

New Jersey

Medical Aid in Dying for the Terminally Ill Act

2024 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 specifically directs the State Department of Health Commissioner is to incorporate reporting of information from providers and a statistical report. The Act also states that the following Boards “shall adopt such rules and regulations as are necessary to implement the provisions of sections 1 through 20 of P.L.2019, c.59 (C.26:16-1 et seq.), including the required reporting of information to the division by healthcare professionals pursuant to section 13 of P.L.2019, c.59 (C.26:16-13)”:

- State Board of Medical Examiners
- State Board of Pharmacy
- State Board of Psychological Examiners
- State Board of Social Work Examiners

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 determined necessary, 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>

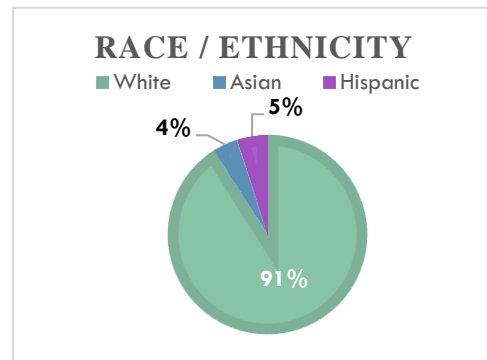
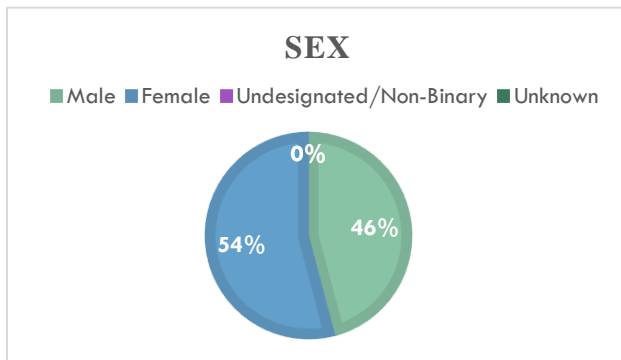
Participation Summary and Trends

From January 1, 2024 through December 31, 2024, one hundred and twenty-eight (128) Medical Aid in Dying (MAiD) cases were filed with the Office of the Chief State Medical Examiner (OCSME).

In addition to the one hundred and twenty-two (122) cases that fully participated in the MAiD program:

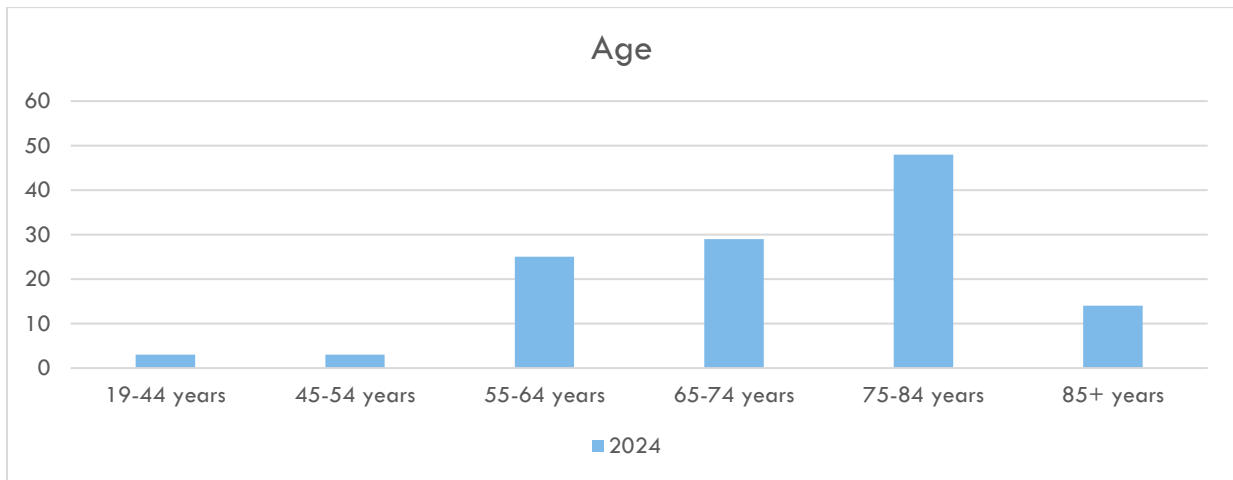
- Paperwork was received for three (3) individuals who applied and received medication for the Medical Aid in Dying program but who have not been reported as deceased in New Jersey.
- Paperwork was received for six (6) individuals who applied and received medication for the Medical Aid in Dying program but who passed away without the use of the medication.

	2024 MAiD Cases	
	Number of Cases	Percentage of Total Cases
Sex		
Male	56	54%
Female	66	46%
Undesignated / Non-binary	-	-
Unknown	-	-
Race/Ethnicity		
White	111	91%
Black	-	-
Hispanic	6	5%
Asian	5	4%
Native Hawaiian/Pacific Islander	-	-
American Indian	-	-
Other single race	-	-
Two or more races	-	-

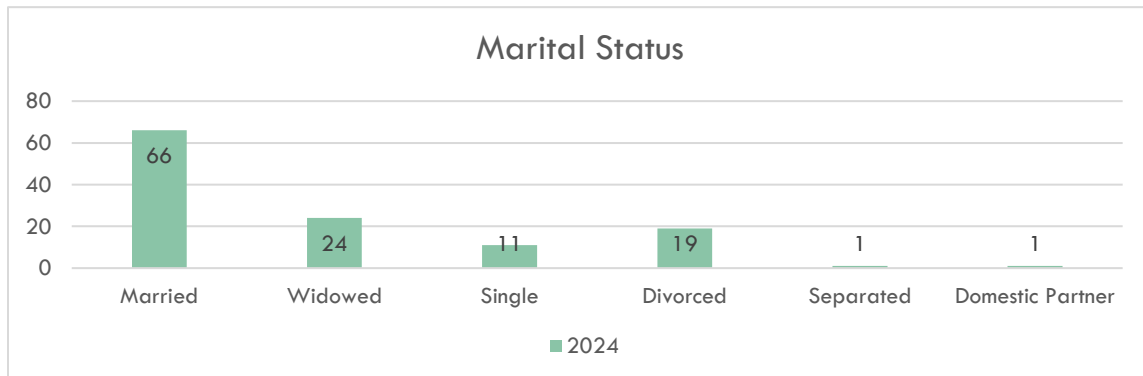


	2024 MAiD Cases	
	Number of Cases	Percentage of Total Cases
Age		
19-44 years	3	2%
45-54 years	3	2%
55-64 years	25	21%
65-74 years	29	24%
75-84 years	48	39%
85+ years	14	12%

Of the 122 MAiD cases, the age of patients reported were between 19 and 100 years. The mean age was 72 years, and the median age was 75 years.



	2024 MAiD Cases	
	Number of Cases	Percentage of Total Cases
Marital Status		
Married	66	54%
Widowed	24	20%
Single	11	9%
Divorced	19	15%
Separated	1	1%
Domestic Partner	1	1%



	2024 MAiD Cases	
	Number of Cases	Percentage of Total Cases
Education		
Unknown	-	-
8 th Grade or Less	-	-
9 th to 12 th Grade, No Diploma	5	4%
High school/ GED	36	30%
Some college credit but no degree	9	7%
Associate degree	8	7%
Bachelor’s degree	42	34%
Master’s degree	13	11%
Doctorate or Professional degree	9	7%

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 1% of cases, the OCSME was notified of the death via the mailing-in of required forms.
- In 2% of cases, the OCSME was notified of the death via a phone call.
- In 97% of cases, the OCSME was notified of the death via email.

In 2024, heart disease was the leading cause of death in the general population in New Jersey, accounting for 23% of all deaths, followed closely by malignancy at 20%. * However, for those participating in the Medical Aid in Dying program in New Jersey, malignancy is the leading underlying illness accounting for 69% of cases.

	2024 MAiD Cases	
	Number of Cases	Percentage of Total Cases
Underlying Illness		
Malignancy	84	69%
Neuro-degenerative disease	24	19%
Cardiovascular disease	8	7%
Pulmonary disease	4	3%
Other	1	1%
Intestinal	1	1%

*At time of this report, 2024 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:

	2024 MAiD Cases
Medication Prescribed	
Morphine, Diazepam, Amitriptyline, Digoxin, Zofran, Reglan	3
Morphine, Diazepam, Digoxin, Propranolol	1
Morphine, Diazepam, Phenobarbital, Amitriptyline, Digoxin	3
Morphine, Diazepam, Phenobarbital, Amitriptyline, Digoxin, Zofran, Reglan	115

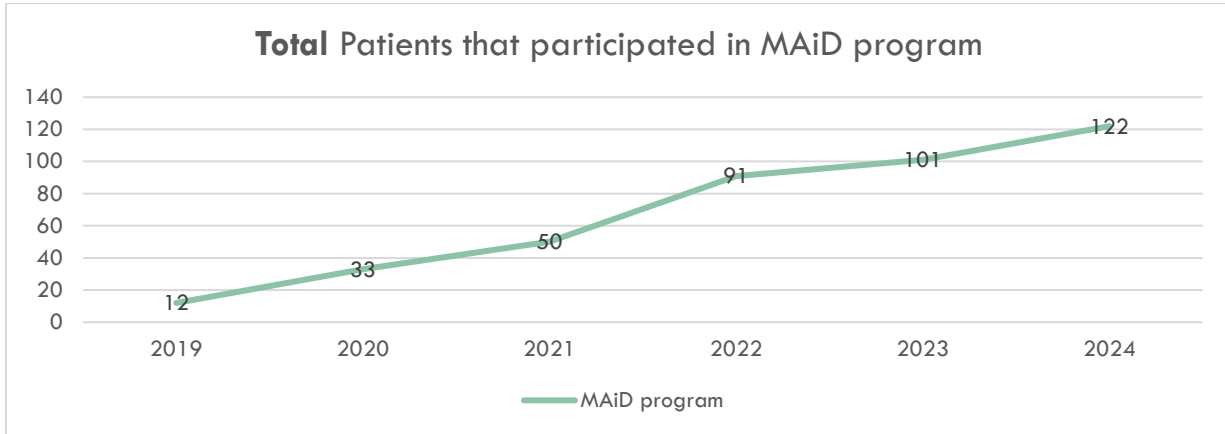
- The medications listed were taken directly from the Attending Physician Compliance forms or the Medication Dispensing Records submitted.
- Of the 122 cases in 2024, there were 11 different Attending Physicians/Prescribers.

	2024 MAiD Cases		2024 Statewide Reported Deaths*	
	Number of Cases	Percentage of Total Cases	Total Cases	Percentage of Total Cases
Disposition				
Buried	15	12%	26,449	35%
Cremated	92	76%	40,023	54%
Donation	-	-	262	0.5%
Entombment	6	5%	4,825	6%
Other	-	-	27	0.5%
Removal from State	9	7%	2,978	4%
Unknown	-	-	-	-
County of Residence				
Atlantic	4	3%	2,876	4%
Bergen	8	7%	7,031	9%
Burlington	6	5%	4,198	6%
Camden	8	7%	4,862	6%
Cape May	5	4%	1,307	2%
Cumberland	-	-	1,597	2%
Essex	7	5%	6,003	8%
Gloucester	3	2%	2,910	4%
Hudson	2	2%	3,570	5%
Hunterdon	4	3%	1,032	1%
Mercer	8	7%	2,968	4%
Middlesex	9	7%	6,090	8%
Monmouth	15	12%	5,826	8%
Morris	11	9%	4,045	5%
Ocean	12	10%	7,338	10%
Passaic	-	-	3,639	5%
Salem	1	1%	769	1%
Somerset	9	7%	2,650	4%
Sussex	2	2%	1,257	2%
Union	6	5%	3,866	5%
Warren	-	-	1,048	1%
Out of State	2	2%	-	-
Place of Death				**
Home	108	89%	23,491	31%
Other's Home	7	5%	-	-
Nursing Home/ Long term care	2	2%	13,920	19%
Hospice Facility	5	4%	2,925	4%

*At the time of this report, 2024 statewide death certificate data is preliminary.

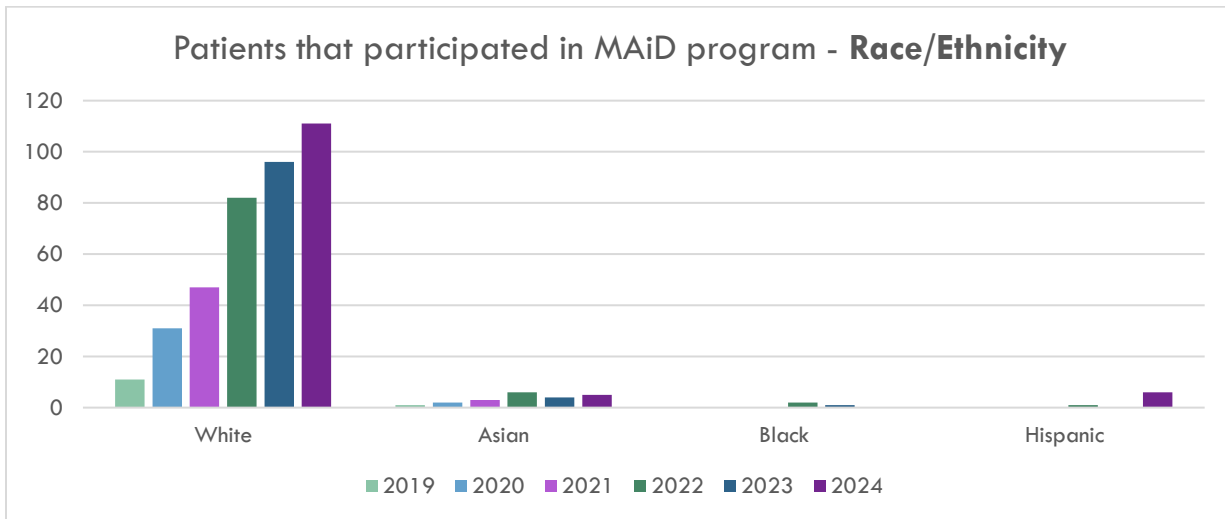
**41% of statewide deaths listed Hospital as Place of Death and 5% of statewide deaths listed Other as Place of Death, however, these were not categories for the Medical Aid in Dying Program in 2024.

Statistics Through the Years

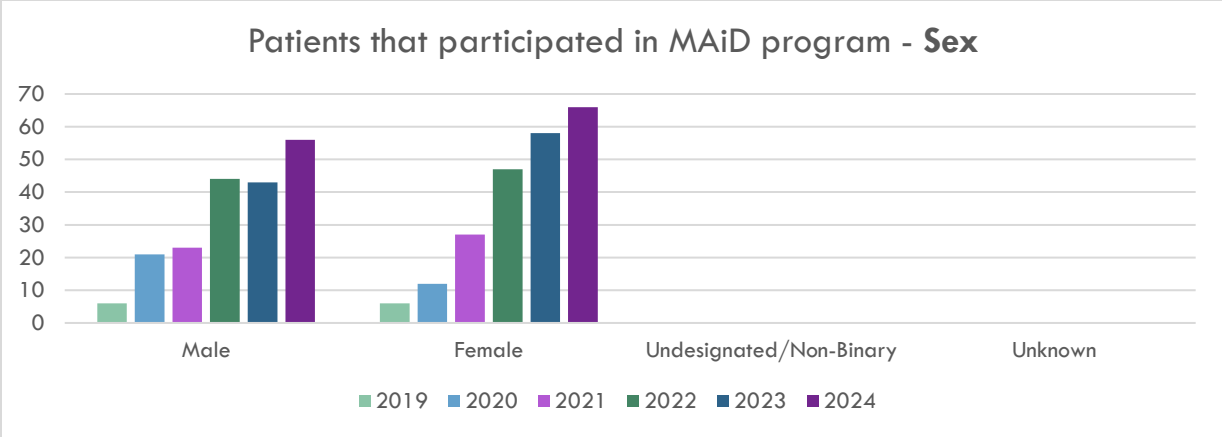


* 2019 consisted of August through December

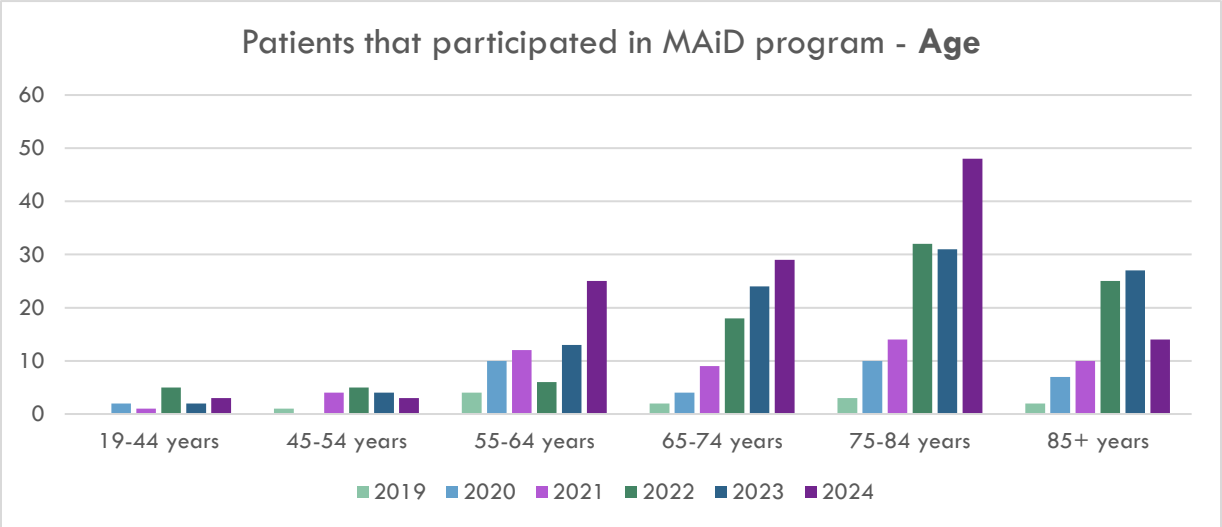
* 2020 - 2024 consisted of January through December



* 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/>