New Jersey

Medical Aid in Dying for the Terminally Ill Act

2023 Data Summary

Prepared by:
The Office of the Chief State Medical Examiner





Introduction

The New Jersey Medical Aid in Dying for the Terminally Ill Act (the Act) permits an attending physician to write a prescription for medication that a qualified terminally ill patient may self-administer to end their own life. The Act was enacted on April 12, 2019 and went into effect on August 1, 2019.

The Act defines "terminally ill" as "the terminal stage of an irreversibly fatal illness, disease, or condition with a prognosis, based upon reasonable medical certainty, of a life expectancy of six months or less. The Act defines an "attending physician" as a "physician who has primary responsibility for the care of a qualified terminally ill patient and treatment of the patient's terminal illness, disease, or condition."

The Act requires a qualified terminally ill patient to be a capable adult resident of New Jersey who has been diagnosed as being terminally ill by both their attending physician and a consulting physician. A qualified patient can obtain a prescription for medication to end their own life only if they have made a voluntary and informed decision. Prior to being prescribed medication to end their own life, the qualified patient must voluntarily and capably make two oral requests and one written request for the medication. The oral requests must be separated by at least 15 days. The written request must be signed and dated by the patient and witnessed by at least two people who attest that the patient is capable and acting voluntarily. One of the witnesses must be a person who is not related to the patient, entitled to any portion of the patient's estate, an owner, operator, employer, or resident of a health care facility at which the patient is receiving medical treatment, nor the patient's attending physician.

At the time of the initial oral request, the attending physician must recommend that the patient take part in consultations on alternative treatment opportunities. At the time of the second oral request, the attending physician must offer the patient the opportunity to rescind the request. At least 15 days must elapse between the initial oral request and the writing of the prescription and 48 hours must elapse between a patient signing the written request and the writing of the prescription. A consulting physician must confirm the diagnosis and that the patient is capable and acting voluntarily. If indicated, the patient may be referred to a psychiatrist, psychologist, or clinical social worker to determine whether the patient is capable.

The attending physician is required to dispense medications directly to the patient or to contact a pharmacist and transmit the prescription to the pharmacist. A pharmacist may only dispense medications directly to the patient, the attending physician, or an identified agent of the patient. Medications cannot be dispensed to the patient by mail or other form of courier service.

The Commissioner of Health requires the pharmacist who dispensed the medication to file a copy of the dispensing record no later than 30 days after dispensing the medication. The attending physician and consulting physician are required to submit documentation no later than 30 days after the qualified terminally ill patient's death. The Office of the Chief State Medical Examiner (OCSME) will document each of the forms received and create a report on an annual basis.

The required forms can be found at:

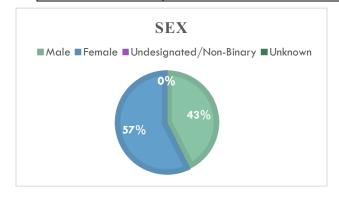
http://ocsme.nj.gov/MAiD

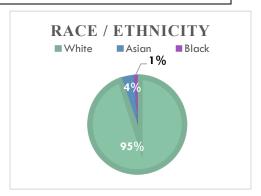
Participation Summary and Trends

From January 1, 2023 through December 31, 2023, one hundred and one (101) Medical Aid in Dying (MAiD) cases were filed with the Office of the Chief State Medical Examiner (OCSME). In addition to the ninety-one (91) cases that fully participated in the MAiD program:

- Paperwork was received for three (3) individuals who applied and received medication for the Medical Aid in Dying program but who have not been reported as deceased in New Jersey.
- Paperwork was received for thirteen (13) individuals who applied and received medication for the Medical Aid in Dying program but who passed away without the use of the medication.
- Paperwork was received for two (2) individuals who applied and received medication for the Medical Aid in Dying program but it is unknown if the individual took the medication or passed away without the use of the medication.

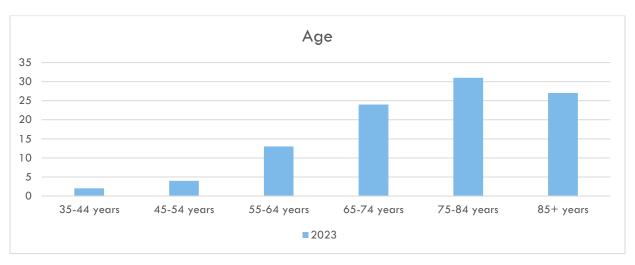
	2023 MAiD Cases		
	Number of Cases	Percentage of Total Cases	
Sex			
Male	43	43%	
Female	58	57%	
Undesignated /	-	-	
Non-binary			
Unknown	-	-	
Race/Ethnicity			
White	96	95%	
Black	1	1%	
Hispanic	-	-	
Asian	4 4%		
Native	-		
Hawaiian/Pacific		-	
Islander			
American Indian	-	-	
Other single race			
Two or more races	-	-	





	2023 MAiD Cases		
	Number of Cases	Percentage of Total Cases	
Age			
32-44 years	2	2%	
45-54 years	4	4%	
55-64 years	13	13%	
65-74 years	24	24%	
75-84 years	31	30%	
85+ years	27	27%	

Of the 101 MAiD cases, the age of patients reported were between 37 and 100 years. The mean age was 76 years, and the median age was 68.5 years.



	2023 MAiD Cases		
	Number of Cases	Percentage of Total Cases	
Marital Status			
Married	38	37%	
Widowed	34	34%	
Single	9	9%	
Divorced	19	19%	
Separated	-	-	
Domestic Partner	1	1%	



	2023 MAiD Cases		
	Number of Cases	Percentage of Total Cases	
Education			
Unknown	-	-	
8 th Grade or Less	2	2%	
9 th to 12 th Grade, No Diploma	1	1%	
High school/ GED	27	26%	
Some college credit but no	11	11%	
degree			
Associate degree	7	7%	
Bachelor's degree	22	22%	
Master's degree	16	16%	
Doctorate or Professional	15	15%	
degree			

It is recommended that when the patient takes the prescribed medication, that the patient leave a copy of the required paperwork in plain view.

- In 4% of cases, the OCSME was notified of the death via mailing-in of required forms.
- In 1% of cases, the OCSME was notified of the death via a phone call
- In 95% of cases, the OCSME was notified of the death via email.

In 2023, heart disease was the leading cause of death in the general population in New Jersey, accounting for 23.5% of all deaths, followed closely by malignancy at 20.2%. * However, for those participating in the Medical Aid in Dying program in New Jersey, malignancy is the leading underlying illness accounting for 61% of cases.

	2023 MAiD Cases		
	Number of Cases	Percentage of Total Cases	
Underlying Illness			
Malignancy	62	61%	
Neuro-degenerative disease	17	17%	
Cardiovascular disease	10	10%	
Pulmonary disease	9	9%	
Other	3	3%	

^{*}At time of this report, 2023 statewide total death certificate data is preliminary.

The New Jersey Medical Aid in Dying for the Terminally Ill Act does not make recommendations for any specific medications that should be prescribed for a patient, but it does require that the patient must be able to self-administer the medication. If medication is dispensed and for whatever reason the patient decides not to self-administer the medication, it must be disposed of by lawful means, including but not limited to, disposing of the medication in a way consistent with State and Federal guidelines concerning disposal of prescription medications, or by surrendering the medication to a prescription medication drop-off receptacle.

The Medication Dispensing record has a section to report the source of payment. All forms that were submitted noted "credit card" as the form of payment. The various medication combinations prescribed are listed below:

	2023 MAiD Cases
Medication Prescribed	
Morphine, Diazepam, Digoxin, Reglan, Haldol,	1
Propranolol	
Morphine, Diazepam, Phenobarbital, Amitriptyline,	3
Digoxin	
Morphine, Diazepam, Phenobarbital, Amitriptyline,	1
Digoxin, Zofran	
Morphine, Diazepam, Phenobarbital, Amitriptyline,	96
Digoxin, Zofran, Reglan	

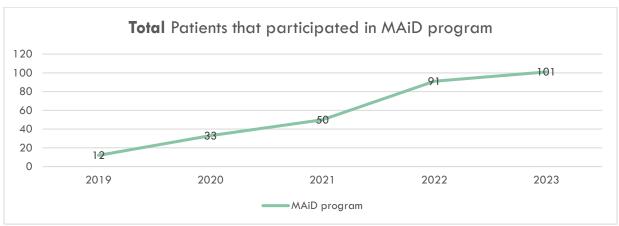
- The medications listed were taken directly from the Attending Physician Compliance forms or the Medication Dispensing Records submitted.
- Of the 101 cases in 2023, there were 11 different Attending Physicians/Prescribers.

	2023 MAiD Cases		2023 Statewide Reported Deaths*	
	Number of Cases	Percentage of Total Cases	Total Cases	Percentage of Total Cases
Disposition				
Buried	18	18%	27,108	36%
Cremated	76	75%	40,045	53%
Donation	3	3%	6	-
Entombment	2	2%	4,771	6%
Other	-	-	55	-
Removal from	2	2%	3,259	5%
State				
Unknown	-	-	7	-
County of Residence				
Atlantic	1	0.5%	2,906	4%
Bergen	5	5%	6,821	10%
Burlington	8	8%	4,305	6%
Camden	5	5%	4,958	7%
Cape May	3	3%	1,260	1%
Cumberland	2	2%	1,632	2%
Essex	8	8%	5,969	8%
Gloucester	2	2%	2,871	4%
Hudson	-	-	3,660	5%
Hunterdon	4	4%	1,009	1%
Mercer	8	8%	3,077	4%
Middlesex	7	7%	6,077	8%
Monmouth	9	9%	5,762	8%
Morris	4	4%	3,960	5%
Ocean	6	6%	7,515	10%
Passaic	6	6%	3,788	5%
Salem	2	2%	807	1%
Somerset	8	8%	2,575	3%
Sussex	5	5%	1,306	2%
Union	7	7%	3,894	5%
Warren	-	-	1,106	1%
Out of State	1	0.5%	17 (unknown)	-
Place of Death				**
Home	84	83%	23,884	32%
Other's Home	5	5%		
Nursing Home/	3	3%	13,779	18%
Long term care				
Hospice Facility	8	8%	2,454	3%
Hotel	1	1%		

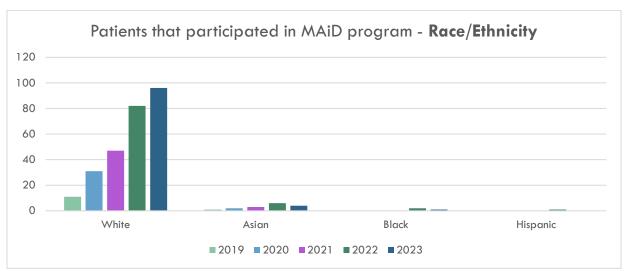
^{*}At the time of this report, 2023 statewide death certificate data is preliminary.

**41% of statewide deaths listed Hospital as Place of Death and 6% of statewide deaths listed Other as Place of Death, however, these were not categories for the Medical Aid in Dying Program in 2023.

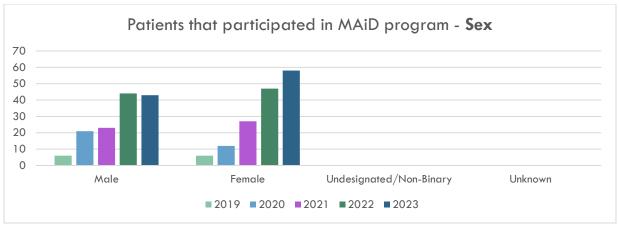
Statistics Through the Years



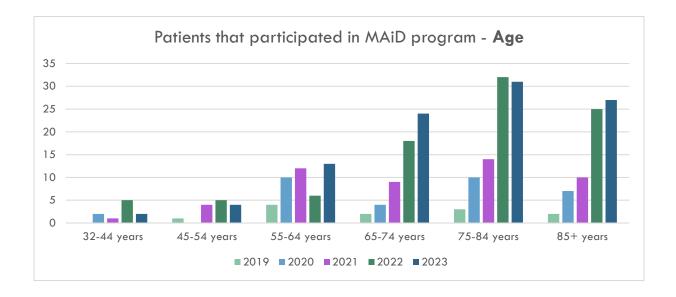
- * 2019 consisted of August through December
- * 2020 2023 consisted of January through December



^{*} Race as documented above is obtained from the death certificate of each participant. There is no documentation of an individual of any other race participating in the MAiD program.



- * Female participation in the program has continued to show a relative increase over the years.
- * Sex as documented above is obtained from the death certificate of each participant. There is no documentation of an individual of another sex participating in the MAiD program.



References

http://ocsme.nj.gov/MAiD

https://nj.gov/health/advancedirective/maid/

https://www-doh.state.nj.us/doh-shad/query/builder/mort/MortStateICD10/Count.html

NJ Dept of Health – Center for Health Statistics - https://www.nj.gov/health/chs/