



Health and Human Services in New Jersey

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DEMOCRAT FOR GOVERNOR

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Few factors are as important to the well-being of any state's citizens as their overall health and a proactive health policy.

In many communities, health policy can be a reactive agenda that only rises to the forefront of public awareness when a significant challenge occurs. Under Mayor Fulop's leadership, the Department of Health and Human Services (HHS) has taken a proactive approach - working to better the lives of all Jersey City residents.

As Governor, Fulop will make Health Policy and Human Services a priority of his administration.

IN JERSEY CITY:

Notable Accomplishments in Health Policy and Human Services

Jersey City's Department of Health and Human Services has been a state and national leader. Under Mayor Fulop's direction, his team identified the most vulnerable residents and found proactive ways to engage them as part of the community and created meaningful policies to lengthen and better their lives.



Healthy Food Access

Jersey City has been a leader in emphasizing the importance of building healthier diets into the habits of its residents. The Fulop Administration has been committed to healthy food access and education.

Under the Fulop Administration, Jersey City's HHS created the Division of Food & Nutrition to focus on reducing hunger and food insecurity, increase consumption of healthier foods by residents, and to support the local food system. Since 2016, all of Jersey City's

federally funded nutrition programs (Meals on Wheels, Congregate Senior Lunch Program, WIC, Summer Food Service Program) have been brought under the Division of Food & Nutrition to promote collaboration and cross-pollination to better serve food insecure residents.

HHS also led Jersey City's expansion of farmers markets in every neighborhood to accept WIC and SNAP. Additionally, with partnerships at Share our Strength and Food Network, Jersey City established a program to provide residents with supermarket tours to advance healthy food education and access to nearly 5,000 residents.

In partnership with the Housing Authority, Jersey City created the most comprehensive vertical farming program in the country to provide free access to education and healthy greens for residents.



Helping Homeless Residents

For far too long, Jersey City administrations did not invest the proper resources needed to help its homeless residents. Under Mayor Fulop's leadership there has been a renewed commitment to investing and providing help - with dignity - to some of the city's most vulnerable residents.

After First Lady Michelle Obama launched the Mayors Challenge to End Homelessness — an initiative to end veteran homelessness — and as a veteran himself, Mayor Steve Fulop saw to it that Jersey City was among the first to take the pledge. Since then, Fulop has leveraged city resources and partnered with the private sector to achieve this goal.



September 4, 2023

Jersey City's new St. Lucy's shelter is complete, with 34 more emergency beds and even a heated sidewalk

In Spring 2021, Jersey City broke ground on construction of a new homeless shelter to provide both housing and social service resources in one location. This is the first major shelter investment made by Jersey City in decades. Partnering with the Jersey City Housing Authority, Jersey City constructed a new resource drop in center for homeless residents with services ranging from permanent shower facilities and free laundry, to expanding case management operations and mental health services.

In 2019, the Fulop Administration created a mobile shower unit to provide not just free access to showers, bathrooms, and a new set of clothes, but as a starting point for a more comprehensive relationship and a way of building trust and connecting people with the services they need.

Marijuana Decriminalization

Jersey City was the first city in New Jersey to decriminalize marijuana and stop prosecution for possession. Prior to NJ's legalization of cannabis, this was the most aggressive action a municipality could take without state approval.

Prisoner Re-entry

When Mayor Fulop was first elected he started the first large scale municipal prisoner re-entry program to re-introduce formerly incarcerated people back into the workforce. The program was the founding home of New Jersey Reentry, now New Jersey's most recognized social service program doing work at the intersection of workforce, addiction, and housing issues.



Senior Affairs

The Fulop administration expanded offerings to seniors throughout Jersey City, and now offers recreational classes five days a week to encourage healthy activity. In order to better capitalize on funds available through the Hudson County Office on Aging, and to better target demographics and seniors that have not had access, Fulop and his team improved the reporting process of seniors at classes, events, and field trips.

Veteran Services

As Jersey City has continued to expand resources, it has been named one of the most veteran friendly cities in the country. In 2019, Mayor Fulop led a fundraising effort to completely renovate the major VFW Post in Jersey City.

The commitment to veterans has gone beyond just improved facilities. Mayor Fulop's Administration created a Veterans Task Force, re-established the Jersey City Veterans Day Parade, and has expanded resources for veterans - including a strategic effort to end veteran homelessness.



Women's Health

Mayor Fulop does not simply speak in platitudes about reproductive rights, he has a tangible track record of protecting women's access to abortion care. This commitment to access has become even more important in the aftermath of the Supreme Court's decision in *Dobbs v. Jackson Women's Health Organization*, which abandoned 50 years of precedent and took away the constitutional right to abortion.

In Jersey City, Fulop's team worked in conjunction with Planned Parenthood (PPMNJ) and Jersey City WIC to create an innovative pilot program to meet the reproductive healthcare needs of its most vulnerable residents. During the first ten months of the pilot program, 300 WIC participants were able to receive life changing services - including general checkups, emergency visits, birth control, and pap smears. Put another way, this Partnership has serviced more than 20% (21.4%) of Jersey City WIC's eligible (adult, female) clientele. Significantly, more than 20% of the individuals who obtained these services were also referred to other community partners, including Medicaid, which helped them secure other affordable services which they might not have otherwise received. In addition, recognizing that a major barrier to access to care is a lack of reliable transportation, the Partnership provides free transportation to clients. The Partnership is continuing to expand to provide increased access to vital preventative healthcare.

This type of Partnership serves as a prime example of two organizations working together to expand their scope of services and expanding the reach of resources to their clientele.

Domestic Violence Prevention

In 2020, the Fulop Administration established Hudson County's first intervention program for people with domestic violence charges to help break the cycle of abuse. As a result of increased domestic violence during the COVID pandemic, Jersey City used national models to create an intervention program within the Jersey City court system to provide free, therapeutic programming and resources.

Improved Health Care

The Fulop administration combined the services of the Child Health Clinic and Preventive Medicine division under one roof, streamlining the Clinic's services and providing residents a more comprehensive wellness solution.



AS GOVERNOR:

Areas of Focus in Public Health & Human Services

New Jersey is a great place to raise a family. We have excellent, well-funded schools, and good social services. The problem, however, is that many families cannot manage the high cost of living. And for those in the lower income range, services seem out of reach or inaccessible, which is why New Jersey's HHS policies need to focus on the state's most vulnerable residents.

The Fulop Administration will focus its attention on a robust first year of life agenda, child care reform, streamlining social services, more investment around drug resources, support for those struggling with mental health and people with disabilities, and better engagement with regard to hospitals and insurance in New Jersey.

Robust First Year of Life Agenda and Early Childhood Agenda¹

Paid Leave

Expansion of paid family leave is probably the most important benefit for new parents as it allows critical bonding time for parents and newborns, while improving physical and mental health outcomes for children and parents. The Fulop Administration would expand the number of weeks of paid leave from 12 to 24 and would expand wage replacement from the current state guidelines of 85% with a maximum of \$1000 a week to a 100% replacement with a higher maximum and phase out at higher incomes. Furthermore, Paid Leave Job Protection would cover all people using family leave and implementation will be close-to-automatic.

Reform and Streamline of Subsidy for Low Income New Parents

Families need access to cash to meet the cost shock of a new child and there are meaningful ways that the state government can and should step up to help new parents. Currently, there is a patchwork of programs (SNAP, WIC, tax credits, etc.) available to low income new parents. None, however, meet the immediate cost and need surrounding the birth of a new child due to a serious lag time between application and the provision of benefits. The unfortunate result is that new parents may not be able to properly provide for their newborns while they wait for their entitled resources. Furthermore, available benefits may misalign with need (ie., SNAP cannot be used to pay for childcare).

As Governor, Steve Fulop's goal would be to create a seamless, cohesive program with clear, predetermined eligibility so that the moment a child is born, the parent can begin receiving support via an advance on eligible child tax credit and other program payments.

1. Thank you to Peter Chen, New Jersey Policy Perspective, for help developing a first year of life agenda.

The background image shows a group of young children in a classroom setting. They are sitting on the floor, looking towards the camera with various expressions of interest and curiosity. The lighting is soft and natural, highlighting the children's faces and the colorful elements of their clothing and the classroom environment.

Child Care Reform

In order to make a meaningful difference in the lives of working families, a comprehensive program around child care assistance will be a core priority for the Fulop Administration.

To start, available child care data is extremely limited. Currently, there is a substantial gap between license capacity of child care seats in New Jersey and children under the age of six. While 80% of all children have both parents in the workforce, without a uniform data reporting system - like that required of schools - there is no proper accounting of the need versus capacity of child care. To begin improving accessibility, the Fulop Administration will focus on improving data collection.

As a father to three young children, Steve Fulop knows that the lack of access to high-quality, affordable child care prevents parents from fully participating in the workforce, holds them back from career opportunities, and makes it harder for businesses to find workers. As Governor, Fulop would adopt Senator Elizabeth Warren's proposal to create a sliding scale cost cap based on a family's income. For families of four earning up to \$150,000, no more than \$10 per day would go towards child care (an average of less than \$200 per month). This can be achieved by the expansion of the state's existing subsidized child care assistance program, coupled with reworking the EDA incentives and grants for the expansion of supply in the child care space.

A significant hurdle for child care providers is New Jersey's current attendance based payment system - meaning if a child attends child care less than 8 out of 10 days the state will not pay for that child. The provider then has a choice either to go after the parent to collect or accept the loss of reimbursement as the cost of doing business. Rather than the attendance based system, the Fulop Administration would approach daycare funding like school enrollment - providers are paid for the children in their care regardless of attendance.

Early Intervention

Early Intervention (EI) for children from birth to age 3 improves outcomes in cognitive development, language skills, behavior, and motor skills. In order to serve as many children as possible, New Jersey must reduce barriers to access. First, many new parents have no idea that the state provides EI services, therefore the Fulop Administration will create a statewide awareness campaign targeting pregnant women and new parents in their native languages.

Another barrier is that New Jersey currently operates EI via cost sharing. When parents hear that there is a cost they worry that they cannot afford it and they do not bother applying for these important services. In reality, the state recoups such little money from most families that eliminating cost sharing would likely have no impact on the availability of resources. The Fulop Administration would move to eliminate cost sharing.

Finally, there is a nationwide shortage of EI providers which leads to delays in services. Currently, regulations call for all services to be one-on-one in the child's home. Fulop would authorize a pilot program to allow center based care. This would allow a single provider to work with 3-4 children and their families at once and this would have the added benefit of giving the parents an opportunity to create their own support network with others in their group.

Integrated Public Health System

An often discussed, but rarely addressed, contributor to the expensive cost of government in New Jersey are the countless layers of bureaucracy. In the area of Health Departments, there is also a patchwork of municipality structures ranging from individual municipal health departments, to regional shared service agreements between multiple municipalities, to county health departments. As Governor, Fulop is committed to creating a more integrated statewide public health system.

The COVID pandemic laid bare the human and financial cost of New Jersey's patchwork system. Furthermore, federal grant funding for health departments mostly goes only to county government health agencies. It just makes sense to have the county HHS the entry point for service. As Governor, Fulop would use the state budget to create aid incentives to encourage municipalities to consolidate their HHS departments with their county.

Legislation Supporting Nurses

Nurses play an indispensable role in the healthcare system - from providing patient care, to case management, and creating quality assurance procedures. The Fulop Administration would pursue regulations around minimum nurse staffing levels in hospitals to ensure adequate patient care. In addition, his administration would create restrictions on hospitals' reliance on traveling nurses due to pay disparity, decreased staff morale, and disruption in patient care.



Medical Debt Relief

As of fiscal year 2024, New Jersey has budgeted \$10 million to fund a state-partnered nonprofit to buy residents' medical debt, but we need to do more. As Governor, Steve Fulop commits to extending the Medical Debt Relief program. In addition, the Fulop administration would work to increase transparency in the healthcare system in order to prevent medical debt in the first place and would limit extraordinary debt collection practices.



Review of Hospital Consolidation and Insurance Network Participation

Monopolies in any industry are counter to fostering competition and stagnate innovation. The recent massive consolidation of hospitals in New Jersey should be reviewed. In most instances, these consolidations have led to increased healthcare costs and higher insurance premiums without an increase in quality. Even more concerning, in some instances the hospitals have become financial partners with the insurance providers, giving insurance networks an outsized ability to determine winners/losers, rather than rewarding positive healthcare provider performance.

What's more, many New Jersey health insurers have closed their networks to new providers which limits innovation, expansion, and consumer choice.

Under the current system, hospital CEOs and insurance companies are allowed to prioritize their bottom line over patient care. The Fulop Administration will put patients first.

Ban Health Insurance Premiums Based on Zip Code

There is an obvious relationship between the cost of health care insurance and access to health care. Lower premiums, deductibles, and out-of-pocket costs generally result in better access.

As Governor, Fulop will prioritize enacting legislation to explicitly prohibit health insurance companies from using zip codes as a factor in determining premium rates and mandating transparency in premium settings. This would eliminate geographic-based pricing differentials, aiming to ensure that individuals in different areas are not charged significantly different premiums solely based on their residential location, and it would allow regulators and consumers to better understand and evaluate the pricing methods employed.



Reproductive Healthcare & Abortion Access

The Freedom of Reproductive Choice Act guarantees all New Jerseyans the right to make their own decisions about birth control, abortion, and prenatal care. This right, however, is only as good as the ability to access care. Therefore, Steve Fulop is committed to funding existing providers and taking steps to increase the number of providers, requiring private insurance providers to cover abortion care without any out-of-pocket costs to the patient, and codifying regulations authorizing health care professionals to provide abortion care. Furthermore, Fulop will work to expand the Jersey City partnership of Planned Parenthood and WIC to the rest of the state to ensure that those living below the poverty line have full access to reproductive healthcare.



Senior Care

Seniors have earned the right to receive compassionate and supportive care in a professional environment. Their families should have the peace of mind that their loved ones can access that care if and when they need it without layers of bureaucracy and endless red tape.

A key component to improving senior care is by consolidation of governing agencies, starting with Medicaid. Currently, each county runs its own Medicaid eligibility office. While families await the establishment of Medicaid eligibility, their loved ones' admissions are often delayed. Long-term care facility providers can end up providing care for months without reimbursement, endangering the quality of care. As Governor, Fulop will consolidate the Medicaid eligibility system allowing it to run more efficiently, saving money and avoiding delays in care.

In addition, regulatory policy relating to long-term care is covered by numerous state and federal agencies, as well as municipal and county level public health departments. The redundancy does not result in better care - it just creates more red tape. The Fulop Administration will work alongside stakeholders to determine how long-term care providers can best interact with regulatory agencies in order to ensure that seniors receive the best and safest care available.

While some seniors choose to age in place, the truth is that good home care is more expensive and labor-intensive than quality facility-based care. Furthermore, the state has far less ability to monitor the quality or outcomes of home care. In reality, long-term care facilities care for more people daily than their hospital counterparts. In the world of post-acute and long-term care, facility-based care is an essential part of the healthcare system. The Fulop Administration is committed to supporting the facility-based long-term care sector, connecting it to the larger world of healthcare, and including providers in healthcare policy conversations.

Mental Health, Harm Reduction & Support for People with Disabilities

Increase Access to Mental Health Services

1.3 million people living in New Jersey have a diagnosable mental illness² and approximately two-thirds of New Jerseyans with a diagnosed mental health condition are unable to access treatment, even though they have health insurance.³

Several factors contribute to the failure of individuals to seek treatment including extended wait times for intake and counseling appointments for outpatient mental health treatment (12 weeks) and for clinical appointments (greater than 22 weeks).⁴ In addition, fragmented or unavailable services, high costs, and social stigma create barriers to treatment. Importantly, it is particularly difficult for people of color to receive adequate and culturally appropriate treatment.

As Governor, Steve Fulop would prioritize legislation to improve access to mental health care. This would include requiring health plans to cover out-of-network care from licensed providers when timely, appropriate, medically necessary services aren't available in-network at the same cost; and would require health plans to cover annual mental health wellness exams without a co-pay.

2. Inseparable.us, Improving Mental Health Care: The Access Report (inseparable.us/wp-content/uploads/2023/12/Inseparable-2023AccessReport-NJ-12.18.23.pdf)

3. Chatterjee, Rhitu. "Most Americans with mental health needs don't get treatment, report finds." npr.org. December 13, 2023. Accessed 17 January 2024.

4. Mental Health Association in New Jersey, Inc. "Wait Times for Outpatient Mental Health Treatment in New Jersey". (mhanj.org/content/uploads/2022/08/Wait-Time-Study-March-15-2022.pdf)

Drug and Substance Abuse Treatment

If we accept that addiction is a disease, then we must treat it at its root cause and recognize that criminalizing abuse is not the solution. New Jersey currently spends nearly \$1 billion a year on drug enforcement and prosecution - with little to no improvement to the lives of those struggling with substance abuse, their families, or communities. Steve Fulop fundamentally believes that New Jersey's drug laws should be structured around improving a person's well being instead of the drug use itself and he would champion policies that focus on the important intersection between affordable housing and drug policy reform.



Currently, New Jersey's drug enforcement laws and penalties are harsher than most federal laws. While the Murphy Administration has made strides forward, many of the state's existing measures are focused on stopping the supply and are not effective in helping those who are struggling to find available programs.

To practically confront drug issues, New Jersey must provide a robust social services program focused on countywide solutions, rather than a narrow, municipality-by-municipality approach. Right now, there is no clear system in place to help residents identify exactly what social services they are eligible for based on their experience and what type of support they need. Countywide case management will be able to provide the necessary structure and a streamlined process – providing residents the help they need from housing, mental health services, employment opportunities, and more.

As outlined in Fulop for Governor's FixNJ Housing Policy proposal⁵, safe and affordable housing is a necessary foundation for every community to thrive and Fulop is committed to increasing the housing supply.

One obstacle to housing those dealing with a substance abuse disorder is the structure of the Housing Mortgage Finance Agency (HMFA). While the HMFA receives significant funding, little of this is distributed to people living with a substance abuse disorder. Under the current HFMA guidelines, there is a special population housing set aside funded through the tax credit program. Developers get to choose which population their set aside is for, and they typically do not select those with a substance abuse disorder. Giving developers the option to choose their population is counter productive to housing the most vulnerable. The State must take the lead in directing which target groups have the greatest need at any given point.

Finally, to be effective, Fulop would make restructuring the Division of Mental Health and Addiction Services (DMHAS) a priority. Currently DMHAS operates in a 1990s "War on Drugs" mentality. Instead, there needs to be a shift to coordination across state agencies as the needed priority. As Governor, Steven Fulop will make this change.

5. [stevenfulop.com/housing-economic-development-policy](https://www.stevenfulop.com/housing-economic-development-policy)



CONCLUSION:

Steve Fulop is committed to taking a proactive approach to better the lives of all New Jersey residents - working parents, recent immigrants, new parents, seniors, those struggling to put food on their children's table, and residents struggling with mental health or a substance abuse disorder.

**As Governor, Fulop will make
compassionate and accessible Health
Policy and Human Services a priority
of his administration.**

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