55:13B-5.1 & 55:13B-5.2 et al LEGISLATIVE HISTORY CHECKLIST

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LAWS OF: 2015 **CHAPTER:** 125

NJSA: 55:13B-5.1 & 55:13B-5.2 et al (Provides for licensure of dementia care homes by DOH.)

BILL NO: A1102 (Substituted for S1145 (1R))

SPONSOR(S) Vainieri Huttle, Valerie, and others

DATE INTRODUCED: January 16, 2014

COMMITTEE: ASSEMBLY: Health and Senior Services

SENATE: Health, Human Services and Senior Citizens

Budget & Appropriations

AMENDED DURING PASSAGE: No

DATE OF PASSAGE: ASSEMBLY: 12/15/2014

SENATE: 6/29/2015

DATE OF APPROVAL: November 9, 2015

FOLLOWING ARE ATTACHED IF AVAILABLE:

FINAL TEXT OF BILL (Introduced bill enacted)
Yes

A1102

INTRODUCED BILL: (Includes sponsor(s) statement) Yes

COMMITTEE STATEMENT: ASSEMBLY: Yes Health and Senior

Services

SENATE: Yes Health, Human Services

and Senior

Citizens

Budget & Appropriations

(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

S1145 (1R)

INTRODUCED BILL: (Includes sponsor(s) statement) Yes

COMMITTEE STATEMENT: ASSEMBLY: No

SENATE: Yes Health, Human Services and Senior

Citizens

Budget & Appropriations

(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

end

§§15&16 -C.55:13B-5.1 & 55:13B-5.2 Title 26. Chapter 2H. Part IX (New) "Dementia Care Homes" §§17-26 -C.26:2H-148 to 26:2H-157 §27 - Note

P.L.2015, CHAPTER 125, approved November 9, 2015 Assembly, No. 1102

1 AN ACT providing for the licensure of dementia care homes by the 2 Department of Health and amending and supplementing various 3 parts of the statutory law.

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

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- 1. Section 2 of P.L.1971, c.136 (C.26:2H-2) is amended to read as follows:
- 2. The following words or phrases, as used in this act, shall have the following meanings, unless the context otherwise requires:
- "Health care facility" means the facility or institution whether public or private, engaged principally in providing services for health maintenance organizations, diagnosis, or treatment of human disease, pain, injury, deformity, or physical condition, including, but not limited to, a general hospital, special hospital, mental hospital, public health center, diagnostic center, treatment center, rehabilitation center, extended care facility, skilled nursing home, nursing home, intermediate care facility, tuberculosis hospital, chronic disease hospital, maternity hospital, outpatient clinic, dispensary, home health care agency, residential health care facility, dementia care home, and bioanalytical laboratory (except as specifically excluded hereunder) or central services facility serving one or more such institutions but excluding institutions that provide healing solely by prayer and excluding such bioanalytical laboratories as are independently owned and operated, and are not owned, operated, managed, or controlled, in whole or in part, directly or indirectly by any one or more health care facilities, and the predominant source of business of which is not by contract with health care facilities within the State of New Jersey and which

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.

solicit or accept specimens and operate predominantly in interstate commerce.

- 3 "Health care service" means the preadmission, outpatient, 4 inpatient, and postdischarge care provided in or by a health care 5 facility, and such other items or services as are necessary for such care, which are provided by or under the supervision of a physician 6 7 for the purpose of health maintenance organizations, diagnosis, or 8 treatment of human disease, pain, injury, disability, deformity, or 9 physical condition, including, but not limited to, nursing service, 10 home care nursing, and other paramedical service, ambulance 11 service, service provided by an intern, resident in training or 12 physician whose compensation is provided through agreement with a health care facility, laboratory service, medical social service, 13 14 drugs, biologicals, supplies, appliances, equipment, bed and board, 15 but excluding services provided by a physician in his private 16 practice, except as provided in sections 7 and 12 of P.L.1971, c.136 17 (C.26:2H-7 and 26:2H-12), or by practitioners of healing solely by 18 prayer, and services provided by first aid, rescue and ambulance 19 squads as defined in the ["New Jersey Highway Safety Act of 20 1971," P.L.1971, c.351 (C.27:5F-1 et seq.) **1** "New Jersey Highway 21 Traffic Safety Act of 1987," P.L.1987, c.284 (C.27:5F-18 et seq.).
 - c. "Construction" means the erection, building, or substantial acquisition, alteration, reconstruction, improvement, renovation, extension, or modification of a health care facility, including its equipment, the inspection and supervision thereof; and the studies, surveys, designs, plans, working drawings, specifications, procedures, and other actions necessary thereto.
 - d. "Board" means the Health Care Administration Board established pursuant to this act.
 - e. (Deleted by amendment, P.L.1998, c.43).

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- f. "Government agency" means a department, board, bureau, division, office, agency, public benefit, or other corporation, or any other unit, however described, of the State or political subdivision thereof.
 - g. (Deleted by amendment, P.L.1991, c.187).
- 36 h. (Deleted by amendment, P.L.1991, c.187).
- i. "Department" means the Department of Health.
 - j. "Commissioner" means the Commissioner of Health.
 - k. "Preliminary cost base" means that proportion of a hospital's current cost which may reasonably be required to be reimbursed to a properly utilized hospital for the efficient and effective delivery of appropriate and necessary health care services of high quality required by such hospital's mix of patients. The preliminary cost base initially may include costs identified by the commissioner and approved or adjusted by the commission as being in excess of that proportion of a hospital's current costs identified above, which excess costs shall be eliminated in a timely and reasonable manner prior to certification of the revenue base. The preliminary cost base

shall be established in accordance with regulations proposed by the commissioner and approved by the board.

1. (Deleted by amendment, P.L.1992, c.160).

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- 4 m. "Provider of health care" means an individual (1) who is a 5 direct provider of health care service in that the individual's primary activity is the provision of health care services to individuals or the 6 7 administration of health care facilities in which such care is 8 provided and, when required by State law, the individual has 9 received professional training in the provision of such services or in 10 such administration and is licensed or certified for such provision or 11 administration; or (2) who is an indirect provider of health care in 12 that the individual (a) holds a fiduciary position with, or has a 13 fiduciary interest in, any entity described in subparagraph b(ii) or 14 subparagraph b(iv); provided, however, that a member of the 15 governing body of a county or any elected official shall not be 16 deemed to be a provider of health care unless he is a member of the 17 board of trustees of a health care facility or a member of a board, 18 committee or body with authority similar to that of a board of 19 trustees, or unless he participates in the direct administration of a 20 health care facility; or (b) received, either directly or through his spouse, more than one-tenth of his gross annual income for any one 21 22 or more of the following:
 - (i) Fees or other compensation for research into or instruction in the provision of health care services;
 - (ii) Entities engaged in the provision of health care services or in research or instruction in the provision of health care services;
 - (iii) Producing or supplying drugs or other articles for individuals or entities for use in the provision of or in research into or instruction in the provision of health care services;
 - (iv) Entities engaged in producing drugs or such other articles.
 - n. "Private long-term health care facility" means a nursing home, skilled nursing home, or intermediate care facility presently in operation and licensed as such prior to the adoption of the 1967 Life Safety Code by the Department of Health in 1972 and which has a maximum 50-bed capacity and which does not accommodate Medicare or Medicaid patients.
 - o. (Deleted by amendment, P.L.1998, c.43).
 - p. "State Health Planning Board" means the board established pursuant to section 33 of P.L.1991, c.187 (C.26:2H-5.7) to conduct certificate of need review activities.
- 41 (cf: P.L.2012, c.17, s.153)
- 43 2. Section 19 of P.L.1992, c.160 (C.26:2H-7a) is amended to 44 read as follows:
- 19. Notwithstanding the provisions of section 7 of P.L.1971, c.136 (C.26:2H-7) to the contrary, the following are exempt from the certificate of need requirement:
 - Community-based primary care centers;

- 1 Outpatient drug and alcohol services;
- 2 Hospital-based medical detoxification for drugs and alcohol;
- 3 Ambulance and invalid coach services;
- 4 Mental health services which are non-bed related outpatient
- 5 services;
- 6 Residential health care facility services;
- 7 Dementia care homes;
- 8 Capital improvements and renovations to health care facilities;
- 9 Additions of medical/surgical, adult intensive care and adult
- 10 critical care beds in hospitals;
- 11 Replacement of existing major moveable equipment;
- 12 Inpatient operating rooms;
- 13 Alternate family care programs;
- 14 Hospital-based subacute care;
- 15 Ambulatory care facilities;
- 16 Comprehensive outpatient rehabilitation services;
- 17 Special child health clinics;
- New technology in accordance with the provisions of section 18
- 19 of P.L.1998, c.43 (C.26:2H-7d);
- Transfer of ownership interest except in the case of an acute care
- 21 hospital;
- 22 Change of site for approved certificate of need within the same
- 23 county
- Additions to vehicles or hours of operation of a mobile intensive
- 25 care unit
- Relocation or replacement of a health care facility within the
- same county, except for an acute care hospital;
- 28 Continuing care retirement communities authorized pursuant to
- 29 P.L.1986, c.103 (C.52:27D-330 et seq.);
- 30 Magnetic resonance imaging;
- 31 Adult day health care facilities;
- 32 Pediatric day health care facilities;
- 33 Chronic or acute renal dialysis facilities; and
- 34 Transfer of ownership of a hospital to an authority in accordance
- 35 with P.L.2006, c.46 (C.30:9-23.15 et al.).
- 36 (cf: P.L.2006, c.46, s.10)

- 38 3. Section 1 of P.L.2007, c.65 (C.26:2H-12.33) is amended to read as follows:
- 1. a. The Department of Health shall make available to the
- 41 public, through its official department website, information
- 42 regarding:
- 43 (1) the ownership of each long-term care facility and adult day
- 44 health services facility licensed by the department; and
- 45 (2) any violation of statutory standards or rules and regulations
- of the department pertaining to the care of patients or physical plant
- standards found at any such facility by the department.

As used in this section, "long-term care facility" means a nursing home, assisted living residence, comprehensive personal care home, residential health care facility, or dementia care home licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.).

- b. The information made available to the public pursuant to subsection a. of this section shall be provided in a manner that would enable a member of the public to search the website by name of a facility or its owner in order to access the information. The department shall also make the information available in writing, upon request.
- The information regarding the ownership of a long-term care 11 12 or adult day health services facility that is made available to the 13 public pursuant to subsection a. of this section shall provide, at a 14 minimum: the name of the owner of a facility as listed on the 15 facility's license and, if there is more than one owner or the facility is owned by a corporation, the name of each person who holds at 16 17 least a 10[%] percent interest in the facility; the name of any other 18 licensed long-term care or adult day health services facility in the 19 State owned by this owner, corporation, and each person who holds 20 at least a 10[%] percent interest in the facility, as applicable; and 21 the address and contact information for the facility.
 - d. The information that is displayed on the official department website pursuant to subsection a. of this section shall include Internet web links to the New Jersey Report Card for Nursing Homes maintained by the department and the Medicare Nursing Home Compare database maintained by the federal Centers for Medicare & Medicaid Services.

(cf: P.L.2012, c.17, s.197)

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- 30 4. Section 2 of P.L.1984, c.114 (C.26:2H-14.2) is amended to read as follows:
- 32 2. a. Every nursing home as defined in section 2 of P.L.1976, 33 c. 120 (C. 30:13-2) or licensed pursuant to P.L.1971, c. 136 (C. 34 26:2H-1 et seq.), [and] every residential health care facility as defined in section 1 of P.L.1953, c. 212 (C. 30:11A-1) or licensed 35 36 pursuant to P.L.1971, c. 136 (C. 26:2H-1 et seq.), and every 37 dementia care home as defined in section 17 of P.L., c. (C.) 38 (pending before the Legislature as this bill) shall establish by 39 written policy a heat emergency action plan which shall include 40 those procedures to be followed in the event of a heat emergency in 41 order to protect the health and welfare of its residents, and which 42 shall be approved by the department. The department shall review 43 a heat emergency action plan established pursuant to this act at 44 least once in each year.
 - b. A health care facility included within the provisions of this act shall be required to notify the department immediately in the event of a heat emergency.
- 48 (cf: P.L.1984, c.114, s.2)

5. Section 3 of P.L.1984, c.114 (C.26:2H-14.3) is amended to read as follows:

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- 3. The Commissioner of Health shall, pursuant to the provisions of the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), adopt rules and regulations necessary to effectuate the purposes of this act. The regulations shall require that:
- a. Each health care facility included within the provisions of this act and which is not equipped with air conditioning on the effective date of P.L.1989, c.173 (C.26:2H-14.4 et al.), shall provide for and operate adequate ventilation in all areas used by patients or residents, including, but not limited to, the use of ceiling fans, wall fans or portable fans, where appropriate, so that the temperature in these areas does not exceed 82 degrees Fahrenheit, but the health care facility shall not directly assess patients or residents for the purchase or installation of the fans or other ventilating equipment.
- 18 (1) The regulations shall also provide that within two years after 19 the effective date of P.L.1989, c.173 (C.26:2H-14.4 et al.), every 20 nursing home included within the provisions of this act, and every residential health care facility as specified in this paragraph, shall 21 22 be equipped with air conditioning, except that the commissioner 23 may grant a nursing home or residential health care facility a waiver 24 from the air conditioning requirement to give the nursing home or 25 residential health care facility one additional year to comply with 26 the air conditioning requirement, for which waiver the nursing 27 home or residential health care facility shall apply on a form and in a manner prescribed by the commissioner, if the nursing home or 28 29 residential health care facility can demonstrate to the satisfaction of 30 the commissioner that the failure to grant such a waiver would pose a serious financial hardship to the nursing home or residential 31 32 health care facility. The air conditioning shall be operated so that 33 the temperature in all areas used by patients or residents does not 34 exceed 82 degrees Fahrenheit. The air conditioning requirement 35 established in this subsection shall apply to a residential health care 36 facility only: (1) upon enactment into law of legislation that 37 increases the rate of reimbursement provided by the State under the 38 Supplemental Security Income program, P.L.1973, c.256 (C.44:7-39 85 et seq.), which rate is certified by the Commissioner of Health to 40 be sufficient to enable the facility to meet the costs of complying 41 with the requirement; and (2) if the facility qualifies for funds for 42 energy efficiency rehabilitation through the "Petroleum Overcharge 43 Reimbursement Fund," established pursuant to P.L.1987, c.231 44 (C.52:18A-209 et seq.), which funds can be applied towards 45 equipping the facility with air conditioning. A nursing home or 46 residential health care facility shall not directly assess patients or 47 residents for the purchase or installation of the air conditioning 48 equipment.

- (2) The regulations shall also provide that within two years after the effective date of P.L. , c. (C.) (pending before the Legislature as this bill), every dementia care home shall be equipped with air conditioning, except that the commissioner may grant a dementia care home a waiver from the air conditioning requirement to give the dementia care home one additional year to comply with the air conditioning requirement, for which waiver the dementia care home shall apply on a form and in a manner prescribed by the commissioner, if the dementia care home can demonstrate to the satisfaction of the commissioner that the failure to grant such a waiver would pose a serious financial hardship to that facility. The air conditioning shall be operated so that the temperature in all areas used by residents does not exceed 82 degrees Fahrenheit. A dementia care home shall not directly assess residents for the purchase or installation of the air conditioning equipment; and
 - b. Patients or residents are identified by predisposition, due to illness, medication or otherwise, to heat-related illness and that during a heat emergency, their body temperature, dehydration status and other symptoms of heat-related illness are monitored frequently and regularly, any anomalies are promptly reported to the attending physician, and any necessary therapeutic or palliative measures are instituted, including the provision of liquids, where required.

(cf: P.L.1989, c.173, s.1)

- 6. Section 2 of P.L.1989, c.173 (C.26:2H-14.4) is amended to read as follows:
- 2. A nursing home or residential health care facility included within the provisions of P.L.1984, c.114 (C.26:2H-14.1 et seq.) which is constructed or expanded after the effective date of P.L.1989, c.173 (C.26:2H-14.4 et al.), or a dementia care home included within the provisions of P.L.1984, c.114 (C.26:2H-14.1 et seq.) which is constructed or expanded after the effective date of P.L., c. (C.) (pending before the Legislature as this bill), shall be equipped with air conditioning in all areas used by patients or residents, and the air conditioning shall be operated so that the temperature in these areas does not exceed 82 degrees Fahrenheit. (cf: P.L.1989, c.173, s.2)

- 40 7. Section 2 of P.L.1977, c.238 (C.26:2H-37) is amended to 41 read as follows:
- 42 2. As used in this act, and unless the context otherwise 43 requires:
- a. "Boarding or nursing home" or "home" means: a private nursing home or convalescent home regulated under chapter 11 of Title 30 of the Revised Statutes [or]; a facility or institution, private or public, regulated and licensed as an extended care facility, skilled nursing home, nursing home, or intermediate care

- 1 facility pursuant to P.L.1971, c. 136 (C. 26:2H-1 to 26:2H-26) [or];
- 2 a residential health care facility, as defined in section 1 of P.L.1953,
- 3 c. 212 (C. 30:11A-1) or licensed pursuant to P.L.1971, c. 136 (C.
- 26:2H-1 to 26:2H-26); or a dementia care home as defined in 4
- 5 section 17 of P.L., c. (C.) (pending before the Legislature as
- 6 this bill).

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- 7 b. "Owner" means the holder or holders of the title in fee 8 simple to the property on which the home is located.
- 9 "Licensee" means the holder or holders of a license to 10 operate a boarding or nursing home pursuant to chapter 11 of Title
- 11 30 of the Revised Statutes, P.L.1953, c. 212 (C. 30:11A-1 to
- 12 30:11A-14) or P.L.1971, c. 136 (C. 26:2H-1 to 26:2H-26).
- d. "Department" means the State Department of Health. 13
- 14 (cf: P.L.1979, c.496, s.24)
- 8. Section 3 of P.L.1991, c.201 (C.26:2H-55) is amended to 15 16 read as follows:
- 17 3. As used in P.L.1991, c.201 (C.26:2H-53 et seq.):
- 18 "Adult" means an individual who has reached majority pursuant 19 to section 3 of P.L.1972, c.81 (C.9:17B-3).
- "Advance directive for health care" or "advance directive" means 20 21 a writing executed in accordance with the requirements of
- 22 P.L.1991, c.201. An "advance directive" may include a proxy 23 directive or an instruction directive, or both.
- 24 "Attending physician" means the physician selected by, or 25 assigned to, the patient who has primary responsibility for the 26 treatment and care of the patient.
 - "Decision making capacity" means a patient's ability to understand and appreciate the nature and consequences of health care decisions, including the benefits and risks of each, and alternatives to any proposed health care, and to reach an informed decision. A patient's decision making capacity is evaluated relative to the demands of a particular health care decision.
- 33 "Declarant" means an adult who has the mental capacity to 34 execute an advance directive and does so.
- 35 "Do not resuscitate order" means a physician's written order not 36 to attempt cardiopulmonary resuscitation in the event the patient suffers a cardiac or respiratory arrest.
 - "Emergency care" means immediate treatment provided in response to a sudden, acute, and unanticipated medical crisis in order to avoid injury, impairment, or death.
- 41 "Health care decision" means a decision to accept or to refuse
- 42 any treatment, service, or procedure used to diagnose, treat, or care
- 43 for a patient's physical or mental condition, including life-sustaining
- 44 treatment. "Health care decision" also means a decision to accept or
- 45 to refuse the services of a particular physician, nurse, other health
- care professional or health care institution, including a decision to 46
- 47 accept or to refuse a transfer of care.

"Health care institution" means all institutions, facilities, and agencies licensed, certified, or otherwise authorized by State law to administer health care in the ordinary course of business, including hospitals, nursing homes, residential health care facilities, <u>dementia care homes</u>, home health care agencies, hospice programs operating in this State, mental health institutions, facilities or agencies, or institutions, facilities, and agencies for the developmentally disabled. The term "health care institution" shall not be construed to include "health care professionals" as defined in P.L.1991, c.201.

"Health care professional" means an individual licensed by this State to administer health care in the ordinary course of business or practice of a profession.

"Health care representative" means the individual designated by a declarant pursuant to the proxy directive part of an advance directive for the purpose of making health care decisions on the declarant's behalf, and includes an individual designated as an alternate health care representative who is acting as the declarant's health care representative in accordance with the terms and order of priority stated in an advance directive.

"Instruction directive" means a writing which provides instructions and direction regarding the declarant's wishes for health care in the event that the declarant subsequently lacks decision making capacity.

"Life-sustaining treatment" means the use of any medical device or procedure, artificially provided fluids and nutrition, drugs, surgery or therapy that uses mechanical or other artificial means to sustain, restore, or supplant a vital bodily function, and thereby increase the expected life span of a patient.

"Other health care professionals" means health care professionals other than physicians and nurses.

"Patient" means an individual who is under the care of a physician, nurse, or other health care professional.

"Permanently unconscious" means a medical condition that has been diagnosed in accordance with currently accepted medical standards and with reasonable medical certainty as total and irreversible loss of consciousness and capacity for interaction with the environment. The term "permanently unconscious" includes without limitation a persistent vegetative state or irreversible coma.

"Physician" means an individual licensed to practice medicine and surgery in this State.

"Proxy directive" means a writing which designates a health care representative in the event the declarant subsequently lacks decision making capacity.

"State" means a state, territory, or possession of the United States, the District of Columbia, or the Commonwealth of Puerto Rico.

"Terminal condition" means the terminal stage of an irreversibly fatal illness, disease or condition. A determination of a specific life

- 1 expectancy is not required as a precondition for a diagnosis of a
- 2 "terminal condition," but a prognosis of a life expectancy of six
- 3 months or less, with or without the provision of life-sustaining
- 4 treatment, based upon reasonable medical certainty, shall be
- 5 deemed to constitute a terminal condition.
- 6 (cf: P.L.2013, c.103, s.64)

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- 9. Section 2 of P.L.1977, c.448 (C.30:11B-2) is amended to read as follows:
 - 2. "Alzheimer's disease and related disorders" means a form of dementia characterized by a general loss of intellectual abilities of sufficient severity to interfere with social or occupational functioning.

"Community residence for the developmentally disabled" means any community residential facility housing up to 16 persons with developmental disabilities, which provides food, shelter, and personal guidance for persons with developmental disabilities who require assistance, temporarily or permanently, in order to live independently in the community. Such residences shall not be considered health care facilities within the meaning of the "Health Care Facilities Planning Act," P.L.1971, c.136 (C.26:2H-1 et seq.) and shall include, but not be limited to, group homes, halfway houses, supervised apartment living arrangements, and hostels.

"Community residence for the mentally ill" means any community residential facility which provides food, shelter, and personal guidance, under such supervision as required, to not more than 15 persons with mental illness who require assistance temporarily or permanently, in order to live independently in the community. These residences shall be approved for a purchase of service contract or an affiliation agreement pursuant to procedures established by the Division of Mental Health and Addiction Services in the Department of Human Services or the Division of Children's System of Care in the Department of Children and Families, as applicable. These residences shall not house persons who have been assigned to a State psychiatric hospital after having been found not guilty of a criminal offense by reason of insanity or unfit to be tried on a criminal charge. These residences shall not be considered health care facilities within the meaning of the "Health Care Facilities Planning Act," P.L.1971, c.136 (C.26:2H-1 et seq.) and shall include, but not be limited to, group homes, halfway houses, supervised apartment living arrangements, family care homes, and hostels.

"Community residence for persons with head injuries" means a community residential facility providing food, shelter, and personal guidance, under such supervision as required, to not more than 15 persons with head injuries, who require assistance, temporarily or permanently, in order to live in the community, and shall include, but not be limited to: group homes, halfway houses, supervised

apartment living arrangements, and hostels. Such a residence shall not be considered a health care facility within the meaning of the "Health Care Facilities Planning Act," P.L.1971, c.136 (C.26:2H-1 et seq.).

"Dementia" means a chronic or persistent disorder of the mental processes due to organic brain disease, for which no curative treatment is available, and marked by memory disorders, changes in personality, deterioration in personal care, impaired reasoning ability, and disorientation.

"Developmental disability" or "developmentally disabled" means a severe, chronic disability of a person which: a. is attributable to a mental or physical impairment or combination of mental or physical impairments; b. is manifest before age 22; c. is likely to continue indefinitely; d. results in substantial functional limitations in three or more of the following areas of major life activity, that is, self-care, receptive and expressive language, learning, mobility, self-direction and capacity for independent living, or economic self-sufficiency; and e. reflects the need for a combination and sequence of special interdisciplinary or generic care, treatment, or other services which are of lifelong or extended duration and are individually planned and coordinated. Developmental disability includes, but is not limited to, severe disabilities attributable to an intellectual disability, autism, cerebral palsy, epilepsy, spina bifida, and other neurological impairments where the above criteria are

"Mentally ill" or "mental illness" means any psychiatric disorder which has required an individual to receive either inpatient psychiatric care or outpatient psychiatric care on an extended basis.

"Person with head injury" means a person who has sustained an injury, illness, or traumatic changes to the skull, the brain contents or its coverings which results in a temporary or permanent physiobiological decrease of cognitive, behavioral, social, or physical functioning which causes partial or total disability, but excluding a person with Alzheimer's disease and related disorders or other forms of dementia.

36 (cf: P.L.2012, c.16, s.125)

- 10. Section 2 of P.L.1978, c.159 (C.40:55D-66.2) is amended to read as follows:
 - 2. As used in this act:
- a. "Community residence for the developmentally disabled" means any community residential facility licensed pursuant to P.L.1977, c.448 (C.30:11B-1 et seq.) providing food, shelter, and personal guidance, under such supervision as required, to not more than 15 developmentally disabled or mentally ill persons, who require assistance, temporarily or permanently, in order to live in the community, and shall include, but not be limited to: group homes, halfway houses, intermediate care facilities, supervised

- apartment living arrangements, and hostels. Such a residence shall not be considered a health care facility within the meaning of the "Health Care Facilities Planning Act," P.L.1971, c.136 (C.26:2H-1 et al.). In the case of such a community residence housing mentally ill persons, such residence shall have been approved for a purchase of service contract or an affiliation agreement pursuant to such procedures as shall be established by regulation of the Division of Mental Health and [Hospitals of] Addiction Services in the Department of Human Services. As used in this act, "developmentally disabled person" means a person who is developmentally disabled as defined in section 2 of P.L.1977, c.448 (C.30:11B-2), and "mentally ill person" means a person who is afflicted with a mental illness as defined in [R.S.30:4-23] section 30 of P.L.1987, c.116 (C.30:4-27.2), but shall not include a person who has been committed after having been found not guilty of a criminal offense by reason of insanity or having been found unfit to be tried on a criminal charge.
 - b. "Community shelter for victims of domestic violence" means any shelter approved for a purchase of service contract and certified pursuant to standards and procedures established by regulation of the Department of Human Services pursuant to P.L.1979, c.337 (C.30:14-1 et seq.), providing food, shelter, medical care, legal assistance, personal guidance, and other services to not more than 15 persons who have been victims of domestic violence, including any children of such victims, who temporarily require shelter and assistance in order to protect their physical or psychological welfare.

- c. "Community residence for persons with head injuries" means a community residential facility licensed pursuant to P.L.1977, c.448 (C.30:11B-1 et seq.) providing food, shelter, and personal guidance, under such supervision as required, to not more than 15 persons with head injuries, who require assistance, temporarily or permanently, in order to live in the community, and shall include, but not be limited to: group homes, halfway houses, supervised apartment living arrangements, and hostels. Such a residence shall not be considered a health care facility within the meaning of the "Health Care Facilities Planning Act," P.L.1971, c.136 (C.26:2H-1 et al.).
- d. "Person with head injury" means a person who has sustained an injury, illness, or traumatic changes to the skull, the brain contents, or its coverings which results in a temporary or permanent physiobiological decrease of mental, cognitive, behavioral, social, or physical functioning which causes partial or total disability, but excluding a person with Alzheimer's disease and related disorders or other forms of dementia.
- e. "Community residence for the terminally ill" means any community residential facility operated as a hospice program providing food, shelter, personal guidance, and health care services,

- under such supervision as required, to not more than 15 terminally
 ill persons.
 - f. "Alzheimer's disease and related disorders" means a form of dementia characterized by a general loss of intellectual abilities of sufficient severity to interfere with social or occupational functioning.
 - g. "Dementia" means a chronic or persistent disorder of the mental processes due to organic brain disease, for which no curative treatment is available, and marked by memory disorders, changes in personality, deterioration in personal care, impaired reasoning ability, and disorientation.
- 12 (cf: P.L.1997, c.321, s.2)

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- 11. Section 2 of P.L.1977, c.239 (C.52:27G-2) is amended to read as follows:
- 16 2. As used in this act, unless the context clearly indicates otherwise:
- 18 "Abuse" means the willful infliction of physical pain, injury, 19 or mental anguish; unreasonable confinement; or the willful deprivation of services which are necessary to maintain a person's 20 physical and mental health. However, no person shall be deemed to 21 22 be abused for the sole reason he is being furnished nonmedical 23 remedial treatment by spiritual means through prayer alone, in accordance with a recognized religious method of healing, in lieu of 24 25 medical treatment:
 - b. An "act" of any facility or government agency shall be deemed to include any failure or refusal to act by such facility or government agency;
 - c. "Administrator" means any person who is charged with the general administration or supervision of a facility, whether or not such person has an ownership interest in such facility, and whether or not such person's functions and duties are shared with one or more other persons;
 - d. "Caretaker" means a person employed by a facility to provide care or services to an elderly person, and includes, but is not limited to, the administrator of a facility;
 - e. "Exploitation" means the act or process of using a person or his resources for another person's profit or advantage without legal entitlement to do so;
- 40 "Facility" means any facility or institution, whether public or 41 private, offering health or health related services for the 42 institutionalized elderly, and which is subject to regulation, 43 visitation, inspection, or supervision by any government agency. 44 Facilities include, but are not limited to, nursing homes, skilled 45 nursing homes, intermediate care facilities, extended care facilities, 46 convalescent homes, rehabilitation centers, residential health care 47 facilities, dementia care homes, special hospitals, veterans'
- 48 hospitals, chronic disease hospitals, psychiatric hospitals, mental

- hospitals, developmental centers or facilities, continuing care 1 2 retirement communities, including independent living sections 3 thereof, day care facilities for the elderly and medical day care
- 4 centers;
 - g. "Government agency" means any department, division, office, bureau, board, commission, authority, or any other agency or instrumentality created by the State or to which the State is a party, or by any county or municipality, which is responsible for the regulation, visitation, inspection, or supervision of facilities, or which provides services to patients, residents, or clients of
 - h. "Guardian" means any person with the legal right to manage the financial affairs and protect the rights of any patient, resident, or client of a facility, who has been declared an incapacitated person by a court of competent jurisdiction;
 - "Institutionalized elderly," "elderly" or "elderly person" means any person 60 years of age or older, who is a patient, resident, or client of any facility;
- "Office" means the Office of the Ombudsman for the 19 Institutionalized Elderly established herein; 20
- k. "Ombudsman" means the administrator and chief executive 21 22 officer of the Office of the Ombudsman for the Institutionalized 23 Elderly;
 - "Patient, resident or client" means any elderly person who is receiving treatment or care in any facility in all its aspects, including, but not limited to, admission, retention, confinement, commitment, period of residence, transfer, discharge, and any instances directly related to such status.
- 29 (cf: P.L.2013, c.167, s.10)

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facilities;

- 31 12. Section 3 of P.L.1979, c.496 (C.55:13B-3) is amended to 32 read as follows:
 - 3. As used in this act:
- 34 "Boarding house" means any building, together with any 35 related structure, accessory building, any land appurtenant thereto, 36 and any part thereof, which contains two or more units of dwelling 37 space arranged or intended for single room occupancy, exclusive of 38 any such unit occupied by an owner or operator, and wherein 39 personal or financial services are provided to the residents, 40 including any residential hotel or congregate living arrangement, 41 but excluding any hotel, motel, or established guest house wherein a 42 minimum of 85[%] percent of the units of dwelling space are 43 offered for limited tenure only, any resource family home as 44 defined in section 1 of P.L.1962, c.137 (C.30:4C-26.1), any 45 community residence for the developmentally disabled and any community residence for the mentally ill as defined in section 2 of 46 P.L.1977, c.448 (C.30:11B-2), any adult family care home as
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- 48 defined in section 3 of P.L.2001, c.304 (C.26:2Y-3), any dormitory

- owned or operated on behalf of any nonprofit institution of primary, secondary, or higher education for the use of its students, any building arranged for single room occupancy wherein the units of dwelling space are occupied exclusively by students enrolled in a full-time course of study at an institution of higher education approved by the New Jersey Commission on Higher Education, any facility or living arrangement operated by, or under contract with, any State department or agency, upon the written authorization of the commissioner, and any owner-occupied, one-family residential dwelling made available for occupancy by not more than six guests, where the primary purpose of the occupancy is to provide charitable assistance to the guests and where the owner derives no income from the occupancy. A dwelling shall be deemed "owner-occupied" within the meaning of this section if it is owned or operated by a nonprofit religious or charitable association or corporation and is used as the principal residence of a minister or employee of that corporation or association. For any such dwelling, however, fire detectors shall be required as determined by the Department of Community Affairs.
 - b. "Commissioner" means the Commissioner of the Department of Community Affairs.

- c. "Financial services" means any assistance permitted or required by the commissioner to be furnished by an owner or operator to a resident in the management of personal financial matters, including, but not limited to, the cashing of checks, holding of personal funds for safekeeping in any manner or assistance in the purchase of goods or services with a resident's personal funds.
- d. "Limited tenure" means residence at a rooming or boarding house on a temporary basis, for a period lasting no more than 90 days, when a resident either maintains a primary residence at a location other than the rooming or boarding house or intends to establish a primary residence at such a location and does so within 90 days after taking up original residence at the rooming or boarding house.
- e. "Operator" means any individual who is responsible for the daily operation of a rooming or boarding house.
- f. "Owner" means any person who owns, purports to own, or exercises control of any rooming or boarding house.
- g. "Personal services" means any services permitted or required to be furnished by an owner or operator to a resident, other than shelter, including, but not limited to, meals or other food services, and assistance in dressing, bathing, or attending to other personal needs.
- h. "Rooming house" means a boarding house wherein no personal or financial services are provided to the residents.
- i. "Single room occupancy" means an arrangement of dwelling space which does not provide a private, secure dwelling space arranged for independent living, which contains both the sanitary

- 1 and cooking facilities required in dwelling spaces pursuant to the
- 2 "Hotel and Multiple Dwelling Law," P.L.1967, c.76 (C.55:13A-1 et
- 3 seq.), and which is not used for limited tenure occupancy in a hotel,
- 4 motel, or established guest house, regardless of the number of
- 5 individuals occupying any room or rooms.
- j. "Unit of dwelling space" means any room, rooms, suite, or portion thereof, whether furnished or unfurnished, which is occupied or intended, arranged, or designed to be occupied for sleeping or dwelling purposes by one or more persons.
 - k. **[**"Alzheimer's disease and related disorders" means a form of dementia characterized by a general loss of intellectual abilities of sufficient severity to interfere with social or occupational functioning. **]** (Deleted by amendment, P.L., c. (pending before the Legislature as this bill)
 - 1. **[**"Dementia" means a chronic or persistent disorder of the mental processes due to organic brain disease, for which no curative treatment is available, and marked by memory disorders, changes in personality, deterioration in personal care, impaired reasoning ability and disorientation. **]** (Deleted by amendment, P.L. , c. (pending before the Legislature as this bill)

21 (cf: P.L.2004, c.130, s.123)

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- 23 13. Section 6 of P.L.1979, c.496 (C.55:13B-6) is amended to 24 read as follows:
- 6. The commissioner shall establish standards to ensure that every rooming and boarding house in this State is constructed and operated in such a manner as will protect the health, safety, and welfare of its residents and at the same time preserve and promote a homelike atmosphere appropriate to such facilities, including, but not limited to, standards to provide for the following:
 - a. Safety from fire;
- b. Safety from structural, mechanical, plumbing, and electrical deficiencies;
- c. Adequate light and ventilation;
- d. Physical security;
- e. Protection from harassment, fraud, and eviction without due cause;
 - f. Clean and reasonably comfortable surroundings;
- g. Adequate personal and financial services rendered inboarding houses;
 - h. Disclosure of owner identification information;
- 42 i. Maintenance of orderly and sufficient financial and 43 occupancy records;
- j. Referral of residents, by the operator, to social service and health agencies for needed services;
- 46 k. Assurance that no constitutional, civil, or legal right will be 47 denied solely by reason of residence in a rooming or boarding

- 1. Reasonable access for employees of public and private agencies, and reasonable access for other citizens upon receiving the consent of the resident to be visited by them;
 - m. Opportunity for each resident to live with as much independence, autonomy, and interaction with the surrounding community as [he] the resident is capable of [; and] doing.
 - n. [Assurance that the needs of residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, will be met in accordance with standards adopted by regulation of the commissioner, which shall be promulgated no later than 90 days after the effective date of this act, which shall include, at a minimum, the following:
 - (1) staffing levels;

- (2) staff qualifications and training;
- (3) special dietary needs of residents;
- (4) special supervision requirements relating to the individual needs of residents;
- (5) building safety requirements appropriate to the needs of residents;
- (6) special health monitoring of residents by qualified, licensed health care professionals, including a requirement that a medical assessment be performed on a resident with special needs as described in this subsection, as determined necessary by the commissioner, prior to admission and on a quarterly basis thereafter to ensure that the facility is appropriate to the needs of the resident; and
- (7) criteria for discharging residents which shall be set forth in the admission agreement which shall be provided to the resident or the resident's representative prior to or upon admission. The commissioner may revoke the license of any provider who violates the criteria for discharging residents. I (Deleted by amendment, P.L.
- 33 c. (pending before the Legislature as this bill)
- 34 (cf: P.L.1997, c.260, s.2)

- 36 14. Section 7 of P.L.1979, c.496 (C.55:13B-7) is amended to read as follows:
- 7. a. (1) No person shall own or operate a rooming or boarding house, hold out a building as available for rooming or boarding house occupancy, or apply for any necessary construction or planning approvals related to the establishment of a rooming or boarding house without a valid license to own or operate such a facility, issued by the commissioner and, if appropriate, by a municipality which has elected to issue such licenses pursuant to P.L.1993, c.290 (C.40:52-9 et seq.).
 - (2) **[**No person shall own or operate a rooming or boarding house that offers or advertises or holds itself out as offering personal care services to residents with special needs, including, but

not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, hold out a building as available for rooming or boarding house occupancy for such residents, or apply for any necessary construction or planning approvals related to the establishment of a rooming or boarding house for such residents without a valid license to own or operate such a facility, issued by the commissioner. I (Deleted by amendment, P.L., c. (pending before the Legislature as this bill)

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- (3) Any person found to be in violation of this subsection shall be liable for a civil penalty of not more than [\$5,000.00] \$5,000 for each building so owned or operated, which penalty shall be payable to the appropriate licensing entity.
- b. The commissioner shall establish separate categories of licensure for owning and for operating a rooming or boarding house, provided, however, that an owner who himself operates such a facility need not also possess an operator's license.

If an owner seeking to be licensed is other than an individual, the application shall state the name of an individual who is a member, officer, or stockholder in the corporation or association seeking to be licensed, and the same shall be designated the primary owner of the rooming or boarding house.

Each application for licensure shall contain such information as the commissioner may prescribe and, unless the person is licensed by a municipality to own or operate a rooming and boarding house pursuant to P.L.1993, c.290 (C.40:52-9 et seq.), shall be accompanied by a fee established by the commissioner which shall not be less than [\$150.00] \$150 or more than [\$600.00] \$600, except as provided in subsection e. of this section. If, upon receipt of the fee and a review of the application, the commissioner determines that the applicant will operate, or provide for the operation of, a rooming or boarding house in accordance with the provisions of this act, [he] the commissioner shall issue a license to [him] the applicant.

Each license shall be valid for one year from the date of issuance, but may be renewed upon application by the owner or operator and upon payment of the same fee required for initial licensure.

- c. Only one license shall be required to own a rooming or boarding house, but an endorsement thereto shall be required for each separate building owned and operated, or intended to be operated, as a rooming or boarding house. Each application for licensure or renewal shall indicate every such building for which an endorsement is required. If, during the term of a license, an additional endorsement is required, or an existing one is no longer required, an amended application for licensure shall be submitted.
- d. A person making application for, or who has been issued, a license to own or operate a rooming or boarding house who

conceals the fact that the person has been denied a license to own or operate a residential facility, or that the person's license to own or operate a residential facility has been revoked by a department or agency of state government in this or any other state is liable for a civil penalty of not more than [\$5,000.00] \$5,000, and any license to own or operate a rooming or boarding house which has been issued to that person shall be immediately revoked.

e. The commissioner shall annually review the cost of administering and enforcing this section and shall establish by rule such changes to the license application fee as may be necessary to cover the cost of such administration and enforcement.

(cf: P.L.2007, c.339, s.1)

- 15. (New section) a. The Department of Community Affairs shall cease its responsibilities for licensure, inspections, and the establishment and enforcement of standards with respect to each rooming or boarding house that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, as of the date that the Department of Health assumes these responsibilities pursuant to section 18 of P.L. , c. (C.) (pending before the Legislature as this bill).
- b. The Department of Community Affairs shall establish and enter into an inter-agency agreement with the Department of Health as necessary for the purposes of this section and section 18 of P.L., c. (C.) (pending before the Legislature as this bill).

16. (New section) The Department of Community Affairs shall not issue a license to any person to own or operate a new rooming or boarding house that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, on or after the date of enactment of P.L. , c. (C.) (pending before the Legislature as this bill).

- 17. (New section) As used in sections 18 through 26 of P.L.c. (C.) (pending before the Legislature as this bill):
- "Alzheimer's disease and related disorders" means a form of dementia characterized by a general loss of intellectual abilities of sufficient severity to interfere with social or occupational functioning.
 - "Commissioner" means the Commissioner of Health.
- "Department" means the Department of Health.
- "Dementia" means a chronic or persistent disorder of the mental processes due to organic brain disease, for which no curative treatment is available, and marked by memory disorders, changes in personality, deterioration in personal care, impaired reasoning ability, and disorientation.

"Dementia care home" means a community residential facility which: (1) provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia; (2) is subject to the licensure authority of the Department of Health as a health care facility pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.); (3) and meets the requirements of section 19 of P.L. , c. (C.) (pending before the Legislature as this bill).

- 18. (New section) a. (1) Notwithstanding any law, rule, or regulation to the contrary, commencing on or after the effective date of P.L., c. (C.) (pending before the Legislature as this bill) and subject to the provisions of subsection b. of this section, the Department of Health shall be responsible for licensure, inspections, and the establishment and enforcement of standards with respect to each community residential facility in the State that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, which shall be thereafter known as a dementia care home.
- (2) The department shall be empowered to exercise such authority with respect to a dementia care home as the department is granted with respect to any other health care facility licensed by the department, pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) and any rules and regulations adopted pursuant thereto, and in accordance with the provisions of P.L. , c. (C.) (pending before the Legislature as this bill).
- b. The department shall establish and enter into an inter-agency agreement with the Department of Community Affairs as necessary for the purposes of subsection a. of this section.
- c. (1) Whenever any reference is made in any law, rule, regulation, order, contract, document, or judicial or administrative proceeding to rooming and boarding houses for residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, the same shall be deemed to mean or refer to "dementia care homes."
- (2) Whenever the term "Department of Community Affairs" appears or any reference is made thereto in any law, rule, regulation, order, contract, document, or judicial or administrative proceeding pertaining to rooming and boarding houses for residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, the same shall be deemed to mean or refer to the "Department of Health."
- d. A dementia care home that is operating as a rooming or boarding house that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's

disease and related disorders or other forms of dementia, on the effective date of P.L., c. (C.) (pending before the Legislature as this bill) shall be granted provisional licensure by the department for a period of one year following the effective date. At the end of that period, the department shall issue a license to the facility pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) or make continued licensure subject to such actions by the facility as the commissioner determines necessary to effectuate the purposes of P.L.1971, c.136 and P.L., c. (C.) (pending before the Legislature as this bill).

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19. (New section) a. A dementia care home shall be a facility, whether in single or multiple dwellings, whether public or private, whether incorporated or unincorporated, whether for profit or nonprofit, operated at the direction of or under the management of an individual or individuals, corporation, partnership, society, or association, which furnishes food and shelter to four or more persons 18 years of age or older who are unrelated to the operator of the facility, and which provides dietary services, recreational activities, supervision of self-administration of medications, supervision of and assistance in activities of daily living and assistance in obtaining health services to any one or more of such persons, in addition to such facilities, services, activities, and assistance as the Commissioner of Health may prescribe by regulation that are designed to meet the specific needs of residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia. A dementia care home shall not include: a community residence for the developmentally disabled as defined in section 2 of P.L.1977, c. 448 (C.30:11B-2); a facility or living arrangement operated by, or under contract with, a State department or agency, upon the written authorization of the commissioner; or a privately operated establishment licensed pursuant to chapter 11 of Title 30 of the Revised Statutes.

b. A resident of a dementia care home shall be a person with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, as prescribed by regulation of the commissioner, who is: 18 years of age or older; ambulant with or without assistive devices; certified by a licensed physician to be free from communicable disease and not in need of skilled nursing care; and, except in the case of a person 65 years of age or over, in need of dietary services, supervision of self-administration of medications, supervision of and assistance in activities of daily living, or assistance in obtaining health care services. A resident of a dementia care home shall not be given skilled nursing care while a resident, except that the provisions of this subsection shall not be construed to prevent: care of residents in emergencies or during temporary illness for a period

of one week or less; or a licensed physician from ordering nursing 2 or other health care services for the resident.

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- 20. (New section) a. (1) A person shall not operate a dementia care home, or offer, advertise, or hold out a facility as a dementia care home, hold out a building as available for occupancy by dementia care home residents, or apply for any necessary construction or planning approvals related to the establishment of a dementia care home, without a valid license having been issued by the department for the operation of that facility in accordance with the provisions of P.L.1971, c.136 (C.26:2H-1 et seq.) and P.L.
- 12) (pending before the Legislature as this bill).
 - (2) A person shall not offer, advertise, or hold out a dementia care home as another type of health care facility licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.).
 - (3) A person found to be in violation of paragraph (1) or (2) of this subsection shall be liable for a civil penalty for each building so operated in accordance with the provisions of section 25 of , c. (C.) (pending before the Legislature as this bill).
 - b. Notwithstanding the provisions of any municipal ordinance to the contrary, a dementia care home shall meet such requirements as the commissioner shall establish by regulation for the posting of visible signs in its local community that identify the location of the facility.

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- 21. (New section) The commissioner shall establish standards to ensure that each dementia care home is constructed and operated in such a manner as will protect the health, safety, and welfare of its residents and at the same time preserve and promote a homelike atmosphere appropriate to these facilities, including, but not limited to, standards to provide for the following:
- Safety from fire;
- b. Safety from structural, mechanical, plumbing, and electrical deficiencies;
- Adequate light and ventilation;
 - Physical security;
- 37 Protection from harassment, fraud, and eviction without due 38 cause;
- 39 Clean and reasonably comfortable surroundings;
- Adequate personal and financial services rendered in the 40 g. 41 facility;
- 42 h. Disclosure of owner identification information;
- 43 Maintenance of orderly and sufficient financial and 44 occupancy records;
- 45 Referral of residents, by the operator, to social service and 46 health care providers for needed services;
- 47 k. Assurance that no constitutional, civil, or legal right will be 48 denied solely by reason of residence in a dementia care home;

- Reasonable access for employees of public and private agencies, and reasonable access for other citizens upon receiving the consent of the resident to be visited by them;
 - m. Opportunity for each resident to live with as much independence, autonomy, and interaction with the surrounding community as the resident is capable of doing; and
 - n. Assurance that the needs of residents of a dementia care home will be met, which shall include, at a minimum, the following:
 - (1) staffing levels, which shall ensure that the ratio of direct care staff to residents in the facility is equal to or higher than that which existed on the date of enactment of P.L. , c. (C. before the Legislature as this bill);
 - (2) staff qualifications and training;
 - (3) special dietary needs of residents;
 - (4) special supervision requirements relating to the individual needs of residents;
 - (5) building safety requirements appropriate to the needs of residents, including the requirement to maintain the operation 24 hours a day, seven days a week, of window, door, and any other locks or security system designed to prevent the elopement of a resident;
 - (6) special health monitoring of residents by qualified, licensed health care professionals, including a requirement that a medical assessment by a physician be performed on a resident with special needs as described in this subsection, as determined necessary by the commissioner, prior to admission and on a quarterly basis thereafter, to ensure that the facility is appropriate to the needs of the resident; and
 - (7) criteria for discharging residents which shall be set forth in the admission agreement, which shall be provided to the resident or the resident's representative prior to or upon admission. commissioner may revoke the license of any provider who violates the criteria for discharging residents.

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- 22. (New section) a. Notwithstanding the provisions of any other law or regulation to the contrary, the commissioner may grant, to a dementia care home that is operating as a rooming or boarding house that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, on the effective date of P.L., c. (C.) (pending before the Legislature as this bill), a temporary or permanent waiver of one or more requirements established by regulation of the commissioner for health care facilities licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) that the commissioner has determined are otherwise applicable to the dementia care home, if the dementia care home can demonstrate
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- to the satisfaction of the commissioner that: 48

- (1) the granting of the waiver would not pose a threat to the health, safety, or welfare of its residents; and
- (2) the failure to grant such a waiver would pose a serious financial hardship to the facility.
 - b. A dementia care home that is seeking a waiver pursuant to subsection a. of this section shall apply for the waiver on a form and in a manner prescribed by the commissioner.

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- 23. (New section) a. Every resident of a dementia care home facility shall have the right:
 - (1) To manage the resident's own financial affairs;
- (2) To wear the resident's own clothing;
- (3) To determine the resident's own dress, hair style, or other personal effects according to individual preference;
- (4) To retain and use the resident's personal property in the resident's immediate living quarters, so as to maintain individuality and personal dignity, except where the facility can demonstrate that it would be unsafe, impractical to do so, or infringe upon the rights of others, and that mere convenience is not the facility's motive to restrict this right;
 - (5) To receive and send unopened correspondence;
- (6) To unaccompanied access to a telephone at a reasonable hour and to a private phone at the resident's expense;
 - (7) To privacy;
- (8) To retain the services of the resident's own personal physician at the resident's own expense or under a health care plan and to confidentiality and privacy concerning the resident's medical condition and treatment;
- (9) To unrestricted communication, including personal visitation with any person of the resident's choice, at any reasonable hour;
- (10) To make contacts with the community and to achieve the highest level of independence, autonomy, and interaction with the community of which the resident is capable;
- (11) To present grievances on behalf of the resident or others to the operator, State governmental agencies, or other persons without threat of reprisal in any form or manner;
- (12) To a safe and decent living environment and considerate and respectful care that recognizes the dignity and individuality of the resident;
- (13) To refuse to perform services for the facility, except as contracted for by the resident and the operator;
 - (14) To practice the religion of the resident's choice, or to abstain from religious practice; and
 - (15) To not be deprived of any constitutional, civil, or legal right solely by reason of residence in a dementia care home.
- b. The operator of a dementia care home shall ensure that a written notice of the rights set forth in subsection a. of this section is given to every resident upon admittance to the facility and to each

resident upon request. The operator shall also post this notice in a conspicuous public place in the facility. This notice shall include the name, address, and telephone numbers of the Office of the Ombudsman for the Institutionalized Elderly, county welfare agency, and county office on aging.

c. A person or resident whose rights as set forth in subsection a. of this section are violated shall have a cause of action against any person committing the violation. The action may be brought in any court of competent jurisdiction to enforce those rights and to recover actual and punitive damages for their violation. A plaintiff who prevails in the action shall be entitled to recover reasonable attorney's fees and costs of the action.

24. (New section) A person who operates a dementia care home on or after the effective date of P.L., c. (C.) (pending before the Legislature as this bill) shall not provide health care services in that facility. Nothing in this section shall be construed to prohibit a licensed health care professional, who is acting within the scope of that person's license, from providing health care services to a resident of a dementia care home.

25. (New section) A person or entity found to be in violation of the provisions of P.L., c. (C.) (pending before the Legislature as this bill), or any rules or regulations adopted by the commissioner pursuant thereto with respect to the operation of a dementia care home, shall be subject to a penalty as provided for in sections 13 or 14 of P.L.1971, c.136 (C.26:2H-13 or 26:2H-14).

26. (New section) The commissioner and the Commissioner of Community Affairs, pursuant to the "Administrative Procedure P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt, notwithstanding any provision of P.L.1968, c.410 (C.52:14B-1 et seq.) to the contrary, immediately upon filing with the Office of Administrative Law, such rules and regulations as the commissioners deem necessary to effectuate the purposes of P.L. ,) (pending before the Legislature as this bill), which shall be effective for a period not to exceed 12 months following the effective date of P.L. , c. . The regulations shall thereafter be amended, adopted, or readopted, in accordance with the provisions of P.L.1968, c.410 (C.52:14B-1 et seq.), as the commissioner or the Commissioner of Community Affairs determine necessary to effectuate the purposes of P.L. , c. (C.) (pending before the Legislature as this bill).

27. This act shall take effect on the first day of the seventh month next following the date of enactment, except that section 16 shall take effect immediately, but the Commissioners of Health and Community Affairs may take such anticipatory administrative

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1	action in advance thereof as shall be necessary for the
2	implementation of this act.
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7	Provides for licensure of dementia care homes by DOH.

ASSEMBLY, No. 1102

STATE OF NEW JERSEY

216th LEGISLATURE

PRE-FILED FOR INTRODUCTION IN THE 2014 SESSION

Sponsored by:

Assemblywoman VALERIE VAINIERI HUTTLE District 37 (Bergen) Assemblywoman BONNIE WATSON COLEMAN District 15 (Hunterdon and Mercer) Assemblywoman SHAVONDA E. SUMTER District 35 (Bergen and Passaic)

Co-Sponsored by: Assemblyman Eustace

SYNOPSIS

Provides for licensure of dementia care homes by DOH.

CURRENT VERSION OF TEXT

Introduced Pending Technical Review by Legislative Counsel



AN ACT providing for the licensure of dementia care homes by the Department of Health and amending and supplementing various parts of the statutory law.

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

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- 1. Section 2 of P.L.1971, c.136 (C.26:2H-2) is amended to read as follows:
- 2. The following words or phrases, as used in this act, shall have the following meanings, unless the context otherwise requires:
- 12 "Health care facility" means the facility or institution 13 whether public or private, engaged principally in providing services 14 for health maintenance organizations, diagnosis, or treatment of 15 human disease, pain, injury, deformity, or physical condition, 16 including, but not limited to, a general hospital, special hospital, 17 mental hospital, public health center, diagnostic center, treatment 18 center, rehabilitation center, extended care facility, skilled nursing 19 home, nursing home, intermediate care facility, tuberculosis hospital, chronic disease hospital, maternity hospital, outpatient 20 clinic, dispensary, home health care agency, residential health care 21 22 facility, dementia care home, and bioanalytical laboratory (except 23 as specifically excluded hereunder) or central services facility 24 serving one or more such institutions but excluding institutions that 25 provide healing solely by prayer and excluding such bioanalytical 26 laboratories as are independently owned and operated, and are not 27 owned, operated, managed, or controlled, in whole or in part, 28 directly or indirectly by any one or more health care facilities, and 29 the predominant source of business of which is not by contract with 30 health care facilities within the State of New Jersey and which 31 solicit or accept specimens and operate predominantly in interstate 32 commerce.
 - b. "Health care service" means the preadmission, outpatient, inpatient, and postdischarge care provided in or by a health care facility, and such other items or services as are necessary for such care, which are provided by or under the supervision of a physician for the purpose of health maintenance organizations, diagnosis, or treatment of human disease, pain, injury, disability, deformity, or physical condition, including, but not limited to, nursing service, home care nursing, and other paramedical service, ambulance service, service provided by an intern, resident in training or physician whose compensation is provided through agreement with a health care facility, laboratory service, medical social service, drugs, biologicals, supplies, appliances, equipment, bed and board, but excluding services provided by a physician in his private

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

- practice, except as provided in sections 7 and 12 of P.L.1971, c.136
- 2 (C.26:2H-7 and 26:2H-12), or by practitioners of healing solely by
- 3 prayer, and services provided by first aid, rescue and ambulance
- 4 squads as defined in the "New Jersey Highway Safety Act of 1971,"
- 5 P.L.1971, c.351 (C.27:5F-1 et seq.).

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- 6 c. "Construction" means the erection, building, or substantial
- 7 acquisition, alteration, reconstruction, improvement, renovation,
- 8 extension, or modification of a health care facility, including its
- 9 equipment, the inspection and supervision thereof; and the studies, 10 surveys, designs, plans, working drawings, specifications,
- procedures, and other actions necessary thereto.
 - d. "Board" means the Health Care Administration Board established pursuant to this act.
 - e. (Deleted by amendment, P.L.1998, c.43).
- f. "Government agency" means a department, board, bureau, division, office, agency, public benefit, or other corporation, or any other unit, however described, of the State or political subdivision thereof.
- 19 g. (Deleted by amendment, P.L.1991, c.187).
- 20 h. (Deleted by amendment, P.L.1991, c.187).
- i. "Department" means the Department of Health.
- j. "Commissioner" means the Commissioner of Health.
 - k. "Preliminary cost base" means that proportion of a hospital's current cost which may reasonably be required to be reimbursed to a properly utilized hospital for the efficient and effective delivery of appropriate and necessary health care services of high quality required by such hospital's mix of patients. The preliminary cost base initially may include costs identified by the commissioner and approved or adjusted by the commission as being in excess of that proportion of a hospital's current costs identified above, which excess costs shall be eliminated in a timely and reasonable manner prior to certification of the revenue base. The preliminary cost base shall be established in accordance with regulations proposed by the commissioner and approved by the board.
 - 1. (Deleted by amendment, P.L.1992, c.160).
 - m. "Provider of health care" means an individual (1) who is a direct provider of health care service in that the individual's primary activity is the provision of health care services to individuals or the administration of health care facilities in which such care is provided and, when required by State law, the individual has received professional training in the provision of such services or in such administration and is licensed or certified for such provision or administration; or (2) who is an indirect provider of health care in that the individual (a) holds a fiduciary position with, or has a fiduciary interest in, any entity described in subparagraph b(ii) or subparagraph b(iv); provided, however, that a member of the governing body of a county or any elected official shall not be

- deemed to be a provider of health care unless he is a member of the
- 2 board of trustees of a health care facility or a member of a board,
- 3 committee or body with authority similar to that of a board of
- 4 trustees, or unless he participates in the direct administration of a
- 5 health care facility; or (b) received, either directly or through his
- spouse, more than one-tenth of his gross annual income for any one or more of the following:
 - (i) Fees or other compensation for research into or instruction in the provision of health care services;
 - (ii) Entities engaged in the provision of health care services or in research or instruction in the provision of health care services;
 - (iii) Producing or supplying drugs or other articles for individuals or entities for use in the provision of or in research into or instruction in the provision of health care services;
 - (iv) Entities engaged in producing drugs or such other articles.
 - n. "Private long-term health care facility" means a nursing home, skilled nursing home, or intermediate care facility presently in operation and licensed as such prior to the adoption of the 1967 Life Safety Code by the Department of Health in 1972 and which
- has a maximum 50-bed capacity and which does not accommodate
- 21 Medicare or Medicaid patients.
- o. (Deleted by amendment, P.L.1998, c.43).
- p. "State Health Planning Board" means the board established pursuant to section 33 of P.L.1991, c.187 (C.26:2H-5.7) to conduct certificate of need review activities.
- 26 (cf: P.L.2012, c.17, s.153)

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- 28 2. Section 19 of P.L.1992, c.160 (C.26:2H-7a) is amended to read as follows:
- 19. Notwithstanding the provisions of section 7 of P.L.1971, c.136 (C.26:2H-7) to the contrary, the following are exempt from the certificate of need requirement:
- 33 Community-based primary care centers;
- Outpatient drug and alcohol services;
- 35 Hospital-based medical detoxification for drugs and alcohol;
- 36 Ambulance and invalid coach services;
- 37 Mental health services which are non-bed related outpatient 38 services;
- Residential health care facility services;
- 40 <u>Dementia care homes</u>;
- 41 Capital improvements and renovations to health care facilities;
- Additions of medical/surgical, adult intensive care and adult critical care beds in hospitals;
- 44 Replacement of existing major moveable equipment;
- 45 Inpatient operating rooms;
- 46 Alternate family care programs;
- 47 Hospital-based subacute care;

- 1 Ambulatory care facilities;
- 2 Comprehensive outpatient rehabilitation services;
- 3 Special child health clinics;
- New technology in accordance with the provisions of section 18
- 5 of P.L.1998, c.43 (C.26:2H-7d);
- Transfer of ownership interest except in the case of an acute care hospital;
- 8 Change of site for approved certificate of need within the same 9 county;
- Additions to vehicles or hours of operation of a mobile intensive care unit;
- Relocation or replacement of a health care facility within the same county, except for an acute care hospital;
- 14 Continuing care retirement communities authorized pursuant to 15 P.L.1986, c.103 (C.52:27D-330 et seq.);
- Magnetic resonance imaging;
- 17 Adult day health care facilities;
- Pediatric day health care facilities;
- 19 Chronic or acute renal dialysis facilities; and
- Transfer of ownership of a hospital to an authority in accordance with P.L.2006, c.46 (C.30:9-23.15 et al.).
- 22 (cf: P.L.2006, c.46, s.10)

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- 24 3. Section 1 of P.L.2007, c.65 (C.26:2H-12.33) is amended to 25 read as follows:
 - 1. a. The Department of Health shall make available to the public, through its official department website, information regarding:
 - (1) the ownership of each long-term care facility and adult day health services facility licensed by the department; and
 - (2) any violation of statutory standards or rules and regulations of the department pertaining to the care of patients or physical plant standards found at any such facility by the department.
 - As used in this section, "long-term care facility" means a nursing home, assisted living residence, comprehensive personal care home, residential health care facility, or dementia care home licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.).
 - b. The information made available to the public pursuant to subsection a. of this section shall be provided in a manner that would enable a member of the public to search the website by name of a facility or its owner in order to access the information. The department shall also make the information available in writing, upon request.
 - c. The information regarding the ownership of a long-term care or adult day health services facility that is made available to the public pursuant to subsection a. of this section shall provide, at a minimum: the name of the owner of a facility as listed on the

- facility's license and, if there is more than one owner or the facility 1
- 2 is owned by a corporation, the name of each person who holds at
- 3 least a 10**[**%] percent interest in the facility; the name of any other
- 4 licensed long-term care or adult day health services facility in the
- 5 State owned by this owner, corporation, and each person who holds
- 6 at least a 10[%] percent interest in the facility, as applicable; and 7
 - the address and contact information for the facility.
- 8 d. The information that is displayed on the official department
- 9 website pursuant to subsection a. of this section shall include
- 10 Internet web links to the New Jersey Report Card for Nursing
- Homes maintained by the department and the Medicare Nursing 11
- 12 Home Compare database maintained by the federal Centers for
- 13 Medicare & Medicaid Services.
- 14 (cf: P.L.2012, c.17, s.197)

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- 4. Section 2 of P.L.1984, c.114 (C.26:2H-14.2) is amended to read as follows:
- 18 2. a. Every nursing home as defined in section 2 of P.L.1976,
- 19 c. 120 (C. 30:13-2) or licensed pursuant to P.L.1971, c. 136 (C.
- 20 26:2H-1 et seq.), [and] every residential health care facility as
- defined in section 1 of P.L.1953, c. 212 (C. 30:11A-1) or licensed 21
- 22 pursuant to P.L.1971, c. 136 (C. 26:2H-1 et seq.), and every
- 23 dementia care home as defined in section 17 of P.L., c. (C.)
- 24 (pending before the Legislature as this bill) shall establish by
- 25 written policy a heat emergency action plan which shall include
- 26 those procedures to be followed in the event of a heat emergency in
- 27 order to protect the health and welfare of its residents, and which
- 28 shall be approved by the department. The department shall review
- 29 a heat emergency action plan established pursuant to this act at
- 30 least once in each year.
- 31 b. A health care facility included within the provisions of this 32 act shall be required to notify the department immediately in the 33 event of a heat emergency.
- 34 (cf: P.L.1984, c.114, s.2)

- 36 5. Section 3 of P.L.1984, c.114 (C.26:2H-14.3) is amended to 37 read as follows:
- 38 3. The Commissioner of Health shall, pursuant to the provisions of the "Administrative Procedure Act," P.L.1968, c.410 39
- 40 (C.52:14B-1 et seq.), adopt rules and regulations necessary to 41 effectuate the purposes of this act. The regulations shall require
- 42 that:
- 43 a. Each health care facility included within the provisions of
- 44 this act and which is not equipped with air conditioning on the
- 45 effective date of P.L.1989, c.173 (C.26:2H-14.4 et al.), shall
- 46 provide for and operate adequate ventilation in all areas used by
- 47 patients or residents, including, but not limited to, the use of ceiling

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fans, wall fans or portable fans, where appropriate, so that the temperature in these areas does not exceed 82 degrees Fahrenheit, but the health care facility shall not directly assess patients or residents for the purchase or installation of the fans or other ventilating equipment.

(1) The regulations shall also provide that within two years after 6 7 the effective date of P.L.1989, c.173 (C.26:2H-14.4 et al.), every 8 nursing home included within the provisions of this act, and every 9 residential health care facility as specified in this paragraph, shall 10 be equipped with air conditioning, except that the commissioner 11 may grant a nursing home or residential health care facility a waiver 12 from the air conditioning requirement to give the nursing home or 13 residential health care facility one additional year to comply with 14 the air conditioning requirement, for which waiver the nursing 15 home or residential health care facility shall apply on a form and in 16 a manner prescribed by the commissioner, if the nursing home or 17 residential health care facility can demonstrate to the satisfaction of 18 the commissioner that the failure to grant such a waiver would pose 19 a serious financial hardship to the nursing home or residential 20 health care facility. The air conditioning shall be operated so that 21 the temperature in all areas used by patients or residents does not 22 exceed 82 degrees Fahrenheit. The air conditioning requirement 23 established in this subsection shall apply to a residential health care 24 facility only: (1) upon enactment into law of legislation that 25 increases the rate of reimbursement provided by the State under the 26 Supplemental Security Income program, P.L.1973, c.256 (C.44:7-27 85 et seq.), which rate is certified by the Commissioner of Health to 28 be sufficient to enable the facility to meet the costs of complying 29 with the requirement; and (2) if the facility qualifies for funds for 30 energy efficiency rehabilitation through the "Petroleum Overcharge 31 Reimbursement Fund," established pursuant to P.L.1987, c.231, 32 which funds can be applied towards equipping the facility with air 33 conditioning. A nursing home or residential health care facility 34 shall not directly assess patients or residents for the purchase or 35 installation of the air conditioning equipment.

(2) The regulations shall also provide that within two years after the effective date of P.L. , c. (C.) (pending before the Legislature as this bill), every dementia care home shall be equipped with air conditioning, except that the commissioner may grant a dementia care home a waiver from the air conditioning requirement to give the dementia care home one additional year to comply with the air conditioning requirement, for which waiver the dementia care home shall apply on a form and in a manner prescribed by the commissioner, if the dementia care home can demonstrate to the satisfaction of the commissioner that the failure to grant such a waiver would pose a serious financial hardship to that facility. The air conditioning shall be operated so that the

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- temperature in all areas used by residents does not exceed 82
 degrees Fahrenheit. A dementia care home shall not directly assess
 residents for the purchase or installation of the air conditioning
 equipment; and
 - b. Patients or residents are identified by predisposition, due to illness, medication or otherwise, to heat-related illness and that during a heat emergency, their body temperature, dehydration status and other symptoms of heat-related illness are monitored frequently and regularly, any anomalies are promptly reported to the attending physician, and any necessary therapeutic or palliative measures are instituted, including the provision of liquids, where required.
- 12 (cf: P.L.1989, c.173, s.1)

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- 6. Section 2 of P.L.1989, c.173 (C.26:2H-14.4) is amended to read as follows:
- 16 2. A nursing home or residential health care facility included 17 within the provisions of P.L.1984, c.114 (C.26:2H-14.1 et seq.) 18 which is constructed or expanded after the effective date of 19 P.L.1989, c.173 (C.26:2H-14.4 et al.), or a dementia care home 20 included within the provisions of P.L.1984, c.114 (C.26:2H-14.1 et 21 seq.) which is constructed or expanded after the effective date of 22 P.L., c. (C.) (pending before the Legislature as this bill), shall 23 be equipped with air conditioning in all areas used by patients or 24 residents, and the air conditioning shall be operated so that the
- temperature in these areas does not exceed 82 degrees Fahrenheit. (cf: P.L.1989, c.173, s.2)

- 28 7. Section 2 of P.L.1977, c.238 (C.26:2H-37) is amended to 29 read as follows:
- 2. As used in this act, and unless the context otherwise requires:
- a. "Boarding or nursing home" or "home" means: a private nursing home or convalescent home regulated under chapter 11 of
- Title 30 of the Revised Statutes [or]; a facility or institution,
- 35 private or public, regulated and licensed as an extended care
- 36 facility, skilled nursing home, nursing home, or intermediate care
- 37 facility pursuant to P.L.1971, c. 136 (C. 26:2H-1 to 26:2H-26) [or];
- a residential health care facility, as defined in section 1 of P.L.1953,
- 39 c. 212 (C. 30:11A-1) or licensed pursuant to P.L.1971, c. 136 (C.
- 40 26:2H-1 to 26:2H-26); or a dementia care home as defined in
- 41 <u>section 17 of P.L.</u>, c. (C.) (pending before the Legislature as
- 42 this bill).
- b. "Owner" means the holder or holders of the title in fee simple to the property on which the home is located.
- 45 c. "Licensee" means the holder or holders of a license to 46 operate a boarding or nursing home pursuant to chapter 11 of Title

- 1 30 of the Revised Statutes, P.L.1953, c. 212 (C. 30:11A-1 to 30:11A-14) or P.L.1971, c. 136 (C. 26:2H-1 to 26:2H-26).
 - d. "Department" means the State Department of Health.

4 (cf: P.L.1979, c.496, s.24)

- 8. Section 3 of P.L.1991, c.201 (C.26:2H-55) is amended to read as follows:
 - 3. As used in this act:
 - "Adult" means an individual 18 years of age or older.

"Advance directive for health care" or "advance directive" means a writing executed in accordance with the requirements of this act. An "advance directive" may include a proxy directive or an instruction directive, or both.

"Attending physician" means the physician selected by, or assigned to, the patient who has primary responsibility for the treatment and care of the patient.

"Decision making capacity" means a patient's ability to understand and appreciate the nature and consequences of health care decisions, including the benefits and risks of each, and alternatives to any proposed health care, and to reach an informed decision. A patient's decision making capacity is evaluated relative to the demands of a particular health care decision.

"Declarant" means a competent adult who executes an advance directive.

"Do not resuscitate order" means a physician's written order not to attempt cardiopulmonary resuscitation in the event the patient suffers a cardiac or respiratory arrest.

"Emergency care" means immediate treatment provided in response to a sudden, acute and unanticipated medical crisis in order to avoid injury, impairment or death.

"Health care decision" means a decision to accept or to refuse any treatment, service or procedure used to diagnose, treat or care for a patient's physical or mental condition, including life-sustaining treatment. "Health care decision" also means a decision to accept or to refuse the services of a particular physician, nurse, other health care professional or health care institution, including a decision to accept or to refuse a transfer of care.

"Health care institution" means all institutions, facilities, and agencies licensed, certified, or otherwise authorized by State law to administer health care in the ordinary course of business, including hospitals, nursing homes, residential health care facilities, <u>dementia care homes</u>, home health care agencies, hospice programs operating in this State, mental health institutions, facilities or agencies, or institutions, facilities and agencies for the developmentally disabled. The term "health care institution" shall not be construed to include "health care professionals" as defined in this act.

"Health care professional" means an individual licensed by this State to administer health care in the ordinary course of business or practice of a profession.

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"Health care representative" means the individual designated by a declarant pursuant to the proxy directive part of an advance directive for the purpose of making health care decisions on the declarant's behalf, and includes an individual designated as an alternate health care representative who is acting as the declarant's health care representative in accordance with the terms and order of priority stated in an advance directive.

"Instruction directive" means a writing which provides instructions and direction regarding the declarant's wishes for health care in the event that the declarant subsequently lacks decision making capacity.

"Life-sustaining treatment" means the use of any medical device or procedure, artificially provided fluids and nutrition, drugs, surgery or therapy that uses mechanical or other artificial means to sustain, restore or supplant a vital bodily function, and thereby increase the expected life span of a patient.

"Other health care professionals" means health care professionals other than physicians and nurses.

"Patient" means an individual who is under the care of a physician, nurse or other health care professional.

"Permanently unconscious" means a medical condition that has been diagnosed in accordance with currently accepted medical standards and with reasonable medical certainty as total and irreversible loss of consciousness and capacity for interaction with the environment. The term "permanently unconscious" includes without limitation a persistent vegetative state or irreversible coma.

"Physician" means an individual licensed to practice medicine and surgery in this State.

"Proxy directive" means a writing which designates a health care representative in the event the declarant subsequently lacks decision making capacity.

"State" means a state, territory, or possession of the United States, the District of Columbia, or the Commonwealth of Puerto Rico.

"Terminal condition" means the terminal stage of an irreversibly fatal illness, disease or condition. A determination of a specific life expectancy is not required as a precondition for a diagnosis of a "terminal condition," but a prognosis of a life expectancy of six months or less, with or without the provision of life-sustaining treatment, based upon reasonable medical certainty, shall be deemed to constitute a terminal condition.

45 (cf: P.L.1991, c.201, s.3)

9. Section 2 of P.L.1977, c.448 (C.30:11B-2) is amended to read as follows:

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2. "Alzheimer's disease and related disorders" means a form of dementia characterized by a general loss of intellectual abilities of sufficient severity to interfere with social or occupational functioning.

"Community residence for the developmentally disabled" means any community residential facility housing up to 16 persons with developmental disabilities, which provides food, shelter, and personal guidance for persons with developmental disabilities who require assistance, temporarily or permanently, in order to live independently in the community. Such residences shall not be considered health care facilities within the meaning of the "Health Care Facilities Planning Act," P.L.1971, c.136 (C.26:2H-1 et seq.) and shall include, but not be limited to, group homes, halfway houses, supervised apartment living arrangements, and hostels.

"Community residence for the mentally ill" means any community residential facility which provides food, shelter, and personal guidance, under such supervision as required, to not more than 15 persons with mental illness who require assistance temporarily or permanently, in order to live independently in the community. These residences shall be approved for a purchase of service contract or an affiliation agreement pursuant to procedures established by the Division of Mental Health and Addiction Services in the Department of Human Services or the Division of Children's System of Care in the Department of Children and Families, as applicable. These residences shall not house persons who have been assigned to a State psychiatric hospital after having been found not guilty of a criminal offense by reason of insanity or unfit to be tried on a criminal charge. These residences shall not be considered health care facilities within the meaning of the "Health Care Facilities Planning Act," P.L.1971, c.136 (C.26:2H-1 et seq.) and shall include, but not be limited to, group homes, halfway houses, supervised apartment living arrangements, family care homes, and hostels.

"Community residence for persons with head injuries" means a community residential facility providing food, shelter, and personal guidance, under such supervision as required, to not more than 15 persons with head injuries, who require assistance, temporarily or permanently, in order to live in the community, and shall include, but not be limited to: group homes, halfway houses, supervised apartment living arrangements, and hostels. Such a residence shall not be considered a health care facility within the meaning of the "Health Care Facilities Planning Act," P.L.1971, c.136 (C.26:2H-1 et seq.).

"Dementia" means a chronic or persistent disorder of the mental processes due to organic brain disease, for which no curative

treatment is available, and marked by memory disorders, changes in personality, deterioration in personal care, impaired reasoning ability, and disorientation.

"Developmental disability" or "developmentally disabled" means a severe, chronic disability of a person which: a. is attributable to a mental or physical impairment or combination of mental or physical impairments; b. is manifest before age 22; c. is likely to continue indefinitely; d. results in substantial functional limitations in three or more of the following areas of major life activity, that is, selfcare, receptive and expressive language, learning, mobility, selfdirection and capacity for independent living, or economic selfsufficiency; and e. reflects the need for a combination and sequence of special interdisciplinary or generic care, treatment, or other services which are of lifelong or extended duration and are individually planned and coordinated. Developmental disability includes, but is not limited to, severe disabilities attributable to an intellectual disability, autism, cerebral palsy, epilepsy, spina bifida, and other neurological impairments where the above criteria are met.

"Mentally ill" or "mental illness" means any psychiatric disorder which has required an individual to receive either inpatient psychiatric care or outpatient psychiatric care on an extended basis.

"Person with head injury" means a person who has sustained an injury, illness, or traumatic changes to the skull, the brain contents or its coverings which results in a temporary or permanent physiobiological decrease of cognitive, behavioral, social, or physical functioning which causes partial or total disability, but excluding a person with Alzheimer's disease and related disorders or other forms of dementia.

(cf: P.L.2012, c.16, s.125)

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- 10. Section 2 of P.L.1978, c.159 (C.40:55D-66.2) is amended to read as follows:
 - 2. As used in this act:
- 35 "Community residence for the developmentally disabled" 36 means any community residential facility licensed pursuant to 37 P.L.1977, c.448 (C.30:11B-1 et seq.) providing food, shelter, and 38 personal guidance, under such supervision as required, to not more 39 than 15 developmentally disabled or mentally ill persons, who 40 require assistance, temporarily or permanently, in order to live in 41 the community, and shall include, but not be limited to: group 42 homes, halfway houses, intermediate care facilities, supervised 43 apartment living arrangements, and hostels. Such a residence shall 44 not be considered a health care facility within the meaning of the 45 "Health Care Facilities Planning Act," P.L.1971, c.136 (C.26:2H-1 46 et al.). In the case of such a community residence housing mentally 47 ill persons, such residence shall have been approved for a purchase

- 1 of service contract or an affiliation agreement pursuant to such
- 2 procedures as shall be established by regulation of the Division of
- Mental Health and [Hospitals of] Addiction Services in the 3
- 4 Department of Human Services. As used in this act,
- 5 "developmentally disabled person" means a person who is
- 6 developmentally disabled as defined in section 2 of P.L.1977, c.448
- 7 (C.30:11B-2), and "mentally ill person" means a person who is
- 8 afflicted with a mental illness as defined in R.S.30:4-23, but shall
- 9 not include a person who has been committed after having been
- 10 found not guilty of a criminal offense by reason of insanity or
- 11 having been found unfit to be tried on a criminal charge.
 - b. "Community shelter for victims of domestic violence" means any shelter approved for a purchase of service contract and certified
- 13 14 pursuant to standards and procedures established by regulation of
- 15 the Department of Human Services pursuant to P.L.1979, c.337
- 16 (C.30:14-1 et seq.), providing food, shelter, medical care, legal
- 17 assistance, personal guidance, and other services to not more than
- 18 15 persons who have been victims of domestic violence, including
- 19 any children of such victims, who temporarily require shelter and
- 20 assistance in order to protect their physical or psychological
- 21 welfare.

- 22 c. "Community residence for persons with head injuries"
- 23 means a community residential facility licensed pursuant to
- 24 P.L.1977, c.448 (C.30:11B-1 et seq.) providing food, shelter, and
- 25 personal guidance, under such supervision as required, to not more
- 26 than 15 persons with head injuries, who require assistance,
- 27 temporarily or permanently, in order to live in the community, and
- 28 shall include, but not be limited to: group homes, halfway houses,
- 29 supervised apartment living arrangements, and hostels. Such a
- 30 residence shall not be considered a health care facility within the
- 31 meaning of the "Health Care Facilities Planning Act," P.L.1971,
- 32 c.136 (C.26:2H-1 et al.).
- 33 "Person with head injury" means a person who has sustained
- an injury, illness, or traumatic changes to the skull, the brain 34 35
- contents, or its coverings which results in a temporary or permanent
- 36 physiobiological decrease of mental, cognitive, behavioral, social,
- 37 or physical functioning which causes partial or total disability, but 38
- excluding a person with Alzheimer's disease and related disorders
- 39 or other forms of dementia.
- 40 "Community residence for the terminally ill" means any
- 41 community residential facility operated as a hospice program
- 42 providing food, shelter, personal guidance, and health care services,
- 43 under such supervision as required, to not more than 15 terminally
- 44 ill persons.
- 45 f. "Alzheimer's disease and related disorders" means a form of
- 46 dementia characterized by a general loss of intellectual abilities of

- 1 <u>sufficient severity to interfere with social or occupational</u> 2 <u>functioning.</u>
- g. "Dementia" means a chronic or persistent disorder of the
 mental processes due to organic brain disease, for which no curative
 treatment is available, and marked by memory disorders, changes in
 personality, deterioration in personal care, impaired reasoning
 ability, and disorientation.
- 8 (cf: P.L.1997, c.321, s.2)

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- 10 11. Section 2 of P.L.1977, c.239 (C.52:27G-2) is amended to read as follows:
- 12 2. As used in this act, unless the context clearly indicates 13 otherwise:
 - a. "Abuse" means the willful infliction of physical pain, injury, or mental anguish; unreasonable confinement; or the willful deprivation of services which are necessary to maintain a person's physical and mental health. However, no person shall be deemed to be abused for the sole reason he is being furnished nonmedical remedial treatment by spiritual means through prayer alone, in accordance with a recognized religious method of healing, in lieu of medical treatment;
 - b. An "act" of any facility or government agency shall be deemed to include any failure or refusal to act by such facility or government agency;
 - c. "Administrator" means any person who is charged with the general administration or supervision of a facility, whether or not such person has an ownership interest in such facility, and whether or not such person's functions and duties are shared with one or more other persons;
- d. "Caretaker" means a person employed by a facility to provide care or services to an elderly person, and includes, but is not limited to, the administrator of a facility;
- e. "Exploitation" means the act or process of using a person or his resources for another person's profit or advantage without legal entitlement to do so;
- f. "Facility" means any facility or institution, whether public or private, offering health or health related services for the institutionalized elderly, and which is subject to regulation, visitation, inspection, or supervision by any government agency.
- 40 Facilities include, but are not limited to, nursing homes, skilled
- 41 nursing homes, intermediate care facilities, extended care facilities,
- 42 convalescent homes, rehabilitation centers, residential health care
- 43 facilities, dementia care homes, special hospitals, veterans'
- 44 hospitals, chronic disease hospitals, psychiatric hospitals, mental
- 45 hospitals, developmental centers or facilities, day care facilities for
- 46 the elderly and medical day care centers;

- "Government agency" means any department, division, 1 2 office, bureau, board, commission, authority, or any other agency or 3 instrumentality created by the State or to which the State is a party, 4 or by any county or municipality, which is responsible for the 5 regulation, visitation, inspection, or supervision of facilities, or which provides services to patients, residents, or clients of 6 7 facilities;
- 8 "Guardian" means any person with the legal right to manage 9 the financial affairs and protect the rights of any patient, resident, or client of a facility, who has been declared an incapacitated person 10 11 by a court of competent jurisdiction;
- "Institutionalized elderly," "elderly" or "elderly person" 12 13 means any person 60 years of age or older, who is a patient, 14 resident, or client of any facility;
- 15 "Office" means the Office of the Ombudsman for the 16 Institutionalized Elderly established herein;
 - "Ombudsman" means the administrator and chief executive officer of the Office of the Ombudsman for the Institutionalized Elderly;
 - "Patient, resident or client" means any elderly person who is 1. receiving treatment or care in any facility in all its aspects, including, but not limited to, admission, retention, confinement, commitment, period of residence, transfer, discharge, and any instances directly related to such status.

25 (cf: P.L. 2010, c.50, s.79)

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- 27 12. Section 3 of P.L.1979, c.496 (C.55:13B-3) is amended to 28 read as follows:
 - 3. As used in this act:
- 29 30 "Boarding house" means any building, together with any 31 related structure, accessory building, any land appurtenant thereto, 32 and any part thereof, which contains two or more units of dwelling 33 space arranged or intended for single room occupancy, exclusive of 34 any such unit occupied by an owner or operator, and wherein 35 personal or financial services are provided to the residents, 36 including any residential hotel or congregate living arrangement, 37 but excluding any hotel, motel, or established guest house wherein a 38 minimum of 85[%] percent of the units of dwelling space are 39 offered for limited tenure only, any resource family home as 40 defined in section 1 of P.L.1962, c.137 (C.30:4C-26.1), any community residence for the developmentally disabled and any 41 42 community residence for the mentally ill as defined in section 2 of 43 P.L.1977, c.448 (C.30:11B-2), any adult family care home as 44 defined in section 3 of P.L.2001, c.304 (C.26:2Y-3), any dormitory 45 owned or operated on behalf of any nonprofit institution of primary, 46 secondary, or higher education for the use of its students, any

building arranged for single room occupancy wherein the units of

- dwelling space are occupied exclusively by students enrolled in a
- 2 full-time course of study at an institution of higher education
- 3 approved by the New Jersey Commission on Higher Education, any
- 4 facility or living arrangement operated by, or under contract with,
- 5 any State department or agency, upon the written authorization of
- 6 the commissioner, and any owner-occupied, one-family residential
- dwelling made available for occupancy by not more than six guests,
- 8 where the primary purpose of the occupancy is to provide charitable
- 9 assistance to the guests and where the owner derives no income
- from the occupancy. A dwelling shall be deemed "owner-occupied"
- 11 within the meaning of this section if it is owned or operated by a
- 12 nonprofit religious or charitable association or corporation and is
- 13 used as the principal residence of a minister or employee of that
- 14 corporation or association. For any such dwelling, however, fire
- detectors shall be required as determined by the Department of
- 16 Community Affairs.

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- b. "Commissioner" means the Commissioner of the Department of Community Affairs.
- c. "Financial services" means any assistance permitted or required by the commissioner to be furnished by an owner or operator to a resident in the management of personal financial matters, including, but not limited to, the cashing of checks, holding of personal funds for safekeeping in any manner or assistance in the purchase of goods or services with a resident's personal funds.
- d. "Limited tenure" means residence at a rooming or boarding house on a temporary basis, for a period lasting no more than 90 days, when a resident either maintains a primary residence at a location other than the rooming or boarding house or intends to establish a primary residence at such a location and does so within 90 days after taking up original residence at the rooming or boarding house.
- e. "Operator" means any individual who is responsible for the daily operation of a rooming or boarding house.
- f. "Owner" means any person who owns, purports to own, or exercises control of any rooming or boarding house.
- g. "Personal services" means any services permitted or required to be furnished by an owner or operator to a resident, other than shelter, including, but not limited to, meals or other food services, and assistance in dressing, bathing, or attending to other personal needs.
- h. "Rooming house" means a boarding house wherein no personal or financial services are provided to the residents.
 - i. "Single room occupancy" means an arrangement of dwelling space which does not provide a private, secure dwelling space arranged for independent living, which contains both the sanitary and cooking facilities required in dwelling spaces pursuant to the "Hotel and Multiple Dwelling Law," P.L.1967, c.76 (C.55:13A-1 et

- seq.), and which is not used for limited tenure occupancy in a hotel, motel, or established guest house, regardless of the number of individuals occupying any room or rooms.
 - j. "Unit of dwelling space" means any room, rooms, suite, or portion thereof, whether furnished or unfurnished, which is occupied or intended, arranged, or designed to be occupied for sleeping or dwelling purposes by one or more persons.
 - k. **[**"Alzheimer's disease and related disorders" means a form of dementia characterized by a general loss of intellectual abilities of sufficient severity to interfere with social or occupational functioning. **]** (Deleted by amendment, P.L., c. (pending before the Legislature as this bill)
- 1. **I**"Dementia" means a chronic or persistent disorder of the
 14 mental processes due to organic brain disease, for which no curative
 15 treatment is available, and marked by memory disorders, changes in
 16 personality, deterioration in personal care, impaired reasoning
 17 ability and disorientation. (Deleted by amendment, P.L., c.
 18 (pending before the Legislature as this bill)

19 (cf: P.L.2004, c.130, s.123)

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- 21 13. Section 6 of P.L.1979, c.496 (C.55:13B-6) is amended to read as follows:
 - 6. The commissioner shall establish standards to ensure that every rooming and boarding house in this State is constructed and operated in such a manner as will protect the health, safety, and welfare of its residents and at the same time preserve and promote a homelike atmosphere appropriate to such facilities, including, but not limited to, standards to provide for the following:
 - a. Safety from fire;
- 30 b. Safety from structural, mechanical, plumbing, and electrical deficiencies;
- 32 c. Adequate light and ventilation;
- d. Physical security;
- e. Protection from harassment, fraud, and eviction without due cause;
 - f. Clean and reasonably comfortable surroundings;
- g. Adequate personal and financial services rendered inboarding houses;
- 39 h. Disclosure of owner identification information;
- i. Maintenance of orderly and sufficient financial and occupancy records;
- j. Referral of residents, by the operator, to social service and health agencies for needed services;
- 44 k. Assurance that no constitutional, civil, or legal right will be 45 denied solely by reason of residence in a rooming or boarding 46 house:

- 1 l. Reasonable access for employees of public and private 2 agencies, and reasonable access for other citizens upon receiving 3 the consent of the resident to be visited by them;
 - m. Opportunity for each resident to live with as much independence, autonomy, and interaction with the surrounding community as [he] the resident is capable of [; and] doing.
 - n. [Assurance that the needs of residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, will be met in accordance with standards adopted by regulation of the commissioner, which shall be promulgated no later than 90 days after the effective date of this act, which shall include, at a minimum, the following:
 - (1) staffing levels;
 - (2) staff qualifications and training;
 - (3) special dietary needs of residents;
 - (4) special supervision requirements relating to the individual needs of residents;
 - (5) building safety requirements appropriate to the needs of residents;
 - (6) special health monitoring of residents by qualified, licensed health care professionals, including a requirement that a medical assessment be performed on a resident with special needs as described in this subsection, as determined necessary by the commissioner, prior to admission and on a quarterly basis thereafter to ensure that the facility is appropriate to the needs of the resident; and
 - (7) criteria for discharging residents which shall be set forth in the admission agreement which shall be provided to the resident or the resident's representative prior to or upon admission. The commissioner may revoke the license of any provider who violates the criteria for discharging residents. (Deleted by amendment, P.L. c. (pending before the Legislature as this bill)
- 33 <u>c. (pending before the Le</u>34 (cf: P.L.1997, c.260, s.2)

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- 36 14. Section 7 of P.L.1979, c.496 (C.55:13B-7) is amended to read as follows:
- 38 7. a. (1) No person shall own or operate a rooming or 39 boarding house, hold out a building as available for rooming or 40 boarding house occupancy, or apply for any necessary construction 41 or planning approvals related to the establishment of a rooming or 42 boarding house without a valid license to own or operate such a 43 facility, issued by the commissioner and, if appropriate, by a 44 municipality which has elected to issue such licenses pursuant to 45 P.L.1993, c.290 (C.40:52-9 et seq.).
- 46 (2) [No person shall own or operate a rooming or boarding 47 house that offers or advertises or holds itself out as offering

- personal care services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, hold out a building as available for rooming or boarding house occupancy for such residents, or apply for any necessary construction or planning approvals related to the establishment of a rooming or boarding house for such residents without a valid license to own or operate such a facility, issued by the commissioner.] (Deleted by amendment, P.L., c. (pending before the Legislature as this bill)
 - (3) Any person found to be in violation of this subsection shall be liable for a civil penalty of not more than [\$5,000.00] \$5,000 for each building so owned or operated, which penalty shall be payable to the appropriate licensing entity.

b. The commissioner shall establish separate categories of licensure for owning and for operating a rooming or boarding house, provided, however, that an owner who himself operates such a facility need not also possess an operator's license.

If an owner seeking to be licensed is other than an individual, the application shall state the name of an individual who is a member, officer, or stockholder in the corporation or association seeking to be licensed, and the same shall be designated the primary owner of the rooming or boarding house.

Each application for licensure shall contain such information as the commissioner may prescribe and, unless the person is licensed by a municipality to own or operate a rooming and boarding house pursuant to P.L.1993, c.290 (C.40:52-9 et seq.), shall be accompanied by a fee established by the commissioner which shall not be less than [\$150.00] \$150 or more than [\$600.00] \$600, except as provided in subsection e. of this section. If, upon receipt of the fee and a review of the application, the commissioner determines that the applicant will operate, or provide for the operation of, a rooming or boarding house in accordance with the provisions of this act, [he] the commissioner shall issue a license to [him] the applicant.

Each license shall be valid for one year from the date of issuance, but may be renewed upon application by the owner or operator and upon payment of the same fee required for initial licensure.

c. Only one license shall be required to own a rooming or boarding house, but an endorsement thereto shall be required for each separate building owned and operated, or intended to be operated, as a rooming or boarding house. Each application for licensure or renewal shall indicate every such building for which an endorsement is required. If, during the term of a license, an additional endorsement is required, or an existing one is no longer required, an amended application for licensure shall be submitted.

- d. A person making application for, or who has been issued, a license to own or operate a rooming or boarding house who conceals the fact that the person has been denied a license to own or operate a residential facility, or that the person's license to own or operate a residential facility has been revoked by a department or agency of state government in this or any other state is liable for a civil penalty of not more than [\$5,000.00] \$5,000, and any license to own or operate a rooming or boarding house which has been issued to that person shall be immediately revoked.
 - e. The commissioner shall annually review the cost of administering and enforcing this section and shall establish by rule such changes to the license application fee as may be necessary to cover the cost of such administration and enforcement.

(cf: P.L.2007, c.339, s.1)

- 15. (New section) a. The Department of Community Affairs shall cease its responsibilities for licensure, inspections, and the establishment and enforcement of standards with respect to each rooming or boarding house that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, as of the date that the Department of Health assumes these responsibilities pursuant to section 18 of P.L. , c. (C.) (pending before the Legislature as this bill).
- b. The Department of Community Affairs shall establish and enter into an inter-agency agreement with the Department of Health as necessary for the purposes of this section and section 18 of P.L., c. (C.) (pending before the Legislature as this bill).

16. (New section) The Department of Community Affairs shall not issue a license to any person to own or operate a new rooming or boarding house that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, on or after the date of enactment of P.L. , c. (C.) (pending before the Legislature as this bill).

- 17. (New section) As used in sections 18 through 26 of P.L. c. (C.) (pending before the Legislature as this bill):
- "Alzheimer's disease and related disorders" means a form of dementia characterized by a general loss of intellectual abilities of sufficient severity to interfere with social or occupational functioning.
- "Commissioner" means the Commissioner of Health.
- "Department" means the Department of Health.
- "Dementia" means a chronic or persistent disorder of the mentalprocesses due to organic brain disease, for which no curative

treatment is available, and marked by memory disorders, changes in personality, deterioration in personal care, impaired reasoning ability, and disorientation.

"Dementia care home" means a community residential facility that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, is subject to the licensure authority of the Department of Health as a health care facility pursuant to P.L.1971, c.136 (C. 26:2H-1 et seq.), and meets the requirements of section 19 of P.L. , c. (C.) (pending before the Legislature as this bill).

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- 18. (New section) a. (1) Notwithstanding any law, rule, or regulation to the contrary, commencing on or after the effective date of P.L., c. (C.) (pending before the Legislature as this bill) and subject to the provisions of subsection b. of this section, the Department of Health shall be responsible for licensure, inspections, and the establishment and enforcement of standards with respect to each community residential facility in the State that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, which shall be thereafter known as a dementia care home.
- (2) The department shall be empowered to exercise such authority with respect to a dementia care home as the department is granted with respect to any other health care facility licensed by the department, pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) and any rules and regulations adopted pursuant thereto, and in accordance with the provisions of P.L. , c. (C.) (pending before the Legislature as this bill).
- b. The department shall establish and enter into an inter-agency agreement with the Department of Community Affairs as necessary for the purposes of subsection a. of this section.
- c. (1) Whenever any reference is made in any law, rule, regulation, order, contract, document, or judicial or administrative proceeding to rooming and boarding houses for residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, the same shall be deemed to mean or refer to "dementia care homes."
- (2) Whenever the term "Department of Community Affairs" appears or any reference is made thereto in any law, rule, regulation, order, contract, document, or judicial or administrative proceeding pertaining to rooming and boarding houses for residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of

dementia, the same shall be deemed to mean or refer to the "Department of Health."

d. A dementia care home that is operating as a rooming or boarding house that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, on the effective date of P.L., c. (C.) (pending before the Legislature as this bill) shall be granted provisional licensure by the department for a period of one year following the effective date. At the end of that period, the department shall issue a license to the facility pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) or make continued licensure subject to such actions by the facility as the commissioner determines necessary to effectuate the purposes of P.L.1971, c.136 and P.L., c. (C.) (pending before the Legislature as this bill).

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19. (New section) a. A dementia care home shall be a facility, whether in single or multiple dwellings, whether public or private, whether incorporated or unincorporated, whether for profit or nonprofit, operated at the direction of or under the management of an individual or individuals, corporation, partnership, society, or association, which furnishes food and shelter to four or more persons 18 years of age or older who are unrelated to the operator of the facility, and which provides dietary services, recreational activities, supervision of self-administration of medications, supervision of and assistance in activities of daily living and assistance in obtaining health services to any one or more of such persons, in addition to such facilities, services, activities, and assistance as the Commissioner of Health may prescribe by regulation that are designed to meet the specific needs of residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia. A dementia care home shall not include: a community residence for the developmentally disabled as defined in section 2 of P.L.1977, c. 448 (C.30:11B-2); a facility or living arrangement operated by, or under contract with, a State department or agency, upon the written authorization of the commissioner; or a privately operated establishment licensed pursuant to chapter 11 of Title 30 of the Revised Statutes.

b. A resident of a dementia care home shall be a person with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, as prescribed by regulation of the commissioner, who is: 18 years of age or older; ambulant with or without assistive devices; certified by a licensed physician to be free from communicable disease and not in need of skilled nursing care; and, except in the case of a person 65 years of age or over, in need of dietary services, supervision of self-administration of medications, supervision of

- 1 and assistance in activities of daily living, or assistance in obtaining
- 2 health care services. A resident of a dementia care home shall not
- 3 be given skilled nursing care while a resident, except that the
- 4 provisions of this subsection shall not be construed to prevent: care
- 5 of residents in emergencies or during temporary illness for a period
- 6 of one week or less; or a licensed physician from ordering nursing
 - or other health care services for the resident.

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- 20. (New section) a. (1) A person shall not operate a dementia care home, or offer, advertise, or hold out a facility as a dementia care home, hold out a building as available for occupancy by dementia care home residents, or apply for any necessary construction or planning approvals related to the establishment of a dementia care home, without a valid license having been issued by the department for the operation of that facility in accordance with
- the provisions of P.L.1971, c.136 (C.26:2H-1 et seq.) and P.L. $\,$, c.
- 17 (C.) (pending before the Legislature as this bill).
 - (2) A person shall not offer, advertise, or hold out a dementia care home as another type of health care facility licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.).
 - (3) A person found to be in violation of paragraph (1) or (2) of this subsection shall be liable for a civil penalty for each building so operated in accordance with the provisions of section 24 of P.L., c. (C.) (pending before the Legislature as this bill).
 - b. Notwithstanding the provisions of any municipal ordinance to the contrary, a dementia care home shall meet such requirements as the commissioner shall establish by regulation for the posting of visible signs in its local community that identify the location of the facility.

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- 21. (New section) The commissioner shall establish standards to ensure that each dementia care home is constructed and operated in such a manner as will protect the health, safety, and welfare of its residents and at the same time preserve and promote a homelike atmosphere appropriate to these facilities, including, but not limited to, standards to provide for the following:
- a. Safety from fire;
- 38 b. Safety from structural, mechanical, plumbing, and electrical deficiencies;
 - c. Adequate light and ventilation;
- d. Physical security;
- e. Protection from harassment, fraud, and eviction without due cause;
 - f. Clean and reasonably comfortable surroundings;
- g. Adequate personal and financial services rendered in the facility;
 - h. Disclosure of owner identification information;

- i. Maintenance of orderly and sufficient financial and cocupancy records;
 - j. Referral of residents, by the operator, to social service and health care providers for needed services;
 - k. Assurance that no constitutional, civil, or legal right will be denied solely by reason of residence in a dementia care home;
 - 1. Reasonable access for employees of public and private agencies, and reasonable access for other citizens upon receiving the consent of the resident to be visited by them;
 - m. Opportunity for each resident to live with as much independence, autonomy, and interaction with the surrounding community as the resident is capable of doing;
 - n. Assurance that the needs of residents of a dementia care home will be met, which shall include, at a minimum, the following:
 - (1) staffing levels, which shall ensure that the ratio of direct care staff to residents in the facility is equal to or higher than that which existed on the date of enactment of P.L. , c. (C.) (pending before the Legislature as this bill);
 - (2) staff qualifications and training;

- (3) special dietary needs of residents;
- (4) special supervision requirements relating to the individual needs of residents;
- (5) building safety requirements appropriate to the needs of residents, including the requirement to maintain the operation 24 hours a day, seven days a week, of window, door, and any other locks or security system designed to prevent the elopement of a resident;
- (6) special health monitoring of residents by qualified, licensed health care professionals, including a requirement that a medical assessment by a physician be performed on a resident with special needs as described in this subsection, as determined necessary by the commissioner, prior to admission and on a quarterly basis thereafter, to ensure that the facility is appropriate to the needs of the resident; and
- (7) criteria for discharging residents which shall be set forth in the admission agreement, which shall be provided to the resident or the resident's representative prior to or upon admission. The commissioner may revoke the license of any provider who violates the criteria for discharging residents.

22. (New section) a. Notwithstanding the provisions of any other law or regulation to the contrary, the commissioner may grant, to a dementia care home that is operating as a rooming or boarding house that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and

47 related disorders or other forms of dementia, on the effective date of

- 1 P.L., c. (C.) (pending before the Legislature as this bill), a
- 2 temporary or permanent waiver of one or more requirements
- 3 established by regulation of the commissioner for health care
- 4 facilities licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.)
- 5 that the commissioner has determined are otherwise applicable to
- 6 the dementia care home, if the dementia care home can demonstrate
- 7 to the satisfaction of the commissioner that:
 - (1) the granting of the waiver would not pose a threat to the health, safety, or welfare of its residents; and
 - (2) the failure to grant such a waiver would pose a serious financial hardship to the facility.
 - b. A dementia care home that is seeking a waiver pursuant to subsection a. of this section shall apply for the waiver on a form and in a manner prescribed by the commissioner.

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- 23. (New section) a. Every resident of a dementia care home facility shall have the right:
 - (1) To manage the resident's own financial affairs;
 - (2) To wear the resident's own clothing;
- (3) To determine the resident's own dress, hair style, or other personal effects according to individual preference;
- (4) To retain and use the resident's personal property in the resident's immediate living quarters, so as to maintain individuality and personal dignity, except where the facility can demonstrate that it would be unsafe, impractical to do so, or infringe upon the rights of others, and that mere convenience is not the facility's motive to restrict this right;
 - (5) To receive and send unopened correspondence;
- (6) To unaccompanied access to a telephone at a reasonable hour and to a private phone at the resident's expense;
 - (7) To privacy;
- (8) To retain the services of the resident's own personal physician at the resident's own expense or under a health care plan and to confidentiality and privacy concerning the resident's medical condition and treatment;
- (9) To unrestricted communication, including personal visitation with any person of the resident's choice, at any reasonable hour;
- (10) To make contacts with the community and to achieve the highest level of independence, autonomy, and interaction with the community of which the resident is capable;
- (11) To present grievances on behalf of the resident or others to the operator, State governmental agencies, or other persons without threat of reprisal in any form or manner;
- 44 (12) To a safe and decent living environment and considerate 45 and respectful care that recognizes the dignity and individuality of 46 the resident;

- (13) To refuse to perform services for the facility, except as contracted for by the resident and the operator;
 - (14) To practice the religion of the resident's choice, or to abstain from religious practice; and
 - (15) To not be deprived of any constitutional, civil, or legal right solely by reason of residence in a dementia care home.
 - b. The operator of a dementia care home shall ensure that a written notice of the rights set forth in subsection a. of this section is given to every resident upon admittance to the facility and to each resident upon request. The operator shall also post this notice in a conspicuous public place in the facility. This notice shall include the name, address, and telephone numbers of the Office of the Ombudsman for the Institutionalized Elderly, county welfare agency, and county office on aging.
 - c. A person or resident whose rights as set forth in subsection a. of this section are violated shall have a cause of action against any person committing the violation. The action may be brought in any court of competent jurisdiction to enforce those rights and to recover actual and punitive damages for their violation. A plaintiff who prevails in the action shall be entitled to recover reasonable attorney's fees and costs of the action.

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24. (New section) A person who operates a dementia care home on or after the effective date of P.L., c. (C.) (pending before the Legislature as this bill) shall not provide health care services in that facility. Nothing in this section shall be construed to prohibit a licensed health care professional, who is acting within the scope of that person's license, from providing health care services to a resident of a dementia care home.

25. (New section) A person or entity found to be in violation of the provisions of P.L., c. (C.) (pending before the Legislature as this bill), or any rules or regulations adopted by the commissioner pursuant thereto with respect to the operation of a dementia care home, shall be subject to a penalty as provided for in sections 13 or 14 of P.L.1971, c.136 (C.26:2H-13 or 26:2H-14).

26. (New section) The commissioner and the Commissioner of Community Affairs, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt, notwithstanding any provision of P.L.1968, c.410 (C.52:14B-1 et seq.) to the contrary, immediately upon filing with the Office of Administrative Law, such rules and regulations as the commissioners deem necessary to effectuate the purposes of P.L. ,) (pending before the Legislature as this bill), which shall be effective for a period not to exceed 12 months following the effective date of P.L. , c. . The regulations shall thereafter be

amended, adopted, or readopted, in accordance with the provisions of P.L.1968, c.410 (C.52:14B-1 et seq.), as the commissioner or the Commissioner of Community Affairs determine necessary to effectuate the purposes of P.L., c. (C.) (pending before the Legislature as this bill).

27. This act shall take effect on the first day of the seventh month next following the date of enactment, except that section 16 shall take effect immediately, but the Commissioners of Health and Community Affairs may take such anticipatory administrative action in advance thereof as shall be necessary for the implementation of this act.

STATEMENT

This bill transfers responsibility for the oversight of rooming or boarding houses for persons with dementia from the Department of Community Affairs (DCA) to the Department of Health (DOH), which is to license these facilities as "dementia care homes."

The bill amends the "Rooming and Boarding House Act of 1979" to delete its provisions concerning the regulation of rooming or boarding houses for persons with dementia by DCA, and creates new sections of law that supplement chapter 2H of Title 26 of the Revised Statutes to set forth the regulatory authority of DOH over dementia care homes and the regulatory requirements that will apply to these entities as health care facilities licensed pursuant to the "Health Care Facilities Planning Act."

DCA is prohibited under this bill from issuing a license to any person to own or operate a new rooming or boarding house that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, on or after the date of enactment of the bill.

DOH is empowered under this bill to exercise such authority with respect to a dementia care home as it is granted with respect to any other DOH-licensed health care facility. A dementia care home will be granted provisional licensure by DOH for a period of one year following the effective date of the bill. At the end of that period, DOH is to issue a license to the facility or make continued licensure subject to such actions by the facility as the Commissioner of Health determines necessary to effectuate the purposes of the "Health Care Facilities Planning Act" and this bill.

The bill defines "dementia care home" as a community residential facility that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, is subject to the licensure authority of DOH as a health care facility, and meets the requirements of this bill.

The bill prohibits a person from operating, or advertising a facility as, a dementia care home without a valid license having been issued by DOH for the operation of that facility, or from advertising a dementia care home as another type of health care facility licensed by DOH.

The bill directs the Commissioner of Health to establish standards to protect the health, safety, and welfare of dementia care home residents, including standards that are designed to meet the particular needs of persons with dementia, and requires DOH to include dementia care homes among the long-term care facilities for which it posts information on its website about the ownership of the facility and any violation of statutory standards or DOH regulations.

In addition, the bill sets forth the rights of dementia care home residents and requires a dementia care home operator to ensure that a written notice of these rights is given to every resident upon admittance to the facility and to each resident upon request. The operator is to post this notice in a conspicuous public place in the facility, and the notice is to include the name, address, and telephone numbers of the Office of the Ombudsman for the Institutionalized Elderly, county welfare agency, and county office on aging.

The bill also includes dementia care homes among those facilities with respect to which the Office of the Ombudsman for the Institutionalized Elderly is authorized to receive, investigate, and resolve complaints and to initiate actions to secure, preserve, and promote the health, safety, and welfare, and the civil and human rights, of their elderly residents.

The Commissioner of Health is authorized to grant, to a dementia care home that is operating as a rooming or boarding house that provides services to persons with dementia on the effective date of the bill, a temporary or permanent waiver of one or more requirements established by regulation of the commissioner for licensed health care facilities that the commissioner has determined are otherwise applicable to the dementia care home, if the dementia care home can demonstrate to the satisfaction of the commissioner that: the granting of the waiver would not threaten the health, safety, or welfare of its residents; and the failure to grant a waiver would pose a serious financial hardship to the facility.

Dementia care homes would be exempted from the certificate of need requirement that applies to the construction or expansion of DOH-licensed health care facilities such as hospitals and nursing homes.

The bill provides for the imposition of penalties by DOH with respect to a dementia care home in the same manner as would apply

A1102 VAINIERI HUTTLE, WATSON COLEMAN

- in the case of a violation of the "Health Care Facilities PlanningAct" by any other licensee.
- Finally, the bill authorizes the Commissioners of Health and Community Affairs to establish and enter into an inter-agency agreement as necessary for its purposes, and to adopt rules and regulations to implement its provisions on an expedited basis for a period of up to 12 months following its effective date.
- The bill takes effect on the first day of the seventh month following enactment, but authorizes the Commissioners of Health and Community Affairs to take prior administrative action as necessary for its implementation.

ASSEMBLY HEALTH AND SENIOR SERVICES COMMITTEE

STATEMENT TO

ASSEMBLY, No. 1102

STATE OF NEW JERSEY

DATED: DECEMBER 4, 2014

The Assembly Health and Senior Services Committee reports favorably Assembly Bill No. 1102.

This bill transfers responsibility for the oversight of rooming and boarding houses for persons with dementia from the Department of Community Affairs (DCA) to the Department of Health (DOH), which is to license these facilities as "dementia care homes."

The bill amends the "Rooming and Boarding House Act of 1979" to delete its provisions concerning the regulation of rooming or boarding houses for persons with dementia by DCA, and creates new sections of law that supplement chapter 2H of Title 26 of the Revised Statutes to set forth the regulatory authority of DOH over dementia care homes and the regulatory requirements that will apply to these entities as health care facilities licensed pursuant to the "Health Care Facilities Planning Act."

DCA is prohibited under this bill from issuing a license to any person to own or operate a new rooming or boarding house that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, on or after the date of enactment of the bill.

DOH is empowered under this bill to exercise such authority with respect to a dementia care home as it is granted with respect to any other DOH-licensed health care facility. A dementia care home will be granted provisional licensure by DOH for a period of one year following the effective date of the bill. At the end of that period, DOH is to issue a license to the facility or make continued licensure subject to such actions by the facility as the Commissioner of Health determines necessary to effectuate the purposes of the "Health Care Facilities Planning Act" and this bill.

The bill defines "dementia care home" as a community residential facility that: (1) provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia; (2) is subject to the licensure authority of DOH as a health care facility; and (3) meets the requirements of this bill.

The bill prohibits a person from operating, or advertising a facility as, a dementia care home without a valid license having been issued by DOH for the operation of that facility, or from advertising a dementia care home as another type of health care facility licensed by DOH.

The bill directs the Commissioner of Health to establish standards to protect the health, safety, and welfare of dementia care home residents, including standards that are designed to meet the particular needs of persons with dementia, and requires DOH to include dementia care homes among the long-term care facilities for which it posts information on its website about the ownership of the facility and any violation of statutory standards or DOH regulations.

In addition, the bill sets forth the rights of dementia care home residents and requires a dementia care home operator to ensure that a written notice of these rights is given to every resident upon admittance to the facility and to each resident upon request. The operator is to post this notice in a conspicuous public place in the facility, and the notice is to include the name, address, and telephone numbers of the Office of the Ombudsman for the Institutionalized Elderly, county welfare agency, and county office on aging.

The bill also includes dementia care homes among those facilities with respect to which the Office of the Ombudsman for the Institutionalized Elderly is authorized to receive, investigate, and resolve complaints and to initiate actions to secure, preserve, and promote the health, safety, and welfare, and the civil and human rights, of their elderly residents.

The Commissioner of Health is authorized to grant to a dementia care home that is operating as a rooming or boarding house that provides services to persons with dementia on the effective date of the bill, a temporary or permanent waiver of one or more requirements established by regulation of the commissioner for licensed health care facilities that the commissioner has determined are otherwise applicable to the dementia care home, if the dementia care home can demonstrate to the satisfaction of the commissioner that: granting the waiver would not threaten the health, safety, or welfare of its residents; and the failure to grant a waiver would pose a serious financial hardship to the facility.

Dementia care homes would be exempted from the certificate of need requirement that applies to the construction or expansion of DOH-licensed health care facilities such as hospitals and nursing homes.

Dementia care homes would be prohibited from providing health care services and skilled nursing care to residents. However, nothing in the bill would prevent a health care professional from providing health care services to a dementia care home resident in an emergency or during periods of temporary illness.

The bill provides for the imposition of penalties by DOH with respect to a dementia care home in the same manner as would apply in the case of a violation of the "Health Care Facilities Planning Act" by any other licensee. Finally, the bill authorizes the Commissioners of Health and Community Affairs to establish and enter into an inter-agency agreement as necessary to effectuate the purposes of the bill, and to adopt rules and regulations to implement the provisions of the bill on an expedited basis for a period of up to 12 months following its effective date.

This bill was pre-filed for introduction in the 2014-2015 session pending technical review. As reported, the bill includes the changes required by technical review, which has been performed.

ASSEMBLY, No. 1102 STATE OF NEW JERSEY 216th LEGISLATURE

DATED: DECEMBER 18, 2014

SUMMARY

Synopsis: Provides for licensure of dementia care homes by DOH.

Type of Impact: Indeterminate State revenue increase.

Indeterminate State cost.

Agencies Affected: Department of Community Affairs, Department of Health

Office of Legislative Services Estimate

Fiscal Impact	
State Cost	Indeterminate increase- See comments below
State Revenue	Indeterminate increase- See comments below

- The Office of Legislative Services (OLS) estimates that Assembly Bill No. 1102 may result in increased revenue for the State through the collection of license and inspection fees by the Department of Health (DOH) from the newly designated dementia care homes. The bill provides no details on the range of these fees, but if the department establishes fees for these facilities at the same rate as current fees for similar facilities, the OLS estimates that the department will generate between \$10,680 and \$40,800 in fees the first year after enactment and between \$21,480 and \$76,800 in fees the following year.
- The DOH will also experience an increase in expenditures to license and provide regulatory oversight of the newly designated dementia care homes. These expenditures will most likely be offset by the additional revenue generated by the fees charged by the department to the operators and owners of dementia care homes.
- Additionally, the State will experience a reduction in State revenue for the first year after enactment of this bill as the approximately \$16,800 in current fees collected by the Department of Community Affairs (DCA) for the licensing of boarding homes for persons with dementia will no longer be collected.
- Furthermore, the bill provides new responsibilities to the Office of the Ombudsman for the Institutionalized Elderly which may result in minimal indeterminate costs for the office.



BILL DESCRIPTION

Assembly Bill No. 1102 of 2014 transfers responsibility for the oversight of rooming and boarding houses for persons with dementia from the DCA to the DOH, which is to license these facilities as "dementia care homes."

The bill amends the "Rooming and Boarding House Act of 1979" to delete its provisions concerning the regulation of rooming or boarding houses for persons with dementia by DCA, and creates new sections of law that supplement chapter 2H of Title 26 of the Revised Statutes to set forth the regulatory authority of DOH over dementia care homes and the regulatory requirements that will apply to these entities as health care facilities licensed pursuant to the "Health Care Facilities Planning Act."

The DCA is prohibited under this bill from issuing a license to any person to own or operate a new rooming or boarding house that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, on or after the date of enactment of the bill.

The DOH is empowered under this bill to exercise such authority with respect to a dementia care home as it is granted with respect to any other DOH-licensed health care facility. A dementia care home will be granted provisional licensure by DOH for a period of one year following the effective date of the bill. At the end of that period, DOH is to issue a license to the facility or make continued licensure subject to such actions by the facility as the Commissioner of Health determines necessary to effectuate the purposes of the "Health Care Facilities Planning Act" and this bill.

The bill defines "dementia care home" as a community residential facility that: (1) provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia; (2) is subject to the licensure authority of DOH as a health care facility; and (3) meets the requirements of this bill.

The bill prohibits a person from operating, or advertising a facility as, a dementia care home without a valid license having been issued by DOH for the operation of that facility, or from advertising a dementia care home as another type of health care facility licensed by DOH.

The bill directs the Commissioner of Health to establish standards to protect the health, safety, and welfare of dementia care home residents, including standards that are designed to meet the particular needs of persons with dementia, and requires DOH to include dementia care homes among the long-term care facilities for which it posts information on its website about the ownership of the facility and any violation of statutory standards or DOH regulations.

In addition, the bill sets forth the rights of dementia care home residents and requires a dementia care home operator to ensure that a written notice of these rights is given to every resident upon admittance to the facility and to each resident upon request. The operator is to post this notice in a conspicuous public place in the facility, and the notice is to include the name, address, and telephone numbers of the Office of the Ombudsman for the Institutionalized Elderly, county welfare agency, and county office on aging.

The bill also includes dementia care homes among those facilities with respect to which the Office of the Ombudsman for the Institutionalized Elderly is authorized to receive, investigate, and resolve complaints and to initiate actions to secure, preserve, and promote the health, safety, and welfare, and the civil and human rights, of their elderly residents.

The Commissioner of Health is authorized to grant to a dementia care home that is operating as a rooming or boarding house that provides services to persons with dementia on the effective date of the bill, a temporary or permanent waiver of one or more requirements established by regulation of the commissioner for licensed health care facilities that the commissioner has determined are otherwise applicable to the dementia care home, if the dementia care home can

demonstrate to the satisfaction of the commissioner that: granting the waiver would not threaten the health, safety, or welfare of its residents; and the failure to grant a waiver would pose a serious financial hardship to the facility.

Dementia care homes would be exempted from the certificate of need requirement that applies to the construction or expansion of DOH-licensed health care facilities such as hospitals and nursing homes.

Dementia care homes would be prohibited from providing health care services and skilled nursing care to residents. However, nothing in the bill would prevent a health care professional from providing health care services to a dementia care home resident in an emergency or during periods of temporary illness.

The bill provides for the imposition of penalties by DOH with respect to a dementia care home in the same manner as would apply in the case of a violation of the "Health Care Facilities Planning Act" by any other licensee.

Finally, the bill authorizes the Commissioners of Health and Community Affairs to establish and enter into an inter-agency agreement as necessary to effectuate the purposes of the bill, and to adopt rules and regulations to implement the provisions of the bill on an expedited basis for a period of up to 12 months following its effective date.

FISCAL ANALYSIS

EXECUTIVE BRANCH

None received.

OFFICE OF LEGISLATIVE SERVICES

The OLS estimates that Assembly Bill No. 1102 will result in increased revenue and increased expenditures by the DOH. Additionally, the bill will result in decreased costs and revenue for the DCA as a result of the shift in regulatory oversight of dementia care homes from the DCA to the DOH. As the bill does not establish the fees to be charged by the DOH, the OLS can only estimate the revenue that may be generated by the provisions of the bill by analyzing similar facilities overseen by the DOH. The current revenue collected by the DCA is also known and can be analyzed.

Currently, the DCA provides oversight for 24 licensed dementia boarding homes. The owners and/or operators of these boarding homes are charged a licensing fee of \$444 and then a supplemental fee which is assessed in direct proportion to the number of licensed beds. The total annual fee for any license may not exceed \$666. These fees generate approximately \$16,800 a year. According to the DCA, it employs 22 persons who are responsible for inspecting all types of boarding homes. A portion of these employees' time is spent inspecting dementia boarding homes. According to the DCA, the cost to inspect boarding homes has exceeded the revenue it has generated and the shortfall has been paid for out of other DCA funds. The amount of shortfall is not available.

The bill provides that the DCA may no longer license dementia boarding homes and instead requires the DOH to license dementia care homes, which are defined as community residential facilities that provide services to residents with special needs, including Alzheimer's disease and dementia.

Pursuant to the bill, the DOH is tasked with the licensure, inspections and the establishment and enforcement of standards with respect to dementia care homes. The DOH is to promulgate

regulations regarding the establishment, licensure and regulations of dementia care homes and these regulations will most likely include costs for licensure and inspections. To determine an estimated cost, the OLS relied on the current fee structure for similar facilities that are licensed and inspected by the DOH.

In the first year after enactment the DOH may grant provisional licensure to current dementia boarding homes licensed by the DCA. The bill is silent on the cost of this licensure but it is likely that the fee will match the current licensure fee for other similar facilities licensed by the DOH. Currently, administrative regulation establishes various fee schedules for different types of facilities overseen by the department. Each assisted living resident or comprehensive personal care home facility pays a fee of \$1,500, plus \$15.00 per bed, initially and then annually each year thereafter (N.J.A.C.8:36-2.2). Furthermore, each residential health care facility located with a licensed health care facility is charged \$225, plus \$15.00 per bed, initially and then annually each year thereafter (N.J.A.C.8:43-2.1). These fees may not exceed the amount statutorily established as \$2,000 per facility (N.J.S.A.26:2H-12). Additionally, the same regulations requires that each assisted living residence and comprehensive personal care home facility is assessed a biennial inspection fee of \$1,500 and each residential health care facility located with a licensed health care facility is assessed a biennial inspection fee of \$450. It is likely that the department will adopt fees within the range of fees currently charged similar facilities. Therefore, if all 24 of the current dementia boarding homes choose to become dementia care homes, the total revenue generated for the DOH will range from approximately \$21,480 to \$76,800 for the year in which the homes are inspected and between \$10,680 to \$40,800 for a non-inspection year, using an average fee of \$445 to \$1700 a facility.

The total revenue estimated to be generated by the DOH fees must be offset by the \$16,800 in fees that will no longer be generated through the DCA as all of the fees are generated for the General Fund. Thus, the overall revenue anticipated to be generated pursuant to this bill will range from \$4,680 to \$76,800 for years in which an inspection fee is paid and (\$6,120) to \$24,000 in renewal years.

Although it is possible that the DOH will set the fees at the lower rate, it is more likely that the fees will be set to meet the expenditures and the bill will be revenue neutral.

The cost for the DOH to license and regulate the dementia care home is dependent upon the details of the regulations promulgated for the homes. Without more details on the specific responsibilities of the DOH and the number of staff needed to carry out these duties, it is not possible for the OLS to estimate with any certainty the costs to the DOH.

The bill also requires the Office of the Ombudsman for the Institutionalized Elderly to include dementia care homes among those facilities which the office is authorized to receive, investigate, and resolve complaints and to initiate actions to secure, preserve, and promote the health, safety, and welfare, and the civil and human rights, of their elderly residents. The OLS cannot determine if the office will be able to absorb the costs of this additional work with its current resources or if new costs will be incurred by the office.

Finally, the bill provides for the imposition of penalties by DOH with respect to violations in the administration or care provided by dementia care homes. This revenue cannot be estimated due to uncertainty on the violations that may be committed and the fines collected for those violations.

Section: Human Services

Analyst: Robin Ford

Senior Fiscal Analyst

Approved: David J. Rosen

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.).

SENATE HEALTH, HUMAN SERVICES AND SENIOR CITIZENS COMMITTEE

STATEMENT TO

ASSEMBLY, No. 1102

STATE OF NEW JERSEY

DATED: JUNE 8, 2015

The Senate Health, Human Services and Senior Citizens Committee reports favorably Assembly Bill No. 1102.

This bill would transfer responsibility for the oversight of rooming or boarding houses for persons with dementia from the Department of Community Affairs (DCA) to the Department of Health (DOH), which is to license these facilities as "dementia care homes."

The bill amends the "Rooming and Boarding House Act of 1979" to delete its provisions concerning the regulation of rooming or boarding houses for persons with dementia by DCA, and would create new sections of law that supplement chapter 2H of Title 26 of the Revised Statutes to set forth the regulatory authority of DOH over dementia care homes and the regulatory requirements that will apply to these entities as health care facilities licensed pursuant to the "Health Care Facilities Planning Act."

DCA would be prohibited under the bill from issuing a license to any person to own or operate a new rooming or boarding house that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, on or after the date of enactment of the bill.

DOH would be empowered under the bill to exercise such authority with respect to a dementia care home as it is granted with respect to any other DOH-licensed health care facility. A dementia care home will be granted provisional licensure by DOH for a period of one year following the effective date of the bill. At the end of that period, DOH is to issue a license to the facility or make continued licensure subject to such actions by the facility as the Commissioner of Health determines necessary to effectuate the purposes of the "Health Care Facilities Planning Act" and this bill.

The bill defines "dementia care home" as a community residential facility that: (1) provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia; (2) is subject to the licensure authority of DOH as a health care facility; and (3) meets the requirements of this bill.

The bill prohibits a person from operating, or advertising a facility as, a dementia care home without a valid license having been issued by DOH for the operation of that facility, or from advertising a dementia care home as another type of health care facility licensed by DOH.

The bill directs the Commissioner of Health to establish standards to protect the health, safety, and welfare of dementia care home residents, including standards that are designed to meet the particular needs of persons with dementia, and requires DOH to include dementia care homes among the long-term care facilities for which it posts information on its website about the ownership of the facility and any violation of statutory standards or DOH regulations.

In addition, the bill sets forth the rights of dementia care home residents and requires a dementia care home operator to ensure that a written notice of these rights is given to every resident upon admittance to the facility and to each resident upon request. The operator is to post this notice in a conspicuous public place in the facility, and the notice is to include the name, address, and telephone numbers of the Office of the Ombudsman for the Institutionalized Elderly, county welfare agency, and county office on aging.

The bill also includes dementia care homes among those facilities with respect to which the Office of the Ombudsman for the Institutionalized Elderly is authorized to receive, investigate, and resolve complaints and to initiate actions to secure, preserve, and promote the health, safety, and welfare, and the civil and human rights, of their elderly residents.

The Commissioner of Health is authorized to grant, to a dementia care home that is operating as a rooming or boarding house that provides services to persons with dementia on the effective date of the bill, a temporary or permanent waiver of one or more requirements established by regulation of the commissioner for licensed health care facilities that the commissioner has determined are otherwise applicable to the dementia care home, if the dementia care home can demonstrate to the satisfaction of the commissioner that: the granting of the waiver would not threaten the health, safety, or welfare of its residents; and the failure to grant a waiver would pose a serious financial hardship to the facility.

Dementia care homes would be exempted from the certificate of need requirement that applies to the construction or expansion of DOH-licensed health care facilities such as hospitals and nursing homes.

Dementia care homes would be prohibited from providing health care services and skilled nursing care to residents. However, nothing in the bill would prevent a health care professional from providing health care services to a dementia care home resident in an emergency or during periods of temporary illness.

The bill provides for the imposition of penalties by DOH with respect to a dementia care home in the same manner as would apply in the case of a violation of the "Health Care Facilities Planning Act" by any other licensee.

Finally, the bill authorizes the Commissioners of Health and Community Affairs to establish and enter into an inter-agency agreement as necessary for its purposes, and to adopt rules and regulations to implement its provisions on an expedited basis for a period of up to 12 months following its effective date.

As amended, this bill is identical to S-1145 (SCA) (Weinberg/Cruz-Perez), which the committee also reported favorably on this date.

SENATE BUDGET AND APPROPRIATIONS COMMITTEE

STATEMENT TO

ASSEMBLY, No. 1102

STATE OF NEW JERSEY

DATED: JUNE 23, 2015

The Senate Budget and Appropriations Committee reports favorably Assembly Bill No. 1102.

This bill transfers responsibility for the oversight of rooming or boarding houses for persons with dementia from the Department of Community Affairs (DCA) to the Department of Health (DOH), which is to license these facilities as "dementia care homes."

The bill amends the "Rooming and Boarding House Act of 1979" to delete its provisions concerning the regulation of rooming or boarding houses for persons with dementia by DCA, and creates new sections of law that supplement chapter 2H of Title 26 of the Revised Statutes to set forth the regulatory authority of DOH over dementia care homes and the regulatory requirements that will apply to these entities as health care facilities licensed pursuant to the "Health Care Facilities Planning Act."

DCA is prohibited under the bill from issuing a license to any person to own or operate a new rooming or boarding house that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, on or after the date of enactment of the bill.

DOH is empowered to exercise such authority with respect to a dementia care home as is granted with respect to any other DOH-licensed health care facility. A dementia care home will be granted provisional licensure by DOH for a period of one year following the effective date of the bill. At the end of that period, DOH is to issue a license to the facility or make continued licensure subject to such actions by the facility as the Commissioner of Health determines necessary to effectuate the purposes of the "Health Care Facilities Planning Act" and this bill.

The bill defines "dementia care home" as a community residential facility that: (1) provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia; (2) is subject to the licensure authority of DOH as a health care facility; and (3) meets the requirements of this bill.

The bill prohibits a person from operating, or advertising a facility as, a dementia care home without a valid license having been issued by

DOH for the operation of that facility, or from advertising a dementia care home as another type of health care facility licensed by DOH.

The bill directs the Commissioner of Health to establish standards to protect the health, safety, and welfare of dementia care home residents, including standards that are designed to meet the particular needs of persons with dementia, and requires DOH to include dementia care homes among the long-term care facilities for which it posts information on its website about the ownership of the facility and any violation of statutory standards or DOH regulations.

In addition, the bill sets forth the rights of dementia care home residents and requires a dementia care home operator to ensure that a written notice of these rights is given to every resident upon admittance to the facility and to each resident upon request. The operator is to post this notice in a conspicuous public place in the facility, and the notice is to include the name, address, and telephone numbers of the Office of the Ombudsman for the Institutionalized Elderly, county welfare agency, and county office on aging.

The bill also includes dementia care homes among those facilities with respect to which the Office of the Ombudsman for the Institutionalized Elderly is authorized to receive, investigate, and resolve complaints and to initiate actions to secure, preserve, and promote the health, safety, and welfare, and the civil and human rights, of their elderly residents.

The Commissioner of Health is authorized to grant a temporary or permanent waiver, to a dementia care home that is operating as a rooming or boarding house that provides services to persons with dementia on the effective date of the bill, of one or more requirements established by regulation of the commissioner for licensed health care facilities that the commissioner has determined are otherwise applicable to the dementia care home, if the dementia care home can demonstrate to the satisfaction of the commissioner that: the granting of the waiver would not threaten the health, safety, or welfare of its residents; and the failure to grant a waiver would pose a serious financial hardship to the facility.

Dementia care homes will be exempt from the certificate of need requirement that applies to the construction or expansion of DOHlicensed health care facilities such as hospitals and nursing homes.

Dementia care homes will be prohibited from providing health care services and skilled nursing care to residents. However, nothing in the bill will prevent a health care professional from providing health care services to a dementia care home resident in an emergency or during periods of temporary illness.

The bill provides for the imposition of penalties by DOH with respect to a dementia care home in the same manner as would apply in the case of a violation of the "Health Care Facilities Planning Act" by any other licensee.

Finally, the bill authorizes the Commissioners of Health and Community Affairs to establish and enter into an inter-agency agreement as necessary for its purposes, and to adopt rules and regulations to implement its provisions on an expedited basis for a period of up to 12 months following its effective date.

The bill will take effect on the first day of the seventh month next following the date of enactment.

As reported, this bill is identical to Senate Bill No. 1145 (1R), as reported by the committee.

FISCAL IMPACT:

The Office of Legislative Services (OLS) estimates that the bill may result in increased revenue for the State through the collection of license and inspection fees by the (DOH) from the newly designated dementia care homes. The bill provides no details on the range of these fees, but if the department establishes fees for these facilities at the same rate as current fees for similar facilities, the OLS estimates that the department will generate between \$10,680 and \$40,800 in fees the first year after enactment and between \$21,480 and \$76,800 in fees the following year.

The DOH will also experience an increase in expenditures to license and provide regulatory oversight of the newly designated dementia care homes. These expenditures will most likely be offset by the additional revenue generated by the fees charged by the department to the operators and owners of dementia care homes.

Additionally, the State will experience a reduction in State revenue for the first year after enactment of the bill as the approximately \$16,800 in current fees collected by DCA for the licensing of boarding homes for persons with dementia will no longer be collected.

The bill also provides new responsibilities for the Office of the Ombudsman for the Institutionalized Elderly which may result in minimal indeterminate costs for the office.

SENATE, No. 1145

STATE OF NEW JERSEY

216th LEGISLATURE

INTRODUCED JANUARY 30, 2014

Sponsored by: Senator LORETTA WEINBERG District 37 (Bergen) Senator NILSA CRUZ-PEREZ District 5 (Camden and Gloucester)

SYNOPSIS

Provides for licensure of dementia care homes by DOH.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 3/17/2015)

AN ACT providing for the licensure of dementia care homes by the Department of Health and amending and supplementing various parts of the statutory law.

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

- 1. Section 2 of P.L.1971, c.136 (C.26:2H-2) is amended to read as follows:
- 2. The following words or phrases, as used in this act, shall have the following meanings, unless the context otherwise requires:
- "Health care facility" means the facility or institution whether public or private, engaged principally in providing services for health maintenance organizations, diagnosis, or treatment of human disease, pain, injury, deformity, or physical condition, including, but not limited to, a general hospital, special hospital, mental hospital, public health center, diagnostic center, treatment center, rehabilitation center, extended care facility, skilled nursing home, nursing home, intermediate care facility, tuberculosis hospital, chronic disease hospital, maternity hospital, outpatient clinic, dispensary, home health care agency, residential health care facility, dementia care home, and bioanalytical laboratory (except as specifically excluded hereunder) or central services facility serving one or more such institutions but excluding institutions that provide healing solely by prayer and excluding such bioanalytical laboratories as are independently owned and operated, and are not owned, operated, managed, or controlled, in whole or in part, directly or indirectly by any one or more health care facilities, and the predominant source of business of which is not by contract with health care facilities within the State of New Jersey and which solicit or accept specimens and operate predominantly in interstate commerce.
 - b. "Health care service" means the preadmission, outpatient, inpatient, and postdischarge care provided in or by a health care facility, and such other items or services as are necessary for such care, which are provided by or under the supervision of a physician for the purpose of health maintenance organizations, diagnosis, or treatment of human disease, pain, injury, disability, deformity, or physical condition, including, but not limited to, nursing service, home care nursing, and other paramedical service, ambulance service, service provided by an intern, resident in training or physician whose compensation is provided through agreement with a health care facility, laboratory service, medical social service, drugs, biologicals, supplies, appliances, equipment, bed and board, but excluding services provided by a physician in his private

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

- 1 practice, except as provided in sections 7 and 12 of P.L.1971, c.136
- 2 (C.26:2H-7 and 26:2H-12), or by practitioners of healing solely by
- 3 prayer, and services provided by first aid, rescue and ambulance
- 4 squads as defined in the "New Jersey Highway Safety Act of 1971,"
- 5 P.L.1971, c.351 (C.27:5F-1 et seq.).

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- 6 c. "Construction" means the erection, building, or substantial 7 acquisition, alteration, reconstruction, improvement, renovation, 8 extension, or modification of a health care facility, including its 9 equipment, the inspection and supervision thereof; and the studies, 10 surveys, designs, plans, working drawings, specifications, 11 procedures, and other actions necessary thereto.
- d. "Board" means the Health Care Administration Board established pursuant to this act.
 - e. (Deleted by amendment, P.L.1998, c.43).
- f. "Government agency" means a department, board, bureau, division, office, agency, public benefit, or other corporation, or any other unit, however described, of the State or political subdivision thereof.
 - g. (Deleted by amendment, P.L.1991, c.187).
- 20 h. (Deleted by amendment, P.L.1991, c.187).
- i. "Department" means the Department of Health.
 - j. "Commissioner" means the Commissioner of Health.
 - k. "Preliminary cost base" means that proportion of a hospital's current cost which may reasonably be required to be reimbursed to a properly utilized hospital for the efficient and effective delivery of appropriate and necessary health care services of high quality required by such hospital's mix of patients. The preliminary cost base initially may include costs identified by the commissioner and approved or adjusted by the commission as being in excess of that proportion of a hospital's current costs identified above, which excess costs shall be eliminated in a timely and reasonable manner prior to certification of the revenue base. The preliminary cost base shall be established in accordance with regulations proposed by the commissioner and approved by the board.
 - 1. (Deleted by amendment, P.L.1992, c.160).
- 36 m. "Provider of health care" means an individual (1) who is a 37 direct provider of health care service in that the individual's primary 38 activity is the provision of health care services to individuals or the 39 administration of health care facilities in which such care is 40 provided and, when required by State law, the individual has 41 received professional training in the provision of such services or in 42 such administration and is licensed or certified for such provision or 43 administration; or (2) who is an indirect provider of health care in 44 that the individual (a) holds a fiduciary position with, or has a 45 fiduciary interest in, any entity described in subparagraph b(ii) or 46 subparagraph b(iv); provided, however, that a member of the 47 governing body of a county or any elected official shall not be 48 deemed to be a provider of health care unless he is a member of the

- board of trustees of a health care facility or a member of a board,
- 2 committee or body with authority similar to that of a board of
- 3 trustees, or unless he participates in the direct administration of a
- 4 health care facility; or (b) received, either directly or through his
- spouse, more than one-tenth of his gross annual income for any one
- 6 or more of the following:
 - (i) Fees or other compensation for research into or instruction in the provision of health care services;
 - (ii) Entities engaged in the provision of health care services or in research or instruction in the provision of health care services;
 - (iii) Producing or supplying drugs or other articles for individuals or entities for use in the provision of or in research into or instruction in the provision of health care services;
 - (iv) Entities engaged in producing drugs or such other articles.
- 15 n. "Private long-term health care facility" means a nursing
- home, skilled nursing home, or intermediate care facility presently
- in operation and licensed as such prior to the adoption of the 1967
- 18 Life Safety Code by the Department of Health in 1972 and which
- 19 has a maximum 50-bed capacity and which does not accommodate
- 20 Medicare or Medicaid patients.
 - o. (Deleted by amendment, P.L.1998, c.43).
- p. "State Health Planning Board" means the board established
- 23 pursuant to section 33 of P.L.1991, c.187 (C.26:2H-5.7) to conduct
- 24 certificate of need review activities.
- 25 (cf: P.L.2012, c.17, s.153)
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- 2. Section 19 of P.L.1992, c.160 (C.26:2H-7a) is amended to read as follows:
- 29 19. Notwithstanding the provisions of section 7 of P.L.1971,
- 30 c.136 (C.26:2H-7) to the contrary, the following are exempt from
- 31 the certificate of need requirement:
- 32 Community-based primary care centers;
- Outpatient drug and alcohol services;
- Hospital-based medical detoxification for drugs and alcohol;
- 35 Ambulance and invalid coach services;
- Mental health services which are non-bed related outpatient services;
- 38 Residential health care facility services;
- 39 <u>Dementia care homes</u>;
- 40 Capital improvements and renovations to health care facilities;
- Additions of medical/surgical, adult intensive care and adult critical care beds in hospitals;
- 43 Replacement of existing major moveable equipment;
- 44 Inpatient operating rooms;
- 45 Alternate family care programs;
- 46 Hospital-based subacute care;
- 47 Ambulatory care facilities;
- 48 Comprehensive outpatient rehabilitation services;

- 1 Special child health clinics;
- New technology in accordance with the provisions of section 18 of P.L.1998, c.43 (C.26:2H-7d);
- Transfer of ownership interest except in the case of an acute care hospital;
- 6 Change of site for approved certificate of need within the same 7 county;
- Additions to vehicles or hours of operation of a mobile intensive care unit;
- Relocation or replacement of a health care facility within the same county, except for an acute care hospital;
- Continuing care retirement communities authorized pursuant to P.L.1986, c.103 (C.52:27D-330 et seq.);
- 14 Magnetic resonance imaging;
- 15 Adult day health care facilities;
- 16 Pediatric day health care facilities;
- 17 Chronic or acute renal dialysis facilities; and
- Transfer of ownership of a hospital to an authority in accordance with P.L.2006, c.46 (C.30:9-23.15 et al.).
- 20 (cf: P.L.2006, c.46, s.10)

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- 3. Section 1 of P.L.2007, c.65 (C.26:2H-12.33) is amended to read as follows:
- 1. a. The Department of Health shall make available to the public, through its official department website, information regarding:
 - (1) the ownership of each long-term care facility and adult day health services facility licensed by the department; and
 - (2) any violation of statutory standards or rules and regulations of the department pertaining to the care of patients or physical plant standards found at any such facility by the department.
 - As used in this section, "long-term care facility" means a nursing home, assisted living residence, comprehensive personal care home, residential health care facility, or dementia care home licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.).
 - b. The information made available to the public pursuant to subsection a. of this section shall be provided in a manner that would enable a member of the public to search the website by name of a facility or its owner in order to access the information. The department shall also make the information available in writing, upon request.
 - c. The information regarding the ownership of a long-term care or adult day health services facility that is made available to the public pursuant to subsection a. of this section shall provide, at a minimum: the name of the owner of a facility as listed on the facility's license and, if there is more than one owner or the facility is owned by a corporation, the name of each person who holds at least a 10 [%] percent interest in the facility; the name of any other

- licensed long-term care or adult day health services facility in the
- 2 State owned by this owner, corporation, and each person who holds
- at least a 10**[**%] percent interest in the facility, as applicable; and
- 4 the address and contact information for the facility.
- 5 d. The information that is displayed on the official department
 - website pursuant to subsection a. of this section shall include
- 7 Internet web links to the New Jersey Report Card for Nursing
- 8 Homes maintained by the department and the Medicare Nursing
- 9 Home Compare database maintained by the federal Centers for
- 10 Medicare & Medicaid Services.
- 11 (cf: P.L.2012, c.17, s.197)

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- 4. Section 2 of P.L.1984, c.114 (C.26:2H-14.2) is amended to read as follows:
- 2. a. Every nursing home as defined in section 2 of P.L.1976,
- 16 c. 120 (C. 30:13-2) or licensed pursuant to P.L.1971, c. 136 (C.
- 17 26:2H-1 et seq.), [and] every residential health care facility as
- 18 defined in section 1 of P.L.1953, c. 212 (C. 30:11A-1) or licensed
- 19 pursuant to P.L.1971, c. 136 (C. 26:2H-1 et seq.), and every
- 20 dementia care home as defined in section 17 of P.L., c. (C.)
- 21 (pending before the Legislature as this bill) shall establish by
- 22 written policy a heat emergency action plan which shall include
- those procedures to be followed in the event of a heat emergency in order to protect the health and welfare of its residents, and which
- 24 Order to protect the hearth and werrare or its residents, and which
- 25 shall be approved by the department. The department shall review
- a heat emergency action plan established pursuant to this act at
- 27 least once in each year.
 - b. A health care facility included within the provisions of this act shall be required to notify the department immediately in the event of a heat emergency.
- 31 (cf: P.L.1984, c.114, s.2)

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- 33 5. Section 3 of P.L.1984, c.114 (C.26:2H-14.3) is amended to read as follows:
- 35 3. The Commissioner of Health shall, pursuant to the provisions of the "Administrative Procedure Act," P.L.1968, c.410
- 37 (C.52:14B-1 et seq.), adopt rules and regulations necessary to
- 38 effectuate the purposes of this act. The regulations shall require
- 39 that:
- a. Each health care facility included within the provisions of
- 41 this act and which is not equipped with air conditioning on the
- 42 effective date of P.L.1989, c.173 (C.26:2H-14.4 et al.), shall
- 43 provide for and operate adequate ventilation in all areas used by
- patients or residents, including, but not limited to, the use of ceiling
- 45 fans, wall fans or portable fans, where appropriate, so that the
- 46 temperature in these areas does not exceed 82 degrees Fahrenheit,
- 47 but the health care facility shall not directly assess patients or

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residents for the purchase or installation of the fans or other ventilating equipment.

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(1) The regulations shall also provide that within two years after the effective date of P.L.1989, c.173 (C.26:2H-14.4 et al.), every nursing home included within the provisions of this act, and every residential health care facility as specified in this paragraph, shall be equipped with air conditioning, except that the commissioner may grant a nursing home or residential health care facility a waiver from the air conditioning requirement to give the nursing home or residential health care facility one additional year to comply with the air conditioning requirement, for which waiver the nursing home or residential health care facility shall apply on a form and in a manner prescribed by the commissioner, if the nursing home or residential health care facility can demonstrate to the satisfaction of the commissioner that the failure to grant such a waiver would pose a serious financial hardship to the nursing home or residential health care facility. The air conditioning shall be operated so that the temperature in all areas used by patients or residents does not exceed 82 degrees Fahrenheit. The air conditioning requirement established in this subsection shall apply to a residential health care facility only: (1) upon enactment into law of legislation that increases the rate of reimbursement provided by the State under the Supplemental Security Income program, P.L.1973, c.256 (C.44:7-85 et seq.), which rate is certified by the Commissioner of Health to be sufficient to enable the facility to meet the costs of complying with the requirement; and (2) if the facility qualifies for funds for energy efficiency rehabilitation through the "Petroleum Overcharge Reimbursement Fund," established pursuant to P.L.1987, c.231, which funds can be applied towards equipping the facility with air conditioning. A nursing home or residential health care facility shall not directly assess patients or residents for the purchase or installation of the air conditioning equipment.

(2) The regulations shall also provide that within two years after the effective date of P.L., c. (C.) (pending before the Legislature as this bill), every dementia care home shall be equipped with air conditioning, except that the commissioner may grant a dementia care home a waiver from the air conditioning requirement to give the dementia care home one additional year to comply with the air conditioning requirement, for which waiver the dementia care home shall apply on a form and in a manner prescribed by the commissioner, if the dementia care home can demonstrate to the satisfaction of the commissioner that the failure to grant such a waiver would pose a serious financial hardship to that facility. The air conditioning shall be operated so that the temperature in all areas used by residents does not exceed 82 degrees Fahrenheit. A dementia care home shall not directly assess residents for the purchase or installation of the air conditioning equipment; and

- 1 b. Patients or residents are identified by predisposition, due to 2 illness, medication or otherwise, to heat-related illness and that 3 during a heat emergency, their body temperature, dehydration status 4 and other symptoms of heat-related illness are monitored frequently 5 and regularly, any anomalies are promptly reported to the attending 6 physician, and any necessary therapeutic or palliative measures are 7 instituted, including the provision of liquids, where required.
- (cf: P.L.1989, c.173, s.1) 8

- 6. Section 2 of P.L.1989, c.173 (C.26:2H-14.4) is amended to read as follows:
- 12 2. A nursing home or residential health care facility included 13 within the provisions of P.L.1984, c.114 (C.26:2H-14.1 et seq.) 14 which is constructed or expanded after the effective date of 15 P.L.1989, c.173 (C.26:2H-14.4 et al.), or a dementia care home 16 included within the provisions of P.L.1984, c.114 (C.26:2H-14.1 et 17 seq.) which is constructed or expanded after the effective date of 18 P.L., c. (C.) (pending before the Legislature as this bill), shall 19 be equipped with air conditioning in all areas used by patients or 20 residents, and the air conditioning shall be operated so that the 21 temperature in these areas does not exceed 82 degrees Fahrenheit. 22 (cf: P.L.1989, c.173, s.2)
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- 24 7. Section 2 of P.L.1977, c.238 (C.26:2H-37) is amended to 25 read as follows:
- 26 2. As used in this act, and unless the context otherwise 27 requires:
- "Boarding or nursing home" or "home" means: a private 28 29 nursing home or convalescent home regulated under chapter 11 of
- 30 Title 30 of the Revised Statutes [or]; a facility or institution,
- 31 private or public, regulated and licensed as an extended care 32
- facility, skilled nursing home, nursing home, or intermediate care
- 33 facility pursuant to P.L.1971, c. 136 (C. 26:2H-1 to 26:2H-26) [or];
- 34 a residential health care facility, as defined in section 1 of P.L.1953,
- 35 c. 212 (C. 30:11A-1) or licensed pursuant to P.L.1971, c. 136 (C.
- 26:2H-1 to 26:2H-26); or a dementia care home as defined in 36
- 37 section 17 of P.L., c. (C.) (pending before the Legislature as 38 this bill).
- 39 b. "Owner" means the holder or holders of the title in fee 40 simple to the property on which the home is located.
- "Licensee" means the holder or holders of a license to 41 42 operate a boarding or nursing home pursuant to chapter 11 of Title 43 30 of the Revised Statutes, P.L.1953, c. 212 (C. 30:11A-1 to
- 44 30:11A-14) or P.L.1971, c. 136 (C. 26:2H-1 to 26:2H-26).
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- d. "Department" means the State Department of Health.
- 46 (cf: P.L.1979, c.496, s.24)

- 8. Section 3 of P.L.1991, c.201 (C.26:2H-55) is amended to read as follows:
 - 3. As used in this act:

- "Adult" means an individual 18 years of age or older.
- "Advance directive for health care" or "advance directive" means
 a writing executed in accordance with the requirements of this act.
 An "advance directive" may include a proxy directive or an

8 instruction directive, or both.

"Attending physician" means the physician selected by, or assigned to, the patient who has primary responsibility for the treatment and care of the patient.

"Decision making capacity" means a patient's ability to understand and appreciate the nature and consequences of health care decisions, including the benefits and risks of each, and alternatives to any proposed health care, and to reach an informed decision. A patient's decision making capacity is evaluated relative to the demands of a particular health care decision.

"Declarant" means a competent adult who executes an advance directive.

"Do not resuscitate order" means a physician's written order not to attempt cardiopulmonary resuscitation in the event the patient suffers a cardiac or respiratory arrest.

"Emergency care" means immediate treatment provided in response to a sudden, acute and unanticipated medical crisis in order to avoid injury, impairment or death.

"Health care decision" means a decision to accept or to refuse any treatment, service or procedure used to diagnose, treat or care for a patient's physical or mental condition, including life-sustaining treatment. "Health care decision" also means a decision to accept or to refuse the services of a particular physician, nurse, other health care professional or health care institution, including a decision to accept or to refuse a transfer of care.

"Health care institution" means all institutions, facilities, and agencies licensed, certified, or otherwise authorized by State law to administer health care in the ordinary course of business, including hospitals, nursing homes, residential health care facilities, <u>dementia care homes</u>, home health care agencies, hospice programs operating in this State, mental health institutions, facilities or agencies, or institutions, facilities and agencies for the developmentally disabled. The term "health care institution" shall not be construed to include "health care professionals" as defined in this act.

"Health care professional" means an individual licensed by this State to administer health care in the ordinary course of business or practice of a profession.

"Health care representative" means the individual designated by a declarant pursuant to the proxy directive part of an advance directive for the purpose of making health care decisions on the declarant's behalf, and includes an individual designated as an alternate health care representative who is acting as the declarant's health care representative in accordance with the terms and order of priority stated in an advance directive.

"Instruction directive" means a writing which provides instructions and direction regarding the declarant's wishes for health care in the event that the declarant subsequently lacks decision making capacity.

"Life-sustaining treatment" means the use of any medical device or procedure, artificially provided fluids and nutrition, drugs, surgery or therapy that uses mechanical or other artificial means to sustain, restore or supplant a vital bodily function, and thereby increase the expected life span of a patient.

"Other health care professionals" means health care professionals other than physicians and nurses.

"Patient" means an individual who is under the care of a physician, nurse or other health care professional.

"Permanently unconscious" means a medical condition that has been diagnosed in accordance with currently accepted medical standards and with reasonable medical certainty as total and irreversible loss of consciousness and capacity for interaction with the environment. The term "permanently unconscious" includes without limitation a persistent vegetative state or irreversible coma.

"Physician" means an individual licensed to practice medicine and surgery in this State.

"Proxy directive" means a writing which designates a health care representative in the event the declarant subsequently lacks decision making capacity.

"State" means a state, territory, or possession of the United States, the District of Columbia, or the Commonwealth of Puerto Rico.

"Terminal condition" means the terminal stage of an irreversibly fatal illness, disease or condition. A determination of a specific life expectancy is not required as a precondition for a diagnosis of a "terminal condition," but a prognosis of a life expectancy of six months or less, with or without the provision of life-sustaining treatment, based upon reasonable medical certainty, shall be deemed to constitute a terminal condition.

(cf: P.L.1991, c.201, s.3)

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- 9. Section 2 of P.L.1977, c.448 (C.30:11B-2) is amended to read as follows:
- 2. "Alzheimer's disease and related disorders" means a form of dementia characterized by a general loss of intellectual abilities of sufficient severity to interfere with social or occupational functioning.

"Community residence for the developmentally disabled" means any community residential facility housing up to 16 persons with developmental disabilities, which provides food, shelter, and

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personal guidance for persons with developmental disabilities who require assistance, temporarily or permanently, in order to live independently in the community. Such residences shall not be considered health care facilities within the meaning of the "Health Care Facilities Planning Act," P.L.1971, c.136 (C.26:2H-1 et seq.) and shall include, but not be limited to, group homes, halfway houses, supervised apartment living arrangements, and hostels.

"Community residence for the mentally ill" means any community residential facility which provides food, shelter, and personal guidance, under such supervision as required, to not more than 15 persons with mental illness who require assistance temporarily or permanently, in order to live independently in the community. These residences shall be approved for a purchase of service contract or an affiliation agreement pursuant to procedures established by the Division of Mental Health and Addiction Services in the Department of Human Services or the Division of Children's System of Care in the Department of Children and Families, as applicable. These residences shall not house persons who have been assigned to a State psychiatric hospital after having been found not guilty of a criminal offense by reason of insanity or unfit to be tried on a criminal charge. These residences shall not be considered health care facilities within the meaning of the "Health Care Facilities Planning Act," P.L.1971, c.136 (C.26:2H-1 et seq.) and shall include, but not be limited to, group homes, halfway houses, supervised apartment living arrangements, family care homes, and hostels.

"Community residence for persons with head injuries" means a community residential facility providing food, shelter, and personal guidance, under such supervision as required, to not more than 15 persons with head injuries, who require assistance, temporarily or permanently, in order to live in the community, and shall include, but not be limited to: group homes, halfway houses, supervised apartment living arrangements, and hostels. Such a residence shall not be considered a health care facility within the meaning of the "Health Care Facilities Planning Act," P.L.1971, c.136 (C.26:2H-1 et seq.).

"Dementia" means a chronic or persistent disorder of the mental processes due to organic brain disease, for which no curative treatment is available, and marked by memory disorders, changes in personality, deterioration in personal care, impaired reasoning ability, and disorientation.

"Developmental disability" or "developmentally disabled" means a severe, chronic disability of a person which: a. is attributable to a mental or physical impairment or combination of mental or physical impairments; b. is manifest before age 22; c. is likely to continue indefinitely; d. results in substantial functional limitations in three or more of the following areas of major life activity, that is, self-care, receptive and expressive language, learning, mobility, self-

1 direction and capacity for independent living, or economic self-2 sufficiency; and e. reflects the need for a combination and sequence 3 of special interdisciplinary or generic care, treatment, or other 4 services which are of lifelong or extended duration and are 5 individually planned and coordinated. Developmental disability 6 includes, but is not limited to, severe disabilities attributable to an 7 intellectual disability, autism, cerebral palsy, epilepsy, spina bifida, 8 and other neurological impairments where the above criteria are 9 met.

"Mentally ill" or "mental illness" means any psychiatric disorder which has required an individual to receive either inpatient psychiatric care or outpatient psychiatric care on an extended basis.

"Person with head injury" means a person who has sustained an injury, illness, or traumatic changes to the skull, the brain contents or its coverings which results in a temporary or permanent physiobiological decrease of cognitive, behavioral, social, or physical functioning which causes partial or total disability, but excluding a person with Alzheimer's disease and related disorders or other forms of dementia.

(cf: P.L.2012, c.16, s.125)

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- 10. Section 2 of P.L.1978, c.159 (C.40:55D-66.2) is amended to read as follows:
 - 2. As used in this act:

25 "Community residence for the developmentally disabled" 26 means any community residential facility licensed pursuant to 27 P.L.1977, c.448 (C.30:11B-1 et seq.) providing food, shelter, and personal guidance, under such supervision as required, to not more 28 29 than 15 developmentally disabled or mentally ill persons, who 30 require assistance, temporarily or permanently, in order to live in 31 the community, and shall include, but not be limited to: group 32 homes, halfway houses, intermediate care facilities, supervised 33 apartment living arrangements, and hostels. Such a residence shall 34 not be considered a health care facility within the meaning of the 35 "Health Care Facilities Planning Act," P.L.1971, c.136 (C.26:2H-1 36 et al.). In the case of such a community residence housing mentally 37 ill persons, such residence shall have been approved for a purchase 38 of service contract or an affiliation agreement pursuant to such 39 procedures as shall be established by regulation of the Division of 40 Mental Health and [Hospitals of] Addiction Services in the 41 Department of Human Services. As used in this act, 42 "developmentally disabled person" means a person who is 43 developmentally disabled as defined in section 2 of P.L.1977, c.448 44 (C.30:11B-2), and "mentally ill person" means a person who is afflicted with a mental illness as defined in R.S.30:4-23, but shall 45 46 not include a person who has been committed after having been 47 found not guilty of a criminal offense by reason of insanity or having been found unfit to be tried on a criminal charge. 48

- 1 "Community shelter for victims of domestic violence" means 2 any shelter approved for a purchase of service contract and certified 3 pursuant to standards and procedures established by regulation of 4 the Department of Human Services pursuant to P.L.1979, c.337 5 (C.30:14-1 et seq.), providing food, shelter, medical care, legal 6 assistance, personal guidance, and other services to not more than 7 15 persons who have been victims of domestic violence, including 8 any children of such victims, who temporarily require shelter and 9 assistance in order to protect their physical or psychological 10 welfare.
- 11 c. "Community residence for persons with head injuries" 12 means a community residential facility licensed pursuant to 13 P.L.1977, c.448 (C.30:11B-1 et seq.) providing food, shelter, and 14 personal guidance, under such supervision as required, to not more 15 than 15 persons with head injuries, who require assistance, 16 temporarily or permanently, in order to live in the community, and 17 shall include, but not be limited to: group homes, halfway houses, 18 supervised apartment living arrangements, and hostels. Such a 19 residence shall not be considered a health care facility within the 20 meaning of the "Health Care Facilities Planning Act," P.L.1971, 21 c.136 (C.26:2H-1 et al.).
 - d. "Person with head injury" means a person who has sustained an injury, illness, or traumatic changes to the skull, the brain contents, or its coverings which results in a temporary or permanent physiobiological decrease of mental, cognitive, behavioral, social, or physical functioning which causes partial or total disability, but excluding a person with Alzheimer's disease and related disorders or other forms of dementia.
 - e. "Community residence for the terminally ill" means any community residential facility operated as a hospice program providing food, shelter, personal guidance, and health care services, under such supervision as required, to not more than 15 terminally ill persons.
 - f. "Alzheimer's disease and related disorders" means a form of dementia characterized by a general loss of intellectual abilities of sufficient severity to interfere with social or occupational functioning.
- g. "Dementia" means a chronic or persistent disorder of the
 mental processes due to organic brain disease, for which no curative
 treatment is available, and marked by memory disorders, changes in
 personality, deterioration in personal care, impaired reasoning
 ability, and disorientation.
- 43 (cf: P.L.1997, c.321, s.2)

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11. Section 2 of P.L.1977, c.239 (C.52:27G-2) is amended to read as follows:

47 2. As used in this act, unless the context clearly indicates 48 otherwise:

- "Abuse" means the willful infliction of physical pain, injury, or mental anguish; unreasonable confinement; or the willful deprivation of services which are necessary to maintain a person's physical and mental health. However, no person shall be deemed to be abused for the sole reason he is being furnished nonmedical remedial treatment by spiritual means through prayer alone, in accordance with a recognized religious method of healing, in lieu of medical treatment;
 - b. An "act" of any facility or government agency shall be deemed to include any failure or refusal to act by such facility or government agency;

- c. "Administrator" means any person who is charged with the general administration or supervision of a facility, whether or not such person has an ownership interest in such facility, and whether or not such person's functions and duties are shared with one or more other persons;
- d. "Caretaker" means a person employed by a facility to provide care or services to an elderly person, and includes, but is not limited to, the administrator of a facility;
- e. "Exploitation" means the act or process of using a person or his resources for another person's profit or advantage without legal entitlement to do so;
- f. "Facility" means any facility or institution, whether public or private, offering health or health related services for the institutionalized elderly, and which is subject to regulation, visitation, inspection, or supervision by any government agency. Facilities include, but are not limited to, nursing homes, skilled nursing homes, intermediate care facilities, extended care facilities, convalescent homes, rehabilitation centers, residential health care facilities, dementia care homes, special hospitals, veterans' hospitals, chronic disease hospitals, psychiatric hospitals, mental hospitals, developmental centers or facilities, day care facilities for the elderly and medical day care centers;
- g. "Government agency" means any department, division, office, bureau, board, commission, authority, or any other agency or instrumentality created by the State or to which the State is a party, or by any county or municipality, which is responsible for the regulation, visitation, inspection, or supervision of facilities, or which provides services to patients, residents, or clients of facilities;
- h. "Guardian" means any person with the legal right to manage the financial affairs and protect the rights of any patient, resident, or client of a facility, who has been declared an incapacitated person by a court of competent jurisdiction;
- i. "Institutionalized elderly," "elderly" or "elderly person" means any person 60 years of age or older, who is a patient, resident, or client of any facility;

- j. "Office" means the Office of the Ombudsman for the Institutionalized Elderly established herein;
- k. "Ombudsman" means the administrator and chief executive officer of the Office of the Ombudsman for the Institutionalized Elderly;
 - 1. "Patient, resident or client" means any elderly person who is receiving treatment or care in any facility in all its aspects, including, but not limited to, admission, retention, confinement, commitment, period of residence, transfer, discharge, and any instances directly related to such status.

11 (cf: P.L. 2010, c.50, s.79)

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- 13 12. Section 3 of P.L.1979, c.496 (C.55:13B-3) is amended to read as follows:
 - 3. As used in this act:
- 16 "Boarding house" means any building, together with any 17 related structure, accessory building, any land appurtenant thereto, 18 and any part thereof, which contains two or more units of dwelling 19 space arranged or intended for single room occupancy, exclusive of 20 any such unit occupied by an owner or operator, and wherein 21 personal or financial services are provided to the residents, 22 including any residential hotel or congregate living arrangement, 23 but excluding any hotel, motel, or established guest house wherein a 24 minimum of 85[%] percent of the units of dwelling space are 25 offered for limited tenure only, any resource family home as defined in section 1 of P.L.1962, c.137 (C.30:4C-26.1), any 26 27 community residence for the developmentally disabled and any 28 community residence for the mentally ill as defined in section 2 of 29 P.L.1977, c.448 (C.30:11B-2), any adult family care home as 30 defined in section 3 of P.L.2001, c.304 (C.26:2Y-3), any dormitory 31 owned or operated on behalf of any nonprofit institution of primary, 32 secondary, or higher education for the use of its students, any 33 building arranged for single room occupancy wherein the units of 34 dwelling space are occupied exclusively by students enrolled in a 35 full-time course of study at an institution of higher education 36 approved by the New Jersey Commission on Higher Education, any 37 facility or living arrangement operated by, or under contract with, 38 any State department or agency, upon the written authorization of 39 the commissioner, and any owner-occupied, one-family residential 40 dwelling made available for occupancy by not more than six guests, 41 where the primary purpose of the occupancy is to provide charitable 42 assistance to the guests and where the owner derives no income 43 from the occupancy. A dwelling shall be deemed "owner-occupied" 44 within the meaning of this section if it is owned or operated by a 45 nonprofit religious or charitable association or corporation and is 46 used as the principal residence of a minister or employee of that 47 corporation or association. For any such dwelling, however, fire

detectors shall be required as determined by the Department of Community Affairs.

- b. "Commissioner" means the Commissioner of the Department of Community Affairs.
- c. "Financial services" means any assistance permitted or required by the commissioner to be furnished by an owner or operator to a resident in the management of personal financial matters, including, but not limited to, the cashing of checks, holding of personal funds for safekeeping in any manner or assistance in the purchase of goods or services with a resident's personal funds.
- d. "Limited tenure" means residence at a rooming or boarding house on a temporary basis, for a period lasting no more than 90 days, when a resident either maintains a primary residence at a location other than the rooming or boarding house or intends to establish a primary residence at such a location and does so within 90 days after taking up original residence at the rooming or boarding house.
- e. "Operator" means any individual who is responsible for the daily operation of a rooming or boarding house.
- f. "Owner" means any person who owns, purports to own, or exercises control of any rooming or boarding house.
- g. "Personal services" means any services permitted or required to be furnished by an owner or operator to a resident, other than shelter, including, but not limited to, meals or other food services, and assistance in dressing, bathing, or attending to other personal needs.
- h. "Rooming house" means a boarding house wherein no personal or financial services are provided to the residents.
- i. "Single room occupancy" means an arrangement of dwelling space which does not provide a private, secure dwelling space arranged for independent living, which contains both the sanitary and cooking facilities required in dwelling spaces pursuant to the "Hotel and Multiple Dwelling Law," P.L.1967, c.76 (C.55:13A-1 et seq.), and which is not used for limited tenure occupancy in a hotel, motel, or established guest house, regardless of the number of individuals occupying any room or rooms.
- j. "Unit of dwelling space" means any room, rooms, suite, or portion thereof, whether furnished or unfurnished, which is occupied or intended, arranged, or designed to be occupied for sleeping or dwelling purposes by one or more persons.
- k. **[**"Alzheimer's disease and related disorders" means a form of dementia characterized by a general loss of intellectual abilities of sufficient severity to interfere with social or occupational functioning. **]** (Deleted by amendment, P.L., c. (pending before the Legislature as this bill)
- 1. **[**"Dementia" means a chronic or persistent disorder of the mental processes due to organic brain disease, for which no curative treatment is available, and marked by memory disorders, changes in

- 1 personality, deterioration in personal care, impaired reasoning
- 2 ability and disorientation. I (Deleted by amendment, P.L.,
- 3 c. (pending before the Legislature as this bill)
- 4 (cf: P.L.2004, c.130, s.123)

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- 6 13. Section 6 of P.L.1979, c.496 (C.55:13B-6) is amended to read as follows:
- 6. The commissioner shall establish standards to ensure that every rooming and boarding house in this State is constructed and operated in such a manner as will protect the health, safety, and
- welfare of its residents and at the same time preserve and promote a homelike atmosphere appropriate to such facilities, including, but
- 13 not limited to, standards to provide for the following:
- a. Safety from fire;
- b. Safety from structural, mechanical, plumbing, and electrical deficiencies;
- c. Adequate light and ventilation;
- d. Physical security;
- e. Protection from harassment, fraud, and eviction without due cause;
 - f. Clean and reasonably comfortable surroundings;
- g. Adequate personal and financial services rendered in boarding houses;
 - h. Disclosure of owner identification information;
- 25 i. Maintenance of orderly and sufficient financial and 26 occupancy records;
- j. Referral of residents, by the operator, to social service and health agencies for needed services;
- 29 k. Assurance that no constitutional, civil, or legal right will be 30 denied solely by reason of residence in a rooming or boarding 31 house;
- 1. Reasonable access for employees of public and private agencies, and reasonable access for other citizens upon receiving the consent of the resident to be visited by them;
- m. Opportunity for each resident to live with as much independence, autonomy, and interaction with the surrounding community as [he] the resident is capable of [; and] doing.
 - n. [Assurance that the needs of residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, will be met in accordance with standards adopted by regulation of the commissioner, which shall be promulgated no later than 90 days after the effective date of this act, which shall include, at a minimum, the following:
- 45 (1) staffing levels;
- 46 (2) staff qualifications and training;
- 47 (3) special dietary needs of residents;

- (4) special supervision requirements relating to the individual needs of residents;
- (5) building safety requirements appropriate to the needs of residents;
- (6) special health monitoring of residents by qualified, licensed health care professionals, including a requirement that a medical assessment be performed on a resident with special needs as described in this subsection, as determined necessary by the commissioner, prior to admission and on a quarterly basis thereafter to ensure that the facility is appropriate to the needs of the resident; and
- (7) criteria for discharging residents which shall be set forth in the admission agreement which shall be provided to the resident or the resident's representative prior to or upon admission. The commissioner may revoke the license of any provider who violates the criteria for discharging residents. (Deleted by amendment, P.L., c. (pending before the Legislature as this bill)

18 (cf: P.L.1997, c.260, s.2)

- 20 14. Section 7 of P.L.1979, c.496 (C.55:13B-7) is amended to read as follows:
 - 7. a. (1) No person shall own or operate a rooming or boarding house, hold out a building as available for rooming or boarding house occupancy, or apply for any necessary construction or planning approvals related to the establishment of a rooming or boarding house without a valid license to own or operate such a facility, issued by the commissioner and, if appropriate, by a municipality which has elected to issue such licenses pursuant to P.L.1993, c.290 (C.40:52-9 et seq.).
 - (2) **[**No person shall own or operate a rooming or boarding house that offers or advertises or holds itself out as offering personal care services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, hold out a building as available for rooming or boarding house occupancy for such residents, or apply for any necessary construction or planning approvals related to the establishment of a rooming or boarding house for such residents without a valid license to own or operate such a facility, issued by the commissioner. **]** (Deleted by amendment, P.L., c. (pending before the Legislature as this bill)
 - (3) Any person found to be in violation of this subsection shall be liable for a civil penalty of not more than [\$5,000.00] \$5,000 for each building so owned or operated, which penalty shall be payable to the appropriate licensing entity.
 - b. The commissioner shall establish separate categories of licensure for owning and for operating a rooming or boarding house, provided, however, that an owner who himself operates such a facility need not also possess an operator's license.

If an owner seeking to be licensed is other than an individual, the application shall state the name of an individual who is a member, officer, or stockholder in the corporation or association seeking to be licensed, and the same shall be designated the primary owner of the rooming or boarding house.

Each application for licensure shall contain such information as the commissioner may prescribe and, unless the person is licensed by a municipality to own or operate a rooming and boarding house pursuant to P.L.1993, c.290 (C.40:52-9 et seq.), shall be accompanied by a fee established by the commissioner which shall not be less than [\$150.00] \$150 or more than [\$600.00] \$600, except as provided in subsection e. of this section. If, upon receipt of the fee and a review of the application, the commissioner determines that the applicant will operate, or provide for the operation of, a rooming or boarding house in accordance with the provisions of this act, [he] the commissioner shall issue a license to [him] the applicant.

Each license shall be valid for one year from the date of issuance, but may be renewed upon application by the owner or operator and upon payment of the same fee required for initial licensure.

- c. Only one license shall be required to own a rooming or boarding house, but an endorsement thereto shall be required for each separate building owned and operated, or intended to be operated, as a rooming or boarding house. Each application for licensure or renewal shall indicate every such building for which an endorsement is required. If, during the term of a license, an additional endorsement is required, or an existing one is no longer required, an amended application for licensure shall be submitted.
- d. A person making application for, or who has been issued, a license to own or operate a rooming or boarding house who conceals the fact that the person has been denied a license to own or operate a residential facility, or that the person's license to own or operate a residential facility has been revoked by a department or agency of state government in this or any other state is liable for a civil penalty of not more than [\$5,000.00] \$5,000, and any license to own or operate a rooming or boarding house which has been issued to that person shall be immediately revoked.
- e. The commissioner shall annually review the cost of administering and enforcing this section and shall establish by rule such changes to the license application fee as may be necessary to cover the cost of such administration and enforcement.

43 (cf: P.L.2007, c.339, s.1)

15. (New section) a. The Department of Community Affairs shall cease its responsibilities for licensure, inspections, and the establishment and enforcement of standards with respect to each rooming or boarding house that provides services to residents with

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special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, as of the date that the Department of Health assumes these responsibilities pursuant to section 18 of P.L., c. (C.) (pending before the Legislature as this bill).

b. The Department of Community Affairs shall establish and enter into an inter-agency agreement with the Department of Health as necessary for the purposes of this section and section 18 of P.L., c. (C.) (pending before the Legislature as this bill).

16. (New section) The Department of Community Affairs shall not issue a license to any person to own or operate a new rooming or boarding house that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, on or after the date of enactment of P.L. , c. (C.) (pending before the Legislature as this bill).

17. (New section) As used in sections 18 through 26 of P.L.c. (C.) (pending before the Legislature as this bill):

"Alzheimer's disease and related disorders" means a form of dementia characterized by a general loss of intellectual abilities of sufficient severity to interfere with social or occupational functioning.

"Commissioner" means the Commissioner of Health.

"Department" means the Department of Health.

"Dementia" means a chronic or persistent disorder of the mental processes due to organic brain disease, for which no curative treatment is available, and marked by memory disorders, changes in personality, deterioration in personal care, impaired reasoning ability, and disorientation.

"Dementia care home" means a community residential facility that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, is subject to the licensure authority of the Department of Health as a health care facility pursuant to P.L.1971, c.136 (C. 26:2H-1 et seq.), and meets the requirements of section 19 of P.L. , c. (C.) (pending before the Legislature as this bill).

18. (New section) a. (1) Notwithstanding any law, rule, or regulation to the contrary, commencing on or after the effective date of P.L., c. (C.) (pending before the Legislature as this bill) and subject to the provisions of subsection b. of this section, the Department of Health shall be responsible for licensure, inspections, and the establishment and enforcement of standards with respect to each community residential facility in the State that provides services to residents with special needs, including, but not

- limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, which shall be thereafter known as a dementia care home.
 - (2) The department shall be empowered to exercise such authority with respect to a dementia care home as the department is granted with respect to any other health care facility licensed by the department, pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) and any rules and regulations adopted pursuant thereto, and in accordance with the provisions of P.L. , c. (C.) (pending before the Legislature as this bill).
 - b. The department shall establish and enter into an inter-agency agreement with the Department of Community Affairs as necessary for the purposes of subsection a. of this section.
 - c. (1) Whenever any reference is made in any law, rule, regulation, order, contract, document, or judicial or administrative proceeding to rooming and boarding houses for residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, the same shall be deemed to mean or refer to "dementia care homes."
 - (2) Whenever the term "Department of Community Affairs" appears or any reference is made thereto in any law, rule, regulation, order, contract, document, or judicial or administrative proceeding pertaining to rooming and boarding houses for residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, the same shall be deemed to mean or refer to the "Department of Health."
 - d. A dementia care home that is operating as a rooming or boarding house that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, on the effective date of P.L., c. (C.) (pending before the Legislature as this bill) shall be granted provisional licensure by the department for a period of one year following the effective date. At the end of that period, the department shall issue a license to the facility pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) or make continued licensure subject to such actions by the facility as the commissioner determines necessary to effectuate the purposes of P.L.1971, c.136 and P.L., c. (C.) (pending before the Legislature as this bill).

19. (New section) a. A dementia care home shall be a facility, whether in single or multiple dwellings, whether public or private, whether incorporated or unincorporated, whether for profit or nonprofit, operated at the direction of or under the management of an individual or individuals, corporation, partnership, society, or association, which furnishes food and shelter to four or more persons 18 years of age or older who are unrelated to the operator

1 of the facility, and which provides dietary services, recreational 2 activities, supervision of self-administration of medications, 3 supervision of and assistance in activities of daily living and 4 assistance in obtaining health services to any one or more of such 5 persons, in addition to such facilities, services, activities, and 6 assistance as the Commissioner of Health may prescribe by 7 regulation that are designed to meet the specific needs of residents 8 with special needs, including, but not limited to, persons with 9 Alzheimer's disease and related disorders or other forms of 10 dementia. A dementia care home shall not include: a community 11 residence for the developmentally disabled as defined in section 2 12 of P.L.1977, c. 448 (C.30:11B-2); a facility or living arrangement 13 operated by, or under contract with, a State department or agency, 14 upon the written authorization of the commissioner; or a privately 15 operated establishment licensed pursuant to chapter 11 of Title 30 16 of the Revised Statutes.

b. A resident of a dementia care home shall be a person with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, as prescribed by regulation of the commissioner, who is: 18 years of age or older; ambulant with or without assistive devices; certified by a licensed physician to be free from communicable disease and not in need of skilled nursing care; and, except in the case of a person 65 years of age or over, in need of dietary services, supervision of self-administration of medications, supervision of and assistance in activities of daily living, or assistance in obtaining health care services. A resident of a dementia care home shall not be given skilled nursing care while a resident, except that the provisions of this subsection shall not be construed to prevent: care of residents in emergencies or during temporary illness for a period of one week or less; or a licensed physician from ordering nursing or other health care services for the resident.

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- 20. (New section) a. (1) A person shall not operate a dementia care home, or offer, advertise, or hold out a facility as a dementia care home, hold out a building as available for occupancy by dementia care home residents, or apply for any necessary construction or planning approvals related to the establishment of a dementia care home, without a valid license having been issued by the department for the operation of that facility in accordance with the provisions of P.L.1971, c.136 (C.26:2H-1 et seq.) and P.L.,
- 42 c. (C.) (pending before the Legislature as this bill). 43 (2) A person shall not offer, advertise, or hold out
 - (2) A person shall not offer, advertise, or hold out a dementia care home as another type of health care facility licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.).
 - (3) A person found to be in violation of paragraph (1) or (2) of this subsection shall be liable for a civil penalty for each building so

- 1 operated in accordance with the provisions of section 24 of P.L.
- 2 c. (C.) (pending before the Legislature as this bill).
 - b. Notwithstanding the provisions of any municipal ordinance
- to the contrary, a dementia care home shall meet such requirements as the commissioner shall establish by regulation for the posting of
- 6 visible signs in its local community that identify the location of the
- 7 facility.

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- 9 21. (New section) The commissioner shall establish standards to 10 ensure that each dementia care home is constructed and operated in 11 such a manner as will protect the health, safety, and welfare of its 12 residents and at the same time preserve and promote a homelike 13 atmosphere appropriate to these facilities, including, but not limited
- 14 to, standards to provide for the following:
 - a. Safety from fire;
- b. Safety from structural, mechanical, plumbing, and electricaldeficiencies;
- c. Adequate light and ventilation;
- d. Physical security;
- e. Protection from harassment, fraud, and eviction without due cause;
 - f. Clean and reasonably comfortable surroundings;
- g. Adequate personal and financial services rendered in the facility;
 - h. Disclosure of owner identification information;
- i. Maintenance of orderly and sufficient financial and occupancy records;
- j. Referral of residents, by the operator, to social service and health care providers for needed services;
- 30 k. Assurance that no constitutional, civil, or legal right will be 31 denied solely by reason of residence in a dementia care home;
 - 1. Reasonable access for employees of public and private agencies, and reasonable access for other citizens upon receiving the consent of the resident to be visited by them;
- m. Opportunity for each resident to live with as much independence, autonomy, and interaction with the surrounding community as the resident is capable of doing;
- n. Assurance that the needs of residents of a dementia care home will be met, which shall include, at a minimum, the following:
- 41 (1) staffing levels, which shall ensure that the ratio of direct care 42 staff to residents in the facility is equal to or higher than that which 43 existed on the date of enactment of P.L., c. (C.) (pending 44 before the Legislature as this bill);
- 45 (2) staff qualifications and training;
- 46 (3) special dietary needs of residents;
- 47 (4) special supervision requirements relating to the individual 48 needs of residents;

- (5) building safety requirements appropriate to the needs of residents, including the requirement to maintain the operation 24 hours a day, seven days a week, of window, door, and any other locks or security system designed to prevent the elopement of a resident;
- (6) special health monitoring of residents by qualified, licensed health care professionals, including a requirement that a medical assessment by a physician be performed on a resident with special needs as described in this subsection, as determined necessary by the commissioner, prior to admission and on a quarterly basis thereafter, to ensure that the facility is appropriate to the needs of the resident; and
- (7) criteria for discharging residents which shall be set forth in the admission agreement, which shall be provided to the resident or the resident's representative prior to or upon admission. The commissioner may revoke the license of any provider who violates the criteria for discharging residents.

- 22. (New section) a. Notwithstanding the provisions of any other law or regulation to the contrary, the commissioner may grant, to a dementia care home that is operating as a rooming or boarding house that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, on the effective date of P.L., c. (C.) (pending before the Legislature as this bill), a temporary or permanent waiver of one or more requirements established by regulation of the commissioner for health care facilities licensed pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.) that the commissioner has determined are otherwise applicable to the dementia care home, if the dementia care home can demonstrate to the satisfaction of the commissioner that:
- (1) the granting of the waiver would not pose a threat to the health, safety, or welfare of its residents; and
- (2) the failure to grant such a waiver would pose a serious financial hardship to the facility.
- b. A dementia care home that is seeking a waiver pursuant to subsection a. of this section shall apply for the waiver on a form and in a manner prescribed by the commissioner.

- 23. (New section) a. Every resident of a dementia care home facility shall have the right:
 - (1) To manage the resident's own financial affairs;
 - (2) To wear the resident's own clothing;
- (3) To determine the resident's own dress, hair style, or other personal effects according to individual preference;
- (4) To retain and use the resident's personal property in the resident's immediate living quarters, so as to maintain individuality and personal dignity, except where the facility can demonstrate that

- it would be unsafe, impractical to do so, or infringe upon the rights of others, and that mere convenience is not the facility's motive to restrict this right;
 - (5) To receive and send unopened correspondence;
 - (6) To unaccompanied access to a telephone at a reasonable hour and to a private phone at the resident's expense;
 - (7) To privacy;

- (8) To retain the services of the resident's own personal physician at the resident's own expense or under a health care plan and to confidentiality and privacy concerning the resident's medical condition and treatment;
- (9) To unrestricted communication, including personal visitation with any person of the resident's choice, at any reasonable hour;
- (10) To make contacts with the community and to achieve the highest level of independence, autonomy, and interaction with the community of which the resident is capable;
- (11) To present grievances on behalf of the resident or others to the operator, State governmental agencies, or other persons without threat of reprisal in any form or manner;
- (12) To a safe and decent living environment and considerate and respectful care that recognizes the dignity and individuality of the resident;
- (13) To refuse to perform services for the facility, except as contracted for by the resident and the operator;
- (14) To practice the religion of the resident's choice, or to abstain from religious practice; and
- (15) To not be deprived of any constitutional, civil, or legal right solely by reason of residence in a dementia care home.
- b. The operator of a dementia care home shall ensure that a written notice of the rights set forth in subsection a. of this section is given to every resident upon admittance to the facility and to each resident upon request. The operator shall also post this notice in a conspicuous public place in the facility. This notice shall include the name, address, and telephone numbers of the Office of the Ombudsman for the Institutionalized Elderly, county welfare agency, and county office on aging.
- c. A person or resident whose rights as set forth in subsection a. of this section are violated shall have a cause of action against any person committing the violation. The action may be brought in any court of competent jurisdiction to enforce those rights and to recover actual and punitive damages for their violation. A plaintiff who prevails in the action shall be entitled to recover reasonable attorney's fees and costs of the action.

 24. (New section) A person who operates a dementia care home on or after the effective date of P.L. , c. (C.) (pending before the Legislature as this bill) shall not provide health care services in that facility. Nothing in this section shall be construed to prohibit a

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1	licensed health care professional, who is acting within the scope of
2	that person's license, from providing health care services to a
3	resident of a dementia care home.

25. (New section) A person or entity found to be in violation of the provisions of P.L., c. (C.) (pending before the Legislature as this bill), or any rules or regulations adopted by the commissioner pursuant thereto with respect to the operation of a dementia care home, shall be subject to a penalty as provided for in sections 13 or 14 of P.L.1971, c.136 (C.26:2H-13 or 26:2H-14).

Legislature as this bill).

26. (New section) The commissioner and the Commissioner of Community Affairs, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt, notwithstanding any provision of P.L.1968, c.410 (C.52:14B-1 et seq.) to the contrary, immediately upon filing with the Office of Administrative Law, such rules and regulations as the commissioners deem necessary to effectuate the purposes of P.L., c. (C.) (pending before the Legislature as this bill), which shall be effective for a period not to exceed 12 months following the effective date of P.L., c. . The regulations shall thereafter be amended, adopted, or readopted, in accordance with the provisions of P.L.1968, c.410 (C.52:14B-1 et seq.), as the commissioner or the Commissioner of Community Affairs determine necessary to effectuate the purposes of P.L., c. (C.) (pending before the

27. This act shall take effect on the first day of the seventh month next following the date of enactment, except that section 16 shall take effect immediately, but the Commissioners of Health and Community Affairs may take such anticipatory administrative action in advance thereof as shall be necessary for the implementation of this act.

STATEMENT

This bill transfers responsibility for the oversight of rooming or boarding houses for persons with dementia from the Department of Community Affairs (DCA) to the Department of Health (DOH), which is to license these facilities as "dementia care homes."

The bill amends the "Rooming and Boarding House Act of 1979" to delete its provisions concerning the regulation of rooming or boarding houses for persons with dementia by DCA, and creates new sections of law that supplement chapter 2H of Title 26 of the Revised Statutes to set forth the regulatory authority of DOH over dementia care homes and the regulatory requirements that will

apply to these entities as health care facilities licensed pursuant to the "Health Care Facilities Planning Act."

DCA is prohibited under this bill from issuing a license to any person to own or operate a new rooming or boarding house that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, on or after the date of enactment of the bill.

DOH is empowered under this bill to exercise such authority with respect to a dementia care home as it is granted with respect to any other DOH-licensed health care facility. A dementia care home will be granted provisional licensure by DOH for a period of one year following the effective date of the bill. At the end of that period, DOH is to issue a license to the facility or make continued licensure subject to such actions by the facility as the Commissioner of Health determines necessary to effectuate the purposes of the "Health Care Facilities Planning Act" and this bill.

The bill defines "dementia care home" as a community residential facility that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, is subject to the licensure authority of DOH as a health care facility, and meets the requirements of this bill.

The bill prohibits a person from operating, or advertising a facility as, a dementia care home without a valid license having been issued by DOH for the operation of that facility, or from advertising a dementia care home as another type of health care facility licensed by DOH.

The bill directs the Commissioner of Health to establish standards to protect the health, safety, and welfare of dementia care home residents, including standards that are designed to meet the particular needs of persons with dementia, and requires DOH to include dementia care homes among the long-term care facilities for which it posts information on its website about the ownership of the facility and any violation of statutory standards or DOH regulations.

In addition, the bill sets forth the rights of dementia care home residents and requires a dementia care home operator to ensure that a written notice of these rights is given to every resident upon admittance to the facility and to each resident upon request. The operator is to post this notice in a conspicuous public place in the facility, and the notice is to include the name, address, and telephone numbers of the Office of the Ombudsman for the Institutionalized Elderly, county welfare agency, and county office on aging.

The bill also includes dementia care homes among those facilities with respect to which the Office of the Ombudsman for the Institutionalized Elderly is authorized to receive, investigate, and resolve complaints and to initiate actions to secure, preserve, and

promote the health, safety, and welfare, and the civil and human rights, of their elderly residents.

3 The Commissioner of Health is authorized to grant, to a dementia care home that is operating as a rooming or boarding 4 5 house that provides services to persons with dementia on the 6 effective date of the bill, a temporary or permanent waiver of one or 7 more requirements established by regulation of the commissioner 8 for licensed health care facilities that the commissioner has 9 determined are otherwise applicable to the dementia care home, if 10 the dementia care home can demonstrate to the satisfaction of the 11 commissioner that: the granting of the waiver would not threaten 12 the health, safety, or welfare of its residents; and the failure to grant 13 a waiver would pose a serious financial hardship to the facility.

Dementia care homes would be exempted from the certificate of need requirement that applies to the construction or expansion of DOH-licensed health care facilities such as hospitals and nursing homes.

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The bill provides for the imposition of penalties by DOH with respect to a dementia care home in the same manner as would apply in the case of a violation of the "Health Care Facilities Planning Act" by any other licensee.

Finally, the bill authorizes the Commissioners of Health and Community Affairs to establish and enter into an inter-agency agreement as necessary for its purposes, and to adopt rules and regulations to implement its provisions on an expedited basis for a period of up to 12 months following its effective date.

The bill takes effect on the first day of the seventh month following enactment, but authorizes the Commissioners of Health and Community Affairs to take prior administrative action as necessary for its implementation.

SENATE HEALTH, HUMAN SERVICES AND SENIOR CITIZENS COMMITTEE

STATEMENT TO

SENATE, No. 1145

with committee amendments

STATE OF NEW JERSEY

DATED: JUNE 8, 2015

The Senate Health, Human Services and Senior Citizens Committee reports favorably and with committee amendments Senate Bill No. 1145.

As amended by the committee, this bill would transfer responsibility for the oversight of rooming or boarding houses for persons with dementia from the Department of Community Affairs (DCA) to the Department of Health (DOH), which is to license these facilities as "dementia care homes."

The bill amends the "Rooming and Boarding House Act of 1979" to delete its provisions concerning the regulation of rooming or boarding houses for persons with dementia by DCA, and would create new sections of law that supplement chapter 2H of Title 26 of the Revised Statutes to set forth the regulatory authority of DOH over dementia care homes and the regulatory requirements that will apply to these entities as health care facilities licensed pursuant to the "Health Care Facilities Planning Act."

DCA would be prohibited under the bill from issuing a license to any person to own or operate a new rooming or boarding house that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, on or after the date of enactment of the bill.

DOH would be empowered under the bill to exercise such authority with respect to a dementia care home as it is granted with respect to any other DOH-licensed health care facility. A dementia care home will be granted provisional licensure by DOH for a period of one year following the effective date of the bill. At the end of that period, DOH is to issue a license to the facility or make continued licensure subject to such actions by the facility as the Commissioner of Health determines necessary to effectuate the purposes of the "Health Care Facilities Planning Act" and this bill.

The bill defines "dementia care home" as a community residential facility that: (1) provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia; (2) is subject to the

licensure authority of DOH as a health care facility; and (3) meets the requirements of this bill.

The bill prohibits a person from operating, or advertising a facility as, a dementia care home without a valid license having been issued by DOH for the operation of that facility, or from advertising a dementia care home as another type of health care facility licensed by DOH.

The bill directs the Commissioner of Health to establish standards to protect the health, safety, and welfare of dementia care home residents, including standards that are designed to meet the particular needs of persons with dementia, and requires DOH to include dementia care homes among the long-term care facilities for which it posts information on its website about the ownership of the facility and any violation of statutory standards or DOH regulations.

In addition, the bill sets forth the rights of dementia care home residents and requires a dementia care home operator to ensure that a written notice of these rights is given to every resident upon admittance to the facility and to each resident upon request. The operator is to post this notice in a conspicuous public place in the facility, and the notice is to include the name, address, and telephone numbers of the Office of the Ombudsman for the Institutionalized Elderly, county welfare agency, and county office on aging.

The bill also includes dementia care homes among those facilities with respect to which the Office of the Ombudsman for the Institutionalized Elderly is authorized to receive, investigate, and resolve complaints and to initiate actions to secure, preserve, and promote the health, safety, and welfare, and the civil and human rights, of their elderly residents.

The Commissioner of Health is authorized to grant, to a dementia care home that is operating as a rooming or boarding house that provides services to persons with dementia on the effective date of the bill, a temporary or permanent waiver of one or more requirements established by regulation of the commissioner for licensed health care facilities that the commissioner has determined are otherwise applicable to the dementia care home, if the dementia care home can demonstrate to the satisfaction of the commissioner that: the granting of the waiver would not threaten the health, safety, or welfare of its residents; and the failure to grant a waiver would pose a serious financial hardship to the facility.

Dementia care homes would be exempted from the certificate of need requirement that applies to the construction or expansion of DOH-licensed health care facilities such as hospitals and nursing homes.

Dementia care homes would be prohibited from providing health care services and skilled nursing care to residents. However, nothing in the bill would prevent a health care professional from providing health care services to a dementia care home resident in an emergency or during periods of temporary illness.

The bill provides for the imposition of penalties by DOH with respect to a dementia care home in the same manner as would apply in the case of a violation of the "Health Care Facilities Planning Act" by any other licensee.

Finally, the bill authorizes the Commissioners of Health and Community Affairs to establish and enter into an inter-agency agreement as necessary for its purposes, and to adopt rules and regulations to implement its provisions on an expedited basis for a period of up to 12 months following its effective date.

The committee amended the bill to incorporate technical changes as necessary to:

- ensure that existing State law is correctly cited throughout the bill, and that the citations in the bill are identical to those contained in A-1102;
- ensure that sections 8 and 11 of the bill properly reflect the most recent version of the laws that are being amended thereby; and
- otherwise ensure that the bill text is identical to the text of A-1102.

As amended, this bill is identical to A-1102 (Vainieri Huttle/Watson Coleman/Sumter/Spencer/Schaer/Wimberly), which the committee also reported favorably on this date.

LEGISLATIVE FISCAL ESTIMATE

[First Reprint]

SENATE, No. 1145 STATE OF NEW JERSEY 216th LEGISLATURE

DATED: JUNE 19, 2015

SUMMARY

Synopsis: Provides for licensure of dementia care homes by DOH.

Type of Impact: Indeterminate State revenue increase.

Indeterminate State cost.

Agencies Affected: Department of Community Affairs, Department of Health

Office of Legislative Services Estimate

Fiscal Impact	
State Cost	Indeterminate increase
State Revenue	Indeterminate increase

- The Office of Legislative Services (OLS) estimates that Senate Bill No. 1145 (1R) may result in increased revenue for the State through the collection of license and inspection fees by the Department of Health (DOH) from the newly designated dementia care homes. The bill provides no details on the range of these fees, but if the department establishes fees for these facilities at the same rate as current fees for similar facilities, the OLS estimates that the department will generate between \$10,680 and \$40,800 in fees the first year after enactment and between \$21,480 and \$76,800 in fees the following year.
- The DOH will also experience an increase in expenditures to license and provide regulatory
 oversight of the newly designated dementia care homes. These expenditures will most likely
 be offset by the additional revenue generated by the fees charged by the department to the
 operators and owners of dementia care homes.
- Additionally, the State will experience a reduction in State revenue for the first year after enactment of this bill as the approximately \$16,800 in current fees collected by the Department of Community Affairs (DCA) for the licensing of boarding homes for persons with dementia will no longer be collected.



• Furthermore, the bill provides new responsibilities to the Office of the Ombudsman for the Institutionalized Elderly which may result in minimal indeterminate costs for the office.

BILL DESCRIPTION

Senate Bill No. 1145 (1R) of 2014 transfers responsibility for the oversight of rooming and boarding houses for persons with dementia from the DCA to the DOH, which is to license these facilities as "dementia care homes."

The bill amends the "Rooming and Boarding House Act of 1979" to delete its provisions concerning the regulation of rooming or boarding houses for persons with dementia by DCA, and creates new sections of law that supplement chapter 2H of Title 26 of the Revised Statutes to set forth the regulatory authority of DOH over dementia care homes and the regulatory requirements that will apply to these entities as health care facilities licensed pursuant to the "Health Care Facilities Planning Act."

The DCA is prohibited under this bill from issuing a license to any person to own or operate a new rooming or boarding house that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, on or after the date of enactment of the bill.

The DOH is empowered under this bill to exercise such authority with respect to a dementia care home as it is granted with respect to any other DOH-licensed health care facility. A dementia care home will be granted provisional licensure by DOH for a period of one year following the effective date of the bill. At the end of that period, DOH is to issue a license to the facility or make continued licensure subject to such actions by the facility as the Commissioner of Health determines necessary to effectuate the purposes of the "Health Care Facilities Planning Act" and this bill.

The bill defines "dementia care home" as a community residential facility that: (1) provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia; (2) is subject to the licensure authority of DOH as a health care facility; and (3) meets the requirements of this bill.

The bill prohibits a person from operating, or advertising a facility as, a dementia care home without a valid license having been issued by DOH for the operation of that facility, or from advertising a dementia care home as another type of health care facility licensed by DOH.

The bill directs the Commissioner of Health to establish standards to protect the health, safety, and welfare of dementia care home residents, including standards that are designed to meet the particular needs of persons with dementia, and requires DOH to include dementia care homes among the long-term care facilities for which it posts information on its website about the ownership of the facility and any violation of statutory standards or DOH regulations.

In addition, the bill sets forth the rights of dementia care home residents and requires a dementia care home operator to ensure that a written notice of these rights is given to every resident upon admittance to the facility and to each resident upon request. The operator is to post this notice in a conspicuous public place in the facility, and the notice is to include the name, address, and telephone numbers of the Office of the Ombudsman for the Institutionalized Elderly, county welfare agency, and county office on aging.

The bill also includes dementia care homes among those facilities with respect to which the Office of the Ombudsman for the Institutionalized Elderly is authorized to receive, investigate, and resolve complaints and to initiate actions to secure, preserve, and promote the health, safety, and welfare, and the civil and human rights, of their elderly residents.

The Commissioner of Health is authorized to grant to a dementia care home that is operating as a rooming or boarding house that provides services to persons with dementia on the effective date of the bill, a temporary or permanent waiver of one or more requirements established by

regulation of the commissioner for licensed health care facilities that the commissioner has determined are otherwise applicable to the dementia care home, if the dementia care home can demonstrate to the satisfaction of the commissioner that: granting the waiver would not threaten the health, safety, or welfare of its residents; and the failure to grant a waiver would pose a serious financial hardship to the facility.

Dementia care homes would be exempted from the certificate of need requirement that applies to the construction or expansion of DOH-licensed health care facilities such as hospitals and nursing homes.

Dementia care homes would be prohibited from providing health care services and skilled nursing care to residents. However, nothing in the bill would prevent a health care professional from providing health care services to a dementia care home resident in an emergency or during periods of temporary illness.

The bill provides for the imposition of penalties by DOH with respect to a dementia care home in the same manner as would apply in the case of a violation of the "Health Care Facilities Planning Act" by any other licensee.

Finally, the bill authorizes the Commissioners of Health and Community Affairs to establish and enter into an inter-agency agreement as necessary to effectuate the purposes of the bill, and to adopt rules and regulations to implement the provisions of the bill on an expedited basis for a period of up to 12 months following its effective date.

FISCAL ANALYSIS

EXECUTIVE BRANCH

None received.

OFFICE OF LEGISLATIVE SERVICES

The OLS estimates that Senate Bill No. 1145 (1R) will result in increased revenue and increased expenditures by the DOH. Additionally, the bill will result in decreased costs and revenue for the DCA as a result of the shift in regulatory oversight of dementia care homes from the DCA to the DOH. As the bill does not establish the fees to be charged by the DOH, the OLS can only estimate the revenue that may be generated by the provisions of the bill by analyzing similar facilities overseen by the DOH. The current revenue collected by the DCA is also known and can be analyzed.

Currently, the DCA provides oversight for 24 licensed dementia boarding homes. The owners and/or operators of these boarding homes are charged a licensing fee of \$444 and then a supplemental fee which is assessed in direct proportion to the number of licensed beds. The total annual fee for any license may not exceed \$666. These fees generate approximately \$16,800 a year. According to the DCA, it employs 22 persons who are responsible for inspecting all types of boarding homes. A portion of these employees' time is spent inspecting dementia boarding homes. According to the DCA, the costs to inspect boarding homes has exceeded the revenue it has generated and the shortfall has been paid for out of other DCA funds. The amount of shortfall is not available.

The bill provides that the DCA may no longer license dementia boarding homes and instead requires the DOH to license dementia care homes, which are defined as community residential facilities that provide services to residents with special needs, including Alzheimer's disease and dementia.

Pursuant to the bill, the DOH is tasked with the licensure, inspections and the establishment and enforcement of standards with respect to dementia care homes. The DOH is to promulgate regulations regarding the establishment, licensure and regulations of dementia care homes and these regulations will most likely include costs for licensure and inspections. To determine an estimated cost, the OLS relied on the current fee structure for similar facilities that are licensed and inspected by the DOH.

In the first year after enactment the DOH may grant provisional licensure to current dementia boarding homes licensed by the DCA. The bill is silent on the cost of this licensure but it is likely that the fee will match the current licensure fee for other similar facilities licensed by the DOH. Currently, administrative regulation establishes various fee schedules for different types of facilities overseen by the department. Each assisted living resident or comprehensive personal care home facility pays a fee of \$1,500, plus \$15.00 per bed, initially and then annually each year thereafter (N.J.A.C.8:36-2.2). Furthermore, each residential health care facility located with a licensed health care facility is charged \$225, plus \$15.00 per bed, initially and then annually each year thereafter (N.J.A.C.8:43-2.1). These fees may not exceed the amount statutorily established as \$2,000 per facility (N.J.S.A.26:2H-12). Additionally, the same regulations requires that each assisted living residence and comprehensive personal care home facility is assessed a biennial inspection fee of \$1,500 and each residential health care facility located with a licensed health care facility is assessed a biennial inspection fee of \$450. It is likely that the department will adopt fees within the range of fees currently charged similar facilities. Therefore, if all 24 of the current dementia boarding homes choose to become dementia care homes, the total revenue generated for the DOH will range from approximately \$21,480 to \$76,800 for the year in which the homes are inspected and between \$10,680 to \$40,800 for a non-inspection year, using an average fee of \$445 to \$1700 a facility.

The total revenue estimated to be generated by the DOH fees must be offset by the \$16,800 in fees that will no longer be generated through the DCA as all of the fees are generated for the General Fund. Thus, the overall revenue anticipated to be generated pursuant to this bill will range from \$4,680 to \$76,800 for years in which an inspection fee is paid and (\$6,120) to \$24,000 in renewal years.

Although it is possible that the DOH will set the fees at the lower rate, it is more likely that the fees will be set to meet the expenditures and the bill will be revenue neutral.

The costs for the DOH to license and regulate the dementia care home is dependent upon the details of the regulations promulgated for the homes. Without more details on the specific responsibilities of the DOH and the number of staff needed to carry out these duties, it is not possible for the OLS to estimate with any certainty the costs to the DOH.

The bill also requires the Office of the Ombudsman for the Institutionalized Elderly to include dementia care homes among those facilities which the office is authorized to receive, investigate, and resolve complaints and to initiate actions to secure, preserve, and promote the health, safety, and welfare, and the civil and human rights, of their elderly residents. The OLS cannot determine if the office will be able to absorb the costs of this additional work with its current resources or if new costs will be incurred by the office.

Finally, the bill provides for the imposition of penalties by DOH with respect to violations in the administration or care provided by dementia care homes. This revenue cannot be estimated due to uncertainty on the violations that may be committed and the fines collected for those violations.

Section: Human Services

Analyst: Robin Ford

Senior Fiscal Analyst

FE to S1145 [1R]

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Approved: David J. Rosen

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.).

SENATE BUDGET AND APPROPRIATIONS COMMITTEE

STATEMENT TO

[First Reprint] **SENATE, No. 1145**

STATE OF NEW JERSEY

DATED: JUNE 23, 2015

The Senate Budget and Appropriations Committee reports favorably Senate Bill No. 1145 (1R).

This bill transfers responsibility for the oversight of rooming or boarding houses for persons with dementia from the Department of Community Affairs (DCA) to the Department of Health (DOH), which is to license these facilities as "dementia care homes."

The bill amends the "Rooming and Boarding House Act of 1979" to delete its provisions concerning the regulation of rooming or boarding houses for persons with dementia by DCA, and creates new sections of law that supplement chapter 2H of Title 26 of the Revised Statutes to set forth the regulatory authority of DOH over dementia care homes and the regulatory requirements that will apply to these entities as health care facilities licensed pursuant to the "Health Care Facilities Planning Act."

DCA is prohibited under the bill from issuing a license to any person to own or operate a new rooming or boarding house that provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia, on or after the date of enactment of the bill.

DOH is empowered to exercise such authority with respect to a dementia care home as is granted with respect to any other DOH-licensed health care facility. A dementia care home will be granted provisional licensure by DOH for a period of one year following the effective date of the bill. At the end of that period, DOH is to issue a license to the facility or make continued licensure subject to such actions by the facility as the Commissioner of Health determines necessary to effectuate the purposes of the "Health Care Facilities Planning Act" and this bill.

The bill defines "dementia care home" as a community residential facility that: (1) provides services to residents with special needs, including, but not limited to, persons with Alzheimer's disease and related disorders or other forms of dementia; (2) is subject to the licensure authority of DOH as a health care facility; and (3) meets the requirements of this bill.

The bill prohibits a person from operating, or advertising a facility as, a dementia care home without a valid license having been issued by DOH for the operation of that facility, or from advertising a dementia care home as another type of health care facility licensed by DOH.

The bill directs the Commissioner of Health to establish standards to protect the health, safety, and welfare of dementia care home residents, including standards that are designed to meet the particular needs of persons with dementia, and requires DOH to include dementia care homes among the long-term care facilities for which it posts information on its website about the ownership of the facility and any violation of statutory standards or DOH regulations.

In addition, the bill sets forth the rights of dementia care home residents and requires a dementia care home operator to ensure that a written notice of these rights is given to every resident upon admittance to the facility and to each resident upon request. The operator is to post this notice in a conspicuous public place in the facility, and the notice is to include the name, address, and telephone numbers of the Office of the Ombudsman for the Institutionalized Elderly, county welfare agency, and county office on aging.

The bill also includes dementia care homes among those facilities with respect to which the Office of the Ombudsman for the Institutionalized Elderly is authorized to receive, investigate, and resolve complaints and to initiate actions to secure, preserve, and promote the health, safety, and welfare, and the civil and human rights, of their elderly residents.

The Commissioner of Health is authorized to grant a temporary or permanent waiver, to a dementia care home that is operating as a rooming or boarding house that provides services to persons with dementia on the effective date of the bill, of one or more requirements established by regulation of the commissioner for licensed health care facilities that the commissioner has determined are otherwise applicable to the dementia care home, if the dementia care home can demonstrate to the satisfaction of the commissioner that: the granting of the waiver would not threaten the health, safety, or welfare of its residents; and the failure to grant a waiver would pose a serious financial hardship to the facility.

Dementia care homes will be exempt from the certificate of need requirement that applies to the construction or expansion of DOH-licensed health care facilities such as hospitals and nursing homes.

Dementia care homes will be prohibited from providing health care services and skilled nursing care to residents. However, nothing in the bill will prevent a health care professional from providing health care services to a dementia care home resident in an emergency or during periods of temporary illness.

The bill provides for the imposition of penalties by DOH with respect to a dementia care home in the same manner as would apply in the case of a violation of the "Health Care Facilities Planning Act" by any other licensee.

Finally, the bill authorizes the Commissioners of Health and Community Affairs to establish and enter into an inter-agency agreement as necessary for its purposes, and to adopt rules and regulations to implement its provisions on an expedited basis for a period of up to 12 months following its effective date.

The bill will take effect on the first day of the seventh month next following the date of enactment.

As reported, this bill is identical to Assembly Bill No. 1102, as reported by the committee.

FISCAL IMPACT:

The Office of Legislative Services (OLS) estimates that the bill may result in increased revenue for the State through the collection of license and inspection fees by the (DOH) from the newly designated dementia care homes. The bill provides no details on the range of these fees, but if the department establishes fees for these facilities at the same rate as current fees for similar facilities, the OLS estimates that the department will generate between \$10,680 and \$40,800 in fees the first year after enactment and between \$21,480 and \$76,800 in fees the following year.

The DOH will also experience an increase in expenditures to license and provide regulatory oversight of the newly designated dementia care homes. These expenditures will most likely be offset by the additional revenue generated by the fees charged by the department to the operators and owners of dementia care homes.

Additionally, the State will experience a reduction in State revenue for the first year after enactment of the bill as the approximately \$16,800 in current fees collected by DCA for the licensing of boarding homes for persons with dementia will no longer be collected.

The bill also provides new responsibilities for the Office of the Ombudsman for the Institutionalized Elderly which may result in minimal indeterminate costs for the office.

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Governor Christie Takes Action On Pending Legislation

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Monday, November 9, 2015

Tags: Bill Action



Trenton, NJ — Governor Chris Christie today took action on legislation, including a package of five bills intended to address the fiscal stability of Atlantic City.

Understanding both the immediate and long-term obstacles facing Atlantic City and its stabilization, the Governor has consistently highlighted the need for comprehensive reform efforts to confront the city's challenges – both from State and local leaders. The Governor remains committed to bringing about the necessary reforms to stabilize Atlantic City and continue an effective long-term transition to an economy that is diversified beyond its traditional gaming industry.

Continuing in that effort, Governor Christie conditionally vetoed A-3981, establishing a payment-in-lieu-of-taxes (PILOT) program for casinos operating in the City, A-3984, reallocating revenue derived from the casino investment alternative tax from the Casino Reinvestment Development Authority to the City to pay debt service on municipal bonds, and A-3985, repealing the Atlantic City Alliance.

"While I commend the Legislature for attempting to devise measures to stabilize the City's budget and finances, I am concerned that the bills, in their present form, fail to recognize the true path to economic revitalization and fiscal stability in the City," Governor Christie said. "While these bills represent the bipartisan efforts of many to provide important, near-term support to the City's immediate challenges, I do not believe they meet the goal of setting a course toward renewed, long-term prosperity and economic growth. To achieve these goals, we must continue our work and go further to ensure that the next step leads to that economically vibrant future for Atlantic City."

In addition, the Governor signed A- 3983, authorizing supplemental school aid to the Atlantic City school district, and vetoed the fifth bill, A-3982, which would add a costly and unjustified new mandate for casino business operation in the City by requiring each casino, as a condition of licensure, to provide to its full time employees "suitable" health care benefits and "suitable" retirement benefits.

"A-3982 would do nothing to enhance the financial condition of Atlantic City," Governor Christie wrote. "To be sure, this bill would make it more costly for casinos to operate in Atlantic City, thereby impeding the industry's ability to grow and expand."

Governor Christie also vetoed legislation designed to revise certain laws concerning domestic violence and firearms. The Christie Administration has made protecting our most vulnerable residents one of its main priorities and has enacted some of the toughest measures to combat domestic violence. Governor Christie has supported a comprehensive approach to addressing the level of violence within our society and recently signed legislation to further penalize aggravated assault perpetuated against domestic violence victims. This legislation, A-4218 (Mosquera, Greenwald, Lagana, Benson, Lampitt, Vainieri Huttle, Danielsen/Weinberg, Gill, Cruz-Perez), substantially restates New Jersey's existing laws that govern firearms and domestic violence and does not offer new and sensible improvements to those current laws. For that reason, rather than restate existing laws, the Governor is proposing significant amendments that will meaningfully deter future acts of violence.

- Enhanced Penalties For Domestic Violence. Governor Christie is proposing enhanced criminal penalties imposed against those who are convicted of domestic violence. To demonstrate society's unconditional condemnation of this conduct, perpetrators would receive the maximum available prison sentence under New Jersey law.
- Tighter Restrictions On Parole Eligibility For Perpetrators Of Domestic Violence. The Governor's recommended changes will strengthen penalties for perpetrators of domestic abuse by lengthening periods of parole



ineligibility.

• Prioritizing Victims Who Seek Firearms For Protection. The Governor is also recommending an immediate codification in statute of new rules currently being processed, giving expedited processing of firearm license applications for victims of domestic violence so that the victims may better defend themselves against future instances of abuse.

"I urge the Legislature to join with me in a bipartisan manner to broaden this bill's approach to reducing domestic violence while simultaneously empowering victims to protect themselves through lawful means," Governor Christie said. "Together, we can enact a more comprehensive approach and reduce the harm that domestic violence inflicts on victims, families, and our society."

The Governor also took the following action on other pending legislation:

BILL SIGNINGS:

S-2174/A-3364 (Barnes, Holzapfel/Quijano, Mainor, Pinkin) - Prohibits manufacture, sale, or installation of counterfeit or nonfunctional air bags in motor vehicles

A-815/S-852 (Coughlin, Ciattarelli, Diegnan, Pinkin, Giblin/Vitale) - Requires municipalities which license peddlers and solicitors to accept certain background check results from other municipalities

A-1029/S-274 (Benson, Vainieri Huttle, Jasey, Tucker, Wimberly/Greenstein, Ruiz) - Requires training program for school bus drivers and school bus aides on interacting with students with special needs, and requires development and use of student information cards

A-1041/S-2676 (Schaer, Johnson, Vainieri Huttle, Eustace, Mazzeo,/Rumana, Gordon, Weinberg) - Exempts Holocaust reparations payments from legal process, and from estate recovery under Medicaid program

A-1102/S-1145 (Vainieri Huttle, Sumter, Spencer, Schaer, Wimberly/Weinberg, Cruz-Perez) - Provides for licensure of dementia care homes by DOH

ACS for A-1662/S-2856 (Johnson, Lagana, Wimberly/Weinberg) - Authorizes the court to order the deletion, sealing, labeling, or correction of certain personal information in government records involving certain victims of identity theft

AS for A-1678/SS for S-1365 (Johnson, Mainor, O'Scanlon, Wilson, Wimberly/ Weinberg) - Authorizes court to order submission of DNA evidence to national database to determine whether evidence matches known individual or DNA profile from an unsolved crime

AS for ACS for A-2073/SCS for S-712 (Handlin, Space, Garcia, Pintor Marin/Cruz-Perez, Kyrillos, Lesniak) - Exempts certain offers and sales of securities from registration

A-2385/S-944 (McKeon, Diegnan, Jasey, Andrzejczak/Smith, Codey) - Authorizes rural electric cooperative and certain municipalities to establish municipal shared services authority

ACS for A-2477/SCS for S-1705 (Lampitt, Conaway, Benson, Sumter, Munoz, Pinkin/Vitale, Singer) - Establishes requirements for pharmacists to dispense biological products

A-2714/S-1993 (Giblin, Sumter/Barnes) - Requires continuing education for licensed practicing psychologists

A-2936/S-1957 (Mosquera, Lampitt, Singleton, Wimberly/Singer, Connors) - Requires complaint for guardianship of person receiving services from Division of Developmental Disabilities to include one of documents identified in bill

A-3012/S-2296 (Ciattarelli, Dancer/Bateman) - Criminalizes bestiality

A-3079/S-2766 (Jasey, Diegnan, Mainor, Wimberly, Oliver, DeCroce/Turner, Ruiz) - Prohibits administration of standardized assessments in kindergarten through second grade

A-3153/S-2415 (DeAngelo, Mosquera/Madden, Beach) - Requires UI employer contribution reports and remittances be submitted to the Division of Revenue

A-3248/S-2459 (Conaway, Sumter, Pintor Marin/Singer) - Establishes the Task Force on Chronic Obstructive Pulmonary Disease in DOH

A-3580/S-2846 (Moriarty, Dancer, Coughlin, Mainor, Pinkin, Munoz, Danielsen, Wimberly/Madden, Turner) - Prohibits sale of powdered alcohol

A-3636/SCS for S-2393, 2408, 2411 (McKeon, Lagana, Spencer/Scutari, O'Toole, Holzapfel) - Establishes crime-fraud exception to marital and civil union partnership privilege

A-3669/S-2655 (Mazzeo, Burzichelli/Whelan) - Prohibits eligibility for certain sign programs from being conditioned on availability of free drinking water or public telephone

A-3807/S-2619 (Eustace, Greenwald/Whelan) - Permits educational research and services corporations to act as lead procurement agencies for local units and publically supported educational institutions; permits Council of County Colleges to act as lead procurement agency for county colleges

A-3841/S-2540 (Munoz, Gusciora, Angelini, DeCroce/O'Toole, Weinberg) – Upgrades violation of a stalking restraining order to a crime of the third degree

A-3843/S-2735 (Caputo, Giblin, Tucker, Johnson, Mainor, Sumter/Rice) - Permits municipality to enact ordinance allowing voluntary registration of private outdoor video surveillance cameras

A-3983/S-2574 (Mazzeo, Burzichelli, Giblin/Sweeney, Whelan) - Authorizes supplemental State aid to school districts in municipality with significant decrease in commercial property valuation; makes appropriation

A-4008/SCS for S-2334 (Singleton, Mukherji, Pintor Marin, Wimberly, Sumter/Cunningham, Ruiz) - Requires DOC to make reports containing information concerning treatment and reentry initiative participation; requires AOC to establish program that collects recidivism data and make reports concerning adults sentenced to period of probation

A-4013/S-2497 (Greenwald, Lagana, Coughlin/Oroho) - Eliminates mortgage guaranty insurance coverage cap of 25% of outstanding balance of insured loan

A-4073/S-2687 (Schaer, Prieto, Caride, Lagana, Giblin, Wimberly, Rumana/Sarlo, Gill) - Requires installation of carbon monoxide detectors in certain structures; designated as "Korman and Park's Law"

A-4078/S-2686 (Vainieri Huttle, Mosquera, McKeon, Munoz, Benson, Sumter/Pou, Beck) - "Sexual Assault Survivor Protection Act of 2015"; authorizes the court to issue protective orders for victims of certain nonconsensual sexual conduct

A-4089/S-2693 (Coughlin, Ciattarelli/Beach, Singer) - Revises certain provisions of dental service corporation law

A-4143/S-2514 (Lagana, Spencer, Mukherji, Johnson, Rumana, Rodriquez-Gregg, Gusciora, Mazzeo/Barnes, Addiego) - Permits holders of certain alcoholic beverage licenses to be issued amusement game license and updates definition of recognized amusement park

A-4144/S-2755 (Pintor Marin, Spencer, Caride, Quijano, Mukherji/Ruiz, Stack) — Requires insurance producer licensing examination and registration materials to be offered in English and Spanish, and examination instructional materials to be available in Spanish

A-4167/S-2751 (Lagana, Mazzeo, Eustace, Andrzejczak, Vainieri Huttle/Barnes) - Requires DHS to notify enrollees in Programs of All-Inclusive Care for the Elderly of Medicare eligibility

A-4168/S-2750 (Lagana, Mazzeo, Eustace, Andrzejczak, Vainieri Huttle/Barnes) - Requires providers to submit to DHS expenditure details of enrollees in Program of All-Inclusive Care for the Elderly

A-4169/S-2752 (Lagana, Mazzeo, Eustace, Andrzejczak, Vainieri Huttle/Barnes) - Requires DHS to monitor utilization and billing of services for Medicaid home and community-based long-term care

A-4333/S-3020 (Singleton, Gill) - Exempts certain activities of alarm businesses from statutes governing practice of locksmithing

A-4361/S-2891 (Johnson, A.M. Bucco, Garcia, S. Kean/Barnes, A.R. Bucco) - Revises definition of all-terrain

A-4375/S-3011 (Moriarty, Andrzejczak, Mazzeo, Mosquera, Quijano, Ciattarelli, Wimberly/Van Drew, Bateman) - Upgrades crimes of false public alarm under certain circumstances and establishes reporting requirements concerning

A-4485/S-2881 (Diegnan, Jasey, Wimberly, McKeon, Lagana/Gill, Turner) - Prohibits withholding of State school aid based on student participation rate on State assessments

A-4587/S-3049 (Greenwald, Lampitt, McKeon, Holley/Scutari, Cruz-Perez) – Requires facilities providing services to persons with developmental disabilities and schools to adopt policies permitting administration of medical marijuana to qualifying patients

AJR-64/SJR-82 (Schaer, Eustace, Lagana, Spencer, Caride, Mukherji/Pou, Ruiz) - Declares August 16 of each year as "Dominican Restoration Day" in New Jersey

BILLS VETOED:

S-929/A-1908 (Sweeney, Madden/Burzichelli, Riley, Moriarty) – ABSOLUTE -Concerns certain workers' compensation supplemental benefits

A-801/S-861 (Coughlin, Wisniewski, Mazzeo/Vitale, Sacco) - CONDITIONAL - Directs New Jersey Turnpike
Authority and South Jersey Transportation Authority to study and report on potential revenue generating services of
rest areas and service plazas

A-947/S-2216 (Singleton, Lagana, Diegnan/Pennacchio, Rice) – CONDITIONAL - Requires release of bid list prior to bid date under "Local Public Contracts Law"

A-1468/S-2513 (Diegnan, Lampitt, Caride/Barnes, Ruiz) – CONDITIONAL -Establishes Task Force on Engineering Curriculum and Instruction

A-1726/S-308 (Eustace, Lagana, Mosquera, Vainieri Huttle, Wimberly/Gordon) – CONDITIONAL - Amends "Flood Hazard Area Control Act" to require DEP to take certain actions concerning delineations of flood hazard areas and

floodplains

A-2579/S-1510 (Mukherji, Pintor Marin, Eustace/Smith, Bateman) – CONDITIONAL - Authorizes municipalities to facilitate private financing of water conservation, storm shelter construction, and flood and hurricane resistance projects through use of voluntary special assessments

A-2771/S-452 (Johnson, Burzichelli, Pintor Marin, Mosquera/Ruiz, Cruz-Perez) – CONDITIONAL - "The New Jersey Social Innovation Act"; establishes social innovation loan pilot program and study commission within EDA

A-2906/S-2926 (Stender, Pinkin, Mazzeo/Whelan, Scutari) – ABSOLUTE - Excludes from gross income compensation paid to members of district boards of election for services rendered in elections

A-3223/S-2056 (Singleton, Lampitt, Quijano, Pintor Marin, Wimberly/Sarlo, Ruiz) – CONDITIONAL - Requires Division of Local Government Services to include certain property tax information on division's web page

A-3393/S-2167 (Spencer, Pintor Marin, Caputo, Tucker/Rice, Ruiz) – CONDITIONAL - Permits Newark to use rental car tax proceeds over three-year period to help reduce its "cash deficit for preceding year" appropriation and operational deficit

A-3421/S-2220 (Dancer, Mukherji/Singer) – CONDITIONAL - Revises the "Self-Funded Multiple Employer Welfare Arrangement Regulation Act"

A-3435/S-2503 (Garcia, Mukherji, Vainieri Huttle, Mainor, Eustace, Mosquera/Stack, Gordon) - CONDITIONAL - "Boys & Girls Clubs Keystone Law"; permits minors to give consent for behavioral health care

A-3500/S-1973 (Andrzejczak, Pinkin, Quijano/Van Drew, Beach) – ABSOLUTE - Requires local recreation departments and youth serving organizations to have defibrillators for youth athletic events

A-3954/S-2981 (Conaway, Singleton, Spencer, McKeon/Greenstein) – CONDITIONAL - Requires maximum contaminant level to be established for 1,2,3-trichloropropane in drinking water

A-3981/S-2572 (Mazzeo, Burzichelli, Andrzejczak/Sweeney, Whelan) - CONDITIONAL - "Casino Property Taxation Stabilization Act"

A-3982/S-2573 (Mazzeo, Burzichelli, Andrzejczak/Sweeney, Whelan) – ABSOLUTE - Requires holder of casino license to provide certain employees with certain health care and retirement benefits

A-3984/S-2575 (Mazzeo, Burzichelli, Giblin/Sweeney, Whelan) – CONDITIONAL - Reallocates casino investment alternative tax to Atlantic City to pay debt service on municipal bonds issued

A-3985/S-2576 (Mazzeo, Burzichelli, Andrzejczak, Giblin/Sweeney, Whelan) – CONDITIONAL - Removes provisions of law relating to Atlantic City Alliance

A-4018/S-2843 (Burzichelli, Caputo, Mazzeo/Sarlo, Whelan) – ABSOLUTE - Authorizes operation of lottery courier services

A-4218/S-2786 (Mosquera, Greenwald, Lagana, Benson, Lampitt, Vainieri Huttle, Danielsen/Weinberg, Gill, Cruz-Perez) - CONDITIONAL - Revises certain laws concerning domestic violence and firearms

A-4265/S-2783 (McKeon, Pintor Marin, Jasey, Caputo, Giblin, Tucker, Spencer, Oliver, Gusciora, Danielson/Codey, Ruiz, Rice) – ABSOLUTE - Permits municipal, county, and regional police and fire forces to establish five-year residency requirement for police officers and firefighters; allows exceptions to requirement under certain circumstances

A-4337/S-3008 (Schaer, Danielsen, Dancer, Sumter/Barnes) – ABSOLUTE - Expands eligibility of inmates for medical parole and requires inmate's enrollment in Medicaid under certain circumstances

A-4476/S-2876 (Conaway/Codey) - CONDITIONAL - Requires certain surgical practices and ambulatory care facilities licensed in this State to be owned by hospital or medical school located in the State

A-4607/S-3106 (Pintor Marin, Schaer, Oliver, Lagana, Johnson, Singleton/Ruiz, Cunningham) – ABSOLUTE - Makes FY 2016 supplemental appropriations of \$6,500,000 and adds language provision

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