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.
AN ACT concerning endometriosis screenings and supplementing Title 26 of the Revised Statutes.

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

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

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

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

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

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

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

d. The commissioner shall develop, in consultation with the Endometriosis Foundation of America and any other community-
based organization as may be designated by the commissioner, an endometriosis educational program for pregnant individuals and individuals who have recently given birth who have been diagnosed with preeclampsia and subsequently show symptoms of endometriosis. The educational program shall include information on endometriosis and the potential warning signs and symptoms of endometriosis.

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

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

3. This act shall take effect immediately.

STATEMENT

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

A hospital, licensed birthing center, or federally qualified health center providing care to, or a physician or other health care practitioner who is the primary caregiver for, a pregnant person or a person who seeks treatment within six weeks of giving birth would, in accordance with guidelines developed by the commissioner: provide the person with information on endometriosis based on an educational program developed by the commissioner; inform the person of the benefits of being screened for endometriosis if the person has been diagnosed with preeclampsia and subsequently shows symptoms of endometriosis, and that the person is required to be screened for endometriosis unless the person provides a written refusal to be screened; and screen the person for endometriosis unless the person provides a written refusal to be
screened. The person would be required to acknowledge receipt of the information provided by the hospital, birthing center, federally qualified health center, physician, or health care practitioner, as applicable. The commissioner will be required to develop a standardized form to be used to acknowledge receipt of the information, which form may also be used to provide written refusal to be screened for endometriosis. The commissioner will also be required to develop, in consultation with the Endometriosis Foundation of America and any other community-based organization as may be designated by the commissioner, an endometriosis educational program for pregnant individuals and individuals who have recently given birth, have been diagnosed with preeclampsia, and subsequently show symptoms of endometriosis. The educational program will include information on endometriosis and the potential warning signs and symptoms of endometriosis.

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