

# HNJ ADVISORY COUNCIL MEETING

November 13, 2025 1:00-2:30pm



# A G E N D A



Update since July meeting



Action Team Membership



Updated Action Plans



Updated 2025 HNJ Calendar



Next Steps & Adjournment

# JULY – NOVEMBER UPDATES



- 2025 SHIP Strategies and Actions
- Alignment of SHIP and CHIPS
- Action Team Recruitment & Engagement
- Healthy NJ Membership Manual

# ACT TEAM REPRESENTATION GAPS

## Access to Care (11)

- Focus areas:
  - Quality & Safety
  - Technology
- Southern Region

## Healthy Communities (16)

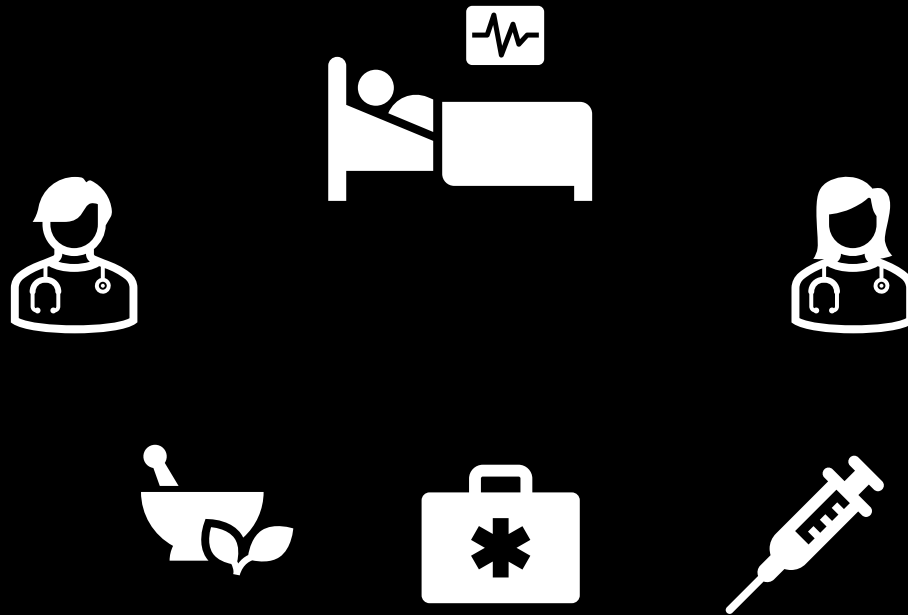
- External Partners – Environmental Health
- State agency representatives
  - Community Assets
- Northern, Central & Southern Regions

## Healthy Living (11)

- Maternal & Infant Health
- STIs
- DOH Representatives
- Northern, Central & Southern Regions

# HNJ2030

## ACCESS TO QUALITY CARE



# HNJ2030 OBJECTIVES

## GOAL 1: A COMPREHENSIVE, QUALITY HEALTH SYSTEM THAT PEOPLE CAN ACCESS, AFFORD, AND NAVIGATE.

Obj. & Strategy #	Strategy	Data Source	Baseline 2020	2021	2022	2023	2024	Target 2030
AQC1A	Increase the percent of needs met in Primary Care Health Professional Shortage Areas (HPSAs)	<a href="#">Kaiser Family Foundation</a>				69.24%		77.83%
AQC1B	Eliminate the racial/ethnic disparity in the proportion of adults with a primary care provider	<a href="#">BRFSS</a>	0.8	0.8	0.8	0.8		1.0
AQC2A	Increase the proportion of adults aged 18-64 with health insurance	<a href="#">BRFSS</a>	85.3%	88.5%	89.2%	87.8%		96.8%
AQC2B	Eliminate the racial/ethnic disparity in the proportion of adults unable to see a doctor due to cost.	<a href="#">BRFSS</a>	2.5	3.0	2.9	3.5		1.0
AQC3A	Eliminate the disparity in overall Prevention Quality Indicators (PQI) rates by county	<a href="#">HCQA</a>	5.3					1.0
AQC4A	Increase the proportion of relevant NJDOH datasets that collect at least the minimum 5 races plus Hispanic ethnicity, language spoken at home, sexual orientation, and gender identity	<a href="#">NJDOH</a>						
AQC4B	Improve patient-provider communication to increase access to care.							
AQC4C	Increase the proportion of healthcare providers who received CLAS/Bias Training							

RESEARCH

RESEARCH



# HNJ2030

## ACCESS TO QUALITY CARE

### EQUITABLE ACCESS - PRIMARY CARE

**Goal:** A comprehensive, quality health system that people can access, afford, and navigate.

**Objective:** 1. Increase equitable and sustainable access

#### Metric

- 1A. Increase the percentage of need met in Primary Care Health Professional Shortage Areas (HPSAs)
  - Indicator: % Met Need
  - Baseline: **69.24%** (2024)
  - Target: Increase to **77.83%** by **6/30/2030**
  - Data Source: KFF
  - Lead: NJDOH

Population-to-Provider Ratio [10 points max]	+	Percent of Population below 100% FPL [5 points max]	+	Infant Health Index (Based on IMR or LBW Rate) [5 points max]	+	Travel Time to NSC [5 points max]	=	HPSA Score Out of 25
Location		Total Primary Care HPSA Designations		Population of Designated HPSAs		Percent of Need Met		Practitioners Needed to Remove HPSA Designation
New Jersey		37		163,027		69.24%		19

# HNJ2030

## ACCESS TO QUALITY CARE

### EQUITABLE ACCESS - PRIMARY CARE

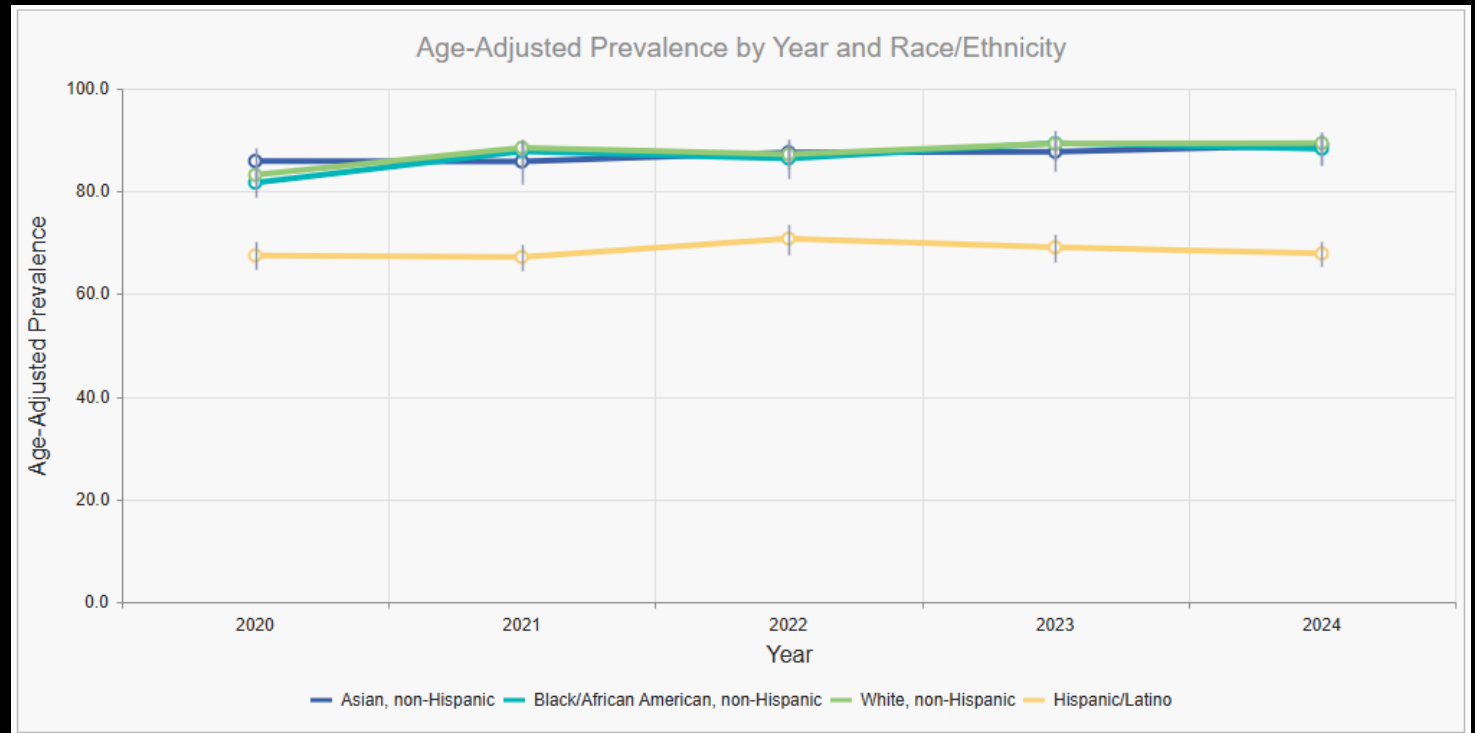
**Goal:** A comprehensive, quality health system that people can access, afford, and navigate.

**Objective:** 1. Increase equitable and sustainable access

#### Metric

**1B. Eliminate racial/ethnic disparities in the proportion of adults with a dedicated Primary Care provider**

- **Indicator:** ratio of % of adults with a dedicated Primary Care provider
- **Baseline:** **0.8** Hispanic:White ratio (**2020**)
- **Target:** **1.0** by **6/30/2030**
- **Data Source:** BRFSS
- **Lead:** NJDOH





# HNJ2030

## ACCESS TO QUALITY CARE

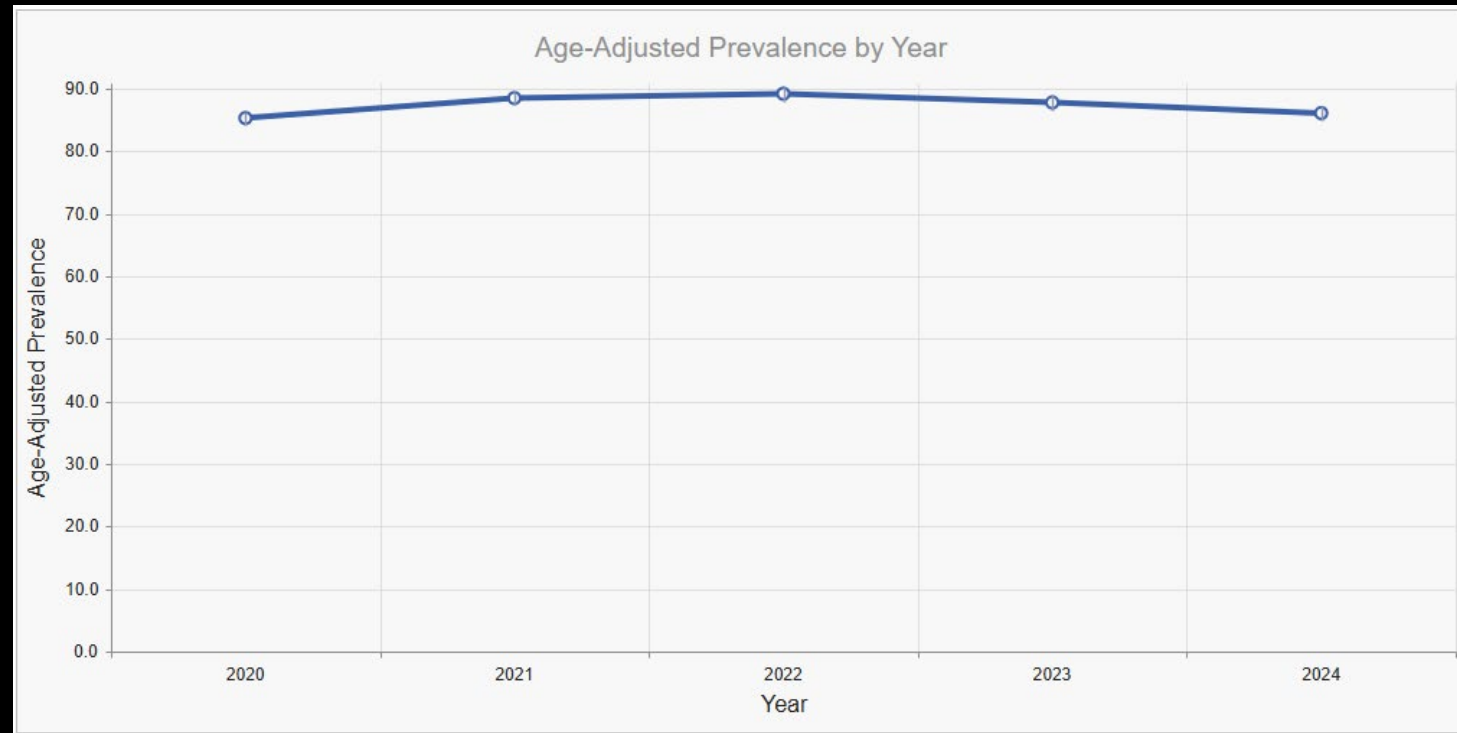
### EQUITABLE ACCESS - COST OF CARE

**Goal:** A comprehensive, quality health system that people can access, afford, and navigate.

**Objective:** 2. Eliminate cost-associated barriers to care

#### Metric

- 2A. Increase the proportion of adults aged 18-64 that have health insurance
  - Indicator: % of adults aged 18-65 who are insured, age adjusted
  - Baseline: **85.3% (2020)**
  - Target: **96.8%** by **6/30/2030**
  - Data Source: BRFSS
  - Lead: NJHA



# HNJ2030

## ACCESS TO QUALITY CARE

### EQUITABLE ACCESS - COST OF CARE

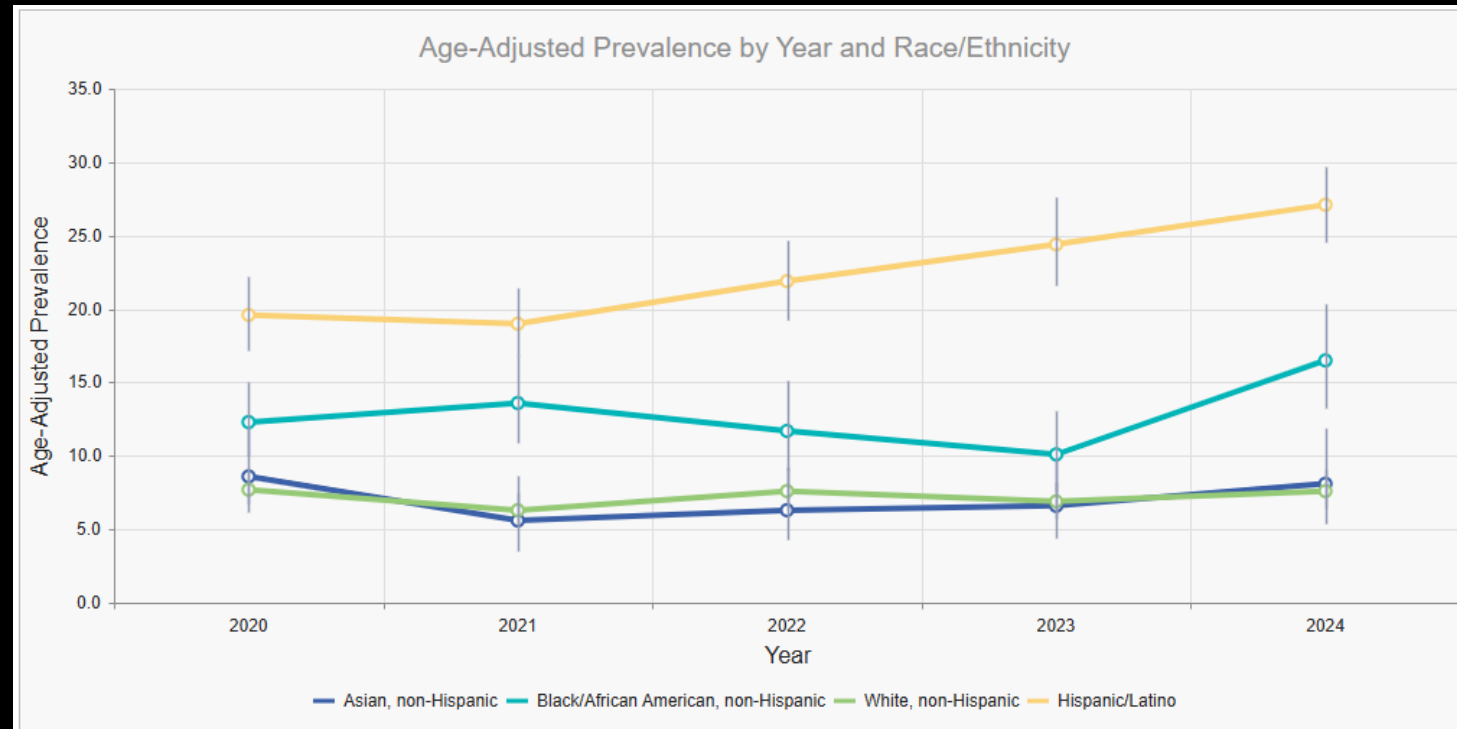
**Goal:** A comprehensive, quality health system that people can access, afford, and navigate.

**Objective:** 2. Eliminate cost-associated barriers to care

#### Metric

**2B Eliminate racial/ethnic disparity in the proportion of adults unable to get needed care due to cost**

- **Indicator:** ratio of % unable to get needed care due to cost
- **Baseline:** 2.5 Hispanic:White ratio (2020)
- **Target:** 1.0 by 6/30/2030
- **Data Source:** BRFSS
- **Lead:** NJHA



# HNJ2030

## ACCESS TO QUALITY CARE

### QUALITY & SAFETY

**Goal: A comprehensive, quality health system that people can access, afford, and navigate.**

**Objective: 3. Improve quality and safety in healthcare facilities.**

#### Metric

- **3A. Eliminate disparities in Overall PQI rates by county**
  - **Indicator:** ratio of PQI.90 rate per 100,000 adults
  - **Baseline:** 5.3 Cumberland: Somerset ratio (2020)
  - **Target:** 1.0 by 6/30/2030
  - **Data Source:** Patient Safety Program
  - **Lead:** NJHA

- **Prevention Quality Indicators (PQIs)**
  - potentially avoidable hospital admissions (diabetes, hypertension)
- **Inpatient Quality Indicators (IQIs)**
  - inpatient mortality (stroke, heart failure)
- **Patient Safety Indicators (PSIs)**
  - complications/adverse events in hospital

**Table 13. Comparing New Jersey's Statewide PQI Rates with National Rates (per 100,000 population)**

Preventiona Quality Indicators (PQIs)	National	New Jersey	
	2018	2018	2020
Diabetes with Short Term Complications (PQI.01)	82.2	78.4	66.5
Diabetes with Long Term Complication (PQI.03)	108.9	138.4	105.5
COPD or Asthma in Older Adults (PQI.05)	381.1	486.2	218.7
Hypertension (PQI.07)	60.8	72.9	51.1
Heart Failure (PQI.08)	429.6	463.7	339.7
Community-Acquired Pneumonia (PQI.11)	183.6	182.8	112.1
Urinary Tract Infection (PQI.12)	134.8	162.3	106.7
Uncontrolled Diabetes (PQI.14)	42.1	55.7	38.6
Asthma in Younger Adults (PQI.15)	29.2	49.0	27.0
Lower Extremity Amputation (PQI.16)	32.3	34.0	28.8
Overall PQIs - Composite (PQI.90)	1,301.4	1,444.5	960.5

# HNJ2030

## ACCESS TO QUALITY CARE

### DATA & TECHNOLOGY

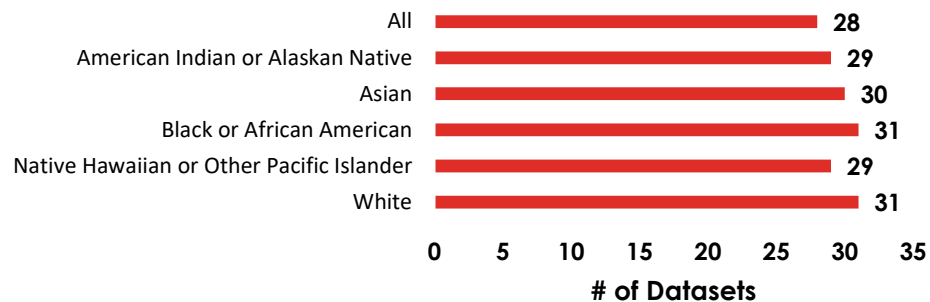
**Goal:** A comprehensive, quality health system that people can access, afford, and navigate.

**Objective:** Collect and analyze outcome data across key demographics that will address health disparities.

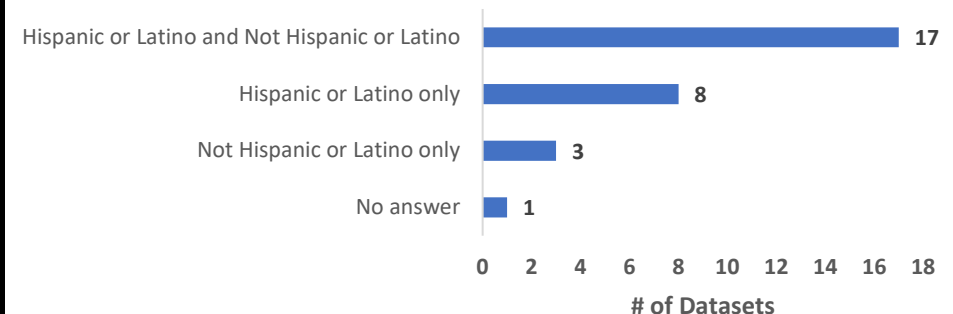
#### Metric

- 4A. Increase the proportion of relevant NJDOH datasets that collect at least the minimum 5 races plus
- Hispanic ethnicity, language spoken at home, and sexual orientation, gender identify (SOGI).
  - **Indicator:** % of NJDOH datasets that collect at least the minimum 5 races plus Hispanic ethnicity, language spoken at home, and SOGI.
  - **Baseline:** XX (2024). **Target:** Increase to 100% by 6/30/2030
  - **Data Source:** NJDOH
  - **Lead:** NJDOH

Count of Datasets Collecting SPD15 Race Categories



Count of Datasets Collecting SPD15 Ethnicity Categories



# HNJ2030

## ACCESS TO QUALITY CARE

### SYSTEM & PROVIDER LEVEL BARRIERS

**Goal:** A comprehensive, quality health system that people can access, afford, and navigate.

**Objective:** Increase the use of data and technology to increase access to care.

#### **Metric**

- **4B. Improve Patient-Provider Communication (% of adults who report)**
  - **Indicator:** % of adults who report poor provider communication
  - **Baseline:** **XX (year)**
  - **Target:** Increase to **XX** by **6/30/2030**
  - **Data Source:** **Data not available**
  - **Lead:** **???**

**RESEARCH**

# HNJ2030

## ACCESS TO QUALITY CARE

### SYSTEM & PROVIDER LEVEL BARRIERS

**Goal:** A comprehensive, quality health system that people can access, afford, and navigate.

**Objective:** Increase the use of data and technology to increase access to care.

#### **Metric**

- **4C. Increase % of healthcare providers who received CLAS / Implicit Bias Training**
  - **Indicator:** % of healthcare providers who receive CLAS / Implicit Bias Training
  - **Baseline:** XX (year)
  - **Target:** Increase to XX by 6/30/2030
  - **Data Source:** Data not available
  - **Lead:** NJDOH

**RESEARCH**



# HNJ2030 HEALTHY COMMUNITIES



# HNJ2030 OBJECTIVES

## GOAL 2: HEALTHY COMMUNITY CONDITIONS

Obj. & Strategy	Strategy Description	Data Source	Baseline 2020	2021	2022	2023	2024	Target 2030
HC1A	Reduce the emergency department visit rate due to heat-related illness	<a href="#">NJDDCS</a>	7.7	9.4	8.8	6.9		5.0
HC1B	Reduce the incidence of Lyme disease	<a href="#">CDRSS</a>	27.7	38.0	63.4	77.0		30.0
HC2A	Increase seatbelt usage among persons aged 18-24 years	<a href="#">BRFSS</a>	82.8%			82.3%		91.7%
HC2B	Eliminate the racial/ethnic disparity in homicide rates	<a href="#">Death certificate database</a>	20.7	17.8	13.9	11.7		1.00
HC2C	Eliminate adverse childhood experiences (ACEs)	<a href="#">America's Health Rankings</a>	8.9%	10.2%	10.9%	10.9%	9.6%	0%
HC3A	Eliminate the racial/ethnic disparity in the food insecurity rate	<a href="#">Map the Meal Gap</a>	5.67	4.00	3.50	3.43		1.00
HC3B	Reduce the proportion of children ages 6-17 years with obesity	<a href="#">Child Health Data</a>				21.4%		8.4%
HC3C	Reduce the proportion of adults who are obese	<a href="#">BRFSS</a>	28.0%	28.6%	29.1%	28.9%		23.2%
HC3D	Reduce the proportion of adolescents who were not physically active for at least 60 minutes on at least 1 day in the 7 days before the survey.	<a href="#">YRBS</a>		14.1%		12.9%		11.6%
HC3E	Reduce the proportion of adults who engage in no leisure time physical activity	<a href="#">BRFSS</a>	20.4%	23.5%	22.9%	23.5%		15.6%

# HNJ2030

## HEALTHY COMMUNITIES

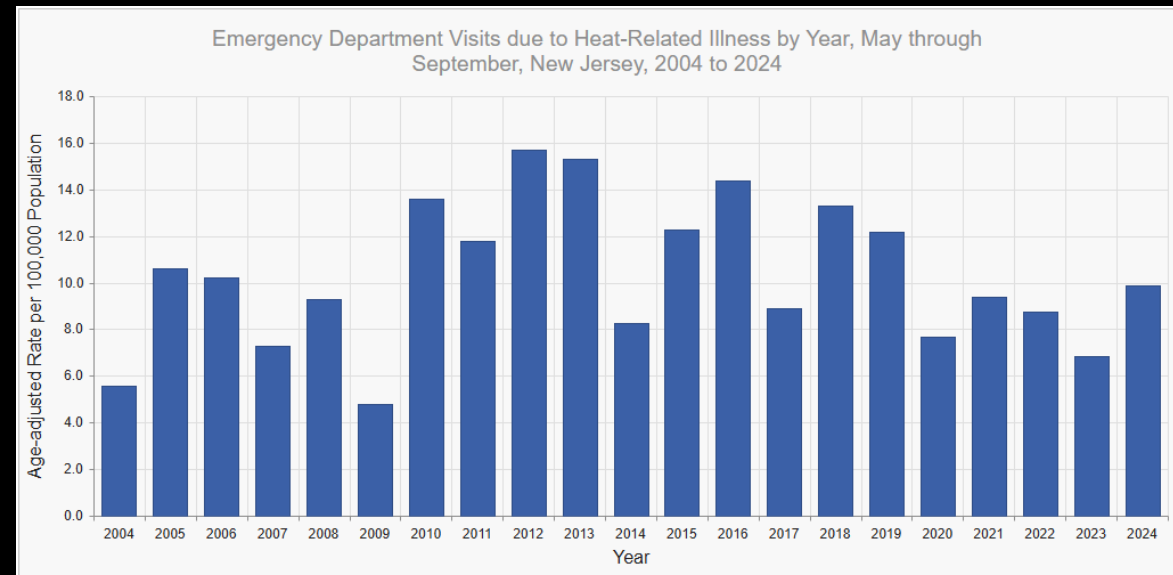
### ENVIRONMENTAL HEALTH

**Goal: Healthy community conditions.**

**Objective: 1. Reduce exposure to environmental contaminants/hazards**

#### **Metric**

- **1A. Reduce ED visits in May-Sept due to heat-related illness.**
  - **Indicator:** ED visit rate per 100,000 population due to heat-related illness in May-Sept
  - **Baseline:** **7.7 (2020)**
  - **Target:** Decrease to **5.0** by **6/30/2030**
  - **Data Source:** NJ Hospital Discharge Data Collection System (NJDDCS)
  - **Lead:** NJ Interagency Council on Climate Resilience



# HNJ2030

## HEALTHY COMMUNITIES

### ENVIRONMENTAL HEALTH

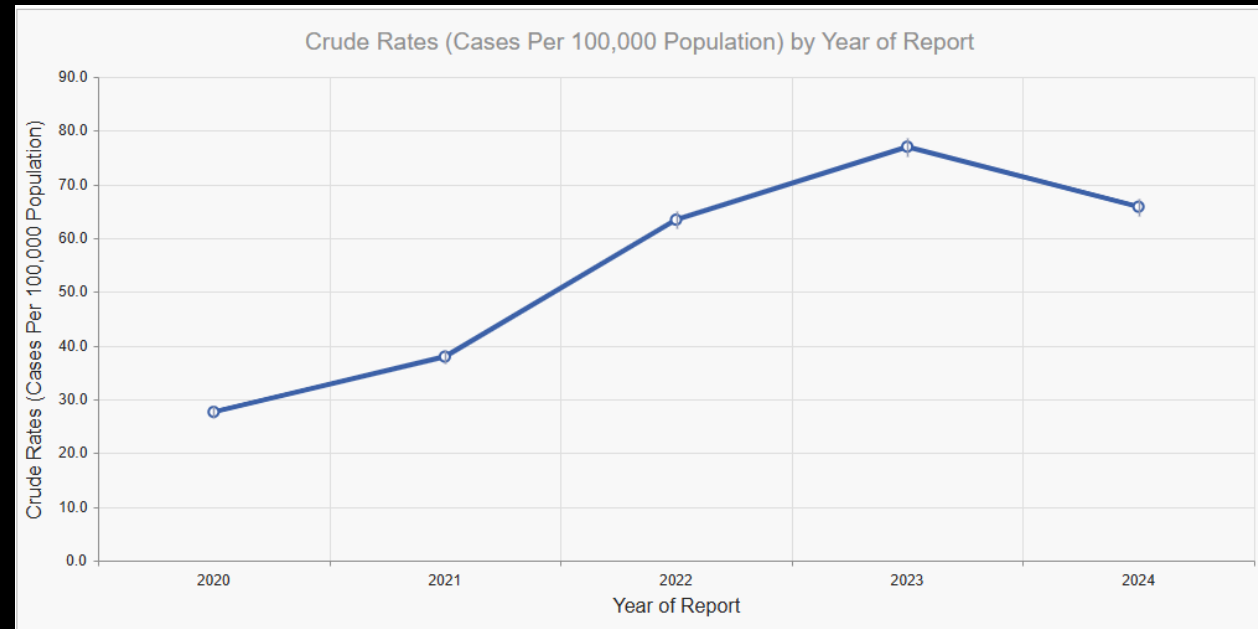
**Goal: Healthy community conditions.**

**Objective: 1. Reduce exposure to environmental contaminants/hazards**

#### **Metric**

- **1B. Reduce Lyme disease incidence.**

- **Indicator:** Incidence of Lyme disease per 100,000 population.
- **Baseline:** **27.7 (2020)**
- **Target:** Decrease to **30.0** by **6/30/2030**
- **Data Source:** Communicable Disease Reporting and Surveillance System (CRDSS)
- **Lead:** Local Health Departments



# HNJ2030

## HEALTHY COMMUNITIES

### INJURY & VIOLENCE

**Goal:** Healthy community conditions.

**Objective:** 2. Reduce fatality, serious injury, and exposure to violence and traumatic experiences.

#### Metric

- **2A. Increase seatbelt use among persons aged 18-24.**
  - **Indicator:** % of persons aged 18-24 who use seatbelts
  - **Baseline:** **82.8% (2020)**
  - **Target:** Increase to **91.7%** by **6/30/2030**
  - **Data Source:** BRFSS
  - **Lead:** NJDOH



# HNJ2030

## HEALTHY COMMUNITIES

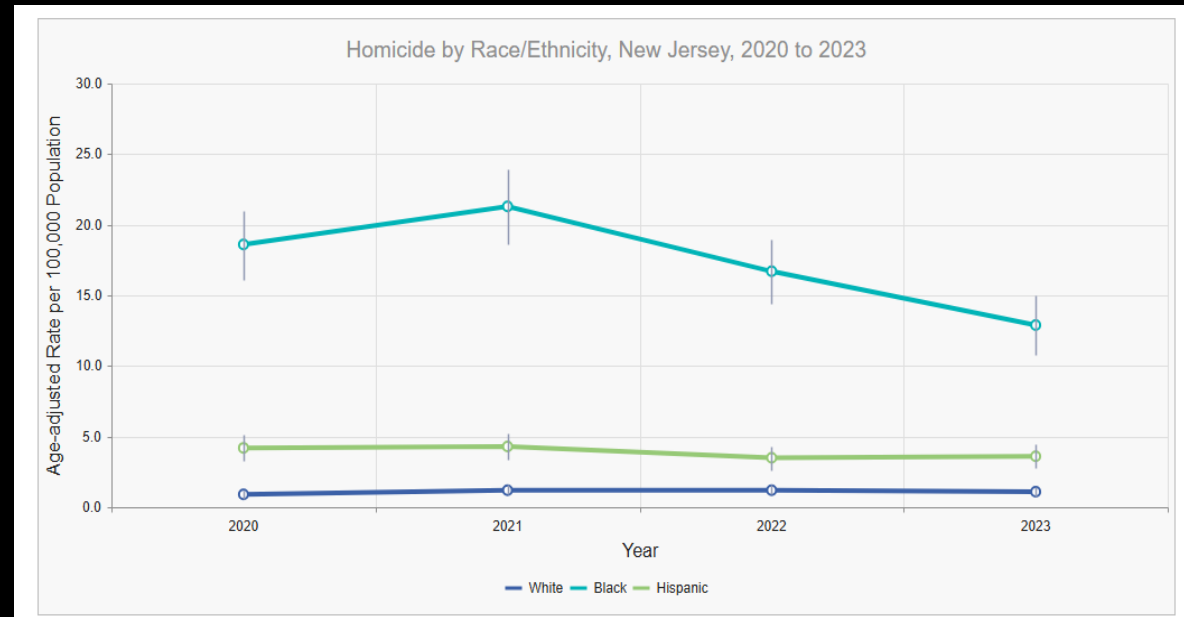
### INJURY & VIOLENCE

**Goal: Healthy community conditions.**

**Objective: 2. Reduce fatality, serious injury, and exposure to violence and traumatic experiences.**

#### Metric

- **2B. Eliminate the racial/ethnic disparity in homicide rates.**
  - **Indicator:** ratio of age-adjusted homicide rate per 100,000 population
  - **Baseline:** **20.7** Black:White ratio (**2020**)
  - **Target:** Decrease to **1.0** by **6/30/2030**
  - **Data Source:** NJVDRS
  - **Lead:** NJ Office of the Attorney General





# HNJ2030

## HEALTHY COMMUNITIES

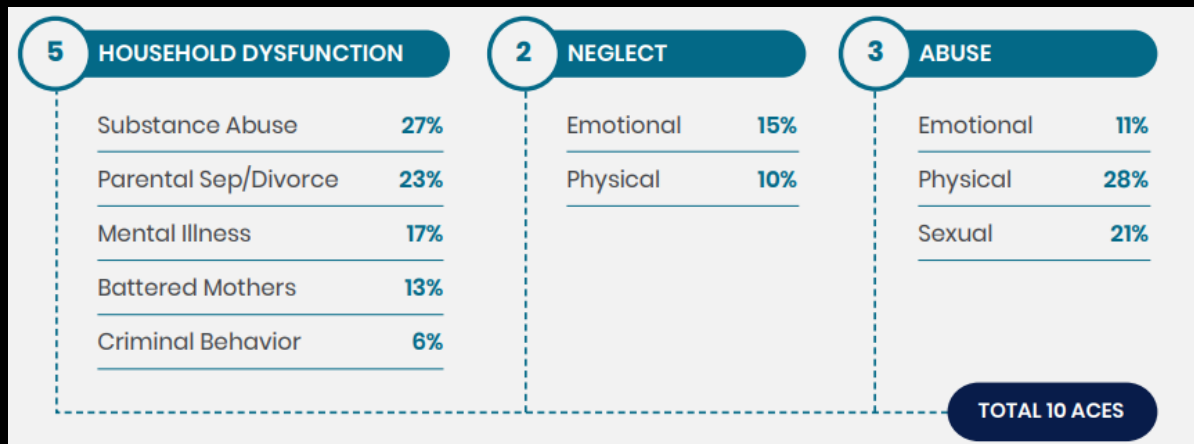
### INJURY & VIOLENCE

**Goal: Healthy community conditions.**

**Objective: 2. Reduce fatality, serious injury, and exposure to violence and traumatic experiences.**

#### Metric

- **2C. Eliminate racial /ethnic disparity in Adverse Childhood Experiences.**
  - **Indicator:** ratio of % of children aged 0-17 who have ever experienced 2 or more ACEs.
  - **Baseline:** **1.2 (2022)**
  - **Target:** Decrease to **1.0** by **6/30/2030**
  - **Data Source:** National Survey of Children's Health
  - **Lead:** NJ DCF, NJ Resiliency Coalition



Top States	Rank	Value
<a href="#">New Jersey &gt;</a>	1	9.6%
<a href="#">New York &gt;</a>	2	10.7%
<a href="#">Maryland &gt;</a>	3	11.1%
<a href="#">Utah &gt;</a>	4	11.2%
<a href="#">Massachusetts &gt;</a>	5	11.6%
Bottom States	Rank	Value
<a href="#">West Virginia &gt;</a>	44	20.0%
<a href="#">Alaska &gt;</a>	45	20.7%
<a href="#">New Mexico &gt;</a> , <a href="#">Wyoming &gt;</a>	46	21.1%
<a href="#">Arkansas &gt;</a> , <a href="#">Oklahoma &gt;</a>	48	21.3%
<a href="#">Montana &gt;</a>	50	22.5%

# HNJ2030

## HEALTHY COMMUNITIES

### COMMUNITY ASSETS

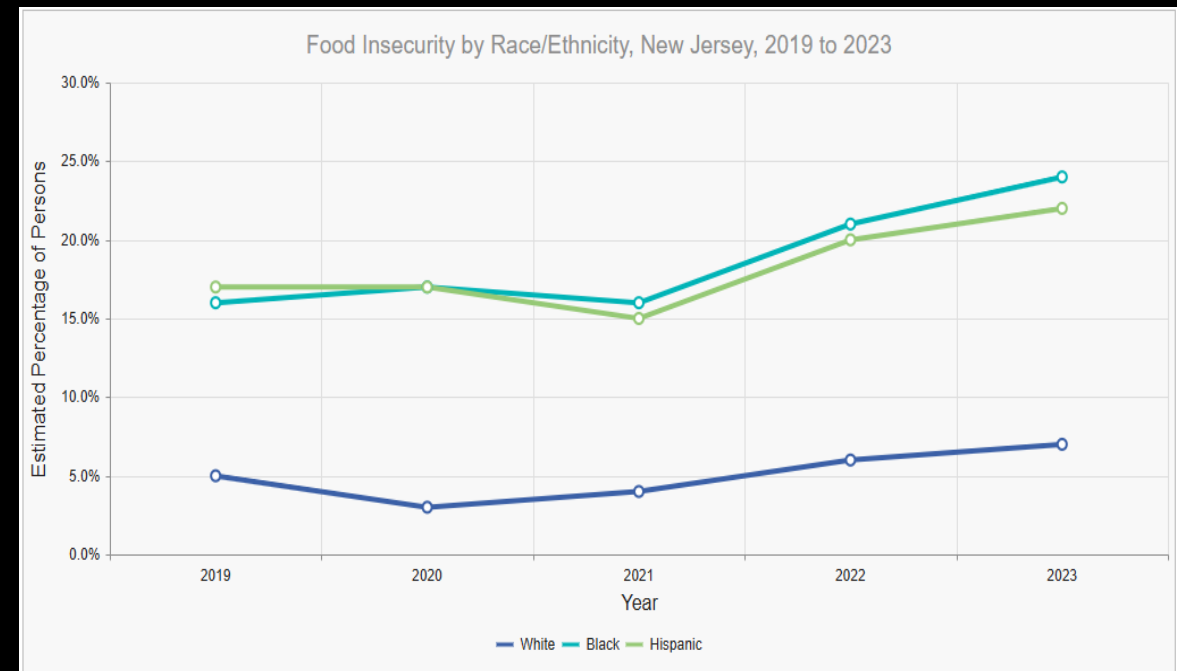
**Goal: Healthy community conditions.**

**Objective: 3. Increase community assets to support healthy living (i.e., **nutritious food**, and opportunities to engage in active living)**

#### **Metric**

- **3A. Eliminate the racial/ethnic disparity in food insecurity rate.**

- **Indicator:** % of individuals reporting food insecurity.
- **Baseline:** **5.67 (2020)**
- **Target:** **1.0** by **6/30/2030**
- **Data Source:** Map the Meal Gap
- **Lead:** NJ Office of the Food Security Advocate



# HNJ2030

## HEALTHY COMMUNITIES

### COMMUNITY ASSETS

**Goal: Healthy community conditions.**

**Objective: 3. Increase community assets to support healthy living (i.e. nutritious food, and opportunities to engage in active living)**

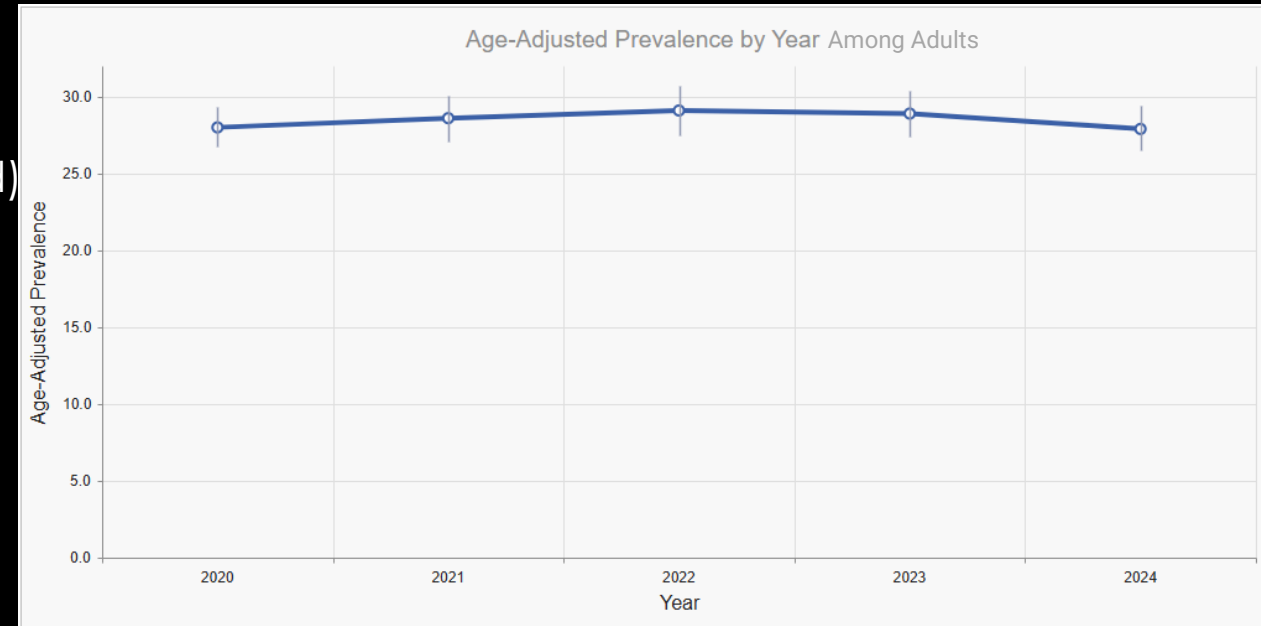
#### Metrics

- **3B. Reduce the proportion of children aged 6-17 with obesity.**

- **Indicator:** % of children aged 6-17 with obesity
- **Baseline:** **21.4% (2023)**
- **Target:** Decrease to **8.4%** by **6/30/2030**
- **Data Source:** National Survey of Children's Health
- **Lead:** NJDOH

- **3C. Reduce the proportion of adults with obesity**

- **Indicator:** % of adults with obesity (age-adjusted)
- **Baseline:** **28.0% (2020)**
- **Target:** **23.2%** by **6/30/2030**
- **Data Source:** BRFSS
- **Lead:** NJDOH



# HNJ2030

## HEALTHY COMMUNITIES

### COMMUNITY ASSETS

**Goal: Healthy community conditions.**

**Objective:** 4. Increase community assets to support healthy living (i.e. nutritious food, and opportunities to engage in **active living**)

#### Metrics

- **3D. Reduce the proportion of adolescents who were not physical active at least 60 minutes on at least 1 day in the 7 days before the survey.**
  - **Indicator:** % of high school students who were not physically active for at least 60 minutes on at least 1 day in the 7 days before the survey.
  - **Baseline:** **14.1% (2021)**
  - **Target:** Decrease to **11.6%** by **6/30/2030**
  - **Data Source:** YRBS
  - **Lead:** NJDOH
- **3E. Reduce the proportion of adults who engage in no leisure time physical activity.**
  - **Indicator:** % of adults who engage in no leisure time physically activity
  - **Baseline:** **20.4% (2020)**
  - **Target:** Decrease to **15.6%** by **6/30/2030**
  - **Data Source:** BRFSS
  - **Lead:** NJDOH

# HNJ2030

## HEALTHY LIVING



# HNJ2030 OBJECTIVES

## GOAL 3: HEALTHY LIVING AND WELL-BEING THROUGHOUT THE LIFESPAN.

Obj. & Strategy #	Strategy	Data Source (Steward)	Baseline 2020	2021	2022	2023	2024	Target 2030
HL1A	Eliminate the racial/ethnic disparity in the infant mortality rate	<a href="#">Infant death-birth match database</a>	3.64	3.55	3.5			1.00
HL1B	Eliminate the racial/ethnic disparity in pregnancy-related mortality rate	<a href="#">Maternal Mortality Review</a>	6.6 (2016-2018)					1.00
HL1C	Increase the proportion of infants who are breastfed through age 12 months	<a href="#">National Immunization Survey</a>	38.7%	40.1%	48.0%			56.8%
HL2A	Eliminate the racial/ethnic disparity in the percentage of children who receive all recommended doses of the Combined 7 Series by age 24 months.	<a href="#">Child Vax View</a>	1.6 (2016-2019)					1.00
HL2B	Increase the proportion of children (under 18) who had a visit with a doctor, nurse, or other health care professional to receive a preventive check-up in the last 12 months	<a href="#">childhealthdata.org</a>	--	80.2%	81.2%	80.0%		89.3%
HL2C	Increase the proportion of adults who visited a doctor for a routine checkup in the past year	<a href="#">BRFSS</a>	75.6%	74.8%	76.8%	77.0%		82.7%
HL3A	Reduce the STI rate (chlamydia, gonorrhea, primary syphilis, secondary syphilis, and early latent syphilis)	<a href="#">CDRSS</a>	462.8	494.8	484.1	512.5	491.2	347.1
HL3B	Reduce the congenital syphilis incidence rate	<a href="#">CDRSS</a>	25.7	51.3	49.6	44.5	50.3	19.2
HL4A	Eliminate the disparity by county in unintentional drug overdose deaths	<a href="#">SUDORS</a>	3.8	4.0	4.8	5.8		1.00
HL4B	Reduce the proportion of high school students who currently use tobacco products	<a href="#">YTS</a>			11.0%			
HL4C	Reduce the proportion of adults who are current cigarette smokers.	<a href="#">BRFSS</a>	11.3%	11.1%	10.9%	9.6%		5.0%
HL4D	Increase the percent of need met in Mental Health Care Health Professional Shortage Areas (HPSAs)	<a href="#">KFF</a>					52.8%	58.1%



# HNJ2030

## HEALTHY LIVING

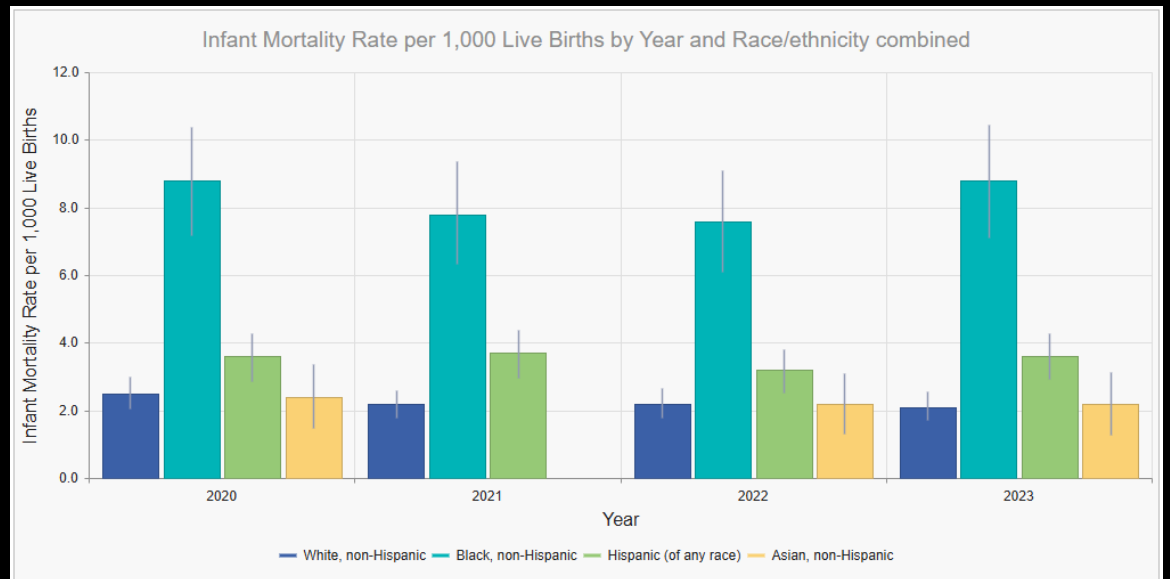
### MATERNAL, INFANT & FAMILY HEALTH

**Goal:** Healthy living and well-being throughout the lifespan.

**Objective:** 1. Reduce infant and maternal mortality rates and eliminate disparities in birth-related outcomes.

#### Metric

- **1A. Eliminate racial/ethnic disparity in the infant mortality rate**
  - **Indicator:** ratio of infant deaths per 1,000 live births
  - **Baseline:** **3.64** Black:White ratio (**2020**)
  - **Target:** **1.0** by **6/30/2030**
  - **Data Source:** Infant death-birth match database
  - **Lead:** NJDOH



# HNJ2030

## HEALTHY LIVING

### MATERNAL, INFANT & FAMILY HEALTH

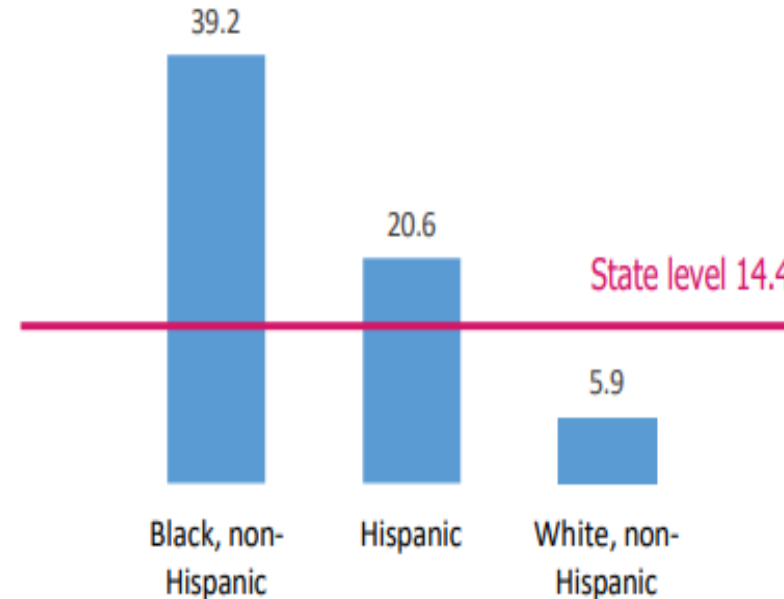
**Goal:** Healthy living and well-being throughout the lifespan.

**Objective:** 1. Reduce infant and maternal mortality rates and eliminate disparities in birth-related outcomes.

#### Metric

- **1B. Eliminate racial/ethnic disparity in the pregnancy related mortality rate**
  - **Indicator:** ratio pregnancy related mortality rate per 100,000 live births; Black:White
  - **Baseline:** 6.6 (2016-2018)
  - **Target:** 1.0 by 6/30/2030
  - **Data Source:** Maternal Mortality Review
  - **Lead:** NJDOH

Pregnancy-Related Mortality Ratio by Race/Ethnicity, New Jersey, 2016-2018 (Deaths Per 100,000 Live Births)



# HNJ2030

## HEALTHY LIVING

### MATERNAL, INFANT & FAMILY HEALTH

**Goal:** Healthy living and well-being throughout the lifespan.

**Objective:** 1. Reduce infant and maternal mortality rates and eliminate disparities in birth-related outcomes.

#### Metric

- **1C. Increase the proportion of infants who are breastfed at 12 months**
  - **Indicator:** % of infants breastfed at 12 months
  - **Baseline:** (33.8%; 2019)    **Target:** Increase to 56.8 by 6/30/2030
  - **Data Source:** National Immunization Survey
  - **Lead:** CJFHC

	Initiation of breastfeeding	Exclusive at 3 months	Any at 6 months	Any at 12 months
CDC NJ, Births 2019 <sup>1</sup>	82.5%	41.2%	55.4%	33.8%
CDC NJ, Births 2022 <sup>1</sup>	88.5%	47.1%	68.3%	48.0%

#### Increase the proportion of infants who are exclusively breastfed through age 6 months

- **Baseline:** (25.1%; 2020)
- **Target:** Increase to 36.7 by 6/30/2030
- **Data Source:** National Immunization Survey
- **Lead:** CJFHC

# HNJ2030

## HEALTHY LIVING

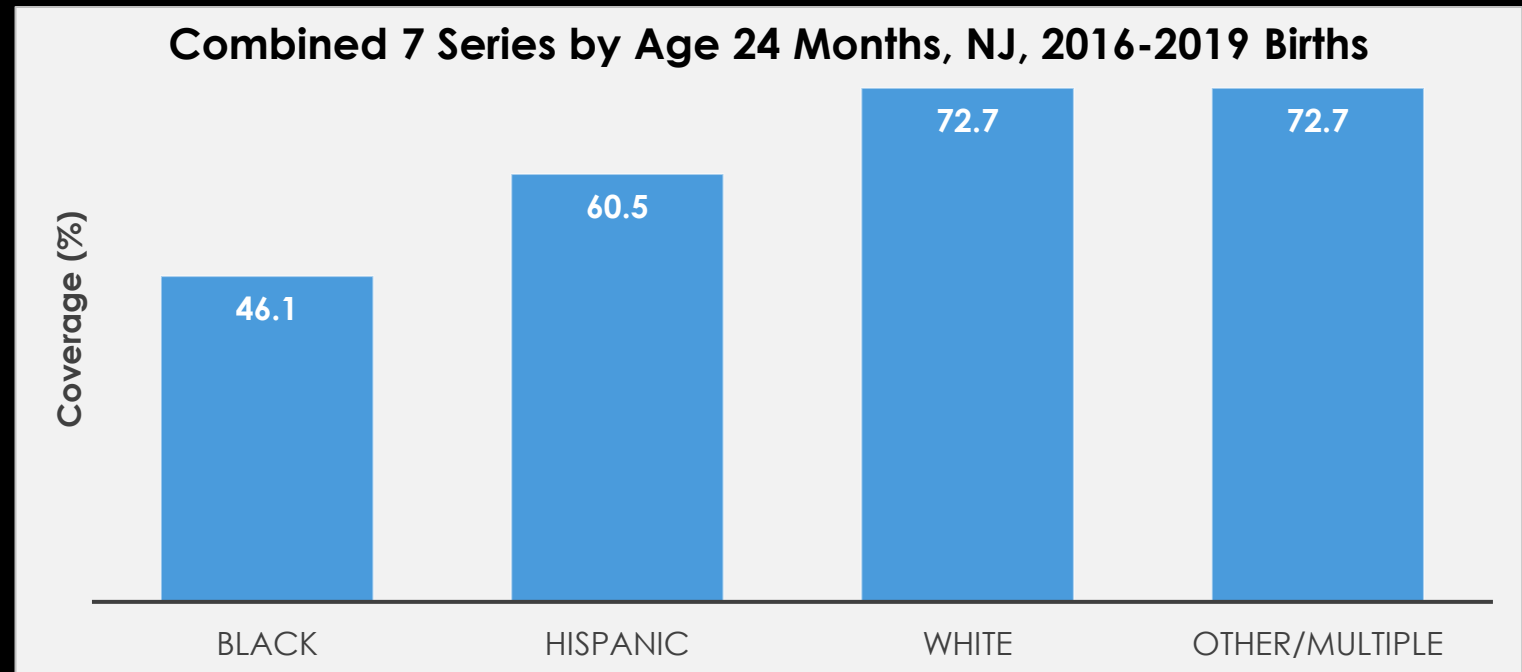
### CLINICAL PREVENTIVE SERVICES

**Goal:** Healthy living and well-being throughout the lifespan.

**Objective:** 2. Increase preventive care and reduce disparities among children, adolescents, and adults.

#### Metric

- **2A. Eliminate the racial/ethnic disparity in the proportion of children who receive the Combined 7 Series by age 24 months**
- **Indicator:** ratio of % of children who receive the Combined 7 Series by age 24 months
- **Baseline:** 1.6 White:Black ratio(2016-2019)
- **Target:** 1.0 by 6/30/2030
- **Data Source:** Child Vax View
- **Lead:** NJDOH - VPDP



# HNJ2030

## HEALTHY LIVING

### CLINICAL PREVENTIVE SERVICES

**Goal:** Healthy living and well-being throughout the lifespan.

**Objective:** 2. Increase preventive care and reduce disparities among children, adolescents, and adults.

#### Metrics

- **2B. Increase the proportion of **children** who had one or more preventive care visits during the past 12 months**
  - **Indicator:** % of children who had one or more preventive care visits during the past 12 months
  - **Baseline:** **78.1% (2020)**
  - **Target:** Increase to **89.3** by **6/30/2030**
  - **Data Source:** National Survey of Children's Health
  - **Lead:** NJDOH
- **2C. Increase the proportion of **adults** who visited a doctor for a routine checkup in the past year.**
  - **Indicator:** % of adults who visited a doctor for a routine checkup in the past year, age adjusted.
  - **Baseline:** **75.6% (2020)**
  - **Target:** Increase to **82.7** by **6/30/2030**
  - **Data Source:** BRFSS
  - **Lead:** NJDOH

# HNJ2030

## HEALTHY LIVING

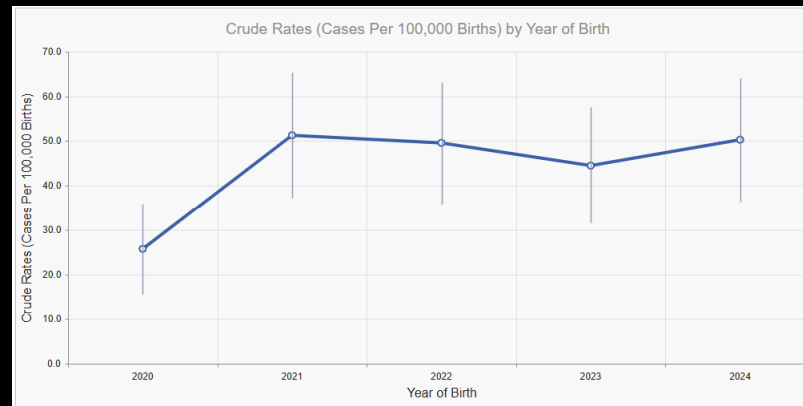
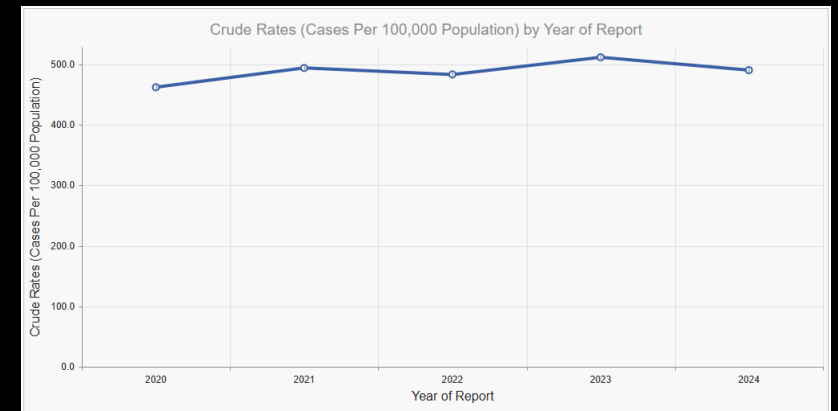
### SEXUALLY TRANSMITTED INFECTIONS

Goal: Healthy living and well-being throughout the lifespan.

Objective: 3. Reduce the rate of Sexually Transmitted Infections (STIs) and their complications

#### Metrics

- 3A. Reduce the STI incidence rate (chlamydia, gonorrhea, and primary, secondary, and early latent syphilis)
  - by 25%
  - **Indicator:** STI rate per 100,000 population
  - **Baseline:** **462.8 (2020)**
  - **Target:** Decrease to **347.1** by **6/30/2030**
- 3B. Reduce the congenital syphilis incidence rate by 25%
  - **Indicator:** rate per 100,000 live births
  - **Baseline:** **25.7 (2020)**
  - **Target:** Decrease to **19.2** by **6/30/2030**
  - **Data Source:** CDRSS
  - **Lead:** NJDOH - STIs





# HNJ2030

## HEALTHY LIVING

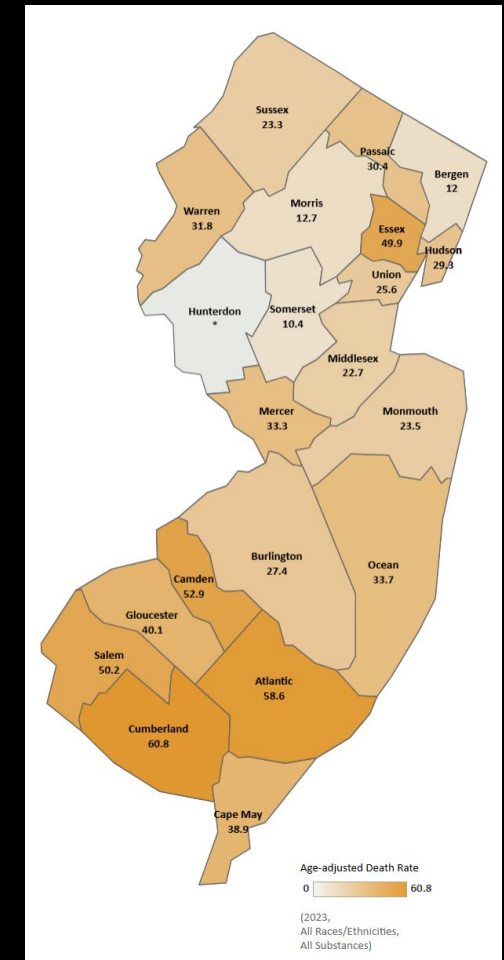
### BEHAVIORAL HEALTH

**Goal:** Healthy living and well-being throughout the lifespan.

**Objective:** 4. Improve mental health, and reduce alcohol, nicotine, and substance use.

#### Metric

- **4A. Eliminate the disparity by county in unintentional drug overdose death rate**
  - **Indicator:** ratio of unintentional overdose death rate per 100,000 population
  - **Baseline:** **3.8 (2020)**
  - **Target:** **1.0** by **6/30/2030**
  - **Data Source:** SUDORS
  - **Lead:** NJDHS & NJDOH



# HNJ2030

## HEALTHY LIVING

### BEHAVIORAL HEALTH

**Goal:** Healthy living and well-being throughout the lifespan.

**Objective:** 4. Improve mental health, and reduce alcohol, **nicotine**, and substance use.

#### Metrics

- **4B. Reduce the proportion of high school students who currently use tobacco and nicotine products**
  - **Indicator:** % of high school students who currently use tobacco / nicotine products
  - **Baseline:** **11.0% (2022)**
  - **Target:** Decrease to **TBD** by **6/30/2030**
  - **Data Source:** Youth Tobacco Survey
  - **Lead:** NJDOH
- **4C. Reduce the proportion of adults who are ~~current cigarette smokers~~/currently use tobacco/nicotine products**
  - **Indicator:** % of adults who are current cigarette smokers.
  - **Baseline:** **11.3% (2020)**
  - **Target:** Decrease to **5.0** by **6/30/2030**
  - **Data Source:** BRFSS
  - **Lead:** NJDOH

# HNJ2030

## HEALTHY LIVING

### BEHAVIORAL HEALTH

**Goal:** Healthy living and well-being throughout the lifespan.

**Objective:** 4. Improve mental health, and reduce alcohol, nicotine, and substance use.

#### Metric

- 4D. Increase the % of need met in **Mental Health** - Health Professional Shortage Areas
  - Indicator: % Met Need
  - Baseline: **52.8% (2023)**
  - Target: Increase to **58.1%** by **6/30/2030**
  - Data Source: KFF
  - Lead: NJDOH

Location	Total Mental Health Care HPSA Designations	Population of Designated HPSAs	Percent of Need Met	Practitioners Needed to Remove HPSA Designation
New Jersey	39	404,126	52.8%	28



QUESTIONS



# CALENDAR OF HEALTHY NJ MEETINGS

## 2026 Calendar

JANUARY						
Su	Mo	Tu	We	Th	Fr	Sa
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

FEBRUARY						
Su	Mo	Tu	We	Th	Fr	Sa
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28

MARCH						
Su	Mo	Tu	We	Th	Fr	Sa
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

APRIL						
Su	Mo	Tu	We	Th	Fr	Sa
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

MAY						
Su	Mo	Tu	We	Th	Fr	Sa
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

JUNE						
Su	Mo	Tu	We	Th	Fr	Sa
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

JULY						
Su	Mo	Tu	We	Th	Fr	Sa
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

AUGUST						
Su	Mo	Tu	We	Th	Fr	Sa
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

SEPTEMBER						
Su	Mo	Tu	We	Th	Fr	Sa
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

OCTOBER						
Su	Mo	Tu	We	Th	Fr	Sa
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

NOVEMBER						
Su	Mo	Tu	We	Th	Fr	Sa
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

DECEMBER						
Su	Mo	Tu	We	Th	Fr	Sa
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

### NOTES

#### Holidays

HNJAC Quarterly meetings

AQC - ACT Team Quarterly meeting

HC - ACT Team Quarterly meeting

HL - ACT Team Quarterly meeting

# NEXT STEPS



Review action plans and identify existing **resources** for each action



Sign & Submit  
HNJ Membership Manual  
by **November 21, 2025**



Action Team member  
recommendations  
by **November 21, 2025**





**Thank You!**