



State of New Jersey
DEPARTMENT OF HEALTH

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Governor

TAKESHA L. WAY
Lt. Governor

www.nj.gov/health

JEFFREY A. BROWN
Acting Commissioner

HEIGHTS UNIVERSITY HOSPITAL
(NJ Facility ID# NJ10902)

INFORMATION REQUIREMENT
ORDER

TO: Dr. Nizar Kifaieh, System President and CEO
Heights University Hospital
176 Palisade Avenue
Jersey City, New Jersey 07306
nkifaieh@hudsonregionalhospital.com

Dear Dr. Kifaieh:

As more fully detailed below, effective immediately, the New Jersey Department of Health (the Department) hereby orders Heights University Hospital (Heights or the hospital) to submit to the Department daily patient census information, which is needed by the Department to ensure patient safety in view of the hospital's request for an expedited, staged closure.

The Department is vested with the responsibility of carrying out the provisions of the Health Care Facilities Planning Act (the Act), N.J.S.A. 26:2H-1 et seq., which provides a statutory scheme designed to ensure that all health care facilities are of the highest quality. Pursuant to N.J.S.A. 26:2H-5(a), and the Department's rules, N.J.A.C. 8:43E-1.1 et seq. (General Licensure Procedures and Standards Applicable to All Licensed Facilities), the Commissioner of Health is authorized to inspect all health care facilities and to enforce N.J.A.C. 8:43G-1.1 et seq. (Hospital Licensure Standards). In particular, the Commissioner is empowered to "inquire into health care services and the operation of health care facilities and to conduct periodic inspections of such facilities with respect to the fitness and adequacy of the premises, equipment, personnel, rules and bylaws and the adequacy of financial resources and sources of future revenues." N.J.S.A. 26:2H-5(a). Further, pursuant to N.J.S.A. 26:2H-5(e), at the request of the Commissioner, health care facilities shall furnish to the Department such reports and information as the Department may require to effectuate the provisions and purposes of the Act.

IMPENDING CLOSURE

On October 14, 2025, Heights submitted to the Department a Certificate of Need application requesting a staged hospital closure. The two-phase closure plan submitted with the application provides for complete closure of the facility by November 10, 2025. According to the application, the hospital acknowledges that despite the "oversight, guidance, and support of a state mandated fiscal monitor," the hospital continues to experience "ongoing and unsustainable financial losses, despite substantial investments and operational

interventions." The hospital asserts that it continues to face operating losses exceeding \$60 million annually since assuming ownership after its predecessor CarePoint's exit from bankruptcy in May 2025. The facility claimed that it would not meet its payroll funding by end of day on October 15th and that critical services such as the cardiac catheterization laboratory and neuro-intervention would have to be suspended due to lack of supplies. The hospital requested funding from the state to meet payroll and to allow for an orderly closure of the hospital with an expedited process over four weeks. On October 16, 2025, the State advanced \$2 million to the hospital so that it could meet payroll.

INFORMATION REQUIREMENT ORDER

Due to Height's alleged financial distress, and to ensure the health and safety of the hospital's patients in the event of a closure or disruption of services, the Department is requiring the hospital to report its patient census details on the attached spreadsheet, pursuant to N.J.S.A. 26:2H-5 and N.J.A.C. 8:43E-3.1. As set forth in the attached spreadsheet, the hospital shall report to the Department the following statistical information:

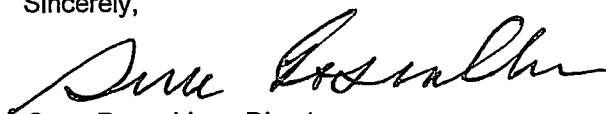
1. Total hospital census
2. For both Specialty and Non-Specialty Care Transport Unit patients the number of:
 - a. Ambulatory Patients
 - i. NO Medical Needs
 - ii. Requires Constant Oxygen
 - b. Non-Ambulatory Patients (Wheelchair)
 - i. NO Medical Needs
 - ii. Requires Constant Oxygen
 - c. Non-Ambulatory Patients (Stretcher)
 - i. NO Medical Needs
 - ii. Requires Constant Oxygen
 - iii. Continuous Cardiac Monitoring
 - iv. ≥ 2 Continuous IV Infusions
 - v. Respiratory Support (BIPAP, CPAP, Vent)
 - vi. Cardiac Device (ECMO, IABP, IMPELLA)

The hospital shall begin this reporting requirement on Saturday, October 18, 2025, and continue to report this information on a daily basis thereafter. The census cutoff shall be noon on the date the report is submitted and the reports shall be submitted by 1:00 p.m. The reports shall be sent to Candace Gardner, Director of the Department's Office of Emergency Medical Services, at Candace.Gardner@doh.nj.gov, and to Logan Rafferty, Investigator, Office of Emergency Medical Services, at Logan.Rafferty@doh.nj.gov.

N.J.A.C. 8:43E-3.4(a)11 provides for a \$250 penalty for the failure to report information to the Department as required by statute or licensing regulation, after reasonable notice and an opportunity to cure the violation, which may be assessed for each day noncompliance is found.

Thank you for your attention to this important matter and for your anticipated cooperation. If you have any questions concerning this matter, please contact Lisa King, Office of Program Compliance, at Lisa.King@doh.nj.gov.

Sincerely,



Gene Rosenblum, Director
Office of Program Compliance
Division of Certificate of Need and Licensing

DATED: October 17, 2025
E-MAIL
REGULAR AND CERTIFIED MAIL
RETURN RECEIPT REQUESTED
ENCLOSURE
Control #AX25032