

# Barnabas Health

## NEWARK BETH ISRAEL MEDICAL CENTER COMMUNITY HEALTH NEEDS ASSESSMENT 2013

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## **ACKNOWLEDGEMENTS**

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(1) The CHNA's development consultants, New Solutions, Inc., have planned and conducted numerous community needs assessments and implementation plans with multiple organizations including individual hospitals, health systems, other health care and community organizations such as consortia comprised of a wide range of participant organizations. The NSI team, of which three are Ph.D. prepared, includes: planning consultants, market researchers, epidemiologists, computer programmers and data analysts. NSI has extensive regional and local community knowledge of health issues, community services and provider resources for the community reviewed by this assessment. This expertise, as well as the methodological and technical skills of the entire staff, was brought to bear in conducting this Needs Assessment and Health Improvement Plan.

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## **EXECUTIVE SUMMARY**

### **Background**

The Community Health Needs Assessment (CHNA) for the communities served by Newark Beth Israel Medical Center (NBIMC) was designed to ensure that the Medical Center continues to effectively and efficiently serve the health needs of the area. The CHNA was developed in accordance with all federal rules and statues, specifically, PL 111-148 (the Affordable Care Act) which added Section 501(r) to the Internal Revenue Code. The Medical Center is a member of the Barnabas Health System (BH) which provided additional support and leadership in the development of the Plan. The President of the Medical Center is also Chairman of the Board of the Greater Newark Health Care Coalition (GNHCC), which is made up of key stakeholders in the county (government, civic, community-based organizations, faith-based organizations and health care providers) who are focused on improving the health of community residents.

The GNHCC convened a meeting of its members and all of the public health officers in the county to review Essex County health indicator data and to identify the top issues facing the county. These recommendations were considered by NBIMC and five were selected based on NBIMC's capacity, resources, competencies, and needs specific to the populations it serves.

The CHNA uses detailed secondary public health data at the county and community levels to identify health assets, gaps, disparities and trends. These data were supplemented by meetings and discussions with local health departments who shared data from their own needs assessments and by input from GNHCC Public Health Officers Symposium which provided additional insight and expertise and led to the identification of Plan priorities. The communities considered throughout this CHNA are pictured in page (i), and are primarily located within Essex County.

Essex County is the second most densely populated county in New Jersey. The county encompasses a land mass of 127 square miles and is made up of 22 urban and suburban municipalities.

Between 2000 and 2010, Essex County's population decreased by 1.2%. This occurred predominantly in the urban areas of Irvington (-11.2%), Orange (-8.5%) and East Orange (-8.1%). The highest growth occurred in western suburban areas of Roseland (9.6%) and Livingston (7.7%).

Essex County's 22 municipalities are widely diverse, encompassing large inner-city communities, such as Newark, Irvington, East Orange and Orange in the southeast, and suburban communities like Livingston, Essex Fells and Roseland to the west. The

**NBIMC Service Area**



southeastern section of the county makes up most of NBIMC's primary service area, along with small sections of Union County.

Essex County's economic wealth is not distributed uniformly across all residents, with large urban areas that include a large number of poor and minority populations.

The following is an example of the differences and disparities identified in this CHNA:

- In 2011, 11.7% of Essex County families had incomes below the poverty level. Two zip codes in NBIMC's service area (Newark 07107) and Newark (07104) had rates that were higher, 23.3% and 21.3%, respectively.
- In 2011, 10.8% of county residents were unemployed, which was higher than the State rate (9.3%). All of the urban areas of the county met or exceeded the county rate.
- In 2011, median household income in Essex County was \$53,355 compared to \$30,098 in Newark 07107, and \$35,587 in Newark 07104.
- 16.5% of Essex County residents have limited English proficiency compared to nearly 25% of Newark's population.
- NBIMC's Primary Service Area (PSA) is 79% Black or African-American compared to 39% in Essex County and 13% in the State. The Secondary Service Area (SSA) is 37% Hispanic compared to 20% in the county and 18% statewide.

Disparities in Essex County and NBIMC's Primary Service Area (PSA) residents' incidence and prevalence of illness identified by this CHNA include:

- Cancer is the second leading cause of death in the county. Age-adjusted rates vary by race, and rates among Blacks in Essex County were significantly higher than the rate for all county residents.
  - Black/Non-Hispanic = 235.2/100,000
  - Hispanic = 106.8/100,000
  - White = 167.8/100,000
- Septicemia is the fourth leading cause of death in Essex County. Age-adjusted rates vary by race and are significantly higher among Blacks than for all racial/ethnic groups.
  - Black, Non-Hispanic = 51.0/100,000
  - Hispanic = 23.7/100,000
  - White, Non-Hispanic = 19.4/100,000
- Diabetes is the fifth leading cause of death in Essex County. Rates among Black residents are significantly higher than for all county residents.
  - Black, Non-Hispanic = 42.1/100,000
  - Hispanic = 32.9/100,000
  - White, Non-Hispanic = 18.8/100,000
- Disparities are also present among maternal and child health indicators.
  - The percent of Black infant deaths is significantly higher than for all races, 13.4/100,000 compared to 8.5/100,000 overall.
  - Low and very low birth weight among African-Americans in Essex County remains significant higher than all other racial/ethnic groups.
    - The percentage of low birth weight babies born to White women is 8.6% compared to 7.9% for Hispanic women and 14.7% for Black women.
    - The percentage of very low birth rate babies born to White women is 1.8% compared to 1.4% for Hispanic women and 3.8% for Black women.

- In 2010, the county's teen birth rate was 30.0 per 1,000. However, three communities in NBIMC's service area, which has lower socioeconomic status or higher concentration of minorities exhibited rates that were higher.
  - Newark 07114 = 61.1/1,000
  - Newark 07108 = 58.8/1,000
  - Newark 07104 = 58.7/1,000
- According to the 2010 BRFSS study, 3.4% of Essex County residents report they were told they had angina or Coronary Heart Disease. In a 2009 study, 8% of Newark residents reported angina or Coronary Heart Disease.
- In the same 2010 study, 3.1% of Essex County residents report being told they had a heart attack. In 2009, 6% of Newark residents reported a heart attack.
- In the 2010 study, 8.3% of Essex County residents reported asthma compared to 16% of Newark residents in 2009.
- NBIMC's PSA had an ED use rate (590.6/1,000) that was higher than the county rate (408.9/1,000).
- Inpatient use rates in Newark 07103 (231.5/1,000) and Newark 07108 (231.1/1,000) were higher than the county-wide use rate (180.9/1,000).
- Inpatient admissions and ED visits for mental health and substance abuse in the PSA were higher than the county and State.

Healthy Community Indicators identify that:

- The homicide rate in Essex County (13.2/100,000) is nearly three times higher than the statewide rate (4.4/100,000).
- The violent crime rate in Essex County is more than twice the statewide rate, 674/100,000 compared to 309/100,000.
- Essex County has a higher annual number of unhealthy air quality days due to fine particulate matter and ozone than the State and a significantly higher number than the National Benchmark.
- Essex County and its major urban areas have a significantly larger amount of housing built before 1950 than exists statewide, 43.2% compared to 27.8%. Such housing presents a potential lead-based paint hazard.
- Essex County has higher percentage of fast food restaurants, 53%, and liquor stores, 25/100,000 than the State, 50%, and 20/100,000, respectively.
- Essex County residents report a statistically significantly higher number of physically unhealthy days per month, 3.3, and mentally unhealthy days, 3.6, than the National Benchmarks of 2.6 and 2.3, respectively.

### **TOP SIX HEALTH ISSUES**

Six health issues emerged as those most likely to benefit residents of the areas served by the Medical Center and to be within its purview, competency and resources to impact in a meaningful manner. These include:

## 1. Heart Disease

Heart disease refers to a constellation of heart conditions including coronary artery disease, heart attack, cardiac arrest, congestive heart failure, and congenital heart diseases. Heart disease is the leading cause of death for both men and women, and most ethnicities. Approximately 1 in every 4 deaths in the U.S. is due to heart disease.<sup>1</sup>

Coronary heart disease is the most common type of heart disease killing more than 385,000 people annually.<sup>2</sup> This condition alone costs the U.S. \$108.9 billion annually for healthcare services, medications and lost productivity.

Some risk factors for heart disease such as age, family history of early heart disease, male gender or post-menopausal women, and race cannot be changed. Other risk factors are associated with lifestyle choices and can be changed.

Physical inactivity is a modifiable risk factor for heart disease and one that can impact other risk factors including obesity, high blood pressure, high triglycerides, low levels of HDL cholesterol, and diabetes. Regular physical activity can improve risk factor levels. High blood pressure usually has no symptoms and not only damages the heart, but the kidneys and brain as well. Overweight and obesity, or excess body fat, is often linked to LDL cholesterol and triglyceride levels, high blood pressure and diabetes. Diabetes increases the risk for heart disease. Nearly three-fourths of diabetics die from some form of heart vessel disease.

Excessive alcohol use leads to increased blood pressure, and increases the risk for heart disease. It also increases blood levels of triglycerides which contribute to atherosclerosis. Other lifestyle choices like cigarette smoking increase the risk of developing heart disease and heart attack by 2 to 4 times. Cigarette smoking promotes atherosclerosis, and increases the levels of blood clotting factors. Nicotine raises blood pressure and carbon monoxide reduces the amount of oxygen the blood can carry to the lungs. Second hand smoke can increase the risk of heart disease to non-smokers, as well.<sup>3</sup>

Dietary choices can also increase one's risk for heart disease and obesity. Diets high in saturated fats and cholesterol raise blood cholesterol levels and promote atherosclerosis. High salt content in diets can raise blood pressure levels.

The impact of heart disease on the populations served by NBIMC as well as the incidence of lifestyle behaviors is seen in the following ways:

- The age-adjusted rate of heart disease per 100,000 population is nearly double the *Healthy People 2020* target.
- In 2009, 8% of Newark residents reported angina or coronary heart disease compared to 3.9% statewide.
- In 2009, 6% of Newark residents reported having a heart attack compared to 3.8% statewide.

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<sup>1</sup> Retrieved from [www.cdc.gov/heartdisease/facts.htm](http://www.cdc.gov/heartdisease/facts.htm). Accessed 7/9/13.

<sup>2</sup> Retrieved from [www.cdc.gov/heartdisease/facts.htm](http://www.cdc.gov/heartdisease/facts.htm). Accessed 7/9/13.

<sup>3</sup> Retrieved from [www.cdc.gov/heartdisease/behavior.htm](http://www.cdc.gov/heartdisease/behavior.htm). Accessed 7/9/13.

- The percentage of people reporting high cholesterol in Essex County is nearly three times higher than the *Healthy People 2020* target.
- The percentage of smokers in Essex County is significantly higher than the CHR benchmark.
- Excessive drinking among Essex County residents (14%) ranks nearly double the CHR benchmark (8%).
- Congestive heart disease ranked #1 for all ACSC for which Essex County residents were hospitalized. The same was true in NBIMC's PSA.

## 2. Cancer

Cancer is the second leading cause of death in the U.S. Cancer is a class of diseases characterized by out of control abnormal cell growth. There are over 100 different types of cancers. Cancer cells can spread to other parts of the body through the blood and lymph systems.

Cells can experience abnormal growth if there are damages to DNA, and, therefore, damage to the genes involved in cell division. Cancer can result from a genetic predisposition that is inherited from family members. Thus, it is possible to be born with a gene mutation which can make one more likely to develop cancer.

As people age there is an increase in the number of possible cancer causing mutations that can occur in our DNA. This makes age a primary risk factor for cancer. Several viruses such as HPV, Hepatitis B and C, Epstein-Barr and HIV, and anything that weakens the immune system's ability to fight infections are also risk factors. Other factors known as carcinogens are substances that are responsible for damaging DNA, promoting and aiding cancer. Tobacco, asbestos, radiation (gamma and x-rays), the sun, and car exhaust fumes are well known carcinogens.

There are a number of things that individuals can do to reduce their risk of getting cancer including eating a healthy diet and keeping to a healthy weight, avoiding tobacco, limiting alcohol consumption, and protecting one's skin from the sun.

In addition, the number of new cancers can be reduced and cancer deaths prevented by following recommended screening procedures. For example, cervical and colorectal cancers can be avoided by finding precancerous lesions, so they can be treated before they become cancerous. Screening for cervical, breast and colorectal cancers also help detect these cancers at an early and treatable stage.

Cancer statistics and screening rates for Essex County are noted below.

- The age-adjusted mortality rate due to cancer (183.61/100,000) decreased by more than 7.9 points from 2004 to 2008 but remains significantly higher than the *Healthy People 2020* target of 160.6/100,000.
- Cancer incidence rates for breast and melanoma were better than the rates statewide.
- The percent of women having a pap test in the last three years (81.3%) was lower than the *Healthy People 2020* target of 93.0%.
- The percentage of adults 50+ reporting a sigmoidoscopy or colonoscopy increased between 2004 and 2010.



### **3. Access to Primary Care**

An individual's ability to access health services has a profound impact on every aspect of their health. Yet, approximately 1 in 5 Americans (children and those under 65) do not have medical insurance. People without insurance are less likely to have a regular source of care, such as a primary care provider (PCP) and are more likely to skip routine medical care due to cost, increasing their risk of serious illness and disability.

Regular and reliable access to health services can:

- Prevent disease and disability.
- Detect and treat illnesses or other health conditions.
- Increase quality of life.
- Reduce the likelihood of premature death and increase life expectancy.

There are a number of factors which influence an individual's access to primary care in addition to insurance coverage. These factors include services, timeliness, and workforce issues.

Improving healthcare services is predicated on the ability of people to have a usual and ongoing source of care. People with a usual source of care have better outcomes, fewer disparities, and lower costs.<sup>4</sup> Improving services also includes access to evidence-based preventive services to prevent illness or detect disease at an earlier and more treatable stage.

Timeliness in healthcare relates to actual or perceived difficulties in obtaining care when one is ill or injured. Such measures include physician office and ED wait times and waits between diagnosis and treatment.

Workforce issues relate to the number of PCPs that are available to serve the needs of their communities. Over the last several decades there has been a decrease in the number of medical students interested in working in primary care in the U.S. Difficulties in accessing PCPs are expected to increase following full implementation of the Affordable Care Act, which is slated to increase insurance coverage to an additional 32 million Americans.

Access to primary care services impacts county and service area residents in the following ways:

- The number of years of potential life lost among Essex County residents is far higher than the County Health Ranking (CHR) Benchmark.
- Essex County has a lower rate of primary care physicians per 1,000 (99.7) than the CHR National Benchmark (158.55).
- A significantly higher percentage of Essex County residents lack healthcare coverage compared to the State.
- Essex County children use ED services for Ambulatory Care Sensitive Conditions (ACSC) at a significantly higher rate than children statewide, 104.0/1,000 compared to 78.2/1,000.
- The same can be said for adults. Those over 18 in Essex County had an ACSC ED visit rate of 75.4/1,000 compared to 51.2/1,000 statewide.
- Likewise, ED visits for adults for primary care conditions in Essex County were significantly higher than the State and have been rising since 2008.

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<sup>4</sup> Retried from [www.healthypeople.gov/2020/topicsobjectives2020/overview.aspx?topicid=1](http://www.healthypeople.gov/2020/topicsobjectives2020/overview.aspx?topicid=1). Retrieved 7/8/13.

- The NBIMC service area showed a need for 36 additional primary care physicians when calculated by traditional physician-to-population ratios.
- NBIMC's PSA adult rate of ED visits for ACSC (122.7/1,000) exceeded the statewide rate, 51.2/1,000. The same was true in the case of pediatric patient visits to the ED from the PSA.
- NBIMC's PSA had an inpatient admission rate for ACSC (32.9/1,000) that exceeded that of the State (22.6/1,000) and county (25.1/1,000).

#### **4. Asthma**

Asthma is characterized by inflammation of the air passages resulting in a temporary narrowing of the airways that get air from the nose and mouth to the lungs. Asthma symptoms can be caused by exposure to allergens and irritants that are inhaled into the lungs resulting in inflamed or constricted airways. Symptoms include wheezing, coughing, and tightness in the chest. Triggers that can initiate an asthma attack include allergens such as pollen, dust, animal dander, drugs, and food additives, as well as viral respiratory infections and physical exertion. Obesity, use of acetaminophen and exposure to formaldehyde or other volatile chemicals can also trigger attacks.

While there is no cure for asthma, it can be managed with proper prevention and treatment. Asthma has a genetic component. Nearly 25 million Americans suffer from asthma. The prevalence of the disease has been on the rise since the 1980s across all age, sex and racial groups. Asthma affects children disproportionately.

Ethnic differences in asthma prevalence, morbidity and mortality are highly correlated with poverty, urban air quality, lack of patient education, and inadequate medical care.<sup>5</sup>

Asthma accounts for one-fourth of all ED visits in the U.S., 10 million outpatient visits and nearly 500,000 hospitalizations. Direct costs of care for the disease account for nearly \$10 billion in expenditures. Another \$8 billion is a result of indirect cost due to lost earnings due to death and disability.<sup>6</sup>

The impact of asthma on residents of the county can be seen in the following:

- 8.3% of Essex County residents reported asthma in 2010, up slightly from 2004 (8.2%). Residents of Newark, the county's largest city, reported an asthma prevalence rate of 16%.
- Asthma had the second highest rate of ED visits for ACSC among children and adults in the county and PSA.
- The ED (ACSC) visit rate among adults for asthma was significantly higher in Essex County (10.3/1,000) than the State (4.9/1,000).
- In terms of admissions for ACSC, asthma ranked third in Essex County, and fourth in the PSA.
- The number of unhealthy air quality days due to both fine particulate matter and ozone were significantly higher than the CHR benchmark.

#### **5. Mental Health and Substance Abuse**

Mental health disorders are medical conditions that disrupt a person's thinking, mood, feelings, ability to relate to others, and daily functioning. These conditions reduce one's ability to cope with daily

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<sup>5</sup> Retrieved from [www.aafa.org/display.cpm?id=9&sub-42](http://www.aafa.org/display.cpm?id=9&sub-42). Accessed 7/9/2013.

<sup>6</sup> Ibid.

routines such as working, going to school, or raising a family. Mental health disorders include illnesses such as major depression, bipolar disorder, and post-traumatic stress disorder.

While the causes for mental disorders are unknown, there are certain factors that can increase an individual's risk of developing a mental disorder including family history, stressful life conditions, having a chronic disease, traumatic experience, use of illegal drugs, childhood abuse and neglect, or lack of social support. Mental disorders are treatable illnesses and most people with this condition can get their symptoms controlled with a treatment plan developed by a trained psychologist or psychiatrist.

Mental health illness affects children, adults and seniors. A recent report from the CDC reports 1 in 5 children in the U.S. suffer from a mental disorder.<sup>7</sup> These conditions affect boys and girls of all ages, regions, ethnic backgrounds, and races. Approximately, \$247 billion is spent on children's mental health each year.<sup>8</sup>

The number of visits to physicians' offices, hospital outpatient and emergency departments with a primary diagnosis of mental disorder number 63.3 million a year; 1.5 million receive a principal diagnosis of psychosis and are admitted to a hospital; and nearly 1 million nursing home residents suffer from a mental disorder, or 66.7% of all nursing home residents.<sup>9</sup>

- The average number of mentally unhealthy days per month reported by Essex County residents, 3.6, was significantly higher than the National benchmark of 2.3 days.
- The rate of hospital admissions for mental/behavioral health conditions per 100,000 population in Essex County rose among all age groups except the elderly between 2006 and 2010. The highest increases were among adults, 10.8/100,000 to 14.5/100,000 population.
- In NBIMC's SSA, the 2010 use rates for both ED visits and inpatient admissions for mental health conditions was higher than the State rate.

Substance abuse can be defined as a pattern of harmful use of any substance for mood altering purposes. These substances may include inhalants and solvents, illegal drugs, alcohol, and prescription drugs.

There are approximately 80,000 deaths attributable to excess alcohol abuse each year in the U.S. This makes excessive alcohol abuse the third leading cause of lifestyle-related death. In 2006, there were more than 1.2 million ED visits and 2.7 million physician office visits due to alcoholism. The economic costs were estimated at \$223.5 billion.<sup>10</sup>

According to the latest government statistics (2010) 8.9% of persons age 12 and over are involved in the use of illegal drugs or the non-medical use of prescription drugs.<sup>11</sup> The most commonly used drugs include marijuana, 6.9%, of those of the age of 12,<sup>12</sup> cocaine, 2.4 million users, hallucinogens, including ecstasy, 1 million users, methamphetamine, 730,000, and prescription drugs, 7 million users.<sup>13</sup>

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<sup>7</sup> Retrieved from [www.cdc.gov/mediareleases/2013/a0516-child-mental-health.html](http://www.cdc.gov/mediareleases/2013/a0516-child-mental-health.html). Accessed July 17, 2013.

<sup>8</sup> Ibid.

<sup>9</sup> Retrieved from [www.cdc.gov/nchs/fastfacts/mental.html](http://www.cdc.gov/nchs/fastfacts/mental.html). Accessed on July 13, 2013.

<sup>10</sup> Retrieved from [www.cdc.gov/alcohol/factsheets/alcohol-use/htm](http://www.cdc.gov/alcohol/factsheets/alcohol-use/htm). Accessed on July 18, 2013.

<sup>11</sup> Ibid.

<sup>12</sup> Ibid.

<sup>13</sup> [http://alcoholism.about.com/od/drugs/a/nsduh\\_drugs.htm](http://alcoholism.about.com/od/drugs/a/nsduh_drugs.htm). Accessed on July 18, 2013.

In 2008, 1.8 million people were admitted to addiction facilities that report to State data systems, 41.4% of the treatment admissions were for alcohol abuse, 20% for heroin and other opiates, and 17% for marijuana abuse.<sup>14</sup>

- The percentage of heavy drinkers in Essex County is nearly double the National benchmark.
- Among Essex County residents in treatment for substance abuse 50% are addicted to heroin, 22% to alcohol, 16% to marijuana, 8% to cocaine, and 4% to other drugs.
- The rate of heroin and cocaine addiction is statistically higher than the statewide rate.
- Substance abuse admissions in Essex County rose between 2006 and 2010, and the rate per 100,000 residents is significantly higher than the New Jersey rate for substance abuse admissions.
- Inpatient and ED use rates for mental health and substance abuse in NBIMC's PSA exceeded the State and county rates.

## 6. **Obesity**

Between 1980 and 2000, obesity rates doubled among children and adults and tripled among adolescents.<sup>15</sup> Obesity is a major risk factor for Type 2 Diabetes. This form of diabetes which was once believed to affect only adults is now being diagnosed in children. Overweight children with diabetes are at risk for serious complications of the disease which include kidney disease, blindness and amputations.

Overweight and obesity are associated with increased risks for many types of cancer, including cancer of the breast, colon, endometrial, esophagus, kidney, pancreas, gall bladder, thyroid, ovary, cervix and prostate, as well as multiple myeloma and Hodgkin's lymphoma.<sup>16</sup>

Although healthy lifestyle habits like healthy eating and physical activity can lower the risk of obesity and diabetes, too few adults or children eat the recommended five or more servings of fruits or vegetables a day or get the recommended amount of physical activity to provide health benefits.

Healthy lifestyle activities are influenced by a number of sectors of society – families, communities, schools, medical providers, faith-based organizations, the media, food and beverage industries, and entertain industries. Schools play a particularly critical role by offering safe environments for physical activities and policies that support healthy lifestyle choices. The following points highlight how the issues of disease incidence and risk factors play out in communities served by NBIMC.

- The percentage of Essex County residents reporting diabetes is on the increase rising from 7.8% to 10.2% between 2006 and 2010.
- Obesity in Essex County rose from 24.2% in 2006 to 27.3% in 2010.
- The percentage of people engaging in regular physical activities declined from 46% in 2005 to 43.1% in 2009, and is significantly lower than the *Healthy People 2020* target.
- The percentage of Essex County residents participating in any physical activity in the last month (72%) was lower than the CHR Benchmark (79%).
- In NBIMC's PSA, diabetes ranked as the second highest ACSC for which patients were hospitalized.

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<sup>14</sup> Ibid.

<sup>15</sup> Retrieved from [www.cdc.gov/pdf/facts\\_about\\_obesity\\_in\\_the\\_united\\_states.pdf](http://www.cdc.gov/pdf/facts_about_obesity_in_the_united_states.pdf). Accessed 7/8/13.

<sup>16</sup> Retrieved from [www.cdc.gov/healthyyouth/obesity/facts.htm](http://www.cdc.gov/healthyyouth/obesity/facts.htm). Accessed 7/8/13.

## **1. INTRODUCTION**

Newark Beth Israel Medical Center (NBIMC), located in Newark, New Jersey, is one of seven acute care hospitals operating in Essex County. NBIMC's primary service area comprises largely urban communities with low socioeconomic status (SES) and disparities in health status and access to services. These disparities are evidenced by inappropriate use of hospital/emergency department services that could have been treated with preventive and primary care.

NBIMC is a founding member of the Greater Newark Health Care Coalition (GNHCC), which is made up of key stakeholders in the county (government, civic, community-based organizations, faith-based organizations, and healthcare providers) who are focused on improving the health of community residents. NBIMC's President and CEO, John Brennan, serves as Chairman of the Board of the GNHCC. Ongoing relationships with community stakeholders and the GNHCC provided valuable input to this Community Health Needs Assessment (CHNA) from a wide range of organizations including representatives from the public health sector.

In 2012, NBIMC was honored with an American Hospital Association NOVA award for its three-pronged approach to improving health in the area. "The Beth Embraces Wellness" is an integrated approach to prevention in the community that includes the Beth Challenge, a work wellness program; KidsFit, a school-based education and nutrition program; and Beth Garden, a community garden and farmers market located in an old hospital parking lot.

*Healthy People 2020* is a 10-year agenda to improve the nation's health that encompasses the entire continuum of prevention and care. For over three decades *Healthy People* has established benchmarks and monitored progress over time to measure the impact of prevention activities. *Healthy People 2020* benchmarks are used throughout the report to assess the health status of residents.

The County Health rankings published by the University of Wisconsin Population Health Institute and the Robert Wood Johnson Foundation rank the health of nearly all counties in the United States. The rankings look at a variety of measures that affect health such as high school graduation rates, air pollution levels, income, rates of obesity and smoking, etc. These rankings are also used throughout the report to measure the overall health of Essex County residents. County rates are also compared to statewide rates. Statistical significance is calculated for values higher, lower or the same as the State or national benchmarks.

In June 2011, the National Prevention Council, created through the Affordable Care Act (ACA) in 2010, and tasked with the development of a National Prevention Strategy to realize the law's efforts to reduce costs, improve quality of care, and provide coverage options for the uninsured, published its strategy. The Council's overarching goal is to increase the number of Americans who are healthy at every stage of life. To achieve this goal, the strategy identifies four Strategic Directives and seven targeted Priorities. The Strategic Directions are core recommendations for developing a prevention-oriented society. The Strategic Directions are:

- **Healthy and Safe Community Environments:** Create, sustain, and recognize communities that promote health and wellness through prevention.
- **Clinical and Community Prevention Services:** Ensure that prevention-focused healthcare and community prevention efforts are available, integrated, and mutually reinforcing.

- **Empowered People:** Support people in making healthy choices.
- **Elimination of Health Disparities:** Eliminate disparities, improving the quality of life for all Americans.

With this framework, the Priorities provide directives that are most likely to reduce the burden of the leading causes of preventable death and major illness. The seven Priorities are:

- **Tobacco Free Living**
- **Preventing Drug Abuse and Excessive Alcohol Use**
- **Healthy Eating**
- **Active Living**
- **Injury and Violence Free Living**
- **Reproductive and Sexual Health**
- **Mental and Emotional Well-Being**

The NBIMC needs assessment was undertaken in this context and developed for the purpose of enhancing the health and quality of life throughout the community.

## **2. METHODOLOGY**

Data sources for the CHNA included secondary data and qualitative input derived from meetings/discussions with the public health community of Essex County and community providers and service agencies. This allowed the Hospital to identify and prioritize the top issues facing residents in the service area.

### **Secondary Data Source**

Over 30 secondary data sources were used in this Community Health Needs Assessment (CHNA). These included the United States Census Bureau, Centers for Disease Control and Prevention (CDC), New Jersey Department of Health (NJDOH), Behavioral Risk Factor Surveillance System (BRFSS), and the County Health Rankings mentioned above. See Appendix A.

### **Qualitative Data Sources**

#### ***Meetings with County/Local Health Departments and Key Community Stakeholders***

Barnabas Health met with a number of local health departments within Essex County at the beginning of the CHNA process and with the Greater Newark Health Care Coalition to advise them of the pending assessment and to request their input.

The Greater Newark Health Care Coalition agreed to convene a Public Health Officer's Symposium to review the collected data for Essex County and provide comments and assist in the prioritization of health issues and needs. Key community stakeholders, providers and community service organizations were also invited.

### **Prioritizing Needs**

On January 29, 2013, the Greater Newark Health Care Coalition convened a Public Health Officer's Symposium. Representatives of all the Essex County hospitals were invited as well as the full membership. The invite asked that the Public Health Officers submit in advance health issues and needs they believed were most important for their jurisdiction. This list was augmented by issues that evolved from the data analysis and discussion at the meeting. Attendees voted to choose the 10 top health concerns facing the county. These priorities were further reviewed by type of attendee.

### **Overall Weighted Average**

#### ***Health Priority Ranking – all Attendees***

1. Lack of Primary Care Access
2. Heart Disease
3. Mental Health
4. Diabetes
5. Health Care Access/Inadequate Health Insurance
6. Overweight/Obesity
7. Lack of Exercise

8. Hypertension
9. Cancer
10. Violent Crime

#### ***Public Health Officers' Ranking***

1. Diabetes
2. Overweight/Obesity (tied with #1)
3. Heart Disease
4. Mental Health
5. Lack of Exercise (tied with #4)
6. Hypertension
7. Asthma/Bronchitis (tied with #6)
8. Substance Abuse
9. Communicable Diseases (tied with #8)
10. Vaccine Preventable Diseases (tied with #8)

#### ***Clinical Providers' Ranking***

1. Lack of Primary Care
2. Mental Health
3. Diabetes
4. Health Care Access/Inadequate Health Insurance (tied with #3)
5. Heart Disease
6. Overweight/Obesity
7. Pre-natal Care (tied #6)
8. Hypertension
9. Lack of Exercise
10. Infant Mortality

The assembled information was then presented to hospital representatives who entered into a process of establishing priorities for the Implementation Plan. Following discussion of the priorities and the Hospital's ability to impact these needs the following priorities were selected.

1. Heart Disease
2. Cancer
3. Obesity
4. Asthma
5. Access to Primary Care
6. Mental Health and Substance Abuse

Oversight of the CHNA was provided by internal Hospital and system leadership. This insured that health issues, needs and priorities received the attention and support of the executive leadership of Newark Beth Israel Medical Center and Barnabas Health.



**Service Area Definition**

Newark Beth Israel Medical Center is located in Newark, New Jersey. It is one of seven hospitals serving residents in Essex County. The Hospital’s primary service area (PSA) consists of the following zip codes:

<b>ZIP Code</b>	<b>ZIP Name</b>
07112	NEWARK
07111	IRVINGTON
07108	NEWARK
07103	NEWARK
07106	NEWARK
07017	EAST ORANGE
07018	EAST ORANGE
07114	NEWARK
07205	HILLSIDE
07102	NEWARK

The service area is determined by taking into consideration three factors: patient origin, market share, and geographic continuity/proximity. Zips representing approximately 50% of the NBIMC patient origin form the initial PSA. Added to this list is any zip code in which the Hospital has a high market share presence, any zip code with low market share is deleted from the PSA definition and becomes part of the secondary service area (SSA). Geographic proximity to create a contiguous area completes the service area determination.

Most of the secondary data in this report is based on county level data. City or zip code level data is provided wherever possible to enhance the understanding of the specific needs of service area residents. Data obtained from the qualitative analyses provide further insight into health issues facing the communities served by the Hospital.

**Figure 2.1  
Service Area Map**



### **Notes on Data Sources**

In reviewing the document, the following notes will facilitate understanding.

#### **Color Indicator Tables**

Throughout the Health Profile Section, the reader will find tables that have red, yellow and green colored indicators. These tables compare the county level data to the *Healthy People 2020* targets, Community Health Rankings benchmarks and New Jersey State data. Data by race/ethnicity is compared to data for all races in the county, unless otherwise indicated.

A red indicator means the value is statistically worse than the comparison statistics. Green indicates a value statistically better than the comparison, and yellow that there is no statistical difference.

Depending upon the data source, various means were used to define statistical significance. Details related to these calculations can be found in Appendix B.

### **3. ESSEX COUNTY OVERVIEW**

Essex County is the second most densely populated county in New Jersey, with the third highest number of residents. The county encompasses a land mass of 127 square miles and is made up of 22 urban and suburban municipalities. These include:

- Belleville
- Bloomfield
- Caldwell
- Cedar Grove
- East Orange
- Essex Fells
- Fairfield
- Glen Ridge
- Irvington
- Livingston
- Maplewood
- Millburn
- Montclair
- Newark
- North Caldwell
- Nutley
- Orange
- Roseland
- South Orange
- Verona
- West Caldwell
- West Orange

Between 2000 and 2010, Essex County's population decreased by 1.2%. Declines occurred predominantly in the urban areas of Irvington (-11.2%), Orange (-8.5%) and East Orange (-8.1%). The highest growth occurred in western suburban areas of Roseland (9.6%) and Livingston (7.7%).

Essex County's 22 municipalities are widely diverse, encompassing large inner-city communities, such as Newark, Irvington, East Orange and Orange in the southeast, and suburban communities like Livingston, Essex Fells and Roseland to the west. Newark, the county's largest city, is also home to a cultural center, a sports and entertainment complex, a number of colleges and universities, and headquarters for a number of corporate giants. Newark also serves as a major national transportation hub. To the north and west lie suburban towns with shopping malls and industrial and professional office parks, luxury condominiums and townhouses, and private homes.

In 1865, Essex County became the first county in the U.S. to create a county-wide park system. That year the Essex County Parks Commission acquired 60 acres of land from the City of Newark as the beginning of Branch Brook Park. Today those 60 acres have grown into 5,745 acres of green space that include reservations, developed parks, golf courses, tennis courts, ice and roller skating complexes, and a zoo.

#### 4. ESSEX COUNTY/SERVICE AREA HEALTH PROFILE

The Essex County Health Profile is organized to provide a discussion of health outcomes including mortality, morbidity, health status, etc., followed by a discussion of the role that health factors such as income, employment, access to care, health behaviors, and the environment play in determining how healthy people are and how long they live.

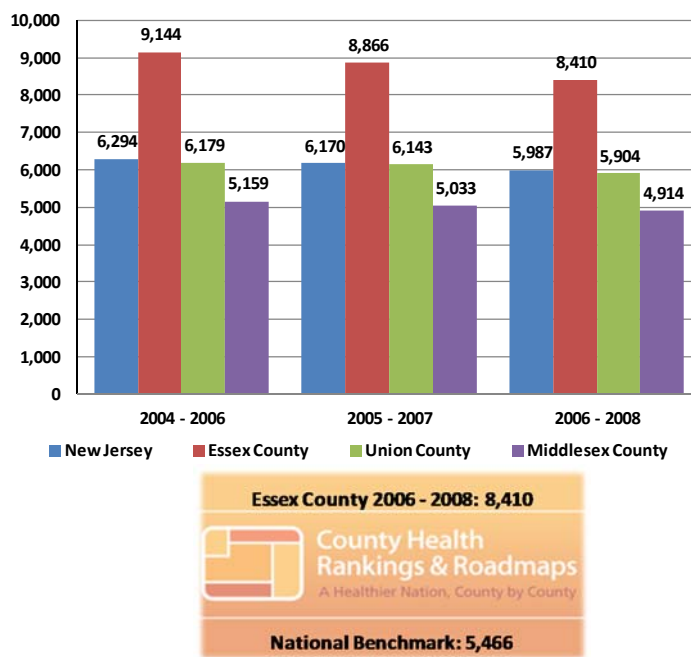
##### A. HEALTH OUTCOMES

##### 1. Premature Deaths

Premature deaths, or years of potential life lost (YPLL), is a measure of early death. It represents the number of years not lived by people who die before a given age (usually 75 years). High rates of premature death are found in Essex County compared to New Jersey and to the County Health Rankings (CHR) benchmark.

- Essex County’s premature death rate of 8,410/100,000 is 29% higher than found throughout New Jersey, and 35% higher than the CHR benchmark.
- Essex County’s premature death rate, though declining, is higher than all the comparison counties.

**Figure 4.1**  
**Years of Potential Life Lost per 100,000**



Source: County Health Rankings, National Vital Statistics System

Note: Every death occurring before the age of 75 contributes to the total number of years of potential life lost.

##### 2. Leading Cause of Death

Between 2004 and 2008, the age-adjusted mortality rates (AAMR) for most of the 10 leading causes of death declined. The exceptions included septicemia, chronic lower respiratory disease and nephritis.

- The top five leading causes of death include heart disease, cancer, stroke, septicemia, and diabetes mellitus.
- Heart disease and cancer mortality rates have declined but remain by far the primary cause of death for county residents.

**Figure 4.2**  
**Leading Causes of Death per 100,000**

Cause	2004 Rate	2008 Rate
Heart Disease	227.0	206.4
Cancer	192.6	186.5
Stroke	44.5	36.0
Septicemia	27.6	31.1
Diabetes Mellitus	34.6	29.5
Chronic Lower Respiratory Disease	26.4	29.0
Nephritis	21.6	23.3
HIV	27.4	19.6
Influenza and Pneumonia	19.0	17.0
Alzheimer’s Disease	14.1	14.1

Source: N.J. Department of Health and Senior Services, Center for Health Statistics, State Health Assessment Data

### Heart Disease

Heart disease is the leading cause of death in the nation, New Jersey and in Essex County.

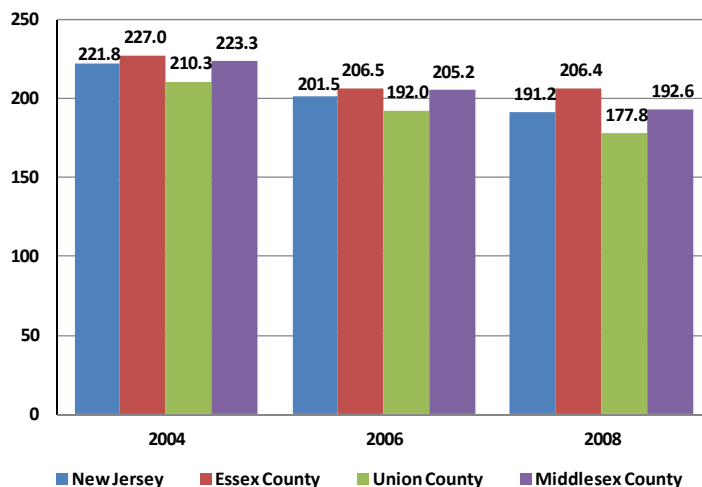
- Between 2004 and 2008, the AAMR for heart disease deaths dropped 9% to 206.4/100,000 but remains significantly higher than the statewide rate of 191.2/100,000 and worse than the *Healthy People 2020* target of 108.8 per 100,000.
- In 2011, the AAMR for heart disease among Newark residents was 176.2 per 100,000.
- Despite a decline in AAMR for heart disease among Blacks from 270.6/100,000 to 225.8/100,000, Blacks had a significantly higher AAMR due to heart disease compared to other racial groups in Essex County.
- The AAMR for heart disease rose among Hispanic as well.

### Cancer

Cancer is the second leading cause of death in Essex County, New Jersey and the nation.

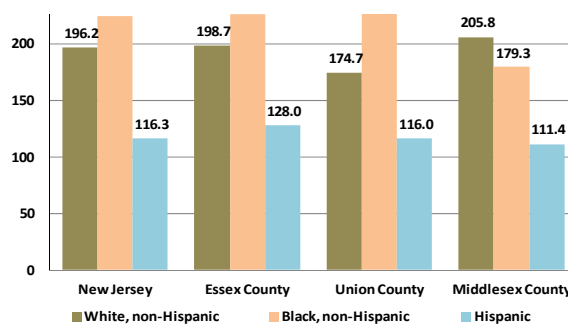
- Between 2004 and 2008, the AAMR for cancer in Essex County decreased from 191.5/100,000 to 183.6/100,000, or 4.1%. The *Healthy People 2020* target is 160.6/100,000.
- In 2011, the AAMR for cancer in Newark was 147 per 100,000

**Figure 4.3**  
Deaths Due to Heart Disease per 100,000



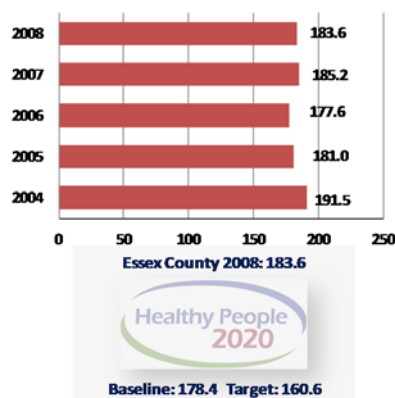
Source: N.J. Department of Health and Senior Services, Center for Health Statistics, N.J. State Health Assessment Data

**Figure 4.4**  
Heart Disease Deaths by Race/Ethnicity per 100,000






Source: N.J. Department of Health and Senior Services, Center for Health Statistics, N.J. State Health Assessment Data  
Note: 2004 data for the Hispanic population in Ocean County does not meet standards of reliability based on fewer than 20 cases in the numerator and/or denominator.

**Figure 4.5**  
Cancer Deaths Trends per 100,000  
Essex County Trend 2004-2008



Source: N.J. Department of Health and Senior Services, Center for Health Statistics, N.J. State Health Assessment Data

**Figure 4.6  
Cancer Deaths**

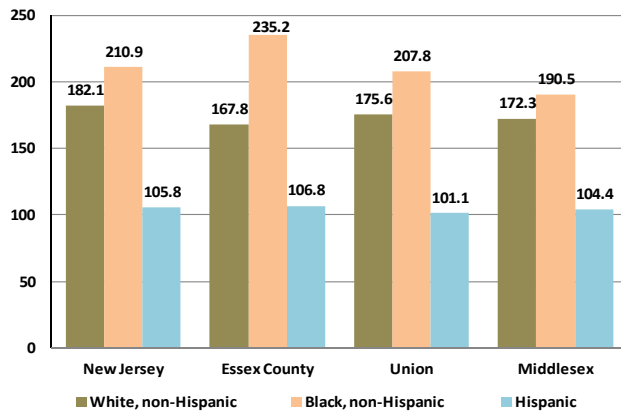
Indicator	Healthy People 2020 Target	County Health Rankings Benchmark	New Jersey
<b>Deaths due to Malignant Neoplasms (Cancer):</b> Age-Adjusted Rate per 100,000 Population		N/A	
<b>* Deaths due to Malignant Neoplasms (Cancer) (Black, Non-Hispanic):</b> Age-Adjusted Rate per 100,000 Population	N/A	N/A	

\*Among all races/ethnicities in Essex County

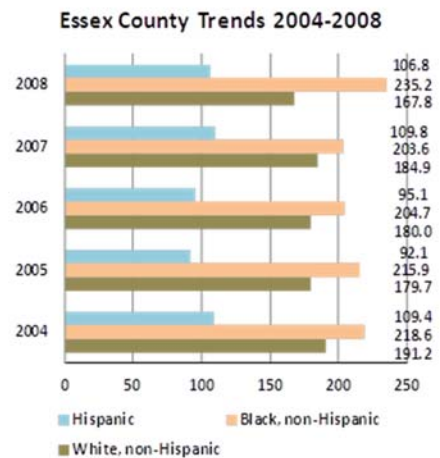
- AAMR for cancer among Blacks rose from 218.6 per 100,000 to 235.2 per 100,000, or 7.6%, and is significantly higher than the rate for all county residents.

**Figure 4.7**

**Cancer Deaths by Race by County and State  
Per 100,000**



**Cancer Deaths by Race/Ethnicity – Trend  
Per 100,000**



Source: N.J. Department of Health and Senior Services, Center for Health Statistics, N.J. State Health Assessment Data

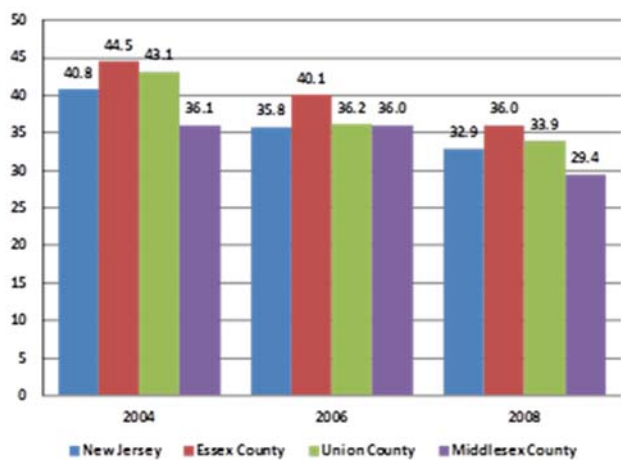
Note: 2007, 2006, and 2004 data for the Hispanic population in Ocean County does not meet standards of reliability based on fewer than 20 cases in the numerator and/or denominator.

## Stroke

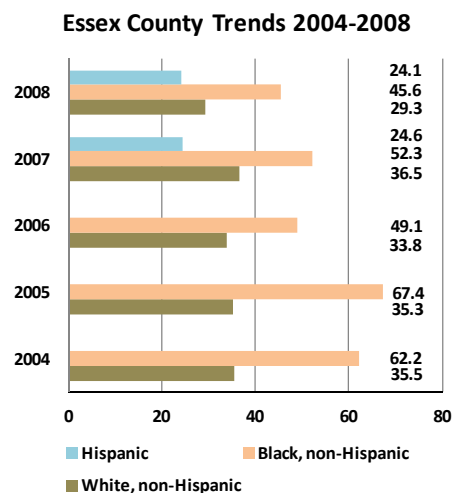
Stroke is the third leading cause of death in Essex County, New Jersey and the nation.

- Between 2004 and 2008, the AAMR for stroke in Essex County declined 19.1% from 44.5/100,000 to 36.0/100,000. The *Healthy People 2020* target is 33.8/100,000.
- In 2011, the AAMR for Newark was 38.4/100,000.
- AAMR for stroke declined among Blacks and Whites between 2004 and 2008, rates among Hispanics decreased between 2007 and 2008, but Black residents continue to have the highest rate of stroke deaths.

**Figure 4.8**  
Stroke Deaths by County and State  
per 100,000



**Figure 4.9**  
Stroke Deaths by Race/Ethnicity – Trend  
per 100,000



Source: N.J. Department of Health and Senior Services, Center for Health Statistics, N.J. State Health Assessment Data

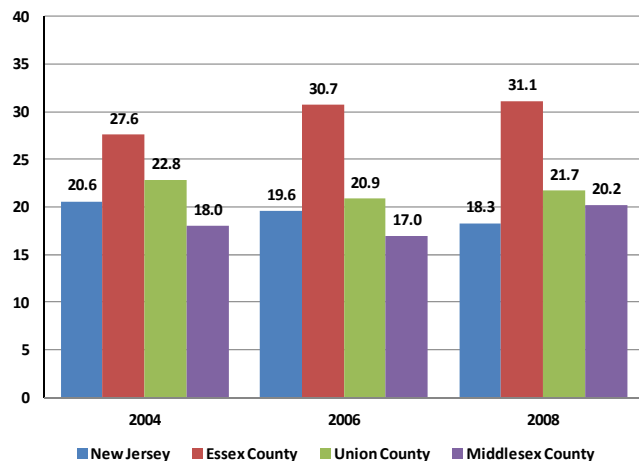
Note: Data for other racial/ethnic groups not shown because figures do not meet standards of reliability or precision, based on fewer than 20 cases in the numerator and/or denominator.

## Septicemia

Septicemia is the fourth leading cause of death in Essex County.

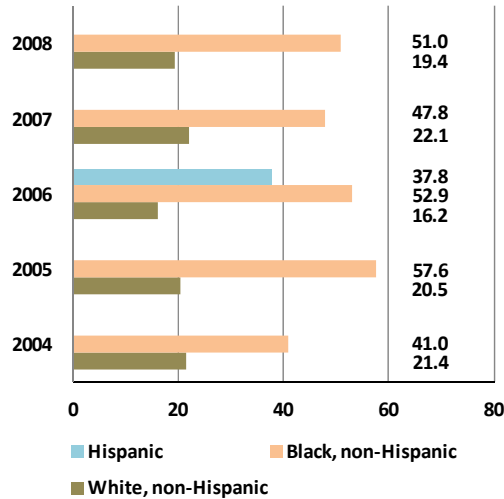
- The AAMR for Septicemia in Essex County increased 12.7% between 2004 and 2008, from 27.6/100,000 to 31.1/100,000 and is significantly higher than the State rate of 18.3/100,000.
- Septicemia rates among Black residents of Essex County rose from 41.0/100,000 to 51.0/100,000.
- Black residents have higher septicemia death rates than other racial/ethnic groups in the county.

**Figure 4.10**  
Septicemia Deaths per 100,000



Source: N.J. Department of Health and Senior Services, Center for Health Statistics, N.J. State Health Assessment Data

**Figure 4.11**  
**Septicemia Deaths by Race per 100,000**  
**Essex County Trends 2004-2008**



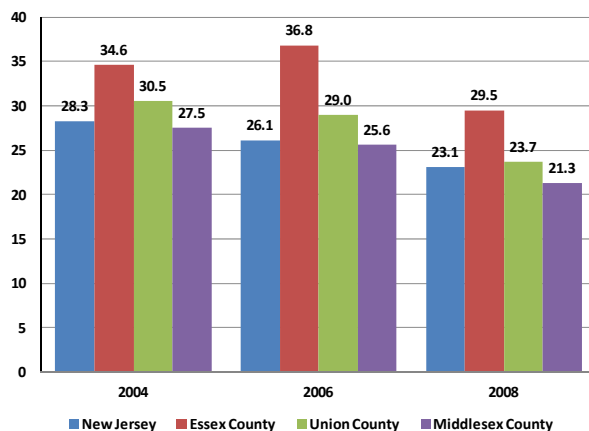
Source: N.J. Department of Health and Senior Services, Center for Health Statistics, N.J. State Health Assessment Data

### Diabetes Mellitus

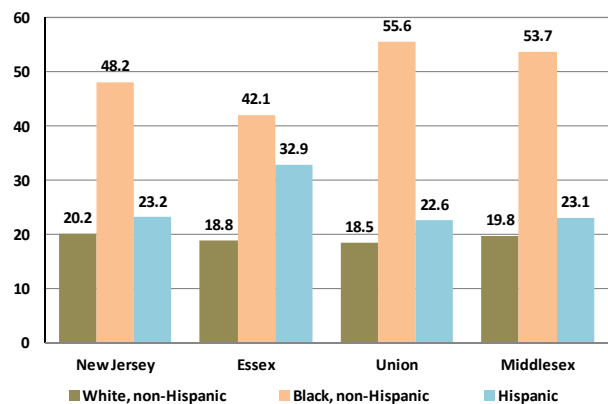
Diabetes is the fifth leading cause of death in Essex County.

- Between 2004 and 2008, the AAMR for diabetes decreased 14.7% from 34.6/100,000 to 29.5/100,000 but remains significantly higher than the statewide rate of 23.1/100,000.

**Figure 4.12**  
**Diabetes Deaths by Comparative Areas**  
**per 100,000**



**Figure 4.13**  
**Diabetes Mellitus by Race**  
**per 100,000**

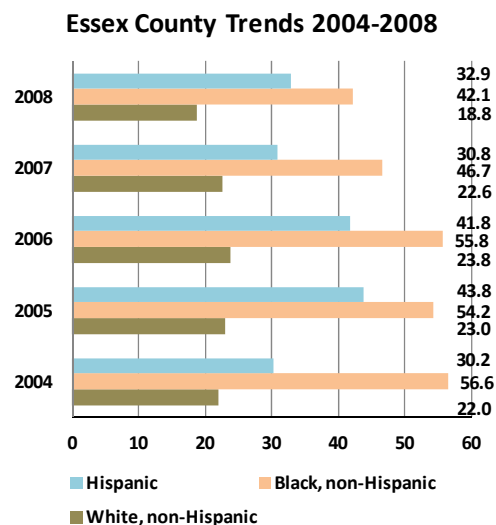


Source: NJ Department of Health and Senior Services, Center for Health Statistics, NJ State Health Assessment Data, Newark DCFWB Health Planning Division



**Figure 4.14**  
**Diabetes Death Trends by Race per 100,000**

- In 2011, the AAMR in Newark was 37.5/100,000.
- AAMR for diabetes among Blacks in Essex County declined 25.6% but remained significantly higher than for all county residents.
- Black residents showed a decline in the AAMR for diabetes, but at 42.1/100,000 remained highest among all races/ethnicities.
- Hispanic residents saw a slight increase in AAMR for diabetes from 30.2/100,000 to 32.9/100,000. While White residents saw a decrease from 22.0/100,000 to 18.8/100,000.



Source: NJ Department of Health and Senior Services, Center for Health Statistics, NJ State Health Assessment Data

**Figure 4.15**  
**Diabetes Mellitus**

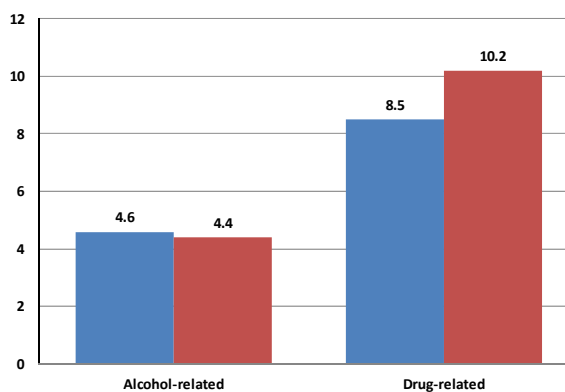
Indicator	Healthy People 2020 Target	County Health Rankings Benchmark	New Jersey
<b>Deaths due to Diabetes Mellitus:</b> Age-Adjusted Rate per 100,000 Population	N/A	N/A	
<b>* Deaths due to Diabetes Mellitus (Black, Non-Hispanic):</b> Age-Adjusted Rate per 100,000 Population	N/A	N/A	

\*Among all races and ethnicities in Essex County.

### 3. Behavioral Health-Related Deaths

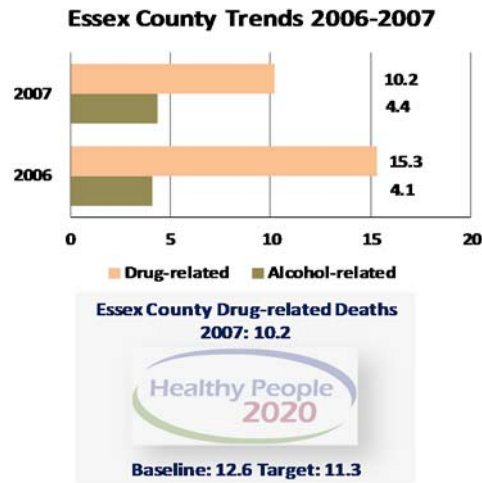
- Age-adjusted drug-related (AADD) deaths declined from 15.3/100,000 in 2006 to 10.2/100,000 in 2007.
- AADD were not statistically different than the *Healthy People 2020* target of 11.3/100,000.
- The age-adjusted alcohol-related death rate increased from 4.1/100,000 to 4.4/100,000 between 2006 and 2007.

**Figure 4.16**  
**Alcohol & Drug-Related Deaths per 100,000**



Source: NJ Department of Health and Senior Services, Center for Health Statistics, NJ State Health Assessment Data

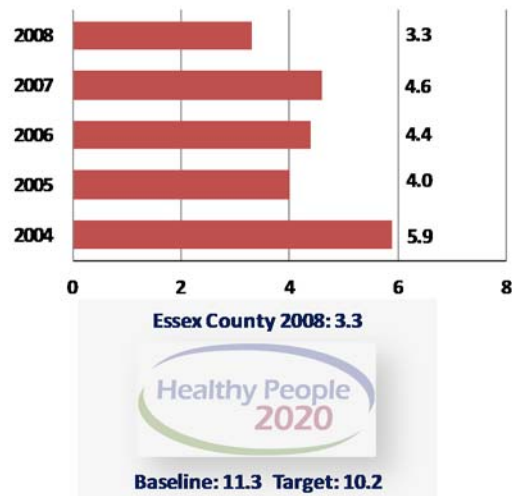
**Figure 4.17**  
**Alcohol & Drug-Related Deaths Trends per 100,000**



Source: NJ Department of Health and Senior Services, Center for Health Statistics, NJ State Health Assessment Data

- The Essex County age-adjusted suicide rate decreased 44.1% between 2004 and 2008, and is significantly lower than the *Healthy People 2020* target of 10.2/100,000.

**Figure 4.18**  
**Suicide Rates per 100,000**  
**Essex County Trend 2004-2008**



Source: NJ Department of Health and Senior Services, Center for Health Statistics, NJ State Health Assessment Data

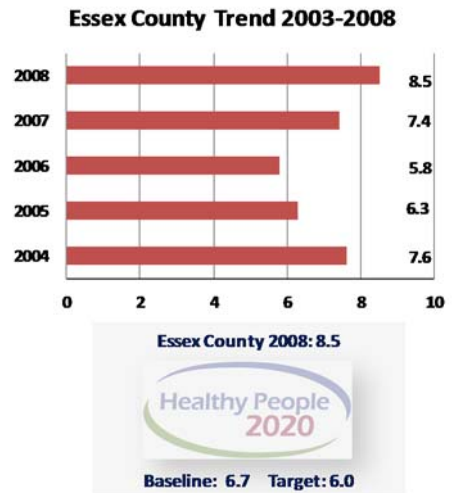
#### 4. Infant Mortality

Infant mortality has traditionally been used to measure the health and well-being of populations within and across nations. The United States ranks far behind most industrialized nations in terms of infant mortality. This ranking is due in large part to disparities that occur in the percentage of pre-term babies born among racial and ethnic minorities in this country.<sup>17</sup>

Between 2004 and 2008, the infant mortality rate in Essex County rose 11.8% from 7.6/1,000 live births to 8.5/1,000 live births.

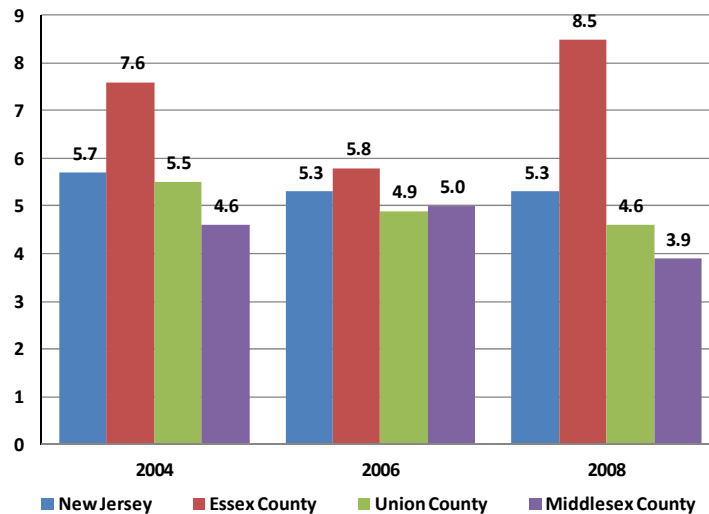
- The infant mortality rate for the county is significantly higher than the State rate of 5.3/1,000 and the *Healthy People 2020* target of 6.0/1,000.

**Figure 4.19**  
Infant Mortality Trends per 1,000



Source: NJ Department of Health and Senior Services, Center for Health Statistics, NJ State Health Assessment Data

**Figure 4.20**  
Infant Mortality Comparison by County and State per 1,000 Live Births



Source: NJ Department of Health and Senior Services, Center for Health Statistics, NJ State Health Assessment Data

<sup>17</sup> Retrieved from [www.cdc.gov/nchs/data/databriefs/db74pdf](http://www.cdc.gov/nchs/data/databriefs/db74pdf). Accessed 3/27/13.

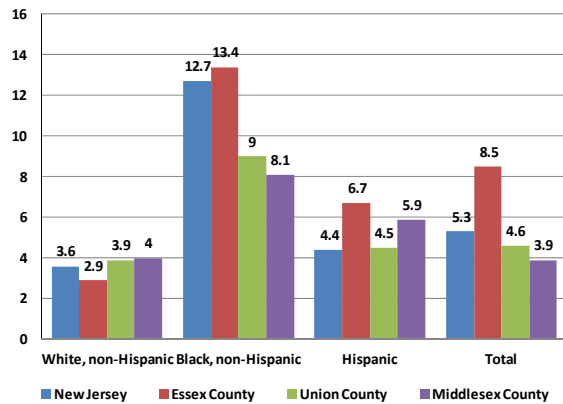
**Figure 4.21**  
**Infant Mortality**

Indicator	Healthy People 2020 Target	County Health Rankings Benchmark	New Jersey
<b>Infant Mortality Rate:</b> Rate of Infant (Under 1 year) Deaths per 1,000 Live Births	●	N/A	●
<b>* Infant Mortality Rate (Black, non-Hispanic):</b> Rate of Infant (Under 1 year) Deaths per 1,000 Live Births	N/A	N/A	●

\*Among all races/ethnicities in Essex County

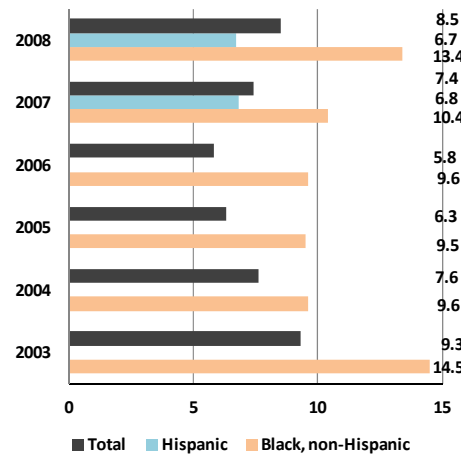
- The infant mortality rate for Blacks, 13.4/1,000, is higher than for all other races in the county and has been increasing since 2006.

**Figure 4.22**  
**Infant Mortality by Race per 1,000**



**Figure 4.23**  
**Infant Mortality Trends by Race per 1,000**

Essex County Trends 2003-2008









Source: NJ Department of Health and Senior Services, Center for Health Statistics, NJ State Health Assessment Data

## 5. Low and Very Low Birth Weight Infants

Between 2004 and 2008, the rate of very low birth weight infants in Essex County decreased by 0.1 percentage point, from 2.1% to 2.0%. Low birth weight infants increased by 0.3 percentage point during this same period from 9.7% to 10.0%.

- The percent of low birth weight and very low birth weight infants are higher than the *Healthy People 2020* targets of 7.8% and 1.4%, and significantly higher than the statewide rates of 8.1% and 1.5%.

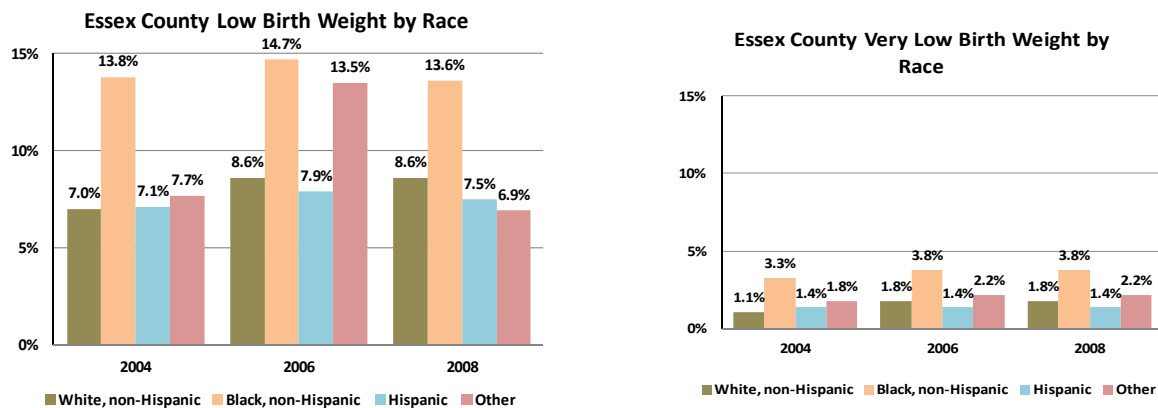
**Figure 4.24**  
**Low and Very Low Birth Weight Infants**

Indicator	Healthy People 2020 Target	County Health Rankings Benchmark	New Jersey
Low (<2500 grams) Birth Weight: Percentage of Live Births		N/A	
* Low (<2500 grams) Birth Weight (Black, Non-Hispanic): Percentage of Live Births	N/A	N/A	
Very Low (<1500 grams) Birth Weight: Percentage of Live Births		N/A	
* Very Low (<1500 grams) Birth Weight (Black, Non-Hispanic): Percentage of Live Births	N/A	N/A	

\* Statistically higher than all other races/ethnicities in the county.

- The percentage of low and very low birth weight infants among Blacks in Essex County remains significantly higher than for other racial/ethnic groups in Essex County.

**Figure 4.25**  
**Low and Very Low Birth Weight by Race**  
**Percentage of Live Births**



Source: N.J. Department of Health and Senior Services, Center for Health Statistics, N.J. State Health Assessment Data

Note: Percentages are based on the total number of live births for county and state.

## 6. Health and Behavioral Health Status

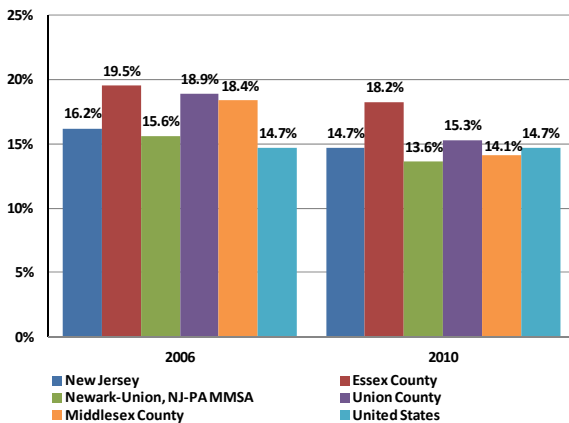
Health status is often defined as the level of health status of the individual, group or population as subjectively assessed by the individual, group or population or by more objective measures.<sup>18</sup> Presented below are both subjective and objective measures of both health and behavioral health status.

### **Health Status and Disability**

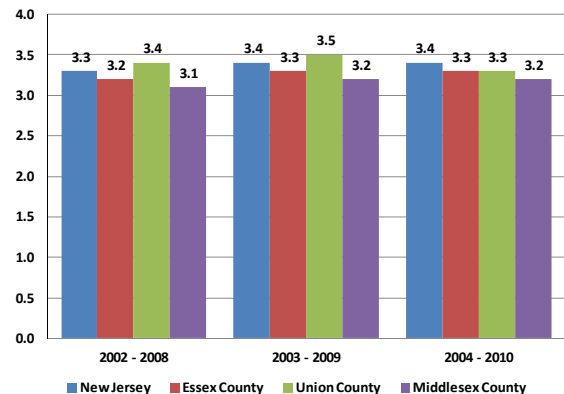
The percent of Essex County residents reporting their health as fair or poor declined from 19.5% to 18.2%.

- It remains higher than the percentages reported statewide, in the Metropolitan/Micropolitan Statistical Area (MMSA), and in comparison counties.
- Essex County residents report an average of 3.3 physically unhealthy days per month which is significantly higher than the national benchmark of 2.6.
- The percent of Essex County residents reporting a disability declined by more than 12 percentage points between 2000 and 2010.

**Figure 4.26**  
**Health is Fair or Poor (%)**



**Figure 4.27**  
**Physically Unhealthy Days Reported in Past 30 Days**



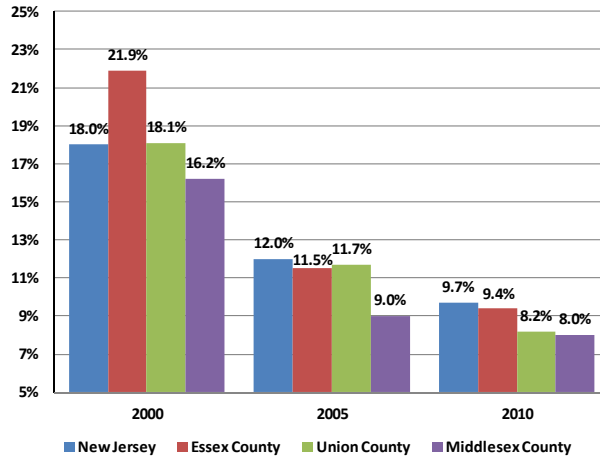
Source: CDC, Behavioral Risk Factor Surveillance System

Source: County Health Rankings, National Center for Health Statistics

Note: The poor physical health measure is based on response to the question: "Thinking about your physical health, which includes physical illness and injury, for how many days during the past 30 days was your physical health not good?"

<sup>18</sup> Retrieved from [www.reference.md/files/D006/mD006/mD006304.html](http://www.reference.md/files/D006/mD006/mD006304.html). Accessed 3/27/13.

**Figure 4.28**  
**Total Population with any Disability; 2000-2010**



Source: U.S. Census Bureau, American Community Survey

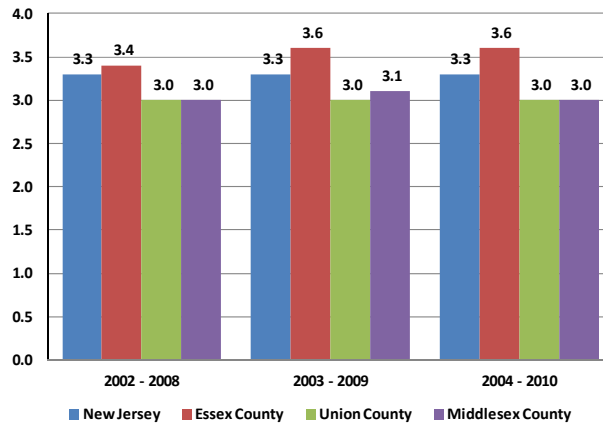
Note: Percentages are based on the total civilian non-institutionalized population 5 years and older in each region.

### Behavioral Health Status

Essex County residents reported an increase in the number of mentally unhealthy days per month from 3.3 to 3.6.

- The number of mentally unhealthy days is significantly higher than the county health rankings benchmark.

**Figure 4.29**  
**Mentally Unhealthy Days Reported in Past 30 Days**



Source: County Health Rankings, National Center for Health Statistics

Note: The poor physical health measure is based on response to the question: "Thinking about your mental health, which includes stress, depression, and problems with emotions, for how many days during the past 30 days was your mental health not good?"

## 7. Morbidity

Cardiovascular Disease (CVD) morbidity includes illness related to heart disease and stroke.

### **Heart Disease**

According to data collected from the Behavioral Risk Factor Surveillance System (BRFSS), an estimated 3.4% of Essex County adults report having been diagnosed with angina or coronary heart disease (CHD) in 2010.

- In 2009, 8% of Newark residents report having been told they had angina or CHD.
- Between 2007 and 2010, the percent of Essex County adults who report being diagnosed with a heart attack increased from 2.7% to 3.1%.
- In 2009, 6% of Newark residents reported a heart attack. Large sections of Newark are in the Medical Center’s PSA.

### Risk Factors

Many of the leading controllable risk factors for heart disease and stroke are also healthy community indicators. Two, high blood pressure and high cholesterol, are discussed here. The others are discussed elsewhere in this document. According to the American Heart Association, the risk factors for developing cardiovascular disease include:

- High blood pressure
- High cholesterol
- Cigarette smoking
- Physical inactivity
- Poor diet, overweight and obesity
- Diabetes

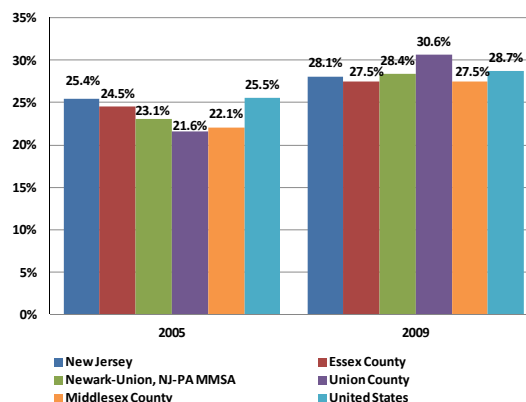
### Essex County

- Between 2005 and 2009, high blood pressure among Essex County adult residents rose from 24.5% to 27.5%.
- Adults reporting high cholesterol increased from 30.6% to 36.7%; nearly three times higher than the *Healthy People 2020* target.

Over time, these risk factors cause changes in the heart and blood vessels that can lead to heart attacks, heart failure, and strokes.<sup>19</sup>

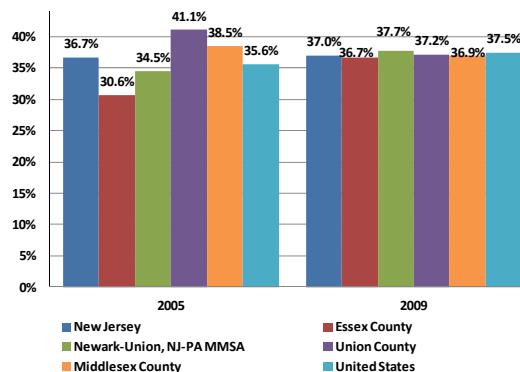
<sup>19</sup> Retrieved from [www.heart.org/HEARTORG/conditions/heartattack/heartattacktoolsresources/heartattack](http://www.heart.org/HEARTORG/conditions/heartattack/heartattacktoolsresources/heartattack). Access 3/15/2013.

**Figure 4.30**  
Adults told they have High Blood Pressure (%)



Source: CDC, Behavioral Risk Factor Surveillance System

**Figure 4.31**  
Adults told they have High Cholesterol (%)



Source: CDC, Behavioral Risk Factor Surveillance System

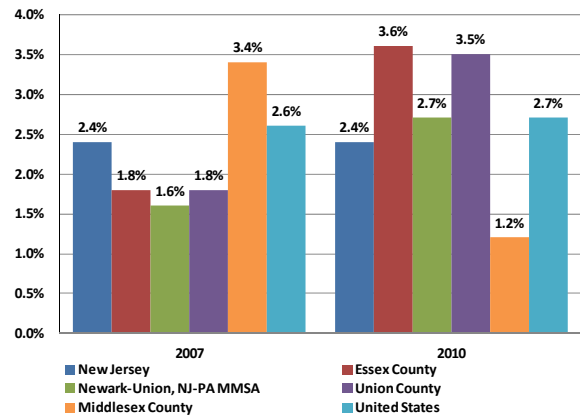


**Stroke**

According to the 2007-2010 BRSFSS survey, an estimate 3.6% of Essex County adults were diagnosed with stroke.

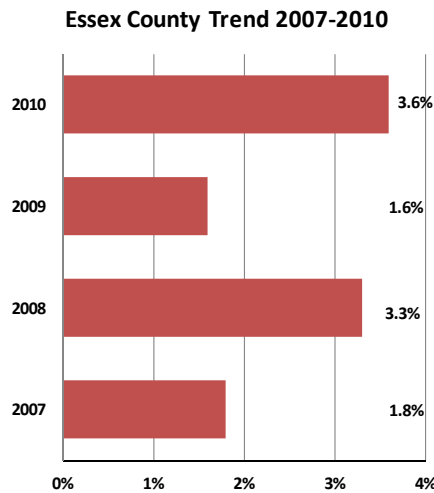
- Between 2007 and 2010, the percentage of Essex County adults reporting stroke doubled.
- Despite this increase there was no statistically significant difference in the prevalence of stroke between the county and the State.
- In 2009, 4% of Newark adults reported having a stroke.

**Figure 4.32  
Adults told they had a Stroke (%)**



Source: CDC, Behavioral Risk Factor Surveillance System

**Figure 4.33  
Stroke Trend Graph**



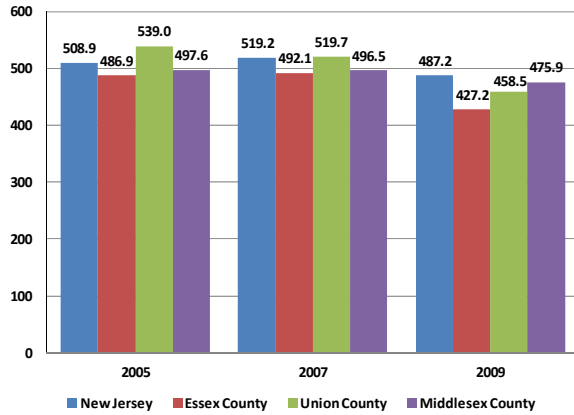
Source: CDC, Behavioral Risk Factor Surveillance System

**Cancer**

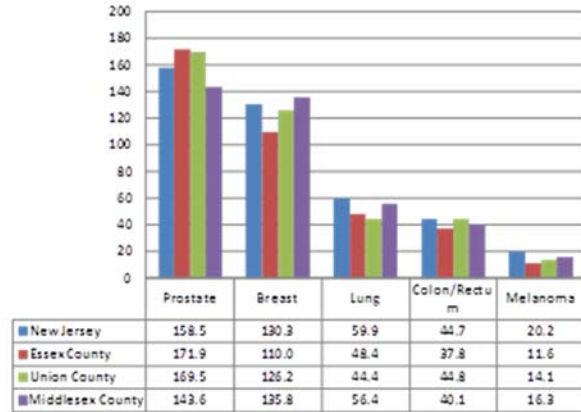
Between 2005 and 2009, the overall age-adjusted rate (AAR) of cancer incidence in Essex County decreased from 486.9/100,000 to 427.2/100,000.

- Essex County's overall AAR of cancer incidence is significantly below the statewide rate.

**Figure 4.34**  
**Cancer Incidence by County per 100,000**



**Figure 4.35**  
**Top 5 Cancer Incidences by County and State per 100,000**

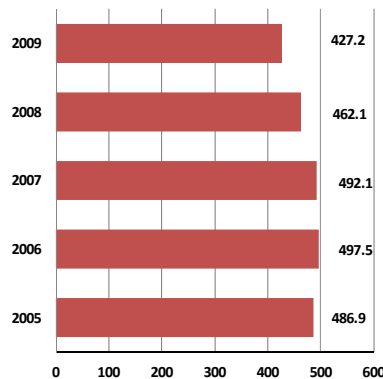


Source: N.J. Department of Health and Human Services, New Jersey Cancer Registry

Note: The rate for prostate cancer is based on 100,000 males, and the rate for breast cancer is based on 100,000 females.

- In 2009, prostate (171.9/100,000) and breast cancers (110.0/100,000) had the highest cancer incidence rates.
- Lung was 48.4/100,000.
- Colon-rectal was 37.8/100,000; and melanoma was 11.6/100,000.
- Between 2005 and 2009 the AAR for prostate cancer incidence declined while the rate of breast cancer increased.
- The AAR for breast and melanoma cancer incidence in Essex County were significantly better than the State.






**Figure 4.36**  
**Cancer Incidence – Trends Per 100,000 Population**  
**Essex County Trend 2005-2009**



Source: New Jersey Department of Health and Human Services, New Jersey Cancer Registry

Note: The rate for prostate cancer is based on 100,000 males, and the rate for breast cancer is based on 100,000 females

**Figure 4.37**  
**Cancer Incidence**

Indicator	Healthy People 2020 Target	County Health Rankings Benchmark	New Jersey
<b>Cancer Incidence by Site - Prostate:</b> Age-Adjusted Rate per 100,000 Population	N/A	N/A	
<b>Cancer Incidence by Site - Breast:</b> Age-Adjusted Rate per 100,000 Population	N/A	N/A	
<b>Cancer Incidence by Site - Lung:</b> Age-Adjusted Rate per 100,000 Population	N/A	N/A	
<b>Cancer Incidence by Site - Colon/Rectum:</b> Age-Adjusted Rate per 100,000 Population	N/A	N/A	
<b>Cancer Incidence by Site - Melanoma of the Skin:</b> Age-Adjusted Rate per 100,000 Population	N/A	N/A	

- In 2011, Newark reported the following AAR for cancer incidence by site:
  - Prostate 147.3/100,000
  - Breast (F) 130.6/100,000
  - Lung (F) 51.3/100,000; (M) 59/100,000
  - Colon-rectal (F) 36.5/100,000; (M) 43.8/100,000

## **Asthma**

### Asthma—Background

- Currently in the United States more than 23 million people have asthma. Asthma affects people of all ages, but it most often starts during childhood. About 7 million of those in the U.S. with asthma are children.<sup>20</sup>
- The exact cause of asthma is not known. Researchers think some genetic and environmental factors interact to cause asthma, most often early in life. These factors include:
  - An inherited tendency to develop allergies.
  - Parents who have asthma.
  - Certain respiratory infections during childhood.
  - Contact with some airborne allergens or exposure to some viral infections in infancy or in early childhood when the immune system is developing.<sup>21</sup>
  - Allergy and asthma “triggers,” include plant pollens, dust, animals and stinging insects and cockroaches. Cockroach allergy is a problem among people who live in inner-cities and are of low socioeconomic status.

<sup>20</sup> Retrieved from [www.healthypeople.gov/2020/topicsobjectives2020/overview.aspx?topicid](http://www.healthypeople.gov/2020/topicsobjectives2020/overview.aspx?topicid). Accessed 4/30/13.

<sup>21</sup> Retrieved from <http://www.nh/bi.nih.gov/health/healthtopics/topics/asthma/atrisk.html>. Accessed 4/30/13.

- In one study of inner-city children, 37% were allergic to cockroaches, 35% to dust mites, and 23% to cats. Those who were allergic to cockroaches and were exposed to them were hospitalized for asthma 3.3 times more often than other children. This was true even when compared with those who were allergic to dust mites or cats.
- Cockroach allergy is more common among low SES Blacks. Experts believe that this is not because of racial differences; rather, it is because of the disproportionate number of Blacks living in the inner cities (*Information about asthma*, 2011).

### Asthma – Incidence

According to the BRFSS survey 2006-2010, the percent of adults reporting asthma has risen in the nation, New Jersey and in Essex County.

- Fortunately, Essex County experienced the smallest increase and is now not statistically different from the statewide percentage.
- Unfortunately, in 2009, 16% of Newark residents reported asthma.

### Diabetes

#### Diabetes – Background

The three common types of diabetes are:

- Type 2—caused by a combination of resistance to the action of insulin and insufficient insulin production.
- Type 1—results when the body loses its ability to produce insulin.
- Gestational—a common complication of pregnancy that can lead to perinatal complications in mother and child. It is a risk factor for development of Type 2 diabetes after pregnancy.

Diabetes is the seventh leading cause of death in the U.S. Complications include:

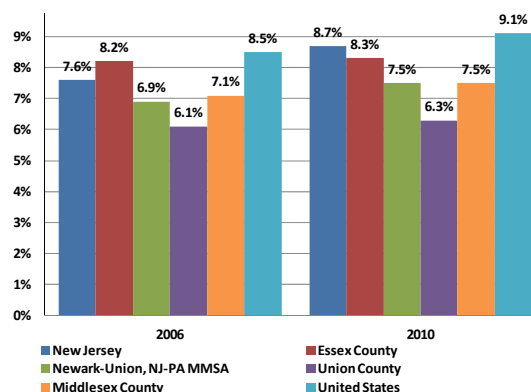
- Reduced life expectancy by up to 15 years,
- Increased risk of heart disease by two to four times,
- Leading cause of kidney failure, limb amputations, and adult onset blindness,
- Significant financial costs in healthcare, lost productivity and early death.<sup>22</sup>

Almost 7 million Americans with diabetes are undiagnosed, and another 79 million Americans have pre-diabetes which greatly increases their risk of developing diabetes in the next several years.<sup>23</sup>

Factors contributing to diabetes prevalence overall and in Essex County include:

- Obesity
- Lack of physical activity
- Family history

**Figure 4.38**  
**Adults who were told they have Asthma (%)**



Source: CDC, Behavioral Risk Factor Surveillance System

<sup>22</sup> Retrieved from [www.diabetes.org/diabetesbasics](http://www.diabetes.org/diabetesbasics). Accessed April 30, 2013.

<sup>23</sup> Retrieved from [www.cdc.gov/diabetes/pubs/pdf/ndfs\\_2011.pdf](http://www.cdc.gov/diabetes/pubs/pdf/ndfs_2011.pdf). Accessed 4/30/2013.

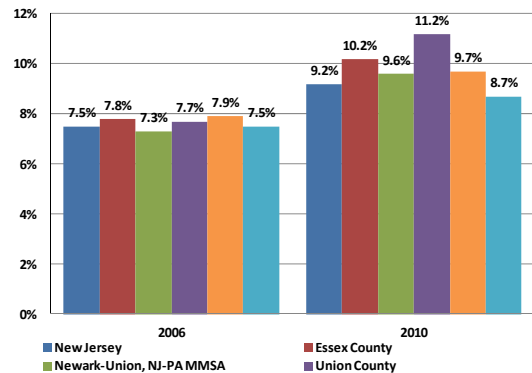
- Environmental resources including such things as the availability of wholesome food, healthcare access and recreational availability.

### Diabetes – Incidence

Diabetes is on the rise in the U.S., in New Jersey, and in Essex County.

- Between 2006 and 2010 the percentage of Essex County residents reporting diabetes increased from 7.8% to 10.2%.
- In 2009, 17% of Newark residents reported they had diabetes.

**Figure 4.39**  
**Adults who were told they have Diabetes (%)**



Source: CDC, Behavioral Risk Factor Surveillance System

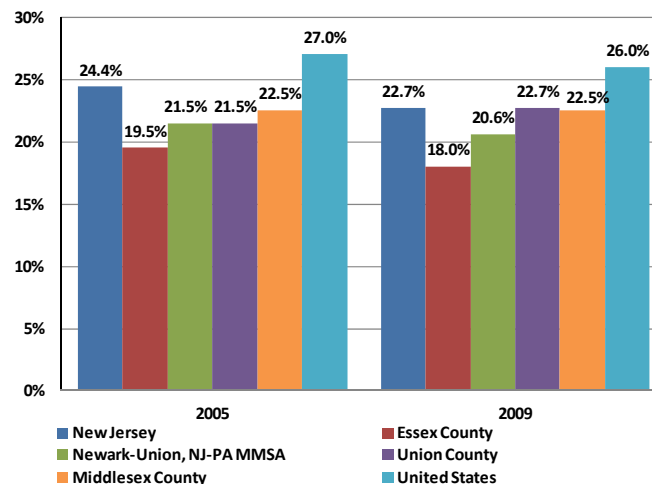
### Arthritis

Arthritis is the inflammation of one or more joints. A joint is where two bones meet. There are over 100 different types of arthritis. The most common form of arthritis is osteoarthritis which is a normal result of aging. It is also caused by “wear and tear” on the joints. Arthritis is the most common cause of disability in the U.S., limiting the activities of an estimated 22 million adults (9%).<sup>24</sup>

### Arthritis – Incidence

- Between 2005 and 2009, the percent of Essex County residents reporting arthritis declined from 19.5% to 18%.
- The percent of county residents reporting arthritis is significantly lower than the statewide average of 22.7%.

**Figure 4.40**  
**Adults Who Have Been Told They Have Arthritis**



Source: CDC, Behavioral Risk Factor Surveillance System

<sup>24</sup> Retrieved from <http://www.cdc.gov/arthritis>. Accessed 4/30/13.

## Notifiable Infectious Disease

The responsibilities of epidemiologists fall into four areas:

1. Outbreak surveillance, detection, and investigation
2. Intensive case investigations for complex cases
3. Maintenance of programmatic disease surveillance
4. Public health emergency-related disease surveillance

*Healthy People 2020* goals for infectious diseases are rooted in evidence-based clinical and community activities and services for their prevention and treatment.

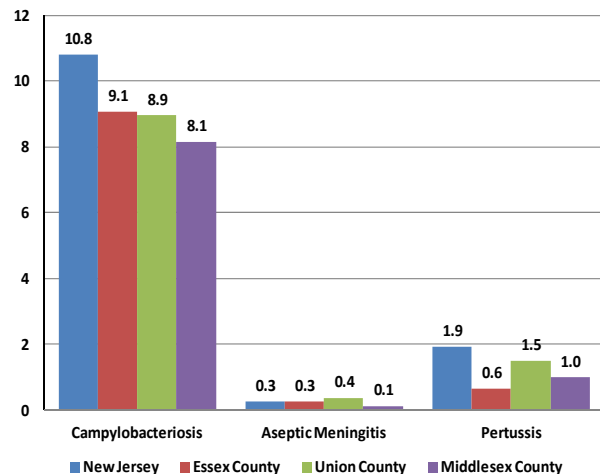
- Objectives focus on ensuring that States, local public health departments, and nongovernmental organizations are strong partners in the Nation's attempt to control the spread of infectious diseases.
- They also reflect a more mobile society with diseases crossing state and country borders. Awareness of disease and completing prevention and treatment courses remain essential components for reducing infectious disease transmission.<sup>25</sup>

## Communicable Disease – Incidence

When compared to New Jersey, Essex County has the same or lower incidence rates for the three reported communicable diseases: campylobacteriosis, aseptic meningitis, and pertussis.

- Campylobacteriosis is among the most common bacterial infections in humans. The illness is usually spread by consumption of contaminated food or water and, occasionally, by contact with infected people or animals. It typically runs a course of two weeks unless the person is immuno-compromised, in which case it can be life-threatening.
- Aseptic meningitis is an inflammation of the membranes covering the brain or spinal column. Aseptic meningitis is usually caused by viruses. The virus can pass from person-to-person via contact with an infected person.
- Pertussis or whooping cough is a highly contagious bacterial respiratory disease. Pertussis is known to cause uncontrollable, violent coughing making it difficult to breathe.

**Figure 4.41**  
**Communicable Diseases per 100,000**



Source: N.J. Department of Health and Human Services, Division of Communicable Disease Services, New Jersey Reportable Communicable Disease Report, 2010, 2009, 2008, 2007; U.S. Census Bureau, American Community Survey

Note: The Ocean and Monmouth County rates for Meningeal Disease are based on too few cases to be considered statistically significant.

<sup>25</sup> Retrieved from <http://www.healthypeople.gov>. Accessed 4/30/13.

## B. HEALTH FACTORS

### 1. Socioeconomic Status

According to *Healthy People 2020*, socioeconomic factors contribute to observed disparities in disease incidence and mortality among racial, ethnic and underserved groups. This can be clearly seen in Essex County. The southern areas of the county also align with areas with lower socioeconomic status (SES). Southern areas of the county also have more uninsured residents, fewer healthcare providers, and more conditions treated in an emergency room that would have been more appropriately and cost effectively treated in an outpatient setting.

Studies have found that income/SES, over race or ethnicity, predicts the likelihood of an individual's or group's access to:

- Education
- Health insurance
- Safe and healthy living and working conditions, including places free from exposure to environmental toxins.<sup>26</sup>

SES also appears to play a major role in:

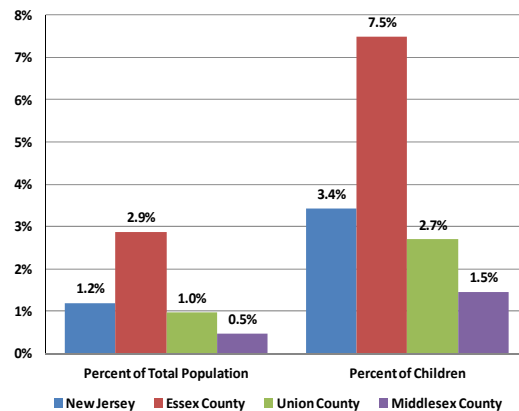
- Prevalence of behavioral risk factors like tobacco smoking, physical inactivity, obesity, and excessive alcohol use.
- Rates of preventive screenings, with those with lower SES having fewer screenings.<sup>27</sup>

#### Essex County

The percent of Essex County residents receiving Temporary Assistance to the Needy (TANF) benefits is significantly higher than the State rate.

- The same can be said of children receiving TANF benefits.
- Economic status and employment.
  - Essex County's median household income in 2010 was \$52,394, more than \$15,000 below the State average. Figure 4.42 presents the range of median household income in Essex County.
  - In 2009, 14.5% of Essex County residents were living below the Federal poverty level. Between 2009 and 2011 poverty rates in Essex County averaged 16.0%; Newark had the highest rate, 28.4%, and Livingston the lowest at 1.8%. The percentage of Newark families receiving various types of public assistance is twice the U.S. average and three times that of the State.

Figure 4.42  
TANF Recipients (%)



Source: N.J. Department of Human Services, Division of Family Development, Current Program Statistics, 2007, 2009, 2011; N.J. Department of Health and Senior Services, Division of Family Health Services, 2011; U.S. Census Bureau, American Community Survey 2010; 2011 Claritas Population Projection

<sup>26</sup> Retrieved from <http://www.healthypeople.gov/2020/about/disparities/about.aspx>. Accessed 4/30/13.

<sup>27</sup> Ibid.

- In 2011, 10.8% of county residents were unemployed. This was higher than the State unemployment level. Unemployment in the urban areas of the county met or exceeded 10.8%.
- Varying education levels.
  - Nearly 18% of Essex County residents do not have a high school diploma and 8.1% have less than a 9<sup>th</sup> grade education.
  - 31% of county residents have Bachelor's, Professional or Graduate degrees.
- A relatively young county.
  - According to the 2010 U.S. Census, 24.9% of Essex County residents were under 18, adults 18-64 were 62.7% and seniors age 65+ were 11.6%.
  - In New Jersey 13.5% of residents are over 65, and in the U.S. 13.3% are over 65.
- Racial and ethnic diversity.
  - 39.3% of county residents are Black compared to 12.8% in New Jersey. Essex County Hispanic/Latino populations constitute 20.3% of the population compared to 17.7% in New Jersey. Caucasians are 33.2% of the county's population compared to 59.3% in the State.

### ***NBIMC Service Area***

- 95% of NBIMC's PSA and 70% of the SSA are made up of minority populations.
- In 37% of the zip codes that make up NBIMC's service area the less than 9<sup>th</sup> grade education percent is more than double the statewide rate.
- The percent of families living below poverty in the county is nearly double that of the State.
- 70% of the zip codes in the PSA and SSA exceed the State rate and 60% exceed the county rate.
- The median household income of residents of the PSA is half the statewide median.

### ***Select PSA Communities***

#### Newark

- Newark is the county's largest city with 277,237 residents or 35.4% of Essex County's population.
- Blacks are 52.4% of the population. Latinos are 33.8% and Caucasians are 26.3%.
- The median household income was one of the lowest in the county at \$34,816, unemployment among the highest at over 15% in 2011, and nearly 24% were living in poverty.
- Over 30% of Newark residents failed to graduate from high school and nearly 25% had a low level of English proficiency.
- The percentage of Newark families and children receiving various types of public assistance is twice that of the U.S. average and three times that of New Jersey.
- In 2011, 18.3% of Newark households received SSI, cash public assistance or SNAP in the last 12 months.
- In 2011, 35.6% of Newark children living in households received SSI, cash public assistance or SNAP in the last 12 months.

#### East Orange

- Between 2000 and 2010 the population of Essex County's second most populous city declined 8.06% to 64,267 residents and is home to 8% of county residents.
- Median household income for East Orange residents was \$40,312; unemployment mirrored the county at 10.8%; and 20% of residents lived below the poverty level.
- Nearly 20% of East Orange residents did not earn a high school diploma.

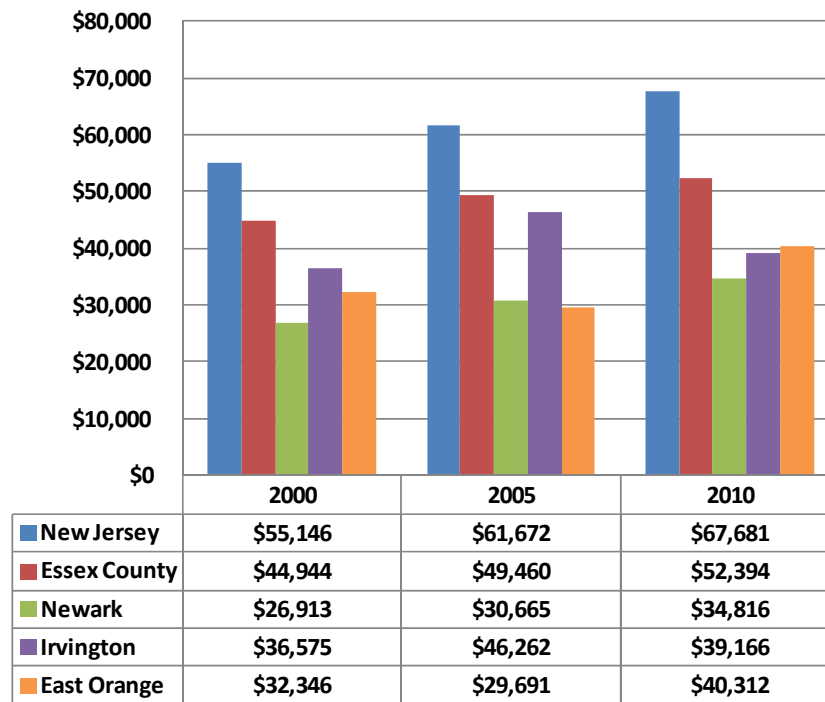


- 88.5% of East Orange residents were Blacks; 7.9% were Hispanic; and 4.1% were Caucasian.

Irvington

- Irvington is the third largest city in Essex County with 53,942 residents, down 11.17% since 2000.
- Irvington’s median household income was \$39,166, its unemployment rate 13.2%; and its poverty rate was 17.7%.
- Blacks (85.4%) were the dominant race followed by Hispanics (10.6%) and Caucasians (5.6%).
- More than 20% of Irvington residents failed to complete high school.

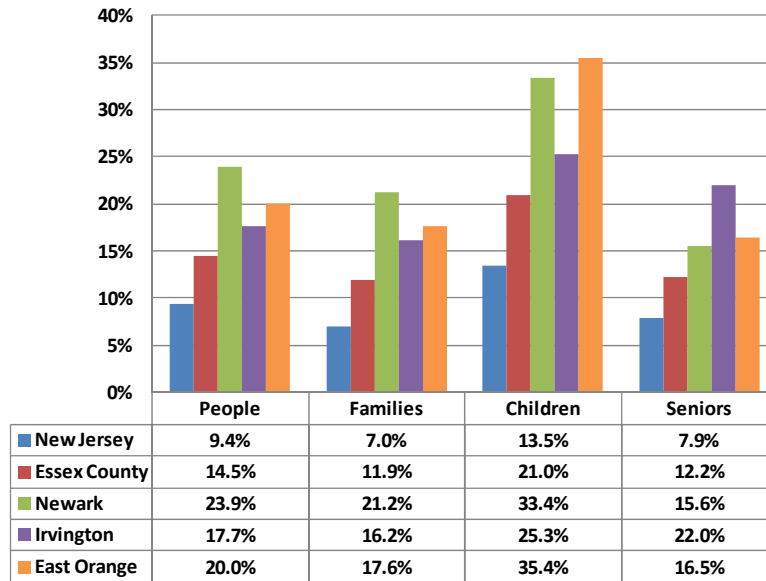
**Figure 4.43**  
**Median Household Income**



Source: U.S. Census Bureau, American Community Survey

Note: 2005 City-Wide data is unavailable and the 2010 Median Household Income represents a five year estimate, ranging from 2006 to 2010.

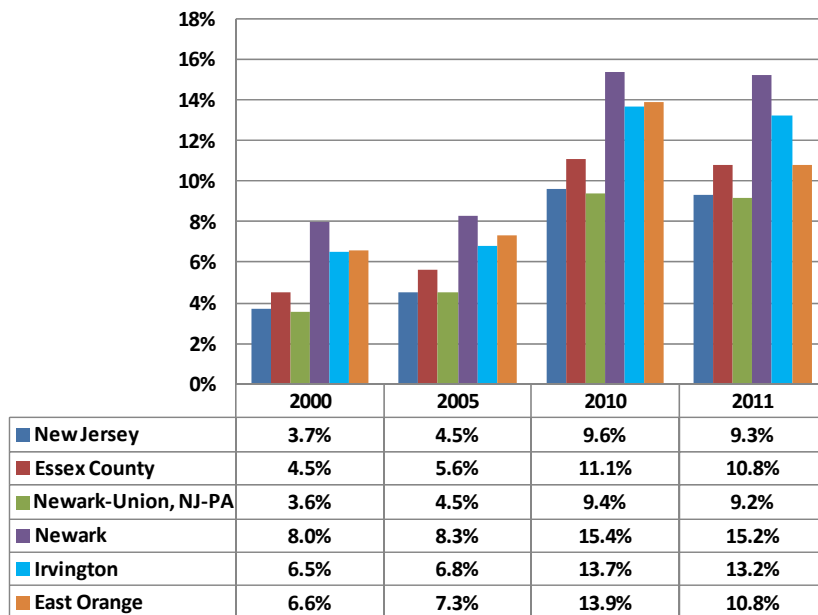
**Figure 4.44**  
**Income Below Federal Poverty Level**  
**Percent of Population with Income in the Past Year Below Federal Poverty Level (2009) (%)**



Source: U.S. Census Bureau, American Community Survey

Note: People are defined as the entire population in each geographic area, children are defined as the population under 18 years, and seniors are defined as the population over 65 years.

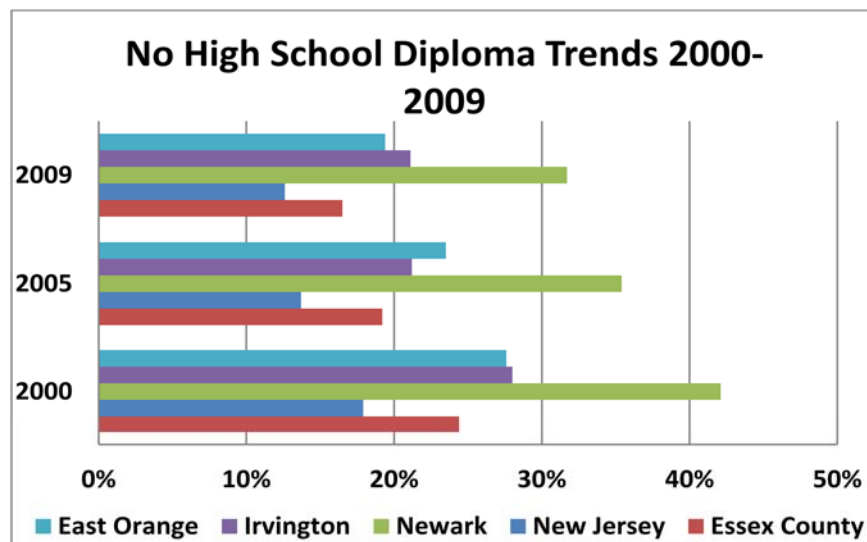
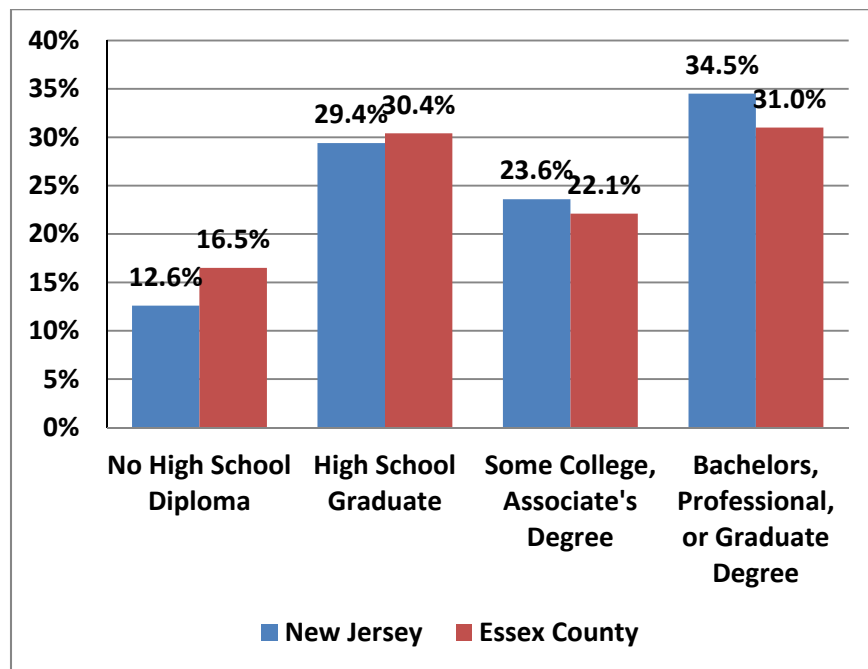
**Figure 4.45**  
**Unemployment (%)**



Source: N.J. Department of Labor, New Jersey Labor Force Estimates by Area

Note: The Data represents unadjusted annual averages.

**Figure 4.46**  
**Educational Attainment (2009) (%)**

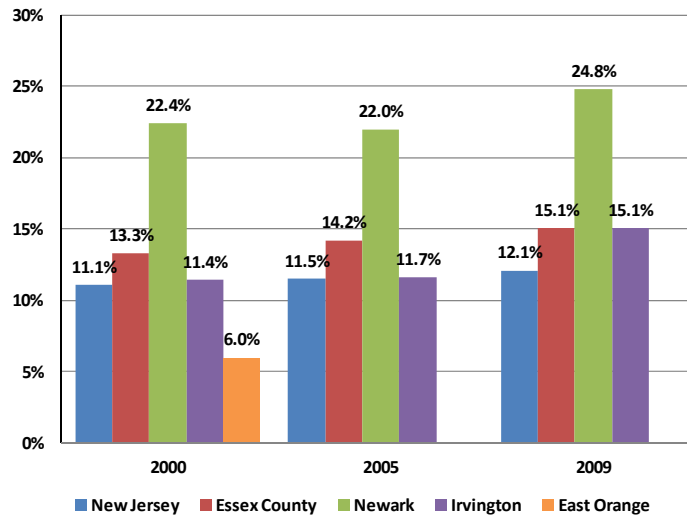


**Essex County 2009: 16.5%**

**Baseline: 11.0% Target: 2.1%**

Source: U.S. Census Bureau, American Community Survey.

**Figure 4.47**  
**Limited English Proficiency (%)**

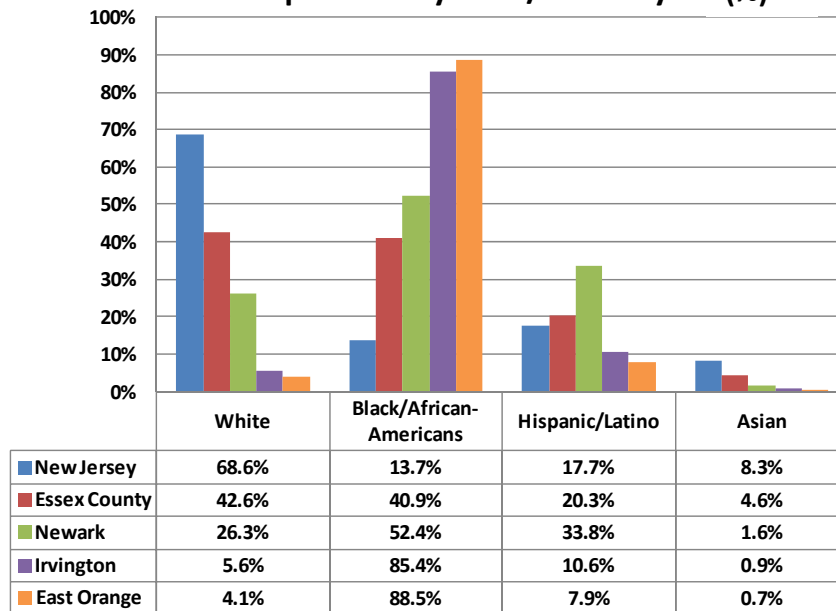


Source: U.S. Census Bureau, American Community Survey

Note: The U.S. Census Bureau defines LEP Population as persons who reported speaking English less than “very well.” 2005 City-Wide Data is unavailable, and 2009 city-wide data represents a five year estimate ranging from 2005 to 2009.

**Figure 4.48**

**2010 Population by Race/Ethnicity (%)**



Source: U.S. Census Bureau, American Community Survey

Note: Numbers may not add up to 100%

## **Community Health Index**

New Solutions, Inc.'s Community Health Index (CHI) is a numerical indicator that accounts for the underlying socioeconomic and access barriers that affect a population's health status. In developing this index, NSI identified prominent barriers related to income, culture/language, education, age, insurance and housing. The index is developed at the zip code level and is ranked from 1 to 552, with 1 having the highest need and 552 the least.

- A comparison of CHI scores to hospital utilization shows a strong correlation between high need and high use – communities with low CHI scores can be expected to have higher hospital utilization.
- There is also a causal relationship between CHI scores and preventable hospitalizations and ED visits for manageable conditions – communities with high CHI scores have more hospitalization and ED visits that could have been avoided with improved healthy community structures and appropriate outpatient/primary care (Community Health, (n.d.)).
- Essex County has an average CHI of 173 compared to 49 for the PSA zip codes and 91 for the SSA zip codes. This means that the residents of the communities that make up the PSA and SSA have more socioeconomic barriers than those in the county.

## **2. Access to Care**

***Essex County communities with low socioeconomic status experience disparities in health status and access to resources. These disparities are evidenced by uninsured status, limited access to primary care physicians and health services, and inappropriate use of hospital/emergency department services for conditions that could have been treated with preventive and primary care.***

### **Background**

Access to comprehensive, quality healthcare services is important for the achievement of health equity and healthy lifestyles for Essex County residents. Access to healthcare impacts:

- Overall physical, social, and mental health status
- Prevention of disease and disability
- Detection and treatment of health conditions
- Quality of life
- Preventable death and life expectancy

Disparities in healthcare access negatively impact each of these outcomes. Access is governed by a range of systemic barriers across the continuum of prevention and care. These include: location of health facilities, resident geographic location, transportation infrastructure, health literacy and awareness, and ability to pay for services. These barriers can lead to:

- Unmet health needs
- Inability to access preventive services
- Emphasis on emergency treatment instead of prevention and primary care
- Hospitalizations that could have been prevented

*Healthy People 2020* identifies four components of access to care which will be used to frame the following sections: health insurance coverage, services, timeliness, and adequate and appropriate workforce.

### Health Insurance Coverage—Uninsured

Health insurance coverage provides people with the security to access more affordable preventive services and clinical care when needed. It has been documented that people without insurance will not be offered the same range of medical services as those who are insured.<sup>28</sup>

In addition, ongoing contact with physicians fosters more comprehensive health awareness that informs preventive care and illness management. The uninsured do not think about their health or medical conditions in the same comprehensive way as do the insured.<sup>29</sup> When a medical condition occurs, they may delay treatment and/or use the emergency department instead of a lower cost, more appropriate primary care setting. The uninsured are:

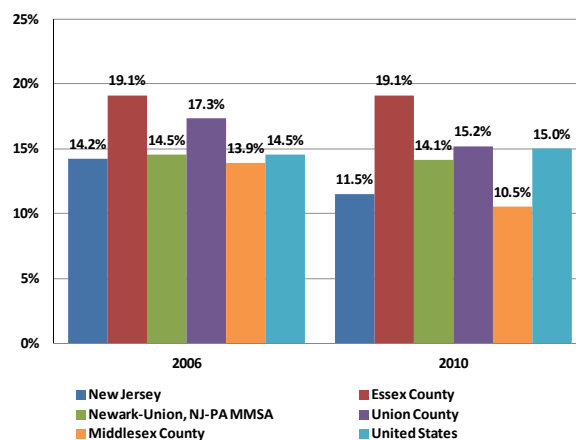
- Less likely to receive needed medical care.
- More likely to have more years of potential life lost.
- More likely to have poor health status.

#### Essex County

Essex County has a much higher percentage of uninsured residents than New Jersey or the United States.

- Between 2006 and 2010, the rate of uninsured residents has remained stable at 19.1%.
- The *Healthy People 2020* goal is 0%.
- Although the State already provides one of the nation’s most generous subsidized health insurance programs, through Family Care, which uses a mix of State and Federal money to cover more than 900,000 children and adults, it is estimated that there are an additional 1.3 million New Jerseyans without insurance which includes nearly 200,000 children.

**Figure 4.49**  
Healthcare Access/Coverage; % = No



Source: CDC, Behavioral Risk Factor Surveillance System

#### Insurance Coverage Among Hospitalized Patients

- NBIMC’s PSA/SSA included 12.9% uninsured patients compared to 11.3% for the county, and 8.4% in New Jersey
- In even greater contrast, ED visits among PSA/SSA residents included 31.1% uninsured compared to 29.7% of Essex County, and 22.7% of New Jersey uninsured ED visits.
- In terms of NBIMC’s inpatient payer mix, over one-third are Medicaid, Medicaid HMO, charity care, uninsured and self-pay compared to 28.9% in the county.
- In terms of NBIMC’s ED payer mix, 56.5% represent the under- or uninsured compared to 47.1% in the combined service area.

<sup>28</sup> Retrieved from <http://www.ncbi.nlm.nih.gov/pubmed/20073184>.

<sup>29</sup> Retrieved from <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1447830>.

Figure 4.50

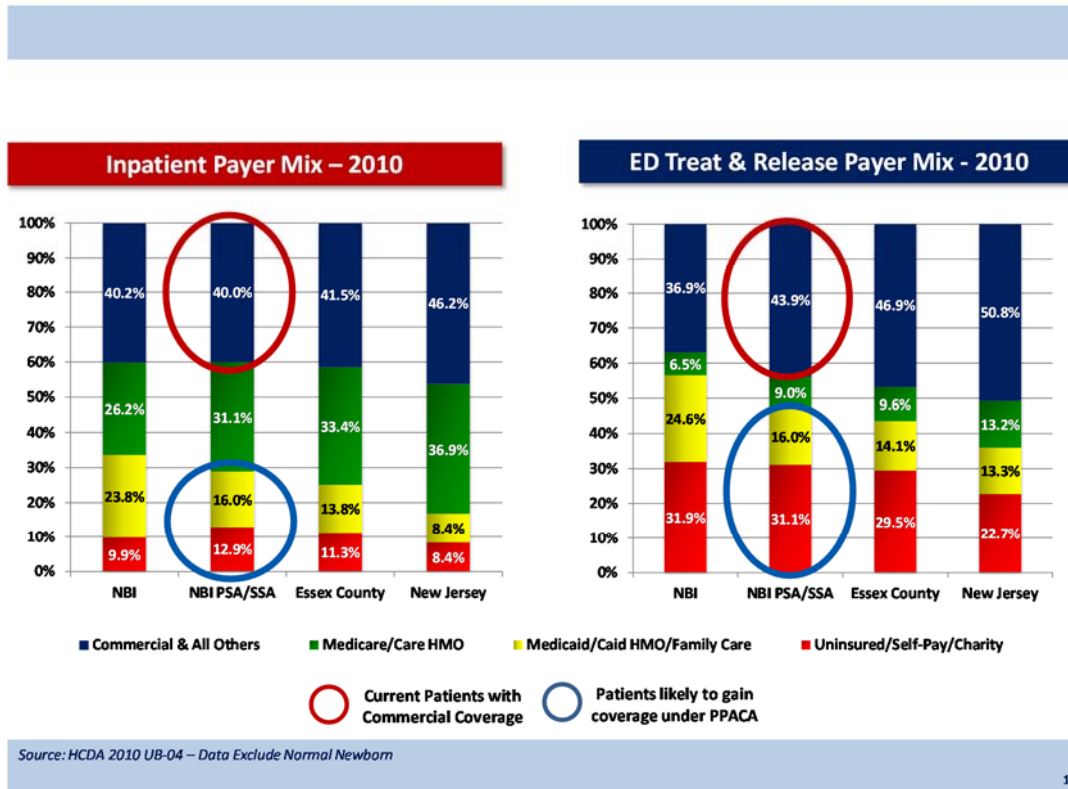


Figure 4.51

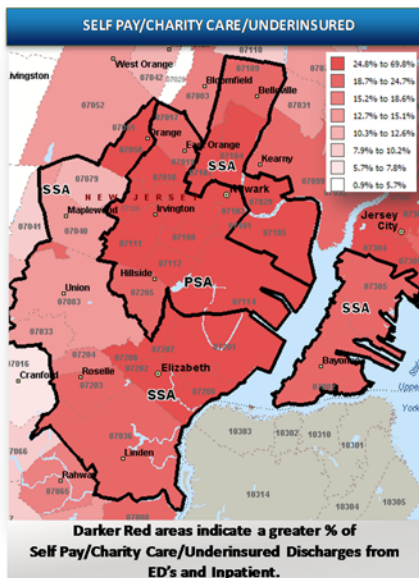
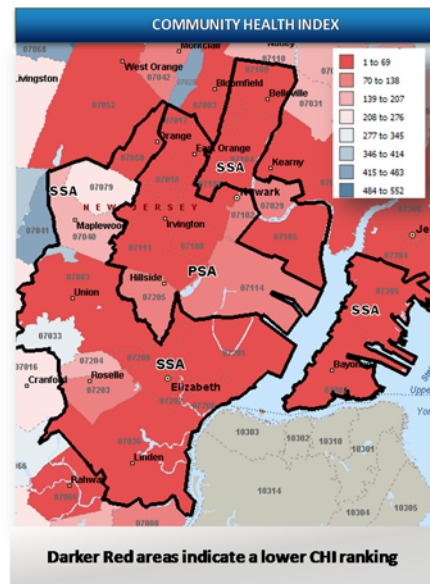


Figure 4.52



Source: UB-04 2010 Discharges, Census 2010 Population

### Affordable Care Act – Expansion of Care

The Affordable Care Act (ACA) is expected to decrease the percentage of uninsured New Jersey residents under the age of 65 from 14.5% to 8.6%. The non-group health insurance market will increase (from 2.8% to 7.6%) to about 362,000 individuals. More than half of those enrolled in the non-group coverage following reform will be eligible for tax credits. The expansion of Medicaid/NJ Family Care is anticipated to result in an increase of 234,000 individuals, increasing from 13.6% of the non-elderly population to 16.7%. More than half of these individuals will be non-parent adults. In addition, about 3% of individuals covered by employer sponsored healthcare insurance are anticipated to switch to exchange based coverage.

The reduction in the non-elderly uninsured rate from 14.5% to 8.6% will likely put the New Jersey rate in line with the national average for uninsured residents under 65. The Congressional Budget Office, in 2010, estimated that the uninsured rate in the U.S. would be 8% after reform, and Buettgrens, Hallohan & Carroll (2011) project a national rate of 8.7%.<sup>30</sup>

According to Figure 4.53, if all the towns in Essex County that have in excess of 8.6% of their population uninsured were to reduce the percentage to 8.6%, an additional 80,000 Essex County residents could be insured through ACA.

Figure 4.53

CURRENT ESTIMATED UNINSURED vs. ESTIMATED IMPACT OF PPACA ON UNINSURED POPULATION								
COUNTY	TOWN	2011 ACS Population Estimate*	# With health insurance coverage	No Health Insurance Coverage (Current Estimate)		Remaining Uninsured**		# of Newly Insured
				#	%	#	%	
ESSEX COUNTY	Belleville Township	35,810	29,673	6,137	17.1%	3,080	8.6%	3,057
	Bloomfield Township	47,178	41,588	5,590	11.8%	4,057	8.6%	1,533
	City of Orange Township	29,821	23,043	6,778	22.7%	2,565	8.6%	4,213
	East Orange City	63,743	51,702	12,041	18.9%	5,482	8.6%	6,559
	Irvington Township	53,779	42,018	11,761	21.9%	4,625	8.6%	7,136
	Maplewood Township	23,847	21,195	2,652	11.1%	2,051	8.6%	601
	Newark City	267,438	192,538	74,900	28.0%	23,000	8.6%	51,900
	Nutley Township	28,330	25,833	2,497	8.8%	2,436	8.6%	61
	West Orange Township	45,294	39,304	5,990	13.2%	3,895	8.6%	2,095
<b>TOTAL (TOWNS CURRENTLY &gt; 8.6% UNINSURED)</b>		<b>595,240</b>	<b>466,894</b>	<b>128,346</b>	<b>21.6%</b>	<b>51,191</b>	<b>8.6%</b>	<b>77,155</b>
*Civilian Non-institutionalized Population								
** Remaining Uninsured Calculated at Town Level Based on Estimated PPACA Impact (Reduction to 8.6% Uninsured)								

Source: United States Census – 2009-2011 American Community Survey 3-Year Estimates – DP03 Selected Economic Characteristics

<sup>30</sup> Health Insurance Status in New Jersey After Implementation of the Affordable Care Act. Joel Cantor, ScD; Dorothy Gaidobu, MSW, Ph.D.; Jose Novams; and Kristen Lloyd, MPN.



## **Services**

### Care Coordination—Medical Homes

Improving healthcare access depends, in part, on ensuring that people have a standard and consistent source of preventive care and clinical treatment. One method to accomplish this is through patient-centered medical homes. This model provides personalized, comprehensive medical care using a physician led multidisciplinary team that might also include nurse practitioners, nurses, case managers, community health workers and other medical personnel. Medical homes hold promise to transform the delivery of healthcare by improving quality, safety, efficiency and effectiveness. This will ultimately result in better health outcomes and fewer disparities and costs.<sup>31</sup>

Conveniently locating medical homes and other primary care in local communities further supports access. Providers who are invested in the community promote meaningful and sustained relationships between themselves, their patients, and patient families. Medical homes may be led by PCPs at clinics, hospitals, and health departments. Medical homes are also enriched by preventive and treatment services from nurse practitioners, parish nurses, community health workers and navigators among others. As a result, medical homes are associated with:

- Greater patient trust in the provider
- Effective patient-provider communication
- Increased likelihood that patients will receive appropriate care
- Decreased duplication and disconnection of health services provided.<sup>32</sup>

### Care Coordination—Accountable Care

On July 9, 2012, Barnabas Health North LLC became the fourth Accountable Care Organization (ACO) to be approved in the State to provide coordinated care for Medicare patients and to participate in the shared savings among hospitals and physicians. The ACO will consist of Newark Beth Israel Medical Center in Newark, Clara Maass Medical Center in Belleville, and Saint Barnabas Medical Center in Livingston, as well as aligned physicians throughout the area, who will work with CMS to provide Medicare beneficiaries with high quality service and care, while reducing the growth in Medicare expenditures through enhanced care coordination.

In Newark, efforts to improve care to the City's low income residents are being led by the Greater Newark Healthcare Coalition. The Coalition is interested in seeing an ACO or ACO-like structure established for the provision of Medicaid services in Newark.

### **Primary Care Physicians**

Primary care physicians represent less than 40% of the physicians practicing in Essex County.

- In 2008 there were 99.7 primary care physicians per 100,000 people compared to the CHR benchmark of 158.5 per 100,000.
- In 2011, 84% of Newark residents reported having a doctor.

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<sup>31</sup> Retrieved from <http://www.pcmh.ahqr.gov>.

<sup>32</sup> Ibid.

### **Primary Service Area Physician Need**

An area-wide Physician Needs Assessment carried out by New Solutions, Inc. on behalf of NBIMC as part of its medical staff development planning in 2012 identified the following needs within the communities served by the Hospital.

- Primary care physicians (Family Practice, Internal Medicine and Geriatrics) show a need for 36 additional physicians.
- OB/GYN needs include a range of 2-13.
- General surgeons (including Breast, Bariatric, and Vascular) show a need for 14.
- Colo-rectal surgeon shows a need for one.
- Ophthalmology shows a need for one.
- Orthopedic surgeons show a need for 8-10.
- Otolaryngology shows a need for 5-9.
- Urology shows a need for a range of 4-10.
- Psychiatry shows a need for 10.

### **Physicians Acceptance of Medicaid**

In addition to the fact that Essex County and the service area served by Newark Beth Israel Medical Center have fewer primary care physicians than are recommended by CHR, many physicians refuse to accept Medicaid patients because physician payment rates are so low. This substantial impediment to access for New Jersey Medicaid patients is the result of a Medicaid payment rate that is one-third the rate the Federal government now pays for Medicare patients. Healthcare reform measures would equalize payment rates and potentially enhance access for Medicaid patients.

### **Essex County Clinics**

There are seven acute care hospitals in the county, three of which are located in Newark, one in East Orange, one in Belleville, one in Montclair, and one in Livingston, which provide primary access points for patients. Most of these facilities provide outpatient clinic services including family health care services.

There are also a number of community-based organizations (CBOs) that provide medical and health services at local sites, including CBOs serving the Hispanic/Latino population. The Newark public schools have school-based clinics in all elementary, middle and high schools throughout the City.

In addition, there are two Federally Qualified Health Centers (FQHCs) and 10 satellites in Essex County, Newark Community Health Centers and Newark Homeless Health Care, which are the major providers of comprehensive community-based primary health care. Offices are located in Newark (9, including five in schools and one homeless shelter), East Orange (1), Irvington (1), and Orange (1). In September 2011, Newark City Health and Human Services was awarded a \$35,000 grant from the U.S. Department of Health and Human Services to help it become a patient-centered medical home.

In January 2012, the New Jersey Primary Care Association, Inc. (NJPCA) kicked off its statewide patient-centered care initiative. Fourteen New Jersey Community Health Centers agreed to participate. NJPCA is providing technical support around practice transformation and obtaining NCQA and Joint

Commission accreditation as a Patient-Centered Medical Home. The Newark Community Health Center, a Federally Qualified Health Center (FQHC), is one of the participating organizations.

Characteristics which distinguish FQHCs from most other healthcare providers include:

- Governance by users of FQHCs and by local professionals.
- Locations in underserved neighborhoods with clinic hours that include nights and weekends.
- Utilization of National Health Service Corps physicians who are devoted on a full-time basis to the Center.
- Multilingual staff.
- Ability to provide multiple sites and even mobile clinics and services for rural populations.
- Commitment to offering a wide array of medical and supportive services.
- Provision of care at costs which are substantially lower than at other settings, sliding fee scales.
- Reduction of overall healthcare costs as an effective alternative to emergency room utilization.
- Physician admitting privileges in local hospitals to provide 24-hour care to patients.
- Networking with community-based human service organizations to provide a continuum of care.
- Programs are based on the life-cycle concept, which gives particular emphasis to maternal and child health and seeks to provide quality care for people from prenatal care to old age.

### Dental Clinics

Dental clinics in Essex County are provided at HUMC-Mountainside Hospital, Newark Beth Israel Medical Center, University Hospital, and New Jersey Dental School. Community-based providers include the South West Essex Dental Center in West Orange, the Newark Department of Health and Human Services, and Newark Community Health Centers (two in Newark, one in East Orange, and one in Irvington).

### ***Timeliness of Services***

A key indicator of the timeliness of services is emergency department (ED) utilization for conditions that could have been treated in a primary care setting. These include both unnecessary emergency department visits for minor, treatable conditions and visits for conditions that progressed as a result of not accessing timely treatment in an outpatient setting.

Reasons for accessing the ED instead of a more appropriate, lower acuity level of care include:

- No regular source of primary care
- Lack of health insurance
- Cost including the inability to pay co-pays for office visits
- Transportation issues
- Practices without extended office hours
- Undocumented citizenship status

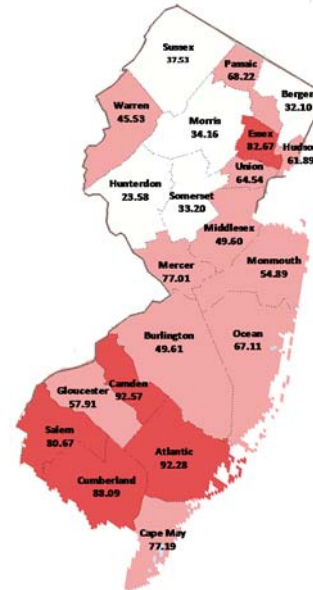
### ED and Inpatient Utilization for Ambulatory Care Sensitive Conditions by County, Age and Case Type

Ambulatory care sensitive conditions (ACSC) are indicators of emergency department (ED) use by patients who would have more appropriately been cared for in an outpatient primary setting. The charts below identify the number and rate of ED visits that might have been treated in another setting for Essex County compared to all New Jersey counties.

Figure 4.54

ACSC - ED RATE/1000			
COUNTY	NJ 2011	COUNTY	NJ 2011
Camden	92.57	Gloucester	57.91
Atlantic	92.28	Monmouth	54.89
Cumberland	88.09	Burlington	49.61
Essex	82.67	Middlesex	49.60
Salem	80.67	Warren	45.53
Cape May	77.19	Sussex	37.53
Mercer	77.01	Morris	34.16
Passaic	68.22	Somerset	33.20
Ocean	67.11	Bergen	32.10
Union	64.54	Hunterdon	23.58
Hudson	61.89	<b>Statewide Rate</b>	<b>59.79</b>

Figure 4.55



Source: NJDHSS 2008-2010 UB-04 Data – NJ Residents  
Population: United States Census

Essex County

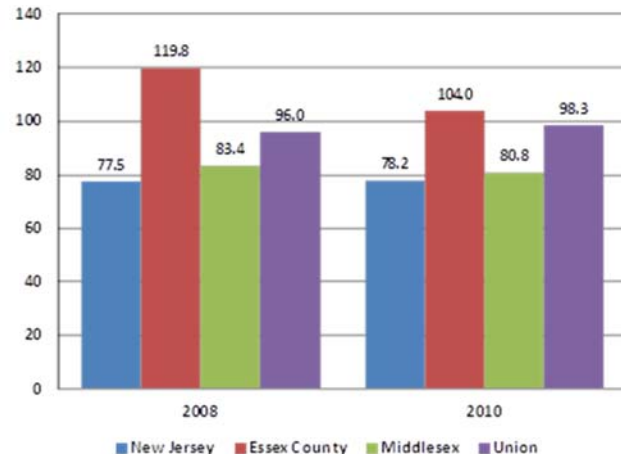
Essex County ranks fourth statewide in the rate of ACSC ED visits per 1,000 population.

- In 2011, Essex County had an ACSC ED visit rate of 82.7/1,000 compared to 59.8/1,000 for New Jersey.

Children

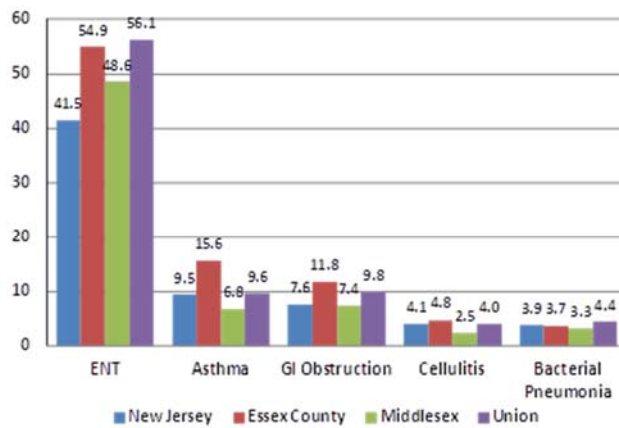
- Between 2008 and 2010, the rate of ED visits for ACSC among children declined from 119.8/1,000 to 104.0/1,000, but remains significantly higher than the State rate of 81.9/1,000.
- ENT conditions were the number one ACSC for which children experienced an ED visit.
- The top 5 ACSC ED visits among children in the county were ENT, asthma, GI obstruction, cellulitis and bacterial pneumonia.

Figure 4.56  
Total ACSC ED Visits For Children by County per 1,000  
2008-2010



Source: NJDHSS 2008-2010 UB-04 Data – NJ Residents; U.S. Census Bureau, American Community Survey

**Figure 4.57**  
**Top 5 ACSC ED Visits for Children per 1,000; 2010**

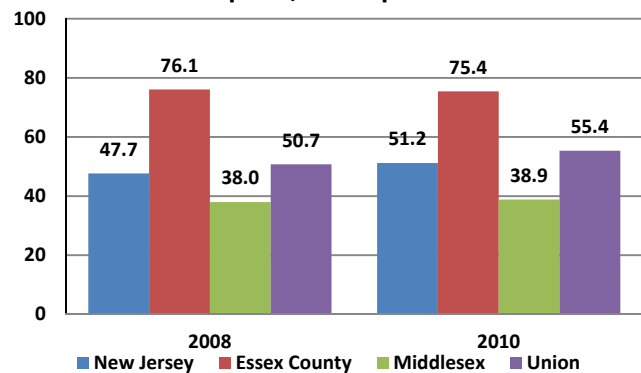


Source: NJDHSS 2008-2010 UB-04 Data – NJ Residents; U.S. Census Bureau, American Community Survey

**Adults**

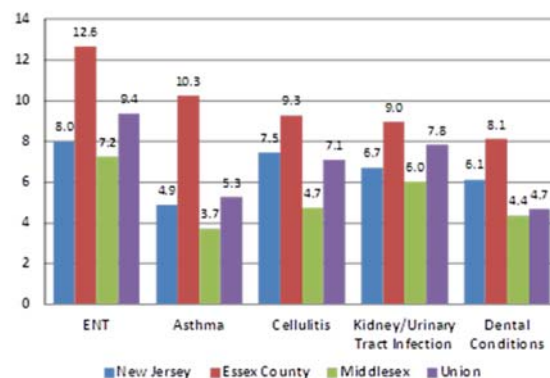
- During the same timeframe, the rate of ACSC ED visits for adults decreased from 76.1/1,000 to 75.4/1,000, but remains significantly higher than the State rate of 51.2/1,000.
- The top ACSC ED visit rate among Essex County adults was for ENT conditions at 12.6/1,000.
- Although the rate for adult asthma visits is declining, it remains significantly higher than the statewide rate.

**Figure 4.58**  
**Total ACSC ED Visits for Adults (Age 18+):  
Rate per 1,000 Population**



Source: NJDHSS 2008-2010 UB-04 Data – NJ Residents, U.S. Census Bureau, American Community Survey

**Figure 4.59**  
**Top 5 ACSC ED Visits for Adults per 1,000; 2010**



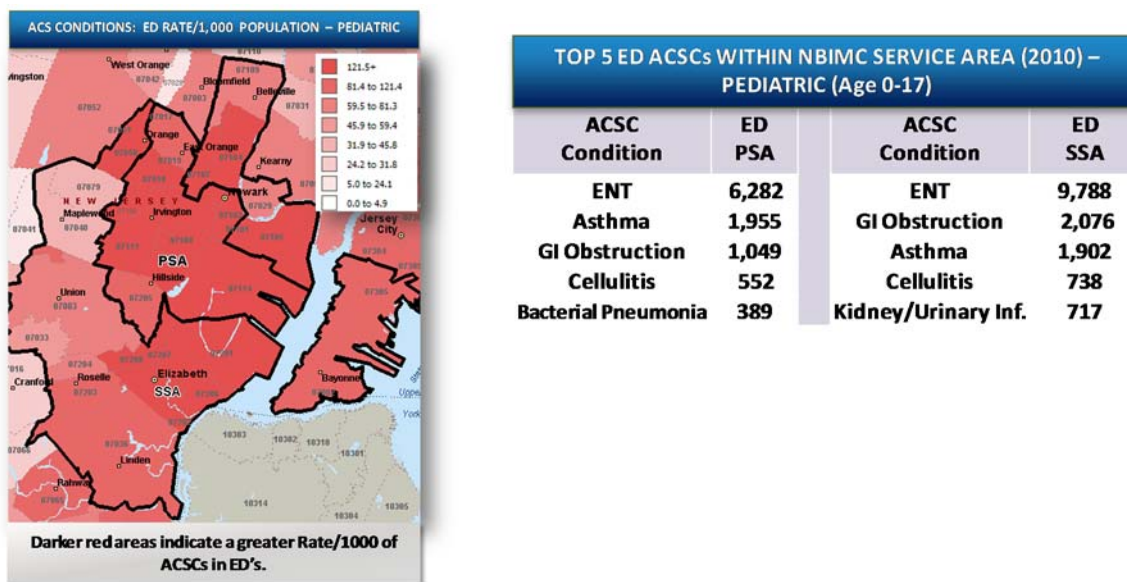
Source: NJDHSS 2008-2010 UB-04 Data – NJ Residents, U.S. Census Bureau, American Community Survey

### Service Area ACSC ED Rates Among Children 0-17

The rate of ED visits for ACSC among children was 158.5 in the PSA and 113.8 in the SSA far surpassing both the Essex County rate (104.0) and the State rate (78.20).

- Newark zip code 07112 had the highest rate for ED visits for ACSC (214.0).
- The top 5 ED visits for ACSC among children in the PSA were the same as those observed for the county: ENT, Asthma, GI Obstruction, Cellulitis, and Bacterial Pneumonia.
- The top 5 ACSC ED visits among children in the SSA were ENT, GI Obstruction, Asthma, Cellulitis, and Kidney/Urinary Tract Infection.

Figure 4.60



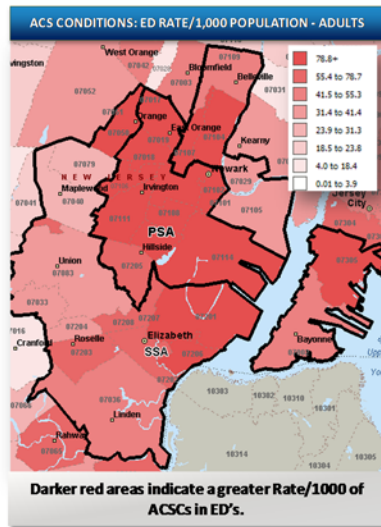
Source: NJDHSS 2010 UB-04 Data – NJ Residents, Population – U.S. Census Bureau

### Service Area ACSC ED Rates Among Adults 18+

The rate of ED visits for ACSC among those 18+ was 122.7 in the PSA and 67.4 in the SSA compared to Essex County (75.4) and State (51.2) rates.

- Newark (07108) had the highest rate (178.0).
- The top 5 ED visit types for ACSC among adults in the PSA were ENT, Asthma, Cellulitis, Dental conditions, and Kidney/Urinary Tract Infections.
- In the SSA, the top 5 were ENT, Cellulitis, Kidney/Urinary Tract Infections, Asthma, and Dental conditions.

Figure 4.61



Source: NJDHSS 2010 UB-04 Data – NJ Residents, Population – U.S. Census Bureau

TOP 5 ED ACSCs WITHIN NBIMC SERVICE AREA (2010) – ADULTS (Age 18+)			
ACSC Condition	ED PSA	ACSC Condition	ED SSA
ENT	4,598	ENT	5,536
Asthma	3,785	Cellulitis	4,376
Cellulitis	3,011	Kidney/Urinary Inf.	4,268
Dental Conditions	2,960	Asthma	3,831
Kidney/Urinary Inf.	2,877	Dental Conditions	3,074

### Inpatient ACSC

Individuals can be admitted to the hospital due to an ACSC. Essex County ranks seventh statewide in the rate of ACSC admissions per 1,000.

- In 2010, Essex County had an ACSC inpatient use rate of 25.2/1,000 compared to 22.7/1,000 statewide.
- In Essex County and in New Jersey, congestive heart failure is the most common inpatient ACSC.

Figure 4.62  
Top 5 Inpatient ACSC ED Visits

TOP 5 IP ACSCs WITHIN NBIMC SERVICE AREA (2010)			
ACSC Condition	ED PSA	ACSC Condition	ED SSA
CHF	1,731	CHF	2,493
Diabetes	1,420	Diabetes	1,954
Asthma	1,256	Bacterial Pneum.	1,840
Bacterial Pneum.	885	Asthma	1,664
Cellulitis	800	Cellulitis	1,622

Source: NJDHSS 2010 UB-04 Data – NJ Residents

### Inpatient ACSC Use Rates in the Service Area

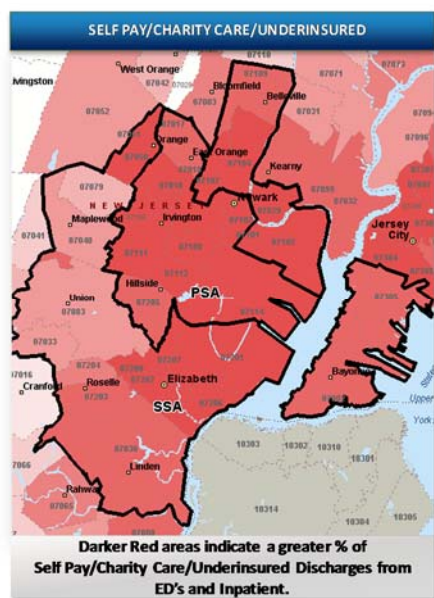
The inpatient use rate for ACSC in the PSA was 32.9/1,000 compared to 25.2/1,000 for the county and 22.7/1,000 for the State.

- The top 5 inpatient ACSC use rates occurred in CHF, Diabetes, Asthma, Bacterial Pneumonia, and Cellulitis.

In the SSA, inpatient use rate for ACSC was 24.8/1,000.

- The top 5 inpatient ACSC use rates were CHF, Diabetes, Bacterial Pneumonia, Asthma and Cellulitis.

**Figure 4.63**



**Figure 4.64**

% OF SELF PAY/CHARITY/UNDERINSURED – IP & ED (2010)			
Comparative Areas	%	Highest % Within PSA/SSA	%
New Jersey	17.8%	Newark (07105)	39.2%
Essex County	24.1%	Newark (07102)	37.6%
NBIMC PSA	28.4%	Newark (07114)	33.0%
NBIMC SSA	24.6%	Elizabeth (07201)	31.9%
		Newark (07103)	29.8%
		Newark (07107)	29.6%
		Newark (07112)	29.1%

Source: NJDHSS 2010 UB-04 Data – NJ Residents

### Service Area ED and Utilization by Self-Pay/Charity Care/Uninsured

Both the PSA (28.4%) and SSA (24.6%) have a higher percentage of self-pay, charity care and uninsured patients than the State (17.8%) and county (24.1%).

- Newark (07105) in the SSA has the highest percentage (39.2%) inpatient and ED discharges among the uninsured/underinsured.
- The second highest occurs in Newark (07102) at 37.6%.

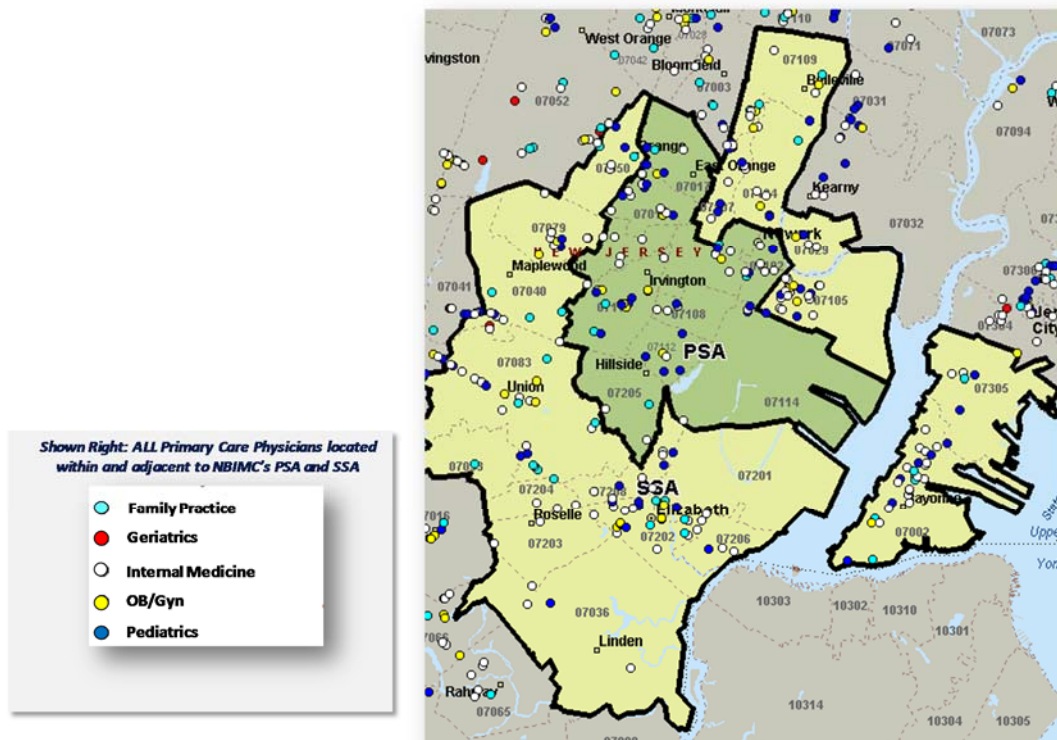


## Workforce

A key to enhancing access is to increase the availability of high quality community prevention services, clinical prevention services as well as community-based care and treatment. To accomplish this, a well-trained, culturally competent public and private sector workforce is required. The workforce must hold expertise in wellness, preventive care, chronic-illness care and public health.

Nationally, PCPs are in short supply, and according to the Lewin Group, the demand for PCPs will increase between 3% and 6% with the initiation of healthcare reform. As described above, New Jersey is experiencing a shortage of PCPs.

Figure 4.65



Source: New Solutions, Inc. Statewide Physician Database

### **3. Clinical Care Measures**

#### **Essex County**

##### Hospital Inpatient and ED Utilization

Hospital inpatient and ED utilization tends to be higher in Essex County than statewide and NBIMC's PSA tends to experience higher inpatient and ED utilization than are experienced by county residents. It is expected that under healthcare reform, use rates will decrease as care transitions and coordination of care improves, more care is delivered in ambulatory care settings and access to primary and preventive care increases.

Nearly 80% of U.S. adults (18-64) cite the reason for their last ED visit (that did not result in a hospitalization) was a lack of access to other providers. Specifically:

48.0%	Doctor's office not open
46.3%	No other place to go
45.8%	The ED was their closest provider
17.7%	Most of their care was at the ED <sup>33</sup>

- In 2010, Essex County has the ninth highest inpatient utilization rate in the State, 180.9/1,000, compared to 171.8 statewide.
- Essex County's utilization rate for ED visits is 413.7, making it the third highest in the State.
- The New Jersey rate in 2010 was 316.2.

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<sup>33</sup> Emergency Room Use Among Adults 18-64: Early Release of Estimates from the National Health Interview Survey, January-June 2011. Renee M. Gindi, Ph.D., Robin Cohen, Ph.D. and Whitney K. Kirzinger, MPH. Division of Health Interview Statistics, National Center for Health Statistics.

### Service Area Use Rates

Inpatient use rates for NBIMC's PSA and SSA are generally higher than use rates in the county and statewide.

- The PSA inpatient use rate was 240.7/1,000.
- The SSA inpatient use rate was 170.0/1,000.
- Several zip codes in the service area had inpatient use rates that were much higher than the State or county rate.
  - Jersey City (07305) was 240.7/1,000.
  - Newark (07103) was 231.5/1,000.
  - Newark (07108) was 231.1/1,000

PSA and SSA Emergency Department visit rates per 1,000 are also higher than the State and county rates.

- The ED visit rate in the PSA was 590.7/1,000; and in the SSA it was 396.6/1,000.
- There are also several zip codes in the service area with exceptionally high ED visit rates. These include:
  - Newark (07108) = 774.3/1,000
  - Newark (07103) = 746.2/1,000
  - Newark (07112) = 730.0/1,000

Methods to reduce ED use rates include addressing potential primary care access issues and effective management of patients using the ED for ACSC.

### Cesarean-Section

Rates for Cesarean-sections in the U.S. continue to rise well above the 15% recommended by the World Health Organization. In 1965, the U.S. rate for cesarean-sections was 4.5%. Since then the rate has risen steadily, leveling off at 32.8% in 2010 and 2011.<sup>34</sup> As a result, nearly one in three moms gave birth by Cesarean-section.

Cesarean-section is major abdominal surgery and increases the chance of long and short term side effects for both mother and child. As a result, *Healthy People 2020* has recommended a 10% improvement of the rate of Cesarean births to 23.9% among low-risk women with no prior Cesarean births, and for low-risk women with a prior Cesarean birth the recommendation is to reduce Cesarean-section rate from 90.8% to 81.7%.

Current research suggests that the following interconnected factors appear to contribute to high Cesarean-section rates.

- Low priority of enhancing woman's own abilities to give birth.
- Side effects of common labor interventions.
- Refusal to offer informed choice of vaginal birth.
- Casual attitudes about surgery and variation in professional practice style.

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<sup>34</sup> Emergency Room Use Among Adults 18-64: Early Release of Estimates from the National Health Interview Survey, January-June 2011. Renee M. Gindi, Ph.D., Robin Cohen, Ph.D. and Whitney K. Kirzinger, MPH. Division of Health Interview Statistics, National Center for Health Statistics.

- Limited awareness of harms that are more likely with Cesarean-sections.
- Incentive to practice in a manner that is more efficient for providers.<sup>35</sup>

#### Essex County

- In 2010, overall Cesarean-section rates in Essex County were over 40% of all births, well above the U.S. rate and higher than the statewide rate (39.4%).
- Primary Cesarean-section rates at 13.2% were better than the *Healthy People 2020* target of 23.9%.
- Repeat Cesarean-section rates were on par with those statewide.

#### Service Area

In order to gain a perspective of the utilization of Cesarean-section at the service area/zip code level, we employed the AHQR inpatient quality indicator #21 which excludes breech births, abnormal presentation, pre-term, fetal deaths, and multiple gestations, and calculates an overall Cesarean-section rate. In addition, because of the data available, Cesarean-section rates are presented as a percent of deliveries rather than as presented above as a percent of births, resulting in small differences.

Accordingly, Essex County's overall Cesarean-section rate in 2010, as a percent of total deliveries, is 45.7% compared to the New Jersey rate of 43.4%.

- The Cesarean-section rate for NBIMC's PSA is 44.5%.
- The SSA rate is 44.8%.
- Within the service area are several zip codes with rates that are substantially higher:
  - Kenilworth (07033) 67.2%
  - Newark (07114) 53.4%
  - Bayonne (07022) 53.4%

The figure below provides the Cesarean-section rates by the five Essex County hospitals with maternity units.

- Three (NBIMC, SBMC and HUMC-Mountainside) of the five hospitals with maternity units have rates that exceed the State and county rates.

**Figure 4.66 (%)**

<b>AHRQ C-Section Rates Essex County Hospitals (2010)</b>	
<b>NBIMC</b>	<b>46.7%</b>
<b>SBMC</b>	<b>51.0%</b>
<b>HUMC – Mountainside</b>	<b>49.8%</b>
<b>CMMC</b>	<b>43.2%</b>
<b>Univ. Hosp. UMDNJ</b>	<b>40.4%</b>

*Source: 2008 -2010 NJ, NY and PA UB-04 Data (NJ Residents Only); Percentages calculated using AHRQ Inpatient Quality Indicator #21 - Cesarean Delivery Rate (Version 4.4 – March 2012)*

<sup>35</sup> Retrieved from <http://childbirthconnection.org/article.asp?ck=10456>. Accessed 4/30/13.

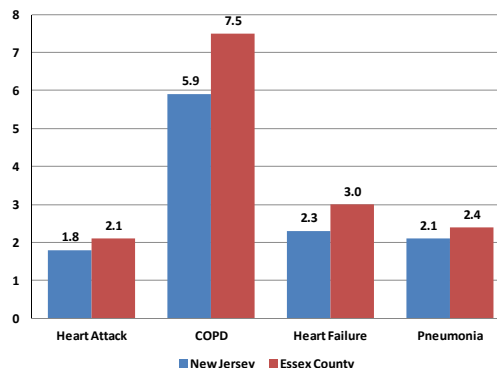
### Readmissions

Nearly one in five Medicare beneficiaries is readmitted within a month. In an effort to reduce costs and improve the transition of care from hospital to home or other care setting, readmission rates for three conditions: congestive heart failure, heart attack and pneumonia are being tracked and hospitals with high readmission rates among these patient categories are receiving penalties of up to 1% of their Medicare reimbursement in FY 2013.

Although New Jersey hospitals have reduced admission rates from 21.8% in the second quarter of 2008 to 20.5% in the first quarter of 2012, New Jersey continues to rank among the bottom of states for controlling readmissions. Due to the above, it is not surprising that the Essex County rate of hospital admissions per 1,000 Medicare beneficiaries was not statistically different from that of New Jersey.

- In each of the four case types shown in Figure 4.61, Essex County’s readmission rates were higher than the State.
- The figure at the right shows the CMS statewide readmission penalty as well as the readmission penalty rates for all hospitals in Essex County. Only two New Jersey hospitals avoided any penalty. NBIMC was three of seven Essex County hospitals to receive the full 1% penalty in FY 2013.

**Figure 4.67**  
Readmissions per 1,000



Source: Healthcare Quality Strategies, Inc. (HQS), Report of Medicare FFS claims for New Jersey, 2011

### 4. Health Behaviors

Health behaviors such as eating sensibly and exercising lower the risk of conditions like heart disease and diabetes, while unhealthy behaviors like smoking, excessive drinking and high-risk sexual activities increase the risk of conditions like lung cancer, heart disease, and liver disease. Preventive health behaviors like prenatal care and health screenings can result in early identification and treatment of disease.

#### Maternal/Fetal Health Indicators

##### Prenatal Care

Pregnancy can provide an opportunity to identify existing health risks in women and to prevent future health problems for women and their children.

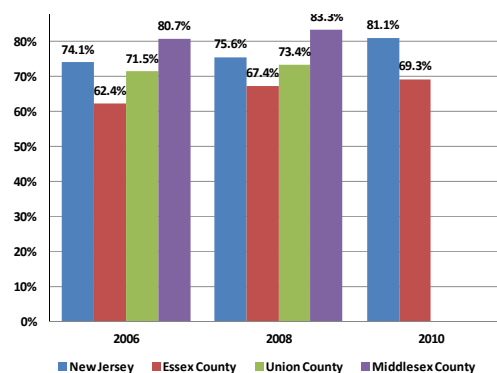
**Figure 4.68**

CMS Readmission Penalties - 2013 (Essex County Hospitals)	
Statewide Median	0.72%
NEWARK BETH ISRAEL MC	1.00%
EAST ORANGE GENERAL	1.00%
ST. MICHAEL'S MC	1.00%
CLARA MAASS MC	0.78%
UMDNJ – UNIV. HOSPITAL	0.58%
ST. BARNABAS MC	0.21%
HUMC – MOUNTAINSIDE	0.19%

Source: [www.kaiserhealthnews.org/stories/2012/august/13/medicare-hospitals-readmissions-penalties.aspx](http://www.kaiserhealthnews.org/stories/2012/august/13/medicare-hospitals-readmissions-penalties.aspx)

**Figure 4.69**

% of Live Births with Prenatal Care in 1<sup>st</sup> Trimester



Source: NJ Department of Health and Senior Services, Bureau of Vital Statistics and Registration, N.J. Birth Certificate Database, US Census Bureau, American Community Survey; Note: Percentages are based on total number of live births for county and state.




According to *Healthy People 2020*, factors that affect pregnancy and childbirth, include:

- Preconception health status, including stress
- Age
- Access to appropriate preconception and inter-conception healthcare
- Poverty

In 2010, 69.3% of Essex County live births initiated prenatal care in the first trimester.

- This was an increase of 6.9 percentage points over the percent in 2006.
- This compared to 81.1% of New Jersey live births receiving care in the first trimester.
- The percentage of live births in Essex County receiving first trimester care was significantly lower than the statewide percentage and the *Healthy People 2020* target.
- Between 2006 and 2010 the percent of Essex County live births with no prenatal care decreased from 2.7% to 2.1%.
- The percentage of Essex County live births with no prenatal care (2.1%) remains significantly higher than the State rate of 0.9%.

**Figure 4.70**  
**Maternal Health**

Indicator	Healthy People 2020 Target	County Health Rankings Benchmark	New Jersey
<b>First Trimester Prenatal Care:</b> Percentage of Live Births		N/A	
<b>No Prenatal Care:</b> Percentage of Live Births	N/A	N/A	

### ***High Risk Sexual Behaviors***

#### Teen Pregnancy

One in five unplanned pregnancies each year is among teens; and 82% of pregnancies to mothers aged 15 to 19 are unintended. Teen mothers:

- Are less likely to graduate from high school or attain a GED by the time they reach age 30.
- Earn an average of approximately \$3,500 less per year, when compared with those who delay childbearing until their 20s.
- Receive nearly twice as much Federal aid for nearly twice as long.<sup>36</sup>

Births resulting from unplanned pregnancies can have negative consequences including birth defects and low birth weight. Children from unintended pregnancies are more likely to experience poor mental and physical health during childhood, and have lower educational attainment and more behavioral

<sup>36</sup> Retrieved from <http://healthpeople.gov/2020/topicsobjectives2020/overview.aspx?topicid=13>.

issues in their teen years. Sons of teen mothers are more likely to be incarcerated, and daughters are more likely to become adolescent mothers.<sup>37</sup>

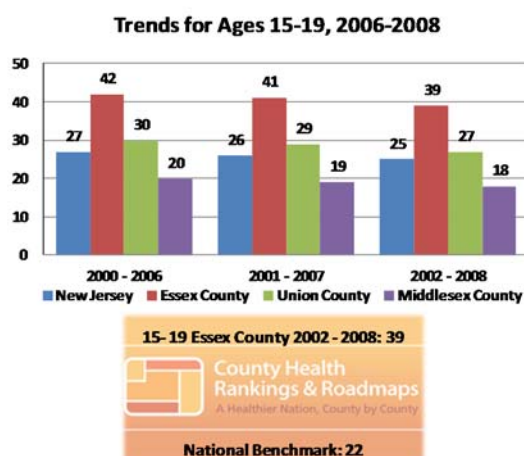
The increased costs of healthcare and social service costs, increased costs for incarceration, rates of children born to teen parents, and cost of tax revenue from teen moms who earn less money costs U.S. tax payers an estimated \$9 billion a year.<sup>38</sup>

### Essex County Teen Births

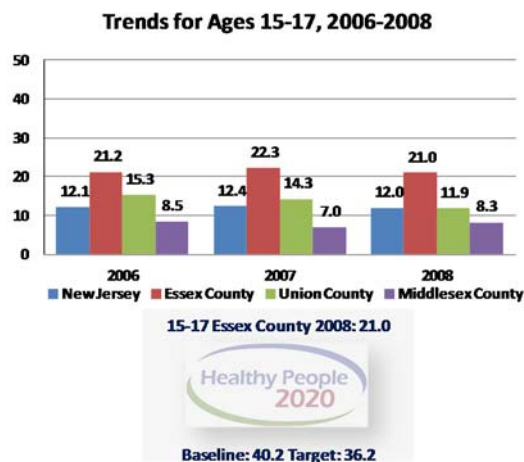
Teen births among 15-17 year olds and 15-19 declined in Essex County but remained significantly higher than the rate statewide.

- The birth rate for teens 15-19 in Essex County is nearly twice the CHR benchmark based upon a 6-year average from 2002 to 2008.
- The rate of teen births among those 15-17 is lower than the *Healthy People 2020* target.

**Figure 4.71**  
**Teen Births (per 1,000)**



**Figure 4.72**  
**Teen Births (per 1,000)**



Source: National Center for Health Statistics, County Health Rankings; N.J. Department of Health and Senior Services, Center for Health Statistics, N.J. State Health Assessment Data

**Figure 4.73**  
**Teen Births**

Indicator	Healthy People 2020 Target	County Health Rankings Benchmark	New Jersey
<b>Teen Birth Ages 15-19:</b> Rate per 1,000 Female Population	N/A	●	●
<b>Teen Birth Ages 15-17:</b> Rate per 1,000 Female Population	●	N/A	●

<sup>37</sup> Ibid.

<sup>38</sup> Retrieved from <http://cdc.gov/teenpregnancy/aboutteenpregnancy>. Accessed 4/30/13.

### Service Area Teen Births

More recent data available through the 2010 UB New Jersey data shows the rate for teen births 15-19 dropped to 19.5/1,000 statewide.

- The rate among Essex County teens also dropped (30.0/1,000) but continues to be higher than the statewide rate.
- The PSA teen birth rate in 2010 was 44.8/1,000.
- Within the service area several zip codes exceed the State, county and service area rates. The highest is nearly four times the State rate.

Figure 4.74

TEEN BIRTH RATES/1000 (2010)**	
GEOGRAPHIC AREA	Rate
New Jersey	19.50
Essex County	29.96
NBIMC PSA	44.77
NBIMC SSA	32.67
Elizabethport (07206)	77.55
Newark (07114)	61.11
Newark (07108)	58.77
Newark (07104)	58.76
Orange (07050)	56.56
Newark (07112)	52.10
Jersey City (07305)	51.09

\* NCHS Data Brief, No. 46, October 2010: <http://www.cdc.gov/nchs/data/databriefs/db46.pdf>

\*\* UB-04 2010 Discharges – All Deliveries to Mothers Age 15-19, Census 2010 Population

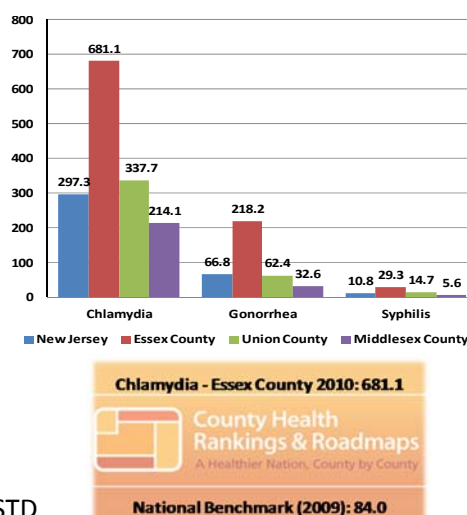
### Sexually Transmitted Diseases

#### Background

Sexually transmitted diseases (STD) refer to more than 25 infectious organisms that are transmitted primarily through (unprotected) sexual activity. STDs remain a significant public health problem in the Essex County and the United States. Factors that affect the spread of STDs include:

- Asymptomatic nature of STDs.
  - The majority of STDs either do not produce any symptoms, or they produce symptoms so mild that they are unnoticed. As a result, many infected persons do not know that they need medical care.
- Gender disparities.
  - Women suffer more frequent and more serious STD complications than men including pelvic inflammatory disease, ectopic pregnancy, infertility, and chronic pelvic pain.<sup>39</sup>

Figure 4.75  
Sexually Transmitted Diseases per 100,000



Source: N.J. Department of Health and Senior Services, Division of HIV, STD, and TB Services, Sexually Transmitted Diseases Program, U.S. Census Bureau, ACS

<sup>39</sup> Retrieved from <http://helathypeople.gov/topics/objectives/2020/overview.aspx?topicid=37>.



- Age disparities.
  - Nationally, sexually active adolescents ages 15 to 19 and young adults ages 20 to 24 are at higher risk for getting STDs than older adults.<sup>40</sup>

### Incidence

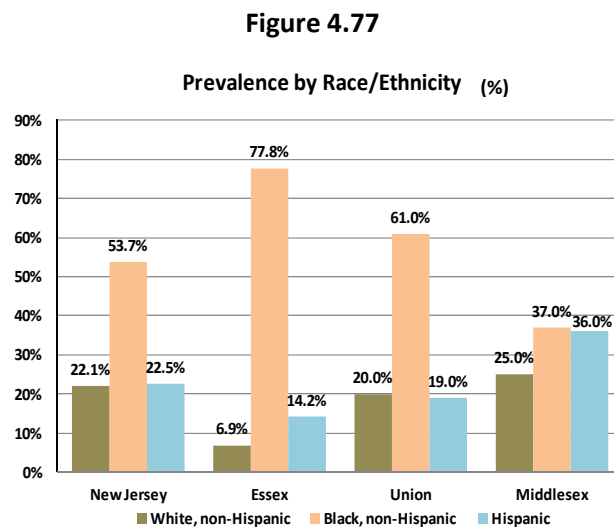
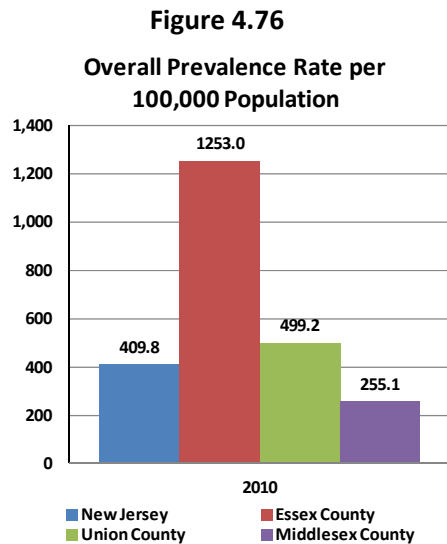
Essex County sexually transmitted disease rates per 100,000:

- The rates for Chlamydia and gonorrhea increased between 2008 and 2010, while the rate of syphilis declined.
- The rate for Chlamydia, gonorrhea and syphilis are all significantly higher than the State rate.
- The rate of Chlamydia in Essex County is eight times higher than the national benchmark.

### **HIV/AIDS**

HIV/AIDS can be transmitted through sexual contact, through intravenous drug use or contact with bodily fluids.

- In 2010, the HIV/AIDS prevalence rate per 100,000 was significantly (three times) higher than the statewide rate.
- Black residents constitute 77.8% of HIV/AIDS cases in Essex County.
- As of December 2010, the HIV/AIDS prevalence rate for Newark residents was 2,108.7/100,000.
- The rate among Irvington residents was 1,928.0, and for East Orange was 2,108.4.

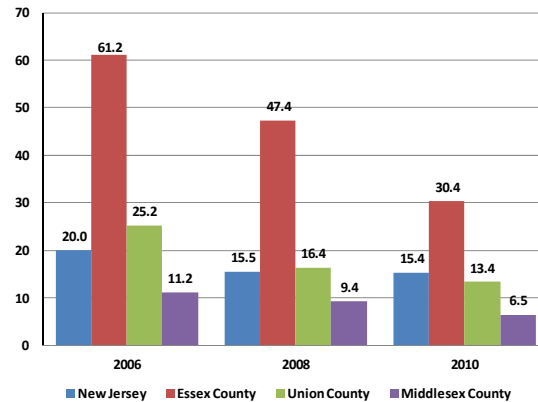


Source: NJ Department of Health and Senior Services, Division of HIV, STD, and TB Services, HIV/AIDS Reporting System, 2011  
Note: Prevalence indicates amount of people living with HIV/AIDS at the time.

<sup>40</sup> Ibid.

- The rate of new HIV/AIDS cases declined by 50% in Essex County between 2005 and 2010, but remains significantly higher (more than three times) than the statewide rate.

**Figure 4.78**  
**HIV/AIDS Cases by County and State (per 100,000)**



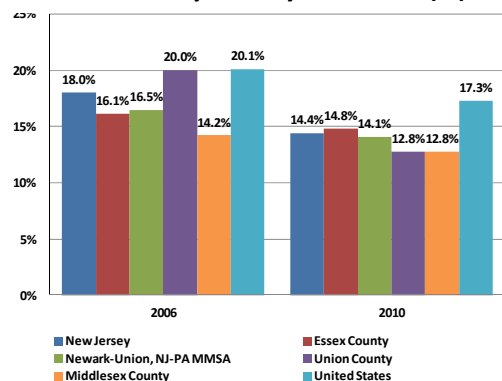
Source: N.J. Department of Health and Senior Services, Division of HIV, STD, and TB Services, HIV/AIDS Reporting System, 2011; U.S. Census Bureau, American Community Survey  
Note: New cases reported indicates new cases per year.

### Tobacco Use

Tobacco use is the single most preventable cause of death and disease in the United States. The hazards of tobacco use are well known.

- Cigarette smokers are at high risk for cancer, heart disease, respiratory diseases, and premature birth.
- Secondhand smoke causes heart disease and lung cancer in adults and asthma, respiratory infections, ear infections and sudden infant death syndrome (SIDS) in children.
- Smokeless tobacco causes serious oral health problems, including mouth and gum cancer, periodontitis, and tooth loss.
- Cigar and pipe use causes cancer of the larynx, mouth, esophagus, and lung.<sup>41</sup>

**Figure 4.79**  
**Tobacco Use by County and State (%)**



Source: CDC, Behavioral Risk Factor Surveillance System, County Health Rankings

### Essex County

Smoking is declining in the U.S., Essex County and New Jersey.

- Between 2006 and 2010, smoking in the U.S. declined from 20.1% to 17.3%.

<sup>41</sup> Retrieved from [http://www.cdc.gov/tobacco/data\\_statistic/fact\\_sheet/fast\\_facts](http://www.cdc.gov/tobacco/data_statistic/fact_sheet/fast_facts).

- During the same time, smoking in Essex County declined from 16.1% to 14.8%.
- The percent of current smokers in Essex County remains significantly higher than the *Healthy People 2020* target of 12%.

### **Diet and Exercise**

According to the Centers for Disease Control and Prevention (CDC), poor diet and physical inactivity have nearly caught up with tobacco use as the second leading preventable cause of death in the United States.<sup>42</sup>

It has been estimated that the total annual economic cost of overweight and obesity in the United States and Canada combining medical costs, excess mortality and disability was approximately \$300 billion in 2009.<sup>43</sup>

In trying to promote healthy eating as a way to raise the health status of individuals and communities, the high prices for fresh fruits, fresh vegetables, and whole grains have put that common sense, non-medical approach out of reach for those already living in the margins of poverty. The reality is that it is cheaper to eat poorly.<sup>44</sup>

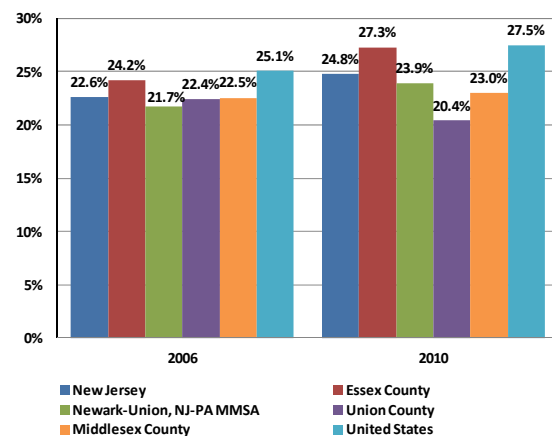
Within the Newark community the south ward, which comprises the Weequahic, Clinton Hill, Dayton and South Broad Valley neighborhoods and is home to NBIMC, was found to have no grocery stores.

### Diet and Nutrition

Diet and body weight are related to health status. A healthy diet reduces risks for many health conditions discussed in this report, including:

- Overweight and obesity
- Heart disease
- High blood pressure
- Stroke
- Type 2 diabetes
- Osteoporosis
- Oral disease
- Some cancers
- Complications during pregnancy.<sup>45</sup>

**Figure 4.80**  
**Obesity: Percent with Reported BMI of > = 30**



Source: CDC, Behavioral Risk Factor Surveillance System

<sup>42</sup> Sanchez, Weinraub, Tagtow, & King Collier, 2008

<sup>43</sup> Retrieved from <http://www.soa.org/news-andpublications/newsroom/pressreleases/new-society-of-actuaries-study>.

<sup>44</sup> Sanchez et al., p. 1

<sup>45</sup> Retrieved from <http://www.healthypeople.gov/2020/topicsobjectives2020/overview.aspx?topicid=29>.

## Essex County

Obesity in Essex County rose between 2006 and 2010, from 24.2% to 27.3%.

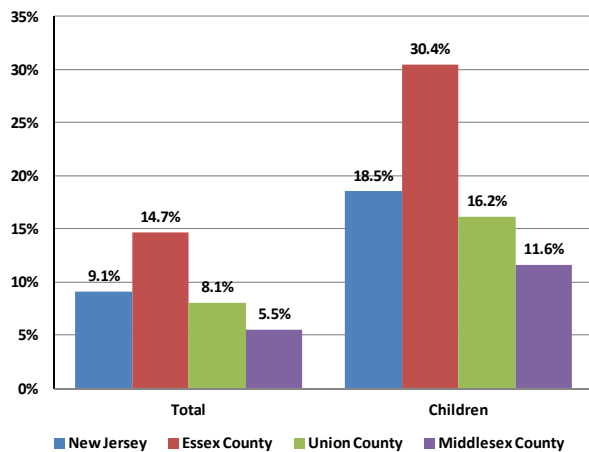
- Obesity in Essex County was higher than the State, MMSA and comparative counties.
- Only the U.S. reported rate, 27.5%, was higher.
- Despite the increase, Essex County's obesity rate was statistically similar to the statewide average, *Healthy People 2020* target, and the CHR benchmark.

## Supplemental Food Assistance

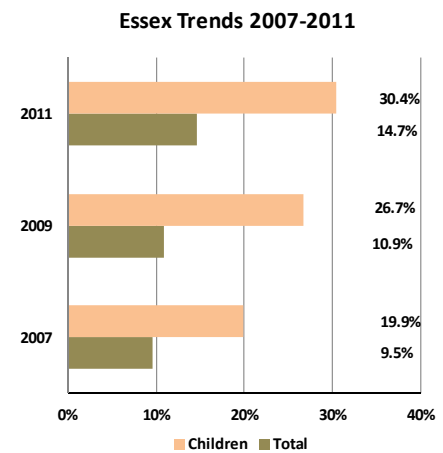
Essex County recipients of the Supplemental Nutritional Assistance Program (SNAP) increased between 2007 and 2011.

- The percent of all SNAP recipients grew from 9.5% to 14.7%.
- Among children the percent grew from 19.9% to 30.4%.
- Essex County has a significantly higher percent of SNAP recipients than the State.

**Figure 4.81**  
**SNAP by Count and State (%), 2011**



**Figure 4.82**  
**SNAP Trend**



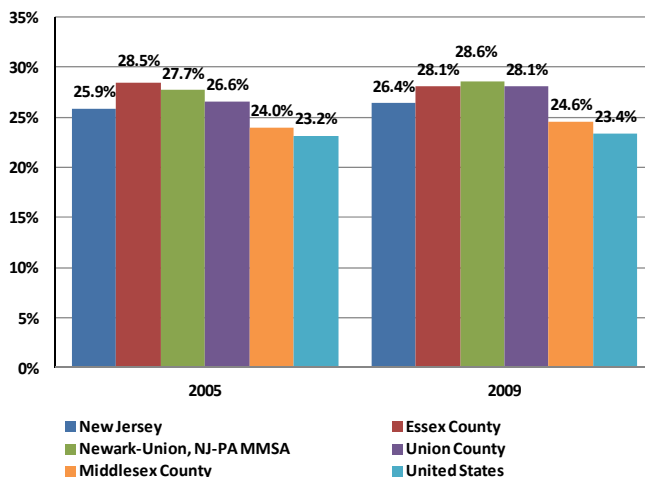
Source: NJ Department of Human Services, Division of Family Development, Current Program Statistics, 2011; U.S. Census, ACS, Claritas 2011-2017 Projection / Intervening Year: Straight Line Method. Note: The total percentages are based on the total and the percentages of children are based on the number of children (<18 years). Percentages are for December of each year given.

## Fruit and Vegetable Consumption

Between 2005 and 2009, the percent of Essex County residents who consumed five servings of fruit and vegetables a day fell from 28.5% to 28.1%.

- This percentage is not statistically different from the percentage statewide but is higher than the U.S. average of 23.4%.

**Figure 4.83**  
**Adults Who Have Consumed 5 or More Fruits/Vegetables Daily (%)**



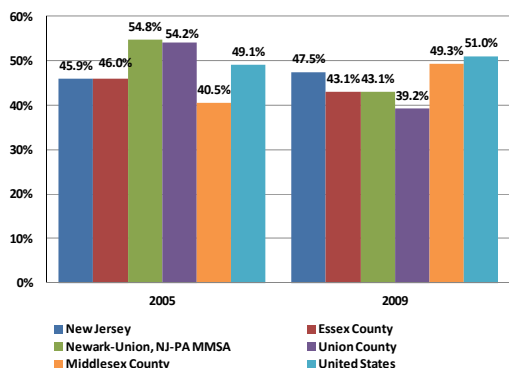
Source: CDC, Behavioral Risk Factor Surveillance System

Physical Exercise

Regular physical exercise is declining among Essex County residents.

- Between 2005 and 2009, the percent of Essex County adults engaging in adequate physical activity declined from 46.0% to 43.1%.
- The *Healthy People 2020* target is 47.9%.
- The percent of county residents reporting any physical activity rose only 0.2 percentage points between 2005 and 2010, from 70.7% to 70.9%.
- In 2011, 69% of Newark residents reported participating in any physical activity.

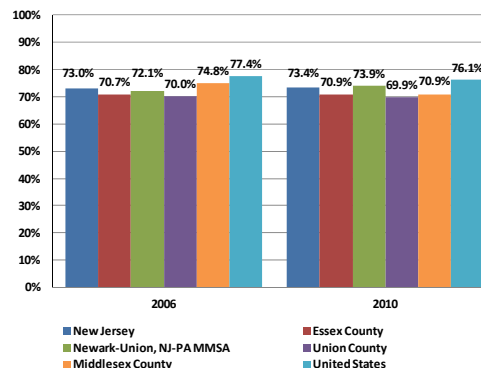
**Figure 4.84**  
**Adults with 30+ minutes of moderate physical activity 5 or more days/week, or vigorous physical activity for 20+ minutes 3 or more days/week (%)**



**Essex County 2009: 43.1%**

Baseline: 43.5% Target: 47.9%

**Figure 4.85**  
**Participated in Physical Activity in the Past Month (%)**



**Essex County 2009: 72%**











County Health Rankings & Roadmaps  
A Healthier Nation, County by County

**National Benchmark: 79%**

Source: CDC, Behavioral Risk Factor Surveillance System

Note: Healthy People 2020 baseline and target are defined as, "moderate intensity for at least 150 minutes/week, or 75/minutes/week of vigorous intensity, or an equivalent combination."

**Figure 4.86**  
**Diet and Exercise**

Indicator	Healthy People 2020 Target	County Health Rankings Benchmark	New Jersey
Obesity: Percent with Reported BMI of >= 30			
Adults with 30+ Minutes of Moderate Physical Activity 5 or More Days/Week, or Vigorous Physical Activity for 20+ Minutes 3 or More Days/Week		N/A	
During the Past Month, Did You Participate in Any Physical Activities? %=Yes	N/A		
Adults Who Have Consumed Fruits and Vegetables Five or More Times/Day	N/A	N/A	
Percent of Population Receiving SNAP	N/A	N/A	
Percent of Children Receiving SNAP	N/A	N/A	

### **Health Screenings**

Health screenings include preventable actions people can take to ensure early identification or monitoring of disease processes.

### Cancer Screenings

Screening is effective in identifying some types of cancer including:

#### *Breast Cancer (mammography)*

- In Essex County the percentage of women age 40 and over who **did not** have a mammogram decreased by 8.2 percentage points from 27.6% to 19.4% and is in line with the *Healthy People 2020* target of 18.9%.







#### *Cervical Cancer (pap smear)*

- The percentage of women 18 and over who had a pap smear in the last three years declined between 2004 and 2010 from 86.8% to 81.3%.
- The *Healthy People 2020* target is 93.0%.

#### *Colon-rectal Cancer (sigmoidoscopy or colonoscopy)*

- The percentage of Essex County adults 50+ who ever had a sigmoidoscopy or colonoscopy increased 5.5 percentage points between 2004 and 2010, from 62.3% to 67.8%.

**Figure 4.87  
Cancer Screenings**

Indicator	Healthy People 2020 Target	County Health Rankings Benchmark	New Jersey
Percent of Women Age 40+ Who Have NOT Had a Mammogram Within Past Two Years		N/A	
Percent of Women 18 Years and Over Who have Had a Pap Test in the Past 3 years		N/A	
Percent of Adults 50 Years and Over Who Have Ever Had a Sigmoidoscopy or Colonoscopy		N/A	



Research shows that a recommendation from a healthcare provider is the most important reason patients cite for having cancer screening tests.<sup>46</sup>

#### Diabetes Screening

Diabetes screenings are an effective way of identifying and managing the illness.

- The percentage of diabetes screenings among diabetic Medicare enrollees increased from 71% in 2003 to 2006, to 78% in 2009.

**Figure 4.88  
Diabetes Screening**

Indicator	Healthy People 2020 Target	County Health Rankings Benchmark	New Jersey
Percent of Diabetic Medicare Enrollees that Receive HbA1c Screening	N/A		

#### ***Immunizations***

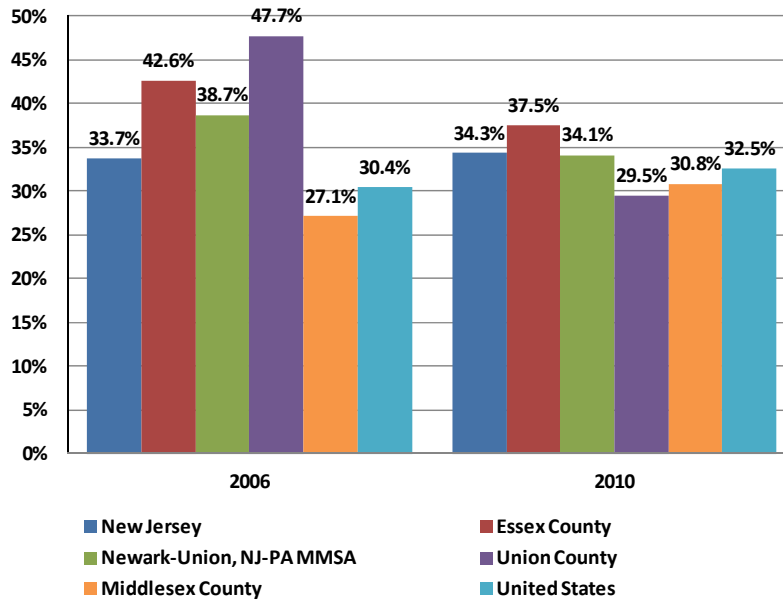
Immunizations are a primary means of providing individuals and children protection from potentially fatal illnesses.

#### Adult Flu

- Between 2006 and 2010 there was a decline in the percent of adults 65+ who failed to get a flu shot from 42.6% to 37.5%.
- The *Healthy People 2020* goal is to have no more than 10% go without this vaccine.

<sup>46</sup> Retrieved from <http://www.healthypeople.gov/2020/topicsobjectives2020/overview.aspx?topicid=5>.

**Figure 4.89**  
**Percent of Adults Age 65+ who have NOT had a Flu Shot in the Past Year**

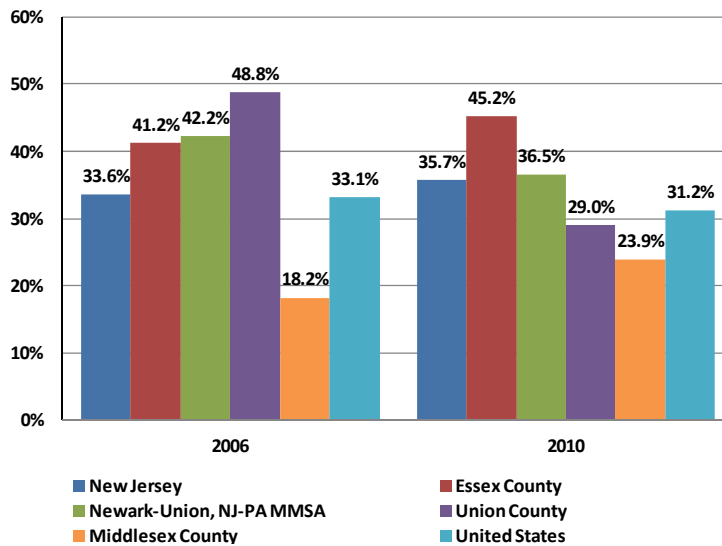


Source: CDC, Behavioral Risk Factor Surveillance System

Adult Pneumonia

- The percent of adults 65+ who have never had a pneumonia vaccine between 2006 and 2010 increased from 41.2% to 45.2%.
- The *Healthy People 2020* goal is for no more than 10% to go without this vaccine.

**Figure 4.90**  
**Percent of Adults Age 65+ who have NEVER had a Pneumonia Vaccine; % = Not Had**



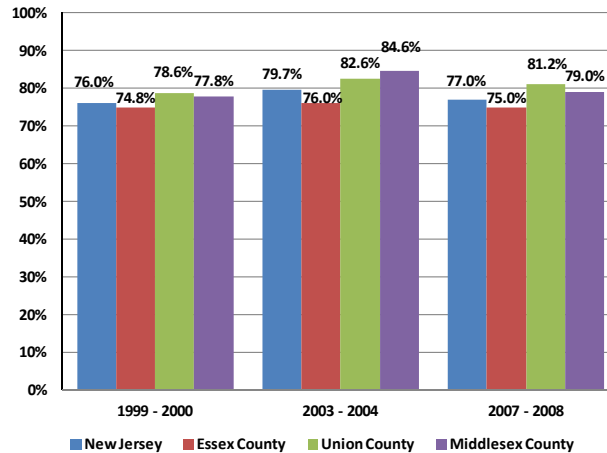
Source: CDC, Behavioral Risk Factor Surveillance System



Childhood Immunizations for Ages 19-35 Months (DPT, polio, MMR and Hib)

- The childhood immunization rate rose statewide and in Essex County.
- The rate in Essex rose only 0.2 percentage points from 74.8% to 75%.

**Figure 4.91**  
**Biennial Childhood Immunization for Age 19-35 Months for 4:3:1:3 Vaccination Series**



Source: CDC, Behavioral Risk Factor Surveillance System

**Figure 4.92**  
**Immunizations**

Indicator	Healthy People 2020 Target	County Health Rankings Benchmark	New Jersey
Percent of Adults Age 65+ Who Have NOT Had a Flu Shot in the Past Year	●	N/A	●
Percent of Adults Age 65+ Who Have NOT Ever Had a Pneumonia Vaccination.	●	N/A	●
Biennial Childhood Immunization for Ages 19-35 Months for 4:3:1:3 Vaccination Series	N/A	N/A	●

**5. Physical Environment**

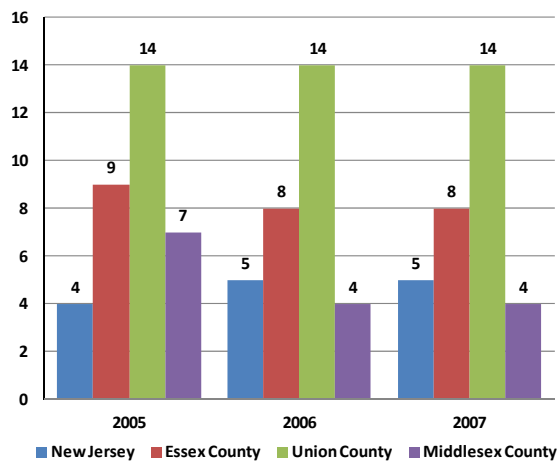
Humans interact with the environment constantly. These interactions affect quality of life, years of healthy life lived, and health disparities. The World Health Organization (WHO) defines environment, as it relates to health, as “all the physical, chemical, and biological factors external to a person, and all the related behaviors.” Environmental health consists of preventing or controlling disease, injury, and disability related to the interactions between people and their environment.

## Air Quality

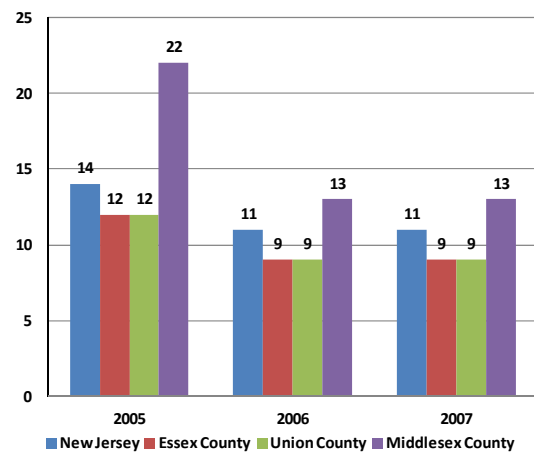
According to the CHR, the negative impact of air pollution on people’s health include: decreased lung function, chronic bronchitis, asthma, and other adverse pulmonary consequences. Exposure to excess levels of ozone or fine particulate matter are correlated with increased hospital emergency room visits and admissions among asthmatics or others with compromised respiratory function. Increases in these pollutants are associated with high risks of death due to cardiopulmonary and cardiovascular conditions and ischemic heart disease. All-cause mortality is also associated with higher concentrations of these pollutants.

- The number of unhealthy air quality days due to fine particulate matter declined by one day in Essex County between 2005 and 2007 compared to a one day increase in New Jersey.
- The number of unhealthy air quality days was significantly worse than the CHR benchmark.
- Essex County has also seen improvement in the annual number of unhealthy air due to ozone, a drop from 12 days to 9 days.
- This compares to a CHR benchmark of 0.

**Figure 4.93**  
**Annual Number of Unhealthy Air Days Due to Fine Particulate Matter**



**Figure 4.94**  
**Annual Number of Unhealthy Air Days Due to Ozone**



Source: County Health Rankings, PHASE project, a collaborative effort between the CDC and EPA

## Lead Hazards

Lead poisoning is a medical condition caused by increased levels of heavy metal lead in the body. Lead interferes with a variety of body processes and is toxic to many organs and tissue including heart, bones, intestines, kidneys, and reproductive and nervous systems. The main tool for the diagnosis is the measurement of blood lead levels or a urine test. The results of these tests indicate how much lead is circulating within the blood stream. The Centers for Disease Control (CDC) sets the standard for elevated blood lead levels for adults to 25 micrograms per deciliter (ug/dl) of whole blood, and 5 (ug/dl) of whole blood as of 2012 for children; down from the previous 10 ug/dl. Children are especially prone to the ill health effects of lead exposure. Scientists have found that lead in children can disrupt growth and development of a child's brain and central nervous system. The first 3-6 years of life is when the human brain grows the fastest and when critical connections in the brain that control thought, learning, hearing, movement, behavior and emotions are being formed.

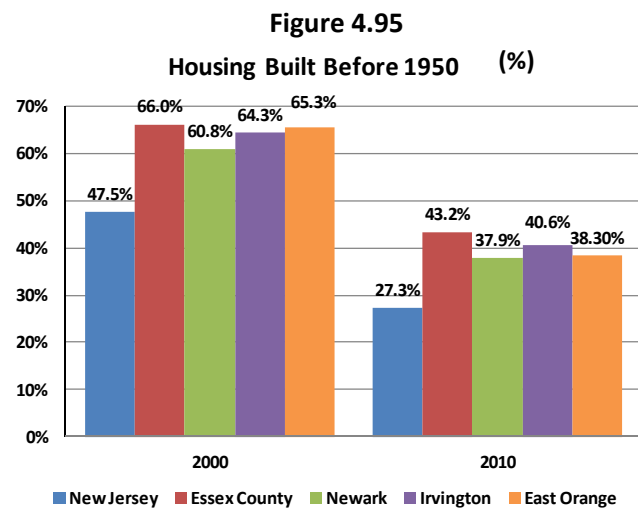
### Lead Exposure

The most common source of lead in New Jersey is paint that was used in interior or exterior surfaces of homes built before 1978. The most common form of exposure in adults occurs from occupational exposure. Young children can be exposed by:

- Swallowing leaded dust or soil that gets on their hands, or other objects, that they put into their mouths such as toys.
- Swallowing leaded paint chips.
- Breathing leaded dust or lead contaminated air.
- Eating food or drinking water that is contaminated with lead.

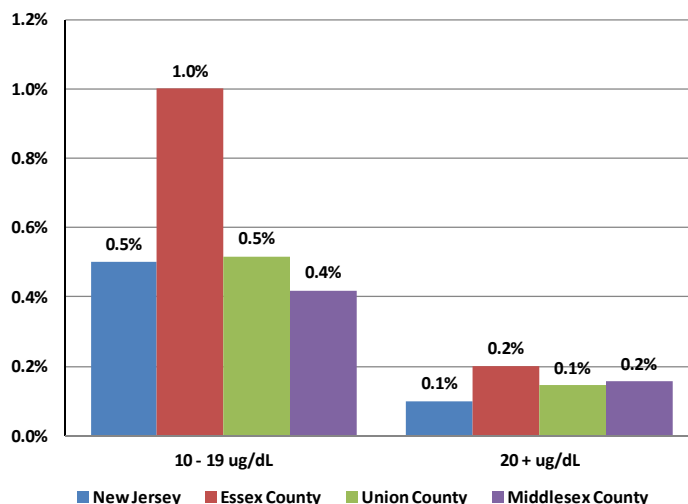
### Essex County

- Essex County and its major urban centers continue to have a significantly higher percentage of housing built before 1950 than exists statewide.
- Essex County children have significantly higher blood lead levels than found in children statewide.
- This was true for blood lead levels ranging from 10-19 ug/dl and for levels over 20 ug/dl.



Source: U.S. Census Bureau; County Health Rankings, United States Department of Agriculture (USDA), Food Environment Atlas  
Note: 2010 City-Wide data for Housing Built Before 1950 is representative of a 5 year estimate ranging from 2006 to 2010.

**Figure 4.96**  
**Blood Lead Levels of Children (less than 17 years) Tested for Lead Poisoning, 2010**



Source: NJ Department of Health and Senior Services, Division of Family Health Services, Maternal and Child Health Services, Child and Adolescent Health Program, Centers for Disease Control

Note: The CDC defines a blood lead level of 10 ug/dL as the threshold that should prompt public health actions.




**Figure 4.97**  
**Physical Environment**

Indicator	Healthy People 2020 Target	County Health Rankings Benchmark	New Jersey
Annual Number of Unhealthy Air Quality Days Due to Fine Particulate Matter	N/A	●	●
Annual Number of Unhealthy Air Days Due to Ozone	N/A	●	●
Blood Lead Levels of Children (less than 17 years) Tested for Lead Poisoning: 10-19 ug/DL	N/A	N/A	●
Blood Lead Levels of Children (less than 17 years) Tested for Lead Poisoning: 20+ ug/DL	N/A	N/A	●

#### Access to Healthy Foods

- In 2006, 1% of low income Essex County residents did not live close to a grocery store compared to 4% in New Jersey.
- In 2009, 53% of all restaurants in Essex County were fast food restaurants compared to 50% statewide; more than double the national benchmark.
- In 2006, Essex County had 25 liquor stores per 100,000 residents compared to 20/100,000 statewide.

**Figure 4.98**  
**Physical Environment**

Indicator	Healthy People 2020 Target	County Health Rankings Benchmark	New Jersey
<b>People Who Are Low Income and Do Not Live Close to a Grocery Store:</b> Percent of Total Population	N/A	N/A	
<b>Fast Food Establishments:</b> Percent of all Restaurants	N/A	N/A	
<b>Liquor Stores:</b> Rate per 100,000 Population	N/A	N/A	

**Crime and Injury Prevention**

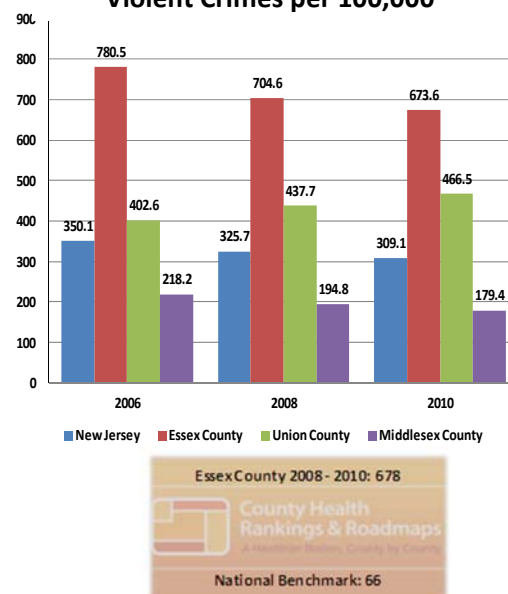
Healthy People 2020 asserts most events resulting in injury, disability, or death are predictable and preventable. For unintentional injuries, there is a need to better understand the trends, causes, and prevention strategies. Specifically:

- Individual behaviors—choices people make such as alcohol use or risk-taking.
- Physical environment—home and community that affect the rate of injury related to falls, fires and burns, drowning, violence.
- Social environment—individual social relationships, community, societal-level factors.<sup>47</sup>

Essex County

- Both the violent crimes rate and homicide rates have declined in Essex County but remain significantly higher than the statewide rate. The violent crime rate in Essex County is nine times higher than the CHR benchmark, while the homicide rate was nearly three times higher than the statewide rate.
- Burglary rates declined from 6.7/1,000 to 6.0/1,000 between 2006 and 2010.
- Domestic violence remained static statewide at 2.6/1,000 between 2006 and 2010, but increased from 2.0/1,000 to 2.2/1,000 in Essex County.

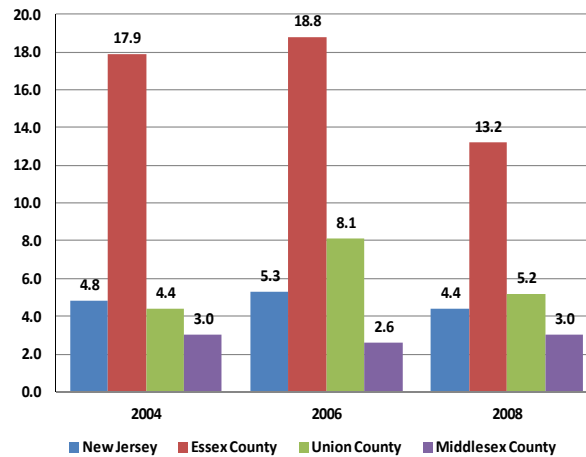
**Figure 4.99**  
**Violent Crimes per 100,000**



Source: N.J. Department of Law and Public Safety, Uniform Crime Reporting Unit; U.S. Census Bureau, American Community Survey

<sup>47</sup> Retrieved from <http://www.healthypeople.gov/2020/topicsobjectives/2020/overview.aspx?topicid=24>. Accessed 5/13/13.

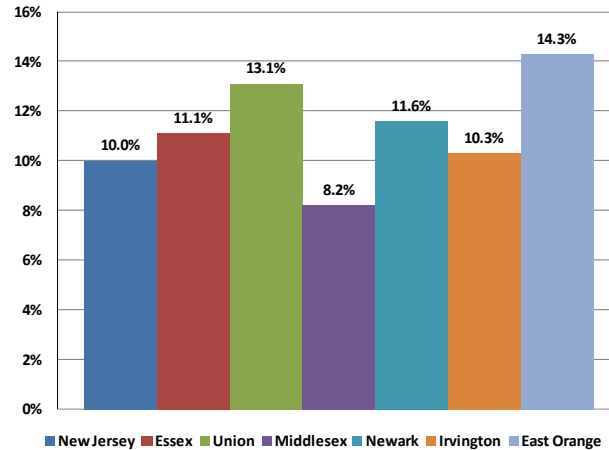
**Figure 4.100**  
**Homicides per 100,000**



Source: N.J. Department of Law and Public Safety, Uniform Crime Reporting Unit; U.S. Census Bureau, American Community Survey

- Reports of child abuse in Essex County’s major cities Newark, Irvington and East Orange were well above those seen in the county and statewide.
- The highest percent of substantiated child abuse reports occurred in East Orange.

**Figure 4.101**  
**Substantiated Child Abuse/Neglect Reports (%)**

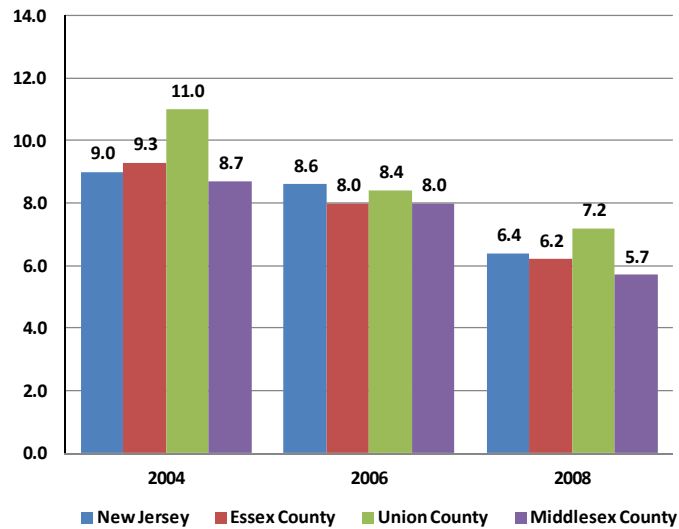


Source: N.J. Department of Children and Families, Child Abuse and Neglect Substantiations; U.S. Census Bureau, American Community Survey  
Note: Percentages are based on the total number of children with abuse/neglect reported.

### Injuries

- The Essex County motor vehicle crash rate (6.2/100,000) was lower than the *Healthy People 2020* target of 12.4/100,000.
- Essex County had an age-adjusted rate of 4.4/100,000 deaths due to falls, which was significantly better than the *Healthy People 2020* target of 7.0/100,000.
- Age-adjusted rates for poisoning in Essex County were also significantly better than the *Healthy People 2020* targets.

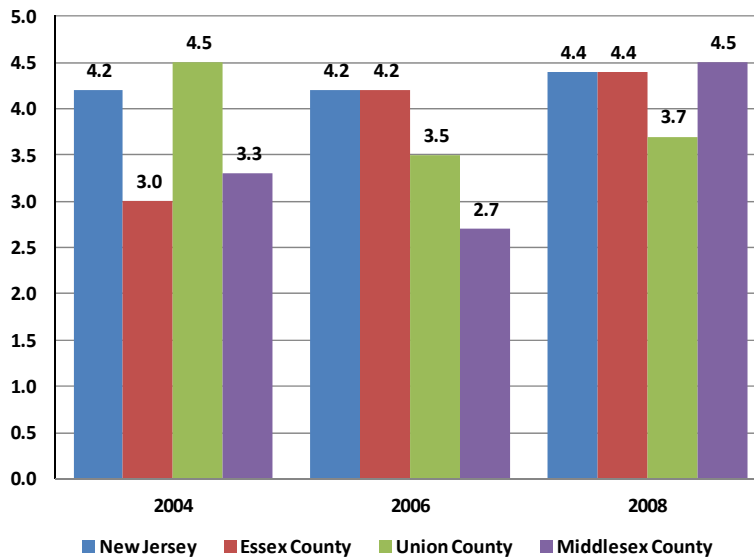
**Figure 4.102**  
**Motor Vehicle Crash Death Rate, per 100,000**



Source: NJ Department of Health and Senior Services, Center for Health Statistics, NJ State Health Assessment Data

Note: Rates are calculated per 100,000 population of the county and state and are age-adjusted to the 2000 U.S. standard million population.

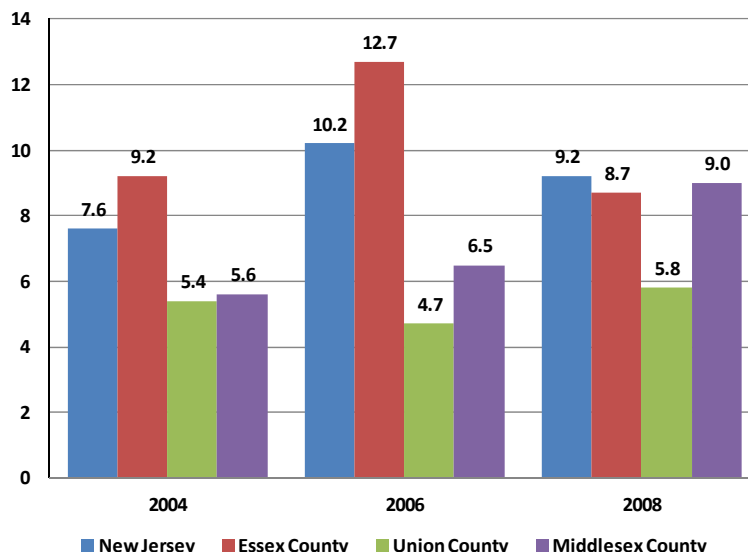
**Figure 4.103**  
**Deaths Due to Falls per 100,000**



Source: NJ Department of Health and Senior Services, Center for Health Statistics, NJ State Health Assessment Data

Note: The Healthy People 2020 goal is to, "prevent an increase in fall-related deaths." 2004 Essex Data not Statistically Significant due to too few cases.

**Figure 4.104**  
**Deaths Due to Poisoning per 100,000**



Source: NJ Department of Health and Senior Services, Center for Health Statistics, NJ State Health Assessment Data  
Note: The Healthy People 2010 goal is to, “prevent an increase in the rate of poisoning deaths.”

**Figure 4.105**

Indicator	Healthy People 2020 Target	County Health Rankings Benchmark	New Jersey
Deaths due to Motor Vehicle Crashes: Rate per 100,000 Population	●	●	●
Deaths due to Falls: Rate per 100,000 Population	●	N/A	●
Deaths due to Poisoning: Rate per 100,000 Population	●	N/A	●

## 6. Behavioral Health

Behavioral health (mental health and chemical dependency) is increasingly being linked to physical health indicators. Most Essex County behavioral health indicators are worse than found in New Jersey. It is expected that in the future behavioral health systems will be embedded in new structures such as accountable care organizations, integrated healthcare systems and preferred provider organizations.<sup>48</sup>

<sup>48</sup> Behavioral Health Specialty Services & Integrated Healthcare: Challenges & Opportunities. Presented by David Lloyd, Founder MTIN Services.



## Mental Health

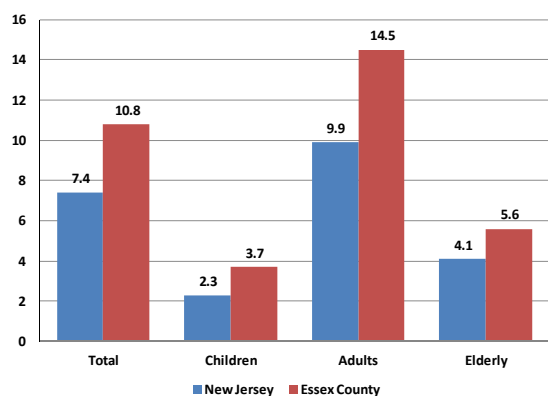
Mental health is a state of successful performance of mental function, resulting in productive activities, fulfilling relationships with other people, and the ability to adapt to change and to cope with challenges. Mental disorders are health conditions that are characterized by alterations in thinking, mood, and/or behavior that are associated with distress and/or impaired functioning. There is often a stigma associated with mental health diagnosis and treatment, particularly among African-Americans and Latinos.<sup>49</sup>

- Mental disorders are among the most common causes of disability.
  - According to the National Institute of Mental Health (NIMH), in any given year, an estimated 1 in 17 Americans have a seriously debilitating mental illness.
- Mental health disorders are the leading cause of disability in the United States and Canada, accounting for 25% of all years of life lost to disability and premature mortality.
  - Mental health plays a major role in people’s ability to maintain good physical health.
  - Problems with physical health, such as chronic diseases, can have a serious impact on mental health and decrease a person’s ability to participate in treatment and recovery.<sup>50</sup>

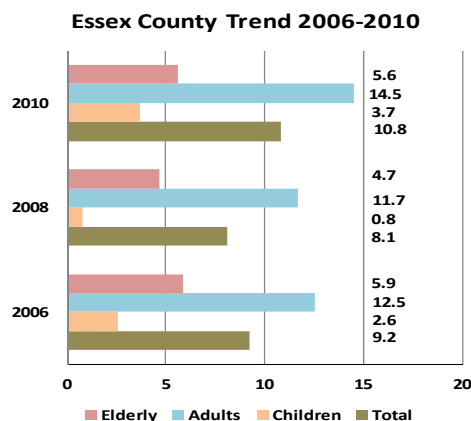
### Essex County

- Admission rates for mental/behavioral health conditions exceed the statewide rate and have been on the rise since 2006.
- Rates among all age groups except the elderly have increased.

**Figure 4.106**  
**Mental/Behavioral Health Admissions by Age per 1,000**



**Figure 4.107**  
**Mental/Behavioral Health Admissions Trends per 1,000**



\*Source: UB-04 2010 Discharges, Census 2010 Population

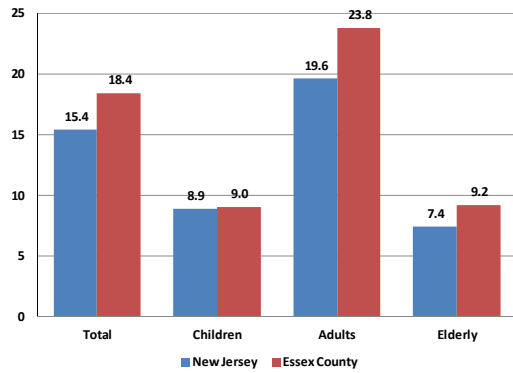
\*\* Metal Health Defined As MDC 19, Substance Abuse Defined

- ED visits due to mental/behavioral health conditions have also risen.
- The highest rate of ED visits occurs among adults.
- From 2006 to 2010, the rate of ED visits for behavioral health rose among all age groups.

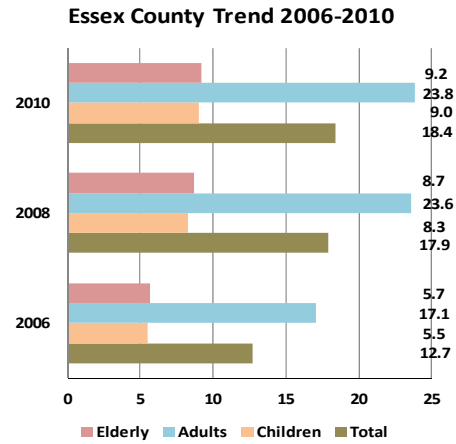
<sup>49</sup> Ibid.

<sup>50</sup> Ibid.

**Figure 4.108**  
**Mental/Behavioral Health**  
**ED Visits by Age per 1,000**



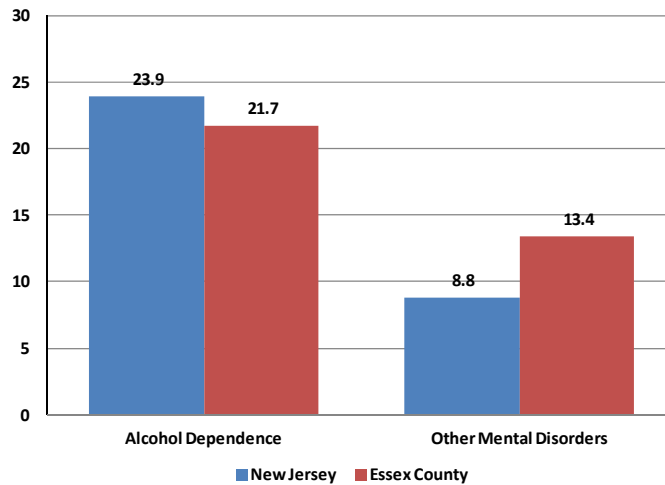
**Figure 4.109**  
**Mental/Behavioral Health**  
**ED Visits Trends per 1,000**



\*Source: UB-04 2010 Discharges, Census 2010 Population  
\*\* Metal Health Defined As MDC 19, Substance Abuse Defined As MDC 20

- Alcohol dependence resulted in a higher rate of adult ED visits than for other mental disorders.
- Between 2006 and 2010 the rate per 1,000 for ED visits among adults for mental disorders was relatively stable at 13.4-13.5/1,000.

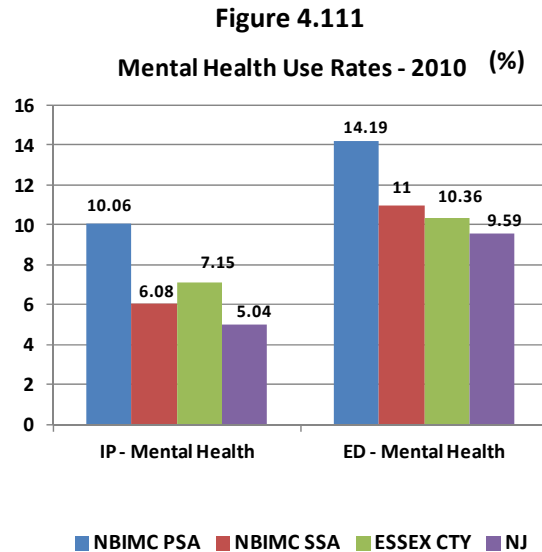
**Figure 4.110**  
**ED Visits by Adults (18 to 64 Years) for Primary Care Conditions, per 1,000 Population (2010)**



Source: New Jersey Discharge Data Collection System  
Note: Other mental disorders excludes drug or alcohol dependence and includes mental retardation. Alcohol dependence and other mental disorders represent two of the top ten ED visits for primary care conditions for adults.

## Mental Health Utilization in the Service Area

- Inpatient use rates for mental health in the PSA are nearly three points higher than the county rate and nearly double the statewide rate.
- ED use rates for mental health in the PSA are 3.8 points higher than the county and 4.6 points higher than the statewide rate.
- Inpatient use rates in the SSA are lower than the county but double the statewide rate.
- ED use rates for mental health in the SSA are slightly higher than the rates in the State and county.



\*Source: UB-04 2010 Discharges, Census 2010 Population

\*\*Mental Health Defined As MDC 19, Substance Abuse Defined As MDC 20

## Substance Use/Abuse

Substance abuse refers to a set of related conditions associated with the consumption of mind- and behavior-altering substances that have negative behavioral and health outcomes. Substance abuse has a major impact on individuals, families, and communities. The effects of substance abuse are cumulative, significantly contributing to costly social, physical, mental, and public health problems.

In 2005, an estimated 22 million Americans struggled with a drug or alcohol problem. Almost 95% of people with substance use problems are considered unaware of their problem.<sup>51</sup>

### Essex County

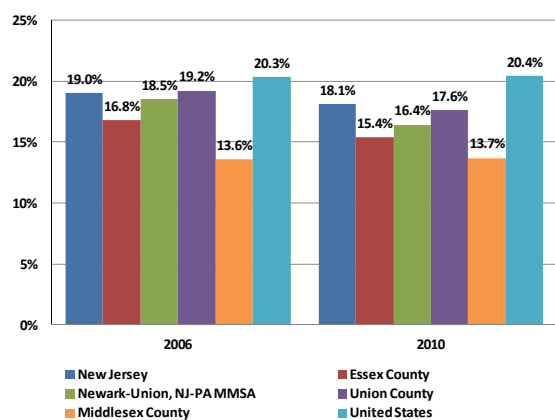
The percent of excessive drinkers combine the percent of people who are heavy drinkers together with binge drinkers.

- Between 2006 and 2010, reported excessive drinking in Essex County declined from 16.8% to 15.4%. This compared to the statewide percentage of excessive drinking of 18.1% and U.S. rate of 20.4%.

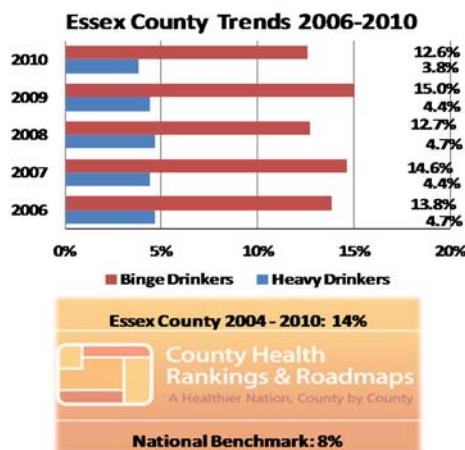
<sup>51</sup> Retrieved from <http://www.healthypeople.gov/2020/topicsobjectives2020.aspx?topicid=40>. Accessed 5/20/13.

- But, the Essex County rate was nearly double the National Benchmark of 8%.
- Alcohol treatment admissions increased from 16% of all drug treatment admissions to 22% of all drug treatment admissions.
- Despite the gain, the percent of alcohol treatment admissions were statistically lower than the statewide average.

**Figure 4.112**  
**Excessive Drinking by County and State (%)**



**Figure 4.113**  
**Excessive Drinking Trends (%)**

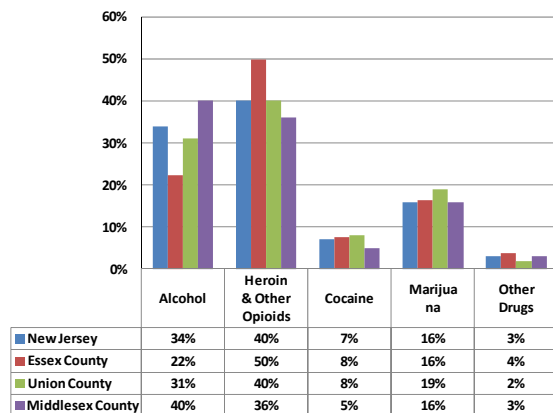


Source: CDC, Behavioral Risk Factor Surveillance System

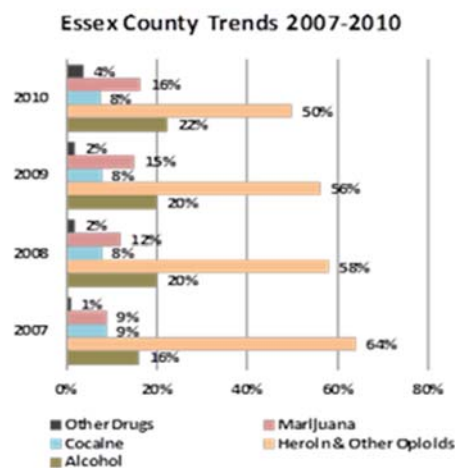
Note: Heavy drinkers are defined as adult men who have more than 2 drinks per day and adult women who have more than one drink per day. Binge drinkers are defined as adult men who have 5 or more drinks on one occasion and females who have 4 or more drinks on one occasion.

- In 2010, the most common drug being treated in Essex County was heroin and other opioids.
- Heroin, Cocaine and other drugs admissions in Essex County were significantly higher than statewide admissions.
- The overall rate of substance abuse admissions declined from 1,096/100,000 to 892/100,000 between 2007 and 2010, but remains significantly higher than the statewide rate.

**Figure 4.114**  
**Primary Drug Treatment Admissions (%)**



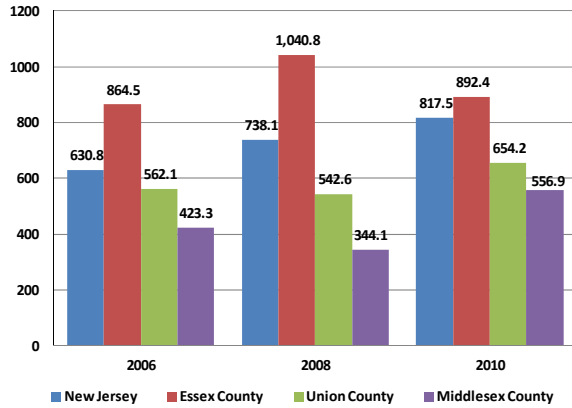
**Figure 4.115**  
**Primary Drug Treatment Admissions – Trends (%)**



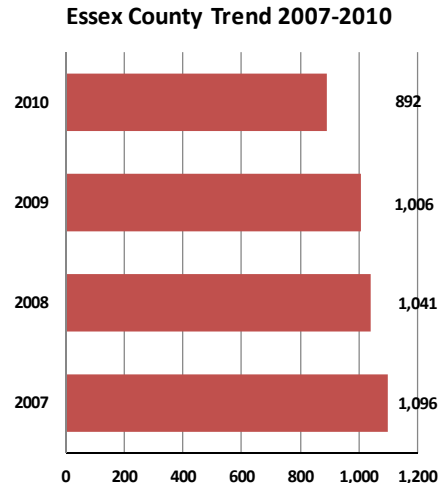
Source: N.J. Department Human Services, Division of Addiction Services, New Jersey Drug and Alcohol Abuse Treatment.

Note: The percentages are based on the total number of treatment admissions for all primary drugs.

**Figure 4.116**  
**Total Substance Abuse Admissions**  
**per 100,000**



**Figure 4.117**  
**Total Substance Abuse Admissions – Trends**  
**per 100,000**



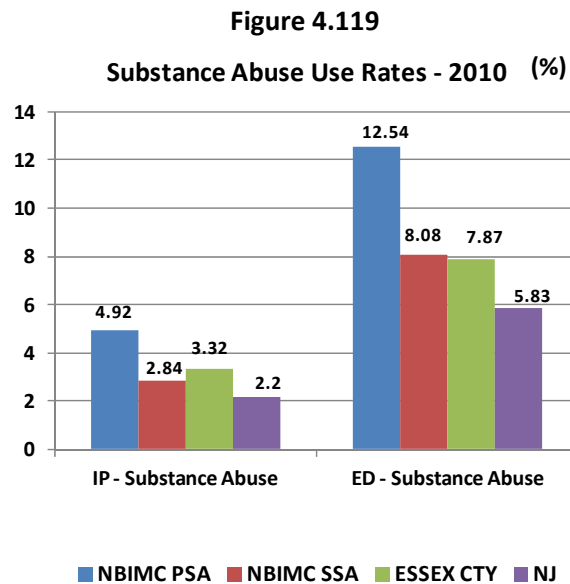
Source: N.J. Department Human Services, Division of Addiction Services, New Jersey Drug and Alcohol Abuse Treatment; U.S. Census Bureau, American Community Survey.

**Figure 4.118**  
**Substance Use/Abuse**

Indicator	Healthy People 2020 Target	County Health Rankings Benchmark	New Jersey
Excessive Drinking: Heavy Drinkers Plus Binge Drinkers	N/A		
Treatment Admissions for Alcohol: Percentage of Total Treatment Admissions	N/A	N/A	
Treatment Admissions for Heroin/Other Opioids: Percentage of Total Treatment Admissions	N/A	N/A	
Treatment Admissions for Cocaine: Percentage of Total Treatment Admissions	N/A	N/A	
Treatment Admissions for Marijuana: Percentage of Total Treatment Admissions	N/A	N/A	
Treatment Admissions for Other Drugs: Percentage of Total Treatment Admissions	N/A	N/A	
Total Substance Abuse Treatment Admissions: Rate per 100,000 Population	N/A	N/A	

### ED Substance Abuse In the Service Area

- Inpatient use rates for substance abuse in the PSA are 1.6 points higher than the county and more than double the statewide rate.
- ED use rates for substance abuse in the PSA are 4.7 points higher than the county and 6.7 points higher than the State.
- ED use rates for substance abuse in the SSA are slightly lower than the county but higher than the statewide rate.
- Ed substance abuse rates in the PSA are slightly higher than the county rate and 2.3 points higher than the statewide rate.



*\*Source: UB-04 2010 Discharges, Census 2010 Population*

*\*\* Mental Health Defined As MDC 19, Substance Abuse Defined As MDC 20*

## 5. **ASSETS AND GAPS ANALYSIS**

Assets and gaps in Essex County are discussed below in terms of health outcomes and health factors which influence these outcomes. The review of assets and gaps integrates results of this CHNA for each topic and includes information gathered through data analysis, resource inventories, and meetings with key county leaders.

### **Premature Deaths, Leading Causes of Death and Behavioral Health-Related Deaths**

#### Assets

- Essex County's suicide rate, 3.3/100,000, is significantly lower than the *Healthy People 2020* target (10.2/100,000) and significantly better than the statewide rate (6.4/100,000).

#### Gaps

- Age-adjusted Heart Disease mortality rate in Essex County (206.4/100,000) is higher than the *Healthy People 2020* target (108.8/100,000).
- The age-adjusted rates for cancer deaths in Essex County (183.6/100,000) is above the *Healthy People 2020* target (160.6/100,000).
  - Cancer mortality rates among blacks in Essex County were significantly higher than the rate county wide.
- Mortality rates for Septicemia (31.1/100,000) and diabetes (29.5/100,000) were significantly higher in Essex County than statewide (18.3/100,000 and 23.1/100,000, respectively).
  - Blacks had significantly higher mortality rates for septicemia and diabetes than residents county-wide.
- Essex County residents had a higher rate of premature deaths than residents statewide and far worse than the county health ranking (CHR) national benchmark.

### **Infant Mortality and Low Birth Weight Babies**

#### Gaps

- Infant mortality rates in Essex County (8.5/1,000 live births) are higher than the State (5.3/1,000 live births).
- The rates of low birth weight (10%) and very low birth weight (2%) infants are higher than the *Healthy People 2020* target (7.8% and 1.4%, respectively) and the State averages (8.1% and 1.5%, respectively).
  - The rates for both indicators are higher among blacks than all County residents.

### **General and Mental Health Status**

#### Assets

- The percent of Essex County residents reporting their health as fair or poor declined between 2006 and 2010.

### Gaps

- Essex County residents reported an average of 3.3 physically unhealthy days in the last month, which was significantly higher than the National Benchmark of 2.6 days.
- Essex County residents report more mentally unhealthy days in the past 30 days (3.6) than the CHR benchmark (2.3).
- Symposium members expressed concern for the lack of social services in Newark and the need for additional services to address health and mental health needs of seniors.

### **Morbidity**

#### Assets

- A significantly lower percentage of Essex County residents report being told they have arthritis than residents statewide.
- The overall age-adjusted cancer incidence rate per 100,000 population in Essex County (427.2/100,000) was significantly lower in 2010 than that of residents statewide (487.2/100,000).
  - Cancer incidence rates for both breast and melanoma were significantly lower among Essex County residents compared to those statewide.

#### Gaps

- In 2010, 3.4% of county residents, compared to 3.9% of statewide residents, reported having angina or coronary heart disease, but 8% of Newark residents reported having angina or coronary heart disease in 2009.
- Between 2005 and 2009, the percentage of Essex County residents who were told their cholesterol levels were high rose from 30.6% to 36.7%.
  - The percentage of people reporting high cholesterol in Essex County is nearly three times higher than the *Healthy People 2020* target of 13.5%.
- While Essex County saw an increase in the percent of people reporting heart attacks, from 2.7% to 3.1%, the rate was not statistically different from the rate statewide of 3.8% (2010). The rate among Newark residents in 2009 was nearly double (6%).
- Asthma rates have been rising in both the State and the county. In 2010, 8.3% of adults reported asthma. By 2009, 16% of Newark residents reported having asthma.
- Diabetes is also on the rise in Essex County. In 2006, 7.8% of residents reported diabetes. In 2010, this number increased to 10.2%. By 2009, 17% of Newark residents reported having diabetes.

### **Socio-demographic and Economic Factors**

#### Gaps

- NBIMC's PSA is made up of largely minority populations (94.5%). Disparities in healthcare access, utilization and illness burden have been associated with communities having a higher minority racial and ethnic mix.
- Unemployment rates in Essex County (10.8%) and its major cities, in 2011, were significantly higher than the State (9.3%). The unemployment rate in Newark was 15.2%.
- Per capita and median family income for Essex County residents (\$29,674 and \$52,394, respectively) remain significantly below the incomes of residents statewide (\$33,555 and \$67,681, respectively).
- The median household income of residents of NBIMC's PSA was \$34,969.
- Poverty rates for people, families, children and seniors in Essex County are all significantly higher than the statewide rates.



- The percentage of Newark families receiving various types of public assistance is two times the national average and three times that of New Jersey.
- Poverty rates among Newark residents were the highest in the county for people (23.9%), families (21.2%), and children (33.4%).
  - Studies show that socioeconomic status (SES) more than race and ethnicity predicts the likelihood of access to education, health insurance, and safe and healthy living/working environments.
  - Rate of health screenings are also lower among those with lower SES.
  - SES also plays a role in behavioral health risk factors like tobacco smoking, physical inactivity, obesity and excessive alcohol use.
- Education and Health Literacy
  - 16.5% of Essex County Residents did not complete high school.
  - The cities of East Orange, Irvington, and Newark report failure to complete high school at levels that are 1.5 to two times the county level.
  - 15% of Essex County and 25% of Newark's population have limited English Proficiency.
- Public Health Officers noted that employment, education and social service gaps impact the health of our communities.

## Access to Care

### Assets

- Essex County residents have a significantly higher rate of total physicians (305.2/100,000 population) than the State (252.9/100,000).

### Gaps

- A significantly higher percentage of Essex County residents lack any kind of coverage when compared to the State.
- Essex County has significantly fewer primary care physicians (99.7/100,000) than the national benchmark (158.5/100,000).
- Essex County ranks third statewide in ED utilization (408.9/1,000).
- In NBIMC's PSA, the ED utilization rate (591.0/1,000) exceeds the county rate.
- Ambulatory Care Sensitive Conditions (ACSC) visits to the ED among children and adults significantly higher than statewide.
  - Top 5 ACSC ED visit rates among children occurred for the following: ENT<sup>52</sup>, asthma, GI obstruction, cellulites, and bacterial pneumonia.
  - Top 5 ACSC conditions among adults ENT, asthma\*, cellulites, kidney/UTI, dental conditions visiting the ED.
- In NBIMC's PSA, the ED ACSC rate is 122.7/1,000 for adults and 158.5/1,000 for children, and exceeds the respective rates for adults and children county-wide.
- ED visits by adults for primary care conditions in Essex County (178.1/1,000) in 2010 were significantly higher than those for adults statewide (136.9/1,000) and have been since 2006.
- Attendees at the GNHCC Public Health Officers Meeting raised concerns about the county-wide transportation system and its impact on access to medical facilities and providers.
  - Public transportation was as an issue for East Orange residents who need to travel to Newark to access obstetrics and pediatric services.

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\*Statistically significant.

- Primary care access, especially in urban areas, was of concern to attendees who fear this problem will only be exacerbated once provisions of ACA are enacted, and coverage is expanded.
- Public Health Symposium attendees also mentioned the closure of hospitals in the county and concern that only with improvement in health prevention and outreach efforts would there be a reduced need for inpatient care for patients with chronic diseases.
- The high cost of physician practice in New Jersey, including high malpractice costs, was seen to some as a barrier to recruitment of additional primary and specialty care physicians.
- Symposium attendees also mentioned the need for all stakeholders to communicate regarding the needs of the “frequent flyers” so that these needs could be more effectively coordinated in the community rather than in the hospital.
- Symposium members also spoke of the need for all organizations to address cultural and language barriers as they relate to the development of effective interventions.

### **Clinical Care Measures**

#### Assets

- Primary C-Section rates in Essex County (13.2%) are significantly better than the *Healthy People 2020* target (23.9%).
- Overall C-Section rates for Essex County (44.5%) were slightly lower than the county (45.7%).

#### Gaps

- Thirty day readmission rates are higher than statewide for heart failure, heart attack, pneumonia and COPD. Between 2006 and 2010, only COPD saw a consistent decline.
- Attendees of the GNHCC Symposium raised concerns that hospital reimbursement reductions for hospital readmissions could result in increased access issues for patients. Therefore, providers must continue to address these issues.

### **Health Behaviors – Screenings and Vaccinations**

#### Assets

- Health Officers believe that there is more demand for, as well as more access to, flu shots for all residents than previously.

#### Gaps

- The percentage of Essex County women who had a pap test during the last three years (81.3% in 2010) declined between 2004 and 2010, and was significantly lower than the *Healthy People 2020* target of 93%.
- The percentage of adults 65+ who did not have a flu shot in the last year (37.5%) was significantly higher than the *Healthy People 2020* target of 10%.
- The percentage of seniors who never had a pneumonia shot increased by 4 points between 2006 and 2010, and was significantly worse than the *Healthy People 2020* target of 10%.

### **Maternal/Child Health and High Risk Sexual Behaviors**

#### Assets

- Births to Essex County teens 15-17 (21/1,000) were significantly better than the *Healthy People 2020* target of 36.2/1,000.

### Gaps

- The percent of Essex County women receiving 1<sup>st</sup> trimester care is 8.6% points below *Healthy People 2020* target of 77.9%.
- The percent of women receiving no prenatal care (2.1%) is significantly higher than the statewide rate (0.9%).
- Essex County teen births 15-19 (39/1,000 female population) are nearly double the CHR benchmark.
- In NBIMC's PSA, the birth rate for teens 15-19 (44.8/1,000) is more than double the county rate (19.5/1,000).
- The rates for Chlamydia, gonorrhea, and syphilis are all significantly worse than the statewide rate.
  - The Chlamydia rate in Essex County (681.1/100,000) is eight times worse than the National Benchmark.
- Symposium members were concerned with the lack of funding for HPV vaccines at STD clinics, which, were it available, could reduce cancer and STD rates.
- Essex County HIV prevalence in 2010 (1,253.0/100,000) was significantly higher than the statewide rate (409.8/100,000).
- The rate of new HIV/AIDS cases in Essex County (30.4/100,000) is significantly higher than the statewide rate (15.4/100,000).

### **Health Behaviors – Tobacco, Alcohol and Drug Use**

#### Assets

- The admission rate for alcohol in Essex County (22%) is statistically lower than the statewide average (34%).
- Essex County has a lower rate of ED visits among adults for alcohol dependence (21.7/1,000) compared to the statewide rate (23.9/1,000).

#### Gaps

- Tobacco use is 2.8% points higher than *Healthy People 2020* target of 12%.
- The need for a greater emphasis on smoking cessation was another need mentioned at the Symposium.
- The reported level of excessive drinking (6.0%) is higher CHR benchmark of 8.0%.
- Admission rates for heroin/other opioids, cocaine, and other drugs are significantly higher than statewide rates.
- Inpatient substance abuse use rates in the PSA (4.9/1,000) are more than double the rates statewide and are higher than the rate county-wide. A similar situation occurs with regard to ED visit rates (12.5/1,000) in the PSA compared to statewide (5.8/1,000).

### **Health Behaviors – Diet and Exercise**

#### Assets

- Essex County has a significantly higher percentage of total residents (14.7%) and children (30.4%) receiving SNAP benefits than the State (9.1% and 18.5%, respectively).

#### Gaps

- The percent of Essex County adults engaging in adequate physical exercise (43.1%) declined between 2005 and 2009, and was significantly below the *Healthy People 2020* Benchmark of 47.9%.

- Essex County adults reporting any physical activity in the last month (72%) is 7% points below the benchmark.
- Concerns were raised by public health leaders about the sedentary lifestyles of children and the need to enhance “move more” campaigns and provide safe environments for children to enjoy outside activities.

## Physical Environment

### Assets

- Access to healthy foods – A lower percentage of low income Essex County residents (1%) do not live close to a grocery store compared to 4% of residents statewide.

### Gaps

- Air Quality
  - Number of unhealthy air quality days for fine particulate matter and ozone is significantly higher than CHR benchmark.
- Lead Paint Hazard
  - An aging infrastructure poses a lead-based paint hazard.
  - The percentage of Essex County children with high and very high blood lead levels was significantly higher than statewide.
- Ready access to Fast Food and liquor – limited access to Recreation.
  - 53% of all restaurants fast food compared to a benchmark of 25%.
  - High concentration of liquor stores.
  - Fewer recreational facilities than statewide.

## Violence and Injury Prevention

### Assets

- The 2008 motor vehicle crash death rate among Essex County residents (6.2/100,000) was lower than the *Healthy People 2020* target of 12.4/100,000.
- The 2008 rate of deaths due to falls (4.4/100,000) was significantly lower than the *Healthy People 2020* target (7.0/100,000).
- The 2008 age-adjusted death rate due to poisoning was lower at 8.7/100,000 than the *Healthy People 2020* target of 131.1/100,000.

### Gaps

- Safety is a major concern; the violent crime rate is two times the State rate and ten times the National Benchmark.
- The homicide rate is three times the state rate.

## Behavioral Health

### Gaps

- Essex County hospital admissions for mental health conditions (10.8/1,000) was higher than the State (7.4/1,000), and between 2006 and 2010 the rate has risen among all age groups.
- Essex County ED visit rate for mental disorders was higher than the State; 8.8/1,000 compared to 13.4/1,000.

- Inpatient use rate for mental health conditions in the PSA exceeded that of the State and county. This was also true for ED visits for mental health.
- Attendees of the Health Symposium spoke of the need to bring behavioral health back into the primary care realm and the corresponding need to bring primary care back into the behavioral health realm.

**APPENDIX A**  
**SECONDARY DATA SOURCES**

<b>Source</b>
Bureau of Labor Statistics (BLS), Local Area Unemployment Statistics (LAUS)
CDC BRFSS & Youth BRFSS
CDC's National Center for Hepatitis, HIV, STD, and TB Prevention
Claritas
Corporation for Supportive Housing
County Business Patterns
County Health Rankings
FBI/Interuniversity Consortium for Political and Social Research (ICPSR) National Archive of Criminal Justice Data
Health Resources and Services Administration's Area Resource File
Healthy People 2020
Medicare/Dartmouth Atlas of Health Care
National Center for Chronic Disease Prevention and Health Promotion/CDC/BRFSS (CHR)
National Center for Educational Statistics/ACS (CHR)
National Center for Health Statistics
National Vital Statistics System (NVSS), National Center for Health Statistics
NCHS Ambulatory Care Survey
New Jersey Cancer Registry
New Jersey Department of Banking and Insurance; New Jersey Hospital Association, Payer Information Resource System
New Jersey Department of Children and Families, Child Abuse and Neglect Substantiations
New Jersey Department of Health and Human Services
New Jersey Department Human Services, Division of Addiction Services, New Jersey Drug and Alcohol Abuse Treatment
New Jersey Department of Health and Senior Services, Center for Health Statistics
New Jersey Department of Health and Senior Services, County Health Profiles
New Jersey Department of Health and Senior Services, Division of Family Health Services
New Jersey Department of Labor
New Jersey Discharge Data Collection System
PHASE project, a collaborative effort between the CDC and EPA, County Health Rankings
Small Area Health Insurance Estimates/ACS/CPS ASEC
Small Area Income and Poverty Estimates (SAIPE)
UB – 04 Hospital and Emergency Room Discharge Data – Multiple Years (NSI)
U.S. Census Bureau
USDA Food Environment Atlas
USDA Food Environment Atlas/County Business Patterns
U.S Department of Health and Human Services

## APPENDIX B STATISTICAL SIGNIFICANCE FROM DATA SOURCES

- A. In cases where the data source provided error ranges or confidence intervals for both county and state (New Jersey) level data, sets of intervals for counties were compared to those of the state. If the sets of intervals overlapped, the comparison was determined to be not significant. If they did not overlap at all, the comparison was determined to be significant.
- B. In cases where the data source provided error ranges or confidence intervals for county level data but not state (New Jersey) level data, the intervals for counties were compared to the state data point. If the state data point fell inside the county confidence interval, it was determined to be not significant. If the state data point fell outside the county confidence interval, it was determined to be significant. This method of determining significance assumes that state data points are true values.
- C. In cases where the data source provided error ranges or confidence intervals for county level data, and the county level data was to be compared to a national benchmark or target (*Healthy People 2020* target, County Health Rankings National Benchmark,) the intervals for the counties were compared to the national benchmark/target data point. If the benchmark/target data point fell inside the county confidence interval, it was determined to be not significant. If the benchmark/target data point fell outside the county confidence interval, it was determined to be significant.
- D. In cases where the data source did not provide error ranges or confidence intervals, poisson or binomial tests were done for count data, and Z test for proportion data, using sample sizes.
- E. In cases where the data source did not provide error ranges/confidence intervals or sample sizes, all New Jersey counties were ranked. Counties falling in the highest or lowest quarter percentile were determined to be significant.

**APPENDIX C**  
**GREATER NEWARK HEALTHCARE COALITION PUBLIC HEALTH SYMPOSIUM**

<b>Attendees GNHCC Public Health Symposium</b>		
<b>Attendees</b>	<b>Title</b>	<b>Affiliation</b>
Andrew Crighton, MD	Chief Medical Officer	Prudential/GNHCC Trustee
Bill Wallace	Health Officer	West Caldwell
Ceu Cirne Neves	VP, Physician & Patient Services	Saint Barnabas Medical Center
Colette Lamothe-Galette	Policy & Strategic Planning	New Jersey Department of Health
Colleen Nelson	Supervisor to Director of Child/Family Health Programs	VNA Health Group
Daniel Boyd	Director of Ambulatory Services	Saint Michael's Medical Center
Diane Coluzzi	VP, Outcomes Management	Clara Maass Medical Center
Fran Monteleone	Director, Physician Services	Clara Maass Medical Center
India Larier	Board of Health Chair & Township Committeeperson	Maplewood
Jeremiah Murillo, MD	Patient Safety Officer	Newark Beth Israel Medical Center/GNHCC Board Trustee
John Brennan, MD, MPH	President & CEO	Newark Beth Israel Medical Center/GNHCC Board Chair
John Jacobi, Esq.	Professor of Law	Seton Hall Law/GNHCC Vice Chair
Kathy McConnell	VP, Affiliate Operations	VNA Health Group
L'Tanya Williamson	Director	Dept. Child & Family Well being GNHCC Trustee (ex-officio)
Lionel Lima	VP, Surgical Services	Saint Michael's Medical Center
Lou LaSalle	VP, Community Relations	Saint Barnabas Medical Center/Barnabas Health
Maria Vizcarrondo	CEO	Health-e-cITI-NJ/GNHCC Trustee
Marsha McGowan	Health Officer	Newark/GNHCC Trustee
Michael Annee Kyle	Project Director	Greater Newark Health Care Coalition
Michael Festa, Ph.D.	Health Officer	Essex County
Michael Hodges	Health Educator	Bloomfield
Michellene Davis	SVP, Governmental Affairs and Policy	Barnabas Health
Nancy Erickson	Principal	New Solutions, Inc.
Neveen Elkholy, DO	Chief Medical Officer	Newark Community Health Centers
Susan Walsh, MD	ACO Medical Director	Jersey City Medical Center/GNHCC Trustee
Suzette Robinson	VP, External Affairs	East Orange General Hospital
Tamara Cunningham	VP, System Development/Planning	Barnabas Health/GNHCC Trustee
Tom Ortiz, MD	Family Physician	Forest Hill Family Health Associates/GNHCC Trustee
Tracy Munford	VP, Public Relations & Community Affairs	Newark Beth Israel Medical Center
Vaidehl Dave	Epidemiologist	Essex Regional Health Commission
Vincent Matthews	Associate Counsel, Policy	Barnabas Health
Bob Roe	Health Officer	Maplewood
Rochelle Evans	Health Officer	East Orange
Karen LaRussa	Community Health Educator, Public Health	East Orange
George Wallace	MD	University Hospital



Following a presentation of key health indicators, participants were asked if there were any health issues or factors that were absent from the presentation that should be considered.

Their responses were as follows:

- The county is very diverse and Newark's statistics dominate.
- More city specific data and statistics would better portray the differences – raw data may be available from local health officers.
- Information on the number of available hospital beds and physicians by specialty/per population would be useful – there is a shortage in areas.
- 4 hospitals have closed since 2008 - need may be increased.
- HPV data was not reported.
- More information/discussion on shortage of beds/physicians by specialty.
- Last Census did include undocumented population (specific campaign in city of Newark to capture this population).
- There is a shortage of OB/Gyns and Pediatricians in East Orange – they are migrating out of the county after graduation due to the economy and practice costs – How do we retain physicians in the area?
- Would be interesting to see how care is shifting to mid-level providers.
- Access Issues: transportation, hours of operation.
- There is a need for improved dialogue between health officers and providers/facilities to respond to need for specialists (OB, etc...).
- FQHC issues re: recruitment – physicians choose to leave the state because it is cheaper to practice elsewhere – Ability to offer loan repayment as an incentive has diminished our ability to retain these physicians.
- Access/Affordable Care Act: For Newark Public Health Officers, the goal is to obtain an insurance card for all Newark residents – If this is achieved where will all the residents go for care if there is a provider shortage?
- Maternity Services in East Orange: Patients in health center are referred for care outside the city of East Orange – so transportation for this population is a concern.
- Re-Admissions: We have fewer beds available than 10 years ago – if patients are re-admitted and hospital reimbursement continues to decline, the patient will have more limited access for chronic care on an inpatient basis (*in an effort to address this providers are collaborating to treat chronic care before an inpatient stay would be required*).
- Access: If you focus on preventative care you may begin to see a change or reduced need for inpatient care for chronic disease.
- OBs: It is a statewide issue – the legislature has worked to try to address this. At the State and Federal level – is there enough dialogue so legislators truly understand the issue/need? There is a disconnect on this issue and for other issues (such as transportation) where those on the ground could provide additional insight to those forming policy.
- Prevention: if we focus on this we will be able to prevent diseases for those conditions where Essex County underperforms state.
- On the Commercial Insurance side: there are wait times and access issues that some carriers experience.
- Data is very similar to what it has been for last 3 decades. To address these issues we must have a paradigm shift in the care model. The ACA act works to address the shortcomings of the

current economic model and focuses on preventative care as a means to address cost and access.

- We need to bring Behavioral health back into the primary care realm – and we need primary care brought back into the behavioral health realm.
- Outreach: Many issues are due to a lack or issue with outreach re: screenings, etc...
- We might want/need to embrace economic enterprise zones to address health care costs.
- Essex County has a large middle and upper class population. If we normalize the health care delivery system across a diverse socio-economic population then healthcare becomes concentrated on need across that population – such that everyone is afforded the same quality of care according to their need.

Public health officers were also asked how the presentation compared or contrasted with their own data or experience given the diverse nature of Essex County's municipalities.

Their responses were as follows:

- Increase in flu activity – not just seniors want flu shots now. Everyone wants them. There are more people providing shots. Recently – pediatricians were not quick to buy additional vaccine during the recent flu outbreak...may have been an economics driven decision.
- HPV: we have STD clinics – the vaccine may be expensive – if we provide funding for the vaccine we can reduce cancer rates and STDs.
- West Caldwell/ Fairfield/Caldwell: there was a low response to FLU clinics in these areas – the response to these clinics varies by where the clinics are offered. Pharmacies are providing many of these services in these areas.
- Diabetes: largest problem in West Caldwell/ Fairfield/Caldwell. Sees issues with sedentary lifestyles among children. Working to address these with “move more” campaigns.
- Chlamydia: Are increased rates due to more people seeking treatment or is it due to an actual increase in the rates?
- Newark: works to provide the same care to inner-city residents as you would receive in suburban towns. There is an awareness that there is a primary care shortage – Mobile primary care being phased out...it is not how people want to receive care.
- People should have the ability to see their doctor in a safe environment
- Newark Public Health Officer: focus is on prevention and education...working in the community to address smoking, diabetes, hand washing, etc...looking at ACA to determine if additional funds may be available to augment and improve these prevention efforts.
- Smoking reduction needs to have a stronger focus (NJDOH concern).
- Providers are partners...hospital-run outreach efforts are conducted in conjunction with Public Health Officers...providers want feedback on how Public Health programs can be supported.
- Employment, education, social service gaps impact the health of our communities. (Social service gap due to number of people and funds available to provide education, guidance, social supports and coordination.)
- Social Service and care coordination should be an important focus (LAMP Program).
- Bloomfield/Caldwell: Working to fill in gaps in social service support programs that address root cause of chronic health issues (asthma). Filling these gaps improves overall health. Major concern is obesity among children and seniors. Reasons for obesity are different in Newark and Caldwell....safe environment vs. sedentary lifestyle?
- For children – if it is easier and safer to go outside – they will. Increased activity is as important as nutrition education and may help overcome some of the high fat and sugar content of diets.

- PALs? Not active in communities to ensure safety of environment for activity.
- Elderly: Sorely lacking social services (Newark). Increased services address health and mental health issues for elderly.
- Public Health Officers: Focus can tend to be on environmental issues/concerns. Not able to fund behavioral health factors. Funding varies by geography and size of population served by a given health department. Funding is driven by local allocations of funding.
- Funding: Pilots often are great starts – but when funding diminishes the focus on the success of that pilot evaporates. We need to speak about insurance carriers and other payers and how the funding they provide to the healthcare system is allocated. Movement to change how payers look at what market needs as a means to address these issues – A Healthcare Financial Summit.

### **Prioritizing Needs**

Prior to the meeting, health officers were asked to submit a list of major health issues and concerns. This list was supplemented with issues that were developed from the health indicator analysis and discussion. Attendees were asked to rank the health issues on a scale of 1-5 based on significance (with 1 being low significance and 5 being highest significance). Attendees were provided a ballot and asked to rank each issue. Voting on the top priorities resulted in the following issues being identified.

1. Mental Health
2. Diabetes
3. Lack of Primary Care Access
4. Heart Disease
5. Overweight/Obesity
6. Health Care Access/Inadequate Health Insurance
7. Cancer
8. Hypertension
9. Lack of Exercise
10. Substance Abuse (tied with #9)

### **OVERALL WEIGHTED AVERAGE**

#### **Health Priority Ranking**

11. Lack of Primary Care Access
12. Heart Disease
13. Mental Health
14. Diabetes
15. Health Care Access/Inadequate Health Insurance
16. Overweight/Obesity
17. Lack of Exercise
18. Hypertension
19. Cancer
20. Violent Crime

**Public Health Officers' Ranking**

11. Diabetes
12. Overweight/Obesity (tied with #1)
13. Heart Disease
14. Mental Health
15. Lack of Exercise (tied with #4)
16. Hypertension
17. Asthma/Bronchitis (tied with #6)
18. Substance Abuse
19. Communicable Diseases (tied with #8)
20. Vaccine Preventable Diseases (tied with #8)

**Clinical Providers' Ranking**

11. Lack of Primary Care
12. Mental Health
13. Diabetes
14. Health Care Access/Inadequate Health Insurance (tied with #3)
15. Heart Disease
16. Overweight/Obesity
17. Pre-natal Care (tied #6)
18. Hypertension
19. Lack of Exercise
20. Infant Mortality

**Community-based Organizations' Ranking**

1. Diabetes
2. Lack of Primary Care Access
3. Heart Disease
4. Mental Health (tied with #3)
5. Overweight/Obesity
6. Health Care Access/Inadequate Insurance (tied #5)
7. Infant Mortality (tied with #5)
8. Violent Crime
9. Lack of Exercise
10. Hypertension (tied with #9)

**Other Affiliations' Ranking**

1. Lack of Primary Care Access
2. Health Care Access/Inadequate Insurance
3. Mental Health
4. Overweight/Obesity
5. Heart Disease
6. Diabetes

7. Substance Abuse (tied with #6)
8. HIV/AIDS (tied with #6)
9. Violent Crime
10. Pre-natal Care
11. Poor Nutrition (tied with #10)
12. Communicable Diseases (tied with #10)
13. Vaccine Preventable Diseases (tied with #10)
14. Lack of Preventive Screenings (tied with #10)

Following discussion, the group voted to accept the top 10 priority areas with broad agreement that Prevention should be the top focus.

- The problem with primary level prevention efforts is that it is not sexy...the investment is made in the second layer of care because it is very concrete. At the primary level you don't see the benefit until years later. Does the public grasp the true importance of prevention?
- Payers: focusing on efforts to encourage additional interest in individual prevention efforts.
- We must do a better job of getting people to WANT to do the right thing. In HUDSON County – a program was started that pays people to do the right thing (provides a financial incentive to the patient to do the right thing). This program brings the patients into the process of prevention.

Hospitals and community-based organizations were then asked to comment on the top health priorities?" The following comments were noted:

- Work hard to address cultural and language barriers as they relate to developing effective programs.
- It is essential that health agencies collaborate with hospital and other providers about what is needed, where it is needed, and what barriers do exist. ZIP Code matters.
- With asthma in particular – if patients don't know how to manage a disease you can't prevent it. Definitely a challenge among children. We need to engage the community and providers to address these challenges.
- Important that all groups/stakeholders communicate re: "frequent flyers" so their care can be more effectively be coordinated in the community rather than in the hospital.
- Community based organizations are important because they help to identify not only differences in care across a state or county but at the micro-community level so that efforts are more targeted.
- East Orange Public Health Officer: We cannot overlook communicable diseases. I had an issue in the last few years with TB incidence. Also - issue among high-risk undocumented mothers. For Public Health Officers, obtaining care for these patients can be a challenge. UMDNJ needs to be at the table.
- One of ACA priorities is the expansion of access for uninsured. How does the group see the challenges of responding to the increased number of patients with access to care?
  - *In East Orange there are huge challenges – Public Health Officers look at population health – hospitals address patient health. IT will be an issue. When we look at access to care and primary care the challenge will be immense across the board. Public Health Officers need to be able to communicate with both the State and Providers. East Orange Public Health Officer has been successful in partnering with the hospital to address challenges because they work to support one another. We need to make a cultural change – prevention is not wholly accepted by people that DO have health insurance.*

*Public Health Officers collaborate in using their limited funds to address community need.*

- *Look to Massachusetts: One issue there is that with everyone insured, there are not enough providers so the waiting lists to be treated are increasing...expects to see this nationally.*
- *With everyone covered there needs to a focus on infrastructure. IT may address some access issues by allowing providers to treat increased numbers of patients more efficiently.*
- *Address access to nutritious foods so that residents are actually able to deal with health related issues.*
- *Access to primary care will get worse...clinics will get busier. Call centers are busier.*

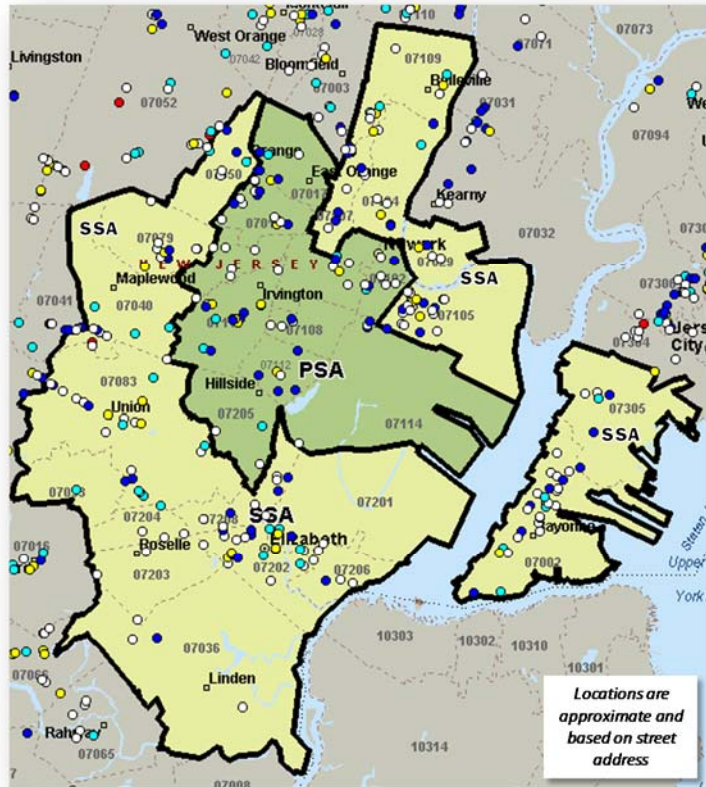
### APPENDIX D RESOURCE INVENTORY

#### Providers in NBIMC's Service Area

##### Primary Care Physicians

- Family Practice
- Geriatrics
- Internal Medicine
- OB/Gyn
- Pediatrics

*Locators may represent  
multiple practitioners*



### Providers in NBIMC's Service Area

Clinical Care Provider Locations

#### Provider Type

- Urgent Care (1 in PSA)
- ▲ OP Primary Care & FQHC (6 in PSA)
- After Hours Clinic (4 in PSA)
- ▲ Dental (8 in PSA)
- Minute Clinic (0 in PSA)

Source Listing	
NJ Primary Care Association (NJPCA)	<a href="http://www.njpca.org/fqhc/directory.aspx">http://www.njpca.org/fqhc/directory.aspx</a>
Yellow Pages	<a href="http://www.yellowpages.com/">www.yellowpages.com/</a>
Websites of each Community Health Center	



Locations are approximate and based on street address



### Providers in NBIMC's Service Area

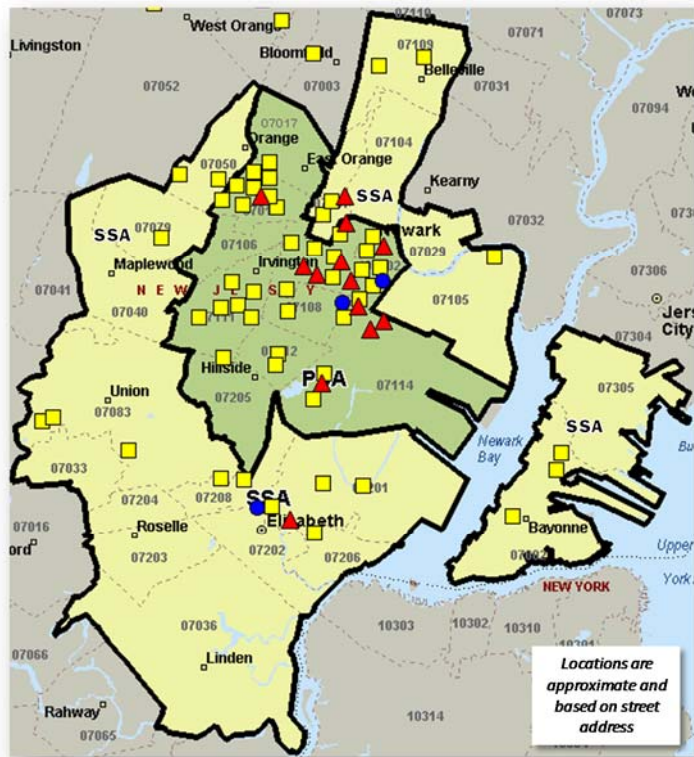
#### Behavioral Health Locations

##### Provider Type

- Residential (2 in PSA)
- ▲ Outpatient & Residential (11 in PSA)
- Outpatient (33 in PSA)

##### Source Listing

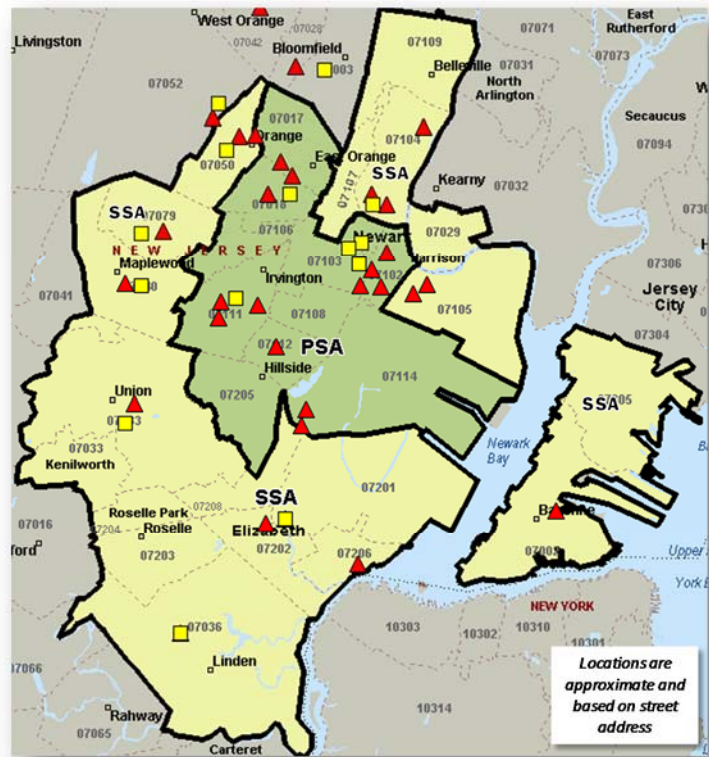
NJ Dept. of Human Services Directory of Mental Health Services By Program Element	<a href="http://www.state.nj.us/humanservices/dmhs/news/publications/mhs/directory_by_program.html">www.state.nj.us/humanservices/dmhs/news/publications/mhs/directory_by_program.html</a>
NJ Division of Mental Health and Addiction Services (DMHAS) Addiction Services Treatment Directory	<a href="http://njsams.rutgers.edu/dasbdirectory/bxdmain.htm">njsams.rutgers.edu/dasbdirectory/bxdmain.htm</a>
Yellow Pages	<a href="http://www.yellowpages.com/">www.yellowpages.com/</a>



**Providers in NBIMC's  
Service Area  
Communicable Disease Services  
Provider Type**

- TB Center (5 in PSA)
- Immunizations (13 in PSA)

Source Listing	
NJ Department of Health Office of Local Public Health	<a href="http://www.state.nj.us/health/llh/directory/llhselectcommunity.shtml">http://www.state.nj.us/health/llh/directory/llhselectcommunity.shtml</a>



### Providers in NBIMC's Service Area

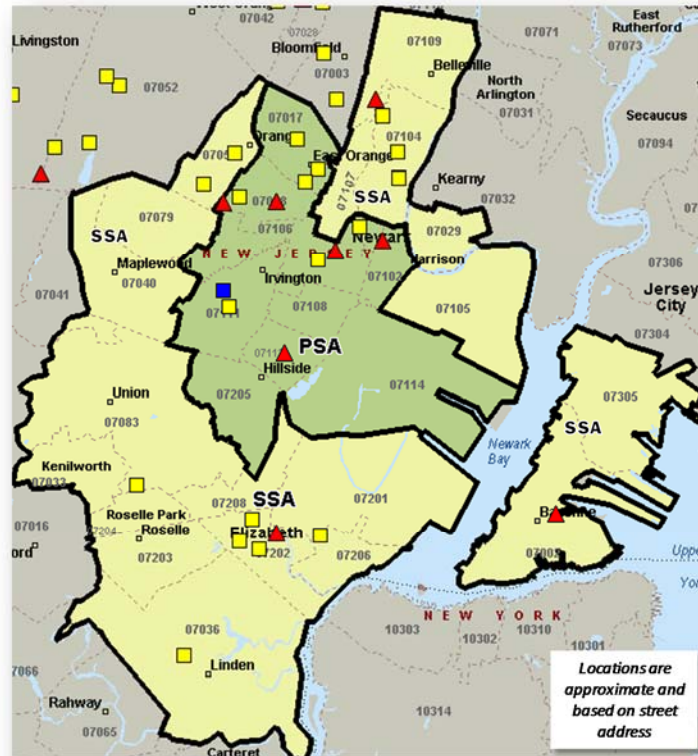
*Inpatient Rehabilitation & Long Term Care*

#### Provider Type

- LTC / Nursing Home (7 in PSA)
- Hospital Based (5 in PSA)
- Long-Term Residential Health Care (1 in PSA)

#### Source Listing

Health Care Payers Coalition of NJ	<a href="http://www.hcpc.org/HospCounty.asp">http://www.hcpc.org/HospCounty.asp</a>
NJ Department of Health; Division of Health Facilities Evaluation and Licensing	<a href="http://nj.gov/health/ems/documents/hospital_informat ion.pdf">http://nj.gov/health/ems/documents/hospital_informat ion.pdf</a> <a href="http://web.doh.state.nj.us/apps2/healthfacilities/fsSet Search.aspx?by=county">http://web.doh.state.nj.us/apps2/healthfacilities/fsSet Search.aspx?by=county</a>

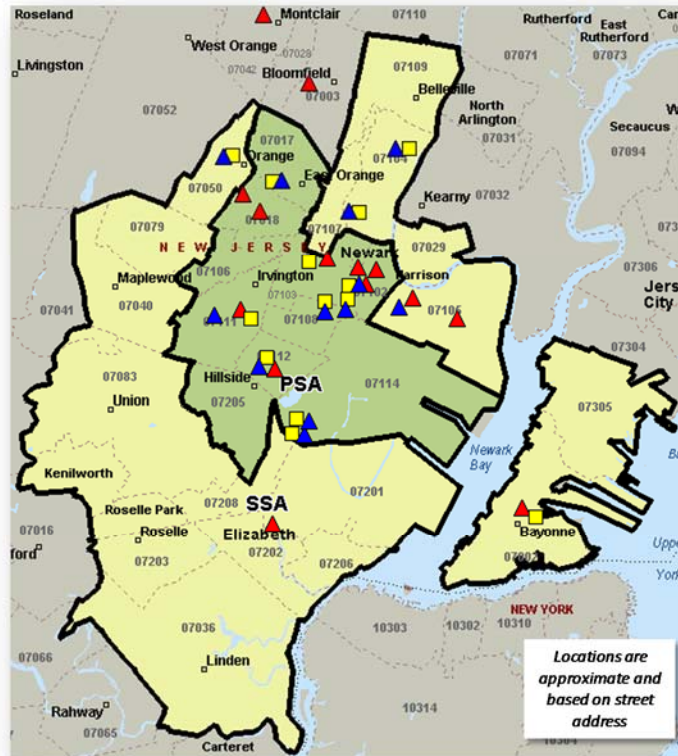


**Providers in NBIMC's  
Service Area**  
*Maternal & Pediatric*

**Provider Type**

- Clinical Pediatric (9 in PSA)
- ▲ Clinical Prenatal (8 in PSA)
- ▲ Family Planning/Women's Health Center (8 in PSA)

Source Listing	
NJ Primary Care Association	<a href="http://www.njpca.org/fqhc/directory.aspx">http://www.njpca.org/fqhc/directory.aspx</a>
Websites of each Community Health Center	
Planned Parenthood	<a href="http://www.plannedparenthoodnj.org/">http://www.plannedparenthoodnj.org/</a>



### Providers in NBIMC's Service Area

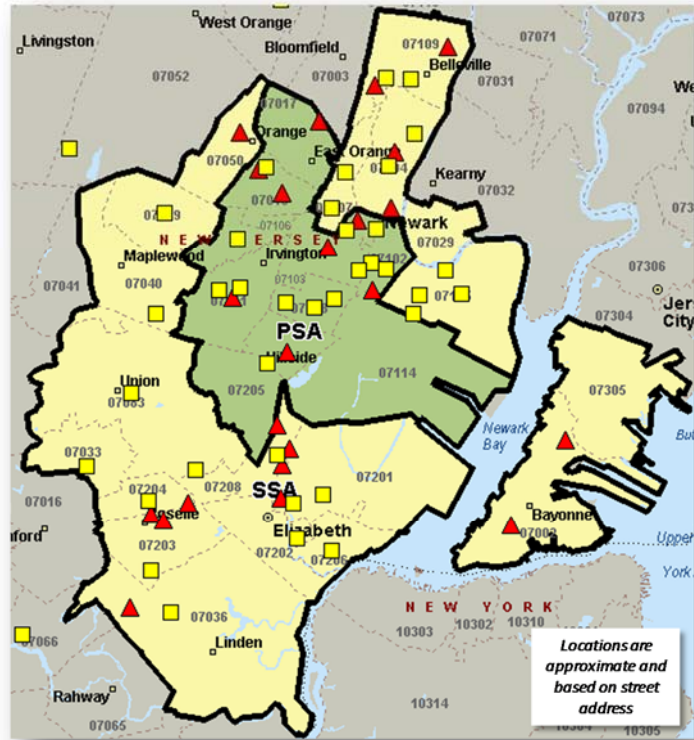
Senior Services

#### Provider Type

- Social & Health (13 in PSA)
- Medical – Adult Day Care (8 in PSA)

#### Source Listing

NJ Department of Health: Division of Aging and Community Services	<a href="http://web.doh.state.nj.us/aps2/seniorcenter/scsearch.aspx">http://web.doh.state.nj.us/aps2/seniorcenter/scsearch.aspx</a>
NJ Department of Health: Division of Health Facilities Evaluation and Licensing	<a href="http://web.doh.state.nj.us/aps2/healthfacilities/fsSetSearch.aspx?by-county">http://web.doh.state.nj.us/aps2/healthfacilities/fsSetSearch.aspx?by-county</a>
Seniors Resource Guide	<a href="http://www.seniorsresourceguide.com/directories/Essex-Hudson-Union/search.php?region=NJ03&amp;topic=608">http://www.seniorsresourceguide.com/directories/Essex-Hudson-Union/search.php?region=NJ03&amp;topic=608</a>



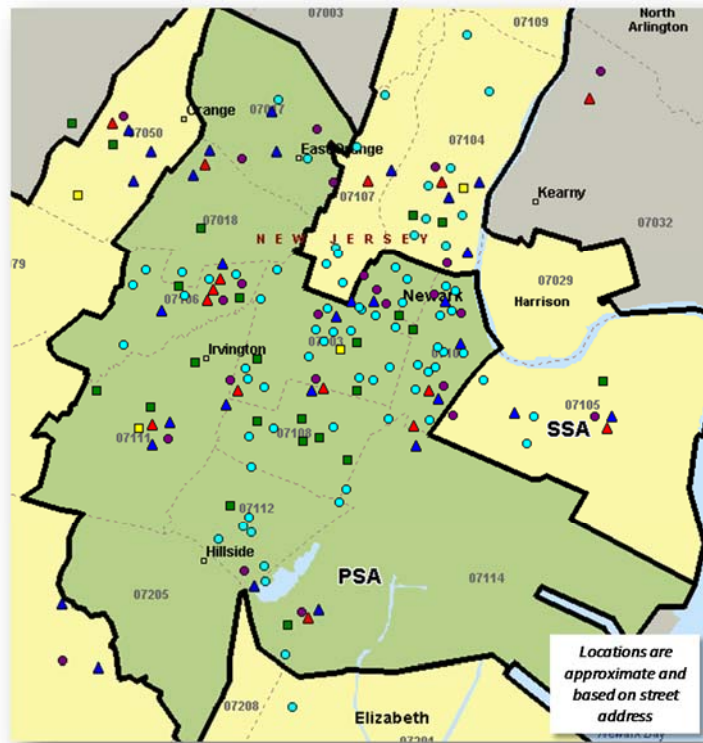
### Providers in NBIMC's Service Area

#### Family & Social Support Services

##### Provider Type

- School Linked Services (18 in PSA)
- ▲ Family & Parenting Services (19 in PSA)
- Nursery and Child Care (56 in PSA)
- Early Childhood Services (2 in PSA)
- ▲ Domestic Violence & Child Abuse Support Services (10 in PSA)
- Other Counseling & Support Services (17 in PSA)

Source Listing	
NJ-211	<a href="http://www.nj211.org/">http://www.nj211.org/</a>
DCF's Division of Prevention and Community Partnerships "Community Program Directory"	
City of Newark Directory for Youth and Families	



PROVIDER GROUP	PROVIDER MAP CLASS	PROVIDER NAME	STREET ADDRESS	MUNICIPALITY	ZIP CODE	PHONE #	COUNTY	SERVICE AREA
Clinical Care Provider Locations	Urgent Care	Concentra	375 McCarter Hwy	Newark	07114	973-643-8601	Essex	PSA
Clinical Care Provider Locations	Urgent Care	Concentra Urgent Care	595 Division St	Elizabeth	07201	908-289-5646	Union	SSA
Clinical Care Provider Locations	OP Primary Care & FQHC	Newark Homeless Health Care Project	110 William Street	Newark	07102	(973) 733-5300	Essex	PSA
Clinical Care Provider Locations	OP Primary Care & FQHC	Newark Community Health Center, Inc. (Dayton St. Health Center)	101 Ludlow Street	Newark	07114	(973) 565-0355	Essex	PSA
Clinical Care Provider Locations	OP Primary Care & FQHC	Newark Community Health Center, Inc. (James White Manor)	516 Bergen Street	Newark	07103	(973) 648-0866	Essex	PSA
Clinical Care Provider Locations	OP Primary Care & FQHC	Newark Community Health Center at Newark Emergency Services for Families (NESF)	982 Broad Street	Newark	07102	(973) 353-0699	Essex	PSA
Clinical Care Provider Locations	OP Primary Care & FQHC	Newark Community Health Center, Inc. ( E. Orange Primary Care)	444 William Street	East Orange	07017	(973) 675-1900	Essex	PSA
Clinical Care Provider Locations	OP Primary Care & FQHC	Irvington Community Health Center at Irvington General Hospital	832 Chancellor Avenue	Irvington	07111	(973) 399-6292	Essex	PSA
Clinical Care Provider Locations	OP Primary Care & FQHC	Broadway Health Center	751 Broadway	Newark	07104	(973) 483-1300	Essex	SSA
Clinical Care Provider Locations	OP Primary Care & FQHC	Orange Community Health Center	37 North Day Street	Orange	07050	973-395-2611	Essex	SSA
Clinical Care Provider Locations	OP Primary Care & FQHC	Horizon Health Center - Bayonne Family Medicine	29th Street, Ave E	Bayonne	07002	201-683-2000	Hudson	SSA
Clinical Care Provider Locations	OP Primary Care & FQHC	Neighborhood Health Center Elizabeth	184 First Street	Elizabeth	07206	908-355-4459	Union	SSA
Clinical Care Provider Locations	After Hours Clinic	Newark Community Health Centers - Irvington Community Health Center	1150 Springfield Ave.	Irvington	07111	973-399-6292	Essex	PSA
Clinical Care Provider Locations	After Hours Clinic	Newark Community Health Centers - Dayton Street Health Center	101 Ludlow St	Newark	07114	973-565-0355	Essex	PSA
Clinical Care Provider Locations	After Hours Clinic	Newark Community Health Centers - East Orange Primary Care Center	444 William Street	East Orange	07017	973-675-1900	Essex	PSA
Clinical Care Provider Locations	After Hours Clinic	City of Newark Medical Care Services	110 William Street	Newark	07102	973-648-2474	Essex	PSA
Clinical Care Provider Locations	Dental	East Orange Health and Human Services Department	143 New Street	East Orange	07017	973-266-5477	Essex	PSA
Clinical Care Provider Locations	Dental	Jewish Renaissance Medical Center- The Health Zone George Washington Carver Elementary School	333 Clinton Place	Newark	07112	973-679-7709	Essex	PSA
Clinical Care Provider Locations	Dental	Jewish Renaissance Medical Center- The Rainbow Room Dayton Street Elementary School	226 Dayton Street	Newark	07114	973-679-7709 Ext. 1061	Essex	PSA

PROVIDER GROUP	PROVIDER MAP CLASS	PROVIDER NAME	STREET ADDRESS	MUNICIPALITY	ZIP CODE	PHONE #	COUNTY	SERVICE AREA
Clinical Care Provider Locations	Dental	Newark Beth Israel Medical Center	201 Lyons Ave.	Newark	07112	973-926-7338	Essex	PSA
Clinical Care Provider Locations	Dental	Newark Community Health Centers, Inc	1150 Springfield Ave.	Irvington	07111	973-399-6292	Essex	PSA
Clinical Care Provider Locations	Dental	Newark Dept. of Health & Human Services	110 Williams Street	Newark	07102	973-733-7613	Essex	PSA
Clinical Care Provider Locations	Dental	UMDNJ- New Jersey Dental School	110 Bergen Street	Newark	07103	973-972-4621	Essex	PSA
Clinical Care Provider Locations	Dental	UMDNJ- University Hospital	150 Bergen Street	Newark	07103	973-972-5026	Essex	PSA
Clinical Care Provider Locations	Dental	Newark Community Health Centers, Inc	741 Broadway	Newark	07104	973-483-1300	Essex	SSA
Clinical Care Provider Locations	Dental	Newark Community Health Centers, Inc.	101 Ludlow Street	Newark	07104	973-565-0355	Essex	SSA
Behavioral Health Locations	Residential	CURA Inc Adult Residential Newark	53 Spruce Street	Newark	07101	973-622-3570	Essex	PSA
Behavioral Health Locations	Residential	Cura, Inc (Newark)	75 Lincoln Park	Newark	07102	973-622-3570	Essex	PSA
Behavioral Health Locations	Residential	Community Access Unlimited	80 West Grand Street	Elizabeth	07202	908-354-3040	Union	SSA
Behavioral Health Locations	Outpatient & Residential	New Directions Behavioral Health Ctr	224 Sussex Avenue	Newark	07103	973-242-6599	Essex	PSA
Behavioral Health Locations	Outpatient & Residential	Newark Renaissance House Inc Youth and Family Treatment Center	74-80 Norfolk Street	Newark	07103	973-623-3386	Essex	PSA
Behavioral Health Locations	Outpatient & Residential	Cathedral Health Services Inc	268 Martin Luther King Boulevard	Newark	07102	973-242-6222	Essex	PSA
Behavioral Health Locations	Outpatient & Residential	Veterans Affairs Medical Center Substance Abuse Treatment Programs	385 Tremont Avenue and Center Street	East Orange	07018	973-676-1000x2587	Essex	PSA
Behavioral Health Locations	Outpatient & Residential	Cura, Inc (Newark)	61 Lincoln Park	Newark	07101	973-622-3570	Essex	PSA
Behavioral Health Locations	Outpatient & Residential	University Behavioral Healthcare	215 South Orange Ave	Newark	07103	973-972-4348	Essex	PSA
Behavioral Health Locations	Outpatient & Residential	University Behavioral Healthcare	183 South Orange Ave.	Newark	07103	973-972-5479	Essex	PSA
Behavioral Health Locations	Outpatient & Residential	The Kintock Group	19 Meeker St	Newark	07114	908-208-7299	Essex	PSA
Behavioral Health Locations	Outpatient & Residential	Integrity House Inc. (Newark)	101 Lincoln Park	Newark	07102	973-623-0600	Essex	PSA



PROVIDER GROUP	PROVIDER MAP CLASS	PROVIDER NAME	STREET ADDRESS	MUNICIPALITY	ZIP CODE	PHONE #	COUNTY	SERVICE AREA
Behavioral Health Locations	Outpatient & Residential	Integrity House Inc. (Newark Men)	105 Lincoln Park	Newark	07102	973-623-0600	Essex	PSA
Behavioral Health Locations	Outpatient & Residential	Integrity House Inc. (Newark Men)	99 Lincoln Park	Newark	07102	973-623-0600	Essex	PSA
Behavioral Health Locations	Outpatient & Residential	Choices Inc.	169 Roseville Avenue	Newark	07107	973-481-1889	Essex	SSA
Behavioral Health Locations	Outpatient & Residential	Flynn Fellowship	1089-1091 East Jersey Street	Elizabeth	07201	908-351-2265	Union	SSA
Behavioral Health Locations	Outpatient	Bridge Inc	1065 Clinton Avenue	Irvington	07111	973-372-2624x15	Essex	PSA
Behavioral Health Locations	Outpatient	BHS: Broad Human Services	1114-1116 Broad St	Newark	07102	973-242-8088	Essex	PSA
Behavioral Health Locations	Outpatient	Good Orderly Direction Family WellNess Center	131 Pomona Avenue	Newark	07112	973-374-0007	Essex	PSA
Behavioral Health Locations	Outpatient	Airmid Counseling Services	137 Evergreen Place	East Orange	07018	973-678-0550	Essex	PSA
Behavioral Health Locations	Outpatient	East Orange Substance Abuse Trt Prog	160 Halsted Street	East Orange	07018	973-266-5200	Essex	PSA
Behavioral Health Locations	Outpatient	Univ of Medicine and Dentistry NJ Univ Behav Healthcare/Extended Trt	183 South Orange Avenue	Newark	07103	973-972-5452	Essex	PSA
Behavioral Health Locations	Outpatient	Newark Beth Israel Center	210 Lehigh Avenue	Newark	07112	973-926-7026	Essex	PSA
Behavioral Health Locations	Outpatient	Irvington Counseling Center	21-29 Wagner Place	Irvington	07111	977-399-3132	Essex	PSA
Behavioral Health Locations	Outpatient	University Behavioral Healthcare	215 South Orange Ave.	Newark	07103	973-972-4348	Essex	PSA
Behavioral Health Locations	Outpatient	Johnson and Associates Counseling and Consultation Group PC	220 South Harrison Street	East Orange	07018	973-677-7053	Essex	PSA
Behavioral Health Locations	Outpatient	Pressing Toward the Mark	226-230 Warren Street	Newark	07103	973-273-0055	Essex	PSA
Behavioral Health Locations	Outpatient	East Orange General Hospital Addictions Services/Behavioral Health	240 Central Avenue	East Orange	07018	973-266-8526	Essex	PSA
Behavioral Health Locations	Outpatient	Integrity House Inc Intensive Outpatient	26 Longworth Street	Newark	07102	973-623-7463	Essex	PSA
Behavioral Health Locations	Outpatient	St. Michaels Medical Center-Behavioral Health Department	268 Martin Luther King Jr	Newark	07102	973-324-2220	Essex	PSA
Behavioral Health Locations	Outpatient	Family Services Bureau of Newark	274 South Orange Ave	Newark	07103	973-412-8281	Essex	PSA

PROVIDER GROUP	PROVIDER MAP CLASS	PROVIDER NAME	STREET ADDRESS	MUNICIPALITY	ZIP CODE	PHONE #	COUNTY	SERVICE AREA
Behavioral Health Locations	Outpatient	New Hope Behavioral Health Center	277-285 Coit Street	Irvington	07111	973-373-5100	Essex	PSA
Behavioral Health Locations	Outpatient	North Jersey Community Research Initiative	393 Central Avenue	Newark	07103	973-483-3444	Essex	PSA
Behavioral Health Locations	Outpatient	The Lennard Clinic Inc	461 Frelinghuysen Avenue	Newark	07114	973-596-2850x273	Essex	PSA
Behavioral Health Locations	Outpatient	New Street Treatment Associates LLC Habit OPCO	57 New Street	Irvington	07111	973-373-2010	Essex	PSA
Behavioral Health Locations	Outpatient	Habit OPCO DBA New Street Treatment Associates	57-59 New Street	Irvington	07111	973-373-2010	Essex	PSA
Behavioral Health Locations	Outpatient	Strathmore Treatment Associates Methadone Maintenance and Detox	57-59 New Street	Irvington	07111	973-373-2010	Essex	PSA
Behavioral Health Locations	Outpatient	Consumer Friends Inc.	60 Evergreen Place	East Orange	07018	973-678-3966	Essex	PSA
Behavioral Health Locations	Outpatient	Kwenyan Professional Health Services	60 Evergreen Place	East Orange	07018	973-672-6900	Essex	PSA
Behavioral Health Locations	Outpatient	Youth Consultation Service Department of Addiction Service	60 Evergreen Place	East Orange	07018	973-854-3652	Essex	PSA
Behavioral Health Locations	Outpatient	Bethel Counseling Services	63 Pierce Street	Newark	07103	973-643-6565	Essex	PSA
Behavioral Health Locations	Outpatient	Living New Inc Real Families Inc	655 Clinton Avenue	Newark	07108	973-622-0071	Essex	PSA
Behavioral Health Locations	Outpatient	Step By Step Health and Family Services LLC	660 21st Street South	Irvington	07111	973-372-5550	Essex	PSA
Behavioral Health Locations	Outpatient	Community Psychiatric Institute	67 Sandford Street	East Orange	07018	973-673-3342	Essex	PSA
Behavioral Health Locations	Outpatient	Community Psychiatric Institute	67 Sanford St.	East Orange	07018	973-673-3342	Essex	PSA
Behavioral Health Locations	Outpatient	American Habitare	687 Frelinghuysen Avenue	Newark	07114	973-799-0508	Essex	PSA
Behavioral Health Locations	Outpatient	Elizabeth Clinic A Division of The Essex Substance Abuse Trt Ctr Inc	850 Woodruff Lane	Newark	07102	908-352-0850	Essex	PSA
Behavioral Health Locations	Outpatient	New Direction Behavioral Health Center	9 Lincoln Park	Newark	07102	973-242-6599	Essex	PSA
Behavioral Health Locations	Outpatient	Capital Care, Inc: Alcohol and Drug Treatment Program	972 Broad St.	Newark	07102	973-426-1440	Essex	PSA
Behavioral Health Locations	Outpatient	PROCEED, INC	1126 Dickinson Street	Elizabeth	07201	(908)351-7727	Union	SSA

PROVIDER GROUP	PROVIDER MAP CLASS	PROVIDER NAME	STREET ADDRESS	MUNICIPALITY	ZIP CODE	PHONE #	COUNTY	SERVICE AREA
Behavioral Health Locations	Outpatient	Living New Inc./ Real Families	15 South 9th St	Newark	07107	973-497-9300	Essex	SSA
Behavioral Health Locations	Outpatient	Essex Substance Abuse Trt Center Inc	164 Blanchard Street	Newark	07105	973-589-4282	Essex	SSA
Behavioral Health Locations	Outpatient	OASIS CLINICAL SERVICES, INC.	208 COMMERCE PLACE	Elizabeth	07201	(908)372-3000	Union	SSA
Behavioral Health Locations	Outpatient	Marriage and Family Counseling Center	387 Union Avenue	Belleville	07109	973-759-3388	Essex	SSA
Behavioral Health Locations	Outpatient	Family Connections	395 South Center Street	Orange	07050	973-675-3817	Essex	SSA
Behavioral Health Locations	Outpatient	Habit Opco Inc DBA Suburban Treatment Facility	43 Progress Street	Union	07083	(908) 687-7188	Union	SSA
Behavioral Health Locations	Outpatient	Suburban Treatment Associates	43 Progress Street	Union	07083	(908) 687-7188	Union	SSA
Behavioral Health Locations	Outpatient	Gannon Counseling	463 Chestnut Street	Union	07083	(908) 964-4233	Union	SSA
Behavioral Health Locations	Outpatient	COMMUNITY PSYCHOTHERAPY ASSOCIATES, INC	479 AVENUE C	Bayonne	07002	(201)339-0142	Hudson	SSA
Behavioral Health Locations	Outpatient	BRIDGEWAY REHABILITATION SERVICES	567 MORRIS AVE	Elizabeth	07208	(908)355-7200	Union	SSA
Behavioral Health Locations	Outpatient	Community Healthcare Network	570 Belleville Avenue	Belleville	07109	973-450-3100	Essex	SSA
Behavioral Health Locations	Outpatient	Horizons Community Development Substance Abuse Services	580 Christopher Street	Orange	07050	973-414-8112	Essex	SSA
Behavioral Health Locations	Outpatient	INTERVENTION SPECIALISTS, LLC	583 MORRIS AVE	Elizabeth	07208	(908)289-0700	Union	SSA
Behavioral Health Locations	Outpatient	BAYONNE CMHC- ADDICTION TREATMENT	597-601 BROADWAY	Bayonne	07002	(201)339-9200	Hudson	SSA
Behavioral Health Locations	Outpatient	TRINITAS HOSPITAL - HIV MENTAL	654 E.JERSEY ST.	Elizabeth	07206	(908)994-7438	Union	SSA
Behavioral Health Locations	Outpatient	ARFC Saint Clares Social Services	77 Academy Street	Newark	07105	973-643-0400	Essex	SSA
Behavioral Health Locations	Outpatient	THE LENNARD CLINIC, INC.	850 WOODRUFF LANE	Elizabeth	07201	(908)352-0850	Union	SSA
Behavioral Health Locations	Outpatient	NEW PATHWAY COUNSELING SERVICE	995 BROADWAY	Bayonne	07002	(201)436-1022	Hudson	SSA
Behavioral Health Locations	Inpatient	CLARA MAASS MEDICAL CENTER	ONE CLARA MAAS DRIVE	Belleville	07109	(973) 450-2002	Essex	SSA

PROVIDER GROUP	PROVIDER MAP CLASS	PROVIDER NAME	STREET ADDRESS	MUNICIPALITY	ZIP CODE	PHONE #	COUNTY	SERVICE AREA
Communicable Disease Services	TB Center	City of Newark Medical Care Services - TB Clinic	110 William Street	Newark	07102	973-648-2474	Essex	PSA
Communicable Disease Services	TB Center	Waymon C. Lattimore Practice	225 Warren Street	Newark	07103	973-972-6232	Essex	PSA
Communicable Disease Services	TB Center	Care Services at University Hospital - University of Medicine & Dentistry of New Jersey.	225 Warren Street	Newark	07103	973-972-6232	Essex	PSA
Communicable Disease Services	TB Center	East Orange Health Dept	143 New Street	East Orange	07017	973-266-5481	Essex	PSA
Communicable Disease Services	TB Center	Irvington Health Dept	1 Civic Square	Irvington	07111	973-399-6647	Essex	PSA
Communicable Disease Services	TB Center	Essex County Health Dept	115 Clifton Avenue	Newark	07104	973-497-9401	Essex	SSA
Communicable Disease Services	TB Center	Maplewood Health Dept.	574 Valley Street	Maplewood	07040	973-762-8120	Essex	SSA
Communicable Disease Services	TB Center	Orange Township Health Dept	29 N. Day Street	Orange	07050	973-266-4073	Essex	SSA
Communicable Disease Services	TB Center	South Orange Health Dept	101 South Orange Ave.	South Orange	07079	973-378-7715	Essex	SSA
Communicable Disease Services	TB Center	Elizabeth Dept of Health & Human Svcs	50 Winfield Scott Plaza	Elizabeth	07201	908-820-4060	Union	SSA
Communicable Disease Services	TB Center	Township of Union Dept of Health	1976 Morris Avenue	Union	07083	908-851-5454	Union	SSA
Communicable Disease Services	TB Center	Linden Board of Health	301 North Wood Avenue	Linden	07036	908-474-8409	Union	SSA
Communicable Disease Services	Immunizations	Newark Community Health Centers - Dayton Street Health Center	101 Ludlow St	Newark	07114	973-565-0355	Essex	PSA
Communicable Disease Services	Immunizations	Newark Community Health Centers - East Orange Primary Care Center	444 William Street	East Orange	07017	973-675-1900	Essex	PSA
Communicable Disease Services	Immunizations	Irvington Community Health Center	9 Coit Street	Irvington	07111	973-483-1300	Essex	PSA
Communicable Disease Services	Immunizations	East Orange Health Dept	143 New Street	East Orange	07017	973-266-5481	Essex	PSA
Communicable Disease Services	Immunizations	Irvington Health Dept	1 Civic Square	Irvington	07111	973-399-6647	Essex	PSA
Communicable Disease Services	Immunizations	City of Newark Medical Care Services - Communicable Disease Prevention and Treatment Center	110 William Street	Newark	07102	(973) 648-2474	Essex	PSA
Communicable Disease Services	Immunizations	Irvington Community Health Center	1150 Springfield Avenue	Irvington	07111	(973) 399-6292	Essex	PSA

PROVIDER GROUP	PROVIDER MAP CLASS	PROVIDER NAME	STREET ADDRESS	MUNICIPALITY	ZIP CODE	PHONE #	COUNTY	SERVICE AREA
Communicable Disease Services	Immunizations	Newark Community Health Centers - Newark Emergency Services for Families	982 Broad Street	Newark	07102	(973) 353-0699	Essex	PSA
Communicable Disease Services	Immunizations	Planned Parenthood: Chubb Center	151 Washington Street	Newark	07102	973.622.3900	Essex	PSA
Communicable Disease Services	Immunizations	Planned Parenthood: Gale Center	560 Dr. MLK Blvd., Ste. 100	East Orange	07018	973-674-4343	Essex	PSA
Communicable Disease Services	Immunizations	Jewish Renaissance Medical Center - George Washington Carver	333 Clinton Ave.	Newark	07112	973-424-4329	Essex	PSA
Communicable Disease Services	Immunizations	Jewish Renaissance Medical Center - Dayton Street School	226 Dayton Street	Newark	07114	973-733-8781	Essex	PSA
Communicable Disease Services	Immunizations	Jewish Renaissance Medical Center - Quiltman Street School	21 Quiltman Street	Newark	07103	973-424-4329	Essex	PSA
Communicable Disease Services	Immunizations	Elizabeth Dept of Health & Human Svcs	50 Winfield Scott Plaza	Elizabeth	07201	908-820-4060	Union	SSA
Communicable Disease Services	Immunizations	Essex County Health Dept	115 Clifton Avenue	Newark	07104	973-497-9401	Essex	SSA
Communicable Disease Services	Immunizations	Horizon Health Center - Bayonne Family Medicine	29th Street, Ave E,	Bayonne	07002	(201) 683-2000	Hudson	SSA
Communicable Disease Services	Immunizations	Jewish Renaissance Medical Center - Barringer High School	90 Parker Street	Newark	07104	(973) 497-5751	Essex	SSA
Communicable Disease Services	Immunizations	Linden Board of Health	301 North Wood Avenue	Linden	07036	908-474-8409	Union	SSA
Communicable Disease Services	Immunizations	Maplewood Health Dept.	574 Valley Street	Maplewood	07040	973-762-8120	Essex	SSA
Communicable Disease Services	Immunizations	Neighborhood Health Center Elizabeth	184 First Street	Elizabeth	07206	(908) 355-4459	Union	SSA
Communicable Disease Services	Immunizations	Newark Community Health Centers - Corporate Office	741 Broadway	Newark	07104	973-483-1300	Essex	SSA
Communicable Disease Services	Immunizations	Newark Community Health Centers - Orange Community Health Center	37 N Day St	Orange	07050	973-365-2611	Essex	SSA
Communicable Disease Services	Immunizations	Newark Community Health Centers - St James Campus	155 Jefferson St	Newark	07105	973-465-2828	Essex	SSA
Communicable Disease Services	Immunizations	Newark Community Health Centers - Women's Health Center	751 Broadway	Newark	07104	973-483-1300	Essex	SSA
Communicable Disease Services	Immunizations	Orange Township Health Dept	29 N. Day Street	Orange	07050	973-266-4073	Essex	SSA
Communicable Disease Services	Immunizations	Planned Parenthood	1150 Dickinson St	Elizabeth	07201	(908) 351-5384	Union	SSA

PROVIDER GROUP	PROVIDER MAP CLASS	PROVIDER NAME	STREET ADDRESS	MUNICIPALITY	ZIP CODE	PHONE #	COUNTY	SERVICE AREA
Communicable Disease Services	Immunizations	Planned Parenthood: Ironbound Center	70 Adams St, Suite 13	Newark	07105	973-465-7707	Essex	SSA
Communicable Disease Services	Immunizations	South Orange Health Dept	101 South Orange Ave.	South Orange	07079	973-378-7715	Essex	SSA
Communicable Disease Services	Immunizations	Township of Union Dept of Health	1976 Morris Avenue	Union	07083	908-851-5454	Union	SSA
Inpatient Rehabilitation & Long Term Care	LTC / Nursing Home	Brookhaven Health Care Center	120 Park End Place	East Orange	07018	(973)676-6221	Essex	PSA
Inpatient Rehabilitation & Long Term Care	LTC / Nursing Home	Chancellor Specialty Care Center	155 Fortieth Street	Irvington	07111	(973)232-3100	Essex	PSA
Inpatient Rehabilitation & Long Term Care	LTC / Nursing Home	New Community Extended Care Facility	266 S Orange Ave	Newark	07103	(973)624-2020	Essex	PSA
Inpatient Rehabilitation & Long Term Care	LTC / Nursing Home	New Grove Manor	101 North Grove Street	East Orange	07017	(973)672-1700	Essex	PSA
Inpatient Rehabilitation & Long Term Care	LTC / Nursing Home	Newark Health and Extended Care Facility	65 Jay Street	Newark	07103	(973)483-6800	Essex	PSA
Inpatient Rehabilitation & Long Term Care	LTC / Nursing Home	Park Crescent Healthcare & Rehabilitation Center	480 Parkway Drive	East Orange	07017	(973)674-2700	Essex	PSA
Inpatient Rehabilitation & Long Term Care	LTC / Nursing Home	Windsor Gardens Care Center	140 Park Ave	East Orange	07017	(973)677-1500	Essex	PSA
Inpatient Rehabilitation & Long Term Care	LTC / Nursing Home	Broadway House for Continuing Care	298 Broadway	Newark	07104	(973)268-9797	Essex	SSA
Inpatient Rehabilitation & Long Term Care	LTC / Nursing Home	Clara Maass Transitional Care Unit	One Clara Maass Drive	Belleville	07109	(973)450-2963	Essex	SSA
Inpatient Rehabilitation & Long Term Care	LTC / Nursing Home	Forest Hill Healthcare Center	497 Mt Prospect Ave	Newark	07104	(973)482-5000	Essex	SSA
Inpatient Rehabilitation & Long Term Care	LTC / Nursing Home	New Vista Nursing and Rehabilitation Center	300 Broadway	Newark	07104	(973)484-4222	Essex	SSA
Inpatient Rehabilitation & Long Term Care	LTC / Nursing Home	The Pope John Paul II Pavilion at St. Mary's Life Center	135 South Center Street	Orange	07050	(973)266-3000	Essex	SSA
Inpatient Rehabilitation & Long Term Care	LTC / Nursing Home	White House Healthcare & Rehabilitation Center	560 Berkeley Avenue	Orange	07050	(973)672-6500	Essex	SSA

PROVIDER GROUP	PROVIDER MAP CLASS	PROVIDER NAME	STREET ADDRESS	MUNICIPALITY	ZIP CODE	PHONE #	COUNTY	SERVICE AREA
Inpatient Rehabilitation & Long Term Care	LTC / Nursing Home	Cornell Hall Care & Rehabilitation Center	234 Chestnut Street	Union	07083	(908)687-7800	Union	SSA
Inpatient Rehabilitation & Long Term Care	LTC / Nursing Home	Delaire Nursing & Convalescent Center	400 W Stimpson Ave	Linden	07036	(908)862-3399	Union	SSA
Inpatient Rehabilitation & Long Term Care	LTC / Nursing Home	Elizabeth Nursing And Rehab Center	1048 Grove Street	Elizabeth	07202	(908)354-0002	Union	SSA
Inpatient Rehabilitation & Long Term Care	LTC / Nursing Home	Elmora Hills Health & Rehabilitation Center	225 W Jersey Street	Elizabeth	07202	(908)353-1220	Union	SSA
Inpatient Rehabilitation & Long Term Care	LTC / Nursing Home	Plaza Healthcare & Rehabilitation Center	456 Rahway Avenue	Elizabeth	07202	(908)354-1300	Union	SSA
Inpatient Rehabilitation & Long Term Care	LTC / Nursing Home	Trinitas Hospital	655 East Jersey Street	Elizabeth	07206	(908)994-7050	Union	SSA
Inpatient Rehabilitation & Long Term Care	Hospital Based	Newark beth Israel Medical Center	Lyons Avenue at Osborne Terrace	Newark	07112	1-800-843-2384	Essex	PSA
Inpatient Rehabilitation & Long Term Care	Hospital Based	Saint Michael's Medical Center	111 Central Avenue	Newark	07102	973-877-5000	Essex	PSA
Inpatient Rehabilitation & Long Term Care	Hospital Based	UMDNJ University Hospital	150 Bergen Street	Newark	07103	973-972-4300	Essex	PSA
Inpatient Rehabilitation & Long Term Care	Hospital Based	VA New Jersey Health Care System	385 Tremont Avenue	East Orange	07018	973-676-1000	Essex	PSA
Inpatient Rehabilitation & Long Term Care	Hospital Based	East Orange General Hospital	300 Central Avenue	East Orange	07018	973-672-8400	Essex	PSA
Inpatient Rehabilitation & Long Term Care	Hospital Based	Clara Maass Medical Center	1 Clara Maass Drive	Belleville	07109	973-450-2000	Essex	SSA
Inpatient Rehabilitation & Long Term Care	Hospital Based	Trinitas Regional Medical Center	225 Williamson Street	Elizabeth	07202	908-994-5000	Union	SSA
Inpatient Rehabilitation & Long Term Care	Hospital Based	Bayonne Medical Center	29th Street Avenue E	Bayonne	07002	201-858-5000	Hudson	SSA
Inpatient Rehabilitation & Long Term Care	Long - Term Residential Health Care	Chancellor Specialty Care Center	155 Fortieth Street	Irvington	07111	(973)371-7878	Essex	PSA

PROVIDER GROUP	PROVIDER MAP CLASS	PROVIDER NAME	STREET ADDRESS	MUNICIPALITY	ZIP CODE	PHONE #	COUNTY	SERVICE AREA
Maternal & Pediatric	Clinical Pediatric	Irvington Community Health Center	9 Coit Street	Irvington	07111	973-399-6292	Essex	PSA
Maternal & Pediatric	Clinical Pediatric	Newark Community Health Centers - East Orange Primary Care Center	444 William Street	East Orange	07017	973-675-1900	Essex	PSA
Maternal & Pediatric	Clinical Pediatric	The Rainbow Room Dayton Street School	226 Dayton St.	Newark	07114	973-733-8781	Essex	PSA
Maternal & Pediatric	Clinical Pediatric	Student Family Health Care Center	90 Bergen Street LL300	Newark	07103	973-972-2112	Essex	PSA
Maternal & Pediatric	Clinical Pediatric	City of Newark - Pediatric Services	110 William Street	Newark	07102	973-648-2474	Essex	PSA
Maternal & Pediatric	Clinical Pediatric	Jewish Renaissance Medical Center - Quiltman Street School	21 Quiltman Street	Newark	07103	973-424-4329	Essex	PSA
Maternal & Pediatric	Clinical Pediatric	Jewish Renaissance Medical Center - George Washington Carver	333 Clinton Ave.	Newark	07112	973-424-4329	Essex	PSA
Maternal & Pediatric	Clinical Pediatric	Newark Community Health Centers - Dayton Street Health Center	101 Ludlow St	Newark	07114	973-565-0355	Essex	PSA
Maternal & Pediatric	Clinical Pediatric	Jewish Renaissance Medical Center - Central High School	246 18th Avenue	Newark	07107	973-679-7709 Ext. 1091	Essex	PSA
Maternal & Pediatric	Clinical Pediatric	Newark Community Health Centers - Orange Community Health Center	37 N Day St	Orange	07050	973-365-2611	Essex	SSA
Maternal & Pediatric	Clinical Pediatric	Newark Community Health Centers - Corporate Office	741 Broadway	Newark	07104	973-483-1300	Essex	SSA
Maternal & Pediatric	Clinical Pediatric	Jewish Renaissance Medical Center - Barringer High School	90 Parker Street	Newark	07104	973-497-5751	Essex	SSA
Maternal & Pediatric	Clinical Pediatric	Horizon Health Center - Bayonne Family Medicine	29th Street, Ave E,	Bayonne	07002	201-683-2000	Hudson	SSA
Maternal & Pediatric	Clinical Prenatal	Jewish Renaissance Medical Center - George Washington Carver	333 Clinton Ave.	Newark	07112	973-424-4329	Essex	PSA
Maternal & Pediatric	Clinical Prenatal	Jewish Renaissance Medical Center - Dayton Street School	226 Dayton Street	Newark	07114	973-733-8781	Essex	PSA
Maternal & Pediatric	Clinical Prenatal	Jewish Renaissance Medical Center - Quiltman Street School	21 Quiltman Street	Newark	07103	973-424-4329	Essex	PSA
Maternal & Pediatric	Clinical Prenatal	Newark Community Health Centers - East Orange Primary Care Center	444 William Street	East Orange	07017	973-675-1900	Essex	PSA
Maternal & Pediatric	Clinical Prenatal	Newark Community Health Centers - Dayton Street Health Center	101 Ludlow St	Newark	07114	973-565-0355	Essex	PSA
Maternal & Pediatric	Clinical Prenatal	Irvington Community Health Center	1150 Springfield Ave.	Irvington	07111	973-399-6292	Essex	PSA



PROVIDER GROUP	PROVIDER MAP CLASS	PROVIDER NAME	STREET ADDRESS	MUNICIPALITY	ZIP CODE	PHONE #	COUNTY	SERVICE AREA
Maternal & Pediatric	Clinical Prenatal	Newark Community Health Centers - Dayton Street Health Center	101 Ludlow St	Newark	07114	973-565-0355	Essex	PSA
Maternal & Pediatric	Clinical Prenatal	City of Newark- Infant Mortality Reduction Program	110 William Street	Newark	07102	973-648-2474	Essex	PSA
Maternal & Pediatric	Clinical Prenatal	Jewish Renaissance Medical Center - Barringer High School	90 Parker Street	Newark	07104	973-497-5751	Essex	SSA
Maternal & Pediatric	Clinical Prenatal	Jewish Renaissance Medical Center - Central High School	246 18th Avenue	Newark	07107	973-679-7709 Ext. 1091	Essex	SSA
Maternal & Pediatric	Clinical Prenatal	Newark Community Health Centers - St James Campus	155 Jefferson St	Newark	07105	973-465-2828	Essex	SSA
Maternal & Pediatric	Clinical Prenatal	Newark Community Health Centers - Corporate Office/Women's Health	741 Broadway	Newark	07104	973-483-1300	Essex	SSA
Maternal & Pediatric	Clinical Prenatal	Newark Community Health Centers - Orange Community Health Center	37 N Day St	Orange	07050	973-365-2611	Essex	SSA
Maternal & Pediatric	Family Planning / Women's Health Center	Planned Parenthood- Chubb Center	151 Washington Street	Newark	07102	973-622-3900	Essex	PSA
Maternal & Pediatric	Family Planning / Women's Health Center	Planned Parenthood-Gale Center	560 Dr. Martin Luther King Blvd.	East Orange	07018	973-674-4343	Essex	PSA
Maternal & Pediatric	Family Planning / Women's Health Center	Planned Parenthood	606 Central Avenue	East Orange	07018	973-674-4344	Essex	PSA
Maternal & Pediatric	Family Planning / Women's Health Center	UMDNJ – University Hospital Women's Health Center	90 Bergen Street	Newark	07103	973-972-2700	Essex	PSA
Maternal & Pediatric	Family Planning / Women's Health Center	Newark Beth Israel Family Center	166 Lyons Avenue	Newark	07112	973-926-4176	Essex	PSA
Maternal & Pediatric	Family Planning / Women's Health Center	New Jersey Family Planning League, Inc.	151 Washington Street	Newark	07102	973-622-2425	Essex	PSA
Maternal & Pediatric	Family Planning / Women's Health Center	Gateway Pregnancy Center	960 Springfield Avenue	Irvington	07111	973-399-8378	Essex	PSA
Maternal & Pediatric	Family Planning / Women's Health Center	Newark Pregnancy Center	9 Warren Street	Newark	07102	973-732-4308	Essex	PSA
Maternal & Pediatric	Family Planning / Women's Health Center	Planned Parenthood- Ironbound Center	70 Adams St, Suite 13	Newark	07105	973-465-7707	Essex	SSA
Maternal & Pediatric	Family Planning / Women's Health Center	Babyland Family Services	3 Penn Plz E	Newark	07105	973-589-6907	Essex	SSA

PROVIDER GROUP	PROVIDER MAP CLASS	PROVIDER NAME	STREET ADDRESS	MUNICIPALITY	ZIP CODE	PHONE #	COUNTY	SERVICE AREA
Maternal & Pediatric	Family Planning / Women's Health Center	Planned Parenthood	1150 Dickinson St	Elizabeth	07201	908-351-5384	Hudson	SSA
Maternal & Pediatric	Family Planning / Women's Health Center	Horizon Health Center - Bayonne Family Medicine	29th Street, Ave E,	Bayonne	07002	201-683-2000	Hudson	SSA
Senior Services	Social & Health	Baxter Senior Center	25 Summit St	Newark	07103	973-733-5747	Essex	PSA
Senior Services	Social & Health	Bethany Senior Center	275 West Market Street	Newark	07103	973-733-5739	Essex	PSA
Senior Services	Social & Health	East Orange Senior Center	90 Halsted Street	East Orange	07018	973-266-8832	Essex	PSA
Senior Services	Social & Health	Friendly Senior Center	89 Lincoln St	Newark	07103	973-733-5748	Essex	PSA
Senior Services	Social & Health	Grace West Senior Center	301 Irvine Turner Blvd	Newark	07108	973-733-5749	Essex	PSA
Senior Services	Social & Health	Irvington Senior Citizens Community Center	1077 Springfield Avenue	Irvington	07111	973-399-6501	Essex	PSA
Senior Services	Social & Health	Ivy Hill Jewish Senior Center	260 Mount Vernon Pl	Newark	07106	973-763-1005	Essex	PSA
Senior Services	Social & Health	Jewish Senior Citizens Center of Irvington	1 Linden Ave	Irvington	07111	973-372-3907	Essex	PSA
Senior Services	Social & Health	Nellie Grier Senior Center	98-104 Maple Avenue	Newark	07112	973-424-4096	Essex	PSA
Senior Services	Social & Health	Newark Day Center	43 Hill Street	Newark	07102	973-643-5710	Essex	PSA
Senior Services	Social & Health	South Ward Mini Center	491 Clinton Ave	Newark	07108	973-424-4102	Essex	PSA
Senior Services	Social & Health	South Ward Senior Citizens Center	731 Clinton Avenue	Newark	07108	973-424-4102	Essex	PSA
Senior Services	Social & Health	The City of Newark Division of Senior Life	94 William Street	Newark	07102	973-733-4392	Essex	PSA
Senior Services	Social & Health	Belleville Senior Citizens Clubs, Inc.	125 Franklin Avenue	Belleville	07109	973-450-3430	Essex	SSA
Senior Services	Social & Health	Casano Community Center	314 Chestnut Street	Roselle Park	07204	908-245-9150	Union	SSA
Senior Services	Social & Health	Elizabeth Office on Aging	50 Winfield Scott Plaza	Elizabeth	07201	908-820-4044	Union	SSA
Senior Services	Social & Health	Essex County Belleville Park Senior Center	315 Belleville Avenue	Belleville	07109	973-759-9547	Essex	SSA
Senior Services	Social & Health	Gregorio Center	330 Helen Street	Linden	07036	908-474-8627	Union	SSA
Senior Services	Social & Health	Independence Park Center	213 Van Buren Street	Newark	07105	973-456-2206	Essex	SSA
Senior Services	Social & Health	Ironbound Senior Center	156 Rome Street	Newark	07105	973-424-4101	Essex	SSA
Senior Services	Social & Health	Ironbound Senior Center	138 Clifford Street	Newark	07105	973-424-4098	Essex	SSA
Senior Services	Social & Health	Kenilworth Senior Center	526 Boulevard	Kenilworth	07033	908-272-7743	Union	SSA
Senior Services	Social & Health	La Casa De Don Pedro	317 Roseville Ave	Newark	07107	973-485-7933	Essex	SSA
Senior Services	Social & Health	Liberty Square Senior Center	240 Elizabeth Avenue	Elizabeth	07206	908-820-4700	Union	SSA

PROVIDER GROUP	PROVIDER MAP CLASS	PROVIDER NAME	STREET ADDRESS	MUNICIPALITY	ZIP CODE	PHONE #	COUNTY	SERVICE AREA
Senior Services	Social & Health	Maplewood Senior Citizens	120 Burnett Avenue	Maplewood	07040	973-763-0750	Essex	SSA
Senior Services	Social & Health	North Newark Senior Citizens	664 Broadway	Newark	07104	973-424-4100	Essex	SSA
Senior Services	Social & Health	North Ward Center	346 Mt. Prospect Ave	Newark	07104	973-481-0415	Essex	SSA
Senior Services	Social & Health	O'Donnell-Dempsey Senior Center	618 Salem Avenue	Elizabeth	07208	908-354-7431	Union	SSA
Senior Services	Social & Health	Peterstown Community Center	418-34 Palmer Street	Elizabeth	07202	908-353-9806	Union	SSA
Senior Services	Social & Health	Roselle Community Center	1268 Shaffer Avenue	Roselle	07203	908-245-6717	Union	SSA
Senior Services	Social & Health	South Orange Senior Circle	5 Mead Street	South Orange	07079	973-378-7761	Essex	SSA
Senior Services	Social & Health	The Salvation Army Boys & Girls Club and Senior Center of Ironbound	11 Providence Street	Newark	07105	973-344-2698	Essex	SSA
Senior Services	Social & Health	Union Township Senior Center	968 Bonel Court	Union	07083	908-851-5290	Union	SSA
Senior Services	Social & Health	West Ward Center	505 West Market St	Newark	07107	973-481-5526	Essex	SSA
Senior Services	Social & Health	YM-YWHA	501 Green Lane	Union	07083	908-289-8112	Union	SSA
Senior Services	Medical - Adult Day Care	Birchwood Adult Day Care Center	115 Evergreen Place	East Orange	07018	(973)676-2600	Essex	PSA
Senior Services	Medical - Adult Day Care	Chancellor Specialty Care Adult Day Center	155 Fortieth Street	Irvington	07111	(973)371-7878	Essex	PSA
Senior Services	Medical - Adult Day Care	Goodlife Adult Day Care	515 North Arlington Avenue	East Orange	07017	(973)674-5100	Essex	PSA
Senior Services	Medical - Adult Day Care	Happy Days Adult Day Healthcare Center, L.L.C.	67 So Munn Ave	East Orange	07018	(973)678-0755	Essex	PSA
Senior Services	Medical - Adult Day Care	Happy Days II Adult Day Healthcare, L.L.C.	1060 Broad Street	Newark	07102	(973)643-3500	Essex	PSA
Senior Services	Medical - Adult Day Care	New Community Extended Care Facility	266 South Orange Avenue	Newark	07103	(973)624-2020	Essex	PSA
Senior Services	Medical - Adult Day Care	Newark Beth Israel Medical Center - Adult Day Health Care Center	120 Lyons Avenue	Newark	07112	(973)926-3004	Essex	PSA
Senior Services	Medical - Adult Day Care	Newark Health and Extended Care Facility	65 Jay Street	Newark	07103	(973)483-6800	Essex	PSA
Senior Services	Medical - Adult Day Care	1st Cerebral Palsy of New Jersey	7 Sanford Avenue	Belleville	07109	(973)751-0200	Essex	SSA
Senior Services	Medical - Adult Day Care	2nd Home Elizabeth, LLC	420-432 North Broad Street	Elizabeth	07208	(908)436-0018	Union	SSA
Senior Services	Medical - Adult Day Care	2nd Home Newark Operations, LLC	717-727 Broadway	Newark	07104	(973)268-1212	Essex	SSA
Senior Services	Medical - Adult Day Care	Bayonne Adult Medical Day Care Center	801-803 Broadway	Bayonne	07002	(201)243-0035	Hudson	SSA
Senior Services	Medical - Adult Day Care	Belleville Senior Services	518 Washington Avenue	Belleville	07109	(973)751-6000	Essex	SSA
Senior Services	Medical - Adult Day Care	Cedar Harbor Medical Day Care Center	545 East 1st Avenue	Roselle	07203	(908)298-8588	Union	SSA
Senior Services	Medical - Adult Day Care	Daybreak Adult Daycare At Elizabeth	712 Newark Avenue	Elizabeth	07208	(908)353-3530	Union	SSA
Senior Services	Medical - Adult Day Care	Five Star Adult Medical Day Care Center	1201 Deerfield Terrace	Linden	07036	(908)486-5750	Union	SSA
Senior Services	Medical - Adult Day Care	Home Sweet Home Adult Day Care Center	550 North Broad Street	Elizabeth	07208	(908)994-0050	Union	SSA
Senior Services	Medical - Adult Day Care	Premier Adult Day Care Center Orange	37 North Day Street	Orange	07050	(973)395-9800	Essex	SSA

PROVIDER GROUP	PROVIDER MAP CLASS	PROVIDER NAME	STREET ADDRESS	MUNICIPALITY	ZIP CODE	PHONE #	COUNTY	SERVICE AREA
Senior Services	Medical - Adult Day Care	Sunflower Medical Adult Day Care	300 Broadway	Bayonne	07002	(201)243-0666	Hudson	SSA
Senior Services	Medical - Adult Day Care	The ARC of Union County, Inc.	215 East 1st Ave	Roselle	07203	(908)259-4992	Union	SSA
Senior Services	Medical - Adult Day Care	The North Ward Center	288 298 Mt Prospect Avenue	Newark	07104	(973)481-6145	Essex	SSA
Senior Services	Medical - Adult Day Care	Town Square At Amber Court	1155 East Jersey Street	Elizabeth	07201	(908)352-9200	Union	SSA
Family & Social Support Services	School Linked Services	13th Avenue School	359 13th Avenue	Newark	07108	(973) 399-3400 ext. 170	Essex	PSA
Family & Social Support Services	School Linked Services	Avon Avenue School	237 Avon Avenue	Newark	07108	(973) 399-3400 ext. 170	Essex	PSA
Family & Social Support Services	School Linked Services	Boylan Street School	15 Boylan Street	Newark	07106	(973) 374-2000	Essex	PSA
Family & Social Support Services	School Linked Services	Dayton Street School	226 Dayton Street	Newark	07114	(973) 297-0040	Essex	PSA
Family & Social Support Services	School Linked Services	Dr. E. Alma Flagg School	150 Third Street	Newark	07108	(973) 399-3400 ext. 170	Essex	PSA
Family & Social Support Services	School Linked Services	Essex County Technical Career Center	91 West Market Street	Newark	07103	(973) 662-1100 ext. 4081	Essex	PSA
Family & Social Support Services	School Linked Services	George Washington Carver School	333 Clinton Place	Newark	07112	(973) 705-3800	Essex	PSA
Family & Social Support Services	School Linked Services	Irvington High School	PO Box 153	Irvington	07111	(973) 399-7797	Essex	PSA
Family & Social Support Services	School Linked Services	Langston Huges Elementary School	181 Elmwood Avenue	East Orange	07018	(973) 266-5870	Essex	PSA
Family & Social Support Services	School Linked Services	Malcolm X. Shabazz School	80 Johnson Avenue	Newark	07108	(973) 733-6760	Essex	PSA
Family & Social Support Services	School Linked Services	Mount Vernon School	142 Mt. Vernon Place	Newark	07106	(973) 374-2090	Essex	PSA
Family & Social Support Services	School Linked Services	Newark Vo-Tech High School	91 West Market Street	Newark	07103	973-662-1100 ext. 4010	Essex	PSA
Family & Social Support Services	School Linked Services	Newton Street School	150 Newton Street	Newark	07103	(973) 242-7934	Essex	PSA
Family & Social Support Services	School Linked Services	Quitman Community School	21 Quitman Street	Newark	07103	(973) 733-6947	Essex	PSA
Family & Social Support Services	School Linked Services	South 17th Street School	619 South 17th Street	Newark	07103	(973) 374-5252	Essex	PSA
Family & Social Support Services	School Linked Services	Speedway Avenue School	26 Speedway Avenue	Newark	07106	(973) 374-2000	Essex	PSA
Family & Social Support Services	School Linked Services	University Middle School	255 Myrtle Avenue	Irvington	07111	(973) 399-7797	Essex	PSA
Family & Social Support Services	School Linked Services	William H. Brown Academy	659 Bergen Street	Newark	07108	(973) 733-9457	Essex	PSA

PROVIDER GROUP	PROVIDER MAP CLASS	PROVIDER NAME	STREET ADDRESS	MUNICIPALITY	ZIP CODE	PHONE #	COUNTY	SERVICE AREA
Family & Social Support Services	School Linked Services	Barringer High School	90 Parker Street	Newark	07104	(973) 350-8583	Essex	SSA
Family & Social Support Services	School Linked Services	Columbia High School	17 Parker Avenue	Maplewood	07040	(973) 762-5600 ext. 1188	Essex	SSA
Family & Social Support Services	School Linked Services	Franklin Elementary School	42 Park Avenue	Newark	07104	(973) 483-2703	Essex	SSA
Family & Social Support Services	School Linked Services	Hawkins Street School	8 Hawkins Street	Newark	07105	(973) 465-0947	Essex	SSA
Family & Social Support Services	School Linked Services	Maplewood Middle School	7 Burnett Street	Maplewood	07040	(973) 378-7660	Essex	SSA
Family & Social Support Services	School Linked Services	Orange High School	400 Lincoln Avenue	Orange	07050	(973) 677-4050 ext. 5019	Essex	SSA
Family & Social Support Services	School Linked Services	Orange Middle School	400 Central Avenue	Newark	07050	(973) 672-9500 ext. 222	Essex	SSA
Family & Social Support Services	Family & Parenting Services	East Orange Community Development Corporation	490 Main St	East Orange	07017	(973) 266 - 5315	Essex	PSA
Family & Social Support Services	Family & Parenting Services	Irvington Family Development Center	50 Union Avenue	Irvington	07111	(973) 372-4353	Essex	PSA
Family & Social Support Services	Family & Parenting Services	East Orange Family Success Center	60 Evergreen Place	East Orange	07018	(973) 395-1442	Essex	PSA
Family & Social Support Services	Family & Parenting Services	Newark Central Ward Family Success Center	982 Broad Street	Newark	07102	(973) 643-5727	Essex	PSA
Family & Social Support Services	Family & Parenting Services	New Community Corporation Family Success Center	131-185 Bergen St	Newark	07103	(973) 565 - 9500	Essex	PSA
Family & Social Support Services	Family & Parenting Services	FOCUS Hispanic Center for Community Development Family Success Center	441-443 Broad St	Newark	07102	(973) 624 - 2528 Ext: 131	Essex	PSA
Family & Social Support Services	Family & Parenting Services	Newark Now Bradley Court Family Success Center	48 N Munn Ave Suite 12	Newark	07106	(973) 991 - 1290	Essex	PSA
Family & Social Support Services	Family & Parenting Services	Northern New Jersey Maternal & Child Health Consortium Irvington Family Development Center Family Success Center	50 Union Ave Suite 403	Irvington	07111	(973) 372 - 4353 Ext: 17	Essex	PSA
Family & Social Support Services	Family & Parenting Services	Independence: A Family of Services East Orange Family Success Center	60 Evergreen Place Suite 307	East Orange	07018	(973) 395 - 1442	Essex	PSA
Family & Social Support Services	Family & Parenting Services	Salvation Army, Newark Area Services Grandfamilies Family Success Center	699 Springfield Ave	Newark	07103	(973) 374 - 5809	Essex	PSA

PROVIDER GROUP	PROVIDER MAP CLASS	PROVIDER NAME	STREET ADDRESS	MUNICIPALITY	ZIP CODE	PHONE #	COUNTY	SERVICE AREA
Family & Social Support Services	Family & Parenting Services	Newark Now Seth Boyden Terrace Family Success Center	755 Frelinghuysen Ave	Newark	07114	(973) 424 - 0300	Essex	PSA
Family & Social Support Services	Family & Parenting Services	Newark Emergency Services for Families Central and West Wards Family Success Center	982 Broad St	Newark	07102	(973) 643 - 5727 Ext: 236	Essex	PSA
Family & Social Support Services	Family & Parenting Services	Independence: A Family of Services East Orange Family Success Center	60 Evergreen Place Suite 307	East Orange	07018	(973) 395 - 1442	Essex	PSA
Family & Social Support Services	Family & Parenting Services	Catholic Charities of the Archdiocese of Newark Feldman Child & Family Development Ctr	1160 Raymond Blvd	Newark	07102	(973) 596 - 3925	Essex	PSA
Family & Social Support Services	Family & Parenting Services	New Community Corporation Department of Human Services	233 W Market St	Newark	07103	(973) 639 - 7826	Essex	PSA
Family & Social Support Services	Family & Parenting Services	Isaiah House Community Creche	238 N Munn Ave	East Orange	07017	(973) 678 - 5882	Essex	PSA
Family & Social Support Services	Family & Parenting Services	Community Agencies Corp.	25 James St	Newark	07102	(973) 621 - 2273	Essex	PSA
Family & Social Support Services	Family & Parenting Services	Young Life Greater Newark Metro Young Life Community Outreach Center	272-276 Chancellor Ave	Newark	07112	(973) 923 - 6007	Essex	PSA
Family & Social Support Services	Family & Parenting Services	New Community Corporation Care at Home	274 S Orange Ave	Newark	07103	(973) 412 - 2000	Essex	PSA
Family & Social Support Services	Family & Parenting Services	Youth Consultation Service Family Crisis	284 Broadway	Newark	07104	(973) 482 - 8411	Essex	SSA
Family & Social Support Services	Family & Parenting Services	Marriage & Family Counseling Center	387 Union Ave	Belleville	07109	(201) 445 - 9730	Essex	SSA
Family & Social Support Services	Family & Parenting Services	Foundation of UMDNJ September 11 Children & Youth Support	65 Bergen St Suite 1551	Newark	07107	(973) 972 - 4830	Essex	SSA
Family & Social Support Services	Family & Parenting Services	Ironbound Family Success Center	179 Van Buren Street	Newark	07105	(973) 589-3353	Essex	SSA
Family & Social Support Services	Family & Parenting Services	Newark Now Georgia King Village Family Success Center	250 Georgia King Village Level 1	Newark	07107	(973) 621 - 2221	Essex	SSA
Family & Social Support Services	Family & Parenting Services	North Ward Center Family Success Center	286 Mt Prospect Ave	Newark	07104	(973) 485 - 5723	Essex	SSA
Family & Social Support Services	Family & Parenting Services	Ironbound Community Corporation Cortland St Family Success Center	29-31 Courtland St	Newark	07105	(973) 344 - 5949	Essex	SSA
Family & Social Support Services	Family & Parenting Services	Family Connections Senior Outreach Program	395 S Center St	Orange	07050	(973) 675 - 3817	Essex	SSA
Family & Social Support Services	Family & Parenting Services	Family Connections Orange Family Success Center	170 Scotland Rd	Orange	07050	(973) 677 - 2500	Essex	SSA

PROVIDER GROUP	PROVIDER MAP CLASS	PROVIDER NAME	STREET ADDRESS	MUNICIPALITY	ZIP CODE	PHONE #	COUNTY	SERVICE AREA
Family & Social Support Services	Family & Parenting Services	Family Connections Family Crisis Intervention Program	395 S Center St	Orange	07050	(973) 675 - 3817	Essex	SSA
Family & Social Support Services	Family & Parenting Services	Make-A-Wish Foundation	1034 Salem Rd	Union	07083	(908) 964 - 5055	Union	SSA
Family & Social Support Services	Family & Parenting Services	American Lung Association of NJ Family Asthma Support Groups	1600 Route 22 E	Union	07083	(905) 687 - 9340	Essex	SSA
Family & Social Support Services	Nursery and Child Care	Newark Federal Kids Care	970 Broad St	Newark	07102	973-645-3130	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Smart Start	91 W. Market St	Newark	07103	973-623-1100	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Sunset Christian Academy	890 S Orange Ave	Newark	07106	(973) 372-5076	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Community Hills Early Learning Center	85 Irvine Turner Blvd	Newark	07103	(973) 621-0852	Essex	PSA
Family & Social Support Services	Nursery and Child Care	The Leaguers, Inc. Preschool Learning Academy	826 South 10th Street	Newark	07108	973-242-7737	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Bradley Court Day Care Center	78 N Munn Ave	Newark	07106	973) 375-3800	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Bethesda Academy	772 Martin Luther King Jr Blvd	Newark	07102	(973) 642-9489	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Babyland Family Services Inc.	755 South Orange Ave	Newark	07106	(973) 399-3400	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Kiddie Korner Learning Center	740 S 18th St	Newark	07103	(973) 375-1222	Essex	PSA
Family & Social Support Services	Nursery and Child Care	The Leaguers, Inc. Preschool Learning Academy	731 Clinton Avenue	Newark	07108	973-375-6840	Essex	PSA
Family & Social Support Services	Nursery and Child Care	United Day Care	702 S 14th St	Newark	07103	(973) 642-2799	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Tri-City People's	675 South 19th Street	Newark	07103	973-374-5252	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Rising Sun Academy	535 MLK Jr. Boulevard	Newark	07102	973-286-0026	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Full Gospel Christian Academy	531 South Orange Ave.	Newark	07103	973-372-1492	Essex	PSA
Family & Social Support Services	Nursery and Child Care	East Orange Community Development Corporation East Orange Community Development Corporation	490 Main St	East Orange	07017	(973) 266 - 5315	Essex	PSA

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Family & Social Support Services	Nursery and Child Care	St. Joseph's Day Care Center Annex	49 12th Ave.	Newark	07103	973-643-2411	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Vailsburg Child Development Center	462 Sandford Avenue	Newark	07106	973-371-3450	Essex	PSA
Family & Social Support Services	Nursery and Child Care	FOCUS Hispanic Center for Community Development At Risk Mentoring Program	441-443 Broad St	Newark	07102	(973) 624 - 2528 Ext 141 or 131	Essex	PSA
Family & Social Support Services	Nursery and Child Care	UVSO Alexander NJ After 3 Program	43 Alexander Street	Newark	07106	973-642-2799	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Page Academy II	426-428 Chancellor Ave	Newark	07112	973-705-9500	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Clinton Hill Community & Early Childhood Center Incorporated	420 Hawthorne Ave	Newark	07112	(973) 372-8877	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Sarah Ward Nursery Vailsburg	406 Sanford Ave	Newark	07106	973-371-5371	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Early Childhood Learning Institute	403 University Ave	Newark	07102	(973) 622-4641	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Kretchmer Homes	35 Van Vechten	Newark	07114	973-824-0111	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Chen School	32 Central Ave	Newark	07102	973-624-1681	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Minnie's Learning Playhouse II, LLC	315-317 Hawthorne Ave	Newark	07112	973-596-9633	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Newark Day Center	305 Halsey St	Newark	07102	973-643-5710	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Sunshine Day Care	286 S 7th St	Newark	07103	(973) 623-8400	Essex	PSA
Family & Social Support Services	Nursery and Child Care	The Leaguers, Inc. Preschool Learning Academy	28 Grant Street	Newark	07103	973-497-0477	Essex	PSA
Family & Social Support Services	Nursery and Child Care	NCC Harmony House Early Learning Center	278 South Orange Ave	Newark	07103	973-623-8555	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Young Life Greater Newark Metro Young Life Community Outreach Center	272-276 Chancellor Ave	Newark	07112	(973) 923 - 6007	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Sarah Ward Day Nursery	27 Jay St	Newark	07103	973-482-3593	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Community Agencies Corp.	25 James St	Newark	07102	(973) 621 - 2273	Essex	PSA



PROVIDER GROUP	PROVIDER MAP CLASS	PROVIDER NAME	STREET ADDRESS	MUNICIPALITY	ZIP CODE	PHONE #	COUNTY	SERVICE AREA
Family & Social Support Services	Nursery and Child Care	Protestant Community Center Suburban Cultural Enrichment Education Pro	25 James St	Newark	07102	(973) 565 - 0376	Essex	PSA
Family & Social Support Services	Nursery and Child Care	New Life Child Care	246 S. 19th Street	Newark	07103	973-371-1111	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Isaiah House Community Creche	238 N Munn Ave	East Orange	07017	(973) 678 - 5882	Essex	PSA
Family & Social Support Services	Nursery and Child Care	The Center, Inc	23-35 Elizabeth Avenue	Newark	07108	973-242-0022	Essex	PSA
Family & Social Support Services	Nursery and Child Care	New Community Corporation Department of Human Services	233 W Market St	Newark	07103	(973) 639 - 7826	Essex	PSA
Family & Social Support Services	Nursery and Child Care	King Memorial Day Nursery Incorporated	224 W Kinney St	Newark	07103	(973) 642-4327	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Community Masjid	214 Chancellor Ave	Newark	07112	973-926-8927	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Babyland Family Services, Inc	200 S Orange Avenue	Newark	07103	(973) 623-8016	Essex	PSA
Family & Social Support Services	Nursery and Child Care	St Josephs Day Care Center	187 W Market St	Newark	07103	(973) 643-2411	Essex	PSA
Family & Social Support Services	Nursery and Child Care	The Child Care Center at Newark Beth Israel Medical Center	176 Lyons Avenue	Newark	07112	973-926-3999	Essex	PSA
Family & Social Support Services	Nursery and Child Care	New Life Child Care Phase II	167 South 6th St.	Newark	07103	973-371-1111	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Scudder Homes Children Day Care Center	165 Court St	Newark	07103	(973) 643-3881	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Wisommm Holistic Child Care Center	15 James St	Newark	07102	(973) 297-0300	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Sunshine Daycare Center Incorporated	14 William St	Newark	07102	(973) 623-3600	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Kindercare Learning Center	132-142 Cabinet St.	Newark	07102	973-623-0182	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Rising Star Learning Center	126 Lyons Ave	Newark	07112	(973) 923-6999	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Grace West Child Care	125 Avon Avenue	Newark	07108	973-484-5166	Essex	PSA
Family & Social Support Services	Nursery and Child Care	St. Justine Nursery Inc	119-37 Clifford St	Newark	07112	973-589-3265	Essex	PSA
Family & Social Support Services	Nursery and Child Care	New Hope Development Day Care Center Incorporated	111 Sussex Ave	Newark	07103	(973) 622-6580	Essex	PSA
Family & Social Support Services	Nursery and Child Care	St Anns Community Day Care Center	110 16th Ave	Newark	07103	(973) 642-4018	Essex	PSA

PROVIDER GROUP	PROVIDER MAP CLASS	PROVIDER NAME	STREET ADDRESS	MUNICIPALITY	ZIP CODE	PHONE #	COUNTY	SERVICE AREA
Family & Social Support Services	Nursery and Child Care	Precious Littles Early Childhood Development Center Incorporated	1099 S Orange Ave	Newark	07106	(973) 371-2451	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Sarah Ward Nursery	105 Lock Street	Newark	07103	973-645-0442	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Bright Horizons Center	100 Mulberry St.	Newark	07102	973-565-0058	Essex	PSA
Family & Social Support Services	Nursery and Child Care	Boys and Girls Club of Union County	934 Stuyvesant Ave 2nd Floor	Union	07083	(908) 687 - 7976	Union	SSA
Family & Social Support Services	Nursery and Child Care	Lacasa de Don Pedro Early Childhood Development	75 Park Ave	Newark	07104	973-485-0850	Essex	SSA
Family & Social Support Services	Nursery and Child Care	Our Small World Day Care Learning Center	665 Summer Ave	Newark	07104	(973) 497-0600	Essex	SSA
Family & Social Support Services	Nursery and Child Care	Page Academy	530 Central Ave	Newark	07107	(973) 622-5333	Essex	SSA
Family & Social Support Services	Nursery and Child Care	YM-YWHA of Union County	501 Green Lane	Union	07083	(908) 289 - 8112	Union	SSA
Family & Social Support Services	Nursery and Child Care	Kays Christian Place & Learning Center	45 McWhorter St	Newark	07105	(973) 465-5616	Essex	SSA
Family & Social Support Services	Nursery and Child Care	Ironbound Community Corporation After School Program	432 Lafayette St	Newark	07105	(973) 465 - 0947	Essex	SSA
Family & Social Support Services	Nursery and Child Care	Lacasa de Don Pedro Early Childhood Development	39 Broadway	Newark	07104	(973) 481-4091	Essex	SSA
Family & Social Support Services	Nursery and Child Care	North Ward Child Development Center	346 Mt. Prospect	Newark	07104	973-481-1023	Essex	SSA
Family & Social Support Services	Nursery and Child Care	North Ward Center Yoh and Family Outreach	346 Mt Prospect Ave	Newark	07104	(973) 481 - 0415	Essex	SSA
Family & Social Support Services	Nursery and Child Care	North Ward Child Development Center	341 Roseville Ave	Newark	07107	(973) 481-2122	Essex	SSA
Family & Social Support Services	Nursery and Child Care	Provision of Promise	33 Littleton Ave	Newark	07107	973-923-6999	Essex	SSA
Family & Social Support Services	Nursery and Child Care	Kiddie Korner Learning Center	319 Verona Ave	Newark	07104	(973) 484-5166	Essex	SSA
Family & Social Support Services	Nursery and Child Care	Union Township Community Action Organization	2410 Springfield Ave	Vauxhall	07088	(908) 686 - 6150	Union	SSA
Family & Social Support Services	Nursery and Child Care	Family Resource Network Kidz Korner	228 Ridge St	Newark	07104	(973) 244 - 0850	Essex	SSA

PROVIDER GROUP	PROVIDER MAP CLASS	PROVIDER NAME	STREET ADDRESS	MUNICIPALITY	ZIP CODE	PHONE #	COUNTY	SERVICE AREA
Family & Social Support Services	Nursery and Child Care	Urban League of Union County Whitney M. Young Day Care Center	211 Bond St	Elizabeth	07206	(908) 352 - 3535	Union	SSA
Family & Social Support Services	Nursery and Child Care	YMCA of Eastern Union County Child Care Five Points Branch	201 Tucker Ave	Union	07083	(908) 349 - 9622	Union	SSA
Family & Social Support Services	Nursery and Child Care	Perpetual Help Day Nursery	170 Broad St	Newark	07104	973-484-3535	Essex	SSA
Family & Social Support Services	Nursery and Child Care	YMCA of Eastern Union County Child care	16-22 Jefferson Ave	Elizabeth	07201	(905)-355 - 3061	Union	SSA
Family & Social Support Services	Nursery and Child Care	First Steps Child Care Center	15 South 9th St	Newark	07107	973-485-8200	Essex	SSA
Family & Social Support Services	Nursery and Child Care	Alice's Friendly Day Care	14 Napoleon Street	Newark	07105	(973) 817-8469	Essex	SSA
Family & Social Support Services	Nursery and Child Care	Rutgers Cooperative Extension of Essex County Family & Community Health Sciences Expanded Food & Nutrition	115 Clifton Ave	Newark	07104	(973) 268 - 5447	Essex	SSA
Family & Social Support Services	Nursery and Child Care	Shiloh Rainbow Academy	110 Davenport Ave	Newark	07107	(973) 482-8888	Essex	SSA
Family & Social Support Services	Nursery and Child Care	Union Economic Development Corp. Child Care Initiative	1085 Morris Ave Liberty Hall Center Suite 531	Union	07083	(908) 527 - 1166	Union	SSA
Family & Social Support Services	Nursery and Child Care	West Ward Early Childhood Development Program	107-113 Roseville Avenue	Newark	07107	973-482-6602	Essex	SSA
Family & Social Support Services	Early Childhood Services	Irvington Family Development Center	50 Union Avenue	Irvington	07111	(973) 372-4353	Essex	PSA
Family & Social Support Services	Early Childhood Services	Essex Valley VNA	274 South Orange Avenue	Newark	07103	(973) 412-2023	Essex	PSA
Family & Social Support Services	Early Childhood Services	Nurturing Parenting Program	106 Valley Street	South Orange	07079	(973) 275-1570	Essex	SSA
Family & Social Support Services	Early Childhood Services	Youth Consultation Service	284 Broadway	Newark	07104	(973) 395-5500	Essex	SSA
Family & Social Support Services	Early Childhood Services	Township of Orange School District	451 Lincoln Avenue	Orange	07050	(973) 677-4015 ext. 6057	Essex	SSA
Family & Social Support Services	Domestic Violence & Child Abuse Support Services	New Community Corporation Family Success Center	131-185 Bergen St	Newark	07103	(973) 565 - 9500	Essex	PSA
Family & Social Support Services	Domestic Violence & Child Abuse Support Services	FOCUS Hispanic Center for Community Development Family Success Center	441-443 Broad St	Newark	07102	(973) 624 - 2528 Ext: 131	Essex	PSA
Family & Social Support Services	Domestic Violence & Child Abuse Support Services	Newark Now Bradley Court Family Success Center	48 N Munn Ave Suite 12	Newark	07106	(973) 991 - 1290	Essex	PSA

PROVIDER GROUP	PROVIDER MAP CLASS	PROVIDER NAME	STREET ADDRESS	MUNICIPALITY	ZIP CODE	PHONE #	COUNTY	SERVICE AREA
Family & Social Support Services	Domestic Violence & Child Abuse Support Services	Northern New Jersey Maternal & Child Health Consortium Irvington Family Development Center Family Success Center	50 Union Ave Suite 403	Irvington	07111	(973) 372 - 4353 Ext: 17	Essex	PSA
Family & Social Support Services	Domestic Violence & Child Abuse Support Services	Independence: A Family of Services East Orange Family Success Center	60 Evergreen Place Suite 307	East Orange	07018	(973) 395 - 1442	Essex	PSA
Family & Social Support Services	Domestic Violence & Child Abuse Support Services	Salvation Army, Newark Area Services Grandfamilies Family Success Center	699 Springfield Ave	Newark	07103	(973) 374 - 5809	Essex	PSA
Family & Social Support Services	Domestic Violence & Child Abuse Support Services	Newark Now Seth Boyden Terrace Family Success Center	755 Frelinghuysen Ave	Newark	07114	(973) 424 - 0300	Essex	PSA
Family & Social Support Services	Domestic Violence & Child Abuse Support Services	Babyland Family Services Family Success Center	755 S Orange Ave	Newark	07106	(973)-399-3400	Essex	PSA
Family & Social Support Services	Domestic Violence & Child Abuse Support Services	Newark Emergency Services for Families Central and West Wards Family Success Center	982 Broad St	Newark	07102	(973) 643 - 5727 Ext: 236	Essex	PSA
Family & Social Support Services	Domestic Violence & Child Abuse Support Services	Family Violence Program	755 South Orange Avenue	Newark	07106	(973) 484-1704	Essex	PSA
Family & Social Support Services	Domestic Violence & Child Abuse Support Services	Family Connections Orange Family Success Center	170 Scotland Rd	Orange	07050	(973) 677 - 2500	Essex	SSA
Family & Social Support Services	Domestic Violence & Child Abuse Support Services	Newark Now Georgia King Village Family Success Center	250 Georgia King Village Level 1	Newark	07107	(973) 621 - 2221	Essex	SSA
Family & Social Support Services	Domestic Violence & Child Abuse Support Services	North Ward Center Family Success Center	286 Mt Prospect Ave	Newark	07104	(973) 485 - 5723	Essex	SSA
Family & Social Support Services	Domestic Violence & Child Abuse Support Services	Ironbound Community Corporation Cortland St Family Success Center	29-31 Courtland St	Newark	07105	(973) 344 - 5949	Essex	SSA
Family & Social Support Services	Other Counseling & Support Services	New Community Corporation Family Success Center	131-185 Bergen St	Newark	07103	(973) 565 - 9500	Essex	PSA
Family & Social Support Services	Other Counseling & Support Services	New Community Corporation Department of Human Services	233 W Market St	Newark	07103	(973) 639 - 7826	Essex	PSA

PROVIDER GROUP	PROVIDER MAP CLASS	PROVIDER NAME	STREET ADDRESS	MUNICIPALITY	ZIP CODE	PHONE #	COUNTY	SERVICE AREA
Family & Social Support Services	Other Counseling & Support Services	New Community Corporation Essex County Department of Human Development	234 W Market St	Newark	07103	(973) 623 - 2800	Essex	PSA
Family & Social Support Services	Other Counseling & Support Services	Isaiah House Community Creche	238 N Munn Ave	East Orange	07017	(973) 678 - 5882	Essex	PSA
Family & Social Support Services	Other Counseling & Support Services	Community Agencies Corp.	25 James St	Newark	07102	(973) 621 - 2273	Essex	PSA
Family & Social Support Services	Other Counseling & Support Services	Young Life Greater Newark Metro Young Life Community Outreach Center	272-276 Chancellor Ave	Newark	07112	(973) 923 - 6007	Essex	PSA
Family & Social Support Services	Other Counseling & Support Services	New Community Corporation Care at Home	274 S Orange Ave	Newark	07103	(973) 412 - 2000	Essex	PSA
Family & Social Support Services	Other Counseling & Support Services	North Jersey Community Research Initiative (NJCRI) Community Support Center	393 Central Ave	Newark	07103	(973) 483 - 3444	Essex	PSA
Family & Social Support Services	Other Counseling & Support Services	New Community Corporation Employment Services Center - CET	393 Central Ave	Newark	07102	(973) 484 - 0096	Essex	PSA
Family & Social Support Services	Other Counseling & Support Services	FOCUS Hispanic Center for Community Development Family Success Center	441-443 Broad St	Newark	07102	(973) 624 - 2528 Ext: 131	Essex	PSA
Family & Social Support Services	Other Counseling & Support Services	Newark Now Bradley Court Family Success Center	48 N Munn Ave Suite 12	Newark	07106	(973) 991 - 1290	Essex	PSA
Family & Social Support Services	Other Counseling & Support Services	Northern New Jersey Maternal & Child Health Consortium Irvington Family Development Center Family Success Center	50 Union Ave Suite 403	Irvington	07111	(973) 372 - 4353 Ext: 17	Essex	PSA
Family & Social Support Services	Other Counseling & Support Services	Independence: A Family of Services East Orange Family Success Center	60 Evergreen Place	East Orange	07018	(973) 395 - 1442	Essex	PSA
Family & Social Support Services	Other Counseling & Support Services	Salvation Army, Newark Area Services Grandfamilies Family Success Center	699 Springfield Ave	Newark	07103	(973) 374 - 5809	Essex	PSA
Family & Social Support Services	Other Counseling & Support Services	Newark Now Seth Boyden Terrace Family Success Center	755 Frelinghuysen Ave	Newark	07114	(973) 424 - 0300	Essex	PSA

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Family & Social Support Services	Other Counseling & Support Services	Babyland Family Services Family Success Center	755 S Orange Ave	Newark	07106	(973)-399-3400	Essex	PSA
Family & Social Support Services	Other Counseling & Support Services	Newark Emergency Services for Families Central and West Wards Family Success Center	982 Broad St	Newark	07102	(973) 643 - 5727 Ext: 236	Essex	PSA
Family & Social Support Services	Other Counseling & Support Services	Make-A-Wish Foundation	1034 Salem Rd	Union	07083	(908) 964 - 5055	Union	SSA
Family & Social Support Services	Other Counseling & Support Services	Apostle's House Support Group	16-18 Grant St	Newark	07104	(973) 482 - 0625	Essex	SSA
Family & Social Support Services	Other Counseling & Support Services	Family Connections Orange Family Success Center	170 Scotland Rd	Orange	07050	(973) 677 - 2500	Essex	SSA
Family & Social Support Services	Other Counseling & Support Services	Newark Now Georgia King Village Family Success Center	250 Georgia King Village	Newark	07107	(973) 621 - 2221	Essex	SSA
Family & Social Support Services	Other Counseling & Support Services	North Ward Center Family Success Center	286 Mt Prospect Ave	Newark	07104	(973) 485 - 5723	Essex	SSA
Family & Social Support Services	Other Counseling & Support Services	Urban League of Union County Housing and Community Development	288 N Broad St.	Elizabeth	07208	(908) 351 - 7200	Union	SSA
Family & Social Support Services	Other Counseling & Support Services	Ironbound Community Corporation Cortland St Family Success Center	29-31 Courtland St	Newark	07105	(973) 344 - 5949	Essex	SSA