

ASSEMBLY HEALTH COMMITTEE

STATEMENT TO

[First Reprint]

ASSEMBLY, No. 1943

with committee amendments

STATE OF NEW JERSEY

DATED: MARCH 20, 2023

The Assembly Health Committee reports favorably and with committee amendments Assembly Bill No. 1943 (1R).

As amended by the committee, this bill would require obstetrical providers in the State, including obstetrician/gynecologists, certified midwives, and certified nurse midwives, to perform regular domestic violence screenings as part of each routine patient visit and document the findings from each screening in the patient's medical record. The bill would additionally require any obstetrical providers or other health care professionals who document evidence or findings of domestic violence in a patient's medical record to advise the patient that the patient may take appropriate action to prevent the disclosure of the patient's medical record to the perpetrator of the domestic violence.

A domestic violence screening performed under the bill is to be conducted in a private area, in which only the obstetrical provider and the patient are present. If the obstetrical provider determines, based on the screening, that a patient is or may be a victim of domestic violence, the obstetrical provider will be required to:

- 1) advise the patient, during the same visit, of the resources and services that are available in the State and region to assist and protect victims of domestic violence; and
- 2) provide the patient with referrals to other appropriate health care providers, as deemed by the obstetrical provider to be necessary to help the patient fully address the physical or mental consequences of the domestic violence.

The bill requires the Department of Children and Families and the Department of Health, in consultation with an organization that provides support to survivors of domestic violence, to develop, distribute to obstetrical providers in the State, and update on at least a biennial basis: 1) a screening tool or sample screening questionnaire, which reflects the most up-to-date standards for domestic violence screening, and which is to be used by obstetrical providers in conducting the domestic violence screenings required by the bill; and 2) a list identifying all of the resources and services

that are available in the State, and in each region of the State, to assist and protect victims of domestic violence.

Whenever an obstetrical provider finds, pursuant to a domestic violence screening, that a patient is or may be a victim of domestic violence, and whenever any other health care professional documents, in a patient's medical record, any evidence or findings of domestic violence, the obstetrical provider or other health care professional will be required, during the same visit in which the domestic violence is documented, to have the patient reapprove the list of persons who are authorized to obtain a copy of the patient's medical record in accordance with the provisions of the "Health Insurance Portability and Accountability Act" (HIPAA), Pub.L.104-191, and the federal health privacy rule set forth at 45 CFR Parts 160 and 164. If the alleged perpetrator of the domestic violence was previously authorized by the patient to obtain a copy of the patient's medical record, the obstetrical provider or other health care professional documenting the domestic violence will be required to advise the patient that the patient may remove the alleged perpetrator from the list of persons who are authorized to receive copies of the medical record going forward.

COMMITTEE AMENDMENTS:

The committee amendments require the Department of Children and Families (DCF) and the Department of Health (DOH) to consult with an organization that provides support to survivors of domestic violence when developing, distributing, and updating the domestic violence screening tool and list of resources and service for victims of domestic violence. As introduced, the bill required DCF, in consultation with DOH, to develop, distribute, and update the tool and list.