

Winter Freeze on Rulemaking but Compliance Heat Remains: What EO 7 Means for Healthcare Providers

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What You Need to Know

- New Jersey Governor Mikie Sherrill has instituted by Executive Order (EO) a 90-day regulatory freeze on the adoption of new rules and regulations effective January 23rd, however former Governor Phil Murphy's earlier EO formally terminating the state's pandemic-era regulatory framework effective February 16th remains in effect.
- Legislation has been introduced advancing independent practice authority for certain Advanced Practice Nurses, however even if this legislation gains traction, the freeze may delay regulatory implementation.
- Impacted providers and facilities should proceed with full compliance under pre-pandemic requirements to avoid potential enforcement exposure.

As New Jersey endures one of its coldest winters in recent memory, and with local groundhogs predicting six more weeks of winter, the state's regulatory landscape has also entered a temporary freeze.

On January 23, 2026, New Jersey Governor Mikie Sherrill signed Executive Order 7, which institutes a 90-day regulatory freeze on the adoption of new rules and regulations.

As discussed in our prior Alert regarding former Governor Murphy's Executive Order 415, New Jersey will formally terminate its pandemic-era regulatory framework on February 16, 2026, reinstating pre-COVID supervision, collaborative practice, and prescribing requirements.

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Since that time, Senate Bill 2996 has been introduced, which could expand independent practice authority for certain experienced Advanced Practice Nurses (APNs). However, those proposals are not yet law.

Moreover, under Governor Sherrill's EO7, state agencies are barred from proposing or adopting any rules for 90 days, subject to limited exceptions, and any proposed rules that have been submitted to the Office of Administrative Law but not yet published in the New Jersey Register must be withdrawn. This period is intended to give the new administration time to review proposed regulations and consider whether they should proceed.

In practical terms, while lawmakers may continue to debate scope-of-practice expansion, the machinery required to implement regulatory changes may remain paused during the freeze. Even if expansion legislation were to advance, corresponding regulations and operational guidance may not move forward immediately.

Accordingly, APNs should not assume that independent authority will be in place by EO 415's February 16th deadline. **The governing standard remains the reinstated pre-pandemic framework**, including the requirement to maintain a compliant written joint protocol agreement and proper physician authorization for Controlled Dangerous Substances (CDS) prescribing.

Failure to return to compliance may expose providers and facilities to regulatory scrutiny, licensure risk, and potential enforcement action – risks that will not thaw simply because rulemaking is temporarily on ice.

Recommended Action

APNs, physician assistants, medical practices, and healthcare facilities should continue moving forward with compliance planning now, including execution or reinstatement of collaborative agreements, confirmation of CDS authorization, and documentation review, rather than waiting on potential legislative developments.

Greenbaum's healthcare regulatory team is available to assist healthcare providers with conducting focused compliance reviews, drafting or reinstating joint protocol agreements, assessing prescribing authority and supervision structures, and advising on interim risk mitigation strategies.

We will continue to monitor both legislative developments and the impact of the 90-day freeze. Please contact the author of this Alert with questions about how these overlapping executive actions affect your practice or to discuss your specific circumstances.

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