

26:2-142.1

LEGISLATIVE HISTORY CHECKLIST

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LAWS OF: 2013 **CHAPTER:** 104

NJSA: 26:2-142.1. (Requires development of a diabetes action plan by DOH)

BILL NO: A3432 (Substituted for S2288)

SPONSOR(S) Conaway and others

DATE INTRODUCED: November 19, 2012

COMMITTEE: **ASSEMBLY:** Health and Senior Services

SENATE: ---

AMENDED DURING PASSAGE: No

DATE OF PASSAGE: **ASSEMBLY:** April 29, 2013

SENATE: May 30, 2013

DATE OF APPROVAL: August 7, 2013

FOLLOWING ARE ATTACHED IF AVAILABLE:

FINAL TEXT OF BILL (Introduced version of bill enacted)

A3432

SPONSOR'S STATEMENT: (Begins on page 3 of introduced bill) Yes

COMMITTEE STATEMENT: **ASSEMBLY:** Yes

SENATE: No

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

FLOOR AMENDMENT STATEMENT: No

LEGISLATIVE FISCAL NOTE: No

S2288

SPONSOR'S STATEMENT: (Begins on page 3 of introduced bill) Yes

COMMITTEE STATEMENT: **ASSEMBLY:** No

SENATE: Yes

FLOOR AMENDMENT STATEMENT: No

LEGISLATIVE FISCAL ESTIMATE: No

(continued)

VETO MESSAGE: No

GOVERNOR'S PRESS RELEASE ON SIGNING: No

FOLLOWING WERE PRINTED:

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REPORTS: No

HEARINGS: No

NEWSPAPER ARTICLES: No

LAW/RWH

P.L.2013, CHAPTER 104, *approved August 7, 2013*
Assembly, No. 3432

1 AN ACT concerning diabetes and supplementing Title 26 of the
2 Revised Statutes.

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

6
7 1. a. The Department of Health, in consultation with the
8 Department of Human Services and the Department of Children and
9 Families, shall develop a diabetes action plan to reduce the impact
10 of diabetes in the State of New Jersey. The plan shall identify goals
11 and benchmarks related to reducing the incidence of diabetes in
12 New Jersey, improving diabetes care, and controlling complications
13 associated with diabetes.

14 b. The Department of Health, in consultation with the
15 Department of Human Services and the Department of Children and
16 Families, shall, no later than 24 months after the effective date of
17 this act and biannually thereafter, present a report to the Governor,
18 and to the Legislature pursuant to section 2 of P.L.1991, c.164
19 (C.52:14-19.1), on the following:

20 (1) The financial impact and reach of diabetes of all types on the
21 Department of Health, the Department of Human Services, and the
22 Department of Children and Families, as well as the population
23 Statewide and in specific areas of the State. The report shall
24 include: (a) the number of people with diabetes receiving services
25 provided by each department; (b) the number of people with
26 diabetes and family members impacted by diabetes prevention and
27 control programs implemented by each department; (c) the financial
28 impact of diabetes and its complications on each department; and
29 (d) the financial impact of diabetes and its complications on each
30 department in comparison to other chronic diseases and conditions;

31 (2) The benefits of implemented programs and activities aimed
32 at preventing or controlling diabetes. This assessment shall
33 document the amount and source of any funding directed to each
34 department for programs and activities aimed at reaching those with
35 diabetes;

36 (3) The level of coordination among the three departments and
37 the divisions and agencies thereof on activities, programmatic
38 activities, and messaging related to the management, treatment, or
39 prevention of all forms of diabetes and its complications;

40 (4) The development or revision of a detailed action plan for
41 preventing and controlling diabetes with a range of actionable items
42 for consideration by the Legislature. The plan shall identify
43 proposed actions to reduce the impact of all forms of diabetes, pre-
44 diabetes, and complications related to diabetes; identify expected

1 outcomes of the proposed actions in the following biennium; and
2 establish benchmarks for preventing and controlling relevant forms
3 of diabetes, reducing the incidence of diabetes, improving diabetes
4 care, and controlling complications associated with diabetes; and
5 (5) The development of a detailed budget blueprint identifying
6 needs, costs, and resources required to implement the plan pursuant
7 to paragraph (4) of this subsection. This blueprint shall include a
8 budget range for each proposed action presented in the plan
9 pursuant to in paragraph (4) of this subsection for consideration by
10 the Legislature.

11

12 2. This act shall take effect immediately.

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STATEMENT

16

17 This bill requires the Department of Health (DOH), in
18 consultation with the Department of Human Services (DHS) and the
19 Department of Children and Families (DCF), to develop a diabetes
20 action plan to reduce the impact of diabetes in the State of New
21 Jersey. The plan is to identify goals and benchmarks related to
22 reducing the incidence of diabetes in New Jersey, improving
23 diabetes care, and controlling complications associated with
24 diabetes.

25 The bill requires DOH, in consultation with DHS and DCF, to
26 biannually report to the Governor and Legislature on: (1) the
27 financial impact of diabetes on each department; (2) the benefits of
28 implemented programs and activities aimed at controlling or
29 preventing diabetes; (3) the level of coordination among the
30 departments on activities, programmatic activities, and messaging
31 related to the management, treatment, or prevention of all forms of
32 diabetes and its complications; (4) the development or revision of a
33 detailed action plan for preventing and controlling diabetes, pre-
34 diabetes, and complications related to diabetes, with a range of
35 actionable items for consideration by the Legislature; and (5) the
36 development of a detailed budget blueprint identifying needs, costs,
37 and resources required to implement the detailed action plan.

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42 _____
Requires development of a diabetes action plan by DOH.

ASSEMBLY, No. 3432

STATE OF NEW JERSEY 215th LEGISLATURE

INTRODUCED NOVEMBER 19, 2012

Sponsored by:

Assemblyman HERB CONAWAY, JR.

District 7 (Burlington)

Assemblywoman PAMELA R. LAMPITT

District 6 (Burlington and Camden)

Assemblywoman NANCY F. MUNOZ

District 21 (Morris, Somerset and Union)

Assemblywoman BETTYLOU DECROCE

District 26 (Essex, Morris and Passaic)

Co-Sponsored by:

**Assemblyman Singleton, Assemblywoman Handlin, Assemblymen Eustace,
Caputo, Senators Gordon, Bateman, Addiego, Turner and Ruiz**

SYNOPSIS

Requires development of a diabetes action plan by DOH.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 5/31/2013)

1 AN ACT concerning diabetes and supplementing Title 26 of the
2 Revised Statutes.

3

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5 of New Jersey:

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7 1. a. The Department of Health, in consultation with the
8 Department of Human Services and the Department of Children and
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24 include: (a) the number of people with diabetes receiving services
25 provided by each department; (b) the number of people with
26 diabetes and family members impacted by diabetes prevention and
27 control programs implemented by each department; (c) the financial
28 impact of diabetes and its complications on each department; and
29 (d) the financial impact of diabetes and its complications on each
30 department in comparison to other chronic diseases and conditions;

31 (2) The benefits of implemented programs and activities aimed
32 at preventing or controlling diabetes. This assessment shall
33 document the amount and source of any funding directed to each
34 department for programs and activities aimed at reaching those with
35 diabetes;

36 (3) The level of coordination among the three departments and
37 the divisions and agencies thereof on activities, programmatic
38 activities, and messaging related to the management, treatment, or
39 prevention of all forms of diabetes and its complications;

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43 proposed actions to reduce the impact of all forms of diabetes, pre-
44 diabetes, and complications related to diabetes; identify expected
45 outcomes of the proposed actions in the following biennium; and
46 establish benchmarks for preventing and controlling relevant forms
47 of diabetes, reducing the incidence of diabetes, improving diabetes
48 care, and controlling complications associated with diabetes; and

1 (5) The development of a detailed budget blueprint identifying
2 needs, costs, and resources required to implement the plan pursuant
3 to paragraph (4) of this subsection. This blueprint shall include a
4 budget range for each proposed action presented in the plan
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21 The bill requires DOH, in consultation with DHS and DCF, to
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31 actionable items for consideration by the Legislature; and (5) the
32 development of a detailed budget blueprint identifying needs, costs,
33 and resources required to implement the detailed action plan.

ASSEMBLY HEALTH AND SENIOR SERVICES COMMITTEE

STATEMENT TO

ASSEMBLY, No. 3432

STATE OF NEW JERSEY

DATED: FEBRUARY 7, 2013

The Assembly Health and Senior Services Committee reports favorably Assembly Bill No. 3432.

This bill requires the Department of Health (DOH), in consultation with the Department of Human Services (DHS) and the Department of Children and Families (DCF), to develop a diabetes action plan to reduce the impact of diabetes in the State of New Jersey. The plan is to identify goals and benchmarks related to reducing the incidence of diabetes in New Jersey, improving diabetes care, and controlling complications associated with diabetes.

The bill requires DOH, in consultation with DHS and DCF, to biannually report to the Governor and Legislature on: (1) the financial impact of diabetes on each department; (2) the benefits of implemented programs and activities aimed at controlling or preventing diabetes; (3) the level of coordination among the departments on activities, programmatic activities, and messaging related to the management, treatment, or prevention of all forms of diabetes and its complications; (4) the development or revision of a detailed action plan for preventing and controlling diabetes, pre-diabetes, and complications related to diabetes, with a range of actionable items for consideration by the Legislature; and (5) the development of a detailed budget blueprint identifying needs, costs, and resources required to implement the detailed action plan.

SENATE, No. 2288

STATE OF NEW JERSEY
215th LEGISLATURE

INTRODUCED OCTOBER 25, 2012

Sponsored by:

Senator ROBERT M. GORDON

District 38 (Bergen and Passaic)

Senator CHRISTOPHER "KIP" BATEMAN

District 16 (Hunterdon, Mercer, Middlesex and Somerset)

Co-Sponsored by:

Senators Addiego, Turner and Ruiz

SYNOPSIS

Requires development of a diabetes action plan by DOH.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 5/31/2013)

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33 and resources required to implement the detailed action plan.

SENATE HEALTH, HUMAN SERVICES AND SENIOR
CITIZENS COMMITTEE

STATEMENT TO

SENATE, No. 2288

STATE OF NEW JERSEY

DATED: JANUARY 14, 2013

The Senate Health, Human Services and Senior Citizens Committee reports favorably Senate Bill No. 2288.

As reported, this bill requires the Department of Health (DOH), in consultation with the Department of Human Services (DHS) and the Department of Children and Families (DCF), to develop a diabetes action plan to reduce the impact of diabetes in the State of New Jersey. The plan is to identify goals and benchmarks related to reducing the incidence of diabetes in New Jersey, improving diabetes care, and controlling complications associated with diabetes.

The bill requires DOH, in consultation with DHS and DCF, to biannually report to the Governor and Legislature on: (1) the financial impact of diabetes on each department; (2) the benefits of implemented programs and activities aimed at controlling or preventing diabetes; (3) the level of coordination among the departments on activities, programmatic activities, and messaging related to the management, treatment, or prevention of all forms of diabetes and its complications; (4) the development or revision of a detailed action plan for preventing and controlling diabetes, pre-diabetes, and complications related to diabetes, with a range of actionable items for consideration by the Legislature; and (5) the development of a detailed budget blueprint identifying needs, costs, and resources required to implement the detailed action plan.