

## 2016 Bill Text NJ S.B. 2964

Enacted - Interim, January 8, 2018

### Reporter

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## Notice

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Added: Text highlighted in green

THE STATE OF NEW JERSEY BILL TEXT > NEW JERSEY 217TH LEGISLATURE - SECOND REGULAR SESSION > SENATE BILL 2964

## Progress

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ENACTED

[Legislative Outlook in detail](#)

Introduced

Passed 1st  
Committee

Passed 1st  
Chamber

Passed 2nd  
Committee

Passed 2nd  
Chamber

Enacted



## Synopsis

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An Act concerning housing options for individuals receiving treatment for a substance use disorder and amending P.L.1975, c.305 and P.L.1970, c.334.

## Digest

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### STATEMENT

This bill prohibits residential substance use disorder treatment facilities and aftercare facilities (including sober living homes and halfway houses) from denying admission to a person on the basis that the person is currently receiving medication assisted treatment for a substance use disorder, provided the treatment is administered by a licensed treatment provider. The bill specifies that medication assisted treatment includes but need not be limited to, methadone, buprenorphine, naltrexone, or any other medication approved by the Food and Drug Administration for the treatment of a substance use disorder.

The science of addiction medicine is increasingly finding that substance use disorders can be most effectively treated with a combination of counseling, peer support, and medication. Some of the medications used in such treatments, such as methadone and suboxone, are themselves addictive, but they can be safely administered and managed by trained medical professionals. Nonetheless, some substance use disorder treatment and aftercare programs operate with a philosophy that an addiction to one substance should not be replaced with an addiction to another, and therefore they object to medication assisted treatment, instead emphasizing counseling and peer support. This philosophy, while earnest and well-meaning, has the unfortunate result of barring individuals receiving medically supervised medication assisted treatment from other recovery-related treatment, aftercare, and housing options. This bill is intended to remove scientifically outdated barriers to residential treatment, aftercare, and housing options for individuals in recovery.

## Text

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*Be It Enacted by the Senate and General Assembly of the State of New Jersey:*

1. Section 9 of P.L.1975, c.305 ([C.26:2B-15](#)) is amended to read as follows:

9. Any person who is intoxicated and who voluntarily applies for treatment or is brought to a facility by a police officer or other authorized person in accordance with section 10 of P.L.1975, c.305 (C.26:2B-16) may be afforded treatment at an intoxication treatment center or other facility. Any person who is an alcoholic and who voluntarily applies for treatment may be afforded treatment at an intoxication center or other facility.

As soon as possible after the admission of any person, the administrator of the facility shall cause such person to be examined by a physician or by a medically competent individual designated by the department and under the supervision of a physician. If, upon examination, a determination is made that the person is intoxicated or is an alcoholic, and adequate and appropriate treatment is available, he shall be admitted. **ADMISSION SHALL NOT BE DENIED ON THE BASIS THAT THE PERSON IS CURRENTLY RECEIVING MEDICATION ASSISTED TREATMENT FOR A SUBSTANCE USE DISORDER ADMINISTERED BY A LICENSED TREATMENT PROVIDER, INCLUDING BUT NOT LIMITED TO METHADONE, BUPRENORPHINE, NALTREXONE, OR ANY OTHER MEDICATION APPROVED BY THE FOOD AND DRUG ADMINISTRATION FOR THE TREATMENT OF A SUBSTANCE USE DISORDER.** If any person is not admitted for the reason that adequate and appropriate treatment is not available at the facility, the administrator of the facility, acting whenever possible with the assistance of the director, shall refer the person to a facility at which adequate and appropriate treatment is available. In the event that a person is not admitted to a facility, and has no funds, the administrator shall arrange for the person to be assisted to his residence, or, if he has no residence, to a place where shelter will be provided him.

Any person admitted to a facility may receive treatment at the facility for as long as he wishes to remain at the facility or until the administrator determines that treatment will no longer benefit him; provided, however, that any person who at the time of admission is intoxicated and is incapacitated, shall remain at the facility until he is no longer incapacitated, but in no event shall he be required to remain for a period greater than 48 hours.

When a person is admitted to a facility, the facility shall provide notice of admission to the person's spouse, parent, legal guardian, designated next of kin, or other designated emergency contact, as soon thereafter as possible, provided that: (1) such notice is provided in a manner that is consistent with federal requirements under [42 CFR Part 2](#) and federal HIPAA requirements under [45 CFR Parts 160](#) and 164; and (2) the patient, if an adult, has not withheld consent for such notice or expressly requested that notification not be given. If a patient who is not incapacitated withholds consent for such notice, or expressly requests that notification not be given, the patient's wishes shall be respected unless the patient is a minor child or adolescent, in which case, the minor's parent, legal guardian, designated next of kin, or other designated emergency contact shall be notified, provided that such

notification is not inconsistent with, and would not violate, federal requirements under [42 CFR Part 2](#) and federal HIPAA requirements under [45 CFR Parts 160](#) and 164.

The manner in which any person is transported from one facility to another, or from a facility to his residence, and the financing thereof, shall be determined by the director in accordance with rules and regulations promulgated by the department.

When a patient is discharged or otherwise released from treatment at a facility, the patient shall be encouraged to consent to appropriate outpatient or residential aftercare treatment.

When a patient voluntarily withdraws, or is involuntarily evicted from a transitional sober living home, halfway house, or other residential aftercare facility, the facility shall provide notice of the patient's release from care to the patient's spouse, parent, legal guardian, designated next of kin, or other designated emergency contact, provided that: (1) such notice is provided in a manner that is consistent with federal requirements under [42 CFR Part 2](#) and federal HIPAA requirements under [45 CFR Parts 160](#) and 164; and (2) the patient, if an adult, has not withheld consent for such notice, or expressly requested that notification not be given. If a patient who is not incapacitated withholds consent for such notice, or expressly requests that notification not be given, the patient's wishes shall be respected unless the patient is a minor child or adolescent, in which case, the minor's parent, legal guardian, designated next of kin, or other designated emergency contact shall be notified, provided that such notification is not inconsistent with, and would not violate, federal requirements under [42 CFR Part 2](#) and federal HIPAA requirements under [45 CFR Parts 160](#) and 164.

(cf: P.L.2015, c.284, s.1)

2. Section 5 of P.L.1970, c.334 ([C.26:2G-25](#)) is amended to read as follows:

5. The commissioner shall adopt, amend, promulgate and enforce such rules, regulations and minimum standards for the treatment of patients of narcotic and drug abuse treatment centers as may be reasonably necessary to accomplish the purposes of P.L.1970, c.334 (C.26:2G-21 et seq.). Such narcotic and drug abuse treatment centers may be classified into two or more classes with appropriate rules, regulations and minimum standards for each such class. **NO NARCOTIC OR DRUG ABUSE TREATMENT CENTER, TRANSITIONAL SOBER LIVING HOME, HALFWAY HOUSE, OR OTHER RESIDENTIAL AFTERCARE FACILITY SHALL BE PERMITTED TO DENY ADMISSION TO A PROSPECTIVE CLIENT ON THE BASIS THAT THE PERSON IS CURRENTLY RECEIVING MEDICATION ASSISTED TREATMENT FOR A SUBSTANCE USE DISORDER ADMINISTERED BY A LICENSED TREATMENT PROVIDER, INCLUDING BUT NOT LIMITED TO METHADONE, BUPRENORPHINE, NALTREXONE, OR ANY OTHER MEDICATION APPROVED BY THE FOOD AND DRUG ADMINISTRATION FOR THE TREATMENT OF A SUBSTANCE USE DISORDER.**

The rules and regulations adopted pursuant to this section shall, at a minimum, require a transitional sober living home, halfway house, or other residential aftercare facility to provide notice to a patient's spouse, parent, legal guardian, designated next of kin, or other designated emergency contact, whenever the patient voluntarily withdraws, or is involuntarily evicted from, such facility, provided that: (1) such notice is provided in a manner that is consistent with federal requirements under [42 CFR Part 2](#) and federal HIPAA requirements under [45 CFR Parts 160](#) and 164; and (2) the patient, if an adult, has not withheld consent for such notice or expressly requested that notification not be given. If a patient who is not incapacitated withholds consent for such notice, or expressly requests that notification not be given, the department shall require the patient's wishes to be respected unless the patient is a minor child or adolescent, in which case, the department shall require the minor's parent, legal guardian, designated next of kin, or other designated emergency contact to be notified, provided that such notification is not inconsistent with, and would not violate, federal requirements under [42 CFR Part 2](#) and federal HIPAA requirements under [45 CFR Parts 160](#) and 164.

(cf: P.L.2015, c.284, s.2)

3. This act shall take effect on the first day of the fourth month next following the date of enactment, except the Commissioner of Human Services may take any anticipatory administrative action in advance as the commissioner deems necessary for the implementation of this act.

## History

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SENATE, NO. 2964

STATE OF NEW JERSEY

217TH LEGISLATURE

INTRODUCED JANUARY 30, 2017

SPONSORED BY:

SENATOR JOSEPH F. VITALE

DISTRICT 19 (MIDDLESEX)

SENATOR DIANE B. ALLEN

DISTRICT 7 (BURLINGTON)

SYNOPSIS

PROHIBITS RESIDENTIAL SUBSTANCE USE DISORDER TREATMENT FACILITIES AND  
AFTERCARE FACILITIES FROM DENYING ADMISSION TO INDIVIDUALS RECEIVING MEDICATION  
ASSISTED TREATMENT FOR SUBSTANCE USE DISORDER.

CURRENT VERSION OF TEXT

AS INTRODUCED.

## Sponsor(s)

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Vitale

## Classification

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**Subject:** LEGISLATORS (92%); FDA APPROVALS (90%); HEALTH INSURANCE PORTABILITY &  
ACCOUNTABILITY ACT (82%); LEGISLATIVE BODIES (63%); DISEASES & DISORDERS (63%); RESIDENTIAL  
CARE (63%); SUBSTANCE ABUSE (63%); HEALTH CARE LAW (63%); RESIDENTIAL SUBSTANCE ABUSE  
FACILITIES (63%); ALCOHOL ABUSE & ADDICTION (62%); LEGISLATION (62%); APPROVALS (62%)

**Load-Date:** January 9, 2018

THE STATE OF NEW JERSEY BILL TEXT

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