

CHAPTER 40

MANUAL OF STANDARDS FOR LICENSURE OF
INVALID COACH AND AMBULANCE
SERVICES

Authority

N.J.S.A. 26:2H-1 et seq. and N.J.S.A. 30:4D-6.2
et seq., specifically 30:4D-6.3 and 4.

Source and Effective Date

R.1992 d.16, effective December 6, 1991.
See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).

Executive Order No. 66(1978) Expiration Date

Chapter 40, Manual of Standards for Licensure of Invalid Coach and
Ambulance Services, expires on December 6, 1996.

Chapter Historical Note

Chapter 40, formerly Interim Rules for Abortion Facilities Receiving
Temporary Licensure, was adopted as Emergency Rule R.1974 d.215,
effective August 5, 1974. See: 6 N.J.R. 345(c). An additional rule,
concerning the reporting of abortions performed in hospitals, was
adopted as R.1974 d.316, effective November 19, 1974. See: 6 N.J.R.
345(b), 6 N.J.R. 472(b). Chapter 40 was repealed by R.1983 d.202,
effective June 6, 1983, because of superseding regulation of abortion
procedure at N.J.A.C. 8:43A-8.1. See: 15 N.J.R. 308(a), 15 N.J.R.
922(a).

Chapter 40, Manual of Standards for Licensure of Invalid Coach and
Ambulance Services, was adopted as R.1985 d.192, effective April 15,
1985. See: 16 N.J.R. 3127(a), 17 N.J.R. 919(a). Pursuant to Execu-
tive Order No. 66(1978), Chapter 40 expired on April 15, 1990 and was
adopted as new rules by R.1990 d.239, effective May 7, 1990, to expire
on May 7, 1991. See: 22 N.J.R. 595(a), 22 N.J.R. 1364(a). Subse-
quent to expiration, the Executive Order No. 66(1978) expiration date
for Chapter 40 was extended by gubernatorial waiver to January 31,
1992. See: 23 N.J.R. 2245(a). Pursuant to Executive Order No.
66(1978), Chapter 40 was readopted as R.1992 d.16. See: Source and
Effective Date.

See section annotations for specific rulemaking activity.

CHAPTER TABLE OF CONTENTS

SUBCHAPTER 1. DEFINITIONS

8:40-1.1 Definitions

SUBCHAPTER 2. AUTHORITY AND LICENSURE
PROCEDURES

8:40-2.1 Authority
8:40-2.2 Application of regulations
8:40-2.3 Special requirements for licensees providing street EMS
8:40-2.4 Licensing requirements
8:40-2.5 Exemptions from licensing requirements
8:40-2.6 Surveys
8:40-2.7 Application for licensure and/or vehicle licenses
8:40-2.8 Temporary provider permit
8:40-2.9 Full provider license
8:40-2.10 Vehicle licenses
8:40-2.11 Vehicle recognition number
8:40-2.12 Waiver
8:40-2.13 Non-transferability
8:40-2.14 Return of vehicle license
8:40-2.15 Discontinuance of vehicle use

8:40-2.16 Action against a licensee
8:40-2.17 Hearings

SUBCHAPTER 3. GENERAL REQUIREMENTS

8:40-3.1 Agency ownership
8:40-3.2 Administrator required
8:40-3.3 Standard operating procedures
8:40-3.4 Business locations
8:40-3.5 Report of unusual occurrences
8:40-3.6 Advertising restrictions
8:40-3.7 Minimum personnel requirements
8:40-3.8 Personnel files required
8:40-3.9 Maintenance of records
8:40-3.10 General vehicle requirements
8:40-3.11 Motor vehicle chassis, body and components
8:40-3.12 Vehicle heater/air conditioner
8:40-3.13 Restrictions on carbon monoxide concentrations
8:40-3.14 Sanitation requirements
8:40-3.15 Required insurance coverage
8:40-3.16 Pneumatic testing required
8:40-3.17 Biomedical equipment testing required
8:40-3.18 Physical behavioral restraints

SUBCHAPTER 4. SPECIFIC INVALID COACH
REQUIREMENTS

8:40-4.1 Patient restrictions
8:40-4.2 General vehicle requirements
8:40-4.3 Patient compartment requirements and dimensions
8:40-4.4 Ramp or lift required
8:40-4.5 Vehicle markings
8:40-4.6 Emergency warning devices prohibited
8:40-4.7 Litters and stretchers prohibited
8:40-4.8 General equipment and supplies requirement
8:40-4.9 Oxygen administration devices
8:40-4.10 Safety equipment
8:40-4.11 Required staff
8:40-4.12 Required training of staff
8:40-4.13 Duties of staff
8:40-4.14 Call report
8:40-4.15 Radio communications

SUBCHAPTER 5. SPECIFIC TRANSPORT AMBULANCE
REQUIREMENTS

8:40-5.1 Restrictions on future licensing
8:40-5.2 Patient restrictions
8:40-5.3 General vehicle requirements
8:40-5.4 Patient compartment requirements
8:40-5.5 Patient compartment dimensions
8:40-5.6 Ramp or lift
8:40-5.7 Vehicle markings
8:40-5.8 Emergency warning devices
8:40-5.9 Use of emergency warning devices
8:40-5.10 General equipment and supplies requirement
8:40-5.11 Standard patient transport devices
8:40-5.12 Oxygen administration devices
8:40-5.13 Resuscitation devices
8:40-5.14 Aspirator/suction devices
8:40-5.15 Airway maintenance supplies
8:40-5.16 External cardiac compression support
8:40-5.17 Spine boards
8:40-5.18 Wound dressing and burn treatment supplies
8:40-5.19 Poison treatment supplies
8:40-5.20 Other patient care equipment
8:40-5.21 Safety equipment
8:40-5.22 Required staff
8:40-5.23 Required training of staff
8:40-5.24 Duties of staff
8:40-5.25 Call report
8:40-5.26 Radio communications

SUBCHAPTER 6. SPECIFIC EMERGENCY AMBULANCE REQUIREMENTS

- 8:40-6.1 Patient restrictions
- 8:40-6.2 General vehicle requirements
- 8:40-6.3 Patient compartment requirements
- 8:40-6.4 Patient compartment dimensions
- 8:40-6.5 Certification to Federal specifications
- 8:40-6.6 Ramp or lift
- 8:40-6.7 Vehicle markings
- 8:40-6.8 Emergency warning devices
- 8:40-6.9 Use of emergency warning devices
- 8:40-6.10 General equipment and supplies requirements
- 8:40-6.11 Standard patient transport devices
- 8:40-6.12 Special patient transport devices
- 8:40-6.13 Oxygen administration devices
- 8:40-6.14 Resuscitation devices
- 8:40-6.15 Aspirator/suction devices
- 8:40-6.16 Airway maintenance supplies
- 8:40-6.17 External cardiac compression support
- 8:40-6.18 Spine boards, orthopedic litter and splints
- 8:40-6.19 Wound dressing and burn treatment supplies
- 8:40-6.20 Obstetrical kit
- 8:40-6.21 Poison treatment supplies
- 8:40-6.22 Other patient care equipment
- 8:40-6.23 Extrication equipment
- 8:40-6.24 Safety equipment
- 8:40-6.25 Required staff
- 8:40-6.26 Required training of staff
- 8:40-6.27 Duties of staff
- 8:40-6.28 Special staff required
- 8:40-6.29 Call report
- 8:40-6.30 Radio communications
- 8:40-6.31 Disaster planning required

SUBCHAPTER 7. SPECIFIC HELICOPTER AMBULANCE REQUIREMENTS

- 8:40-7.1 Patient restrictions
- 8:40-7.2 General helicopter requirements
- 8:40-7.3 Patient compartment requirements
- 8:40-7.4 Patient compartment dimensions
- 8:40-7.5 Certification to manufacturer/FAA standards
- 8:40-7.6 Special lighting required
- 8:40-7.7 General equipment and supplies requirement
- 8:40-7.8 Standard patient transport devices
- 8:40-7.9 Oxygen administration devices
- 8:40-7.10 Resuscitation devices
- 8:40-7.11 Aspirator/suction devices
- 8:40-7.12 Airway maintenance supplies
- 8:40-7.13 External cardiac compression support
- 8:40-7.14 Wound dressing and burn treatment supplies
- 8:40-7.15 Obstetrical kit
- 8:40-7.16 Other patient care equipment
- 8:40-7.17 Required staff
- 8:40-7.18 Required training of staff
- 8:40-7.19 Duties of staff
- 8:40-7.20 Call report
- 8:40-7.21 Radio communications
- 8:40-7.22 Special prohibitions
- 8:40-7.23 through 8:40-7.25 (Reserved)

APPENDIX A LOCAL EMS RADIO FREQUENCY TABLE

SUBCHAPTER 1. DEFINITIONS

8:40-1.1 Definitions

The following words and terms when used in this chapter shall have the following meanings unless the context clearly indicates otherwise.

“Advertising” means any information directly or indirectly issued, distributed, hand-delivered or implied through any medium and used for the purpose of promoting the service of a licensee.

“Administrator” means an individual who may be entitled administrator, captain, chief, director or otherwise. The administrator may also, but need not, be the owner of the agency.

“Advanced life support” means an advanced level of prehospital, interhospital, and emergency service care which includes basic life support functions, cardiac monitoring, cardiac defibrillation, telemetered electrocardiography, administration of antiarrhythmic agents, intravenous therapy, administration of specific medications, drugs and solutions, use of adjunctive ventilation devices, trauma care and other techniques and procedures authorized in writing by the Commissioner, as governed by N.J.S.A. 26:2K-7 et seq. and N.J.A.C. 8:41.

“Ambulance Service” means the provision of emergency or non-emergency medical care and transportation by certified trained personnel in a vehicle, including a helicopter, which is designed and equipped to provide medical care at the scene and while transporting sick and/or injured persons to or from a medical care facility or provider.

“AMD Standard” means the standard(s) promulgated by the Ambulance Manufacturers Division of the Truck Body and Equipment Association. Copies of the cited standard(s) may be purchased from that Association at Suite 1220, 5530 Wisconsin Avenue, Washington, D.C. 20015.

“Available” means ready for immediate use (pertaining to equipment); immediately accessible (pertaining to records).

“Basic life support” means a basic level of prehospital care which includes patient stabilization, airway clearance, cardiopulmonary resuscitation, hemorrhage control, initial wound care and fracture stabilization, and other techniques and procedures authorized by the Commissioner.

“Certificate of need” means a State authorized permit to construct or expand a health care facility or to institute a new health care service, in accordance with requirements at N.J.A.C. 8:33.

“Cleaning” means the removal by scrubbing and washing, as with hot water, soap or detergent, and vacuuming, of infectious agents and/or organic matter from surfaces on which and in which infectious agents may find conditions for surviving or multiplying.

“Commissioner” means the New Jersey State Commissioner of Health.

“Communicable disease” means an illness due to a specific infectious agent or its toxic products, which occurs through transmission of that agent or its toxic products from a reservoir to a susceptible host.

“Conditional vehicle permit” means a 45-day permit given to a vehicle which does not meet all licensure criteria to allow time for correction of specific non-lifethreatening deficiencies and to allow the vehicle to be used during that period.

“Crashworthy” means that supplies, equipment, oxygen systems, patient litters and wheelchairs will remain firmly in place during a serious accident or vehicle rollover. Crashworthy retention systems may not incorporate rubber straps or Velcro® closures. Crashworthy retention systems for some items are covered by specific Federal standards, as noted in this chapter. The Department’s test for crashworthiness of other retention systems is whether the item can be removed from place without unlatching or unbuckling the retention system.

“Department” means the New Jersey State Department of Health.

“Disinfection” means the killing of infectious agents outside the body, or organisms transmitting such agents, by chemical and physical means, directly applied.

“Emergency” means an individual’s perceived need for immediate medical care in order to prevent death or aggravation of physiological or psychological illness or injury.

“Emergency medical technician-ambulance (EMT-A)” means an individual trained and currently certified or recognized by the Commissioner, in accordance with the United States Department of Transportation EMT-A training course, as outlined in the standards established by the Federal Highway Traffic Safety Act of 1966, 23 U.S.C. 401 et seq. (amended), to deliver basic life support services, and who has completed the national standard curriculum, as published by the United States Department of Transportation for Emergency Medical Technician Ambulance.

“FAR” means the Federal Aviation Regulations.

“FCC” means the Federal Communications Commission.

“Federal Specification KKK-A-1822” means the specification and amendments thereto in force at the time of vehicle manufacture and entitled “Federal Specification, Ambulance, Emergency Medical Care Surface Vehicle KKK-A-1822” as published by the Federal Supply Service of the U.S. General Services Administration. Copies of the specification may be obtained by contacting:

General Services Administration
Specification Section (3FBP-W), Room 6654
7th and D Streets, SW
Washington, D.C. 20407

“FMVSS” means Federal Motor Vehicle Safety Standard(s) promulgated under 49 CFR 571. Consult Superintendent of Documents, Washington, D.C., for copies of the cited standards.

“Health care facility” means a facility so defined in the Health Care Facilities Planning Act, N.J.S.A. 26:2H-1 et seq.

“Helicopter ambulance service” means those services which provide aeromedical emergency care and transportation by rotowing aircraft and which are either provided to patients located in New Jersey by out-of-State providers or are provided by the New Jersey State Police.

“Impervious” means not allowing liquids or dirt to penetrate the surface of the material.

“Invalid coach service” means the provision of non-emergency health care transportation, by certified trained personnel, for sick, infirm or otherwise disabled persons who are under the care and supervision of a physician, or other recognized health care provider, and whose medical condition is not of sufficient magnitude or gravity to require transportation by ambulance, but does require transportation from place to place for medical care, and whose use of an alternate form of transportation, such as taxicab, bus, other public conveyance or private vehicle, might create a serious risk to life and health.

“In-service” means the presence of the vehicle at a health care facility or other place of medical care or picking up, transporting, or discharging any patient.

“Inter-hospital care” means those emergency medical services rendered by emergency or transport ambulances and their crews to patients before and during transportation between emergency treatment facilities, and upon arrival within those facilities.

“International symbol of access for the handicapped” means the outline form of a person in a wheelchair.

“Invalid Coach Service” means the provision of non-emergency health care transportation, by certified trained personnel, for sick, infirm or otherwise disabled persons who are under the care and supervision of a physician and whose medical condition is not of sufficient magnitude or gravity to require transportation by ambulance, but does require transportation from place to place for medical care, and whose use of an alternate form of transportation, such as taxicab, bus, other public conveyance or private vehicle, might create a serious risk to life and health.

“JEMS communication plan” means the State of New Jersey Emergency Medical Services Communication Plan published by the Department. Single copies of the plan are available, at no charge, from EMS, CN 364, Trenton, NJ 08625-0364.

“Licensee” means any person, public or private institution, agency or business concern granted a license under this chapter by the Department.

“Paramedic” means a person who is trained in advanced life support services and who is certified as a mobile intensive care paramedic by the commissioner (under N.J.S.A. 26:2K-7 et seq.) to render advanced life support services as part of a mobile intensive care unit.

“Patient” means any person utilizing services licensed under this chapter, including an individual who is sick, injured, wounded, diseased, or otherwise incapacitated or helpless, and excluding deceased individuals being transported from or between private or public institutions, homes or cemeteries, and individuals declared dead prior to the time an ambulance is called for assistance.

“Payment for services” means monies received for providing, or promising to provide, patient care, including, but not limited to, fee-for-service, subscription plans, contracts, or salaries for staff members, but excluding receipt of funds which may be donated to a volunteer first aid or rescue squad by a municipality in the amount of or less than the donation limit prescribed by law.

“Pneumatic Testing Guide” means the Pneumatic Testing Guide (for Pre-Hospital Respiratory Equipment) published by the Department. Single copies are available, at no charge, from EMS, CN 364, Trenton, NJ 08625.

“Provide” means furnishing, conducting, maintaining, advertising, or in any way engaging in or professing to engage in a service licensable under this chapter.

“Provider” means any person, public or private institution, agency or business concern which is providing Invalid Coach Service and/or Ambulance Service.

“Staff” means anyone working on the vehicle, including the medical crew and the driver, who is providing care to the patient or operating the vehicle.

“Star of Life” means the symbol described in certification of registration number 1,058,022 which the United States Commissioner of Patents and Trademarks has issued to the National Highway Traffic Safety Administration.

“SAE Standard” means the standard(s) promulgated by the Society of Automotive Engineers. Copies of the cited standard(s) may be purchased from that Society at 400 Commonwealth Drive, Warrendale, PA 15096.

“Street EMS” means the provision of primary emergency care at the basic life support level, to a municipality or municipalities in accordance with the intent of N.J.S.A. 27:5F-18 et seq.

“Valid” means current, up-to-date, in effect.

“Volunteer first aid, rescue or ambulance squad” means a first aid, rescue or ambulance squad which provides emergency medical services without receiving payment for those services.

Amended by R.1992 d.16, effective January 6, 1992.
See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).

Definitions added for advanced life support, basic life support, certificate of need, conditional vehicle permit, crashworthy, emergency, EMT-A, impervious, in-service, inter-hospital care, paramedic, payment for services, staff, volunteer first aid, rescue or ambulance squad; definition deleted for ANSI standard; amended for invalid coach service, patient and pneumatic testing guide.

Amended by R.1993 d.594, effective November 15, 1993.
See: 25 N.J.R. 2663(a), 25 N.J.R. 5163(a).

SUBCHAPTER 2. AUTHORITY AND LICENSURE PROCEDURES

8:40-2.1 Authority

(a) According to N.J.S.A. 30:4D-6.2 et seq., the Commissioner of Health is required to adopt rules, regulations and administrative orders which regulate the provision of Invalid Coach Service.

(b) According to N.J.S.A. 26:2H-1 et seq., the Commissioner of Health is authorized to adopt rules, regulations and administrative orders which regulate the provision of Invalid Coach and Ambulance Service.

8:40-2.2 Application of regulations

(a) This chapter shall apply to all Ambulance and Invalid Coach companies providing service in New Jersey, unless exempted under N.J.A.C. 8:40-2.5.

(b) Subchapters 1 through 4 of this chapter apply to Invalid Coach Services.

(c) Subchapters 1 through 3 and subchapter 5 of this chapter apply to Transport Ambulance Services.

(d) Subchapters 1 through 3 and subchapter 6 of this chapter apply to Emergency Ambulance Services.

(e) Subchapters 1 through 3 and subchapter 7 of this chapter apply to Helicopter Ambulance Services.

Amended by R.1992 d.16, effective January 6, 1992.
See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).
Reference to exemption added at (a).

8:40-2.3 Special requirements for licensees providing street EMS

(a) Licensed services and municipalities providing emergency ambulance services ("street EMS") cannot discontinue services without sending written notification to the Department at least 60 days prior to the planned closure date.

(b) No licensee providing "street EMS" shall fail to respond to an emergency call or refuse to provide emergency treatment and transportation to any person because of that person's race, sex, creed, national origin, sexual preference, age, disability, medical condition, or ability to pay.

Amended by R.1992 d.16, effective January 6, 1992.

See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).

Text added at (c) to require 90 days' notice of closure.

Amended by R.1993 d.594, effective November 15, 1993.

See: 25 N.J.R. 2663(a), 25 N.J.R. 5163(a).

8:40-2.4 Licensing requirements

(a) No person, public or private institution, agency or business concern shall provide Invalid Coach Service or Ambulance Service until the provider, and each of the provider's vehicle(s), is licensed to do so by the New Jersey State Department of Health.

(b) Provider licensing shall consist of two types of licenses:

1. A six-month temporary provider permit issued by the Department which authorizes the licensee to provide one or both of the following:

- i. Invalid Coach Services.
- ii. Ambulance Services.

2. A full provider license issued by the Department which authorizes the licensee to provide one or both of the following:

- i. Invalid Coach Services.
- ii. Ambulance Services.

(c) Vehicle licensing shall consist of a 45-day conditional permit or a license issued by the Department for a specific vehicle which authorizes the licensee to utilize the vehicle to provide:

- 1. Invalid Coach Services; or
- 2. Transport Ambulance Services; or
- 3. Emergency Ambulance Services; or
- 4. Helicopter Ambulance Services.

(d) Vehicles licensed to provide Invalid Coach Services may be utilized to provide only that service.

(e) Vehicles licensed to provide Transport Ambulance Service may be utilized to provide Invalid Coach Service provided:

1. The provider is licensed to provide Invalid Coach Service, and

2. The vehicle, equipment, supplies and staffing comply with the requirements for Transport Ambulance Service.

(f) Vehicles licensed to provide Emergency Ambulance Service may be utilized to provide Invalid Coach Service provided:

1. The provider is licensed to provide Invalid Coach Service, and

2. The vehicle, equipment, supplies and staffing comply with the requirements for Emergency Ambulance Service.

(g) Vehicles licensed to provide Emergency Ambulance Service may be utilized to provide Transport Ambulance Service provided the vehicle, equipment, supplies and staffing continue to comply with the requirements for Emergency Ambulance Service, as set forth in N.J.A.C. 8:40-1, 2, 3 and 6.

(h) Vehicles licensed to provide Helicopter Ambulance Service may be utilized to provide non-health care services provided the vehicle, equipment, supplies and staffing comply with the requirements of this chapter when the aircraft is used to provide Helicopter Ambulance Service.

(i) At the discretion of the authorized representative of the Department, a 45-day conditional permit may be issued to vehicles which do not meet full licensure criteria, but whose deficiencies do not constitute a threat to patient or staff safety. A conditional permit may be considered only for a vehicle upon initial presentation for licensure; vehicles undergoing relicensure are ineligible for a conditional permit.

Amended by R.1992 d.16, effective January 6, 1992.

See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).

Six-month and 45-day permit requirements added.

8:40-2.5 Exemptions from licensing requirements

(a) In accordance with the provisions of N.J.S.A. 30:4D-6.2 et seq. and N.J.S.A. 26:2H-1 et seq. this chapter shall not apply to Invalid Coach Services or Ambulance Services provided by volunteer first aid, rescue and ambulance squads as defined in the "New Jersey Highway Safety Act of 1987" (N.J.S.A. 27:5F-18 et seq.).

(b) This chapter shall not apply to providers which are based in other states and which provide service in New Jersey when the provider is:

- 1. Transporting a patient through New Jersey from an out-of-State location to another out-of-State location; or
- 2. Transporting a patient from an out-of-State location to a New Jersey location and returning that same

patient to an out-of-State location on the same calendar day; or

3. Transporting a patient on a one-way trip from an out-of-State location to a New Jersey location.

(c) The provisions of this chapter will not apply to services provided directly by an agency of the government of the United States. Providers holding government contracts do not meet this criterion and are not exempt from licensure.

(d) In order to demonstrate compliance with the standards contained in this chapter, exempt providers may voluntarily apply for:

1. Approval of vehicle(s) and equipment, or
2. Certification of vehicle(s), equipment and personnel.

Amended by R.1992 d.16, effective January 6, 1992.
See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).

Reference updated in (a); exemptions specified further in (c) and (d).

8:40-2.6 Surveys

(a) Authorized representatives of the Department shall conduct surveys to determine compliance with this chapter.

(b) Survey visits may be made at any time to any location used or occupied by the licensee.

(c) In recognition of the necessity to determine compliance with all sections of this chapter, authorized representatives of the Department may survey a vehicle whenever it is in-service provided that no representative of the Department shall stop any vehicle when it is traveling on a public road.

(d) In recognition of the necessity to determine compliance with the vehicle and other related standards of this chapter, authorized representatives of the Department may survey an out-of-service vehicle at any time.

(e) Survey visits shall, at the discretion of authorized representatives of the Department, include:

1. A review of all required records;
2. Conferences with staff and patients;
3. Audit of business locations, vehicles, equipment and qualifications of staff;
4. Riding within a vehicle and/or accompanying staff providing services.

(f) The licensee and its employees shall permit authorized representatives of the Department to make such surveys as the Department deems necessary.

(g) The Department shall notify the licensee in writing of any survey results (positive or negative).

Amended by R.1992 d.16, effective January 6, 1992.
See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).

Definition of inservice deleted; notice of survey added.

8:40-2.7 Application for licensure and/or vehicle licenses

(a) Any person, public or private institution, agency, or business concern desiring to be licensed or relicensed to operate Invalid Coach Services and/or Ambulance Services or to secure a vehicle license shall apply to the Commissioner on forms prescribed by the Department. Forms are available from:

Office of Emergency Medical Services
New Jersey State Department of Health
CN 367
Trenton, NJ 08625-0367

(b) The Department shall charge an annual non-refundable fee of \$50.00 for the filing of an application to license, or relicense, a provider. Services receiving two-year licenses will be charged an amount twice the annual fee.

(c) The Department shall charge an annual non-refundable fee of \$20.00 for the filing of an application to license, or relicense, each vehicle. Vehicles receiving two-year licenses will be charged an amount twice the annual fee.

(d) Beginning with licensure year 1993, services with names beginning with the letters A-L will be issued two-year licenses. For licensure year 1993, services with names beginning with the letters M-Z will be issued one-year licenses. Beginning with licensure year 1994, services with names beginning with the letters M-Z will be issued two-year licenses. Subsequent applications for relicensure will be on a two-year cycle by alphabetical grouping, although services may be resurveyed annually for quality assurance purposes. New services which apply for licensure mid-cycle will be issued a license for the appropriate alphabetical timeframe and will be charged the applicable one-year or two-year fee.

(e) Each set of application(s) submitted to the Department shall be accompanied by a single check in the correct amount made payable to "New Jersey Department of Health."

(f) Governmental entities, such as municipalities and State agencies, are exempt from paying the application fees listed in (b) and (c) above, but must file the appropriate applications.

(g) Upon receipt of the required application forms, authorized representatives of the Department shall survey (or resurvey) the licensee and/or the vehicles to determine compliance with this chapter.

(h) The Department shall notify the licensee in writing of any deficiencies found during surveys.

(i) Should an applicant submit an incomplete application, no license shall be issued. Incomplete applications shall be returned to the applicant with no action taken, pending proper completion.

(j) No application will be processed from an applicant if the proposed trade name of the company duplicates or is essentially similar to a currently licensed company's trade name, or to the trade name of a company which has an application pending before the Department.

Amended by R.1992 d.16, effective January 6, 1992.

See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).

Two-year license provisions added; exemption added at (f).

Amended by R.1993 d.594, effective November 15, 1993.

See: 25 N.J.R. 2663(a), 25 N.J.R. 5163(a).

8:40-2.8 Temporary provider permit

Upon finding that the licensee is in compliance with this chapter, the Department shall issue new applicants a temporary provider permit valid for six months. The permit shall be prominently displayed at the licensee's principal place of business.

8:40-2.9 Full provider license

(a) The licensure year extends from January 1 to December 31 of the same calendar year. Beginning in licensure year 1993, two-year licensing will be phased in, as described in N.J.A.C. 8:40-2.7(d).

(b) A full license, valid for a period of 12 months or less, until December 31, 1992, or 24 months or less after January 1, 1993, shall be issued on expiration of the temporary permit, if periodic surveys by the Department have determined that the licensee is in compliance with this chapter.

(c) The full license, unless sooner suspended or revoked, shall be renewed prior to its expiration date, as noted on the license, contingent upon the licensee:

1. Applying for license renewal; and
2. Continuing to comply with this chapter as determined by periodic surveys by the Department.

(d) The full license shall be prominently displayed at the licensee's principal place of business.

Amended by R.1992 d.16, effective January 6, 1992.

See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).

Two-year license provisions added.

8:40-2.10 Vehicle licenses

(a) Upon finding that the vehicle and required equipment are in compliance with this chapter, the Department shall issue a license or permit for the vehicle. Except as provided in N.J.A.C. 8:40-2.4(c), the license or permit shall be valid

for the same period as the temporary provider permit or full license.

(b) The original vehicle license or permit shall be affixed to the lower right corner of the window of the rear (curb side) door into the patient compartment of the vehicle for which the license or permit was issued. The information on the license or permit shall be readable from outside the vehicle.

Amended by R.1992 d.16, effective January 6, 1992.

See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).

License display specified.

8:40-2.11 Vehicle recognition number

In recognition of the need for the public to be able to identify specific vehicles licensed by the Department and to avoid confusion between firms with similar appearing names, each vehicle shall have a vehicle recognition number. The licensee shall, with the approval of the Department, permanently assign a unique non-duplicated one, two, three or four-digit Arabic number, or a combination of letters and Arabic numbers not to exceed four characters, to each vehicle.

Amended by R.1992 d.16, effective January 6, 1992.

See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).

Field of possible numbers expanded.

8:40-2.12 Waiver

(a) The Commissioner or his or her designee may grant a waiver of parts of this chapter if, in his or her opinion, such a waiver would not:

1. Endanger the life, safety or health of any person who utilizes the service, or
2. Adversely affect the provision of the service.

(b) A licensee seeking a waiver of part(s) of this chapter shall apply in writing to:

Office of Emergency Medical Services
New Jersey State Department of Health
CN 367
Trenton, NJ 08625-0367

Amended by R.1992 d.16, effective January 6, 1992.

See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).

Address changed.

Amended by R.1993 d.594, effective November 15, 1993.

See: 25 N.J.R. 2663(a), 25 N.J.R. 5163(a).

8:40-2.13 Non-transferability

No permit or license issued by the Department under this chapter is assignable or transferable. Any permit or license shall be immediately void if the ownership of the agency and/or vehicle changes.

Amended by R.1992 d.16, effective January 6, 1992.

See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).

Decal deleted.

8:40-2.14 Return of vehicle license

(a) The licensee shall return to the Department the vehicle license:

1. Concurrent with the surrender or termination of its provider license; or
2. When the vehicle is sold or becomes unusable.

Amended by R.1992 d.16, effective January 6, 1992.
See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).
Decal deleted.

8:40-2.15 Discontinuance of vehicle use

(a) In order to protect the public health, safety and welfare, an authorized representative of the Department is empowered to place an "Out-of-Service" notice on any vehicle licensed under this chapter when a survey has determined that the vehicle, equipment, or staffing poses an imminent threat to the health, safety or welfare of the public or to patients using the service.

(b) For the purpose of this section, imminent threat may include, but is not limited to:

1. Serious and apparent automotive defects such as faulty brakes, exhaust system or tires, or
2. Serious and apparent equipment defects such as absent or faulty oxygen, resuscitation or aspiration equipment.

(c) The licensee shall immediately cease to utilize the vehicle to provide any services authorized under this chapter if an "Out-of-Service" notice is placed on the vehicle. The licensee shall ensure that the "Out-of-Service" notice is not removed from the vehicle, except as provided in (d) below. The licensee shall have the right to appeal to the Commissioner for a hearing concerning the placement of the "Out-of-Service" notice.

(d) An "Out-of-Service" notice shall only be removed by an authorized representative of the Department upon a finding that the applicable deficiencies have been corrected. Correction of deficiencies could include, but is not limited to:

1. The vehicle has been repaired or has successfully passed all tests conducted by the N.J. Division of Motor Vehicles when there was an apparent automotive defect, or
2. The equipment has been repaired or replaced when there was an apparent equipment defect.

(e) The licensee shall notify the Office of Emergency Medical Services by telephone when it believes that a deficiency has been corrected. The Office of Emergency Medical Services will make arrangements to reinspect the vehicle in the field within five business days or at the Office of Emergency Medical Services within two business days. The "Out-of-Service" notice will only be removed upon a finding that the applicable deficiencies have been corrected, as in (d) above.

Amended by R.1992 d.16, effective January 6, 1992.
See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).
Notification of correction required at (e).

Case Notes

Department of Health's decision not to renew respondent's licenses to provide ambulance and invalid coach service and imposition of a \$15,000 fine upheld upon finding that respondent was using forged vehicle licenses. *Otte v. Dept of Health*, 11 N.J.A.R. 1 (1987).

8:40-2.16 Action against a licensee

(a) Violation of any of the provisions of this chapter may result in action to impose a fine or to revoke the license of the provider. (See N.J.S.A. 26:2H-13 and 26:2H-14 for authority and maximum fines.)

(b) Violations shall be considered as a single, different occurrence for each calendar day the violation occurs or remains uncorrected.

(c) If the Department determines that operational or safety deficiencies exist, it may require that all or part of the services provided under this chapter by the licensee cease. This may be done simultaneously with, or in lieu of, action to revoke licensure and/or impose a fine. The Commissioner or his designee shall notify the licensee in writing of such determination.

(d) Should the firm or the owner(s) or the administrator(s) be convicted of Medicare or Medicaid fraud, action will be taken to revoke the license of the provider.

Amended by R.1992 d.16, effective January 6, 1992.
See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).
Revocation provisions specified at (a).

Case Notes

Emergency medical technician not entitled to retain certification following guilty pleas. *Jones v. Department of Health*. 92 N.J.A.R.2d (HLT) 1.

8:40-2.17 Hearings

Except as provided in N.J.A.C. 8:40-2.15, no permit or license shall be suspended or revoked and no fine shall be imposed without affording the licensee an opportunity for a hearing. In the event an Out-of-Service notice has been placed on a vehicle pursuant to N.J.A.C. 8:40-2.15, the hearing shall be held within 10 days unless an adjournment is requested by the licensee. The procedures governing all hearings shall be in accordance with the Administrative Procedure Act N.J.S.A. 52:14B-1 et seq. and N.J.S.A. 26:2H-1 et seq. and the Uniform Administrative Rules of Practice, N.J.A.C. 1:1.

Amended by R.1992 d.16, effective January 6, 1992.
See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).
Stylistic changes.

8:40-5.22 Required staff

(a) When in-service, including any time the vehicle is used as an invalid coach, each Transport Ambulance shall be staffed by at least two persons who shall meet the requirements of N.J.A.C. 8:40-3.7 and this subchapter. All additional staff persons of the licensee shall meet the requirements of N.J.A.C. 8:40-3.7.

(b) Staff persons of a hospital or of another agency who accompany a patient need not meet the requirements of N.J.A.C. 8:40-3.7(a) and (b).

Amended by R.1992 d.16, effective January 6, 1992.
See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).
Stylistic changes.

8:40-5.23 Required training of staff

(a) Each of the required staff persons shall possess current valid certification as an Emergency Medical Technician-Ambulance, issued or recognized by the Department.

(b) Each of the required Emergency Medical Technicians-Ambulance shall possess valid current certification in cardiopulmonary resuscitation (CPR) for emergency services personnel issued by the American Heart Association (BLS-C: CPR for Healthcare Providers) or the equivalent American Red Cross course.

Amended by R.1992 d.16, effective January 6, 1992.
See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).
Certification requirements added at (b); old (b) deleted.
Amended by R.1993 d.594, effective November 15, 1993.
See: 25 N.J.R. 2663(a), 25 N.J.R. 5163(a).

8:40-5.24 Duties of staff

(a) The collective duties of the persons who staff a Transport Ambulance vehicle shall include, but are not limited to:

1. Providing prompt, efficient and effective emergency medical care to the patient(s);
2. Attending the patient(s) at all times and continually monitoring the patient's condition;
3. Assisting the patients to enter and to leave the vehicle, supervising the well-being of patients while in the vehicle, and ensuring the privacy and comfort of patients;
4. Assuring that any stretcher, wheelchair or other patient transport device is safely and properly restrained, patients are restrained and all vehicle occupants wear automotive safety belts. All wheelchair patients must be properly restrained in the wheelchair in accordance with N.J.A.C. 8:40-5.4(f)1 and 2. The staff person(s) caring for the patient need not wear a safety belt when providing essential life support such as CPR;
5. Operating the motor vehicle in a safe manner, starting and stopping the vehicle slowly and smoothly and complying with all applicable motor vehicle laws;

6. Reporting verbally to the appropriate personnel when a patient is brought to a health care facility or other place of medical care;

7. Summoning an Emergency Ambulance, and an established Mobile Intensive Care unit, if necessary for patient care;

8. Prohibiting smoking within the vehicle at all times; and

9. Entering data into and signing the required call report, when applicable.

Amended by R.1992 d.16, effective January 6, 1992.
See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).
Child restraint and data entry requirements added.

8:40-5.25 Call report

(a) A call report approved by the Department shall be completed each time a patient is transported. The call report need not be prepared by the staff assigned to the vehicle. The call report, which may be combined with another report or form, shall contain the following information typed or printed in ink:

1. The patient's name, age, sex and home address;
2. A description of the patient's condition and any observed changes;
3. A description of any care given to the patient;
4. The time when, and location where, patient was picked up and was discharged;
5. The vehicle recognition number, date, and full names of staff;
6. Whether or not emergency warning devices were used at the scene or in transit to the medical facility; and
7. Any required equipment left on/with a patient.

Amended by R.1992 d.16, effective January 6, 1992.
See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).
Department approval required for call report form.

8:40-5.26 Radio communications

(a) Any radio communications shall comply with rules and regulations of the Federal Communications Commission. The Department shall be provided with a copy of any FCC license(s) issued to the licensee.

(b) Any radio communications shall comply with the radio frequency allocation cited in Table 4 of the JEMS Communications Plan published by the Department or the appropriate table in any future revision of the JEMS plan. (The vehicle does not have to be equipped with a "JEMS radio.") Specifically, the following radio frequencies shall not be used in radio communications to, or from, Transport Ambulance vehicles:

1. Any of the UHF radio frequencies known as "Med 1" through "Med 10;"
2. Any of the VHF radio frequencies listed in Appendix A of this chapter; and
3. Any of the following radio frequencies: 155.280 MHz, 155.340 MHz, 153.785 MHz.

(c) The provisions of (b) above shall not apply if:

1. The provider was issued a Federal Communications Commission license before January 1, 1978 to use one (or more) of the cited frequencies; and
2. The provider using that same frequency(ies); and
3. Use of that frequency(ies) does not cause harmful interference to other health care providers operating in accordance with the JEMS Plan.

(d) For the purpose of this section, harmful interference is defined as:

1. A written complaint alleging radio interference from a health care provider(s) operating in accordance with the JEMS Plan; and
2. A finding by the New Jersey Office of Frequency Coordination (or, if their services are not available, the Department) that the provider's radio operations are causing harmful interference.

Amended by R.1992 d.16, effective January 6, 1992.
See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).
JEMS revisions included.

SUBCHAPTER 6. SPECIFIC EMERGENCY AMBULANCE REQUIREMENTS

8:40-6.1 Patient restrictions

(a) Emergency medical care and transportation shall be provided to a patient who:

1. Requires, or may require, pre-hospital emergency medical services, or
2. Requires, or may require, emergency inter-hospital transfer, or

(b) Health care transportation may be provided to patients who are under the supervision and care of a physician, or other recognized health care provider, and who:

1. Are ambulatory; or
2. Are wheelchair bound; or
3. Are bed or stretcher bound or who require transportation in a prone or supine position; or

4. Require constant attendance due to a medical and/or mental condition.

Amended by R.1992 d.16, effective January 6, 1992.
See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).
Aspiration and IV deleted at (a)3.

8:40-6.2 General vehicle requirements

(a) When in-service, the Emergency Ambulance vehicle shall meet the requirements of this chapter.

(b) Each vehicle used by the licensee to provide Emergency Ambulance Service shall have and display a valid Emergency Ambulance license, issued by the Department.

Amended by R.1992 d.16, effective January 6, 1992.
See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).
Decal deleted.

8:40-6.3 Patient compartment requirements

(a) The vehicle shall have a patient compartment. The patient compartment shall be separated from the driver's seating area (driver's compartment) by a bulkhead or partition, which may include a passageway.

(b) The patient compartment shall have at least two exterior doorways:

1. One doorway shall be at the rear of the vehicle; the other at the curbside of the vehicle;
2. Each doorway opening shall be at least 28 inches wide and at least 44 inches high;
3. The doorways shall not be obstructed except as permitted in N.J.A.C. 8:40-6.6(a);

4. The door(s) to each patient compartment doorway shall be capable of being opened and being used from inside the patient compartment and from the exterior of the vehicle, using a standard automotive industry door handle; and

5. There shall be a window in each door of the patient compartment. Rear windows shall be fixed, non-opening.

(c) The patient compartment shall be provided with a built-in lighting system. The lighting system shall use white or clear lenses. The lighting system shall not interfere with the driver's vision and shall be located so that no glare is reflected into the driver's eyes or line of vision.

(d) There shall be space and seating for an attendant within the patient compartment. The seat shall be at the head of the required litter and face rearward or shall be alongside the required litter. The seat shall be equipped with a safety belt.

(e) There shall be at least one aisle at least 10 inches wide next to the required wheeled litter.

6. One set of eye protection or goggles to supplement the set in the obstetrical kit;
7. Four towels;
8. At least six plastic bags in assorted sizes;
9. Twelve pairs surgeons' type latex gloves; and
10. Two sets of personnel protection isolation garments, including gowns and masks.

(b) The licensee shall provide such other equipment and supplies as may be necessary, provided no equipment or supplies shall be carried which would permit rendering of care contrary to N.J.S.A. 45:9-1 et seq. (Practice of Medicine and Surgery Act). Equipment which would permit staff to render care at the Emergency Medical Technician-Intermediate level or the Emergency Medical Technician-Defibrillator level may be carried, if the vehicle is approved to operate as part of an approved program authorized by the Commissioner.

Amended by R.1992 d.16, effective January 6, 1992.

See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).

Additional equipment required.

8:40-6.23 Extrication equipment

(a) Except as permitted in (b) below, the following minimum extrication and related equipment shall be carried on the vehicle:

1. One wrench, 12-inch size, adjustable open end;
2. One screwdriver, 12-inch size, regular blade;
3. One screwdriver, 12-inch size, Phillips type;
4. One set hacksaw, 12-inch blade capability with three wire carbide blades;
5. One pliers, 10-inch size "vise grip" ® type;
6. One hammer, five pounds with at least a 15-inch handle;
7. One fire axe, butt type, with at least a 24-inch handle;
8. One wrecking bar, at least 24-inch length (Items 6, 7 and 8 can be combined as one tool.);
9. One crow bar, at least 36-inch length with pinch point;
10. One bolt cutter with at least one and a quarter inch jaw opening;
11. One portable hydraulic set consisting of at least one hand operated four-ton or greater capacity hydraulic pump and one ton capacity spreading jaws and at least one spare pint of hydraulic fluid;
12. One shovel, pointed blade, at least 49 inches long when open (either folding or non-folding type acceptable);

13. Two manila, polypropylene, or equivalent material ropes with at least 5,400 pounds tensile strength, at least 50 feet long;

14. One set hand-operated ratchet hoist set ("come along" ® type) two-ton capacity with separate 15-foot long, two-ton capacity chain (one end with grab hook, other end with running hook);

15. A heavy rescue hydraulic tool (for example, "Jaws of Life" ®, Hurst Tool®) with associated attachments may be substituted for items 11 and 14 above;

16. Sheet metal cutting tool;

17. Two pairs safety goggles, clear;

18. Two hard hats. Bump-type or heavier;

19. Two pairs gloves, leather palm with wrist gauntlets; and

20. Two sets protective outer garments (for example, "turnout" coats and trousers).

(b) The extrication and related equipment required in (a) above need not be carried when:

1. The Ambulance does not respond to automobile, industrial or other accidents. However, Ambulances which do not carry extrication equipment may stop and render emergency medical care at an accident scene which they pass by chance; or

2. A rescue vehicle is available and:

i. Operators of the rescue vehicle agree, in writing, to provide extrication services for patients under the licensee's care;

ii. Can respond to an accident location within six minutes; and

iii. The rescue vehicle carries all of the equipment and related material required in (a) above.

Amended by R.1992 d.16, effective January 6, 1992.

See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).

Equipment added in (a) and (b)2.

8:40-6.24 Safety equipment

(a) The vehicle shall have the following minimum safety equipment:

1. Three portable red emergency reflective safety triangles or three battery-operated flashers, to be used in cases of onscene assistance or vehicle breakdown;

2. Six flares for use in assisting in aeromedical transports;

3. One flashlight, two D cell size or larger; and

4. One or two fire extinguisher(s), U.L. rated at least 1A 10BC in total. The fire extinguisher(s) shall have

either a gauge indicating it is fully charged or a current inspection tag.

(b) All vehicles which provide "street EMS" or which routinely respond to motor vehicle accidents shall be equipped with a current U.S. Department of Transportation guidebook for initial response to hazardous materials incidents, as well as a copy of the applicable local emergency operations plan (EMS Annex).

Amended by R.1992 d.16, effective January 6, 1992.
See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).
Flashers, (b) added.

8:40-6.25 Required staff

(a) When in-service, each Emergency Ambulance vehicle shall be staffed by at least two persons (including anytime the vehicle is used as an Invalid Coach) who shall meet the requirements of N.J.A.C. 8:40-3.7 and this subchapter. All additional staff persons of the licensee shall meet the requirements of N.J.A.C. 8:40-3.7.

(b) Staff persons of a hospital or of another agency who accompany a patient need not meet the requirements of N.J.A.C. 8:40-3.7(a) and (b).

8:40-6.26 Required training of staff

(a) Each of the required staff persons shall possess current valid certification as an Emergency Medical Technician-Ambulance, issued or recognized by the Department.

(b) Each of the required Emergency Medical Technicians-Ambulance shall possess valid current certification in cardiopulmonary resuscitation for emergency services personnel, issued by the American Heart Association (BLS-C: CPR for Healthcare Providers) or the equivalent American Red Cross course.

Amended by R.1992 d.16, effective January 6, 1992.
See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).
Text at (b) deleted and reserved; Text added at (c).
Amended by R.1993 d.594, effective November 15, 1993.
See: 25 N.J.R. 2663(a), 25 N.J.R. 5163(a).

8:40-6.27 Duties of staff

(a) The collective duties of the persons who staff an Emergency Ambulance vehicle shall include, but are not limited to:

1. Providing prompt, efficient and effective emergency medical care to the patient(s);
2. Attending the patient(s) at all times and continually monitoring the patient's condition;
3. If necessary, extricating the patient from confinement;
4. Assisting patients to enter and to leave the vehicle, supervising the well being of patients while in the vehicle, and ensuring the privacy and comfort of patients;

5. Assuring that any stretcher, wheelchair or other patient transport device is safely and properly restrained, patients are restrained and all vehicle occupants wear automotive safety belts. The staff person(s) caring for the patient need not wear a safety belt when providing essential life support such as CPR;

6. Operating the motor vehicle in a safe manner, starting and stopping the vehicle slowly and smoothly and complying with all applicable motor vehicle laws;

7. Reporting verbally (and when required in N.J.A.C. 8:40-6.29(b), in writing) to the appropriate personnel when a patient is brought to a health care facility or other place of medical care;

8. For seriously ill or injured patients, notifying the medical facility, prior to arrival, that special professional services and assistance will be needed;

9. Complying with applicable laws and regulations on the handling of the deceased;

10. Entering data into and signing the required call report; and

11. Prohibiting smoking within the vehicle at all times.

Amended by R.1992 d.16, effective January 6, 1992.
See: 23 N.J.R. 2566(a), 24 N.J.R. 119(a).
Restraint and non-smoking requirements added.

8:40-6.28 Special staff required

(a) When the Emergency Ambulance is utilized to provide an inter-hospital transfer of a neonatal patient, the vehicle shall be staffed by:

1. At least one of the two persons required in N.J.A.C. 8:40-6.25; and
2. Specialist staff consisting of a physician and either a nurse or a respiratory therapist, all of whom have been specially trained to care for neonatal patients.

(b) When the Emergency Ambulance is utilized to transport a patient receiving intravenous fluids and/or medications, the vehicle shall be staffed by:

1. The two persons required in N.J.A.C. 8:40-6.25; and
2. One of the following:
 - i. A physician;
 - ii. A registered professional nurse;
 - iii. A licensed Mobile Intensive Care Unit Paramedic providing medical care as part of a designated Mobile Intensive Care Program operated in accordance with N.J.S.A. 26:2K-7 et seq.; or