Governor Christie’s Budget Invests $985 Million in Hospital Funding

By Mary E. O’Dowd, MPH, Commissioner
New Jersey Department of Health

The budget Governor Christie proposed for Fiscal Year 2015 invests $985 million in hospital funding, continuing the state’s ongoing commitment to providing quality health care to New Jersey’s most vulnerable.

Specifically, the budget includes $650 million for Charity Care and maintains funding for three programs: $100 million for Graduate Medical Education, $166.6 million for an incentive program for improving quality of care and $24.7 million for mental health care. In addition, University Hospital in Newark receives a direct subsidy of $43.8 million.

Funding for University Hospital is expanded by $25 million to continue to support its role as a health care cornerstone of the Newark community, including maintaining its status as a Level 1 Trauma Center.

The change in Charity Care funding from $675 million in the current budget to $650 million in Fiscal Year 2015 is consistent with the fact that documented Charity Care declined more than $30 million between 2010 and 2012 - and that future decreases are expected due to health reforms, specifically Medicaid expansion, regional health planning, improving pregnancy outcomes and the efforts of many hospitals and public health organizations around the state working to improve population health.

The Charity Care formula has been revised to account for hospitals that have seen an increase in Charity Care over the past two years, those that have seen a decrease, and to place a cap on the total funding any individual hospital can receive in Fiscal Year 2015.

Equity, transparency, predictability and accountability continue to be the cornerstones of hospital funding for State Fiscal Year 2015.

University Hospital in Newark will receive a $43.8 million subsidy, a $25 million increase over the $18.8 million in the Fiscal Year 2014 budget.

Some 42 teaching hospitals will receive a total of $100 million for Graduate Medical Education (GME), which supports the training of interns and residents. A new component of the formula, based on a suggestion from the industry, rewards administrative efficiency by using median data on GME programs costs rather than individual hospital costs.

Also continued in the budget is $166.6 million for the hospital incentive program known as Delivery System Reform Incentive Payments (DSRIP). A total of 56 hospitals are participating in this program and their plans are currently under federal review. This program establishes a new precedent in New Jersey, representing the first time hospital subsidies are conditioned on hospitals achieving improvements in quality of care.

The hospital specific funding levels are available at: http://goo.gl/3cm9CO

To view the Calendar Year 2012 Documented Charity Care report visit: http://nj.gov/health/charitycare/documents/cc_reportdoc2012.pdf
166,000 Units of Blood Collected During the Super Community Blood Drive

For eight months in the run-up to Super Bowl XLVIII the New Jersey Workplace Blood Donor Coalition, co-chaired by the Department of Health and Novartis Pharmaceuticals Corporation, joined with the 2014 NY/NJ Super Bowl Host Committee and two blood centers in the New York City area to stage the Super Community Blood Drive. This unique campaign brought New Jersey and New York together to plan a two-state blood drive initiative.

In New Jersey, nearly 166,000 units of blood were collected in nearly 6,000 blood drives. The state’s blood centers reported that more than 38,700 new donors gave blood during the campaign.

The Super Community Blood Drive represented the most extensive collaboration ever between Coalition members and New Jersey’s blood bank professionals. Working together they enlisted new donors and encouraged New Jerseyans to give blood at worksites, community blood drives, local blood centers and hospital collection facilities.

Twice during the campaign the state’s six largest blood centers joined forces to conduct all-day blood drive events – the “Blood Drive Tailgate” and the “4th & Goal Blood Drive” – that attracted hundreds of donors and promoted the critical need for blood.

For information about upcoming blood drives and donation sites throughout New Jersey, visit www.njsave3lives.com.

Super Bowl XLVIII Ticket Winners Announced

Katie Wilkinson of Mt. Laurel and Paul Branagan of Carteret were the winners of New Jersey’s Super Community Blood Drive campaign sweepstakes. Each received a pair of tickets to Super Bowl XLVIII on February 2, at MetLife Stadium.

Their names were drawn at random from the tens of thousands of generous New Jerseyans who donated blood during the campaign.

Katie Wilkinson surprised her fiancé, Nick Knook, with news of the tickets at the presentation ceremony held on Thursday, January 30th at the Red Cross Camden County Donor Center. The couple married the day before Super Bowl Sunday and attended the game the next day.

Winner Paul Branagan said that he would take his son, an avid football fan, to the game.

The presentation ceremony was hosted by the American Red Cross – Penn-Jersey Region. Both winners participated in Red Cross blood drives.

Blood is critically needed during the winter months. Hospitals need blood every day to treat patients, and every donation helps. The organizers of the Super Community Blood Drive wish to thank all the donors who turned out to give blood during the campaign.
Lorraine Freed Garg, MD, FAAP, Director of Maternal and Child Health Services, received an American Academy of Pediatrics national award last fall for Exceptional Public Health Leadership in Critical Congenital Heart Disease Initiatives. Under Dr. Garg’s leadership, New Jersey’s Critical Congenital Heart Defects screening protocol has been implemented and statewide surveillance mechanisms have been established at state birthing facilities.

Collette Lamothe-Galette, Accreditation Coordinator, Office of Strategic Planning and Policy, attended the Advancing Accreditation in Large Jurisdictions meeting hosted by the Association of State and Territorial Health Officials and the Robert Wood Johnson Foundation. She provided information on accreditation readiness and quality improvement activities at the Department.

Michael Marra and Eric DeCicco, Surveyors in the Division of Health Facilities Evaluation and Licensing, attended Fire Inspector 1 Certification Training, which prepares Fire Inspectors for certification based on standardized performance requirements.

Victoria Roza, Division of Public Health Infrastructure, Laboratories, and Emergency Preparedness, presented Hippocrates software to the Texas Department of State Health Services to demonstrate how Hippocrates could support Texas public health emergency management response activities.

Alyssa MacMillan, Research Fellow, Division of Public Health Infrastructure, Laboratories & Emergency Preparedness, attended the Food Emergency Response Network Food Microbiology and Rapid Methods Course, that improves the Department’s ability to respond to bioterrorism events involving the food supply.

Eileen MacDonald, Dolores Ficarra, and Margaret Barr, Health Care Services Evaluator Nurses, in the Division of Health Facilities Evaluation and Licensing, attended CMS Basic Long-Term Care Training. The course provided 5 days of interactive training experiences designed to teach core topics on how to correctly apply and interpret Federal regulations.
Governor Christie Proposes Tax Parity For Electronic Cigarettes

The budget Governor Christie proposed for State Fiscal Year 2015 would make New Jersey the second state in the nation to tax electronic cigarettes.

Currently, e-cigarettes are unregulated and subject to standard state sales taxes only. The Governor’s proposal would bring e-cigarettes in line with the same tax that applies to conventional cigarettes.

The Medical Society of New Jersey, the New Jersey Prevention Network, NJ Breathes and several key legislators have indicated support for the proposal. Additionally, researchers at Rutgers Cancer Institute of New Jersey have been conducting research to further understand the risks of using electronic cigarettes as an unregulated product and support efforts to improve public health.

Sales and awareness of e-cigarettes have grown exponentially in the last few years; in 2013 sales approached $1.8 billion in the United States. Research conducted by Cancer Institute of New Jersey members found that in 2013, almost half (46.8%) of the smokers in the US have tried electronic cigarettes.

Nationally, the percentage of middle and high school students who used e-cigarettes more than doubled from 2011 to 2012, the CDC reports. Increasing the price of tobacco products is one of the CDC recommendations for preventing tobacco use among youth.

“We are deeply concerned about the lowered perception of risk regarding e-cigarettes among youth that is translating into higher levels of use,” said Diane Litterer, President & CEO of the New Jersey Prevention Network. “One evidence-based strategy to limit adoption of tobacco products, including e-cigarettes, is increased costs through tax parity.”

Findings from the National Youth Tobacco Survey show that the percentage of high school students who reported ever using an e-cigarette rose from 4.7 percent in 2011 to 10.0 percent in 2012. In the same time period, high school students using e-cigarettes within the past 30 days rose from 1.5 percent to 2.8 percent.

Beginning in mid-2016, advertising for e-cigarettes would be banned in the 28 nations of the European Union, as it already is for conventional tobacco products. E-cigarettes would also be required to carry graphic health warnings and must be childproof. The amount of nicotine would be limited to 20 milligrams per milliliter, similar to conventional cigarettes.

In 2010, New Jersey was the first state in the nation to ban use of e-cigarettes in public places as part of the state’s smoke free air law.

Prime sponsors of the 2010 legislation were Assemblywomen Nancy Munoz, Joan Voss, Mary Pat Angelini, Linda Stender, as well as Assemblyman Paul Moriarty and former Assemblywomen Connie Wagner. Co-sponsors included Senators Vitale, Gordon, Codey and Whelan, and Assemblywoman Greenstein and former Assemblywoman Evans.
Encouraging Development in Obesity Rates Among 2 to 5 Year Olds

The latest CDC obesity data, published in the February 26 issue of the *Journal of the American Medical Association*, show a significant decline in obesity among children aged 2 to 5 years. Obesity prevalence for this age group went from nearly 14 percent in 2003-2004 to just over 8 percent in 2011-2012—a decline of 43 percent—based on CDC’s National Health and Nutrition Examination Survey (NHANES) data.

“We continue to see signs that, for some children in this country, the scales are tipping. This report comes on the heels of previous CDC data that found a significant decline in obesity prevalence among low-income children aged 2 to 4 years participating in federal nutrition programs,” said CDC Director Tom Frieden, M.D., M.P.H.

While the precise reasons for the decline in obesity among 2 to 5 year olds are not clear, many child care centers have started to improve their nutrition and physical activity standards over the past few years. In addition, CDC data show decreases in consumption of sugar-sweetened beverages among youth in recent years. Another possible factor might be the improvement in breastfeeding rates in the United States, which is beneficial to preventing obesity in breastfed children.

Overall, CDC’s latest NHANES obesity data published in this week’s issue of the Journal of the American Medical Association indicates there have been no significant changes in obesity prevalence among 2-19 year olds or adults in the United States between 2003-2004 and 2011-2012.

Read more at: [http://goo.gl/581g8z](http://www.cdc.gov/media/releases/2014/p0220-flu-report.html)

CDC Reports Flu Hit Younger People Particularly Hard This Season

This influenza season was particularly hard on younger and middle-age adults, the Centers for Disease Control and Prevention reported in its latest *Morbidity and Mortality Weekly Report* (MMWR). People age 18-64 represented 61 percent of all hospitalizations from influenza—up from the previous three seasons when this age group represented only about 35 percent of all such hospitalizations. Influenza deaths followed the same pattern; more deaths than usual occurred in this younger age group.

A second report in the MMWR showed that influenza vaccination offered substantial protection against the flu this season, reducing a vaccinated person's risk of having to go to the doctor for flu illness by about 60 percent across all ages.

“Flu hospitalizations and deaths in people younger- and middle-aged adults is a sad and difficult reminder that flu can be serious for anyone, not just the very young and old; and that everyone should be vaccinated,” said CDC Director Tom Frieden, M.D., M.P.H.

U.S. flu surveillance data suggests that flu activity is likely to continue for a number of weeks, especially in places where activity started later in the season. Some states that saw earlier increases in flu activity are now seeing decreases. Other states are still seeing high levels of flu activity or continued increases in activity.

Read more at: [http://www.cdc.gov/media/releases/2014/p0220-flu-report.html](http://www.cdc.gov/media/releases/2014/p0220-flu-report.html)
Every two seconds, someone in the United States is in need of blood. With just one donation of a pint of blood, up to three lives can be saved. In New Jersey, according to the state Department of Health, fewer than four percent of eligible residents donate regularly, resulting in the great need for blood donations.

Blood donations are not only used for emergency surgery, but also for everyday needs such as transfusions and treatments for those who suffer from blood disorders like sickle cell disease and certain types of cancer. In treating children and young adult patients in the Pediatric Hematology/Oncology Program at Rutgers Cancer Institute of New Jersey with these disorders, I see firsthand the critical need of having certain blood types and blood products (such as platelets) on hand for these individuals. Patients who are on a daily treatment regimen cannot afford to wait an extra day or two until their blood type becomes available.

Donating blood throughout the year is extremely important, however, the demand for blood is high during the winter months. Donor turnout this time of year typically takes a plunge due to inclement weather and the flu season being in full swing. A number of universities across the state will be on recess in a few weeks. If every student home on break gave blood, local blood banks could easily be replenished.

Helping is simple, with the entire process taking about 30 minutes. One must be 17 years of age or older, weigh at least 110 pounds and be in good health. To find a donation center in your area or to learn more about how to set up a blood drive at your workplace, visit the Department of Health ‘New Jersey Save3Lives’ webpage at: http://www.state.nj.us/health/njsave3lives/index.shtml. Remember, it’s as simple as rolling up a sleeve.

Richard Drachtman, MD, is the interim chief of Pediatric Hematology/Oncology at Rutgers Cancer Institute of New Jersey and a professor of pediatrics at Rutgers Robert Wood Johnson Medical School.