NJ State Society of Anesthesiologists Lobbying Report Executive Committee Meeting February 8, 2023

Budget and Election Update:

Governor Phil Murphy delivered his 5th State of the State Address in the beginning of January highlighting the Administration's accomplishments last fiscal year and providing some insight into where they are taking the budget address scheduled for February 28th. During his remarks, Governor Murphy reiterated that there will be no new taxes included in this fiscal year's budget and has indicated certain tax cuts. This move is not entirely shocking given the election in November when all 120 lawmakers in the Legislature will be up for re-election. Budget season really culminates with the delivery of the Governor's Budget Address, where he will present his recommendations for allocating resources to the Legislature. The appropriations committees in the respective Chambers will then hold hearings and make revisions to the Governor's proposed budget. During the month of April, when the appropriations committees are holding hearings for the state departments and the public, standing committees will not be meeting. Standing committees will then reconvene in May and June as the Legislature prepares the final version of the Appropriations Act to be voted on and sent to the Governor's desk before the June 30th balanced budget deadline.

The Legislature will then likely break from July to the beginning of November as legislators go back to their home districts to focus on their re-election campaigns. All 120 seats in the Legislature will be up for re-election. As of now, there are 12 lawmakers who have announced they will not be seeking re-election, including GOP Republican Leader Steve Oroho, who's retirement announcement was the most consequential given the GOP's goal of retaking control in the Legislature after 20 years. Democrats have retained control of the Legislature for over 20 years. In the Senate, there is currently a 24-16 Democratic majority and, in the Assembly, there is a 46-34 majority.

The budget and election cycle will give us a good indication of the legislative timeline for the remainder of 2023. The two most likely time periods for controversial legislation, like the APN direct practice bill, to be pushed is either in June before the anticipated summer break and during the lame duck session in December. The fact that this is an election year is beneficial to our cause because legislative leadership may be less likely to move legislation as controversial as the APN direct practice initiative. However, our media campaign strategy will revolve around these two time periods and we will be utilizing the rest of the year for educational and advocacy meetings with lawmakers as we continue to combat claims for direct practice.

Federal and State Public Health Emergency Update:

New Jersey is unique in comparison to most other states because, while they have begun new legislative sessions this year, we are an off-year Legislature and are in the second year of our two-year cycle. In 2023 the stakes will be even higher to halt the APN direct practice legislation, especially as the EO rescinding scope of practice requirements will likely expire before the year's end. The federal government has already announced intentions to end the Public Health Emergency at the national level in May, changing the landscape for how patients will receive and pay for care related to COVID-19. Notably, the end of the federal PHE could mean that anywhere from 5 to 14 million people nationwide could lose Medicaid coverage when the increased federal funding for continuous enrollment ends. The end of the federal PHE will also likely lead to NJ reviewing our Executive Orders that have remained in place under a State of Emergency, including the Order rescinding scope of practice requirements for APNs. Nursing advocates will not want the Order to be rescinded without the APN direct practice legislation signed into law, otherwise, there is potential for the momentum behind their cause to waver. Ideally, the Order will end in June and there will not be any opportunity for legislative action until lame duck at which point there would be four months of scope of practice requirements being reinstated.

Scope of Practice Update:

- APN Direct Practice Legislation (S-1522/A-2286)
 - December Hearing Update
 - At the end of the year, the APN direct practice legislation received a hearing from the Senate Health, Human Services, and Senior Citizens Committee at the request of prime sponsor and Chairman, Senator Joe Vitale. The House of Medicine showed up in full force, with a panel of resident physicians and a separate panel including the MSNJ president and our own, Dr. Lapicki. Unsurprisingly, proponents of the bill claimed that it was just codifying the temporary Order enacted during the pandemic and that it was not changing much about current practice outside of permitting APNs to prescribe medications. The House of Medicine highlighted that this bill would move healthcare to working in silos, rather than the physician-led, team-based model we have been moving towards for decades.
 - Advocacy Meetings

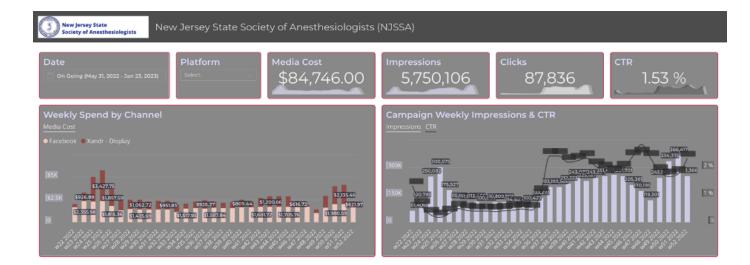
■ A key aspect of our advocacy strategy for the remainder of 2023 is holding educational meetings with relevant lawmakers and staff to highlight how this legislation would change anesthesia care in NJ. These will be 30 minute in-person or virtual meetings held to introduce the legislator to our society and provide a channel for continued discussion in the future. We have a few meetings scheduled in the coming weeks and welcome anyone on the Executive Committee that may be interested in participating in the meetings.

Defensive to Offensive Strategy

A newer initiative we have undertaken is turning the tables to enact our own offensive strategy. The goal is to address a lot of the key talking points that the nurses utilize - flexibility in obtaining a new collaborating physician; chart review; certain disclosure requirements for collaborating fees with APNs not working within the same practice; and requiring collaboration within the same specialty - and showcase that we are willing to engage on resolving these concerns. Most importantly, we want to highlight that expanding scope of practice will not address the issues APNs have been utilizing as talking points. We are still in the beginning phases of engagement with other stakeholders in the House of Medicine and the Legislature, however, we wanted to share some high-level points with you all as we continue those discussions.

Media Campaign Update

 As you all know, for the past year we have been working on the NJ Doctors for Patient Safety personalized campaign alongside the broader Access to Care Coalition campaign with the rest of the House of Medicine. We wanted to share the below graphic that encapsulates how well our digital advertisements have performed in reaching our target audience over the course of the year. There were over 5.7 million impressions and over 87,000 people have clicked on our digital advertisements to learn more on our webpage. This results in a click through rate well above the industry average and showcases the benefits of utilizing the Applecart technology as a means for hypertargeting. Moving ahead in 2023, we know that June and December are two of the most vulnerable months for movement of the APN direct practice legislation and are coordinating plans for digital ad buyouts on the most frequented political websites ahead of those time periods. We are also working on an op-ed that will be published in the next few months as part of our public relations strategy to maximize awareness ahead of any other action on this bill.



Additional Legislation We're Tracking:

- (S-2825/A-4325) Establishes certain requirements and initiatives related to nurses;
 transfers oversight of certified nurse aides from DOH to Board of Nursing; appropriates
 \$26.7 million.
 - This legislation would create nurse residency programs and allow the appropriation of the term "resident" or "residency" for the post-graduate or advanced training of nurses. There was a hearing on this bill in the Senate back in June and it has since stalled on 2nd reading because of the large allocation of funding in the bill. There has been no movement in the Assembly.
- (S-1794/A-1255) "Ensuring Transparency in Prior Authorization Act."
 - This legislation would make changes to the current prior authorization process to increase transparency and create a fairer process for patients. Some of the changes proposed include requiring insurance companies to state on their websites their prior authorization requirements for procedures, require insurance companies to make decisions more quickly, within 48 hours, rather than within weeks as the current law allows, requires extended time for a patient to determine if they want to move forward with care before the prior authorization expires, and allows a provider to deem if step therapy protocol is unnecessary. The bill is on 2nd reading in the Senate and referred to the Assembly Financial Institutions and Insurance Committee.
- (A-4619) Codifies and extends authorization for certain out-of-State health care
 practitioners and recent graduates of health care training programs to practice in New
 Jersey.
 - This legislation temporarily authorizes a number of out-of-state practitioners, including physicians and APNs, to practice in New Jersey up to a year under the

state's scope of practice and supervision requirements. This practice has already been occurring during the COVID-19 pandemic and this legislation would make the practice permanent. The bill was reported out of Assembly Regulated Professions and has been referred to Assembly Health. There is not a Senate version currently introduced.

- <u>(S-3309/A-4832)</u> Raises maximum workers' compensation fees for evaluating physicians; expands circumstances for which physician legal fees are permitted.
 - This legislation is up in the Senate Labor Committee on Thursday to be considered. It creates pay parity in workers compensation fees paid to evaluating physicians by increasing the maximum fee from \$400 to \$1,000. The bill is introduced in the Assembly and referred to the Labor Committee.