

30:4-27.3a, 30:4-27.9a & 30:4-27.9b, 30:4-177.66**LEGISLATIVE HISTORY CHECKLIST**

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LAWS OF: 2025 **CHAPTER:** 108**NJSA:** 30:4-27.3a, 30:4-27.9a & 30:4-27.9b, 30:4-177.66 Revises certain provisions concerning, and establishes certain education and data reporting requirements related to, involuntary commitment.**BILL NO:** S4263 (Substituted for A5408 (1R))**SPONSOR(S)** Vitale, Joseph F. and others**DATE INTRODUCED:** 3/17/2025**COMMITTEE:** **ASSEMBLY:** Health**SENATE:** Health, Human Services & Senior Citizens**AMENDED DURING PASSAGE:** Yes**DATE OF PASSAGE:** **ASSEMBLY:** 06/30/2025**SENATE:** 06/30/2025**DATE OF APPROVAL:** 7/22/2025**FOLLOWING ARE ATTACHED IF AVAILABLE:****FINAL TEXT OF BILL** (S4263 ScaAca (2R) enacted)**ADVANCE LAW** Yes**PAMPHLET LAW** Yes**S4263****INTRODUCED BILL:** (Includes sponsor(s) statement) Yes**REPRINT(S):** Yes SHH 5/19/25 1R
AHE 6/12/25 2R**TECHNICAL REVIEW OF BILL:** No**COMMITTEE STATEMENT:** **ASSEMBLY:** Yes**SENATE:** Yes(Audio archived recordings of the committee meetings, corresponding to the date of the committee statement, *may possibly* be found at www.njleg.state.nj.us)**FLOOR AMENDMENT STATEMENT:** No**LEGISLATIVE FISCAL ESTIMATE:** No**A5408 (1R)****INTRODUCED BILL:** (Includes sponsor(s) statement) Yes**REPRINT(S):** Yes AHE 6/12/25 1R

TECHNICAL REVIEW OF BILL: No

COMMITTEE STATEMENT: **ASSEMBLY:** Yes

SENATE: No

(Audio archived recordings of the committee meetings, corresponding to the date of the committee statement, ***may possibly*** be found at www.njleg.state.nj.us)

FLOOR AMENDMENT STATEMENT: No

LEGISLATIVE FISCAL ESTIMATE: No

VETO MESSAGE: No

GOVERNOR'S PRESS RELEASE ON SIGNING: Yes

LEGISLATOR STATEMENT: No

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P.L. 2025, CHAPTER 108, *approved July 22, 2025*
Senate, No. 4263 (*Second Reprint*)

1 AN ACT ¹**removing certain sunset provisions**¹ concerning
2 involuntary commitment ¹**and** and mental health care,¹
3 amending ¹**P.L.2023, c.139** and supplementing various parts of
4 statutory law¹ .
5

6 **BE IT ENACTED** *by the Senate and General Assembly of the State*
7 *of New Jersey:*
8

9 ¹1. Section 2 of P.L.2023, c.139 (C.30:4-27.3a) is amended to
10 read as follows:

11 2. a. The Department of Human Services and the Department of
12 Health shall jointly conduct a study concerning the challenges of
13 placing individuals in appropriate treatment settings, and the supply
14 of and demand for both involuntary commitment beds and voluntary
15 commitment beds in this State. In conducting the study, the
16 departments shall solicit input from interested stakeholders
17 including, but not limited to, hospitals, the Office of the Public
18 Defender, the Administrative Office of the Courts, advocates
19 representing mental health patients, advocates representing
20 individuals with disabilities, and representatives of psychiatric
21 screening centers.

22 b. No later than 18 months after the effective date of P.L.2023,
23 c.139 (C.30:4-27.9a et al.), the Commissioner of Human Services
24 shall submit to the Governor and, pursuant to section 2 of P.L.1991,
25 c.164 (C.52:14-19.1), to the Legislature, a report, which shall
26 include, but not be limited to:

27 (1) a summary of the findings from the study conducted
28 pursuant to subsection a. of this section;

29 (2) an analysis of the supply of and demand for involuntary
30 commitment beds and voluntary commitment beds, including
31 consideration of, to the extent practicable, the geographic location
32 of the patient and whether the patient is an adult patient or a
33 pediatric patient, whether the patient has a criminal history, whether
34 the patient is uninsured or underinsured, and whether the patient has
35 been diagnosed with an intellectual or developmental disability and
36 a mental health condition, or has been diagnosed with a substance
37 use disorder and a mental health condition;

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

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

¹Senate SHH committee amendments adopted May 19, 2025.

²Assembly AHE committee amendments adopted June 12, 2025.

1 (3) the number of temporary licenses granted by the Department
2 of Health pursuant to paragraph (1) of subsection c. of section 1 of
3 **【this act】** P.L.2023, c.139 (C.30:4-27.9a) as of the date the
4 information concerning the licenses is submitted to the
5 Commissioner of Human Services pursuant to paragraph (3) of
6 subsection c. of section 1 of **【this act】** P.L.2023, c.139 (C.30:4-
7 27.9a); and

8 (4) any recommendations for legislative action.

9 c. The Department of Human Services and the Department of
10 Health shall jointly conduct a follow-up study to the study
11 conducted pursuant to subsection a. of this section. In conducting
12 the study, the departments shall solicit input from interested
13 stakeholders including, but not limited to, hospitals, the Office of
14 the Public Defender, the Administrative Office of the Courts,
15 advocates representing mental health patients, advocates
16 representing individuals with disabilities, and representatives of
17 psychiatric screening centers.

18 No later than April 30, 2026, the Commissioner of Human
19 Services shall submit to the Governor and, pursuant to section 2 of
20 P.L.1991, c.164 (C.52:14-19.1), to the Legislature, a report, which
21 shall include, but not be limited to:

22 (1) a summary of the findings from the study conducted
23 pursuant to this subsection;

24 (2) an analysis of the supply of and demand for involuntary
25 commitment beds and voluntary commitment beds, including
26 consideration of, to the extent practicable, the geographic location
27 of the patient and whether the patient is an adult patient or a
28 pediatric patient, whether the patient has a criminal history, whether
29 the patient has a complex medical condition, whether the patient is
30 uninsured or underinsured, and whether the patient has been
31 diagnosed with an intellectual or developmental disability and a
32 mental health condition, or has been diagnosed with a substance use
33 disorder and a mental health condition;

34 (3) an analysis of the supply of and demand, bed capacity, and
35 waiting lists for forensic beds at Ancora Psychiatric Hospital, Ann
36 Klein Forensic Center, and Trenton Psychiatric Hospital, including
37 consideration of whether the number of forensic beds available
38 meets the demand from hospitals and jails based on existing waiting
39 lists;

40 (4) an analysis of the supply of and demand for short-term care
41 facility beds, including consideration of, as applicable, whether the
42 beds are subject to certificate of need requirements and if so,
43 whether the Department of Health should issue a call for certificate
44 of need applications to increase the supply of short-term care
45 facility beds;

46 (5) an analysis of the State's Psychiatric Emergency Screening
47 Services system, including any recommendations for the
48 modernization of the system in order to improve the system's

1 operations and effectiveness in placing patients in appropriate care
2 settings in a timely manner;

3 (6) the number of temporary licenses granted by the Department
4 of Health pursuant to paragraph (1) of subsection c. of section 1 of
5 P.L.2023, c.139 (C.30:4-27.9a) as of the date the information
6 concerning the licenses is submitted to the Commissioner of Human
7 Services pursuant to paragraph (3) of subsection c. of section 1 of
8 P.L.2023, c.139 (C.30:4-27.9a);

9 (7) an analysis of the information collected pursuant to
10 paragraph (3) of subsection c. of section 1 of P.L.2023, c.139
11 (C.30:4-27.9a); and

12 (8) any recommendations for legislative action.¹

13 (cf: P.L.2023, c.139, s.2)

14
15 ¹**1.1** 2.¹ Section 1 of P.L.2023, c.139 (C.30:4-27.9a) is
16 amended to read as follows:

17 1. a. Notwithstanding the provisions of section 9 of P.L.1987,
18 c.116 (C.30:4-27.9) or any other law, rule, or regulation to the
19 contrary, commencing on the effective date of P.L.2023, c.139
20 (C.30:4-27.9a et al.) and ending on the last day of the ¹**24th** 36th¹
21 calendar month following that effective date, a short-term care or
22 psychiatric facility, or a special psychiatric hospital, may detain a
23 person admitted to the facility involuntarily by referral from a
24 screening service without a temporary court order for no more than
25 72 hours from the time the screening certificate was executed.

26 Except in the event a general hospital was granted a temporary
27 court order permitting the continued hold of the person pursuant to
28 subsection b. of this section, which delayed a person's admission to
29 the short-term care or psychiatric facility or special psychiatric
30 hospital, a short-term care or psychiatric facility or special
31 psychiatric hospital shall not detain a person admitted to the facility
32 involuntarily by referral from a screening service without a
33 temporary court order for more than 72 hours from the time the
34 screening certificate was executed.

35 Within 24 hours of admission, the admitting facility shall initiate
36 court proceedings for the involuntary commitment of the person
37 pursuant to section 10 of P.L.1987, c.116 (C.30:4-27.10) and
38 request a temporary court order permitting the continued hold of the
39 person pending the return date of the involuntary commitment
40 hearing, which shall take place no later than 20 days from initial
41 commitment.

42 b. (1) Notwithstanding the provisions of section 9 of P.L.1987,
43 c.116 (C.30:4-27.9) or any other law, rule, or regulation to the
44 contrary, commencing on the effective date of P.L.2023, c.139
45 (C.30:4-27.9a et al.) **and ending on the last day of the 24th**
46 **calendar month following that effective date** ¹and ending on the
47 last day of the 36th calendar month following that effective date¹, a

1 general hospital, including any satellite emergency department of a
 2 general hospital, ¹ **where a person is located during a screening**
 3 **outreach visit,** ¹ may not detain ¹ **the** a¹ person for more than 72
 4 hours from the time a screening certificate is executed, unless the
 5 hospital or emergency department obtains a temporary court order
 6 permitting the continued hold of the person for up to 72 additional
 7 hours, as determined by the court ¹, or the person, through the
 8 person's counsel, provides consent for the continued hold¹. ¹ **The**
 9 If it becomes evident that a hospital or emergency department will
 10 not be able to discharge or admit the person to another facility
 11 within 72 hours, the¹ hospital ¹ **or** ¹ emergency department
 12 ¹ **may** ¹, or, as applicable, the Designated Screening Service
 13 provider, shall¹ submit an emergent application for such order
 14 ¹ **and** ¹. The hospital or emergency department shall¹ continue to
 15 hold the person during the pendency of the application ¹ and any
 16 investigation conducted by the person's counsel¹, provided that
 17 appropriate treatment that meets the standard of care is being
 18 rendered to the person. The Office of the Public Defender ¹ and
 19 other designated counsel, as applicable,¹ shall be notified of the
 20 emergent application ¹ **and** ¹ provided with a copy of the
 21 application and all supporting documents ¹ **and** ¹. The court¹
 22 shall ¹ **be appointed** ¹ appoint the Office of the Public Defender¹ as
 23 counsel to represent the patient ¹, if there is no other designated
 24 counsel¹. The application may be decided by the court on
 25 documentary presentations relevant to the standards established
 26 under paragraph (2) of this subsection. At the request of counsel,
 27 the court ¹ **may** shall¹ conduct a hearing on the record, at which
 28 hearing the court shall consider the arguments of counsel and all
 29 relevant evidence submitted. The court shall determine the format
 30 of the hearing based on the apparent complexity of the matter and
 31 the extent of doubt as to the merits of the application, and may, at
 32 its discretion, rely on certifications from witnesses or require live
 33 testimony. ¹ The court shall not grant a temporary order granting
 34 the continued hold of a person, unless the person's counsel has been
 35 designated and notified, completed any necessary interviews with
 36 the patient and investigations, and provided notice to the court on
 37 the counsel's position on the extended hold.¹

38 (2) The court may grant a temporary order granting the
 39 continued hold of a person upon an application submitted pursuant
 40 to paragraph (1) of this subsection if the hospital ¹ **or** ¹
 41 emergency department ¹, or, as applicable, the Designated
 42 Screening Service provider¹ :

43 (a) exhausted all reasonable efforts to place the individual in a
 44 short-term care or psychiatric facility, or special psychiatric
 45 hospital, depending on which facility is appropriate for the person's
 46 condition and is the least restrictive environment ¹, and has

1 completed a form as a part of the application, which form shall
2 include the dates of the outreach to each short-term care facility or
3 centralized admission, in the case of a forensic patient, and the
4 response from each short-term care facility or centralized admission
5 and if applicable, the specific reason for rejection. In the case of a
6 forensic patient, a hospital, emergency department or, as applicable,
7 the Designated Screening Service provider shall not be required to
8 conduct outreach to facilities that do not serve forensic patients¹ ;
9 and

10 (b) demonstrates that there is a substantial likelihood that, by
11 reason of mental illness, the person will be dangerous to the
12 person's own self or others based upon the certification of two
13 psychiatrists who have examined the patient and deemed the patient
14 is in need of involuntary commitment ¹, such examinations may be
15 conducted using telemedicine or telehealth consistent with the
16 standard of care required for the assessment and treatment of the
17 person's condition¹ .

18 The court shall include such conditions in the temporary order as
19 the court deems appropriate to promote diligent efforts to locate an
20 available facility to accommodate the patient's needs and protect the
21 rights of the person detained pending commitment. ¹In the event
22 that the hospital ²**[or]** ²emergency department ², or, as applicable,
23 the Designated Screening Service provider,² is unable to place the
24 person into an appropriate facility within the 72 hours of continued
25 hold permitted by the temporary court order, the hospital or
26 emergency department may continue to hold the person, provided
27 that the person's counsel provides consent for the hold and
28 appropriate treatment that meets the standard of care is being
29 rendered to the person.¹ The Office of the Public Defender shall be
30 notified and provided with a copy of any temporary court order
31 granted pursuant to this paragraph. The patient shall receive a court
32 hearing with respect to the issue of continued need for involuntary
33 commitment within 20 days from the date of initial commitment or
34 within 20 days from the date an application was filed pursuant to
35 paragraph (1) of this subsection, whichever date occurs first, unless
36 the patient has been administratively discharged pursuant to section
37 17 of P.L.1987, c.116 (C.30:4-27.17).

38 (3) Notwithstanding the provisions of any other law, rule, or
39 regulation to the contrary, commencing on the effective date of
40 P.L.2023, c.139 (C.30:4-27.9a et al.) **[and ending on the last day of**
41 **the 24th calendar month following that effective date]** ¹and ending
42 on the last day of the 36th calendar month following that effective
43 date¹ , each general hospital and emergency department shall
44 prepare and submit to the Department of Human Services a
45 quarterly report, which report shall include, but not be limited to,
46 information on:

1 (a) the number of applications submitted to the court for a
2 temporary court order permitting the continued hold of a person
3 beyond 72 hours pursuant to paragraph (1) of this subsection;

4 (b) the number of temporary court orders granted pursuant to
5 paragraph (2) of this subsection permitting the continued hold of a
6 person beyond 72 hours;

7 (c) whether a person detained for longer than 72 hours: has a
8 criminal history; has a co-occurring substance use disorder; has a
9 co-occurring intellectual or developmental disability; 'has health
10 insurance and if so, the type of health insurance coverage; has a
11 complex medical condition;¹ or is unable to be released because the
12 72-hour timeframe falls on a weekend and either admission to
13 treatment facilities are not provided on weekends, or discharges
14 from the facility do not occur on weekends;

15 (d) the length of time each individual was held beyond 72 hours
16 before finding appropriate placement in a treatment facility;
17 **'[and]'**

18 (e) the number of individuals placed in an appropriate treatment
19 facility within 72 hours ¹; and

20 (f) any other information the department deems necessary'.

21 Any information included in a report concerning specific
22 individuals shall be de-identified. Each report shall be made
23 available to the public within 60 days of the date the Department of
24 Human Services receives the report.

25 c. (1) Notwithstanding the provisions of any other law, rule, or
26 regulation to the contrary, the Commissioner of Health may, to the
27 extent the commissioner finds necessary, commencing 120 days
28 following the effective date of P.L.2023, c.139 (C.30:4-27.9a et al.)
29 and ending on the last day of the **'[15th] 27th'** calendar month
30 following that effective date, allow a general acute care hospital
31 that is licensed for acute care hospital psychiatric beds to apply to
32 the Department of Health for temporary licenses for beds for the
33 involuntary commitment of patients. The department may issue
34 temporary licenses pursuant to this paragraph if the hospital
35 demonstrates in its application a need for such beds based on
36 retrospective data demonstrating the need for involuntary
37 commitment beds, a showing that the hospital continually exhausts
38 all reasonable efforts to place individuals in short-term care or
39 psychiatric facilities, or special psychiatric hospitals, and any other
40 factors as determined by the Commissioner of Health. Any
41 temporary license granted pursuant to this paragraph, unless
42 otherwise confirmed at the next certificate of need review, as
43 required pursuant to N.J.A.C.8:33-4.4 or its successor regulation,
44 shall expire within 90 days of the Commissioner of Health's
45 decision rendered pursuant to that full review process.

46 (2) The Department of Health shall make available on its Internet
47 website and continuously update information concerning the total

1 number of temporary licenses granted pursuant to paragraph (1) of
2 this subsection, as well as the number of temporary licenses granted
3 to each hospital that submitted an application pursuant to paragraph
4 (1) of this subsection.

5 (3) The department shall submit information concerning the total
6 number of temporary licenses granted pursuant to paragraph (1) of
7 this subsection, as well as the number of temporary licenses granted
8 to each hospital that submitted an application pursuant to paragraph
9 (1) of this subsection, to the Commissioner of Human Services,
10 which information shall: (a) be submitted in a manner that allows
11 the Commissioner of Human Services sufficient time to include the
12 information in the report required pursuant to subsection b. ¹and c.¹
13 of section 2 of **【this act】** P.L.2023, c.139 (C.30:4-27.3a); and (b)
14 reflect the number of temporary licenses granted as of the date the
15 information is submitted.
16 (cf: P.L.2023, c.139, s.1)

17
18 ¹3. (New section) The Department of Human Services shall
19 establish an educational committee of stakeholders, which
20 educational committee, commencing on the effective date of
21 P.L. , c. (C.) (pending before the Legislature as this bill)
22 and ending on the last day of the 36th calendar month following the
23 effective date of P.L.2023, c.139 (C.30:4-27.9a et al.), shall provide
24 education to short-term care facilities and individual county
25 assignment judges about the legal obligations of short-term care
26 facilities to accept patients. Thereafter, the Department of Human
27 Services shall provide the education to short-term care facilities and
28 individual county assignment judges, as necessary.¹

29
30 ¹4. Section 1 of P.L.2017, c.155 (C.30:4-177.66) is amended to
31 read as:

32 1. a. The Division of Mental Health and Addiction Services in
33 the Department of Human Services shall oversee the development
34 and maintenance of a data dashboard report, which shall collect and
35 track the daily information received pursuant to section 2 of **【this**
36 **act】** P.L.2017, c.155 (C.30:4-177.67) about the number of open
37 beds that are available for treatment for individuals in need of
38 mental health or substance use disorder treatment in each facility in
39 the State that is licensed to provide:

40 (1) long term or extended care services for mental health or
41 substance use disorders and receives State or county funding,
42 including, but not limited to, a psychiatric facility, psychiatric unit
43 of a general hospital, short-term care facility, and special
44 psychiatric hospital, as those terms are defined in section 2 of
45 P.L.1987, c.116 (C.30:4-27.2), and a residential health care facility
46 as defined in section 1 of P.L.1953, c.212 (C.30:11A-1); or

(2) acute or intermediate level of care services for mental health or a substance use disorder and receives State or county funding, including, but not limited to, a psychiatric facility, psychiatric unit of a general hospital, short-term care facility, and special psychiatric hospital, as those terms are defined in section 2 of P.L.1987, c.116 (C.30:4-27.2).

b. The information maintained in the data dashboard report shall include, by county:

(1) the address and telephone number of the facility;

(2) the type of services provided by the facility;

(3) the licensed bed capacity of the facility; and

(4) the number of open beds that are available for the provision of mental health or substance use disorder services, based on the information received pursuant to section 2 of **[this act]** P.L.2017, c.155 (C.30:4-177.67).

c. The information described in subsection b. of this section shall be:

(1) prominently displayed on the website of the department;

(2) made available to the public, upon request, through the Statewide 2-1-1 telephone system; **[and]**

(3) made available using any other means that the Commissioner of Human Services deems appropriate; and

(4) made available to screening services and hospitals in the State.

d. The commissioner is authorized to solicit, receive, and accept grants, funds, or anything of value from any public or private entity and receive and accept contributions of money, property, labor, or any other thing of value from any legitimate source for the purpose of the development and maintenance of a data dashboard report pursuant to **[this act]** P.L.2017, c.155 (C.30:4-177.66 et seq.).

e. Until the data dashboard report required pursuant to subsection a. of this section is developed, each facility shall prominently display the information described in subsection b. of this section on the facility's Internet website and shall update the information daily as necessary.

(cf: P.L.2017, c.155, s.1)

¹**[2.] 5.**¹ This act shall take effect immediately.

Revises certain provisions concerning, and establishes certain education and data reporting requirements related to, involuntary commitment.

CHAPTER 108

AN ACT concerning involuntary commitment and mental health care, amending and supplementing various parts of statutory law.

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

1. Section 2 of P.L.2023, c.139 (C.30:4-27.3a) is amended to read as follows:

C.30:4-27.3a Joint study, Human Services, Health, appropriate treatment settings placement, challenges, supply, demand, involuntary, voluntary commitment beds.

2. a. The Department of Human Services and the Department of Health shall jointly conduct a study concerning the challenges of placing individuals in appropriate treatment settings and the supply of and demand for both involuntary commitment beds and voluntary commitment beds in this State. In conducting the study, the departments shall solicit input from interested stakeholders including, but not limited to, hospitals, the Office of the Public Defender, the Administrative Office of the Courts, advocates representing mental health patients, advocates representing individuals with disabilities, and representatives of psychiatric screening centers.

b. No later than 18 months after the effective date of P.L.2023, c.139 (C.30:4-27.9a et al.), the Commissioner of Human Services shall submit to the Governor and, pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1), to the Legislature, a report, which shall include, but not be limited to:

(1) a summary of the findings from the study conducted pursuant to subsection a. of this section;

(2) an analysis of the supply of and demand for involuntary commitment beds and voluntary commitment beds, including consideration of, to the extent practicable, the geographic location of the patient and whether the patient is an adult patient or a pediatric patient, whether the patient has a criminal history, whether the patient is uninsured or underinsured, and whether the patient has been diagnosed with an intellectual or developmental disability and a mental health condition or has been diagnosed with a substance use disorder and a mental health condition;

(3) the number of temporary licenses granted by the Department of Health pursuant to paragraph (1) of subsection c. of section 1 of P.L.2023, c.139 (C.30:4-27.9a) as of the date the information concerning the licenses is submitted to the Commissioner of Human Services pursuant to paragraph (3) of subsection c. of section 1 of P.L.2023, c.139 (C.30:4-27.9a); and

(4) any recommendations for legislative action.

c. The Department of Human Services and the Department of Health shall jointly conduct a follow-up study to the study conducted pursuant to subsection a. of this section. In conducting the study, the departments shall solicit input from interested stakeholders including, but not limited to, hospitals, the Office of the Public Defender, the Administrative Office of the Courts, advocates representing mental health patients, advocates representing individuals with disabilities, and representatives of psychiatric screening centers.

No later than April 30, 2026, the Commissioner of Human Services shall submit to the Governor and, pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1), to the Legislature, a report, which shall include, but not be limited to:

(1) a summary of the findings from the study conducted pursuant to this subsection;

(2) an analysis of the supply of and demand for involuntary commitment beds and voluntary commitment beds, including consideration of, to the extent practicable, the geographic location of the patient and whether the patient is an adult patient or a pediatric patient, whether the patient has a criminal history, whether the patient has a complex medical

condition, whether the patient is uninsured or underinsured, and whether the patient has been diagnosed with an intellectual or developmental disability and a mental health condition, or has been diagnosed with a substance use disorder and a mental health condition;

(3) an analysis of the supply of, and demand, bed capacity, and waiting lists for, forensic beds at Ancora Psychiatric Hospital, Ann Klein Forensic Center, and Trenton Psychiatric Hospital, including consideration of whether the number of forensic beds available meets the demand from hospitals and jails based on existing waiting lists;

(4) an analysis of the supply of and demand for short-term care facility beds, including consideration of, as applicable, whether the beds are subject to certificate of need requirements and if so, whether the Department of Health should issue a call for certificate of need applications to increase the supply of short-term care facility beds;

(5) an analysis of the State's Psychiatric Emergency Screening Services system, including any recommendations for the modernization of the system in order to improve the system's operations and effectiveness in placing patients in appropriate care settings in a timely manner;

(6) the number of temporary licenses granted by the Department of Health pursuant to paragraph (1) of subsection c. of section 1 of P.L.2023, c.139 (C.30:4-27.9a) as of the date the information concerning the licenses is submitted to the Commissioner of Human Services pursuant to paragraph (3) of subsection c. of section 1 of P.L.2023, c.139 (C.30:4-27.9a);

(7) an analysis of the information collected pursuant to paragraph (3) of subsection c. of section 1 of P.L.2023, c.139 (C.30:4-27.9a); and

(8) any recommendations for legislative action.

2. Section 1 of P.L.2023, c.139 (C.30:4-27.9a) is amended to read as follows:

C.30:4-27.9a Short-term care, psychiatric facility, special psychiatric hospital, detainment, limitations; temporary licenses, beds, involuntary commitment; study, reports.

1. a. Notwithstanding the provisions of section 9 of P.L.1987, c.116 (C.30:4-27.9) or any other law, rule, or regulation to the contrary, commencing on the effective date of P.L.2023, c.139 (C.30:4-27.9a et al.) and ending on the last day of the 36th calendar month following that effective date, a short-term care or psychiatric facility, or a special psychiatric hospital, may detain a person admitted to the facility involuntarily by referral from a screening service without a temporary court order for no more than 72 hours from the time the screening certificate was executed.

Except in the event a general hospital was granted a temporary court order permitting the continued hold of the person pursuant to subsection b. of this section, which delayed a person's admission to the short-term care or psychiatric facility or special psychiatric hospital, a short-term care or psychiatric facility or special psychiatric hospital shall not detain a person admitted to the facility involuntarily by referral from a screening service without a temporary court order for more than 72 hours from the time the screening certificate was executed.

Within 24 hours of admission, the admitting facility shall initiate court proceedings for the involuntary commitment of the person pursuant to section 10 of P.L.1987, c.116 (C.30:4-27.10) and request a temporary court order permitting the continued hold of the person pending the return date of the involuntary commitment hearing, which shall take place no later than 20 days from initial commitment.

b. (1) Notwithstanding the provisions of section 9 of P.L.1987, c.116 (C.30:4-27.9) or any other law, rule, or regulation to the contrary, commencing on the effective date of P.L.2023, c.139 (C.30:4-27.9a et al.) and ending on the last day of the 36th calendar month following that effective date, a general hospital, including any satellite emergency department of a

general hospital, may not detain a person for more than 72 hours from the time a screening certificate is executed, unless the hospital or emergency department obtains a temporary court order permitting the continued hold of the person for up to 72 additional hours, as determined by the court, or the person, through the person's counsel, provides consent for the continued hold. If it becomes evident that a hospital or emergency department will not be able to discharge or admit the person to another facility within 72 hours, the hospital, emergency department, or, as applicable, the Designated Screening Service provider, shall submit an emergent application for such order. The hospital or emergency department shall continue to hold the person during the pendency of the application and any investigation conducted by the person's counsel, provided that appropriate treatment that meets the standard of care is being rendered to the person. The Office of the Public Defender and other designated counsel, as applicable, shall be notified of the emergent application and provided with a copy of the application and all supporting documents. The court shall appoint the Office of the Public Defender as counsel to represent the patient, if there is no other designated counsel. The application may be decided by the court on documentary presentations relevant to the standards established under paragraph (2) of this subsection. At the request of counsel, the court shall conduct a hearing on the record, at which hearing the court shall consider the arguments of counsel and all relevant evidence submitted. The court shall determine the format of the hearing based on the apparent complexity of the matter and the extent of doubt as to the merits of the application, and may, at its discretion, rely on certifications from witnesses or require live testimony. The court shall not grant a temporary order granting the continued hold of a person, unless the person's counsel has been designated and notified, completed any necessary interviews with the patient and investigations, and provided notice to the court on the counsel's position on the extended hold.

(2) The court may grant a temporary order granting the continued hold of a person upon an application submitted pursuant to paragraph (1) of this subsection if the hospital, emergency department, or, as applicable, the Designated Screening Service provider:

(a) exhausted all reasonable efforts to place the individual in a short-term care or psychiatric facility, or special psychiatric hospital, depending on which facility is appropriate for the person's condition and is the least restrictive environment, and has completed a form as a part of the application, which form shall include the dates of the outreach to each short-term care facility or centralized admission, in the case of a forensic patient, and the response from each short-term care facility or centralized admission and if applicable, the specific reason for rejection. In the case of a forensic patient, a hospital, emergency department, or, as applicable, the Designated Screening Service provider shall not be required to conduct outreach to facilities that do not serve forensic patients; and

(b) demonstrates that there is a substantial likelihood that, by reason of mental illness, the person will be dangerous to the person's own self or others based upon the certification of two psychiatrists who have examined the patient and deemed the patient is in need of involuntary commitment, such examinations may be conducted using telemedicine or telehealth consistent with the standard of care required for the assessment and treatment of the person's condition.

The court shall include such conditions in the temporary order as the court deems appropriate to promote diligent efforts to locate an available facility to accommodate the patient's needs and protect the rights of the person detained pending commitment. In the event that the hospital, emergency department, or, as applicable, the Designated Screening Service provider, is unable to place the person into an appropriate facility within the 72 hours of continued hold permitted by the temporary court order, the hospital or emergency department may continue to hold the person, provided that the person's counsel provides consent for the

hold and appropriate treatment that meets the standard of care is being rendered to the person. The Office of the Public Defender shall be notified and provided with a copy of any temporary court order granted pursuant to this paragraph. The patient shall receive a court hearing with respect to the issue of continued need for involuntary commitment within 20 days from the date of initial commitment or within 20 days from the date an application was filed pursuant to paragraph (1) of this subsection, whichever date occurs first, unless the patient has been administratively discharged pursuant to section 17 of P.L.1987, c.116 (C.30:4-27.17).

(3) Notwithstanding the provisions of any other law, rule, or regulation to the contrary, commencing on the effective date of P.L.2023, c.139 (C.30:4-27.9a et al.) and ending on the last day of the 36th calendar month following that effective date, each general hospital and emergency department shall prepare and submit to the Department of Human Services a quarterly report, which report shall include, but not be limited to, information on:

(a) the number of applications submitted to the court for a temporary court order permitting the continued hold of a person beyond 72 hours pursuant to paragraph (1) of this subsection;

(b) the number of temporary court orders granted pursuant to paragraph (2) of this subsection permitting the continued hold of a person beyond 72 hours;

(c) whether a person detained for longer than 72 hours: has a criminal history; has a co-occurring substance use disorder; has a co-occurring intellectual or developmental disability; has health insurance and, if so, the type of health insurance coverage; has a complex medical condition; or is unable to be released because the 72-hour timeframe falls on a weekend and either admission to treatment facilities are not provided on weekends or discharges from the facility do not occur on weekends;

(d) the length of time each individual was held beyond 72 hours before finding appropriate placement in a treatment facility;

(e) the number of individuals placed in an appropriate treatment facility within 72 hours; and

(f) any other information the department deems necessary.

Any information included in a report concerning specific individuals shall be de-identified. Each report shall be made available to the public within 60 days of the date the Department of Human Services receives the report.

c. (1) Notwithstanding the provisions of any other law, rule, or regulation to the contrary, the Commissioner of Health may, to the extent the commissioner finds necessary, commencing 120 days following the effective date of P.L.2023, c.139 (C.30:4-27.9a et al.) and ending on the last day of the 27th calendar month following that effective date, allow a general acute care hospital that is licensed for acute care hospital psychiatric beds to apply to the Department of Health for temporary licenses for beds for the involuntary commitment of patients. The department may issue temporary licenses pursuant to this paragraph if the hospital demonstrates in its application a need for such beds based on retrospective data demonstrating the need for involuntary commitment beds, a showing that the hospital continually exhausts all reasonable efforts to place individuals in short-term care, psychiatric facilities, or special psychiatric hospitals, and any other factors as determined by the Commissioner of Health. Any temporary license granted pursuant to this paragraph, unless otherwise confirmed at the next certificate of need review, as required pursuant to N.J.A.C.8:33-4.4 or its successor regulation, shall expire within 90 days of the Commissioner of Health's decision rendered pursuant to that full review process.

(2) The Department of Health shall make available on its Internet website and continuously update information concerning the total number of temporary licenses granted pursuant to paragraph (1) of this subsection, as well as the number of temporary licenses granted to each hospital that submitted an application pursuant to paragraph (1) of this subsection.

(3) The department shall submit information concerning the total number of temporary licenses granted pursuant to paragraph (1) of this subsection, as well as the number of temporary licenses granted to each hospital that submitted an application pursuant to paragraph (1) of this subsection, to the Commissioner of Human Services, which information shall: (a) be submitted in a manner that allows the Commissioner of Human Services sufficient time to include the information in the report required pursuant to subsection b. and c. of section 2 of P.L.2023, c.139 (C.30:4-27.3a); and (b) reflect the number of temporary licenses granted as of the date the information is submitted.

C.30:4-27.9b Educational committee, short-term care facilities, legal obligations.

3. The Department of Human Services shall establish an educational committee of stakeholders, which educational committee, commencing on the effective date of P.L.2025, c.108 (C.30:4-27.9b et al.) and ending on the last day of the 36th calendar month following the effective date of P.L.2023, c.139 (C.30:4-27.9a et al.), shall provide education to short-term care facilities and individual county assignment judges about the legal obligations of short-term care facilities to accept patients. Thereafter, the Department of Human Services shall provide the education to short-term care facilities and individual county assignment judges, as necessary.

4. Section 1 of P.L.2017, c.155 (C.30:4-177.66) is amended to read as:

C.30:4-177.66 Information relative to open beds in certain residential facilities.

1. a. The Division of Mental Health and Addiction Services in the Department of Human Services shall oversee the development and maintenance of a data dashboard report, which shall collect and track the daily information received pursuant to section 2 of P.L.2017, c.155 (C.30:4-177.67) about the number of open beds that are available for treatment for individuals in need of mental health or substance use disorder treatment in each facility in the State that is licensed to provide:

(1) long-term or extended-care services for mental health or substance use disorders and receives State or county funding, including, but not limited to, a psychiatric facility, psychiatric unit of a general hospital, short-term care facility, and special psychiatric hospital, as those terms are defined in section 2 of P.L.1987, c.116 (C.30:4-27.2), and a residential health care facility as defined in section 1 of P.L.1953, c.212 (C.30:11A-1); or

(2) acute or intermediate level of care services for mental health or a substance use disorder and receives State or county funding, including, but not limited to, a psychiatric facility, psychiatric unit of a general hospital, short-term care facility, and special psychiatric hospital, as those terms are defined in section 2 of P.L.1987, c.116 (C.30:4-27.2).

b. The information maintained in the data dashboard report shall include, by county:

(1) the address and telephone number of the facility;

(2) the type of services provided by the facility;

(3) the licensed bed capacity of the facility; and

(4) the number of open beds that are available for the provision of mental health or substance use disorder services, based on the information received pursuant to section 2 of P.L.2017, c.155 (C.30:4-177.67).

c. The information described in subsection b. of this section shall be:

(1) prominently displayed on the website of the department;

(2) made available to the public, upon request, through the Statewide 2-1-1 telephone system;

(3) made available using any other means that the Commissioner of Human Services deems appropriate; and

(4) made available to screening services and hospitals in the State.

d. The commissioner is authorized to solicit, receive, and accept grants, funds, or anything of value from any public or private entity and receive and accept contributions of money, property, labor, or any other thing of value from any legitimate source for the purpose of the development and maintenance of a data dashboard report pursuant to P.L.2017, c.155 (C.30:4-177.66 et seq.).

e. Until the data dashboard report required pursuant to subsection a. of this section is developed, each facility shall prominently display the information described in subsection b. of this section on the facility's Internet website and shall update the information daily as necessary.

5. This act shall take effect immediately.

Approved July 22, 2025.

SENATE, No. 4263

STATE OF NEW JERSEY

221st LEGISLATURE

INTRODUCED MARCH 17, 2025

Sponsored by:

Senator JOSEPH F. VITALE

District 19 (Middlesex)

Senator NICHOLAS P. SCUTARI

District 22 (Somerset and Union)

Co-Sponsored by:

Senators McKeon and Burgess

SYNOPSIS

Makes permanent certain sunset provisions concerning involuntary commitment.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 5/19/2025)

1 AN ACT removing certain sunset provisions concerning involuntary
2 commitment and amending P.L.2023, c.139.

3

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

6

7 1. Section 1 of P.L.2023, c.139 (C.30:4-27.9a) is amended to
8 read as follows:

9 1. a. Notwithstanding the provisions of section 9 of P.L.1987,
10 c.116 (C.30:4-27.9) or any other law, rule, or regulation to the
11 contrary, commencing on the effective date of P.L.2023, c.139
12 (C.30:4-27.9a et al.) and ending on the last day of the 24th calendar
13 month following that effective date, a short-term care or psychiatric
14 facility, or a special psychiatric hospital, may detain a person
15 admitted to the facility involuntarily by referral from a screening
16 service without a temporary court order for no more than 72 hours
17 from the time the screening certificate was executed.

18 Except in the event a general hospital was granted a temporary
19 court order permitting the continued hold of the person pursuant to
20 subsection b. of this section, which delayed a person's admission to
21 the short-term care or psychiatric facility or special psychiatric
22 hospital, a short-term care or psychiatric facility or special
23 psychiatric hospital shall not detain a person admitted to the facility
24 involuntarily by referral from a screening service without a
25 temporary court order for more than 72 hours from the time the
26 screening certificate was executed.

27 Within 24 hours of admission, the admitting facility shall initiate
28 court proceedings for the involuntary commitment of the person
29 pursuant to section 10 of P.L.1987, c.116 (C.30:4-27.10) and
30 request a temporary court order permitting the continued hold of the
31 person pending the return date of the involuntary commitment
32 hearing, which shall take place no later than 20 days from initial
33 commitment.

34 b. (1) Notwithstanding the provisions of section 9 of P.L.1987,
35 c.116 (C.30:4-27.9) or any other law, rule, or regulation to the
36 contrary, commencing on the effective date of P.L.2023, c.139
37 (C.30:4-27.9a et al.) **【and ending on the last day of the 24th**
38 **calendar month following that effective date】**, a general hospital,
39 including any satellite emergency department of a general hospital,
40 where a person is located during a screening outreach visit, may not
41 detain the person for more than 72 hours from the time a screening
42 certificate is executed, unless the hospital or emergency department
43 obtains a temporary court order permitting the continued hold of the
44 person for up to 72 additional hours, as determined by the court.
45 The hospital or emergency department may submit an emergent

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

Matter underlined thus is new matter.

1 application for such order and continue to hold the person during
2 the pendency of the application, provided that appropriate treatment
3 that meets the standard of care is being rendered to the person. The
4 Office of the Public Defender shall be notified of the emergent
5 application, provided with a copy of the application and all
6 supporting documents, and shall be appointed as counsel to
7 represent the patient. The application may be decided by the court
8 on documentary presentations relevant to the standards established
9 under paragraph (2) of this subsection. At the request of counsel,
10 the court may conduct a hearing on the record, at which hearing the
11 court shall consider the arguments of counsel and all relevant
12 evidence submitted. The court shall determine the format of the
13 hearing based on the apparent complexity of the matter and the
14 extent of doubt as to the merits of the application, and may, at its
15 discretion, rely on certifications from witnesses or require live
16 testimony.

17 (2) The court may grant a temporary order granting the continued
18 hold of a person upon an application submitted pursuant to
19 paragraph (1) of this subsection if the hospital or emergency
20 department:

21 (a) exhausted all reasonable efforts to place the individual in a
22 short-term care or psychiatric facility, or special psychiatric
23 hospital, depending on which facility is appropriate for the person's
24 condition and is the least restrictive environment; and

25 (b) demonstrates that there is a substantial likelihood that, by
26 reason of mental illness, the person will be dangerous to the
27 person's own self or others based upon the certification of two
28 psychiatrists who have examined the patient and deemed the patient
29 is in need of involuntary commitment.

30 The court shall include such conditions in the temporary order as
31 the court deems appropriate to promote diligent efforts to locate an
32 available facility to accommodate the patient's needs and protect the
33 rights of the person detained pending commitment. The Office of
34 the Public Defender shall be notified and provided with a copy of
35 any temporary court order granted pursuant to this paragraph. The
36 patient shall receive a court hearing with respect to the issue of
37 continued need for involuntary commitment within 20 days from
38 the date of initial commitment or within 20 days from the date an
39 application was filed pursuant to paragraph (1) of this subsection,
40 whichever date occurs first, unless the patient has been
41 administratively discharged pursuant to section 17 of P.L.1987,
42 c.116 (C.30:4-27.17).

43 (3) Notwithstanding the provisions of any other law, rule, or
44 regulation to the contrary, commencing on the effective date of
45 P.L.2023, c.139 (C.30:4-27.9a et al.) [and ending on the last day of
46 the 24th calendar month following that effective date] , each
47 general hospital and emergency department shall prepare and

1 submit to the Department of Human Services a quarterly report,
2 which report shall include, but not be limited to, information on:

3 (a) the number of applications submitted to the court for a
4 temporary court order permitting the continued hold of a person
5 beyond 72 hours pursuant to paragraph (1) of this subsection;

6 (b) the number of temporary court orders granted pursuant to
7 paragraph (2) of this subsection permitting the continued hold of a
8 person beyond 72 hours;

9 (c) whether a person detained for longer than 72 hours: has a
10 criminal history; has a co-occurring substance use disorder; has a
11 co-occurring intellectual or developmental disability; or is unable to
12 be released because the 72-hour timeframe falls on a weekend and
13 either admission to treatment facilities are not provided on
14 weekends, or discharges from the facility do not occur on
15 weekends;

16 (d) the length of time each individual was held beyond 72 hours
17 before finding appropriate placement in a treatment facility; and

18 (e) the number of individuals placed in an appropriate treatment
19 facility within 72 hours.

20 Any information included in a report concerning specific
21 individuals shall be de-identified. Each report shall be made
22 available to the public within 60 days of the date the Department of
23 Human Services receives the report.

24 c. (1) Notwithstanding the provisions of any other law, rule, or
25 regulation to the contrary, the Commissioner of Health may, to the
26 extent the commissioner finds necessary, commencing 120 days
27 following the effective date of P.L.2023, c.139 (C.30:4-27.9a et al.)
28 and ending on the last day of the 15th calendar month following
29 that effective date, allow a general acute care hospital that is
30 licensed for acute care hospital psychiatric beds to apply to the
31 Department of Health for temporary licenses for beds for the
32 involuntary commitment of patients. The department may issue
33 temporary licenses pursuant to this paragraph if the hospital
34 demonstrates in its application a need for such beds based on
35 retrospective data demonstrating the need for involuntary
36 commitment beds, a showing that the hospital continually exhausts
37 all reasonable efforts to place individuals in short-term care or
38 psychiatric facilities, or special psychiatric hospitals, and any other
39 factors as determined by the Commissioner of Health. Any
40 temporary license granted pursuant to this paragraph, unless
41 otherwise confirmed at the next certificate of need review, as
42 required pursuant to N.J.A.C.8:33-4.4 or its successor regulation,
43 shall expire within 90 days of the Commissioner of Health's
44 decision rendered pursuant to that full review process.

45 (2) The Department of Health shall make available on its Internet
46 website and continuously update information concerning the total
47 number of temporary licenses granted pursuant to paragraph (1) of
48 this subsection, as well as the number of temporary licenses granted

1 to each hospital that submitted an application pursuant to paragraph
2 (1) of this subsection.

3 (3) The department shall submit information concerning the total
4 number of temporary licenses granted pursuant to paragraph (1) of
5 this subsection, as well as the number of temporary licenses granted
6 to each hospital that submitted an application pursuant to paragraph
7 (1) of this subsection, to the Commissioner of Human Services,
8 which information shall: (a) be submitted in a manner that allows
9 the Commissioner of Human Services sufficient time to include the
10 information in the report required pursuant to subsection b. of
11 section 2 of **【this act】** P.L.2023, c.139 (C.30:4-27.3a); and (b)
12 reflect the number of temporary licenses granted as of the date the
13 information is submitted.
14 (cf: P.L.2023, c.139, s.1)

15

16 2. This act shall take effect immediately.

17

18

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STATEMENT

20

21 This bill would make permanent certain provisions of P.L.2023,
22 c.139 (C.30:4-27.9a et al.). P.L.2023, c.139 provides, in part, that a
23 general hospital, where a person is located during a screening
24 outreach visit, may not detain the person for more than 72 hours
25 from the time a screening certificate is executed, unless the hospital
26 or emergency department obtains a temporary court order
27 permitting the continued hold of the person for up to 72 additional
28 hours, as determined by the court. The hospital or emergency
29 department may submit an emergent application for such order and
30 continue to hold the person during the pendency of the application,
31 provided that appropriate treatment that meets the standard of care
32 is being rendered to the person. The Office of the Public Defender
33 is to be notified of the emergent application, and is to be appointed
34 as counsel to represent the patient. At the request of counsel, the
35 court may conduct a hearing on the record.

36 The court may grant a temporary order granting the continued
37 hold of a person if the hospital or emergency department:

38 (1) exhausted all reasonable efforts to place the individual in a
39 short-term care or psychiatric facility, or special psychiatric
40 hospital, depending on which facility is appropriate for the person's
41 condition and is the least restrictive environment; and

42 (2) demonstrates that there is a substantial likelihood that, by
43 reason of mental illness, the person will be dangerous to the
44 person's own self or others based upon the certification of two
45 psychiatrists who have examined the patient and deemed the patient
46 is in need of involuntary commitment.

47 P.L.2023, c.139 also requires each general hospital and
48 emergency department to prepare and submit to the Department of

S4263 VITALE, SCUTARI

6

1 Human Serves (DHS) a quarterly report containing de-identified
2 data on individuals detained at the hospital or emergency
3 department, and any temporary court order applied for or obtained.
4 The report would also be made available to the public on the
5 department's Internet webpage.

6 This bill would make permanent the above-mentioned provisions
7 of P.L.2023, c.139.

[First Reprint]

SENATE, No. 4263

STATE OF NEW JERSEY
221st LEGISLATURE

INTRODUCED MARCH 17, 2025

Sponsored by:

Senator JOSEPH F. VITALE

District 19 (Middlesex)

Senator NICHOLAS P. SCUTARI

District 22 (Somerset and Union)

Co-Sponsored by:

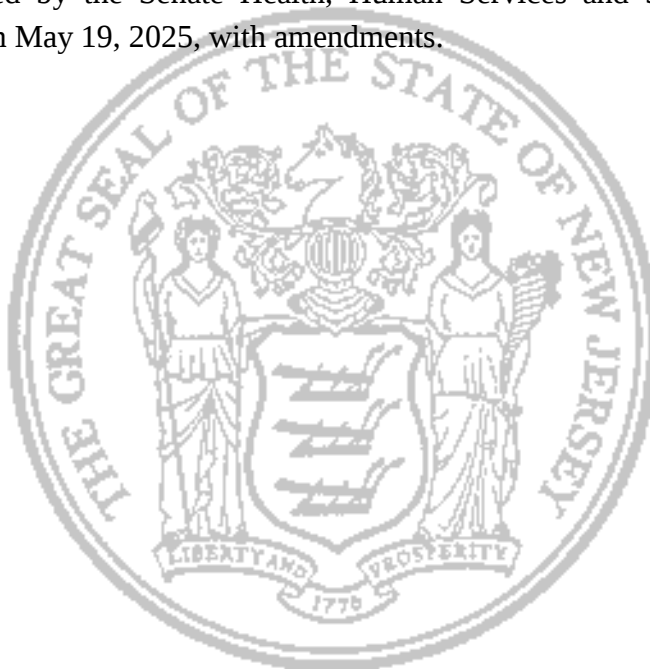
Senators McKeon and Burgess

SYNOPSIS

Revises certain provisions concerning, and establishes certain education and data reporting requirements related to, involuntary commitment.

CURRENT VERSION OF TEXT

As reported by the Senate Health, Human Services and Senior Citizens Committee on May 19, 2025, with amendments.



(Sponsorship Updated As Of: 5/19/2025)

1 AN ACT ¹["removing certain sunset provisions"]¹ concerning
 2 involuntary commitment ¹["and"] and mental health care,¹
 3 amending ¹["P.L.2023, c.139"] and supplementing various parts of
 4 statutory law¹ .

5
 6 **BE IT ENACTED** *by the Senate and General Assembly of the State*
 7 *of New Jersey:*

8
 9 ¹1. Section 2 of P.L.2023, c.139 (C. 30:4-27.3a) is amended to
 10 read as follows:

11 2. a. The Department of Human Services and the Department of
 12 Health shall jointly conduct a study concerning the challenges of
 13 placing individuals in appropriate treatment settings, and the supply
 14 of and demand for both involuntary commitment beds and voluntary
 15 commitment beds in this State. In conducting the study, the
 16 departments shall solicit input from interested stakeholders
 17 including, but not limited to, hospitals, the Office of the Public
 18 Defender, the Administrative Office of the Courts, advocates
 19 representing mental health patients, advocates representing
 20 individuals with disabilities, and representatives of psychiatric
 21 screening centers.

22 b. No later than 18 months after the effective date of P.L.2023,
 23 c.139 (C.30:4-27.9a et al.), the Commissioner of Human Services
 24 shall submit to the Governor and, pursuant to section 2 of P.L.1991,
 25 c.164 (C.52:14-19.1), to the Legislature, a report, which shall
 26 include, but not be limited to:

27 (1) a summary of the findings from the study conducted
 28 pursuant to subsection a. of this section;

29 (2) an analysis of the supply of and demand for involuntary
 30 commitment beds and voluntary commitment beds, including
 31 consideration of, to the extent practicable, the geographic location
 32 of the patient and whether the patient is an adult patient or a
 33 pediatric patient, whether the patient has a criminal history, whether
 34 the patient is uninsured or underinsured, and whether the patient has
 35 been diagnosed with an intellectual or developmental disability and
 36 a mental health condition, or has been diagnosed with a substance
 37 use disorder and a mental health condition;

38 (3) the number of temporary licenses granted by the Department
 39 of Health pursuant to paragraph (1) of subsection c. of section 1 of
 40 **[this act]** P.L.2023, c.139 (C.30:4-27.9a) as of the date the
 41 information concerning the licenses is submitted to the
 42 Commissioner of Human Services pursuant to paragraph (3) of
 43 subsection c. of section 1 of **[this act]** P.L.2023, c.139 (C.30:4-
 44 27.9a); and

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

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

¹Senate SHH committee amendments adopted May 19, 2025.

1 (4) any recommendations for legislative action.

2 c. The Department of Human Services and the Department of
3 Health shall jointly conduct a follow-up study to the study
4 conducted pursuant to subsection a. of this section. In conducting
5 the study, the departments shall solicit input from interested
6 stakeholders including, but not limited to, hospitals, the Office of
7 the Public Defender, the Administrative Office of the Courts,
8 advocates representing mental health patients, advocates
9 representing individuals with disabilities, and representatives of
10 psychiatric screening centers.

11 No later than April 30, 2026, the Commissioner of Human
12 Services shall submit to the Governor and, pursuant to section 2 of
13 P.L.1991, c.164 (C.52:14-19.1), to the Legislature, a report, which
14 shall include, but not be limited to:

15 (1) a summary of the findings from the study conducted
16 pursuant to this subsection;

17 (2) an analysis of the supply of and demand for involuntary
18 commitment beds and voluntary commitment beds, including
19 consideration of, to the extent practicable, the geographic location
20 of the patient and whether the patient is an adult patient or a
21 pediatric patient, whether the patient has a criminal history, whether
22 the patient has a complex medical condition, whether the patient is
23 uninsured or underinsured, and whether the patient has been
24 diagnosed with an intellectual or developmental disability and a
25 mental health condition, or has been diagnosed with a substance use
26 disorder and a mental health condition;

27 (3) an analysis of the supply of and demand, bed capacity, and
28 waiting lists for forensic beds at Ancora Psychiatric Hospital, Ann
29 Klein Forensic Center, and Trenton Psychiatric Hospital, including
30 consideration of whether the number of forensic beds available
31 meets the demand from hospitals and jails based on existing waiting
32 lists;

33 (4) an analysis of the supply of and demand for short-term care
34 facility beds, including consideration of, as applicable, whether the
35 beds are subject to certificate of need requirements and if so,
36 whether the Department of Health should issue a call for certificate
37 of need applications to increase the supply of short-term care
38 facility beds;

39 (5) an analysis of the State's Psychiatric Emergency Screening
40 Services system, including any recommendations for the
41 modernization of the system in order to improve the system's
42 operations and effectiveness in placing patients in appropriate care
43 settings in a timely manner;

44 (6) the number of temporary licenses granted by the Department
45 of Health pursuant to paragraph (1) of subsection c. of section 1 of
46 P.L.2023, c.139 (C.30:4-27.9a) as of the date the information
47 concerning the licenses is submitted to the Commissioner of Human

1 Services pursuant to paragraph (3) of subsection c. of section 1 of
2 P.L.2023, c.139 (C.30:4-27.9a);

3 (7) an analysis of the information collected pursuant to
4 paragraph (3) of subsection c. of section 1 of P.L.2023, c.139
5 (C.30:4-27.9a); and

6 (8) any recommendations for legislative action.¹

7 (cf: P.L.2023, c.139, s.2)

8
9 ¹**[1.] 2.**¹ Section 1 of P.L.2023, c.139 (C.30:4-27.9a) is
10 amended to read as follows:

11 1. a. Notwithstanding the provisions of section 9 of P.L.1987,
12 c.116 (C.30:4-27.9) or any other law, rule, or regulation to the
13 contrary, commencing on the effective date of P.L.2023, c.139
14 (C.30:4-27.9a et al.) and ending on the last day of the ¹**[24th]** ~~36th~~¹
15 calendar month following that effective date, a short-term care or
16 psychiatric facility, or a special psychiatric hospital, may detain a
17 person admitted to the facility involuntarily by referral from a
18 screening service without a temporary court order for no more than
19 72 hours from the time the screening certificate was executed.

20 Except in the event a general hospital was granted a temporary
21 court order permitting the continued hold of the person pursuant to
22 subsection b. of this section, which delayed a person's admission to
23 the short-term care or psychiatric facility or special psychiatric
24 hospital, a short-term care or psychiatric facility or special
25 psychiatric hospital shall not detain a person admitted to the facility
26 involuntarily by referral from a screening service without a
27 temporary court order for more than 72 hours from the time the
28 screening certificate was executed.

29 Within 24 hours of admission, the admitting facility shall initiate
30 court proceedings for the involuntary commitment of the person
31 pursuant to section 10 of P.L.1987, c.116 (C.30:4-27.10) and
32 request a temporary court order permitting the continued hold of the
33 person pending the return date of the involuntary commitment
34 hearing, which shall take place no later than 20 days from initial
35 commitment.

36 b. (1) Notwithstanding the provisions of section 9 of P.L.1987,
37 c.116 (C.30:4-27.9) or any other law, rule, or regulation to the
38 contrary, commencing on the effective date of P.L.2023, c.139
39 (C.30:4-27.9a et al.) **[and ending on the last day of the 24th**
40 **calendar month following that effective date]** ¹and ending on the
41 last day of the 36th calendar month following that effective date¹, a
42 general hospital, including any satellite emergency department of a
43 general hospital, ¹**[where a person is located during a screening**
44 **outreach visit,]**¹ may not detain ¹**[the]** a¹ person for more than 72
45 hours from the time a screening certificate is executed, unless the
46 hospital or emergency department obtains a temporary court order
47 permitting the continued hold of the person for up to 72 additional

1 hours, as determined by the court ¹, or the person, through the
2 person's counsel, provides consent for the continued hold¹. ¹**【The】**
3 If it becomes evident that a hospital or emergency department will
4 not be able to discharge or admit the person to another facility
5 within 72 hours, the¹ hospital ¹**【or】** ,¹ emergency department
6 ¹**【may】** , or, as applicable, the Designated Screening Service
7 provider, shall¹ submit an emergent application for such order
8 ¹**【and】** . The hospital or emergency department shall¹ continue to
9 hold the person during the pendency of the application ¹and any
10 investigation conducted by the person's counsel¹ , provided that
11 appropriate treatment that meets the standard of care is being
12 rendered to the person. The Office of the Public Defender ¹and
13 other designated counsel, as applicable,¹ shall be notified of the
14 emergent application ¹**【,】** and¹ provided with a copy of the
15 application and all supporting documents ¹**【, and】** . The court¹
16 shall ¹**【be appointed】** appoint the Office of the Public Defender¹ as
17 counsel to represent the patient ¹, if there is no other designated
18 counsel¹ . The application may be decided by the court on
19 documentary presentations relevant to the standards established
20 under paragraph (2) of this subsection. At the request of counsel,
21 the court ¹**【may】** shall¹ conduct a hearing on the record, at which
22 hearing the court shall consider the arguments of counsel and all
23 relevant evidence submitted. The court shall determine the format
24 of the hearing based on the apparent complexity of the matter and
25 the extent of doubt as to the merits of the application, and may, at
26 its discretion, rely on certifications from witnesses or require live
27 testimony. ¹The court shall not grant a temporary order granting
28 the continued hold of a person, unless the person's counsel has been
29 designated and notified, completed any necessary interviews with
30 the patient and investigations, and provided notice to the court on
31 the counsel's position on the extended hold.¹

32 (2) The court may grant a temporary order granting the
33 continued hold of a person upon an application submitted pursuant
34 to paragraph (1) of this subsection if the hospital ¹**【or】** ,¹
35 emergency department ¹, or, as applicable, the Designated
36 Screening Service provider¹ :

37 (a) exhausted all reasonable efforts to place the individual in a
38 short-term care or psychiatric facility, or special psychiatric
39 hospital, depending on which facility is appropriate for the person's
40 condition and is the least restrictive environment ¹, and has
41 completed a form as a part of the application, which form shall
42 include the dates of the outreach to each short-term care facility or
43 centralized admission, in the case of a forensic patient, and the
44 response from each short-term care facility or centralized admission
45 and if applicable, the specific reason for rejection. In the case of a
46 forensic patient, a hospital, emergency department or, as applicable,

1 the Designated Screening Service provider shall not be required to
2 conduct outreach to facilities that do not serve forensic patients¹ ;
3 and

4 (b) demonstrates that there is a substantial likelihood that, by
5 reason of mental illness, the person will be dangerous to the
6 person's own self or others based upon the certification of two
7 psychiatrists who have examined the patient and deemed the patient
8 is in need of involuntary commitment ¹, such examinations may be
9 conducted using telemedicine or telehealth consistent with the
10 standard of care required for the assessment and treatment of the
11 person's condition¹ .

12 The court shall include such conditions in the temporary order as
13 the court deems appropriate to promote diligent efforts to locate an
14 available facility to accommodate the patient's needs and protect the
15 rights of the person detained pending commitment. ¹In the event
16 that the hospital or emergency department is unable to place the
17 person into an appropriate facility within the 72 hours of continued
18 hold permitted by the temporary court order, the hospital or
19 emergency department may continue to hold the person, provided
20 that the person's counsel provides consent for the hold and
21 appropriate treatment that meets the standard of care is being
22 rendered to the person.¹ The Office of the Public Defender shall be
23 notified and provided with a copy of any temporary court order
24 granted pursuant to this paragraph. The patient shall receive a court
25 hearing with respect to the issue of continued need for involuntary
26 commitment within 20 days from the date of initial commitment or
27 within 20 days from the date an application was filed pursuant to
28 paragraph (1) of this subsection, whichever date occurs first, unless
29 the patient has been administratively discharged pursuant to section
30 17 of P.L.1987, c.116 (C.30:4-27.17).

31 (3) Notwithstanding the provisions of any other law, rule, or
32 regulation to the contrary, commencing on the effective date of
33 P.L.2023, c.139 (C.30:4-27.9a et al.) **【and ending on the last day of**
34 **the 24th calendar month following that effective date】** ¹and ending
35 on the last day of the 36th calendar month following that effective
36 date¹ , each general hospital and emergency department shall
37 prepare and submit to the Department of Human Services a
38 quarterly report, which report shall include, but not be limited to,
39 information on:

40 (a) the number of applications submitted to the court for a
41 temporary court order permitting the continued hold of a person
42 beyond 72 hours pursuant to paragraph (1) of this subsection;

43 (b) the number of temporary court orders granted pursuant to
44 paragraph (2) of this subsection permitting the continued hold of a
45 person beyond 72 hours;

46 (c) whether a person detained for longer than 72 hours: has a
47 criminal history; has a co-occurring substance use disorder; has a

1 co-occurring intellectual or developmental disability; 'has health
2 insurance and if so, the type of health insurance coverage; has a
3 complex medical condition;¹ or is unable to be released because the
4 72-hour timeframe falls on a weekend and either admission to
5 treatment facilities are not provided on weekends, or discharges
6 from the facility do not occur on weekends;

7 (d) the length of time each individual was held beyond 72 hours
8 before finding appropriate placement in a treatment facility;
9 **'[and]'**

10 (e) the number of individuals placed in an appropriate treatment
11 facility within 72 hours **';** and

12 (f) any other information the department deems necessary'.

13 Any information included in a report concerning specific
14 individuals shall be de-identified. Each report shall be made
15 available to the public within 60 days of the date the Department of
16 Human Services receives the report.

17 c. (1) Notwithstanding the provisions of any other law, rule, or
18 regulation to the contrary, the Commissioner of Health may, to the
19 extent the commissioner finds necessary, commencing 120 days
20 following the effective date of P.L.2023, c.139 (C.30:4-27.9a et al.)
21 and ending on the last day of the **'[15th] 27th'** calendar month
22 following that effective date, allow a general acute care hospital
23 that is licensed for acute care hospital psychiatric beds to apply to
24 the Department of Health for temporary licenses for beds for the
25 involuntary commitment of patients. The department may issue
26 temporary licenses pursuant to this paragraph if the hospital
27 demonstrates in its application a need for such beds based on
28 retrospective data demonstrating the need for involuntary
29 commitment beds, a showing that the hospital continually exhausts
30 all reasonable efforts to place individuals in short-term care or
31 psychiatric facilities, or special psychiatric hospitals, and any other
32 factors as determined by the Commissioner of Health. Any
33 temporary license granted pursuant to this paragraph, unless
34 otherwise confirmed at the next certificate of need review, as
35 required pursuant to N.J.A.C.8:33-4.4 or its successor regulation,
36 shall expire within 90 days of the Commissioner of Health's
37 decision rendered pursuant to that full review process.

38 (2) The Department of Health shall make available on its Internet
39 website and continuously update information concerning the total
40 number of temporary licenses granted pursuant to paragraph (1) of
41 this subsection, as well as the number of temporary licenses granted
42 to each hospital that submitted an application pursuant to paragraph
43 (1) of this subsection.

44 (3) The department shall submit information concerning the total
45 number of temporary licenses granted pursuant to paragraph (1) of
46 this subsection, as well as the number of temporary licenses granted
47 to each hospital that submitted an application pursuant to paragraph

(1) of this subsection, to the Commissioner of Human Services, which information shall: (a) be submitted in a manner that allows the Commissioner of Human Services sufficient time to include the information in the report required pursuant to subsection b. ¹and c. ¹ of section 2 of **【this act】** P.L.2023, c.139 (C.30:4-27.3a); and (b) reflect the number of temporary licenses granted as of the date the information is submitted.
(cf: P.L.2023, c.139, s.1)

¹3. (New section) The Department of Human Services shall establish an educational committee of stakeholders, which educational committee, commencing on the effective date of P.L. , c. (C.) (pending before the Legislature as this bill) and ending on the last day of the 36th calendar month following the effective date of P.L.2023, c.139 (C.30:4-27.9a et al.), shall provide education to short-term care facilities and individual county assignment judges about the legal obligations of short-term care facilities to accept patients. Thereafter, the Department of Human Services shall provide the education to short-term care facilities and individual county assignment judges, as necessary.¹

¹4. Section 1 of P.L.2017, c.155 (C.30:4-177.66) is amended to read as:

1. a. The Division of Mental Health and Addiction Services in the Department of Human Services shall oversee the development and maintenance of a data dashboard report, which shall collect and track the daily information received pursuant to section 2 of **【this act】** P.L.2017, c.155 (C.30:4-177.67) about the number of open beds that are available for treatment for individuals in need of mental health or substance use disorder treatment in each facility in the State that is licensed to provide:

(1) long term or extended care services for mental health or substance use disorders and receives State or county funding, including, but not limited to, a psychiatric facility, psychiatric unit of a general hospital, short-term care facility, and special psychiatric hospital, as those terms are defined in section 2 of P.L.1987, c.116 (C.30:4-27.2), and a residential health care facility as defined in section 1 of P.L.1953, c.212 (C.30:11A-1); or

(2) acute or intermediate level of care services for mental health or a substance use disorder and receives State or county funding, including, but not limited to, a psychiatric facility, psychiatric unit of a general hospital, short-term care facility, and special psychiatric hospital, as those terms are defined in section 2 of P.L.1987, c.116 (C.30:4-27.2).

b. The information maintained in the data dashboard report shall include, by county:

(1) the address and telephone number of the facility;

1 (2) the type of services provided by the facility;
2 (3) the licensed bed capacity of the facility; and
3 (4) the number of open beds that are available for the provision
4 of mental health or substance use disorder services, based on the
5 information received pursuant to section 2 of **[this act]** P.L.2017,
6 c.155 (C.30:4-177.67).

7 c. The information described in subsection b. of this section
8 shall be:

9 (1) prominently displayed on the website of the department;

10 (2) made available to the public, upon request, through the
11 Statewide 2-1-1 telephone system; **[and]**

12 (3) made available using any other means that the
13 Commissioner of Human Services deems appropriate; and

14 (4) made available to screening services and hospitals in the
15 State.

16 d. The commissioner is authorized to solicit, receive, and
17 accept grants, funds, or anything of value from any public or private
18 entity and receive and accept contributions of money, property,
19 labor, or any other thing of value from any legitimate source for the
20 purpose of the development and maintenance of a data dashboard
21 report pursuant to **[this act]** P.L.2017, c.155 (C.30:4-177.66 et
22 seq.).

23 e. Until the data dashboard report required pursuant to
24 subsection a. of this section is developed, each facility shall
25 prominently display the information described in subsection b. of
26 this section on the facility's Internet website and shall update the
27 information daily as necessary.

28 (cf: P.L.2017, c.155, s.1)

29

30 ¹**[2.] 5.**¹ This act shall take effect immediately.

[Second Reprint]

SENATE, No. 4263

STATE OF NEW JERSEY
221st LEGISLATURE

INTRODUCED MARCH 17, 2025

Sponsored by:

Senator JOSEPH F. VITALE

District 19 (Middlesex)

Senator NICHOLAS P. SCUTARI

District 22 (Somerset and Union)

Assemblywoman LINDA S. CARTER

District 22 (Somerset and Union)

Assemblywoman SHAVONDA E. SUMTER

District 35 (Bergen and Passaic)

Assemblywoman SHANIQUE SPEIGHT

District 29 (Essex and Hudson)

Co-Sponsored by:

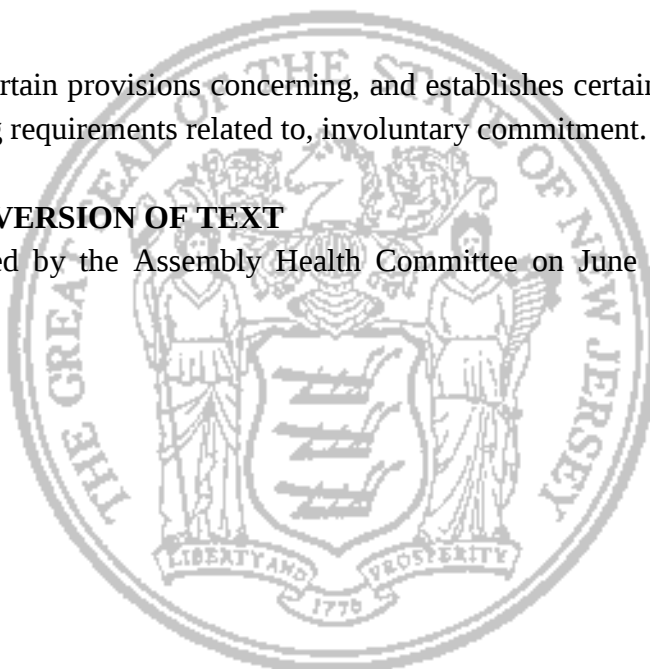
Senators McKeon, Burgess and Assemblyman Atkins

SYNOPSIS

Revises certain provisions concerning, and establishes certain education and data reporting requirements related to, involuntary commitment.

CURRENT VERSION OF TEXT

As reported by the Assembly Health Committee on June 12, 2025, with amendments.



(Sponsorship Updated As Of: 6/30/2025)

1 AN ACT ¹**removing certain sunset provisions**¹ concerning
2 involuntary commitment ¹**and** and mental health care,¹
3 amending ¹**P.L.2023, c.139** and supplementing various parts of
4 statutory law¹ .
5

6 **BE IT ENACTED** *by the Senate and General Assembly of the State*
7 *of New Jersey:*
8

9 ¹1. Section 2 of P.L.2023, c.139 (C. 30:4-27.3a) is amended to
10 read as follows:

11 2. a. The Department of Human Services and the Department of
12 Health shall jointly conduct a study concerning the challenges of
13 placing individuals in appropriate treatment settings, and the supply
14 of and demand for both involuntary commitment beds and voluntary
15 commitment beds in this State. In conducting the study, the
16 departments shall solicit input from interested stakeholders
17 including, but not limited to, hospitals, the Office of the Public
18 Defender, the Administrative Office of the Courts, advocates
19 representing mental health patients, advocates representing
20 individuals with disabilities, and representatives of psychiatric
21 screening centers.

22 b. No later than 18 months after the effective date of P.L.2023,
23 c.139 (C.30:4-27.9a et al.), the Commissioner of Human Services
24 shall submit to the Governor and, pursuant to section 2 of P.L.1991,
25 c.164 (C.52:14-19.1), to the Legislature, a report, which shall
26 include, but not be limited to:

27 (1) a summary of the findings from the study conducted
28 pursuant to subsection a. of this section;

29 (2) an analysis of the supply of and demand for involuntary
30 commitment beds and voluntary commitment beds, including
31 consideration of, to the extent practicable, the geographic location
32 of the patient and whether the patient is an adult patient or a
33 pediatric patient, whether the patient has a criminal history, whether
34 the patient is uninsured or underinsured, and whether the patient has
35 been diagnosed with an intellectual or developmental disability and
36 a mental health condition, or has been diagnosed with a substance
37 use disorder and a mental health condition;

38 (3) the number of temporary licenses granted by the Department
39 of Health pursuant to paragraph (1) of subsection c. of section 1 of
40 **this act** P.L.2023, c.139 (C.30:4-27.9a) as of the date the
41 information concerning the licenses is submitted to the
42 Commissioner of Human Services pursuant to paragraph (3) of
43 subsection c. of section 1 of **this act** P.L.2023, c.139 (C.30:4-
44 27.9a) ; and

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

Matter underlined this is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

¹Senate SHH committee amendments adopted May 19, 2025.

²Assembly AHE committee amendments adopted June 12, 2025.

1 (4) any recommendations for legislative action.

2 c. The Department of Human Services and the Department of
3 Health shall jointly conduct a follow-up study to the study
4 conducted pursuant to subsection a. of this section. In conducting
5 the study, the departments shall solicit input from interested
6 stakeholders including, but not limited to, hospitals, the Office of
7 the Public Defender, the Administrative Office of the Courts,
8 advocates representing mental health patients, advocates
9 representing individuals with disabilities, and representatives of
10 psychiatric screening centers.

11 No later than April 30, 2026, the Commissioner of Human
12 Services shall submit to the Governor and, pursuant to section 2 of
13 P.L.1991, c.164 (C.52:14-19.1), to the Legislature, a report, which
14 shall include, but not be limited to:

15 (1) a summary of the findings from the study conducted
16 pursuant to this subsection;

17 (2) an analysis of the supply of and demand for involuntary
18 commitment beds and voluntary commitment beds, including
19 consideration of, to the extent practicable, the geographic location
20 of the patient and whether the patient is an adult patient or a
21 pediatric patient, whether the patient has a criminal history, whether
22 the patient has a complex medical condition, whether the patient is
23 uninsured or underinsured, and whether the patient has been
24 diagnosed with an intellectual or developmental disability and a
25 mental health condition, or has been diagnosed with a substance use
26 disorder and a mental health condition;

27 (3) an analysis of the supply of and demand, bed capacity, and
28 waiting lists for forensic beds at Ancora Psychiatric Hospital, Ann
29 Klein Forensic Center, and Trenton Psychiatric Hospital, including
30 consideration of whether the number of forensic beds available
31 meets the demand from hospitals and jails based on existing waiting
32 lists;

33 (4) an analysis of the supply of and demand for short-term care
34 facility beds, including consideration of, as applicable, whether the
35 beds are subject to certificate of need requirements and if so,
36 whether the Department of Health should issue a call for certificate
37 of need applications to increase the supply of short-term care
38 facility beds;

39 (5) an analysis of the State's Psychiatric Emergency Screening
40 Services system, including any recommendations for the
41 modernization of the system in order to improve the system's
42 operations and effectiveness in placing patients in appropriate care
43 settings in a timely manner;

44 (6) the number of temporary licenses granted by the Department
45 of Health pursuant to paragraph (1) of subsection c. of section 1 of
46 P.L.2023, c.139 (C.30:4-27.9a) as of the date the information
47 concerning the licenses is submitted to the Commissioner of Human

1 Services pursuant to paragraph (3) of subsection c. of section 1 of
2 P.L.2023, c.139 (C.30:4-27.9a);

3 (7) an analysis of the information collected pursuant to
4 paragraph (3) of subsection c. of section 1 of P.L.2023, c.139
5 (C.30:4-27.9a); and

6 (8) any recommendations for legislative action.¹

7 (cf: P.L.2023, c.139, s.2)

8
9 ¹**[1.] 2.**¹ Section 1 of P.L.2023, c.139 (C.30:4-27.9a) is
10 amended to read as follows:

11 1. a. Notwithstanding the provisions of section 9 of P.L.1987,
12 c.116 (C.30:4-27.9) or any other law, rule, or regulation to the
13 contrary, commencing on the effective date of P.L.2023, c.139
14 (C.30:4-27.9a et al.) and ending on the last day of the ¹**[24th]** 36th¹
15 calendar month following that effective date, a short-term care or
16 psychiatric facility, or a special psychiatric hospital, may detain a
17 person admitted to the facility involuntarily by referral from a
18 screening service without a temporary court order for no more than
19 72 hours from the time the screening certificate was executed.

20 Except in the event a general hospital was granted a temporary
21 court order permitting the continued hold of the person pursuant to
22 subsection b. of this section, which delayed a person's admission to
23 the short-term care or psychiatric facility or special psychiatric
24 hospital, a short-term care or psychiatric facility or special
25 psychiatric hospital shall not detain a person admitted to the facility
26 involuntarily by referral from a screening service without a
27 temporary court order for more than 72 hours from the time the
28 screening certificate was executed.

29 Within 24 hours of admission, the admitting facility shall initiate
30 court proceedings for the involuntary commitment of the person
31 pursuant to section 10 of P.L.1987, c.116 (C.30:4-27.10) and
32 request a temporary court order permitting the continued hold of the
33 person pending the return date of the involuntary commitment
34 hearing, which shall take place no later than 20 days from initial
35 commitment.

36 b. (1) Notwithstanding the provisions of section 9 of P.L.1987,
37 c.116 (C.30:4-27.9) or any other law, rule, or regulation to the
38 contrary, commencing on the effective date of P.L.2023, c.139
39 (C.30:4-27.9a et al.) **[and ending on the last day of the 24th**
40 **calendar month following that effective date]** ¹and ending on the
41 last day of the 36th calendar month following that effective date¹, a
42 general hospital, including any satellite emergency department of a
43 general hospital, ¹**[where a person is located during a screening**
44 **outreach visit,]**¹ may not detain ¹**[the]** a¹ person for more than 72
45 hours from the time a screening certificate is executed, unless the
46 hospital or emergency department obtains a temporary court order
47 permitting the continued hold of the person for up to 72 additional

1 hours, as determined by the court ¹, or the person, through the
2 person's counsel, provides consent for the continued hold¹. ¹ **["The"]**
3 If it becomes evident that a hospital or emergency department will
4 not be able to discharge or admit the person to another facility
5 within 72 hours, the¹ hospital ¹**["or"]**, ¹ emergency department
6 ¹**["may"]**, or, as applicable, the Designated Screening Service
7 provider, shall¹ submit an emergent application for such order
8 ¹**["and"]**. The hospital or emergency department shall¹ continue to
9 hold the person during the pendency of the application ¹and any
10 investigation conducted by the person's counsel¹, provided that
11 appropriate treatment that meets the standard of care is being
12 rendered to the person. The Office of the Public Defender ¹and
13 other designated counsel, as applicable,¹ shall be notified of the
14 emergent application ¹**["and"]** and¹ provided with a copy of the
15 application and all supporting documents ¹**["and"]**. The court¹
16 shall ¹**["be appointed"]** appoint the Office of the Public Defender¹ as
17 counsel to represent the patient ¹, if there is no other designated
18 counsel¹. The application may be decided by the court on
19 documentary presentations relevant to the standards established
20 under paragraph (2) of this subsection. At the request of counsel,
21 the court ¹**["may"]** shall¹ conduct a hearing on the record, at which
22 hearing the court shall consider the arguments of counsel and all
23 relevant evidence submitted. The court shall determine the format
24 of the hearing based on the apparent complexity of the matter and
25 the extent of doubt as to the merits of the application, and may, at
26 its discretion, rely on certifications from witnesses or require live
27 testimony. ¹The court shall not grant a temporary order granting
28 the continued hold of a person, unless the person's counsel has been
29 designated and notified, completed any necessary interviews with
30 the patient and investigations, and provided notice to the court on
31 the counsel's position on the extended hold.¹

32 (2) The court may grant a temporary order granting the
33 continued hold of a person upon an application submitted pursuant
34 to paragraph (1) of this subsection if the hospital ¹**["or"]**, ¹
35 emergency department ¹, or, as applicable, the Designated
36 Screening Service provider¹ :

37 (a) exhausted all reasonable efforts to place the individual in a
38 short-term care or psychiatric facility, or special psychiatric
39 hospital, depending on which facility is appropriate for the person's
40 condition and is the least restrictive environment ¹, and has
41 completed a form as a part of the application, which form shall
42 include the dates of the outreach to each short-term care facility or
43 centralized admission, in the case of a forensic patient, and the
44 response from each short-term care facility or centralized admission
45 and if applicable, the specific reason for rejection. In the case of a
46 forensic patient, a hospital, emergency department or, as applicable,

1 the Designated Screening Service provider shall not be required to
2 conduct outreach to facilities that do not serve forensic patients¹ ;
3 and

4 (b) demonstrates that there is a substantial likelihood that, by
5 reason of mental illness, the person will be dangerous to the
6 person's own self or others based upon the certification of two
7 psychiatrists who have examined the patient and deemed the patient
8 is in need of involuntary commitment ¹, such examinations may be
9 conducted using telemedicine or telehealth consistent with the
10 standard of care required for the assessment and treatment of the
11 person's condition¹ .

12 The court shall include such conditions in the temporary order as
13 the court deems appropriate to promote diligent efforts to locate an
14 available facility to accommodate the patient's needs and protect the
15 rights of the person detained pending commitment. ¹In the event
16 that the hospital ²or ²emergency department ², or, as applicable,
17 the Designated Screening Service provider, ² is unable to place the
18 person into an appropriate facility within the 72 hours of continued
19 hold permitted by the temporary court order, the hospital or
20 emergency department may continue to hold the person, provided
21 that the person's counsel provides consent for the hold and
22 appropriate treatment that meets the standard of care is being
23 rendered to the person.¹ The Office of the Public Defender shall be
24 notified and provided with a copy of any temporary court order
25 granted pursuant to this paragraph. The patient shall receive a court
26 hearing with respect to the issue of continued need for involuntary
27 commitment within 20 days from the date of initial commitment or
28 within 20 days from the date an application was filed pursuant to
29 paragraph (1) of this subsection, whichever date occurs first, unless
30 the patient has been administratively discharged pursuant to section
31 17 of P.L.1987, c.116 (C.30:4-27.17).

32 (3) Notwithstanding the provisions of any other law, rule, or
33 regulation to the contrary, commencing on the effective date of
34 P.L.2023, c.139 (C.30:4-27.9a et al.) **and ending on the last day of**
35 **the 24th calendar month following that effective date** ¹and ending
36 on the last day of the 36th calendar month following that effective
37 date¹ , each general hospital and emergency department shall
38 prepare and submit to the Department of Human Services a
39 quarterly report, which report shall include, but not be limited to,
40 information on:

41 (a) the number of applications submitted to the court for a
42 temporary court order permitting the continued hold of a person
43 beyond 72 hours pursuant to paragraph (1) of this subsection;

44 (b) the number of temporary court orders granted pursuant to
45 paragraph (2) of this subsection permitting the continued hold of a
46 person beyond 72 hours;

1 (c) whether a person detained for longer than 72 hours: has a
2 criminal history; has a co-occurring substance use disorder; has a
3 co-occurring intellectual or developmental disability; 'has health
4 insurance and if so, the type of health insurance coverage; has a
5 complex medical condition;¹ or is unable to be released because the
6 72-hour timeframe falls on a weekend and either admission to
7 treatment facilities are not provided on weekends, or discharges
8 from the facility do not occur on weekends;

9 (d) the length of time each individual was held beyond 72 hours
10 before finding appropriate placement in a treatment facility;
11 **'[and]'**

12 (e) the number of individuals placed in an appropriate treatment
13 facility within 72 hours ¹; and

14 (f) any other information the department deems necessary¹.

15 Any information included in a report concerning specific
16 individuals shall be de-identified. Each report shall be made
17 available to the public within 60 days of the date the Department of
18 Human Services receives the report.

19 c. (1) Notwithstanding the provisions of any other law, rule, or
20 regulation to the contrary, the Commissioner of Health may, to the
21 extent the commissioner finds necessary, commencing 120 days
22 following the effective date of P.L.2023, c.139 (C.30:4-27.9a et al.)
23 and ending on the last day of the **'[15th] 27th'**¹ calendar month
24 following that effective date, allow a general acute care hospital
25 that is licensed for acute care hospital psychiatric beds to apply to
26 the Department of Health for temporary licenses for beds for the
27 involuntary commitment of patients. The department may issue
28 temporary licenses pursuant to this paragraph if the hospital
29 demonstrates in its application a need for such beds based on
30 retrospective data demonstrating the need for involuntary
31 commitment beds, a showing that the hospital continually exhausts
32 all reasonable efforts to place individuals in short-term care or
33 psychiatric facilities, or special psychiatric hospitals, and any other
34 factors as determined by the Commissioner of Health. Any
35 temporary license granted pursuant to this paragraph, unless
36 otherwise confirmed at the next certificate of need review, as
37 required pursuant to N.J.A.C.8:33-4.4 or its successor regulation,
38 shall expire within 90 days of the Commissioner of Health's
39 decision rendered pursuant to that full review process.

40 (2) The Department of Health shall make available on its Internet
41 website and continuously update information concerning the total
42 number of temporary licenses granted pursuant to paragraph (1) of
43 this subsection, as well as the number of temporary licenses granted
44 to each hospital that submitted an application pursuant to paragraph
45 (1) of this subsection.

46 (3) The department shall submit information concerning the total
47 number of temporary licenses granted pursuant to paragraph (1) of

1 this subsection, as well as the number of temporary licenses granted
2 to each hospital that submitted an application pursuant to paragraph
3 (1) of this subsection, to the Commissioner of Human Services,
4 which information shall: (a) be submitted in a manner that allows
5 the Commissioner of Human Services sufficient time to include the
6 information in the report required pursuant to subsection b. ¹and c. ¹
7 of section 2 of **【this act】** P.L.2023, c.139 (C.30:4-27.3a); and (b)
8 reflect the number of temporary licenses granted as of the date the
9 information is submitted.

10 (cf: P.L.2023, c.139, s.1)

11
12 ¹3. (New section) The Department of Human Services shall
13 establish an educational committee of stakeholders, which
14 educational committee, commencing on the effective date of
15 P.L. , c. (C.) (pending before the Legislature as this bill)
16 and ending on the last day of the 36th calendar month following the
17 effective date of P.L.2023, c.139 (C.30:4-27.9a et al.), shall provide
18 education to short-term care facilities and individual county
19 assignment judges about the legal obligations of short-term care
20 facilities to accept patients. Thereafter, the Department of Human
21 Services shall provide the education to short-term care facilities and
22 individual county assignment judges, as necessary.¹

23
24 ¹4. Section 1 of P.L.2017, c.155 (C.30:4-177.66) is amended to
25 read as:

26 1. a. The Division of Mental Health and Addiction Services in
27 the Department of Human Services shall oversee the development
28 and maintenance of a data dashboard report, which shall collect and
29 track the daily information received pursuant to section 2 of **【this**
30 **act】** P.L.2017, c.155 (C.30:4-177.67) about the number of open
31 beds that are available for treatment for individuals in need of
32 mental health or substance use disorder treatment in each facility in
33 the State that is licensed to provide:

34 (1) long term or extended care services for mental health or
35 substance use disorders and receives State or county funding,
36 including, but not limited to, a psychiatric facility, psychiatric unit
37 of a general hospital, short-term care facility, and special
38 psychiatric hospital, as those terms are defined in section 2 of
39 P.L.1987, c.116 (C.30:4-27.2), and a residential health care facility
40 as defined in section 1 of P.L.1953, c.212 (C.30:11A-1); or

41 (2) acute or intermediate level of care services for mental health
42 or a substance use disorder and receives State or county funding,
43 including, but not limited to, a psychiatric facility, psychiatric unit
44 of a general hospital, short-term care facility, and special
45 psychiatric hospital, as those terms are defined in section 2 of
46 P.L.1987, c.116 (C.30:4-27.2).

- 1 b. The information maintained in the data dashboard report
2 shall include, by county:
- 3 (1) the address and telephone number of the facility;
4 (2) the type of services provided by the facility;
5 (3) the licensed bed capacity of the facility; and
6 (4) the number of open beds that are available for the provision
7 of mental health or substance use disorder services, based on the
8 information received pursuant to section 2 of **【this act】** P.L.2017,
9 c.155 (C.30:4-177.67).
- 10 c. The information described in subsection b. of this section
11 shall be:
- 12 (1) prominently displayed on the website of the department;
13 (2) made available to the public, upon request, through the
14 Statewide 2-1-1 telephone system; **【and】**
15 (3) made available using any other means that the
16 Commissioner of Human Services deems appropriate; and
17 (4) made available to screening services and hospitals in the
18 State.
- 19 d. The commissioner is authorized to solicit, receive, and
20 accept grants, funds, or anything of value from any public or private
21 entity and receive and accept contributions of money, property,
22 labor, or any other thing of value from any legitimate source for the
23 purpose of the development and maintenance of a data dashboard
24 report pursuant to **【this act】** P.L.2017, c.155 (C.30:4-177.66 et
25 seq.).
- 26 e. Until the data dashboard report required pursuant to
27 subsection a. of this section is developed, each facility shall
28 prominently display the information described in subsection b. of
29 this section on the facility's Internet website and shall update the
30 information daily as necessary.
31 (cf: P.L.2017, c.155, s.1)
32
- 33 ¹**【2.】** 5.¹ This act shall take effect immediately.

ASSEMBLY AGING AND HUMAN SERVICES COMMITTEE

STATEMENT TO

[First Reprint]

SENATE, No. 4263

with committee amendments

STATE OF NEW JERSEY

DATED: JUNE 12, 2025

The Assembly Health Committee reports favorably and with committee amendments Senate Bill No. 4263 (1R).

As amended, this bill amends P.L.2023, c.139 and extends the expiration of certain provisions of P.L.2023, c.139 from 24 months from the effective date of P.L.2023, c.139 to 36 months.

P.L.2023, c.139 provides, in part, that a general hospital or emergency department, where a person is located during a screening outreach visit, may not detain the person for more than 72 hours from the time a screening certificate is executed, unless the hospital or emergency department obtains a temporary court order permitting the continued hold of the person for up to 72 additional hours, as determined by the court. P.L.2023, c.139 also required the Department of Human Services and the Department of Health to jointly conduct a study concerning the challenges of placing individuals in appropriate treatment settings, and the supply of and demand for both involuntary commitment beds and voluntary commitment beds in this State.

The bill revises certain provisions of P.L.2023, c.139 to stipulate when consent can be provided to authorize a continued hold of a person and to provide additional requirements concerning the manner in which a hospital, emergency department, or Designated Screening Service provider can apply for a temporary court order for a continued hold and a court can grant an order. The bill expands certain reporting requirements for general hospitals and emergency departments under P.L.2023, c.139.

As amended, the bill requires the Departments of Human Services and Health to jointly conduct a follow-up study to the study conducted pursuant to P.L.2023, c.139. No later than April 30, 2026, the Commissioner of Human Services will submit to the Governor and Legislature a report on the study's updated findings and additional analyses required by the bill.

The bill requires the Department of Human Services to establish an educational committee of stakeholders, which educational committee, commencing on the bill's effective date and ending on the last day of

the 36th calendar month following the effective date of P.L.2023, c.139, will provide education to short-term care facilities and individual county assignment judges about the legal obligations of short-term care facilities to accept patients. Thereafter, the Department of Human Services will provide the education to short-term care facilities and individual county assignment judges, as necessary.

The bill amends the requirements of P.L.2017, c.155 to provide that the data dashboard report developed under P.L.2017, c.155 be made available to screening services and hospitals in the State. The bill provides that, until the data dashboard report is developed, certain facilities will prominently display certain information on the facility's Internet website and will update the information daily as necessary.

As amended and reported by the committee, Senate Bill No. 4263 (1R), is identical to Assembly Bill No. 5408 which was also amended and reported by the committee on this date.

COMMITTEE AMENDMENTS:

The committee amendments extend a provision of section 2 to Designated Screening Service providers.

SENATE HEALTH, HUMAN SERVICES AND SENIOR CITIZENS COMMITTEE

STATEMENT TO

SENATE, No. 4263

with committee amendments

STATE OF NEW JERSEY

DATED: MAY 19, 2025

The Senate Health, Human Services and Senior Citizens Committee reports favorably and with committee amendments Senate Bill No. 4263.

As amended, this bill amends P.L.2023, c.139 and extends the expiration of certain provisions of P.L.2023, c.139 from 24 months from the effective date of P.L.2023, c.139 to 36 months.

P.L.2023, c.139 provides, in part, that a general hospital or emergency department, where a person is located during a screening outreach visit, may not detain the person for more than 72 hours from the time a screening certificate is executed, unless the hospital or emergency department obtains a temporary court order permitting the continued hold of the person for up to 72 additional hours, as determined by the court. P.L.2023, c.139 also required the Department of Human Services and the Department of Health to jointly conduct a study concerning the challenges of placing individuals in appropriate treatment settings, and the supply of and demand for both involuntary commitment beds and voluntary commitment beds in this State.

The bill revises certain provisions of P.L.2023, c.139 to stipulate when consent can be provided to authorize a continued hold of a person and to provide additional requirements concerning the manner in which a hospital, emergency department, or Designated Screening Service provider can apply for a temporary court order for a continued hold and a court can grant an order. The bill expands certain reporting requirements for general hospitals and emergency departments under P.L.2023, c.139.

As amended, the bill requires the Departments of Human Services and Health to jointly conduct a follow-up study to the study conducted pursuant to P.L.2023, c.139. No later than April 30, 2026, the Commissioner of Human Services will submit to the Governor and Legislature a report on the study's updated findings and additional analyses required by the bill.

The bill requires the Department of Human Services to establish an educational committee of stakeholders, which educational committee,

commencing on the bill and ending on the last day of the 36th calendar month following the effective date of P.L.2023, c.139, will provide education to short-term care facilities and individual county assignment judges about the legal obligations of short-term care facilities to accept patients. Thereafter, the Department of Human Services will provide the education to short-term care facilities and individual county assignment judges, as necessary.

The bill amends the requirements of P.L.2017, c.155 to provide that the data dashboard report developed under P.L.2017, c.155 be made available to screening services and hospitals in the State. The bill provides that, until the data dashboard report is developed, certain facilities will prominently display certain information on the facility's Internet website and will update the information daily as necessary.

COMMITTEE AMENDMENTS:

The committee amendments extends the expiration of certain provisions of P.L.2023, c.139 from 24 months from the effective date of P.L.2023, c.139 to 36 months.

The committee amendments revise certain provisions of P.L.2023, c.139 to stipulate when consent can be provided to authorize a continued hold of a person and to provide additional requirements concerning the manner in which a hospital or emergency department can apply for a temporary court order for a continued hold and the court can grant an order. The committee amendments extend certain provisions of the bill to Designated Screening Service providers.

The committee amendments require the Departments of Human Services and Health to jointly conduct a follow-up study to the study conducted pursuant to P.L.2023, c.139 and to submit a report on the study's updated findings and additional analyses required by the amendments.

The committee amendments expand certain reporting requirements for general hospitals and emergency departments under the bill.

The bill establishes certain requirements for the Department of Human Services to provide education to short-term care facilities and individual county assignment judges about the legal obligations of short-term care facilities to accept patients.

The committee amendments provide that the data dashboard report developed under P.L.2017, c.155 be made available to screening services and hospitals in the State. Until the data dashboard report is developed, the committee amendments require certain facilities to prominently display certain information on the facility's Internet website and update the information daily as necessary.

The committee amendments revise the title and synopsis of the bill to reflect these changes.

ASSEMBLY, No. 5408

STATE OF NEW JERSEY

221st LEGISLATURE

INTRODUCED MARCH 6, 2025

Sponsored by:

Assemblywoman LINDA S. CARTER

District 22 (Somerset and Union)

Assemblywoman SHAVONDA E. SUMTER

District 35 (Bergen and Passaic)

Assemblywoman SHANIQUE SPEIGHT

District 29 (Essex and Hudson)

Co-Sponsored by:

Assemblyman Atkins

SYNOPSIS

Makes permanent certain sunset provisions concerning involuntary commitment.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 6/12/2025)

1 AN ACT removing certain sunset provisions concerning involuntary
2 commitment and amending P.L.2023, c.139.

3

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

6

7 1. Section 1 of P.L.2023, c.139 (C.30:4-27.9a) is amended to
8 read as follows:

9 1. a. Notwithstanding the provisions of section 9 of P.L.1987,
10 c.116 (C.30:4-27.9) or any other law, rule, or regulation to the
11 contrary, commencing on the effective date of P.L.2023, c.139
12 (C.30:4-27.9a et al.) and ending on the last day of the 24th calendar
13 month following that effective date, a short-term care or psychiatric
14 facility, or a special psychiatric hospital, may detain a person
15 admitted to the facility involuntarily by referral from a screening
16 service without a temporary court order for no more than 72 hours
17 from the time the screening certificate was executed.

18 Except in the event a general hospital was granted a temporary
19 court order permitting the continued hold of the person pursuant to
20 subsection b. of this section, which delayed a person's admission to
21 the short-term care or psychiatric facility or special psychiatric
22 hospital, a short-term care or psychiatric facility or special
23 psychiatric hospital shall not detain a person admitted to the facility
24 involuntarily by referral from a screening service without a
25 temporary court order for more than 72 hours from the time the
26 screening certificate was executed.

27 Within 24 hours of admission, the admitting facility shall initiate
28 court proceedings for the involuntary commitment of the person
29 pursuant to section 10 of P.L.1987, c.116 (C.30:4-27.10) and
30 request a temporary court order permitting the continued hold of the
31 person pending the return date of the involuntary commitment
32 hearing, which shall take place no later than 20 days from initial
33 commitment.

34 b. (1) Notwithstanding the provisions of section 9 of P.L.1987,
35 c.116 (C.30:4-27.9) or any other law, rule, or regulation to the
36 contrary, commencing on the effective date of P.L.2023, c.139
37 (C.30:4-27.9a et al.) **【and ending on the last day of the 24th**
38 **calendar month following that effective date】**, a general hospital,
39 including any satellite emergency department of a general hospital,
40 where a person is located during a screening outreach visit, may not
41 detain the person for more than 72 hours from the time a screening
42 certificate is executed, unless the hospital or emergency department
43 obtains a temporary court order permitting the continued hold of the
44 person for up to 72 additional hours, as determined by the court.
45 The hospital or emergency department may submit an emergent

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

Matter underlined thus is new matter.

1 application for such order and continue to hold the person during
2 the pendency of the application, provided that appropriate treatment
3 that meets the standard of care is being rendered to the person. The
4 Office of the Public Defender shall be notified of the emergent
5 application, provided with a copy of the application and all
6 supporting documents, and shall be appointed as counsel to
7 represent the patient. The application may be decided by the court
8 on documentary presentations relevant to the standards established
9 under paragraph (2) of this subsection. At the request of counsel,
10 the court may conduct a hearing on the record, at which hearing the
11 court shall consider the arguments of counsel and all relevant
12 evidence submitted. The court shall determine the format of the
13 hearing based on the apparent complexity of the matter and the
14 extent of doubt as to the merits of the application, and may, at its
15 discretion, rely on certifications from witnesses or require live
16 testimony.

17 (2) The court may grant a temporary order granting the continued
18 hold of a person upon an application submitted pursuant to
19 paragraph (1) of this subsection if the hospital or emergency
20 department:

21 (a) exhausted all reasonable efforts to place the individual in a
22 short-term care or psychiatric facility, or special psychiatric
23 hospital, depending on which facility is appropriate for the person's
24 condition and is the least restrictive environment; and

25 (b) demonstrates that there is a substantial likelihood that, by
26 reason of mental illness, the person will be dangerous to the
27 person's own self or others based upon the certification of two
28 psychiatrists who have examined the patient and deemed the patient
29 is in need of involuntary commitment.

30 The court shall include such conditions in the temporary order as
31 the court deems appropriate to promote diligent efforts to locate an
32 available facility to accommodate the patient's needs and protect the
33 rights of the person detained pending commitment. The Office of
34 the Public Defender shall be notified and provided with a copy of
35 any temporary court order granted pursuant to this paragraph. The
36 patient shall receive a court hearing with respect to the issue of
37 continued need for involuntary commitment within 20 days from
38 the date of initial commitment or within 20 days from the date an
39 application was filed pursuant to paragraph (1) of this subsection,
40 whichever date occurs first, unless the patient has been
41 administratively discharged pursuant to section 17 of P.L.1987,
42 c.116 (C.30:4-27.17).

43 (3) Notwithstanding the provisions of any other law, rule, or
44 regulation to the contrary, commencing on the effective date of
45 P.L.2023, c.139 (C.30:4-27.9a et al.) [and ending on the last day of
46 the 24th calendar month following that effective date] , each
47 general hospital and emergency department shall prepare and

1 submit to the Department of Human Services a quarterly report,
2 which report shall include, but not be limited to, information on:

3 (a) the number of applications submitted to the court for a
4 temporary court order permitting the continued hold of a person
5 beyond 72 hours pursuant to paragraph (1) of this subsection;

6 (b) the number of temporary court orders granted pursuant to
7 paragraph (2) of this subsection permitting the continued hold of a
8 person beyond 72 hours;

9 (c) whether a person detained for longer than 72 hours: has a
10 criminal history; has a co-occurring substance use disorder; has a
11 co-occurring intellectual or developmental disability; or is unable to
12 be released because the 72-hour timeframe falls on a weekend and
13 either admission to treatment facilities are not provided on
14 weekends, or discharges from the facility do not occur on
15 weekends;

16 (d) the length of time each individual was held beyond 72 hours
17 before finding appropriate placement in a treatment facility; and

18 (e) the number of individuals placed in an appropriate treatment
19 facility within 72 hours.

20 Any information included in a report concerning specific
21 individuals shall be de-identified. Each report shall be made
22 available to the public within 60 days of the date the Department of
23 Human Services receives the report.

24 c. (1) Notwithstanding the provisions of any other law, rule, or
25 regulation to the contrary, the Commissioner of Health may, to the
26 extent the commissioner finds necessary, commencing 120 days
27 following the effective date of P.L.2023, c.139 (C.30:4-27.9a et al.)
28 and ending on the last day of the 15th calendar month following
29 that effective date, allow a general acute care hospital that is
30 licensed for acute care hospital psychiatric beds to apply to the
31 Department of Health for temporary licenses for beds for the
32 involuntary commitment of patients. The department may issue
33 temporary licenses pursuant to this paragraph if the hospital
34 demonstrates in its application a need for such beds based on
35 retrospective data demonstrating the need for involuntary
36 commitment beds, a showing that the hospital continually exhausts
37 all reasonable efforts to place individuals in short-term care or
38 psychiatric facilities, or special psychiatric hospitals, and any other
39 factors as determined by the Commissioner of Health. Any
40 temporary license granted pursuant to this paragraph, unless
41 otherwise confirmed at the next certificate of need review, as
42 required pursuant to N.J.A.C.8:33-4.4 or its successor regulation,
43 shall expire within 90 days of the Commissioner of Health's
44 decision rendered pursuant to that full review process.

45 (2) The Department of Health shall make available on its Internet
46 website and continuously update information concerning the total
47 number of temporary licenses granted pursuant to paragraph (1) of
48 this subsection, as well as the number of temporary licenses granted

1 to each hospital that submitted an application pursuant to paragraph
2 (1) of this subsection.

3 (3) The department shall submit information concerning the total
4 number of temporary licenses granted pursuant to paragraph (1) of
5 this subsection, as well as the number of temporary licenses granted
6 to each hospital that submitted an application pursuant to paragraph
7 (1) of this subsection, to the Commissioner of Human Services,
8 which information shall: (a) be submitted in a manner that allows
9 the Commissioner of Human Services sufficient time to include the
10 information in the report required pursuant to subsection b. of
11 section 2 of **【this act】** P.L.2023, c.139 (C.30:4-27.3a); and (b)
12 reflect the number of temporary licenses granted as of the date the
13 information is submitted.
14 (cf: P.L.2023, c.139, s.1)

15

16 2. This act shall take effect immediately.

17

18

19

STATEMENT

20

21 This bill would make permanent certain provisions of P.L.2023,
22 c.139 (C.30:4-27.9a et al.). P.L.2023, c.139 provides, in part, that a
23 general hospital, where a person is located during a screening
24 outreach visit, may not detain the person for more than 72 hours
25 from the time a screening certificate is executed, unless the hospital
26 or emergency department obtains a temporary court order
27 permitting the continued hold of the person for up to 72 additional
28 hours, as determined by the court. The hospital or emergency
29 department may submit an emergent application for such order and
30 continue to hold the person during the pendency of the application,
31 provided that appropriate treatment that meets the standard of care
32 is being rendered to the person. The Office of the Public Defender
33 is to be notified of the emergent application, and is to be appointed
34 as counsel to represent the patient. At the request of counsel, the
35 court may conduct a hearing on the record.

36 The court may grant a temporary order granting the continued
37 hold of a person if the hospital or emergency department:

38 (1) exhausted all reasonable efforts to place the individual in a
39 short-term care or psychiatric facility, or special psychiatric
40 hospital, depending on which facility is appropriate for the person's
41 condition and is the least restrictive environment; and

42 (2) demonstrates that there is a substantial likelihood that, by
43 reason of mental illness, the person will be dangerous to the
44 person's own self or others based upon the certification of two
45 psychiatrists who have examined the patient and deemed the patient
46 is in need of involuntary commitment.

47 P.L.2023, c.139 also requires each general hospital and
48 emergency department to prepare and submit to the Department of

1 Human Serves (DHS) a quarterly report containing de-identified
2 data on individuals detained at the hospital or emergency
3 department, and any temporary court order applied for or obtained.
4 The report would also be made available to the public on the
5 department's Internet webpage.

6 This bill would make permanent the above-mentioned provisions
7 of P.L.2023, c.139.

[First Reprint]

ASSEMBLY, No. 5408

STATE OF NEW JERSEY

221st LEGISLATURE

INTRODUCED MARCH 6, 2025

Sponsored by:

Assemblywoman LINDA S. CARTER

District 22 (Somerset and Union)

Assemblywoman SHAVONDA E. SUMTER

District 35 (Bergen and Passaic)

Assemblywoman SHANIQUE SPEIGHT

District 29 (Essex and Hudson)

Co-Sponsored by:

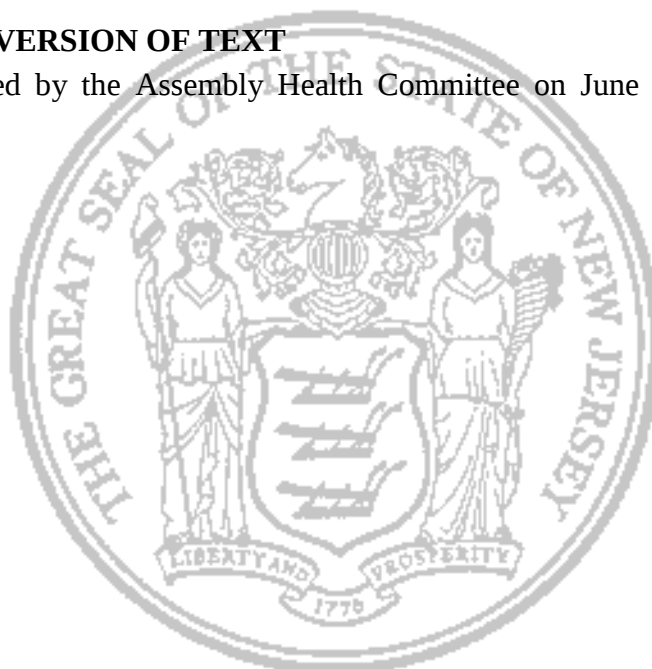
Assemblyman Atkins

SYNOPSIS

Revises certain provisions concerning, and establishes certain education and data reporting requirements related to, involuntary commitment.

CURRENT VERSION OF TEXT

As reported by the Assembly Health Committee on June 12, 2025, with amendments.



(Sponsorship Updated As Of: 6/12/2025)

1 AN ACT ¹~~removing certain sunset provisions~~¹ concerning
2 involuntary commitment ¹~~and~~ and mental health care,¹
3 amending ¹~~P.L.2023, c.139~~ and supplementing various parts of
4 statutory law¹.

5
6 **BE IT ENACTED** *by the Senate and General Assembly of the State*
7 *of New Jersey:*

8
9 ¹1. Section 2 of P.L.2023, c.139 (C. 30:4-27.3a) is amended to
10 read as follows:

11 2. a. The Department of Human Services and the Department of
12 Health shall jointly conduct a study concerning the challenges of
13 placing individuals in appropriate treatment settings, and the supply
14 of and demand for both involuntary commitment beds and voluntary
15 commitment beds in this State. In conducting the study, the
16 departments shall solicit input from interested stakeholders
17 including, but not limited to, hospitals, the Office of the Public
18 Defender, the Administrative Office of the Courts, advocates
19 representing mental health patients, advocates representing
20 individuals with disabilities, and representatives of psychiatric
21 screening centers.

22 b. No later than 18 months after the effective date of P.L.2023,
23 c.139 (C.30:4-27.9a et al.), the Commissioner of Human Services
24 shall submit to the Governor and, pursuant to section 2 of P.L.1991,
25 c.164 (C.52:14-19.1), to the Legislature, a report, which shall
26 include, but not be limited to:

27 (1) a summary of the findings from the study conducted
28 pursuant to subsection a. of this section;

29 (2) an analysis of the supply of and demand for involuntary
30 commitment beds and voluntary commitment beds, including
31 consideration of, to the extent practicable, the geographic location
32 of the patient and whether the patient is an adult patient or a
33 pediatric patient, whether the patient has a criminal history, whether
34 the patient is uninsured or underinsured, and whether the patient has
35 been diagnosed with an intellectual or developmental disability and
36 a mental health condition, or has been diagnosed with a substance
37 use disorder and a mental health condition;

38 (3) the number of temporary licenses granted by the Department
39 of Health pursuant to paragraph (1) of subsection c. of section 1 of
40 **[this act]** P.L.2023, c.139 (C.30:4-27.9a) as of the date the
41 information concerning the licenses is submitted to the
42 Commissioner of Human Services pursuant to paragraph (3) of
43 subsection c. of section 1 of **[this act]** P.L.2023, c.139 (C.30:4-
44 27.9a); and

45 (4) any recommendations for legislative action.

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

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

¹Assembly AHE committee amendments adopted June 12, 2025.

1 c. The Department of Human Services and the Department of
2 Health shall jointly conduct a follow-up study to the study
3 conducted pursuant to subsection a. of this section. In conducting
4 the study, the departments shall solicit input from interested
5 stakeholders including, but not limited to, hospitals, the Office of
6 the Public Defender, the Administrative Office of the Courts,
7 advocates representing mental health patients, advocates
8 representing individuals with disabilities, and representatives of
9 psychiatric screening centers.

10 No later than April 30, 2026, the Commissioner of Human
11 Services shall submit to the Governor and, pursuant to section 2 of
12 P.L.1991, c.164 (C.52:14-19.1), to the Legislature, a report, which
13 shall include, but not be limited to:

14 (1) a summary of the findings from the study conducted
15 pursuant to this subsection;

16 (2) an analysis of the supply of and demand for involuntary
17 commitment beds and voluntary commitment beds, including
18 consideration of, to the extent practicable, the geographic location
19 of the patient and whether the patient is an adult patient or a
20 pediatric patient, whether the patient has a criminal history, whether
21 the patient has a complex medical condition, whether the patient is
22 uninsured or underinsured, and whether the patient has been
23 diagnosed with an intellectual or developmental disability and a
24 mental health condition, or has been diagnosed with a substance use
25 disorder and a mental health condition;

26 (3) an analysis of the supply of and demand, bed capacity, and
27 waiting lists for forensic beds at Ancora Psychiatric Hospital, Ann
28 Klein Forensic Center, and Trenton Psychiatric Hospital, including
29 consideration of whether the number of forensic beds available
30 meets the demand from hospitals and jails based on existing waiting
31 lists;

32 (4) an analysis of the supply of and demand for short-term care
33 facility beds, including consideration of, as applicable, whether the
34 beds are subject to certificate of need requirements and if so,
35 whether the Department of Health should issue a call for certificate
36 of need applications to increase the supply of short-term care
37 facility beds;

38 (5) an analysis of the State's Psychiatric Emergency Screening
39 Services system, including any recommendations for the
40 modernization of the system in order to improve the system's
41 operations and effectiveness in placing patients in appropriate care
42 settings in a timely manner;

43 (6) the number of temporary licenses granted by the Department
44 of Health pursuant to paragraph (1) of subsection c. of section 1 of
45 P.L.2023, c.139 (C.30:4-27.9a) as of the date the information
46 concerning the licenses is submitted to the Commissioner of Human
47 Services pursuant to paragraph (3) of subsection c. of section 1 of
48 P.L.2023, c.139 (C.30:4-27.9a);

1 (7) an analysis of the information collected pursuant to
2 paragraph (3) of subsection c. of section 1 of P.L.2023, c.139
3 (C.30:4-27.9a); and

4 (8) any recommendations for legislative action.¹
5 (cf: P.L.2023, c.139, s.2)

6
7 ¹**1.1** 2.¹ Section 1 of P.L.2023, c.139 (C.30:4-27.9a) is
8 amended to read as follows:

9 1. a. Notwithstanding the provisions of section 9 of P.L.1987,
10 c.116 (C.30:4-27.9) or any other law, rule, or regulation to the
11 contrary, commencing on the effective date of P.L.2023, c.139
12 (C.30:4-27.9a et al.) and ending on the last day of the ¹**24th** 36th¹
13 calendar month following that effective date, a short-term care or
14 psychiatric facility, or a special psychiatric hospital, may detain a
15 person admitted to the facility involuntarily by referral from a
16 screening service without a temporary court order for no more than
17 72 hours from the time the screening certificate was executed.

18 Except in the event a general hospital was granted a temporary
19 court order permitting the continued hold of the person pursuant to
20 subsection b. of this section, which delayed a person's admission to
21 the short-term care or psychiatric facility or special psychiatric
22 hospital, a short-term care or psychiatric facility or special
23 psychiatric hospital shall not detain a person admitted to the facility
24 involuntarily by referral from a screening service without a
25 temporary court order for more than 72 hours from the time the
26 screening certificate was executed.

27 Within 24 hours of admission, the admitting facility shall initiate
28 court proceedings for the involuntary commitment of the person
29 pursuant to section 10 of P.L.1987, c.116 (C.30:4-27.10) and
30 request a temporary court order permitting the continued hold of the
31 person pending the return date of the involuntary commitment
32 hearing, which shall take place no later than 20 days from initial
33 commitment.

34 b. (1) Notwithstanding the provisions of section 9 of P.L.1987,
35 c.116 (C.30:4-27.9) or any other law, rule, or regulation to the
36 contrary, commencing on the effective date of P.L.2023, c.139
37 (C.30:4-27.9a et al.) **and ending on the last day of the 24th**
38 **calendar month following that effective date** ¹and ending on the
39 last day of the 36th calendar month following that effective date¹, a
40 general hospital, including any satellite emergency department of a
41 general hospital, ¹**where a person is located during a screening**
42 **outreach visit,**¹ may not detain ¹**the** a¹ person for more than 72
43 hours from the time a screening certificate is executed, unless the
44 hospital or emergency department obtains a temporary court order
45 permitting the continued hold of the person for up to 72 additional
46 hours, as determined by the court ¹, or the person, through the
47 person's counsel, provides consent for the continued hold¹. ¹**The**

1 If it becomes evident that a hospital or emergency department will
2 not be able to discharge or admit the person to another facility
3 within 72 hours, the¹ hospital ¹['or] ,¹ emergency department
4 ¹['may] , or, as applicable, the Designated Screening Service
5 provider, shall¹ submit an emergent application for such order
6 ¹['and] . The hospital or emergency department shall¹ continue to
7 hold the person during the pendency of the application ¹and any
8 investigation conducted by the person's counsel¹ , provided that
9 appropriate treatment that meets the standard of care is being
10 rendered to the person. The Office of the Public Defender ¹and
11 other designated counsel, as applicable,¹ shall be notified of the
12 emergent application ¹['.,] and¹ provided with a copy of the
13 application and all supporting documents ¹['., and] . The court¹
14 shall ¹['be appointed] appoint the Office of the Public Defender¹ as
15 counsel to represent the patient ¹, if there is no other designated
16 counsel¹ . The application may be decided by the court on
17 documentary presentations relevant to the standards established
18 under paragraph (2) of this subsection. At the request of counsel,
19 the court ¹['may] shall¹ conduct a hearing on the record, at which
20 hearing the court shall consider the arguments of counsel and all
21 relevant evidence submitted. The court shall determine the format
22 of the hearing based on the apparent complexity of the matter and
23 the extent of doubt as to the merits of the application, and may, at
24 its discretion, rely on certifications from witnesses or require live
25 testimony. The court shall not grant a temporary order granting
26 the continued hold of a person, unless the person's counsel has been
27 designated and notified, completed any necessary interviews with
28 the patient and investigations, and provided notice to the court on
29 the counsel's position on the extended hold.¹

30 (2) The court may grant a temporary order granting the
31 continued hold of a person upon an application submitted pursuant
32 to paragraph (1) of this subsection if the hospital ¹['or] ,¹
33 emergency department ¹, or, as applicable, the Designated
34 Screening Service provider¹ :

35 (a) exhausted all reasonable efforts to place the individual in a
36 short-term care or psychiatric facility, or special psychiatric
37 hospital, depending on which facility is appropriate for the person's
38 condition and is the least restrictive environment ¹, and has
39 completed a form as a part of the application, which form shall
40 include the dates of the outreach to each short-term care facility or
41 centralized admission, in the case of a forensic patient, and the
42 response from each short-term care facility or centralized admission
43 and if applicable, the specific reason for rejection. In the case of a
44 forensic patient, a hospital, emergency department or, as applicable,
45 the Designated Screening Service provider shall not be required to

1 conduct outreach to facilities that do not serve forensic patients¹ ;
2 and

3 (b) demonstrates that there is a substantial likelihood that, by
4 reason of mental illness, the person will be dangerous to the
5 person's own self or others based upon the certification of two
6 psychiatrists who have examined the patient and deemed the patient
7 is in need of involuntary commitment ¹, such examinations may be
8 conducted using telemedicine or telehealth consistent with the
9 standard of care required for the assessment and treatment of the
10 person's condition¹ .

11 The court shall include such conditions in the temporary order as
12 the court deems appropriate to promote diligent efforts to locate an
13 available facility to accommodate the patient's needs and protect the
14 rights of the person detained pending commitment. ¹In the event
15 that the hospital, emergency department, or, as applicable, the
16 Designated Screening Service provider, is unable to place the
17 person into an appropriate facility within the 72 hours of continued
18 hold permitted by the temporary court order, the hospital or
19 emergency department may continue to hold the person, provided
20 that the person's counsel provides consent for the hold and
21 appropriate treatment that meets the standard of care is being
22 rendered to the person.¹ The Office of the Public Defender shall be
23 notified and provided with a copy of any temporary court order
24 granted pursuant to this paragraph. The patient shall receive a court
25 hearing with respect to the issue of continued need for involuntary
26 commitment within 20 days from the date of initial commitment or
27 within 20 days from the date an application was filed pursuant to
28 paragraph (1) of this subsection, whichever date occurs first, unless
29 the patient has been administratively discharged pursuant to section
30 17 of P.L.1987, c.116 (C.30:4-27.17).

31 (3) Notwithstanding the provisions of any other law, rule, or
32 regulation to the contrary, commencing on the effective date of
33 P.L.2023, c.139 (C.30:4-27.9a et al.) **【and ending on the last day of**
34 **the 24th calendar month following that effective date】** ¹and ending
35 on the last day of the 36th calendar month following that effective
36 date¹ , each general hospital and emergency department shall
37 prepare and submit to the Department of Human Services a
38 quarterly report, which report shall include, but not be limited to,
39 information on:

40 (a) the number of applications submitted to the court for a
41 temporary court order permitting the continued hold of a person
42 beyond 72 hours pursuant to paragraph (1) of this subsection;

43 (b) the number of temporary court orders granted pursuant to
44 paragraph (2) of this subsection permitting the continued hold of a
45 person beyond 72 hours;

46 (c) whether a person detained for longer than 72 hours: has a
47 criminal history; has a co-occurring substance use disorder; has a

1 co-occurring intellectual or developmental disability; 'has health
2 insurance and if so, the type of health insurance coverage; has a
3 complex medical condition;¹ or is unable to be released because the
4 72-hour timeframe falls on a weekend and either admission to
5 treatment facilities are not provided on weekends, or discharges
6 from the facility do not occur on weekends;

7 (d) the length of time each individual was held beyond 72 hours
8 before finding appropriate placement in a treatment facility;
9 **'[and]'**

10 (e) the number of individuals placed in an appropriate treatment
11 facility within 72 hours **';** and

12 (f) any other information the department deems necessary'.

13 Any information included in a report concerning specific
14 individuals shall be de-identified. Each report shall be made
15 available to the public within 60 days of the date the Department of
16 Human Services receives the report.

17 c. (1) Notwithstanding the provisions of any other law, rule, or
18 regulation to the contrary, the Commissioner of Health may, to the
19 extent the commissioner finds necessary, commencing 120 days
20 following the effective date of P.L.2023, c.139 (C.30:4-27.9a et al.)
21 and ending on the last day of the **'[15th] 27th'** calendar month
22 following that effective date, allow a general acute care hospital
23 that is licensed for acute care hospital psychiatric beds to apply to
24 the Department of Health for temporary licenses for beds for the
25 involuntary commitment of patients. The department may issue
26 temporary licenses pursuant to this paragraph if the hospital
27 demonstrates in its application a need for such beds based on
28 retrospective data demonstrating the need for involuntary
29 commitment beds, a showing that the hospital continually exhausts
30 all reasonable efforts to place individuals in short-term care or
31 psychiatric facilities, or special psychiatric hospitals, and any other
32 factors as determined by the Commissioner of Health. Any
33 temporary license granted pursuant to this paragraph, unless
34 otherwise confirmed at the next certificate of need review, as
35 required pursuant to N.J.A.C.8:33-4.4 or its successor regulation,
36 shall expire within 90 days of the Commissioner of Health's
37 decision rendered pursuant to that full review process.

38 (2) The Department of Health shall make available on its
39 Internet website and continuously update information concerning
40 the total number of temporary licenses granted pursuant to
41 paragraph (1) of this subsection, as well as the number of temporary
42 licenses granted to each hospital that submitted an application
43 pursuant to paragraph (1) of this subsection.

44 (3) The department shall submit information concerning the
45 total number of temporary licenses granted pursuant to paragraph
46 (1) of this subsection, as well as the number of temporary licenses
47 granted to each hospital that submitted an application pursuant to

paragraph (1) of this subsection, to the Commissioner of Human Services, which information shall: (a) be submitted in a manner that allows the Commissioner of Human Services sufficient time to include the information in the report required pursuant to subsection b. ¹and c. ¹ of section 2 of **【this act】** P.L.2023, c.139 (C.30:4-27.3a); and (b) reflect the number of temporary licenses granted as of the date the information is submitted.
(cf: P.L.2023, c.139, s.1)

¹3. (New section) The Department of Human Services shall establish an educational committee of stakeholders, which educational committee, commencing on the effective date of P.L. , c. (C.) (pending before the Legislature as this bill) and ending on the last day of the 36th calendar month following the effective date of P.L.2023, c.139 (C.30:4-27.9a et al.), shall provide education to short-term care facilities and individual county assignment judges about the legal obligations of short-term care facilities to accept patients. Thereafter, the Department of Human Services shall provide the education to short-term care facilities and individual county assignment judges, as necessary. ¹

¹4. Section 1 of P.L.2017, c.155 (C.30:4-177.66) is amended to read as:

1. a. The Division of Mental Health and Addiction Services in the Department of Human Services shall oversee the development and maintenance of a data dashboard report, which shall collect and track the daily information received pursuant to section 2 of **【this act】** P.L.2017, c.155 (C.30:4-177.67) about the number of open beds that are available for treatment for individuals in need of mental health or substance use disorder treatment in each facility in the State that is licensed to provide:

(1) long term or extended care services for mental health or substance use disorders and receives State or county funding, including, but not limited to, a psychiatric facility, psychiatric unit of a general hospital, short-term care facility, and special psychiatric hospital, as those terms are defined in section 2 of P.L.1987, c.116 (C.30:4-27.2), and a residential health care facility as defined in section 1 of P.L.1953, c.212 (C.30:11A-1); or

(2) acute or intermediate level of care services for mental health or a substance use disorder and receives State or county funding, including, but not limited to, a psychiatric facility, psychiatric unit of a general hospital, short-term care facility, and special psychiatric hospital, as those terms are defined in section 2 of P.L.1987, c.116 (C.30:4-27.2).

b. The information maintained in the data dashboard report shall include, by county:

(1) the address and telephone number of the facility;

1 (2) the type of services provided by the facility;
2 (3) the licensed bed capacity of the facility; and
3 (4) the number of open beds that are available for the provision
4 of mental health or substance use disorder services, based on the
5 information received pursuant to section 2 of **【this act】** P.L.2017,
6 c.155 (C.30:4-177.67).
7 c. The information described in subsection b. of this section
8 shall be:
9 (1) prominently displayed on the website of the department;
10 (2) made available to the public, upon request, through the
11 Statewide 2-1-1 telephone system; **【and】**
12 (3) made available using any other means that the
13 Commissioner of Human Services deems appropriate; and
14 (4) made available to screening services and hospitals in the
15 State.
16 d. The commissioner is authorized to solicit, receive, and
17 accept grants, funds, or anything of value from any public or private
18 entity and receive and accept contributions of money, property,
19 labor, or any other thing of value from any legitimate source for the
20 purpose of the development and maintenance of a data dashboard
21 report pursuant to **【this act】** P.L.2017, c.155 (C.30:4-177.66 et
22 seq.).
23 e. Until the data dashboard report required pursuant to
24 subsection a. of this section is developed, each facility shall
25 prominently display the information described in subsection b. of
26 this section on the facility's Internet website and shall update the
27 information daily as necessary.¹
28 (cf: P.L.2017, c.155, s.1)
29
30 ¹**【2.】** 5.¹ This act shall take effect immediately.

ASSEMBLY HEALTH COMMITTEE

STATEMENT TO

ASSEMBLY, No. 5408

with committee amendments

STATE OF NEW JERSEY

DATED: JUNE 12, 2025

The Assembly Health Committee reports favorably and with committee amendments Assembly Bill No. 5408.

As amended, this bill amends P.L.2023, c.139 and extends the expiration of certain provisions of P.L.2023, c.139 from 24 months from the effective date of P.L.2023, c.139 to 36 months.

P.L.2023, c.139 provides, in part, that a general hospital or emergency department, where a person is located during a screening outreach visit, may not detain the person for more than 72 hours from the time a screening certificate is executed, unless the hospital or emergency department obtains a temporary court order permitting the continued hold of the person for up to 72 additional hours, as determined by the court. P.L.2023, c.139 also required the Department of Human Services and the Department of Health to jointly conduct a study concerning the challenges of placing individuals in appropriate treatment settings, and the supply of and demand for both involuntary commitment beds and voluntary commitment beds in this State.

The bill revises certain provisions of P.L.2023, c.139 to stipulate when consent can be provided to authorize a continued hold of a person and to provide additional requirements concerning the manner in which a hospital, emergency department, or Designated Screening Service provider can apply for a temporary court order for a continued hold and a court can grant an order. The bill expands certain reporting requirements for general hospitals and emergency departments under P.L.2023, c.139.

As amended, the bill requires the Departments of Human Services and Health to jointly conduct a follow-up study to the study conducted pursuant to P.L.2023, c.139. No later than April 30, 2026, the Commissioner of Human Services will submit to the Governor and Legislature a report on the study's updated findings and additional analyses required by the bill.

The bill requires the Department of Human Services to establish an educational committee of stakeholders, which educational committee, commencing on the bill's effective date and ending on the last day of the 36th calendar month following the effective date of P.L.2023, c.139, will provide education to short-term care facilities and

individual county assignment judges about the legal obligations of short-term care facilities to accept patients. Thereafter, the Department of Human Services will provide the education to short-term care facilities and individual county assignment judges, as necessary.

The bill amends the requirements of P.L.2017, c.155 to provide that the data dashboard report developed under P.L.2017, c.155 be made available to screening services and hospitals in the State. The bill provides that, until the data dashboard report is developed, certain facilities will prominently display certain information on the facility's Internet website and will update the information daily as necessary.

As amended and reported by the committee, Assembly Bill No. 5408 is identical to Senate Bill No. 4263 (1R), which was also amended and reported by the committee on this date.

COMMITTEE AMENDMENTS:

The committee amendments extend the expiration of certain provisions of P.L.2023, c.139 from 24 months from the effective date of P.L.2023, c.139 to 36 months.

The committee amendments revise certain provisions of P.L.2023, c.139 to stipulate when consent can be provided to authorize a continued hold of a person and to provide additional requirements concerning the manner in which a hospital or emergency department can apply for a temporary court order for a continued hold and the court can grant an order. The committee amendments extend certain provisions of the bill to Designated Screening Service providers.

The committee amendments require the Departments of Human Services and Health to jointly conduct a follow-up study to the study conducted pursuant to P.L.2023, c.139 and to submit a report on the study's updated findings and additional analyses required by the amendments.

The committee amendments expand certain reporting requirements for general hospitals and emergency departments.

The bill establishes certain requirements for the Department of Human Services to provide education to short-term care facilities and individual county assignment judges about the legal obligations of short-term care facilities to accept patients.

The committee amendments provide that the data dashboard report developed under P.L.2017, c.155 be made available to screening services and hospitals in the State. Until the data dashboard report is developed, the committee amendments require certain facilities to prominently display certain information on the facility's Internet website and update the information daily as necessary.

The committee amendments revise the title and synopsis of the bill to reflect these changes.

Governor Murphy Takes Action on Legislation

Posted on - 07/22/2025

TRENTON – Today, Governor Murphy signed the following bills into law:

S2167/A1406 (Ruiz, Vitale/Haider, Swain) – Requires public and certain nonpublic schools to comply with breakfast and lunch standards adopted by USDA

S3052/A4878 (Johnson, Space/Park, Tucker, Speight) – Concerns grade options at public institutions of higher education for service member and dependents unable to complete course due to military obligation

S3711/A5153 (McKeon, Zwicker/Haider, Reynolds-Jackson, Spearman) – Makes annual allocation of \$500,000 from Clean Communities Program Fund for public outreach concerning single-use plastics reduction program permanent.

SCS for S3982/A4592 (Ruiz/Reynolds-Jackson/Carter, Morales) – Requires certain information be provided to parent at least two business days prior to annual Individualized Education Program (IEP) team meeting; establishes IEP Improvement Working Group in DOE.

S4263/A5408 (Vitale, Scutari/Carter, Sumter, Speight) – Revises certain provisions concerning, and establishes certain education and data reporting requirements related to, involuntary commitment.

S4426/A5622 (Burzichelli, Singer/Schnall, Peterpaul, Kane) – Appropriates funds to DEP for environmental infrastructure projects for FY2026

S4439/A5729 (Lagana, Cryan/Swain) – Establishes protections for student-athletes and certain institutions of higher education concerning name, image, or likeness compensation; repeals “New Jersey Fair Play Act.”

A3128/SCS for S4071/S3155 (Coughlin, Wimberly, Pintor Marin/Ruiz, Scutari, Singleton, Greenstein, Turner) – Authorizes HMFA to use certain tax credits; directs HMFA to conduct tax credit auctions to provide financial assistance for certain housing purposes

A4897/S3769 (Carter, Atkins, Reynolds-Jackson/Cryan, Amato) – Revises law requiring certain student identification cards to contain telephone number for suicide prevention hotline

A5170/S4027 (Pintor Marin, Speight/Cruz-Perez, Pou) – Requires State to purchase certain unused tax credits issued under New Jersey Economic Recovery Act of 2020

A5546/S4388 (Verrelli, Reynolds-Jackson/Turner) – Concerns financial powers and responsibilities of Capital City Redevelopment Corporation.