# 26:2-167.1

#### LEGISLATIVE HISTORY CHECKLIST

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**LAWS OF:** 2004 **CHAPTER:** 137

**NJSA:** 26:2-167.1 ("Eliminating Health Disparities Initiative")

BILL NO: A655 (Substituted for S1444)

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

DATE INTRODUCED: Pre-filed

**COMMITTEE:** ASSEMBLY: Health and Human Services

**SENATE** Health, Human Services and Senior Citizens

AMENDED DURING PASSAGE: Yes

DATE OF PASSAGE: ASSEMBLY: June 24, 2004

**SENATE**: June 17, 2004

**DATE OF APPROVAL:** September 1, 2004

FOLLOWING ARE ATTACHED IF AVAILABLE:

FINAL TEXT OF BILL 2nd reprint enacted

A655

**SPONSOR'S STATEMENT**: (Begins on page 4 of original bill)

Yes

COMMITTEE STATEMENT: <u>ASSEMBLY</u>: <u>Yes</u>

**SENATE**: Yes

FLOOR AMENDMENT STATEMENT: No

LEGISLATIVE FISCAL ESTIMATE: No

S1444

**SPONSOR'S STATEMENT**: (Begins on page 2 of original bill)

Yes

**COMMITTEE STATEMENT:** ASSEMBLY: No

**SENATE**: Yes

FLOOR AMENDMENT STATEMENT: No

LEGISLATIVE FISCAL ESTIMATE: No

VETO MESSAGE: No

GOVERNOR'S PRESS RELEASE ON SIGNING: No

#### **FOLLOWING WERE PRINTED:**

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REPORTS:	No
HEARINGS:	No
NEWSPAPER ARTICLES:	No

# P.L. 2004, CHAPTER 137, approved September 1, 2004 Assembly, No. 655 (Second Reprint)

1 AN ACT concerning the New Jersey Office on Minority and
2 Multicultural Health<sup>1</sup>[,] and<sup>1</sup> supplementing Title 26 of the
3 Revised Statutes <sup>1</sup>[and making an appropriation]<sup>1</sup>.

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

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8 1. The Commissioner of Health and Senior Services shall establish 9 the "Eliminating Health Disparities Initiative" in the Office on Minority 10 and Multicultural Health. The commissioner shall require the office to develop and implement a comprehensive, coordinated plan to reduce 11 health disparities between White and racial and ethnic minority 12 populations in the State in the following priority areas: <sup>1</sup>asthma; <sup>1</sup> 13 infant mortality<sup>1</sup>[,];<sup>1</sup> breast <sup>1</sup>[and],<sup>1</sup> cervical<sup>1</sup>, prostate and 14 colorectal<sup>1</sup> cancer screening<sup>1</sup>[,];<sup>1</sup> <sup>2</sup>kidney disease;<sup>2</sup> HIV/AIDS<sup>1</sup>[,]; 15 hepatitis C: sexually transmitted diseases [,]; adult and child 16 immunizations<sup>1</sup>[,]:<sup>1</sup> cardiovascular disease<sup>1</sup>[,]:<sup>1</sup> diabetes<sup>1</sup>[,]:<sup>1</sup> and 17 accidental injuries and violence. As used in this act, "office" means the 18

New Jersey Office on Minority and Multicultural Health.

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- 2. The office shall:
- a. Establish measurable outcomes to achieve the goal of reducing health disparities in the areas provided in section 1 of this act <sup>1</sup>[and to determine the effectiveness of the grants funded pursuant to this act in reducing those disparities. The development of measurable outcomes shall be completed before any funds are distributed pursuant to this act]<sup>1</sup>.
- b. Enhance current data tools to ensure a Statewide assessment of the risk behaviors associated with the health disparity priority areas provided in section 1 of this act. <sup>1</sup>[The Statewide assessment shall be used to establish a baseline to measure the effect of activities funded pursuant to this act.] <sup>1</sup> To the extent feasible, the office shall conduct the assessment so that the results may be compared to national data.
- <sup>1</sup>[c. Provide the necessary expertise to grant applicants to ensure that submitted proposals are likely to be successful in reducing the health disparities provided in section 1 of this act. The office shall

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> Assembly AHH committee amendments adopted February 9, 2004.

 $<sup>^{\</sup>rm 2}$  Senate SHH committee amendments adopted May 13, 2004.

1 provide grant recipients with guidance and training on best or most

- 2 promising strategies to use to reduce those health disparities. The
- 3 office shall also assist grant recipients in the development of materials
- 4 and procedures to evaluate local community activities.]<sup>1</sup>

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- <sup>1</sup>[3. a. The office shall develop criteria and procedures to allocate grants pursuant to this act. In developing the criteria, the office shall establish an administrative cost limit for grant recipients. At the time a grant is awarded, the office shall provide a grant recipient with information on the outcomes provided in section 2 of this act.
- A grant recipient shall coordinate its activities to reduce health disparities with other entities receiving funds pursuant to this act in the grant recipient's service area.
- b. Within the limits of funds appropriated for this purpose, the office shall award grants to eligible applicants for local or regional projects and initiatives directed at reducing health disparities in one or both of the following priority areas:
- 18 (1) decreasing racial and ethnic disparities in infant mortality rates; 19 and
- 20 (2) increasing adult and child immunization rates in non-White racial and ethnic populations.
  - c. Within the limits of funds appropriated for this purpose, the office shall award grants to eligible applicants for local or regional projects and initiatives directed at decreasing racial and ethnic disparities in morbidity and mortality rates in one or more of the following priority areas:
- 27 (1) breast and cervical cancer;
- 28 (2) HIV/AIDS and sexually transmitted diseases;
- 29 (3) cardiovascular disease;
- 30 (4) diabetes; and
- 31 (5) accidental injuries or violence.
- d. The office may award up to 20% of the available funds provided for in subsections b. and c. of this section, respectively, as planning grants. Planning grants shall be used to address areas such as community assessment, coordination activities and development of community-supported strategies.
- e. Eligible applicants may include, but are not limited to, faithbased organizations, social service organizations, community nonprofit organizations, community clinics and local health departments. An applicant must submit a proposal to the office. A proposal shall specify the strategies to be implemented to address one or more of the priority areas listed in subsections b. or c. of this section and shall be targeted to achieve the outcomes provided in section 2 of this act.
- f. The office shall give priority to applications that demonstrate that the proposed project or initiative:
- 46 (1) is supported by the community to be served;

- 1 (2) is research-based or based on promising strategies; (3) is designed to complement other related community activities; 2 3 (4) utilizes strategies that positively impact more than one priority 4 area; 5 (5) reflects racially and ethnically appropriate approaches; and (6) will be implemented through or with community-based 6 7 organizations that reflect the race or ethnicity of the population to be 8 reached. 11 9 10 <sup>1</sup>[4. The office shall coordinate the projects and initiatives funded pursuant to this act with other efforts at the local, State or national 11 level to avoid duplication and promote complementary efforts.]<sup>1</sup> 12 13 <sup>1</sup>[5. a. Using the outcomes established pursuant to section 2 of 14 15 this act, the office shall conduct an annual evaluation of the community grant programs funded pursuant to this act. Grant recipients shall 16 cooperate with the office in the evaluation and shall provide the office 17 with the information needed to conduct the evaluation. 18 b. The office shall report annually, by September 1 of each year, to 19 20 the Legislature and the Governor on the local community projects 21 funded pursuant to this act. The report shall include information on grant recipients, activities that were conducted using grant funds, 22 evaluation data and outcome measures, if available.]<sup>1</sup> 23 24 25 <sup>1</sup>[6. Funds received pursuant to this act shall be used to develop 26 new programs or expand current programs that reduce health disparities and shall not supplant current State or local expenditures.]<sup>1</sup> 27 28 <sup>1</sup>[7.] <u>3.</u> The Commissioner of Health and Senior Services shall 29 30 adopt rules and regulations, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), to effectuate the purposes 31 32 of this act. 33 34 <sup>1</sup>[8. There is appropriated \$3,600,000 from the General Fund to 35 the Department of Health and Senior Services to effectuate the purposes of this act. Of this amount, \$1,400,000 shall be allocated for 36 competitive grants established pursuant to subsection b. of section 3 37 of this act, and \$2,200,000 shall be allocated for competitive grants 38 established pursuant to subsection c. of section 3 of this act.]<sup>1</sup> 39 40 <sup>1</sup>[9.] <u>4.</u> This act shall take effect immediately. 41 42 43 44
- Establishes "Eliminating Health Disparities Initiative" in Office onMinority and Multicultural Health.

# ASSEMBLY, No. 655

# STATE OF NEW JERSEY 211th LEGISLATURE

PRE-FILED FOR INTRODUCTION IN THE 2004 SESSION

Sponsored by: Assemblyman FRANCIS J. BLEE District 2 (Atlantic) Assemblyman KIRK CONOVER District 2 (Atlantic)

Co-Sponsored by: Assemblymen Munoz, Conaway and Steele

#### **SYNOPSIS**

Establishes "Eliminating Health Disparities Initiative" in Office on Minority and Multicultural Health; appropriates \$3.6 million.

# **CURRENT VERSION OF TEXT**

Introduced Pending Technical Review by Legislative Counsel.



#### A655 BLEE, CONOVER

**AN ACT** concerning the New Jersey Office on Minority and Multicultural Health, supplementing Title 26 of the Revised Statutes and making an appropriation.

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

1. The Commissioner of Health and Senior Services shall establish the "Eliminating Health Disparities Initiative" in the Office on Minority and Multicultural Health. The commissioner shall require the office to develop and implement a comprehensive, coordinated plan to reduce health disparities between White and racial and ethnic minority populations in the State in the following priority areas: infant mortality, breast and cervical cancer screening, HIV/AIDS, sexually transmitted diseases, adult and child immunizations, cardiovascular disease, diabetes, and accidental injuries and violence. As used in this act, "office" means the New Jersey Office on Minority and Multicultural Health.

2. The office shall:

a. Establish measurable outcomes to achieve the goal of reducing health disparities in the areas provided in section 1 of this act and to determine the effectiveness of the grants funded pursuant to this act in reducing those disparities. The development of measurable outcomes shall be completed before any funds are distributed pursuant to this act.

b. Enhance current data tools to ensure a Statewide assessment of the risk behaviors associated with the health disparity priority areas provided in section 1 of this act. The Statewide assessment shall be used to establish a baseline to measure the effect of activities funded pursuant to this act. To the extent feasible, the office shall conduct the assessment so that the results may be compared to national data.

c. Provide the necessary expertise to grant applicants to ensure that submitted proposals are likely to be successful in reducing the health disparities provided in section 1 of this act. The office shall provide grant recipients with guidance and training on best or most promising strategies to use to reduce those health disparities. The office shall also assist grant recipients in the development of materials and procedures to evaluate local community activities.

3. a. The office shall develop criteria and procedures to allocate grants pursuant to this act. In developing the criteria, the office shall establish an administrative cost limit for grant recipients. At the time a grant is awarded, the office shall provide a grant recipient with information on the outcomes provided in section 2 of this act.

- A grant recipient shall coordinate its activities to reduce health disparities with other entities receiving funds pursuant to this act in the grant recipient's service area.
  - b. Within the limits of funds appropriated for this purpose, the office shall award grants to eligible applicants for local or regional projects and initiatives directed at reducing health disparities in one or both of the following priority areas:
- 8 (1) decreasing racial and ethnic disparities in infant mortality rates; 9 and
- 10 (2) increasing adult and child immunization rates in non-White racial and ethnic populations.
- c. Within the limits of funds appropriated for this purpose, the office shall award grants to eligible applicants for local or regional projects and initiatives directed at decreasing racial and ethnic disparities in morbidity and mortality rates in one or more of the following priority areas:
  - (1) breast and cervical cancer;
- 18 (2) HIV/AIDS and sexually transmitted diseases;
  - (3) cardiovascular disease;
- 20 (4) diabetes; and

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- 21 (5) accidental injuries or violence.
- d. The office may award up to 20% of the available funds provided for in subsections b. and c. of this section, respectively, as planning grants. Planning grants shall be used to address areas such as community assessment, coordination activities and development of community-supported strategies.
  - e. Eligible applicants may include, but are not limited to, faith-based organizations, social service organizations, community nonprofit organizations, community clinics and local health departments. An applicant must submit a proposal to the office. A proposal shall specify the strategies to be implemented to address one or more of the priority areas listed in subsections b. or c. of this section and shall be targeted to achieve the outcomes provided in section 2 of this act.
- f. The office shall give priority to applications that demonstrate that the proposed project or initiative:
  - (1) is supported by the community to be served;
- 37 (2) is research-based or based on promising strategies;
- 38 (3) is designed to complement other related community activities;
- 39 (4) utilizes strategies that positively impact more than one priority 40 area;
- 41 (5) reflects racially and ethnically appropriate approaches; and
- 42 (6) will be implemented through or with community-based 43 organizations that reflect the race or ethnicity of the population to be 44 reached.

### A655 BLEE, CONOVER

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4. The office shall coordinate the projects and initiatives funded

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2	pursuant to this act with other efforts at the local, State or national
3	level to avoid duplication and promote complementary efforts.
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5	5. a. Using the outcomes established pursuant to section 2 of this
6	act, the office shall conduct an annual evaluation of the community
7	grant programs funded pursuant to this act. Grant recipients shall
8	cooperate with the office in the evaluation and shall provide the office
9	with the information needed to conduct the evaluation.
10	b. The office shall report annually, by September 1 of each year, to
11	the Legislature and the Governor on the local community projects
12	funded pursuant to this act. The report shall include information on
13	grant recipients, activities that were conducted using grant funds,
14	evaluation data and outcome measures, if available.
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16	6. Funds received pursuant to this act shall be used to develop new
17	programs or expand current programs that reduce health disparities
18	and shall not supplant current State or local expenditures.
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20	7. The Commissioner of Health and Senior Services shall adopt
21	rules and regulations, pursuant to the "Administrative Procedure Act,"
22	P.L.1968, c.410 (C.52:14B-1 et seq.), to effectuate the purposes of
23	this act.
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25	8. There is appropriated \$3,600,000 from the General Fund to the
26	Department of Health and Senior Services to effectuate the purposes
27	of this act. Of this amount, \$1,400,000 shall be allocated for
28	competitive grants established pursuant to subsection b. of section 3
29	of this act, and \$2,200,000 shall be allocated for competitive grants
30	established pursuant to subsection c. of section 3 of this act.
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32	9. This act shall take effect immediately.
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35	STATEMENT
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37	This bill requires that the Commissioner of Health and Senior
38	Services establish the "Eliminating Health Disparities Initiative" in the
39	Office on Minority and Multicultural Health. The commissioner shall
40	require the office to develop and implement a comprehensive,
41	coordinated plan to reduce health disparities between White and racial
42	and ethnic minority populations in the State in the following priority
43	areas: infant mortality, breast and cervical cancer screening,
44	HIV/AIDS, sexually transmitted diseases, adult and child

immunizations, cardiovascular disease, diabetes, and accidental injuries

and violence. To that end, the bill provides for competitive grants to

- eligible applicants for local or regional projects and initiatives directed
   at reducing these health disparities.
- 3 The bill provides that the office shall:
- 4 \* Establish measurable outcomes to achieve the goal of reducing
- 5 health disparities in the areas identified in the bill and to determine the
- 6 effectiveness of the grants funded pursuant to the bill in reducing those
- 7 disparities.
- 8 \* Enhance current data tools to ensure a Statewide assessment of the
- 9 risk behaviors associated with the health disparity priority areas
- 10 identified in the bill. The Statewide assessment shall be used to
- establish a baseline to measure the effect of activities funded pursuant
- 12 to this bill. To the extent feasible, the office shall conduct the
- 13 assessment so that the results may be compared to national data.
- \* Provide the necessary expertise to grant applicants to ensure that
- submitted proposals are likely to be successful in reducing the health
- 16 disparities identified in the bill. The office shall provide grant
- 17 recipients with guidance and training on best or most promising
- 18 strategies to use to reduce those health disparities. The office shall
- 19 also assist grant recipients in the development of materials and
- 20 procedures to evaluate local community activities.
- 21 The bill appropriates \$3,600,000 from the General Fund to the
- 22 Department of Health and Senior Services to be allocated for
- 23 competitive grants to eligible applicants for local or regional projects
- 24 and initiatives directed at reducing the health disparities identified in
- 25 the bill. It is intended that the amount appropriated in this bill shall be
- appropriated annually hereafter.

# ASSEMBLY HEALTH AND HUMAN SERVICES COMMITTEE

# STATEMENT TO

# ASSEMBLY, No. 655

with committee amendments

# STATE OF NEW JERSEY

DATED: FEBRUARY 9, 2004

The Assembly Health and Human Services Committee reports favorably and with committee amendments Assembly Bill No. 655.

As amended by the committee, this bill requires that the Commissioner of Health and Senior Services establish the "Eliminating Health Disparities Initiative" in the New Jersey Office on Minority and Multicultural Health (OMMH). The commissioner is to require OMMH to develop and implement a comprehensive, coordinated plan to reduce health disparities between White and racial and ethnic minority populations in the State in the following priority areas: asthma; infant mortality; breast, cervical, prostate and colorectal cancer screening; HIV/AIDS; hepatitis C; sexually transmitted diseases; adult and child immunizations; cardiovascular disease; diabetes; and accidental injuries and violence.

The bill directs OMMH to:

- \* establish measurable outcomes to achieve the goal of reducing health disparities in the areas identified in the bill; and
- \* enhance current data tools to ensure a Statewide assessment of the risk behaviors associated with the health disparity priority areas identified in the bill, with the Statewide assessment to be conducted, to the extent feasible, so that the results may be compared to national data.

It is hoped that the allocation of any available funding to implement the health disparity reduction plan established under this bill will receive priority consideration from the Department of Health and Senior Services as soon as may be practicable.

This bill was prefiled for introduction in the 2004-2005 session pending technical review. As reported, the bill includes the changes required by technical review which has been performed.

# **COMMITTEE AMENDMENTS**

The committee amendments to the bill:

-- add asthma, prostate and colorectal cancer screening, and hepatitis C to the list of health disparity priority areas to be included in the comprehensive, coordinated plan to reduce health disparities; and

-- delete the provision for competitive grants to eligible applicants for local or regional projects and initiatives directed at reducing those health disparities, as well as the \$3.6 million appropriation from the General Fund to the Department of Health and Senior Services to be allocated for the grants.

# SENATE HEALTH, HUMAN SERVICES AND SENIOR CITIZENS COMMITTEE

### STATEMENT TO

# [First Reprint] ASSEMBLY, No. 655

with committee amendments

# STATE OF NEW JERSEY

**DATED: MAY 13, 2004** 

The Senate Health, Human Services and Senior Citizens Committee reports favorably with committee amendments Assembly Bill No. 655 (1R).

This bill requires that the Commissioner of Health and Senior Services establish the "Eliminating Health Disparities Initiative" in the New Jersey Office on Minority and Multicultural Health (OMMH). The commissioner is to require OMMH to develop and implement a comprehensive, coordinated plan to reduce health disparities between White and racial and ethnic minority populations in the State in the following priority areas: asthma; infant mortality; breast, cervical, prostate and colorectal cancer screening; kidney disease; HIV/AIDS; hepatitis C; sexually transmitted diseases; adult and child immunizations; cardiovascular disease; diabetes; and accidental injuries and violence.

The bill directs OMMH to:

- --establish measurable outcomes to achieve the goal of reducing health disparities in the areas identified in the bill; and
- --enhance current data tools to ensure a Statewide assessment of the risk behaviors associated with the health disparity priority areas identified in the bill, with the Statewide assessment to be conducted, to the extent feasible, so that the results may be compared to national data.

The committee amended the bill to add kidney disease to the list of priority areas that should be addressed in the OMMH plan to reduce health disparities.

As amended by committee, this bill is identical to Senate Bill No. 1444 SCA, which the committee also reported favorably on this date.

# SENATE, No. 1444

# STATE OF NEW JERSEY 211th LEGISLATURE

INTRODUCED MARCH 29, 2004

Sponsored by: Senator JOSEPH F. VITALE District 19 (Middlesex) Senator NIA H. GILL

District 34 (Essex and Passaic)

#### **SYNOPSIS**

Establishes "Eliminating Health Disparities Initiative" in Office on Minority and Multicultural Health.

# **CURRENT VERSION OF TEXT**

As introduced.



# **S1444** VITALE, GILL

1 2	AN ACT concerning the New Jersey Office on Minority and Multicultural Health and supplementing Title 26 of the Revised
3	Statutes .
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5	BE IT ENACTED by the Senate and General Assembly of the State
6	of New Jersey:
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8	1. The Commissioner of Health and Senior Services shall establish
9	the "Eliminating Health Disparities Initiative" in the Office on Minority
10	and Multicultural Health. The commissioner shall require the office to
11	develop and implement a comprehensive, coordinated plan to reduce
12	health disparities between White and racial and ethnic minority
13	populations in the State in the following priority areas: asthma; infant
14	mortality; breast, cervical, prostate and colorectal cancer screening;
15	HIV/AIDS; hepatitis C; sexually transmitted diseases; adult and child
16	immunizations; cardiovascular disease; diabetes; and accidental injuries
17	and violence. As used in this act, "office" means the New Jersey
18	Office on Minority and Multicultural Health.
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20	2. The office shall:
21	a. Establish measurable outcomes to achieve the goal of reducing
22	health disparities in the areas provided in section 1 of this act.
23	b. Enhance current data tools to ensure a Statewide assessment of
24	the risk behaviors associated with the health disparity priority areas
25	provided in section 1 of this act. To the extent feasible, the office
26	shall conduct the assessment so that the results may be compared to
27	national data.
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29	3. The Commissioner of Health and Senior Services shall adopt
30	rules and regulations, pursuant to the "Administrative Procedure Act,"
31	P.L.1968, c.410 (C.52:14B-1 et seq.), to effectuate the purposes of
32	this act.
33	
34	4. This act shall take effect immediately.
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37	STATEMENT
38	
39	This bill requires the Commissioner of Health and Senior Services
40	to establish the "Eliminating Health Disparities Initiative" in the New
41	Jersey Office on Minority and Multicultural Health (OMMH). The
42	commissioner is to require OMMH to develop and implement a
43	comprehensive, coordinated plan to reduce health disparities between
44	White and racial and ethnic minority populations in the State in the
45	following priority areas: asthma; infant mortality; breast, cervical,
46	prostate and colorectal cancer screening; HIV/AIDS; hepatitis C;

#### **S1444** VITALE, GILL

- 1 sexually transmitted diseases; adult and child immunizations;
- 2 cardiovascular disease; diabetes; and accidental injuries and violence.
- The bill directs OMMH to:
- 4 -- establish measurable outcomes to achieve the goal of reducing
- 5 health disparities in the areas identified in the bill; and
- 6 -- enhance current data tools to ensure a Statewide assessment of
- 7 the risk behaviors associated with the health disparity priority areas
- 8 identified in the bill, with the Statewide assessment to be conducted,
- 9 to the extent feasible, so that the results may be compared to national
- 10 data.
- 11 It is hoped that the allocation of any available funding to implement
- 12 the health disparity reduction plan established under this bill will
- 13 receive priority consideration from the Department of Health and
- 14 Senior Services as soon as may be practicable.

# SENATE HEALTH, HUMAN SERVICES AND SENIOR CITIZENS COMMITTEE

#### STATEMENT TO

# SENATE, No. 1444

with committee amendments

# STATE OF NEW JERSEY

DATED: MAY 13, 2004

The Senate Health, Human Services and Senior Citizens Committee reports favorably with committee amendments Senate Bill No. 1444.

This bill requires the Commissioner of Health and Senior Services to establish the "Eliminating Health Disparities Initiative" in the New Jersey Office on Minority and Multicultural Health (OMMH). The commissioner is to require OMMH to develop and implement a comprehensive, coordinated plan to reduce health disparities between White and racial and ethnic minority populations in the State in the following priority areas: asthma; infant mortality; breast, cervical, prostate and colorectal cancer screening; kidney disease; HIV/AIDS; hepatitis C; sexually transmitted diseases; adult and child immunizations; cardiovascular disease; diabetes; and accidental injuries and violence.

The bill directs OMMH to:

- --establish measurable outcomes to achieve the goal of reducing health disparities in the areas identified in the bill; and
- --enhance current data tools to ensure a Statewide assessment of the risk behaviors associated with the health disparity priority areas identified in the bill, with the Statewide assessment to be conducted, to the extent feasible, so that the results may be compared to national data.

The committee amended the bill to add kidney disease to the list of priority areas that should be addressed in the OMMH plan to reduce health disparities.

As amended by committee, this bill is identical to Assembly Bill No. 655 (1R) SCA, which the committee also reported favorably on this date.