# 26:2J-4.21

#### LEGISLATIVE HISTORY CHECK

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LAWS OF:	1999	<b>CHAPTER:</b> 332			
NJSA:	26:2J-4.21	(HMO's—retirement hom	nes)		
BILL NO:	S1273	(Substituted for A2486)			
SPONSOR(S): Singer and Littell					
DATE INTRODUCED: June 29, 1998					
COMMITTEE: ASSEMBLY:					
	SENAT	E: Health			
AMENDED DURING PASSAGE: Yes					
DATE OF PASSAGE: ASSEMBLY: December 13, 1999					
SENATE: November 15, 1999					
DATE OF APPROVAL: January 10, 2000					
FOLLOWING ARE ATTACHED IF AVAILABLE:					
FINAL TEXT OF BILL: First Reprint (Amendments during passage denoted by superscript numbers)					
S1273 SPONSORS STATEMENT: (Begins on page 3 of original bill) Yes					
	COMMITTEE	STATEMENT:	ASSEMBLY:	No	
			SENATE:	Yes	
	FLOOR AMEN	DMENT STATEMENTS:		No	
	LEGISLATIVE	FISCAL ESTIMATE:		No	
A2486					
SPONSORS STATEMENT: (Begins on page 3 of original bill)         Yes           Bill and Sponsors Statement identical to S1273					
	COMMITTEE S	STATEMENT:	ASSEMBLY:	Yes	
			SENATE:	No	
	FLOOR AMEN	DMENT STATEMENTS:		Yes	
	LEGISLATIVE	FISCAL ESTIMATE:		No	
VETO MESSAGE:				No	

GOVERNOR'S PRESS RELEASE ON SIGNING:

<u>Yes</u>

#### FOLLOWING WERE PRINTED:

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NEWSPAPER ARTICLES:

#### P.L. 1999, CHAPTER 332, *approved January 10, 2000* Senate, No. 1273 (*First Reprint*)

1 AN ACT concerning certain health maintenance organization enrollees and supplementing P.L.1973, c.337 (C.26:2J-1 et seq.). 2 3 4 **BE IT ENACTED** by the Senate and General Assembly of the State 5 of New Jersey: 6 7 1. a. A certificate of authority to establish and operate a health 8 maintenance organization in this State shall not be issued or continued 9 by the Commissioner of Health and Senior Services on or after the 10 effective date of this act unless the health maintenance organization offers health care services in conformance with the provisions of 11 subsection b. of this section. 12 b. If an enrollee is a resident of a <sup>1</sup>skilled nursing facility,<sup>1</sup> 13 continuing care retirement community or a retirement community 14 15 which operates a skilled nursing facility on the premises of the community, regardless of whether the health maintenance organization 16 is under contract with the <sup>1</sup>skilled nursing facility or the<sup>1</sup> skilled 17 nursing facility at the continuing care retirement community or 18 retirement community, the enrollee's primary care physician shall refer 19 the enrollee to the <sup>1</sup><u>skilled nursing facility or the</u><sup>1</sup> community's 20 Medicare-certified skilled nursing unit, <sup>1</sup><u>as applicable</u>,<sup>1</sup> rather than to 21 a skilled nursing facility separate from the  $\frac{1}{\text{facility or the}^1}$  community 22 23 of origin, if: (1) the  ${}^{1}$  skilled nursing facility or the  ${}^{1}$  continuing care retirement 24 community or retirement community with a skilled nursing facility has 25 the capacity to provide the services the enrollee needs; 26 27 (2) the primary care physician, in consultation with the enrollee or 28 a representative of the enrollee's family, determines that the referral is 29 in the best interest of the enrollee; (3) the  $\frac{1}{\text{skilled nursing facility or the}^{1}}$  continuing care retirement 30 community or retirement community with a skilled nursing facility 31 32 agrees to be reimbursed at the same contract rate negotiated by the 33 health maintenance organization with similar providers for the same services and supplies in the same geographic area; and 34 (4) the  $\frac{1}{\text{skilled nursing facility or the}}$  continuing care retirement 35 community or retirement community with a skilled nursing facility 36 37 meets all applicable <sup>1</sup>State<sup>1</sup> licensing and certification requirements <sup>1</sup>[of the State in which it is located]<sup>1</sup>. 38 For the purposes of this act, "continuing care retirement 39 c. 40 community" means a continuing care facility operating under a

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

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

<sup>&</sup>lt;sup>1</sup> Senate SHH committee amendments adopted June 14, 1999.

#### S1273 [1R] 2

certificate of authority issued by the Department of Community Affairs 1 pursuant to P.L.1986, c.103 (C.52:27D-330 et seq.), and "retirement 2 3 community" means a retirement community which is registered with 4 the Department of Community Affairs pursuant to P.L.1977, c.419 (C.45:22A-21 et seq.). 5 6 2. This act shall take effect immediately. 7 8 9 10 11 12 Permits HMO enrollees residing in nursing homes or certain retirement 13 communities with nursing homes to continue to receive care at that 14 nursing facility under certain circumstances.

# SENATE, No. 1273 STATE OF NEW JERSEY 208th LEGISLATURE

INTRODUCED JUNE 29, 1998

Sponsored by: Senator ROBERT W. SINGER District 30 (Burlington, Monmouth and Ocean) Senator ROBERT E. LITTELL District 24 (Sussex, Hunterdon and Morris)

Co-Sponsored by: Senator McNamara

#### **SYNOPSIS**

Permits HMO enrollees residing in certain retirement communities with nursing homes to continue to receive care at that nursing facility under certain circumstances.

#### CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 5/25/1999)

1 AN ACT concerning certain health maintenance organization enrollees 2 and supplementing P.L.1973, c.337 (C.26:2J-1 et seq.). 3 4 **BE IT ENACTED** by the Senate and General Assembly of the State 5 of New Jersey: 6 7 1. a. A certificate of authority to establish and operate a health 8 maintenance organization in this State shall not be issued or continued 9 by the Commissioner of Health and Senior Services on or after the 10 effective date of this act unless the health maintenance organization 11 offers health care services in conformance with the provisions of subsection b. of this section. 12 13 b. If an enrollee is a resident of a continuing care retirement 14 community or a retirement community which operates a skilled nursing facility on the premises of the community, regardless of whether the 15 16 health maintenance organization is under contract with the skilled 17 nursing facility at the continuing care retirement community or 18 retirement community, the enrollee's primary care physician shall refer 19 the enrollee to the community's Medicare-certified skilled nursing unit, 20 rather than to a skilled nursing facility separate from the community of 21 origin, if: (1) the continuing care retirement community or retirement 22 community with a skilled nursing facility has the capacity to provide 23 24 the services the enrollee needs; 25 (2) the primary care physician, in consultation with the enrollee or 26 a representative of the enrollee's family, determines that the referral is in the best interest of the enrollee; 27 28 the continuing care retirement community or retirement (3) 29 community with a skilled nursing facility agrees to be reimbursed at 30 the same contract rate negotiated by the health maintenance 31 organization with similar providers for the same services and supplies 32 in the same geographic area; and 33 the continuing care retirement community or retirement (4) community with a skilled nursing facility meets all applicable licensing 34 35 and certification requirements of the State in which it is located. 36 For the purposes of this act, "continuing care retirement c. 37 community" means a continuing care facility operating under a certificate of authority issued by the Department of Community Affairs 38 39 pursuant to P.L.1986, c.103 (C.52:27D-330 et seq.), and "retirement 40 community" means a retirement community which is registered with the Department of Community Affairs pursuant to P.L.1977, c.419 41 42 (C.45:22A-21 et seq.). 43 44 2. This act shall take effect immediately.

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#### STATEMENT

3 This bill provides that if a health maintenance organization (HMO) 4 enrollee is a resident of a continuing care retirement community or a retirement community which operates a skilled nursing facility on the 5 6 premises of the community, regardless of whether the health 7 maintenance organization is under contract with the skilled nursing 8 facility at the continuing care retirement community or retirement 9 community, the enrollee's primary care physician shall refer the 10 enrollee to the community's Medicare-certified skilled nursing unit, 11 rather than to a skilled nursing facility separate from the community of 12 origin, if:

(1) the continuing care retirement community or retirement
community with a skilled nursing facility has the capacity to provide
the services the enrollee needs;

(2) the primary care physician, in consultation with the enrollee or
a representative of the enrollee's family, determines that the referral is
in the best interest of the enrollee;

(3) the continuing care retirement community or retirement
community with a skilled nursing facility agrees to be reimbursed at
the same contract rate negotiated by the health maintenance
organization with similar providers for the same services and supplies
in the same geographic area; and

(4) the continuing care retirement community or retirement
community with a skilled nursing facility meets all applicable licensing
and certification requirements of the State in which it is located.

The provisions of this bill will insure that residents of continuing care retirement communities and other retirement communities that operate skilled nursing facilities on the premises of the community, who are Medicare enrollees in HMOs, will be able to return to the facility in their own community after a period of hospitalization, rather than be required by the HMO to go to a nursing facility outside of their retirement community.

Increasingly, residents of retirement communities who are Medicare HMO enrollees are finding that the skilled nursing facility at their retirement community is not a participating provider with their HMO and, therefore, to receive coverage for their nursing home care the enrollees are required to leave their community and enter a nursing home at another location, although the nursing home in their community can provide the needed care.

# SENATE HEALTH COMMITTEE

## STATEMENT TO

## **SENATE, No. 1273**

with committee amendments

# **STATE OF NEW JERSEY**

#### DATED: JUNE 14, 1999

The Senate Health Committee reports favorably and with committee amendments Senate Bill No. 1273.

As amended by the committee, this bill provides that if a health maintenance organization (HMO) enrollee is a resident of a skilled nursing facility, continuing care retirement community or a retirement community which operates a skilled nursing facility on the premises of the community, regardless of whether the HMO is under contract with the skilled nursing facility or the skilled nursing facility at the continuing care retirement community or retirement community, the enrollee's primary care physician shall refer the enrollee to the skilled nursing facility or the community's Medicare-certified skilled nursing unit, as applicable, rather than to a skilled nursing facility separate from the facility or community of origin, if:

- the skilled nursing facility, continuing care retirement community or retirement community with a skilled nursing facility has the capacity to provide the services the enrollee needs;
- the primary care physician, in consultation with the enrollee or a representative of the enrollee's family, determines that the referral is in the best interest of the enrollee;
- the skilled nursing facility, continuing care retirement community or retirement community with a skilled nursing facility agrees to be reimbursed at the same contract rate negotiated by the HMO with similar providers for the same services and supplies in the same geographic area; and
- the skilled nursing facility, continuing care retirement community or retirement community with a skilled nursing facility meets all applicable State licensing and certification requirements.

The provisions of this amended bill will insure that residents of skilled nursing facilities, continuing care retirement communities and other retirement communities that operate skilled nursing facilities on the premises of the community, who are Medicare enrollees in HMOs, will be able to return to their original facility of residence or to the facility in their own community after a period of hospitalization, rather than be required by the HMO to go to another nursing facility or to a nursing facility outside of their retirement community.

The committee amendments expand the provisions of this bill to apply to HMO enrollees residing in any skilled nursing facility who are admitted to an acute care hospital and are subsequently discharged to return to a nursing facility.

In addition, the committee adopted a technical amendment to clarify the requirement that a skilled nursing facility or a continuing care retirement community or retirement community with a skilled nursing facility to which an HMO enrollee is admitted pursuant to this bill shall meet all applicable New Jersey State licensing and certification requirements.

# ASSEMBLY, No. 2486 STATE OF NEW JERSEY 208th LEGISLATURE

**INTRODUCED OCTOBER 5, 1998** 

Sponsored by: Assemblywoman CHARLOTTE VANDERVALK District 39 (Bergen) Assemblyman NICHOLAS R. FELICE District 40 (Bergen and Passaic)

#### SYNOPSIS

Permits HMO enrollees residing in certain retirement communities with nursing homes to continue to receive care at that nursing facility under certain circumstances.

#### **CURRENT VERSION OF TEXT**

As introduced.



### A2486 VANDERVALK, FELICE

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1 AN ACT concerning certain health maintenance organization enrollees 2 and supplementing P.L.1973, c.337 (C.26:2J-1 et seq.). 3 4 **BE IT ENACTED** by the Senate and General Assembly of the State 5 of New Jersey: 6 7 1. a. A certificate of authority to establish and operate a health 8 maintenance organization in this State shall not be issued or continued 9 by the Commissioner of Health and Senior Services on or after the 10 effective date of this act unless the health maintenance organization 11 offers health care services in conformance with the provisions of 12 subsection b. of this section. b. If an enrollee is a resident of a continuing care retirement 13 14 community or a retirement community which operates a skilled nursing facility on the premises of the community, regardless of whether the 15 health maintenance organization is under contract with the skilled 16 17 nursing facility at the continuing care retirement community or 18 retirement community, the enrollee's primary care physician shall refer 19 the enrollee to the community's Medicare-certified skilled nursing unit, 20 rather than to a skilled nursing facility separate from the community of 21 origin, if: 22 the continuing care retirement community or retirement (1)23 community with a skilled nursing facility has the capacity to provide 24 the services the enrollee needs; 25 (2) the primary care physician, in consultation with the enrollee or 26 a representative of the enrollee's family, determines that the referral is 27 in the best interest of the enrollee; 28 the continuing care retirement community or retirement (3) 29 community with a skilled nursing facility agrees to be reimbursed at 30 the same contract rate negotiated by the health maintenance 31 organization with similar providers for the same services and supplies 32 in the same geographic area; and 33 the continuing care retirement community or retirement (4) community with a skilled nursing facility meets all applicable licensing 34 35 and certification requirements of the State in which it is located. 36 For the purposes of this act, "continuing care retirement c. 37 community" means a continuing care facility operating under a 38 certificate of authority issued by the Department of Community Affairs 39 pursuant to P.L.1986, c.103 (C.52:27D-330 et seq.), and "retirement community" means a retirement community which is registered with 40 the Department of Community Affairs pursuant to P.L.1977, c.419 41 42 (C.45:22A-21 et seq.). 43 44 2. This act shall take effect immediately.

#### A2486 VANDERVALK, FELICE

#### STATEMENT

3 This bill provides that if a health maintenance organization (HMO) 4 enrollee is a resident of a continuing care retirement community or a retirement community which operates a skilled nursing facility on the 5 6 premises of the community, regardless of whether the health 7 maintenance organization is under contract with the skilled nursing 8 facility at the continuing care retirement community or retirement 9 community, the enrollee's primary care physician shall refer the enrollee to the community's Medicare-certified skilled nursing unit, 10 11 rather than to a skilled nursing facility separate from the community of 12 origin, if:

(1) the continuing care retirement community or retirement
community with a skilled nursing facility has the capacity to provide
the services the enrollee needs;

(2) the primary care physician, in consultation with the enrollee or
a representative of the enrollee's family, determines that the referral is
in the best interest of the enrollee;

(3) the continuing care retirement community or retirement
community with a skilled nursing facility agrees to be reimbursed at
the same contract rate negotiated by the health maintenance
organization with similar providers for the same services and supplies
in the same geographic area; and

(4) the continuing care retirement community or retirement
community with a skilled nursing facility meets all applicable licensing
and certification requirements of the State in which it is located.

The provisions of this bill will insure that residents of continuing care retirement communities and other retirement communities that operate skilled nursing facilities on the premises of the community, who are Medicare enrollees in HMOs, will be able to return to the facility in their own community after a period of hospitalization, rather than be required by the HMO to go to a nursing facility outside of their retirement community.

Increasingly, residents of retirement communities who are Medicare HMO enrollees are finding that the skilled nursing facility at their retirement community is not a participating provider with their HMO and, therefore, to receive coverage for their nursing home care the enrollees are required to leave their community and enter a nursing home at another location, although the nursing home in their community can provide the needed care.

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# ASSEMBLY HEALTH COMMITTEE

### STATEMENT TO

## ASSEMBLY, No. 2486

with committee amendments

# STATE OF NEW JERSEY

#### DATED: JUNE 7, 1999

The Assembly Health Committee reports favorably and with committee amendments Assembly Bill No. 2486.

As amended by the committee, this bill provides that if a health maintenance organization (HMO) enrollee is a resident of a continuing care retirement community or a retirement community which operates a skilled nursing facility on the premises of the community, regardless of whether the HMO is under contract with the skilled nursing facility at the continuing care retirement community or retirement community, the enrollee's primary care physician shall refer the enrollee to the community's Medicare-certified skilled nursing unit, rather than to a skilled nursing facility separate from the community of origin, if:

- the continuing care retirement community or retirement community with a skilled nursing facility has the capacity to provide the services the enrollee needs;
- the primary care physician, in consultation with the enrollee or a representative of the enrollee's family, determines that the referral is in the best interest of the enrollee;
- the continuing care retirement community or retirement community with a skilled nursing facility agrees to be reimbursed at the same contract rate negotiated by the HMO with similar providers for the same services and supplies in the same geographic area; and
- the continuing care retirement community or retirement community with a skilled nursing facility meets all applicable State licensing and certification requirements.

The provisions of this bill will insure that residents of continuing care retirement communities and other retirement communities that operate skilled nursing facilities on the premises of the community, who are Medicare enrollees in HMOs, will be able to return to the facility in their own community after a period of hospitalization, rather than be required by the HMO to go to a nursing facility outside of their retirement community.

Increasingly, residents of retirement communities who are Medicare HMO enrollees are finding that the skilled nursing facility at their retirement community is not a participating provider with their HMO and, therefore, to receive coverage for their nursing home care the enrollees are required to leave their community and enter a nursing home at another location, although the nursing home in their community can provide the needed care.

The committee adopted a technical amendment to clarify the requirement that a continuing care retirement community or retirement community with a skilled nursing facility to which an HMO enrollee is admitted pursuant to this bill shall meet all applicable New Jersey State licensing and certification requirements.

As reported by the committee, this bill is similar to Senate Bill No. 1273 (Singer/Littell), which is currently pending in the Senate Health Committee.

# STATEMENT TO

# [First Reprint] ASSEMBLY, No. 2486

with Assembly Floor Amendments (Proposed By Assemblywoman VANDERVALK)

#### ADOPTED: NOVEMBER 15, 1999

These amendments expand the provisions of this bill to apply to HMO enrollees residing in any skilled nursing facility who are admitted to an acute care hospital and are subsequently discharged to return to a nursing facility. With these amendments, this bill ensures that residents of skilled nursing facilities, continuing care retirement communities and other retirement communities that operate skilled nursing facilities on the premises of the community, who are Medicare enrollees in HMOs, will be able to return to their original facility of residence or to the facility in their own community after a period of hospitalization, rather than be required by the HMO to go to another nursing facility.

# Office of the Governor **NEWS RELEASE**

PO BOX 004 TRENTON, NJ 08625

CONTACT: Gene Herman 609-777-2600

RELEASE: January 10, 2000

Gov. Christie Whitman today signed the following pieces of legislation:

**S-436**, sponsored by Senators C. Louis Bassano (R-Essex/Union) and Diane B. Allen (R-Burlington/Camden), requires the Department of Health and Senior Services (DHSS) to prepare an informational pamphlet on the nature and causes of osteoporosis and methods used to treat and prevent osteoporosis. The bill appropriates \$25,000 from the General Fund to DHSS to fund the printing and distribution of the pamphlets.

**S-1735**, sponsored by Senators William L. Gormley (R-Atlantic) and John A. Girgenti (D-Passaic) and Assembly Members Kenneth C. LeFevre (R-Atlantic) and Francis J. Blee (R-Atlantic), amends the reckless endangerment statute to clarify that adulteration of a drink or other substance constitutes the fourth degree offense of reckless endangerment. Specifically, the bill clarifies that this offense is committed when a person purposely or knowingly gives another person a drink or other substance that is intoxicating, tranquilizing or disorienting, when that other person does not know the identity and effect of the drink or substance.

A-2775, sponsored by Assembly Members John V. Kelly (R- Bergen/Essex/Passaic) and Paul DiGaetano (R-Bergen/Essex/Passaic) and Senator Garry J. Furnari (D- Bergen/Essex/Passaic), provides a grant of \$75,000 to create a study skills program in the East Rutherford Boro School District to address the needs of at-risk pupils. Pupils who are at-risk will be determined by using multiple indicators, including test scores, writing portfolios, teacher recommendations, and parental input. Funding will be utilized for staffing, teaching materials and other supplies. The bill makes a supplemental appropriation to the Fiscal Year 2000 budget.

**A-1019**, sponsored by Assembly Members Charles Zisa (D-Bergen) and Alan M. Augustine (R-Middlesex /Morris/Somerset/Union), and Senator Joseph A. Palaia (R-Monmouth), provides that commencing on September 1, 2002, any buildings and grounds supervisor employed by a school district must be a certified educational facilities manager. The bill directs the State Board of Education to issue rules and regulations to administer the program. The bill provides that a certified educational facilities manager must meet specific requirements, including having two years of experience in the field of buildings and grounds supervision and graduate as a certified educational facilities manager from the New Jersey Educational Facility Management Program at Rutgers University, or an equivalent program at an accredited institution of higher learning.

**A-2993**, sponsored by Assembly Members Gerald J. Luongo (R-Camden/Gloucester) and Senator Robert E. Littell (R-Sussex/Hunterdon/Morris), excludes bonds supported by open space, recreation, farmland or historic preservation taxes from calculation of gross debt of a county or municipality. Gross debt is a measure used under the Local Bond Law to derive the net debt of a county or municipality for purposes of establishing a county or municipal debt limit.

A-1445, sponsored by Assembly Members Jack Collins (R- Salem/Cumberland/Gloucester) and Marion Crecco (R-Essex/Passaic) and Senators Norman Robertson (R-Essex/Passaic) and Anthony R. Bucco (R- Morris), permits a police officer enrolled in the Police and Firemen's Retirement System to purchase up to three years of service credit based on inactive time between a point of no-fault layoff and the point of rehiring the employee.

**A-2133**, sponsored by Assembly Members John V. Kelly (R- Bergen/Essex/Passaic) and Joseph V. Doria, Jr. (D-Hudson), requires health insurers, including hospital service corporations, medical service corporations, health service corporations, commercial insurers and health maintenance organizations to provide health benefits coverage for annual mammograms for women aged 40 and over. Previous law provided for annual mammogram coverage for women 50 and over; women who are at least 40, but less that 50, were provided coverage for biannual examinations.

**S-1503**, sponsored by Senator Richard J. Codey (D-Essex) and Assembly Members John V. Kelly (R-Bergen/Essex/Passaic) and Paul DiGaetano (R-Bergen/Essex/Passaic), revises pension benefits and employee contribution rates for members of certain board of education pension funds.

A-2943, sponsored by Assembly Members Jack Collins (R-Cumberland/Gloucester/Salem) and Christopher Bateman (R-Morris/Somerset) and Senators Robert W. Singer (R-Burlington/ Monmouth/Ocean) and Diane B. Allen (R-Burlington/Camden), requires the return of unearned premiums on a pro rata basis for canceled automobile insurance policies. Previous law only required an insurer to return unpaid premiums on a short rate basis, which is an amount less than the pro rata basis because a percentage of administrative costs are charged to the insured.

**A-1706**, sponsored by Assembly Member John V. Kelly (R-Bergen/Essex/Passaic) and Senators Robert W. Singer (R-Burlington/Monmouth/Ocean) and Louis F. Kosco (R-Bergen), establishes a procedure to be followed by landlords of commercial or residential property when disposing of tangible property left behind in premises that had been vacated by a tenant.

**S-1062**, sponsored by Senators William L. Gormley (R-Atlantic) and Edward T. O'Connor, Jr. (D-Hudson) and Assembly Members Richard A. Merkt (R-Morris) and Michael Patrick Carroll (R-Morris), establishes a procedure for dealing with lost or abandoned property.

**A-3298**, sponsored by Assembly Members John S. Wisniewski (D-Middlesex) and Gerald J. Luongo (R-Camden/Gloucester) and Senators Joseph F. Vitale (D-Middlesex) and Nicholas J. Sacco (D-Bergen /Hudson), allows for re-certification of the special district tax for school districts if the school district's surplus account is higher than estimated at the school election in certain circumstances.

**S-1697**, sponsored by Senators William L. Gormley (R-Atlantic) and Wayne R. Bryant (D-Camden/Gloucester) and Assembly Members James W. Holzapfel (R- Monmouth/Ocean) and Kenneth C. LeFevre (R-Atlantic), authorizes a court to issue a restraining order prohibiting a person charged with, convicted of or adjudicated delinquent for any drug distribution offense or any offense involving the use or possession of an assault weapon from returning to the place where the offense occurred.

**A-960**, sponsored by Assembly Member Alan M. Augustine (R- Middlesex/Morris/Somerset /Union), requires pet shops to refund the purchase price, reimburse any veterinary fees, or provide replacement for sick cats or dogs under certain circumstances.

**S-1273**, sponsored by Senators Robert W. Singer (R- Burlington/Monmouth/Ocean) and Robert W. Littell (R-Sussex/Hunterdon/Morris) and Assembly Members Charlotte Vandervalk (R- Bergen) and Nicholas R. Felice (R-Bergen/Passaic), permits HMO enrollees residing in certain retirement communities with nursing homes to continue to receive care at that nursing facility under certain circumstances.

**A-1653**, sponsored by Assembly Members John V. Kelly (R- Bergen/Essex/Passaic) and Neil M. Cohen (D-Union) and Senator Gerald Cardinale (R-Bergen), requires health insurers, including hospital service corporations, medical service corporation, health service corporations, commercial insurers and health maintenance organizations to provide insurance coverage benefits for health wellness examinations and counseling. The bill appropriates \$95,000 to the Department of Health and Senior Services for allocation to the Health Wellness Promotion Advisory Board to evaluate implementation of the provisions of the bill and to ensure awareness and utilization of the health promotion program by covered persons and health care providers.

A-2461, sponsored by Assembly Member Gary W. Stuhltrager (R-Salem/Cumberland/ Gloucester), extends the cap on tax liability on transfers of hazardous substances to certain successors in interest.