ASSEMBLY, No. 4656

STATE OF NEW JERSEY

221st LEGISLATURE

INTRODUCED JUNE 25, 2024

Sponsored by: Assemblywoman SHANIQUE SPEIGHT District 29 (Essex and Hudson)

SYNOPSIS

Secures protections for patients and providers accessing and providing legally protected health care activities; establishes right of residents to legally protected health care services, which are restricted in other states.

CURRENT VERSION OF TEXT

As introduced.



AN ACT concerning reproductive rights, and amending supplementing, and repealing various parts of the statutory law.

BE IT ENACTED by the Senate and General Assembly of the State of New Jersey:

- 1. (New section) The Legislature finds and declares that:
- a. All citizens of this State, and those who travel to this State for health care services, deserve the ability to safely access health care facilities in this State and the critical reproductive health and gender-affirming care services that they provide.
- b. Since the United States Supreme Court overturned Roe v. Wade in 2022, 21 states and counting have banned or severely restricted access to abortion. In response to that decision, picketing at reproductive health care facilities increased by 21 percent and obstructions to these facilities increased by 538 percent nationwide. In New Jersey, there has been an approximately 30 percent increase in out-of-state patients, many of whom came to New Jersey because reproductive health care services are illegal in their home state.
- c. In 2023, there were 23 reported violent incidents and threats made to health care facilities providing gender-affirming health care. Fourteen states, including New Jersey, offer protections to people who provide, seek, or assist those seeking gender-affirming health care. People seeking and providing this care deserve to be safe and protected.
- d. In 2024, the Alabama Supreme Court in <u>LePage v. Mobile Infirmary Clinic, P.C.</u> (Docket No. SC-2022-0515, SC-2022-0579) ruled that embryos are "extrauterine children," finding that that the state's "Wrongful Death of A Minor Act' applies on its face to all unborn children, without limitation." The holding, and the legal analysis on which the decision was based, could impact any person in a state which recognizes the individual rights of fetuses created through in vitro fertilization (IVF) and any person who is seeking or providing IVF.
- e. New Jersey has long been a state that supports, and provides protections for the reproductive freedoms and health care choices of its citizens, including the right to make the choice of whether to start or expand a family through in vitro fertilization (IVF).
- f. New Jersey, through this act, will codify critical protections to those seeking and providing reproductive and gender-affirming health care. Further, this act is intended to ensure that anti-abortion and anti-LGBTQ+ persons cannot harm patients or providers.

44 2. (New section) As used in P.L. , c. (C.) (pending before the Legislature as this bill):

EXPLANATION – Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

"Driveway" means an entry from a public street to a public or private parking area used by a reproductive or gender-affirming health care services facility;

"Entrance" means a door to a reproductive or gender-affirming health care services facility that directly abuts the public sidewalk; provided, however, that if the door does not directly abut the public sidewalk, the "entrance" shall be the point at which the public sidewalk intersects with a pathway leading to the door;

"Gathering" means two or more individuals; and

"Gender-affirming health care services" means all supplies, care, and services of a medical, behavioral health, mental health, surgical, psychiatric, therapeutic, diagnostic, preventative, rehabilitative, or supportive nature, including medication, relating to the treatment of gender dysphoria and gender incongruence. "Gender-affirming health care services" does not include sexual orientation change efforts as defined by section 2 of P.L.2013, c.150 (C.45:1-55).

"Impede" means to obstruct, block, detain or render passage impossible, unsafe or unreasonably difficult.

"Intimidate" means to place a person in reasonable apprehension of bodily harm to themselves or to another.

"Legally protected health care activity" means providing, seeking, receiving, assisting with, or inquiring about reproductive health care services or gender-affirming health care services that are lawful in this State, regardless of the patient's location.

"Physical obstruction" means rendering ingress to or egress from a reproductive or gender-affirming health care services facility impassable to another person, or rendering passage to or from a reproductive health care services facility unreasonably difficult or hazardous to another person;

"Reproductive health care services" includes all medical, surgical, counseling, or referral services relating to the human reproductive system, including, but not limited to, services relating to pregnancy, contraception, managing infertility, or the termination of a pregnancy;

"Reproductive or gender-affirming health care services facility" includes a hospital, clinic, office, or other site that provides, refers, or seeks to provide reproductive or gender-affirming health care services and includes the building or structure in which the facility is located and the driveway of such building or structure; and

"Social media" means an electronic service or account, or electronic content, including, but not limited to, videos or still photographs, blogs, video blogs, podcasts, instant and text messages, email, online services or accounts, or internet website profiles or locations.

3. Section 9 of P.L.1978, c.73 (C.45:1-22) is amended to read as follows:

9. In addition or as an alternative, as the case may be, to revoking, suspending or refusing to renew any license, registration or certificate issued by it, a board may, after affording an opportunity to be heard:

- a. Issue a letter of warning, reprimand, or censure with regard to any act, conduct or practice which in the judgment of the board upon consideration of all relevant facts and circumstances does not warrant the initiation of formal action;
 - b. Assess civil penalties in accordance with this act;
- c. Order that any person violating any provision of an act or regulation administered by such board to cease and desist from future violations thereof or to take such affirmative corrective action as may be necessary with regard to any act or practice found unlawful by the board;
- d. Order any person found to have violated any provision of an act or regulation administered by such board to restore to any person aggrieved by an unlawful act or practice, any moneys or property, real or personal, acquired by means of such act or practice; provided, however, no board shall order restoration in a dollar amount greater than those moneys received by a licensee or his agent or any other person violating the act or regulation administered by the board;
- e. Order any person, as a condition for continued, reinstated or renewed licensure, to secure medical or such other professional treatment as may be necessary to properly discharge licensee functions;
- f. Order any person, as a condition for continued, reinstated or renewed licensure, to submit to any medical or diagnostic testing and monitoring or psychological evaluation which may be required to evaluate whether continued practice may jeopardize the safety and welfare of the public;
- g. Order any person, as a condition for continued, reinstated or renewed licensure, to submit to an assessment of skills to determine whether the licensee can continue to practice with reasonable skill and safety, and to take and successfully complete educational training determined by the board to be necessary;
- h. Order any person, as a condition for continued, reinstated or renewed licensure, to submit to an assessment of skills to determine whether the licensee can continue to practice with reasonable skill and safety, and to submit to any supervision, monitoring or limitation on practice determined by the board to be necessary.

A board may, upon a duly verified application of the Attorney General that either provides proof of a conviction of a court of competent jurisdiction for a crime or offense involving moral turpitude or relating adversely to the regulated profession or occupation, or alleges an act or practice violating any provision of an act or regulation administered by such board, enter a temporary order suspending or limiting any license issued by the board pending plenary hearing on an administrative complaint; provided, however,

no such temporary order shall be entered unless the application made to the board palpably demonstrates a clear and imminent danger to the public health, safety and welfare and notice of such application is given to the licensee affected by such order. If, upon review of the Attorney General's application, the board determines that, although no palpable demonstration of a clear and imminent danger has been made, the licensee's continued unrestricted practice pending plenary hearing may pose a risk to the public health, safety and welfare, the board may order the licensee to submit to medical or diagnostic testing and monitoring, or psychological evaluation, or an assessment of skills to determine whether the licensee can continue to practice with reasonable skill and safety.

In any administrative proceeding commenced on a complaint alleging a violation of an act or regulation administered by a board, such board may issue subpoenas to compel the attendance of witnesses or the production of books, records, or documents at the hearing on the complaint.

A board shall not impose any additional or alternative penalties pursuant to this section on the holder of a certificate, registration, or license based solely on the holder providing, authorizing, participating, referring to, or assisting with any health care, medical service, or procedure related to an abortion or gender-affirming health care services for a person who resides in a jurisdiction where the provision, authorization, participation, referral, or assistance is illegal, if it would not be a basis for additional or alternative penalties in this State.

27 (cf: P.L.2001, c.307, s.2)

- 29 4. Section 1 of P.L.2022, c.50 (C.2A:160-14.1) is amended to 30 read as follows:
 - 1. Notwithstanding the provisions of N.J.S.2A:160-14, the Governor shall not surrender, on demand of the executive authority of any other state, any person who:
 - a. is found in this State;
 - b. was not in the state whose executive authority is making the demand at the time of the commission of the alleged crime and has not fled therefrom; and
 - c. is charged in the state whose executive authority is making the demand with providing, receiving, assisting in providing or receiving, providing material support for, or traveling to obtain [reproductive health care services that are] legally protected health care activity that is permitted under the laws of this State, including on any theory of vicarious, joint, several or conspiracy liability.

As used in this section [,]:

"Gender-affirming health care services" means all supplies, care, and services of a medical, behavioral health, mental health, surgical, psychiatric, therapeutic, diagnostic, preventative, rehabilitative, or supportive nature, including medication, relating to the treatment of

gender dysphoria and gender incongruence. "Gender-affirming health care services" does not include sexual orientation change efforts as defined by section 2 of P.L.2013, c.150 (C.45:1-55).

"Legally protected health care activity" means providing, seeking, receiving, assisting with, or inquiring about reproductive health care services or gender-affirming health care services that are lawful in this State, regardless of the patient's location.

"Ireproductive Reproductive health care services" means all medical, surgical, counseling, or referral services relating to the human reproductive system including, but not limited to, services relating to pregnancy, contraception, managing infertility, or termination of a pregnancy.

13 (cf: P.L.2022, c.50, s.1)

- 5. Section 1 of P.L.2022, c.51 (C.2A:84A-22.18) is amended to read as follows:
- 17 1. As used in sections 1 and 2 of P.L.2022, c.51 (C.2A:84A-18 22.18 and C.2A:84A-22.19):

"Gender-affirming health care services" means all supplies, care, and services of a medical, behavioral health, mental health, surgical, psychiatric, therapeutic, diagnostic, preventative, rehabilitative, or supportive nature, including medication, relating to the treatment of gender dysphoria and gender incongruence. "Gender-affirming health care services" does not include sexual orientation change efforts as defined by section 2 of P.L.2013, c.150 (C.45:1-55).

"Legally protected health care activity" means providing, seeking, receiving, assisting with, or inquiring about reproductive health care services or gender-affirming health care services that are lawful in this State, regardless of the patient's location.

"Person" includes an individual, partnership, association, limited liability company, or corporation.

"Reproductive health care services" means all medical, surgical, counseling, or referral services relating to the human reproductive system including, but not limited to, services relating to pregnancy, contraception, <u>managing infertility</u>, or termination of a pregnancy.

a. Except as provided in sections 3 through 7 of P.L.1968, c.185 (C.2A:84A-22.3 through 2A:84A-22.7), section 1 of P.L.1970, c. 313 (C.2A:84A-22.8), section 29 of P.L.1968, c.401 (C.45:8B-29), and subsection b. of this section, in any civil action or proceeding preliminary thereto or in any probate, legislative or administrative proceeding, a covered entity, as set forth in the medical privacy and security rules pursuant to Parts 160 and 164 of Subchapter C of Subtitle A of Title 45 of the Code of Federal Regulations, established pursuant to the "Health Insurance Portability and Accountability Act of 1996," Pub.L.104-191, shall not disclose, unless the patient or that patient's conservator, guardian, or other authorized legal representative explicitly consents in writing to the disclosure:

1 (1) any communication made to the covered entity, or any information obtained by the covered entity from, a patient or the conservator, guardian, or other authorized legal representative of a patient relating to [reproductive health care services that are] a legally protected health care activity that is permitted under the laws of this State; or

(2) any information obtained by personal examination of a patient relating to [reproductive health care services that are] a legally protected health care activity that is permitted under the laws of this State.

A covered entity shall inform the patient or the patient's conservator, guardian, or other authorized legal representative of the patient's right to withhold such written consent at or before the time [reproductive health care services are] a legally protected health care activity is rendered or at such time as the patient discloses any information relating to [reproductive health care services that have been] a legally protected health care activity that was previously rendered.

- b. Written consent of the patient or the patient's conservator, guardian, or other authorized legal representative shall not be required for the disclosure of any communication or information:
 - (1) pursuant to the laws of this State or the Rules of Court;
- (2) by a covered entity against whom a claim has been made, or there is a reasonable belief will be made, in an action or proceeding, to the covered entity's attorney or professional liability insurer or insurer's agent for use in the defense of the action or proceeding;
- (3) to the Commissioner of Health, Human Services, or Banking and Insurance, or any professional licensing board operating under the authority of the Division of Consumer Affairs in the Department of Law and Public Safety for records of a patient of a covered entity in connection with an investigation of a complaint, if the records are related to the complaint; or
- (4) if child abuse, abuse of an elderly individual, abuse of an individual who is incapacitated, or abuse of an individual with a physical or mental disability is known or in good faith suspected. For the purposes of this paragraph, the provision of or material support for [reproductive health care services that are] a legally protected health care activity that is permitted under the laws of this State shall not constitute abuse.
- Nothing in this subsection shall be construed to conflict with or displace any requirements or conditions for disclosure set forth under 45 C.F.R. ss.160.203 and 164.514.
- c. Nothing in this section shall be construed to impede the lawful sharing of medical records as permitted by State or federal law or the Rules of Court.
- 46 (cf: P.L.2022, c.51, s.1)

- 6. Section 2 of P.L.2022, c.51 (C.2A:84A-22.19) is amended to read as follows:
- 2. A public entity of this State or employee, appointee, officer or official or any other person acting on behalf of a public entity shall not provide any information or expend or use time, money, facilities, property, equipment, personnel or other resources in furtherance of any interstate investigation or proceeding seeking to impose civil or criminal liability upon a person or entity for:
- (1) the provision, receipt, or seeking of, or inquiring or responding to an inquiry about, [reproductive health care services] a legally protected health care activity, as defined in section 1 of P.L.2022, c.51 (C.2A:84A-22.18), that [are] is legal in this State; or
- (2) assisting, advising, aiding, abetting, facilitating, soliciting, or conspiring with any person or entity providing, receiving, seeking, or inquiring or responding to an inquiry about, [reproductive health care services] a legally protected health care activity, as defined in section 1 of P.L.2022, c.51 (C.2A:84A-22.18), that are legal in this State.

This section shall not apply to any investigation or proceeding when the conduct subject to potential liability under the investigation or proceeding would be subject to liability under the laws of this State if committed in this State. This section shall not apply if it is necessary for the agency or person to engage in conduct otherwise prohibited by this section in order to comply with a valid order issued by a court with jurisdiction over the agency or person, or to comply with applicable provisions of State or federal law.

(cf: P.L.2022, c.51, s.2)

- 7. (New section) a. A law of another state that authorized a person or government entity to bring a prosecution, civil action, or any other legal action to deter, prevent, sanction, or punish any person engaging, aiding, or assisting in providing or prescribing any legally protected health care activity is against the public policy of this State.
- b. A law described in subsection a. of this section shall not be applied to any matter, case, or controversy heard in a State court or in an administrative tribunal of this State.
- c. The provisions of this section shall not apply to an action founded in tort, contract, or statute under the laws of this State, or an action founded in tort, contract, or statute under the laws of another state and for which a similar claim would exist under the laws of this State including, but not limited to, an alleged act of malpractice or negligence by a person in the person's profession or occupation.

8. (New section) a. A person is guilty of interference with reproductive or gender-affirming health care services if the person purposely or knowingly:

- (1) inflicts or attempts to inflict bodily injury on another person, with purpose to unlawfully restrict another's access to or receipt or provision of reproductive or gender-affirming health care services or to intimidate the person from becoming or remaining a reproductive or gender-affirming health care services patient, provider, volunteer, or assistant, if the conduct would cause a reasonable person to be intimidated;
- (2) physically obstructs any person seeking to enter into or exit from a reproductive or gender-affirming health care services facility, with purpose to unlawfully restrict another's access to or receipt or provision of reproductive or gender affirming health care services or to intimidate the person from becoming or remaining a reproductive or gender-affirming health care services patient, provider, volunteer, or assistant, if the conduct would cause a reasonable person to be intimidated;
- (3) intimidates, threatens, or coerces, or attempts to intimidate, threaten or coerce, any person or entity because that person or entity is a reproductive or gender-affirming health care services patient, provider, volunteer, or assistant, or in order to intimidate a person or entity, or a class of persons or entities, from becoming or remaining a reproductive or gender affirming health care services patient, provider, volunteer, or assistant;
- (4) damages, defaces or destroys the property of a person, entity, or facility, or attempts to do so, because the person, entity, or facility is a reproductive or gender-affirming health care services patient, provider, assistant, volunteer, or facility;
- (5) videotapes, films, photographs, or records by electronic means, within 100 feet of the entrance to, or within, a reproductive or gender-affirming health care services facility, a reproductive or gender affirming health care services patient, provider, volunteer, or assistant without that person's consent, with purpose to intimidate the person from becoming or remaining a reproductive or gender-affirming health care services patient, provider, volunteer, or assistant, if the conduct would cause a reasonable person to be intimidated;
- (6) discloses or distributes, in any manner or forum including, but not limited to, internet websites and social media, a videotape, film, photograph, or recording the person knows or reasonably should know was obtained in violation of paragraph (5) of this subsection, with purpose to intimidate the person from becoming or remaining a reproductive or gender-affirming health care services patient, provider, volunteer, or assistant, if the conduct would cause a reasonable person to be intimidated.
- b. (1) Interference with reproductive or gender-affirming health care services is a crime of the fourth degree, except that interference with reproductive or gender-affirming health care services is a crime of the second degree if the victim suffers significant bodily injury or

- serious bodily injury, and a crime of the third degree if the victim suffers bodily injury.
 - (2) Interference with reproductive or gender-affirming health care services is a disorderly persons offense if the act would cause a reasonable person to suffer: (a) damage to the victim's business or personal reputation; (b) financial harm; or (c) pain and suffering, mental anguish, or emotional harm.
 - c. Nothing in this section shall be construed to preclude, or limit in any way, prosecution and conviction for any other offense including, but not limited to, prosecution and conviction for assault, N.J.S.2C:12-1, terroristic threats, N.J.S.2C:12-3, stalking, section 1 of P.L.1992, c.209 (C.2C:12-10), criminal coercion, N.J.S.2C:13-5, or criminal trespass, N.J.S.2C:18-3.

131415

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30

31

32

33

34

3

4

5

6 7

8

10

11 12

- 9. (New section) a. Any law enforcement officer may order the immediate dispersal of a gathering that substantially impedes access to or departure from an entrance or driveway to a reproductive or gender-affirming health care services facility during the business hours of the facility.
- (1) A dispersal order issued pursuant to this subsection shall include the following statements:
- (a) the gathering has substantially impeded access to or departure from the facility;
- (b) each member of the gathering shall, under the penalty of arrest and prosecution, immediately disperse and cease to stand or be located within at least 25 feet of an entrance or a driveway to the facility; and
- (c) the order shall remain in place for eight hours or until the close of business of the facility on the day the order is issued, whichever is sooner.
- (2) A dispersal order shall not issue under this subsection unless the 25-foot boundary identified in paragraph (1) of this subsection is clearly marked.
- b. Failure to comply with a dispersal order issued pursuant to this section shall be a disorderly persons offense.

353637

38

39

40

41

- 10. (New section) a. A person who, in violation of section 8 of P.L., c. (C.) (pending before the Legislature as this bill), commits an act of interference with another person's reproductive or gender-affirming health care services shall be liable to that aggrieved person, who may bring a civil action in the Superior Court.
- b. The court may award:
 - (1) injunctive relief;
- 44 (2) compensatory damages, but in an amount not less than 45 liquidated damages computed at the rate of \$1,000 for each violation 46 of P.L., c. (C.) (pending before the Legislature as this bill);
- 47 (3) punitive damages upon proof of willful or reckless disregard 48 of the law;

A4656 SPEIGHT

11

- 1 (4) reasonable attorney's fees and other litigation costs reasonably incurred; and
- 3 (5) any other preliminary and equitable relief as the court determines to be appropriate.
- 5 c. A conviction of a violation of section 8 of 6 P.L., c. (C.) (pending before the Legislature as this bill) 5 shall not be a prerequisite for a civil action brought pursuant to this 8 section.
- d. A court may, in its discretion, permit a person aggrieved by a violation of section 8 of P.L., c. (C.) (pending before the Legislature as this bill) to use a pseudonym in a civil action brought pursuant to the provisions of this section when reasonably required to safeguard the health, safety, or privacy of the person.

14

22

23

24

25

26

27

2829

30

- 15 11. (New section) a. The Attorney General may bring a civil 16 action to enjoin, on a temporary, preliminary, or permanent basis, a 17 violation of section 8 or 9 of P.L. , c. (C.) (pending before 18 the Legislature as this bill); for compensatory damages to persons 19 aggrieved by the violation; and for the assessment of a civil penalty 20 against each actor who violates section 8 or 9 of P.L., c. (C. 21 (pending before the Legislature as this bill).
 - b. The civil penalty imposed on each actor shall not exceed \$10,000 for a first violation, and shall not exceed \$25,000 for any other subsequent violation.
 - c. In imposing civil penalties pursuant to this section, the court shall consider a prior violation of the federal Freedom of Access to Clinic Entrances Act of 1994, 18 U.S.C. s.248, or a prior violation of a statute of another jurisdiction that would constitute a violation of the federal Freedom of Access to Clinic Entrances Act of 1994, 18 U.S.C. s.248, to be a prior violation of section 8 of P.L., c. (C.) (pending before the Legislature as this bill).

313233

- 12. The following sections are repealed:
- 34 a. Sections 1 through 3 of P.L.1997, c.262 (C.2A:65A-5 through 35 C.2A:65A-7);
- 36 b. Section 3 through 13 of P.L.1999, c.145 (C.9:17A-1.1 through 37 C.9:17A-1.12);
- 38 c. Section 1 of P.L.1975, c.26 (C.30:4D-6.1).

- 13. (New section) The Commissioners of Health and Human Services shall adopt rules and regulations, pursuant to the "Administrative Procedure Act," P.L.1968, c.410 (C.52:14B-1 et seq.) as may be necessary to implement the provisions of P.L., c. (C.) (pending before the Legislature as this bill).
- 44 (C.) (pending before the Legislature as this bill).
 45 Notwithstanding any provision of the "Administrative Procedure
- 46 Act," P.L.1968, c.410 (C.52:14B-1 et seq.), to the contrary, the
- 47 commissioners are authorized to adopt immediately, upon filing with
- 48 the Office of Administrative Law, rules and regulations necessary to

implement P.L., c. (C.) (pending before the Legislature as this bill). The rules and regulations adopted pursuant to this section shall be effective for a period not to exceed 18 months following the date of filing and may thereafter be amended, adopted, or readopted

by the commissioners in accordance with the requirements of

6 P.L.1968, c.410 (C.52:14B-1 et seq.).

7

5

- 8 14. (New section) a. P.L. , c. (C.) (pending before the 9 Legislature as this bill) shall be liberally construed to effect the 10 purpose thereof.
- b. The provisions of P.L., c. (C.) (pending before the Legislature as this bill) shall be severable, and if any of its provisions shall be held to be unconstitutional or otherwise invalid, the decision of court shall not affect the validity of any of the remaining provisions of this act.

16

26

27

28

29

30

31

32

33

34

35

3637

38

39

- 15. Section 2 of P.L.2021, c.375 (C.10:7-2) is amended to read as follows:
- 2. a. Every individual present in the State, including, but not limited to, an individual who is under State control or supervision, shall have the fundamental right to: choose or refuse contraception or sterilization; [and] choose whether to carry a pregnancy, to give birth, or to terminate a pregnancy; and choose whether to use assisted reproductive technology, including, but not limited to in vitro fertilization.

The New Jersey Constitution recognizes the fundamental nature of the right to reproductive choice, including the right to access contraception, to terminate a pregnancy, and to carry a pregnancy to term, shall not be abridged by any law, rule, regulation, ordinance, or order issued by any State, county, or local governmental authority. Any law, rule, regulation, ordinance, or order, in effect on or adopted after the effective date of this act, that is determined to have the effect of limiting the constitutional right to freedom of reproductive choice and that does not conform with the provisions and the express or implied purposes of this act, shall be deemed invalid and shall have no force or effect.

- b. The provisions of this section shall be enforceable under the "New Jersey Civil Rights Act," P.L.2004, c.143 (C.10:6-1 et seq.) or in any other manner provided by law.
- 40 (cf: P.L.2021, c.375, s.2)

- 42 16. Section 10 of P.L.2018, c.62 (C.26:6B-10) is amended to read 43 as follows:
- 10. a. A medical examiner shall conduct a medicolegal investigation of a death in this State, as determined to be necessary to establish identity and the cause and manner of death, and to resolve any issues or potential issues of public health and of legal concern,

- in accordance with rules and regulations adopted by the Chief State Medical Examiner, in any of the following instances:
- (1) death where criminal violence appears to have taken place, regardless of the time interval between the incident and death, and regardless of whether the violence appears to have been the immediate cause of death, or a contributory factor thereto;
- (2) death by accident or unintentional injury, regardless of the time interval between the incident and death, and regardless of whether the injury appears to have been the immediate cause of death $[\![,]\!]$ or a contributory factor thereto;
 - (3) death under suspicious or unusual circumstances;
- (4) death from causes that might constitute a threat to public health or safety;
- (5) death not caused by readily recognizable diseases, disability, or infirmity;
 - (6) sudden death when the decedent was in apparent good health;
- 17 (7) suicide;

1

2

3

4

5

6 7

8

9

10

11

12

13

14

15

16

18

19

20

21

22

23

24

25

26

27

2829

30

33

3738

39

40

41

42

43

- (8) death of a child under 18 years of age from any cause;
- (9) sudden or unexpected death of an infant or child under three years of age [or a fetal death occurring without medical attendance];
- (10) death where suspicion of abuse of a child, family or household member, or elderly or disabled person exists;
- (11) death within 24 hours of admission to a hospital or a nursing home;
- (12) death in custody, in a jail or correctional facility, or in a State or county psychiatric hospital, State developmental center, or other public or private institution or facility for persons with mental illness, developmental disabilities, or brain injury;
 - (13) death related to occupational illness or injury;
 - (14) death due to thermal, chemical, electrical, or radiation injury;
- 31 (15) death due to toxins, poisons, medicinal or recreational drugs, 32 or a combination thereof;
 - (16) known or suspected non-natural death;
- 34 (17) any person found dead under unexplained circumstances;
- 35 (18) the discovery of skeletal remains;
- 36 (19) death for which investigation is in the public interest; or
 - (20) **[**a**]** death occurring under such other circumstances as prescribed by regulation of the Chief State Medical Examiner.
 - b. For a death that occurs, or appears to have occurred, for any of the reasons specified in subsection a. of this section:
 - (1) It shall be the duty of any member of the general public having knowledge of the death to notify immediately the local law enforcement agency of the known facts concerning the time, place, manner, and circumstances of that death;
- 45 (2) It shall be the duty of any attending physician, licensed nurse, 46 hospital administrator, law enforcement officer, Department of 47 Children and Families staff member, or funeral director to notify 48 immediately the county or intercounty medical examiner of the

known facts concerning the time, place, manner, and circumstances of that death; and

- (3) A person who willfully neglects or refuses to report the death [,] or who, without an order from the office of the county or intercounty medical examiner or the Office of the Chief State Medical Examiner, willfully touches, removes, or disturbs the decedent's body or touches, removes, or disturbs the clothing upon or near the body, is guilty of a crime of the fourth degree.
- c. In addition to the rules and regulations adopted by the Chief State Medical Examiner establishing uniform procedures for conducting medicolegal death investigations, the procedures concerning the death investigation process as set forth in this subsection shall be followed by the persons specified herein.
- (1) Upon the death of a person from any of the causes specified in subsection a. of this section, it shall be the duty of the physician in attendance, a law enforcement officer having knowledge of the death, the funeral director, or any other person present, to immediately notify the county or intercounty medical examiner and the county prosecutor of the county in which the death occurred of the known facts concerning the time, place, manner, and circumstances of that death. Upon receipt of that notification, the county or intercounty medical examiner, [or] an assistant county or intercounty medical examiner, or a medicolegal death investigator shall immediately proceed to the place where the dead body is located and take charge of the body. A medicolegal death investigator who engages in the investigation of deaths pursuant to this subsection shall obtain certification from the American Board of Medicolegal Death Investigators within three years after the effective date of [this act] P.L.2018, c.62 (C.26:6B-1 et al.), or within three years after the person first takes action under this paragraph, whichever is later.
- (2) In cases of apparent homicide or suicide, or <u>in cases</u> of accidental death, the cause of which is obscure, the scene of the event shall not be disturbed until the medical examiner or medicolegal death investigator in charge provides authorization to do so.
- (3) (a) The medical examiner or medicolegal death investigator, as the case may be, shall: fully investigate the essential facts concerning the medical causes of death and take the names and addresses of as many witnesses thereto as may be practicable to obtain; before leaving the premises, reduce those facts, as the medical examiner may deem necessary, to writing; file those facts in the office of the county or intercounty medical examiner; and make the facts available to the county prosecutor and the Chief State Medical Examiner at their request.
- (b) The law enforcement officer present at the investigation, or the medical examiner or medicolegal death investigator if no officer is present, shall, in the absence of the next-of-kin of the deceased person: take possession of all property of value found on the decedent; [make] include an exact inventory thereof [on his] in the

medical examiner's or medicolegal death investigator's official report; and deliver the property to the law enforcement agency for the municipality in which the death occurred, which shall surrender the property to the person entitled to its custody or possession.

- (c) The medical examiner or medicolegal death investigator, as the case may be, shall take possession of any objects or articles that, in [his] the opinion of the medical examiner or medicolegal death investigator, may be useful in establishing the cause or manner of death, or which constitute evidence of criminal behavior, and, after cataloging each item, shall deliver them to the county prosecutor.
- (4) The Chief State Medical Examiner, Deputy Chief State Medical Examiner, county or intercounty medical examiner, assistant county or intercounty medical examiner, or medicolegal death investigator, as the case may be, shall consult with law enforcement officers and agencies, county prosecutors, public health agencies, [or] and other appropriate entities in matters within their expertise, when conducting a medicolegal death investigation. The medical examiner, assistant medical examiner, or medicolegal death investigator, as the case may be, shall be provided with an Originating Agency Identification Number[,] and access to the State's motor vehicle registries and fingerprint registries[,] for the purposes of identifying the remains of a deceased individual under this section.
 - (5) If the cause of death is established within a reasonable degree of medical certainty and no autopsy is deemed necessary, the county or intercounty medical examiner, assistant county or intercounty medical examiner, or medicolegal death investigator, as the case may be, shall reduce the findings to writing and promptly make a full report thereof to the Chief State Medical Examiner and to the county prosecutor in a format to be prescribed by the Chief State Medical Examiner for that purpose.
 - (6) If, in the opinion of the county or intercounty medical examiner, the Chief State Medical Examiner, an assignment judge of the Superior Court, the county prosecutor, the Attorney General, or the commissioner, an autopsy is deemed necessary, the autopsy shall be performed by:
 - (a) the county or intercounty medical examiner or assistant county or intercounty medical examiner, provided that the individual performing the autopsy is under the supervision of a pathologist certified by the American Board of Pathology or the American Osteopathic Board of Pathology;
 - (b) the Chief State Medical Examiner, at his <u>or her</u> discretion, or the Deputy Chief State Medical Examiner; or
- (c) such competent forensic pathologists as may be authorized by the Chief State Medical Examiner.
- (7) If, in any case in which the suspected cause of death of a child under one year of age is sudden infant death syndrome [,] or the <u>death</u>

- 1 of a child [is] between one and three years of age [and the death] is 2 sudden and unexpected, and an investigation has been conducted in 3 accordance with the provisions of this section, and [a] the child's 4 parent or legal guardian [of the child] requests an autopsy, an 5 autopsy shall be performed by: (a) the county or intercounty medical examiner or assistant county or intercounty medical examiner, 6 7 provided that the individual performing the autopsy is under the 8 supervision of a pathologist certified by the American Board of 9 Pathology or the American Osteopathic Board of Pathology; or (b) 10 the Chief State Medical Examiner, at his or her discretion, or the 11 Deputy Chief State Medical Examiner.
 - (a) The medical examiner performing the autopsy shall file a detailed description of the findings and conclusions of the autopsy with the Office of the Chief State Medical Examiner, [and with] the appropriate county or intercounty medical examiner office, and the county prosecutor.

12

13

14

15

16

17

18

19

20

21

22

23

24

25

26

2728

29

30

31

32

3334

35

36

37

38

39

40

41

42

43

44

45

- (b) Upon the request of a parent or legal guardian of the child, a pediatric pathologist, if available, shall assist in the performance of the autopsy under the direction of a forensic pathologist. The Chief State Medical Examiner or county or intercounty medical examiner shall notify the parent or legal guardian of the child that [they] the parent or guardian may request that a pediatric pathologist assist in the performance of the autopsy. The medical examiner shall include any findings and conclusions by the pathologist from the autopsy with the information filed with the Office of the Chief State Medical Examiner, [and with] the appropriate county or intercounty medical examiner office and the county prosecutor, pursuant to subparagraph (a) of this paragraph. The Chief State Medical Examiner or the county or intercounty medical examiner shall make available a copy of these findings and conclusions to the closest surviving relative of the decedent within 120 days of the receipt of a request therefor, unless the death is under active investigation by a law enforcement
- (c) The medical examiner [with] having jurisdiction [for] over the investigation shall make the preliminary findings and conclusions of the autopsy available to the child's parent or legal guardian and the department within 48 hours after the medical examiner is notified of the death of the child. The medical examiner shall provide his or her findings and conclusions for each reported case to the department upon completion of the investigation.
- (8) Notwithstanding the provisions of [this act] P.L.2018, c.62 (C.26:6B-1 et al.) to the contrary, a county or intercounty medical examiner may request the Chief State Medical Examiner [or]. Deputy Chief State Medical Examiner, or other person authorized and designated by the Chief State Medical Examiner [,] to conduct an examination or perform an autopsy whenever it is deemed necessary or desirable.

A4656 SPEIGHT

17

- 1 (9) In the case of the death of a resident of a long-term care 2 facility licensed by the Department of Health pursuant to P.L.1971, 3 c.136 (C.26:2H-1 et seq.), a State psychiatric hospital operated by the 4 Department of Health and listed in R.S.30:1-7, a county psychiatric 5 hospital, a facility for persons with developmental disabilities as defined in section 3 of P.L.1977, c.82 (C.30:6D-3), or a facility for 6 7 persons with traumatic brain injury as defined in 42 U.S.C. s.280b-8 1c that is operated by or under contract with the Department of 9 Human Services, the psychiatric hospital or facility, as the case may 10 be, shall, in addition to notifying the next-of-kin of the resident's death, so notify the county or intercounty medical examiner and 11 12 provide that individual with contact information for the resident's 13 next-of-kin. The county or intercounty medical examiner [,] or 14 assistant county or intercounty medical examiner [on his behalf], 15 shall make every practicable effort to contact the resident's next-of-16 kin to offer that person the opportunity to provide the medical 17 examiner with information that the person deems relevant to: the circumstances of the resident's death; and whether there is a need to 18 19 perform a dissection or autopsy of the decedent. 20
 - d. Upon the request of a decedent's legal representative, or upon the request of the person who, pursuant to section 22 of P.L.2003, c.261 (C.45:27-22), is in control of the decedent's funeral, the Chief State Medical Examiner shall provide the legal representative or person in control of the funeral with all available documentation related to the decedent's autopsy and the medical investigation of the decedent's death.

(cf: P.L.2018, c.62, s.10)

272829

30

31

21

22

23

24

25

26

17. (New section) Consistent with the fundamental right established pursuant section 2 of P.L.2021, c.375 (C.10:7-2), a fertilized egg, embryo, or fetus shall not have independent rights under the laws of this State.

323334

18. This act shall take effect immediately.

3536

37 STATEMENT

38 39

40

41

This bill establishes certain protections for individuals seeking abortion or gender-affirming health care services, as well as certain protections for professionals who provided abortion-related health care services.

42 43

- 44 <u>Crime: Interference with Reproductive or Gender-Affirming</u>
- 45 <u>HEALTH SERVICES</u>

This bill creates the new crime of "interference with reproductive or gender-affirming health services."

A person is guilty of the crime if the person purposely or knowingly, with the purpose to unlawfully restrict another's access to or receipt or provision of reproductive or gender-affirming health care services or to intimidate the person from becoming or remaining a reproductive or gender-affirming health care services patient, provider, volunteer or assistant:

- (1) inflicts or attempts to inflict bodily injury;
- (2) obstructs any person seeking to enter into or exit from a reproductive or gender-affirming health care services facility;
- (3) intimidates, threatens, or coerces, or attempts to intimidate, threaten, or coerce, any person or entity because that person or entity is a reproductive or gender-affirming health care services patient, provider, volunteer, or assistant;
- (4) damages, defaces, or destroys the property of a person, entity, or facility, or attempts to do so, because the person, entity, or facility is a reproductive or gender-affirming health care service patient, provider, assistant, volunteer, or facility;
- (5) videotapes, films, photographs, or records by electronic means, within 100 feet of the entrance to a reproductive or gender-affirming health care services facility, a patient, provider, volunteer, or assistant without that person's consent; or
- (6) discloses or distributes a videotape, film, photograph, or recording of the person.

Interference with reproductive or gender-affirming health care services is a crime of the fourth degree, but is a crime of the second degree if the victim suffers significant or serious bodily injury. Further, interference with reproductive or gender-affirming health care services is a disorderly persons offense if the act would cause a reasonable person to suffer: (1) damage to the victim's business or personal reputation; (2) financial harm; or (3) pain and suffering, mental anguish, or emotional harm.

A crime of the fourth degree is punishable by up to 18 months imprisonment, a fine of up to \$10,000, or both. A crime of the second degree is punishable by five to ten years imprisonment, a fine of up to \$150,000, or both. A disorderly persons offense is a punishable by up to six months imprisonment, a fine of up to \$1,000, or both.

<u>CIVIL ACTION: INTERFERENCE WITH REPRODUCTIVE OR GENDER-AFFIRMING HEALTH SERVICES</u>

The bill also authorizes a person to bring a civil action against a person who unlawfully interferes with another person's reproductive or gender-affirming health care services.

Under the bill, a court may award:

- (1) injunctive relief;
- (2) compensatory damages in an amount not less than liquidated damages computed at the rate of \$1,000 for each violation;
- 47 (3) punitive damages upon proof of willful or reckless disregard 48 of the law;

- (4) reasonable attorney's fees and other litigation costs; and
- (5) any other preliminary and equitable relief as the court determines to be appropriate.

Under the bill, the Attorney General may bring a civil action to enjoin a violation of the law, for compensatory damages, and for the assessment of a civil penalty against each person who violates the law. The civil penalty imposed on each actor will be up to, but not exceed, \$10,000 for a first violation, and \$25,000 for any subsequent violation.

DISPERSAL OF GATHERINGS

The bill authorized any law enforcement officer to order the immediate dispersal of a gathering that substantially impedes access to or departure from an entrance or driveway to a reproductive or gender-affirming health care facility during the business hours of the facility.

Failure to comply with an order to disperse issued by the Attorney General or a law enforcement officer is a disorderly persons offense. A disorderly persons offense is punishable by a term of imprisonment of up to six months, a fine of up to \$1,000, or both.

LICENSING BOARDS

The bill prohibits a board from imposing any additional or alternative penalties, in accordance with N.J.S.A.34:1-22, on the holder of a certificate, registration, or license based solely on the holder providing, authorizing, participating, referring to, or assisting with any health care, medical service, or procedure related to an abortion for a person who resides in a jurisdiction where the provision, authorization, participation, referral, or assistance is illegal.

APPLICABILITY OF LAWS OF OTHER STATES

The bill establishes that a law of another state that authorized a person or government entity to bring a prosecution, civil action, or any other legal action to deter, prevent, sanction, or punish any person engaging, aiding, or assisting in providing or prescribing any legally protected health care activity is against the public policy of this State. Further, such laws of another state are prohibited from being applied to any matter, case, or controversy heard in a State court or in an administrative tribunal of this State.

The prohibition does not apply to an action founded in tort, contract, or statute under the laws of this State, or an action founded in tort, contract, or statute under the similar laws of another state. This includes, but is not limited to, an alleged act of malpractice or negligence by a person in the person's profession or occupation.

PROTECTION OF PATIENT INFORMATION

This bill updates P.L.2022, c.51 to provide a definition of "legally protected health care activity" and "gender-affirming health care services." P.L.2022, c.51 provides certain protections with respect to the disclosure of patient information relating to reproductive health care services, as well as protecting access to health care, medical services, and procedures related to an abortion for persons who come to this State from jurisdictions in which these actions are illegal.

The bill provides that in any civil action or other proceeding preliminary thereto, a medical provider or other covered entity, as described under federal law concerning medical privacy and security, is barred from disclosing the following communications or information, unless the patient or patient's conservator, guardian, or other authorized legal representative explicitly consented in writing to the disclosure:

- (1) any communication made to the covered entity, or any information obtained by the covered entity from, a patient or the conservator, guardian, or other authorized legal representative of a patient relating to legally protected health care activity; or
- (2) any information obtained by personal examination of a patient relating to legally protected health care activity that is permitted under the laws of this State.

Additionally, under the bill, a public entity of this State or employee, appointee, officer or official or any other person acting on behalf of a public entity would be prohibited from providing any information, or expending or using time, money, facilities, property, equipment, personnel or other resources in furtherance of any interstate investigation or proceeding seeking to impose civil or criminal liability upon a person or entity for:

- (1) the provision, receipt, or seeking of, or inquiring or responding to an inquiry about legally protected health care activity that is legal in this State; or
- (2) assisting, advising, aiding, abetting, facilitating, soliciting, or conspiring with any person or entity providing, receiving, seeking, or inquiring or responding to an inquiry about legally protected health care activity that is legal in this State.

EXTRADITION

This bill updates N.J.S.A.2A:160-14.1 to prevent a person from being extradited to another state under certain circumstances related to "legally protected health care activity." Under current law, N.J.S.A.2A:160-14.1 prevents extradition as it relates to "reproductive health care services." Under the bill, "Legally protected health care activity" is defined as activity providing, seeking, receiving, assisting with, or inquiring about reproductive

A4656 SPEIGHT

21

health care services or gender-affirming health care services that are
lawful in this State, regardless of the patient's location.

3 Relatedly, the bill also defines "gender-affirming health care 4 services" to mean all supplies, care, and services of a medical, 5 behavioral health, mental health, surgical, psychiatric, therapeutic, diagnostic, preventative, rehabilitative, or supportive nature, 6 7 including medication, relating to the treatment of gender dysphoria and gender incongruence. "Gender-affirming health care services" 8 9 does not include sexual orientation change efforts as defined by 10 N.J.S.A.45:1-55.

11 12

13 14

15

16

17

18

19

IN VITRO FERTILIZATION PROTECTIONS

This bill strengthens reproductive health care freedom in New Jersey by specifying that: every individual present in this State, including, but not limited to, an individual who is under State control or supervision, shall have the fundamental right to choose whether to use assisted reproductive technology (ART), including, but not limited to in vitro fertilization (IVF); and a fertilized egg, embryo, or fetus shall not have independent rights under any of the laws of the State.

202122

23

24

25

26

MEDICOLEGAL INVESTIGATIONS

This bill removes the requirement that a medical examiner conduct a medicolegal investigation of a death in the State related to a fetal death occurring without medical attendance. This provisions seeks to ensure that a woman who has a miscarriage or fetal complications is not investigated or the fetal death criminalized.

272829

30

31

REPEALERS

The bill repeals the following statutes, which have either been obviated by court decision or would be obviated by this bill:

- 32 (1) N.J.S.A.2A:65A-5 through N.J.S.A.2A:65A-7 (banned partial birth abortions);
- 34 (2) N.J.S.A.9:17A-1.1 through N.J.S.A.9:17A-1.12 (required parental notification for minors' abortion);
- 36 (3) N.J.S.A.30:4D-6.1 (barred Medicaid payment for abortion except where necessary to save the woman's life).