

Healthy Cardiac Monitoring Act

AN ACT concerning the cardiac health of children and student athletes.

BE IT ENACTED by the Senate and General Assembly:

1. Short title.

- a. This act shall be known and may be cited as the “**Healthy Cardiac Monitoring Act**”

2. Annual physical examination of child, questions relative to cardiac health required.

- a. A registered, licensed, and certified health care professional defined as physician, advanced practice nurse, or physician assistant (MD, DO, PA, or APN/NP) who performs an annual physical examination of a child 19 years of age or younger shall include as part of that examination questions that evaluate a child’s family history related to cardiac conditions contained in the “Preparticipation Physical Evaluation” (PPE) form developed jointly by the American Academy of Family Physicians, American Academy of Pediatrics, American College of Sports Medicine, American Medical Society for Sports Medicine, American Orthopaedic Society for Sports Medicine, and American Osteopathic Academy of Sports Medicine and the American Heart Association's 14 point screening for heart disease in the young.
 - i. Questions regarding the following shall be added to the PPE above:
 - 1. The biologic heart health history of the child; including history of sperm/egg donor or biologic parent.
 - 2. Four specific questions to ask regarding biologic heart health history during cardiac screening in well-child visits and in PPE are (these questions are published in the policy statement by the American Academy of Pediatrics (AAP) in *Pediatrics* in June 2021 and in JAMA on Aug 18, 2021) :
 - a. Have you ever fainted, passed out, or had an unexplained seizure suddenly and without warning, especially during exercise or in response to sudden loud noises, such as doorbells, alarm clocks, and ringing telephones?
 - b. Have you ever had exercise related chest pain or shortness of breath?
 - c. Has anyone in your immediate family (parents, grandparents, siblings) or other, more distant relatives (aunts, uncles, cousins) died of heart problems or had an unexpected sudden death before age 50? This would include unexpected drownings, unexplained auto crashes in which the relative was driving, or SIDS.
 - d. Are you related to anyone with hypertrophic cardiomyopathy or hypertrophic obstructive cardiomyopathy, Marfan syndrome, arrhythmogenic cardiomyopathy, long QT syndrome, short QT syndrome, Brugada syndrome, or catecholaminergic polymorphic

ventricular tachycardia, Wolff-Parkinson-White syndrome or anyone younger than 50 years with a pacemaker or implantable defibrillator?

3. Preparticipation Physical Evaluation Form required for student athletes; certification statement.

- a. The State Department of Education and the State Department of Health shall set forth guidance to both public and private schools and require that prior to the participation of any student enrolled in grades -kindergarten to 12 on a school and/or community organization sponsored interscholastic or intramural athletic team or squad, the student shall have a physical examination using the “Preparticipation Physical Evaluation” form developed jointly by the American Academy of Family Physicians, American Academy of Pediatrics, American College of Sports Medicine, American Medical Society for Sports Medicine, American Orthopaedic Society for Sports Medicine, and American Osteopathic Academy of Sports Medicine and the American Heart Association’s 14 point screening for heart disease in the young. The Preparticipation Physical Evaluation form shall include the History and Physical Examination components, and the additional questions required pursuant to section 2 subsection a. of this act. The Preparticipation Physical Evaluation form shall also include a certification statement, to be signed by the registered, licensed, and certified health care professional defined as physician, advanced practice nurse, or physician assistant (MD, DO, PA, or APN/NP) who performed the physical examination, attesting to the completion of the current professional development module established pursuant to subsection a. of section 4 of this act.
- b. The State Department of Health shall create a single form to be utilized in all PPE’s statewide.
- c. The physical examination required by subsection a. This section shall be conducted within 6 weeks to the first day of official practice in an athletic season and shall be conducted by a registered, licensed, and certified health care professional defined as physician, advanced practice nurse, or physician assistant (MD, DO, PA, or APN/NP) . All PPE must include the following features and be updated in accordance with the PPE Monograph developed jointly by the American Academy of Family Physicians, American Academy of Pediatrics, American College of Sports Medicine, American Medical Society for Sports Medicine, American Orthopaedic Society for Sports Medicine, and American Osteopathic Academy of Sports Medicine and the American Heart Association’s 14 point screening for heart disease in the young.
 - i. (1) been advised by a registered, licensed, and certified health care professional defined as physician, advanced practice nurse, or physician assistant (MD, DO, PA, or APN/NP) not to participate in a sport;
 - ii. (2) sustained a concussion, been unconscious or lost memory from a blow to the head;

- iii. (3) broken a bone or sprained, strained, or dislocated any muscles or joints;
 - iv. (4) fainted or blacked out;
 - v. (5) experienced chest pains, shortness of breath, or heart racing;
 - vi. (6) had a recent history of fatigue and unusual tiredness;
 - vii. (7) been hospitalized, visited an emergency room, or had a significant medical illness;
 - viii. (8) started or stopped taking any over the counter or prescribed medications; or
 - ix. (9) had a sudden death in the family, or whether any member of the student's family under the age of 50 has had a heart attack or heart trouble, and.
 - x. (10) asked specifically the new 4 questions listed in the subsection 2a.i.2 regarding the heart health history during cardiac screening in well-child visit and/or PPE.
- d. A board of education of a public school district and the governing board or chief school administrator of a nonpublic school shall not permit a student enrolled in grades -kindergarten to 12 to participate on a school and/or community based organization sponsored interscholastic or intramural athletic team or squad unless the student has a completed a Preparticipation Physical Evaluation form and, if applicable, a completed health history update questionnaire as required by subsections a. and b. of this section.

4. Childhood Cardiac Screening (CCS) “[State name:] Childhood Cardiac Screening Professional Development Training” establishment.

- a. The Commissioners of Education and Health shall establish a Childhood Cardiac Screening professional development module to increase the assessment skills of those health care practitioners who perform well-child physical examinations and screenings. For this purpose, the Commissioners of Education and Health shall either develop a module adhering to requirements in subsection b. of section 4 of this act, or adopt the module created by the New Jersey Commissioners of Education and Health in consultation with the New Jersey Chapter of the American Academy of Pediatrics, the New Jersey Academy of Family Physicians, the American Heart Association, and the New Jersey Chapter of the American College of Cardiology.
- b. If the Commissioners of Education and Health choose to develop a new module they shall, in consultation with the state chapter of the American Academy of Pediatrics, the state chapter of the Academy of Family Physicians, the American Heart Association, and the state chapter of the American College of Cardiology, shall develop, by the (enter time here) school year, a Childhood Cardiac Screening professional development module to increase the assessment skills of those health care practitioners who perform well child physical examinations and screenings. The module shall include, but need not be limited to, the following:

- i. (1) how to complete and review a detailed medical history with an emphasis on cardiovascular family history and personal reports of symptoms;
 - ii. (2) identifying symptoms of sudden cardiac arrest that may require follow up with a cardiologist;
 - iii. (3) recognizing normal structural changes of the athletic heart;
 - iv. (4) recognizing prodromal symptoms that precede sudden cardiac arrest;
 - v. (5) performing the cardiovascular physical examination;
 - vi. (6) reviewing the major etiologies of sudden unexplained cardiac death with an emphasis on structural abnormalities and acquired conditions; and
 - vii. (7) when to refer a student to a cardiologist for further assessment.
- c. The module shall be posted on the websites of the Department of Education and the Dept of Health and links made available to the American Academy of Pediatrics, the (Enter Name of State Dept of health) Academy of Family Physicians, the American Heart Association, the American College of Cardiology, the Athletic Trainers' Society, the State Board of Medical Examiners, Board of Nursing, and the Society of Physician Assistants.
- d. Data Collection:
 - i. Those completing the CCS will be kept in a database to ensure all providers have successfully completed the required modules. Data must be held for 10 years.
 - ii. An annual review containing the total number of exams completed and if a referral to cardiology was made must be maintained and reported annually to the state department of health.
 - iii. State department of health will report annually on the outcomes from this legislation and make the report available to the public on its website or by request in writing from the public.

5. Educational Pamphlet development and distribution plan.

- a. The Commissioner of Education, in consultation with the Commissioner of Health, the American Heart Association, and the American Academy of Pediatrics, shall develop a pamphlet that provides information about the disease that can cause sudden cardiac arrest to children and their parents. The pamphlet shall include an explanation of sudden cardiac arrest, its incidence, a description of early warning signs, and an overview of the options that are privately available to screen for cardiac conditions that may lead to sudden cardiac arrest, including a statement about the limitations of these options.
- b. The commissioner shall distribute the pamphlet, at no charge, to all school districts in the State. The commissioner shall update the pamphlet as necessary, and shall make additional copies available to nonpublic schools upon request.
- c. In the 202_-202_ through the(TIME PERIOD) school years, each school district shall distribute the pamphlet to the parents or guardians of students participating in school sports.

- d. In the (TIME PERIOD --) school year and in each subsequent school year, a school district shall distribute the pamphlet to each student and to their parents or guardians, as part of the student's preparticipation physical examination and completion of athletic permission forms. A student and their parent or guardian shall certify in writing that they received and reviewed the pamphlet.

6. Childhood Cardiac Screening professional development module; completion, retention and recertification.

- a. A registered, licensed, and certified health care professional defined as physician, advanced practice nurse, or physician assistant (MD, DO, PA, or APN/NP) who performs annual physical examinations of children 19 years of age or younger, including examinations prior to the student's participation in a school and/or community based organization sponsored interscholastic or intramural athletic team or squad as required pursuant to subsection a. of section 3 of this act, shall complete a Childhood Cardiac Screening professional development module established pursuant to subsection a. of section 4 of this act and read the pamphlet developed pursuant to section 5 of this act every four years.
- b. A contract between a school district and a school physician shall include a statement of assurance that the school physician has completed the Childhood Cardiac Screening professional development module established pursuant to section 4 of this act and has read the pamphlet developed pursuant to section 5 of this act within the past four years.
- c. A registered, licensed, and certified health care professional defined as physician, advanced practice nurse, or physician assistant (MD, DO, PA, or APN/NP) who completes the Childhood Cardiac Screening professional development module as required pursuant to subsection a. of this section shall retain on file at that person's professional office a hard copy of the certificate of completion of the module. The hard copy of the certificate of completion of the module shall be made available upon request.
- d. Upon every renewal of a certification, biennial registration, or renewal of a license by a healthcare professional defined as physician, advanced practice nurse, or physician assistant (MD, DO, PA, or APN/NP) who performs annual physical examinations of children 19 years of age or younger shall attest to the completion of the module within the past four years to the Board of Medical Examiners or the Board of Nursing, as appropriate. An application for renewal of a certification, biennial registration, or renewal of a license shall include a check box for attestation regarding compliance with subsection a. of this section for a health care professional defined as physician, advanced practice nurse, or physician assistant (MD, DO, PA, or APN/NP) who performs annual physical examinations of children 19 years of age or younger or athletic pre-participation physical examinations.
- e. Upon performing a pre-participation physical examination required by subsection a. of section 3 of this act, the physician, advanced practice nurse, or physician assistant shall sign the certification statement on the Preparticipation Physical

Evaluation form required pursuant to subsection a. of section 3 of this act attesting to the completion of the module. The board of education of a public school district and the governing board or chief school administrator of a nonpublic school shall retain the original signed statement to attest to the qualification of the health care practitioner to perform the physical examination required by subsection a. of section 3 of this act.

7. Enforcement.

- a. All registered, licensed, and certified health care professional defined as physician, advanced practice nurse, or physician assistant (MD, DO, PA, or APN/NP) referenced in this act, including those performing annual well-child physical examinations, pre-participation physical examinations, and school health practitioners, could be subject to a fine of starting at - \$5000 and in addition fine of \$1000 per child they examined if found not to have the certificate of completion for the Childhood Cardiac Screening module in their professional office or available upon request, as required by subsection c. of section 6 of this act.
- b. All licensed health professionals referenced in this act who are found not to have completed the Childhood Cardiac Screening module established pursuant to subsection a. of section 4 of this act or read the Educational pamphlet developed pursuant to subsection a. section 5 of this act within the past three years shall be subject to professional discipline, as determined appropriate by the practitioner's professional organization.
- c. Registered, licensed and certified health care professional defined as physician, advanced practice nurse, or physician assistant (MD, DO, PA, or APN/NP) who falsely certify to having completed the Childhood Cardiac Screening module established pursuant to subsection a. of section 4 of this act or read the Sudden Cardiac Death pamphlet developed pursuant to subsection a. section 5 of this act in any setting, including to their professional organizations, on contracts, on pre-participation forms, or in any other setting, may be prosecuted for a misdemeanor.
- d. Medicaid shall not reimburse any registered, licensed, and certified health care professional defined as physician, advanced practice nurse, or physician assistant (MD, DO, PA, or APN/NP) for an annual well-child physical examination or an athletic pre-participation physical examination unless they have completed the Childhood Cardiac Screening module established pursuant to subsection a. of section 4 of this act and read the Sudden Cardiac Death pamphlet developed pursuant to subsection a. of section 5 of this act.

8. Regulations.

- a. The Director of the Division of Consumer Affairs in the Department of Law and Public Safety and the State Board of Education, pursuant to the "Administrative Procedure Act" and in consultation with the Commissioner of Health, shall adopt rules and regulations to effectuate the purposes of this act.
- b. [Left open for individual state regulatory language]

9. This act shall take effect on the first day of the fourth month following the date of enactment, but the Director of the Division of Consumer Affairs, Commissioner of Health, and State Board of Education may take such anticipatory administrative action in advance thereof as shall be necessary for the implementation of this act.

STATEMENT:

The **Healthy Cardiac Monitoring Act** aims to ensure the cardiovascular health needs of all children are met, including those of student athletes in particular, and the training of registered, licensed, and certified health care professional defined as physician, advanced practice nurse, or physician assistant (MD, DO, PA, or APN/NP) to meet those needs.

First, it requires all registered, licensed, and certified health care professional defined as physician, advanced practice nurse, or physician assistant (MD, DO, PA, or APN/NP) who perform annual physical examinations of children 19 years of age or younger to evaluate childrens' cardiac health and family history using the "Preparticipation Physical Evaluation" form developed jointly by the American Academy of Family Physicians, American Academy of Pediatrics, American College of Sports Medicine, American Medical Society for Sports Medicine, American Orthopaedic Society for Sports Medicine, and American Osteopathic Academy of Sports Medicine and the American Heart Association's 14 point screening for heart disease in the young.

Second, it requires all schools to ensure that all students enrolled in grades kindergarten through twelve have a physical examination completed using the aforementioned "Preparticipation Physical Evaluation" form with specific additional questions regarding biologic heart health history during cardiac screening in well-child visits and in PPE before participation in any interscholastic or intramural athletic team. (source: published in the policy statement by the American Academy of Pediatrics (AAP) in *Pediatrics* in June 2021 and in JAMA on Aug 18, 2021).

Third, it requires the state to establish a Childhood Cardiac Screening professional development module, either a new module to be developed by the state, or the module already developed by the New Jersey Commissioners of Education and Health, New Jersey Chapter of the American Academy of Pediatrics, the New Jersey Academy of Family Physicians, the American Heart Association, and the New Jersey Chapter of the American College of Cardiology, or with alternative educational models that may be made available through public/private partnerships.

Fourth, it requires the development and distribution of a pamphlet that provides information about sudden cardiac arrest to children and their parents. The pamphlet shall include an explanation of sudden cardiac arrest, its incidence, a description of early warning signs, and an overview of the options that are privately available to screen for cardiac conditions that may lead to sudden cardiac arrest, including a statement about the limitations of these options, and shall be

distributed at least once to all children during annual physical examination, and to all students and parents during pre-participation physical examinations.

Fifth, it requires all registered, licensed, and certified health care professional defined as physician, advanced practice nurse, or physician assistant (MD, DO, PA, or APN/NP) performing annual physical examinations of children, including athletic pre-participation physical examinations, as well as all school physicians, to complete the Childhood Cardiac Screening professional development module, retain their completion certificate, and read the sudden cardiac arrest informational pamphlet every four years. It requires all applications for renewal of practice certification for the aforementioned licensed health practitioners to include a check box attesting the practitioner has completed the Childhood Cardiac Screening professional development module and read the sudden cardiac arrest informational pamphlet within the past four years.

Finally, it establishes enforcement provisions for all sections of this act. These provisions include: a fine starting at \$5000 for health practitioners plus \$1000 per child exam without license bound by this law who are not able to produce the completion certificate for the Childhood Cardiac Screening professional development module, professional discipline for practitioners who have not completed the module or read the pamphlet within the past four years, possible prosecution for a misdemeanor of practitioners found to have falsely certified that they have completed the module and read the pamphlet, and, finally, lack of Medicaid reimbursement for annual well-child physical examinations and athletic pre-participation physical examinations provided by practitioners who have not completed the module and read the pamphlet.