

SENATE, No. 3432

STATE OF NEW JERSEY
219th LEGISLATURE

INTRODUCED FEBRUARY 11, 2021

Sponsored by:

Senator M. TERESA RUIZ

District 29 (Essex)

SYNOPSIS

Requires preeclampsia testing for certain pregnant women and women who have given birth.

CURRENT VERSION OF TEXT

As introduced.



1 **AN ACT** concerning preeclampsia testing for pregnant women and
2 supplementing Title 26 of the Revised Statutes.

3
4 **BE IT ENACTED** *by the Senate and General Assembly of the State*
5 *of New Jersey:*

6
7 1. a. The Commissioner of Health shall require every hospital
8 that provides inpatient maternity services in the State, every
9 birthing center licensed in the State pursuant to P.L.1971, c.136
10 (C.26:2H-1 et seq.), or every physician or health care practitioner in
11 the State providing care to a pregnant woman or a woman who has
12 given birth to administer to the woman a test for preeclampsia, if
13 the woman shows symptoms of the condition. The test shall
14 include, but not be limited to, blood tests, ultrasonography, and
15 non-stress tests that monitor a baby's health.

16 b. A hospital that provides inpatient maternity services or
17 licensed birthing center providing care to, or a physician or other
18 health care practitioner who is the primary caregiver for, a pregnant
19 woman or a woman who seeks treatment within four weeks of
20 giving birth, shall, in accordance with guidelines developed by the
21 commissioner:

22 (1) provide the woman with information on preeclampsia;

23 (2) inform the woman of the benefits of being tested for
24 preeclampsia if she shows symptoms of the condition, and that she
25 is required to be tested for preeclampsia unless she indicates in
26 writing her refusal to be tested on a form and in a manner
27 prescribed by the commissioner; and

28 (3) test the woman for preeclampsia unless she indicates her
29 written refusal as hereinabove provided. The woman shall, on the
30 same form and in a manner prescribed by the commissioner,
31 acknowledge receipt of the information provided by the hospital,
32 birthing center, physician, or health care practitioner, as applicable,
33 regarding the benefits of being tested for preeclampsia.

34 c. Upon receipt of the results of the test conducted pursuant to
35 subsection a. of this section, the hospital that provides inpatient
36 maternity services, licensed birthing center, or physician or health
37 care practitioner shall discuss the results with a pregnant women or
38 women who has given birth and, if the woman tests positive for
39 preeclampsia, develop a treatment plan to minimize the woman's
40 risk from preeclampsia.

41
42 2. The Commissioner of Health, pursuant to the
43 "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et
44 seq.), shall adopt rules and regulations to effectuate the purposes of
45 this act.

46
47 3. This act shall take effect immediately.

STATEMENT

This bill mandates the Commissioner of Health to require every hospital that provides inpatient maternity services in the State, every birthing center licensed in the State pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.), or every physician or health care practitioner in the State providing care to a pregnant woman or a woman who has given birth to administer to the woman a test for preeclampsia, if the woman shows symptoms of the condition. The tests would include, but not be limited to, blood tests, ultrasonography, and non-stress tests that monitor a baby's health.

A hospital or licensed birthing center providing care to, or a physician or other health care practitioner who is the primary caregiver for, a pregnant woman or a woman who seeks treatment within four weeks of giving birth, would, in accordance with guidelines developed by the commissioner: provide the woman with information on preeclampsia; inform the woman of the benefits of being tested for preeclampsia if she shows symptoms of the condition, and that she is required to be tested for preeclampsia unless she indicates in writing her refusal to be tested on a form and in a manner prescribed by the commissioner; and test the woman for preeclampsia unless she indicates her written refusal as hereinabove provided. The woman would, on the same form acknowledge receipt of the information provided by the hospital, birthing center, physician, or health care practitioner, as applicable, regarding the benefits of being tested for preeclampsia.

Upon receipt of the results of the test conducted pursuant to the bill, a hospital that provides inpatient maternity services, licensed birthing center, or physician or health care practitioner would discuss the results with a pregnant women or women who has given birth and, if the woman tests positive for preeclampsia, develop a treatment plan to minimize the woman's risk from preeclampsia.

Preeclampsia and other hypertensive disorders are some of the most common pregnancy-related complications and are a leading cause of maternal morbidity and mortality. The incidence of preeclampsia, alone, has increased by 25 percent in the United States over the past two decades.

The failure of hospitals, birthing centers, physicians, and other health care practitioners to timely recognize and communicate about a patient's risk factors for preeclampsia and other hypertensive disorders, and to adequately identify warning signs of patient deterioration in association with these conditions, often leads to delays in diagnosis and treatment, allows for the development of more severe complications, and increases the likelihood of maternal death stemming from these conditions.

1 Requiring hospitals, birthing centers, physicians, and other
2 health care practitioners to administer a preeclampsia test to
3 pregnant women and women who have given birth, if the woman
4 shows symptoms of the condition, would reduce the rate of
5 pregnancy-related complication and death and improve maternal
6 and infant health in New Jersey.