Legislative Update – February 2019

Multistate Nurse Licensure Compact Legislation Makes Progress in NJ Senate – On February 7, 2019, the Senate Budget and Appropriations Committee reported favorably on a substitute for S954, with amendments, which would enter New Jersey in the enhanced multistate Nurse Licensure Compact (eNLC), which was implemented on January 19, 2018. The eNLC provides for a mutual recognition model of nurse licensure (for registered professional nurses and licensed practical nurses), in which a nurse only needs to obtain one license from the nurse's state of residence in order to be permitted to practice nursing in any other state that is a party to the compact, as long as the nurse complies with the state practice laws of the state in which the patient is located at the time that care is rendered. Currently, a nurse is required to be licensed in, and by, each state in which the nurse chooses to practice. The eNLC is intended to address the expanded mobility of nurses and the use of advanced communication technologies (telemedicine) by nurses, which requires greater coordination and cooperation among states in the areas of nurse licensure and regulation. The eNLC also establishes a coordinated licensure information system that will include a database on the licensure and disciplinary history of all nurses licensed in the party states. The party states will be required to report to the coordinated system all adverse actions against nurses, including actions against multistate licensure privileges, any current significant investigative information yet to result in an adverse action, and denials of applications and the reasons for the denials.

Legislation Introduced Regarding Maternity Care Protocols – On January 17, 2019, Bill A4930 was introduced in the New Jersey Assembly to establish training protocols and treatment guidelines for general hospitals providing maternity care. The New Jersey Senate introduced a similar bill on January 24, 2019. Under the Bill, each general hospital providing maternity care would be required to follow protocols and guidelines in the following areas as a condition of licensure to ensure the safety of female patients in maternity care:(1) maternal depression and anxiety; (2) maternal venous thromboembolism; (3) obstetric care for women with opioid use disorder; (4) obstetric hemorrhaging; (5) postpartum care basics for maternal safety from birth through postpartum stage; (6) prevention of retained vaginal sponges following birth; (7) reduction of peripartum, racial, and ethnic disparities; (8) safe reduction of primary cesarean birth; (9) severe hypertension during pregnancy; (10) multidisciplinary support following a severe maternal event; and (11) postpartum care basics for maternal safety from maternity to well-woman care.

Legislation Introduced Regarding Alternative Drugs List – On January 17, 2019, Bill A4915 was introduced in the New Jersey Assembly to require health insurance carriers to provide a list of alternative drugs to health care professionals and covered persons under certain circumstances. The New Jersey Senate introduced the identical Bill on February 7, 2019. The Bill requires a carrier that offers a health benefits plan in New Jersey which provides coverage for pharmacy services, prescription drugs, or for participation in a prescription drug plan, to provide to a prescribing health care professional and to a covered person, in a situation where the carrier denies a covered person's coverage for a drug prescribed by the health care professional, a written list of all alternative drugs that are covered by the health benefits plan and that are interchangeable with, and therapeutically equivalent to, the drug for which coverage was denied. The carrier would be required to provide the list of alternative drugs along with the explanation of benefits or other notice of the denial of coverage.

Legislation Introduced to Exempt Certain Surgical Technologists from General Educational and Training Requirements – On January 17, 2019, Bill S3334 was introduced in the New Jersey Senate to exempt certain surgical technologists from general educational and training requirements. An identical Bill was introduced in the New Jersey Assembly on January 28, 2019. The Bill provides that the training and certification requirements for surgical technologists set forth under current law do not apply to surgical technologists who were employed at a surgical practice on January 16, 2018, which was the effective date of a New Jersey law requiring that surgical practices be licensed by the NJ Department of Health as ambulatory care facilities. Formerly, surgical technologists employed at a surgery practice (one OR), were not required to meet certain training and certification requirements that apply to surgical technologists employed at licensed health care facilities, as surgical

practices were not licensed by the Department of Health. As a consequence of the enactment of the law requiring licensure, surgical practices now constitute licensed health care facilities, and surgical technologists employed at the existing surgical practices are now required to demonstrate that they either: completed an accredited surgical technologist educational program; hold and maintain a certified surgical technologist credential; completed a military-based or United States Public Health Service Commissioned Corps surgical technologist training program; are in the service of the federal government; or were employed to practice surgical technology in a licensed health care facility on January 16, 2018. If the new Bill becomes law, surgical technologists who were employed at a surgical practice on January 16, 2018 will be exempt from the foregoing training and certification requirements.