

SENATE, No. 2768

STATE OF NEW JERSEY 220th LEGISLATURE

INTRODUCED MAY 26, 2022

Sponsored by:

Senator JOSEPH F. VITALE

District 19 (Middlesex)

SYNOPSIS

Makes various changes concerning regulation of emergency medical services; establishes new State Emergency Medical Services Medical Director in DOH.

CURRENT VERSION OF TEXT

As introduced.



1 AN ACT concerning emergency medical services and amending
2 P.L.1984, c.146.

3
4 **BE IT ENACTED** by the Senate and General Assembly of the State
5 of New Jersey:

6
7 1. Section 1 of P.L.1984, c.146 (C.26:2K-7) is amended to read
8 as follows:

9 1. As used in this act:

10 a. "Advanced life support" means an advanced level of **[pre-**
11 hospital, inter-hospital, and] emergency **[service]** medical care,
12 including specialty care transport, which includes basic life support
13 functions**],** cardiac monitoring, cardiac defibrillation, telemetered
14 electrocardiography, administration of anti-arrhythmic agents,
15 intravenous therapy, administration of specific medications, drugs
16 and solutions, use of adjunctive ventilation devices, trauma care and
17 other techniques and procedures authorized in writing by the
18 commissioner**]** and procedures, medications, and equipment
19 established by the National Highway Traffic Safety
20 Administration's scope of practice for paramedics, and any other
21 such procedures, medications, and equipment as set forth in Section
22 6 of P.L.1984, c.146 (C.26:2K-12);

23 b. "Board of Medical Examiners" means the State Board of
24 Medical Examiners;

25 c. "Board of Nursing" means the New Jersey Board of Nursing;

26 d. "Commissioner" means the Commissioner of the State
27 Department of Health;

28 e. "Department" means the State Department of Health;

29 f. "Emergency **[service]** department" means a program in a
30 hospital staffed 24 hours a day by a licensed physician trained in
31 emergency medicine;

32 g. **["Inter-hospital]** "Specialty care transport" means **[those**
33 emergency medical**]** services that are above basic life support
34 services rendered **[by mobile intensive care units]** to **[emergency]**
35 patients before and during transportation between **[emergency**
36 treatment**]** licensed facilities, during retrieval from those facilities,
37 and upon arrival within those facilities;

38 h. "Mobile intensive care paramedic" means a person trained in
39 advanced life support services and **[certified]** licensed by the
40 commissioner to render advanced life support services as part of a
41 mobile intensive care unit or as otherwise provided in section 4 of
42 P.L.1984, c.146 (C.26:2K-10);

43 i. "Mobile intensive care unit" means a specialized emergency
44 medical service **[vehicle]** unit that is staffed [by mobile intensive
45 care paramedics or registered professional nurses trained in
46 advanced life support nursing] in accordance with paragraph (2) of

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 thus is new matter.

1 subsection a. of section 6 of P.L.1984, c.146 (C.26:2K-12) and
2 operated for the provision of advanced life support services under
3 the direction of an authorized hospital;

4 j. "Pre-hospital care" means those **【emergency】** medical
5 services rendered by **【mobile intensive care units to emergency**
6 **patients】** emergency medical services personnel before and during,
7 or in lieu of, transportation to **【emergency treatment】** medical
8 facilities, and upon arrival within those facilities.

9 k. "Volunteer paramedic unit" means an operational subunit
10 within a mobile intensive care unit that is exclusively staffed by at
11 least two volunteer paramedics with access to any vehicle,
12 including a personal vehicle.

13 l. "Agency EMS medical director" means a physician licensed
14 in this State who is certified in emergency medicine or emergency
15 medical services, or both, and is responsible for the medical
16 oversight of a hospital mobile intensive care program.

17 m. "Mobile integrated health" means the provision of non-
18 emergency health care services by a paramedic, registered nurse,
19 advanced practice nurse, or physician assistant under a mobile
20 intensive care program using patient-centered, mobile resources in a
21 prehospital care environment through an approved mobile intensive
22 care hospital.

23 (cf: P.L.2021, c.480, s.1)

24
25 2. Section 2 of P.L.1984, c.146 (C.26:2K-8) is amended to read
26 as follows:

27 2. a. A mobile intensive care paramedic shall obtain
28 **【certification】** licensure from the commissioner to **【staff a mobile**
29 **intensive care unit】** provide advanced life support and shall make
30 application therefor on forms prescribed by the commissioner.

31 b. The commissioner with the approval of the **【board of**
32 **medical examiners】** State Board of Medical Examiners shall
33 establish written standards which a mobile intensive care paramedic
34 shall meet in order to obtain **【certification】** licensure. The
35 commissioner shall act on a regular basis upon applications of
36 candidates for **【certification】** licensure as a mobile intensive care
37 paramedic. **【The commissioner shall certify a candidate who**
38 **provides satisfactory evidence of the successful completion of an**
39 **educational program approved by the commissioner for the training**
40 **of mobile intensive care paramedics and who passes an examination**
41 **in the provision of advance life support services, which examination**
42 **shall be conducted by the department at least twice a year.】** The
43 commissioner shall **【certify】** license a candidate for a mobile
44 intensive care paramedic **【certification】** who has equivalent
45 military training or experience in any branch of the active duty or
46 reserve component of the Armed Forces of the United States or the
47 National Guard of any state if the commissioner determines that the

1 candidate's military training and experience exceed or are
2 equivalent to the certification standards established by the
3 **【commissioner】** National Registry of Emergency Medical
4 Technicians. The commissioner shall license a candidate for a
5 mobile intensive care paramedic who is registered as a paramedic
6 with the National Registry of Emergency Medical Technicians.

7 c. The department shall maintain a register of all applicants for
8 **【certification】** licensure hereunder, which register shall include but
9 not be limited to:

10 (1) The name and residence of the applicant;

11 (2) The date of the application;

12 (3) Information as to whether the applicant was rejected or
13 **【certified】** licensed and the date of that action.

14 The department shall annually compile a list of mobile intensive
15 care paramedics. This list shall be available to the public.

16 (cf: P.L.2013, c.101, s.2)

17
18 3. Section 3 of P.L.1984, c.146 (C.26:2K-9) is amended to read
19 as follows:

20 3. The commissioner after notice and hearing may revoke the
21 **【certification】** license of a mobile intensive care paramedic for
22 violation of any provision of this act or regulation promulgated
23 hereunder.

24 (cf: P.L.1984, c.146, s.3)

25
26 4. Section 4 of P.L.1984, c.146 (C.26:2K-10) is amended to read
27 as follows:

28 4. a. A mobile intensive care paramedic may perform
29 advanced life support services, provided that the paramedic is
30 following a standing order, or if the paramedic maintains direct
31 voice communication with and is taking orders from a licensed
32 physician or physician directed registered professional nurse, both
33 of whom are affiliated with a mobile intensive care hospital which
34 is approved by the commissioner to provide advanced life support
35 services. **【A telemetered electrocardiogram shall be monitored**
36 **when deemed appropriate by the licensed physician or when**
37 **required by written rules and regulations established by the mobile**
38 **intensive care hospital and approved by the commissioner.】**

39 b. (1) A mobile intensive care paramedic may deliver advanced
40 life support services, or any other services within the approved
41 scope of practice for mobile intensive care paramedics, in a pre-
42 hospital setting, in a mobile integrated health care setting, health
43 care specialty setting, or any other hospital-controlled setting,
44 through an approved mobile intensive care hospital, as determined
45 by the commissioner and as authorized by the agency EMS medical
46 director. A mobile intensive care paramedic shall be permitted to
47 provide advanced life support services when operating outside of a
48 mobile intensive care unit in situations directly related to EMS first

1 response or mobile integrated health as authorized by the mobile
2 intensive care paramedic's agency EMS medical director. A single
3 mobile intensive care paramedic shall not be acknowledged as a
4 mobile intensive care unit.

5 (2) The authorized services provided under a mobile integrated
6 health program shall be determined by the agency EMS medical
7 director overseeing the program, and may include, but need not be
8 limited to: providing paramedicine care, chronic disease
9 management, preventive care, and post-discharge follow-up visits;
10 or providing referrals and transportation assistance to appropriate
11 care and services to patients requiring health care services who do
12 not require hospital-based treatment.

13 c. Nothing in this section shall be construed to alter the scope
14 of practice of any licensed health care professional under Title 45 of
15 the Revised Statutes or the scope or authority of any agency, board,
16 department, or other entity in this State that is responsible for
17 licensing health care workers.

18 (cf: P.L.2021, c.480, s.2)

19
20 5. Section 6 of P.L.1984, c.146 (C.26:2K-12) is amended to read
21 as follows:

22 6. a. (1) Only a hospital exclusively authorized to develop and
23 maintain advanced life support services in the municipality in which
24 the trauma center is located pursuant to section 1 of P.L.2015, c.70
25 (C.26:2K-12.1), or a hospital authorized by the commissioner with
26 an accredited emergency [service] department may develop and
27 maintain a mobile intensive care unit, and provide advanced life
28 support services utilizing licensed physicians, registered
29 professional nurses trained in advanced life support nursing, and
30 mobile intensive care paramedics.

31 (2) A mobile intensive care unit, when in service, shall be staffed
32 by a minimum of two persons, which two persons may be two mobile
33 intensive care paramedics, two registered professional nurses trained
34 in advanced life support nursing, one mobile intensive care paramedic
35 and one registered professional nurse trained in advanced life support
36 nursing, or one emergency medical technician and one mobile
37 intensive care paramedic or registered professional nurse trained in
38 advanced life support nursing. Any individual providing advanced life
39 support as provided in this paragraph shall be authorized to render care
40 within that individual's scope of practice based on the agency EMS
41 medical director's determination of competency. In the case of a
42 mobile intensive care unit staffed by one emergency medical
43 technician and one mobile intensive care paramedic or registered
44 professional nurse trained in advanced life support nursing treating a
45 patient in need of advanced life support services, the mobile intensive
46 care paramedic or registered professional nurse trained in advanced
47 life support nursing shall provide primary patient care. A mobile
48 intensive care unit shall not be staffed by an emergency medical

1 technician under this paragraph unless approved by the agency EMS
2 medical director, based on the EMS medical director's determination
3 of the competency of the mobile intensive care paramedic or registered
4 professional nurse trained in advanced life support nursing and the
5 emergency medical technician to work together to provide mobile
6 intensive care services.

7 (3) Agency EMS medical directors shall have the authority to
8 establish advanced life support protocols, within the scope of
9 practice for advanced life support providers established by the
10 commissioner, which protocols shall include, but shall not be
11 limited to, protocols concerning medications, equipment,
12 procedures, and clinical practice. Aspects of clinical practice that
13 exceed the scope established by commissioner shall be submitted by
14 an agency EMS medical director to the mobile intensive care
15 advisory council for review and recommendation to the
16 commissioner.

17 (4) A hospital with a mobile intensive care unit may authorize a
18 board-certified or board-eligible emergency medicine physician,
19 advanced practice nurse, or physician assistant, who has
20 successfully completed an in-house practical competency-based
21 EMS orientation and training guided by respective relevant
22 professional standards and approved by the agency EMS medical
23 director, and is employed by the hospital to deliver care within the
24 approved scope of practice of the board certified or board eligible
25 emergency medicine physician, advanced practice nurse, or
26 physician assistant in a prehospital setting or an interfacility setting,
27 as determined by the agency EMS medical director.

28 b. A hospital authorized by the commissioner pursuant to
29 subsection a. of this section shall provide mobile intensive care unit
30 services on a seven-day-a-week basis.

31 c. The commissioner shall establish, in writing, criteria which a
32 hospital shall meet in order to qualify for the authorization.

33 d. The commissioner may withdraw his authorization if the
34 hospital or unit violates any provision of this act or rules or
35 regulations promulgated pursuant thereto.

36 e. Nothing in this section shall be construed to alter the scope
37 of practice of any licensed health care professional under Title 45 of
38 the Revised Statutes or the scope or authority of any agency, board,
39 department, or other entity in this State that is responsible for
40 licensing health care workers.

41 (cf: P.L.1985, c.351, s.2)

42
43 6. Section 7 of P.L.1984, c.146 (C.26:2K-13) is amended to read
44 as follows:

45 7. a. No person may advertise or disseminate information
46 to the public that the person provides advanced life support services
47 by a mobile intensive care unit unless the person is authorized to do
48 so pursuant to section 6 of this act.

1 b. No person may impersonate or refer to himself or herself as
2 a mobile intensive care paramedic unless he or she is **【certified】**
3 licensed or approved therefor, as appropriate.

4 (cf: P.L.1984, c.146, s.7)

5
6 7. Section 8 of P.L.1984, c.146 (C.26:2K-14) is amended to read
7 as follows:

8 8. No emergency medical technician, mobile intensive care
9 paramedic, licensed physician, hospital or its board of trustees,
10 officers and members of the medical staff, **【nurses】** registered
11 nurse, advanced practice nurse, physician assistant, or other
12 employees of the hospital, first aid, **【ambulance】** emergency
13 medical service or rescue squad, licensed emergency medical
14 service agency, or officers and members of a first aid, emergency
15 medical service or rescue squad shall be liable for any civil
16 damages as the result of an act or the omission of an act committed
17 while in training for or in the rendering of basic and advanced life
18 support services in good faith and in accordance with this act.

19 (cf: P.L.1984, c.146, s.8)

20
21 8. Section 10 of P.L.1984, c.146 (C.26:2K-16) is amended to
22 read as follows:

23 10. a (1) The Commissioner of Health shall appoint a State
24 Emergency Medical Services Medical Director to the Office of
25 Emergency Medical Services. The State Emergency Medical
26 Services Medical Director shall be a licensed physician in this State
27 and board certified in emergency medicine with leadership
28 experience in the medical oversight of emergency medical services,
29 specifically in advanced life support, basic life support, critical care
30 transport, and emergency medical services dispatching. In selecting
31 the State Emergency Medical Services Medical Director, the
32 Commissioner of Health shall give preference to a candidate who is
33 board certified in emergency medical services. The State
34 Emergency Medical Services Medical Director shall not be
35 permitted to be employed as an agency EMS medical director while
36 serving as State Emergency Medical Services Medical Director.

37 (2) The State Emergency Medical Services Medical Director
38 shall be coequal with the Director of Emergency Medical Services.
39 The State Emergency Medical Services Medical Director shall have
40 primary responsibility for the oversight, regulation, and discipline
41 related to clinical issues pertaining to the provision of emergency
42 medical services in New Jersey, and the Director of Emergency
43 Medical Services shall have primary responsibility for the oversight
44 of non-clinical issues related to the provision of emergency medical
45 services in New Jersey. The State Emergency Medical Services
46 Medical Director shall additionally be responsible for aiding the
47 commissioner in promulgating rules and regulations establishing the
48 scope of practice for providers of emergency medical services.

1 including new standards for basic and advanced life support based
2 on the National EMS Scope of Practice Model and the
3 recommendations of the mobile intensive care advisory council.

4 b. The commissioner shall establish a State mobile intensive
5 care advisory council, which shall: advise the department on all
6 matters of **mobile intensive care services** advanced life support,
7 the Emergency Medical Service Helicopter Response Program and
8 emergency medical transportation; annually review advanced life
9 support scope of practice; and provide recommendations directly to
10 the commissioner for clinical updates. The council shall **select a**
11 chairman annually to chair the meetings and coordinate the
12 activities of the advisory council **be chaired by the State**
13 **Emergency Medical Services Medical Director.** Within 60 days
14 following the effective date of this act, the council shall create new
15 by-laws, and select a vice-chair from among its members. In the
16 event that the State Emergency Medical Services Medical Director
17 position is vacant, the vice-chair shall act as chair of the council
18 until the State Emergency Medical Services Medical Director
19 position is no longer vacant. The **chairman** chair shall appoint
20 subcommittees to review and recommend policy on subjects
21 including, but not limited to, advanced life support training
22 programs, advanced life support patient care equipment, biomedical
23 and telecommunications equipment and procedures, treatment
24 protocols, and helicopter equipment and procedures, as well as
25 other medical matters.

26 (cf: P.L.1986, c.106, s.5)

27
28 9. Section 11 of P.L.1984, c.146 (C.26:2K-17) is amended to
29 read as follows:

30 11. The commissioner shall promulgate such rules and
31 regulations in accordance with the "Administrative Procedure Act,"
32 P.L.1968, c.410 (C.52:14B-1 et seq.) as **he** the commissioner
33 deems necessary to effectuate the purposes of this act, and the
34 **board of medical examiners** State Board of Medical Examiners
35 and the **board of nursing** New Jersey Board of Nursing shall
36 promulgate such rules and regulations as they deem necessary to
37 carry out their functions under this act.

38 (cf: P.L.1984, c.146, s.11)

39
40 10. This act shall take effect immediately.

41 42 43 STATEMENT

44
45 This bill makes various changes to the regulation of emergency
46 medical services and establishes the position of State Emergency
47 Medical Services Medical Director in the Office of Emergency

1 Medical Services in the Department of Health (DOH).

2 Under the bill, the Commissioner of Health (commissioner) is to
3 appoint a State Emergency Medical Services Medical Director to
4 the Office of Emergency Medical Services. The State Emergency
5 Medical Services Medical Director is to be a licensed physician in
6 this State and board certified in emergency medicine with
7 leadership experience in the medical oversight of emergency
8 medical services, specifically in advanced life support, basic life
9 support, critical care transport, and emergency medical services
10 dispatching. In selecting the State Emergency Medical Services
11 Medical Director, the commissioner is to give preference to a
12 candidate who is board certified in emergency medical services.
13 The State Emergency Medical Services Medical Director is not to
14 be permitted to be employed as an agency EMS medical director
15 while serving as State Emergency Medical Services Medical
16 Director. The State Emergency Medical Services Medical Director
17 is to be coequal with the Director of Emergency Medical Services.
18 The State Emergency Medical Services Medical Director is to have
19 primary responsibility for the oversight, regulation, and discipline
20 related to clinical issues pertaining to the provision of emergency
21 medical services in New Jersey, and the Director of Emergency
22 Medical Services is to have primary responsibility for the oversight
23 of non-clinical issues related to the provision of emergency medical
24 services in New Jersey. The State Emergency Medical Services
25 Medical Director is to additionally be responsible for aiding the
26 commissioner in promulgating rules and regulations establishing the
27 scope of practice for providers of emergency medical services,
28 including new standards for basic and advanced life support based
29 on the National EMS Scope of Practice Model and the
30 recommendations of the mobile intensive care advisory council.

31 The bill provides that the mobile intensive care advisory council,
32 which is established under current law, is to: (1) advise the
33 Department of Health on all matters of advanced life support, (2)
34 directly provide recommendations to the commissioner for clinical
35 updates; (3) annually review advanced life support scope of
36 practice; (4) be chaired by the State Emergency Medical Services
37 Medical Director; (5) establish new by-laws; and (6) select a vice-
38 chair from among its members.

39 The bill makes various amendments and additions to statutory
40 definitions within Section 1 of P.L.1984, c.146 (C.26:2K-7).

41 The bill amends section 2 of P.L.1984, c.146 (C.26:2K-8) to
42 provide that a mobile intensive care paramedic is to obtain
43 licensure, as opposed to certification, as is provided under current
44 law, from the commissioner to provide advanced life support. In
45 addition, the amendments remove a provision regarding the
46 commissioner's certification of a candidate who provides
47 satisfactory evidence of the successful completion of an educational
48 program approved by the commissioner for the training of mobile

1 intensive care paramedics and who passes an examination in the
2 provision of advance life support services. The amendments
3 provide that the commissioner is to approve licensure for a
4 candidate for a mobile intensive care paramedic who has equivalent
5 military training or experience in any branch of the active duty or
6 reserve component of the Armed Forces of the United States or the
7 National Guard of any state if the commissioner determines that the
8 candidate's military training and experience exceed or are
9 equivalent to the licensure standards established by the National
10 Registry of Emergency Medical Technicians. The commissioner is
11 to approve the licensure of a candidate for a mobile intensive care
12 paramedic who is registered as a paramedic with the National
13 Registry of Emergency Medical Technicians.

14 The bill amends section 4 of P.L.1984, c.146 (C.26:2K-10) to
15 remove a section that provides that a telemetered electrocardiogram
16 is to be monitored when deemed appropriate by the licensed
17 physician or when required by written rules and regulations
18 established by the mobile intensive care hospital and approved by
19 the commissioner. The amendments provide that a mobile intensive
20 care paramedic may deliver advanced life support services, or any
21 other services within the approved scope of practice for mobile
22 intensive care paramedics, in a pre-hospital setting, in a mobile
23 integrated health care setting, health care specialty setting, or any
24 other hospital-controlled setting, through an approved mobile
25 intensive care hospital, as determined by the commissioner and as
26 authorized by the agency EMS medical director. A mobile
27 intensive care paramedic is to be permitted to provide advanced life
28 support services when operating outside of a mobile intensive care
29 unit in situations directly related to EMS first response or mobile
30 integrated health as authorized by the mobile intensive care
31 paramedic's agency EMS medical director. A single mobile
32 intensive care paramedic is not to be acknowledged as a mobile
33 intensive care unit. The authorized services provided under a
34 mobile integrated health program are to be determined by the
35 agency EMS medical director overseeing the program, and may
36 include, but need not be limited to: providing paramedicine care,
37 chronic disease management, preventive care, and post-discharge
38 follow-up visits; or providing referrals and transportation assistance
39 to appropriate care and services to patients requiring health care
40 services who do not require hospital-based treatment.

41 The bill amends section 6 of P.L.1984, c.146 (C.26:2K-12) to
42 provide that a mobile intensive care unit, when in service, is to be
43 staffed by a minimum of two persons, which two persons may be two
44 mobile intensive care paramedics, two registered professional nurses
45 trained in advanced life support nursing, one mobile intensive care
46 paramedic and one registered professional nurse trained in advanced
47 life support nursing, or one emergency medical technician and one
48 mobile intensive care paramedic or registered professional nurse

1 trained in advanced life support nursing. Any individual providing
2 advanced life support as provided in the bill is to be authorized to
3 render care within that individual's scope of practice based on the
4 agency EMS medical director's determination of competency. In the
5 case of a mobile intensive care unit staffed by one emergency medical
6 technician and one mobile intensive care paramedic or registered
7 professional nurse trained in advanced life support nursing treating a
8 patient in need of advanced life support services, the mobile intensive
9 care paramedic or registered professional nurse trained in advanced
10 life support nursing is to provide primary patient care. A mobile
11 intensive care unit is not to be staffed by an emergency medical
12 technician, as provided in the bill, unless approved by the agency EMS
13 medical director, based on the EMS medical director's determination
14 of the competency of the mobile intensive care paramedic or registered
15 professional nurse trained in advanced life support nursing and the
16 emergency medical technician to work together to provide mobile
17 intensive care services. Agency EMS medical directors are to have
18 the authority to establish advanced life support protocols, within the
19 scope of practice for advanced life support providers established by
20 the commissioner, which protocols are to include, but not be limited
21 to, protocols concerning medications, equipment, procedures, and
22 clinical practice. Aspects of clinical practice that exceed the scope
23 established by commissioner are to be submitted by an agency EMS
24 medical director to the mobile intensive care advisory council for
25 review and recommendation to the commissioner. A hospital with a
26 mobile intensive care unit may authorize a board-certified or board-
27 eligible emergency medicine physician, advanced practice nurse, or
28 physician assistant, who has successfully completed an in-house
29 practical competency-based EMS orientation and training guided by
30 respective relevant professional standards and approved by the
31 agency EMS medical director, and is employed by the hospital to
32 deliver care within the approved scope of practice of the board
33 certified or board eligible emergency medicine physician, advanced
34 practice nurse, or physician assistant in a prehospital setting or an
35 interfacility setting, as determined by the agency EMS medical
36 director.

37 The bill amends section 8 of P.L.1984, c.146 (C.26:2K-14) to
38 provide that no emergency medical technician, registered nurse,
39 advanced practice nurse, physician assistant, or other employees of
40 the hospital, first aid, emergency medical service or rescue squad,
41 licensed emergency medical service agency, or officers and
42 members of a first aid, emergency medical service or rescue squad
43 are to be liable for any civil damages as the result of an act or the
44 omission of an act committed while in training for or in the
45 rendering of basic and advanced life support services in good faith.

46 Finally, nothing in the bill is to be construed to alter the scope of

1 practice of any licensed health care professional under Title 45 of
2 the Revised Statutes or the scope or authority of any agency, board,
3 department, or other entity in this State that is responsible for
4 licensing health care workers.