

26:2-90 to 26:2-92
LEGISLATIVE HISTORY CHECKLIST

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LAWS OF: 2019 **CHAPTER:** 259

NJSA: 26:2-90 to 26:2-92 (Revises definition of hemophilia and expands hemophilia treatment program.)

BILL NO: S3100 (Substituted for A5186)

SPONSOR(S) Loretta Weinberg and others

DATE INTRODUCED: 10/18/2018

COMMITTEE: **ASSEMBLY:** Health & Senior Services
Budget

SENATE: Health, Human Services & Senior Citizens
Budget & Appropriations

AMENDED DURING PASSAGE: Yes

DATE OF PASSAGE: **ASSEMBLY:** 6/27/2019

SENATE: 3/14/2019

DATE OF APPROVAL: 8/23/2019

FOLLOWING ARE ATTACHED IF AVAILABLE:

FINAL TEXT OF BILL (First Reprint enacted) Yes

S3100

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

COMMITTEE STATEMENT: **ASSEMBLY:** Yes Health & Senior Services
Budget

SENATE: Yes Budget & Appropriations
Health, Hum. Serv. &
Senior Citizens

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

FLOOR AMENDMENT STATEMENT: No

LEGISLATIVE FISCAL ESTIMATE: Yes

A5186

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

COMMITTEE STATEMENT: **ASSEMBLY:** Yes Health & Senior Services
Budget

SENATE: No

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

FLOOR AMENDMENT STATEMENT: No

LEGISLATIVE FISCAL ESTIMATE:

Yes

VETO MESSAGE:

No

GOVERNOR'S PRESS RELEASE ON SIGNING:

Yes

FOLLOWING WERE PRINTED:

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REPORTS:

No

HEARINGS:

No

NEWSPAPER ARTICLES:

No

RWH/CL

P.L. 2019, CHAPTER 259, *approved August 23, 2019*
Senate, No. 3100 (*First Reprint*)

1 AN ACT concerning the hemophilia treatment program and
2 amending P.L.1972, c.124.

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.1972, c.124 (C.26:2-90) is amended to read
8 as follows:

9 1. For purposes of **[this act]** P.L.1972, c.124 (C.26:2-90 et
10 seq.):

11 ¹**["hemophilia"]** "Hemophilia"¹ means a bleeding tendency
12 resulting from a genetically determined **[deficiency factor in the**
13 **blood]**, hereditarily determined, or acquired factor deficiency in the
14 blood.

15 "Qualitative platelet disorders" means conditions resulting from
16 genetically determined, hereditarily determined, or acquired defects
17 or abnormalities in blood platelet functions or structures.

18 ¹**["von"]** "Von¹ Willebrand disease" means a bleeding tendency
19 resulting from a genetically determined, hereditarily determined, or
20 acquired deficiency of the von Willebrand factor in the blood.

21 (cf: P.L.1972, c.124, s.1)

22
23 2. Section 2 of P.L.1972, c.124 (C.26:2-91) is amended to read
24 as follows:

25 2. The State Department of Health hereafter referred to as the
26 department shall establish a program for the care and treatment of
27 persons suffering from hemophilia, qualitative platelet disorders,
28 and von Willebrand disease. This program shall assist persons who
29 require continuing treatment with blood and blood derivatives to
30 avoid crippling, extensive hospitalization and other effects
31 associated with **[this]** these critical chronic bleeding **[condition]**
32 conditions, but who are unable to pay for the entire cost of such
33 services on a continuing basis despite the existence of various
34 types of hospital and medical insurance coverages, **[medicare,**
35 **medicaid,]** Medicare, Medicaid, and other government assistance
36 programs, and private charitable assistance programs.

37 (cf: P.L.1972, c.124, s.2)

38
39 3. Section 3 of P.L.1972, c.124 (C.26:2-92) is amended to read
40 as follows:

41 3. The department shall:

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

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

¹Senate SHH committee amendments adopted January 17, 2019.

- 1 a. Develop standards for determining eligibility for care and
2 treatment under this program;
- 3 b. Assist in the development and expansion of programs for the
4 care and treatment of persons suffering from hemophilia, qualitative
5 platelet disorders, and von Willebrand disease, including self-
6 administration, prevention, and home care and other medical and
7 dental procedures and techniques designed to provide maximum
8 control over bleeding episodes typical of **【this condition】** these
9 conditions;
- 10 c. Extend financial assistance to persons suffering from
11 hemophilia, qualitative platelet disorders, and von Willebrand
12 disease in obtaining blood, blood derivatives ¹/₂¹ and concentrates,
13 and other efficacious agents for use in hospital, medical ¹/₂¹ and
14 dental facilities, and at home, or participate in the cost of blood
15 processing to the extent that such support will facilitate the
16 supplying of blood, blood derivatives ¹/₂¹ and concentrates and other
17 efficacious agents to **【hemophiliac】** patients at an economical cost,
18 thus increasing the effectiveness of the moneys appropriated to
19 carry out the provisions of **【this act】** P.L.1972, c.124 (C.26:2-90 et
20 seq.);
- 21 d. Institute and carry on educational programs among patients,
22 physicians, dentists, hospitals, public health departments, and the
23 public concerning hemophilia, qualitative platelet disorders, and
24 von Willebrand disease, including dissemination of information and
25 the conducting of educational programs concerning the methods of
26 care and treatment of persons suffering from **【this condition】** these
27 conditions; and
- 28 e. Promulgate all rules and regulations necessary to effectuate
29 the purposes of **【this act】** P.L.1972, c.124 (C.26:2-90 et seq.).
30 (cf: P.L.1972, c.124, s.3)

31
32 4. This act shall take effect immediately.
33
34
35

36
37 _____
38 Revises definition of hemophilia and expands hemophilia
treatment program.

SENATE, No. 3100

STATE OF NEW JERSEY 218th LEGISLATURE

INTRODUCED OCTOBER 18, 2018

Sponsored by:
Senator LORETTA WEINBERG
District 37 (Bergen)

SYNOPSIS

Revises definition of hemophilia and expands hemophilia treatment program.

CURRENT VERSION OF TEXT

As introduced.



S3100 WEINBERG

2

1 AN ACT concerning the hemophilia treatment program and
2 amending P.L.1972, c.124.

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.1972, c.124 (C.26:2-90) is amended to read
8 as follows:

9 1. For purposes of **[this act]** P.L.1972, c.124 (C.26:2-90 et
10 seq.):

11 "hemophilia" means a bleeding tendency resulting from a
12 genetically determined **[deficiency factor in the blood]**, hereditarily
13 determined, or acquired factor deficiency in the blood.

14 "Qualitative platelet disorders" means conditions resulting from
15 genetically determined, hereditarily determined, or acquired defects
16 or abnormalities in blood platelet functions or structures.

17 "von Willebrand disease" means a bleeding tendency resulting
18 from a genetically determined, hereditarily determined, or acquired
19 deficiency of the von Willebrand factor in the blood.

20 (cf: P.L.1972, c.124, s.1)

21

22 2. Section 2 of P.L.1972, c.124 (C.26:2-91) is amended to read
23 as follows:

24 2. The State Department of Health hereafter referred to as the
25 department shall establish a program for the care and treatment of
26 persons suffering from hemophilia, qualitative platelet disorders,
27 and von Willebrand disease. This program shall assist persons who
28 require continuing treatment with blood and blood derivatives to
29 avoid crippling, extensive hospitalization and other effects
30 associated with **[this]** these critical chronic bleeding **[condition]**
31 conditions, but who are unable to pay for the entire cost of such
32 services on a continuing basis despite the existence of various
33 types of hospital and medical insurance coverages, **[medicare,**
34 **medicaid,]** Medicare, Medicaid, and other government assistance
35 programs, and private charitable assistance programs.

36 (cf: P.L.1972, c.124, s.2)

37

38 3. Section 3 of P.L.1972, c.124 (C.26:2-92) is amended to read
39 as follows:

40 3. The department shall:

41 a. Develop standards for determining eligibility for care and
42 treatment under this program;

43 b. Assist in the development and expansion of programs for the
44 care and treatment of persons suffering from hemophilia, qualitative
45 platelet disorders, and von Willebrand disease, including self-

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 administration, prevention, and home care and other medical and
2 dental procedures and techniques designed to provide maximum
3 control over bleeding episodes typical of **【this condition】** these
4 conditions;

5 c. Extend financial assistance to persons suffering from
6 hemophilia, qualitative platelet disorders, and von Willebrand
7 disease in obtaining blood, blood derivatives and concentrates, and
8 other efficacious agents for use in hospital, medical and dental
9 facilities, and at home, or participate in the cost of blood processing
10 to the extent that such support will facilitate the supplying of blood,
11 blood derivatives and concentrates and other efficacious agents to
12 **【hemophiliac】** patients at an economical cost, thus increasing the
13 effectiveness of the moneys appropriated to carry out the provisions
14 of **【this act】** P.L.1972, c.124 (C.26:2-90 et seq.);

15 d. Institute and carry on educational programs among patients,
16 physicians, dentists, hospitals, public health departments, and the
17 public concerning hemophilia, qualitative platelet disorders, and
18 von Willebrand disease, including dissemination of information
19 and the conducting of educational programs concerning the
20 methods of care and treatment of persons suffering from **【this**
21 **condition】** these conditions; and

22 e. Promulgate all rules and regulations necessary to effectuate
23 the purposes of **【this act】** P.L.1972, c.124 (C.26:2-90 et seq.).
24 (cf: P.L.1972, c.124, s.3)

25

26 4. This act shall take effect immediately.

27

28

29

STATEMENT

30

31 This bill revises the definition of “hemophilia,” as used in
32 P.L.1972, c.124 (C.26:2-90 et seq.), to reflect the fact that
33 hemophilia can result from hereditarily determined or acquired
34 blood coagulation factor deficiencies. The statute currently states
35 that hemophilia is a bleeding tendency resulting from a genetically
36 determined factor deficiency in the blood. This bill also expands the
37 State’s hemophilia treatment program to assist patients diagnosed
38 with qualitative platelet disorders and von Willebrand disease.
39 Qualitative platelet disorders are conditions arising from defects or
40 abnormalities in blood platelet functions or structures. Von
41 Willebrand disease is a bleeding disorder resulting from a
42 deficiency of the von Willebrand factor in the blood. These two
43 disorders can also be genetically determined, hereditarily
44 determined, or acquired.

ASSEMBLY HEALTH AND SENIOR SERVICES COMMITTEE

STATEMENT TO

[First Reprint]

SENATE, No. 3100

STATE OF NEW JERSEY

DATED: JUNE 6, 2019

The Assembly Health and Senior Services Committee reports favorably Senate Bill No. 3100 (1R).

Senate Bill No. 3100 (1R) revises the definition of “hemophilia,” as used in P.L.1972, c.124 (C.26:2-90 et seq.), to reflect the fact that hemophilia can result from hereditarily determined or acquired blood coagulation factor deficiencies. The statute currently states that hemophilia is a bleeding tendency resulting from a genetically determined factor deficiency in the blood. This bill also expands the State’s hemophilia treatment program to assist patients diagnosed with qualitative platelet disorders and von Willebrand disease. Qualitative platelet disorders are conditions arising from defects or abnormalities in blood platelet functions or structures. Von Willebrand disease is a bleeding disorder resulting from a deficiency of the von Willebrand factor in the blood. These two disorders can also be genetically determined, hereditarily determined, or acquired.

As reported by the committee, Senate Bill No. 3100 (1R) is identical to Assembly Bill No. 5186 which was reported by the committee on this date.

ASSEMBLY BUDGET COMMITTEE

STATEMENT TO

[First Reprint]

SENATE, No. 3100

STATE OF NEW JERSEY

DATED: JUNE 17, 2019

The Assembly Budget Committee reports favorably Senate Bill No. 3100 (1R).

Senate Bill No. 3100 (1R) revises the definition of “hemophilia,” as used in P.L.1972, c.124 (C.26:2-90 et seq.), to reflect the fact that hemophilia can result from hereditarily determined or acquired blood coagulation factor deficiencies. The statute currently states that hemophilia is a bleeding tendency resulting from a genetically determined factor deficiency in the blood. This bill also expands the State’s hemophilia treatment program to assist patients diagnosed with qualitative platelet disorders and von Willebrand disease. Qualitative platelet disorders are conditions arising from defects or abnormalities in blood platelet functions or structures. Von Willebrand disease is a bleeding disorder resulting from a deficiency of the von Willebrand factor in the blood. These two disorders can also be genetically determined, hereditarily determined, or acquired.

As reported, this bill is identical to Assembly Bill No. 5186, as also reported by the committee on this date.

FISCAL IMPACT:

The Office of Legislative Services (OLS) concludes that this bill may result in an indeterminate increase in expenditures incurred by the Department of Health (DOH) due to the expansion of hemophilia treatment program, as provided for under the bill. To the extent that they are not currently covered, the expenses of the existing program will grow with the inclusion of the following chronic bleeding conditions within the program’s scope: qualitative platelet disorders, von Willebrand disease, and hemophilia resulting from a hereditarily determined or acquired factor deficiency in the blood.

The OLS is unable to quantify the impact of this bill due to a lack of: 1) State data regarding the number of New Jersey residents affected by the expanded list of conditions included in the bill who are not currently included under the hemophilia treatment program; and 2) information from the Executive regarding how the amount of grants-in-aid funding which supports the program is determined and distributed.

According to data shared by the DOH, during the Fiscal Year (FY) 2019 Budget process, the department anticipated allocating \$1.245 million in grant-in-aid funding to support the State's hemophilia treatment program in FY 2019.

SENATE BUDGET AND APPROPRIATIONS COMMITTEE

STATEMENT TO

[First Reprint]

SENATE, No. 3100

STATE OF NEW JERSEY

DATED: MARCH 4, 2019

The Senate Budget and Appropriations Committee reports favorably Senate Bill No. 3100 (1R).

Senate Bill No. 3100 (1R) revises the definition of “hemophilia,” as used in P.L.1972, c.124 (C.26:2-90 et seq.), to reflect the fact that hemophilia can result from hereditarily determined or acquired blood coagulation factor deficiencies. The statute currently states that hemophilia is a bleeding tendency resulting from a genetically determined factor deficiency in the blood. This bill also expands the State’s hemophilia treatment program to assist patients diagnosed with qualitative platelet disorders and von Willebrand disease. Qualitative platelet disorders are conditions arising from defects or abnormalities in blood platelet functions or structures. Von Willebrand disease is a bleeding disorder resulting from a deficiency of the von Willebrand factor in the blood. These two disorders can also be genetically determined, hereditarily determined, or acquired.

FISCAL IMPACT:

The Office of Legislative Services (OLS) concludes that this bill may result in an indeterminate increase in expenditures incurred by the Department of Health (DOH) due to the expansion of the hemophilia treatment program, as provided for under the bill. Specifically, the expenses of the existing program will grow with the inclusion of the following chronic bleeding conditions within the program’s scope: qualitative platelet disorders, von Willebrand disease, and hemophilia resulting from a hereditarily determined or acquired factor deficiency in the blood.

The OLS is unable to quantify the impact of this bill due to a lack of: 1) State data regarding the number of New Jersey residents affected by the expanded list of conditions included in the bill; and 2) information from the Executive regarding how the amount of grants-in-aid funding which supports the program is determined and distributed.

According to data shared by the department during the Fiscal Year (FY) 2019 Budget process, the DOH anticipated allocating \$1.245 million in grant-in-aid funding to support the State’s hemophilia treatment program in FY 2019.

SENATE HEALTH, HUMAN SERVICES AND SENIOR
CITIZENS COMMITTEE

STATEMENT TO

SENATE, No. 3100

with committee amendments

STATE OF NEW JERSEY

DATED: JANUARY 17, 2019

The Senate Health, Human Services and Senior Citizens Committee reports favorably and with committee amendments Senate Bill No. 3100.

As amended by the committee, this bill revises the definition of “hemophilia,” as used in P.L.1972, c.124 (C.26:2-90 et seq.), to reflect the fact that hemophilia can result from hereditarily determined or acquired blood coagulation factor deficiencies. The statute currently states that hemophilia is a bleeding tendency resulting from a genetically determined factor deficiency in the blood. This bill also expands the State’s hemophilia treatment program to assist patients diagnosed with qualitative platelet disorders and von Willebrand disease. Qualitative platelet disorders are conditions arising from defects or abnormalities in blood platelet functions or structures. Von Willebrand disease is a bleeding disorder resulting from a deficiency of the von Willebrand factor in the blood. These two disorders can also be genetically determined, hereditarily determined, or acquired.

COMMITTEE AMENDMENTS:

The committee amended the bill to make a number of technical revisions involving capitalization and punctuation.

LEGISLATIVE FISCAL ESTIMATE

[First Reprint]

SENATE, No. 3100

STATE OF NEW JERSEY 218th LEGISLATURE

DATED: MARCH 8, 2019

SUMMARY

- Synopsis:** Revises definition of hemophilia and expands hemophilia treatment program.
- Type of Impact:** Indeterminate Increase in Expenditures, General Fund.
- Agencies Affected:** Department of Health

Office of Legislative Services Estimate

Fiscal Impact	<u>Annual</u>
State Expenditures	Indeterminate.

- The Office of Legislative Services (OLS) concludes that this bill may result in an indeterminate increase in expenditures incurred by the Department of Health (DOH) due to the expansion of the hemophilia treatment program, as provided for under the bill. Specifically, the expenses of the existing program will grow with the inclusion of the following chronic bleeding conditions within the program's scope: qualitative platelet disorders, von Willebrand disease, and hemophilia resulting from a hereditarily determined or acquired factor deficiency in the blood.
- The OLS is unable to quantify the impact of this bill due to a lack of: 1) State data regarding the number of New Jersey residents affected by the expanded list of conditions included in the bill; and 2) information from the Executive regarding how the amount of grants-in-aid funding which supports the program is determined and distributed.
- According to data shared by the department during the Fiscal Year (FY) 2019 Budget process, the DOH anticipated allocating \$1.245 million in grant-in-aid funding to support the State's hemophilia treatment program in FY 2019.

BILL DESCRIPTION

This bill revises the definition of "hemophilia," as used in P.L.1972, c.124 (C.26:2-90 et seq.), to reflect the fact that hemophilia can result from hereditarily determined or acquired blood

coagulation factor deficiencies. The statute currently states that hemophilia is a bleeding tendency resulting from a genetically determined factor deficiency in the blood. This bill also expands the State's hemophilia treatment program to assist patients diagnosed with qualitative platelet disorders and von Willebrand disease. Qualitative platelet disorders are conditions arising from defects or abnormalities in blood platelet functions or structures. Von Willebrand disease is a bleeding disorder resulting from a deficiency of the von Willebrand factor in the blood. These two disorders can also be genetically determined, hereditarily determined, or acquired.

FISCAL ANALYSIS

EXECUTIVE BRANCH

None received.

OFFICE OF LEGISLATIVE SERVICES

The OLS concludes that this bill may result in an indeterminate increase in expenditures incurred by the DOH due to the expansion of the hemophilia treatment program, as provided for under the bill. Specifically, the expenses of the existing program will grow with the inclusion of the following chronic bleeding conditions within the program's scope: qualitative platelet disorders, von Willebrand disease, and hemophilia resulting from a hereditarily determined or acquired factor deficiency in the blood. The OLS is unable to quantify the impact of this bill due to a lack of: 1) State data regarding the number of New Jersey residents affected by the expanded list of conditions included in the bill; and 2) information from the Executive regarding how the amount of grants-in-aid funding which supports the program is determined and distributed. According to data shared by the department during the FY 2019 Budget process, the DOH anticipated allocating \$1.245 million in grant-in-aid funding to support the State's hemophilia treatment program.

Under existing law, the hemophilia treatment program is to assist persons with hemophilia who require certain treatment, but who are unable to pay for the entire cost of such services on a continuing basis despite the existence of medical coverage. Currently, to implement the program, the DOH provides grants to the State's four Hemophilia Treatment Centers (HTCs): Saint Michael's Medical Center and Newark Beth Israel Medical Center in Newark, Robert Wood Johnson Medical School in New Brunswick, and the Children's Hospital of Philadelphia in Voorhees. These centers use this funding to implement certain existing provisions of the hemophilia treatment program, such as the care and treatment for children and adults with hemophilia, and patient, provider, and community education programs regarding hemophilia. It appears that these centers, at least in part, currently provide similar services related to the expanded lists of chronic bleeding conditions included in this bill.

During the FY 2019 Budget process, the department indicated that it anticipated distributing a total of \$787,592 to the four HTCs in New Jersey in FY 2019, which was equal to the amount estimated to be distributed in FY 2018: \$192,409 to Saint Michael's Medical Center; \$175,840 to Newark Beth Israel Medical Center, \$275,673 to Robert Wood Johnson Medical School; and \$143,670 to the Children's Hospital of Philadelphia.

In addition, as part of the hemophilia treatment program, the DOH provides a grant to the Hemophilia Association of New Jersey (HANJ) to partially fund a program that subsidizes the purchase of individual health insurance policies for low-income people with hemophilia. As

implemented, only individuals who do not have access to other health care coverage are eligible for this program. During the FY 2019 Budget process, the department indicated that it anticipated distributing a total of \$457,408 to the HANJ for this program in FY 2019, which was equal to the amount estimated to be distributed in FY 2018.

Without more information regarding the number of New Jersey residents affected by the expanded list of conditions included in the bill and how the department determines the amount of grants-in-aid funding distributed to the HANJ and each HTC, the OLS cannot determine how the provisions of the bill may increase the DOH's expenditures for grants-in-aid funding. Furthermore, the OLS cannot predict how many individuals affected by the expanded list of conditions may qualify for the financial assistance provided under the hemophilia treatment program due to their income.

Section: Human Services

*Analyst: Sarah Schmidt
Senior Research Analyst*

*Approved: Frank W. Haines III
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 (C.52:13B-6 et seq.).

ASSEMBLY, No. 5186

STATE OF NEW JERSEY 218th LEGISLATURE

INTRODUCED MARCH 11, 2019

Sponsored by:

Assemblyman DANIEL R. BENSON

District 14 (Mercer and Middlesex)

Assemblywoman VALERIE VAINIERI HUTTLE

District 37 (Bergen)

Assemblyman RAJ MUKHERJI

District 33 (Hudson)

Co-Sponsored by:

Assemblywomen Timberlake and McKnight

SYNOPSIS

Revises definition of hemophilia and expands hemophilia treatment program.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 6/28/2019)

1 AN ACT concerning the hemophilia treatment program and
2 amending P.L.1972, c.124.

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.1972, c.124 (C.26:2-90) is amended to read
8 as follows:

9 1. For purposes of **[this act]** P.L.1972, c.124 (C.26:2-90 et
10 seq.):

11 **["hemophilia"]** "Hemophilia" means a bleeding tendency
12 resulting from a genetically determined **[deficiency factor in the**
13 **blood]**, hereditarily determined, or acquired factor deficiency in the
14 blood.

15 "Qualitative platelet disorders" means conditions resulting from
16 genetically determined, hereditarily determined, or acquired defects
17 or abnormalities in blood platelet functions or structures.

18 "Von Willebrand disease" means a bleeding tendency resulting
19 from a genetically determined, hereditarily determined, or acquired
20 deficiency of the von Willebrand factor in the blood.

21 (cf: P.L.1972, c.124, s.1)

22

23 2. Section 2 of P.L.1972, c.124 (C.26:2-91) is amended to read
24 as follows:

25 2. The State Department of Health hereafter referred to as the
26 department shall establish a program for the care and treatment of
27 persons suffering from hemophilia, qualitative platelet disorders,
28 and von Willebrand disease. This program shall assist persons who
29 require continuing treatment with blood and blood derivatives to
30 avoid crippling, extensive hospitalization and other effects
31 associated with **[this]** these critical chronic bleeding **[condition]**
32 conditions, but who are unable to pay for the entire cost of such
33 services on a continuing basis despite the existence of various types
34 of hospital and medical insurance coverages, **[medicare, medicaid,]**
35 Medicare, Medicaid, and other government assistance programs,
36 and private charitable assistance programs.

37 (cf: P.L.1972, c.124, s.2)

38

39 3. Section 3 of P.L.1972, c.124 (C.26:2-92) is amended to read
40 as follows:

41 3. The department shall:

42 a. Develop standards for determining eligibility for care and
43 treatment under this program;

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 b. Assist in the development and expansion of programs for the
2 care and treatment of persons suffering from hemophilia, qualitative
3 platelet disorders, and von Willebrand disease, including self-
4 administration, prevention, and home care and other medical and
5 dental procedures and techniques designed to provide maximum
6 control over bleeding episodes typical of **【this condition】** these
7 conditions;

8 c. Extend financial assistance to persons suffering from
9 hemophilia, qualitative platelet disorders, and von Willebrand
10 disease in obtaining blood, blood derivatives, and concentrates, and
11 other efficacious agents for use in hospital, medical, and dental
12 facilities, and at home, or participate in the cost of blood processing
13 to the extent that such support will facilitate the supplying of blood,
14 blood derivatives, and concentrates and other efficacious agents to
15 **【hemophiliac】** patients at an economical cost, thus increasing the
16 effectiveness of the moneys appropriated to carry out the provisions
17 of **【this act】** P.L.1972, c.124 (C.26:2-90 et seq.);

18 d. Institute and carry on educational programs among patients,
19 physicians, dentists, hospitals, public health departments, and the
20 public concerning hemophilia, qualitative platelet disorders, and
21 von Willebrand disease, including dissemination of information and
22 the conducting of educational programs concerning the methods of
23 care and treatment of persons suffering from **【this condition】** these
24 conditions; and

25 e. Promulgate all rules and regulations necessary to effectuate
26 the purposes of **【this act】** P.L.1972, c.124 (C.26:2-90 et seq.).
27 (cf: P.L.1972, c.124, s.3)

28
29 4. This act shall take effect immediately.

30
31
32 STATEMENT

33
34 This bill revises the definition of “hemophilia,” as used in
35 P.L.1972, c.124 (C.26:2-90 et seq.), to reflect the fact that
36 hemophilia can result from hereditarily determined or acquired
37 blood coagulation factor deficiencies. The statute currently states
38 that hemophilia is a bleeding tendency resulting from a genetically
39 determined factor deficiency in the blood. This bill also expands
40 the State’s hemophilia treatment program to assist patients
41 diagnosed with qualitative platelet disorders and von Willebrand
42 disease. Qualitative platelet disorders are conditions arising from
43 defects or abnormalities in blood platelet functions or structures.
44 Von Willebrand disease is a bleeding disorder resulting from a
45 deficiency of the von Willebrand factor in the blood. These two
46 disorders can also be genetically determined, hereditarily
47 determined, or acquired.

ASSEMBLY HEALTH AND SENIOR SERVICES COMMITTEE

STATEMENT TO

ASSEMBLY, No. 5186

STATE OF NEW JERSEY

DATED: JUNE 6, 2019

The Assembly Health and Senior Services Committee reports favorably Assembly Bill No. 5186.

This bill revises the definition of “hemophilia,” as used in P.L.1972, c.124 (C.26:2-90 et seq.), to reflect the fact that hemophilia can result from hereditarily determined or acquired blood coagulation factor deficiencies. The statute currently states that hemophilia is a bleeding tendency resulting from a genetically determined factor deficiency in the blood. This bill also expands the State’s hemophilia treatment program to assist patients diagnosed with qualitative platelet disorders and von Willebrand disease. Qualitative platelet disorders are conditions arising from defects or abnormalities in blood platelet functions or structures. Von Willebrand disease is a bleeding disorder resulting from a deficiency of the von Willebrand factor in the blood. These two disorders can also be genetically determined, hereditarily determined, or acquired.

As reported by the committee, Assembly Bill No. 5186 is identical to Senate Bill No. 3100 (1R) which was reported by the committee on this date.

ASSEMBLY BUDGET COMMITTEE

STATEMENT TO

ASSEMBLY, No. 5186

STATE OF NEW JERSEY

DATED: JUNE 17, 2019

The Assembly Budget Committee reports favorably Assembly Bill No. 5186.

Assembly Bill No. 5186 revises the definition of “hemophilia,” as used in P.L.1972, c.124 (C.26:2-90 et seq.), to reflect the fact that hemophilia can result from hereditarily determined or acquired blood coagulation factor deficiencies. The statute currently states that hemophilia is a bleeding tendency resulting from a genetically determined factor deficiency in the blood. This bill also expands the State’s hemophilia treatment program to assist patients diagnosed with qualitative platelet disorders and von Willebrand disease. Qualitative platelet disorders are conditions arising from defects or abnormalities in blood platelet functions or structures. Von Willebrand disease is a bleeding disorder resulting from a deficiency of the von Willebrand factor in the blood. These two disorders can also be genetically determined, hereditarily determined, or acquired.

As reported, this bill is identical to Senate Bill No. 3100 (1R), as also reported by the committee on this date.

FISCAL IMPACT:

The Office of Legislative Services (OLS) concludes that this bill may result in an indeterminate increase in expenditures incurred by the Department of Health (DOH) due to the expansion of hemophilia treatment program, as provided for under the bill. To the extent that they are not currently covered, the expenses of the existing program will grow with the inclusion of the following chronic bleeding conditions within the program’s scope: qualitative platelet disorders, von Willebrand disease, and hemophilia resulting from a hereditarily determined or acquired factor deficiency in the blood.

The OLS is unable to quantify the impact of this bill due to a lack of: 1) State data regarding the number of New Jersey residents affected by the expanded list of conditions included in the bill who are not currently included under the hemophilia treatment program; and 2) information from the Executive regarding how the amount of grants-in-aid funding which supports the program is determined and distributed.

According to data shared by the DOH, during the Fiscal Year (FY) 2019 Budget process, the department anticipated allocating \$1.245 million in grant-in-aid funding to support the State’s hemophilia treatment program in FY 2019.

LEGISLATIVE FISCAL ESTIMATE
ASSEMBLY, No. 5186
STATE OF NEW JERSEY
218th LEGISLATURE

DATED: JUNE 18, 2019

SUMMARY

Synopsis: Revises definition of hemophilia and expands hemophilia treatment program.

Type of Impact: Indeterminate Increase in Expenditures, General Fund.

Agencies Affected: Department of Health

Office of Legislative Services Estimate

Fiscal Impact	<u>Annual</u>
State Expenditures	Indeterminate.

- The Office of Legislative Services (OLS) concludes that this bill may result in an indeterminate increase in expenditures incurred by the Department of Health (DOH) due to the expansion of the hemophilia treatment program, as provided for under the bill. Specifically, to the extent that they are not currently covered, the expenses of the existing program will grow with the inclusion of the following chronic bleeding conditions within the program’s scope: qualitative platelet disorders, von Willebrand disease, and hemophilia resulting from a hereditarily determined or acquired factor deficiency in the blood.
- The OLS is unable to quantify the impact of this bill due to a lack of: 1) State data regarding the number of New Jersey residents affected by the expanded list of conditions included in the bill who are not currently included under the hemophilia treatment program; and 2) information from the Executive regarding how the amount of grants-in-aid funding which supports the program is determined and distributed.
- According to data shared by the department during the Fiscal Year (FY) 2019 Budget process, the DOH anticipated allocating \$1.245 million in grant-in-aid funding to support the State’s hemophilia treatment program in FY 2019.

BILL DESCRIPTION

This bill revises the definition of “hemophilia,” as used in P.L.1972, c.124 (C.26:2-90 et seq.), to reflect the fact that hemophilia can result from hereditarily determined or acquired blood coagulation factor deficiencies. The statute currently states that hemophilia is a bleeding tendency resulting from a genetically determined factor deficiency in the blood. This bill also expands the State’s hemophilia treatment program to assist patients diagnosed with qualitative platelet disorders and von Willebrand disease. Qualitative platelet disorders are conditions arising from defects or abnormalities in blood platelet functions or structures. Von Willebrand disease is a bleeding disorder resulting from a deficiency of the von Willebrand factor in the blood. These two disorders can also be genetically determined, hereditarily determined, or acquired.

FISCAL ANALYSIS

EXECUTIVE BRANCH

None received.

OFFICE OF LEGISLATIVE SERVICES

The OLS concludes that this bill may result in an indeterminate increase in expenditures incurred by the DOH due to the expansion of the hemophilia treatment program, as provided for under the bill. Specifically, to the extent that they are not currently covered, the expenses of the existing program will grow with the inclusion of the following chronic bleeding conditions within the program’s scope: qualitative platelet disorders, von Willebrand disease, and hemophilia resulting from a hereditarily determined or acquired factor deficiency in the blood. The OLS is unable to quantify the impact of this bill due to a lack of: 1) State data regarding the number of New Jersey residents affected by the expanded list of conditions included in the bill who are not currently included under the hemophilia treatment program; and 2) information from the Executive regarding how the amount of grants-in-aid funding which supports the program is determined and distributed. According to data shared by the department during the FY 2019 Budget process, the DOH anticipated allocating \$1.245 million in grant-in-aid funding to support the State’s hemophilia treatment program.

Under existing law, the hemophilia treatment program is to assist persons with hemophilia who require certain treatment, but who are unable to pay for the entire cost of such services on a continuing basis despite the existence of medical coverage. Currently, to implement the program, the DOH provides grants to the State’s four Hemophilia Treatment Centers (HTCs): Saint Michael’s Medical Center and Newark Beth Israel Medical Center in Newark, Robert Wood Johnson Medical School in New Brunswick, and the Children’s Hospital of Philadelphia in Voorhees. These centers use this funding to implement certain existing provisions of the hemophilia treatment program, such as the care and treatment for children and adults with hemophilia, and patient, provider, and community education programs regarding hemophilia. It appears that these centers, at least in part, currently provide similar services related to the expanded lists of chronic bleeding conditions included in this bill.

During the FY 2019 Budget process, the department indicated that it anticipated distributing a total of \$787,592 to the four HTCs in New Jersey in FY 2019, which was equal to the amount estimated to be distributed in FY 2018: \$192,409 to Saint Michael’s Medical Center; \$175,840

to Newark Beth Israel Medical Center, \$275,673 to Robert Wood Johnson Medical School; and \$143,670 to the Children's Hospital of Philadelphia.

In addition, as part of the hemophilia treatment program, the DOH provides a grant to the Hemophilia Association of New Jersey (HANJ) to partially fund a program that subsidizes the purchase of individual health insurance policies for low-income people with hemophilia. As implemented, only individuals who do not have access to other health care coverage and who are diagnosed with Hemophilia A, Hemophilia B, or von Willebrand disease are eligible for this program. During the FY 2019 Budget process, the department indicated that it anticipated distributing a total of \$457,408 to the HANJ for this program in FY 2019, which was equal to the amount estimated to be distributed in FY 2018.

Without more information regarding the number of New Jersey residents affected by the expanded list of conditions included in the bill who are not currently included under the hemophilia treatment program and how the department determines the amount of grants-in-aid funding distributed to the HANJ and each HTC, the OLS cannot determine how the provisions of the bill may increase the DOH's expenditures for grants-in-aid funding. Furthermore, the OLS cannot predict how many individuals affected by the expanded list of conditions may qualify for the financial assistance provided under the hemophilia treatment program due to their income and other eligibility criteria, such as access to health care coverage. The OLS notes that during the Assembly Health and Senior Services Committee meeting on June 6, 2019, the sponsor noted that the provisions of the bill would extend the benefits of the hemophilia treatment program to less than a dozen individuals; however, the OLS cannot confirm this information.

Section: Human Services

*Analyst: Sarah Schmidt
Senior Research Analyst*

*Approved: Frank W. Haines III
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 (C.52:13B-6 et seq.).

Governor Murphy Takes Action on Legislation

08/23/2019

Governor Murphy Takes Action on Legislation

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

A3118 (Burzichelli, Schepisi, Jasey/Bucco, Thompson) - Establishes licensure for master hearth specialists.

A4420 (Holley/Scutari) - Modifies certain fees charged by check casher licensees.

A4482 (Verrelli, Murphy, Downey/Greenstein) - Establishes "Task Force on the Prevention of Sexual Violence Against Persons with Developmental Disabilities" in DHS.

A5293 (Pinkin, Zwicker, Lopez, McKeon/Smith, Bateman, Greenstein) - Makes various changes to laws governing remediation of contaminated sites.

A5390 (Tucker, Mukherji, Timberlake/Gopal, Oroho) - Provides in-State tuition at public institutions of higher education to individuals living in NJ who are entitled to educational assistance under US Department of Veterans Affairs' Vocational Rehabilitations and Employment Program.

S499 (Vitale, Madden/Downey, Houghtaling, Zwicker) - Provides for improved system for eligibility determination for Medicaid and NJ FamilyCare.

[Copy of Statement on S499](#)

S785 (Sarlo, Lagana/Calabrese, Mukherji) - Requires Police Training Commission to develop supplemental training course for certain county corrections officers.

S1014 (Rice/Wimberly, Mukherji) - Changes composition of State Employment and Training Commission.

S1126 (Bucco, Doherty, Bucco/Coughlin, Webber) - Requires public school districts to provide instruction on "New Jersey Safe Haven Infant Protection Act" as part of New Jersey Student Learning Standards.

S1403 (Diegnan, Singleton/DeAngelo, Mazzeo, Sumter) - Permits service credit transferred from another State-administered retirement system to apply toward creditable service requirement for retirement in SPRS.

S1887 (Singleton, Greenstein/DeAngelo, Wirths, Space) - Directs Commissioner of Labor and Workforce Development to establish pilot program to assist certain unemployed and underemployed individuals to complete industry-valued Credentials in 12 months.

S1948 (Vitale/Quijano, Holley, Lopez) - Makes Supplemental Nutrition Assistance Program Employment and Training Provider Demonstration Project permanent and renames program.

S2507 (Singleton, Pou/Danielsen, DeCroce) - Prohibits sale or lease of access to certain dental provider network contracts.

S2538 (Singleton, Pennacchio/Kean, Murphy, DeCroce, Armato) - Makes New Jersey National Guard members with NGB-22 form eligible for certain veterans' benefits.

S2660 (Gopal, Sarlo/Downey, Houghtaling, Schaer) - Establishes grant program and tuition reimbursement program for certain teachers of science, technology, engineering, and mathematics; appropriates \$5 million to DOE.

[Copy of Statement on S2660](#)

S2690 (Ruiz, Cryan, Beach, Turner, Andrzejczak/McKeon, Dancer, Land) - Prohibits pharmacy benefits managers and carriers from engaging in "clawback" and "gag clause" practices; requires certain disclosures by pharmacists; requires Director of Division of Consumer Affairs to conduct public information campaign.

S2691 (Kean, Cunningham/Quijano, Vainieri Huttle, Reynolds-Jackson) - Makes supplemental appropriation of \$100,000 to Commission on Human Trafficking.

[Copy of Statement on S2691](#)

S3100 (Weinberg, Addiego/Benson, Vainieri Huttle, Mukherji) - Revises definition of hemophilia and expands hemophilia treatment program.

SJR73 (Singleton/Murphy, Verrelli, Dancer) - Urges U.S. Congress to pass "Military Hunger Prevention Act."

Governor Murphy conditionally vetoed the following bills:

A3717 (Mukherji, Downey, Houghtaling/Greenstein, Gopal) - Prohibits pharmacy benefits managers from making certain retroactive reductions in claims payments to pharmacies; requires pharmacy benefits managers to disclose certain product information to pharmacies.

[Copy of Statement on A3717](#)

A5363 (Burzichelli, Benson, Murphy/Gopal) - Requires carriers that offer health benefits plans to provide new or existing subscribers with notification of certain hospital and health system contract expirations.

[Copy of Statement on A5363](#)

S834 (Scutari, Greenstein/Jones, Pintor Marin) - Prohibits resale of non-prescription diabetes test devices by pharmacists.

[Copy of Statement on S834](#)

S2804 (Ruiz, Turner/Lopez, McKnight, Verrelli) - Requires young children entering public schools or Head Start Programs for first time to have comprehensive eye examination completed.

[Copy of Statement on S2804](#)

S3075 (Weinberg, Ruiz/Lampitt, Mukherji, Vainieri Huttle) - Requires DOH to regulate and license embryo storage facilities.

[Copy of Statement on S3075](#)

S3309 (Vitale, Greenstein/Greenwald, Pintor Marin, Reynolds-Jackson) - Establishes New Jersey Violence Intervention Program to fund violence reduction initiatives.

[Copy of Statement on S3309](#)

S3330 (Addiego, Singleton/Jones, Vainieri Huttle, Lampitt, Murphy) - Establishes pilot program in DCF to study impact of child care services provided by community providers operating in public school facilities; requires community providers to meet certain criteria.

[Copy of Statement on S3330](#)

S3661 (Singleton, Oroho/Jasey, Wirths, Webber) - Clarifies assessment payment and election participation requirements in planned real estate developments.

[Copy of Statement on S3661](#)

Governor Murphy absolute vetoed the following bills and resolutions:

A4135 (Land, Taliaferro/Sweeney, Andrzejczak) - Concerns use of digital parking meters to monitor parking compliance; establishes fund to encourage designated drivers.

[Copy of Statement on A4135](#)

AJR158 (Houghtaling, Downey, Mosquera/Gopal) - Establishes New Jersey Task Force on Medicaid Financial

Resource Limits.

[Copy of Statement on AJR158](#)

S1364 (Andrzejczak/Land, Milam) - Provides funding from the General Fund to the Greater Wildwoods Tourism Improvement and Development Authority; appropriates \$4 million.

[Copy of Statement on S1364](#)