

New Jersey

State and Local Health Equity Policy Checklist

July 2021

KEY

-  = state requires/mandates
-  = some local and/or state policies, but there is room for improvement
-  = no state/local requirements
-  = n/a

Legislative Reform

POLICY	SCORE	NOTES
Implement Racial Equity Impact Statements for legislation at the state or local levels, including environmental, health and criminal justice areas.		New Jersey requires its Office of Legislative Services to prepare racial impact statements for policy changes affecting pretrial detention, sentencing and parole in order to address racial disparities in the state's prison system. ¹ However, as of 2020, New Jersey legislative staff members have only crafter one such analysis. ² Experts note that the directive was broadened before passage, which impedes the implementation of the law.
Expand Health Impact Assessments attached to state and local legislation to include equity considerations.		

State Health Planning & Programs

POLICY	SCORE	NOTES
Declare racism a public health crisis and implement steps to address it.	 <p><i>One or more cities/ counties within a state has declared racism a public health crisis and has implemented steps to address it, but it has not been done at the state level.</i></p>	<p>Montclair's mayor and town council have declared racism to be a public health crisis and committed to implement evidence-based policies and programming that address racial health inequities and engage with historically marginalized communities in problem identification and policy creation, among other goals.³</p> <p>The mayor and Council of Leonia declared racism a public health crisis and committed to enhance educational efforts on racism and its impact on the delivery of government services; encourage racial equity training among all community partners, vendors and contractors; and called upon the Governor, state Senate President, and state Assembly Speaker to declare racism a public health crisis.⁴</p> <p>New Jersey's legislature considered an assembly resolution (AR 175) to declare racism a public health crisis during the 2020-2021 legislative session, and introduced legislation to create a Task Force on Institutional Discrimination in Health Care and a New Jersey Reparations Task Force. As of May 2021, the bills had not been passed.^{5,6,7}</p>

Summary and scoring methodology reports are available at www.HealthValueHub.org/Health-Equity-Checklist.

If you know of a policy we overlooked, please contact hubinfo@altarum.org.

State Health Planning & Programs *(continued)*

POLICY	SCORE	NOTES
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Develop a ‘Health in All Policies’ strategy at the state or local level.



“Health in All Policies” is a core component of New Jersey’s [2020 State Health Improvement Plan](#).⁸ The document states that the Office of Health Equity will support state and local partners as they pursue a “Health in All Policies” agenda by:

- identifying regulatory, legal and policy obstacles and opportunities to strengthen health equity;
- providing data to identify short-term and long-term priorities; and
- ensuring the active participation of diverse communities in policy decisions.

Trenton lists the creation of a “Trenton250 Health in All Policies Plan” as a strategic priority in its [2016 Healthy Trenton: Blueprint for Action](#).⁹

Establish Health Equity Zones to better address social determinants of health.



New Jersey’s [Health Enterprise Zones](#) initiative offers tax incentives for physicians and dentists to establish and maintain practices in state-designated medically underserved areas.¹⁰

Create an Equity Strategic Plan to lay out how the state (or local entity within the state) will reduce health disparities.



Developing and implementing a comprehensive, coordinated plan to reduce health disparities between white and racial and ethnic minority populations in New Jersey is a priority for the Office of Minority and Multicultural Health’s [Eliminating Health Disparities Initiative](#).¹¹ Additionally, the Department of Health and Senior Services released a “[Strategic Plan to Eliminate Health Disparities in New Jersey](#)” in 2007, but does not appear to have updated the report since.¹²

Fund community-driven health equity action plans.



Implement participatory budgeting at the state and/or local level for initiatives that focus on health and social determinants of health.



One or more cities/counties within a state have implemented participatory budgeting for initiatives that focus on health and social determinants of health in the past.

[Freehold Borough](#) was the first municipality in New Jersey to implement participatory budgeting, allowing residents ages 14 and older to submit and vote on proposals for how to spend \$200,000 in taxpayer dollars.¹³ [Funded projects](#) related to social determinants of health include improvements to sidewalks, construction of pedestrian bridges, installing lighting at sports fields, tree replacements, and refurbishing basketball courts.^{14,15}

[West Orange](#) and [Neptune City](#) have also employed participatory budgeting.^{16,17}

State Health Planning & Programs *(continued)*

POLICY	SCORE	NOTES
<p>Emphasize health disparities and equity when developing State Health Assessments & State Health Improvement Plans</p>		<p>New Jersey’s 2018 State Health Assessment describes disparities in prioritized health topics and identifies organizational, local and state actions to identify and reduce disparities.¹⁸ The 2020 State Health Improvement Plan places strong emphasis on describing health equity and disparities, and presents an action plan to advance health equity in the state.¹⁹ The Department of Health’s State Health Assessment Data System tracks disparities in Healthy New Jersey 2020 objectives and has developed targets for the four largest racial/ethnic groups in the state.²⁰</p> <p>Additionally, equity will be integrated into all aspects of the Healthy New Jersey 2030 framework, objectives and planning processes.²¹</p>
<p>Fund community-based organizations operating in the state to reduce disparities and/or provide culturally competent health-related supports.</p>		<p>The New Jersey Health Department’s Office of Minority and Multicultural Health awards Health Disparity Prevention Grants.²² For FY 2020, grants were provided to community- and faith-based organizations, local public health departments and non-profits to target health disparities related to obesity, diabetes, youth violence, chronic disease self-management and diabetes self-management, cardiovascular diseases, infant mortality, Alzheimer’s Disease and tobacco use.</p> <p>Despite the actions described above, experts have noted that state grants are frequently awarded to agencies that do not adequately serve communities of color. To address this issue, advocacy organizations recommend that Culturally and Linguistically Appropriate Services (CLAS) standards be considered when awarding state grants to non-profits serving Latino communities.²³</p>
<p>Implement strategies to address specific health outcomes related to inequality in social determinants of health, such as asthma, diabetes, heart disease and maternal mortality, among others.</p>		<p>In 2004, New Jersey established the Eliminating Health Disparities Initiative within the Office of Minority and Multicultural Health, creating priority areas for the office to develop and implement a comprehensive, coordinated plan to reduce health disparities.²⁴ The health disparity priority areas include: asthma; breast, cervical, prostate and colorectal cancer screening; cardiovascular disease; diabetes; Hepatitis C; HIV/ AIDS; immunizations; infant mortality; accidental injuries and violence; kidney disease; obesity; and sexually transmitted diseases.²⁵</p> <p>The Nurture New Jersey 2021 Strategic Plan is the First Lady of New Jersey’s initiative to reduce maternal and infant mortality and morbidity and ensure equitable care and outcomes for New Jersey mothers and infants. Action areas include increasing racial equity and addressing social determinants of health. Additionally, New Jersey’s Department of Health has implemented a doula program in municipalities with high Black infant mortality rates.²⁶</p>

State Health Planning & Programs *(continued)*

POLICY	SCORE	NOTES
Participate in the Government Alliance on Race & Equity (GARE), a national network of local and regional governments to address racial equity.		No local jurisdictions in New Jersey participate in GARE . ²⁷

Data & Reporting

POLICY	SCORE	NOTES
Create equity reporting requirements for state and local government agencies.		
Use the state's Office of Health Equity/Disparities/Minority Health to analyze and report on existing health disparities and/or equity concerns within the state.		According to the activities listed on the Office of Minority and Multicultural Health's website , the Office does not appear to regularly report existing health disparities and/or equity concerns within the state. ²⁸ However, Health Disparities Indicator Reports are provided through the Department of Health's New Jersey State Health Assessment Data website . ²⁹ Topics include asthma, diabetes, HIV/AIDS, homicide, infant mortality and obesity, among others. The Department of Health also tracks disparities in Healthy New Jersey 2020 objectives and has developed targets for the four largest racial/ethnic groups in the state. ³⁰
Require non-profit hospitals to incorporate an equity component into their community health needs assessments and community health improvement plans and/or establish a minimum percentage of non-profit hospitals' Community Benefit that must be invested in programs targeted at reducing health disparities by addressing root causes.		The New Jersey Housing and Mortgage Finance Agency created the Hospital Partnership Subsidy Program , through which leading hospitals partner with residential developers to provide affordable and supportive housing in their communities. ³¹ The agency matches contributions from participating hospitals to provide affordable rental apartments for low- and moderate-income families, as well as apartments with access to supportive and wrap-around services for residents with special needs.
Increase the validity, use and standardization of data on race, ethnicity and/or languages spoken for state reporting requirements.		New Jersey's Department of Health released a Strategic Plan to Eliminate Health Disparities in 2007, which included a goal to standardize the collection and reporting of race/ethnicity data across the department. ^{32,33} The Center for Health Statistics was charged with creating coding guidelines for the collection and dissemination of race and ethnicity data by Department of Health programs, which were also released in 2007. ³⁴
Include socioeconomic status, race, ethnicity and/or languages spoken in All-Payer Claims Database data.		

Health Reform – Coverage		
POLICY	SCORE	NOTES
Expand Medicaid eligibility requirements to include all adults with incomes at or below 138 percent of the federal poverty level.		New Jersey implemented Medicaid expansion on Jan. 1, 2014. ³⁵
Provide high-quality, affordable coverage options for people whose incomes are too high to qualify for Medicaid, e.g., Basic Health Plan, reinsurance or augmented premium subsidies.		New Jersey’s 1332 waiver to create a reinsurance program was approved in 2018. ³⁶ The state also subsidizes premiums for current Marketplace enrollees and new enrollees with incomes under 600% of the FPL. ³⁷ In addition, NJ WorkAbility offers people with disabilities who are working, and whose income would otherwise make them ineligible for Medicaid, the opportunity to receive full Medicaid coverage. ³⁸
Provide one-year continuous eligibility for Medicaid and CHIP.		New Jersey provides one-year continuous eligibility for both Medicaid and CHIP . ³⁹
Provide coverage options to undocumented and recent immigrants.		<p>Lawfully-residing immigrant children can receive coverage under the Medicaid/ the Children’s Health Insurance Program (CHIP) without a 5-year wait.⁴⁰</p> <p>Pregnant women who meet all the other criteria for NJ FamilyCare except for their citizenship/immigration status may be eligible to receive treatment for an emergency medical condition, including labor and delivery.⁴¹</p> <p>In 2021, New Jersey passed the Cover All Kids bill to expand New Jersey’s Medicaid program to cover undocumented children. Officials estimate that coverage may not be available until 2023.^{42,43}</p>

Health Reform – Delivery

POLICY	SCORE	NOTES
<p>Develop Medicaid Managed Care Organization (MCO) contract options for advancing health equity and recommend or require MCOs to complete specific health equity responsibilities.</p>		<p>New Jersey requires MCOs to complete various quality assurance activities, including developing a program to identify, prevent and reduce healthcare disparities.⁴⁴ At a minimum, the program must include:</p> <ul style="list-style-type: none"> • evidence of a process to identify and evaluate healthcare disparities within the MCO, by subgroups including gender, race, ethnicity, primary language, geographic location and disability status; • a barrier analysis and a written action plan to address the disparities identified; • implementation of an action plan with continuous monitoring of outcomes; and • ongoing evaluation of the action plan’s effectiveness. <p>MCOs must also: participate in Performance Improvement Projects, at least one of which must include activities that identify and reduce healthcare disparities; screen enrollees for social needs; provide enrollees with referrals to social services; and partner with community-based organizations or social service providers.^{45,46}</p>
<p>Encourage or require Accountable Care Organizations (ACOs) and/ or Coordinated Care Organizations (CCOs) to collect equity-focused data, adopt culturally appropriate programs, implement partnerships with community-based organizations in areas with larger minority populations and/ or focus on addressing social determinants of health.</p>		<p>New Jersey established a Medicaid ACO Demonstration project in 2011, but ended experimental Medicaid ACOs in 2019.⁴⁷</p>
<p>Employ Medicaid 1115 and/or 1915 waivers to better address the social determinants of health.</p>		
<p>Require or incentivize providers participating in Medicaid value-based programs to report on measures related to health equity/disparities.</p>		<p>New Jersey’s MCO contract requires audits by an External Quality Review Organization, which include onsite reviews of the MCO’s operations, including efforts to reduce healthcare disparities.⁴⁸</p>

Health Reform – Delivery *(continued)*

POLICY	SCORE	NOTES
<p>Hold providers participating in Medicaid value-based programs responsible for reducing health disparities by evaluating/scoring performance in this area.</p>		<p>New Jersey’s MCO contract also requires MCOs to regularly examine whether certain interventions result in significant demonstrable performance improvement.⁴⁹ In the case of a project developed by the organization to reduce disparities between minorities and other MCO members, significant improvement is demonstrated by achieving a reduction of at least 10 percent in the number of minority enrollees (or the specified unit of analysis) that do not achieve the desired outcome as defined by the quality indicators.</p>
<p>Create or expand Accountable Communities for Health with a focus on increasing health equity.</p>		<p>The Camden Coalition – which aims to bridge the gap between clinical and community service providers by addressing the social needs of Medicaid and Medicare beneficiaries, including housing instability, food insecurity, utility needs, interpersonal violence and transportation – participates in the Centers for Medicare and Medicaid’s Accountable Health Communities Model.^{50,51}</p>
<p>Prioritize funding for communication infrastructure development, including broadband and cellular access, in underserved rural and urban areas.</p>		<p>Numerous bills were introduced during the 2020 and 2021 legislative sessions to expand broadband access in the state.^{52,53}</p>
<p>Prioritize funding for communication infrastructure development, including broadband and cellular access, in underserved rural and urban areas. <i>(continued)</i></p>		<p>New Jersey passed a law (AB 5111) in 2019 to establish the Innovation District Designation Program, which allows communities to apply to be designated as innovative districts to attract businesses.⁵⁴ Applicants must submit a development plan, which can include a plan for improving broadband infrastructure. In 2021, New Jersey passed a law to create the Broadband Access Study Commission to evaluate the feasibility of establishing community networks to deliver state-of-the-art internet speeds to the public.⁵⁵ The commission will consider the logistics of deploying community broadband networks and report on its findings to the governor and the legislature.</p>
<p>Subsidize internet access to expand opportunities for telehealth.</p>	 <p><i>The state subsidizes internet access to expand opportunities for telehealth, temporarily, during the COVID-19 pandemic.</i></p>	<p>The City of Newark and JerseyOn, a state-wide non-profit organization, created a program to allow city residents to purchase a low-cost modem and pay a discounted rate for unlimited broadband internet.⁵⁶</p> <p>The New Jersey Pandemic Relief Fund has pledged over \$2.6 million to help school districts in certain areas purchase laptops, Wi-Fi hotspots and internet access needed for remote learning.⁵⁷ Furthermore, the state’s governor committed to spend approximately \$115 million of federal grant and CARES Act money on K-12 digital inclusion efforts focused on devices and broadband service. The Bridging the Digital Divide grant, in particular, focuses on special education, English learner and low-income populations.⁵⁸</p>

Health Reform – Delivery *(continued)*

POLICY	SCORE	NOTES
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Expand coverage for telehealth services.



New Jersey requires NJ Medicaid and NJ FamilyCare programs to cover telehealth services on the same basis as equivalent services delivered in-person.⁵⁹ However, the programs may limit coverage to services delivered by participating healthcare providers.

Private insurers must also provide coverage for health services delivered via telehealth on the same basis as equivalent services delivered in-person.⁶⁰ However, a healthcare plan may limit coverage to services that are delivered by in-network providers and is not prohibited from covering only services that are medically necessary, subject to the terms and conditions of the plan.

Establish or strengthen telehealth reimbursement parity laws to incentivize providers to deliver these services.



New Jersey requires NJ Medicaid, NJ FamilyCare and private insurers to reimburse providers on the same basis as equivalent in-person services.⁶¹ However, reimbursement for telehealth services may not exceed reimbursement rates for equivalent in-person services.

A bill (**SB 2559**) that would require payment parity by NJ Medicaid, NJ FamilyCare and private insurers was introduced in the 2021 legislative session.⁶² As of June, the bill had passed the House and Senate.

Establish cost-sharing parity for telehealth services



NJ Medicaid, NJ FamilyCare and private insurers **may not charge** any deductible, copayment or coinsurance for a telehealth healthcare service in an amount that exceeds those applicable to an in-person consultation.⁶³

New Jersey’s governor issued an **Executive Order** requiring carriers in the individual, small and large group markets to cover, without cost-sharing, any healthcare services or supplies delivered or obtained via telehealth for the duration of the State of Emergency.⁶⁴

Adopt a global budget system for paying hospitals to better enable them to focus on prevention, care coordination, community-based integration and social determinants of health.



Health Reform – Delivery *(continued)*

POLICY	SCORE	NOTES
<p>Require workplace-based cultural competency and implicit-bias training for clinicians and other providers.</p>	<p style="text-align: center;"></p> <p><i>The state requires either cultural competency or implicit-bias training for clinicians and other providers, but not both.</i></p>	<p>New Jersey requires the state's Board of Medical Examiners to prescribe requirements, by regulation, for physician cultural competency training.⁶⁵ Further regulations require all medical schools in the state to provide cultural competency instruction, in addition to Continuing Medical Education instruction for licensed physicians who did not receive cultural competency training in their curriculum.⁶⁶</p> <p>A bill (SB 703) signed by the governor in 2021 requires all healthcare professionals who provide perinatal treatment and care to pregnant people at hospitals or birthing centers to undergo explicit and implicit bias training to help them identify and overcome racial and cultural prejudices.⁶⁷</p>

COVID-Specific Reforms

POLICY	SCORE	NOTES
<p>Collect racial equity data to better understand the disparate impact of COVID-19.</p>	<p style="text-align: center;"></p>	<p>New Jersey reports data on COVID-19 vaccinations, cases, mortality and hospitalizations by race and ethnicity, but not COVID-19 testing or recoveries.⁶⁸</p>
<p>Implement changes to Medicaid enrollment, including but not limited to presumptive eligibility, cost-sharing provisions, special enrollment periods, increased enrollment assistance and improvements to application processing in response to COVID-19.</p>	<p style="text-align: center;"></p>	<p>New Jersey expanded presumptive eligibility and extended its special enrollment period in response to the COVID-19 pandemic.^{69,70} The state also extended the timeframe for families to complete Children's Health Insurance Plan (CHIP) renewals and waived, eliminated, suspended or delayed enrollment fees, premiums or similar charges in CHIP.^{71,72,73}</p>
<p>Leverage the Emergency Medicaid program to extend COVID-19 testing, evaluation and treatment coverage to undocumented immigrants.</p>	<p style="text-align: center;"></p>	<p>New Jersey does not cover COVID-related testing or treatment through Emergency Medicaid, however free testing and treatment is available at Federally Qualified Health Centers (FQHCs) to all people regardless of insurance or immigration status.⁷⁴</p>
<p>Waive or limit cost-sharing for COVID-19 testing and treatment by private insurers.</p>	<p style="text-align: center;"></p>	<p>New Jersey passed a law in 2020 requiring private insurers to cover COVID-19 testing that was ordered by a medical practitioner, with no cost sharing imposed on this coverage.⁷⁵</p>
<p>Provide COVID-19 testing to residents free of charge.</p>	<p style="text-align: center;"></p>	<p>New Jersey sponsors public testing sites where residents can receive COVID-19 tests free of charge.⁷⁶</p>

Notes

1. Porter, Nicole, *Racial Impact Statements*, The Sentencing Project, (June 16, 2021). <https://www.sentencingproject.org/publications/racial-impact-statements/>
2. Balcerzak, Ashley, “In Two Years, NJ Wrote Only One ‘Racial Impact Statement’ to Study Criminal Justice Disparities,” *NorthJersey.com*, (Aug. 4, 2020). <https://www.northjersey.com/story/news/new-jersey/2020/08/04/nj-crafted-only-one-racial-impact-statement-examine-disparities/5530310002/>
3. Kiefer, Eric, “Montclair Mayor, Council: ‘Racism Is a Public Health Crisis,’” *Patch*, (February 17, 2021). <https://patch.com/new-jersey/montclair/montclair-mayor-council-racism-public-health-crisis>
4. *Resolution No. 2020-124: Declaring Racism a Public Health Crisis*, Council of Leonia, Bergen County, (June 1, 2020). <https://www.leonianj.gov/Home/ShowDocument?id=1512>
5. New Jersey A.R. 175, New Jersey Assembly (2020 Regular Session) (Accessed July 15, 2021). https://www.njleg.state.nj.us/2020/Bills/AR/175_11.HTM
6. New Jersey Assembly Bill 2327, (2020 Regular Session), LegiScan, (Accessed July 15, 2021). <https://legiscan.com/NJ/bill/A2327/2020>
7. New Jersey Assembly Bill 711, (2020 Regular Sesion), LegiScan (Accessed July 15, 2021). <https://legiscan.com/NJ/bill/A711/2020>
8. *New Jersey State Health Improvement Plan*, New Jersey Department of Health, (January 2020). <https://www.nj.gov/health/chs/hnj2020/documents/ship2020.pdf>
9. *Healthy Trenton: A Blueprint for Action*, (2016). <http://www.njhi.org/wp-content/uploads/2016/10/2016-05-13-Trenton-Blueprint.pdf>
10. Kasprak, John, *Medically Underserved Areas and Health Enterprise Zones – New Jersey Legislation*, Connecticut Office of Legislative Research, (September 28, 2004). <https://www.cga.ct.gov/2004/rpt/2004-R-0772.htm>
11. Health Disparity Priority Areas Indicator Report Index, New Jersey State Health Assessment Data, (Accessed July 15, 2021). <https://www-doh.state.nj.us/doh-shad/indicator/CatDisparity.html#:~:text=The%20%22Eliminating%20Health%20Disparities%20Initiative,minority%20populations%20in%20the%20State.>
12. *Strategic Plan to Eliminate Health Disparities in New Jersey, 2007 Update*, New Jersey Department of Health and Senior Services, (2007). https://www.njleg.state.nj.us/OPI/Reports_to_the_Legislature/health_disparities_plan_2007_update.pdf
13. Rosenthal, Nicole, “Freehold Boro Participatory Budgeting Results Available Next Week,” *Patch*, (December 4, 2020). <https://patch.com/new-jersey/holmdel-hazlet/freehold-boro-participatory-budgeting-results-available-next-week>
14. *Freehold Borough Participatory Budgeting 2019 Winners*, Freehold Borough Participatory Budgeting Committee, (Accessed July 15, 2021). <http://www.freeholdboroughnj.gov/participatorybudgeting/PB-winners.pdf>. See also: PowerPoint Presentation, Freehold Borough Participatory Budgeting Committee, (Accessed July 15, 2021). <http://www.freeholdboroughnj.gov/participatorybudgeting/2019-PB-POWER-POINT-SLIDES.pdf>
15. PowerPoint Presentation, Freehold Borough Participatory Budgeting Committee (2019). <http://www.freeholdboroughnj.gov/participatorybudgeting/2019-PB-POWER-POINT-SLIDES.pdf>
16. *Our Town, Your Choice: 2018 West Orange Participatory Budgeting*, (June 1, 2018). <http://www.westorange.org/DocumentCenter/View/3958/Participatory-Budgeting-Handbook-West-Orange-Amended06012018?bidId=>
17. Walton, Pete, “Neptune City Residents to Vote on Projects,” *Coaster News*, (December 4, 2019). <https://thecoaster.net/wordpress/neptune-city-residents-to-vote-on-projects/>
18. *New Jersey State Health Assessment 2018*, New Jersey Department of Health, (2018). <https://www.state.nj.us/health/chs/hnj2020/documents/sha2018.pdf>
19. *New Jersey State Health Improvement Plan*, New Jersey Department of Health, (January 2020). <https://www.nj.gov/health/chs/hnj2020/documents/ship2020.pdf>
20. *Health Disparities*, New Jersey State Health Assessment Data, (Accessed July 15, 2021). <https://www-doh.state.nj.us/doh-shad/resources/HealthDisparities.html>
21. *Healthy New Jersey: Cross-Cutting Issues*, New Jersey Health Department, (Accessed July 15, 2021). <https://healthy.nj.gov/2030/topics-objectives/cross-cutting-issues/index.shtml>

22. *OMMH Health Disparity Prevention Grants FY 2020*, Office of Minority and Multicultural Health, New Jersey Department of Health, (Accessed July 15, 2021). [https://www.nj.gov/health/ommh/partners/grantees_update/OMMH%20Health%20Disparity%20Grants%20Profiles-2020%20\(006\).pdf](https://www.nj.gov/health/ommh/partners/grantees_update/OMMH%20Health%20Disparity%20Grants%20Profiles-2020%20(006).pdf)
23. *Dual Realities: Progress in New Jersey, Setbacks on the National Level - A Latino Perspective*, Latino Action Network (September 2019). https://5175bb79-8071-49a8-ba13-b2bfe224dc5f.filesusr.com/ugd/f81e50_8ebc17cfbed44c59b8188473d2a692f9.pdf
24. *New Jersey P.L.2004, c.137 (Assembly Bill 655 2R)*, (Accessed July 15, 2021). https://www.njleg.state.nj.us/2004/Bills/PL04/137_.HTM
25. *Health Disparities Priority Areas Indicator Report Index*, New Jersey State Health Assessment Data, (Accessed July 15, 2021). <https://www-doh.state.nj.us/doh-shad/indicator/CatDisparity.html>
26. For more information about New Jersey's policies to improve maternal health, see: Platt, Taylor, *New Jersey Medicaid Implements New Policies to Improve Maternal Health*, National Academy for State Health Policy, (March 1, 2021). <https://www.nashp.org/new-jersey-medicare-implements-new-policies-to-improve-maternal-health/>
27. *Where We Work, Jurisdictions*, Government Alliance on Race & Equity, (Accessed July 16, 2021). <https://www.racialequityalliance.org/where-we-work/jurisdictions/>
28. *Minority and Multicultural Health*, New Jersey Department of Health, (Accessed July 16, 2021). <https://nj.gov/health/ommh/about-us/index.shtml>
29. *Health Disparity Priority Areas Indicator Report Index*, New Jersey State Health Assessment Data, (Accessed July 16, 2021). <https://www-doh.state.nj.us/doh-shad/indicator/CatDisparity.html>
30. *Health Disparities*, New Jersey State Health Assessment Data, (Accessed July 17, 2021). <https://www-doh.state.nj.us/doh-shad/resources/HealthDisparities.html>
31. *Murphy Administration Announces Collaboration with University Hospital in Newark Under NJHMFA's Hospital Partnership Subsidy Program*, Office of the Governor of New Jersey (May 19, 2021). <https://www.state.nj.us/dca/hmfa/about/pressreleases/2021/approved/20210519.shtml>
32. *Strategic Plan to Eliminate Health Disparities in New Jersey, 2007 Update*, New Jersey Department of Health and Senior Services, (2007). https://www.njleg.state.nj.us/OPI/Reports_to_the_Legislature/health_disparities_plan_2007_update.pdf
33. *Health Disparities*, New Jersey State Health Assessment Data, (Accessed July 16, 2021). <https://www-doh.state.nj.us/doh-shad/home/HealthDisparities.html>
34. *Race and Ethnicity Coding Guidelines for New Jersey Department of Health and Senior Services and its Grantees*, Center for Health Statistics and Informatics, New Jersey Department of Health, (December 2007). https://www.state.nj.us/health/chs/hnj2020/documents/re_coding_standard.pdf
35. *Status of State Actions on the Medicaid Expansion Decision*, Kaiser Family Foundation, (July 9, 2021). <https://www.kff.org/health-reform/state-indicator/state-activity-around-expanding-medicare-under-the-affordable-care-act/?currentTimeframe=0&sortModel=%7B%22colld%22:%22Location%22,%22sort%22:%22asc%22%7D>
36. *Tracking Section 1332 State Innovation Waivers*, Kaiser Family Foundation, (November 1, 2020). <https://www.kff.org/health-reform/fact-sheet/tracking-section-1332-state-innovation-waivers/>
37. *Lower Your Monthly Premiums with the NJ Health Plan Savings*, GetCoveredNJ, (Accessed July 16, 2021). <https://nj.gov/getcoverednj/financialhelp/premiums/>
38. *NJ WorkAbility*, New Jersey Department of Human Services, Division of Disability Services, (July 16, 2021). <https://www.state.nj.us/humanservices/dds/services/workability/>
39. *Continuous Eligibility for Medicaid and CHIP Coverage*, Medicaid.gov, (Accessed July 16, 2021). <https://www.medicare.gov/medicaid/enrollment-strategies/continuous-eligibility-medicare-and-chip-coverage/index.html>
40. *Medicaid/CHIP Coverage of Lawfully-Residing Immigrant Children and Pregnant Women*, Kaiser Family Foundation, (January 1, 2021). <https://www.kff.org/health-reform/state-indicator/medicaid-chip-coverage-of-lawfully-residing-immigrant-children-and-pregnant-women/?currentTimeframe=0&sortModel=%7B%22colld%22:%22Location%22,%22sort%22:%22asc%22%7D>
41. *NJ Medicaid: Pregnant Women*, New Jersey Department of Human Services, Division of Medical Assistance & Health Services, (Accessed July 16, 2021). <https://www.state.nj.us/humanservices/dmahs/clients/medicaid/pregnant/>
42. *New Jersey Senate Bill 3798 (2020 Regular Session)*, LegiScan, (Accessed July 16, 2021). <https://legiscan.com/NJ/bill/S3798/2020>

43. Stainton, Lilo, "Without Saying So, NJ Expands Medicaid to Undocumented Children," *NJ Spotlight News*, (July 7, 2021). <https://www.njspotlight.com/2021/07/without-saying-so-nj-expands-medicaid-to-undocumented-children/>
44. *New Jersey Medicaid January 2020 MCO Contract*, New Jersey Department of Human Services, Division of Medical Assistance and Health Services, (Amended January 2020, Accepted January 13, 2021). <https://www.state.nj.us/humanservices/dmahs/info/resources/care/hmo-contract.pdf>
45. Ibid.
46. *States Reporting Social Determinant of Health Related Policies Required in Medicaid Managed Care Contracts*, Kaiser Family Foundation, (Accessed July 16, 2021). <https://www.kff.org/other/state-indicator/states-reporting-social-determinant-of-health-related-policies-required-in-medicaid-managed-care-contracts/?currentTimeframe=0&selectedRows=%7B%22states%22:%7B%22new-jersey%22:%7B%7D%7D%7D&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>
47. *Medicare State ACO Activities*, National Association of ACOs, (July 16, 2021). <https://www.naacos.com/medicaid-acos>
48. *New Jersey Medicaid January 2020 MCO Contract*, New Jersey Department of Human Services, Division of Medical Assistance and Health Services, (Amended January 2020, Accepted January 13, 2021). <https://www.state.nj.us/humanservices/dmahs/info/resources/care/hmo-contract.pdf>
49. *New Jersey Medicaid January 2020 MCO Contract*, New Jersey Department of Human Services, Division of Medical Assistance and Health Services, (Amended January 2020, Accepted January 13, 2021). <https://www.state.nj.us/humanservices/dmahs/info/resources/care/hmo-contract.pdf>
50. *Accountable Health Communities: Transforming Whole Person Care in Our Region*, Camden Coalition of Healthcare Providers, (Accessed July 16, 2021). <https://camdenhealth.org/coalition-building/local-initiatives/accountable-health-communities/>
51. *Accountable Health Communities Model*, Centers for Medicare & Medicaid Services, (July 16, 2021). <https://innovation.cms.gov/innovation-models/ahcm>
52. Morton, Heather, *Broadband 2020 Legislation*, National Conference of State Legislatures, (January 11, 2021). <https://www.ncsl.org/research/telecommunications-and-information-technology/broadband-2020-legislation.aspx>
53. Morton, Heather, *Broadband 2021 Legislation*, National Conference of State Legislatures, (April 29, 2021). <https://www.ncsl.org/research/telecommunications-and-information-technology/broadband-2021-legislation.aspx>
54. New Jersey Assembly Bill 5111 (2019 Regular Session), (Accessed July 16, 2021). https://www.njleg.state.nj.us/2018/Bills/A9999/5111_11.PDF
55. New Jersey Assembly Bill 850 (2020 Regular Session), Bill Track(Accessed July 16, 2021). <https://www.billtrack50.com/BillDetail/1169435>
56. Nix, Naomi, "Newark Residents Will be Able to Pay Just \$10 a Month for Unlimited Internet," *NJ.com*, (January 30, 2015). https://www.nj.com/essex/2015/01/newark_residents_to_receive_10_a_month_internet.html
57. *State Government COVID-19 Digital Inclusion Response*, National Digital Inclusion Alliance, (July 16, 2021). <https://www.digitalinclusion.org/state-covid-19-digital-inclusion-response/>
58. *NJDOE 2020 Bridging the Digital Divide*, New Jersey Department of Education, Office of Grants Management, (Accessed July 16, 2021). <https://www.nj.gov/education/grants/digitaldivide/>
59. *New Jersey State Telehealth Laws*, Center for Connected Health Policy, (2020). <https://mtelehealth.com/wp-content/uploads/2020/05/State-Telehealth-Laws-and-Reimbursement-Policies-New-Jersey.pdf>
60. Ibid.
61. Ibid.
62. New Jersey Senate Bill 2559 (2020 Regular Session), LegiScan (Accessed July 16, 2021). <https://legiscan.com/NJ/bill/S2559/2020>
63. *New Jersey State Telehealth Laws*, Center for Connected Health Policy, (2020). <https://mtelehealth.com/wp-content/uploads/2020/05/State-Telehealth-Laws-and-Reimbursement-Policies-New-Jersey.pdf>
64. Governor Murphy Announces Departmental Actions to Expand Access to Telehealth and Tele-Mental Health Services in Response to COVID-19, Office of the New Jersey Governor, (March 22, 2020). <https://www.nj.gov/governor/news/news/562020/20200322b.shtml>
65. *Cultural Competency Standards: Federal Level*, New Jersey Statewide Network for Cultural Competence, (Accessed July 16, 2021). <https://www.nj.gov/njsncc/resources/standards/>

66. New Jersey P.L. 2005, Chapter 53, (Approved March 24, 2005). https://www.njleg.state.nj.us/2004/Bills/PL05/53_..HTM
67. New Jersey Senate Bill 703 (2020 Regular Session), LegiScan (Accessed July 16, 2021). <https://legiscan.com/NJ/bill/S703/2020>
68. *How States Collect, Report, and Act on COVID-19 Race and Ethnicity Data*, National Academy for State Health Policy, (July 2, 2012). <https://www.nashp.org/how-states-report-covid-19-data-by-race-and-ethnicity/#tab-id-2>
69. Schubel, Jessica, and Jennifer Wagner, *State Medicaid Changes Can Improve Access to Coverage and Care During and After COVID-19 Crisis*, (September 9, 2020). <https://www.cbpp.org/research/health/state-medicaid-changes-can-improve-access-to-coverage-and-care-during-and-after>
70. “Governor Murphy Announces Extension of Affordable Care Act Enrollment Period for Uninsured in New Jersey in Response to COVID-19 Pandemic,” *Insider NJ*, (January 28, 2021). <https://www.insidernj.com/press-release/governor-murphy-announces-extension-affordable-care-act-enrollment-period-uninsured-new-jersey-response-covid-19-pandemic/>
71. *State Plan Amendment NJ-20-0028*, Centers for Medicare & Medicaid Services, Center for Medicaid & CHIP Services, (July 8, 2020). <https://www.medicaid.gov/CHIP/Downloads/NJ/NJ-20-0028.pdf>
72. *Notice of Rule Waiver/Modification/Suspension Pursuant to Executive Order No. 103: Temporary Rule Waiver Adopted by Commissioner Carole Johnson*, New Jersey Department of Human Services (March 31, 2020).
73. *Medicaid Emergency Authority Tracker: Approved State Actions to Address COVID-19*, Kaiser Family Foundation, (July 1, 2021). <https://www.kff.org/coronavirus-covid-19/issue-brief/medicaid-emergency-authority-tracker-approved-state-actions-to-address-covid-19/#note-1-20>
74. Ibid.
75. New Jersey Assembly Bill 3843 (2020 Regular Session), LegiScan (Accessed July 16, 2021). <https://legiscan.com/NJ/text/A3843/id/2178174>
76. *Where Can I Get Free, Public COVID-19 Testing or Treatment?*, New Jersey COVID-19 Information Hub, (Accessed July 16, 2021). <https://covid19.nj.gov/faqs/nj-information/testing-and-treatment/where-can-i-get-free-public-covid-19-testing-or-treatment>



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With support from the Robert Wood Johnson Foundation and Arnold Ventures, the Healthcare Value Hub provides free, timely information about the policies and practices that address high healthcare costs and poor quality, bringing better value to consumers. The Hub is part of Altarum, a nonprofit organization that creates and implements solutions to advance health among at-risk and disenfranchised populations.

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