

SENATE BUDGET AND APPROPRIATIONS COMMITTEE

STATEMENT TO

SENATE, No. 2435

with committee amendments

STATE OF NEW JERSEY

DATED: MARCH 11, 2024

The Senate Budget and Appropriations Committee reports favorably and with committee amendments Senate Bill No. 2435.

As amended by the committee, this bill revises the requirements to receive reimbursement from the “Emergency Medical Technician Training Fund.”

Currently, any private agency, organization, or entity that is certified by the Commissioner of Health to provide training and testing for volunteer ambulance, first aid, and rescue squad personnel who are seeking certification or recertification as an emergency medical technician (EMT) may be reimbursed from the fund for any costs associated with the training and testing of volunteer EMTs that are not otherwise reimbursed. Volunteer ambulance, first aid, and rescue squads are eligible for reimbursement from the fund if the squad does not receive any payment for the provision of emergency medical services, regardless of whether the individual EMTs on the squad are paid by the squad for their services.

The amended bill would revise these requirements to provide that any agency, organization, or entity may be eligible for reimbursement from the fund for the unreimbursed costs of training and certifying a volunteer EMT, regardless of whether the ambulance, first aid, and rescue squad employing or utilizing the services of the volunteer EMT charges for the provision of basic life support services. The priority for reimbursement from the fund would be initial EMT training and certification classes and EMT refresher recertification classes.

The bill requires that all reimbursements from the fund be promptly paid upon receipt of a qualifying application for reimbursement. Payment is to be made to the agency, organization, or entity that provided training to the volunteer EMT.

The bill provides that the head of the ambulance, first aid, and rescue squad employing or utilizing the services of an EMT, who received initial EMT training that was reimbursed by the fund, will determine the EMT to be a volunteer in good standing provided that the EMT works at least one service call per month during the initial three-year certification period as a volunteer EMT.

A “volunteer emergency medical technician” is defined under the bill as an EMT who provides basic life support services without receiving any compensation, such as an hourly wage or a salary. The amended bill excludes individuals employed as an EMT full-time by a general or special hospital from status as a volunteer EMT, and the training of these EMTs may not be reimbursed under the fund.

The bill requires the head of the ambulance, first aid and rescue squad to seek reimbursement from an EMT that ceases to be a volunteer in good standing for monies paid out of the fund in connection with the EMT’s training, testing, certification, recertification, as appropriate, for that initial three-year certification period. The Department of Health will exercise oversight authority over the collection of funds.

COMMITTEE AMENDMENTS:

The committee amendments 1) clarify that an individual employed full-time by a general or special hospital as an EMT is not considered a volunteer emergency medical technician under the bill and 2) revise the effective date of the bill.

FISCAL IMPACT:

The Office of Legislative Services (OLS) concludes that the bill will have an indeterminate net impact on annual State expenditures due to countervailing effects of the bill’s provisions affecting the eligibility of ambulance, first aid, and rescue squads to secure reimbursement from the Emergency Medical Technician Training Fund for certain emergency medical technician (EMT) training and testing costs.

By expanding eligibility for reimbursement from the fund to certain ambulance, first aid, and rescue squads, regardless of whether the entity charges for the provision of emergency services, the bill will increase annual State expenditures from the fund by an indeterminate amount.

By contrast, a provision in the bill that restricts reimbursements to costs associated with training and testing volunteer EMTs, as opposed to both volunteer and paid EMTs as allowed under current law, may potentially reduce annual State expenditures from the fund. The magnitude and direction of these countervailing effects cannot be determined.

Expenditures from the fund will potentially increase by a substantive amount, due to a provision that directs the head of a squad employing the services of an EMT, for whom initial EMT training costs were reimbursed from the fund, to determine the EMT to be a “volunteer in good standing,” provided the EMT works as a volunteer for at least one service call per month during the EMT’s initial three-year certification period. Individuals employed by a licensed hospital as a full-time EMT, however, are not included in the bill’s definition

of a volunteer EMT; as such, licensed hospitals employing these full-time EMTs are ineligible to receive fund reimbursements for these employees.

Annual State revenues will likely increase by a marginal amount under the bill, to the extent that the head of an ambulance, first aid, and rescue squad is required to seek repayment of initial EMT training and testing costs, previously reimbursed by the fund, for an individual who ceases to be a “volunteer in good standing” during an initial three-year certification window. Any revenue increase stemming from this provision would be at least partially offset by higher costs for the Department of Health to oversee the collection of these funds by the squads.