

ASSEMBLY, No. 3206

STATE OF NEW JERSEY 220th LEGISLATURE

INTRODUCED MARCH 7, 2022

Sponsored by:

Assemblywoman SHANIQUE SPEIGHT

District 29 (Essex)

SYNOPSIS

Establishes requirements to screen certain people who are pregnant and who have given birth for endometriosis.

CURRENT VERSION OF TEXT

As introduced.



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2

1 AN ACT concerning endometriosis screenings and supplementing
2 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. a. The Commissioner of Health shall require every hospital
8 in the State, every birthing center licensed in the State pursuant to
9 P.L.1971, c.136 (C.26:2H-1 et seq.), every federally qualified
10 health center, and every physician or health care practitioner in the
11 State providing care to a pregnant person or a person who has given
12 birth, to screen the person for endometriosis if the person has been
13 diagnosed with preeclampsia and subsequently shows symptoms of
14 endometriosis. The screening tools shall be based on industry best
15 practices and guidance, as determined by the American College of
16 Obstetricians and Gynecologists or another nationally-recognized
17 body as may be designated by the commissioner.

18 b. A hospital, a licensed birthing center, or a federally qualified
19 health center providing care to, or a physician or other health care
20 practitioner who is the primary caregiver for, a pregnant person or a
21 person who seeks treatment within six weeks of giving birth shall,
22 in accordance with guidelines developed by the commissioner:

23 (1) provide the person with information on endometriosis and
24 potential warning signs and symptoms through the educational
25 program developed pursuant subsection d. of this section ;

26 (2) inform the person of the benefits of being screened for
27 endometriosis if the person has been diagnosed with preeclampsia
28 and subsequently shows symptoms of endometriosis, and that the
29 person is required to be screened for endometriosis unless the
30 person issues a written refusal to be screened, which refusal shall be
31 provided on a form and in a manner prescribed by the commissioner
32 consistent with the provisions of subsection c. of this section; and

33 (3) screen the person for endometriosis unless the person
34 provides written refusal, as provided in paragraph (2) of this
35 subsection. The person shall, on the form and in a manner
36 prescribed by the commissioner consistent with subsection c. of this
37 section, acknowledge receipt of the information provided by the
38 hospital, birthing center, federally qualified health center,
39 physician, or health care practitioner, as applicable, regarding the
40 benefits of being screened for endometriosis.

41 c. The commissioner shall develop a standardized form to be
42 used for the purposes of providing the acknowledgement required
43 pursuant to paragraph (3) of subsection b. of this section, which
44 may also be used to provide written refusal to undergo a screening
45 for endometriosis pursuant to paragraph (2) of subsection b. of this
46 section, if applicable.

47 d. The commissioner shall develop, in consultation with the
48 Endometriosis Foundation of America and any other community-

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1 based organization as may be designated by the commissioner, an
2 endometriosis educational program for pregnant individuals and
3 individuals who have recently given birth who have been diagnosed
4 with preeclampsia and subsequently show symptoms of
5 endometriosis. The educational program shall include information
6 on endometriosis and the potential warning signs and symptoms of
7 endometriosis.

8 e. Upon receipt of the results of any screening conducted
9 pursuant to subsection a. of this section, the hospital, licensed
10 birthing center, federally qualified health center, or physician or
11 health care practitioner, as applicable, shall discuss the results with
12 the person and, if the person has a positive screening for
13 endometriosis, develop a treatment plan to minimize the person's
14 risk from endometriosis.

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16 2. The Commissioner of Health, pursuant to the "Administrative
17 Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt
18 rules and regulations to effectuate the purposes of this act.

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20 3. This act shall take effect immediately.

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STATEMENT

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25 This bill directs the Commissioner of Health to require every
26 hospital in the State, every birthing center licensed in the State
27 pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.), every federally
28 qualified health center, and every physician or health care
29 practitioner in the State providing care to a pregnant person or a
30 person who has given birth, to screen the person for endometriosis,
31 if the person has been diagnosed with preeclampsia and later shows
32 symptoms of endometriosis. The screening tools are to be based on
33 industry best practices, as determined by the American College of
34 Obstetricians and Gynecologists or another nationally-recognized
35 body designated by the commissioner.

36 A hospital, licensed birthing center, or federally qualified health
37 center providing care to, or a physician or other health care
38 practitioner who is the primary caregiver for, a pregnant person or a
39 person who seeks treatment within six weeks of giving birth would,
40 in accordance with guidelines developed by the commissioner:
41 provide the person with information on endometriosis based on an
42 educational program developed by the commissioner; inform the
43 person of the benefits of being screened for endometriosis if the
44 person has been diagnosed with preeclampsia and subsequently
45 shows symptoms of endometriosis, and that the person is required
46 to be screened for endometriosis unless the person provides a
47 written refusal to be screened; and screen the person for
48 endometriosis unless the person provides a written refusal to be

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1 screened. The person would be required to acknowledge receipt of
2 the information provided by the hospital, birthing center, federally
3 qualified health center, physician, or health care practitioner, as
4 applicable. The commissioner will be required to develop a
5 standardized form to be used to acknowledge receipt of the
6 information, which form may also be used to provide written refusal
7 to be screened for endometriosis. The commissioner will also be
8 required to develop, in consultation with the Endometriosis
9 Foundation of America and any other community-based
10 organization as may be designated by the commissioner, a
11 endometriosis educational program for pregnant individuals and
12 individuals who have recently given birth, have been diagnosed
13 with preeclampsia, and subsequently show symptoms of
14 endometriosis. The educational program will include information
15 on endometriosis and the potential warning signs and symptoms of
16 endometriosis.

17 Upon receipt of the results of a screening conducted pursuant to
18 the bill, a hospital, licensed birthing center, federally qualified
19 health center, or physician or health care practitioner, as applicable,
20 would discuss the results with the person and, if the person screens
21 positive for endometriosis, develop a treatment plan to minimize the
22 person's risk from endometriosis.