

# SENATE, No. 617

## STATE OF NEW JERSEY 219th LEGISLATURE

PRE-FILED FOR INTRODUCTION IN THE 2020 SESSION

**Sponsored by:**

**Senator DECLAN J. O'SCANLON, JR.**

**District 13 (Monmouth)**

**Senator HOLLY T. SCHEPISI**

**District 39 (Bergen and Passaic)**

**SYNOPSIS**

Revises requirements for operation of mobile intensive care programs and paramedic licensure.

**CURRENT VERSION OF TEXT**

Introduced Pending Technical Review by Legislative Counsel.



**(Sponsorship Updated As Of: 3/25/2021)**

1 AN ACT concerning emergency medical services, revising various  
2 parts of the statutory law, and supplementing Title 26 of the  
3 Revised Statutes.

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

7  
8 1. Section 2 of P.L.2008, c.80 (C.26:2-190) is amended to read  
9 as follows:

10 2. a. The Commissioner of Health and the Commissioner of  
11 Human Services, in consultation with the New Jersey Fire and  
12 Emergency Medical Services Institute and the New Jersey State  
13 First Aid Council, shall develop a training curriculum with the  
14 purpose of informing emergency responders of the risks associated  
15 with autism or an intellectual or other developmental disability, as  
16 well as providing instruction in appropriate recognition and  
17 response techniques concerning these disabilities. The curriculum  
18 shall be incorporated into existing time requirements for training  
19 and continuing education of emergency responders.

20 b. Prior to certification by the Department of Health, each  
21 emergency medical technician trained in basic life support services  
22 as defined in section **[1 of P.L.1985, c.351 (C.26:2K-21)]** 13 of  
23 P.L. , c. (C. ) (pending before the Legislature as this bill)  
24 shall be required to satisfactorily complete the training developed  
25 under subsection a. of this section. Every emergency medical  
26 technician certified prior to the effective date of this act shall,  
27 within 36 months of the effective date of this act, satisfactorily  
28 complete the training in recognition and response techniques  
29 concerning these disabilities, through existing continuing education  
30 requirements.

31 c. The Commissioner of Health shall adopt rules and  
32 regulations, pursuant to the "Administrative Procedure Act,"  
33 P.L.1968, c.410 (C.52:14B-1 et seq.), to effectuate the purposes of  
34 this act.

35 (cf: P.L.2012, c.17, s.143)

36  
37 2. Section 1 of P.L.1986, c.106 (C.26:2K-35) is amended to  
38 read as follows:

39 1. As used in this act:

40 a. "Commissioner" means the Commissioner of Health.

41 b. "Dispatch" means the coordinated request for and dispatch  
42 of the emergency medical service helicopter response unit by a  
43 central communications center located in the service area, following  
44 protocols developed by the mobile intensive care hospital, the

**EXPLANATION – Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.**

**Matter underlined thus is new matter.**

1 regional trauma or critical care center, the commissioner, and the  
2 superintendent.

3 c. "Emergency medical service helicopter response unit" means  
4 a specially equipped hospital-based emergency medical service  
5 helicopter staffed by advanced life support personnel and operated  
6 for the provision of advanced life support services under the  
7 medical direction of a mobile intensive care program and the  
8 regional trauma or critical care center authorized by the  
9 commissioner.

10 d. "Emergency medical transportation" means the prehospital  
11 or interhospital transportation of an acutely ill or injured patient by  
12 a dedicated emergency medical service helicopter response unit  
13 operated, maintained and piloted by the Division of State Police of  
14 the Department of Law and Public Safety, pursuant to regulations  
15 adopted by the commissioner under chapter 40 of Title 8 of the New  
16 Jersey Administrative Code.

17 e. "Medical direction" means the medical control and medical  
18 orders transmitted from the physician of the mobile intensive care  
19 hospital or from the physician at the regional trauma or critical care  
20 center to the staff of the helicopter. The mobile intensive care unit  
21 coordinating center and regional trauma or critical care center shall  
22 have the ability to cross patch and consult with each other as  
23 approved by the commissioner.

24 f. "Mobile intensive care hospital" means a hospital authorized  
25 by the commissioner to develop and maintain a mobile intensive  
26 care unit to provide advanced life support services in accordance  
27 with **【P.L.1984, c.146 (C.26:2K-7 et al.)】** section 16 of P.L. , c.  
28 (C. ) (pending before the Legislature as this bill).

29 g. "Regional trauma center" means a State designated level one  
30 hospital-based trauma center equipped and staffed to provide  
31 emergency medical services to an accident or trauma victim,  
32 including, but not limited to, the level one trauma centers at  
33 University Hospital in Newark, known as the "Eric Munoz Trauma  
34 Center," and at the Cooper Hospital/University Medical Center in  
35 Camden.

36 h. "Critical care center" means a hospital authorized by the  
37 commissioner to provide regional critical care services, such as  
38 trauma, burn, spinal cord, cardiac, poison, or neonatal care.

39 i. "Superintendent" means the Superintendent of the Division  
40 of State Police of the Department of Law and Public Safety.  
41 (cf: P.L.2012, c.45, s.113)

42

43 3. Section 2 of P.L.1986, c.106 (C.26:2K-36) is amended to  
44 read as follows:

45 2. a. There is established the New Jersey Emergency Medical  
46 Service Helicopter Response Program in the **【Division of Local and  
47 Community Health Services】** Office of Emergency Medical  
48 Services of the Department of Health. The commissioner shall

1 designate a mobile intensive care hospital and a regional trauma or  
2 critical care center which shall develop and maintain a hospital-  
3 based emergency medical service helicopter response unit. The  
4 commissioner shall designate at least two units in the State, of  
5 which no less than one unit each shall be designated for the  
6 northern and southern portions of the State, respectively.

7 b. Each emergency medical service helicopter response unit  
8 shall be staffed by at least two persons **【trained in advanced life**  
9 **support】** holding licensure as a paramedic, advanced paramedic, or  
10 mobile intensive care nurse and who are approved by the  
11 commissioner. The staff of the emergency medical service  
12 helicopter response unit shall render life support services to an  
13 accident or trauma victim, as necessary, in the course of providing  
14 emergency medical transportation.

15 (cf: P.L.1986, c.106, s.2)

16

17 4. Section 4 of P.L.1986, c.106 (C.26:2K-38) is amended to  
18 read as follows:

19 4. No **【mobile intensive care】** paramedic, advanced paramedic,  
20 mobile intensive care nurse, licensed physician, hospital or its board  
21 of trustees, officers and members of the medical staff, nurses or  
22 other employees of the hospital, first aid, ambulance or rescue  
23 squad members or officers is liable for any civil damages as the  
24 result of an act or the omission of an act committed while training  
25 for or in rendering advanced life support services in good faith and  
26 in accordance with this amendatory and supplementary act.

27 (cf: P.L.1986, c.106, s.4)

28

29 5. Section 1 of P.L.1989, c.314 (C.26:2K-39) is amended to  
30 read as follows:

31 1. As used in this act:

32 "Commissioner" means the Commissioner of Health.

33 "Emergency medical service" means a program in a hospital  
34 staffed 24 hours-a-day by a licensed physician trained in emergency  
35 medicine.

36 "Emergency medical technician" means a person trained in basic  
37 life support services as defined in section **【1 of P.L.1985, c.351**  
38 **(C.26:2K-21)】** **13 of P.L. , c. (C. )** (pending before the  
39 Legislature as this bill) and who is certified by the Department of  
40 Health to perform these services.

41 "EMT-D" means an emergency medical technician who is  
42 certified by the commissioner to perform cardiac defibrillation.

43 "First Responder" means a police officer, firefighter or other  
44 person who has been trained to provide emergency medical first  
45 response services in a program recognized by the commissioner.

46 "First Responder-D" means a First Responder who is certified by  
47 the commissioner to perform cardiac defibrillation.

1 "Pre-hospital care" means those emergency medical services  
2 rendered to emergency patients at the scene of a traffic accident or  
3 other emergency and during transportation to emergency treatment  
4 facilities, and upon arrival within those facilities.

5 (cf: P.L.1996, c.136, s.1)

6

7 6. Section 5 of P.L.1989, c.314 (C.26:2K-43) is amended to  
8 read as follows:

9 5. An EMT-D, First Responder-D, **【EMT-intermediate,】**  
10 licensed physician, hospital or its board of trustees, officers and  
11 members of the medical staff, nurses, paramedics or other  
12 employees of the hospital, or officers and members of a first aid,  
13 ambulance or rescue squad shall not be liable for any civil damages  
14 as the result of an act or the omission of an act committed while in  
15 training to perform, or in the performance of, cardiac defibrillation  
16 in good faith and in accordance with this act.

17 (cf: P.L.1996, c.136, s.5)

18

19 7. Section 1 of P.L.2003, c.1 (C.26:2K-47.1) is amended to  
20 read as follows:

21 1. As used in this act:

22 "Commissioner" means the Commissioner of Health;

23 "Emergency medical service" means a program in a hospital  
24 staffed 24 hours-a-day by a licensed physician trained in emergency  
25 medicine;

26 "Emergency medical technician" means a person trained in basic  
27 life support services as defined in section **【1 of P.L.1985, c.351**  
28 **(C.26:2K-21)】** 13 of P.L. , c. (C. ) (pending before the  
29 Legislature as this bill) and who is certified by the Department of  
30 Health to provide that level of care.

31 (cf: P.L.2012, c.17, s.279)

32

33 8. Section 2 of P.L.1992, c.96 (C.26:2K-49) is amended to read  
34 as follows:

35 2. As used in this act:

36 "Advanced life support" means **【an advanced level of pre-**  
37 **hospital, interhospital, and emergency service care which includes**  
38 **basic life support functions, cardiac monitoring, cardiac**  
39 **defibrillation, telemetered electrocardiography, administration of**  
40 **antiarrhythmic agents, intravenous therapy, administration of**  
41 **specific medications, drugs and solutions, use of adjunctive**  
42 **ventilation devices, trauma care and other techniques and**  
43 **procedures authorized in writing by the commissioner pursuant to**  
44 **department regulations and P.L.1984, c.146 (C.26:2K-7 et seq.)】**  
45 the same as that term is defined in section 13 of P.L. ,  
46 c. (C. ) (pending before the Legislature as this bill).

1 "Advisory council" means the Emergency Medical Services for  
2 Children Advisory Council established pursuant to section 5 of this  
3 act.

4 "Basic life support" means a basic level of pre-hospital care  
5 which includes patient stabilization, airway clearance,  
6 cardiopulmonary resuscitation, hemorrhage control, initial wound  
7 care and fracture stabilization, and other techniques and procedures  
8 authorized by the commissioner.

9 "Commissioner" means the Commissioner of Health.

10 "Coordinator" means the person coordinating the EMSC program  
11 within the Office of Emergency Medical Services in the Department  
12 of Health.

13 "Department" means the Department of Health.

14 "EMSC program" means the Emergency Medical Services for  
15 Children program established pursuant to section 3 of this act, and  
16 other relevant programmatic activities conducted by the Office of  
17 Emergency Medical Services in the Department of Health in  
18 support of appropriate treatment, transport, and triage of ill or  
19 injured children in New Jersey.

20 "Emergency medical services personnel" means persons trained  
21 and certified or licensed to provide emergency medical care,  
22 whether on a paid or volunteer basis, as part of a basic life support  
23 or advanced life support pre-hospital emergency care service or in  
24 an emergency department or pediatric critical care or specialty unit  
25 in a licensed hospital.

26 "Pre-hospital care" means the provision of emergency medical  
27 care or transportation by trained and certified or licensed emergency  
28 medical services personnel at the scene of an emergency and while  
29 transporting sick or injured persons to a medical care facility or  
30 provider.

31 (cf: P.L.1992, c.96, s.2)

32

33 9. Section 5 of P.L.1992, c.96 (C.26:2K-52) is amended to read  
34 as follows:

35 5. a. There is created an Emergency Medical Services for  
36 Children Advisory Council to advise the Office of Emergency  
37 Medical Services and the coordinator of the EMSC program on all  
38 matters concerning emergency medical services for children. The  
39 advisory council shall assist in the formulation of policy and  
40 regulations to effectuate the purposes of this act.

41 b. The advisory council shall consist of a minimum of 14  
42 public members to be appointed by the Governor, with the advice  
43 and consent of the Senate, for a term of three years. Membership of  
44 the advisory council shall include: one practicing pediatrician, one  
45 pediatric critical care physician, one board certified pediatric  
46 emergency physician and one pediatric physiatrist, to be appointed  
47 upon the recommendation of the New Jersey chapter of the  
48 American Academy of Pediatrics; one pediatric surgeon, to be

1 appointed upon the recommendation of the New Jersey chapter of  
2 the American College of Surgeons; one emergency physician, to be  
3 appointed upon the recommendation of the New Jersey chapter of  
4 the American College of Emergency Physicians; one emergency  
5 medical technician, to be appointed upon the recommendation of  
6 the **【New Jersey State First Aid Council】** EMS Council of New  
7 Jersey; one paramedic, to be appointed upon the recommendation of  
8 the **【State mobile intensive care advisory council】** ALS Oversight  
9 Board; one family practice physician, to be appointed upon the  
10 recommendation of the New Jersey chapter of the Academy of  
11 Family Practice; two registered emergency nurses, one to be  
12 appointed upon the recommendation of the New Jersey State Nurses  
13 Association and one to be appointed upon the recommendation of  
14 the New Jersey Chapter of the Emergency Nurses Association; and  
15 three members, each with a non-medical background, two of whom  
16 are parents with children under the age of 18, to be appointed upon  
17 the joint recommendation of the **【Association】** Advocates for  
18 Children of New Jersey and the Junior Leagues of New Jersey.

19 c. Vacancies on the advisory council shall be filled for the  
20 unexpired term by appointment of the Governor in the same manner  
21 as originally filled. The members of the advisory council shall serve  
22 without compensation. The advisory council shall elect a  
23 chairperson, who may select from among the members a vice-  
24 chairperson and other officers or subcommittees which are deemed  
25 necessary or appropriate. The council may further organize itself in  
26 any manner it deems appropriate and enact bylaws as deemed  
27 necessary to carry out the responsibilities of the council.

28 (cf: P.L.1992, c.96, s.5)

29

30 10. Section 6 of P.L.1993, c.143 (C.26:2K-59) is amended to  
31 read as follows:

32 6. a. The commissioner shall establish a State advisory council  
33 for basic **【and intermediate】** life support services training. The  
34 council shall be responsible for: (1) establishing guidelines and  
35 making recommendations regarding reimbursement from the fund  
36 to entities providing EMT-A or EMT-D testing and training  
37 activities, (2) making recommendations for changes in emergency  
38 medical services testing and training activities or the creation of  
39 new programs as necessary to conform with federal standards, or to  
40 improve the quality of emergency medical services delivery, (3)  
41 establishing guidelines for the purchase of emergency medical  
42 services training equipment, and (4) developing recommendations  
43 for the most effective means to recruit emergency medical services  
44 volunteers.

45 b. The council shall consist of 13 members, as follows: the  
46 Commissioner of Health, the Superintendent of the Division of  
47 State Police in the Department of Law and Public Safety, the

1 **【Director of the Governor's Office on Volunteerism】** Secretary of  
2 Volunteer and National Service in the Department of State, the  
3 President of the **【New Jersey State First Aid Council】** EMS Council  
4 of New Jersey, the chairman of the State **【mobile intensive care**  
5 **advisory council】** ALS Oversight Board, and the President of the  
6 Medical **【Transport】** Transportation Association of New Jersey, or  
7 their designees, as ex officio members; and seven public members,  
8 of which two shall be persons with a demonstrated interest or  
9 expertise in emergency medical services who are not health care  
10 professionals and two shall be physicians who are medical  
11 specialists in areas relating to basic life support services, to be  
12 appointed by the Governor, one shall be a representative of the New  
13 Jersey Hospital Association, to be appointed by the President  
14 thereof, one shall be a representative of the Medical Society of New  
15 Jersey, to be appointed by the President thereof, and one shall be a  
16 representative of the New Jersey State Nurses Association, to be  
17 appointed by the President thereof.

18 c. Of the public members first appointed, three shall serve for a  
19 term of two years, three shall serve for a term of three years and one  
20 shall serve for a term of four years. Following the expiration of the  
21 original terms, the public members shall serve for a term of four  
22 years and are eligible for reappointment. Any vacancy shall be  
23 filled in the same manner as the original appointment, for the  
24 unexpired term. Public members shall continue to serve until their  
25 successors are appointed.

26 d. The council shall meet at its discretion, but at least quarterly.  
27 The public members of the council shall serve without  
28 compensation but shall be reimbursed for the reasonable expenses  
29 incurred in the performance of their duties, within the limits of  
30 funds available to the council.

31 e. The council shall organize no later than the 60th day after  
32 the effective date of this act. The members shall choose a  
33 **【chairman】** chairperson from among themselves and a secretary  
34 who need not be a member of the council. The Department of  
35 Health shall provide such technical, clerical and administrative  
36 support as the council requires to carry out its responsibilities.  
37 (cf: P.L.1992, c.143, s.6)

38  
39 11. Section 1 of P.L.1973, c.307 (C.39:3C-1) is amended to read  
40 as follows:

41 1. As used in P.L.1973, c.307 (C.39:3C-1 et seq.):

42 "All-terrain vehicle" means a motor vehicle, designed and  
43 manufactured for off-road use only, of a type possessing between  
44 three and six non-highway tires, but shall not include golf carts or  
45 an all-terrain vehicle operated by an employee or agent of the State,  
46 a county, a municipality, or a fire district, or a member of an  
47 emergency service organization or an emergency medical technician



1 which is used while in the performance of the employee's, agent's,  
2 member's or technician's official duties.

3 "Chief administrator" means the Chief Administrator of the New  
4 Jersey Motor Vehicle Commission.

5 "Commission" means the New Jersey Motor Vehicle  
6 Commission established by section 4 of P.L.2003, c.13 (C.39:2A-  
7 4).

8 "Commissioner" means the Commissioner of Environmental  
9 Protection.

10 "Department" means the Department of Environmental  
11 Protection.

12 "Dirt bike" means any two-wheeled motorcycle that is designed  
13 and manufactured for off-road use only and that does not comply  
14 with Federal Motor Vehicle Safety Standards or United States  
15 Environmental Protection Agency on-road emissions standards.

16 "Emergency medical technician" means a person trained in basic  
17 life support services as defined in section **1** of P.L.1985, c.351  
18 (C.26:2K-21) **13** of P.L. , c. (C. ) (pending before the  
19 Legislature as this bill) and who is certified by the Department of  
20 Health to perform these services.

21 "Emergency service organization" means a fire or first aid  
22 organization, whether organized as a volunteer fire company,  
23 volunteer fire department, fire district, or duly incorporated  
24 volunteer first aid, emergency, or volunteer ambulance or rescue  
25 squad association.

26 "Natural resource" means all land, fish, shellfish, wildlife, biota,  
27 air, waters, and other such resources owned, managed, held in trust,  
28 or otherwise controlled by the State.

29 "Public land" means all land owned, operated, managed,  
30 maintained, or under the jurisdiction of the Department of  
31 Environmental Protection, including any and all land owned,  
32 operated, managed, maintained, or purchased jointly by the  
33 Department of Environmental Protection with any other party and  
34 any land so designated by municipal or county ordinance. Public  
35 land shall also mean any land used for conservation purposes,  
36 including, but not limited to, beaches, forests, greenways, natural  
37 areas, water resources, wildlife preserves, land used for watershed  
38 protection, or biological or ecological studies, and land exempted  
39 from taxation pursuant to section 2 of P.L.1974, c.167 (C.54:4-  
40 3.64).

41 "Snowmobile" means any motor vehicle, designed primarily to  
42 travel over ice or snow, of a type which uses sled type runners, skis,  
43 an endless belt tread, cleats, or any combination of these or other  
44 similar means of contact with the surface upon which it is operated,  
45 but does not include any farm tractor, highway or other construction  
46 equipment, or any military vehicle.

47 "Special event" means an organized race, exhibition, or  
48 demonstration of limited duration which is conducted according to a

1 prearranged schedule and in which general public interest is  
2 manifested.

3 (cf: P.L.2015, c.155, s.3)

4

5 12. Section 2 of P.L.1993, c.249 (C.52:27D-407) is amended to  
6 read as follows:

7 2. As used in this act:

8 "Abuse" means the willful infliction of physical pain, injury or  
9 mental anguish, unreasonable confinement, or the willful  
10 deprivation of services which are necessary to maintain a person's  
11 physical and mental health.

12 "Caretaker" means a person who has assumed the responsibility  
13 for the care of a vulnerable adult as a result of family relationship or  
14 who has assumed responsibility for the care of a vulnerable adult  
15 voluntarily, by contract, or by order of a court of competent  
16 jurisdiction, whether or not they reside together.

17 "Commissioner" means the Commissioner of Human Services.

18 "Community setting" means a private residence or any  
19 noninstitutional setting in which a person may reside alone or with  
20 others, but shall not include residential health care facilities,  
21 rooming houses or boarding homes or any other facility or living  
22 arrangement subject to licensure by, operated by, or under contract  
23 with, a State department or agency.

24 "County adult protective services provider" means a county  
25 Board of Social Services or other public or nonprofit agency with  
26 experience as a New Jersey provider of protective services for  
27 adults, designated by the county and approved by the commissioner.  
28 The county adult protective services provider receives reports made  
29 pursuant to this act, maintains pertinent records and provides,  
30 arranges, or recommends protective services.

31 "County director" means the director of a county adult protective  
32 services provider.

33 "Department" means the Department of Human Services.

34 "Emergency medical technician" means a person trained in basic  
35 life support services as defined in section **1** of P.L.1985, c.351  
36 (C.26:2K-21) **13** of P.L.           , c.            (C.           ) (pending before the  
37 Legislature as this bill) and who is certified by the Department of  
38 Health to provide that level of care.

39 "Exploitation" means the act or process of illegally or improperly  
40 using a person or his resources for another person's profit or  
41 advantage.

42 "Firefighter" means a paid or volunteer firefighter.

43 "Health care professional" means a health care professional who  
44 is licensed or otherwise authorized, pursuant to Title 45 or Title 52  
45 of the Revised Statutes, to practice a health care profession that is  
46 regulated by one of the following boards or by the Director of the  
47 Division of Consumer Affairs: the State Board of Medical  
48 Examiners, the New Jersey Board of Nursing, the New Jersey State

1 Board of Dentistry, the New Jersey State Board of Optometrists, the  
2 New Jersey State Board of Pharmacy, the State Board of  
3 Chiropractic Examiners, the Acupuncture Examining Board, the  
4 State Board of Physical Therapy, the State Board of Respiratory  
5 Care, the Orthotics and Prosthetics Board of Examiners, the State  
6 Board of Psychological Examiners, the State Board of Social Work  
7 Examiners, the State Board of Examiners of Ophthalmic Dispensers  
8 and Ophthalmic Technicians, the Audiology and Speech-Language  
9 Pathology Advisory Committee, the State Board of Marriage and  
10 Family Therapy Examiners, the Occupational Therapy Advisory  
11 Council, the Certified Psychoanalysts Advisory Committee, and the  
12 State Board of Polysomnography. "Health care professional" also  
13 means a nurse aide or personal care assistant who is certified by the  
14 Department of Health.

15 "Neglect" means an act or failure to act by a vulnerable adult or  
16 his caretaker which results in the inadequate provision of care or  
17 services necessary to maintain the physical and mental health of the  
18 vulnerable adult, and which places the vulnerable adult in a  
19 situation which can result in serious injury or which is life-  
20 threatening.

21 "Protective services" means voluntary or court-ordered social,  
22 legal, financial, medical or psychiatric services necessary to  
23 safeguard a vulnerable adult's rights and resources, and to protect a  
24 vulnerable adult from abuse, neglect or exploitation. Protective  
25 services include, but are not limited to: evaluating the need for  
26 services, providing or arranging for appropriate services, obtaining  
27 financial benefits to which a person is entitled, and arranging for  
28 guardianship and other legal actions.

29 "Vulnerable adult" means a person 18 years of age or older who  
30 resides in a community setting and who, because of a physical or  
31 mental illness, disability or deficiency, lacks sufficient  
32 understanding or capacity to make, communicate, or carry out  
33 decisions concerning his well-being and is the subject of abuse,  
34 neglect or exploitation. A person shall not be deemed to be the  
35 subject of abuse, neglect or exploitation or in need of protective  
36 services for the sole reason that the person is being furnished  
37 nonmedical remedial treatment by spiritual means through prayer  
38 alone or in accordance with a recognized religious method of  
39 healing in lieu of medical treatment, and in accordance with the  
40 tenets and practices of the person's established religious tradition.

41 (cf: P.L.2012, c.17, s.424)

42

43 13. (New section) As used in sections 13 through 23 of P.L. ,  
44 c. (C. ) (pending before the Legislature as this bill):

45 "Advanced life support" means an advanced level of prehospital,  
46 inter-facility, and emergency medical care which includes basic life  
47 support functions and other techniques and procedures as shall be  
48 authorized in writing by the agency medical director for each

1 mobile intensive care unit and approved by the ALS Oversight  
2 Board.

3 “Advanced Life Support Oversight Board” or “ALS Oversight  
4 Board” means the ALS Oversight Board established pursuant to  
5 section 20 of P.L. , c. (C. ) (pending before the Legislature  
6 as this bill).

7 “Advanced paramedic” means a licensed paramedic who meets  
8 the training requirements and any other requirements for licensure  
9 by the commissioner as an advanced paramedic as provided in  
10 section 14 of P.L. , c. (C. ) (pending before the Legislature  
11 as this bill).

12 “Agency director” means the individual who is responsible for  
13 oversight and administration of a hospital’s mobile intensive care  
14 units, paramedic support units, mobile integrated health units, and  
15 specialty care transport units. The agency director shall have such  
16 education and experience as is necessary to assume responsibility  
17 for the delivery of prehospital care, and shall be an individual who  
18 is either: a paramedic licensed in this State; eligible for licensure as  
19 a paramedic in the State within six months of appointment; or a  
20 licensed professional nurse in this State who is also certified as an  
21 emergency medical technician in this State.

22 “Agency medical director” means a physician licensed in this  
23 State who is board certified in emergency medicine or emergency  
24 medical services and is responsible for the medical oversight of a  
25 hospital mobile intensive care program approved pursuant to section  
26 16 of P.L. , c. (C. ) (pending before the Legislature as this  
27 bill). A person serving as an agency medical director, or in an  
28 equivalent capacity, for a hospital mobile intensive care program on  
29 the effective date of P.L. , c. (C. ) (pending before the  
30 Legislature as this bill) who does not possess the board certification  
31 required pursuant to this paragraph may continue to serve as agency  
32 medical director for the hospital for up to two years after the  
33 effective date of P.L. , c. (C. ) (pending before the  
34 Legislature as this bill), at which time no person may serve as  
35 agency medical director without meeting the board certification  
36 requirements set forth in this paragraph.

37 "Basic life support" means a basic level of prehospital care  
38 which includes patient stabilization, airway clearance,  
39 cardiopulmonary resuscitation, hemorrhage control, initial wound  
40 care and fracture stabilization, and other techniques and procedures  
41 authorized by the commissioner.

42 “Commissioner” means the Commissioner of Health.

43 “Department” means the Department of Health.

44 "Inter-facility care" means those pre-hospital medical services  
45 rendered by basic life support units or specialty care transport units  
46 to patients before and during transportation to or between  
47 emergency treatment facilities, and upon arrival within those  
48 facilities.

1 "Intermediate life support services" means an intermediate level  
2 of prehospital and emergency service care which, at a minimum,  
3 shall meet the national standard curriculum for advanced emergency  
4 medical technicians promulgated by the National Highway Traffic  
5 Safety Administration of the United States Department of  
6 Transportation. The term shall include such additional services,  
7 techniques, and procedures as shall be authorized in writing by the  
8 agency medical director for each mobile intensive care unit and  
9 approved by the ALS Oversight Board.

10 "Mobile integrated health" means the provision of non-emergent  
11 health care services by an advanced paramedic or registered nurse  
12 under a mobile intensive care program using patient-centered,  
13 mobile resources in the prehospital care environment. The  
14 authorized services provided under a mobile integrated health  
15 program shall be determined by the agency medical director  
16 overseeing the program, subject to approval by the ALS Oversight  
17 Board, and may include, but shall not be limited to: providing  
18 telephone advice to 9-1-1 callers instead of resource dispatch;  
19 providing community paramedicine care, chronic disease  
20 management, preventive care, and post-discharge follow-up visits;  
21 or providing referrals and transportation assistance to appropriate  
22 care and services to patients requiring health care services that do  
23 not require hospital-based treatment.

24 "Mobile intensive care program" means a program operated by a  
25 hospital authorized pursuant to section 16 of P.L. , c. (C. )  
26 (pending before the Legislature as this bill), which includes the  
27 provision of advanced life support services and may additionally  
28 include mobile integrated health services, specialty care transport  
29 services, or both, consistent with the requirements of P.L. ,  
30 c. (C. ) (pending before the Legislature as this bill).

31 "Mobile intensive care nurse" means a registered professional  
32 nurse who is certified by the department as an emergency medical  
33 technician and who has completed the requirements established by  
34 the ALS Oversight Board to be endorsed to provide advanced life  
35 support in accordance with the requirements of P.L. ,  
36 c. (C. ) (pending before the Legislature as this bill). A  
37 mobile intensive care nurse shall have the same scope of practice as  
38 is authorized for a licensed paramedic.

39 "Mobile intensive care unit" or "paramedic unit" means a  
40 specialized emergency medical service vehicle staffed by  
41 paramedics, advanced paramedics, mobile intensive care nurses, or  
42 paramedic assistants, as provided in section 17 of P.L. ,  
43 c. (C. ) (pending before the Legislature as this bill), which is  
44 operated for the provision of advanced life support services by an  
45 authorized hospital.

46 "Paramedic" means a person trained in advanced life support  
47 services and licensed by the commissioner to render advanced life

1 support services pursuant to section 14 of P.L. , c. (C. )  
2 (pending before the Legislature as this bill).

3 “Paramedic assistant” means a person trained in intermediate life  
4 support services and licensed by the commissioner to render  
5 intermediate life support services pursuant to section 14 of P.L. ,  
6 c. (C. ) (pending before the Legislature as this bill).

7 “Paramedic support unit” means a specialized non-transport  
8 emergency medical service vehicle staffed by at least one advanced  
9 paramedic, which shall be authorized to respond to an emergency  
10 dispatch call to provide support services to a mobile intensive care  
11 unit, including rendering advanced life support services to patients,  
12 and may additionally be authorized to provide mobile integrated  
13 health care, consistent with requirements established by the ALS  
14 Oversight Board and written protocols established by the unit’s  
15 agency medical director.

16 “Prehospital care” means the diagnosis and treatment of patients  
17 before and during transportation to treatment facilities, and upon  
18 arrival within those facilities, as well as mobile integrated health  
19 care services.

20 “Primary response area” means the area in which a hospital is  
21 expressly authorized to provide advanced life support pursuant to a  
22 certificate of need grant.

23 “Specialty care transport” means the inter-facility transportation  
24 by a specialty care transport unit of a patient in need of advanced  
25 life support care or medical monitoring that exceeds the scope of  
26 practice for a basic life support unit. The term shall include inter-  
27 facility transport by an emergency medical service helicopter  
28 response unit operating pursuant to section 3 of P.L.1986, c.106  
29 (C.26:2K-37).

30 “Specialty care transport nurse” means a registered professional  
31 nurse who is certified by the department as an emergency medical  
32 technician and who has completed the requirements established by  
33 the ALS Oversight Board to be endorsed to provide specialty care  
34 transport services in accordance with section 14 of P.L. , c.  
35 (C. ) (pending before the Legislature as this bill).

36  
37 14. (New section) a. The commissioner shall have the authority  
38 to license paramedics, advanced paramedics, and paramedic  
39 assistants, and to endorse mobile intensive care nurses and specialty  
40 care transport nurses, who meet the requirements for licensure or  
41 endorsement as established by the ALS Oversight Board pursuant to  
42 subsection b. of this section. Applications for licensure or  
43 endorsement shall be submitted to the commissioner on forms and  
44 in a manner as shall be prescribed by the commissioner by  
45 regulation. The commissioner shall license or endorse an applicant  
46 who meets the requirements for issuance of the requested license or  
47 endorsement.

1       b. (1) The ALS Oversight Board shall establish written  
2 standards for the licensure of paramedics, paramedic assistants, and  
3 advanced paramedics, and for the endorsement of mobile intensive  
4 care nurses and specialty care transport nurses, and shall make  
5 recommendations to the commissioner concerning the issuance of  
6 licenses and endorsements pursuant to subsection a. of this section.

7       (2) The written standards for licensure as a paramedic or  
8 paramedic assistant established pursuant to paragraph (1) of this  
9 section shall include standards and procedures to issue a license to:

10       (a) an applicant holding licensure issued by another state or  
11 territory of the United States, when the commissioner determines  
12 that the licensure requirements of the other state or territory are at  
13 least equivalent to the requirements established by the ALS  
14 Oversight Board for the requested license; and

15       (b) an applicant who possesses military training or experience in  
16 any branch of the active duty or reserve component of the Armed  
17 Forces of the United States or the National Guard that the  
18 commissioner deems is at least equivalent to the requirements  
19 established by the ALS Oversight Board for the requested license.

20       c. The commissioner shall permit federal law enforcement  
21 officers and members of the Armed Forces of the United States to  
22 operate under their existing certification or licensure for training  
23 purposes, and to provide prehospital care up to the individual's  
24 level of training on a mobile intensive care unit, specialty transport  
25 unit, or paramedic support unit, subject to approval by the unit's  
26 agency medical director. Military and law enforcement personnel  
27 may apply to the commissioner for approval to participate in  
28 training pursuant to this subsection on forms and in a manner as  
29 shall be prescribed by the commissioner by regulation.

30       d. The ALS Oversight Board shall be responsible for  
31 recommending individuals to the commissioner for licensure as  
32 advanced paramedics. At a minimum, each licensed advanced  
33 paramedic shall have a bachelor's degree in paramedicine or an  
34 equivalent clinical degree, along with such demonstrated education,  
35 training, and experience as may be required by the ALS Oversight  
36 Board; provided that, until such time as at least one accredited  
37 bachelor's degree program in paramedicine is available in the State,  
38 the ALS Oversight Board shall establish the minimum education,  
39 training, and experience requirements for advanced paramedic  
40 licensure, which shall, at a minimum, include licensure as a  
41 paramedic. The accreditation of an in-State bachelor's degree  
42 program in paramedicine shall not be construed to abrogate the  
43 authority of the ALS Oversight Board to continue to establish the  
44 minimum education, training, and experience requirements for  
45 licensure as an advanced paramedic, or the responsibility of the  
46 ALS Oversight Board to review applications for licensure as an  
47 advanced paramedic and provide recommendations to the  
48 department concerning licensure.

1 e. The department shall maintain a register of applicants for  
2 licensure as paramedics, advanced paramedics, and paramedic  
3 assistants and applicants for endorsement as mobile intensive care  
4 nurses and specialty care transport nurses pursuant to this section,  
5 which register shall include, but shall not be limited to:

6 (1) the name and residence of the applicant;

7 (2) the date of the application; and

8 (3) information as to whether the application was rejected or if  
9 licensure or endorsement was granted.

10 The department shall annually compile a list of individuals  
11 authorized to provide advanced life support pursuant to this section.  
12 This list shall be available to the public, without the applicant's or  
13 professional's home address made public.

14  
15 15. (New section) The commissioner, after notice and hearing,  
16 may revoke the license of a paramedic, advanced paramedic, or  
17 paramedic assistant, or revoke an endorsement issued to a mobile  
18 intensive care nurse or specialty care transport nurse, for a violation  
19 of any provision of P.L. , c. (C. ) (pending before the  
20 Legislature as this bill).

21  
22 16. (New section) a. Only a hospital authorized by the  
23 commissioner with an accredited emergency service may develop  
24 and maintain a mobile intensive care unit or paramedic support unit  
25 and provide advanced life support services and mobile integrated  
26 health care utilizing licensed physicians, paramedics, advanced  
27 paramedics, paramedic assistants, mobile intensive care nurses, and  
28 specialty care transport nurses.

29 b. A hospital authorized by the commissioner pursuant to  
30 subsection a. of this section shall provide mobile intensive care unit  
31 services on a 24-hour-per-day basis.

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

34 d. Any hospital that is authorized to develop and maintain a  
35 mobile intensive care unit on the effective date of P.L. , c.  
36 (C. ) (pending before the Legislature as this bill) shall be  
37 permitted to operate paramedic support units, provide mobile  
38 integrated health services, and provide specialty care transport  
39 services.

40 e. No hospital authorized by the commissioner pursuant to  
41 subsection a. of this section may provide advanced life support  
42 services, mobile integrated health services, or specialty  
43 transportation services unless the hospital has appointed an agency  
44 medical director to oversee the program's medical services and an  
45 agency director to oversee and administer the hospital's mobile  
46 intensive care units, paramedic support units, mobile integrated care  
47 units, and specialty care transport units.



1 f. The commissioner may withdraw authorization if the  
2 hospital or unit violates any provision of P.L. , c. (C. )  
3 (pending before the Legislature as this bill) or rules or regulations  
4 promulgated pursuant thereto.

5 g. Nothing in P.L. , c. (C. ) (pending before the  
6 Legislature as this bill) shall be construed to:

7 (1) revise the primary response areas for authorized hospitals  
8 that are in place on the effective date of P.L. , c. (C. )  
9 (pending before the Legislature as this bill);

10 (2) restrict the authority of the commissioner to revise any  
11 hospital's primary response area consistent with the certificate of  
12 need process; or

13 (3) prohibit hospitals or other entities that are not authorized by  
14 the commissioner pursuant to subsection a. of this section from  
15 providing specialty care transport services.

16  
17 17. (New section) a. A paramedic assistant may provide  
18 intermediate life support services only when operating on a mobile  
19 intensive care unit while under the supervision of an advanced  
20 paramedic. The ALS Oversight Board shall establish, in writing,  
21 the authorized scope of practice for paramedic assistants, which  
22 shall, at a minimum, include the provision of intermediate life  
23 support services.

24 b. A paramedic may provide advanced life support services  
25 only when operating on a mobile intensive care unit with a second  
26 paramedic, an advanced paramedic, or a mobile intensive care  
27 nurse. The ALS Oversight Board shall establish, in writing, the  
28 authorized scope of practice for paramedics, which shall, at a  
29 minimum, include the provision of advanced life support services.

30 c. (1) An advanced paramedic may provide advanced life  
31 support services when operating on a mobile intensive care unit  
32 with a paramedic assistant, another paramedic, or a mobile intensive  
33 care nurse, or when operating alone on a paramedic support unit.  
34 The advanced paramedic's agency medical director shall establish  
35 the scope of practice for advanced paramedics operating through  
36 that hospital's mobile intensive care program, including the scope  
37 of practice authorized for paramedic support units, which scopes of  
38 practice shall be subject to approval by the ALS Oversight Board.

39 (2) In order to transport a patient requiring advanced life  
40 support, an advanced paramedic operating on a paramedic support  
41 unit shall be accompanied by a mobile intensive care unit. Should  
42 exceptional circumstances exist in which a paramedic support unit  
43 provides transport to a patient without an accompanying mobile  
44 intensive care unit, the agency medical director shall review the  
45 patient care report from the incident and submit a report concerning  
46 the incident to the department on a form and in a manner as shall be  
47 prescribed by the commissioner.

1 d. (1) The ALS Oversight Board shall have exclusive authority  
2 for approval of medical protocols for all mobile intensive care units  
3 and personnel operating on these units, including, but not limited to,  
4 the procedures, services, equipment, medications, and standing  
5 orders approved for that unit.

6 (2) Medical protocols for advanced paramedics operating on  
7 paramedic support units or providing mobile integrated health care  
8 shall be established by the unit's agency medical director, subject to  
9 approval by the ALS Oversight Board. Any medical protocols  
10 established pursuant to this section shall be consistent with the  
11 standards established by the ALS Oversight Board.

12 (3) The ALS Oversight Board shall review protocol requests no  
13 less frequently than every quarter, and requests shall be submitted  
14 for consideration a minimum of 30 days prior to review.

15 e. A mobile intensive care nurse may provide advanced life  
16 support services only when operating on a mobile intensive care  
17 unit that is additionally staffed by a paramedic or an advanced  
18 paramedic.

19 f. A specialty care transport nurse may provide advanced life  
20 support services when operating on a specialty care transport unit  
21 with at least one other professional who shall be, at a minimum,  
22 certified as an emergency medical technician. The scope of practice  
23 for a specialty care transport unit shall be established by the unit's  
24 agency medical director, subject to approval by the ALS Oversight  
25 Board.

26  
27 18. (New section) a. The commissioner shall establish by  
28 regulation the requirements for licensure of mobile intensive care  
29 units, paramedic support units, mobile integrated health units, and  
30 specialty care transport units. Each unit shall carry such devices,  
31 medications, and equipment as shall be required by the ALS  
32 Oversight Board pursuant to written standards concerning the  
33 provision of prehospital care by units of each licensure type, and  
34 may carry any additional devices, medications, and equipment as  
35 may be authorized by the ALS Oversight Board pursuant to written  
36 standards, if the unit's agency medical director approves the  
37 additional devices, medications, or equipment.

38 b. A mobile intensive care unit shall be authorized to respond  
39 to prehospital emergency calls for advanced life support services in  
40 the hospital's primary response area, and in other areas upon  
41 request or need. The agency medical director of each authorized  
42 hospital shall be permitted to establish the standards for mobile  
43 intensive care unit dispatch within the hospital's primary response  
44 area.

45 c. A paramedic support unit shall not substitute for a mobile  
46 intensive care unit in order to meet minimum deployment standards  
47 for a hospital mobile intensive care program.

1 d. A unit shall be authorized to concurrently hold licensure as a  
2 mobile intensive care unit, paramedic support unit, mobile  
3 integrated health unit, and specialty care transport unit, provided  
4 that it meets requirements for each type of licensure and, when  
5 acting in the capacity of a particular license, is in compliance with  
6 the staffing and operational requirements for that license type. A  
7 specialty care transport unit that is also licensed as a mobile  
8 intensive care unit shall not operate as a specialty care transport unit  
9 if the unit is being counted towards minimum deployment standards  
10 for a hospital mobile intensive care program.

11

12 19. (New section) No volunteer or non-volunteer first aid,  
13 ambulance or rescue squad, board of trustees, officers, or members  
14 of a volunteer or non-volunteer first aid, ambulance or rescue  
15 squad, emergency medical technician, paramedic, advanced  
16 paramedic, paramedic assistant, mobile intensive care nurse,  
17 specialty care transport nurse, licensed physician, nurse, or other  
18 hospital employee, or a hospital authorized by the commissioner,  
19 shall be liable for any civil damages as the result of an act or the  
20 omission of an act committed while in training for, when rendering,  
21 or when supervising, prehospital care in good faith and in  
22 accordance with the provisions P.L. , c. (C. ) (pending  
23 before the Legislature as this bill).

24

25 20. (New section) a. There is established in, but not of, the  
26 department the ALS Oversight Board. The ALS Oversight Board  
27 shall be responsible for:

28 (1) establishing and maintaining written standards for the  
29 licensure of paramedics, advanced paramedics, and paramedic  
30 assistants;

31 (2) establishing education or equivalency standards for  
32 advanced paramedics and standards for the approval of advanced  
33 paramedic training programs;

34 (3) establishing and maintaining written standards for the  
35 endorsement of mobile intensive care nurses and specialty care  
36 transport nurses;

37 (4) establishing the scope of practice and medical protocols for  
38 paramedic assistants and paramedics;

39 (5) approving medical protocols for advanced paramedics;

40 (6) establishing equivalency standards for approving out-of-  
41 State health care professionals, members of the military, and federal  
42 law enforcement officers to train or practice in the State pursuant to  
43 section 14 of P.L. , c. (C. ) (pending before the Legislature  
44 as this bill);

45 (7) providing advice to the commissioner concerning the  
46 adoption of rules and regulations and on topics concerning  
47 advanced life support, mobile integrated health, specialty care  
48 transport, and other aspects of prehospital care; and

- 1 (8) such other duties as are provided under P.L. , c. (C. )  
2 (pending before the Legislature as this bill).
- 3 b. The ALS Oversight Board shall be comprised of the agency  
4 directors and agency medical directors of each mobile intensive  
5 care program authorized pursuant to section 16 of P.L. , c.  
6 (C. ) (pending before the Legislature as this bill), as well as  
7 other individuals with knowledge or experience as the ALS  
8 Oversight Board determines necessary to carry out its purposes.  
9 The ALS Oversight Board may establish its bylaws, determine its  
10 membership, elect its officers, and conduct meetings and business  
11 as shall be necessary to carry out its duties.
- 12 c. The commissioner shall appoint the chairperson of the ALS  
13 Oversight Board, who shall be a physician licensed to practice  
14 medicine or surgery in this State who is board certified in  
15 emergency medicine or emergency medical services. The  
16 chairperson of the ALS Oversight Board shall serve at the pleasure  
17 of the commissioner.
- 18 d. The chairperson shall establish standing committees to  
19 advise the ALS Oversight Board on agency licensure, provider  
20 licensure, scope of practice and medical protocols, communications  
21 and dispatch, air medical services, regulations, and other  
22 specialties. Membership on each standing committee shall be  
23 comprised of individuals with the necessary education and expertise  
24 to advise the ALS Oversight Board on the specific areas with which  
25 the standing committee is tasked.
- 26 e. The ALS Oversight Board shall organize no later than 60  
27 days after the effective date of P.L. , c. (C. ) (pending  
28 before the Legislature as this bill), and, no later than 60 days after  
29 the date of organization, shall establish standards for training and  
30 licensure of paramedic assistants and advanced paramedics.
- 31 f. Paramedic education programs operating in the State on the  
32 effective date of P.L. , c. (C. ) (pending before the  
33 Legislature as this bill) that are accredited by the Commission on  
34 Accreditation of Allied Health Education Programs shall be  
35 authorized to conduct training for paramedic assistants until such  
36 time as the commission, in consultation with the ALS Oversight  
37 Board, establishes by regulation standards for approval of  
38 paramedic education programs. Thereafter, all paramedic education  
39 programs shall be subject to approval by the commissioner  
40 consistent with those standards.
- 41
- 42 21. (New section) a. Nothing in P.L. , c. (C. ) (pending  
43 before the Legislature as this bill) shall be construed to prevent a  
44 licensed and qualified health care professional from performing any  
45 of the duties of a paramedic, advanced paramedic, paramedic  
46 assistant, mobile intensive care nurse, or specialty transport nurse if  
47 the duties are consistent with the professional's scope of practice.

1 b. A paramedic, advanced paramedic, paramedic assistant,  
2 mobile intensive care nurse, or specialty care transport nurse shall  
3 be authorized to act in the scope of a certified emergency medical  
4 technician.

5  
6 22. (New section) a. No person or entity shall advertise or  
7 disseminate information to the public that the person or entity  
8 provides advanced life support services or mobile integrated health  
9 services unless the person is authorized to do so pursuant to  
10 P.L. , c. (C. ) (pending before the Legislature as this bill).

11 b. No person shall impersonate or refer to himself or herself as  
12 a paramedic, advanced paramedic, paramedic assistant, mobile  
13 intensive care nurse, or specialty care transport nurse unless that  
14 person holds the requisite licensure or endorsement.

15  
16 23. (New section) An individual who violates the provisions of  
17 P.L. , c. (C. ) (pending before the Legislature as this bill) is  
18 liable to a civil penalty of \$200 for the first offense and \$500 for a  
19 second or subsequent offense. If a violation of P.L. , c.  
20 (C. ) (pending before the Legislature as this bill) is of a  
21 continuing nature, each day during which the violation continues  
22 shall constitute a separate offense for the purposes of this section.  
23 The civil penalty shall be collected by summary proceedings  
24 pursuant to the "Penalty Enforcement Law of 1999," P.L.1999,  
25 c.274 (C.2A:58-10 et seq.).

26  
27 24. (New section) The Commissioner of Health shall, pursuant  
28 to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-  
29 1 et seq.), adopt rules and regulations as are necessary to effectuate  
30 the purposes of this act. In adopting rules and regulations, the  
31 Commissioner shall broadly interpret the provisions of this act to  
32 promote and ensure access to quality prehospital care.

33  
34 25. Sections 1 through 14 of P.L.1984, c.146 (C.26:2K-7 et seq.)  
35 and P.L.1985, c.351 (C.26:2K-21 et seq.) are repealed

36  
37 26. This act shall take effect 90 days following enactment.

38

39

40

#### STATEMENT

41

42 This bill revises the requirements for the licensure and operation  
43 of mobile intensive care units and personnel operating on those  
44 units.

45 The bill identifies several new categories of licensure with  
46 regard to prehospital care: advanced paramedics; paramedic  
47 assistants; mobile intensive care nurses; specialty care transport  
48 nurses; paramedic support units; and mobile integrated care units.

1 The bill additionally revises the requirements for paramedic  
2 licensure and for licensure of mobile intensive care units.

3 Under the bill, mobile intensive care programs operated by a  
4 hospital may provide, in addition to advanced life support services  
5 through a mobile intensive care unit, mobile integrated health care  
6 and specialty care transport services. Mobile integrated health care  
7 is the provision of non-emergent health care services by an  
8 advanced paramedic or registered nurse using patient-centered,  
9 mobile resources, including alternative treatment modalities in  
10 response to non-emergent 9-1-1 calls; providing community  
11 paramedicine care, chronic disease management, preventative care,  
12 and post-discharge follow-up visits; and providing referrals and  
13 transportation assistance to patients who do not require hospital-  
14 based treatment. Specialty care transport is the inter-facility  
15 transportation of a patient in need of care that exceeds the scope of  
16 practice for a basic life support unit, which would ordinarily  
17 provide transportation services.

18 The bill authorizes a mobile intensive care unit to be operated by  
19 a paramedic operating with another paramedic, a mobile intensive  
20 care nurse, or an advanced paramedic, or by an advanced paramedic  
21 and a paramedic assistant, which, under the bill, is a professional  
22 licensed to provide intermediate life support. Specialty care  
23 transport units would be staffed by a specialty care transport nurse  
24 and at least one other professional certified as an emergency  
25 medical technician (EMT). The bill additionally authorizes  
26 paramedic support units, which would be staffed by at least one  
27 advanced paramedic and used to provide both mobile integrated  
28 health care and support to mobile intensive care units responding to  
29 an emergency call. Units may hold multiple licenses at one time,  
30 provided that they meet the qualification requirements for each type  
31 of license held.

32 The bill will not revise the current requirements for a hospital to  
33 be authorized to develop and provide a mobile intensive care  
34 program or the primary response areas in which hospitals are  
35 authorized to provide services.

36 The bill establishes in, but not of, the Department of Health, the  
37 Advanced Life Support (ALS) Oversight Board. The ALS  
38 Oversight Board will be responsible for: (1) establishing and  
39 maintaining written standards for the licensure of paramedics,  
40 advanced paramedics, and paramedic assistants; (2) establishing  
41 education or equivalency standards for advanced paramedics and  
42 standards for the approval of advanced paramedic training  
43 programs; (3) establishing and maintaining written standards for the  
44 endorsement of mobile intensive care nurses and specialty care  
45 transport nurses; (4) establishing the scope of practice and medical  
46 protocols for paramedic assistants and paramedics; (5) approving  
47 medical protocols for advanced paramedics; (6) establishing  
48 equivalency standards for approval of out-of-State health care

1 professionals, including paramedics, other emergency medical  
2 services personnel, members of the military, and federal law  
3 enforcement officers to train and practice in the State; (7) providing  
4 advice to the Commissioner of Health concerning the promulgation  
5 of regulations and on other aspects concerning advanced life  
6 support, mobile integrated health care, specialty care transport, and  
7 other aspects of prehospital care; and (8) such other duties as are  
8 expressly provided under the bill.

9 The membership of the board will comprise the agency directors  
10 and agency medical directors of mobile intensive care programs  
11 authorized to operate in the State. Agency medical directors are  
12 board-certified emergency physicians who provide medical  
13 oversight for a hospital mobile intensive care program, while  
14 agency operational directors are paramedics, or nurses holding a  
15 valid EMT certification, who are responsible for oversight and  
16 administration of the program's mobile intensive care units, mobile  
17 integrated care units, and specialty care transport units. Each  
18 mobile intensive care program is required to have both an agency  
19 director and an agency medical director. The chair of the board,  
20 who will be appointed by the Commissioner of Health and will  
21 serve at the commissioner's pleasure, is required to be a licensed  
22 physician who is board certified in emergency medicine or  
23 emergency medical services.

24 In general, the scope of practice and protocols authorized for a  
25 given paramedic, advanced paramedic, paramedic assistant, mobile  
26 intensive care nurse, specialty care transport nurse, mobile intensive  
27 care unit, paramedic support unit, mobile integrated care unit, or  
28 specialty care transport unit will be authorized by that  
29 professional's or unit's agency medical director, consistent with  
30 standards established by the ALS Oversight Board and subject to  
31 board approval. However, the ALS Oversight Board will have  
32 exclusive authority to determine the scope of practice for advanced  
33 paramedics.

34 Advanced paramedics will be required, at a minimum, to hold a  
35 bachelor's degree in paramedicine; however, until bachelor's degree  
36 programs in paramedicine become available in New Jersey, the  
37 ALS Oversight Board will have the authority to establish the  
38 minimum education, training, and experience requirements for  
39 licensure. The board will continue to have the authority to establish  
40 these requirements even after an accredited paramedicine degree  
41 program becomes available in the State and the degree becomes a  
42 minimum requirement for advanced paramedic licensure.

43 The bill repeals sections 1 through 14 of P.L.1984, c.146  
44 (C.26:2K-7 et seq.), which set forth the current licensing and  
45 operational requirements for mobile intensive care units, and  
46 P.L.1985, c.351 (C.26:2K-21 et seq.), which established the now  
47 obsolete EMT-intermediate pilot program.

1       It is the sponsor's belief that this bill will foster an enhanced and  
2 more dynamic system of prehospital care in the State through the  
3 use of a diversified licensing structure, community-based mobile  
4 integrated health care designed to prevent unnecessary hospital  
5 utilization, and additional types of mobile care units, including  
6 mobile integrated care units and paramedic support units. It is the  
7 sponsor's hope that this new system of prehospital care will  
8 increase access to care by improving paramedic distribution and  
9 allowing faster response times, improve the efficiency and  
10 effectiveness of the State emergency medical services system, and  
11 that this reformed system of prehospital care may lead to other  
12 innovative healthcare solutions that may become available and  
13 prudent as the healthcare care delivery system evolves.