

# 26:2-160

## LEGISLATIVE HISTORY CHECKLIST

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**LAWS OF:** 2001                    **CHAPTER:** 205  
**NJSA:** 26:2-160                (Changes name of Office of Minority Health)  
**BILL NO:** A2204                (Substituted for S10)

**SPONSOR(S):** Blee and Charles

**DATE INTRODUCED:** March 16, 2000

**COMMITTEE:**                    **ASSEMBLY:** Health; Appropriations

**SENATE:** ----

**AMENDED DURING PASSAGE:** Yes

**DATE OF PASSAGE:**            **ASSEMBLY:** May 25, 2001

**SENATE:** June 28, 2001

**DATE OF APPROVAL:** August 8, 2001

### FOLLOWING ARE ATTACHED IF AVAILABLE:

**FINAL TEXT OF BILL** (1<sup>st</sup> reprint enacted)

(Amendments during passage denoted by superscript numbers)

**A2204**

**SPONSORS STATEMENT:** (Begins on page 6 of original bill)                    Yes

**COMMITTEE STATEMENT:**                    **ASSEMBLY:** Yes    5-3-  
2001(Appopr.)

5-1-2000(Health)

**SENATE:** No

**FLOOR AMENDMENT STATEMENTS:** Yes

**LEGISLATIVE FISCAL ESTIMATE:** Yes

**S10**

<b>SPONSORS STATEMENT:</b> (Begins on page 6 of original bill)	Yes
<b>COMMITTEE STATEMENT:</b>	<b>ASSEMBLY:</b> No
	<b>SENATE:</b> Yes 9/25/2000(Health)
	10/19/2000(Budget)
<b>FLOOR AMENDMENT STATEMENTS:</b>	No
<b>LEGISLATIVE FISCAL ESTIMATE:</b>	No
<b>VETO MESSAGE:</b>	No
<b>GOVERNOR'S PRESS RELEASE ON SIGNING:</b>	No

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<b>NEWSPAPER ARTICLES:</b>	No

# ASSEMBLY, No. 2204

## STATE OF NEW JERSEY 209th LEGISLATURE

INTRODUCED MARCH 16, 2000

**Sponsored by:**

**Assemblyman FRANCIS J. BLEE**

**District 2 (Atlantic)**

**Assemblyman JOSEPH CHARLES, JR.**

**District 31 (Hudson)**

**Co-Sponsored by:**

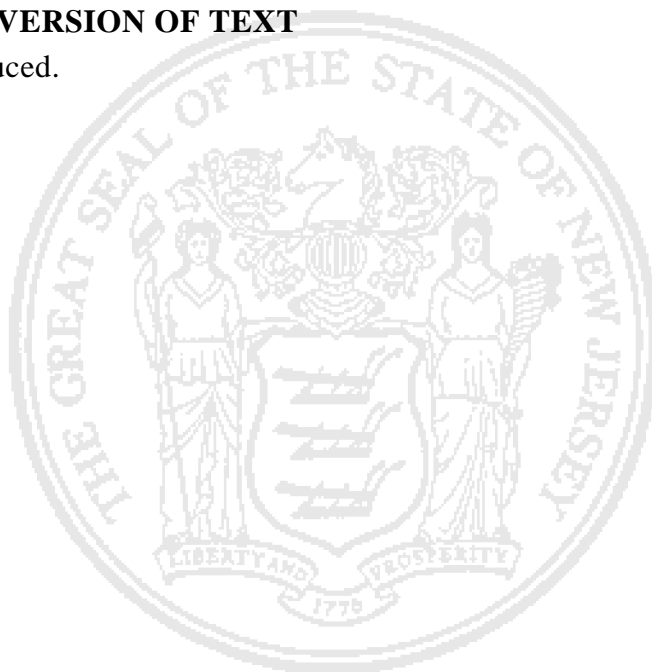
**Assemblywomen Previte, Farragher, Senators Allen, Codey, Bucco, Kosco, Singer, Inverso, Robertson, Sinagra, Matheussen, McNamara, Cafiero, Bennett, Bark, Palaia, Kavanaugh, Bassano, Baer, Turner and Rice**

**SYNOPSIS**

Renames Office on Minority Health in DHSS as Office on Multicultural Health and provides additional responsibilities for office.

**CURRENT VERSION OF TEXT**

As introduced.



**(Sponsorship Updated As Of: 12/5/2000)**

1 AN ACT concerning multicultural health and amending P.L.1991,  
2 c.401.

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.1991, c.401 (C.26:2-160) is amended to read  
8 as follows:

9 1. The Legislature finds and declares that:

10 **[there]** a. There are dramatic differences in death, disease and  
11 injury rates between White and racial and ethnic minority populations  
12 in the State~~].~~ For example, the non-White infant mortality rate in  
13 1987 was 18.7 per 1,000 live births, whereas the rate for White infants  
14 was 7.1; esophageal cancer death rates among Black males are three  
15 times greater than among White males; of the cumulative total of  
16 AIDS cases reported in 1988 in the State, 34% were White, 52%  
17 Black and 13% Hispanic; Black and Hispanic women represent 77%  
18 of all female AIDS cases in the State; and chemical poisonings among  
19 the employed Black population are almost three times greater than that  
20 of the employed White population, as measured by the frequency of  
21 hospitalization.

22 The Legislature further finds and declares that presently there is  
23 no~~],~~ with especially wide and persistent disparities in the incidence of  
24 cancer, cardiovascular disease and stroke, chemical dependency,  
25 diabetes, homicide, suicide, accidental injury, infant mortality, and  
26 HIV/AIDS;

27 b. There is a clear need for a continuous and coordinated State  
28 effort to address the wide disparity in death, disease and injury rates  
29 ~~[and, therefore, there is a need to establish a]~~ through a New Jersey  
30 Office on Multicultural Health, renamed from the New Jersey Office  
31 on Minority Health established pursuant to P.L.1991, c.401 (C.26:2-  
32 160 et seq.); and

33 c. The New Jersey Office on Multicultural Health shall seek to  
34 identify and develop innovative projects which will close the gap  
35 between the health status of White and racial and ethnic minority  
36 populations in this State, and to coordinate current State programs  
37 which seek to address minority racial and ethnic health concerns, with  
38 the ultimate goal of enabling all members of racial and ethnic minority  
39 and gender populations in this State to have access to high-quality  
40 health care.

41 (cf: P.L.1991, c.401, s.1)

42  
43 2. Section 2 of P.L.1991, c.401 (C.26:2-161) is amended to read

**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 as follows:

2 2. a. There is established the New Jersey Office on [Minority]  
3 Multicultural Health in the Department of Health and Senior Services.

4 b. Whenever the term "New Jersey Office on Minority Health"  
5 occurs or any reference is made thereto in any law, contract or  
6 document, the same shall be deemed to mean or refer to the "New  
7 Jersey Office on Multicultural Health."

8 (cf: P.L.1991, c.401, s.2)

9

10 3. Section 3 of P.L.1991, c.401 (C.26:2-162) is amended to read  
11 as follows:

12 3. The office shall:

13 a. Provide grants to community-based organizations to conduct  
14 special research, demonstration and evaluation projects for targeted  
15 at-risk racial and ethnic minority and gender populations;

16 b. Develop and implement model public and private partnerships  
17 in racial and ethnic minority communities for health awareness  
18 campaigns and to improve the access, acceptability and use of public  
19 health services;

20 c. Serve as an information and resource center for racial and ethnic  
21 minority and gender specific health information and data and develop  
22 a clearinghouse to collect data on a county-by-county basis and  
23 disseminate it upon request to interested parties;

24 d. Review, recommend and develop culturally appropriate health  
25 education materials;

26 e. Provide assistance to local school districts to develop programs  
27 in elementary and secondary schools which stress good nutrition and  
28 healthy lifestyles;

29 f. Function as an advocate for the adoption and implementation of  
30 effective measures to improve [minority] the health of racial and  
31 ethnic minority and gender populations in this State and lead to the  
32 elimination of disparities among the various racial and ethnic  
33 populations of this State and gender-based disparities with respect to  
34 access to high-quality health care and health status;

35 g. Improve existing data systems to ensure that the health  
36 information that is collected includes specific race and ethnicity  
37 identifiers;

38 h. Review the programs of the Departments of Health and Senior  
39 Services, Human Services, Community Affairs and Education and any  
40 other department of State government, as appropriate, that concern  
41 multicultural or minority health and make recommendations to the  
42 departments that will enable them to better coordinate and improve the  
43 effectiveness of their efforts; [and]

44 i. [Within 18 months of the effective date of this act, develop]  
45 Develop a Statewide plan for increasing the number of racial and  
46 ethnic minority health care professionals which includes

1 recommendations for the financing mechanisms and recruitment  
2 strategies necessary to carry out the plan;

3 j. Study and make recommendations regarding the training of  
4 health care professionals in the provision of culturally competent  
5 health care, including, but not limited to, recommendations for the  
6 adoption of cultural competency courses by colleges of medicine and  
7 dentistry in this State that are designed to address the problem of race,  
8 ethnicity and gender-based disparities in health care treatment  
9 decisions;

10 k. Develop recommendations for the most effective means of  
11 providing outreach to racial and ethnic minority communities  
12 throughout the State to ensure their maximum participation in publicly  
13 funded health benefits programs;

14 l. Seek to establish a Statewide alliance with community-based  
15 agencies and organizations, health care facilities, health care provider  
16 organizations and pharmaceutical manufacturers to promote the  
17 objectives of the office; and

18 m. Evaluate multicultural or racial and ethnic minority health  
19 programs in other states to assess their efficacy and potential for  
20 replication in this State and make recommendations regarding the  
21 adoption of such programs, as appropriate.

22 (cf: P.L.1991, c.401, s.3)

23

24 4. Section 4 of P.L.1991, c.401 (C.26:2-163) is amended to read  
25 as follows:

26 4. The office is authorized to:

27 a. Adopt rules and regulations pursuant to the "Administrative  
28 Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), concerning the  
29 operation of the office and other matters that may be necessary to  
30 carry out the purposes of this act;

31 b. Maintain offices at such places within the State as it may  
32 designate;

33 c. Employ a director and other personnel as may be necessary. The  
34 director shall be appointed by the Commissioner of Health and Senior  
35 Services and shall serve at the pleasure of the commissioner during the  
36 commissioner's term of office and until the appointment and  
37 qualification of the director's successor. The director shall devote his  
38 entire time to the duties of the position and shall receive a salary as  
39 provided by law;

40 d. Apply for and accept any grant of money from the federal  
41 government, private foundations or other sources, which may be  
42 available for programs related to multicultural or minority health;

43 e. Serve as the designated State agency for receipt of federal funds  
44 specifically designated for multicultural or racial and ethnic minority  
45 health programs; and

1 f. Enter into contracts with individuals, organizations, and  
2 institutions necessary for the performance of its duties under this act.  
3 (cf: P.L.1991, c.401, s.4)

4  
5 5. Section 5 of P.L.1991, c.401 (C.26:2-164) is amended to read  
6 as follows:

7 5. There is established a New Jersey Office on [Minority]  
8 Multicultural Health Advisory Commission.

9 The commission shall consist of nine members, including the  
10 Commissioner of Health and Senior Services or his designee, who shall  
11 serve ex officio, and eight public members who are residents of the  
12 State and who shall be appointed as follows: one member who is a  
13 health care professional shall be appointed by the President of the  
14 Senate; one member who is a health care professional shall be  
15 appointed by the Speaker of the General Assembly; and six members,  
16 at least two of whom are health care professionals, at least one of  
17 whom represents health care facilities and at least one of whom  
18 represents the health insurance industry, shall be appointed by the  
19 Governor with the advice and consent of the Senate.

20 The term of office of each public member shall be three years, but  
21 of the members first appointed, two shall be appointed for a term of  
22 one year, three shall be appointed for a term of two years and three  
23 shall be appointed for a term of three years. A member shall hold  
24 office for the term of his appointment and until his successor has been  
25 appointed and qualified. All vacancies shall be filled for the balance  
26 of the unexpired term in the same manner as the original appointment.  
27 A member of the commission is eligible for reappointment.

28 The public members of the commission shall not receive any  
29 compensation for their services, but shall be reimbursed for the actual  
30 and necessary expenses incurred in the performance of their duties as  
31 members of the commission, within the limits of funds available to the  
32 commission.

33 The members of the commission shall annually elect a chairman and  
34 a vice-chairman from among the public members and may select a  
35 secretary, who need not be a member of the commission.

36 The New Jersey Office on [Minority] Multicultural Health shall  
37 provide such staff and assistance as the commission requires to carry  
38 out its work.

39 (cf: P.L.1991, c.401, s.5)

40  
41 6. Section 6 of P.L.1991, c.401 (C.26:2-165) is amended to read  
42 as follows:

43 6. The advisory commission shall:

44 a. Review and make recommendations to the New Jersey Office on  
45 [Minority] Multicultural Health on any rules, regulations and policies  
46 proposed by the office;

1 b. Advise the office on the awarding of grants and development of  
2 programs and services required pursuant to this act;

3 c. Advise the office on the needs, priorities, programs and policies  
4 relating to multicultural or racial and ethnic minority health in this  
5 State; and

6 d. Provide any other assistance to the office, as may be requested  
7 by the director.

8 The commission may accept from any governmental department or  
9 agency, public or private body or any other source grants or  
10 contributions to be used in carrying out its responsibilities under this  
11 act.

12 (cf: P.L.1991, c.401, s.6)

13  
14 7. Section 8 of P.L.1991, c.401 (C.26:2-167) is amended to read  
15 as follows:

16 8. The office is entitled to call to its assistance, and avail itself of,  
17 the services of employees of any State, county or municipal  
18 department, board, bureau, commission or agency as it may require  
19 and as may be available to it for its purposes. All departments,  
20 agencies and divisions are authorized and directed, to the extent not  
21 inconsistent with law, to cooperate with the New Jersey Office on  
22 [Minority] Multicultural Health.

23 (cf: P.L.1991, c.401, s.8)

24  
25 8. This act shall take effect immediately.  
26  
27

28 STATEMENT  
29

30 This bill renames the New Jersey Office on Minority Health in the  
31 Department of Health and Senior Services, which was established  
32 pursuant to P.L.1991, c.401 (N.J.S.A.26:2-160 et seq.), as the New  
33 Jersey Office on Multicultural Health.

34 The bill also provides explicit statutory authority for the office to  
35 carry out additional responsibilities beyond those currently outlined in  
36 P.L.1991, c.401. These include:

37 C development of a clearinghouse to collect racial and ethnic  
38 minority and gender specific health data on a county-by-county  
39 basis and disseminate it upon request to interested parties;

40 C advocating effective measures to lead to the elimination of  
41 disparities among the various racial and ethnic populations of this  
42 State and gender-based disparities with respect to access to high-  
43 quality health care and health status;

44 C studying and making recommendations regarding the training of  
45 health care professionals in the provision of culturally competent  
46 health care, including, but not limited to, recommendations for the



1 adoption of cultural competency courses by colleges of medicine  
2 and dentistry in this State that are designed to address the problem  
3 of race, ethnic and gender-based disparities in health care treatment  
4 decisions;  
5 C development of recommendations for the most effective means of  
6 providing outreach to racial and ethnic minority communities  
7 throughout the State to ensure their maximum participation in  
8 publicly funded health benefits programs;  
9 C seeking to establish a Statewide alliance with community-based  
10 agencies and organizations, health care facilities, health care  
11 provider organizations and pharmaceutical manufacturers to  
12 promote the objectives of the office; and  
13 C evaluating multicultural or racial and ethnic minority health  
14 programs in other states to assess their efficacy and potential for  
15 replication in this State and making recommendations regarding the  
16 adoption of such programs, as appropriate.

# ASSEMBLY HEALTH COMMITTEE

## STATEMENT TO

### ASSEMBLY, No. 2204

# STATE OF NEW JERSEY

DATED: MAY 1, 2000

The Assembly Health Committee reports favorably Assembly Bill No. 2204.

This bill renames the New Jersey Office on Minority Health in the Department of Health and Senior Services, which was established pursuant to P.L.1991, c.401 (N.J.S.A.26:2-160 et seq.), as the New Jersey Office on Multicultural Health.

The bill also provides explicit statutory authority for the office to carry out additional responsibilities beyond those currently outlined in P.L.1991, c.401. These include:

- C development of a clearinghouse to collect racial and ethnic minority and gender specific health data on a county-by-county basis and disseminate it upon request to interested parties;
- C advocating effective measures to lead to the elimination of disparities among the various racial and ethnic populations of this State and gender-based disparities with respect to access to high-quality health care and health status;
- C studying and making recommendations regarding the training of health care professionals in the provision of culturally competent health care, including, but not limited to, recommendations for the adoption of cultural competency courses by colleges of medicine and dentistry in this State that are designed to address the problem of race, ethnic and gender-based disparities in health care treatment decisions;
- C development of recommendations for the most effective means of providing outreach to racial and ethnic minority communities throughout the State to ensure their maximum participation in publicly funded health benefits programs;
- C seeking to establish a Statewide alliance with community-based agencies and organizations, health care facilities, health care provider organizations and pharmaceutical manufacturers to promote the objectives of the office; and
- C evaluating multicultural or racial and ethnic minority health programs in other states to assess their efficacy and potential for replication in this State and making recommendations regarding the adoption of such programs, as appropriate.

**LEGISLATIVE FISCAL ESTIMATE**  
**ASSEMBLY, No. 2204**  
**STATE OF NEW JERSEY**  
**209th LEGISLATURE**

DATED: MAY 30, 2000

**SUMMARY**

**Synopsis:** Renames Office on Minority Health in DHSS as Office on Multicultural Health and provides additional responsibilities for the office.

**Type of Impact:** None.

**Agencies Affected:** Department of Health and Senior Services (DHSS).

**Office of Legislative Services Estimate**

<b>Fiscal Impact</b>	<u><b>Year 1</b></u>	<u><b>Year 2</b></u>	<u><b>Year 3</b></u>
<b>State Cost</b>	Minimal	Minimal	Minimal

! There is no significant cost associated with renaming the Office on Minority Health the Office on Multicultural Health and providing the office with additional responsibilities. Many, if not all, of the additional responsibilities are currently being undertaken by DHSS.

**BILL DESCRIPTION**

Assembly Bill No. 2204 of 2000 renames the New Jersey Office on Minority Health in the DHSS as the New Jersey Office on Multicultural Health. The bill also provides explicit statutory authority for the office to carry out additional responsibilities such as:

- C development of a clearinghouse to collect racial and ethnic minority and gender specific health data on a county-by-county basis and disseminate it upon request to interested parties;
- C advocating effective measures to lead to the elimination of disparities among the various racial and ethnic populations of this State and gender-based disparities with respect to access to high-quality health care and health status; and
- C development of recommendations for the most effective means of providing outreach to racial and ethnic minority communities throughout the State to ensure their maximum participation in publicly funded health benefits programs.

## **FISCAL ANALYSIS**

### ***EXECUTIVE BRANCH***

None received.

### ***OFFICE OF LEGISLATIVE SERVICES***

There is no significant cost associated with renaming the Office on Minority Health the Office on Multicultural Health, and providing the renamed office with additional responsibilities. Many, if not all, of the additional responsibilities being assigned to the new office are currently being conducted by DHSS. For example, DHSS compiles and disseminates infant mortality data on the basis of race and ethnicity on a county specific basis.

Section: *Human Services*

Analyst: *Jay Hershberg*  
*Principal Fiscal Analyst*

Approved: *Alan R. Kooney*  
*Legislative Budget and Finance Officer*

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

This fiscal estimate has been prepared pursuant to P.L.1980, c.67.

STATEMENT TO  
**ASSEMBLY, No. 2204**

with Senate Floor Amendments  
(Proposed By Senator ALLEN)

ADOPTED: DECEMBER 4, 2000

These amendments make this bill identical to Senate Bill No. 10(1R).

The amendments rename the New Jersey Office on Minority Health, which this bill originally renamed as the New Jersey Office on Multicultural Health, as the New Jersey Office on Minority and Multicultural Health.

The amendments limit the responsibilities of the office to racial and ethnic minority populations. The original bill expanded the office's responsibilities to racial and ethnic minority and gender populations.

The amendments add an appropriation of \$1.5 million to the office to carry out the work of the office and to implement the responsibilities mandated by this bill. The amendments also specify that it is the intent of the Legislature that in succeeding fiscal years, \$1.5 million shall be appropriated to the office and that this amount shall be in addition to any amounts allocated to the office in the fiscal year 2001 annual appropriations act.

[First Reprint]

**ASSEMBLY, No. 2204**

**STATE OF NEW JERSEY**  
**209th LEGISLATURE**

INTRODUCED MARCH 16, 2000

**Sponsored by:**

**Assemblyman FRANCIS J. BLEE**

**District 2 (Atlantic)**

**Assemblyman JOSEPH CHARLES, JR.**

**District 31 (Hudson)**

**Co-Sponsored by:**

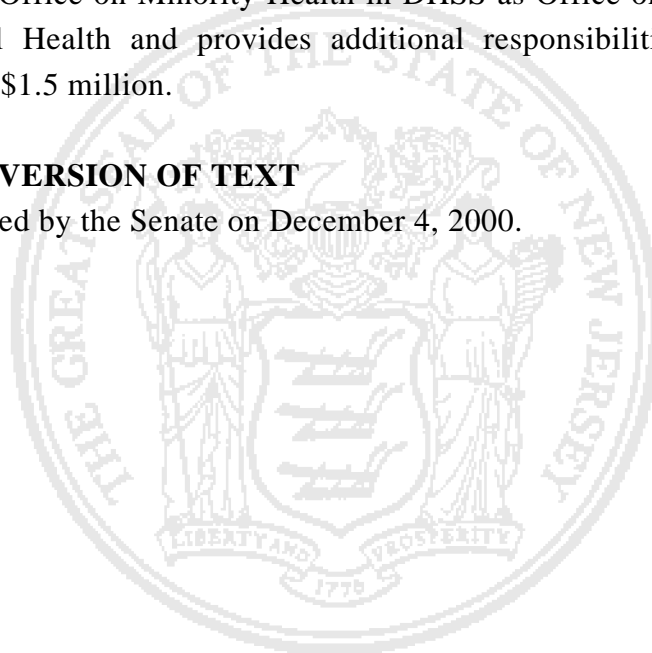
**Assemblywomen Previte, Farragher, Senators Allen, Codey, Bucco, Kosco, Singer, Inverso, Robertson, Sinagra, Matheussen, McNamara, Cafiero, Bennett, Bark, Palaia, Kavanaugh, Bassano, Baer, Turner, Rice and Assemblywoman Watson Coleman**

**SYNOPSIS**

Renames Office on Minority Health in DHSS as Office on Minority and Multicultural Health and provides additional responsibilities for office; appropriates \$1.5 million.

**CURRENT VERSION OF TEXT**

As amended by the Senate on December 4, 2000.



**(Sponsorship Updated As Of: 6/29/2001)**

1 AN ACT concerning <sup>1</sup>minority and<sup>1</sup> multicultural health <sup>1</sup>[and] <sup>1</sup>  
2 amending <sup>1</sup>the title and body of<sup>1</sup> P.L.1991, c.401 <sup>1</sup>and making an  
3 appropriation<sup>1</sup>.  
4

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

7  
8 <sup>1</sup>1. The title of P.L.1991, c.401 is amended to read as follows:  
9 AN ACT establishing the New Jersey Office on Minority and  
10 Multicultural Health.<sup>1</sup>  
11 (cf: P.L.1991, c.401, title)  
12

13 <sup>1</sup>[1.] <sup>2</sup>2.<sup>1</sup> Section 1 of P.L.1991, c.401 (C.26:2-160) is amended to  
14 read as follows:

15 1. The Legislature finds and declares that:

16 [there] a. There are dramatic differences in death, disease and  
17 injury rates between White and racial and ethnic minority populations  
18 in the State[. For example, the non-White infant mortality rate in  
19 1987 was 18.7 per 1,000 live births, whereas the rate for White infants  
20 was 7.1; esophageal cancer death rates among Black males are three  
21 times greater than among White males; of the cumulative total of  
22 AIDS cases reported in 1988 in the State, 34% were White, 52%  
23 Black and 13% Hispanic; Black and Hispanic women represent 77%  
24 of all female AIDS cases in the State; and chemical poisonings among  
25 the employed Black population are almost three times greater than that  
26 of the employed White population, as measured by the frequency of  
27 hospitalization.

28 The Legislature further finds and declares that presently there is  
29 no], with especially wide and persistent disparities in the incidence of  
30 cancer, cardiovascular disease and stroke, chemical dependency,  
31 diabetes, <sup>1</sup>asthma,<sup>1</sup> homicide, suicide, accidental injury, infant  
32 mortality, <sup>1</sup>child immunization rates<sup>1</sup> and HIV/AIDS;

33 b. There is a clear need for a <sup>1</sup>[continuous and coordinated]  
34 collaborative<sup>1</sup> State effort to address the wide disparity in death,  
35 disease and injury rates [and, therefore, there is a need to establish a]  
36 through a New Jersey Office on <sup>1</sup>Minority and<sup>1</sup> Multicultural Health,  
37 renamed from the New Jersey Office on Minority Health established  
38 pursuant to P.L.1991, c.401 (C.26:2-160 et seq.); and

39 c. The New Jersey Office on <sup>1</sup>Minority and<sup>1</sup> Multicultural Health  
40 shall seek to identify and develop innovative projects which will  
41 <sup>1</sup>[close] eliminate<sup>1</sup> the gap between the health status of White 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:**

<sup>1</sup> Senate floor amendments adopted December 4, 2000.

1 racial and ethnic minority populations in this State, and to coordinate  
2 current State programs which seek to address minority racial and  
3 ethnic health concerns, with the ultimate goal of enabling all members  
4 of racial and ethnic minority <sup>1</sup>[and gender] <sup>1</sup> populations in this State  
5 to have access to high-quality health care.

6 (cf: P.L.1991, c.401, s.1)

7

8 <sup>1</sup>[2.] 3. Section 2 of P.L.1991, c.401 (C.26:2-161) is amended to  
9 read as follows:

10 2. a. There is established the New Jersey Office on [Minority]  
11 <sup>1</sup>Minority and <sup>1</sup>Multicultural Health in the Department of Health and  
12 Senior Services.

13 b. Whenever the term "New Jersey Office on Minority Health"  
14 occurs or any reference is made thereto in any law, contract or  
15 document, the same shall be deemed to mean or refer to the "New  
16 Jersey Office on <sup>1</sup>Minority and <sup>1</sup>Multicultural Health."

17 (cf: P.L.1991, c.401, s.2)

18

19 <sup>1</sup>[3.] 4. Section 3 of P.L.1991, c.401 (C.26:2-162) is amended to  
20 read as follows:

21 3. The office shall:

22 a. Provide grants to community-based organizations to conduct  
23 special research, demonstration and evaluation projects for targeted  
24 at-risk racial and ethnic minority <sup>1</sup>[and gender] <sup>1</sup> populations <sup>1</sup>and to  
25 support ongoing community-based programs that are designed to  
26 reduce or eliminate racial and ethnic health disparities in the State<sup>1</sup>;

27 b. Develop and implement model public and private partnerships  
28 in racial and ethnic minority communities for health awareness  
29 campaigns and to improve the access, acceptability and use of public  
30 health services;

31 c. Serve as an information and resource center for racial and ethnic  
32 minority <sup>1</sup>[and gender] <sup>1</sup> specific health information and data and  
33 develop a clearinghouse to <sup>1</sup>[collect] collate and organize <sup>1</sup> data on  
34 a county-by-county basis and disseminate it upon request to interested  
35 parties;

36 d. Review, recommend and develop culturally appropriate health  
37 education materials;

38 e. Provide assistance to local school districts to develop programs  
39 in elementary and secondary schools which stress good nutrition and  
40 healthy lifestyles;

41 f. Function as an advocate for the adoption and implementation of  
42 effective measures to improve [minority] the health of racial and  
43 ethnic minority <sup>1</sup>[and gender] <sup>1</sup> populations in this State <sup>1</sup>[and] .  
44 which measures should<sup>1</sup> lead to the elimination of disparities among  
45 the various racial and ethnic populations of this State <sup>1</sup>[and gender-



1 based disparities]<sup>1</sup> with respect to access to high-quality health care<sup>1</sup>,  
2 utilization of health care services<sup>1</sup> and health status;

3 g. Improve existing data systems to ensure that the health  
4 information that is collected includes specific race and ethnicity  
5 identifiers;

6 h. Review the programs of the Departments of Health and Senior  
7 Services, Human Services, Community Affairs and Education and any  
8 other department of State government, as appropriate, that concern  
9 multicultural or minority health and make recommendations to the  
10 departments that will enable them to better coordinate and improve the  
11 effectiveness of their efforts; [and]

12 i. [Within 18 months of the effective date of this act, develop]  
13 Develop a Statewide plan for increasing the number of racial and  
14 ethnic minority health care professionals which includes  
15 recommendations for the financing mechanisms and recruitment  
16 strategies necessary to carry out the plan;

17 j. <sup>1</sup>[Study and make recommendations regarding the training of  
18 health care professionals in the provision of culturally competent  
19 health care, including, but not limited to, recommendations for the  
20 adoption of cultural competency courses by colleges of medicine and  
21 dentistry in this State that are designed to address the problem of race,  
22 ethnicity and gender-based disparities in health care treatment  
23 decisions] Work collaboratively with colleges of medicine and  
24 dentistry in this State and other health care professional training  
25 programs to develop cultural and language competency courses that  
26 are designed to address the problem of racial and ethnicity disparities  
27 in health care access, utilization, treatment decisions, quality and  
28 outcomes<sup>1</sup> ;

29 k. Develop recommendations for the most effective means of  
30 providing outreach to racial and ethnic minority communities  
31 throughout the State to ensure their maximum participation in publicly  
32 funded health benefits programs;

33 l. Seek to establish a Statewide alliance with community-based  
34 agencies and organizations, health care facilities, health care provider  
35 organizations<sup>1</sup>, managed care organizations<sup>1</sup> and pharmaceutical  
36 manufacturers to promote the objectives of the office; and

37 m. Evaluate multicultural or racial and ethnic minority health  
38 programs in other states to assess their efficacy and potential for  
39 replication in this State and make recommendations regarding the  
40 adoption of such programs, as appropriate.

41 (cf: P.L.1991, c.401, s.3)

42

43 <sup>1</sup>[4.] 5.<sup>1</sup> Section 4 of P.L.1991, c.401 (C.26:2-163) is amended to  
44 read as follows:

45 4. The office is authorized to:

46 a. Adopt rules and regulations pursuant to the "Administrative

- 1 Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), concerning the  
2 operation of the office and other matters that may be necessary to  
3 carry out the purposes of this act;
- 4 b. Maintain offices at such places within the State as it may  
5 designate;
- 6 c. Employ a director and other personnel as may be necessary. The  
7 director shall be appointed by the Commissioner of Health and Senior  
8 Services and shall serve at the pleasure of the commissioner during the  
9 commissioner's term of office and until the appointment and  
10 qualification of the director's successor. The director shall devote his  
11 entire time to the duties of the position and shall receive a salary as  
12 provided by law;
- 13 d. Apply for and accept any grant of money from the federal  
14 government, private foundations or other sources, which may be  
15 available for programs related to multicultural or minority health;
- 16 e. Serve as the designated State agency for receipt of federal funds  
17 specifically designated for multicultural or racial and ethnic minority  
18 health programs; and
- 19 f. Enter into contracts with individuals, organizations, and  
20 institutions necessary for the performance of its duties under this act.  
21 (cf: P.L.1991, c.401, s.4)

22  
23 <sup>1</sup>[5.] 6.<sup>1</sup> Section 5 of P.L.1991, c.401 (C.26:2-164) is amended to  
24 read as follows:

25 5. There is established a New Jersey Office on **[Minority]**  
26 <sup>1</sup>Minority and<sup>1</sup> Multicultural Health Advisory Commission.

27 The commission shall consist of nine members, including the  
28 Commissioner of Health and Senior Services or his designee, who shall  
29 serve ex officio, and eight public members who are residents of the  
30 State and who shall be appointed as follows: one member who is a  
31 health care professional shall be appointed by the President of the  
32 Senate; one member who is a health care professional shall be  
33 appointed by the Speaker of the General Assembly; and six members,  
34 at least two of whom are health care professionals, at least one of  
35 whom represents health care facilities and at least one of whom  
36 represents the health insurance industry, shall be appointed by the  
37 Governor with the advice and consent of the Senate.

38 The term of office of each public member shall be three years, but  
39 of the members first appointed, two shall be appointed for a term of  
40 one year, three shall be appointed for a term of two years and three  
41 shall be appointed for a term of three years. A member shall hold  
42 office for the term of his appointment and until his successor has been  
43 appointed and qualified. All vacancies shall be filled for the balance  
44 of the unexpired term in the same manner as the original appointment.  
45 A member of the commission is eligible for reappointment.

46 The public members of the commission shall not receive any

1 compensation for their services, but shall be reimbursed for the actual  
2 and necessary expenses incurred in the performance of their duties as  
3 members of the commission, within the limits of funds available to the  
4 commission.

5 The members of the commission shall annually elect a chairman and  
6 a vice-chairman from among the public members and may select a  
7 secretary, who need not be a member of the commission.

8 The New Jersey Office on [Minority] <sup>1</sup>Minority and<sup>1</sup> Multicultural  
9 Health shall provide such staff and assistance as the commission  
10 requires to carry out its work.

11 (cf: P.L.1991, c.401, s.5)

12

13 <sup>1</sup>[6.] 7.<sup>1</sup> Section 6 of P.L.1991, c.401 (C.26:2-165) is amended to  
14 read as follows:

15 6. The advisory commission shall:

16 a. Review and make recommendations to the New Jersey Office on  
17 [Minority] <sup>1</sup>Minority and<sup>1</sup> Multicultural Health on any rules,  
18 regulations and policies proposed by the office;

19 b. Advise the office on the awarding of grants and development of  
20 programs and services required pursuant to this act;

21 c. Advise the office on the needs, priorities, programs and policies  
22 relating to multicultural or racial and ethnic minority health in this  
23 State; and

24 d. Provide any other assistance to the office, as may be requested  
25 by the director.

26 The commission may accept from any governmental department or  
27 agency, public or private body or any other source grants or  
28 contributions to be used in carrying out its responsibilities under this  
29 act.

30 (cf: P.L.1991, c.401, s.6)

31

32 <sup>1</sup>[7.] 8.<sup>1</sup> Section 8 of P.L.1991, c.401 (C.26:2-167) is amended to  
33 read as follows:

34 8. The office is entitled to call to its assistance, and avail itself of,  
35 the services of employees of any State, county or municipal  
36 department, board, bureau, commission or agency as it may require  
37 and as may be available to it for its purposes. All departments,  
38 agencies and divisions are authorized and directed, to the extent not  
39 inconsistent with law, to cooperate with the New Jersey Office on  
40 [Minority] <sup>1</sup>Minority and<sup>1</sup> Multicultural Health.

41 (cf: P.L.1991, c.401, s.8)

42

43 <sup>1</sup>9. a. There is appropriated \$1,500,000 from the General Fund to  
44 the Office on Minority and Multicultural Health in the Department of  
45 Health and Senior Services to carry out its responsibilities pursuant to  
46 this act. The monies appropriated pursuant to this act shall supplement

1 any funding currently available to the office.

2 b. It is the intent of the Legislature that in succeeding fiscal years,  
3 the Governor shall recommend and the Legislature shall appropriate  
4 \$1,500,000 from the General Fund to the Office on Minority and  
5 Multicultural Health to carry out its responsibilities under this act.  
6 This amount shall be in addition to any amounts allocated to the office  
7 in fiscal year 2001 pursuant to P.L.2000, c.53.<sup>1</sup>

8

9 <sup>1</sup>[8.] 10.<sup>1</sup> This act shall take effect immediately.

# ASSEMBLY APPROPRIATIONS COMMITTEE

## STATEMENT TO

[First Reprint]

### ASSEMBLY, No. 2204

# STATE OF NEW JERSEY

DATED: MAY 3, 2001

The Assembly Appropriations Committee reports favorably Assembly Bill No. 2204 (1R).

Assembly Bill No. 2204 (1R) renames the New Jersey Office on Minority Health in the Department of Health and Senior Services, established pursuant to P.L.1991, c.401 (N.J.S.A.26:2-160 et seq.), as the New Jersey Office on Minority and Multicultural Health.

The bill also provides explicit statutory authority for the office to carry out additional responsibilities beyond those currently outlined in statute. These include:

**Proposed changes.** The bill would effect the following changes:

(1) clarifying that the population that the Office is to serve includes both racial and ethnic minorities, and the ultimate goal of the Office is to foster minority access to high-quality health care.

(2) enhancing the Office's powers and duties by allowing the Office to make grants to ongoing community-based programs, as well as special projects, and extending its informational function to include development of a clearinghouse that would collate and organize minority health data by county and disseminate the data on request.

(3) conferring new responsibilities on the Office, including working with medical and dental schools; making recommendations on effective outreach to increase minority communities' participation, establishing an alliance with community-based agencies and evaluating minority health programs in other states for their potential replication in New Jersey.

#### FISCAL IMPACT:

The bill appropriates \$1.5 million from the General Fund to the Office on Minority and Multicultural Health to carry out the work of the Office and to implement its added responsibilities under the legislation. The bill also specifies that it is the intent of the Legislature in succeeding fiscal years, that \$1.5 million be appropriated to the Office, and that this amount shall be in addition to any amounts allocated to the Office from amounts appropriated in the FY2001 annual appropriations act.

# SENATE, No. 10

## STATE OF NEW JERSEY 209th LEGISLATURE

INTRODUCED SEPTEMBER 14, 2000

**Sponsored by:**

**Senator DIANE ALLEN**

**District 7 (Burlington and Camden)**

**Senator RICHARD J. CODEY**

**District 27 (Essex)**

**Co-Sponsored by:**

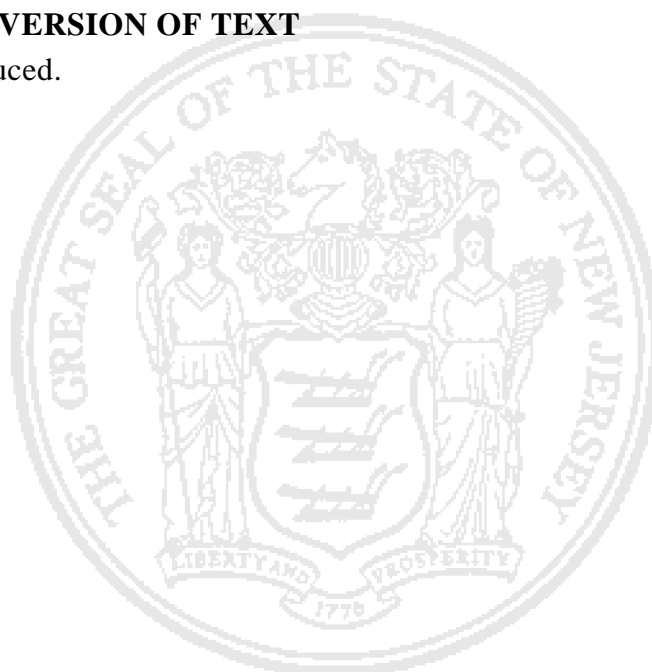
**Senators Bucco, Kosco, Singer, Inverso, Robertson, Sinagra, Matheussen,  
McNamara, Cafiero, Bennett, Bark, Palaia, Kavanaugh and Bassano**

**SYNOPSIS**

Renames Office on Minority Health in DHSS as Office on Minority and Multicultural Health and provides additional responsibilities for office; appropriates \$1.5 million.

**CURRENT VERSION OF TEXT**

As introduced.



**(Sponsorship Updated As Of: 10/24/2000)**

1 AN ACT concerning minority and multicultural health, amending  
2 P.L.1991, c.401 and making an appropriation.

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.1991, c.401 (C.26:2-160) is amended to read  
8 as follows:

9 1. The Legislature finds and declares that:

10 **[there]** a. There are dramatic differences in death, disease and  
11 injury rates between White and racial and ethnic minority populations  
12 in the State~~].~~ For example, the non-White infant mortality rate in  
13 1987 was 18.7 per 1,000 live births, whereas the rate for White infants  
14 was 7.1; esophageal cancer death rates among Black males are three  
15 times greater than among White males; of the cumulative total of  
16 AIDS cases reported in 1988 in the State, 34% were White, 52%  
17 Black and 13% Hispanic; Black and Hispanic women represent 77%  
18 of all female AIDS cases in the State; and chemical poisonings among  
19 the employed Black population are almost three times greater than that  
20 of the employed White population, as measured by the frequency of  
21 hospitalization.

22 The Legislature further finds and declares that presently there is no  
23 coordinated], with especially wide and persistent disparities in the  
24 incidence of cancer, cardiovascular disease and stroke, chemical  
25 dependency, diabetes, asthma, homicide, suicide, accidental injury,  
26 infant mortality, childhood immunization rates and HIV/AIDS;

27 b. There is a clear need for a collaborative State effort to address  
28 the wide disparity in death, disease and injury rates ~~[and, therefore,~~  
29 there is a need to establish a] through a New Jersey Office on  
30 Minority and Multicultural Health, renamed from the New Jersey  
31 Office on Minority Health established pursuant to P.L.1991, c.401  
32 (C.26:2-160 et seq.); and

33 c. The New Jersey Office on Minority and Multicultural Health shall  
34 seek to identify and develop innovative projects which will  
35 **[close]** eliminate the gap between the health status of White and racial  
36 and ethnic minority populations in this State, and to coordinate current  
37 State programs which seek to address minority racial and ethnic health  
38 concerns, with the ultimate goal of enabling all members of racial and  
39 ethnic minority populations in this State to have access to high-quality  
40 health care.

41 (cf: P.L.1991, c.401, s.1)

**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       2. Section 2 of P.L.1991, c.401 (C.26:2-161) is amended to read  
2 as follows:

3       2. a. There is established the New Jersey Office on Minority and  
4 Multicultural Health in the Department of Health and Senior Services.

5       b. Whenever the term "New Jersey Office on Minority Health"  
6 occurs or any reference is made thereto in any law, contract or  
7 document, the same shall be deemed to mean or refer to the "New  
8 Jersey Office on Minority and Multicultural Health."

9 (cf: P.L.1991, c.401, s.2)

10

11       3. Section 3 of P.L.1991, c.401 (C.26:2-162) is amended to read  
12 as follows:

13       3. The office shall:

14       a. Provide grants to community-based organizations to conduct  
15 special research, demonstration and evaluation projects for targeted  
16 at-risk racial and ethnic minority populations and to support ongoing  
17 community-based programs that are designed to reduce or eliminate  
18 racial and ethnic health disparities in the State;

19       b. Develop and implement model public and private partnerships  
20 in racial and ethnic minority communities for health awareness  
21 campaigns and to improve the access, acceptability and use of public  
22 health services;

23       c. Serve as an information and resource center for racial and ethnic  
24 minority specific health information and data and develop a  
25 clearinghouse to collate and organize data on a county-by-county basis  
26 and disseminate it upon request to interested parties;

27       d. Review, recommend and develop culturally appropriate health  
28 education materials;

29       e. Provide assistance to local school districts to develop programs  
30 in elementary and secondary schools which stress good nutrition and  
31 healthy lifestyles;

32       f. Function as an advocate for the adoption and implementation of  
33 effective measures to improve **[minority]** the health of racial and  
34 ethnic minority populations in this State, which measures should lead  
35 to the elimination of disparities among the various racial and ethnic  
36 populations of this State with respect to access to high-quality health  
37 care, utilization of health care services and health status;

38       g. Improve existing data systems to ensure that the health  
39 information that is collected includes specific race and ethnicity  
40 identifiers;

41       h. Review the programs of the Departments of Health and Senior  
42 Services, Human Services, Community Affairs and Education and any  
43 other department of State government, as appropriate, that concern  
44 multicultural or minority health and make recommendations to the  
45 departments that will enable them to better coordinate and improve the  
46 effectiveness of their efforts; **[and]**



- 1 i. [Within 18 months of the effective date of this act, develop]  
2 Develop a Statewide plan for increasing the number of racial and  
3 ethnic minority health care professionals which includes  
4 recommendations for the financing mechanisms and recruitment  
5 strategies necessary to carry out the plan;  
6 j. Work collaboratively with colleges of medicine and dentistry in  
7 this State and other health care professional training programs to  
8 develop cultural and language competency courses that are designed  
9 to address the problem of racial and ethnicity disparities in health care  
10 access, utilization, treatment decisions, quality and outcomes;  
11 k. Develop recommendations for the most effective means of  
12 providing outreach to racial and ethnic minority communities  
13 throughout the State to ensure their maximum participation in publicly  
14 funded health benefits programs;  
15 l. Seek to establish a Statewide alliance with community-based  
16 agencies and organizations, health care facilities, health care provider  
17 organizations, managed care organizations and pharmaceutical  
18 manufacturers to promote the objectives of the office; and  
19 m. Evaluate multicultural or racial and ethnic minority health  
20 programs in other states to assess their efficacy and potential for  
21 replication in this State and make recommendations regarding the  
22 adoption of such programs, as appropriate.

23 (cf: P.L.1991, c.401, s.3)

24

25 4. Section 4 of P.L.1991, c.401 (C.26:2-163) is amended to read  
26 as follows:

27 4. The office is authorized to:

28 a. Adopt rules and regulations pursuant to the "Administrative  
29 Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), concerning the  
30 operation of the office and other matters that may be necessary to  
31 carry out the purposes of this act;

32 b. Maintain offices at such places within the State as it may  
33 designate;

34 c. Employ a director and other personnel as may be necessary. The  
35 director shall be appointed by the Commissioner of Health and Senior  
36 Services and shall serve at the pleasure of the commissioner during the  
37 commissioner's term of office and until the appointment and  
38 qualification of the director's successor. The director shall devote his  
39 entire time to the duties of the position and shall receive a salary as  
40 provided by law;

41 d. Apply for and accept any grant of money from the federal  
42 government, private foundations or other sources, which may be  
43 available for programs related to multicultural or minority health;

44 e. Serve as the designated State agency for receipt of federal funds  
45 specifically designated for multicultural or racial and ethnic minority  
46 health programs; and

1 f. Enter into contracts with individuals, organizations, and  
2 institutions necessary for the performance of its duties under this act.  
3 (cf: P.L.1991, c.401, s.4)

4  
5 5. Section 5 of P.L.1991, c.401 (C.26:2-164) is amended to read  
6 as follows:

7 5. There is established a New Jersey Office on Minority and  
8 Multicultural Health Advisory Commission.

9 The commission shall consist of nine members, including the  
10 Commissioner of Health and Senior Services or his designee, who shall  
11 serve ex officio, and eight public members who are residents of the  
12 State and who shall be appointed as follows: one member who is a  
13 health care professional shall be appointed by the President of the  
14 Senate; one member who is a health care professional shall be  
15 appointed by the Speaker of the General Assembly; and six members,  
16 at least two of whom are health care professionals, at least one of  
17 whom represents health care facilities and at least one of whom  
18 represents the health insurance industry, shall be appointed by the  
19 Governor with the advice and consent of the Senate.

20 The term of office of each public member shall be three years, but  
21 of the members first appointed, two shall be appointed for a term of  
22 one year, three shall be appointed for a term of two years and three  
23 shall be appointed for a term of three years. A member shall hold  
24 office for the term of his appointment and until his successor has been  
25 appointed and qualified. All vacancies shall be filled for the balance  
26 of the unexpired term in the same manner as the original appointment.  
27 A member of the commission is eligible for reappointment.

28 The public members of the commission shall not receive any  
29 compensation for their services, but shall be reimbursed for the actual  
30 and necessary expenses incurred in the performance of their duties as  
31 members of the commission, within the limits of funds available to the  
32 commission.

33 The members of the commission shall annually elect a chairman and  
34 a vice-chairman from among the public members and may select a  
35 secretary, who need not be a member of the commission.

36 The New Jersey Office on Minority and Multicultural Health shall  
37 provide such staff and assistance as the commission requires to carry  
38 out its work.

39 (cf: P.L.1991, c.401, s.5)

40  
41 6. Section 6 of P.L.1991, c.401 (C.26:2-165) is amended to read  
42 as follows:

43 6. The advisory commission shall:

44 a. Review and make recommendations to the New Jersey Office on  
45 Minority and Multicultural Health on any rules, regulations and  
46 policies proposed by the office;

1 b. Advise the office on the awarding of grants and development of  
2 programs and services required pursuant to this act;

3 c. Advise the office on the needs, priorities, programs and policies  
4 relating to multicultural or racial and ethnic minority health in this  
5 State; and

6 d. Provide any other assistance to the office, as may be requested  
7 by the director.

8 The commission may accept from any governmental department or  
9 agency, public or private body or any other source grants or  
10 contributions to be used in carrying out its responsibilities under this  
11 act.

12 (cf: P.L.1991, c.401, s.6)

13  
14 7. Section 8 of P.L.1991, c.401 (C.26:2-167) is amended to read  
15 as follows:

16 8. The office is entitled to call to its assistance, and avail itself of,  
17 the services of employees of any State, county or municipal  
18 department, board, bureau, commission or agency as it may require  
19 and as may be available to it for its purposes. All departments,  
20 agencies and divisions are authorized and directed, to the extent not  
21 inconsistent with law, to cooperate with the New Jersey Office on  
22 Minority and Multicultural Health.

23 (cf: P.L.1991, c.401, s.8)

24  
25 8. a. There is appropriated \$1,500,000 from the General Fund to  
26 the Office on Minority and Multicultural Health in the Department of  
27 Health and Senior Services to carry out its responsibilities pursuant to  
28 this act. The monies appropriated pursuant to this act shall supplement  
29 any funding currently available to the office.

30 b. It is the intent of the Legislature that in succeeding fiscal years,  
31 the Governor shall recommend and the Legislature shall appropriate  
32 \$1,500,000 from the General Fund to the Office on Minority and  
33 Multicultural Health to carry out its responsibilities under this act.  
34 This amount shall be in addition to any amounts allocated to the office  
35 in fiscal year 2001 pursuant to P.L.2000, c.53.

36  
37 9. This act shall take effect immediately.  
38  
39

40 STATEMENT  
41

42 This bill renames the New Jersey Office on Minority Health in the  
43 Department of Health and Senior Services, which was established  
44 pursuant to P.L.1991, c.401 (N.J.S.A.26:2-160 et seq.), as the New  
45 Jersey Office on Minority and Multicultural Health.

1 The bill also provides explicit statutory authority for the office to  
2 carry out additional responsibilities beyond those currently outlined in  
3 P.L.1991, c.401. These include:

- 4 C Providing grants to community-based organizations to support  
5 ongoing community-based programs that are designed to reduce or  
6 eliminate racial and ethnic health disparities in the State;
- 7 C development of a clearinghouse to collate and organize racial and  
8 ethnic minority health data on a county-by-county basis and  
9 disseminate it upon request to interested parties;
- 10 C advocating effective measures to lead to the elimination of  
11 disparities among the various racial and ethnic populations of this  
12 State with respect to access to high-quality health care, utilization  
13 of health care services and health status;
- 14 C working collaboratively with colleges of medicine and dentistry in  
15 this State and other health care professional training programs to  
16 develop cultural and language competency courses that are  
17 designed to address the problem of racial and ethnicity disparities  
18 in health care access, utilization, treatment decisions, quality and  
19 outcomes;
- 20 C development of recommendations for the most effective means of  
21 providing outreach to racial and ethnic minority communities  
22 throughout the State to ensure their maximum participation in  
23 publicly funded health benefits programs;
- 24 C seeking to establish a Statewide alliance with community-based  
25 agencies and organizations, health care facilities, health care  
26 provider organizations, managed care organizations and  
27 pharmaceutical manufacturers to promote the objectives of the  
28 office; and
- 29 C evaluating multicultural or racial and ethnic minority health  
30 programs in other states to assess their efficacy and potential for  
31 replication in this State and making recommendations regarding the  
32 adoption of such programs, as appropriate.

33 It is the intent of the sponsor that the activities of the Office on  
34 Minority and Multicultural Health will be effective in helping the State  
35 realize the goals set forth in Healthy New Jersey 2010, that is, to  
36 increase the quality and years of life for our residents and to eliminate  
37 health disparities among our residents.

38 The bill appropriates \$1.5 million from the General Fund to the  
39 Office on Minority and Multicultural Health to carry out the work of  
40 the office and to implement these added responsibilities. The bill also  
41 specifies that it is the intent of the Legislature that in succeeding fiscal  
42 years, \$1,500,000 shall be appropriated to the office and that this  
43 amount shall be in addition to any amounts allocated to the office in  
44 the fiscal year 2001 annual appropriations act.

# SENATE HEALTH COMMITTEE

## STATEMENT TO

### SENATE, No. 10

# STATE OF NEW JERSEY

DATED: SEPTEMBER 25, 2000

The Senate Health Committee reports favorably Senate Bill No. 10.

This bill renames the New Jersey Office on Minority Health in the Department of Health and Senior Services, which was established pursuant to P.L.1991, c.401 (N.J.S.A.26:2-160 et seq.), as the New Jersey Office on Minority and Multicultural Health.

The bill also provides explicit statutory authority for the office to carry out additional responsibilities beyond those currently outlined in P.L.1991, c.401. These include:

- C providing grants to community-based organizations to support ongoing community-based programs that are designed to reduce or eliminate racial and ethnic health disparities in the State;
- C development of a clearinghouse to collate and organize racial and ethnic minority health data on a county-by-county basis and disseminate it upon request to interested parties;
- C advocating effective measures to lead to the elimination of disparities among the various racial and ethnic populations of this State with respect to access to high-quality health care, utilization of health care services and health status;
- C working collaboratively with colleges of medicine and dentistry in this State and other health care professional training programs to develop cultural and language competency courses that are designed to address the problem of racial and ethnicity disparities in health care access, utilization, treatment decisions, quality and outcomes;
- C development of recommendations for the most effective means of providing outreach to racial and ethnic minority communities throughout the State to ensure their maximum participation in publicly funded health benefits programs;
- C seeking to establish a Statewide alliance with community-based agencies and organizations, health care facilities, health care provider organizations, managed care organizations and pharmaceutical manufacturers to promote the objectives of the office; and
- C evaluating multicultural or racial and ethnic minority health programs in other states to assess their efficacy and potential for replication in this State and making recommendations regarding

the adoption of such programs, as appropriate.

The bill appropriates \$1.5 million from the General Fund to the Office on Minority and Multicultural Health to carry out the work of the office and to implement these added responsibilities. The bill also specifies that it is the intent of the Legislature that in succeeding fiscal years, \$1.5 million shall be appropriated to the office and that this amount shall be in addition to any amounts allocated to the office in the fiscal year 2001 annual appropriations act.

# SENATE BUDGET AND APPROPRIATIONS COMMITTEE

## STATEMENT TO

### **SENATE, No. 10**

with committee amendments

# STATE OF NEW JERSEY

DATED: OCTOBER 19, 2000

The Senate Budget and Appropriations Committee reports favorably and with committee amendments Senate Bill No. 10.

This bill renames the New Jersey Office on Minority Health in the Department of Health and Senior Services and broadens the mission of the office by extending its existing duties and adding new ones.

**Current law.** The Office on Minority Health was created by law in 1992 to address the disparity in death, disease and injury rates between white and minority populations in New Jersey. The Office's statutory responsibilities include

- < making grants to community organizations to fund special research and demonstration projects for at-risk minority populations,
- < creating public-private partnerships in minority communities for health awareness and for access to public health services,
- < serving as a resource center for data on minority health,
- < developing culturally appropriate health education materials,
- < assisting schools with programs on nutrition and healthy lifestyles,
- < advocating measures to improve minority health,
- < encouraging the use, in health data collection, of specific race and ethnicity identifiers, and
- < developing a Statewide plan to increase the number of minority health care professionals.

**Proposed changes.** The bill would effect the following changes:

- (1) It would clarify that
  - < the population that the Office is to serve includes both racial and ethnic minorities, and
  - < the ultimate goal of the Office is to foster minority access to high-quality health care.
- (2) It would enhance the Office's powers and duties by
  - < allowing the Office to make grants to ongoing community-based programs, as well as special projects, and
  - < extending its informational function to include development of a clearinghouse that would collate and organize minority health data by county and disseminate the data on request.

- (3) It would confer new responsibilities on the Office, including
- < working with medical and dental schools to develop cultural and language competency courses that address disparities in health care access, use, quality and other variables,
  - < making recommendations on effective outreach to increase minority communities' participation in public health benefit programs,
  - < establishing an alliance with community-based agencies and various components of the health care sector to promote the objectives of the Office, and
  - < evaluating minority health programs in other states for their potential replication in New Jersey.

(4) Finally, it would redesignate the Office as the "Office on Minority and Multicultural Health."

COMMITTEE AMENDMENTS:

Technical committee amendments revise the title of the act establishing the Office to reflect its redesignation under the bill.

FISCAL IMPACT:

The bill appropriates \$1.5 million from the General Fund to the Office on Minority and Multicultural Health to carry out the work of the Office and to implement its added responsibilities under the legislation. The bill also specifies that it is the intent of the Legislature that in succeeding fiscal years, \$1.5 million shall be appropriated to the Office, and that this amount shall be in addition to any amounts allocated to the Office from amounts appropriated in the FY2001 annual appropriations act.



[First Reprint]  
**SENATE, No. 10**

---

**STATE OF NEW JERSEY**  
**209th LEGISLATURE**

---

INTRODUCED SEPTEMBER 14, 2000

**Sponsored by:**

**Senator DIANE ALLEN**  
**District 7 (Burlington and Camden)**  
**Senator RICHARD J. CODEY**  
**District 27 (Essex)**

**Co-Sponsored by:**

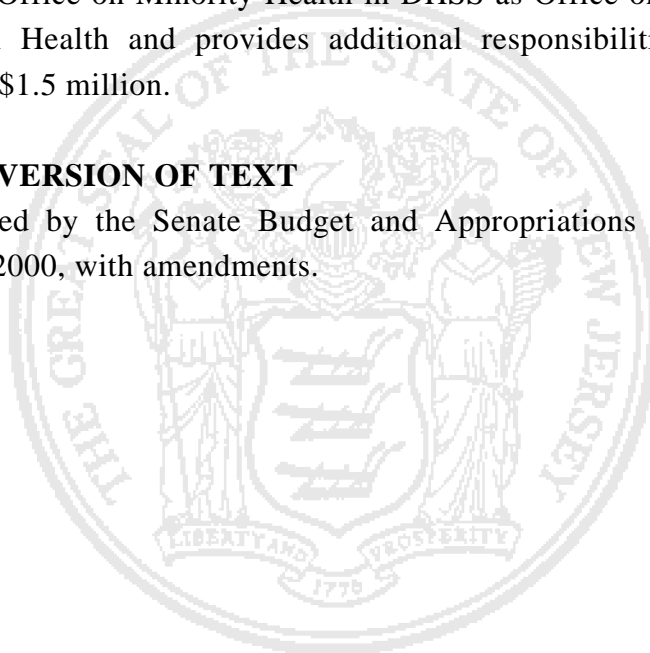
**Senators Bucco, Kosco, Singer, Inverso, Robertson, Sinagra, Matheussen,**  
**Baer, Turner and Rice**

**SYNOPSIS**

Renames Office on Minority Health in DHSS as Office on Minority and Multicultural Health and provides additional responsibilities for office; appropriates \$1.5 million.

**CURRENT VERSION OF TEXT**

As reported by the Senate Budget and Appropriations Committee on October 19, 2000, with amendments.



**(Sponsorship Updated As Of: 12/5/2000)**

1 AN ACT concerning minority and multicultural health, amending <sup>1</sup>the  
2 title and body of<sup>1</sup> P.L.1991, c.401 and making an appropriation.

3  
4 **BE IT ENACTED** *by the Senate and General Assembly of the State*  
5 *of New Jersey:*

6  
7 <sup>1</sup>1. The title of P.L.1991, c.401 is amended to read as follows:  
8 AN ACT establishing the New Jersey Office on Minority and  
9 Multicultural Health.<sup>1</sup>  
10 (cf: P.L.1991, c.401, title)

11  
12 <sup>1</sup>[1.] 2.<sup>1</sup> Section 1 of P.L.1991, c.401 (C.26:2-160) is amended to  
13 read as follows:

14 1. The Legislature finds and declares that:

15 [there] a. There are dramatic differences in death, disease and  
16 injury rates between White and racial and ethnic minority populations  
17 in the State[. For example, the non-White infant mortality rate in  
18 1987 was 18.7 per 1,000 live births, whereas the rate for White infants  
19 was 7.1; esophageal cancer death rates among Black males are three  
20 times greater than among White males; of the cumulative total of  
21 AIDS cases reported in 1988 in the State, 34% were White, 52%  
22 Black and 13% Hispanic; Black and Hispanic women represent 77%  
23 of all female AIDS cases in the State; and chemical poisonings among  
24 the employed Black population are almost three times greater than that  
25 of the employed White population, as measured by the frequency of  
26 hospitalization.

27 The Legislature further finds and declares that presently there is no  
28 coordinated], with especially wide and persistent disparities in the  
29 incidence of cancer, cardiovascular disease and stroke, chemical  
30 dependency, diabetes, asthma, homicide, suicide, accidental injury,  
31 infant mortality, childhood immunization rates and HIV/AIDS;

32 b. There is a clear need for a collaborative State effort to address  
33 the wide disparity in death, disease and injury rates [and, therefore,  
34 there is a need to establish a] through a New Jersey Office on  
35 Minority and Multicultural Health, renamed from the New Jersey  
36 Office on Minority Health established pursuant to P.L.1991, c.401  
37 (C.26:2-160 et seq.); and

38 c. The New Jersey Office on Minority and Multicultural Health shall  
39 seek to identify and develop innovative projects which will  
40 [close] eliminate the gap between the health status of White and racial  
41 and ethnic minority populations in this State, and to coordinate current

**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:

<sup>1</sup> Senate SBA committee amendments adopted October 19, 2000.

1 State programs which seek to address minority racial and ethnic health  
2 concerns, with the ultimate goal of enabling all members of racial and  
3 ethnic minority populations in this State to have access to high-quality  
4 health care.

5 (cf: P.L.1991, c.401, s.1)

6  
7 <sup>1</sup>[2.] 3.<sup>1</sup> Section 2 of P.L.1991, c.401 (C.26:2-161) is amended to  
8 read as follows:

9 2. a. There is established the New Jersey Office on Minority and  
10 Multicultural Health in the Department of Health and Senior Services.

11 b. Whenever the term "New Jersey Office on Minority Health"  
12 occurs or any reference is made thereto in any law, contract or  
13 document, the same shall be deemed to mean or refer to the "New  
14 Jersey Office on Minority and Multicultural Health."

15 (cf: P.L.1991, c.401, s.2)

16  
17 <sup>1</sup>[3.] 4.<sup>1</sup> Section 3 of P.L.1991, c.401 (C.26:2-162) is amended to  
18 read as follows:

19 3. The office shall:

20 a. Provide grants to community-based organizations to conduct  
21 special research, demonstration and evaluation projects for targeted  
22 at-risk racial and ethnic minority populations and to support ongoing  
23 community-based programs that are designed to reduce or eliminate  
24 racial and ethnic health disparities in the State;

25 b. Develop and implement model public and private partnerships  
26 in racial and ethnic minority communities for health awareness  
27 campaigns and to improve the access, acceptability and use of public  
28 health services;

29 c. Serve as an information and resource center for racial and ethnic  
30 minority specific health information and data and develop a  
31 clearinghouse to collate and organize data on a county-by-county basis  
32 and disseminate it upon request to interested parties;

33 d. Review, recommend and develop culturally appropriate health  
34 education materials;

35 e. Provide assistance to local school districts to develop programs  
36 in elementary and secondary schools which stress good nutrition and  
37 healthy lifestyles;

38 f. Function as an advocate for the adoption and implementation of  
39 effective measures to improve [minority] the health of racial and  
40 ethnic minority populations in this State, which measures should lead  
41 to the elimination of disparities among the various racial and ethnic  
42 populations of this State with respect to access to high-quality health  
43 care, utilization of health care services and health status;

44 g. Improve existing data systems to ensure that the health  
45 information that is collected includes specific race and ethnicity  
46 identifiers;

1 h. Review the programs of the Departments of Health and Senior  
2 Services, Human Services, Community Affairs and Education and any  
3 other department of State government, as appropriate, that concern  
4 multicultural or minority health and make recommendations to the  
5 departments that will enable them to better coordinate and improve the  
6 effectiveness of their efforts; [and]

7 i. [Within 18 months of the effective date of this act, develop]  
8 Develop a Statewide plan for increasing the number of racial and  
9 ethnic minority health care professionals which includes  
10 recommendations for the financing mechanisms and recruitment  
11 strategies necessary to carry out the plan;

12 j. Work collaboratively with colleges of medicine and dentistry in  
13 this State and other health care professional training programs to  
14 develop cultural and language competency courses that are designed  
15 to address the problem of racial and ethnicity disparities in health care  
16 access, utilization, treatment decisions, quality and outcomes;

17 k. Develop recommendations for the most effective means of  
18 providing outreach to racial and ethnic minority communities  
19 throughout the State to ensure their maximum participation in publicly  
20 funded health benefits programs;

21 l. Seek to establish a Statewide alliance with community-based  
22 agencies and organizations, health care facilities, health care provider  
23 organizations, managed care organizations and pharmaceutical  
24 manufacturers to promote the objectives of the office; and

25 m. Evaluate multicultural or racial and ethnic minority health  
26 programs in other states to assess their efficacy and potential for  
27 replication in this State and make recommendations regarding the  
28 adoption of such programs, as appropriate.

29 (cf: P.L.1991, c.401, s.3)

30  
31 <sup>1</sup>[4.] 5.<sup>1</sup> Section 4 of P.L.1991, c.401 (C.26:2-163) is amended to  
32 read as follows:

33 4. The office is authorized to:

34 a. Adopt rules and regulations pursuant to the "Administrative  
35 Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), concerning the  
36 operation of the office and other matters that may be necessary to  
37 carry out the purposes of this act;

38 b. Maintain offices at such places within the State as it may  
39 designate;

40 c. Employ a director and other personnel as may be necessary. The  
41 director shall be appointed by the Commissioner of Health and Senior  
42 Services and shall serve at the pleasure of the commissioner during the  
43 commissioner's term of office and until the appointment and  
44 qualification of the director's successor. The director shall devote his  
45 entire time to the duties of the position and shall receive a salary as  
46 provided by law;

1 d. Apply for and accept any grant of money from the federal  
2 government, private foundations or other sources, which may be  
3 available for programs related to multicultural or minority health;

4 e. Serve as the designated State agency for receipt of federal funds  
5 specifically designated for multicultural or racial and ethnic minority  
6 health programs; and

7 f. Enter into contracts with individuals, organizations, and  
8 institutions necessary for the performance of its duties under this act.  
9 (cf: P.L.1991, c.401, s.4)

10  
11 <sup>1</sup>[5.] 6.<sup>1</sup> Section 5 of P.L.1991, c.401 (C.26:2-164) is amended to  
12 read as follows:

13 5. There is established a New Jersey Office on Minority and  
14 Multicultural Health Advisory Commission.

15 The commission shall consist of nine members, including the  
16 Commissioner of Health and Senior Services or his designee, who shall  
17 serve ex officio, and eight public members who are residents of the  
18 State and who shall be appointed as follows: one member who is a  
19 health care professional shall be appointed by the President of the  
20 Senate; one member who is a health care professional shall be  
21 appointed by the Speaker of the General Assembly; and six members,  
22 at least two of whom are health care professionals, at least one of  
23 whom represents health care facilities and at least one of whom  
24 represents the health insurance industry, shall be appointed by the  
25 Governor with the advice and consent of the Senate.

26 The term of office of each public member shall be three years, but  
27 of the members first appointed, two shall be appointed for a term of  
28 one year, three shall be appointed for a term of two years and three  
29 shall be appointed for a term of three years. A member shall hold  
30 office for the term of his appointment and until his successor has been  
31 appointed and qualified. All vacancies shall be filled for the balance  
32 of the unexpired term in the same manner as the original appointment.  
33 A member of the commission is eligible for reappointment.

34 The public members of the commission shall not receive any  
35 compensation for their services, but shall be reimbursed for the actual  
36 and necessary expenses incurred in the performance of their duties as  
37 members of the commission, within the limits of funds available to the  
38 commission.

39 The members of the commission shall annually elect a chairman and  
40 a vice-chairman from among the public members and may select a  
41 secretary, who need not be a member of the commission.

42 The New Jersey Office on Minority and Multicultural Health shall  
43 provide such staff and assistance as the commission requires to carry  
44 out its work.

45 (cf: P.L.1991, c.401, s.5)

1       <sup>1</sup>[6.] 7.<sup>1</sup> Section 6 of P.L.1991, c.401 (C.26:2-165) is amended to  
2 read as follows:

3       6. The advisory commission shall:

4       a. Review and make recommendations to the New Jersey Office on  
5 Minority and Multicultural Health on any rules, regulations and  
6 policies proposed by the office;

7       b. Advise the office on the awarding of grants and development of  
8 programs and services required pursuant to this act;

9       c. Advise the office on the needs, priorities, programs and policies  
10 relating to multicultural or racial and ethnic minority health in this  
11 State; and

12       d. Provide any other assistance to the office, as may be requested  
13 by the director.

14       The commission may accept from any governmental department or  
15 agency, public or private body or any other source grants or  
16 contributions to be used in carrying out its responsibilities under this  
17 act.

18 (cf: P.L.1991, c.401, s.6)

19

20       <sup>1</sup>[7.] 8.<sup>1</sup> Section 8 of P.L.1991, c.401 (C.26:2-167) is amended to  
21 read as follows:

22       8. The office is entitled to call to its assistance, and avail itself of,  
23 the services of employees of any State, county or municipal  
24 department, board, bureau, commission or agency as it may require  
25 and as may be available to it for its purposes. All departments,  
26 agencies and divisions are authorized and directed, to the extent not  
27 inconsistent with law, to cooperate with the New Jersey Office on  
28 Minority and Multicultural Health.

29 (cf: P.L.1991, c.401, s.8)

30

31       <sup>1</sup>[8.] 9.<sup>1</sup> a. There is appropriated \$1,500,000 from the General  
32 Fund to the Office on Minority and Multicultural Health in the  
33 Department of Health and Senior Services to carry out its  
34 responsibilities pursuant to this act. The monies appropriated pursuant  
35 to this act shall supplement any funding currently available to the  
36 office.

37       b. It is the intent of the Legislature that in succeeding fiscal years,  
38 the Governor shall recommend and the Legislature shall appropriate  
39 \$1,500,000 from the General Fund to the Office on Minority and  
40 Multicultural Health to carry out its responsibilities under this act.  
41 This amount shall be in addition to any amounts allocated to the office  
42 in fiscal year 2001 pursuant to P.L.2000, c.53.

43

44       <sup>1</sup>[9.] 10.<sup>1</sup> This act shall take effect immediately.

P.L. 2001, CHAPTER 205, *approved August 8, 2001*  
Assembly, No. 2204 (*First Reprint*)

1 AN ACT concerning <sup>1</sup>minority and<sup>1</sup> multicultural health <sup>1</sup>[and] <sup>1</sup>  
2 amending <sup>1</sup>the title and body of<sup>1</sup> P.L.1991, c.401 <sup>1</sup>and making an  
3 appropriation<sup>1</sup>.

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

7  
8 <sup>1</sup>1. The title of P.L.1991, c.401 is amended to read as follows:  
9 AN ACT establishing the New Jersey Office on Minority and  
10 Multicultural Health.<sup>1</sup>  
11 (cf: P.L.1991, c.401, title)

12  
13 <sup>1</sup>[1.] 2.<sup>1</sup> Section 1 of P.L.1991, c.401 (C.26:2-160) is amended to  
14 read as follows:

15 1. The Legislature finds and declares that:

16 [there] a. There are dramatic differences in death, disease and  
17 injury rates between White and racial and ethnic minority populations  
18 in the State[. For example, the non-White infant mortality rate in  
19 1987 was 18.7 per 1,000 live births, whereas the rate for White infants  
20 was 7.1; esophageal cancer death rates among Black males are three  
21 times greater than among White males; of the cumulative total of  
22 AIDS cases reported in 1988 in the State, 34% were White, 52%  
23 Black and 13% Hispanic; Black and Hispanic women represent 77%  
24 of all female AIDS cases in the State; and chemical poisonings among  
25 the employed Black population are almost three times greater than that  
26 of the employed White population, as measured by the frequency of  
27 hospitalization.

28 The Legislature further finds and declares that presently there is  
29 no], with especially wide and persistent disparities in the incidence of  
30 cancer, cardiovascular disease and stroke, chemical dependency,  
31 diabetes, <sup>1</sup>asthma,<sup>1</sup> homicide, suicide, accidental injury, infant  
32 mortality, <sup>1</sup>child immunization rates<sup>1</sup> and HIV/AIDS;

33 b. There is a clear need for a <sup>1</sup>[continuous and coordinated]  
34 collaborative<sup>1</sup> State effort to address the wide disparity in death,  
35 disease and injury rates [and, therefore, there is a need to establish a]  
36 through a New Jersey Office on <sup>1</sup>Minority and<sup>1</sup> Multicultural Health,  
37 renamed from the New Jersey Office on Minority Health established  
38 pursuant to P.L.1991, c.401 (C.26:2-160 et seq.); and

39 c. The New Jersey Office on <sup>1</sup>Minority and<sup>1</sup> Multicultural Health  
40 shall seek to identify and develop innovative projects which will

**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:**

<sup>1</sup> Senate floor amendments adopted December 4, 2000.

1 <sup>1</sup>[close] eliminate<sup>1</sup> the gap between the health status of White and  
2 racial and ethnic minority populations in this State, and to coordinate  
3 current State programs which seek to address minority racial and  
4 ethnic health concerns, with the ultimate goal of enabling all members  
5 of racial and ethnic minority <sup>1</sup>[and gender]<sup>1</sup> populations in this State  
6 to have access to high-quality health care.

7 (cf: P.L.1991, c.401, s.1)

8

9 <sup>1</sup>[2.] 3.<sup>1</sup> Section 2 of P.L.1991, c.401 (C.26:2-161) is amended to  
10 read as follows:

11 2. a. There is established the New Jersey Office on [Minority]  
12 <sup>1</sup>Minority and<sup>1</sup> Multicultural Health in the Department of Health and  
13 Senior Services.

14 b. Whenever the term "New Jersey Office on Minority Health"  
15 occurs or any reference is made thereto in any law, contract or  
16 document, the same shall be deemed to mean or refer to the "New  
17 Jersey Office on <sup>1</sup>Minority and<sup>1</sup> Multicultural Health."

18 (cf: P.L.1991, c.401, s.2)

19

20 <sup>1</sup>[3.] 4.<sup>1</sup> Section 3 of P.L.1991, c.401 (C.26:2-162) is amended to  
21 read as follows:

22 3. The office shall:

23 a. Provide grants to community-based organizations to conduct  
24 special research, demonstration and evaluation projects for targeted  
25 at-risk racial and ethnic minority <sup>1</sup>[and gender]<sup>1</sup> populations <sup>1</sup>and to  
26 support ongoing community-based programs that are designed to  
27 reduce or eliminate racial and ethnic health disparities in the State<sup>1</sup>;

28 b. Develop and implement model public and private partnerships  
29 in racial and ethnic minority communities for health awareness  
30 campaigns and to improve the access, acceptability and use of public  
31 health services;

32 c. Serve as an information and resource center for racial and ethnic  
33 minority <sup>1</sup>[and gender]<sup>1</sup> specific health information and data and  
34 develop a clearinghouse to <sup>1</sup>[collect]<sup>1</sup> collate and organize<sup>1</sup> data on  
35 a county-by-county basis and disseminate it upon request to interested  
36 parties;

37 d. Review, recommend and develop culturally appropriate health  
38 education materials;

39 e. Provide assistance to local school districts to develop programs  
40 in elementary and secondary schools which stress good nutrition and  
41 healthy lifestyles;

42 f. Function as an advocate for the adoption and implementation of  
43 effective measures to improve [minority] the health of racial and  
44 ethnic minority <sup>1</sup>[and gender]<sup>1</sup> populations in this State <sup>1</sup>[and] .  
45 which measures should<sup>1</sup> lead to the elimination of disparities among



1 the various racial and ethnic populations of this State <sup>1</sup>[and gender-  
 2 based disparities] <sup>1</sup> with respect to access to high-quality health care <sup>1</sup>,  
 3 utilization of health care services <sup>1</sup> and health status;

4 g. Improve existing data systems to ensure that the health  
 5 information that is collected includes specific race and ethnicity  
 6 identifiers;

7 h. Review the programs of the Departments of Health and Senior  
 8 Services, Human Services, Community Affairs and Education and any  
 9 other department of State government, as appropriate, that concern  
 10 multicultural or minority health and make recommendations to the  
 11 departments that will enable them to better coordinate and improve the  
 12 effectiveness of their efforts; [and]

13 i. [Within 18 months of the effective date of this act, develop]  
 14 Develop a Statewide plan for increasing the number of racial and  
 15 ethnic minority health care professionals which includes  
 16 recommendations for the financing mechanisms and recruitment  
 17 strategies necessary to carry out the plan;

18 j. <sup>1</sup>[Study and make recommendations regarding the training of  
 19 health care professionals in the provision of culturally competent  
 20 health care, including, but not limited to, recommendations for the  
 21 adoption of cultural competency courses by colleges of medicine and  
 22 dentistry in this State that are designed to address the problem of race,  
 23 ethnicity and gender-based disparities in health care treatment  
 24 decisions] Work collaboratively with colleges of medicine and  
 25 dentistry in this State and other health care professional training  
 26 programs to develop cultural and language competency courses that  
 27 are designed to address the problem of racial and ethnicity disparities  
 28 in health care access, utilization, treatment decisions, quality and  
 29 outcomes <sup>1</sup> ;

30 k. Develop recommendations for the most effective means of  
 31 providing outreach to racial and ethnic minority communities  
 32 throughout the State to ensure their maximum participation in publicly  
 33 funded health benefits programs;

34 l. Seek to establish a Statewide alliance with community-based  
 35 agencies and organizations, health care facilities, health care provider  
 36 organizations <sup>1</sup>, managed care organizations <sup>1</sup> and pharmaceutical  
 37 manufacturers to promote the objectives of the office; and

38 m. Evaluate multicultural or racial and ethnic minority health  
 39 programs in other states to assess their efficacy and potential for  
 40 replication in this State and make recommendations regarding the  
 41 adoption of such programs, as appropriate.

42 (cf: P.L.1991, c.401, s.3)

44 <sup>1</sup>[4.] 5. <sup>1</sup> Section 4 of P.L.1991, c.401 (C.26:2-163) is amended to  
 45 read as follows:

46 4. The office is authorized to:

- 1 a. Adopt rules and regulations pursuant to the "Administrative  
2 Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), concerning the  
3 operation of the office and other matters that may be necessary to  
4 carry out the purposes of this act;
- 5 b. Maintain offices at such places within the State as it may  
6 designate;
- 7 c. Employ a director and other personnel as may be necessary. The  
8 director shall be appointed by the Commissioner of Health and Senior  
9 Services and shall serve at the pleasure of the commissioner during the  
10 commissioner's term of office and until the appointment and  
11 qualification of the director's successor. The director shall devote his  
12 entire time to the duties of the position and shall receive a salary as  
13 provided by law;
- 14 d. Apply for and accept any grant of money from the federal  
15 government, private foundations or other sources, which may be  
16 available for programs related to multicultural or minority health;
- 17 e. Serve as the designated State agency for receipt of federal funds  
18 specifically designated for multicultural or racial and ethnic minority  
19 health programs; and
- 20 f. Enter into contracts with individuals, organizations, and  
21 institutions necessary for the performance of its duties under this act.  
22 (cf: P.L.1991, c.401, s.4)

23

24 <sup>1</sup>[5.] 6.<sup>1</sup> Section 5 of P.L.1991, c.401 (C.26:2-164) is amended to  
25 read as follows:

26 5. There is established a New Jersey Office on [Minority]  
27 <sup>1</sup>Minority and<sup>1</sup> Multicultural Health Advisory Commission.

28 The commission shall consist of nine members, including the  
29 Commissioner of Health and Senior Services or his designee, who shall  
30 serve ex officio, and eight public members who are residents of the  
31 State and who shall be appointed as follows: one member who is a  
32 health care professional shall be appointed by the President of the  
33 Senate; one member who is a health care professional shall be  
34 appointed by the Speaker of the General Assembly; and six members,  
35 at least two of whom are health care professionals, at least one of  
36 whom represents health care facilities and at least one of whom  
37 represents the health insurance industry, shall be appointed by the  
38 Governor with the advice and consent of the Senate.

39 The term of office of each public member shall be three years, but  
40 of the members first appointed, two shall be appointed for a term of  
41 one year, three shall be appointed for a term of two years and three  
42 shall be appointed for a term of three years. A member shall hold  
43 office for the term of his appointment and until his successor has been  
44 appointed and qualified. All vacancies shall be filled for the balance  
45 of the unexpired term in the same manner as the original appointment.  
46 A member of the commission is eligible for reappointment.

1 The public members of the commission shall not receive any  
2 compensation for their services, but shall be reimbursed for the actual  
3 and necessary expenses incurred in the performance of their duties as  
4 members of the commission, within the limits of funds available to the  
5 commission.

6 The members of the commission shall annually elect a chairman and  
7 a vice-chairman from among the public members and may select a  
8 secretary, who need not be a member of the commission.

9 The New Jersey Office on [Minority] <sup>1</sup>Minority and<sup>1</sup> Multicultural  
10 Health shall provide such staff and assistance as the commission  
11 requires to carry out its work.

12 (cf: P.L.1991, c.401, s.5)

13

14 <sup>1</sup>[6.] 7.<sup>1</sup> Section 6 of P.L.1991, c.401 (C.26:2-165) is amended to  
15 read as follows:

16 6. The advisory commission shall:

17 a. Review and make recommendations to the New Jersey Office on  
18 [Minority] <sup>1</sup>Minority and<sup>1</sup> Multicultural Health on any rules,  
19 regulations and policies proposed by the office;

20 b. Advise the office on the awarding of grants and development of  
21 programs and services required pursuant to this act;

22 c. Advise the office on the needs, priorities, programs and policies  
23 relating to multicultural or racial and ethnic minority health in this  
24 State; and

25 d. Provide any other assistance to the office, as may be requested  
26 by the director.

27 The commission may accept from any governmental department or  
28 agency, public or private body or any other source grants or  
29 contributions to be used in carrying out its responsibilities under this  
30 act.

31 (cf: P.L.1991, c.401, s.6)

32

33 <sup>1</sup>[7.] 8.<sup>1</sup> Section 8 of P.L.1991, c.401 (C.26:2-167) is amended to  
34 read as follows:

35 8. The office is entitled to call to its assistance, and avail itself of,  
36 the services of employees of any State, county or municipal  
37 department, board, bureau, commission or agency as it may require  
38 and as may be available to it for its purposes. All departments,  
39 agencies and divisions are authorized and directed, to the extent not  
40 inconsistent with law, to cooperate with the New Jersey Office on  
41 [Minority] <sup>1</sup>Minority and<sup>1</sup> Multicultural Health.

42 (cf: P.L.1991, c.401, s.8)

43

44 <sup>1</sup>9. a. There is appropriated \$1,500,000 from the General Fund to  
45 the Office on Minority and Multicultural Health in the Department of  
46 Health and Senior Services to carry out its responsibilities pursuant to

1 this act. The monies appropriated pursuant to this act shall supplement  
2 any funding currently available to the office.

3 b. It is the intent of the Legislature that in succeeding fiscal years,  
4 the Governor shall recommend and the Legislature shall appropriate  
5 \$1,500,000 from the General Fund to the Office on Minority and  
6 Multicultural Health to carry out its responsibilities under this act.  
7 This amount shall be in addition to any amounts allocated to the office  
8 in fiscal year 2001 pursuant to P.L.2000, c.53.<sup>1</sup>

9

10 <sup>1</sup>[8.] 10.<sup>1</sup> This act shall take effect immediately.

11

12

13

14

15 Renames Office on Minority Health in DHSS as Office on Minority  
16 and Multicultural Health and provides additional responsibilities for  
17 office; appropriates \$1.5 million.

## CHAPTER 205

**AN ACT** concerning minority and multicultural health, amending the title and body of P.L.1991, c.401 and making an appropriation.

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

Title amended.

1. The title of P.L.1991, c.401 is amended to read as follows:

**AN ACT** establishing the New Jersey Office on Minority and Multicultural Health.

2. Section 1 of P.L.1991, c.401 (C.26:2-160) is amended to read as follows:

C.26:2-160 Findings, declarations relative to minority and multicultural health.

1. The Legislature finds and declares that:

a. There are dramatic differences in death, disease and injury rates between White and racial and ethnic minority populations in the State, with especially wide and persistent disparities in the incidence of cancer, cardiovascular disease and stroke, chemical dependency, diabetes, asthma, homicide, suicide, accidental injury, infant mortality, child immunization rates and HIV/AIDS;

b. There is a clear need for a collaborative State effort to address the wide disparity in death, disease and injury rates through a New Jersey Office on Minority and Multicultural Health, renamed from the New Jersey Office on Minority Health established pursuant to P.L.1991, c.401 (C.26:2-160 et seq.); and

c. The New Jersey Office on Minority and Multicultural Health shall seek to identify and develop innovative projects which will eliminate the gap between the health status of White and racial and ethnic minority populations in this State, and to coordinate current State programs which seek to address minority racial and ethnic health concerns, with the ultimate goal of enabling all members of racial and ethnic minority populations in this State to have access to high-quality health care.

3. Section 2 of P.L.1991, c.401 (C.26:2-161) is amended to read as follows:

C.26:2-161 New Jersey Office on Minority and Multicultural Health.

2. a. There is established the New Jersey Office on Minority and Multicultural Health in the Department of Health and Senior Services.

b. Whenever the term "New Jersey Office on Minority Health" occurs or any reference is made thereto in any law, contract or document, the same shall be deemed to mean or refer to the "New Jersey Office on Minority and Multicultural Health."

4. Section 3 of P.L.1991, c.401 (C.26:2-162) is amended to read as follows:

C.26:2-162 Duties of the office.

3. The office shall:

a. Provide grants to community-based organizations to conduct special research, demonstration and evaluation projects for targeted at-risk racial and ethnic minority populations and to support ongoing community-based programs that are designed to reduce or eliminate racial and ethnic health disparities in the State;

b. Develop and implement model public and private partnerships in racial and ethnic minority communities for health awareness campaigns and to improve the access, acceptability and use of public health services;

c. Serve as an information and resource center for racial and ethnic minority specific health information and data and develop a clearinghouse to collate and organize data on a county-by-county basis and disseminate it upon request to interested parties;

d. Review, recommend and develop culturally appropriate health education materials;

e. Provide assistance to local school districts to develop programs in elementary and secondary schools which stress good nutrition and healthy lifestyles;

f. Function as an advocate for the adoption and implementation of effective measures to improve the health of racial and ethnic minority populations in this State, which measures should

lead to the elimination of disparities among the various racial and ethnic populations of this State with respect to access to high-quality health care, utilization of health care services and health status;

g. Improve existing data systems to ensure that the health information that is collected includes specific race and ethnicity identifiers;

h. Review the programs of the Departments of Health and Senior Services, Human Services, Community Affairs and Education and any other department of State government, as appropriate, that concern multicultural or minority health and make recommendations to the departments that will enable them to better coordinate and improve the effectiveness of their efforts;

i. Develop a Statewide plan for increasing the number of racial and ethnic minority health care professionals which includes recommendations for the financing mechanisms and recruitment strategies necessary to carry out the plan;

j. Work collaboratively with colleges of medicine and dentistry in this State and other health care professional training programs to develop cultural and language competency courses that are designed to address the problem of racial and ethnicity disparities in health care access, utilization, treatment decisions, quality and outcomes;

k. Develop recommendations for the most effective means of providing outreach to racial and ethnic minority communities throughout the State to ensure their maximum participation in publicly funded health benefits programs;

l. Seek to establish a Statewide alliance with community-based agencies and organizations, health care facilities, health care provider organizations, managed care organizations and pharmaceutical manufacturers to promote the objectives of the office; and

m. Evaluate multicultural or racial and ethnic minority health programs in other states to assess their efficacy and potential for replication in this State and make recommendations regarding the adoption of such programs, as appropriate.

5. Section 4 of P.L.1991, c.401 (C.26:2-163) is amended to read as follows:

C.26:2-163 Powers of the office.

4. The office is authorized to:

a. Adopt rules and regulations pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), concerning the operation of the office and other matters that may be necessary to carry out the purposes of this act;

b. Maintain offices at such places within the State as it may designate;

c. Employ a director and other personnel as may be necessary. The director shall be appointed by the Commissioner of Health and Senior Services and shall serve at the pleasure of the commissioner during the commissioner's term of office and until the appointment and qualification of the director's successor. The director shall devote his entire time to the duties of the position and shall receive a salary as provided by law;

d. Apply for and accept any grant of money from the federal government, private foundations or other sources, which may be available for programs related to multicultural or minority health;

e. Serve as the designated State agency for receipt of federal funds specifically designated for multicultural or racial and ethnic minority health programs; and

f. Enter into contracts with individuals, organizations, and institutions necessary for the performance of its duties under this act. (cf: P.L.1991, c.401, s.4)

6. Section 5 of P.L.1991, c.401 (C.26:2-164) is amended to read as follows:

C.26:2-164 New Jersey Office on Minority or Multicultural Health Advisory Commission.

5. There is established a New Jersey Office on Minority and Multicultural Health Advisory Commission.

The commission shall consist of nine members, including the Commissioner of Health and Senior Services or his designee, who shall serve ex officio, and eight public members who are

residents of the State and who shall be appointed as follows: one member who is a health care professional shall be appointed by the President of the Senate; one member who is a health care professional shall be appointed by the Speaker of the General Assembly; and six members, at least two of whom are health care professionals, at least one of whom represents health care facilities and at least one of whom represents the health insurance industry, shall be appointed by the Governor with the advice and consent of the Senate.

The term of office of each public member shall be three years, but of the members first appointed, two shall be appointed for a term of one year, three shall be appointed for a term of two years and three shall be appointed for a term of three years. A member shall hold office for the term of his appointment and until his successor has been appointed and qualified. All vacancies shall be filled for the balance of the unexpired term in the same manner as the original appointment. A member of the commission is eligible for reappointment.

The public members of the commission shall not receive any compensation for their services, but shall be reimbursed for the actual and necessary expenses incurred in the performance of their duties as members of the commission, within the limits of funds available to the commission.

The members of the commission shall annually elect a chairman and a vice-chairman from among the public members and may select a secretary, who need not be a member of the commission.

The New Jersey Office on Minority and Multicultural Health shall provide such staff and assistance as the commission requires to carry out its work.

7. Section 6 of P.L.1991, c.401 (C.26:2-165) is amended to read as follows:

C.26:2-165 Duties of advisory commission.

6. The advisory commission shall:

- a. Review and make recommendations to the New Jersey Office on Minority and Multicultural Health on any rules, regulations and policies proposed by the office;
- b. Advise the office on the awarding of grants and development of programs and services required pursuant to this act;
- c. Advise the office on the needs, priorities, programs and policies relating to multicultural or racial and ethnic minority health in this State; and
- d. Provide any other assistance to the office, as may be requested by the director.

The commission may accept from any governmental department or agency, public or private body or any other source grants or contributions to be used in carrying out its responsibilities under this act.

8. Section 8 of P.L.1991, c.401 (C.26:2-167) is amended to read as follows:

C.26:2-167 Assistance of public agencies.

8. The office is entitled to call to its assistance, and avail itself of, the services of employees of any State, county or municipal department, board, bureau, commission or agency as it may require and as may be available to it for its purposes. All departments, agencies and divisions are authorized and directed, to the extent not inconsistent with law, to cooperate with the New Jersey Office on Minority and Multicultural Health.

9. a. There is appropriated \$1,500,000 from the General Fund to the Office on Minority and Multicultural Health in the Department of Health and Senior Services to carry out its responsibilities pursuant to this act. The monies appropriated pursuant to this act shall supplement any funding currently available to the office.

b. It is the intent of the Legislature that in succeeding fiscal years, the Governor shall recommend and the Legislature shall appropriate \$1,500,000 from the General Fund to the Office on Minority and Multicultural Health to carry out its responsibilities under this act. This amount shall be in addition to any amounts allocated to the office in fiscal year 2001 pursuant to P.L.2000, c.53.

10. This act shall take effect immediately.

Approved August 8, 2001.



# Office of the Governor

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## NEWS RELEASE

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RELEASE: Aug 8, 2001

### Acting Governor Donald T. DiFrancesco signed the following legislation today:

**SCS-1833, 839**, sponsored by Senators Peter Inverso (R-Mercer/Middlesex), Anthony Bucco (R-Morris) and Diane Allen (R-Burlington/Camden) and Assembly members Rose Heck (R-Bergen) and Kevin O'Toole (R-Essex/Union), allows police and firefighters who transferred to the Police and Firemen's Retirement System (PFRS) under a 1993 law to receive full benefits under PFRS for public safety service rendered prior to the transfer without having to pay the increased cost to the system of providing those benefits.

**A-2118**, sponsored by Senator Leonard Connors (R-Atlantic/Burlington/Ocean) and Assemblymen John Kelly (R-Bergen/Essex/Passaic) and Kevin O'Toole (R-Essex/Union), increases the number of members of the fire safety commission from 21 to 23. The role of the commission is to assist and advise the Commissioner of Community Affairs in the enforcement of the state's fire safety laws.

**A-3050**, sponsored by Assemblymen Neil Cohen (D-Union) and Nia Gill (D-Essex), termed "Leonard Cohen's Law," prohibits a licensed hospital from transferring a patient to another health care facility unless the patient is accompanied by a complete discharge summary from the transferring hospital at the time of the transfer.

**S-2050**, sponsored by Senators Andrew Ciesla (R-Monmouth/Ocean) and Richard Codey (D-Essex) and Assemblyman Alex DeCroce (R-Essex/Morris/Passaic), provides that a court, in its discretion, may award prejudgment interest on the whole or part of a judgment arising out of or relating to claims for the construction or installation of improvements to real property in accordance with principles of equity.

**S-1330**, sponsored by Senators Robert Littell (R-Sussex/Hunterdon/Morris) and Jack Sinagra (R-Middlesex) and Assembly members Nicholas Felice (R-Bergen/Passaic) and Charlotte Vandervalk (R-Bergen), requires health insurers that provide prescription drug coverage to issue standardized pharmacy identification cards to decrease administrative burdens and to streamline the dispensing of prescription drugs and devices.

**A-2913**, sponsored by Senator Joseph Palaia (R-Monmouth) and Assembly members Michael Arnone (R-Monmouth) and Anthony Impreveduto (D-Bergen/Hudson), prohibits "no damage for delay" clauses in certain contracts made with local units under the "Local Public Contracts Law" and the "Public Schools Contracts Law."

**A-1203**, sponsored by Assemblyman Steve Corodemus (R-Monmouth), establishes the World Language Instruction Committee in the Department of Education and provides credit toward

high school graduation requirements for world language courses offered by religious and non-public school organizations.

**A-2204**, sponsored by Senators Diane Allen (R-Burlington/Camden) and Richard Codey (D-Essex) and Assemblymen Frank Blee (R-Atlantic) and Joseph Charles (D-Hudson), renames the Office of Minority Health in the Department of Health and Senior Services (DHSS) as Office on Minority and Multicultural Health and provides additional responsibilities for the office and appropriates \$1.5 million to the new office to implement the bill.

**AJR-35**, sponsored by Assemblymen Joseph Azzolina (R-Middlesex/Monmouth) and Samuel Thompson (R-Middlesex/Monmouth), designates the third Monday in April of each year as "Patriots Day" in New Jersey.