

Newark Municipal Council Health Committee Meeting--November 8, 2010

Summary of the Commissioner's powerpoint delivered

At the Department, we are committed to protecting the public health, ensuring the delivery of high quality health care, supporting our seniors and shaping health care policy. Some ongoing initiatives include championing the use of Health Information Technology, ensuring an adequate physician supply, implementing Health Reform, rebalancing long-term care options for seniors, undertaking Regional Health Planning and implementing the Medicinal Marijuana Program in our state.

Health Information Technology serves as the critical link—to evidence-based medicine, to empowering patients and to improving care coordination. New Jersey is making progress in this area. Our state was awarded \$11.4 million in federal funds to work with four regional Health Information Exchanges (HIE). New Jersey is also developing a statewide HIE, which will serve as a backbone to all exchanges and will improve patient outcomes by making real time data accessible to health care providers across our state.

As part of Health Reform, New Jersey received a \$1.6 million grant, which will also allow us to improve public health. With this funding DHSS will create a statewide Local Performance Management Initiative to improve outcomes through improved local health performance. Through this enhanced collaboration with local and county public health partners, we will improve outcomes and the ability of offices to meet national public health standards. Another initiative that will allow DHSS to improve quality and coordination of care is Regional Health Planning. Working with local health officials, DHSS is using regional planning to redirect care out of emergency departments to Federally Qualified Health Centers that can provide preventive care to patients.

Critical to quality of care in our state is a sufficient supply of physicians. It is estimated that by 2020, New Jersey will need 2,800 more physicians than it currently projects to be practicing at that time. The Association of American Medical Colleges, Center for Workforce Studies has released new physician shortage estimates that, beginning in 2015, are 50 percent worse than originally anticipated prior to health care reform. I look forward to working with the physician community to develop initiatives to improve the environment of practice in our state.

In addition to improving health in our state, DHSS is also charged with ensuring our seniors have options that allow them to age with independence and dignity. To that end, our Department has been working on rebalancing funding to ensure that seniors have increased opportunities to age in home and community based settings. We have made significant progress. Previously 90 percent of funding was directed to nursing home based care, now only 70 percent is dedicated to this care and 30 percent is directed to home and community based care.

Another issue DHSS is working on is implementing the Medicinal Marijuana Program. Our Department has developed a physician-driven program that balances the need for access by qualified patients with the need for safety and security. The physician registry

for the program launched last month and this month patients can register and vendors can apply to be part of the program. We expect that medicinal marijuana will be available in summer 2011.

DHSS remains committed to preserving and expanding access to high quality care for our residents and giving seniors more options to live with independence & dignity. To achieve these goals, we will need the help of county and local government, health care providers, the health care industry and advocacy organizations.