and a recipient of home and community-based services;

(3) eight public members to be appointed by the Senate President, which public members shall include at least one member representing each of the following, with at least two members being from urban communities: a medical director of a for-profit nursing home; a medical director for a non-profit nursing home; a certified nurse assistant; an advocate for worker safety in long-term care facilities; Disability Rights New Jersey; a resident of a veterans' home operated by the State; a family member of a resident of a nursing home; and a resident of a nursing home or a long-term care facility; and

(4) eight public members to be appointed by the Speaker of the General Assembly, which public members shall include at least one member representing each of the following: an adult day care center; a home health agency; a home health aide; a resident rights advocate;

an expert on long-term care policy; an expert on infection control and prevention; a family member or caregiver of an individual receiving home and community-based services; and a family member of a resident of a veterans' home.

c. The members of the task force shall be appointed, and the task force shall organize, no later than 45 days after the effective date of this act. The members shall select a chairperson and a vice-chairperson from among the public members. The chairperson may appoint a secretary to the task force, who need not be a member of the task force. The task force shall meet at the call of the chairperson.

d. Members of the task force shall serve without compensation, but shall be reimbursed for necessary expenditures incurred in the performance of their duties as members of the task force, within the limits of funds appropriated or otherwise made available to the task force for its purposes.

e. The Department of Health shall provide administrative and staff support to the task force. The task force shall be entitled to call to its assistance and avail itself of the services of the employees of any State, county, or municipal department, board, bureau, commission, or agency as it may require and as may be available for its purposes.

f. No later than one year after its organization, the task force shall prepare and submit a report to the Governor and, pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1), to the Legislature, concerning its recommendations developed pursuant to this section. The task force shall dissolve 30 days following the date on which it submits its report under this subsection.

2. This act shall take effect immediately and shall expire 30 days after the date the task force submits its report pursuant to subsection f. of section 1 of this act.

Approved September 16, 2020.