



Survival Factors Attachment 8

New Jersey EMS Law

**Cranbury, NJ
HWY14MH012**

(70 Pages)

SENATE COMMITTEE SUBSTITUTE FOR
SENATE, No. 818

STATE OF NEW JERSEY
214th LEGISLATURE

ADOPTED DECEMBER 8, 2011

Sponsored by:

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District 19 (Middlesex)

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SYNOPSIS

Revises requirements for emergency medical services delivery.

CURRENT VERSION OF TEXT

Substitute as adopted by the Senate Health, Human Services and Senior Citizens Committee.



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

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

7
8 1. Section 1 of P.L.1984, c.146 (C.26:2K-7) is amended to read
9 as follows:

10 1. As used in **[this act]** chapter 2K of Title 26 of the Revised
11 Statutes:

12 **[a.]** "Advanced life support" means an advanced level of **[pre-**
13 **hospital, inter-hospital, and emergency service]** care which includes
14 basic life support functions, cardiac monitoring, cardiac
15 defibrillation, telemetered electrocardiography, administration of
16 anti-arrhythmic agents, intravenous therapy, administration of
17 specific medications, drugs and solutions, use of adjunctive
18 ventilation devices, trauma care, and other techniques and
19 procedures authorized in writing by the commissioner**[:]**.

20 "Agency" means an organization that is licensed or otherwise
21 authorized by the department to operate a pre-hospital or inter-
22 facility care ambulance service.

23 "Basic life support" means a basic level of pre-hospital care or
24 inter-facility care which includes patient stabilization, airway
25 clearance, cardiopulmonary resuscitation, hemorrhage control,
26 initial wound care, fracture stabilization, and other techniques and
27 procedures authorized in writing by the commissioner.

28 **[b.]** "Board of Medical Examiners" means the State Board of
29 Medical Examiners**[:]**.

30 **[c.]** "Board of Nursing" means the New Jersey State Board of
31 Nursing**[:]**.

32 "Clinician" means a person who is licensed or otherwise
33 authorized to provide patient care in a pre-hospital care or inter-
34 facility care setting.

35 **[d.]** "Commissioner" means the Commissioner of **[the State**
36 **Department of Health;]** Health and Senior Services.

37 **[e.]** "Department" means the **[State]** Department of Health**[:]**
38 and Senior Services.

39 **[f.]** "Emergency **[service]** department" means a program in a
40 general hospital staffed 24 hours a day by a licensed physician
41 trained in emergency medicine**[:]** and as prescribed by regulation
42 of the commissioner.

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 “EMCAB” means the Emergency Medical Care Advisory Board
2 established pursuant to section 13 of P.L. , c. (C.)(pending
3 before the Legislature as this bill).

4 “Emergency medical responder” means a person trained to
5 provide emergency medical first response services in a program
6 recognized by the commissioner and licensed or otherwise
7 authorized by the department to provide those services.

8 “Emergency medical services personnel” means persons trained
9 and licensed or otherwise authorized to provide emergency medical
10 care, whether on a paid or volunteer basis, as part of a basic life
11 support or advanced life support pre-hospital care service or in an
12 emergency department in a general hospital.

13 “Emergency medical technician” or “EMT” means a person
14 trained to provide basic life support services in a program
15 recognized by the commissioner and licensed or otherwise
16 authorized by the department to provide those services.

17 “EMSC Advisory Council” means the Emergency Medical
18 Services for Children Advisory Council established pursuant to
19 section 5 of P.L.1992, c.96 (C.26:2K-52).

20 “EMSC coordinator” means the person coordinating the EMSC
21 program within the Office of Emergency Medical Services in the
22 department.

23 “EMSC program” means the Emergency Medical Services for
24 Children program established pursuant to section 3 of P.L.1992,
25 c.96 (C.26:2K-50), and other relevant programmatic activities
26 conducted by the Office of Emergency Medical Services in the
27 department in support of appropriate treatment, transport, and triage
28 of ill or injured children in New Jersey.

29 **[g. “Inter-hospital care” means those emergency medical**
30 **services rendered by mobile intensive care units to emergency**
31 **patients before and during transportation between emergency**
32 **treatment facilities, and upon arrival within those facilities;]**

33 “Health care facility” means a health care facility licensed
34 pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.).

35 “Inter-facility care” means those medical services rendered to
36 patients by emergency medical services personnel before and during
37 transportation between medical facilities, and upon arrival at those
38 facilities.

39 **[h. “Mobile intensive care paramedic” means a person trained in**
40 **advanced life support services and certified by the commissioner to**
41 **render advanced life support services as part of a mobile intensive**
42 **care unit;]**

43 **[i.] “Mobile intensive care unit” means a specialized emergency**
44 **medical service vehicle that is operating under a mobile intensive**
45 **care program pursuant to section 6 of P.L.1984, c.146 (C.26:2K-12)**
46 **and is staffed by [mobile intensive care] paramedics or registered**
47 **professional nurses [trained in advanced life support nursing and**

1 operated for the provision of advanced life support services]
2 recognized as mobile intensive care nurses, or other personnel
3 authorized by the commissioner, under the medical direction of an
4 authorized hospital [;].

5 “9-1-1 call” means a 9-1-1 telephone call for emergency medical
6 services in which the caller dials 9-1-1, or a method adopted in the
7 future to initiate the response of emergency medical services for a
8 medical reason through a public safety answering point as defined
9 in section 1 of P.L.1989, c.3 (C.52:17C-1).

10 “Paramedic” means a person licensed or otherwise authorized by
11 the commissioner as a paramedic pursuant to regulation of the
12 commissioner.

13 [j.] "Pre-hospital care" means those [emergency medical
14 services rendered by mobile intensive care units to emergency]
15 medical services rendered to patients by emergency medical
16 services personnel before and during transportation to [emergency
17 treatment] medical facilities, and upon arrival within those
18 facilities.

19 "Regional trauma center" means a State designated level one
20 hospital-based trauma center equipped and staffed to provide
21 emergency medical services to an accident or trauma victim.

22 “Volunteer first aid, ambulance or rescue squad” means a
23 volunteer first aid, ambulance or rescue squad as defined in section
24 3 of P.L.1987, c.284 (C.27:5F-20).

25 (cf: P.L.1984, c.146, s.1)

26

27 2. Section 2 of P.L.1984, c.146 (C.26:2K-8) is amended to read
28 as follows:

29 2. a. (1) A [mobile intensive care] paramedic shall obtain
30 [certification] licensure from the commissioner to staff a mobile
31 intensive care unit or a health care facility and shall make
32 application therefor on forms prescribed by the commissioner.

33 (2) An EMT shall obtain licensure from the commissioner to
34 staff a licensed ambulance or a health care facility and shall make
35 application therefor on forms prescribed by the commissioner.

36 (3) An emergency medical responder shall obtain licensure from
37 the commissioner to respond to 9-1-1 calls and shall make
38 application therefor on forms prescribed by the commissioner.

39 b. The commissioner [with the approval of the board of
40 medical examiners] shall establish written standards which [a
41 mobile intensive care paramedic] an applicant shall meet in order to
42 obtain [certification] licensure as a paramedic, EMT, or emergency
43 medical responder. The commissioner shall act on a regular basis
44 upon applications of candidates for [certification] licensure as a
45 [mobile intensive care] paramedic, EMT, or emergency medical
46 responder. The commissioner shall [certify] license a candidate

1 who provides satisfactory evidence of the successful completion of
2 an educational program approved by the commissioner for the
3 training of **mobile intensive care** paramedics, EMTs, or
4 emergency medical responders, as applicable, and who passes an
5 examination **in the provision of advance life support services**
6 approved by the department for the applicable licensure, which
7 examination shall be conducted by the department at least twice a
8 year.

9 c. The department shall maintain a register of all applicants for
10 **certification** licensure hereunder, which register shall include but
11 not be limited to:

12 (1) The name and residence of the applicant;

13 (2) The date of the application;

14 (3) Information as to whether the applicant was rejected or
15 **certified** licensed and the date of that action.

16 d. An EMT who is a member of a volunteer first aid,
17 ambulance or rescue squad shall not be required to pay a fee or
18 assume any other cost for licensure from the commissioner pursuant
19 to this section.

20 e. The department shall **annually compile a** maintain a
21 current list of **mobile intensive care** paramedics and EMTs. This
22 list shall be available to the public on the Internet website of the
23 department.

24 (cf: P.L.1984, c.146, s.2)

26 3. Section 3 of P.L.1984, c.146 (C.26:2K-9) is amended to read
27 as follows:

28 3. The commissioner, after notice and hearing, may revoke the
29 **certification** license of a **mobile intensive care** paramedic,
30 EMT, or emergency medical responder for violation of any
31 provision of **this act** P.L.1984, c.146 (C.26:2K-7 et seq.) or
32 regulation promulgated hereunder.

33 (cf: P.L.1984, c.146, s.3)

35 4. Section 4 of P.L.1984, c.146 (C.26:2K-10) is amended to
36 read as follows:

37 4. A **mobile intensive care** paramedic may **perform**
38 provide advanced life support services, provided **they maintain**
39 that the paramedic:

40 a. maintains direct voice communication with and **are** is
41 taking orders from a licensed physician or physician directed
42 registered professional nurse, both of whom are affiliated with a
43 mobile intensive care **hospital which is approved by the**
44 commissioner to provide advanced life support services. A
45 telemetered electrocardiogram shall be monitored when deemed
46 appropriate by the licensed physician or when required by written

1 rules and regulations established by the mobile intensive care
2 hospital and approved by the commissioner] program operating
3 pursuant to section 6 of P.L.1984, c.146 (C.26:2K-12); or

4 b. is operating under standing orders from a licensed physician
5 that have been developed or approved by a mobile intensive care
6 program.

7 (cf: P.L.1984, c.146, s.4)

8

9 5. Section 6 of P.L.1984, c.146 (C.26:2K-12) is amended to
10 read as follows:

11 6. a. Only a hospital [authorized by the commissioner with an
12 accredited emergency service may develop and maintain a mobile
13 intensive care unit, and provide advanced life support services
14 utilizing licensed physicians, registered professional nurses trained
15 in advanced life support nursing, and mobile intensive care
16 paramedics] licensed by the department to operate a mobile
17 intensive care program may develop or maintain such a program.
18 At a minimum, the hospital shall be required to maintain an
19 emergency department.

20 b. A hospital authorized by the commissioner pursuant to
21 subsection a. of this section shall provide mobile intensive care unit
22 services on a seven-day-a-week basis.

23 c. The commissioner shall establish, [in writing] by
24 regulation, criteria which a hospital shall meet in order to [qualify
25 for the authorization] obtain licensure to operate a mobile intensive
26 care program, and shall prescribe, in those regulations, standards
27 and responsibilities for the position of medical director for the
28 program. A hospital operating a mobile intensive care program
29 prior to, or on the effective date of, P.L. , c. (pending before the
30 Legislature as this bill), shall be required to meet any new
31 requirements for such licensure as may be established by the
32 commissioner by the date that the hospital is required to apply for
33 renewal of its license to operate a mobile intensive care program.

34 d. The commissioner [may withdraw his authorization] shall
35 provide by regulation for enforcement of the provisions of chapter
36 2K of Title 26 of the Revised Statutes, up to and including
37 revocation of licensure to operate a mobile intensive care program
38 if the hospital or unit violates any provision [of this act] thereof or
39 rules or regulations promulgated pursuant thereto.

40 (cf: P.L. 1985, c.351, s. 2)

41

42 6. (New section) a. The commissioner shall not issue an initial
43 license or other authorization to practice as a clinician unless the
44 commissioner first determines that no criminal history record
45 information exists on file in the Federal Bureau of Investigation,
46 Identification Division, or in the State Bureau of Identification in
47 the Division of State Police, which may disqualify the applicant

- 1 from being licensed or otherwise authorized to practice as a
2 clinician as determined by regulation of the commissioner.
- 3 b. (1) The commissioner shall not renew a license or other
4 authorization to practice as a clinician unless the commissioner first
5 determines that no criminal history record information exists on file
6 in the Federal Bureau of Investigation, Identification Division, or in
7 the State Bureau of Identification in the Division of State Police,
8 which may provide grounds for the refusal to renew the license or
9 other authorization to practice as a clinician.
- 10 (2) The commissioner shall revoke a license or other
11 authorization to practice as a clinician if the commissioner
12 determines that criminal history record information exists on file in
13 the Federal Bureau of Investigation, Identification Division, or in
14 the State Bureau of Identification in the Division of State Police,
15 which may provide grounds for the refusal to renew the license or
16 other authorization to practice as a clinician.
- 17 c. The commissioner shall establish, by regulation, a schedule
18 of dates by which the requirements of this section shall be
19 implemented no later than four years after the effective date of
20 P.L. , c. (pending before the Legislature as this bill).
- 21 d. The commissioner may, in an emergent circumstance as
22 determined by the commissioner, temporarily waive the
23 requirement for a person to undergo a criminal history record
24 background check as a condition of new or renewed licensure or
25 other authorization to practice as a clinician.
- 26 e. An applicant or licensee who is required to undergo a
27 criminal history record background check pursuant to this section
28 shall submit to the commissioner that individual's name, address,
29 and fingerprints taken on standard fingerprint cards, or through any
30 equivalent means, by a State or municipal law enforcement agency
31 or by a private entity under contract with the State. The
32 commissioner is authorized to exchange fingerprint data with and
33 receive criminal history record information from the Federal Bureau
34 of Investigation and the Division of State Police for use in making
35 the determinations required pursuant to this section.
- 36 f. Upon receipt of the criminal history record information for
37 an applicant or licensee from the Federal Bureau of Investigation or
38 the Division of State Police, the commissioner shall immediately
39 notify the applicant or licensee, as applicable.
- 40 g. If an applicant refuses to consent to, or cooperate in, the
41 securing of a criminal history record background check, the
42 commissioner shall not issue a clinician license and shall notify the
43 applicant of that denial.
- 44 h. If a licensee refuses to consent to, or cooperate in, the
45 securing of a criminal history record background check as required
46 during the licensure or other authorization renewal process, the
47 commissioner shall refuse to renew the license or other

1 authorization of the licensee, without a hearing, and shall notify the
2 licensee of that denial.

3 i. A licensee:

4 (1) who has permitted a license or other authorization to lapse,
5 or whose license, other authorization or privilege has been
6 suspended, revoked, or otherwise, and

7 (2) who has not already submitted to a criminal history record
8 background check, shall be required to submit fingerprints as part
9 of the licensure or other authorization reinstatement process. If a
10 reinstatement applicant refuses to consent to, or cooperate in, the
11 securing of a criminal history record background check as required
12 during the reinstatement process, the commissioner shall
13 automatically deny reinstatement of the license or other
14 authorization, without a hearing, and shall notify the licensee of that
15 denial.

16 j. An applicant for licensure or other authorization to practice
17 as a clinician shall be required to assume the cost of the criminal
18 history record background check conducted pursuant to this section,
19 in accordance with procedures determined by regulation of the
20 commissioner, except that a member of a volunteer first aid,
21 ambulance or rescue squad shall not be required to assume this cost.

22 k. The provisions of this section shall not apply to a health care
23 professional who is subject to a criminal history record background
24 check pursuant to P.L.2002, c.104 (C.45:1-28 et al.)
25

26 7. Section 14 of P.L.1997, c.100 (C.53:1-20.9a) is amended to
27 read as follows:

28 14. a. In accordance with the provisions of sections 2 through 6
29 and sections 7 through 13 of P.L.1997, c.100 (C.26:2H-83 through
30 87 and C.45:11-24.3 through 24.9) **[and]**, P.L.2002, c.104 (C.45:1-
31 28 et al.), and section 6 of P.L. , c. (C.) (pending before the
32 Legislature as this bill), the Division of State Police in the
33 Department of Law and Public Safety shall conduct a criminal
34 history record background check, including a name and fingerprint
35 identification check, of:

36 (1) each applicant for nurse aide or personal care assistant
37 certification submitted to the Department of Health and Senior
38 Services and of each applicant for homemaker-home health aide
39 certification submitted to the New Jersey Board of Nursing in the
40 Division of Consumer Affairs;

41 (2) each nurse aide or personal care assistant certified by the
42 Department of Health and Senior Services and each homemaker-
43 home health aide certified by the New Jersey Board of Nursing, as
44 required pursuant to P.L.1997, c.100 (C.26:2H-83 et al.); **[and]**

45 (3) each applicant for licensure or other authorization to engage
46 in a health care profession who is required to undergo a criminal

1 history record background check pursuant to P.L.2002, c.104
2 (C.45:1-28 et al.); and

3 (4) each applicant for clinician licensure who is required to
4 undergo a criminal history record background check pursuant to
5 section 6 of P.L. , c. (C.) (pending before the Legislature as
6 this bill).

7 b. For the purpose of conducting a criminal history record
8 background check pursuant to subsection a. of this section, the
9 Division of State Police shall examine its own files and arrange for
10 a similar examination by federal authorities. The division shall
11 immediately forward the information obtained as a result of
12 conducting the check to: the Commissioner of Health and Senior
13 Services, in the case of an applicant for nurse aide or personal care
14 assistant certification **[or]**, a certified nurse aide or personal care
15 assistant, or an applicant for clinician licensure pursuant to chapter
16 2K of Title 26 of the Revised Statutes; the New Jersey Board of
17 Nursing in the Division of Consumer Affairs in the Department of
18 Law and Public Safety, in the case of an applicant for homemaker-
19 home health aide certification or a certified homemaker-home
20 health aide; and the Director of the Division of Consumer Affairs in
21 the Department of Law and Public Safety, in the case of an
22 applicant for licensure or other authorization to practice as a health
23 care professional as defined in section 1 of P.L.2002, c.104 (C.45:1-
24 28).

25 (cf: P.L.2002, c.104, s.5)

26

27 8. (New section) a. Only an agency as defined in section 1 of
28 P.L.1984, c.146 (C.26:2K-7) may develop or maintain a pre-
29 hospital or inter-facility care ambulance service.

30 b. The commissioner shall establish, by regulation, criteria
31 which an agency shall meet in order to obtain licensure to operate a
32 pre-hospital or inter-facility care ambulance service, and shall
33 prescribe in those regulations standards and responsibilities for the
34 position of agency medical director. An agency operating a pre-
35 hospital or inter-facility care ambulance service prior to or on the
36 effective date of P.L. , c. (pending before the Legislature as this
37 bill) shall be required to meet any new requirements for such
38 licensure as may be established by the commissioner by the date
39 that the agency is required to apply for renewal of its license to
40 operate the ambulance service.

41 c. The commissioner shall provide by regulation for
42 enforcement of the provisions of this section, up to and including
43 revocation of licensure to operate a pre-hospital or inter-facility
44 care ambulance service if the agency violates any provision thereof
45 or rules or regulations promulgated pursuant thereto.

1 9. Section 7 of P.L.1984, c.146 (C.26:2K-13) is amended to
2 read as follows:

3 7. a. No person may advertise or disseminate information to
4 the public that the person provides;

5 (1) advanced life support services by a mobile intensive care
6 unit unless the person is authorized to do so pursuant to section 6 of
7 **【this act】** P.L.1984, c.146 (C.26:2K-12); or

8 (2) basic life support services by an ambulance unless the
9 person is authorized to do so pursuant to section 8 of P.L. , c.
10 (C.) (pending before the Legislature as this bill).

11 b. No person may impersonate or refer to himself as a **【mobile**
12 **intensive care】** paramedic, EMT, or emergency medical responder
13 unless **【he is certified or approved therefor, as appropriate】** that
14 person is licensed as such.

15 (cf: P.L.1984, c.146, s.7)

16

17 10. Section 8 of P.L.1984, c.146 (C.26:2K-14) is amended to
18 read as follows:

19 8. No **【mobile intensive care】** paramedic, EMT, emergency
20 medical responder, other clinician, licensed physician, nurse,
21 mobile intensive care program, hospital or its board of trustees,
22 officers and members of the medical staff, **【nurses or other**
23 employees of the hospital, first aid, ambulance or rescue squad, or
24 officers and members of a rescue squad**】** or agency or officers,
25 members, or employees thereof, shall be liable for any civil
26 damages as the result of an act or the omission of an act committed
27 while in training for or in the rendering of basic or advanced life
28 support services in good faith and in accordance with **【this act】**
29 chapter 2K of Title 26 of the Revised Statutes.

30 (cf: P.L.1984, c.146, s. 8)

31

32 11. (New section) Under the direction of the commissioner, the
33 Office of Emergency Medical Services in the department shall serve
34 as the lead State agency for the oversight of emergency medical
35 services delivery in the State, including both direct services and
36 support services and funding therefor, and shall have as its basic
37 purpose to ensure the continuous and timely Statewide availability
38 and dispatch of basic life support and advanced life support to all
39 persons in this State, through ground and air, adult and pediatric
40 triage, treatment and transport, emergency response capability. The
41 office shall exercise this responsibility in furtherance of the public
42 policy of this State to ensure, to the maximum extent practicable,
43 that quality medical care is available to persons residing in or
44 visiting this State at all times.

45

46 12. (New section) The commissioner shall appoint a State
47 Medical Director for Emergency Medical Services, who shall

1 assume responsibility for medical oversight of emergency medical
2 services delivery in the State. The State medical director shall be a
3 physician who is licensed in this State, has experience in the
4 medical oversight of emergency medical services delivery, and is
5 qualified to perform the duties of the position. The State medical
6 director, subject to the commissioner's approval, may appoint up to
7 three regional medical directors to provide medical oversight of
8 emergency medical services delivery in their respective geographic
9 areas as defined by the State medical director.

10
11 13. (New section) a. (1) The commissioner shall establish a
12 State Emergency Medical Care Advisory Board, or EMCAB, which
13 shall advise the commissioner on all matters of mobile intensive
14 care services, basic life support services, advanced life support
15 services, and pre-hospital and inter-facility care, and shall focus on:
16 improving quality of care; making patient-centered decisions; and
17 using technology to improve efficiency and the standard of care.

18 (2) EMCAB shall recommend standards to be adopted by the
19 commissioner on response time, crew complements, equipment,
20 minimum clinical proficiencies, benchmarking, processes, trending
21 of quality and performance data, and the use of electronic data to
22 support all goals.

23 b. EMCAB shall organize as soon as practicable following the
24 appointment of its members and shall hold its initial meeting no
25 later than the 90th day after the effective date of P.L. , c. (pending
26 before the Legislature as this bill).

27 c. (1) The membership of EMCAB shall include 16 members,
28 as follows:

29 (a) the commissioner, the Director of the Office of Emergency
30 Medical Services in the department, and the State Medical Director
31 for Emergency Medical Services, or their designees, as ex officio,
32 nonvoting members;

33 (b) the President of the New Jersey State First Aid Council as an
34 ex officio member; and

35 (c) 12 public members, who shall initially be appointed by the
36 commissioner and thereafter shall be appointed in a manner to be
37 specified by regulation of the commissioner, including one
38 representative from each of the following: paid basic life support
39 services providers; emergency medical service helicopter response
40 units; mobile intensive care programs; emergency physicians;
41 general hospitals; emergency care nurses; municipal government;
42 emergency telecommunications services; county offices of
43 emergency management; trauma services or burn treatment
44 providers; the EMSC program; and a member of the general public
45 who is not involved with the provision of health care or emergency
46 medical services.

1 (2) Each public member of EMCAB shall serve for a term of
2 three years and may be reappointed to one or more subsequent
3 terms; except that of the members first appointed, five shall serve
4 for a term of three years, five for a term of two years, and two for a
5 term of one year. Vacancies in the membership of EMCAB shall be
6 filled in the same manner provided for the original appointments.

7 (3) The members of EMCAB shall serve without compensation,
8 but shall be reimbursed for necessary expenses incurred in the
9 performance of their duties and within the limits of funds available
10 to EMCAB.

11 d. The members of EMCAB shall select a chairman biennially
12 to chair the meetings and coordinate the activities of EMCAB.

13 e. EMCAB shall establish standing committees, as well as any
14 additional committees that it determines appropriate, which in each
15 case shall include the number of members, utilize the criteria for
16 appointment, and provide for the manner of appointment and term
17 of service prescribed by regulation of the commissioner. The
18 standing committees shall research, review, assess, and recommend
19 policy, and analyze data as applicable, as specified by the
20 commissioner. The standing committees shall include the
21 following:

22 (1) Medical Services Committee;

23 (2) Pre-hospital Care Systems Operations Committee;

24 (3) Inter-facility Care Systems Operations Committee;

25 (4) Funding and Finance Committee;

26 (5) Public Awareness and Prevention Committee;

27 (6) Clinical Education Committee;

28 (7) Research and Data and Performance Improvement
29 Committee;

30 (8) Specialty Care Committee; and

31 (9) Local Government Coordination Committee.

32 f. Each committee shall address how its specific purpose can
33 add to the discussion on the establishment of standards pursuant to
34 paragraph (2) of subsection a. of this section.

35 g. (1) EMCAB shall, no later than the 120th day after its initial
36 meeting, submit written recommendations to the commissioner for
37 new or revised regulations to be adopted by the commissioner
38 pursuant to P.L. , c. (pending before the Legislature as this bill),
39 which shall be designed to improve emergency medical services in
40 this State consistent with standards adopted by the National
41 Highway Traffic Safety Administration.

42 (2) EMCAB shall provide ongoing review of existing
43 regulations governing emergency medical services, and shall
44 recommend to the commissioner such revisions as EMCAB
45 determines are needed to achieve the goals of evidence-based
46 medical care and protecting the public health.

1 (3) EMCAB shall submit an annual report to the commissioner
2 on the state of pre-hospital and inter-facility care in New Jersey,
3 including evaluations and recommendations from each of its
4 standing committees.

5 h. All meetings of EMCAB and its committees shall be open to
6 the public. Prior public notice shall be provided for each meeting,
7 and input and discussion by members of the public shall be
8 encouraged at all such meetings.

9 i. The department shall provide staff support to EMCAB and
10 its committees.

11
12 14. (New section) a. The commissioner, in consultation with
13 EMCAB, shall establish, by regulation, requirements for:

14 (1) the collection of data that each agency providing pre-
15 hospital or inter-facility care is to obtain for each patient encounter;

16 (2) the creation and use of a patient care report by the agency to
17 provide this data in electronic form to the receiving facility in a
18 timely manner; and

19 (3) the electronic reporting of this data to the department.

20 b. (1) The department shall develop and maintain an electronic
21 record of the patient data reported pursuant to subsection a. of this
22 section and shall make such non-identifying patient data available
23 for research purposes, in accordance with guidelines to be
24 established by the commissioner and subject to the requirements
25 and restrictions of State and federal law and regulations.

26 (2) An agency shall not be required to utilize a prescribed form
27 for reporting the data, provided that its reports include all data
28 specified by regulation of the commissioner.

29
30 15. (New section) a. (1) The commissioner shall ensure or
31 arrange for the provision of advanced life support pre-hospital care
32 in response to 9-1-1 calls within the State.

33 (2) The commissioner, in consultation with EMCAB, shall
34 establish minimum standards for training, response times,
35 equipment, and quality of care with respect to basic life support pre-
36 hospital care and advanced life support pre-hospital care.

37 b. (1) The commissioner shall establish, by regulation,
38 minimum standards for licensing any clinician or agency as an
39 emergency medical services provider before that clinician or agency
40 is permitted to respond to 9-1-1 calls in this State.

41 (2) Any agency licensed to provide 9-1-1 emergency medical
42 services response in New Jersey shall be required to maintain a
43 written agreement with a dispatch agency approved by the
44 commissioner. The commissioner shall establish objective
45 standards to approve and monitor dispatch agencies; and these
46 standards shall be designed to improve response times and
47 appropriate triage of resources to respond to calls for emergency

1 medical services, and shall include requirements for global
2 positioning tracking of emergency medical services vehicles
3 through a standard electronic interface accessible to all dispatch and
4 responder agencies, in order to enhance agency interoperability.
5 Any licensed emergency medical services provider shall be
6 permitted to contract with any approved dispatch agency.

7 (3) The commissioner shall provide for the coordination of
8 dispatch agencies in accordance with protocols established by the
9 department.

10 c. The commissioner shall, no later than December 31 of each
11 year, present a report to the Governor, and to the Legislature
12 pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1), on the
13 adequacy of emergency medical services provided pursuant to this
14 section, and shall identify in that report the funding needed for the
15 succeeding fiscal year in order to adequately fund the needed
16 infrastructure and research to encourage the continued improvement
17 of those emergency medical services.

18

19 16. Section 11 of P.L.1984, c.146 (C26:2K-17) is amended to
20 read as follows:

21 11. a. The commissioner shall promulgate such rules and
22 regulations, in accordance with the "Administrative Procedure Act,"
23 P.L.1968, c. 410 (C. 52:14B-1 et seq.), as **[he]** the commissioner
24 deems necessary to effectuate the purposes of [this act, and the
25 board medical examiners and the board of nursing] chapter 2K of
26 Title 26 of the Revised Statutes, with the advice of EMCAB in the
27 form of such written recommendations as EMCAB may submit to
28 the commissioner for his consideration.

29 b. The State Board of Medical Examiners and the New Jersey
30 Board of Nursing shall promulgate such rules and regulations as
31 they deem necessary to carry out their functions under **[this act]**
32 chapter 2K of Title 26 of the Revised Statutes.

33 (cf: P.L.1984, c.146, s.11)

34

35 17. Section 13 of P.L.1984, c.146 (C26:2K-19) is amended to
36 read as follows:

37 13. Nothing in this act shall be construed as interfering with an
38 emergency service training program authorized and operated under
39 provisions of the "New Jersey Highway **[Safety Act of 1971,"**
40 **P.L.1971, c. 351 (C. 27:5F-1 et seq.)]** Traffic Safety Act of 1987,"
41 P.L.1987, c.284 (C.27:5F-18 et seq.).

42 (cf: P.L.1984, c.146, s.13)

43

44 18. Section 14 of P.L.1984, c.146 (C.26:2K-20) is amended to
45 read as follows:

46 14. Nothing in this act shall be construed to prevent a licensed
47 and qualified member of the health care profession from performing

1 any **[of the]** duties that require the skills of a **[mobile intensive**
2 **care]** paramedic, EMT, or emergency medical responder if the
3 duties are consistent with the accepted standards of the member's
4 profession.

5 (cf: P.L.1984, c.146, s.14)

6

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

9 2. a. There is established the New Jersey Emergency Medical
10 Service Helicopter Response Program in the **[Division of Local and**
11 **Community Health Services]** Office of Emergency Medical
12 Services of the Department of Health and Senior Services. The
13 commissioner shall have overall responsibility for administration of
14 the program and shall designate a mobile intensive care hospital in
15 this State and a **[regional]** trauma **[or critical care]** center which
16 shall develop and maintain a hospital-based emergency medical
17 service helicopter response unit. The commissioner shall designate
18 at least two units in the State, of which no less than one unit each
19 shall be designated for the northern and southern portions of the
20 State, respectively.

21 b. Each emergency medical service helicopter response unit
22 shall be staffed by at least two persons trained in advanced life
23 support and approved by the commissioner. The staff of the
24 emergency medical service helicopter response unit shall render life
25 support services to an accident or trauma victim, as necessary, in
26 the course of providing emergency medical transportation.

27 c. The commissioner shall provide, by regulation, for the
28 licensure of privately operated emergency medical service
29 helicopter response units, in addition to the units designated
30 pursuant to subsection a. of this section.

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

32

33 20. Section 3 of P.L.1986, c.106 (C.26:2K-37) is amended to
34 read as follows:

35 3. The Division of State Police of the Department of Law and
36 Public Safety shall establish an emergency medical transportation
37 service to provide air medical transportation service pursuant to
38 **[this amendatory and supplementary act]** section 2 of P.L.1986,
39 c.106 (C.26:2K-36). The superintendent shall operate and maintain
40 at least one dedicated helicopter, and at least one additional
41 helicopter that provides backup air medical transportation
42 capability, for each emergency medical service helicopter response
43 unit designated by the commissioner pursuant to section 2 of **[this**
44 **amendatory and supplementary act]** P.L.1986, c.106 (C.26:2K-36).

45 (cf: P.L.1986, c.106, s.3)

1 21. Section 3 of P.L.1992, c.96 (C.26:2K-50) is amended to read
2 as follows:

3 3. a. There is established within the Office of Emergency
4 Medical Services in the Department of Health and Senior Services,
5 the Emergency Medical Services for Children program.

6 b. The commissioner shall hire a full-time coordinator for the
7 EMSC program in consultation with, and by the recommendation of
8 the advisory council.

9 c. The coordinator shall implement the EMSC program
10 following consultation with, and at the recommendation of, the
11 advisory council. The coordinator shall serve as a liaison to the
12 advisory council.

13 d. The coordinator may employ professional, technical,
14 research and clerical staff as necessary within the limits of available
15 appropriations. The provisions of Title 11A of the New Jersey
16 Statutes shall apply to all personnel so employed.

17 e. The coordinator may solicit and accept grants of funds from
18 the federal government and from other public and private sources.

19 (cf: P.L.1992, c.96, s.3)

20

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

23 5. a. There is created an Emergency Medical Services for
24 Children Advisory Council to advise the Office of Emergency
25 Medical Services and the coordinator of the EMSC program on all
26 matters concerning emergency medical services for children. The
27 advisory council shall assist in the formulation of policy and
28 regulations to effectuate the purposes of this act.

29 b. The advisory council shall consist of a minimum of **[14]** 24
30 public members to be appointed by the **[Governor, with the advice**
31 **and consent of the Senate]** commissioner, in consultation with
32 EMCAB, for a term of three years. Membership of the advisory
33 council shall include: one **[practicing]** general practice pediatrician,
34 one pediatric critical care physician, one **[board certified]** pediatric
35 emergency physician and one pediatric physiatrist, to be appointed
36 upon the recommendation of the New Jersey chapter of the
37 American Academy of Pediatrics; one pediatric surgeon and one
38 trauma surgeon, to be appointed upon the recommendation of the
39 New Jersey chapter of the American College of Surgeons; one
40 general emergency physician, to be appointed upon the
41 recommendation of the New Jersey chapter of the American
42 College of Emergency Physicians; one injury prevention specialist,
43 to be appointed upon the recommendation of the New Jersey State
44 Safe Kids Coalition; **[one emergency medical technician, to be**
45 **appointed upon the recommendation of the New Jersey State First**
46 **Aid Council;]** one paramedic, to be appointed upon the
47 recommendation of the **[State mobile intensive care advisory**

1 council] subcommittee on advanced life support services of the
2 standing committee on Pre-hospital Care Systems Operations of
3 EMCAB; one family practice physician, to be appointed upon the
4 recommendation of the New Jersey chapter of the American
5 Academy of Family [Practice] Physicians; two registered
6 emergency nurses, one to be appointed upon the recommendation of
7 the New Jersey State Nurses Association and one to be appointed
8 upon the recommendation of the New Jersey Chapter of the
9 Emergency Nurses Association; one school nurse, to be appointed
10 upon the recommendation of the New Jersey State School Nurses
11 Association; one person to be appointed upon the recommendation
12 of the Medical Transportation Association of New Jersey; and three
13 members, each with a non-medical background, two of whom are
14 parents with children under the age of 18[, to be appointed upon the
15 joint recommendation of the Association for Children of New
16 Jersey and the Junior Leagues of New Jersey].

17 The advisory council shall also include the following members
18 who shall serve ex officio: the President of the New Jersey
19 Hospital Association or his designee; the EMSC coordinator; the
20 Director of the Office of Emergency Medical Services in the
21 department; a representative from the Division of Family Health
22 Services in the department who manages the federal Maternal and
23 Child Health Services Title V Block Grant for children with special
24 health care needs; the Director of the Division of Highway Traffic
25 Safety in the Department of Law and Public Safety or his designee;
26 the Commissioner of Children and Families or his designee; and the
27 Commissioner of Education or his designee.

28 c. Vacancies on the advisory council shall be filled for the
29 unexpired term by appointment of the [Governor] commissioner, in
30 consultation with EMCAB, in the same manner as originally filled.
31 The members of the advisory council shall serve without
32 compensation. The advisory council shall elect a chairperson, who
33 may select from among the members a vice-chairperson and other
34 officers or subcommittees which are deemed necessary or
35 appropriate. The council may further organize itself in any manner
36 it deems appropriate and enact bylaws as deemed necessary to carry
37 out the responsibilities of the council.

38 d. The council shall meet at least quarterly.

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

40

41 23. Section 1 of P.L.1993, c.58 (C.26:2K-60) is amended to read
42 as follows:

43 1. In the event of an emergency, the chief executive officer of
44 any [volunteer] basic life support service first aid, ambulance or
45 rescue squad or the mayor or chief executive officer of any
46 municipality may request assistance from the chief executive officer
47 of any [volunteer] basic life support service first aid, ambulance or

1 rescue squad located in and serving another municipality for the
2 protection and preservation of life within the territorial jurisdiction
3 served by the squad requesting the assistance.

4 The chief executive officer of the [volunteer] basic life support
5 service first aid, ambulance or rescue squad located in and normally
6 serving a contiguous municipality to whom such a request for
7 assistance is made shall, except as hereinafter otherwise set forth,
8 provide such personnel and equipment as requested to the extent
9 possible without endangering any person or property within the
10 municipality in which the assisting squad is located and which it
11 normally serves.

12 The members of any squad providing assistance shall have, while
13 so acting, the same rights and immunities as they otherwise enjoy in
14 the performance of their normal duties in the municipality, or other
15 territorial jurisdiction, in which the squad is located and which it
16 normally serves.

17 If any member of the assisting basic life support service first aid,
18 ambulance or rescue squad shall, in rendering such assistance,
19 suffer any injury or death, the member or his designee or legal
20 representative shall be entitled to all salary, pension rights, workers
21 compensation and other benefits to which the member would be
22 entitled if the casualty or death had occurred in the performance of
23 the member's duties in the municipality, or other territorial
24 jurisdiction, in which the squad is located and which it normally
25 serves.

26 (cf: P.L.1993, c.58, s.1)

27

28 24. Section 2 of P.L.1993, c.58 (C.26:2K-61) is amended to read
29 as follows:

30 2. The governing bodies of two or more municipalities may, by
31 enacting reciprocal ordinances, enter into agreements with each
32 other for mutual basic life support service first aid, ambulance or
33 rescue squad assistance in case of emergency, subject to the written
34 approval of the [volunteer] basic life support service first aid,
35 ambulance or rescue squad or squads involved. The agreements
36 may provide for:

37 a. Terms and conditions for payment by the municipality
38 receiving assistance to the municipality rendering assistance for
39 each member and each equipped basic life support service first aid,
40 ambulance or rescue squad apparatus for each hour supplied;

41 b. The reimbursement of the municipality or municipalities
42 rendering assistance for any damage to basic life support service
43 first aid, ambulance or rescue squad equipment or other property
44 and for payment to any member of a basic life support service first
45 aid, ambulance or rescue squad for injuries sustained while serving
46 pursuant to such agreements, or to a surviving spouse or other
47 dependent if death results; and

1 c. A joint meeting of the municipalities entering into such
2 agreements regarding other matters as are mutually deemed
3 necessary.

4 (cf: P.L.1993, c.58, s.2)

5
6 25. (New section) a. The commissioner shall establish,
7 maintain, and coordinate the activities of the New Jersey
8 Emergency Medical Services Task Force.

9 b. The purpose of the task force shall be to support and
10 enhance the provision of specialized response services, utilizing
11 personnel and equipment to respond as requested, for both pre-
12 planned and emergency events, including natural disasters and mass
13 casualty incidents, including chemical, biological, radiological,
14 nuclear, and explosive events, in order to reduce morbidity and
15 mortality through appropriate triage, incident management, and
16 coordinated pre-hospital care and transportation.

17 c. The membership of the task force shall represent all regions
18 of the State and shall include emergency medical responders,
19 EMTs, paramedics, registered nurses, physicians, communications
20 specialists, hospitals, agencies providing emergency medical
21 responder and other emergency medical services, and
22 communication centers utilized for the purpose of providing
23 emergency medical services.

24
25 26. Section 4 of P.L.1987, c.284 (C.27:5F-21) is amended to
26 read as follows:

27 4. a. The Governor shall coordinate the highway traffic safety
28 activities of State and local agencies, other public and private
29 agencies, nonprofit organizations, and interested organizations and
30 individuals and shall be the official of this State having the ultimate
31 responsibility of dealing with the federal government with respect
32 to the State highway traffic safety program. In order to effectuate
33 the purposes of this act ~~he~~, the Governor shall:

34 (1) Prepare for this State, the New Jersey Highway Traffic
35 Safety Program which shall consist of a comprehensive plan in
36 conformity with the laws of this State to reduce traffic accidents
37 and deaths, injuries, and property damage resulting therefrom~~.~~;

38 (2) Promulgate rules and regulations establishing standards and
39 procedures relating to the content, coordination, submission, and
40 approval of local highway traffic safety programs~~.~~;

41 (3) Contract and do all things necessary or convenient on behalf
42 of the State in order to insure that all departments of State
43 government, local political subdivisions and nonprofit
44 organizations, to the extent that nonprofit organizations qualify for
45 highway traffic safety grants pursuant to the provisions of section
46 12 of P.L.1987, c.284 (C.27:5F-29) as amended by section 6 of
47 P.L.2007, c.84, secure the full benefits available under the "U.S.

1 Highway Safety Act of 1966," Pub.L.89-564 (23 U.S.C. ss. 401-
2 404), and any acts amendatory or supplementary thereto **[.]**; and

3 (4) Adopt, through the Commissioner of Health and Senior
4 Services, training programs, guidelines, and standards for members
5 of **[nonvolunteer]** basic life support service first aid, rescue, and
6 ambulance squads and agencies providing emergency medical
7 service programs or pre-hospital or inter-facility care as defined in
8 section 1 of P.L.1984, c.146 (C.26:2K-7).

9 b. The New Jersey Highway Traffic Safety Program, and rules
10 and regulations, training programs, guidelines, and standards shall
11 comply with uniform standards promulgated by the United States
12 Secretary of Transportation in accordance with the "U.S. Highway
13 Safety Act of 1966," Pub.L.89-564 (23 U.S.C. ss. 401-404), and any
14 acts amendatory or supplementary thereto.

15 (cf: P.L.2007, c.84, s.2)

16

17 27. Section 5 of P.L.1987, c.284 (C.27:5F-22) is amended to
18 read as follows:

19 5. The New Jersey Highway Traffic Safety Program shall, in
20 addition to other provisions, include training programs for groups
21 such as, but not limited to, police, teachers, students, and public
22 employees, which programs shall comply with the uniform
23 standards promulgated by the United States Secretary of
24 Transportation in accordance with the "U.S. Highway Safety Act of
25 1966," Pub.L.89-564 (23 U.S.C. s.s. 401-404), and any acts
26 amendatory or supplementary thereto.

27 In addition, the New Jersey Highway Traffic Safety Program
28 shall include the training program for **[members of volunteer first**
29 **aid, rescue and ambulance squads, adopted by the New Jersey State**
30 **First Aid Council]** paramedics, emergency medical technicians, and
31 emergency medical responders licensed by the Commissioner of
32 Health and Senior Services, which shall comply with the uniform
33 standards promulgated by the United States Secretary of
34 Transportation in accordance with the "U.S. Highway Safety Act of
35 1966," Pub.L.89-564 (23 U.S.C. s.s. 401-404) and any amendments
36 or supplements to it.

37 (cf: P.L.1987, c.284, s.5)

38

39 28. Section 10 of P.L.1987, c.284 (C.27:5F-27) is amended to
40 read as follows:

41 10. **[The officers of each volunteer and nonvolunteer]** Each
42 basic life support service first aid, rescue, and ambulance squad
43 **[providing emergency medical service programs shall be**
44 responsible for the training of its members and shall notify the
45 governing body of the political subdivision in which the squad is
46 located, or the person designated for this purpose by the governing
47 body, that particular applicants for membership (qualified under

1 sections 5 and 4 of this act respectively), ambulances, and
2 ambulance equipment meet the standards required by this act.
3 Upon receipt of such notification the governing body or person
4 designated shall certify the applicant, ambulances, and ambulance
5 equipment as being qualified for emergency medical service
6 programs, and shall issue a certificate to that effect at no charge.
7 Each member and piece of equipment of a volunteer and
8 nonvolunteer first aid, rescue and ambulance squad shall comply
9 with the requirements for certification annually. Any person who is
10 a member of a volunteer and nonvolunteer first aid, rescue and
11 ambulance squad providing emergency medical service programs
12 on the effective date of this act shall, if application is made to the
13 appropriate municipality within 90 days of the effective date, be
14 certified by the governing body or designated person as being
15 qualified for emergency medical service programs for a period of
16 two years. At the end of that period, the person] shall comply with
17 the requirements for [certification annually] licensure of personnel,
18 ambulances, and ambulance equipment established by the
19 Commissioner of Health and Senior Services and shall staff each
20 ambulance with at least one emergency medical technician while it
21 is in service. No person or entity shall respond to a 9-1-1 call as
22 defined in section 1 of P.L.1984, c.146 (C.26:2K-7) unless that
23 person or entity is licensed to do so by the Department of Health
24 and Senior Services.

25 (cf: P.L.1987, c.284, s.10)

26

27 29. The following are repealed:

28 Sections 5, 10, and 12 of P.L.1984, c.146 (C.26:2K-11, C.26:2K-
29 16, and C.26:2K-18);

30 P.L.1985, c.351 (C.26:2K-21 et seq.);

31 Sections 1 and 4 of P.L.1986, c.106 (C.26:2K-35 and C.26:2K-
32 38);

33 P.L.1989, c.314 (C.26:2K-39 et seq.);

34 Sections 1, 2, 3, and 10 of P.L.2003, c.1 (C.26:2K-47.1,
35 C.26:2K-47.2, C.26:2K-47.3, and C.26:2K-47.9);

36 Section 2 of P.L.1992, c.96 (C.26:2K-49); and

37 Sections 2, 4, 5, and 6 of P.L.1992, c.143 (C.26:2K-55, C.26:2K-
38 57, C.26:2K-58, and C.26:2K-59).

39

40 30. This act shall take effect on the 180th day after enactment,
41 but the Commissioner of Health and Senior Services may take such
42 anticipatory administrative action in advance thereof as shall be
43 necessary for the implementation of the act.

SENATE, No. 1650

STATE OF NEW JERSEY 215th LEGISLATURE

INTRODUCED FEBRUARY 16, 2012

Sponsored by:

Senator JOSEPH F. VITALE

District 19 (Middlesex)

Senator STEPHEN M. SWEENEY

District 3 (Cumberland, Gloucester and Salem)

SYNOPSIS

Revises requirements for emergency medical services delivery.

CURRENT VERSION OF TEXT

As introduced.



(Sponsorship Updated As Of: 5/4/2012)

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

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

7
8 1. Section 1 of P.L.1984, c.146 (C.26:2K-7) is amended to read
9 as follows:

10 1. As used in **[this act]** chapter 2K of Title 26 of the Revised
11 Statutes:

12 **[a.]** "Advanced life support" means an advanced level of **[pre-**
13 **hospital, inter-hospital, and emergency service]** care which includes
14 basic life support functions, cardiac monitoring, cardiac
15 defibrillation, telemetered electrocardiography, administration of
16 anti-arrhythmic agents, intravenous therapy, administration of
17 specific medications, drugs and solutions, use of adjunctive
18 ventilation devices, trauma care, and other techniques and
19 procedures authorized in writing by the commissioner**[:]**.

20 "Agency" means an organization that is licensed or otherwise
21 authorized by the department to operate a pre-hospital or inter-
22 facility care ambulance service.

23 "Basic life support" means a basic level of pre-hospital care or
24 inter-facility care which includes patient stabilization, airway
25 clearance, cardiopulmonary resuscitation, hemorrhage control,
26 initial wound care, fracture stabilization, and other techniques and
27 procedures authorized in writing by the commissioner.

28 **[b.]** "Board of Medical Examiners" means the State Board of
29 Medical Examiners**[:]**.

30 **[c.]** "Board of Nursing" means the New Jersey State Board of
31 Nursing**[:]**.

32 "Clinician" means a person who is licensed or otherwise
33 authorized to provide patient care in a pre-hospital care or inter-
34 facility care setting.

35 **[d.]** "Commissioner" means the Commissioner of **[the State**
36 **Department of Health;]** Health and Senior Services.

37 **[e.]** "Department" means the **[State]** Department of Health**[:]**
38 and Senior Services.

39 **[f.]** "Emergency **[service]** department" means a program in a
40 general hospital staffed 24 hours a day by a licensed physician
41 trained in emergency medicine**[:]** and as prescribed by regulation
42 of the commissioner.

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 “EMCAB” means the Emergency Medical Care Advisory Board
2 established pursuant to section 13 of P.L. , c. (C.) (pending
3 before the Legislature as this bill).

4 “Emergency medical responder” means a person trained to
5 provide emergency medical first response services in a program
6 recognized by the commissioner and licensed or otherwise
7 authorized by the department to provide those services.

8 “Emergency medical services personnel” means persons trained
9 and licensed or otherwise authorized to provide emergency medical
10 care, whether on a paid or volunteer basis, as part of a basic life
11 support or advanced life support pre-hospital care service or in an
12 emergency department in a general hospital.

13 “Emergency medical technician” or “EMT” means a person
14 trained to provide basic life support services in a program
15 recognized by the commissioner and licensed or otherwise
16 authorized by the department to provide those services.

17 “EMSC Advisory Council” means the Emergency Medical
18 Services for Children Advisory Council established pursuant to
19 section 5 of P.L.1992, c.96 (C.26:2K-52).

20 “EMSC coordinator” means the person coordinating the EMSC
21 program within the Office of Emergency Medical Services in the
22 department.

23 “EMSC program” means the Emergency Medical Services for
24 Children program established pursuant to section 3 of P.L.1992,
25 c.96 (C.26:2K-50), and other relevant programmatic activities
26 conducted by the Office of Emergency Medical Services in the
27 department in support of appropriate treatment, transport, and triage
28 of ill or injured children in New Jersey.

29 **[g. “Inter-hospital care” means those emergency medical**
30 **services rendered by mobile intensive care units to emergency**
31 **patients before and during transportation between emergency**
32 **treatment facilities, and upon arrival within those facilities;]**

33 “Health care facility” means a health care facility licensed
34 pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.).

35 “Inter-facility care” means those medical services rendered to
36 patients by emergency medical services personnel before and during
37 transportation between medical facilities, and upon arrival at those
38 facilities.

39 **[h. “Mobile intensive care paramedic” means a person trained in**
40 **advanced life support services and certified by the commissioner to**
41 **render advanced life support services as part of a mobile intensive**
42 **care unit;]**

43 **[i.] “Mobile intensive care unit” means a specialized emergency**
44 **medical service vehicle that is operating under a mobile intensive**
45 **care program pursuant to section 6 of P.L.1984, c.146 (C.26:2K-12)**
46 **and is staffed by **[mobile intensive care]** paramedics or registered**
47 **professional nurses **[trained in advanced life support nursing and****

1 operated for the provision of advanced life support services]
2 recognized as mobile intensive care nurses, or other personnel
3 authorized by the commissioner, under the medical direction of an
4 authorized hospital[;].

5 “9-1-1 call” means a 9-1-1 telephone call for emergency medical
6 services in which the caller dials 9-1-1, or a method adopted in the
7 future to initiate the response of emergency medical services for a
8 medical reason through a public safety answering point as defined
9 in section 1 of P.L.1989, c.3 (C.52:17C-1).

10 “Paramedic” means a person licensed or otherwise authorized by
11 the commissioner as a paramedic pursuant to regulation of the
12 commissioner.

13 [j.] "Pre-hospital care" means those [emergency medical
14 services rendered by mobile intensive care units to emergency]
15 medical services rendered to patients by emergency medical
16 services personnel before and during transportation to [emergency
17 treatment] medical facilities, and upon arrival within those
18 facilities.

19 "Regional trauma center" means a State designated level one
20 hospital-based trauma center equipped and staffed to provide
21 emergency medical services to an accident or trauma victim.

22 “Volunteer first aid, ambulance or rescue squad” means a
23 volunteer first aid, ambulance or rescue squad as defined in section
24 3 of P.L.1987, c.284 (C.27:5F-20).

25 (cf: P.L.1984, c.146, s.1)

26

27 2. Section 2 of P.L.1984, c.146 (C.26:2K-8) is amended to read
28 as follows:

29 2. a. (1) A [mobile intensive care] paramedic shall obtain
30 [certification] licensure from the commissioner to staff a mobile
31 intensive care unit or a health care facility and shall make
32 application therefor on forms prescribed by the commissioner.

33 (2) An EMT shall obtain licensure from the commissioner to
34 staff a licensed ambulance or a health care facility and shall make
35 application therefor on forms prescribed by the commissioner.

36 (3) An emergency medical responder shall obtain licensure from
37 the commissioner to respond to 9-1-1 calls and shall make
38 application therefor on forms prescribed by the commissioner.

39 b. The commissioner [with the approval of the board of
40 medical examiners] shall establish written standards which [a
41 mobile intensive care paramedic] an applicant shall meet in order to
42 obtain [certification] licensure as a paramedic, EMT, or emergency
43 medical responder. The commissioner shall act on a regular basis
44 upon applications of candidates for [certification] licensure as a
45 [mobile intensive care] paramedic, EMT, or emergency medical
46 responder. The commissioner shall [certify] license a candidate

1 who provides satisfactory evidence of the successful completion of
2 an educational program approved by the commissioner for the
3 training of **mobile intensive care** paramedics, EMTs, or
4 emergency medical responders, as applicable, and who passes an
5 examination **in the provision of advance life support services**
6 approved by the department for the applicable licensure, which
7 examination shall be conducted by the department at least twice a
8 year.

9 c. The department shall maintain a register of all applicants for
10 **certification** licensure hereunder, which register shall include but
11 not be limited to:

12 (1) The name and residence of the applicant;

13 (2) The date of the application;

14 (3) Information as to whether the applicant was rejected or
15 **certified** licensed and the date of that action.

16 d. An EMT who is a member of a volunteer first aid,
17 ambulance or rescue squad shall not be required to pay a fee or
18 assume any other cost for licensure from the commissioner pursuant
19 to this section.

20 e. The department shall **annually compile a** maintain a
21 current list of **mobile intensive care** paramedics and EMTs. This
22 list shall be available to the public on the Internet website of the
23 department.

24 (cf: P.L.1984, c.146, s.2)

25
26 3. Section 3 of P.L.1984, c.146 (C.26:2K-9) is amended to read
27 as follows:

28 3. The commissioner, after notice and hearing, may revoke the
29 **certification** license of a **mobile intensive care** paramedic,
30 EMT, or emergency medical responder for violation of any
31 provision of **this act** P.L.1984, c.146 (C.26:2K-7 et seq.) or
32 regulation promulgated hereunder.

33 (cf: P.L.1984, c.146, s.3)

34
35 4. Section 4 of P.L.1984, c.146 (C.26:2K-10) is amended to
36 read as follows:

37 4. A **mobile intensive care** paramedic may **perform**
38 provide advanced life support services, provided **they maintain**
39 that the paramedic:

40 a. maintains direct voice communication with and **are** is
41 taking orders from a licensed physician or physician directed
42 registered professional nurse, both of whom are affiliated with a
43 mobile intensive care **hospital** which is approved by the
44 commissioner to provide advanced life support services. A
45 telemetered electrocardiogram shall be monitored when deemed
46 appropriate by the licensed physician or when required by written
47 rules and regulations established by the mobile intensive care

1 hospital and approved by the commissioner] program operating
2 pursuant to section 6 of P.L.1984, c.146 (C.26:2K-12); or

3 b. is operating under standing orders from a licensed physician
4 that have been developed or approved by a mobile intensive care
5 program.

6 (cf: P.L.1984, c.146, s.4)

7

8 5. Section 6 of P.L.1984, c.146 (C.26:2K-12) is amended to
9 read as follows:

10 6. a. Only a hospital [authorized by the commissioner with an
11 accredited emergency service may develop and maintain a mobile
12 intensive care unit, and provide advanced life support services
13 utilizing licensed physicians, registered professional nurses trained
14 in advanced life support nursing, and mobile intensive care
15 paramedics] licensed by the department to operate a mobile
16 intensive care program may develop or maintain such a program.
17 At a minimum, the hospital shall be required to maintain an
18 emergency department.

19 b. A hospital authorized by the commissioner pursuant to
20 subsection a. of this section shall provide mobile intensive care unit
21 services on a seven-day-a-week basis.

22 c. The commissioner shall establish, [in writing] by
23 regulation, criteria which a hospital shall meet in order to [qualify
24 for the authorization] obtain licensure to operate a mobile intensive
25 care program, and shall prescribe, in those regulations, standards
26 and responsibilities for the position of medical director for the
27 program. A hospital operating a mobile intensive care program
28 prior to, or on the effective date of, P.L. , c. (pending before the
29 Legislature as this bill), shall be required to meet any new
30 requirements for such licensure as may be established by the
31 commissioner by the date that the hospital is required to apply for
32 renewal of its license to operate a mobile intensive care program.

33 d. The commissioner [may withdraw his authorization] shall
34 provide by regulation for enforcement of the provisions of chapter
35 2K of Title 26 of the Revised Statutes, up to and including
36 revocation of licensure to operate a mobile intensive care program
37 if the hospital or unit violates any provision [of this act] thereof or
38 rules or regulations promulgated pursuant thereto.

39 (cf: P.L.1985, c.351, s.2)

40

41 6. (New section) a. The commissioner shall not issue an initial
42 license or other authorization to practice as a clinician unless the
43 commissioner first determines that no criminal history record
44 information exists on file in the Federal Bureau of Investigation,
45 Identification Division, or in the State Bureau of Identification in
46 the Division of State Police, which may disqualify the applicant

1 from being licensed or otherwise authorized to practice as a
2 clinician as determined by regulation of the commissioner.

3 b. (1) The commissioner shall not renew a license or other
4 authorization to practice as a clinician unless the commissioner first
5 determines that no criminal history record information exists on file
6 in the Federal Bureau of Investigation, Identification Division, or in
7 the State Bureau of Identification in the Division of State Police,
8 which may provide grounds for the refusal to renew the license or
9 other authorization to practice as a clinician.

10 (2) The commissioner shall revoke a license or other
11 authorization to practice as a clinician if the commissioner
12 determines that criminal history record information exists on file in
13 the Federal Bureau of Investigation, Identification Division, or in
14 the State Bureau of Identification in the Division of State Police,
15 which may provide grounds for the refusal to renew the license or
16 other authorization to practice as a clinician.

17 c. The commissioner shall establish, by regulation, a schedule
18 of dates by which the requirements of this section shall be
19 implemented no later than four years after the effective date of
20 P.L. , c. (pending before the Legislature as this bill).

21 d. The commissioner may, in an emergent circumstance as
22 determined by the commissioner, temporarily waive the
23 requirement for a person to undergo a criminal history record
24 background check as a condition of new or renewed licensure or
25 other authorization to practice as a clinician.

26 e. An applicant or licensee who is required to undergo a
27 criminal history record background check pursuant to this section
28 shall submit to the commissioner that individual's name, address,
29 and fingerprints taken on standard fingerprint cards, or through any
30 equivalent means, by a State or municipal law enforcement agency
31 or by a private entity under contract with the State. The
32 commissioner is authorized to exchange fingerprint data with and
33 receive criminal history record information from the Federal Bureau
34 of Investigation and the Division of State Police for use in making
35 the determinations required pursuant to this section.

36 f. Upon receipt of the criminal history record information for
37 an applicant or licensee from the Federal Bureau of Investigation or
38 the Division of State Police, the commissioner shall immediately
39 notify the applicant or licensee, as applicable.

40 g. If an applicant refuses to consent to, or cooperate in, the
41 securing of a criminal history record background check, the
42 commissioner shall not issue a clinician license and shall notify the
43 applicant of that denial.

44 h. If a licensee refuses to consent to, or cooperate in, the
45 securing of a criminal history record background check as required
46 during the licensure or other authorization renewal process, the
47 commissioner shall refuse to renew the license or other

1 authorization of the licensee, without a hearing, and shall notify the
2 licensee of that denial.

3 i. A licensee:

4 (1) who has permitted a license or other authorization to lapse,
5 or whose license, other authorization or privilege has been
6 suspended, revoked, or otherwise, and

7 (2) who has not already submitted to a criminal history record
8 background check, shall be required to submit fingerprints as part
9 of the licensure or other authorization reinstatement process. If a
10 reinstatement applicant refuses to consent to, or cooperate in, the
11 securing of a criminal history record background check as required
12 during the reinstatement process, the commissioner shall
13 automatically deny reinstatement of the license or other
14 authorization, without a hearing, and shall notify the licensee of that
15 denial.

16 j. An applicant for licensure or other authorization to practice
17 as a clinician shall be required to assume the cost of the criminal
18 history record background check conducted pursuant to this section,
19 in accordance with procedures determined by regulation of the
20 commissioner, except that a member of a volunteer first aid,
21 ambulance, or rescue squad shall not be required to assume this
22 cost.

23 k. The provisions of this section shall not apply to a health care
24 professional who is subject to a criminal history record background
25 check pursuant to P.L.2002, c.104 (C.45:1-28 et al.)
26

27 7. Section 14 of P.L.1997, c.100 (C.53:1-20.9a) is amended to
28 read as follows:

29 14. a. In accordance with the provisions of sections 2 through 6
30 and sections 7 through 13 of P.L.1997, c.100 (C.26:2H-83 through
31 87 and C.45:11-24.3 through 24.9) **[and]**, P.L.2002, c.104 (C.45:1-
32 28 et al.), and section 6 of P.L. , c. (C.) (pending before the
33 Legislature as this bill), the Division of State Police in the
34 Department of Law and Public Safety shall conduct a criminal
35 history record background check, including a name and fingerprint
36 identification check, of:

37 (1) each applicant for nurse aide or personal care assistant
38 certification submitted to the Department of Health and Senior
39 Services and of each applicant for homemaker-home health aide
40 certification submitted to the New Jersey Board of Nursing in the
41 Division of Consumer Affairs;

42 (2) each nurse aide or personal care assistant certified by the
43 Department of Health and Senior Services and each homemaker-
44 home health aide certified by the New Jersey Board of Nursing, as
45 required pursuant to P.L.1997, c.100 (C.26:2H-83 et al.); **[and]**

46 (3) each applicant for licensure or other authorization to engage
47 in a health care profession who is required to undergo a criminal

1 history record background check pursuant to P.L.2002, c.104
2 (C.45:1-28 et al.); and

3 (4) each applicant for clinician licensure who is required to
4 undergo a criminal history record background check pursuant to
5 section 6 of P.L. , c. (C.) (pending before the Legislature as
6 this bill).

7 b. For the purpose of conducting a criminal history record
8 background check pursuant to subsection a. of this section, the
9 Division of State Police shall examine its own files and arrange for
10 a similar examination by federal authorities. The division shall
11 immediately forward the information obtained as a result of
12 conducting the check to: the Commissioner of Health and Senior
13 Services, in the case of an applicant for nurse aide or personal care
14 assistant certification **[or]**, a certified nurse aide or personal care
15 assistant, or an applicant for clinician licensure pursuant to chapter
16 2K of Title 26 of the Revised Statutes; the New Jersey Board of
17 Nursing in the Division of Consumer Affairs in the Department of
18 Law and Public Safety, in the case of an applicant for homemaker-
19 home health aide certification or a certified homemaker-home
20 health aide; and the Director of the Division of Consumer Affairs in
21 the Department of Law and Public Safety, in the case of an
22 applicant for licensure or other authorization to practice as a health
23 care professional as defined in section 1 of P.L.2002, c.104 (C.45:1-
24 28).

25 (cf: P.L.2002, c.104, s.5)

26

27 8. (New section) a. Only an agency as defined in section 1 of
28 P.L.1984, c.146 (C.26:2K-7) may develop or maintain a pre-
29 hospital or inter-facility care ambulance service.

30 b. The commissioner shall establish, by regulation, criteria
31 which an agency shall meet in order to obtain licensure to operate a
32 pre-hospital or inter-facility care ambulance service, and shall
33 prescribe in those regulations standards and responsibilities for the
34 position of agency medical director. An agency operating a pre-
35 hospital or inter-facility care ambulance service prior to or on the
36 effective date of P.L. , c. (pending before the Legislature as this
37 bill) shall be required to meet any new requirements for such
38 licensure as may be established by the commissioner by the date
39 that the agency is required to apply for renewal of its license to
40 operate the ambulance service.

41 c. The commissioner shall provide by regulation for
42 enforcement of the provisions of this section, up to and including
43 revocation of licensure to operate a pre-hospital or inter-facility
44 care ambulance service if the agency violates any provision thereof
45 or rules or regulations promulgated pursuant thereto.

46

47 9. Section 7 of P.L.1984, c.146 (C.26:2K-13) is amended to
48 read as follows:

1 7. a. No person may advertise or disseminate information to
2 the public that the person provides;

3 (1) advanced life support services by a mobile intensive care
4 unit unless the person is authorized to do so pursuant to section 6 of
5 **[this act]** P.L.1984, c.146 (C.26:2K-12); or

6 (2) basic life support services by an ambulance unless the
7 person is authorized to do so pursuant to section 8 of P.L. _____,
8 c. (C. _____) (pending before the Legislature as this bill).

9 b. No person may impersonate or refer to himself as a **[mobile**
10 **intensive care]** paramedic, EMT, or emergency medical responder
11 unless **[he is certified or approved therefor, as appropriate]** that
12 person is licensed as such.

13 (cf: P.L.1984, c.146, s.7)

14

15 10. Section 8 of P.L.1984, c.146 (C.26:2K-14) is amended to
16 read as follows:

17 8. No **[mobile intensive care]** paramedic, EMT, emergency
18 medical responder, other clinician, licensed physician, nurse,
19 mobile intensive care program, hospital or its board of trustees,
20 officers and members of the medical staff, [nurses or other
21 employees of the hospital, first aid, ambulance or rescue squad, or
22 officers and members of a rescue squad] or agency or officers,
23 members, or employees thereof, shall be liable for any civil
24 damages as the result of an act or the omission of an act committed
25 while in training for or in the rendering of basic or advanced life
26 support services in good faith and in accordance with [this act]
27 chapter 2K of Title 26 of the Revised Statutes.

28 (cf: P.L.1984, c.146, s.8)

29

30 11. (New section) Under the direction of the commissioner, the
31 Office of Emergency Medical Services in the department shall serve
32 as the lead State agency for the oversight of emergency medical
33 services delivery in the State, including both direct services and
34 support services and funding therefor, and shall have as its basic
35 purpose to ensure the continuous and timely Statewide availability
36 and dispatch of basic life support and advanced life support to all
37 persons in this State, through ground and air, adult and pediatric
38 triage, treatment and transport, emergency response capability. The
39 office shall exercise this responsibility in furtherance of the public
40 policy of this State to ensure, to the maximum extent practicable,
41 that quality medical care is available to persons residing in or
42 visiting this State at all times.

43

44 12. (New section) The commissioner shall appoint a State
45 Medical Director for Emergency Medical Services, who shall
46 assume responsibility for medical oversight of emergency medical
47 services delivery in the State. The State medical director shall be a

1 physician who is licensed in this State, has experience in the
2 medical oversight of emergency medical services delivery, and is
3 qualified to perform the duties of the position. The State medical
4 director, subject to the commissioner's approval, may appoint up to
5 three regional medical directors to provide medical oversight of
6 emergency medical services delivery in their respective geographic
7 areas as defined by the State medical director.

8
9 13. (New section) a. (1) The commissioner shall establish a
10 State Emergency Medical Care Advisory Board, or EMCAB, which
11 shall advise the commissioner on all matters of mobile intensive
12 care services, basic life support services, advanced life support
13 services, and pre-hospital and inter-facility care, and shall focus on:
14 improving quality of care; making patient-centered decisions; and
15 using technology to improve efficiency and the standard of care.

16 (2) EMCAB shall recommend standards to be adopted by the
17 commissioner on response time, crew complements, equipment,
18 minimum clinical proficiencies, benchmarking, processes, trending
19 of quality and performance data, and the use of electronic data to
20 support all goals.

21 b. EMCAB shall organize as soon as practicable following the
22 appointment of its members and shall hold its initial meeting no
23 later than the 90th day after the effective date of P.L. , c.
24 (pending before the Legislature as this bill).

25 c. (1) The membership of EMCAB shall include 16 members,
26 as follows:

27 (a) the commissioner, the Director of the Office of Emergency
28 Medical Services in the department, and the State Medical Director
29 for Emergency Medical Services, or their designees, as ex officio,
30 nonvoting members;

31 (b) the President of the New Jersey State First Aid Council as an
32 ex officio member, or his proxy; and

33 (c) 12 public members, who shall initially be appointed by the
34 commissioner and thereafter shall be appointed in a manner to be
35 specified by regulation of the commissioner, including one
36 representative from each of the following: paid basic life support
37 services providers; emergency medical service helicopter response
38 units; mobile intensive care programs; emergency physicians;
39 general hospitals; emergency care nurses; municipal government;
40 emergency telecommunications services; county offices of
41 emergency management; trauma services or burn treatment
42 providers; the EMSC program; and a member of the general public
43 who is not involved with the provision of health care or emergency
44 medical services.

45 (2) Each public member of EMCAB shall serve for a term of
46 three years and may be reappointed to one or more subsequent
47 terms; except that of the members first appointed, five shall serve
48 for a term of three years, five for a term of two years, and two for a

1 term of one year. Vacancies in the membership of EMCAB shall be
2 filled in the same manner provided for the original appointments.

3 (3) The members of EMCAB shall serve without compensation,
4 but shall be reimbursed for necessary expenses incurred in the
5 performance of their duties and within the limits of funds available
6 to EMCAB.

7 d. The members of EMCAB shall select a chairman biennially
8 to chair the meetings and coordinate the activities of EMCAB.

9 e. EMCAB shall establish standing committees, as well as any
10 additional committees that it determines appropriate, which in each
11 case shall include the number of members, utilize the criteria for
12 appointment, and provide for the manner of appointment and term
13 of service prescribed by regulation of the commissioner. The
14 standing committees shall research, review, assess, and recommend
15 policy, and analyze data as applicable, as specified by the
16 commissioner. The standing committees shall include the
17 following:

- 18 (1) Medical Services Committee;
- 19 (2) Pre-hospital Care Systems Operations Committee;
- 20 (3) Inter-facility Care Systems Operations Committee;
- 21 (4) Funding and Finance Committee;
- 22 (5) Public Awareness and Prevention Committee;
- 23 (6) Clinical Education Committee;
- 24 (7) Research and Data and Performance Improvement
25 Committee;
- 26 (8) Specialty Care Committee; and
- 27 (9) Local Government Coordination Committee.

28 f. Each committee shall address how its specific purpose can
29 add to the discussion on the establishment of standards pursuant to
30 paragraph (2) of subsection a. of this section.

31 g. (1) EMCAB shall, no later than the 120th day after its initial
32 meeting, submit written recommendations to the commissioner for
33 new or revised regulations to be adopted by the commissioner
34 pursuant to P.L. , c. (pending before the Legislature as this bill),
35 which shall be designed to improve emergency medical services in
36 this State consistent with standards adopted by the National
37 Highway Traffic Safety Administration.

38 (2) EMCAB shall provide ongoing review of existing
39 regulations governing emergency medical services, and shall
40 recommend to the commissioner such revisions as EMCAB
41 determines are needed to achieve the goals of evidence-based
42 medical care and protecting the public health.

43 (3) EMCAB shall submit an annual report to the commissioner
44 on the state of pre-hospital and inter-facility care in New Jersey,
45 including evaluations and recommendations from each of its
46 standing committees.

47 h. All meetings of EMCAB and its committees shall be open to
48 the public. Prior public notice shall be provided for each meeting,

1 and input and discussion by members of the public shall be
2 encouraged at all such meetings.

3 i. The department shall provide staff support to EMCAB and
4 its committees.

5

6 14. (New section) a. The commissioner, in consultation with
7 EMCAB, shall establish, by regulation, requirements for:

8 (1) the collection of data that each agency providing pre-
9 hospital or inter-facility care is to obtain for each patient encounter;

10 (2) the creation and use of a patient care report by the agency to
11 provide this data in electronic form to the receiving facility in a
12 timely manner; and

13 (3) the electronic reporting of this data to the department.

14 b. (1) The department shall develop and maintain an electronic
15 record of the patient data reported pursuant to subsection a. of this
16 section and shall make such non-identifying patient data available
17 for research purposes, in accordance with guidelines to be
18 established by the commissioner and subject to the requirements
19 and restrictions of State and federal law and regulations.

20 (2) An agency shall not be required to utilize a prescribed form
21 for reporting the data, provided that its reports include all data
22 specified by regulation of the commissioner.

23

24 15. (New section) a. (1) The commissioner shall ensure or
25 arrange for the provision of advanced life support pre-hospital care
26 in response to 9-1-1 calls within the State.

27 (2) The commissioner, in consultation with EMCAB, shall
28 establish minimum standards for training, response times,
29 equipment, and quality of care with respect to basic life support pre-
30 hospital care and advanced life support pre-hospital care.

31 b. (1) The commissioner shall establish, by regulation,
32 minimum standards for licensing any clinician or agency as an
33 emergency medical services provider before that clinician or agency
34 is permitted to respond to 9-1-1 calls in this State.

35 (2) Any agency licensed to provide 9-1-1 emergency medical
36 services response in New Jersey shall be required to maintain
37 a written agreement with a dispatch agency approved by
38 the commissioner. The commissioner shall establish objective
39 standards to approve and monitor dispatch agencies; and these
40 standards shall be designed to improve response times and
41 appropriate triage of resources to respond to calls for emergency
42 medical services, and shall include requirements for global
43 positioning tracking of emergency medical services vehicles
44 through a standard electronic interface accessible to all dispatch and
45 responder agencies, in order to enhance agency interoperability.
46 Any licensed emergency medical services provider shall be
47 permitted to contract with any approved dispatch agency.

1 (3) The commissioner shall provide for the coordination of
2 dispatch agencies in accordance with protocols established by the
3 department.

4 c. The commissioner shall, no later than December 31 of each
5 year, present a report to the Governor, and to the Legislature
6 pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1), on the
7 adequacy of emergency medical services provided pursuant to this
8 section, and shall identify in that report the funding needed for the
9 succeeding fiscal year in order to adequately fund the needed
10 infrastructure and research to encourage the continued improvement
11 of those emergency medical services.

12

13 16. Section 11 of P.L.1984, c.146 (C26:2K-17) is amended to
14 read as follows:

15 11. a. The commissioner shall promulgate such rules and
16 regulations, in accordance with the "Administrative Procedure Act,"
17 P.L.1968, c. 410 (C. 52:14B-1 et seq.), as **【he】** the commissioner
18 deems necessary to effectuate the purposes of 【this act, and the
19 board medical examiners and the board of nursing】 chapter 2K of
20 Title 26 of the Revised Statutes, with the advice of EMCAB in the
21 form of such written recommendations as EMCAB may submit to
22 the commissioner for his consideration.

23 b. The State Board of Medical Examiners and the New Jersey
24 Board of Nursing shall promulgate such rules and regulations as
25 they deem necessary to carry out their functions under 【this act】
26 chapter 2K of Title 26 of the Revised Statutes.

27 (cf: P.L.1984, c.146, s.11)

28

29 17. Section 13 of P.L.1984, c.146 (C26:2K-19) is amended to
30 read as follows:

31 13. Nothing in this act shall be construed as interfering with an
32 emergency service training program authorized and operated under
33 provisions of the "New Jersey Highway **【Safety Act of 1971,**"
34 **P.L.1971, c. 351 (C. 27:5F-1 et seq.)】** Traffic Safety Act of 1987,"
35 P.L.1987, c.284 (C.27:5F-18 et seq.).

36 (cf: P.L.1984, c.146, s.13)

37

38 18. Section 14 of P.L.1984, c.146 (C.26:2K-20) is amended to
39 read as follows:

40 14. Nothing in this act shall be construed to prevent a licensed
41 and qualified member of the health care profession from performing
42 any **【of the】** duties that require the skills of a **【mobile intensive**
43 **care】** paramedic, EMT, or emergency medical responder if the
44 duties are consistent with the accepted standards of the member's
45 profession.

46 (cf: P.L.1984, c.146, s.14)

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

3 2. a. There is established the New Jersey Emergency Medical
4 Service Helicopter Response Program in the **【Division of Local and**
5 **Community Health Services】** Office of Emergency Medical
6 Services of the Department of Health and Senior Services. The
7 commissioner shall have overall responsibility for administration of
8 the program and shall designate a mobile intensive care hospital in
9 this State and a **【regional】** trauma **【or critical care】** center which
10 shall develop and maintain a hospital-based emergency medical
11 service helicopter response unit. The commissioner shall designate
12 at least two units in the State, of which no less than one unit each
13 shall be designated for the northern and southern portions of the
14 State, respectively.

15 b. Each emergency medical service helicopter response unit
16 shall be staffed by at least two persons trained in advanced life
17 support and approved by the commissioner. The staff of the
18 emergency medical service helicopter response unit shall render life
19 support services to an accident or trauma victim, as necessary, in
20 the course of providing emergency medical transportation.

21 c. The commissioner shall provide, by regulation, for the
22 licensure of privately operated emergency medical service
23 helicopter response units, in addition to the units designated
24 pursuant to subsection a. of this section.

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

26

27 20. Section 3 of P.L.1986, c.106 (C.26:2K-37) is amended to
28 read as follows:

29 3. The Division of State Police of the Department of Law and
30 Public Safety shall establish an emergency medical transportation
31 service to provide air medical transportation service pursuant to
32 **【this amendatory and supplementary act】** section 2 of P.L.1986,
33 c.106 (C.26:2K-36). The superintendent shall operate and maintain
34 at least one dedicated helicopter, and at least one additional
35 helicopter that provides backup air medical transportation
36 capability, for each emergency medical service helicopter response
37 unit designated by the commissioner pursuant to section 2 of **【this**
38 **amendatory and supplementary act】** P.L.1986, c.106 (C.26:2K-36).

39 (cf: P.L.1986, c.106, s.3)

40

41 21. Section 3 of P.L.1992, c.96 (C.26:2K-50) is amended to read
42 as follows:

43 3. a. There is established within the Office of Emergency
44 Medical Services in the Department of Health and Senior Services,
45 the Emergency Medical Services for Children program.

1 b. The commissioner shall hire a full-time coordinator for the
2 EMSC program in consultation with, and by the recommendation of
3 the advisory council.

4 c. The coordinator shall implement the EMSC program
5 following consultation with, and at the recommendation of, the
6 advisory council. The coordinator shall serve as a liaison to the
7 advisory council.

8 d. The coordinator may employ professional, technical,
9 research and clerical staff as necessary within the limits of available
10 appropriations. The provisions of Title 11A of the New Jersey
11 Statutes shall apply to all personnel so employed.

12 e. The coordinator may solicit and accept grants of funds from
13 the federal government and from other public and private sources.

14 (cf: P.L.1992, c.96, s.3)

15

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

18 5. a. There is created an Emergency Medical Services for
19 Children Advisory Council to advise the Office of Emergency
20 Medical Services and the coordinator of the EMSC program on all
21 matters concerning emergency medical services for children. The
22 advisory council shall assist in the formulation of policy and
23 regulations to effectuate the purposes of this act.

24 b. The advisory council shall consist of a minimum of **[14]** 24
25 public members to be appointed by the **[Governor, with the advice**
26 **and consent of the Senate]** commissioner, in consultation with
27 EMCAB, for a term of three years. Membership of the advisory
28 council shall include: one **[practicing]** general practice pediatrician,
29 one pediatric critical care physician, one **[board certified]** pediatric
30 emergency physician and one pediatric physiatrist, to be appointed
31 upon the recommendation of the New Jersey chapter of the
32 American Academy of Pediatrics; one pediatric surgeon and one
33 trauma surgeon, to be appointed upon the recommendation of the
34 New Jersey chapter of the American College of Surgeons; one
35 general emergency physician, to be appointed upon the
36 recommendation of the New Jersey chapter of the American
37 College of Emergency Physicians; one injury prevention specialist,
38 to be appointed upon the recommendation of the New Jersey State
39 Safe Kids Coalition; **[one emergency medical technician, to be**
40 **appointed upon the recommendation of the New Jersey State First**
41 **Aid Council;]** one paramedic, to be appointed upon the
42 recommendation of the **[State mobile intensive care advisory**
43 **council]** subcommittee on advanced life support services of the
44 standing committee on Pre-hospital Care Systems Operations of
45 EMCAB; one family practice physician, to be appointed upon the
46 recommendation of the New Jersey chapter of the American
47 Academy of Family **[Practice]** Physicians; two registered

1 emergency nurses, one to be appointed upon the recommendation of
2 the New Jersey State Nurses Association and one to be appointed
3 upon the recommendation of the New Jersey Chapter of the
4 Emergency Nurses Association; one school nurse, to be appointed
5 upon the recommendation of the New Jersey State School Nurses
6 Association; one person to be appointed upon the recommendation
7 of the Medical Transportation Association of New Jersey; and three
8 members, each with a non-medical background, two of whom are
9 parents with children under the age of 18~~],~~ to be appointed upon the
10 joint recommendation of the Association for Children of New
11 Jersey and the Junior Leagues of New Jersey~~].~~

12 The advisory council shall also include the following members
13 who shall serve ex officio: the President of the New Jersey
14 Hospital Association or his designee; the EMSC coordinator; the
15 Director of the Office of Emergency Medical Services in the
16 department; a representative from the Division of Family Health
17 Services in the department who manages the federal Maternal and
18 Child Health Services Title V Block Grant for children with special
19 health care needs; the Director of the Division of Highway Traffic
20 Safety in the Department of Law and Public Safety or his designee;
21 the Commissioner of Children and Families or his designee; and the
22 Commissioner of Education or his designee.

23 c. Vacancies on the advisory council shall be filled for the
24 unexpired term by appointment of the ~~the~~ **【Governor】** commissioner, in
25 consultation with EMCAB, in the same manner as originally filled.
26 The members of the advisory council shall serve without
27 compensation. The advisory council shall elect a chairperson, who
28 may select from among the members a vice-chairperson and other
29 officers or subcommittees which are deemed necessary or
30 appropriate. The council may further organize itself in any manner
31 it deems appropriate and enact bylaws as deemed necessary to carry
32 out the responsibilities of the council.

33 d. The council shall meet at least quarterly.

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

35

36 23. Section 1 of P.L.1993, c.58 (C.26:2K-60) is amended to read
37 as follows:

38 1. In the event of an emergency, the chief executive officer of
39 any **【volunteer】** basic life support service first aid, ambulance or
40 rescue squad or the mayor or chief executive officer of any
41 municipality may request assistance from the chief executive officer
42 of any **【volunteer】** basic life support service first aid, ambulance or
43 rescue squad located in and serving another municipality for the
44 protection and preservation of life within the territorial jurisdiction
45 served by the squad requesting the assistance.

46 The chief executive officer of the **【volunteer】** basic life support
47 service first aid, ambulance or rescue squad located in and normally

1 serving a contiguous municipality to whom such a request for
2 assistance is made shall, except as hereinafter otherwise set forth,
3 provide such personnel and equipment as requested to the extent
4 possible without endangering any person or property within the
5 municipality in which the assisting squad is located and which it
6 normally serves.

7 The members of any squad providing assistance shall have, while
8 so acting, the same rights and immunities as they otherwise enjoy in
9 the performance of their normal duties in the municipality, or other
10 territorial jurisdiction, in which the squad is located and which it
11 normally serves.

12 If any member of the assisting basic life support service first aid,
13 ambulance or rescue squad shall, in rendering such assistance,
14 suffer any injury or death, the member or his designee or legal
15 representative shall be entitled to all salary, pension rights, workers
16 compensation and other benefits to which the member would be
17 entitled if the casualty or death had occurred in the performance of
18 the member's duties in the municipality, or other territorial
19 jurisdiction, in which the squad is located and which it normally
20 serves.

21 (cf: P.L.1993, c.58, s.1)

22

23 24. Section 2 of P.L.1993, c.58 (C.26:2K-61) is amended to read
24 as follows:

25 2. The governing bodies of two or more municipalities may, by
26 enacting reciprocal ordinances, enter into agreements with each
27 other for mutual basic life support service first aid, ambulance or
28 rescue squad assistance in case of emergency, subject to the written
29 approval of the **【volunteer】** basic life support service first aid,
30 ambulance or rescue squad or squads involved. The agreements
31 may provide for:

32 a. Terms and conditions for payment by the municipality
33 receiving assistance to the municipality rendering assistance for
34 each member and each equipped basic life support service first aid,
35 ambulance or rescue squad apparatus for each hour supplied;

36 b. The reimbursement of the municipality or municipalities
37 rendering assistance for any damage to basic life support service
38 first aid, ambulance or rescue squad equipment or other property
39 and for payment to any member of a basic life support service first
40 aid, ambulance or rescue squad for injuries sustained while serving
41 pursuant to such agreements, or to a surviving spouse or other
42 dependent if death results; and

43 c. A joint meeting of the municipalities entering into such
44 agreements regarding other matters as are mutually deemed
45 necessary.

46 (cf: P.L.1993, c.58, s.2)

1 25. (New section) a. The commissioner shall establish, maintain,
2 and coordinate the activities of the New Jersey Emergency Medical
3 Services Task Force.

4 b. The purpose of the task force shall be to support and
5 enhance the provision of specialized response services, utilizing
6 personnel and equipment to respond as requested, for both pre-
7 planned and emergency events, including natural disasters and mass
8 casualty incidents, including chemical, biological, radiological,
9 nuclear, and explosive events, in order to reduce morbidity and
10 mortality through appropriate triage, incident management, and
11 coordinated pre-hospital care and transportation.

12 c. The membership of the task force shall represent all regions
13 of the State and shall include emergency medical responders,
14 EMTs, paramedics, registered nurses, physicians, communications
15 specialists, hospitals, agencies providing emergency medical
16 responder and other emergency medical services, and
17 communication centers utilized for the purpose of providing
18 emergency medical services.

19

20 26. N.J.S.22A:3-4 is amended to read as follows:

21 22A:3-4. Fees for criminal proceedings.

22 The fees provided in the following schedule, and no other
23 charges whatsoever, shall be allowed for court costs in any
24 proceedings of a criminal nature in the municipal courts but no
25 charge shall be made for the services of any salaried police officer
26 of the State, county or municipal police.

27 For violations of Title 39 of the Revised Statutes, or of traffic
28 ordinances, at the discretion of the court, up to but not exceeding
29 \$33.

30 For all other cases, at the discretion of the court, up to but not
31 exceeding \$33.

32 In municipal court proceedings, the court shall impose court
33 costs within the maximum limits authorized by this section, as
34 follows:

35 a. For every violation of any statute or ordinance the sum of
36 \$2.00. The court shall not suspend the collection of this \$2.00 court
37 cost assessment. These court cost assessments shall be collected by
38 the municipal court administrator for deposit into the Automated
39 Traffic System Fund, created pursuant to N.J.S.2B:12-30.

40 b. For each fine, penalty and forfeiture imposed and collected
41 under authority of law for any violation of the provisions of Title 39
42 of the Revised Statutes or any other motor vehicle or traffic
43 violation in this State the sum of ~~[\$.50]~~ \$5. The court shall not
44 suspend the collection of this ~~[\$.50]~~ \$5 court cost assessment.
45 These court cost assessments shall be collected by the municipal
46 court administrator for deposit into the "Emergency Medical
47 ~~【Technician】 Services~~ Training Fund" established pursuant to
48 P.L.1992, c.143 (C.26:2K-54 et al.).

1 c. For every violation of any statute or ordinance the sum of \$3
2 to fund the Statewide modernization of the Automated Traffic
3 System. The court shall not suspend the collection of this \$3 court
4 cost assessment. These court cost assessments shall be collected by
5 the municipal court administrator for deposit into the Automated
6 Traffic System Statewide Modernization Fund, established pursuant
7 to section 1 of P.L.2004, c.62 (C.2B:12-30.1).

8 The provisions of this act shall not prohibit the taxing of
9 additional costs when authorized by R.S.39:5-39.

10 For certificate of judgment..... \$4.00

11 For certified copy of paper filed with the court as a public
12 record:

13 First page..... \$4.00

14 Each additional page or part thereof..... \$1.00

15 For copy of paper filed with the court as a public record:

16 First page..... \$2.00

17 Each additional page or part thereof..... \$1.00

18 In addition to any fine imposed, when a supplemental notice is
19 sent for failure to appear on a return date the cost shall be \$10.00
20 per notice, unless satisfactory evidence is presented to the court that
21 the notice was not received.

22 **CONSTABLES OR OTHER OFFICERS**

23 From the fees allowed for court costs in the foregoing schedule,
24 the clerk of the court shall pay the following fees to constables or
25 other officers:

26 Serving warrant or summons, \$1.50.

27 Serving every subpoena, \$0.70.

28 Serving every execution, \$1.50.

29 Advertising property under execution, \$0.70.

30 Sale of property under execution, \$1.00.

31 Serving every commitment, \$1.50.

32 Transport of defendant, actual cost.

33 Mileage, for every mile of travel in serving any warrant,
34 summons, commitment, subpoena or other process, computed by
35 counting the number of miles in and out, by the most direct route
36 from the place where such process is returnable, exclusive of the
37 first mile, \$0.20.

38 If defendant is found guilty of the charge laid against him, he
39 shall pay the costs herein provided, but if, on appeal, the judgment
40 is reversed, the costs shall be repaid to defendant. If defendant is
41 found not guilty of the charge laid against him, the costs shall be
42 paid by the prosecutor, except when the Chief Administrator of the
43 New Jersey Motor Vehicle Commission, a peace officer, or a police
44 officer shall have been prosecutor.

45 (cf: P.L.2004, c.62, s.2)

46

47 27. Section 4 of P.L.1987, c.284 (C.27:5F-21) is amended to
48 read as follows:

1 4. a. The Governor shall coordinate the highway traffic safety
2 activities of State and local agencies, other public and private
3 agencies, nonprofit organizations, and interested organizations and
4 individuals and shall be the official of this State having the ultimate
5 responsibility of dealing with the federal government with respect
6 to the State highway traffic safety program. In order to effectuate
7 the purposes of this act ~~【he】~~, the Governor shall:

8 (1) Prepare for this State, the New Jersey Highway Traffic
9 Safety Program which shall consist of a comprehensive plan in
10 conformity with the laws of this State to reduce traffic accidents
11 and deaths, injuries, and property damage resulting therefrom~~【.】~~;

12 (2) Promulgate rules and regulations establishing standards and
13 procedures relating to the content, coordination, submission, and
14 approval of local highway traffic safety programs~~【.】~~;

15 (3) Contract and do all things necessary or convenient on behalf
16 of the State in order to insure that all departments of State
17 government, local political subdivisions and nonprofit
18 organizations, to the extent that nonprofit organizations qualify for
19 highway traffic safety grants pursuant to the provisions of section
20 12 of P.L.1987, c.284 (C.27:5F-29) as amended by section 6 of
21 P.L.2007, c.84, secure the full benefits available under the "U.S.
22 Highway Safety Act of 1966," Pub.L.89-564 (23 U.S.C. ss. 401-
23 404), and any acts amendatory or supplementary thereto~~【.】~~; and

24 (4) Adopt, through the Commissioner of Health and Senior
25 Services, training programs, guidelines, and standards for members
26 of 【nonvolunteer】 basic life support service first aid, rescue, and
27 ambulance squads and agencies providing emergency medical
28 service programs or pre-hospital or inter-facility care as defined in
29 section 1 of P.L.1984, c.146 (C.26:2K-7).

30 b. The New Jersey Highway Traffic Safety Program, and rules
31 and regulations, training programs, guidelines, and standards shall
32 comply with uniform standards promulgated by the United States
33 Secretary of Transportation in accordance with the "U.S. Highway
34 Safety Act of 1966," Pub.L.89-564 (23 U.S.C. ss. 401-404), and any
35 acts amendatory or supplementary thereto.

36 (cf: P.L.2007, c.84, s.2)

37
38 28. Section 5 of P.L.1987, c.284 (C.27:5F-22) is amended to
39 read as follows:

40 5. The New Jersey Highway Traffic Safety Program shall, in
41 addition to other provisions, include training programs for groups
42 such as, but not limited to, police, teachers, students, and public
43 employees, which programs shall comply with the uniform
44 standards promulgated by the United States Secretary of
45 Transportation in accordance with the "U.S. Highway Safety Act of
46 1966," Pub.L.89-564 (23 U.S.C. s.s. 401-404), and any acts
47 amendatory or supplementary thereto.

1 In addition, the New Jersey Highway Traffic Safety Program
2 shall include the training program for **members of volunteer first**
3 **aid, rescue and ambulance squads, adopted by the New Jersey State**
4 **First Aid Council** paramedics, emergency medical technicians, and
5 emergency medical responders licensed by the Commissioner of
6 Health and Senior Services, which shall comply with the uniform
7 standards promulgated by the United States Secretary of
8 Transportation in accordance with the "U.S. Highway Safety Act of
9 1966," Pub.L.89-564 (23 U.S.C. s.s. 401-404) and any amendments
10 or supplements to it.

11 (cf: P.L.1987, c.284, s.5)

12

13 29. Section 10 of P.L.1987, c.284 (C.27:5F-27) is amended to
14 read as follows:

15 10. **The officers of each volunteer and nonvolunteer** Each
16 basic life support service first aid, rescue, and ambulance squad
17 **providing emergency medical service programs shall be**
18 **responsible for the training of its members and shall notify the**
19 **governing body of the political subdivision in which the squad is**
20 **located, or the person designated for this purpose by the governing**
21 **body, that particular applicants for membership (qualified under**
22 **sections 5 and 4 of this act respectively), ambulances, and**
23 **ambulance equipment meet the standards required by this act.**
24 **Upon receipt of such notification the governing body or person**
25 **designated shall certify the applicant, ambulances, and ambulance**
26 **equipment as being qualified for emergency medical service**
27 **programs, and shall issue a certificate to that effect at no charge.**
28 **Each member and piece of equipment of a volunteer and**
29 **nonvolunteer first aid, rescue and ambulance squad shall comply**
30 **with the requirements for certification annually. Any person who is**
31 **a member of a volunteer and nonvolunteer first aid, rescue and**
32 **ambulance squad providing emergency medical service programs**
33 **on the effective date of this act shall, if application is made to the**
34 **appropriate municipality within 90 days of the effective date, be**
35 **certified by the governing body or designated person as being**
36 **qualified for emergency medical service programs for a period of**
37 **two years. At the end of that period, the person** shall comply with
38 the requirements for certification annually licensure of personnel,
39 ambulances, and ambulance equipment established by the
40 Commissioner of Health and Senior Services and shall staff each
41 ambulance with at least one emergency medical technician while it
42 is in service. No person or entity shall respond to a 9-1-1 call as
43 defined in section 1 of P.L.1984, c.146 (C.26:2K-7) unless that
44 person or entity is licensed to do so by the Department of Health
45 and Senior Services.

46 (cf: P.L.1987, c.284, s.10)

1 30. The following are repealed:
2 Sections 5, 10, and 12 of P.L.1984, c.146 (C.26:2K-11, C.26:2K-
3 16, and C.26:2K-18);
4 P.L.1985, c.351 (C.26:2K-21 et seq.);
5 Sections 1 and 4 of P.L.1986, c.106 (C.26:2K-35 and C.26:2K-
6 38);
7 P.L.1989, c.314 (C.26:2K-39 et seq.);
8 Sections 1, 2, 3, and 10 of P.L.2003, c.1 (C.26:2K-47.1,
9 C.26:2K-47.2, C.26:2K-47.3, and C.26:2K-47.9);
10 Section 2 of P.L.1992, c.96 (C.26:2K-49); and
11 Sections 2, 4, 5, and 6 of P.L.1992, c.143 (C.26:2K-55, C.26:2K-
12 57, C.26:2K-58, and C.26:2K-59).

13
14 31. This act shall take effect on the 180th day after enactment,
15 but the Commissioner of Health and Senior Services may take such
16 anticipatory administrative action in advance thereof as shall be
17 necessary for the implementation of the act.

18

19

20

STATEMENT

21

22 This bill provides a new statutory approach to the regulation of
23 emergency medical services that encompasses basic and advanced
24 life support services, and governs the qualifications, training, and
25 operations of paramedics, emergency medical technicians (EMTs),
26 and emergency medical responders.

27 Paramedics who staff mobile intensive care units, EMTs who
28 staff licensed ambulances, and emergency medical responders to 9-
29 1-1 calls would be required to be licensed and submit to criminal
30 history record background checks. EMTs with volunteer first aid,
31 ambulance, or rescue squads would be exempt from having to
32 assume any costs for licensure or criminal history record
33 background checks. The bill authorizes the commissioner, after
34 notice and hearing, to revoke the license of a paramedic, EMT, or
35 emergency medical responder for violation of any provision of
36 applicable laws and regulations. DHSS is to make available to the
37 public a current list of licensed paramedics and EMTs on its
38 Internet website.

39 Paramedics would be authorized to perform advanced life
40 support services if they maintain direct voice communication with a
41 licensed physician or physician-directed registered professional
42 nurse affiliated with a mobile intensive care program, or if they
43 operate under standing orders developed or approved by a mobile
44 intensive care program.

45 The bill provides for new requirements with respect to mobile
46 intensive care units operated by hospitals, which would be
47 authorized to develop and maintain a mobile intensive care program
48 if licensed to do so pursuant to the bill. The commissioner is

1 directed to establish by regulation the criteria which a hospital must
2 meet; at a minimum, a hospital will be required to maintain an
3 accredited emergency department.

4 The Office of Emergency Medical Services in the Department of
5 Health and Senior Services (DHSS), under the direction of the
6 Commissioner of Health and Senior Services, would serve as the
7 lead State agency for the oversight of emergency medical services
8 delivery to ensure the continuous and timely Statewide availability
9 and dispatch of basic and advanced life support in the State.

10 The commissioner is to appoint a physician with relevant
11 experience as State Medical Director for Emergency Medical
12 Services, and the State Medical Director may appoint up to three
13 regional medical directors to oversee their respective geographic
14 areas. The commissioner is to ensure, or arrange for, the provision
15 of advanced life support pre-hospital care in response to 9-1-1 calls
16 within the State.

17 The commissioner is to establish a 16-member Emergency
18 Medical Care Advisory Board (EMCAB), which replaces the State
19 mobile intensive care advisory council. EMCAB would review
20 regulations and make policy recommendations to the commissioner
21 regarding emergency medical services. The commissioner, in
22 consultation with EMCAB, is to establish minimum standards for
23 training, response times, equipment, and quality of care with respect
24 to basic life support pre-hospital care and advanced life support pre-
25 hospital care. Membership of EMCAB is to be comprised of the
26 commissioner, the Director of the Office of Emergency Medical
27 Services, the State Medical Director for Emergency Medical
28 Services, or their designees, as ex officio members, the President of
29 the New Jersey State First Aid Council or his proxy, and 11 public
30 members representing various groups involved with the provision of
31 health care or emergency medical services, as well as one member
32 of the general public. EMCAB is to provide ongoing review of
33 regulations governing emergency medical services and recommend
34 to the commissioner such revisions as it determines are needed to
35 achieve the goals of evidence-based medical care and protecting the
36 public health. EMCAB is to submit an annual report to the
37 commissioner on the state of pre-hospital and inter-facility care in
38 New Jersey, including evaluations and recommendations from each
39 of its standing committees, which are specified in the bill.

40 The commissioner is to establish, maintain, and coordinate the
41 activities of a New Jersey Emergency Medical Services Task Force,
42 which will include emergency medical services providers from all
43 regions of the State. The purpose of the task force would be to
44 support and enhance the provision of specialized response services
45 for both pre-planned and emergency events in order to reduce
46 morbidity and mortality through appropriate triage, incident
47 management, and coordinated pre-hospital care and transportation.

1 The bill increases the surcharge imposed on motor vehicle
2 violations pursuant to N.J.S.22A:3-5, for deposit into the
3 "Emergency Medical Services Training Fund," from \$.50 to \$5 in
4 order to ensure adequate funding for EMT and paramedic training.

5 The bill repeals: section 5 of P.L.1984, c.146 (C26:2K-11),
6 concerning the performance of advanced life support procedures by
7 a paramedic who is not in direct voice communication with a
8 physician; section 12 of P.L.1984, c.146 (C26:2K-18), concerning a
9 paramedic performing the duties or filling the position of another
10 health care professional employed by a hospital; and section 4 of
11 P.L.1986, c.106 (C26:2K-38), concerning immunity from liability
12 for persons training for or rendering advanced life support services.
13 These sections of law are obviated by the provisions of the bill.
14 Also repealed is P.L.1989, c.314 (C.26:2K-39 et seq.), concerning
15 certification of EMT-Ds by the commissioner to perform cardiac
16 defibrillation, which is obviated by the training in cardiac
17 defibrillation provided to EMTs and First Responders to meet
18 American Heart Association CPR certification requirements.

19 The commissioner is directed to report to the Governor and the
20 Legislature, no later than December 31 of each year, on the
21 adequacy of emergency medical services, and to identify funding
22 needed for the succeeding fiscal year for infrastructure and research
23 to encourage continued improvement of emergency medical
24 services.

[First Reprint]

ASSEMBLY, No. 2463

STATE OF NEW JERSEY
215th LEGISLATURE

INTRODUCED FEBRUARY 21, 2012

Sponsored by:

Assemblyman HERB CONAWAY, JR.

District 7 (Burlington)

SYNOPSIS

Revises requirements for emergency medical services delivery.

CURRENT VERSION OF TEXT

As reported by the Assembly Health and Senior Services Committee on June 7, 2012, with amendments.



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

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

7
8 1. Section 1 of P.L.1984, c.146 (C.26:2K-7) is amended to read
9 as follows:

10 1. As used in **[this act]** chapter 2K of Title 26 of the Revised
11 Statutes:

12 **[a.]** "Advanced life support" means an advanced level of **[pre-**
13 **hospital, inter-hospital, and emergency service]** care which includes
14 basic life support functions, cardiac monitoring, cardiac
15 defibrillation, telemetered electrocardiography, administration of
16 anti-arrhythmic agents, intravenous therapy, administration of
17 specific medications, drugs and solutions, use of adjunctive
18 ventilation devices, trauma care, and other techniques and
19 procedures authorized in writing by the commissioner**[:]**.

20 "Agency" means an organization that is licensed or otherwise
21 authorized by the department to operate a pre-hospital or inter-
22 facility care ambulance service.

23 "Basic life support" means a basic level of pre-hospital care or
24 inter-facility care which includes patient stabilization, airway
25 clearance, cardiopulmonary resuscitation, hemorrhage control,
26 initial wound care, fracture stabilization, and other techniques and
27 procedures authorized in writing by the commissioner.

28 **[b.]** "Board of Medical Examiners" means the State Board of
29 Medical Examiners**[:]**.

30 **[c.]** "Board of Nursing" means the New Jersey State Board of
31 Nursing**[:]**.

32 "Clinician" means a person who is licensed or otherwise
33 authorized to provide patient care in a pre-hospital care or inter-
34 facility care setting.

35 **[d.]** "Commissioner" means the Commissioner of **[the State**
36 **Department of Health;** Health and Senior Services.

37 **[e.]** "Department" means the **[State]** Department of Health**[:]**
38 and Senior Services.

39 **[f.]** "Emergency **[service]** department" means a program in a
40 general hospital staffed 24 hours a day by a licensed physician
41 trained in emergency medicine**[:]** and as prescribed by regulation
42 of the commissioner.

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.

Matter enclosed in superscript numerals has been adopted as follows:

¹Assembly AHE committee amendments adopted June 7, 2012.

1 “EMCAB” means the Emergency Medical Care Advisory Board
2 established pursuant to section 13 of P.L. , c. (C.) (pending
3 before the Legislature as this bill).

4 “Emergency medical responder” means a person trained to
5 provide emergency medical first response services in a program
6 recognized by the commissioner and licensed or otherwise
7 authorized by the department to provide those services.

8 “Emergency medical services personnel” means persons trained
9 and licensed or otherwise authorized to provide emergency medical
10 care, whether on a paid or volunteer basis, as part of a basic life
11 support or advanced life support pre-hospital care service or in an
12 emergency department in a general hospital.

13 “Emergency medical technician” or “EMT” means a person
14 trained to provide basic life support services in a program
15 recognized by the commissioner and licensed or otherwise
16 authorized by the department to provide those services.

17 “EMSC Advisory Council” means the Emergency Medical
18 Services for Children Advisory Council established pursuant to
19 section 5 of P.L.1992, c.96 (C.26:2K-52).

20 “EMSC coordinator” means the person coordinating the EMSC
21 program within the Office of Emergency Medical Services in the
22 department.

23 “EMSC program” means the Emergency Medical Services for
24 Children program established pursuant to section 3 of P.L.1992,
25 c.96 (C.26:2K-50), and other relevant programmatic activities
26 conducted by the Office of Emergency Medical Services in the
27 department in support of appropriate treatment, transport, and triage
28 of ill or injured children in New Jersey.

29 **[g. “Inter-hospital care” means those emergency medical**
30 **services rendered by mobile intensive care units to emergency**
31 **patients before and during transportation between emergency**
32 **treatment facilities, and upon arrival within those facilities;]**

33 “Health care facility” means a health care facility licensed
34 pursuant to P.L.1971, c.136 (C.26:2H-1 et seq.).

35 “Inter-facility care” means those medical services rendered to
36 patients by emergency medical services personnel before and during
37 transportation between medical facilities, and upon arrival at those
38 facilities.

39 **[h. “Mobile intensive care paramedic” means a person trained in**
40 **advanced life support services and certified by the commissioner to**
41 **render advanced life support services as part of a mobile intensive**
42 **care unit;]**

43 **[i.] “Mobile intensive care unit” means a specialized emergency**
44 **medical service vehicle that is operating under a mobile intensive**
45 **care program pursuant to section 6 of P.L.1984, c.146 (C.26:2K-12)**
46 **and is staffed by **[mobile intensive care]** paramedics or registered**
47 **professional nurses **[trained in advanced life support nursing and****

1 operated for the provision of advanced life support services]
2 recognized as mobile intensive care nurses, or other personnel
3 authorized by the commissioner, under the medical direction of an
4 authorized hospital[;].

5 “9-1-1 call” means a 9-1-1 telephone call for emergency medical
6 services in which the caller dials 9-1-1, or a method adopted in the
7 future to initiate the response of emergency medical services for a
8 medical reason through a public safety answering point as defined
9 in section 1 of P.L.1989, c.3 (C.52:17C-1).

10 “Paramedic” means a person licensed or otherwise authorized by
11 the commissioner as a paramedic pursuant to regulation of the
12 commissioner.

13 [j.] "Pre-hospital care" means those [emergency medical
14 services rendered by mobile intensive care units to emergency]
15 medical services rendered to patients by emergency medical
16 services personnel before and during transportation to [emergency
17 treatment] medical facilities, and upon arrival within those
18 facilities.

19 "Regional trauma center" means a State designated level one
20 hospital-based trauma center equipped and staffed to provide
21 emergency medical services to an accident or trauma victim.

22 “Volunteer first aid, ambulance or rescue squad” means a
23 volunteer first aid, ambulance or rescue squad as defined in section
24 3 of P.L.1987, c.284 (C.27:5F-20).

25 (cf: P.L.1984, c.146, s.1)

26

27 2. Section 2 of P.L.1984, c.146 (C.26:2K-8) is amended to read
28 as follows:

29 2. a. (1) A [mobile intensive care] paramedic shall obtain
30 [certification] licensure from the commissioner to staff a mobile
31 intensive care unit or a health care facility and shall make
32 application therefor on forms prescribed by the commissioner.

33 (2) An EMT shall obtain licensure from the commissioner to
34 staff a licensed ambulance or a health care facility and shall make
35 application therefor on forms prescribed by the commissioner.

36 (3) An emergency medical responder shall obtain licensure from
37 the commissioner to respond to 9-1-1 calls and shall make
38 application therefor on forms prescribed by the commissioner.

39 b. The commissioner [with the approval of the board of
40 medical examiners] shall establish written standards which [a
41 mobile intensive care paramedic] an applicant shall meet in order to
42 obtain [certification] licensure as a paramedic, EMT, or emergency
43 medical responder. The commissioner shall act on a regular basis
44 upon applications of candidates for [certification] licensure as a
45 [mobile intensive care] paramedic, EMT, or emergency medical
46 responder. The commissioner shall [certify] license a candidate

1 who provides satisfactory evidence of the successful completion of
2 an educational program approved by the commissioner for the
3 training of **mobile intensive care** paramedics, EMTs, or
4 emergency medical responders, as applicable, and who passes an
5 examination **in the provision of advance life support services**
6 approved by the department for the applicable licensure, which
7 examination shall be conducted by the department at least twice a
8 year.

9 c. The department shall maintain a register of all applicants for
10 **certification** licensure hereunder, which register shall include but
11 not be limited to:

12 (1) The name and residence of the applicant;

13 (2) The date of the application;

14 (3) Information as to whether the applicant was rejected or
15 **certified** licensed and the date of that action.

16 d. An EMT who is a member of a volunteer first aid,
17 ambulance or rescue squad shall not be required to pay a fee or
18 assume any other cost for licensure from the commissioner pursuant
19 to this section.

20 e. The department shall **annually compile a** maintain a
21 current list of **mobile intensive care** paramedics and EMTs. This
22 list shall be available to the public on the Internet website of the
23 department.

24 (cf: P.L.1984, c.146, s.2)

25

26 3. Section 3 of P.L.1984, c.146 (C.26:2K-9) is amended to read
27 as follows:

28 3. The commissioner, after notice and hearing, may revoke the
29 **certification** license of a **mobile intensive care** paramedic,
30 EMT, or emergency medical responder for violation of any
31 provision of **this act** P.L.1984, c.146 (C.26:2K-7 et seq.) or
32 regulation promulgated hereunder.

33 (cf: P.L.1984, c.146, s.3)

34

35 4. Section 4 of P.L.1984, c.146 (C.26:2K-10) is amended to
36 read as follows:

37 4. A **mobile intensive care** paramedic may **perform**
38 provide advanced life support services, provided **they maintain**
39 that the paramedic:

40 a. maintains direct voice communication with and **are** is
41 taking orders from a licensed physician or physician directed
42 registered professional nurse, both of whom are affiliated with a
43 mobile intensive care **hospital** which is approved by the
44 commissioner to provide advanced life support services. A
45 telemetered electrocardiogram shall be monitored when deemed
46 appropriate by the licensed physician or when required by written
47 rules and regulations established by the mobile intensive care

1 hospital and approved by the commissioner] program operating
2 pursuant to section 6 of P.L.1984, c.146 (C.26:2K-12); or

3 b. is operating under standing orders from a licensed physician
4 that have been developed or approved by a mobile intensive care
5 program.

6 (cf: P.L.1984, c.146, s.4)

7

8 5. Section 6 of P.L.1984, c.146 (C.26:2K-12) is amended to
9 read as follows:

10 6. a. Only a hospital [authorized by the commissioner with an
11 accredited emergency service may develop and maintain a mobile
12 intensive care unit, and provide advanced life support services
13 utilizing licensed physicians, registered professional nurses trained
14 in advanced life support nursing, and mobile intensive care
15 paramedics] licensed by the department to operate a mobile
16 intensive care program may develop or maintain such a program.
17 At a minimum, the hospital shall be required to maintain an
18 emergency department.

19 b. A hospital authorized by the commissioner pursuant to
20 subsection a. of this section shall provide mobile intensive care unit
21 services on a seven-day-a-week basis.

22 c. The commissioner shall establish, [in writing] by
23 regulation, criteria which a hospital shall meet in order to [qualify
24 for the authorization] obtain licensure to operate a mobile intensive
25 care program, and shall prescribe, in those regulations, standards
26 and responsibilities for the position of medical director for the
27 program. A hospital operating a mobile intensive care program
28 prior to, or on the effective date of, P.L. , c. (pending before the
29 Legislature as this bill), shall be required to meet any new
30 requirements for such licensure as may be established by the
31 commissioner by the date that the hospital is required to apply for
32 renewal of its license to operate a mobile intensive care program.

33 d. The commissioner [may withdraw his authorization] shall
34 provide by regulation for enforcement of the provisions of chapter
35 2K of Title 26 of the Revised Statutes, up to and including
36 revocation of licensure to operate a mobile intensive care program
37 if the hospital or unit violates any provision [of this act] thereof or
38 rules or regulations promulgated pursuant thereto.

39 (cf: P.L.1985, c.351, s.2)

40

41 6. (New section) a. The commissioner shall not issue an initial
42 license or other authorization to practice as a clinician unless the
43 commissioner first determines that no criminal history record
44 information exists on file in the Federal Bureau of Investigation,
45 Identification Division, or in the State Bureau of Identification in
46 the Division of State Police, which may disqualify the applicant

1 from being licensed or otherwise authorized to practice as a
2 clinician as determined by regulation of the commissioner.

3 b. (1) The commissioner shall not renew a license or other
4 authorization to practice as a clinician unless the commissioner first
5 determines that no criminal history record information exists on file
6 in the Federal Bureau of Investigation, Identification Division, or in
7 the State Bureau of Identification in the Division of State Police,
8 which may provide grounds for the refusal to renew the license or
9 other authorization to practice as a clinician.

10 (2) The commissioner shall revoke a license or other
11 authorization to practice as a clinician if the commissioner
12 determines that criminal history record information exists on file in
13 the Federal Bureau of Investigation, Identification Division, or in
14 the State Bureau of Identification in the Division of State Police,
15 which may provide grounds for the refusal to renew the license or
16 other authorization to practice as a clinician.

17 c. The commissioner shall establish, by regulation, a schedule
18 of dates by which the requirements of this section shall be
19 implemented no later than four years after the effective date of
20 P.L. , c. (pending before the Legislature as this bill).

21 d. The commissioner may, in an emergent circumstance as
22 determined by the commissioner, temporarily waive the
23 requirement for a person to undergo a criminal history record
24 background check as a condition of new or renewed licensure or
25 other authorization to practice as a clinician.

26 e. An applicant or licensee who is required to undergo a
27 criminal history record background check pursuant to this section
28 shall submit to the commissioner that individual's name, address,
29 and fingerprints taken on standard fingerprint cards, or through any
30 equivalent means, by a State or municipal law enforcement agency
31 or by a private entity under contract with the State. The
32 commissioner is authorized to exchange fingerprint data with and
33 receive criminal history record information from the Federal Bureau
34 of Investigation and the Division of State Police for use in making
35 the determinations required pursuant to this section.

36 f. Upon receipt of the criminal history record information for
37 an applicant or licensee from the Federal Bureau of Investigation or
38 the Division of State Police, the commissioner shall immediately
39 notify the applicant or licensee, as applicable.

40 g. If an applicant refuses to consent to, or cooperate in, the
41 securing of a criminal history record background check, the
42 commissioner shall not issue a clinician license and shall notify the
43 applicant of that denial.

44 h. If a licensee refuses to consent to, or cooperate in, the
45 securing of a criminal history record background check as required
46 during the licensure or other authorization renewal process, the
47 commissioner shall refuse to renew the license or other

1 authorization of the licensee, without a hearing, and shall notify the
2 licensee of that denial.

3 i. A licensee:

4 (1) who has permitted a license or other authorization to lapse,
5 or whose license, other authorization or privilege has been
6 suspended, revoked, or otherwise, and

7 (2) who has not already submitted to a criminal history record
8 background check, shall be required to submit fingerprints as part
9 of the licensure or other authorization reinstatement process. If a
10 reinstatement applicant refuses to consent to, or cooperate in, the
11 securing of a criminal history record background check as required
12 during the reinstatement process, the commissioner shall
13 automatically deny reinstatement of the license or other
14 authorization, without a hearing, and shall notify the licensee of that
15 denial.

16 j. An applicant for licensure or other authorization to practice
17 as a clinician shall be required to assume the cost of the criminal
18 history record background check conducted pursuant to this section,
19 in accordance with procedures determined by regulation of the
20 commissioner, except that a member of a volunteer first aid,
21 ambulance, or rescue squad shall not be required to assume this
22 cost.

23 k. The provisions of this section shall not apply to a health care
24 professional who is subject to a criminal history record background
25 check pursuant to P.L.2002, c.104 (C.45:1-28 et al.)
26

27 7. Section 14 of P.L.1997, c.100 (C.53:1-20.9a) is amended to
28 read as follows:

29 14. a. In accordance with the provisions of sections 2 through 6
30 and sections 7 through 13 of P.L.1997, c.100 (C.26:2H-83 through
31 87 and C.45:11-24.3 through 24.9) **[and]**, P.L.2002, c.104 (C.45:1-
32 28 et al.), and section 6 of P.L. , c. (C.) (pending before the
33 Legislature as this bill), the Division of State Police in the
34 Department of Law and Public Safety shall conduct a criminal
35 history record background check, including a name and fingerprint
36 identification check, of:

37 (1) each applicant for nurse aide or personal care assistant
38 certification submitted to the Department of Health and Senior
39 Services and of each applicant for homemaker-home health aide
40 certification submitted to the New Jersey Board of Nursing in the
41 Division of Consumer Affairs;

42 (2) each nurse aide or personal care assistant certified by the
43 Department of Health and Senior Services and each homemaker-
44 home health aide certified by the New Jersey Board of Nursing, as
45 required pursuant to P.L.1997, c.100 (C.26:2H-83 et al.); **[and]**

46 (3) each applicant for licensure or other authorization to engage
47 in a health care profession who is required to undergo a criminal

1 history record background check pursuant to P.L.2002, c.104
2 (C.45:1-28 et al.); and

3 (4) each applicant for clinician licensure who is required to
4 undergo a criminal history record background check pursuant to
5 section 6 of P.L. , c. (C.) (pending before the Legislature as
6 this bill).

7 b. For the purpose of conducting a criminal history record
8 background check pursuant to subsection a. of this section, the
9 Division of State Police shall examine its own files and arrange for
10 a similar examination by federal authorities. The division shall
11 immediately forward the information obtained as a result of
12 conducting the check to: the Commissioner of Health and Senior
13 Services, in the case of an applicant for nurse aide or personal care
14 assistant certification **[or]**, a certified nurse aide or personal care
15 assistant, or an applicant for clinician licensure pursuant to chapter
16 2K of Title 26 of the Revised Statutes; the New Jersey Board of
17 Nursing in the Division of Consumer Affairs in the Department of
18 Law and Public Safety, in the case of an applicant for homemaker-
19 home health aide certification or a certified homemaker-home
20 health aide; and the Director of the Division of Consumer Affairs in
21 the Department of Law and Public Safety, in the case of an
22 applicant for licensure or other authorization to practice as a health
23 care professional as defined in section 1 of P.L.2002, c.104 (C.45:1-
24 28).

25 (cf: P.L.2002, c.104, s.5)

26

27 8. (New section) a. Only an agency as defined in section 1 of
28 P.L.1984, c.146 (C.26:2K-7) may develop or maintain a pre-
29 hospital or inter-facility care ambulance service.

30 b. The commissioner shall establish, by regulation, criteria
31 which an agency shall meet in order to obtain licensure to operate a
32 pre-hospital or inter-facility care ambulance service, and shall
33 prescribe in those regulations standards and responsibilities for the
34 position of agency medical director. An agency operating a pre-
35 hospital or inter-facility care ambulance service prior to or on the
36 effective date of P.L. , c. (pending before the Legislature as this
37 bill) shall be required to meet any new requirements for such
38 licensure as may be established by the commissioner by the date
39 that the agency is required to apply for renewal of its license to
40 operate the ambulance service.

41 c. The commissioner shall provide by regulation for
42 enforcement of the provisions of this section, up to and including
43 revocation of licensure to operate a pre-hospital or inter-facility
44 care ambulance service if the agency violates any provision thereof
45 or rules or regulations promulgated pursuant thereto.

46

47 9. Section 7 of P.L.1984, c.146 (C.26:2K-13) is amended to
48 read as follows:

1 7. a. No person may advertise or disseminate information to
2 the public that the person provides;

3 (1) advanced life support services by a mobile intensive care
4 unit unless the person is authorized to do so pursuant to section 6 of
5 【this act】 P.L.1984, c.146 (C.26:2K-12); or

6 (2) basic life support services by an ambulance unless the
7 person is authorized to do so pursuant to section 8 of P.L. , c.
8 (C.) (pending before the Legislature as this bill).

9 b. No person may impersonate or refer to himself as a **【mobile**
10 **intensive care】** paramedic, EMT, or emergency medical responder
11 unless 【he is certified or approved therefor, as appropriate】 that
12 person is licensed as such.

13 (cf: P.L.1984, c.146, s.7)

14

15 10. Section 8 of P.L.1984, c.146 (C.26:2K-14) is amended to
16 read as follows:

17 8. No **【mobile intensive care】** paramedic, EMT, emergency
18 medical responder, other clinician, licensed physician, nurse,
19 mobile intensive care program, hospital or its board of trustees,
20 officers and members of the medical staff, 【nurses or other
21 employees of the hospital, first aid, ambulance or rescue squad, or
22 officers and members of a rescue squad】 or agency or officers,
23 members, or employees thereof, shall be liable for any civil
24 damages as the result of an act or the omission of an act committed
25 while in training for or in the rendering of basic or advanced life
26 support services in good faith and in accordance with 【this act】
27 chapter 2K of Title 26 of the Revised Statutes.

28 (cf: P.L.1984, c.146, s.8)

29

30 11. (New section) Under the direction of the commissioner, the
31 Office of Emergency Medical Services in the department shall serve
32 as the lead State agency for the oversight of emergency medical
33 services delivery in the State, including both direct services and
34 support services and funding therefor, and shall have as its basic
35 purpose to ensure the continuous and timely Statewide availability
36 and dispatch of basic life support and advanced life support to all
37 persons in this State, through ground and air, adult and pediatric
38 triage, treatment and transport, emergency response capability. The
39 office shall exercise this responsibility in furtherance of the public
40 policy of this State to ensure, to the maximum extent practicable,
41 that quality medical care is available to persons residing in or
42 visiting this State at all times.

43

44 12. (New section) The commissioner shall appoint a State
45 Medical Director for Emergency Medical Services, who shall
46 assume responsibility for medical oversight of emergency medical
47 services delivery in the State. The State medical director shall be a

1 physician who is licensed in this State, has experience in the
2 medical oversight of emergency medical services delivery, and is
3 qualified to perform the duties of the position. The State medical
4 director, subject to the commissioner's approval, may appoint up to
5 three regional medical directors to provide medical oversight of
6 emergency medical services delivery in their respective geographic
7 areas as defined by the State medical director.

8

9 13. (New section) a. (1) The commissioner shall establish a
10 State Emergency Medical Care Advisory Board, or EMCAB, which
11 shall advise the commissioner on all matters of mobile intensive
12 care services, basic life support services, advanced life support
13 services, and pre-hospital and inter-facility care, and shall focus on:
14 improving quality of care; making patient-centered decisions; and
15 using technology to improve efficiency and the standard of care.

16 (2) EMCAB shall recommend standards to be adopted by the
17 commissioner on response time, crew complements, equipment,
18 minimum clinical proficiencies, benchmarking, processes, trending
19 of quality and performance data, and the use of electronic data to
20 support all goals.

21 b. EMCAB shall organize as soon as practicable following the
22 appointment of its members and shall hold its initial meeting no
23 later than the 90th day after the effective date of P.L. , c.
24 (pending before the Legislature as this bill).

25 c. (1) The membership of EMCAB shall include 16 members,
26 as follows:

27 (a) the commissioner, the Director of the Office of Emergency
28 Medical Services in the department, and the State Medical Director
29 for Emergency Medical Services, or their designees, as ex officio,
30 nonvoting members; ¹and¹

31 (b) ¹the President of the New Jersey State First Aid Council as
32 an ex officio member, or his proxy; and

33 (c) ¹² ~~12~~ ¹³ public members, who shall initially be appointed by
34 the commissioner and thereafter shall be appointed in a manner to
35 be specified by regulation of the commissioner, including one
36 representative from each of the following: ¹volunteer basic life
37 support services providers; ¹paid basic life support services
38 providers; emergency medical service helicopter response units;
39 mobile intensive care programs; emergency physicians; general
40 hospitals; emergency care nurses; municipal government;
41 emergency telecommunications services; county offices of
42 emergency management; trauma services or burn treatment
43 providers; the EMSC program; and a member of the general public
44 who is not involved with the provision of health care or emergency
45 medical services.

46 (2) Each public member of EMCAB shall serve for a term of
47 three years and may be reappointed to one or more subsequent

1 terms; except that of the members first appointed, five shall serve
2 for a term of three years, five for a term of two years, and **'[two]**
3 **three**¹ for a term of one year. Vacancies in the membership of
4 EMCAB shall be filled in the same manner provided for the original
5 appointments.

6 (3) The members of EMCAB shall serve without compensation,
7 but shall be reimbursed for necessary expenses incurred in the
8 performance of their duties and within the limits of funds available
9 to EMCAB.

10 d. The members of EMCAB shall select a chairman biennially
11 to chair the meetings and coordinate the activities of EMCAB.

12 e. EMCAB shall establish standing committees, as well as any
13 additional committees that it determines appropriate, which in each
14 case shall include the number of members, utilize the criteria for
15 appointment, and provide for the manner of appointment and term
16 of service prescribed by regulation of the commissioner. The
17 standing committees shall research, review, assess, and recommend
18 policy, and analyze data as applicable, as specified by the
19 commissioner. The standing committees shall include the
20 following:

- 21 (1) Medical Services Committee;
- 22 (2) Pre-hospital Care Systems Operations Committee;
- 23 (3) Inter-facility Care Systems Operations Committee;
- 24 (4) Funding and Finance Committee;
- 25 (5) Public Awareness and Prevention Committee;
- 26 (6) Clinical Education Committee;
- 27 (7) Research and Data and Performance Improvement
28 Committee;
- 29 (8) Specialty Care Committee; and
- 30 (9) Local Government Coordination Committee.

31 f. Each committee shall address how its specific purpose can
32 add to the discussion on the establishment of standards pursuant to
33 paragraph (2) of subsection a. of this section.

34 g. (1) EMCAB shall, no later than the 120th day after its initial
35 meeting, submit written recommendations to the commissioner for
36 new or revised regulations to be adopted by the commissioner
37 pursuant to P.L. , c. (pending before the Legislature as this bill),
38 which shall be designed to improve emergency medical services in
39 this State consistent with standards adopted by the National
40 Highway Traffic Safety Administration.

41 (2) EMCAB shall provide ongoing review of existing
42 regulations governing emergency medical services, and shall
43 recommend to the commissioner such revisions as EMCAB
44 determines are needed to achieve the goals of evidence-based
45 medical care and protecting the public health.

46 (3) EMCAB shall submit an annual report to the commissioner
47 on the state of pre-hospital and inter-facility care in New Jersey,

1 including evaluations and recommendations from each of its
2 standing committees.

3 h. All meetings of EMCAB and its committees shall be open to
4 the public. Prior public notice shall be provided for each meeting,
5 and input and discussion by members of the public shall be
6 encouraged at all such meetings.

7 i. The department shall provide staff support to EMCAB and
8 its committees.

9

10 14. (New section) a. The commissioner, in consultation with
11 EMCAB, shall establish, by regulation, requirements for:

12 (1) the collection of data that each agency providing pre-
13 hospital or inter-facility care is to obtain for each patient encounter;

14 (2) the creation and use of a patient care report by the agency to
15 provide this data in electronic form to the receiving facility in a
16 timely manner; and

17 (3) the electronic reporting of this data to the department.

18 b. (1) The department shall develop and maintain an electronic
19 record of the patient data reported pursuant to subsection a. of this
20 section and shall make such non-identifying patient data available
21 for research purposes, in accordance with guidelines to be
22 established by the commissioner and subject to the requirements
23 and restrictions of State and federal law and regulations.

24 (2) An agency shall not be required to utilize a prescribed form
25 for reporting the data, provided that its reports include all data
26 specified by regulation of the commissioner.

27

28 15. (New section) a. (1) The commissioner shall ensure or
29 arrange for the provision of advanced life support pre-hospital care
30 in response to 9-1-1 calls within the State.

31 (2) The commissioner, in consultation with EMCAB, shall
32 establish minimum standards for training, response times,
33 equipment, and quality of care with respect to basic life support pre-
34 hospital care and advanced life support pre-hospital care.

35 b. (1) The commissioner shall establish, by regulation,
36 minimum standards for licensing any clinician or agency as an
37 emergency medical services provider before that clinician or agency
38 is permitted to respond to 9-1-1 calls in this State.

39 (2) Any agency licensed to provide 9-1-1 emergency medical
40 services response in New Jersey shall be required to maintain a
41 written agreement with a dispatch agency approved by the
42 commissioner. The commissioner shall establish objective
43 standards to approve and monitor dispatch agencies; and these
44 standards shall be designed to improve response times and
45 appropriate triage of resources to respond to calls for emergency
46 medical services¹], and shall include requirements for global
47 positioning tracking of emergency medical services vehicles
48 through a standard electronic interface accessible to all dispatch and

1 responder agencies, in order to enhance agency interoperability¹.
2 Any licensed emergency medical services provider shall be
3 permitted to contract with any approved dispatch agency.

4 (3) The commissioner shall provide for the coordination of
5 dispatch agencies in accordance with protocols established by the
6 department.

7 c. The commissioner shall, no later than December 31 of each
8 year, present a report to the Governor, and to the Legislature
9 pursuant to section 2 of P.L.1991, c.164 (C.52:14-19.1), on the
10 adequacy of emergency medical services provided pursuant to this
11 section, and shall identify in that report the funding needed for the
12 succeeding fiscal year in order to adequately fund the needed
13 infrastructure and research to encourage the continued improvement
14 of those emergency medical services.

15

16 16. Section 11 of P.L.1984, c.146 (C26:2K-17) is amended to
17 read as follows:

18 11. a. The commissioner shall promulgate such rules and
19 regulations, in accordance with the "Administrative Procedure Act,"
20 P.L.1968, c. 410 (C. 52:14B-1 et seq.), as **[he] the commissioner**
21 deems necessary to effectuate the purposes of **[this act, and the**
22 **board medical examiners and the board of nursing]** chapter 2K of
23 Title 26 of the Revised Statutes, with the advice of EMCAB in the
24 form of such written recommendations as EMCAB may submit to
25 the commissioner for his consideration.

26 b. The State Board of Medical Examiners and the New Jersey
27 Board of Nursing shall promulgate such rules and regulations as
28 they deem necessary to carry out their functions under **[this act]**
29 chapter 2K of Title 26 of the Revised Statutes.

30 (cf: P.L.1984, c.146, s.11)

31

32 17. Section 13 of P.L.1984, c.146 (C26:2K-19) is amended to
33 read as follows:

34 13. Nothing in this act shall be construed as interfering with an
35 emergency service training program authorized and operated under
36 provisions of the "New Jersey Highway **[Safety Act of 1971,"**
37 **P.L.1971, c. 351 (C. 27:5F-1 et seq.)]** Traffic Safety Act of 1987,"
38 P.L.1987, c.284 (C.27:5F-18 et seq.).

39 (cf: P.L.1984, c.146, s.13)

40

41 18. Section 14 of P.L.1984, c.146 (C.26:2K-20) is amended to
42 read as follows:

43 14. Nothing in this act shall be construed to prevent a licensed
44 and qualified member of the health care profession from performing
45 any **[of the] duties that require the skills** of a **[mobile intensive**
46 **care]** paramedic, EMT, or emergency medical responder if the

1 duties are consistent with the accepted standards of the member's
2 profession.

3 (cf: P.L.1984, c.146, s.14)

4

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

7 2. a. There is established the New Jersey Emergency Medical
8 Service Helicopter Response Program in the **【**Division of Local and
9 Community Health Services**】** Office of Emergency Medical
10 Services of the Department of Health and Senior Services. The
11 commissioner shall have overall responsibility for administration of
12 the program and shall designate a mobile intensive care hospital in
13 this State and a **【**regional**】** trauma **【**or critical care**】** center which
14 shall develop and maintain a hospital-based emergency medical
15 service helicopter response unit. The commissioner shall designate
16 at least two units in the State, of which no less than one unit each
17 shall be designated for the northern and southern portions of the
18 State, respectively.

19 b. Each emergency medical service helicopter response unit
20 shall be staffed by at least two persons trained in advanced life
21 support and approved by the commissioner. The staff of the
22 emergency medical service helicopter response unit shall render life
23 support services to an accident or trauma victim, as necessary, in
24 the course of providing emergency medical transportation.

25 c. The commissioner shall provide, by regulation, for the
26 licensure of privately operated emergency medical service
27 helicopter response units, in addition to the units designated
28 pursuant to subsection a. of this section.

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

30

31 20. Section 3 of P.L.1986, c.106 (C.26:2K-37) is amended to
32 read as follows:

33 3. The Division of State Police of the Department of Law and
34 Public Safety shall establish an emergency medical transportation
35 service to provide air medical transportation service pursuant to
36 **【**this amendatory and supplementary act**】** section 2 of P.L.1986,
37 c.106 (C.26:2K-36). The superintendent shall operate and maintain
38 at least one dedicated helicopter, and at least one additional
39 helicopter that provides backup air medical transportation
40 capability, for each emergency medical service helicopter response
41 unit designated by the commissioner pursuant to section 2 of **【**this
42 amendatory and supplementary act**】** P.L.1986, c.106 (C.26:2K-36).

43 (cf: P.L.1986, c.106, s.3)

44

45 21. Section 3 of P.L.1992, c.96 (C.26:2K-50) is amended to read
46 as follows:

1 3. a. There is established within the Office of Emergency
2 Medical Services in the Department of Health and Senior Services,
3 the Emergency Medical Services for Children program.

4 b. The commissioner shall hire a full-time coordinator for the
5 EMSC program in consultation with, and by the recommendation of
6 the advisory council.

7 c. The coordinator shall implement the EMSC program
8 following consultation with, and at the recommendation of, the
9 advisory council. The coordinator shall serve as a liaison to the
10 advisory council.

11 d. The coordinator may employ professional, technical,
12 research and clerical staff as necessary within the limits of available
13 appropriations. The provisions of Title 11A of the New Jersey
14 Statutes shall apply to all personnel so employed.

15 e. The coordinator may solicit and accept grants of funds from
16 the federal government and from other public and private sources.

17 (cf: P.L.1992, c.96, s.3)

18
19 22. Section 5 of P.L.1992, c.96 (C.26:2K-52) is amended to read
20 as follows:

21 5. a. There is created an Emergency Medical Services for
22 Children Advisory Council to advise the Office of Emergency
23 Medical Services and the coordinator of the EMSC program on all
24 matters concerning emergency medical services for children. The
25 advisory council shall assist in the formulation of policy and
26 regulations to effectuate the purposes of this act.

27 b. The advisory council shall consist of a minimum of **[14]** 24
28 public members to be appointed by the **[Governor, with the advice**
29 **and consent of the Senate]** commissioner, in consultation with
30 EMCAB, for a term of three years. Membership of the advisory
31 council shall include: one **[practicing]** general practice pediatrician,
32 one pediatric critical care physician, one **[board certified]** pediatric
33 emergency physician and one pediatric physiatrist, to be appointed
34 upon the recommendation of the New Jersey chapter of the
35 American Academy of Pediatrics; one pediatric surgeon and one
36 trauma surgeon, to be appointed upon the recommendation of the
37 New Jersey chapter of the American College of Surgeons; one
38 general emergency physician, to be appointed upon the
39 recommendation of the New Jersey chapter of the American
40 College of Emergency Physicians; one injury prevention specialist,
41 to be appointed upon the recommendation of the New Jersey State
42 Safe Kids Coalition; **[one emergency medical technician, to be**
43 **appointed upon the recommendation of the New Jersey State First**
44 **Aid Council;]** one paramedic, to be appointed upon the
45 recommendation of the **[State mobile intensive care advisory**
46 **council]** subcommittee on advanced life support services of the
47 standing committee on Pre-hospital Care Systems Operations of

1 EMCAB; one family practice physician, to be appointed upon the
2 recommendation of the New Jersey chapter of the American
3 Academy of Family [Practice] Physicians; two registered
4 emergency nurses, one to be appointed upon the recommendation of
5 the New Jersey State Nurses Association and one to be appointed
6 upon the recommendation of the New Jersey Chapter of the
7 Emergency Nurses Association; one school nurse, to be appointed
8 upon the recommendation of the New Jersey State School Nurses
9 Association; one person to be appointed upon the recommendation
10 of the Medical Transportation Association of New Jersey; and three
11 members, each with a non-medical background, two of whom are
12 parents with children under the age of 18[, to be appointed upon the
13 joint recommendation of the Association for Children of New
14 Jersey and the Junior Leagues of New Jersey].

15 The advisory council shall also include the following members
16 who shall serve ex officio: the President of the New Jersey
17 Hospital Association or his designee; the EMSC coordinator; the
18 Director of the Office of Emergency Medical Services in the
19 department; a representative from the Division of Family Health
20 Services in the department who manages the federal Maternal and
21 Child Health Services Title V Block Grant for children with special
22 health care needs; the Director of the Division of Highway Traffic
23 Safety in the Department of Law and Public Safety or his designee;
24 the Commissioner of Children and Families or his designee; and the
25 Commissioner of Education or his designee.

26 c. Vacancies on the advisory council shall be filled for the
27 unexpired term by appointment of the **[Governor] commissioner, in**
28 consultation with EMCAB, in the same manner as originally filled.
29 The members of the advisory council shall serve without
30 compensation. The advisory council shall elect a chairperson, who
31 may select from among the members a vice-chairperson and other
32 officers or subcommittees which are deemed necessary or
33 appropriate. The council may further organize itself in any manner
34 it deems appropriate and enact bylaws as deemed necessary to carry
35 out the responsibilities of the council.

36 d. The council shall meet at least quarterly.

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

38

39 23. Section 1 of P.L.1993, c.58 (C.26:2K-60) is amended to read
40 as follows:

41 1. In the event of an emergency, the chief executive officer of
42 any **[volunteer] basic life support service** first aid, ambulance or
43 rescue squad or the mayor or chief executive officer of any
44 municipality may request assistance from the chief executive officer
45 of any **[volunteer] basic life support service** first aid, ambulance or
46 rescue squad located in and serving another municipality for the

1 protection and preservation of life within the territorial jurisdiction
2 served by the squad requesting the assistance.

3 The chief executive officer of the **【volunteer】** basic life support
4 service first aid, ambulance or rescue squad located in and normally
5 serving a contiguous municipality to whom such a request for
6 assistance is made shall, except as hereinafter otherwise set forth,
7 provide such personnel and equipment as requested to the extent
8 possible without endangering any person or property within the
9 municipality in which the assisting squad is located and which it
10 normally serves.

11 The members of any squad providing assistance shall have, while
12 so acting, the same rights and immunities as they otherwise enjoy in
13 the performance of their normal duties in the municipality, or other
14 territorial jurisdiction, in which the squad is located and which it
15 normally serves.

16 If any member of the assisting basic life support service first aid,
17 ambulance or rescue squad shall, in rendering such assistance,
18 suffer any injury or death, the member or his designee or legal
19 representative shall be entitled to all salary, pension rights, workers
20 compensation and other benefits to which the member would be
21 entitled if the casualty or death had occurred in the performance of
22 the member's duties in the municipality, or other territorial
23 jurisdiction, in which the squad is located and which it normally
24 serves.

25 (cf: P.L.1993, c.58, s.1)

26

27 24. Section 2 of P.L.1993, c.58 (C.26:2K-61) is amended to read
28 as follows:

29 2. The governing bodies of two or more municipalities may, by
30 enacting reciprocal ordinances, enter into agreements with each
31 other for mutual basic life support service first aid, ambulance or
32 rescue squad assistance in case of emergency, subject to the written
33 approval of the **【volunteer】** basic life support service first aid,
34 ambulance or rescue squad or squads involved. The agreements
35 may provide for:

36 a. Terms and conditions for payment by the municipality
37 receiving assistance to the municipality rendering assistance for
38 each member and each equipped basic life support service first aid,
39 ambulance or rescue squad apparatus for each hour supplied;

40 b. The reimbursement of the municipality or municipalities
41 rendering assistance for any damage to basic life support service
42 first aid, ambulance or rescue squad equipment or other property
43 and for payment to any member of a basic life support service first
44 aid, ambulance or rescue squad for injuries sustained while serving
45 pursuant to such agreements, or to a surviving spouse or other
46 dependent if death results; and

1 c. A joint meeting of the municipalities entering into such
2 agreements regarding other matters as are mutually deemed
3 necessary.

4 (cf: P.L.1993, c.58, s.2)

5
6 25. (New section) a. The commissioner shall establish,
7 maintain, and coordinate the activities of the New Jersey
8 Emergency Medical Services Task Force.

9 b. The purpose of the task force shall be to support and
10 enhance the provision of specialized response services, utilizing
11 personnel and equipment to respond as requested, for both pre-
12 planned and emergency events, including natural disasters and mass
13 casualty incidents, including chemical, biological, radiological,
14 nuclear, and explosive events, in order to reduce morbidity and
15 mortality through appropriate triage, incident management, and
16 coordinated pre-hospital care and transportation.

17 c. The membership of the task force shall represent all regions
18 of the State and shall include emergency medical responders,
19 EMTs, paramedics, registered nurses, physicians, communications
20 specialists, hospitals, agencies providing emergency medical
21 responder and other emergency medical services, and
22 communication centers utilized for the purpose of providing
23 emergency medical services.

24
25 ¹[26. N.J.S.22A:3-4 is amended to read as follows:

26 22A:3-4. Fees for criminal proceedings.

27 The fees provided in the following schedule, and no other
28 charges whatsoever, shall be allowed for court costs in any
29 proceedings of a criminal nature in the municipal courts but no
30 charge shall be made for the services of any salaried police officer
31 of the State, county or municipal police.

32 For violations of Title 39 of the Revised Statutes, or of traffic
33 ordinances, at the discretion of the court, up to but not exceeding
34 \$33.

35 For all other cases, at the discretion of the court, up to but not
36 exceeding \$33.

37 In municipal court proceedings, the court shall impose court
38 costs within the maximum limits authorized by this section, as
39 follows:

40 a. For every violation of any statute or ordinance the sum of
41 \$2.00. The court shall not suspend the collection of this \$2.00 court
42 cost assessment. These court cost assessments shall be collected by
43 the municipal court administrator for deposit into the Automated
44 Traffic System Fund, created pursuant to N.J.S.2B:12-30.

45 b. For each fine, penalty and forfeiture imposed and collected
46 under authority of law for any violation of the provisions of Title 39
47 of the Revised Statutes or any other motor vehicle or traffic
48 violation in this State the sum of ~~[\$.50]~~ \$5. The court shall not

1 suspend the collection of this **[\$.50]** \$5 court cost assessment.
2 These court cost assessments shall be collected by the municipal
3 court administrator for deposit into the "Emergency Medical
4 **[Technician]** Services Training Fund" established pursuant to
5 P.L.1992, c.143 (C.26:2K-54 et al.).

6 c. For every violation of any statute or ordinance the sum of \$3
7 to fund the Statewide modernization of the Automated Traffic
8 System. The court shall not suspend the collection of this \$3 court
9 cost assessment. These court cost assessments shall be collected by
10 the municipal court administrator for deposit into the Automated
11 Traffic System Statewide Modernization Fund, established pursuant
12 to section 1 of P.L.2004, c.62 (C.2B:12-30.1).

13 The provisions of this act shall not prohibit the taxing of
14 additional costs when authorized by R.S.39:5-39.

15 For certificate of judgment..... \$4.00

16 For certified copy of paper filed with the court as a public
17 record:

18 First page..... \$4.00

19 Each additional page or part thereof..... \$1.00

20 For copy of paper filed with the court as a public record:

21 First page..... \$2.00

22 Each additional page or part thereof..... \$1.00

23 In addition to any fine imposed, when a supplemental notice is
24 sent for failure to appear on a return date the cost shall be \$10.00
25 per notice, unless satisfactory evidence is presented to the court that
26 the notice was not received.

27 **CONSTABLES OR OTHER OFFICERS**

28 From the fees allowed for court costs in the foregoing schedule,
29 the clerk of the court shall pay the following fees to constables or
30 other officers:

31 Serving warrant or summons, \$1.50.

32 Serving every subpoena, \$0.70.

33 Serving every execution, \$1.50.

34 Advertising property under execution, \$0.70.

35 Sale of property under execution, \$1.00.

36 Serving every commitment, \$1.50.

37 Transport of defendant, actual cost.

38 Mileage, for every mile of travel in serving any warrant,
39 summons, commitment, subpoena or other process, computed by
40 counting the number of miles in and out, by the most direct route
41 from the place where such process is returnable, exclusive of the
42 first mile, \$0.20.

43 If defendant is found guilty of the charge laid against him, he
44 shall pay the costs herein provided, but if, on appeal, the judgment
45 is reversed, the costs shall be repaid to defendant. If defendant is
46 found not guilty of the charge laid against him, the costs shall be
47 paid by the prosecutor, except when the Chief Administrator of the

1 New Jersey Motor Vehicle Commission, a peace officer, or a police
2 officer shall have been prosecutor.

3 (cf: P.L.2004, c.62, s.2)]¹

4

5 ¹[27.] 26.¹ Section 4 of P.L.1987, c.284 (C.27:5F-21) is
6 amended to read as follows:

7 4. a. The Governor shall coordinate the highway traffic safety
8 activities of State and local agencies, other public and private
9 agencies, nonprofit organizations, and interested organizations and
10 individuals and shall be the official of this State having the ultimate
11 responsibility of dealing with the federal government with respect
12 to the State highway traffic safety program. In order to effectuate
13 the purposes of this act ~~he~~, the Governor shall:

14 (1) Prepare for this State, the New Jersey Highway Traffic
15 Safety Program which shall consist of a comprehensive plan in
16 conformity with the laws of this State to reduce traffic accidents
17 and deaths, injuries, and property damage resulting therefrom~~].~~;

18 (2) Promulgate rules and regulations establishing standards and
19 procedures relating to the content, coordination, submission, and
20 approval of local highway traffic safety programs~~].~~;

21 (3) Contract and do all things necessary or convenient on behalf
22 of the State in order to insure that all departments of State
23 government, local political subdivisions and nonprofit
24 organizations, to the extent that nonprofit organizations qualify for
25 highway traffic safety grants pursuant to the provisions of section
26 12 of P.L.1987, c.284 (C.27:5F-29) as amended by section 6 of
27 P.L.2007, c.84, secure the full benefits available under the "U.S.
28 Highway Safety Act of 1966," Pub.L.89-564 (23 U.S.C. ss. 401-
29 404), and any acts amendatory or supplementary thereto~~].~~ and

30 (4) Adopt, through the Commissioner of Health and Senior
31 Services, training programs, guidelines, and standards for members
32 of ~~nonvolunteer~~ basic life support service first aid, rescue, and
33 ambulance squads and agencies providing emergency medical
34 service programs or pre-hospital or inter-facility care as defined in
35 section 1 of P.L.1984, c.146 (C.26:2K-7).

36 b. The New Jersey Highway Traffic Safety Program, and rules
37 and regulations, training programs, guidelines, and standards shall
38 comply with uniform standards promulgated by the United States
39 Secretary of Transportation in accordance with the "U.S. Highway
40 Safety Act of 1966," Pub.L.89-564 (23 U.S.C. ss. 401-404), and any
41 acts amendatory or supplementary thereto.

42 (cf: P.L.2007, c.84, s.2)

43

44 ¹[28.] 27.¹ Section 5 of P.L.1987, c.284 (C.27:5F-22) is
45 amended to read as follows:

46 5. The New Jersey Highway Traffic Safety Program shall, in
47 addition to other provisions, include training programs for groups

1 such as, but not limited to, police, teachers, students, and public
2 employees, which programs shall comply with the uniform
3 standards promulgated by the United States Secretary of
4 Transportation in accordance with the "U.S. Highway Safety Act of
5 1966," Pub.L.89-564 (23 U.S.C. s.s. 401-404), and any acts
6 amendatory or supplementary thereto.

7 In addition, the New Jersey Highway Traffic Safety Program
8 shall include the training program for **members of volunteer first**
9 **aid, rescue and ambulance squads, adopted by the New Jersey State**
10 **First Aid Council** paramedics, emergency medical technicians, and
11 emergency medical responders licensed by the Commissioner of
12 Health and Senior Services, which shall comply with the uniform
13 standards promulgated by the United States Secretary of
14 Transportation in accordance with the "U.S. Highway Safety Act of
15 1966," Pub.L.89-564 (23 U.S.C. s.s. 401-404) and any amendments
16 or supplements to it.
17 (cf: P.L.1987, c.284, s.5)

18

19 **'[29.] 28.'** Section 10 of P.L.1987, c.284 (C.27:5F-27) is
20 amended to read as follows:

21 10. **The officers of each volunteer and nonvolunteer** Each
22 basic life support service first aid, rescue, and ambulance squad
23 **providing emergency medical service programs shall be**
24 responsible for the training of its members and shall notify the
25 governing body of the political subdivision in which the squad is
26 located, or the person designated for this purpose by the governing
27 body, that particular applicants for membership (qualified under
28 sections 5 and 4 of this act respectively), ambulances, and
29 ambulance equipment meet the standards required by this act.
30 Upon receipt of such notification the governing body or person
31 designated shall certify the applicant, ambulances, and ambulance
32 equipment as being qualified for emergency medical service
33 programs, and shall issue a certificate to that effect at no charge.
34 Each member and piece of equipment of a volunteer and
35 nonvolunteer first aid, rescue and ambulance squad shall comply
36 with the requirements for certification annually. Any person who is
37 a member of a volunteer and nonvolunteer first aid, rescue and
38 ambulance squad providing emergency medical service programs
39 on the effective date of this act shall, if application is made to the
40 appropriate municipality within 90 days of the effective date, be
41 certified by the governing body or designated person as being
42 qualified for emergency medical service programs for a period of
43 two years. At the end of that period, the person **shall comply with**
44 the requirements for **certification annually** licensure of personnel,
45 ambulances, and ambulance equipment established by the
46 Commissioner of Health and Senior Services and shall staff each
47 ambulance ¹, when it is transporting a patient, ¹ with at least one

1 emergency medical technician ¹ [while it is in service] who shall
2 attend to the patient in the patient compartment¹. No person or
3 entity shall respond to a 9-1-1 call as defined in section 1 of
4 P.L.1984, c.146 (C.26:2K-7) unless that person or entity is licensed
5 to do so by the Department of Health and Senior Services.
6 (cf: P.L.1987, c.284, s.10)

7

8 ¹**[30.]** 29.¹ The following are repealed:

9 Sections 5, 10, and 12 of P.L.1984, c.146 (C.26:2K-11, C.26:2K-
10 16, and C.26:2K-18);

11 P.L.1985, c.351 (C.26:2K-21 et seq.);

12 Sections 1 and 4 of P.L.1986, c.106 (C.26:2K-35 and C.26:2K-
13 38);

14 P.L.1989, c.314 (C.26:2K-39 et seq.);

15 Sections 1, 2, 3, and 10 of P.L.2003, c.1 (C.26:2K-47.1,
16 C.26:2K-47.2, C.26:2K-47.3, and C.26:2K-47.9);

17 Section 2 of P.L.1992, c.96 (C.26:2K-49); and

18 Sections 2, 4, 5, and 6 of P.L.1992, c.143 (C.26:2K-55, C.26:2K-
19 57, C.26:2K-58, and C.26:2K-59).

20

21 ¹**[31.]** 30.¹ This act shall take effect on the ¹**[180th day after]**
22 first day of the seventh month next following the date of¹
23 enactment, but the Commissioner of Health and Senior Services
24 may take such anticipatory administrative action in advance thereof
25 as shall be necessary for the implementation of the act.