

SENATE HEALTH, HUMAN SERVICES AND SENIOR
CITIZENS COMMITTEE

STATEMENT TO

[Second Reprint]
ASSEMBLY, No. 1943

with committee amendments

STATE OF NEW JERSEY

DATED: JUNE 15, 2023

The Senate Health, Human Services and Senior Citizens Committee reports favorably and with committee amendments Assembly Bill No. 1943 (2R).

As amended, this bill would require certain health care providers in the State, including licensed physicians, advanced practice nurses, physician assistants, certified midwives, certified professional midwives, and certified nurse midwives, to conduct a periodic intimate partner violence screenings of patients in accordance with nationally recognized evidence-based guidelines. The bill requires providers to document the findings from each screening in the patient's medical record and requires any health care professional who documents evidence or findings of intimate partner 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 intimate partner violence.

Under the amended bill, an intimate partner violence screening performed under the bill is to be performed in a private area, which may include screening the patient using telemedicine and telehealth or by the patient self-administering the screening using a paper-based or electronic screening instrument. If, based on a screening performed pursuant to this bill, a provider finds that a patient is or may be a victim of intimate partner, the provider will required to provide the patient:

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

The Department of Children and Families and the Department of Health, will be required to make available to providers in the State, and update on at least a biennial basis 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 intimate partner violence.

As reported by the committee with committee amendments, Assembly Bill No. 1943 (2R) is identical to Senate Bill No. 1827, which was also reported by the committee on this date, with committee amendments.

COMMITTEE AMENDMENTS:

The committee amendments replace the term “domestic violence” with “intimate partner violence” and provide a definition for “intimate partner violence.”

The committee amendments revise the bill to require intimate partner violence screenings by a broader category of providers than was established under the bill as introduced. Specifically, as introduced, the bill only applied to obstetrical providers; as amended the bill applies to licensed physicians, advanced practice nurses, physician assistants, certified midwives, certified professional midwives, and certified nurse midwives.

The committee amendments require that a provider conduct a periodic intimate partner violence screening in accordance with nationally recognized evidence-based guidelines. As introduced, obstetrical providers were required to conduct such a screening at each routine patient visit.

The committee amendments provide that an intimate partner violence screening can also be performed using telemedicine and telehealth and by self-administration by the patient using a paper-based or electronic screening instrument.

The committee amendments revise the title and synopsis of the bill to reflect these changes.

The committee amendments make various technical changes concerning citation, grammar, and usage.