

September 15, 2022

**ASSEMBLY BILL NO. 4107
(SECOND REPRINT)**

To the General Assembly:

Pursuant to Article V, Section I, Paragraph 14 of the New Jersey Constitution, I am returning Assembly Bill No. 4107 (Second Reprint) with my recommendations for reconsideration.

Assembly Bill No. 4107 (Second Reprint) seeks to modernize New Jersey's emergency medical service ("EMS") health care system, and particularly, the framework governing where and how paramedics provide advanced life support. The bill makes long overdue changes to the Emergency Medical Services Act, N.J.S.A. 26:2K-7 to -53, in four key areas that are designed to improve the paramedic profession and ensure that the most current treatment protocols are used to manage emergency response situations.

First, the bill aims to strengthen the paramedic workforce by creating new pathways to licensure and allowing more flexibility in the staffing structure of mobile intensive care units ("MICUs"). Second, the bill would improve the quality of emergency care by allowing paramedics to treat patients more promptly and in a wider range of settings. Third, the bill would fill gaps in our health care system by requiring the Department of Health ("DOH") to establish a "mobile integrated health" program through which paramedics and other health care professionals may perform advanced life support in increasingly mobile environments, including at-home care. Finally, the bill would put structures in place to streamline future policy decisions related to advanced life support, including establishing a State EMS Medical Director to collaborate with DOH on rulemaking, and enhancing the purview of the mobile intensive care advisory council to guide the DOH through its consideration of new and evolving treatment protocols, medications, and equipment.

I commend the bill's sponsors for their commitment to improving New Jersey's advanced life support system. In particular, the establishment of a mobile integrated healthcare program will lead to

better patient outcomes, alleviate burdens on our primary care infrastructure, and provide new job opportunities for licensed paramedics. Nevertheless, as we expand the settings in which mobile intensive care paramedics render care, it is critical that we continue to uphold New Jersey's superior training and licensing standards and equip DOH with the tools necessary to ensure the health and safety of emergency patients.

I am therefore recommending amendments to allow DOH to maintain State licensing standards as the benchmark by which an applicant for paramedic licensure is measured, and to conduct background checks on prospective candidates. Similarly, my recommendations clarify that the treatment protocols each agency may use must be reviewed and approved by the DOH to ensure patient safety. And, while I agree that the approved scope of practice for advanced life support should be informed by the National Highway Traffic Safety Administration's National EMS Scope of Practice Model for paramedics, I recommend maintaining some of the bill original text to allow the Commissioner of Health discretion to expand upon or modify that model.

To be clear, my recommended revisions maintain the bill's overarching goals of integrating mobile health care into our larger health care system and providing local EMS medical directors with the discretion to utilize and manage their paramedic staff. Importantly, my revisions leave in place language providing DOH with flexibility to approve candidates for paramedic licensure who hold qualifications with the National Registry of Emergency Medical Technicians and whose training and experience, including training and experience acquired from military service, meet or exceed State standards. Moreover, my recommended amendments maintain the expanded range of settings where paramedics will be authorized to provide care, which was proven invaluable to our healthcare system in the immediate response to the Coronavirus disease 2019 ("COVID-19") pandemic, as more and more paramedics were dispatched to COVID-19 treatment clinics, testing

centers, and vaccine sites. I again commend the sponsors of this bill for initiating these long overdue reforms to New Jersey's Emergency Medical Services Act. I am confident that the changes I am recommending will modernize our law to reflect current medical needs without jeopardizing DOH's authority to keep patients and professionals safe and, ultimately, ensure a high quality of emergency care.

Therefore, I herewith return Assembly Bill No. 4107 (Second Reprint) and recommend that it be amended as follows:

- Page 2, Section 1, Line 19: Before "procedures" insert "the use of"
- Page 2, Section 1, Line 21: Delete "scope of practice for paramedics" and insert "'National EMS Scope of Practice Model' for paramedics, except for any provisions of the National EMS Scope of Practice Model expressly excluded by the commissioner in rules or regulations"
- Page 2, Section 1, Line 23: After "(C.26:2K-12)" insert "or as otherwise authorized in rules or regulations promulgated by the commissioner"
- Page 3, Section 1, Line 8: After "those" insert "emergency"
- Page 3, Section 1, Line 10: Delete "emergency medical services personnel" and insert "mobile intensive care units to emergency patients"
- Page 3, Section 1, Line 10: After "during" delete ","
- Page 3, Section 1, Line 11: Delete "or in lieu of,"
- Page 3, Section 1, Line 11: Delete "medical" and insert "emergency treatment"
- Page 3, Section 2, Line 41: Delete "act on a regular basis" and insert "make a determination"
- Page 3, Section 2, Line 43: After "paramedic" insert "within 30 days of the receipt of a complete application and background check. Such determination may include a determination that the commissioner requires more time to adequately review the application. The commissioner shall license a candidate who provides satisfactory evidence of the successful completion of an educational program approved

by the commissioner for the training of mobile intensive care paramedics and who passes an examination in the provision of advanced life support services, which examination shall be approved by the commissioner"

Page 4, Section 2, Line 8:

Delete "certification" and insert "licensure"

Page 4, Section 2, Lines 9-10:

Delete "National Registry of Emergency Medical Technicians" and insert "commissioner"

Page 4, Section 2, Line 12:

After "Technicians" insert "if the commissioner determines that the candidate's training and experience exceed or are equivalent to the licensure standards established by the commissioner"

Page 4, Line 23:

Insert new sections:

"3. (New section)

a. The department shall not issue a license to a candidate as a mobile intensive care paramedic unless the commissioner first determines, consistent with the requirements of sections 3 through 5 of P.L. c. (C.) (pending before the Legislature as this bill), that no criminal history record information exists on file in the Federal Bureau of Investigation, Identification Division, or in the State Bureau of Identification in the Division of State Police, which would disqualify that person from being licensed. A mobile intensive care paramedic licensed by the department prior to the effective date of P.L. c. (pending before the Legislature as this bill) upon whom a criminal history record background check has not been conducted pursuant to this act, shall be required to undergo that criminal history record background check as a condition of that individual's initial relicensure following the effective date of P.L. c. (pending before the Legislature as this bill).

In addition, a follow-up criminal history record background check of federal records shall be conducted at least once every two years as a

condition of relicensure for every mobile intensive care paramedic.

b. A person shall be disqualified from licensure if that person's criminal history record background check reveals a record of conviction of any of the following crimes or offenses:

(1) In New Jersey, any crime or disorderly persons offense:

(a) involving danger to the person, meaning those crimes and disorderly persons offenses set forth in N.J.S.2C:11-1 et seq., N.J.S.2C:12-1 et seq., N.J.S.2C:13-1 et seq., N.J.S.2C:14-1 et seq., or N.J.S.2C:15-1 et seq.; or

(b) involving arson as set forth in N.J.S.2C:17-1 or causing or risking widespread injury or damage as set forth at N.J.S.2C:17-2; or

(c) involving forgery and fraudulent offenses as set forth in chapter 21 of Title 2C of the New Jersey Statutes; or

(d) against the family, children, or incompetents, meaning those crimes and disorderly persons offenses set forth in N.J.S.2C:24-1 et seq.; or

(e) involving theft as set forth in chapter 20 of Title 2C of the New Jersey Statutes; or

(f) involving any controlled dangerous substance or controlled substance analog as set forth in chapter 35 of Title 2C of the New Jersey Statutes; or

(g) that would qualify the person for registration pursuant to section 2 of P.L.1994, c.133 (C.2C:7-2).

(2) In any other state or jurisdiction, of any crime or disorderly persons offense involving conduct which, if committed in New Jersey, would constitute any of the crimes or disorderly persons offenses described in paragraph (1) of this subsection.

c. Except for a disqualification based on conviction for a crime enumerated in subparagraph (g) of paragraph (1) of subsection b. of this section or a crime in any other state or jurisdiction which, if committed in New Jersey, would constitute a crime enumerated in subparagraph (g) of paragraph (1) of subsection b. of this section, no person shall be disqualified from licensure on the basis of any conviction disclosed by a criminal history record background check performed pursuant to the requirements of this act if the person has affirmatively demonstrated to the commissioner clear and convincing evidence of the person's rehabilitation. In determining whether a person has affirmatively demonstrated rehabilitation, the following factors shall be considered:

(1) the nature and responsibility of the position which the convicted person would hold, has held or currently holds, as the case may be;

(2) the nature and seriousness of the offense;

(3) the circumstances under which the offense occurred;

(4) the date of the offense;

(5) the age of the person when the offense was committed;

(6) whether the offense was an isolated or repeated incident;

(7) any social conditions which may have contributed to the offense; and

(8) any evidence of rehabilitation, including good conduct in prison or in the community, counseling or psychiatric treatment received, acquisition of additional academic or vocational schooling, successful participation in correctional work-release programs, or the recommendation of those who have had the person under their supervision.

d. If a person subject to the provisions of sections 3 through 5 of P.L. c. (C.) (pending before the Legislature as this bill) refuses to consent to, or cooperate in, the securing of a criminal history record background check, the commissioner shall, as applicable:

(1) not issue a mobile intensive care paramedic license; or

(2) revoke the person's mobile intensive care paramedic license

4. (New section)

a. An applicant for licensure as a mobile intensive care paramedic who is required to undergo a criminal history record background check pursuant to P.L. c. (C.) (pending before the Legislature as this bill) shall submit to the commissioner that individual's name, address, and fingerprints in accordance with the standards established by the New Jersey State Police and the Federal Bureau of Investigation for civil applicants. The commissioner is authorized to exchange fingerprint data with and receive criminal history record information from the Federal Bureau of Investigation and the Division of State Police for use in making the determinations required by P.L. c. (C.) (pending before the Legislature as this bill).

b. Upon receipt of the criminal history record information for a person from the Federal Bureau of Investigation or the Division of State Police, the commissioner shall immediately notify, in writing, the applicant of the results of the criminal history record background check. If the person is disqualified, the conviction or convictions which constitute the basis for the disqualification shall be identified in the notice to the person, but shall not be identified to any other person.

c. The person who is the subject of the background check shall have 30 days from the date of the written notice of disqualification to petition the commissioner for a hearing on the accuracy of the person's criminal history record information or to establish the person's rehabilitation under subsection c. of section 3 of P.L. c. (C.) (pending before the Legislature as this bill). Upon the issuance of a final decision following a petition to the commissioner pursuant to this subsection, the commissioner shall notify the person as to whether the person remains disqualified from licensure.

5. (New section)

The department may require a candidate for a mobile intensive care paramedic license to bear the costs of the criminal history record background check as may be deemed necessary by the department."

- Page 4, Section 3, Line 24: Delete "3." and insert "6."
- Page 4, Section 4, Line 32: Delete "4." and insert "7."
- Page 4, Section 4, Line 36: Delete "a standing order" and insert "protocols which have been approved pursuant to paragraph 3 of subsection a. of section 8 of this act, any standing orders the department may issue"
- Page 5, Section 4, Line 8: After "health" insert "as determined by the commissioner and"
- Page 5, Section 4, Lines 13-14: Delete "agency EMS medical director overseeing the program" and insert "commissioner."
- Page 5, Section 5, Line 30: Delete "5." and insert "8."
- Page 6, Section 5, Line 3: After "practice" insert ", as determined by the commissioner and"
- Page 6, Section 5, Line 26: After "by" insert "this act and"
- Page 6, Section 5, Line 29: After "clinical practice." insert "Such advanced life support protocols shall be submitted to the commissioner for approval. The commissioner may approve or deny advanced life support protocols submitted by an agency EMS medical

director or may approve such protocols subject to amendments that the commissioner deems to be necessary."

Page 6, Section 5, Line 33:

After "commissioner" insert ", which shall be acted upon by the commissioner within 90 days"

Page 6, Section 5, Line 34:

Delete "A hospital with a mobile intensive care unit may authorize a"

Page 6, Section 5, Lines 35-46:

Delete in their entirety and insert "The commissioner with the approval of the State Board of Medical Examiners shall establish education and competency requirements which a board-certified or board-eligible emergency medicine physician, advanced practice nurse, or physician assistant who is employed by a hospital with a mobile intensive care unit shall be required to meet in order to obtain authorization from the department to deliver care within the respective scope of practice of the board-certified or board-eligible emergency medicine physician, advanced practice nurse, or physician assistant, as the case may be, in a pre-hospital setting or an interfacility setting. An authorized board-certified or board-eligible emergency medicine physician, advanced practice nurse, or physician assistant may deliver such care if and to the extent approved by the agency EMS medical director."

Page 7, Section 6, Line 16:

Delete "6." and insert "9."

Page 7, Section 7, Line 28:

Delete "7." and insert "10."

Page 7, Section 8, Line 44:

Delete "8." and insert "11."

Page 8, Section 8, Line 14:

Delete "The State Emergency Medical Services Medical Director"

Page 8, Section 8, Line 15:

Delete in its entirety

Page 8, Section 8, Line 27:

After "on the" insert "National Highway Traffic Safety Administration's"

Page 8, Section 8, Line 27:

Delete "and" and insert ",,"

Page 8, Section 8, Line 28:

After "council" insert ", and standards established by the commissioner"

Page 8, Section 8, Lines 37-38: Delete "be chaired by the State Emergency Medical Services Medical Director" and insert "annually select a chairperson and a vice-chair from among its members. The chairperson shall coordinate the activities of the advisory council"

Page 8, Section 8, Line 41: After "a" insert "chair and"

Page 8, Section 8, Line 42: Delete "State Emergency Medical Services Medical Director" and insert "chair"

Page 8, Section 8, Line 44: Delete "State Emergency Medical Services Medical Director" and insert "chair"

Page 9, Section 9, Line 6: Delete "9." and insert "12."

Page 9, Section 10, Line 27: Delete "10." and insert "13."

Page 9, Section 11, Line 39: Delete "11." and insert "14."

[seal]

Respectfully,

/s/ Philip D. Murphy

Governor

Attest:

/s/ Parimal Garg

Chief Counsel to the Governor