45:9-27.13a & 45:9-27.18a et al LEGISLATIVE HISTORY CHECKLIST

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LAWS OF: 2015 **CHAPTER:** 224 NJSA: 45:9-27.13a & 45:9-27.18a et al (Revises requirements for licensure and creates physician-delegated scope of practice for physician assistants.) BILL NO: S1184 (Substituted for A1950 (2R)) **SPONSOR(S)** Vitale, Joseph F., and others DATE INTRODUCED: January 30, 2014 COMMITTEE: ASSEMBLY: ---SENATE: Health, Human Services and Senior Citizens AMENDED DURING PASSAGE: Yes DATE OF PASSAGE: ASSEMBLY: 1/11/2016 SENATE: 1/11/2016 DATE OF APPROVAL: January 19, 2016 FOLLOWING ARE ATTACHED IF AVAILABLE: FINAL TEXT OF BILL (Second Reprint enacted) Yes S1184 **INTRODUCED BILL:** (Includes sponsor(s) statement) Yes COMMITTEE STATEMENT: ASSEMBLY: No SENATE: Yes (Audio archived recordings of the committee meetings, corresponding to the date of the committee statement, may possibly be found at www.njleg.state.nj.us)

	Yes	
	No	
INTRODUCED BILL: (Includes sponsor(s) statement)		
SSEMBLY:	Yes	
ENATE:	No	
	SEMBLY:	

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FLOOR AMENDMENT STATEMENT:	Yes

LEGISLATIVE FISCAL ESTIMATE: No

VETO MESSAGE:	No
GOVERNOR'S PRESS RELEASE ON SIGNING:	Yes
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NEWSPAPER ARTICLES:	No

end

\$11 C.45:9-27.13a
\$12 C.45:9-27.18a
\$15 - Repealer
\$16 - Note

P.L.2015, CHAPTER 224, approved January 19, 2016 Senate, No. 1184 (Second Reprint)

AN ACT concerning the licensure and scope of practice of physician 1 2 assistants, amending and supplementing P.L.1991, c.378, amending P.L.1983, c.308 and P.L.1988, c.125, and repealing 3 4 various parts of the statutory law. 5 6 BE IT ENACTED by the Senate and General Assembly of the State 7 of New Jersey: 8 9 1. Section 2 of P.L.1991, c.378 (C.45:9-27.11) is amended to 10 read as follows: 11 2. As used in this act: 12 "[Approved] <u>Accredited</u> program" means an education program 13 for physician assistants which is [approved] accredited by the [Committee on Allied Health Education and Accreditation] 14 15 Accreditation Review Commission on Education for the Physician Assistant or its predecessor or successor agency. 16 17 "Board" means the State Board of Medical Examiners created 18 pursuant to R.S.45:9-1. 19 "Committee" means the Physician Assistant Advisory Committee established pursuant to section 11 of [this act] P.L.1991, c.378 20 21 (C.45:9-27.20). 22 "Director" means the Director of the Division of Consumer 23 Affairs. 24 "Health care facility" means a health care facility as defined in 25 section 2 of P.L.1971, c.136 (C.26:2H-2). 26 "Institution" means any of the charitable, hospital, relief and training institutions, noninstitutional agencies, and correctional 27 28 institutions enumerated in R.S.30:1-7. 29 "Physician assistant" means a [person] health professional who 30 meets the qualifications under P.L.1991, c.378 (C.45:9-27.10 et seq.) and holds a current, valid license issued pursuant to section 4 31 32 of [this act] P.L.1991, c.378 (C.45:9-27.13) ¹[and practices] medicine under the supervision of a physician $]^1$. 33 34 "Physician" means a person licensed to practice medicine and 35 surgery pursuant to chapter 9 of Title 45 of the Revised Statutes. 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.

Matter enclosed in superscript numerals has been adopted as follows: ¹Senate SHH committee amendments adopted December 8, 2014.

²Assembly floor amendments adopted December 17, 2015.

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1 "Veterans' home" means the New Jersey Veterans' Memorial 2 Home - Menlo Park, the New Jersey Veterans' Memorial Home -Vineland, and the New Jersey Veterans' Memorial Home -3 4 Paramus. 5 (cf: P.L.1992, c.102, s.1) 6 7 2. Section 4 of P.L.1991, c.378 (C.45:9-27.13) is amended to 8 read as follows: 9 4. a. The board shall issue a license as a physician assistant to 10 an applicant who has fulfilled the following requirements: (1) Is at least 18 years of age; 11 12 (2) Is of good moral character; 13 (3) Has successfully completed an [approved] accredited 14 program; and 15 (4) Has passed the national certifying examination administered by the National Commission on Certification of Physician 16 17 Assistants, or its successor. 18 b. In addition to the requirements of subsection a. of this 19 section, an applicant for renewal of a license as a physician 20 assistant shall: 21 (1) Execute and submit a sworn statement made on a form 22 provided by the board that neither the license for which renewal is 23 sought nor any similar license or other authority issued by another jurisdiction has been revoked [,] or suspended [or not renewed]; 24 25 and 26 (2) Present satisfactory evidence that any continuing education 27 requirements have been completed as required by [this act] 28 P.L.1991, c.378 (C.45:9-27.10 et seq.). 29 The board, in consultation with the committee, may accept, c. 30 in lieu of the [examination required by paragraph (4)] requirements 31 of subsection a. of this section, proof that an applicant for licensure 32 holds a current license in a state which has standards substantially 33 equivalent to those of this State. 34 d. [The board shall issue a temporary license to an applicant 35 who meets the requirements of paragraphs (1), (2) and (3) of 36 subsection a. of this section and who is either waiting to take the 37 first scheduled examination following completion of an approved 38 program or is awaiting the results of the examination. The 39 temporary license shall expire upon the applicant's receipt of 40 notification of failure to pass the examination.] (Deleted by 41 amendment, P.L. , c.)(pending before the Legislature as this 42 bill) 43 e. A physician assistant who notifies the board in writing on 44 forms prescribed by the board may elect to place the physician 45 assistant's license on inactive status. A physician assistant with an 46 inactive license shall not be subject to the payment of renewal fees and shall not practice as a physician assistant. A licensee who 47 48 engages in practice while the physician assistant's license is lapsed

1 or on inactive status shall be deemed to have engaged in 2 professional misconduct in violation of subsection e. of section 8 of 3 P.L.1978, c.73 (C.45:1-21) and shall be subject to disciplinary 4 action by the committee pursuant to P.L.1978, c.73 (C.45:1-14 et 5 seq.). A physician assistant requesting restoration from an inactive 6 status shall be required to pay the current renewal fee and shall be 7 required to meet the criteria for renewal as specified by the board. 8 (cf: P.L.1993, c.337, s.1) 9 10 3. Section 6 of P.L.1991, c.378 (C.45:9-27.15) is amended to 11 read as follows: 12 6. a. A physician assistant may practice in all medical care 13 settings, including, but not limited to, a physician's office, a health 14 care facility, an institution, a veterans' home, or a private home, 15 provided that: 16 (1) the physician assistant [is] ¹[practices medicine] performs medical services within the physician assistant's education, 17 18 training, and experience¹ under the [direct] supervision of a physician pursuant to section 9 of [this act] P.L.1991, c.378 19 20 (C.45:9-27.18); (2) the practice of the physician assistant is limited to those 21 procedures ¹enumerated under section 7 of P.L.1991, c.378 (C.45:9-22 27.16), and any other procedures¹ that are delegated to the 23 24 physician assistant by the supervising physician, as authorized under ¹subsection d. of¹ section 7 of [this act] P.L.1991, c.378 25 26 (C.45:9-27.16); 27 (3) [an appropriate notice of employment has been filed with 28 the board pursuant to subsection b. of section 5 of this act;] (Deleted by amendment, P.L. , c.)(pending before the 29 30 Legislature as this bill) (4) the supervising physician or physician assistant advises the 31 32 patient at the time that services are rendered that they are to be 33 performed by the physician assistant; 34 (5) the physician assistant conspicuously wears an identification tag using the term "physician assistant" ¹or the designation, "PA-C" 35 or "PA"¹ whenever acting in that capacity; and 36 37 (6) any entry by a physician assistant in a clinical record is appropriately signed and followed by the designation, ["PA-C."] 38 39 "PA-C" or "PA." 40 b. Any physician assistant who practices in violation of any of the conditions specified in subsection a. of this section shall be 41 42 deemed to have engaged in professional misconduct in violation of subsection ¹[f.] <u>e.</u>¹ of section 8 of P.L.1978, c.73 (C.45:1-21). 43 (cf: P.L.1992, c.102, s.4) 44

1 4. Section 7 of P.L.1991, c.378 (C.45:9-27.16) is amended to read 2 as follows: 3 7. a. A physician assistant may perform [the following procedures:] ¹[those duties and responsibilities, including the 4 5 ordering, prescribing, dispensing, and administering of drugs and 6 medical devices, that are delegated by the supervising physician. A 7 physician assistant may provide any medical service that is delegated 8 by the supervising physician when the service is within the physician 9 assistant's skills, forms a component of the supervising physician's 10 scope of practice, and is provided under the physician's supervision. 11 A physician assistant may perform a task that is not within the 12 supervising physician's scope of practice, provided that the 13 supervising physician has adequate training, oversight skills, and 14 supervisory and referral arrangements to ensure competent provision 15 of the service by the physician assistant.] the following procedures:¹ 16 (1) [Approaching a patient to elicit a detailed and accurate history, 17 perform an appropriate physical examination, identify problems, 18 record information and interpret and present information to the 19 supervising physician;] ¹[(Deleted by amendment, P.L. c.)(pending before the Legislature as this bill)] Approaching a 20 21 patient to elicit a detailed and accurate history, perform an appropriate 22 physical examination, identify problems, record information, and 23 interpret and present information to the supervising physician;¹ 24 (2) [Suturing and caring for wounds including removing sutures 25 and clips and changing dressings, except for facial wounds, traumatic wounds requiring suturing in layers and infected wounds;]¹[(Deleted 26 27 by amendment, P.L., c.)(pending before the Legislature as this 28 bill) Suturing and caring for wounds including removing sutures and 29 clips and changing dressings, except for facial wounds, traumatic 30 wounds requiring suturing in layers, and infected wounds;¹ 31 (3) [Providing patient counseling services and patient education 32 consistent with directions of the supervising physician;]¹[(Deleted by 33 amendment, P.L. , c.) (pending before the Legislature as this bill) 34 Providing patient counseling services and patient education consistent 35 with directions of the supervising physician;¹ 36 (4) [Assisting a physician in an inpatient setting by conducting 37 patient rounds, recording patient progress notes, determining and 38 implementing therapeutic plans jointly with the supervising physician 39 and compiling and recording pertinent narrative case summaries;] 40 ¹[(Deleted by amendment, P.L., c.)(pending before the 41 Legislature as this bill) Assisting a physician in an inpatient setting 42 by conducting patient rounds, recording patient progress notes, 43 determining and implementing therapeutic plans jointly with the 44 supervising physician, and compiling and recording pertinent narrative case summaries;1 45

46 (5) [Assisting a physician in the delivery of services to patients
47 requiring continuing care in a private home, nursing home, extended

1 care facility or other setting, including the review and monitoring of 2 treatment and therapy plans;]¹[(Deleted by amendment, P.L., c.)(pending before the Legislature as this bill)] Assisting a physician in 3 4 the delivery of services to patients requiring continuing care in a 5 private home, nursing home, extended care facility, or other setting, 6 including the review and monitoring of treatment and therapy plans;¹ 7 ²and² 8 (6) [Facilitating the referral of patients to, and promoting their 9 awareness of, health care facilities and other appropriate agencies and 10 resources in the community; and ¹ [(Deleted by amendment, P.L., c.)(pending before the Legislature as this bill) Referring patients to, 11 and promoting their awareness of, health care facilities and other 12 appropriate agencies and resources in the community ²[; and¹].² 13 14 (7) [Such other procedures suitable for discretionary and routine 15 performance by physician assistants as designated by the board pursuant to subsection a. of section 15 of this act.] ¹[(Deleted by 16 17 amendment, P.L., c.)(pending before the Legislature as this bill) ²[Such other procedures suitable for discretionary and routine 18 19 performance by physician assistants as designated by the board 20 pursuant to subsection a. of section 15 of P.L.1991, c.378 (C.45:9-21 27.24).¹] (Deleted by amendment, P.L., c.) (pending before the Legislature as this bill)² 22 23 b. [A physician assistant may perform the following procedures 24 only when directed, ordered or prescribed by the supervising physician 25 or specified in accordance with protocols promulgated pursuant to subsection c. of section 15 of this act:] ¹[(Deleted by amendment, 26 27 P.L., c.) (pending before the Legislature as this bill) A physician 28 assistant may perform the following procedures only when directed, 29 ordered, or prescribed by the supervising physician ² or specified in 30 accordance with protocols promulgated pursuant to subsection c. of section 15 of P.L.1991, c.378 (C.45:9-27.24), or when performance 31 32 of the procedure is delegated to the physician assistant by the 33 supervising physician as authorized under subsection d. of this 34 section²:¹ 35 (1) [Performing non-invasive laboratory procedures and related 36 studies or assisting duly licensed personnel in the performance of 37 invasive laboratory procedures and related studies;]¹[(Deleted by amendment, P.L., c.)(pending before the Legislature as this bill)] 38 39 Performing non-invasive laboratory procedures and related studies or 40 assisting duly licensed personnel in the performance of invasive 41 laboratory procedures and related studies;¹ 42 (2) [Giving injections, administering medications and requesting diagnostic studies;]¹[(Deleted by amendment, P.L., c.)(pending 43 before the Legislature as this bill) Giving injections, administering 44 medications, and requesting diagnostic studies;¹ 45

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1 (3) [Suturing and caring for facial wounds, traumatic wounds 2 requiring suturing in layers and infected wounds;]¹[(Deleted by 3 amendment, P.L., c.)(pending before the Legislature as this bill)] 4 Suturing and caring for facial wounds, traumatic wounds requiring 5 suturing in layers, and infected wounds;¹ 6 (4) [Writing prescriptions or ordering medications in an inpatient 7 or outpatient setting in accordance with section 10 of this act; and] ¹[(Deleted by amendment, P.L. , c.)(pending before the 8 9 Legislature as this bill) Writing prescriptions or ordering medications in an inpatient or outpatient setting in accordance with section 10 of 10 P.L.1991, c.378 (C.45:9-27.19);^{1 2} and² 11 (5) Such other procedures as may be specified in accordance with 12 13 protocols promulgated in accordance with subsection b. of section 15 14 of this act.] ¹[(Deleted by amendment, P.L., c.)(pending before the Legislature as this bill) Prescribing the use of patient restraints ²[; 15 16 and 17 (6) Such other procedures as may be specified in accordance with protocols promulgated in accordance with subsection b. of section 15 18 of P.L.1991, c.378 (C.45:9-27.24)]².¹ 19 20 c. [A physician assistant may assist a supervising surgeon in the 21 operating room when a qualified assistant physician is not required by 22 the board and a second assistant is deemed necessary by the supervising surgeon.] ¹[(Deleted by amendment, P.L. 23 24 c.)(pending before the Legislature as this bill)] A physician assistant 25 may assist a supervising surgeon in the operating room when a 26 qualified assistant physician is not required by the board and a second 27 assistant is deemed necessary by the supervising surgeon. 28 d. A physician assistant may perform medical services beyond 29 those explicitly authorized in this section, when such services are 30 delegated by a supervising physician with whom the physician 31 assistant has signed a delegation agreement pursuant to section 8 of 32 P.L.1991, c.378 (C.45:9-27.17). The procedures delegated to a 33 physician assistant shall be limited to those customary to the 34 supervising physician's specialty and within the supervising physician's ²and the physician assistant's² competence and training.¹ 35 ²e. Notwithstanding subsection d. of this section, a physician 36 37 assistant shall not be authorized to measure the powers or range of 38 human vision, determine the accommodation and refractive states of 39 the human eye, or fit, prescribe, or adapt lenses, prisms, or frames for 40 the aid thereof. Nothing in this subsection shall be construed to 41 prohibit a physician assistant from performing a routine visual screening.² 42 (cf: P.L.1998, c.125, s.1) 43

1 5. Section 8 of P.L.1991, c.378 (C.45:9-27.17) is amended to 2 read as follows: 3 8. a. **[**A physician may delegate to a physician assistant under 4 his supervision only those procedures identified in section 7 of this 5 act.] (Deleted by amendment, P.L., c.)(pending before the 6 Legislature as this bill) 7 b. Any physician who permits a physician assistant under [his] 8 the physician's supervision to practice contrary to the provisions of 9 ¹[this act] P.L.1991, c.378 (C.45:9-27.10 et seq.)¹ shall be deemed 10 to have engaged in professional misconduct in violation of 11 subsection e. of section 8 of P.L.1978, c.73 (C.45:1-21) and shall be 12 subject to disciplinary action by the board pursuant to P.L.1978, 13 c.73 (C.45:1-14 et seq.); 14 c. In the performance of [a medical procedure] all practice-15 related activities, including, but not limited to, the ordering of diagnostic, therapeutic, and other medical services, a physician 16 17 assistant shall be conclusively presumed to be the agent of the 18 physician under whose supervision the physician assistant is 19 [performing] <u>practicing</u> ¹[medicine]¹. 20 d. A physician who supervises a physician assistant ¹[shall] may¹ maintain a written ¹delegation¹ agreement with the physician 21 ¹A physician assistant shall sign a separate written 22 assistant. 23 agreement with each physician who delegates medical services in accordance with the provisions of subsection d. of section 7 of 24 P.L.1991, c.378 (C.45:9-27.16). However, a written delegation 25 26 agreement may be executed by a single-specialty physician practice, 27 provided it is signed by all of the delegating physicians supervising 28 the physician assistant. In the case of a multi-specialty physician 29 practice, a written delegation agreement may be executed for each 30 physician specialty within the practice, provided it is signed by all of the delegating physicians supervising the physician assistant in 31 32 that specialty area. Nothing in this section shall authorize the 33 execution of a global written delegation agreement between a 34 physician assistant and a multi-specialty physician practice.¹ The 35 agreement shall ¹: 36 (1)¹ state that the physician will exercise supervision over the physician assistant in accordance with the provisions of P.L.1991, 37 38 c.378 (C.45:9-27.10 et seq.) and any rules adopted by the board ¹[and will retain professional and legal responsibility for the care 39 40 rendered by the physician assistant. The agreement shall]; $(2)^{1}$ be signed ¹and dated annually¹ by the physician and the 41 physician assistant ¹[. The agreement shall], and updated as 42 43 necessary to reflect any changes in the practice or the physician 44 assistant's role in the practice; and 45 (3)¹ be kept on file at the practice site ¹ and made available to the board upon request], be provided to the Physician Assistant 46 47 Advisory Committee, and be kept on file by the committee.

1 e. The delegation agreement shall include, but need not be 2 limited to, the following provisions: 3 (1) The physician assistant's role in the practice, including any 4 specific aspects of care that require prior consultation with the 5 supervising physician; 6 (2) A determination of whether the supervising physician 7 requires personal review of all charts and records of patients and 8 countersignature by the supervising physician of all medical 9 services performed under the delegation agreement, including 10 prescribing and administering medication as authorized under section 10 of P.L.1991, c.378 (C.45:9-27.19). This provision shall 11 12 state the specified time period in which a review and countersignature shall be completed by the supervising physician. 13 14 If no review and countersignature is necessary, the agreement must 15 specifically state such provision; and 16 (3) The locations of practice where the physician assistant may 17 practice under the delegation agreement, including licensed 18 facilities in which the physician authorizes the physician assistant to 19 provide medical services¹. (cf: P.L.1991, c.378, s.8) 20 21 22 6. Section 9 of P.L.1991, c.378 (C.45:9-27.18) is amended to 23 read as follows: 24 9. a. A physician assistant **[**and a temporary licensed 25 physician assistant] shall be under the [direct] supervision of a physician at all times during which the physician assistant [or 26 27 temporary licensed physician assistant] is working in [his] an 28 official capacity. 29 [In an inpatient setting, direct supervision] <u>Supervision</u> of a b. 30 physician assistant shall [include, but not be limited to:] be 31 continuous but shall not be construed as necessarily requiring the 32 physical presence of the supervising physician, provided that the 33 supervising physician and physician assistant ¹ [are or can be easily 34 in contact with each other by maintain contact through¹ electronic ¹, or other means of,¹ communication. 35 36 (1) [continuing or intermittent presence with constant 37 availability through electronic communications;] (Deleted by 38 amendment, P.L., c.)(pending before the Legislature as this 39 <u>bill)</u> 40 (2) [regularly scheduled review of the practice of the physician assistant; and] (Deleted by amendment, P.L. , c.)(pending 41 42 before the Legislature as this bill) 43 (3) [personal review by a physician of all charts and records of 44 patients and countersignature by a physician of all medical orders, 45 including prescribing and administering medication, within 24 46 hours of their entry by the physician assistant.] (Deleted by

1 amendment, P.L. , c.)(pending before the Legislature as this 2 bill) 3 c. [In an outpatient setting, direct supervision of a physician assistant shall include, but not be limited to:] (Deleted by 4 5 amendment, P.L., c.)(pending before the Legislature as this <u>bill)</u> 6 7 (1) [constant availability through electronic communications;] 8 (Deleted by amendment, P.L. , c.)(pending before the 9 Legislature as this bill) 10 (2) [regularly scheduled review of the practice of the physician 11 assistant; and [(Deleted by amendment, P.L., c.) (pending 12 before the Legislature as this bill) 13 (3) [personal review by a physician of the charts and records of 14 patients and countersignature by a physician of all medical orders, within seven days of their entry by the physician assistant, except 15 that in the case of any medical order prescribing or administering 16 17 medication, a physician shall review and countersign the order 18 within 48 hours of its entry by the physician assistant.] (Deleted by 19 amendment, P.L., c.)(pending before the Legislature as this 20 bill) 21 In any setting, direct supervision of a temporary licensed d. 22 physician assistant shall include, but not be limited to:] (Deleted by 23 amendment, P.L., c.)(pending before the Legislature as this 24 bill) 25 (1) [continuing physical presence of a physician or a licensed physician assistant;] (Deleted by amendment, P.L., c.)(pending 26 27 before the Legislature as this bill) 28 (2) [regularly scheduled review by a physician of the practice of 29 the temporary licensed physician assistant; and] (Deleted by 30 amendment, P.L., c.)(pending before the Legislature as this 31 bill) 32 (3) [personal review by a physician of all charts and records of patients within 24 hours of an entry by the temporary licensed 33 physician assistant.] (Deleted by amendment, P.L., c.)(pending 34 35 before the Legislature as this bill) 36 e. It is the obligation of each supervising physician and 37 physician assistant to ensure that: (1) the physician assistant's 38 scope of practice is identified; (2) delegation of medical tasks is 39 appropriate to the physician assistant's level of competence; (3) the 40 relationship of, and access to, the supervising physician is defined; 41 and (4) a process for evaluation of the physician assistant's 42 performance is established. 43 (cf: P.L.1998, c.125, s.2) 44 45 7. Section 10 of P.L.1991, c.378 (C.45:9-27.19) is amended to 46 read as follows:

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10. A physician assistant [treating a patient in an inpatient or outpatient setting] may order [or], prescribe, dispense, and administer medications [, subject to the following conditions:] and medical devices to the extent delegated by a supervising physician.
a. [controlled] Controlled dangerous substances may only be ordered or prescribed if:

(1) a supervising physician has authorized a physician assistant to order or prescribe Schedule II, III, IV ²,² or V controlled dangerous substances [in order to:] ¹in order to^{1 2}[;]:²

(a) [continue or reissue an order or prescription for a controlled
dangerous substance issued by the supervising physician;] ¹[(Deleted
by amendment, P.L., c.)(pending before the Legislature as this
bill)] continue or reissue an order or prescription for a controlled
dangerous substance issued by the supervising physician;¹

15 (b) [otherwise adjust the dosage of an order or prescription for a 16 controlled dangerous substance originally ordered or prescribed by the 17 supervising physician, provided there is prior consultation with the 18 physician;] ¹[(Deleted by supervising amendment, 19 P.L., c.)(pending before the Legislature as this bill)] otherwise 20 adjust the dosage of an order or prescription for a controlled dangerous 21 substance originally ordered or prescribed by the supervising 22 physician, provided there is prior consultation with the supervising 23 physician;¹

24 (c) **[**initiate an order or prescription for a controlled dangerous 25 substance for a patient, provided there is prior consultation with the 26 supervising physician if the order or prescription is not pursuant to 27 subparagraph (d) of this paragraph; or] ¹[(Deleted by amendment, 28 P.L. , c.)(pending before the Legislature as this bill) initiate an 29 order or prescription for a controlled dangerous substance for a patient, 30 provided there is prior consultation with the supervising physician if 31 the order or prescription is not pursuant to subparagraph (d) of this 32 paragraph; or¹

33 (d) **[**initiate an order or prescription for a controlled dangerous 34 substance as part of a treatment plan for a patient with a terminal 35 illness, which for the purposes of this subparagraph means a medical 36 condition that results in a patient's life expectancy being 12 months or 37 less as determined by the supervising physician;] ¹[(Deleted by amendment, P.L., c.)(pending before the Legislature as this bill)] 38 39 initiate an order or prescription for a controlled dangerous substance as part of a treatment plan for a patient with a terminal illness, which for 40 41 the purposes of this subparagraph means a medical condition that 42 results in a patient's life expectancy being 12 months or less as determined by the supervising physician;¹ 43

44 (2) the physician assistant has registered with $\frac{2}{2}$ and obtained 45 authorization to order or prescribe controlled dangerous substances

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from ²,² the <u>federal Drug Enforcement Administration</u> ²[,]² and any 1 2 other appropriate State and federal agencies; and 3 (3) the physician assistant complies with all requirements which the board shall establish by regulation for the administration of 4 5 controlled dangerous substances pursuant to section 15 of P.L.1991, 6 c.378 (C.45:9-27.24) and applicable requirements with respect to 7 educational programs approved by the board pursuant to section 17 of 8 P.L.1991, c.378 (C.45:9-27.26) and ¹all requirements which the 9 board shall establish by regulation for the ordering, prescription, or administration of controlled dangerous substances ²[pursuant to 10 section 15 of P.L.1991, c.378 (C.45:9-27.24)]², ²all² applicable 11 educational program requirements ²[approved by the board pursuant 12 to section 17 of P.L.1991, c.378 (C.45:9-27.26)]², and¹ continuing 13 professional education programs approved pursuant to section 16 of 14 P.L.1991, c.378 (C.45:9-27.25) ²[;] .² 15 16 b. Ithe order or prescription is administered in accordance with 17 protocols or specific physician direction pursuant to subsection b. of 18 section 7 of P.L.1991, c.378 (C.45:9-27.16); (Deleted by amendment, 19 P.L. , c.)(pending before the Legislature as this bill) 20 c. It prescription states whether it is written pursuant to 21 protocol or specific physician direction; and [(Deleted by amendment, 22 P.L. , c.)(pending before the Legislature as this bill) 23 d. [the physician assistant signs his own name, prints his name 24 and license number and prints the supervising physician's name, and in 25 the case of an order or prescription for a controlled dangerous substance, prints the physician assistant's Drug Enforcement 26 Administration registration number.] ¹[(Deleted by amendment, 27 28 P.L., c.)(pending before the Legislature as this bill) In the case of an order or prescription for a controlled dangerous substance, the 29 physician assistant shall print ²[thereon] on the order or prescription² 30 31 the physician assistant's Drug Enforcement Administration registration 32 number.¹ 33 e. The dispensing of medication or a medical device by a 34 physician assistant shall comply with relevant federal and State 35 regulations, and shall occur only if: (1) pharmacy services are not 36 reasonably available; (2) it is in the best interest of the patient; or (3) 37 the physician assistant is rendering emergency medical assistance. 38 f. A physician assistant may request, receive, and sign for 39 prescription drug samples and may distribute those samples to patients. 40 (cf: P.L.2005, c.48, s.1) 41 42 8. Section 12 of P.L.1991, c.378 (C.45:9-27.21) is amended to 43 read as follows: 44 12. The committee shall annually elect from among its members a president and vice-president. The committee shall meet [at least 45 twice each year] ¹[monthly] six times a year¹ and may hold 46 additional meetings ${}^{1}[,]^{1}$ as necessary to discharge its duties. In 47

1 addition to such meetings, the committee shall meet at the call of 2 the president, the board, or the Attorney General. 3 (cf: P.L.1992, c.102, s.7) 4 5 9. Section 14 of P.L.1991, c.378 (C.45:9-27.23) is amended to 6 read as follows: 7 14. a. The committee may have the following powers and duties, 8 as delegated by the board: 9 (1) to evaluate and pass upon the qualifications of candidates for 10 licensure; (2) to take disciplinary action, in accordance with P.L.1978, c.73 11 (C.45:1-14 et seq.)²² against a physician assistant who violates any 12 provision of this act; and 13 14 (3) to adopt and administer the examination to be taken by 15 applicants for licensure; and (Deleted by amendment, P.L. , c.)(pending before the Legislature as this bill) 16 17 (4) subject to the requirements of section 16 of [this act] 18 P.L.1991, c.378 (C.45:9-27.25), to adopt standards for and approve 19 continuing education programs. 20 b. In addition to the powers and duties specified in subsection a. 21 of this section, the committee may make recommendations to the 22 board regarding any subjects pertinent to this act or to the practice of 23 physician assistants. 24 (cf: P.L.1992, c.102, s.9) 25 26 10. Section 17 of P.L.1991, c.378 (C.45:9-27.26) is amended to 27 read as follows: 28 17. [The] In consultation with the committee, the board shall, in 29 addition to such other powers and duties as it may possess by law: Administer and enforce the provisions of [this act] 30 a. 31 P.L.1991, c.378 (C.45:9-27.10 et seq.); b. Adopt and promulgate rules and regulations, pursuant to the 32 "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et 33 34 seq.), to effectuate the purposes of [this act] P.L.1991, c.378 35 (C.45:9-27.10 et seq.); 36 c. Establish professional standards for persons licensed under 37 [this act] P.L.1991, c.378 (C.45:9-27.10 et seq.); d. Conduct hearings pursuant to the "Administrative Procedure 38 39 Act," P.L.1968, c.410 (C.52:14B-1 et seq.), except that the board 40 shall have the right to administer oaths to witnesses, and shall have 41 the power to issue subpoenas for the compulsory attendance of 42 witnesses and the production of pertinent books, papers, or records; 43 Conduct proceedings before any board, agency, or court of e. 44 competent jurisdiction for the enforcement of the provisions of 45 [this act] P.L.1991, c.378 (C.45:9-27.10 et seq.); 46 f. Evaluate and pass upon the qualifications of candidates for 47 licensure;

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1 g. [Establish standards for and approve educational programs 2 for physician assistants as required by paragraph (3) of subsection a. of section 4 of this act;] (Deleted by amendment, 3 P.L., c.)(pending before the Legislature as this bill) 4 5 h. [Adopt and administer the examination to be taken by 6 applicants for licensure; (Deleted by amendment, 7 P.L. , c.)(pending before the Legislature as this bill) 8 Subject to the requirements of section 16 of [this act] i. 9 P.L.1991, c.378 (C.45:9-27.25), establish standards for and approve 10 continuing education programs; and Have the enforcement powers provided pursuant to 11 j. 12 P.L.1978, c.73 (C.45:1-14 et seq.). 13 (cf: P.L.1992, c.102, s.12) 14 ¹11. (New Section) ²a.² A physician assistant who engages in 15 16 clinical practice in this State is required to be covered by medical malpractice liability insurance, or if such liability coverage is not 17 18 available, by a letter of credit. The board shall establish by regulation 19 the minimum amount for medical malpractice liability insurance 20 coverage or lines of credit. ²<u>b.</u>² <u>The physician assistant shall</u> ²[notify the board of] include, 21 on the physician assistant's license renewal form,² the name and 22 address of the insurance carrier or the institution issuing the letter of 23 24 credit ²[on the physician assistant's license renewal form] to the physician assistant². 25 $^{2}c.^{2}$ A physician assistant who is in violation of this section is 26 subject to disciplinary action and civil penalties pursuant to sections 8, 27 9, and 12 of P.L.1978, c.73 (C.45:1-21 to 22 and 45:1-25). 28 ²d.² The board shall notify all licensed physician assistants of the 29 30 requirements of this section within 30 days of the date of enactment of P.L., c. (C.) (pending before the Legislature as this bill).¹ 31 32 ¹[11.] <u>12.</u>¹ (New section) a. A physician assistant licensed in 33 34 this State, or licensed or authorized to practice in any other jurisdiction 35 of the United States or credentialed as a physician assistant by a 36 federal employer, who is responding to a need for medical care created 37 by an emergency or a State or local disaster, excluding an emergency 38 situation that occurs in the place of the physician assistant's 39 employment, may render such care as the physician assistant is able to 40 provide without supervision, or with such supervision as is available. 41 b. A physician who supervises a physician assistant providing 42 medical care in response to an emergency or a State or local disaster 43 shall not be required to meet the requirements set forth for a supervising physician in P.L.1991, c.378 (C.45:9-27.10 et seq.). 44 c. ${}^{2}(1)^{2}$ A physician assistant licensed in this State, or licensed or 45 46 authorized to practice in any other jurisdiction of the United States, 47 who voluntarily and gratuitously, and other than in the ordinary course

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1 of employment or practice, renders emergency medical assistance, 2 shall not be liable for civil damages for any personal injury that results 3 from an act or omission by the physician assistant in rendering 4 emergency care that may constitute ordinary negligence. ² The 5 immunity granted by this section shall not apply to an act or omission 6 constituting gross, willful, or wanton negligence or when the medical 7 assistance is rendered at a hospital, physician's office, or other health care delivery entity where those services are normally rendered.] 8

 $(2)^{2}$ A physician who supervises a physician assistant voluntarily 9 10 and gratuitously providing emergency care as described in this subsection shall not be liable for civil damages for any personal injury 11 12 that results from an act or omission by the physician assistant 13 rendering emergency care.

²d. The immunity granted under subsection c. of this section shall 14 15 not apply to an act or omission constituting gross, willful, or wanton 16 negligence or when the medical assistance is rendered at a hospital, 17 physician's office, or other health care delivery entity where those 18 services are normally rendered.²

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¹[12.] <u>13.</u>¹ Section 4 of P.L.1983, c.308 (C.26:6-8.1) is amended 20 21 to read as follows:

22 4. a. Where there has been an apparent death that is not governed 23 by the provisions of section 4 of P.L.1991, c.90 (C.26:6A-4), a 24 registered professional nurse licensed by the New Jersey Board of Nursing under P.L.1947, c.262 (C.45:11-23 et seq.) ²[,]² or a 25 physician assistant licensed pursuant to P.L.1991, c.378 (C.45:9-27.10 26 27 et seq.) may make the actual determination and pronouncement of 28 death and shall attest to this pronouncement by: signing in the space 29 designated for this signature on the certificate of death under R.S.26:6-7; or, for the purposes of the NJ-EDRS, transmitting orally or in 30 writing a report of the pronouncement to the attending, covering 2,2 or 31 32 resident physician, or the county medical examiner.

33 b. (Deleted by amendment, P.L.2006, c.86).

34 (cf: P.L.2006, c.86, s.1)

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¹[13.] 14.¹ Section 1 of P.L.1988, c.125 (C.26:6-8.2) is amended to read as follows:

38 1. If the attending physician, registered professional nurse, 39 physician assistant, or State or county medical examiner who makes 40 the actual determination and pronouncement of death determines or 41 has knowledge that the deceased person was infected with human 42 immunodeficiency virus (HIV) or hepatitis B virus or that the 43 deceased person suffered from acquired immune deficiency 44 syndrome (AIDS), AIDS related complex (ARC), or any of the 45 contagious, infectious, or communicable diseases as shall be 46 determined by the Commissioner of the Department of Health, the 47 attending physician, registered professional nurse, physician 48 assistant, or State or county medical examiner shall immediately

place with the remains written notification of the condition and 1 shall provide written notification of the condition to the funeral 2 3 director who is responsible for the handling and the disposition of 4 the body. 5 (cf: P.L.1988, c.125, s.1) 6 ¹[14.] $15.^{1}$ The following sections are repealed: 7 Section 5 of P.L.1991, c.378 (C.45:9-27.14); 8 Section 15 of P.L.1991, c.378 (C.45:9-27.24); and 9 Section 3 of P.L.1993, c.337 (C.45:9-27.19a)².² 10 11 ¹[15.] <u>16.</u>¹ This act shall take effect on the first day of the 12 seventh month next following the date of enactment, but the State 13 14 Board of Medical Examiners and the Physician Assistant Advisory Committee may take such anticipatory administrative action in 15 advance thereof as shall be necessary for the implementation of this 16 17 act. 18 19 20 21 22 Revises requirements for licensure and creates physician-23 delegated scope of practice for physician assistants.

SENATE, No. 1184 STATE OF NEW JERSEY 216th LEGISLATURE

INTRODUCED JANUARY 30, 2014

Sponsored by: Senator JOSEPH F. VITALE District 19 (Middlesex) Senator JAMES BEACH District 6 (Burlington and Camden)

SYNOPSIS

Revises requirements for licensure and creates physician-delegated scope of practice for physician assistants.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 3/18/2014)

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1 AN ACT concerning the licensure and scope of practice of physician 2 assistants, amending and supplementing P.L.1991, c.378, 3 amending P.L.1983, c.308 and P.L.1988, c.125, and repealing 4 various parts of the statutory law. 5 6 **BE IT ENACTED** by the Senate and General Assembly of the State 7 of New Jersey: 8 9 1. Section 2 of P.L.1991, c.378 (C.45:9-27.11) is amended to 10 read as follows: 2. As used in this act: 11 12 "[Approved] <u>Accredited</u> program" means an education program 13 for physician assistants which is [approved] accredited by the 14 [Committee on Allied Health Education and Accreditation] 15 Accreditation Review Commission on Education for the Physician 16 Assistant or its predecessor or successor agency. 17 "Board" means the State Board of Medical Examiners created 18 pursuant to R.S.45:9-1. 19 "Committee" means the Physician Assistant Advisory Committee 20 established pursuant to section 11 of [this act] P.L.1991, c.378 21 (C.45:9-27.20). 22 "Director" means the Director of the Division of Consumer 23 Affairs. 24 "Health care facility" means a health care facility as defined in section 2 of P.L.1971, c.136 (C.26:2H-2). 25 "Institution" means any of the charitable, hospital, relief and 26 training institutions, noninstitutional agencies, and correctional 27 institutions enumerated in R.S.30:1-7. 28 29 "Physician assistant" means a [person] health professional who 30 meets the qualifications under P.L.1991, c.378 (C.45:9-27.10 et 31 seq.) and holds a current, valid license issued pursuant to section 4 of [this act] P.L.1991, c.378 (C.45:9-27.13) and practices medicine 32 33 under the supervision of a physician. 34 "Physician" means a person licensed to practice medicine and surgery pursuant to chapter 9 of Title 45 of the Revised Statutes. 35 36 "Veterans' home" means the New Jersey Veterans' Memorial 37 Home - Menlo Park, the New Jersey Veterans' Memorial Home -38 Vineland, and the New Jersey Veterans' Memorial Home -39 Paramus. (cf: P.L.1992, c.102, s.1) 40 41 42 2. Section 4 of P.L.1991, c.378 (C.45:9-27.13) is amended to 43 read as follows: 44 4. a. The board shall issue a license as a physician assistant to 45 an applicant who has fulfilled the following requirements: 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 <u>thus</u> is new matter.

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(1) Is at least 18 years of age; (2) Is of good moral character; (3) Has successfully completed an [approved] accredited program; and (4) Has passed the national certifying examination administered by the National Commission on Certification of Physician Assistants, or its successor. b. In addition to the requirements of subsection a. of this section, an applicant for renewal of a license as a physician assistant shall: (1) Execute and submit a sworn statement made on a form provided by the board that neither the license for which renewal is sought nor any similar license or other authority issued by another jurisdiction has been revoked **[**,**]** <u>or</u> suspended **[**or not renewed**]**; and (2) Present satisfactory evidence that any continuing education requirements have been completed as required by [this act] P.L.1991, c.378 (C.45:9-27.10 et seq.). c. The board, in consultation with the committee, may accept, in lieu of the [examination required by paragraph (4)] requirements of subsection a. of this section, proof that an applicant for licensure holds a current license in a state which has standards substantially equivalent to those of this State. d. The board shall issue a temporary license to an applicant who meets the requirements of paragraphs (1), (2) and (3) of subsection a. of this section and who is either waiting to take the first scheduled examination following completion of an approved program or is awaiting the results of the examination. temporary license shall expire upon the applicant's receipt of notification of failure to pass the examination.] (Deleted by amendment, P.L., c.)(pending before the Legislature as this bill) e. A physician assistant who notifies the board in writing on forms prescribed by the board may elect to place the physician assistant's license on inactive status. A physician assistant with an inactive license shall not be subject to the payment of renewal fees and shall not practice as a physician assistant. A licensee who engages in practice while the physician assistant's license is lapsed or on inactive status shall be deemed to have engaged in professional misconduct in violation of subsection e. of section 8 of P.L.1978, c.73 (C.45:1-21) and shall be subject to disciplinary action by the committee pursuant to P.L.1978, c.73 (C.45:1-14 et seq.). A physician assistant requesting restoration from an inactive status shall be required to pay the current renewal fee and shall be required to meet the criteria for renewal as specified by the board. (cf: P.L.1993, c.337, s.1)

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1 3. Section 6 of P.L.1991, c.378 (C.45:9-27.15) is amended to 2 read as follows: 3 6. a. A physician assistant may practice in all medical care 4 settings, including, but not limited to, a physician's office, a health 5 care facility, an institution, a veterans' home, or a private home, 6 provided that: 7 (1) the physician assistant [is] practices medicine under the 8 [direct] supervision of a physician pursuant to section 9 of [this 9 act] P.L.1991, c.378 (C.45:9-27.18); 10 (2) the practice of the physician assistant is limited to those 11 procedures that are delegated to the physician assistant by the 12 supervising physician, as authorized under section 7 of [this act] 13 P.L.1991, c.378 (C.45:9-27.16); 14 (3) [an appropriate notice of employment has been filed with the board pursuant to subsection b. of section 5 of this act;] 15 16 (Deleted by amendment, P.L., c.)(pending before the 17 Legislature as this bill) 18 (4) the supervising physician or physician assistant advises the 19 patient at the time that services are rendered that they are to be 20 performed by the physician assistant; 21 (5) the physician assistant conspicuously wears an identification 22 tag using the term "physician assistant" whenever acting in that 23 capacity; and 24 (6) any entry by a physician assistant in a clinical record is 25 appropriately signed and followed by the designation, ["PA-C."] "PA-C" or "PA." 26 27 b. Any physician assistant who practices in violation of any of 28 the conditions specified in subsection a. of this section shall be 29 deemed to have engaged in professional misconduct in violation of 30 subsection f. of section 8 of P.L.1978, c.73 (C.45:1-21). 31 (cf: P.L.1992, c.102, s.4) 32 33 4. Section 7 of P.L.1991, c.378 (C.45:9-27.16) is amended to 34 read as follows: 35 7. a. A physician assistant may perform [the following 36 procedures:] those duties and responsibilities, including the ordering, prescribing, dispensing, and administering of drugs and 37 38 medical devices, that are delegated by the supervising physician. A 39 physician assistant may provide any medical service that is 40 delegated by the supervising physician when the service is within 41 the physician assistant's skills, forms a component of the 42 supervising physician's scope of practice, and is provided under the 43 physician's supervision. A physician assistant may perform a task 44 that is not within the supervising physician's scope of practice, 45 provided that the supervising physician has adequate training, 46 oversight skills, and supervisory and referral arrangements to

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1 ensure competent provision of the service by the physician 2 assistant. 3 (1) [Approaching a patient to elicit a detailed and accurate 4 history, perform an appropriate physical examination, identify 5 problems, record information and interpret and present information the supervising physician; [(Deleted by amendment, 6 to 7 P.L., c.)(pending before the Legislature as this bill) 8 (2) **[**Suturing and caring for wounds including removing sutures 9 and clips and changing dressings, except for facial wounds, 10 traumatic wounds requiring suturing in layers and infected 11 wounds; <u>(Deleted by amendment, P.L., c.)(pending before the</u> 12 Legislature as this bill) 13 (3) [Providing patient counseling services and patient education 14 consistent with directions of the supervising physician;] (Deleted by amendment, P.L., c.)(pending before the Legislature as this 15 16 bill) (4) [Assisting a physician in an inpatient setting by conducting 17 18 patient rounds, recording patient progress notes, determining and implementing therapeutic plans jointly with the supervising 19 20 physician and compiling and recording pertinent narrative case 21 summaries;] (Deleted by amendment, P.L., c.)(pending before 22 the Legislature as this bill) (5) [Assisting a physician in the delivery of services to patients 23 24 requiring continuing care in a private home, nursing home, 25 extended care facility or other setting, including the review and 26 monitoring of treatment and therapy plans; <u>(Deleted by</u> 27 amendment, P.L., c.)(pending before the Legislature as this 28 bill) 29 (6) [Facilitating the referral of patients to, and promoting their awareness of, health care facilities and other appropriate agencies 30 31 and resources in the community; and [(Deleted by amendment, 32 P.L. , c.)(pending before the Legislature as this bill) 33 (7) [Such other procedures suitable for discretionary and routine 34 performance by physician assistants as designated by the board pursuant to subsection a. of section 15 of this act.] (Deleted by 35 36 amendment, P.L., c.)(pending before the Legislature as this 37 bill) 38 b. **[**A physician assistant may perform the following procedures only when directed, ordered or prescribed by the 39 40 supervising physician or specified in accordance with protocols 41 promulgated pursuant to subsection c. of section 15 of this act:] 42 (Deleted by amendment, P.L., c.)(pending before the 43 Legislature as this bill) 44 (1) [Performing non-invasive laboratory procedures and related 45 studies or assisting duly licensed personnel in the performance of 46 invasive laboratory procedures and related studies;] (Deleted by

1 amendment, P.L., c.)(pending before the Legislature as this 2 bill) 3 (2) **[**Giving injections, administering medications and 4 studies;] (Deleted by amendment, requesting diagnostic 5 P.L., c.)(pending before the Legislature as this bill) 6 (3) [Suturing and caring for facial wounds, traumatic wounds 7 requiring suturing in layers and infected wounds;] (Deleted by 8 amendment, P.L., c.)(pending before the Legislature as this 9 <u>bill)</u> 10 (4) [Writing prescriptions or ordering medications in an 11 inpatient or outpatient setting in accordance with section 10 of this 12 act; and [(Deleted by amendment, P.L., c.)(pending before the 13 Legislature as this bill) 14 (5) [Such other procedures as may be specified in accordance 15 with protocols promulgated in accordance with subsection b. of (Deleted by amendment, 16 section 15 of this act.] 17 P.L., c.)(pending before the Legislature as this bill) 18 c. [A physician assistant may assist a supervising surgeon in 19 the operating room when a qualified assistant physician is not required by the board and a second assistant is deemed necessary by 20 21 supervising surgeon. (Deleted by amendment, the 22 P.L. , c.)(pending before the Legislature as this bill) 23 (cf: P.L.1998, c.125, s.1) 24 25 5. Section 8 of P.L.1991, c.378 (C.45:9-27.17) is amended to 26 read as follows: 27 8. a. **[**A physician may delegate to a physician assistant under 28 his supervision only those procedures identified in section 7 of this 29 act.] (Deleted by amendment, P.L., c.)(pending before the 30 Legislature as this bill) 31 b. Any physician who permits a physician assistant under [his] 32 the physician's supervision to practice contrary to the provisions of 33 this act shall be deemed to have engaged in professional misconduct 34 in violation of subsection e. of section 8 of P.L.1978, c.73 (C.45:1-35 21) and shall be subject to disciplinary action by the board pursuant to P.L.1978, c.73 (C.45:1-14 et seq.); 36 37 c. In the performance of [a medical procedure] all practice-38 related activities, including, but not limited to, the ordering of 39 diagnostic, therapeutic, and other medical services, a physician 40 assistant shall be conclusively presumed to be the agent of the 41 physician under whose supervision the physician assistant is 42 [performing] practicing medicine. d. A physician who supervises a physician assistant shall 43 44 maintain a written agreement with the physician assistant. The 45 agreement shall state that the physician will exercise supervision 46 over the physician assistant in accordance with the provisions of 47 P.L.1991, c.378 (C.45:9-27.10 et seq.) and any rules adopted by the

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1 board and will retain professional and legal responsibility for the 2 care rendered by the physician assistant. The agreement shall be 3 signed by the physician and the physician assistant. The agreement 4 shall be kept on file at the practice site and made available to the 5 board upon request. 6 (cf: P.L.1991, c.378, s.8) 7 8 6. Section 9 of P.L.1991, c.378 (C.45:9-27.18) is amended to 9 read as follows: 10 9. a. A physician assistant and a temporary licensed 11 physician assistant] shall be under the [direct] supervision of a 12 physician at all times during which the physician assistant [or 13 temporary licensed physician assistant] is working in [his] an 14 official capacity. 15 b. [In an inpatient setting, direct supervision] Supervision of a physician assistant shall [include, but not be limited to:] be 16 17 continuous but shall not be construed as necessarily requiring the 18 physical presence of the supervising physician, provided that the 19 supervising physician and physician assistant are or can be easily in 20 contact with each other by electronic communication. 21 (1) [continuing or intermittent presence with constant 22 availability through electronic communications;] (Deleted by 23 amendment, P.L., c.)(pending before the Legislature as this 24 bill) 25 (2) **[**regularly scheduled review of the practice of the physician 26 assistant; and [(Deleted by amendment, P.L., c.)(pending 27 before the Legislature as this bill) 28 (3) [personal review by a physician of all charts and records of 29 patients and countersignature by a physician of all medical orders, 30 including prescribing and administering medication, within 24 31 hours of their entry by the physician assistant.] (Deleted by amendment, P.L. , c.)(pending before the Legislature as this 32 33 bill) 34 In an outpatient setting, direct supervision of a physician c. 35 assistant shall include, but not be limited to:] (Deleted by 36 amendment, P.L., c.)(pending before the Legislature as this 37 bill) 38 (1) [constant availability through electronic communications;] (Deleted by amendment, P.L. , c.)(pending before the 39 40 Legislature as this bill) 41 (2) **[**regularly scheduled review of the practice of the physician 42 assistant; and] (Deleted by amendment, P.L., c.)(pending 43 before the Legislature as this bill) 44 (3) [personal review by a physician of the charts and records of 45 patients and countersignature by a physician of all medical orders, 46 within seven days of their entry by the physician assistant, except

1 that in the case of any medical order prescribing or administering 2 medication, a physician shall review and countersign the order 3 within 48 hours of its entry by the physician assistant.] (Deleted by 4 amendment, P.L., c.)(pending before the Legislature as this 5 bill) 6 d. In any setting, direct supervision of a temporary licensed 7 physician assistant shall include, but not be limited to:] (Deleted by amendment, P.L. , c.)(pending before the Legislature as this 8 9 bill) 10 (1) [continuing physical presence of a physician or a licensed physician assistant;] (Deleted by amendment, P.L. , c.)(pending 11 12 before the Legislature as this bill) 13 (2) **[**regularly scheduled review by a physician of the practice of 14 the temporary licensed physician assistant; and] (Deleted by 15 amendment, P.L., c.)(pending before the Legislature as this 16 <u>bill)</u> 17 (3) [personal review by a physician of all charts and records of 18 patients within 24 hours of an entry by the temporary licensed 19 physician assistant.] (Deleted by amendment, P.L., c.)(pending 20 before the Legislature as this bill) e. It is the obligation of each supervising physician and 21 physician assistant to ensure that: (1) the physician assistant's 22 scope of practice is identified; (2) delegation of medical tasks is 23 24 appropriate to the physician assistant's level of competence; (3) the 25 relationship of, and access to, the supervising physician is defined; 26 and (4) a process for evaluation of the physician assistant's 27 performance is established. 28 (cf: P.L.1998, c.125, s.2) 29 30 7. Section 10 of P.L.1991, c.378 (C.45:9-27.19) is amended to 31 read as follows: 32 10. A physician assistant treating a patient in an inpatient or 33 outpatient setting] may order [or], prescribe, dispense, and 34 administer medications [, subject to the following conditions:] and 35 medical devices to the extent delegated by a supervising physician. [controlled] Controlled dangerous substances may only be 36 a. 37 ordered or prescribed if: 38 (1) a supervising physician has authorized a physician assistant 39 to order or prescribe Schedule II, III, IV or V controlled dangerous 40 substances [in order to:]; 41 (a) [continue or reissue an order or prescription for a controlled 42 dangerous substance issued by the supervising physician; [(Deleted by amendment, P.L., c.)(pending before the Legislature as this 43 44 bill) 45 (b) [otherwise adjust the dosage of an order or prescription for a 46 controlled dangerous substance originally ordered or prescribed by

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1 the supervising physician, provided there is prior consultation with 2 the supervising physician;] (Deleted by amendment, 3 P.L. , c.)(pending before the Legislature as this bill) 4 (c) **[**initiate an order or prescription for a controlled dangerous 5 substance for a patient, provided there is prior consultation with the 6 supervising physician if the order or prescription is not pursuant to 7 subparagraph (d) of this paragraph; or] (Deleted by amendment, 8 P.L. , c.)(pending before the Legislature as this bill) 9 (d) **[**initiate an order or prescription for a controlled dangerous 10 substance as part of a treatment plan for a patient with a terminal 11 illness, which for the purposes of this subparagraph means a 12 medical condition that results in a patient's life expectancy being 12 months or less as determined by the supervising physician;] 13 14 (Deleted by amendment, P.L., c.)(pending before the 15 Legislature as this bill) 16 (2) the physician assistant has registered with, and obtained 17 authorization to order or prescribe controlled dangerous substances 18 from, the federal Drug Enforcement Administration, and any other 19 appropriate State and federal agencies; and 20 (3) the physician assistant complies with **[**all requirements 21 which the board shall establish by regulation for the administration 22 of controlled dangerous substances pursuant to section 15 of 23 P.L.1991, c.378 (C.45:9-27.24) and applicable requirements with 24 respect to educational programs approved by the board pursuant to 25 section 17 of P.L.1991, c.378 (C.45:9-27.26) and continuing 26 professional education programs approved pursuant to section 16 of 27 P.L.1991, c.378 (C.45:9-27.25); 28 b. **[**the order or prescription is administered in accordance with 29 protocols or specific physician direction pursuant to subsection b. of 30 section 7 of P.L.1991, c.378 (C.45:9-27.16);] (Deleted by 31 amendment, P.L., c.)(pending before the Legislature as this 32 bill) 33 c. [the prescription states whether it is written pursuant to protocol or specific physician direction; and [(Deleted by 34 35 amendment, P.L., c.)(pending before the Legislature as this 36 bill) 37 [the physician assistant signs his own name, prints his name d. 38 and license number and prints the supervising physician's name, and 39 in the case of an order or prescription for a controlled dangerous 40 substance, prints the physician assistant's Drug Enforcement 41 Administration registration number.] (Deleted by amendment, 42 P.L., c.)(pending before the Legislature as this bill) 43 e. The dispensing of medication or a medical device by a 44 physician assistant shall comply with relevant federal and State 45 regulations, and shall occur only if: (1) pharmacy services are not 46 reasonably available; (2) it is in the best interest of the patient; or

1 (3) the physician assistant is rendering emergency medical 2 assistance. 3 f. A physician assistant may request, receive, and sign for 4 prescription drug samples and may distribute those samples to 5 patients. (cf: P.L.2005, c.48, s.1) 6 7 8 8. Section 12 of P.L.1991, c.378 (C.45:9-27.21) is amended to 9 read as follows: 10 12. The committee shall annually elect from among its members a president and vice-president. The committee shall meet [at least 11 twice each year] monthly and may hold additional meetings, as 12 13 necessary to discharge its duties. In addition to such meetings, the 14 committee shall meet at the call of the president, the board, or the Attorney General. 15 16 (cf: P.L.1992, c.102, s.7) 17 18 9. Section 14 of P.L.1991, c.378 (C.45:9-27.23) is amended to 19 read as follows: 20 14. a. The committee may have the following powers and 21 duties, as delegated by the board: 22 (1) to evaluate and pass upon the qualifications of candidates for 23 licensure; 24 (2) to take disciplinary action, in accordance with P.L.1978, 25 c.73 (C.45:1-14 et seq.) against a physician assistant who violates 26 any provision of this act; and 27 (3) [to adopt and administer the examination to be taken by 28 applicants for licensure; and] (Deleted by amendment, 29 P.L., c.)(pending before the Legislature as this bill) 30 (4) subject to the requirements of section 16 of [this act] 31 P.L.1991, c.378 (C.45:9-27.25), to adopt standards for and approve 32 continuing education programs b. In addition to the powers and duties specified in subsection 33 a. of this section, the committee may make recommendations to the 34 35 board regarding any subjects pertinent to this act or to the practice 36 of physician assistants. 37 (cf: P.L.1992, c.102, s.9) 38 39 10. Section 17 of P.L.1991, c.378 (C.45:9-27.26) is amended to 40 read as follows: 41 17. [The] In consultation with the committee, the board shall, in 42 addition to such other powers and duties as it may possess by law: 43 Administer and enforce the provisions of [this act] a. 44 P.L.1991, c.378 (C.45:9-27.10 et seq.); 45 b. Adopt and promulgate rules and regulations, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et 46

1 seq.), to effectuate the purposes of [this act] P.L.1991, c.378 2 (C.45:9-27.10 et seq.); 3 c. Establish professional standards for persons licensed under 4 [this act] P.L.1991, c.378 (C.45:9-27.10 et seq.); 5 d. Conduct hearings pursuant to the "Administrative Procedure 6 Act," P.L.1968, c.410 (C.52:14B-1 et seq.), except that the board shall have the right to administer oaths to witnesses, and shall have 7 8 the power to issue subpoenas for the compulsory attendance of 9 witnesses and the production of pertinent books, papers, or records; 10 e. Conduct proceedings before any board, agency, or court of 11 competent jurisdiction for the enforcement of the provisions of 12 [this act] P.L.1991, c.378 (C.45:9-27.10 et seq.); 13 f. Evaluate and pass upon the qualifications of candidates for 14 licensure; 15 Establish standards for and approve educational programs g. 16 for physician assistants as required by paragraph (3) of subsection 17 a. of section 4 of this act;] (Deleted by amendment, P.L. , c.)(pending before the Legislature as this bill) 18 19 h. [Adopt and administer the examination to be taken by 20 applicants for licensure; (Deleted by amendment, P.L., c.)(pending before the Legislature as this bill) 21 22 Subject to the requirements of section 16 of [this act] i. 23 P.L.1991, c.378 (C.45:9-27.25), establish standards for and approve 24 continuing education programs; and Have the enforcement powers provided pursuant to 25 i. 26 P.L.1978, c.73 (C.45:1-14 et seq.). 27 (cf: P.L.1992, c.102, s.12) 28 29 11. (New section) a. A physician assistant licensed in this State, or licensed or authorized to practice in any other jurisdiction 30 31 of the United States or credentialed as a physician assistant by a 32 federal employer, who is responding to a need for medical care 33 created by an emergency or a State or local disaster, excluding an 34 emergency situation that occurs in the place of the physician 35 assistant's employment, may render such care as the physician 36 assistant is able to provide without supervision, or with such 37 supervision as is available. 38 b. A physician who supervises a physician assistant providing 39 medical care in response to an emergency or a State or local disaster shall not be required to meet the requirements set forth for a 40 41 supervising physician in P.L.1991, c.378 (C.45:9-27.10 et seq.). 42 A physician assistant licensed in this State, or licensed or C. 43 authorized to practice in any other jurisdiction of the United States, who voluntarily and gratuitously, and other than in the ordinary 44 45 course of employment or practice, renders emergency medical 46 assistance, shall not be liable for civil damages for any personal 47 injury that results from an act or omission by the physician assistant

1 in rendering emergency care that may constitute ordinary 2 negligence. The immunity granted by this section shall not apply to 3 an act or omission constituting gross, willful, or wanton negligence 4 or when the medical assistance is rendered at a hospital, physician's 5 office, or other health care delivery entity where those services are 6 normally rendered. A physician who supervises a physician 7 assistant voluntarily and gratuitously providing emergency care as 8 described in this subsection shall not be liable for civil damages for 9 any personal injury that results from an act or omission by the 10 physician assistant rendering emergency care.

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12 12. Section 4 of P.L.1983, c.308 (C.26:6-8.1) is amended to read 13 as follows:

14 Where there has been an apparent death that is not 4. a. 15 governed by the provisions of section 4 of P.L.1991, c.90 (C.26:6A-16 4), a registered professional nurse licensed by the New Jersey Board 17 of Nursing under P.L.1947, c.262 (C.45:11-23 et seq.) , or a 18 physician assistant licensed pursuant to P.L.1991, c.378 (C.45:9-19 27.10 et seq.) may make the actual determination and 20 pronouncement of death and shall attest to this pronouncement by: signing in the space designated for this signature on the certificate 21 22 of death under R.S.26:6-7; or, for the purposes of the NJ-EDRS, 23 transmitting orally or in writing a report of the pronouncement to 24 the attending, covering or resident physician, or the county medical 25 examiner.

b. (Deleted by amendment, P.L.2006, c.86).

27 (cf: P.L.2006, c.86, s.1)

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29 13. Section 1 of P.L.1988, c.125 (C.26:6-8.2) is amended to read
30 as follows:

31 If the attending physician, registered professional nurse, 1. 32 physician assistant, or State or county medical examiner who makes 33 the actual determination and pronouncement of death determines or 34 has knowledge that the deceased person was infected with human 35 immunodeficiency virus (HIV) or hepatitis B virus or that the deceased person suffered from acquired immune deficiency 36 37 syndrome (AIDS), AIDS related complex (ARC), or any of the 38 contagious, infectious, or communicable diseases as shall be 39 determined by the Commissioner of the Department of Health, the 40 attending physician, registered professional nurse, physician 41 assistant, or State or county medical examiner shall immediately 42 place with the remains written notification of the condition and 43 shall provide written notification of the condition to the funeral 44 director who is responsible for the handling and the disposition of 45 the body.

46 (cf: P.L.1988, c.125, s.1)

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48 14. The following sections are repealed:

1 Section 5 of P.L.1991, c.378 (C.45:9-27.14);

2 Section 15 of P.L.1991, c.378 (C.45:9-27.24); and

3 Section 3 of P.L.1993, c.337 (C.45:9-27.19a)

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5 15. This act shall take effect on the first day of the seventh 6 month next following the date of enactment, but the State Board of 7 Medical Examiners and the Physician Assistant Advisory 8 Committee may take such anticipatory administrative action in 9 advance thereof as shall be necessary for the implementation of this 10 act.

STATEMENT

This bill amends the "Physician Assistant Licensing Act" to revise the licensure requirements for physician assistants and creates a physician-delegated scope of practice.

18 The bill revises the permitted practices of a physician assistant to 19 those duties and responsibilities that are delegated by the 20 supervising physician. A physician assistant may provide any medical service that is delegated by the supervising physician, 21 22 including prescribing, dispensing, and administering medications 23 and medical devices, so long as the service is within the physician 24 assistant's skills, forms a component of the supervising physician's 25 scope of practice, and is provided under physician supervision. The 26 bill repeals section 3 of P.L.1993, c.337, which requires that a 27 supervising physician countersign a physician assistant's order for The bill provides that a physician assistant may 28 medication. 29 dispense medications only if: (1) pharmacy services are not 30 reasonably available; (2) it is in the best interest of the patient; or 31 (3) the physician assistant is providing emergency medical 32 assistance. The bill also authorizes a physician assistant to request, 33 receive, and sign for prescription drug samples and distribute those 34 samples to patients, and to pronounce death. Current law provides a 35 more limited scope of practice, specifying a list of permitted tasks. 36 The bill repeals section 5 of P.L.1991, c.378, which requires that a 37 physician assistant's employer file a notice of employment with the 38 State Board of Medical Examiners (BME).

39 The bill requires that a physician who supervises a physician 40 assistant maintain a written agreement with the physician assistant 41 stating that the physician will supervise the physician assistant in 42 accordance with State law and regulation, and will retain 43 professional and legal responsibility for the care rendered by the 44 physician assistant. The bill aligns the level of contact between a 45 supervising physician and physician assistant in outpatient and 46 inpatient settings. The bill requires continuous supervision, 47 allowing the need for the physical presence of the physician to be 48 determined at the practice level as long as easy electronic

1 communication is possible. The bill provides that it is the 2 obligation of each supervising physician and physician assistant to 3 ensure that: (1) the physician assistant's scope of practice is identified; (2) delegation of medical tasks is appropriate to the 4 5 physician assistant's level of competence; (3) the relationship of, and access to, the supervising physician is defined; and (4) a 6 7 process for evaluation of the physician assistant's performance is 8 established.

9 The bill requires that educational programs for physician 10 assistants required for licensure be accredited by the Accreditation 11 Review Commission on Education for the Physician Assistant, rather than approved by the BME. The bill no longer permits the 12 temporary licensure of individuals who have not yet passed the 13 14 national certifying examination. It provides the ability for a 15 physician assistant to place the physician assistant's license on 16 inactive status by notifying the committee on forms prescribed by 17 the committee.

18 The bill requires that the BME consult with the committee in 19 exercising its powers under the act, and it repeals section 15 of 20 P.L.1991, c.378, which requires the BME to give consideration to 21 advice from the committee on certain matters, as this provision is 22 obviated by the bill. It also requires the committee to meet at least 23 monthly, rather than twice each year.

24 The bill provides that the normal requirements for physician 25 supervision are suspended in the case of a physician assistant who 26 is responding to a need for medical care created by an emergency or 27 disaster. The bill provides a physician assistant or supervising physician immunity from civil damages for a personal injury that 28 29 results from an act or omission by those persons rendering 30 emergency care that constitute ordinary negligence.

31 The bill deletes several language provisions obviated by other 32 provisions of the bill, and makes several grammatical changes in 33 existing statutory language.

SENATE HEALTH, HUMAN SERVICES AND SENIOR CITIZENS COMMITTEE

STATEMENT TO

SENATE, No. 1184

with committee amendments

STATE OF NEW JERSEY

DATED: DECEMBER 8, 2014

The Senate Health, Human Services and Senior Citizens Committee reports favorably and with amendments Senate Bill No. 1184.

As amended by the committee, this bill revises the licensure requirements for physician assistants under the "Physician Assistant Licensing Act" and authorizes the creation of an expanded, physiciandelegated scope of practice.

In addition to the enumerated permitted practices that a physician assistant is already authorized by law to undertake, the amended bill would authorize a physician assistant to make pronouncements of death, and to undertake any other duties and responsibilities that a supervising physician elects, in their discretion, to delegate thereto, pursuant to a written delegation agreement. The duties and responsibilities delegated to a physician assistant would be limited to those procedures that are customary to the supervising physician's specialty, and that are within the supervising physician's competence and training.

Any delegation agreement established under the bill would be required to conform to certain specified parameters and conditions. In particular, any such agreement is required to: (1) state that the physician will supervise the physician assistant in accordance with State law and regulation; (2) identify the physician assistant's role in the practice, including any specific aspects of care that require prior consultation with the supervising physician; (3) indicate whether or not the supervising physician is required to personally review all patient charts and records, or to countersign for all medical services performed under the delegation agreement, and indicate the timeframe in which review and countersignature must be completed; (4) identify the practice locations where the physician assistant may practice under the delegation agreement; (5) be signed and dated annually by the physician and physician assistant, and updated as necessary; and (6) be retained on file at the practice site and provided to the Physician Assistant Advisory Committee to be retained on file thereby. It would be the obligation of each supervising physician and physician assistant to ensure that the physician assistant's scope of practice is identified, that delegation of medical tasks is appropriate to the physician assistant's level of competence, that the relationship of, and access to, the supervising physician is defined, and that a process for evaluation of the physician assistant's performance is established.

The bill would generally require a physician assistant to enter into a separate delegation agreement with each physician who delegates authority thereto in accordance with the bill's provisions. However, a single-specialty physician practice would be authorized to execute a delegation agreement with a physician assistant, on behalf of two or more delegating physicians, so long as the agreement is signed by all of the delegating physicians who are supervising the physician In the case of a multi-specialty physician practice, assistant. moreover, a written delegation agreement may be executed for each physician specialty within the practice, provided that the agreement is signed by all of the delegating physicians who are supervising the physician assistant in that specialty area. Nothing in the bill, however, would authorize the execution of a global written delegation agreement between a physician assistant and a multi-specialty physician practice. The bill repeals section 5 of P.L.1991, c.378, which requires that a physician assistant's employer file a notice of employment with the State Board of Medical Examiners (BME).

The bill would also make changes to the law to ensure that the level of contact required between a supervising physician and physician assistant is the same for both inpatient and outpatient settings. Currently, there are slightly different levels of contact required in each setting. In particular, the bill requires a physician assistant who is working in either type of setting to be under the continuous supervision of a physician, but it specifies that continuous supervision need not be construed as necessarily requiring the physical presence of the supervising physician, so long as the supervising physician and the physician assistant maintain contact through electronic, or other means of, communication.

The bill's requirements associated with physician supervision will be suspended when a physician assistant is responding to a need for medical care that is created by an emergency or disaster. The bill also provides a physician assistant or supervising physician immunity from civil damages for any personal injury that results from an act or omission of those persons, which constitutes ordinary negligence, when those persons are rendering emergency care.

The bill would repeal section 3 of P.L.1993, c.337, which requires a supervising physician to countersign a physician assistant's order for medication. Instead of requiring a countersignature, the bill would authorize a physician assistant to order, prescribe, dispense, and administer medications and medical devices to the extent delegated by a supervising physician. As provided by current law, and unchanged by the bill, a physician assistant would only be authorized to order or

prescribe a controlled dangerous substance if: (1) the physician assistant has registered with the federal Drug Enforcement Administration and any other appropriate State or federal agencies; (2) the physician assistant complies with all requirements established by the BME for the ordering, prescription, and administration of controlled substances, as well as with applicable educational requirements; and (3) the supervising physician has authorized the physician assistant to order or prescribe controlled substances in order to: (a) continue, reissue, or adjust the dosage of, an order or prescription that was previously issued by the physician, (b) initiate an order or prescription for a controlled dangerous substance as part of a treatment plan for a terminally ill patient, or (c) initiate an order or prescription for a patient suffering from a non-terminal illness, but only after consultation with the supervising physician. The bill would specify, moreover, that a physician assistant may only dispense medications or medical devices if such dispensation is done in accordance with applicable laws and regulations and: (1) pharmacy services are not reasonably available; (2) such action is in the best interest of the patient; or (3) the physician assistant is providing emergency medical assistance. The bill also authorizes a physician assistant to request, receive, and sign for prescription drug samples and distribute those samples to patients.

In addition to authorizing an expanded scope of practice for physician assistants, the bill would alter some of the licensure and license renewal requirements that are applicable thereto. In particular, the bill would no longer permit the temporary licensure of persons who have not yet passed the national certifying examination, but it would provide the ability for a physician assistant's license to be placed on inactive status, through the submission of notice to the BME. The bill would also require that educational programs required for the licensure of physician assistants be accredited by the Accreditation Review Commission on Education for the Physician Assistant, rather than approved by the Committee on Allied Health Education and Accreditation.

The bill requires that the BME consult with the Physician Assistant Advisory Committee in exercising its powers under the "Physician Assistant Licensing Act," and it repeals section 15 of P.L.1991, c.378, which requires the BME to consider advice from the committee on certain matters, since this provision is now obviated by the bill. The bill also requires the committee to meet six times a year.

Finally, the bill deletes several other obviated language provisions, and makes several grammatical and technical changes to existing statutory language and citations.

The committee amended the bill to:

• remove references to "the practice of medicine" (and similar phraseology) as applied to physician assistants, and clarify that

physician assistants are authorized to perform medical services within the physician assistant's education, training, and experience;

• make the execution of delegation agreements discretionary, clarify that a physician assistant may undertake any of the procedures expressly listed in law, as well as any procedures that a supervising physician elects to delegate thereto through the execution of a delegation agreement, and reinsert the laundry list of statutorily authorized physician assistant duties, which was deleted from the bill, as introduced;

• generally require a physician assistant to sign a separate delegation agreement with each physician who delegates authority thereto, but provide exceptions to this rule for single-specialty physician practices and multi-specialty physician practices in certain cases;

• require delegation agreements to be signed and dated annually, to be updated as necessary, and to be provided to the Physician Assistant Advisory Committee for retention thereby;

• require delegation agreements to include information that identifies the physician assistant's role in practice, as well as the level of oversight required by the supervising physician, and the practice locations where the physician assistant may practice;

• clarify that a physician's supervision of a physician assistant must be continuous, but need not necessarily entail the physical presence of the physician, so long as the physician and physician assistant maintain contact through electronic, or other means of, communication;

• reinsert the language appearing in subsections a. and d. of section 10 of P.L.1991, c.378, which was deleted in the bill as introduced, and which restricts a physician assistant's ability to order or prescribe controlled dangerous substances;

• require a physician assistant to be covered by medical malpractice liability insurance or a letter of credit;

• require a physician assistant to wear an identification card with the term "physician assistant," or the designation, "PA-C" or "PA";

• require the Physician Assistant Advisory Committee to meet six times per year; and

• make a technical correction to a citation in section 3 of the bill.

STATEMENT TO

[First Reprint] **SENATE, No. 1184**

with Assembly Floor Amendments (Proposed by Assemblyman CONAWAY)

ADOPTED: DECEMBER 17, 2015

These floor amendments provide that physician assistants may not perform certain tasks that fall within the scope of licensed optometry, including measuring the powers or range of human vision, determining the accommodation and refractive states of the human eye, and fitting, prescribing, or adapting lenses, prisms, or frames for the aid of human vision. Nothing in the amendments is to be construed to prohibit physician assistants from performing routine visual screenings.

The floor amendments make certain technical corrections to the bill to make it identical to Assembly Bill No. 1950(2R).

ASSEMBLY, No. 1950 STATE OF NEW JERSEY 216th LEGISLATURE

PRE-FILED FOR INTRODUCTION IN THE 2014 SESSION

Sponsored by: Assemblyman HERB CONAWAY, JR. District 7 (Burlington) Assemblyman PATRICK J. DIEGNAN, JR. District 18 (Middlesex) Assemblywoman SHAVONDA E. SUMTER District 35 (Bergen and Passaic)

SYNOPSIS

Revises requirements for licensure and creates physician-delegated scope of practice for physician assistants.

CURRENT VERSION OF TEXT

Introduced Pending Technical Review by Legislative Counsel



(Sponsorship Updated As Of: 2/6/2015)

2

AN ACT concerning the licensure and scope of practice of physician 1 2 assistants, amending and supplementing P.L.1991, c.378, 3 amending P.L.1983, c.308 and P.L.1988, c.125, and repealing 4 various parts of the statutory law. 5 BE IT ENACTED by the Senate and General Assembly of the State 6 7 of New Jersey: 8 9 1. Section 2 of P.L.1991, c.378 (C.45:9-27.11) is amended to 10 read as follows: 2. As used in this act: 11 12 "[Approved] <u>Accredited</u> program" means an education program 13 for physician assistants which is [approved] accredited by the [Committee on Allied Health Education and Accreditation] 14 Accreditation Review Commission on Education for the Physician 15 16 Assistant or its predecessor or successor agency. "Board" means the State Board of Medical Examiners created 17 pursuant to R.S.45:9-1. 18 "Committee" means the Physician Assistant Advisory Committee 19 established pursuant to section 11 of [this act] P.L.1991, c.378 20 21 (C.45:9-27.20). "Director" means the Director of the Division of Consumer 22 23 Affairs. 24 "Health care facility" means a health care facility as defined in 25 section 2 of P.L.1971, c.136 (C.26:2H-2). 26 "Institution" means any of the charitable, hospital, relief and 27 training institutions, noninstitutional agencies, and correctional 28 institutions enumerated in R.S.30:1-7. 29 "Physician assistant" means a [person] health professional who meets the qualifications under P.L.1991, c.378 (C.45:9-27.10 et 30 31 seq.) and holds a current, valid license issued pursuant to section 4 of [this act] P.L.1991, c.378 (C.45:9-27.13) and practices medicine 32 33 under the supervision of a physician. 34 "Physician" means a person licensed to practice medicine and 35 surgery pursuant to chapter 9 of Title 45 of the Revised Statutes. "Veterans' home" means the New Jersey Veterans' Memorial 36 37 Home - Menlo Park, the New Jersey Veterans' Memorial Home -Vineland, and the New Jersey Veterans' Memorial Home -38 39 Paramus. 40 (cf: P.L.1992, c.102, s.1) 41 42 2. Section 4 of P.L. 1991, c.378 (C.45:9-27.13) is amended to 43 read as follows:

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.

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1 4. a. The board shall issue a license as a physician assistant to 2 an applicant who has fulfilled the following requirements: 3 (1) Is at least 18 years of age; 4 (2) Is of good moral character; 5 (3) Has successfully completed an [approved] accredited 6 program; and 7 (4) Has passed the national certifying examination administered 8 by the National Commission on Certification of Physician 9 Assistants, or its successor. 10 b. In addition to the requirements of subsection a. of this 11 section, an applicant for renewal of a license as a physician 12 assistant shall: (1) Execute and submit a sworn statement made on a form 13 14 provided by the board that neither the license for which renewal is 15 sought nor any similar license or other authority issued by another jurisdiction has been revoked [,] or suspended [or not renewed]; 16 17 and 18 (2) Present satisfactory evidence that any continuing education 19 requirements have been completed as required by [this act] 20 P.L.1991, c.378 (C.45:9-27.10 et seq.). 21 c. The board, in consultation with the committee, may accept, 22 in lieu of the [examination required by paragraph (4)] requirements 23 of subsection a. of this section, proof that an applicant for licensure 24 holds a current license in a state which has standards substantially 25 equivalent to those of this State. [The board shall issue a temporary license to an applicant 26 d. 27 who meets the requirements of paragraphs (1), (2) and (3) of 28 subsection a. of this section and who is either waiting to take the 29 first scheduled examination following completion of an approved program or is awaiting the results of the examination. 30 The 31 temporary license shall expire upon the applicant's receipt of 32 notification of failure to pass the examination.] (Deleted by 33 amendment, P.L., c.)(pending before the Legislature as this 34 bill) 35 e. A physician assistant who notifies the board in writing on 36 forms prescribed by the board may elect to place the physician assistant's license on inactive status. A physician assistant with an 37 38 inactive license shall not be subject to the payment of renewal fees 39 and shall not practice as a physician assistant. A licensee who 40 engages in practice while the physician assistant's license is lapsed or on inactive status shall be deemed to have engaged in 41 42 professional misconduct in violation of subsection e. of section 8 of 43 P.L.1978, c.73 (C.45:1-21) and shall be subject to disciplinary 44 action by the committee pursuant to P.L.1978, c.73 (C.45:1-14 et 45 seq.). A physician assistant requesting restoration from an inactive 46 status shall be required to pay the current renewal fee and shall be

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1 required to meet the criteria for renewal as specified by the board. 2 (cf: P.L.1993, c.337, s.1) 3 4 3. Section 6 of P.L.1991, c.378 (C.45:9-27.15) is amended to 5 read as follows: 6. a. A physician assistant may practice in all medical care 6 settings, including, but not limited to, a physician's office, a health 7 care facility, an institution, a veterans' home, or a private home, 8 9 provided that: 10 (1) the physician assistant [is] <u>practices medicine</u> under the 11 [direct] supervision of a physician pursuant to section 9 of [this 12 act] P.L.1991, c.378 (C.45:9-27.18); 13 (2) the practice of the physician assistant is limited to those 14 procedures that are delegated to the physician assistant by the 15 supervising physician, as authorized under section 7 of [this act] 16 P.L.1991, c.378 (C.45:9-27.16); 17 (3) [an appropriate notice of employment has been filed with 18 the board pursuant to subsection b. of section 5 of this act;] (Deleted by amendment, P.L. , c.)(pending before the 19 20 Legislature as this bill) 21 (4) the supervising physician or physician assistant advises the 22 patient at the time that services are rendered that they are to be 23 performed by the physician assistant; 24 (5) the physician assistant conspicuously wears an identification 25 tag using the term "physician assistant" whenever acting in that 26 capacity; and 27 (6) any entry by a physician assistant in a clinical record is appropriately signed and followed by the designation, ["PA-C."] 28 "<u>PA-C</u>" or "PA." 29 30 b. Any physician assistant who practices in violation of any of 31 the conditions specified in subsection a. of this section shall be 32 deemed to have engaged in professional misconduct in violation of 33 subsection f. of section 8 of P.L.1978, c.73 (C.45:1-21). 34 (cf: P.L.1992, c.102, s.4) 35 36 4. Section 7 of P.L.1991, c.378 (C.45:9-27.16) is amended to 37 read as follows: 38 7. a. A physician assistant may perform [the following] procedures: <u>those duties and responsibilities, including the</u> 39 40 ordering, prescribing, dispensing, and administering of drugs and 41 medical devices, that are delegated by the supervising physician. A 42 physician assistant may provide any medical service that is 43 delegated by the supervising physician when the service is within 44 the physician assistant's skills, forms a component of the supervising physician's scope of practice, and is provided under the 45 46 physician's supervision. A physician assistant may perform a task 47 that is not within the supervising physician's scope of practice,

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provided that the supervising physician has adequate training, 1 2 oversight skills, and supervisory and referral arrangements to 3 ensure competent provision of the service by the physician 4 assistant. 5 (1) [Approaching a patient to elicit a detailed and accurate 6 history, perform an appropriate physical examination, identify 7 problems, record information and interpret and present information 8 to the supervising physician;] (Deleted by amendment, P.L., c.) 9 (pending before the Legislature as this bill) (2) [Suturing and caring for wounds including removing sutures 10 11 and clips and changing dressings, except for facial wounds, 12 traumatic wounds requiring suturing in layers and infected 13 wounds; [(Deleted by amendment, P.L., c.) (pending before the 14 Legislature as this bill) 15 (3) **[**Providing patient counseling services and patient education 16 consistent with directions of the supervising physician;] (Deleted 17 by amendment, P.L., c.)(pending before the Legislature as this 18 bill) 19 (4) [Assisting a physician in an inpatient setting by conducting 20 patient rounds, recording patient progress notes, determining and 21 implementing therapeutic plans jointly with the supervising 22 physician and compiling and recording pertinent narrative case summaries;] (Deleted by amendment, P.L., c.)(pending before 23 24 the Legislature as this bill) 25 (5) [Assisting a physician in the delivery of services to patients 26 requiring continuing care in a private home, nursing home, 27 extended care facility or other setting, including the review and 28 monitoring of treatment and therapy plans;] (Deleted by 29 amendment, P.L., c.)(pending before the Legislature as this 30 bill) 31 (6) [Facilitating the referral of patients to, and promoting their 32 awareness of, health care facilities and other appropriate agencies 33 and resources in the community; and] (Deleted by amendment, 34 P.L., c.)(pending before the Legislature as this bill) 35 (7) **[**Such other procedures suitable for discretionary and routine 36 performance by physician assistants as designated by the board pursuant to subsection a. of section 15 of this act.] (Deleted by 37 amendment, P.L. , c.)(pending before the Legislature as this 38 39 <u>bill)</u> 40 b. **[**A physician assistant may perform the following procedures only when directed, ordered or prescribed by the 41 42 supervising physician or specified in accordance with protocols 43 promulgated pursuant to subsection c. of section 15 of this act:] 44 (Deleted by amendment, P.L., c.)(pending before the Legislature 45 as this bill)

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1 (1) [Performing non-invasive laboratory procedures and related 2 studies or assisting duly licensed personnel in the performance of 3 invasive laboratory procedures and related studies;] (Deleted by 4 amendment, P.L., c.)(pending before the Legislature as this 5 bill) 6 (2) **[**Giving injections, administering medications and 7 requesting diagnostic studies;] (Deleted by amendment, P.L. 8 c.) (pending before the Legislature as this bill) (3) [Suturing and caring for facial wounds, traumatic wounds 9 10 requiring suturing in layers and infected wounds;] (Deleted by 11 amendment, P.L., c.)(pending before the Legislature as this 12 bill) 13 (4) [Writing prescriptions or ordering medications in an 14 inpatient or outpatient setting in accordance with section 10 of this 15 act; and [(Deleted by amendment, P.L., c.) (pending before the 16 Legislature as this bill) 17 (5) [Such other procedures as may be specified in accordance with protocols promulgated in accordance with subsection b. of 18 19 section 15 of this act.] (Deleted by amendment, P.L., c.) 20 (pending before the Legislature as this bill) 21 A physician assistant may assist a supervising surgeon in c. 22 the operating room when a qualified assistant physician is not 23 required by the board and a second assistant is deemed necessary by 24 the supervising surgeon.] (Deleted by amendment, P.L., c.) 25 (pending before the Legislature as this bill) 26 (cf: P.L.1998, c.125, s.1) 27 28 5. Section 8 of P.L.1991, c.378 (C.45:9-27.17) is amended to 29 read as follows: 30 8. a. **[**A physician may delegate to a physician assistant under 31 his supervision only those procedures identified in section 7 of this 32 act.] (Deleted by amendment, P.L., c.)(pending before the 33 Legislature as this bill) b. Any physician who permits a physician assistant under [his] 34 35 the physician's supervision to practice contrary to the provisions of 36 this act shall be deemed to have engaged in professional misconduct in violation of subsection e. of section 8 of P.L.1978, c.73 (C.45:1-37 38 21) and shall be subject to disciplinary action by the board pursuant 39 to P.L.1978, c.73 (C.45:1-14 et seq.); 40 c. In the performance of [a medical procedure] all practice-41 related activities, including, but not limited to, the ordering of 42 diagnostic, therapeutic, and other medical services, a physician 43 assistant shall be conclusively presumed to be the agent of the 44 physician under whose supervision the physician assistant is 45 [performing] practicing medicine.

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1 d. A physician who supervises a physician assistant shall 2 maintain a written agreement with the physician assistant. The 3 agreement shall state that the physician will exercise supervision 4 over the physician assistant in accordance with the provisions of 5 P.L.1991, c.378 (C.45:9-27.10 et seq.) and any rules adopted by the 6 board and will retain professional and legal responsibility for the 7 care rendered by the physician assistant. The agreement shall be 8 signed by the physician and the physician assistant. The agreement 9 shall be kept on file at the practice site and made available to the 10 board upon request. 11 (cf: P.L.1991, c.378, s.8) 12 13 6. Section 9 of P.L.1991, c.378 (C.45:9-27.18) is amended to 14 read as follows: 15 9. a. A physician assistant and a temporary licensed physician 16 assistant] shall be under the [direct] supervision of a physician at 17 all times during which the physician assistant [or temporary 18 licensed physician assistant] is working in [his] an official 19 capacity. 20 b. [In an inpatient setting, direct supervision] Supervision of a 21 physician assistant shall [include, but not be limited to:] be 22 continuous but shall not be construed as necessarily requiring the 23 physical presence of the supervising physician, provided that the 24 supervising physician and physician assistant are or can be easily in 25 contact with each other by electronic communication. 26 (1) [continuing or intermittent presence with constant 27 availability through electronic communications; [(Deleted by 28 amendment, P.L., c.)(pending before the Legislature as this 29 bill) 30 (2) **[**regularly scheduled review of the practice of the physician 31 assistant; and [(Deleted by amendment, P.L., c.)(pending 32 before the Legislature as this bill) 33 (3) [personal review by a physician of all charts and records of 34 patients and countersignature by a physician of all medical orders, 35 including prescribing and administering medication, within 24 36 hours of their entry by the physician assistant.] (Deleted by 37 amendment, P.L., c.)(pending before the Legislature as this 38 bill) 39 In an outpatient setting, direct supervision of a physician c. 40 assistant shall include, but not be limited to:] (Deleted by 41 amendment, P.L. , c.)(pending before the Legislature as this 42 bill) 43 (1) [constant availability through electronic communications;] 44 (Deleted by amendment, P.L. , c.)(pending before the 45 Legislature as this bill)

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1 (2) **[**regularly scheduled review of the practice of the physician 2 assistant; and] (Deleted by amendment, P.L., c.)(pending 3 before the Legislature as this bill) 4 (3) [personal review by a physician of the charts and records of 5 patients and countersignature by a physician of all medical orders, within seven days of their entry by the physician assistant, except 6 7 that in the case of any medical order prescribing or administering 8 medication, a physician shall review and countersign the order 9 within 48 hours of its entry by the physician assistant.] (Deleted by amendment, P.L., c.)(pending before the Legislature as this 10 11 bill) 12 In any setting, direct supervision of a temporary licensed d. 13 physician assistant shall include, but not be limited to:] (Deleted by 14 amendment, P.L., c.)(pending before the Legislature as this 15 bill) 16 (1) [continuing physical presence of a physician or a licensed 17 physician assistant;] (Deleted by amendment, P.L., c.)(pending 18 before the Legislature as this bill) 19 (2) **[**regularly scheduled review by a physician of the practice of 20 the temporary licensed physician assistant; and] (Deleted by amendment, P.L. , c.)(pending before the Legislature as this 21 22 bill) 23 (3) [personal review by a physician of all charts and records of 24 patients within 24 hours of an entry by the temporary licensed 25 physician assistant.] (Deleted by amendment, P.L., c.)(pending 26 before the Legislature as this bill) 27 e. It is the obligation of each supervising physician and 28 physician assistant to ensure that: (1) the physician assistant's 29 scope of practice is identified; (2) delegation of medical tasks is 30 appropriate to the physician assistant's level of competence; (3) the 31 relationship of, and access to, the supervising physician is defined; 32 and (4) a process for evaluation of the physician assistant's 33 performance is established. 34 (cf: P.L.1998, c.125, s.2) 35 36 7. Section 10 of P.L.1991, c.378 (C.45:9-27.19) is amended to 37 read as follows: 38 10. A physician assistant [treating a patient in an inpatient or 39 outpatient setting] may order [or], prescribe, dispense, and administer medications [, subject to the following conditions:] and 40 41 medical devices to the extent delegated by a supervising physician. 42 [controlled] Controlled dangerous substances may only be a. 43 ordered or prescribed if: 44 (1) a supervising physician has authorized a physician assistant 45 to order or prescribe Schedule II, III, IV or V controlled dangerous 46 substances [in order to:];

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1 (a) **[**continue or reissue an order or prescription for a controlled 2 dangerous substance issued by the supervising physician;] (Deleted 3 by amendment, P.L., c.)(pending before the Legislature as this 4 bill) 5 (b) **[**otherwise adjust the dosage of an order or prescription for a 6 controlled dangerous substance originally ordered or prescribed by 7 the supervising physician, provided there is prior consultation with 8 the supervising physician; (Deleted by amendment, P.L., c.) 9 (pending before the Legislature as this bill) 10 (c) **[**initiate an order or prescription for a controlled dangerous substance for a patient, provided there is prior consultation with the 11 12 supervising physician if the order or prescription is not pursuant to 13 subparagraph (d) of this paragraph; or] (Deleted by amendment, 14 P.L. , c.)(pending before the Legislature as this bill) 15 (d) **[**initiate an order or prescription for a controlled dangerous substance as part of a treatment plan for a patient with a terminal 16 17 illness, which for the purposes of this subparagraph means a 18 medical condition that results in a patient's life expectancy being 12 19 months or less as determined by the supervising physician; 20 (Deleted by amendment, P.L., c.)(pending before the 21 Legislature as this bill) 22 (2) the physician assistant has registered with, and obtained 23 authorization to order or prescribe controlled dangerous substances 24 from, the federal Drug Enforcement Administration, and any other 25 appropriate State and federal agencies; and 26 (3) the physician assistant complies with **[**all requirements 27 which the board shall establish by regulation for the administration 28 of controlled dangerous substances pursuant to section 15 of 29 P.L.1991, c.378 (C.45:9-27.24) and applicable requirements with 30 respect to educational programs approved by the board pursuant to 31 section 17 of P.L.1991, c.378 (C.45:9-27.26) and continuing 32 professional education programs approved pursuant to section 16 of 33 P.L.1991, c.378 (C.45:9-27.25); 34 b. **[**the order or prescription is administered in accordance with 35 protocols or specific physician direction pursuant to subsection b. of 36 section 7 of P.L.1991, c.378 (C.45:9-27.16); <u>(Deleted by</u> 37 amendment, P.L., c.)(pending before the Legislature as this 38 bill) 39 [the prescription states whether it is written pursuant to c. 40 protocol or specific physician direction; and [(Deleted by 41 amendment, P.L. , c.)(pending before the Legislature as this 42 bill) 43 [the physician assistant signs his own name, prints his name d. 44 and license number and prints the supervising physician's name, and 45 in the case of an order or prescription for a controlled dangerous 46 substance, prints the physician assistant's Drug Enforcement

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1 Administration registration number.] (Deleted by amendment, 2 P.L., c.)(pending before the Legislature as this bill) 3 e. The dispensing of medication or a medical device by a 4 physician assistant shall comply with relevant federal and State 5 regulations, and shall occur only if: (1) pharmacy services are not 6 reasonably available; (2) it is in the best interest of the patient; or 7 (3) the physician assistant is rendering emergency medical 8 assistance. 9 f. A physician assistant may request, receive, and sign for 10 prescription drug samples and may distribute those samples to 11 patients. 12 (cf: P.L.2005, c.48, s.1) 13 14 8. Section 12 of P.L.1991, c.378 (C.45:9-27.21) is amended to 15 read as follows: 16 12. The committee shall annually elect from among its members 17 a president and vice-president. The committee shall meet [at least twice each year] monthly and may hold additional meetings, as 18 19 necessary to discharge its duties. In addition to such meetings, the 20 committee shall meet at the call of the president, the board, or the 21 Attorney General. 22 (cf: P.L.1992, c.102, s.7) 23 24 9. Section 14 of P.L.1991, c.378 (C.45:9-27.23) is amended to 25 read as follows: 26 14. a. The committee may have the following powers and 27 duties, as delegated by the board: 28 (1) to evaluate and pass upon the qualifications of candidates for 29 licensure; 30 (2) to take disciplinary action, in accordance with P.L.1978, 31 c.73 (C.45:1-14 et seq.) against a physician assistant who violates 32 any provision of this act; and (3) Ito adopt and administer the examination to be taken by 33 34 applicants for licensure; and] (Deleted by amendment, P.L., c.) 35 (pending before the Legislature as this bill) 36 (4) subject to the requirements of section 16 of [this act] 37 P.L.1991, c.378 (C.45:9-27.25), to adopt standards for and approve 38 continuing education programs 39 b. In addition to the powers and duties specified in subsection 40 a. of this section, the committee may make recommendations to the 41 board regarding any subjects pertinent to this act or to the practice 42 of physician assistants. 43 (cf: P.L.1992, c.102, s.9) 44 45 10. Section 17 of P.L.1991, c.378 (C.45:9-27.26) is amended to read as follows: 46

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17. **[**The**]** In consultation with the committee, the board shall, in 1 2 addition to such other powers and duties as it may possess by law: a. Administer and enforce the provisions of [this act] 3 4 P.L.1991, c.378 (C.45:9-27.10 et seq.); b. Adopt and promulgate rules and regulations, pursuant to the 5 "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et 6 7 seq.), to effectuate the purposes of [this act] P.L.1991, c.378 8 (C.45:9-27.10 et seq.); 9 c. Establish professional standards for persons licensed under 10 [this act] P.L.1991, c.378 (C.45:9-27.10 et seq.); 11 d. Conduct hearings pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.), except that the board 12 13 shall have the right to administer oaths to witnesses, and shall have 14 the power to issue subpoenas for the compulsory attendance of 15 witnesses and the production of pertinent books, papers, or records; e. 16 Conduct proceedings before any board, agency, or court of 17 competent jurisdiction for the enforcement of the provisions of 18 [this act] P.L.1991, c.378 (C.45:9-27.10 et seq.); 19 f. Evaluate and pass upon the qualifications of candidates for 20 licensure; 21 g. Establish standards for and approve educational programs 22 for physician assistants as required by paragraph (3) of subsection a. of section 4 of this act; [(Deleted by amendment, P.L., c.)) 23 24 (pending before the Legislature as this bill) 25 h. **[**Adopt and administer the examination to be taken by applicants for licensure;] (Deleted by amendment, P.L., c.) 26 27 (pending before the Legislature as this bill) Subject to the requirements of section 16 of [this act] 28 i. 29 P.L.1991, c.378 (C.45:9-27.25), establish standards for and approve 30 continuing education programs; and Have the enforcement powers provided pursuant to 31 j. 32 P.L.1978, c.73 (C.45:1-14 et seq.). 33 (cf: P.L.1992, c.102, s.12) 34 35 11. (New section) a. A physician assistant licensed in this State, 36 or licensed or authorized to practice in any other jurisdiction of the 37 United States or credentialed as a physician assistant by a federal 38 employer, who is responding to a need for medical care created by an emergency or a State or local disaster, excluding an emergency 39 40 situation that occurs in the place of the physician assistant's 41 employment, may render such care as the physician assistant is able 42 to provide without supervision, or with such supervision as is 43 available. 44 b. A physician who supervises a physician assistant providing 45 medical care in response to an emergency or a State or local disaster 46 shall not be required to meet the requirements set forth for a 47 supervising physician in P.L.1991, c.378 (C.45:9-27.10 et seq.).

c. A physician assistant licensed in this State, or licensed or 1 2 authorized to practice in any other jurisdiction of the United States, 3 who voluntarily and gratuitously, and other than in the ordinary 4 course of employment or practice, renders emergency medical 5 assistance, shall not be liable for civil damages for any personal injury that results from an act or omission by the physician assistant 6 7 in rendering emergency care that may constitute ordinary 8 negligence. The immunity granted by this section shall not apply to 9 an act or omission constituting gross, willful, or wanton negligence 10 or when the medical assistance is rendered at a hospital, physician's 11 office, or other health care delivery entity where those services are 12 normally rendered. A physician who supervises a physician 13 assistant voluntarily and gratuitously providing emergency care as 14 described in this subsection shall not be liable for civil damages for 15 any personal injury that results from an act or omission by the 16 physician assistant rendering emergency care.

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18 12. Section 4 of P.L.1983, c.308 (C.26:6-8.1) is amended to read19 as follows:

20 4. a. Where there has been an apparent death that is not governed by the provisions of section 4 of P.L.1991, c.90 (C.26:6A-21 22 4), a registered professional nurse licensed by the New Jersey Board 23 of Nursing under P.L.1947, c.262 (C.45:11-23 et seq.) , or a 24 physician assistant licensed pursuant to P.L.1991, c.378 (C.45:9-25 27.10 et seq.) may make the actual determination and 26 pronouncement of death and shall attest to this pronouncement by: 27 signing in the space designated for this signature on the certificate 28 of death under R.S.26:6-7; or, for the purposes of the NJ-EDRS, 29 transmitting orally or in writing a report of the pronouncement to 30 the attending, covering or resident physician, or the county medical 31 examiner.

b. (Deleted by amendment, P.L.2006, c.86).

33 (cf: P.L.2006, c.86, s.1)

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35 13. Section 1 of P.L.1988, c.125 (C.26:6-8.2) is amended to read
36 as follows:

37 1. If the attending physician, registered professional nurse, 38 physician assistant, or State or county medical examiner who makes 39 the actual determination and pronouncement of death determines or 40 has knowledge that the deceased person was infected with human 41 immunodeficiency virus (HIV) or hepatitis B virus or that the 42 deceased person suffered from acquired immune deficiency 43 syndrome (AIDS), AIDS related complex (ARC), or any of the 44 contagious, infectious, or communicable diseases as shall be 45 determined by the Commissioner of the Department of Health, the 46 attending physician, registered professional nurse, physician 47 assistant, or State or county medical examiner shall immediately

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place with the remains written notification of the condition and 1 2 shall provide written notification of the condition to the funeral 3 director who is responsible for the handling and the disposition of 4 the body. 5 (cf: P.L.1988, c.125, s.1) 6 7 14. The following sections are repealed: 8 Section 5 of P.L.1991, c.378 (C.45:9-27.14); 9 Section 15 of P.L.1991, c.378 (C.45:9-27.24); and 10 Section 3 of P.L.1993, c.337 (C.45:9-27.19a) 11 12 15. This act shall take effect on the first day of the seventh 13 month next following the date of enactment, but the State Board of 14 Medical Examiners and the Physician Assistant Advisory 15 Committee may take such anticipatory administrative action in advance thereof as shall be necessary for the implementation of this 16 17 act. 18 19 20 **STATEMENT** 21 22 This bill amends the "Physician Assistant Licensing Act" to 23 revise the licensure requirements for physician assistants and 24 creates a physician-delegated scope of practice. 25 The bill revises the permitted practices of a physician assistant to those duties and responsibilities that are delegated by the 26 27 supervising physician. A physician assistant may provide any 28 medical service that is delegated by the supervising physician, 29 including prescribing, dispensing, and administering medications 30 and medical devices, so long as the service is within the physician 31 assistant's skills, forms a component of the supervising physician's 32 scope of practice, and is provided under physician supervision. The 33 bill repeals section 3 of P.L.1993, c.337, which requires that a 34 supervising physician countersign a physician assistant's order for 35 The bill provides that a physician assistant may medication. 36 dispense medications only if: (1) pharmacy services are not 37 reasonably available; (2) it is in the best interest of the patient; or 38 (3) the physician assistant is providing emergency medical 39 assistance. The bill also authorizes a physician assistant to request, 40 receive, and sign for prescription drug samples and distribute those 41 samples to patients, and to pronounce death. Current law provides a 42 more limited scope of practice, specifying a list of permitted tasks. 43 The bill repeals section 5 of P.L.1991, c.378, which requires that a 44 physician assistant's employer file a notice of employment with the 45 State Board of Medical Examiners (BME). 46 The bill requires that a physician who supervises a physician

47 assistant maintain a written agreement with the physician assistant

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stating that the physician will supervise the physician assistant in 1 2 accordance with State law and regulation, and will retain 3 professional and legal responsibility for the care rendered by the 4 physician assistant. The bill aligns the level of contact between a 5 supervising physician and physician assistant in outpatient and The bill requires continuous supervision, 6 inpatient settings. 7 allowing the need for the physical presence of the physician to be 8 determined at the practice level as long as easy electronic 9 communication is possible. The bill provides that it is the 10 obligation of each supervising physician and physician assistant to 11 (1) the physician assistant's scope of practice is ensure that: 12 identified; (2) delegation of medical tasks is appropriate to the 13 physician assistant's level of competence; (3) the relationship of, 14 and access to, the supervising physician is defined; and (4) a 15 process for evaluation of the physician assistant's performance is 16 established.

17 The bill requires that educational programs for physician 18 assistants required for licensure be accredited by the Accreditation 19 Review Commission on Education for the Physician Assistant, rather than approved by the BME. The bill no longer permits the 20 21 temporary licensure of individuals who have not yet passed the 22 national certifying examination. It provides the ability for a 23 physician assistant to place the physician assistant's license on 24 inactive status by notifying the committee on forms prescribed by 25 the committee.

The bill requires that the BME consult with the committee in exercising its powers under the act, and it repeals section 15 of P.L.1991, c.378, which requires the BME to give consideration to advice from the committee on certain matters, as this provision is obviated by the bill. It also requires the committee to meet at least monthly, rather than twice each year.

The bill provides that the normal requirements for physician supervision are suspended in the case of a physician assistant who is responding to a need for medical care created by an emergency or disaster. The bill provides a physician assistant or supervising physician immunity from civil damages for a personal injury that results from an act or omission by those persons rendering emergency care that constitute ordinary negligence.

The bill deletes several language provisions obviated by other
provisions of the bill, and makes several grammatical changes in
existing statutory language.

ASSEMBLY HEALTH AND SENIOR SERVICES COMMITTEE

STATEMENT TO

ASSEMBLY, No. 1950

with committee amendments

STATE OF NEW JERSEY

DATED: FEBRUARY 5, 2015

The Assembly Health and Senior Services Committee reports favorably and with committee amendments Assembly Bill No. 1950.

As amended, this bill revises the licensure requirements for physician assistants under the "Physician Assistant Licensing Act," and authorizes the creation of an expanded, physician-delegated scope of practice.

In particular, the bill: permits physician assistants to practice within the scope of duties specified in a written delegation agreement with a supervising physician; revises the requirements for physician supervision of physician assistants; revises the authority of physician assistants to prescribe, order, and dispense controlled dangerous substances; and makes certain revisions to physician assistant licensure requirements.

Delegation Agreements and Scope of Physician Assistant Practice

In addition to the enumerated permitted practices that a physician assistant is already authorized by law to undertake, the amended bill authorizes a physician assistant to perform any duties delegated to the physician assistant by a supervising physician, as outlined in a written delegation agreement. The duties and responsibilities delegated to a physician assistant would be limited to those procedures that are customary to the supervising physician's specialty, and that are within the supervising physician's and the physician assistant's competence and training.

Any delegation agreement established under the bill would be required to meet certain requirements, including: (1) stating that the physician will supervise the physician assistant in accordance with State law and regulation; (2) identifying the physician assistant's role in the practice, including any specific aspects of care that require prior consultation with the supervising physician; (3) indicating whether the supervising physician is required to personally review patient charts and records, or to countersign for medical services performed under the delegation agreement, and indicating the timeframe in which review and countersignature must be completed; if the delegation agreement does not require review or countersignatures, it must include an express provision stating as such; (4) identify the practice locations where the physician assistant may practice under the delegation agreement; (5) be signed and dated annually by the physician and physician assistant, and updated as necessary; and (6) be retained on file at the practice site and provided to the Physician Assistant Advisory Committee, which will retain the agreement on file.

It will be the obligation of each supervising physician and physician assistant to ensure that the physician assistant's scope of practice is identified, that the delegation of medical tasks is appropriate to the physician assistant's level of competence, that the relationship of, and the physician assistant's access to, the supervising physician is defined, and that a process for evaluating the physician assistant's performance is established.

As amended, the bill requires a physician assistant to enter into a separate delegation agreement with each physician who delegates authority to the physician assistant; however, a single-specialty physician practice would be authorized to execute a delegation agreement with a physician assistant, on behalf of two or more delegating physicians, provided that the agreement is signed by all of the delegating physicians who are supervising the physician assistant. In the case of a multi-specialty physician practice, a written delegating physicians who are supervising the physician specialty within the practice, provided that the agreement is signed by all of the delegating physicians who are supervising the physician specialty within the practice, provided that the agreement is signed by all of the delegating physicians who are supervising the physician assistant in that specialty area. However, nothing in the bill would authorize the execution of a global written delegation agreement between a physician assistant and a multi-specialty physician practice.

The bill repeals section 5 of P.L.1991, c.378, which requires that a physician assistant's employer file a notice of employment with the State Board of Medical Examiners (BME).

The bill also permits physician assistants to make determinations and pronouncements of death, and to attest to the determination or pronouncement on certifications of death.

Supervision of Physician Assistants

As amended, the bill also provides that the level of contact required between a supervising physician and physician assistant will be the same in both inpatient and outpatient settings; currently, there are slightly different levels of contact required in each setting. In particular, the bill requires a physician assistant who is working in either type of setting to be under the continuous supervision of a physician, but specifies that "continuous supervision" need not be construed as requiring the physical presence of the supervising physician, so long as the supervising physician and the physician assistant maintain contact through electronic or other means of communication.

The bill additionally provides that the physician supervision requirement under current law is suspended when a physician assistant is responding to a need for medical care that is created by an emergency or disaster, and provides such care outside a setting where health care services are ordinarily provided. The bill also provides a physician assistant or supervising physician rendering emergency care is immune from civil damages for any personal injury resulting from an act or omission of constituting ordinary negligence.

Physician Assistant Prescribing Authority

As amended, the bill authorizes a physician assistant to order, prescribe, dispense, and administer medications and medical devices to the extent delegated by a supervising physician. The bill additionally provides that a physician assistant may only dispense medications or medical devices if such dispensation is undertaken in accordance with applicable laws and regulations and: (1) pharmacy services are not reasonably available; (2) such action is in the best interest of the patient; or (3) the physician assistant is providing emergency medical assistance. The bill also authorizes a physician assistant to request, receive, and sign for prescription drug samples and distribute those samples to patients.

The bill does not revise the current requirement that a physician assistant is authorized to order or prescribe a controlled dangerous substance only if: (1) the physician assistant has registered with the federal Drug Enforcement Administration and any other appropriate State or federal agencies; (2) the physician assistant complies with all requirements established by the BME for the ordering, prescription, and administration of controlled substances, as well as with applicable educational requirements; and (3) the supervising physician has authorized the physician assistant to order or prescribe controlled substances in order to: (a) continue, reissue, or adjust the dosage of an order or prescription that was previously issued by the physician, (b) initiate an order or prescription for a controlled dangerous substance as part of a treatment plan for a terminally ill patient, or (c) initiate an order or prescription for a patient suffering from a non-terminal illness after consultation with the supervising physician.

The bill repeals section 3 of P.L.1993, c.337, which concerns countersignatures for prescriptions issued by physician assistants with temporary licensure, as the bill eliminates the issuance of temporary licenses entirely.

Licensure Requirements

In addition to authorizing an expanded scope of practice for

physician assistants, the bill alters certain licensure and license renewal requirements. In particular, the bill no longer permits the temporary licensure of persons who have not yet passed the national certifying examination, but provides that a physician assistant may place a license on inactive status through the submission of notice to the BME. The bill also requires that educational programs required for the licensure of physician assistants be accredited by the Accreditation Review Commission on Education for the Physician Assistant, rather than approved by the Committee on Allied Health Education and Accreditation.

The bill requires that the BME consult with the Physician Assistant Advisory Committee in exercising its powers under the "Physician Assistant Licensing Act," and requires the committee to meet six times a year, rather than twice per year as required under current law. The bill repeals section 15 of P.L.1991, c.378, which requires the BME to consider advice from the committee when designating additional procedures and protocols regarding the scope of physician assistant practice, as the BME will no longer designate additional duties physician assistants are permitted to perform; any such additional duties will instead be set forth in a written delegation agreement.

This bill was pre-filed for introduction in the 2014-2015 session pending technical review. As reported, the bill includes the changes required by technical review, which has been performed.

COMMITTEE AMENDMENTS:

The committee amendments remove references to "the practice of medicine" and related phraseology as applied to physician assistants, and clarify that physician assistants are authorized to perform medical services within the physician assistant's education, training, competence, and experience, as well as within the scope of the supervising physician's specialty, competence, and training.

The committee amendments make the execution of delegation agreements discretionary, and clarify that a physician assistant may perform any of the procedures set forth under current law, as well as any procedures identified in a written delegation agreement. The amendments also restore the enumerated list of procedures a physician assistant may perform and certain language concerning a physician assistant's ability to order or prescribe controlled dangerous substances, which was deleted in the bill as introduced.

The committee amendments require delegation agreements to include information that identifies the physician assistant's role in practice, as well as the level of oversight required by the supervising physician, and the practice locations where the physician assistant may practice. The committee amendments require a physician assistant to sign a separate delegation agreement with each physician who delegates authority to the physician assistant, and provides certain exceptions to for single-specialty physician practices and certain multispecialty physician practices. The amendments also require delegation agreements be signed annually, kept on file at the practice site, updated as necessary to reflect changes in the scope of the delegation, and be provided to, and retained by, the Physician Assistant Advisory Committee.

The committee amendments clarify that a physician's supervision of a physician assistant must be continuous, but does not require the physician be physically present, provided that the physician and physician assistant maintain contact through electronic or other means of communication.

The committee amendments permit physician assistants to prescribe patient restraints, and to determine and pronounce death and attest to such on death certificates.

The committee amendments require a physician assistant to be covered by medical malpractice liability insurance or a letter of credit.

The committee amendments require a physician assistant to wear an identification card with the term "physician assistant," or the designation, "PA-C" or "PA."

The committee amendments increase the number of times the Physician Assistant Advisory Committee must meet each year from two to six.

The committee amendments restructure section 12 of the bill, as amended, concerning emergency medical services provided by physician assistants and civil immunity for such services, to clarify the applicability of the section.

The committee amendments make certain technical corrections to internal cross references within the bill, including updating references to sections repealed or deleted by the bill.

STATEMENT TO

[First Reprint] ASSEMBLY, No. 1950

with Assembly Floor Amendments (Proposed by Assemblyman CONAWAY)

ADOPTED: DECEMBER 17, 2015

These floor amendments provide that physician assistants may not perform certain tasks that fall within the scope of licensed optometry, including measuring the powers or range of human vision, determining the accommodation and refractive states of the human eye, and fitting, prescribing, or adapting lenses, prisms, or frames for the aid of human vision. Nothing in the amendments is to be construed to prohibit physician assistants from performing routine visual screenings.

The floor amendments make certain technical corrections to the bill to make it identical to Senate Bill No. 1184(2R).

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Trenton , NJ – Furthering his administration's commitment to New Jersey's veterans and military personnel Chris Christie took action today on legislation from the 216th Legislative Session, including 11 legislative m	32000FV [pul 27KB]
designed to assist both active military members and veterans, along with their families.	A3806PV A4271PV
"From the very start of this administration, we have focused on serving the needs of our veterans and the r women still in active duty, assisting them with everything from securing jobs to finding the proper health car services," said Governor Christie. "The bills I signed today continue to make good on our promise to help th have given so much of themselves to defend and serve this nation find a seamless transition back to civilia receive a helping-hand, when needed, no matter how long after their discharge from the military."	nen and re and social hose who
The enacted legislation includes:	
• S-172/A-2276 (Whelan, Beach/DeAngelo, Quijano) - Exempts disabled veterans and Purple Heart rec payment of municipal parking meter fees when their vehicles bear a disable veteran's or Purple Heart licen placard issued by New Jersey Motor Vehicle Commission	
S-2972/A-4465 (Van Drew, Cruz-Perez/Andrzejczak, Tucker, Benson) - Requires DMVA assist and m veterans through criminal justice system	ientor
• A-1667/S-2155 (Johnson, DeAngelo, Andrzejczak, Mukherji, Pintor Marin/Van Drew, A.R. Bucco) - child whose parent or guardian is ordered into active military service to remain enrolled in school district wh parent or guardian resided prior to active military service	
A-2935/S-1325 (Andrzejczak, Lagana, Webber, Mosquera, Lampitt/Van Drew, A.R. Bucco) - Authori tax deferment for deployed military personnel	izes property
 A-2299/S-239 (Andrzejczak, Benson/Van Drew, Stack) - Requires municipalities to exempt 100% disa veterans from construction permit surcharge fees for improvements to promote living unit accessibility; app \$20,000 for municipal reimbursements 	
A-3552/S-2636 (Mazzeo, Andrzejczak, Mukherji, Benson/Beach, Van Drew) - Creates financial plann assistance program for disabled veterans and their caregivers	ning
• A-3554/S-2606 (Mazzeo, Andrzejczak, Mukherji, Benson, Danielsen/Beach, Cruz-Perez) - Increases eligibility cap to receive respite care for certain veterans	s income

• AS for A-3750/S-2569 (Lampitt, Tucker, Andrzejczak, Singleton, Mosquera/Beach, Allen) - Requires Adjutant General to create informational webpage for women veterans

• A-4148/S-2731 (Andrzejczak, Benson/Van Drew, Beach) - Provides an excused absence on Veterans Day for pupil who participates in certain activities for veterans or active duty members of United States Armed Forces or New Jersey National Guard

A-4323/S-2952 (DeAngelo, Lagana, Muoio, Benson/Beach, Whelan) - Expands timeframe for renewal of driver's license, registration, and inspection by military personnel and immediate family members under certain circumstances.

• AJR-117/SJR-85 (Tucker, Holley, Vainieri Huttle/Beach, Whelan, Madden) - Urges Congress to restore funding to Vets4Warriors veteran suicide hotline

The Governor also took the following action on other pending legislation:

BILL SIGNINGS:

BILL SIGNINGS:

S-451/A-1103 (Ruiz, Allen/Vainieri Huttle, Singleton, Benson) - Establishes Office of the Special Education
Ombudsman in DOE

• S-485/A-1976 (Cunningham, Ruiz/Lampitt, Mosquera, Quijano) -Requires president of public institution of higher education to regularly report on-campus criminal and fire events to the institution's governing board

 S-489/A-4926 (Cunningham, T. Kean/Diegnan, Mukherji, Benson) - Authorizes institutions of higher education to grant college credit to high school students who complete the Jersey Boys State or Jersey Girls State program

• S-832/A-2039 (Whelan, Beach/Moriarty, Stender, Garcia) - Permits voter registration of certain persons at age 17 for voting at next election occurring on or after 18th birthday

• S-1046/A-2721 (Turner, Scutari/Gusciora) - Concerns alterations in child support obligations in response to changes to status of supported child

• S-1184/A-1950 (Vitale, Beach/Conaway, Diegnan, Sumter, Danielsen) - Revises requirements for licensure and creates physician-delegated scope of practice for physician assistants

S-1346wGR/A-3837 (Rice/Coughlin, Garcia, Rodriquez-Gregg, Pintor Marin, Jasey) - Concerns the recording of mortgages

• S-1447/A-2829 (Greenstein, Addiego/Johnson, Mainor, Rible, Quijano) - Prohibits posting, publishing on the Internet, or disclosing certain information regarding law enforcement officers

• S-1567/A-410 (A.R. Bucco, Van Drew/A.M. Bucco, Bramnick, Johnson, Quijano, Rumana) - Establishes DOT roadside memorial program for fallen police officers, sheriff's officers, EMS workers, and firefighters; designated as "Patrolman Joseph Wargo's Law"

• S-1687/A-4924 (Ruiz, Vitale/Diegnan, Eustace) - Permits students made homeless by act of terrorism or natural disaster to attend tuition-free the school district in which they resided prior to being homeless for two school years after the event

• S-2032wGR/A-3440 (Codey, Turner/Diegnan, Eustace) - Requires DOE to review Core Curriculum Content Standards to ensure that they incorporate modern computer science standards where appropriate

• S-2110/A-3343 (Oroho/Space, Vainieri Huttle, Schaer, Phoebus, Pinkin) - Requires nursing homes to offer form designating beneficiary of personal needs allowance accounts from incoming and current residents

• S-2201/A-3273 (O'Toole/Russo, Rumana, Casagrande) - Authorizes youth camps to maintain supply of epinephrine and permit trained employees to administer epinephrine to camp members suffering from anaphylasis

• SCS for S-2251/A-3708 (Oroho, Barnes/Diegnan, Webber, Johnson, Space, Phoebus) - Increases monetary amounts for transfer of estate assets without administration and for exemption from debts of the deceased

• S-2260wGR/A-688 (Scutari, Cardinale/Schaer) - Modifies certain fees charged by, and requirements imposed on, check casher licensees

S-2284wGR/A-3549 (Pou, Weinberg/Schaer, Vainieri Huttle, Webber, Singleton, Jimenez, Johnson, Bramnick)
 Requires Medicaid managed care organizations to meet certain conditions prior to reducing reimbursement rates for personal care assistant services and home-based supportive care services

S-2442/A-3891 (T. Kean, Sarlo/Bramnick, Rodriquez-Gregg, Johnson, Casagrande, Schepisi) - Establishes NJ
Innovation and Research Fellowship Program in DOLWD

• S-2495/A-3868 (Codey, Rice/Conaway, Singleton, Eustace, Coughlin) - Authorizes State-chartered banks, savings banks, savings and loans, and credit unions to conduct certain savings account promotions

• S-2617/A-3944 (Cardinale/Garcia, McKeon, Auth, Eustace, Pinkin) - Requires DEP to adopt regulations to allow cultivation of commercial shellfish species in certain coastal and inner harbor waters for research, educational, or restoration purposes; requires community engagement process for revision thereof

• S-2627/A-3957 (Cardinale, Sacco/Schepisi, Auth, Eustace, Rumana, Johnson) - Designates State Highway Route 17 in Borough of Ramsey as "Staff Sergeant Timothy R. McGill Memorial Highway"

• S-2695/A-4110 (T. Kean, Sacco/Dancer, Benson, Jimenez, Johnson) - Requires MVC conduct study and make recommendations concerning electronic driver's licenses and mobile applications

S-2741/A-4213 (Doherty/Vainieri Huttle, Webber) - Permits unregulated solicitation to perform snow shoveling
within 24 hours of predicted snowstorm

• S-2787wGR/A-4273 (Sweeney/Singleton, Burzichelli, Giblin, Prieto, Wimberly) - Establishes vocational training pilot program in DOC; provides for inmate compensation for education and workforce training participation

• S-2880/A-4704 (Lesniak, T. Kean/Diegnan, Wisniewski) - Provides up to \$25 million in tax credits under Economic Redevelopment and Growth Grant Program for certain infrastructure at Rutgers, the State University of New Jersey

• S-2922/A-4925 (Ruiz, Turner/Diegnan, Jasey) - Requires DOE on its website to link to Department of Treasury's website where list is maintained of all third party individuals and vendors employed or retained for work associated with State assessments

S-2923/A-4901 (Ruiz, Turner/Jasey, Caputo) - Requires school district or charter school to provide notification to
parent or guardian of enrolled student on upcoming administration of State assessments or commercially-developed
standardized assessment

• S-2960/A-4331 (Codey, Rice/Garcia, Vainieri Huttle, Danielsen, DeAngelo, Holley, Benson, Mukherji) -

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Establishes requirements for training programs for homemaker-home health aides in care of patients with Alzheimer's disease and related disorders

• S-3019/A-4771 (Sweeney, Stack/Burzichelli, Muoio) - Requires filing of financial agreement for long term tax exemption with county finance officer and counsel; requires quarterly payment of county share of payment in lieu of tax

 S-3129/A-4728 (Madden, Cunningham/DeAngelo, Benson, Lampitt, Quijano) - Directs DOLWD to provide information regarding employee leave and benefit rights

S-3168/A-4769 (Sweeney, O'Toole/Burzichelli) - Limits increase in annual budget requests of certain county
entities

• S-3170/A-4768 (Pou, Bateman/Burzichelli) - Requires county superintendent of elections to operate pursuant to county administrative code; subjects certain salary costs of office of county superintendent of elections to review and approval by county governing body

· S-3171/A-4575 (Whelan, Oroho/Greenwald, Burzichelli) - Creates definition of certified mail

• S-3182/A-4690 (Ruiz, Pou/Pintor Marin, Spencer, Sumter) - Delays certain documentation submission deadlines under certain business tax credit programs

• S-3207/A-4714 (Vitale, T. Kean/Lampitt, Mosquera) - Limits liability of caregivers when facilitating normalcy for children in foster care

• S-3240/A-4878 (Lesniak, Allen/Spencer, Sumter, Holley, Eustace) - Authorizes establishment of recovery high school alternative education programs

S-3242/A-4856 (Vitale, Sweeney/Vainieri Huttle) - Clarifies best interests of the child should be primary
consideration in actions undertaken by State governmental entities and courts of law

• S-3243/A-4702 (Vitale, Greenstein/Vainieri Huttle, Spencer) - Provides that if minor appears to have been sexually assaulted, health care professionals in addition to physicians may authorize forensic sexual assault examination and medical care without parental consent

• S-3247/A-4928 (Ruiz, Pou/Sumter, Wimberly) - Eliminates cap on cost of SDA district school facilities projects that may be constructed by district and included in capital outlay budget

• S-3282wGR/A-4850 (Rice, Cunningham/Wimberly, Mainor, Johnson) - Expands Police Training Commission membership to include representative from Northern New Jersey and South Jersey Chapters of National Organization of Black Law Enforcement Executives

• S-3303/A-4469 (Whelan/Quijano, Mukherji, Jimenez) - Makes fraudulent use of social security number to collect lottery winnings crime of fourth degree

• S-3321/A-4927 (Smith, Van Drew, Bateman/Spencer, Rumana) - Authorizes DEP to require public access to waterfront and adjacent shoreline as condition of waterfront development approvals and CAFRA permits

• SJR-22/AJR-40 (Weinberg/Johnson, Vainieri Huttle) - Designates January 14 of each year as "Hannah G. Solomon Day"

• ACS for A-206, 471, 1663, 2879, 3060, 3108wGR/S-2663 (Green, Spencer, Gusciora, Johnson, McKeon, Giblin, Wimberly, Mainor, Quijano/Turner, Lesniak, Pou) - Shortens waiting periods for expungement of criminal and other records and information; makes various changes to other expungement procedures and requirements

• A-311/S-2426 (Bramnick, Diegnan, Wimberly, Gusciora/Ruiz, T. Kean) - Requires public schools to weight courses in visual and performing arts equally with other courses worth same number of credits in calculating grade point average

ACS for A-428/S-393 (Jimenez, Prieto/Sacco, Sarlo) - Expands DNA database to include samples from disorderly
persons who are fingerprinted and permits law enforcement officers to collect certain biological samples

 A-801wGR/S-861 (Coughlin, Wisniewski, Mazzeo/Vitale, Sacco) - Directs New Jersey Turnpike Authority and South Jersey Transportation Authority to study and report on potential revenue generating services of rest areas and service plazas

A-984/S-1534 (Andrzejczak, Wimberly/Van Drew, Bateman) - Enhances penalty for tampering with evidence after fleeing the scene of an accident resulting in death

• A-1455/S-2011 (Diegnan, Mosquera, Caputo, Jasey, Mukherji/Madden, Holzapfel) - Abigail's Law; requires that newly-manufactured school buses be equipped with sensors

• A-1462/S-3288 (Diegnan, Wimberly/Gill) - Requires coin redemption machine operators to disclose fees

• A-1466 (Diegnan, O'Donnell, Mainor, Garcia) - Allows for waiver of school bus requirements for mobility assistance vehicle technicians who transport students with medical needs to and from school

A-1726wGR/S-308 (Eustace, Lagana, Mosquera, Vainieri Huttle, Wimberly/Gordon) - Amends "Flood Hazard
Area Control Act" to require DEP to take certain actions concerning delineations of flood hazard areas and floodplains

• A-1812/S-2717 (Mosquera, Mazzeo, Andrzejczak/Cruz-Perez, Oroho, Jones) - Extends protections of the new vehicle "lemon law" to new farm tractors purchased or leased in New Jersey

A-1958/S-1848 (Allen, Van Drew) - Concerns exemptions from permits for certain agricultural activities under
 "Freshwater Wetlands Protection Act"

 A-2597/S-2161 (Singleton, Diegnan, DiMaio/Ruiz, Beach) - Provides that beginning with the 2016-2017 grade nine class, Advanced Placement computer science course may satisfy a part of the mathematics credits required for high school graduation

• A-2839/S-2620 (Burzichelli, Space, Phoebus/Oroho, Turner) - "New Jersey Rural Microenterprise Act"

• A-2915/S-2035 (Lagana, McKeon, Ciattarelli/Bateman, Barnes) - "Uniform Trust Code"

• A-2943/S-1312 (Andrzejczak, DeAngelo, Mazzeo, Quijano, Danielsen/Van Drew, Allen) - Provides for voluntary contributions by taxpayers on gross income tax returns for active duty members of United States Armed Forces, Reserve components thereof, and National Guard from New Jersey

A-3006/S-3272 (Conaway, Singleton, Eustace, DiMaio, Danielsen/Beach, Turner) - Establishes procedure for consolidating fire districts

• A-3019/S-1978 (Singleton, Conaway, Andrzejczak, Mazzeo, Garcia, Mosquera/Van Drew, Beach) - Requires State Employment and Training Commission to prepare annual report on State workforce

A-3043/S-1943 (Space, DeAngelo, Egan, Phoebus, Moriarty/Oroho, Van Drew) - Concerns authority of DOLWD to inspect prevailing wage public work projects

A-3044/S-1944 (Space, DeAngelo, Egan, Phoebus, Moriarty/Oroho, Van Drew)
Requires Commissioner of DOLWD to disseminate certain information to contractors who bid on or perform prevailing
wage public work

• A-3225/S-2333 (Singleton, Rible, Lampitt, Quijano, Pintor Marin, Jimenez/Sweeney) - Provides for licensure of chiropractic assistants

• A-3228/S-2499 (Mukherji, Vainieri Huttle, Mosquera, Garcia/Turner) - Requires sober living homes and other substance abuse aftercare treatment facilities to provide certain notifications to next-of-kin when patient is released from care; designated as "Nick Rohdes' Law"

A-3257wGR/S-2125 (Andrzejczak, Mazzeo, Burzichelli/Van Drew) - Provides that determination by county agriculture development board or State Agriculture Development Committee as to what qualifies as farm-based recreational activity in pinelands protection area is binding on Pinelands Commission

A-3276/S-2248 (Mazzeo/Whelan) - "Mainland Memoriam Act"; directs MVC to create graduated driver's license
informational material to be distributed by motor vehicle dealers

• A-3435wGR/S-2503 (Garcia, Mukherji, Vainieri Huttle, Mainor, Eustace, Mosquera/Stack, Gordon) - "Boys & Girls Clubs Keystone Law"; permits minors to give consent for behavioral health care

• A-3850/S-2467 (DeAngelo, Eustace, Mazzeo, Pintor Marin, Benson/Turner, Singer) - Requires BPU to establish procedures allowing electric power and gas supplier customers to switch energy suppliers

 A-3927/S-2820 (Andrzejczak, Mazzeo, Taliaferro, Dancer/Van Drew, Oroho) - Requires drivers to slow down before passing slow moving vehicles; establishes Statewide educational campaign on rural roadway safety; updates agriculture-related motor vehicle laws to reflect current industry practices

A-3955/S-2644 (Conaway, Benson, Vainieri Huttle, Munoz, Sumter, Mukherji/Vitale, Codey) - Requires
development and maintenance of database to advise public about open bed availability in residential substance use
disorders treatment facilities

• A-4098/S-2877 (Pinkin, Sumter, Benson/Codey, Greenstein) - Prohibits sale or distribution of liquid nicotine except in child-resistant containers

• A-4105/S-2977 (Garcia, Mainor, Mukherji, O'Donnell, Sumter, Rible, A.M. Bucco/Greenstein, Cunningham) -Expands scope of law governing registration of security guards; designated as " Detective Vincent Santiago's Law"

• A-4133/S-2997 (Giblin, Pinkin/Cruz-Perez, Allen) - Allows dispensation of certain nutritional supplements by physician or podiatric physician

A-4275wGR/S-2831 (Prieto, Eustace, Lagana, Greenwald, Quijano, Danielsen, Mukherji/Sweeney, Turner,
 Sarlo) - "New Jersey Secure Choice Saving Program Act"; establishes retirement savings program for certain workers

 A-4386wGR/S-3042 (Coughlin, Pinkin, Vitale, Singer) - Permits candidates for school board to circulate petitions jointly and be bracketed together on ballot; permits short nonpolitical designation of principles on petitions and ballots; provides for study of impact of changes

• A-4387/S-3016 (Coughlin, Wisniewski, Wimberly/Vitale) - Requires MVC to allow submission of "Next-of-Kin Registry" information by mail

A-4388/S-3041 (Coughlin, Wisniewski/Vitale) - Designates State Highway 184 in Woodbridge Township as "Bruce
Turcotte Memorial Highway"

• A-4415/S-3279 (Diegnan, Garcia, Pinkin/Turner, Ruiz) - Establishes State Seal of Biliteracy to recognize high school graduates who have attained a high level of bilingual proficiency

A-4420/S-3056 (Mazzeo, Vainieri Huttle, DeAngelo, Lampitt/Gordon, Greenstein) - Requires certain notifications
for termination of services to persons with developmental disabilities and providers

• A-4476wGR/S-2876 (Conaway/Codey) - Requires certain surgical practices and ambulatory care facilities licensed in this State to be owned by hospital or medical school located in the State

A-4719/S-3250 (Moriarty, Mosquera, Vainieri Huttle, DeAngelo, Diegnan, Mukherji/Cruz-Perez, Ruiz) - Extends
use of stored driver's license picture for person undergoing chemotherapy or other treatment for certain medical
illnesses

• CC for A-4863/S-3233 (A.M. Bucco, Phoebus, Munoz, Wisniewski, Oliver/A.R. Bucco) - Requires warning sign to be posted at pontoon boat rental businesses; designated as "Christopher's Law"

· AJR-112/SJR-86 (Conaway/Weinberg) - Designates May of each year as "Cystic Fibrosis Awareness Month"

BILLS POCKET VETOED:

• S-221/A-4155 (Allen, Vitale/Vainieri Huttle, Sumter, Lampitt) - Prohibits the restraint of prisoners during and immediately after childbirth

• S-316/A-1739 (Gordon/Eustace, Ciattarelli, Lagana, Gusciora) - Increases flexibility, clarity, and available tools of optional municipal consolidation process

• S-564/A-4186 (Smith, Bateman/Eustace, McKeon, Spencer, Benson) - Establishes "Solar Roof Installation Warranty Program" in EDA and transfers \$2 million from societal benefits charge to initially fund program

• S-602/A-3254 (Codey, Vitale/Vainieri Huttle, Angelini, Lampitt, Diegnan, Jasey, Conaway, Moriarty) - Raises minimum age for purchase and sale of tobacco products and electronic smoking devices from 19 to 21

• SCS for S-726, 1257/ACS for A-1405 (Turner, Cruz-Perez, Beach, T. Kean/Lampitt, Egan, Quijano, Sumter, Danielsen) - Establishes innovation zone program to stimulate technology industry clusters around New Jersey's research institutions; allows certain technology businesses located in certain innovation zones to receive certain tax credits under Grow New Jersey Assistance Program

• S-1232/A-3314 (Weinberg, Pennacchio/Johnson, Greenwald, Wimberly, Mosquera) - Establishes Office of State Dental Director and New Jersey Oral Health Commission

• S-1279/A-2325 (Rice, Van Drew/Spencer, Muoio, Benson, Pintor Marin) - Makes FY 2016 supplemental Grantsin-Aid appropriation of \$10 million to DCA for Lead Hazard Control Assistance Fund

S-1414/A-2405 (Smith, Bateman/Eustace, Benson, Johnson) - Concerns low emission and zero emission vehicles; establishes Clean Vehicle Task Force

• SCS for S-1420/ACS for A-1603 (Beach, Whelan, Smith, Sweeney, Bateman, Thompson/Spencer, Eustace, Quijano, Wimberly) - Requires paint producers to implement or participate in paint stewardship program

• S-1436/A-4687 (Rice/Green, Holley) - Exempts sales to homeowner assistance and recovery programs from realty transfer fees

• S-1594/A-4044 (Turner/Peterson, Lagana, Rible, Jasey, Wimberly) - Requires a public school district to provide a daily recess period for students in grades kindergarten through 5

• S-1961/A-4111 (Codey/McKeon, Jasey, Vainieri Huttle, Garcia) - Establishes certain minimum and maximum temperatures in emergency shelters, rooming and boarding houses, and certain nursing homes and residential health care facilities

• S-2143/ACS for A-1682, 3547 (Van Drew, Singer/Wisniewski, Andrzejczak, Webber) - Establishes time periods for adverse possession of certain property

• S-2375/A-3700 (Vitale, Singer/Mazzeo, Vainieri Huttle, Lagana, Sumter, A.M. Bucco) - Provides for licensure of ambulatory care facilities to provide integrated primary care services including behavioral health care

• S-2491/A-4069 (Smith/Danielsen, Pinkin, Benson) - Establishes position of State Oceanographer

 S-2515/A-3269 (Scutari/Mukherji, Burzichelli, McKeon, Garcia) - Confers title of Acting Associate Justice of the Supreme Court on certain judges of the Superior Court, Appellate Division, temporarily assigned to the Supreme Court

SCS for S-2521/ACS for A-3888 (Gill, Allen/Lampitt, Benson, Vainieri Huttle, Eustace) - Establishes Pedestrian
 and Bicycle Safety Advisory Council

• S-2623/A-4849 (Turner/Wimberly, Mainor, Johnson) - Requires law enforcement agencies in this State to establish minority recruitment and selection programs; establishes reporting requirement

• S-2640/A-4026 (Madden, Pou/Lampitt, Mosquera, Vainieri Huttle) - Establishes New Jersey Caregiver Task Force to evaluate and provide recommendations on caregiver support services

• S-2711/A-4128 (Smith, Whelan/Mazzeo, DeAngelo, Spencer, Singleton, McKeon, Danielsen, Johnson) -Permits BPU to approve qualified wind energy project; requires BPU to provide application periods for those projects

• S-2716/A-4359 (Ruiz, Turner/Pintor Marin, Spencer, Sumter, Caride) - Requires that school district's request for permission to use unrecognized position title include list of abolished positions and positions in which there have been layoffs and detailed job descriptions for them

• S-2769/AS for ACS for A-4197, 4206 (Smith, Bateman/Andrzejczak, McKeon, Spencer, Pintor Marin, Dancer, Vainieri Huttle) - Implements 2014 constitutional dedication of CBT revenues for certain environmental purposes; revises State's open space, farmland, and historic preservation programs

• S-2793/A-3962 (Whelan/Vainieri Huttle) - Increases from 17 to 21 public members of New Jersey State Council on the Arts; requires members to be residents of NJ; imposes specific criteria for four new members initially appointed

• S-2806/A-4913 (Cunningham, Vitale, Singer/Muoio, Spencer) - Removes restrictions on convicted drug offenders receiving general assistance benefits under Work First New Jersey program

• S-2878/A-4636 (Stack, Weinberg/Jimenez, Lagana, Mukherji, Vainieri Huttle, Giblin, Moriarty) - Establishes minimum certified nurse aide-to-resident ratios in nursing homes

• S-2975/A-4548 (Sarlo, Pou/Wimberly) - Establishes pilot program in Paterson authorizing non-disclosure of records of certain expungements

• S-3067/A-4653 (Barnes, Turner/Diegnan, Oliver) - Requires teachers of health and physical education in grades kindergarten through six in public schools to possess appropriate endorsement to instructional certificate

• S-3071/A-4639 (Weinberg, Gordon/Vainieri Huttle, Garcia, Eustace, Johnson) Establishes Mike Adler Aphasia Task Force to assess needs of persons with aphasia, and their families, and ensure adequate provision of support services and information thereto

• S-3201/A-3607 (Barnes, Holzapfel/Dancer, McGuckin, Rible, A.M. Bucco) - Requires interior light of motor vehicle be turned on when stopped by law enforcement under certain circumstances

• S-3244/A-2740 (Ruiz, Sarlo/Diegnan, Johnson, Jasey) - Eliminates school district budget per pupil administrative cost limits

• S-3249/A-4717 (Weinberg, Codey/Johnson, Vainieri Huttle, Eustace, Garcia) - Requires firearm retailers to sell personalized handguns

S-3277/A-4764 (Cruz-Perez/Burzichelli) - Expands municipal authority to license and inspect residential rental
property

• S-3299/A-4903 (Sweeney, Singer, Vitale/Burzichelli, Rible, Pintor Marin, Mukherji, Lagana, Vainieri Huttle) -

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Maintains property tax exemption for certain nonprofit hospitals with on-site for-profit medical providers; requires these hospitals to pay community service contributions to host municipalities; establishes Nonprofit Hospital Community Service Contribution Study Commission

• S-3416/A-4808 (Lesniak, Sarlo/Eustace, Gusciora) - Prohibits possession, transport, import, export, processing, sale, or shipment of parts and products of certain animal species threatened with extinction

• SJR-77/A-JR104 (Bateman, Whelan/Ciattarelli, McKeon, Eustace) - Permits county commissioners of registration and boards of election to conduct "Electronic Poll Book Demonstration Project" in certain districts during 2016 elections; requires Division of Elections review and approval of proposed projects

A-431/S-2773 (Jimenez/Singer) - Requires clinical laboratory that provides services for accountable care
organization to establish clinical laboratory testing advisory board

• A-943/S-2967 (Singleton, Conaway, Moriarty, Green, Lampitt, Mazzeo/Van Drew) - Permits small businesses to qualify for loans from NJEDA for costs of energy audit and making energy efficiency or conservation improvements

• A-945/S-2402 (Singleton, Lampitt, Schaer, Wimberly, Garcia/Rice, Turner) - Establishes New Jersey Council on Responsible Fatherhood and Responsible Fatherhood Fund

• A-964/S-187 (Singleton, DeAngelo, Quijano, Coughlin, Moriarty/Whelan, Madden) - Requires certain bidders for prevailing wage public work to provide proof that the prevailing wage will be paid

A-986/S-247 (Andrzejczak, Benson, Danielsen, Moriarty/Van Drew, Cunningham) - Establishes telemarketing fraud investigation unit

• A-1035/S-2040 (Benson, Rible, A.M. Bucco/Scutari, Cardinale) - Prohibits health insurance carriers from requiring optometrists to become providers with vision care plans as condition of becoming providers in carriers' panel of providers

• A-1039/S-2310 (Benson, Prieto, Caride, Quijano/Sacco, Greenstein) - Sets forth certain standards to be followed by law enforcement agencies and fire departments when utilizing drones

• A-1431/S-1501 (Caride, Singleton, Jasey/Bateman, Addiego) - Requires State Board of Education regulations regarding school nurse certification to include certain minimum eligibility requirements

• A-1849/S-1766 (Lampitt, Spencer/Rice) - Prohibits State Board of Education from limiting number of certain twoyear college credits that may be applied towards meeting teacher certification requirements

• A-2026/S-3317 (Greenwald, Pintor Marin/Sweeney, Oroho) - Realigning the transfer inheritance tax payment due date to coincide with the payment due dates for State and federal estate taxes

A-2583 (DeAngelo, Pintor Marin) - Requires development of fact sheet about bedbugs to be posted on the
Department of Education's website

· A-2586/S-1796 (DeAngelo, Quijano, Benson/Greenstein) - Establishes "Energy Infrastructure Study Commission"

• A-2925/S-1033 (Lagana, O'Scanlon, Burzichelli, Garcia/Weinberg, Oroho, Van Drew) - Allows modernization for the form of disbursement for certain State government and local unit payments to individuals and business entities

 A-3460/S-2191 (Conaway, Pinkin, Sumter, Casagrande, Wimberly/Vitale, Cruz-Perez) - Requires Medicaid coverage for diabetes self-management education, training, services, and equipment for patients diagnosed with diabetes, gestational diabetes, and pre-diabetes

• A-3806/S-2493 (Singleton, Dancer, Mosquera, Benson/Sweeney, Weinberg) - Establishes four-year pilot program in Ocean County for electronic monitoring of certain domestic violence offenders; designated as "Lisa's Law"; appropriates \$2.5 million

• A-4182/S-1995 (Eustace, Sumter, Wimberly, Danielsen, Jimenez/Bateman, Smith) - Prohibits firearm possession by persons convicted of carjacking, gang criminality, racketeering and terroristic threats

• A-4271/S-3036 (Conaway, Benson, Pinkin, Wimberly/Vitale, Greenstein) - Mandates health benefits coverage for opioid analgesics with abuse-deterrent properties

• A-4343/S-2888 (Schaer, Prieto, Sumter, Danielsen, Johnson/Turner) - Requires county and municipal police departments to establish cultural diversity training course and plan

• A-4384/S-3145 (DeAngelo, Pintor Marin, Danielsen, Schaer, Johnson/Whelan) - Requires BPU to render decision on case within 12 months of final public hearing or hold another public hearing prior to deciding case

• ACS for A-4576/S-1771 (Johnson, Wimberly, Spencer, Tucker/Turner) - Requires lowest possible price not exceeding certain cap for inmate telephone calls

A-4616/S-2958 (Giblin, DeAngelo, Mukherji/Sweeney) - Extends by two months seasonal retail consumption
alcoholic beverage license

A-4652/S-3065 (Benson/Gordon) - Requires Public Health Counsel to promulgate rules and regulations for use of quality control programs in bio-analytical and clinical laboratories

A-4763/SS for SCS for S-2973 (McKeon, Spencer, Pinkin/Smith, Bateman, Greenstein, Codey) - Revises
 "Electronic Waste Management Act"

· A-4772/S-3169 (Burzichelli/Weinberg) - Permits counties to impose one-percent hotel tax

A-4773/S-3146 (Eustace, Garcia, Gusciora/Lesniak) - Prohibits possession and transport of parts and products of certain animals at PANYNJ airports and port facilities

• A-4918/S-3301 (Gusciora, S. Kean/Sweeney, Singer) - Clarifies stadiums and arenas owned by local government entities are exempt from property taxation

· A-4931/S-3325 (Mazzeo/Sweeney) - Revises "Casino Property Tax Stabilization Act"

NO ACTION TAKEN ON BILLS:

A-3981wGR/S-2572 (Mazzeo, Burzichelli, Andrzejczak/Sweeney, Whelan) - "Casino Property Taxation
Stabilization Act"

A-3984wGR/S-2575 (Mazzeo, Burzichelli, Giblin/Sweeney, Whelan) - Reallocates casino investment alternative
tax to Atlantic City to pay debt service on municipal bonds issued

A-3985wGR/S-2576 (Mazzeo, Burzichelli, Andrzejczak, Giblin/Sweeney, Whelan) - Removes provisions of law relating to Atlantic City Alliance

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