#### 26:2AA-7 to 26:2AA-10 LEGISLATIVE HISTORY CHECKLIST

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LAWS OF:	2021	CHAPTER:	135		
NJSA:	26:2AA-7 to 26:2AA-10 (Establishes the New Jersey Rare Disease Advisory Council.)				
BILL NO:	S2682	(Substituted for	r A4016 (1R))		
SPONSOR(S)	<b>NSOR(S)</b> Gopal, Vin and others				
DATE INTRODUCED: 7/6/2020					
COMMITTEE: ASSEMBLY:					
	SENA	TE: Health	, Human Services & Senior Citiz	zens	
AMENDED DURING PASSAGE: Yes					
DATE OF PAS	SAGE:	ASSEMBLY:	6/24/2021		
		SENATE:	6/24/2021		
DATE OF APPROVAL: 6/3		6/30/2021			
FOLLOWING ARE ATTACHED IF AVAILABLE:					
FINAL TEXT OF BILL (Second Reprint enacted) Yes				Yes	
S2682 INTRODUCED BILL (INCLUDES SPONSOR'S STATEMENT): Yes					
COMMITTEE STATEMENT:			ASSEMBLY	: No	
			SENATE:	Yes	
(A	l rocardiana of th		ational and an analian to the allot		

(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)

FLOO	OR AMENDMENT STATEMENT:		No
LEGI	SLATIVE FISCAL ESTIMATE:		No
A4016 (1R)			
INTRODUCED BILL (INCLUDES SPONSOR'S STATEMENT):		Yes	
СОМ	MITTEE STATEMENT:	ASSEMBLY:	Yes
		SENATE:	No

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

FLOOR AMENDMENT STATEMENT:	No
LEGISLATIVE FISCAL ESTIMATE:	No

VETO MESSAGE:	Yes
GOVERNOR'S PRESS RELEASE ON SIGNING:	Yes
FOLLOWING WERE PRINTED: To check for circulating copies, contact New Jersey State Government Publications at the State Library (609) 278-2640 ext.103 or <u>mailto:refde</u>	
REPORTS:	No
HEARINGS:	No
NEWSPAPER ARTICLES:	No

RH/CL

Title 26. Chapter 2AA. (Rename) Reflex Sympathetic Dystrophy Syndrome and Rare Diseases §§1-4 C.26:2AA-7 to 26:2AA-10 §5 Note

#### P.L. 2021, CHAPTER 135, approved June 30, 2021 Senate, No. 2682 (Second Reprint)

AN ACT establishing the New Jersey Rare Disease Advisory 1 2 Council and supplementing Title 26 of the Revised Statutes. 3 4 **BE IT ENACTED** by the Senate and General Assembly of the State 5 of New Jersey: 6 7 1. The Legislature finds and declares: A rare disease is defined as a disease that affects fewer than 8 a. 9 20,000 people. Rare diseases are sometimes called orphan diseases. 10 There are 7,000 rare diseases affecting approximately 25 to 30 11 million Americans; 12 b. The exact cause for many rare diseases remains unknown. However, 80 <sup>1</sup>[%] <u>percent</u><sup>1</sup> of rare diseases are genetic in origin 13 and can be linked to mutations in a single gene or in multiple genes 14 15 which can be passed down from generation to generation; 16 A person suffering with a rare disease faces a wide range of c. 17 challenges, including delays in obtaining a diagnosis; being 18 misdiagnosed; shortages of medical specialists who can provide 19 treatment for rare diseases; and the lack of therapies and medication 20 that are used by doctors to treat rare diseases; 21 There is a significant link between rare disease and the d. 22 coronavirus 2019 (COVID-19) pandemic which heightens the importance of the establishment of an advisory council to examine 23 24 the issues that affect persons with rare diseases in the State. Many 25 people who live with rare diseases are immunosuppressed and have 26 respiratory and neurologic issues that make the consequences of the 27 virus much more severe for them;

**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 <u>thus</u> is new matter. Matter enclosed in superscript numerals has been adopted as follows: <sup>1</sup>Senate SHH committee amendments adopted February 9, 2021. <sup>2</sup>Senate amendments adopted in accordance with Governor's recommendations June 24, 2021.

e. Additionally, those with rare diseases rely on the health care system much more than those who do not have chronic and rare conditions. In as much as they go to their physicians' offices, medical testing sites, and hospitals more often than most, their risk of exposure to the COVID-19 virus is much greater;

6 f. People who live with rare diseases are impacted by potential 7 shortages of life-saving medications and supplies due to changes in 8 supply chain resulting from the COVID-19 pandemic. People with 9 rare diseases also rely on the support of their families and home 10 health aides, and because of the social distancing and quarantining, 11 the pandemic puts them at risk of not having the support they need 12 in accessing services and treatment;

g. Researchers have made considerable progress in developing
diagnostic tools and treatment protocols for rare diseases and
discovering methods of prevention. However, much more remains
to be done in the search for new therapeutics and in understanding
the link between rare disease and pandemics, and

18 It is therefore an appropriate public policy for the State of h. 19 New Jersey to establish an advisory body, whose membership 20 would be comprised of qualified professionals and persons living 21 with rare diseases, that would be tasked to educate medical 22 professionals, government agencies, and the public about the 23 importance of rare diseases as an important public health issue, and to encourage <sup>2</sup>[and fund]<sup>2</sup> research in the development of new 24 treatments for rare diseases. 25

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27 2. There is established the New Jersey Rare Disease Advisory
28 Council in the Department of Health which shall advise the
29 Legislature, State departments, agencies, commissions, and
30 authorities, and private agencies providing services for persons
31 diagnosed with a rare disease.

a. The advisory council shall consist of <sup>1</sup>[30] <u>20</u><sup>1</sup> members as
follows:

(1) the Commissioners of Banking and Insurance, <sup>1</sup>[Children
and Families, Environmental Protection, ]<sup>1</sup> Health, Human Services,
and the Executive Director of the New Jersey Office on Minority
and Multicultural Health, or their designees, as ex officio members;

(2) two members of the <sup>2</sup>[Senate] <u>public</u><sup>2</sup>, one of whom <sup>2</sup>[is] 38 shall be<sup>2</sup> appointed by the <sup>2</sup>Governor upon recommendation of the<sup>2</sup> 39 President of the Senate, and one of whom <sup>2</sup>[is] <u>shall be</u><sup>2</sup> appointed 40 by the Minority Leader of the Senate <sup>2</sup>which public members shall 41 42 be any of the following: an epidemiologist, a registered nurse or nurse practitioner licensed to practice in this State with experience 43 44 in providing care to patients with rare diseases, or a pediatrician or 45 other physician licensed to practice in this State with expertise in providing care to patients with rare diseases<sup>2</sup>; 46

(3) two members of the <sup>2</sup>[General Assembly] <u>public</u><sup>2</sup>, one of 1 whom <sup>2</sup>[is] <u>shall be</u><sup>2</sup> appointed by the <sup>2</sup><u>Governor upon</u> 2 recommendation of the<sup>2</sup> Speaker of the General Assembly, and one 3 of whom <sup>2</sup>[is] <u>shall be</u><sup>2</sup> appointed by the Minority Leader of the 4 General Assembly <sup>2</sup><u>which public members shall be any</u> of the 5 following: an epidemiologist, a registered nurse or nurse 6 7 practitioner licensed to practice in this State with experience in 8 providing care to patients with rare diseases, or a pediatrician or 9 other physician licensed to practice in this State with expertise in providing care to patients with rare diseases<sup>2</sup>; and 10

(4)  ${}^{1}$  [20] <u>12</u>  ${}^{1}$  public members to be appointed by the Governor, 11 12 who shall include: <sup>1</sup>[two physicians] <u>one physician</u><sup>1</sup> licensed to practice in this State who <sup>1</sup>[have] <u>has</u><sup>1</sup> expertise in treating patients 13 with rare diseases, <sup>1</sup>[one of whom shall be a pediatrician who 14 provides care to children with rare diseases; a registered 15 16 professional nurse licensed in this State who has expertise in 17 providing care to patients with rare diseases ] and is associated with the research department of an academic institution in this State<sup>1</sup>; a 18 representative of general hospital or hospital system in this State 19 20 recommended by the New Jersey Hospital Association; a 21 representative of federally qualified health center in this State 22 recommended by the New Jersey Primary Care Association; a 23 geneticist licensed to practice in this State; a genetic counselor who 24 has experience in providing services to persons diagnosed with a 25 rare disease, their families, or their caregivers or care partners; a 26 representative of the health insurance industry recommended by the New Jersey Association of Health Plans; <sup>1</sup>[a pharmacist licensed to 27 practice in this State who has experience with persons with a rare 28 29 disease; **]**<sup>1</sup> a representative of the <sup>1</sup><u>biotechnology industry or</u><sup>1</sup> 30 pharmaceutical industry who has expertise in rare diseases 31 recommended by <sup>1</sup>[the HealthCare Institute of New Jersey] <u>BIO</u> 32 NJ<sup>1</sup>; a <sup>1</sup>[representative of the biotechnology industry] pharmacist 33 licensed in this State<sup>1</sup> who <sup>1</sup>[is]<sup>1</sup> has expertise in rare diseases <sup>1</sup>[recommended by BIO NJ]<sup>1</sup>; a representative of the medical 34 technology industry who has expertise in rare diseases <sup>1</sup>and is 35 recommended by the HealthCare Institute of New Jersey<sup>1</sup>; <sup>1</sup>[a 36 37 representative of the Rutgers Biomedical and Health Sciences who 38 is engaged in rare disease research; a representative of the Rowan 39 University Graduate School of Biomedical Sciences who is engaged in rare disease research; two representatives ] <u>one representative</u><sup>1</sup> of 40  $\frac{1}{a}$  rare disease patient advocacy  $\frac{1}{1}$  [organizations] <u>organization</u><sup>1</sup>; 41 42 <sup>1</sup>[two persons] <u>one person</u><sup>1</sup>, age 18 years or older, who <sup>1</sup>[have] <u>has</u><sup>1</sup> a rare disease; and <sup>1</sup> [two caregivers] <u>one caregiver</u><sup>1</sup> or care 43 44 <sup>1</sup>[partners] <u>partner</u><sup>1</sup> for a patient or partner with a rare disease<sup>1</sup>[; 45 one of who shall be a caregiver for a child with a rare disease  $]^1$ .

1 b. Public members of the advisory council shall serve for a term of three years, except that of the initial appointments, <sup>1</sup>[seven] 2 <sup>2</sup>[four<sup>1</sup>] five<sup>2</sup> public members shall serve for one year, <sup>1</sup>[seven] 3 <sup>2</sup>[<u>four</u><sup>1</sup>] <u>five</u><sup>2</sup> public members shall serve for two years, and <sup>1</sup>[six] 4  $\frac{1}{5} \frac{1}{5} \frac{1}{5} \frac{1}{5} \frac{1}{5} \frac{1}{5}$  public members shall serve for three years. Vacancies 5 in the membership of the council shall be filled in the same manner 6 7 as the original appointments were made. The public members of 8 the council shall serve without compensation but may be 9 reimbursed for traveling and other miscellaneous expenses 10 necessary to perform their duties within the limits of funds made 11 available to the council for its purposes.

c. The advisory council shall organize as soon as practicable after the appointment of <sup>1</sup><u>a majority of</u><sup>1</sup> its <sup>1</sup><u>public</u><sup>1</sup> members, and the Governor shall select a chairperson and vice-chairperson from among its members. The chairperson shall appoint a secretary who need not be a member of the council.

17 d. The advisory council shall meet a minimum of three times a 18 year but may meet more often at the call of its chair. The council 19 may hold hearings at the times and in the places it deems appropriate and necessary to fulfill its charge. The council shall be 20 entitled to call to its assistance, and avail itself of the services of the 21 22 employees of, any State, county, or municipal department, board, 23 bureau, commission, or agency as it may require and as may be 24 available to it for its purposes.

<sup>1</sup>[The Department of Health shall provide staff services to 25 e. the advisory council The Department of Health shall maintain 26 oversight of the advisory council and may delegate the 27 28 administration thereof to a State research university or institution 29 with expertise in either the clinical treatment of rare disease 30 patients, research of rare diseases, or health care policy pertaining 31 to rare disease patients. The Department of Health may issue a 32 request, within 180 days after the effective date of this act, for 33 proposals for a location for the advisory council to operate and for 34 staff and resources to support the operations of the council. The 35 Department of Health shall provide staff services to the advisory 36 council if the proposals submitted to the department are not sufficient to meet the needs of the council<sup>1</sup>. 37

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3. The purpose of the advisory council shall be to:

a. act as the advisory body on rare diseases to the Legislature
and State departments, agencies, commissions, authorities, and
private agencies that provide services to, or are charged with the
care of, persons with rare diseases;

b. conduct a thorough and comprehensive study of all issues
relating to the quality <sup>1</sup>[and cost-effectiveness]<sup>1</sup> of <sup>1</sup>[,]<sup>1</sup> and access
to<sup>1</sup>[,]<sup>1</sup> treatment and services provided to persons with rare
diseases in this State, including the link between rare diseases and

1 the COVID-19 pandemic, and to develop policy recommendations 2 on those issues; c. <sup>2</sup>[establish and implement a repository of] <u>develop</u> 3 recommendations for<sup>2</sup> best practice standards <sup>2</sup> to share with health 4 care providers that will ensure they are adequately informed of 5 encompassing<sup>2</sup> the most effective strategies for recognizing and 6 treating rare diseases in New Jersey; 7 d. identify effective research-based strategies that have been 8 9 developed to help diagnose, treat, and prevent rare diseases; 10 develop effective strategies to raise public awareness of rare e. 11 diseases in this State; 12 f. evaluate and make recommendations to improve: (1) the State's Newborn Screening Program in the Department of 13 14 Health; and (2) State Medicaid coverage for approved treatments and 15 16 medications for patients with a rare disease; g. research and make policy recommendations to the 17 18 Legislature on access to health insurance specialists and other needed services for patients with a rare disease; and 19 20 h. identify, with assistance from the public, additional research topics on rare disease to inform future studies the council may 21 22 conduct. 23 24 <sup>2</sup>[4. The advisory council shall apply for, and accept, any grant 25 of money from the federal government, private foundations, or 26 other sources, which may be available for programs related to rare diseases. **1**<sup>2</sup> 27 28 <sup>2</sup>[5.] <u>4.</u><sup>2</sup> The advisory council shall report to the Governor 29 and, pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1), to the 30 31 Legislature, no later than December 31st, on a biennial basis, 32 starting in the second year next following the enactment of this act, 33 on the activities of the advisory council and its findings and recommendations on issues relating to the quality of, and access to, 34 treatment and services for persons with rare diseases in this State. 35 36 <sup>2</sup>[6.] <u>5.</u><sup>2</sup> The Commissioner of Health, pursuant to the 37 "Administrative Procedures Act," P.L.1968, c.410 (C.52:14B-38 1 et seq.)<sup>2</sup>[shall] <u>may</u><sup>2</sup> adopt rules and regulations necessary to 39 effectuate the purposes of this act. 40 41 <sup>2</sup>[7.]  $6^{2}$  This act shall take effect immediately. 42 43 44 45 46 47 Establishes the New Jersey Rare Disease Advisory Council.

# SENATE, No. 2682 STATE OF NEW JERSEY 219th LEGISLATURE

INTRODUCED JULY 6, 2020

Sponsored by: Senator VIN GOPAL District 11 (Monmouth) Senator THOMAS H. KEAN, JR. District 21 (Morris, Somerset and Union)

Co-Sponsored by: Senators Singer and Pou

SYNOPSIS

Establishes the New Jersey Rare Disease Advisory Council.

CURRENT VERSION OF TEXT As introduced.



(Sponsorship Updated As Of: 1/11/2021)

1 AN ACT establishing the New Jersey Rare Disease Advisory 2 Council and supplementing Title 26 of the Revised Statutes. 3 4 **BE IT ENACTED** by the Senate and General Assembly of the State 5 of New Jersey: 6 7 1. The Legislature finds and declares: 8 a. A rare disease is defined as a disease that affects fewer than 9 20,000 people. Rare diseases are sometimes called orphan diseases. 10 There are 7,000 rare diseases affecting approximately 25 to 30 11 million Americans: 12 b. The exact cause for many rare diseases remains unknown. 13 However, 80% of rare diseases are genetic in origin and can be linked to mutations in a single gene or in multiple genes which can 14 be passed down from generation to generation; 15 16 c. A person suffering with a rare disease faces a wide range of 17 challenges, including delays in obtaining a diagnosis; being 18 misdiagnosed; shortages of medical specialists who can provide treatment for rare diseases; and the lack of therapies and medication 19 20 that are used by doctors to treat rare diseases; 21 There is a significant link between rare disease and the d. 22 coronavirus 2019 (COVID-19) pandemic which heightens the 23 importance of the establishment of an advisory council to examine 24 the issues that affect persons with rare diseases in the State. Many 25 people who live with rare diseases are immunosuppressed and have 26 respiratory and neurologic issues that make the consequences of the 27 virus much more severe for them; e. Additionally, those with rare diseases rely on the health care 28 29 system much more than those who do not have chronic and rare 30 conditions. In as much as they go to their physicians' offices, 31 medical testing sites, and hospitals more often than most, their risk 32 of exposure to the COVID-19 virus is much greater; 33 f. People who live with rare diseases are impacted by potential 34 shortages of life-saving medications and supplies due to changes in 35 supply chain resulting from the COVID-19 pandemic. People with rare diseases also rely on the support of their families and home 36 37 health aides, and because of the social distancing and quarantining, 38 the pandemic puts them at risk of not having the support they need 39 in accessing services and treatment; 40 g. Researchers have made considerable progress in developing 41 diagnostic tools and treatment protocols for rare diseases and 42 discovering methods of prevention. However, much more remains 43 to be done in the search for new therapeutics and in understanding 44 the link between rare disease and pandemics, and 45 h. It is therefore an appropriate public policy for the State of 46 New Jersey to establish an advisory body, whose membership 47 would be comprised of qualified professionals and persons living 48 with rare diseases, that would be tasked to educate medical

professionals, government agencies, and the public about the
 importance of rare diseases as an important public health issue, and
 to encourage and fund research in the development of new
 treatments for rare diseases.

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6 2. There is established the New Jersey Rare Disease Advisory 7 Council in the Department of Health which shall advise the 8 Legislature, State departments, agencies, commissions, and 9 authorities, and private agencies providing services for persons 10 diagnosed with a rare disease.

11 a. The advisory council shall consist of 30 members as follows:

(1) the Commissioners of Banking and Insurance, Children and
Families, Environmental Protection, Health, Human Services, and
the Executive Director of the New Jersey Office on Minority and
Multicultural Health, or their designees, as ex officio members;

(2) two members of the Senate, one of whom is appointed by the
President of the Senate, and one of whom is appointed by the
Minority Leader of the Senate;

(3) two members of the General Assembly, one of whom is
appointed by the Speaker of the General Assembly, and one of
whom is appointed by the Minority Leader of the General
Assembly; and

23 (4) 20 public members to be appointed by the Governor, who 24 shall include: two physicians licensed to practice in this State who 25 have expertise in treating patients with rare diseases, one of whom 26 shall be a pediatrician who provides care to children with rare 27 diseases; a registered professional nurse licensed in this State who 28 has expertise in providing care to patients with rare diseases; a representative of general hospital or hospital system in this State 29 30 recommended by the New Jersey Hospital Association; a 31 representative of federally qualified health center in this State 32 recommended by the New Jersey Primary Care Association; a 33 geneticist licensed to practice in this State; a genetic counselor who 34 has experience in providing services to persons diagnosed with a 35 rare disease, their families, or their caregivers or care partners; a 36 representative of the health insurance industry recommended by the 37 New Jersey Association of Health Plans; a pharmacist licensed to 38 practice in this State who has experience with persons with a rare 39 disease; a representative of the pharmaceutical industry who has 40 expertise in rare diseases recommended by the HealthCare Institute 41 of New Jersey; a representative of the biotechnology industry who 42 is has expertise in rare diseases recommended by BIO NJ; a 43 representative of the medical technology industry who has expertise 44 in rare diseases; a representative of the Rutgers Biomedical and 45 Health Sciences who is engaged in rare disease research; a 46 representative of the Rowan University Graduate School of 47 Biomedical Sciences who is engaged in rare disease research; two 48 representatives of rare disease patient advocacy organizations; two

persons, age 18 years or older, who have a rare disease; and two
 caregivers or care partners for a patient or partner with a rare
 disease; one of who shall be a caregiver for a child with a rare
 disease.

5 b. Public members of the advisory council shall serve for a term 6 of three years, except that of the initial appointments, seven public 7 members shall serve for one year, seven public members shall serve 8 for two years, and six public members shall serve for three years. 9 Vacancies in the membership of the council shall be filled in the 10 same manner as the original appointments were made. The public 11 members of the council shall serve without compensation but may 12 be reimbursed for traveling and other miscellaneous expenses 13 necessary to perform their duties within the limits of funds made available to the council for its purposes. 14

c. The advisory council shall organize as soon as practicable after the appointment of its members, and the Governor shall select a chairperson and vice-chairperson from among its members. The chairperson shall appoint a secretary who need not be a member of the council.

20 d. The advisory council shall meet a minimum of three times a year but may meet more often at the call of its chair. The council 21 22 may hold hearings at the times and in the places it deems 23 appropriate and necessary to fulfill its charge. The council shall be 24 entitled to call to its assistance, and avail itself of the services of the 25 employees of, any State, county, or municipal department, board, 26 bureau, commission, or agency as it may require and as may be 27 available to it for its purposes.

e. The Department of Health shall provide staff services to theadvisory council.

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3. The purpose of the advisory council shall be to:

a. act as the advisory body on rare diseases to the Legislature
and State departments, agencies, commissions, authorities, and
private agencies that provide services to, or are charged with the
care of, persons with rare diseases;

b. conduct a thorough and comprehensive study of all issues
relating to the quality and cost-effectiveness of, and access to,
treatment and services provided to persons with rare diseases in this
State, including the link between rare diseases and the COVID-19
pandemic, and to develop policy recommendations on those issues;

c establish and implement a repository of best practice standards
to share with health care providers that will ensure they are
adequately informed of the most effective strategies for recognizing
and treating rare diseases in New Jersey;

d. identify effective research-based strategies that have beendeveloped to help diagnose, treat, and prevent rare diseases;

e. develop effective strategies to raise public awareness of rarediseases in this State;

1 f. evaluate and make recommendations to improve: 2 (1) the State's Newborn Screening Program in the Department 3 of Health; and (2) State Medicaid coverage for approved treatments and 4 5 medications for patients with a rare disease; 6 g. research and make policy recommendations to the Legislature 7 on access to health insurance specialists and other needed services 8 for patients with a rare disease; and 9 h. identify, with assistance from the public, additional research 10 topics on rare disease to inform future studies the council may 11 conduct. 12 13 4. The advisory council shall apply for, and accept, any grant of 14 money from the federal government, private foundations, or other 15 sources, which may be available for programs related to rare 16 diseases. 17 18 5. The advisory council shall report to the Governor and, pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1), to the 19 20 Legislature, no later than December 31st, on a biennial basis, starting in the second year next following the enactment of this act, 21 22 on the activities of the advisory council and its findings and 23 recommendations on issues relating to the quality of, and access to, 24 treatment and services for persons with rare diseases in this State. 25 26 6. The Commissioner of Health, pursuant to the "Administrative 27 Procedures Act," P.L.1968, c.410 (C.52:14B-1 et seq.) shall adopt rules and regulations necessary to effectuate the purposes of this 28 29 act. 30 31 7. This act shall take effect immediately. 32 33 34 **STATEMENT** 35 36 There is a significant link between rare disease and the coronavirus 37 2019 (COVID-19) pandemic. Many people who live with rare 38 diseases are immunosuppressed and have respiratory and neurologic 39 issues that make the consequences of the virus much more severe 40 for them. This link heightens the importance of the establishment 41 of an advisory council to examine the issues that affect persons with 42 rare diseases in the State. 43 Therefore, this bill establishes the 30-member New Jersey Rare 44 Disease Advisory Council in the Department of Health to advise the 45 Legislature, State departments, agencies, commissions, and 46 authorities, and private agencies providing services for persons diagnosed with a rare disease. 47

# S2682 GOPAL, T.KEAN

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1 The membership of the advisory council will consist of: the 2 Commissioners of Banking and Insurance, Children and Families, 3 Environmental Protection, Health, Human Services, and the 4 Executive Director of the New Jersey Office on Minority and 5 Multicultural Health or their designees, as ex officio members; two 6 members of the Senate, one appointed by the President of the 7 Senate, and one appointed by the Minority Leader of the Senate; 8 two members of the General Assembly, one appointed by the 9 Speaker of the General Assembly, and one appointed by the 10 Minority Leader of the General Assembly; and 20 public members 11 appointed by the Governor, including two physicians licensed to 12 practice in this State who have expertise in treating patients with rare diseases, one who would be a pediatrician who provides care to 13 14 children with rare diseases; a registered professional nurse licensed 15 in this State who has expertise in providing care to patients with 16 rare diseases; a representative of general hospital or hospital system 17 in this State recommended by the New Jersey Hospital Association; 18 a representative of federally qualified health center in this State 19 recommended by the New Jersey Primary Care Association; a 20 geneticist licensed to practice in this State; a genetic counselor who 21 has experience in providing services to persons diagnosed with a 22 rare disease, their families, or their caregivers or care partners; a 23 representative of the health insurance industry recommended by the 24 New Jersey Association of Health Plans; a pharmacist licensed to 25 practice in this State who has experience with persons with a rare 26 disease; a representative of the pharmaceutical industry who has 27 expertise in rare diseases recommended by the HealthCare Institute 28 of New Jersey; a representative of the biotechnology industry who 29 has expertise in rare diseases recommended by BIO NJ; a 30 representative of the medical technology industry who has expertise 31 in rare diseases; a representative of the Rutgers Biomedical and 32 Health Sciences who is engaged in rare disease research; a 33 representative of the Rowan University Graduate School of 34 Biomedical Sciences who is engaged in rare disease research; two 35 representatives of rare disease patient advocacy organizations; two 36 persons, age 18 years or older, who have a rare disease; and two 37 caregivers or care partners for a patient or partner with a rare 38 disease; one who would be a caregiver for a child with a rare 39 disease.

40 The purpose of the advisory council will be to: act as the 41 advisory body on rare diseases to the Legislature and State 42 departments, agencies, commissions, authorities, and private 43 agencies that provide services to, or are charged with the care of, 44 persons with rare diseases; conduct a thorough and comprehensive 45 study of all issues relating to the quality of, and access to, treatment 46 and services provided to persons with rare diseases in this State, 47 including the link between rare diseases and the COVID-19 48 pandemic, and to develop policy recommendations on those issues;

1 establish and implement a repository of best practice to share with 2 health care providers that will ensure they are adequately informed 3 of the most effective strategies for recognizing and treating rare 4 diseases in New Jersey; identify effective research-based strategies 5 that have been developed to help diagnose, treat, and prevent rare 6 diseases; develop effective strategies to raise public awareness of 7 rare diseases in this State; evaluate and make recommendations to 8 improve the State's Newborn Screening Program in the Department 9 of Health and State Medicaid coverage for approved treatments and 10 medications for patients with a rare disease; research and make 11 policy recommendations to the Legislature on access to health 12 insurance specialists and other needed services for patients with a 13 rare disease; and identify, with assistance from the public, 14 additional research topics on rare disease to inform future studies 15 the council may conduct.

Finally, the bill requires the advisory council to report biennially, to the Governor and the Legislature on its findings and recommendations on issues relating to the quality of, and access to, treatment and services provided to persons with rare diseases in this State.

This bill is similar to H-7094, the "Rare Disease Community
Support, Resource Coordination and Quality of Life Act of 2014,"

that was adopted by the state of Rhode Island earlier this year.

# SENATE HEALTH, HUMAN SERVICES AND SENIOR CITIZENS COMMITTEE

## STATEMENT TO

## **SENATE, No. 2682**

with committee amendments

# STATE OF NEW JERSEY

#### DATED: FEBRUARY 9, 2021

The Senate Health, Human Services and Senior Citizens Committee reports favorably and with committee amendments Senate Bill No. 2682.

As amended by the committee, this bill establishes a 20-member New Jersey Rare Disease Advisory Council in the Department of Health.

The purpose of the advisory council will be to: act as the advisory body on rare diseases to the Legislature and State departments, agencies, commissions, authorities, and private agencies that provide services to, or are charged with the care of, persons with rare diseases; conduct a thorough and comprehensive study of all issues relating to the quality of and access to treatment and services provided to persons with rare diseases in this State, including the link between rare diseases and the COVID-19 pandemic, and to develop policy recommendations on those issues; establish and implement a repository of best practice standards to share with health care providers that will ensure they are adequately informed of the most effective strategies for recognizing and treating rare diseases in New Jersey; identify effective research-based strategies that have been developed to help diagnose, treat, and prevent rare diseases; develop effective strategies to raise public awareness of rare diseases in this State; evaluate and make recommendations to improve the State's Newborn Screening Program in the Department of Health and State Medicaid coverage for approved treatments and medications for patients with a rare disease; research and make policy recommendations to the Legislature on access to health insurance specialists and other needed services for patients with a rare disease; and identify, with assistance from the public, additional research topics on rare disease to inform future studies the council may conduct.

Finally, the bill requires the advisory council to report biennially, to the Governor and the Legislature, on its findings and recommendations on issues relating to the quality of, and access to, treatment and services provided to persons with rare diseases in this State.

#### COMMITTEE AMENDMENTS:

The committee amendments reduce the advisory council's membership to 20 members. Under the current provisions of the bill, the council is comprised of 30 members.

The committee amendments also reduce the number of public members on the advisory council from 20 members, as originally provided in the bill, to 12 members, and provide that the council organize as soon as practicable after the appointment of a majority of its public members.

The committee amended the bill to provide that the Department of Health is to maintain oversight of the advisory council and may delegate the council's administration to a State research university or institution as provided for in the bill.

The committee amended the bill to allow the department to issue a request for proposals for a location for the council to operate and for staff and resources to support operations. The department is to provide staff services to the council if the proposals submitted to the department are insufficient.

The committee amendments remove the requirement for the advisory council to study cost-effectiveness of treatment and services provided to persons with rare diseases in this State.

The committee amendments also make various technical and grammatical changes to the provisions of the bill.

# ASSEMBLY, No. 4016 **STATE OF NEW JERSEY** 219th LEGISLATURE

INTRODUCED MAY 4, 2020

Sponsored by: Assemblyman RONALD S. DANCER District 12 (Burlington, Middlesex, Monmouth and Ocean) Assemblyman DANIEL R. BENSON District 14 (Mercer and Middlesex) Assemblyman ANTHONY S. VERRELLI District 15 (Hunterdon and Mercer)

Co-Sponsored by: Assemblyman DePhillips

#### SYNOPSIS

Establishes the New Jersey Rare Disease Advisory Council.

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

As introduced.



(Sponsorship Updated As Of: 10/19/2020)

1 AN ACT establishing the New Jersey Rare Disease Advisory 2 Council and supplementing Title 26 of the Revised Statutes. 3 4 **BE IT ENACTED** by the Senate and General Assembly of the State 5 of New Jersey: 6 7 1. The Legislature finds and declares: 8 A rare disease is defined as a disease that affects fewer than a. 9 20,000 people. Rare diseases are sometimes called orphan diseases. 10 There are 7,000 rare diseases affecting approximately 25 to 30 11 million Americans; 12 The exact cause for many rare diseases remains unknown. h However, 80% of rare diseases are genetic in origin and can be 13 linked to mutations in a single gene or in multiple genes which can 14 be passed down from generation to generation; 15 16 A person suffering with a rare disease faces a wide range of c. 17 challenges, including delays in obtaining a diagnosis; being 18 misdiagnosed; shortages of medical specialists who can provide treatment for rare diseases; and the lack of therapies and medication 19 20 that are used by doctors to treat rare diseases; There is a significant link between rare disease and the 21 d. 22 coronavirus 2019 (COVID-19) pandemic which heightens the 23 importance of the establishment of an advisory council to examine 24 the issues that affect persons with rare diseases in the State. Many 25 people who live with rare diseases are immunosuppressed and have 26 respiratory and neurologic issues that make the consequences of the 27 virus much more severe for them; e. Additionally, those with rare diseases rely on the health care 28 29 system much more than those who do not have chronic and rare 30 conditions. In as much as they go to their physicians' offices, 31 medical testing sites, and hospitals more often than most, their risk 32 of exposure to the COVID-19 virus is much greater; 33 People who live with rare diseases are impacted by potential f. 34 shortages of life-saving medications and supplies due to changes in 35 supply chain resulting from the COVID-19 pandemic. People with rare diseases also rely on the support of their families and home 36 37 health aides, and because of the social distancing and quarantining, 38 the pandemic puts them at risk of not having the support they need 39 in accessing services and treatment; 40 g. Researchers have made considerable progress in developing 41 diagnostic tools and treatment protocols for rare diseases and 42 discovering methods of prevention. However, much more remains 43 to be done in the search for new therapeutics and in understanding 44 the link between rare disease and pandemics, and 45 h. It is therefore an appropriate public policy for the State of 46 New Jersey to establish an advisory body, whose membership 47 would be comprised of qualified professionals and persons living with rare diseases, that would be tasked to educate medical 48

professionals, government agencies, and the public about the
 importance of rare diseases as an important public health issue, and
 to encourage and fund research in the development of new
 treatments for rare diseases.

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6 2. There is established the New Jersey Rare Disease Advisory 7 Council in the Department of Health which shall advise the 8 Legislature, State departments, agencies, commissions, and 9 authorities, and private agencies providing services for persons 10 diagnosed with a rare disease.

11 a. The advisory council shall consist of 30 members as follows:

(1) the Commissioners of Banking and Insurance, Children and
Families, Environmental Protection, Health, Human Services, and
the Executive Director of the New Jersey Office on Minority and
Multicultural Health, or their designees, as ex officio members;

(2) two members of the Senate, one of whom is appointed by the
President of the Senate, and one of whom is appointed by the
Minority Leader of the Senate;

(3) two members of the General Assembly, one of whom is
appointed by the Speaker of the General Assembly, and one of
whom is appointed by the Minority Leader of the General
Assembly; and

23 (4) 20 public members to be appointed by the Governor, who 24 shall include: two physicians licensed to practice in this State who 25 have expertise in treating patients with rare diseases, one of whom 26 shall be a pediatrician who provides care to children with rare 27 diseases; a registered professional nurse licensed in this State who 28 has expertise in providing care to patients with rare diseases; a 29 representative of general hospital or hospital system in this State 30 recommended by the New Jersey Hospital Association; a 31 representative of federally qualified health center in this State 32 recommended by the New Jersey Primary Care Association; a 33 geneticist licensed to practice in this State; a genetic counselor who 34 has experience in providing services to persons diagnosed with a 35 rare disease, their families, or their caregivers or care partners; a 36 representative of the health insurance industry recommended by the 37 New Jersey Association of Health Plans; a pharmacist licensed to 38 practice in this State who has experience with persons with a rare 39 disease; a representative of the pharmaceutical industry who has 40 expertise in rare diseases recommended by the HealthCare Institute 41 of New Jersey; a representative of the biotechnology industry who 42 is has expertise in rare diseases recommended by BIO NJ; a representative of the medical technology industry who has expertise 43 44 in rare diseases; a representative of the Rutgers Biomedical and 45 Health Sciences who is engaged in rare disease research; a 46 representative of the Rowan University Graduate School of 47 Biomedical Sciences who is engaged in rare disease research; two 48 representatives of rare disease patient advocacy organizations; two

1 persons, age 18 years or older, who have a rare disease; and two 2 caregivers or care partners for a patient or partner with a rare disease; one of who shall be a caregiver for a child with a rare 3 4 disease.

5 b. Public members of the advisory council shall serve for a term of three years, except that of the initial appointments, seven 6 7 public members shall serve for one year, seven public members 8 shall serve for two years, and six public members shall serve for 9 three years. Vacancies in the membership of the council shall be 10 filled in the same manner as the original appointments were made. 11 The public members of the council shall serve without 12 compensation but may be reimbursed for traveling and other 13 miscellaneous expenses necessary to perform their duties within the 14 limits of funds made available to the council for its purposes.

15 c. The advisory council shall organize as soon as practicable 16 after the appointment of its members, and the Governor shall select 17 a chairperson and vice-chairperson from among its members. The 18 chairperson shall appoint a secretary who need not be a member of 19 the council.

20 d. The advisory council shall meet a minimum of three times a year but may meet more often at the call of its chair. The council 21 22 may hold hearings at the times and in the places it deems 23 appropriate and necessary to fulfill its charge. The council shall be 24 entitled to call to its assistance, and avail itself of the services of the 25 employees of, any State, county, or municipal department, board, 26 bureau, commission, or agency as it may require and as may be 27 available to it for its purposes.

28 e. The Department of Health shall provide staff services to the 29 advisory council.

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The purpose of the advisory council shall be to: 3

act as the advisory body on rare diseases to the Legislature a. 33 and State departments, agencies, commissions, authorities, and 34 private agencies that provide services to, or are charged with the 35 care of, persons with rare diseases;

36 b. conduct a thorough and comprehensive study of all issues 37 relating to the quality and cost-effectiveness of, and access to, 38 treatment and services provided to persons with rare diseases in this 39 State, including the link between rare diseases and the COVID-19 40 pandemic, and to develop policy recommendations on those issues;

41 с establish and implement a repository of best practice 42 standards to share with health care providers that will ensure they are adequately informed of the most effective strategies for 43 44 recognizing and treating rare diseases in New Jersey;

45 d. identify effective research-based strategies that have been 46 developed to help diagnose, treat, and prevent rare diseases;

47 develop effective strategies to raise public awareness of rare e. 48 diseases in this State;

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#### A4016 DANCER, BENSON

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1 evaluate and make recommendations to improve: f. 2 (1) the State's Newborn Screening Program in the Department 3 of Health; and (2) State Medicaid coverage for approved treatments and 4 5 medications for patients with a rare disease; 6 g. research and make policy recommendations to the 7 Legislature on access to health insurance specialists and other 8 needed services for patients with a rare disease; and 9 h. identify, with assistance from the public, additional research 10 topics on rare disease to inform future studies the council may 11 conduct. 12 13 4. The advisory council shall apply for, and accept, any grant 14 of money from the federal government, private foundations, or 15 other sources, which may be available for programs related to rare 16 diseases. 17 18 5. The advisory council shall report to the Governor and, pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1), to the 19 20 Legislature, no later than December 31st, on a biennial basis, starting in the second year next following the enactment of this act, 21 22 on the activities of the advisory council and its findings and 23 recommendations on issues relating to the quality of, and access to, 24 treatment and services for persons with rare diseases in this State. 25 pursuant 26 6. The Commissioner of Health, to the "Administrative Procedures Act," P.L.1968, c.410 (C.52:14B-1 et 27 seq.) shall adopt rules and regulations necessary to effectuate the 28 29 purposes of this act. 30 31 7. This act shall take effect immediately. 32 33 34 **STATEMENT** 35 There is a significant link between rare disease and the 36 37 coronavirus 2019 (COVID-19) pandemic. Many people who live 38 with rare diseases are immunosuppressed and have respiratory and 39 neurologic issues that make the consequences of the virus much 40 more severe for them. This link heightens the importance of the 41 establishment of an advisory council to examine the issues that affect persons with rare diseases in the State. 42 43 Therefore, this bill establishes the 30-member New Jersey Rare 44 Disease Advisory Council in the Department of Health to advise the 45 Legislature, State departments, agencies, commissions, and 46 authorities, and private agencies providing services for persons 47 diagnosed with a rare disease.

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1 The membership of the advisory council will consist of: the 2 Commissioners of Banking and Insurance, Children and Families, 3 Environmental Protection, Health, Human Services, and the 4 Executive Director of the New Jersey Office on Minority and 5 Multicultural Health or their designees, as ex officio members; two 6 members of the Senate, one appointed by the President of the 7 Senate, and one appointed by the Minority Leader of the Senate; 8 two members of the General Assembly, one appointed by the 9 Speaker of the General Assembly, and one appointed by the 10 Minority Leader of the General Assembly; and 20 public members 11 appointed by the Governor, including two physicians licensed to 12 practice in this State who have expertise in treating patients with rare diseases, one who would be a pediatrician who provides care to 13 14 children with rare diseases; a registered professional nurse licensed 15 in this State who has expertise in providing care to patients with 16 rare diseases; a representative of general hospital or hospital system 17 in this State recommended by the New Jersey Hospital Association; 18 a representative of federally qualified health center in this State 19 recommended by the New Jersey Primary Care Association; a 20 geneticist licensed to practice in this State; a genetic counselor who 21 has experience in providing services to persons diagnosed with a 22 rare disease, their families, or their caregivers or care partners; a 23 representative of the health insurance industry recommended by the 24 New Jersey Association of Health Plans; a pharmacist licensed to 25 practice in this State who has experience with persons with a rare 26 disease; a representative of the pharmaceutical industry who has 27 expertise in rare diseases recommended by the HealthCare Institute 28 of New Jersey; a representative of the biotechnology industry who 29 has expertise in rare diseases recommended by BIO NJ; a 30 representative of the medical technology industry who has expertise 31 in rare diseases; a representative of the Rutgers Biomedical and 32 Health Sciences who is engaged in rare disease research; a 33 representative of the Rowan University Graduate School of 34 Biomedical Sciences who is engaged in rare disease research; two 35 representatives of rare disease patient advocacy organizations; two 36 persons, age 18 years or older, who have a rare disease; and two 37 caregivers or care partners for a patient or partner with a rare 38 disease; one who would be a caregiver for a child with a rare 39 disease.

40 The purpose of the advisory council will be to: act as the 41 advisory body on rare diseases to the Legislature and State 42 departments, agencies, commissions, authorities, and private 43 agencies that provide services to, or are charged with the care of, 44 persons with rare diseases; conduct a thorough and comprehensive 45 study of all issues relating to the quality of, and access to, treatment 46 and services provided to persons with rare diseases in this State, 47 including the link between rare diseases and the COVID-19 48 pandemic, and to develop policy recommendations on those issues;

## A4016 DANCER, BENSON

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1 establish and implement a repository of best practice to share with 2 health care providers that will ensure they are adequately informed 3 of the most effective strategies for recognizing and treating rare diseases in New Jersey; identify effective research-based strategies 4 5 that have been developed to help diagnose, treat, and prevent rare 6 diseases; develop effective strategies to raise public awareness of 7 rare diseases in this State; evaluate and make recommendations to 8 improve the State's Newborn Screening Program in the Department 9 of Health and State Medicaid coverage for approved treatments and 10 medications for patients with a rare disease; research and make 11 policy recommendations to the Legislature on access to health 12 insurance specialists and other needed services for patients with a 13 rare disease; and identify, with assistance from the public, 14 additional research topics on rare disease to inform future studies 15 the council may conduct.

Finally, the bill requires the advisory council to report biennially, to the Governor and the Legislature on its findings and recommendations on issues relating to the quality of, and access to, treatment and services provided to persons with rare diseases in this State.

This bill is similar to H-7094, the "Rare Disease Community
Support, Resource Coordination and Quality of Life Act of 2014,"

that was adopted by the state of Rhode Island earlier this year.

## ASSEMBLY HEALTH COMMITTEE

### STATEMENT TO

### ASSEMBLY, No. 4016

with committee amendments

# **STATE OF NEW JERSEY**

#### DATED: JANUARY 13, 2021

The Assembly Health Committee reports favorably and with committee amendments Assembly Bill No. 4016.

As amended and reported, this bill establishes a 20-member New Jersey Rare Disease Advisory Council in the Department of Health to advise the Legislature, State departments, agencies, commissions, and authorities, and private agencies providing services for persons diagnosed with a rare disease.

The membership of the advisory council will consist of 20 members as provided for in the bill. The purpose of the advisory council will be to: act as the advisory body on rare diseases to the Legislature and State departments, agencies, commissions, authorities, and private agencies that provide services to, or are charged with the care of, persons with rare diseases; conduct a thorough and comprehensive study of all issues relating to the quality of and access to treatment and services provided to persons with rare diseases in this State, including the link between rare diseases and the COVID-19 pandemic, and to develop policy recommendations on those issues; establish and implement a repository of best practice to share with health care providers that will ensure they are adequately informed of the most effective strategies for recognizing and treating rare diseases in New Jersey; identify effective research-based strategies that have been developed to help diagnose, treat, and prevent rare diseases; develop effective strategies to raise public awareness of rare diseases in this State; evaluate and make recommendations to improve the State's Newborn Screening Program in the Department of Health and State Medicaid coverage for approved treatments and medications for patients with a rare disease; research and make policy recommendations to the Legislature on access to health insurance specialists and other needed services for patients with a rare disease; and identify, with assistance from the public, additional research topics on rare disease to inform future studies the council may conduct.

Finally, the bill requires the advisory council to report biennially, to the Governor and the Legislature on its findings and recommendations on issues relating to the quality of, and access to, treatment and services provided to persons with rare diseases in this State.

#### COMMITTEE AMENDMENTS:

The amendments:

1) make technical changes;

2) remove the requirement for the advisory council to study cost-effectiveness;

3) provide that the Department of Health (department) is to maintain oversight of the advisory council (council) and may delegate the administration thereof to a State research university or institution as provided for in the bill. The department may issue a request for proposals for a location for the council to operate and for staff and resources to support operations. The department is to provide staff services to the council if the proposals submitted to the department are insufficient;

4) provide that the council organize as soon as practicable after the appointment of a majority of its public members; and

5) reduce the council's membership from 30 to 20 members as provided for in the bill.

To the Senate:

Pursuant to Article V, Section I, Paragraph 14 of the New Jersey Constitution, I herewith return for Senate Bill No. 2682 (First Reprint) with my recommendations for reconsideration.

Senate Bill No. 2682 (First Reprint) establishes a 20-member New Jersey Rare Disease Advisory Council ("Council") in the Department of Health to examine the treatment and services provided to persons with rare diseases in this State. Among other things, the Council is charged with evaluating the quality of treatment and services available to individuals with rare diseases, identifying effective research-based strategies to help diagnose, treat, and prevent rare diseases, and advising public and private agencies that provide services to individuals with rare diseases.

I share the sponsors' goal of improving our understanding of rare diseases and the services provided to treat them, and I am proud to join them in convening a variety of perspectives to tackle some of the most significant issues facing residents suffering from rare diseases. There are thousands of known rare diseases, and thousands of residents who live with one in New Jersey. We know that residents who have a rare disease are often left with fewer treatment options and multiple diagnoses because of the limited research and diagnostic tools available in this sphere. We also know that for many of these individuals, even a small disruption in their network of care can present risks. The Coronavirus disease 2019 (COVID-19) pandemic highlighted this regrettable truth.

I offer recommendations today that strengthen the bill by appropriately adjusting the roles of the different branches in the appointment process and modifying certain responsibilities to more closely align with the advisory nature of the Council. My recommendations also incorporate additional perspectives by including epidemiologists and nurses, recognizing the value of their experiences and expertise in this field.

Therefore, I herewith return Senate Bill No. 2682 (First Reprint) and recommend that it be amended as follows:

- Page 3, Section 1, Line 6: Delete "and fund"
- Page 3, Section 2, Line 20: Delete "Senate" and insert "public"

be"

be"

- Page 3, Section 2, Line 20:
- Page 3, Section 2, Line 20:
- Page 3, Section 2, Line 21:
- Page 3, Section 2, Line 21:
- Page 3, Section 2, Line 22:

- Page 3, Section 2, Line 23:
- Page 3, Section 2, Line 23:
- Page 3, Section 2, Line 24:
- Page 3, Section 2, Line 25:
- Page 3, Section 2, Line 25:
- Page 3, Section 2, Line 25:

After "Senate" insert ", which public members shall be any of the following: an epidemiologist, a registered nurse or nurse practitioner licensed to practice in this State with experience in providing care to patients with rare diseases, or a pediatrician or other physician licensed to practice in this State with experience in providing care to patients with rare diseases"

Delete "is" and insert "shall

After "by the" insert "Governor,

Delete "is" and insert "shall

After "by the" insert "Governor,

upon recommendation of the"

upon recommendation of the"

- Delete "General Assembly" and insert "public"
  - Delete "is" and insert "shall be"
  - After "by the" insert "Governor, upon recommendation of the"
  - Delete "is" and insert "shall be"
  - After "by the" insert "Governor, upon recommendation by the"
  - After "Assembly" insert ", which public members shall be any of following: the an epidemiologist, a registered nurse or nurse practitioner licensed to practice in this State with experience in providing care to patients with diseases, rare or а pediatrician or other physician licensed to practice in this State with experience in providing care to patients with rare diseases"

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Page 4, Section 2, Line 15:	Delete "four" and insert "five"
Page 4, Section 2, Line 16:	Delete "four" and insert "five"
Page 4, Section 2, Line 17:	Delete "four" and insert "six"
Page 5, Section 3, Line 14:	Delete "establish and implement a repository of" and insert "develop recommendations for"
Page 5, Section 3, Line 14:	After "standards" insert "encompassing"
Page 5, Section 3, Line 15:	Delete in its entirety
Page 5, Section 3, Line 16:	Delete "informed of"
Page 5, Section 4, Lines 34-37:	Delete in their entirety
Page 5, Section 5, Line 39:	Delete "5." and insert "4."
Page 5, Section 6, Line 47:	Delete "6." and insert "5."
Page 5, Section 6, Line 48:	Delete "shall" and insert "may"
Page 6, Section 7, Line 4:	Delete "7." and insert "6."
	Respectfully,
[seal]	/s/ Philip D. Murphy
	Governor

Attest:

/s/ Parimal Garg

Chief Counsel to the Governor

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# Governor Murphy Takes Action on Legislation

06/30/2021

TRENTON - Today, Governor Murphy signed the following bills into law.

S-2682/A-4016 w/GR (Gopal, Kean/Dancer, Benson, Verrelli) – Establishes the New Jersey Rare Disease Advisory Council.

**S-2725/A-4473 w/GR (Gopal/Houghtaling, Downey)** – Concerns assessment of real property in counties operating under "Real Property Assessment Demonstration Program."

**S-3489/A-5465** (Sweeney, Pou/Benson, Vainieri Huttle, Speight) – Changes effective date of new law concerning certain State contracts for mental health, behavioral health, and addiction services.

**S-3998/A-5938 (Sarlo/Chiaravalloti)** – Authorizes State Treasurer to determine salary of Director of Division of Investment.

**S-3999/A-5942 (Beach/Pintor Marin)** – Authorizes Secretary of State and New Jersey Motor Vehicle Commission to share voter and motor vehicle information with state-based non-profit organization for maintaining accuracy of voter registration information.

# Governor Murphy Takes Action On Legislation

06/24/2021

TRENTON - Today, Governor Phil Murphy signed the following bills into law:

A-2116/S-2009 w/GR (Tully, Swain, Armato/Lagana) Requires State Treasurer to submit report to Legislature every six months identifying deadlines for applications for federal funds by State agencies.

**A-4745/S3277 (Armato, Chaparro, Danielsen/Bucco, Singleton, Doherty)** Raises from 45 to 57 maximum eligibility age for exempt fireman certificates and membership in New Jersey State Fireman's Association.

A-5590/S-3819 (Mazzeo, Armato, Greenwald/Sweeney, Beach) Extends period of municipal stabilization and recovery, with certain modifications, under "Municipal Stabilization and Recovery Act."

S-347/A-1992 w/GR (Smith, Vitale/Stanley, Conaway, Houghtaling) Establishes "NJ One Health Task Force."

**S-619/A1635 w/GR (O'Scanlon/Lampitt, Downey)** Permits use of telemedicine and telehealth to authorize patients for medical cannabis and to issue written instructions for dispensing medical cannabis. \*

S-853/A-5064 w/GR (Sweeney, Beach/Verrelli, Giblin, Danielsen) "New Jersey Buy American Act"; requires certain State agency highway and bridge construction contracts to include iron and steel products made in U.S.

**S-890/A-1061 w/GR (Pou, Codey/Jasey, Johnson, Verrelli)** Requires DOH and DHS to identify and take appropriate steps to secure federal sources of funding to support maternal mental health.

**S-3686/A-5540 (Sweeney/ Burzichelli, Freiman)** Supplements Department of Transportation language provisions in FY 2021 Appropriations Act to provide flexibility for debt service payments.

Governor Murphy conditionally vetoed the following bill:

S-2682/A-4016 (Gopal, Kean/Dancer, Benson, Verrelli) – CONDITIONAL - Establishes the New Jersey Rare Disease Advisory Council.

Copy of Statement

Governor Murphy will deliver the following conditional veto to the Senate on Monday, June 28:

S-3658/A-5641 (Cunningham, Scutari/ Chiaravalloti, Mukherji, Carter) – CONDITIONAL - Eliminates mandatory minimum terms of imprisonment determined by Legislature to be of non-violent nature.

Copy of Statement

#### SENATE BILL NO. 2682 (First Reprint)

To the Senate:

Pursuant to Article V, Section I, Paragraph 14 of the New Jersey Constitution, I herewith return for Senate Bill No. 2682 (First Reprint) with my recommendations for reconsideration.

Senate Bill No. 2682 (First Reprint) establishes a 20-member New Jersey Rare Disease Advisory Council ("Council") in the Department of Health to examine the treatment and services provided to persons with rare diseases in this State. Among other things, the Council is charged with evaluating the quality of treatment and services available to individuals with rare diseases, identifying effective research-based strategies to help diagnose, treat, and prevent rare diseases, and advising public and private agencies that provide services to individuals with rare diseases.

I share the sponsors' goal of improving our understanding of rare diseases and the services provided to treat them, and I am proud to join them in convening a variety of perspectives to tackle some of the most significant issues facing residents suffering from rare diseases. There are thousands of known rare diseases, and thousands of residents who live with one in New Jersey. We know that residents who have a rare disease are often left with fewer treatment options and multiple diagnoses because of the limited research and diagnostic tools available in this sphere. We also know that for many of these individuals, even a small disruption in their network of care can present risks. The Coronavirus disease 2019 (COVID-19) pandemic highlighted this regrettable truth.

I offer recommendations today that strengthen the bill by appropriately adjusting the roles of the different branches in the appointment process and modifying certain responsibilities to more closely align with the advisory nature of the Council. My recommendations also incorporate additional perspectives by including epidemiologists and nurses, recognizing the value of their experiences and expertise in this field.

Therefore, I herewith ret	turn Senate Bill No. 2682
(First Reprint) and recommend that :	it be amended as follows:
Page 3, Section 1, Line 6:	Delete "and fund"
Page 3, Section 2, Line 20:	Delete "Senate" and insert "public"
Page 3, Section 2, Line 20:	Delete "is" and insert "shall be"
Page 3, Section 2, Line 20:	After "by the" insert "Governor, upon recommendation of the"
Page 3, Section 2, Line 21:	Delete "is" and insert "shall be"
Page 3, Section 2, Line 21:	After "by the" insert "Governor, upon recommendation of the"
Page 3, Section 2, Line 22:	After "Senate" insert ", which public members shall be any of the following: an epidemiologist, a registered nurse or nurse practitioner licensed to practice in this State with experience in providing care to patients with rare diseases, or a pediatrician or other physician licensed to practice in this State with experience in providing care to patients with rare diseases"
Page 3, Section 2, Line 23:	Delete "General Assembly" and insert "public"
Page 3, Section 2, Line 23:	Delete "is" and insert "shall be"

- Page 3, Section 2, Line 24:
- Page 3, Section 2, Line 25:
- Page 3, Section 2, Line 25:
- Page 3, Section 2, Line 25:

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Delete "is" and insert "shall be"

After "by the" insert "Governor, upon recommendation by the"

After "Assembly" insert ", which public members shall be any of the following: an epidemiologist, a registered nurse or nurse practitioner licensed to practice in this State with experience in providing care to patients with rare diseases, or a pediatrician or other physician licensed to practice in this State with experience in

providing care to patients with rare diseases" Page 4, Section 2, Line 15: Delete "four" and insert "five" Delete "four" and insert "five" Page 4, Section 2, Line 16: Page 4, Section 2, Line 17: Delete "four" and insert "six" Delete "establish and implement a repository of" and insert Page 5, Section 3, Line 14: "develop recommendations for" Page 5, Section 3, Line 14: After "standards" insert "encompassing" Page 5, Section 3, Line 15: Delete in its entirety Page 5, Section 3, Line 16: Delete "informed of" Page 5, Section 4, Lines 34-37: Delete in their entirety Delete "5." and insert "4." Page 5, Section 5, Line 39: Delete "6." and insert "5." Page 5, Section 6, Line 47: Delete "shall" and insert "may" Page 5, Section 6, Line 48: Page 6, Section 7, Line 4: Delete "7." and insert "6." Respectfully, /s/ Philip D. Murphy [seal] Governor

Attest:

/s/ Parimal Garg
Chief Counsel to the Governor

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