

ASSEMBLY REGULATED PROFESSIONS COMMITTEE

STATEMENT TO

ASSEMBLY, No. 2188

STATE OF NEW JERSEY

DATED: SEPTEMBER 10, 2026

The Assembly Regulated Professions Committee reports favorably Assembly Bill No. 2188.

This bill directs every birthing center licensed in the State, every federally qualified health center, and every health care practitioner providing prenatal care to a pregnant person or postpartum care to a person who seeks treatment within 12 weeks of giving birth to adopt and adhere to policies requiring the person to be evaluated, as necessary, for hypertensive disorders related to pregnancy. Those disorders include, but are not limited to, postpartum preeclampsia and hypertension, provided that the person shows symptoms of the condition and has not in the current or recent pregnancy previously been diagnosed with the condition, or after the onset of such symptoms. Evaluation tools are to be based on best practices and guidance, as determined by the American College of Obstetricians and Gynecologists or another nationally-recognized body.

Under the bill, these same entities providing the same types of care are required to, in accordance with nationally recognized evidence-based treatment practices:

(1) provide the person with evidence-based information on hypertensive disorders related to pregnancy preeclampsia, including, but not limited to, postpartum preeclampsia and hypertension and potential warning signs and symptoms;

(2) inform the person of the benefits of being evaluated for hypertensive disorders related to pregnancy preeclampsia, including, but not limited to, postpartum preeclampsia and hypertension, if the person shows symptoms of any such disorders, and that the person should be evaluated for hypertensive disorders related to pregnancy under the circumstances set forth in the bill, unless the person declines to be evaluated; and

(3) upon receipt of the results of any evaluation conducted pursuant to the bill, discuss the results with the person and, if the person has a positive evaluation for preeclampsia, develop an evidence-based treatment plan to minimize the person's risk from preeclampsia.