

NJSSA Executive Committee Meeting Lobbying Report
June 5, 2024

Budget Update:

As mentioned on our last call, the Legislature took a break from standing committee meetings during April and part of May to hold budget-specific meetings. The \$55.9 billion budget proposal must be signed by the Governor before our constitutional deadline of July 1.

One aspect of Murphy's proposal to note is it would drop the total charity care pool — which helps cover the cost of care for uninsured residents. However, the cut in charity care funds would be rerouted to a new Medicaid outpatient hospital supplemental state-directed payment. The proposal includes funding for primary care loan redemption and continued funds for psychiatric resident slots.

Congressional Update (June 4th primary)

- Trump and Biden won their primary in NJ
- Andy Kim won over indicted Bob Menendez in CD8
- Herb Conaway won over Carol Murphy in CD3

2024-2025 Bills to Watch

- **A944 – Munoz/Spearman** - Eliminates certain practice restrictions for advanced practice nurses. (Previously **S-1522/A-2286**)
 - This legislation would authorize APNs across all specialties – anesthesia, primary care, pediatrics, emergency medicine – to practice without physician supervision. Specifically, the bill would allow CRNAs to administer anesthesia without an anesthesiologist's involvement or supervision. The bill would also allow APNs to supervise other APNs and create a new licensure for CRNAs, called an APN-Anesthesia.
 - We were able to block further movement of this bill last session and will look out for the bill's Senate counterpart this session. We will again work with the Access to Care Coalition and issue calls to action when needed, along with additional PR campaign work.
- **A3860 Reynolds-Jackson / S2795 Turner**– Establishes certain medical billing requirements
 - This bill would require providers to issue an itemized billing statement in plain language within 30 days of discharge or within 7 of a request and would also require information on free or reduced cost financial assistance available to the patient.
 - Other amendments include extending the timeframe from 7-10 days upon request

- We are working with the Access to Care Coalition and Hospital Association on amendments
- **A3861 Reynolds Jackson / S2806 Turner – Medical debt relief bill**
 - The bill prohibits a consumer reporting agency from creating a consumer report containing a patient's paid medical debt or a medical debt worth less than \$500, regardless of the date the medical debt was incurred.
 - The bill prohibits a medical creditor or medical debt collector from reporting a patient's medical debt to any consumer reporting agency.
 - A medical creditor or debt collector cannot engage in any permissible collection actions until 180 days after the first bill was sent and once they have offered the individual who owes the debt a reasonable payment plan (which is defined under the bill as monthly payments that are not more than 10 percent of a patient's household income for a month, excluding deductions for essential living expenses).
 - A medical creditor or medical debt collector cannot:
 - charge an interest rate on a medical debt of more than three percent per annum;
 - garnish the wages of an individual to collect medical debt owed by that individual; or
 - place a lien on an individual's personal property to collect medical debt owed by that individual
 - We are continuing to work with the Access to Care Coalition and the Hospital Association on amendments, or a carve out
- **A920 Reynolds Jackson / S354 Diegnan – Updates scope of practice of optometrists.**
 - This legislation would expand the scope of practice for optometrists and permit them to perform laser surgery, injections into the eye, and remove skin cancer around the eye with a scalpel.
 - The physician community will continue to stand collectively in opposition to scope expansion in all specialties and continue to support the physician-led, team approach to healthcare.
- **S2283 Scutari / A3852 Conaway - "Psilocybin Behavioral Health Access and Services Act";** authorizes production and use of psilocybin to promote health and wellness; decriminalizes, and expunges past offenses involving, psilocybin production, possession, use, and distribution.
 - This legislation is part of an effort spearheaded by Senate President Scutari to set up a framework for the legalized use of psilocybin to treat mental health in the state. Under the bill, anyone over 21 would be allowed to use psilocybin and grow it at home, with no prescription, on the premise that it carries therapeutic benefits for trauma, PTSD, substance use disorder, and chronic illness.

- Monitoring
- **A3450 Quijano / S1941 Vitale** - Establishes minimum registered professional nurse staffing standards for hospitals and ambulatory surgery facilities and certain DHS facilities.
 - No movement – but nurse strikes have been threatened at three NJ hospitals
 - Two of which are less likely due to negotiations.
 - Vitale is trying to move this bill
- **A3683 Quijano/S2700 Vitale - Nurse staffing ratios bill**
 - ASCs oppose
 - MSNJ no official position yet
- **A378 Stanley** - Requires health insurance carriers, health care providers, and hospitals and health care facilities to change manner of communications of protected health information under certain circumstances.
 - There was no Senate counterpart last session, and one was not introduced this session. This is the relevant section: Healthcare providers providing covered services will also be included in the restrictions imposed by the bill. A provider will be prohibited from providing:
 - (1) any personally identifying information of the covered person;
 - (2) the nature of the covered services provided to the covered person; or
 - (3) claim related information to any mailing address, telephone number, or other method of contact other than as designated by the covered person.
 - Passed the Assembly
 - No Senate companion
- **A2803 Greenwald - extends authorization for out of state health care practitioners and recent graduates of health care training programs to practice in NJ**
 - Passed Assembly Regulated Professions
 - No Senate companion
- **A1819 Conaway** - Restricts use of restrictive employment covenants for physicians and nurses.
 - No movement
 - No Senate companion bill
- **S1975 – Vitale** - Creates "Midwifery Licensing Act;" modifies regulation of midwifery. (
 - This legislation would authorize Certified Midwives and Certified Nurse Midwives to prescribe without any physician involvement or collaboration. This would set a dangerous precedent and allow physician extenders with less training than

APNs to prescribe and practice independently. Maternal health reform has been a key initiative for First Lady Tammy Murphy.

- We were also able to block further movement of this bill last session. We will again work with the Access to Care Coalition, and issue calls to action when needed, along with additional digital media efforts. This bill does not yet have an Assembly counterpart.