



Delivering Dignity and Opportunity: New Jersey Human Services Under Governor Murphy

Advancing Affordability, Family Success, and Inclusion

Commissioner Sarah Adelman



A Letter from the Commissioner



PHILIP D. MURPHY
Governor

State of New Jersey DEPARTMENT OF HUMAN SERVICES

SARAH ADELMAN
Commissioner

TAHESHA L. WAY
Lt. Governor

To the Honorable Governor, Legislature, Community Partners, and Residents of New Jersey:

This report, "Delivering Dignity and Opportunity: New Jersey Human Services Under Governor Murphy - *Advancing Affordability, Family Success, and Inclusion*", highlights eight years of accomplishments across New Jersey's human services ecosystem.

During the Murphy administration, we expanded access to health coverage, food security, disability services, housing, childcare, mental health and substance use care – demonstrating how meeting vital needs can change the trajectory of people's lives.

Like many administrations, ours was shaped by the crises we were called to confront. We led through the global disruption of the COVID-19 pandemic, which demanded agility, clarity and compassion. Even as we adapted to meet urgent needs, we remained focused on strengthening, expanding and protecting essential services – reimagining our programs to deliver measurable results for New Jersey communities.

Working for the public good is a journey; the work is never 'done.' I am deeply grateful to our nearly 8,000 Department of Human Services employees, as well as our many community partners and providers for their commitment to a human-centered approach. None of these milestones would be possible without them.

Serving in the Department of Human Services the past eight years has been the honor of my career. Thank you sincerely.

Respectfully,

A handwritten signature in black ink that reads "Sarah Adelman".

Sarah Adelman
Commissioner

Acknowledgments

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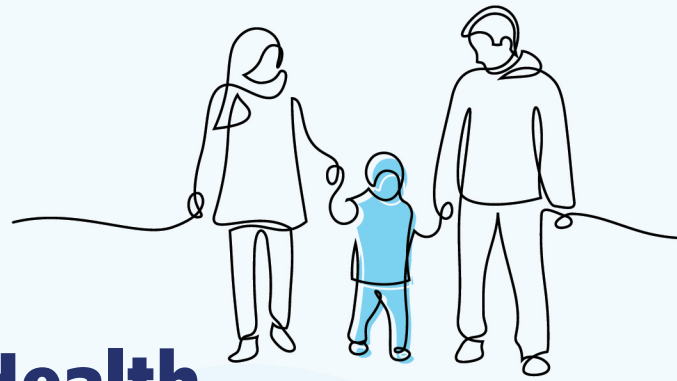
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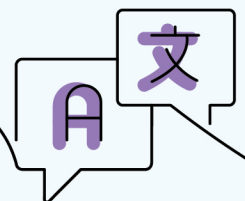
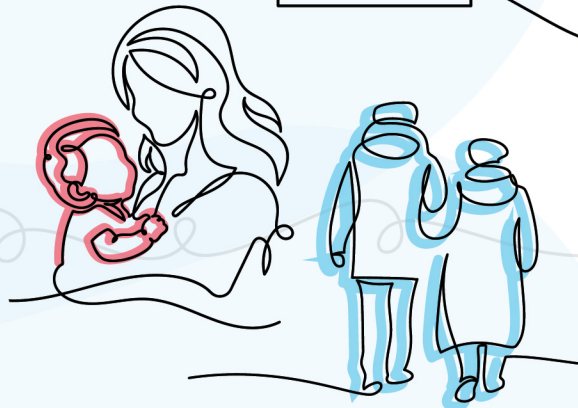
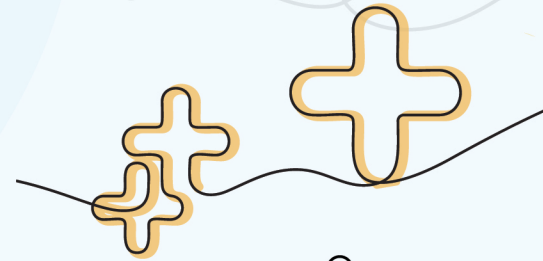
FAMILY SUCCESS THROUGH AFFORDABILITY, STABILITY, HEALTH, AND CARE ACROSS GENERATIONS





Family Success Through Affordability, Stability, Health, and Care Across Generations

- CHILD CARE ASSISTANCE MORE THAN DOUBLED
- CHILD CARE WORKER WAGE INCREASES
- 1ST WORKFIRST NJ BENEFIT INCREASE IN 30 YEARS
- \$95 MINIMUM SNAP BENEFIT
- ONLINE GROCERY ORDERING FOR SNAP
- REDESIGNED MYNJHELPS APPLICATION
- INCREASED PAAD AND SENIOR GOLD PRESCRIPTION DRUG ASSISTANCE ELIGIBILITY
- NJSAVE & NJSAVE NAVIGATORS
- CERTIFIED HOME HEALTH AIDE CAREER
- PATHWAY PROGRAM
- PACE IN ALL 21 COUNTIES
- AGE FRIENDLY NJ
- MEDICAID SUPPORT FOR NURTURE NJ MATERNAL HEALTH
 - DOULA COVERAGE
 - COVERAGE 12 MONTHS POSTPARTUM
- STAYCOVEREDNJ
- COVER ALL KIDS
- INCREASED MEDICAID PROVIDER REIMBURSEMENTS
- EXPANDED NJ WORKABILITY
- CREATION OF OFFICE OF NEW AMERICANS
- EXCLUDED NEW JERSEYANS FUND
- REFUGEE RESETTLEMENT
- LANGUAGE ACCESS



Family Success Through Affordability, Stability, Health, and Care Across Generations

Under Governor Phil Murphy's Administration, New Jersey Human Services has pursued a clear, people-centered goal: ensuring families have what they need to succeed at every stage of life, and that those supports are affordable, accessible, and within reach for New Jersey residents. Family success depends on the ability of parents to afford to raise children, of children to grow up healthy and nourished, of older adults to age with dignity and financial security, and of caregivers to support loved ones without sacrificing their own economic stability, regardless of immigration status. That requires affordable child care, reliable and accessible food assistance, health care families can count on, coordinated aging services, culturally and linguistically appropriate supports, and systems that work together to increase affordability.

Across divisions, Human Services has intentionally aligned policy around how families live interconnected across generations, health needs, and economic circumstances, including the realities faced by immigrant and mixed-status families. Parents rely on affordable child care to remain in the workforce and on comprehensive health coverage to ensure safe pregnancies and healthy infants without overwhelming medical bills. Children need consistent access to food, preventive care, early intervention, and school-linked supports so cost, language, or immigration-related barriers are not obstacles to healthy development. Older adults depend on affordable prescriptions, home- and community-based services, and coordinated care that allows them to remain connected to family and community. Caregivers, often family members themselves, need systems that reduce financial burden, protect coverage, and provide clear, affordable, and inclusive pathways to support.

The Murphy Administration has strengthened this full continuum of family support by lowering out-of-pocket costs, expanding eligibility, modernizing access, and investing in social services and health care as mutually reinforcing pillars of family stability and affordability. New Jersey has expanded maternal and child health services, protected coverage during periods of economic disruption, integrated behavioral health, and strengthened long-term care, while also improving outreach, enrollment assistance, and language access to ensure immigrant families can meaningfully connect to services. At the same time, reforms to child care, food assistance, cash support, aging services, and caregiver programs have helped ensure that all families can meet everyday needs, manage costs, and plan for the future.

DIVISION OF FAMILY DEVELOPMENT

Under the Murphy Administration, New Jersey Human Services' Division of Family Development has reshaped core programs - child care, food assistance, cash support, and family services - into a more affordable, accessible, and responsive system for working families and those facing economic insecurity.

Affordability has been the foundation of this work. Child care subsidy rates more than doubled, with infant care rising from \$724 per month at the start of the Administration to \$1,587 per month in 2025, a critical investment in provider sustainability and parent access. Child care worker wages were also increased.

For families relying on cash assistance, the Administration delivered the first meaningful increase in WorkFirst NJ benefits in nearly 30 years, raising TANF and General Assistance grants by 30 percent. As a result, a family of three saw maximum monthly benefits increase from \$466 to \$559, while individuals receiving General Assistance saw benefits rise from \$154 to \$185 per month, a tangible boost in purchasing power during times of need.

Investments in early childhood care have been both targeted and substantial. The Thrive by Three Infant and Toddler Child Care Grant Program delivered a \$28 million investment to licensed child care centers and Head Start programs to expand capacity and quality for the youngest children. During pandemic recovery, New Jersey deployed \$427.5 million in American Rescue Plan funds through Child Care ARP Stabilization Grants, providing \$30,000 to \$120,000 to licensed centers, \$4,000 to registered family providers, and \$1,000 hiring and retention bonuses for new staff. These grants supported 37,000 child care workers and stabilized operations at 6,000 providers statewide.

Food security initiatives reflected both urgency and innovation. New Jersey became first in the country to do a minimum benefit across all populations, set at \$95 per month, ensuring that households with small federal benefits still receive meaningful support. This commitment represents a \$30 million annual investment. Access was further expanded through online grocery purchasing for SNAP recipients, allowing Families First EBT cards to be used at major retailers including Amazon, Walmart, ShopRite, and The Fresh Grocer, and through the launch of the Connect EBT mobile app, enabling users to manage benefits securely and independently.



During the pandemic, New Jersey distributed \$1.5 billion in Pandemic-EBT benefits, reaching more than one million children who normally rely on free or reduced-price school meals. That commitment continued through Summer EBT, with \$169 million issued to 1.4 million children over two summers, providing families with food support when school meals were unavailable.

Structural reforms further strengthened family stability. The Administration eliminated the TANF “family cap,” ensuring that children are not denied support based on birth timing, and modified sanction rules so families could remain eligible as long as one adult remained compliant, preventing sudden loss of assistance. New Jersey also consolidated more than 20 homeless hotlines into a single statewide hotline, simplifying access during housing crises.

Behind these policy shifts was a commitment to modern, user-centered administration. The MyNJHelps application for SNAP and WorkFirst NJ was fully redesigned, allowing applicants to track case status, upload documents, complete reporting requirements, request EBT replacements, view household details, and receive updates electronically - reducing delays, errors and unnecessary in-person visits.

DFD also modernized systems to make services easier to access and use. New Jersey transformed the child support program through digital document delivery, clearer online forms, and a complete online application that allows families to apply, upload documents, and receive court dates from home. Payment options expanded dramatically, now including online, retail, debit, credit, Venmo, check, and a mobile app, making compliance easier and collections stronger. Each year, approximately \$1 billion in child support payments is collected and delivered to families who depend on timely support.

DFD invested in the workforce that makes the system run. Through a \$300,000 Child Care Apprenticeship Pilot Program, New Jersey supported 14 child care centers across 11 counties, helping providers recruit and train staff for infant and toddler classrooms while apprentices earned credentials and worked full-time.

By combining historic investments totaling billions of dollars with system modernization and a focus on dignity and access, the Division of Family Development continued demonstrating that when government centers families, the results are measurable, meaningful, and lasting.



DIVISION OF AGING SERVICES

Under the Murphy Administration, New Jersey Human Services' Division of Aging Services has reshaped aging policy to prioritize affordability, accessibility, and coordinated care, meeting older adults and people with disabilities where they are, while modernizing systems to deliver help faster and more fairly.

New Jersey raised income eligibility limits for the Pharmaceutical Assistance to the Aged and Disabled (PAAD) and Senior Gold programs by \$20,000, expanding access to prescription assistance and transitioning thousands of residents into more affordable coverage. These changes brought over 20,000 new PAAD beneficiaries and 2,500 new Senior Gold beneficiaries into the programs, followed by a policy change allowing reimbursement for medications purchased up to 30 days before an application was completed. These reforms ensured continuity of care during periods of rising medication costs and reduced the financial shock of delayed coverage.

DoAS also transformed how residents access benefits. Through the NJSave single, streamlined application, older adults and people with disabilities can now be screened for multiple state and federal programs through one portal. This modernization replaced fragmented, manual eligibility systems with a unified digital platform that automates verifications, flags missing information, and centralizes eligibility determinations. As a result, more than 90,000 NJSave applications have been submitted online, with improved processing for approximately 18,000 applications annually and a shift away from paper-based workflows.

Health care affordability was further strengthened by expanding Medicare Savings Programs. New Jersey created a QMB-only program, allowing older adults and people with disabilities who do not qualify for Medicaid to receive full coverage of Medicare premiums, deductibles, coinsurance, and copayments. Nearly 8,000 individuals were transitioned into this more comprehensive benefit. Prescription access was protected by exempting insulin products from manufacturer rebate requirements in PAAD and Senior Gold, ensuring universal insulin coverage at \$5 generic and \$7 brand copays for approximately 9,300 beneficiaries, and by proactively transitioning 322 people living with HIV into the AIDS Drug Distribution Program when rebate agreements ended, preventing treatment disruptions.



ARE YOU A SENIOR OR INDIVIDUAL WITH DISABILITIES STRUGGLING TO AFFORD YOUR PRESCRIPTION MEDICATIONS?

NJ Human Services offers several programs you may be eligible for to aid with prescription drug costs.



The Pharmaceutical Assistance to the Aged and Disabled (PAAD)

A state-funded program that helps eligible seniors and individuals with disabilities save money on their prescription drug costs.



The Senior Gold Prescription Discount Program (Senior Gold)

A state-funded prescription program with a different co-payment structure and income eligibility guidelines than those of PAAD.



Accessibility and outreach expanded dramatically. DoAS invested over \$5 million in new Senior Save Navigator Grants to 11 community-based agencies, supporting one-on-one application assistance and grassroots outreach statewide. From August 2024 through June 2025, navigators hosted 1,256 outreach events, distributed 1,519 applications, and completed 1,596 applications, reaching residents often missed by traditional systems. A coordinated, multilingual outreach campaign, including mailings to over one million residents age 65+, paid media, and pharmacy-based materials, resulted in a 150% increase in NJSave submissions and participation in 100,000 GetSetUp online classes, helping combat isolation while increasing benefit enrollment.

Nutrition and wellness programs reflected New Jersey's commitment to healthy aging. Expanded funding supported the delivery of 221,499 kosher home-delivered meals to 3,788 older adults, while statewide wellness initiatives such as Chronic Disease Self-Management, Tai Ji Quan, and Healthy Bones were implemented in partnership with Rutgers and national experts. A new \$4 million Senior Wellness Pilot Program will fund local initiatives to improve socialization and health outcomes for older adults and individuals with disabilities.

Caregivers received attention and investment. Through a \$850,000 federal Alzheimer's Disease Program Initiative, DoAS delivered caregiver stress-reduction programs and professional training statewide. New Jersey also launched a comprehensive effort to expand the direct care workforce through a Certified Home Health Aide career pathway program supported by scholarships, training, mentorship, and a statewide awareness campaign. As of May 2025, 2,265 applications were received, 765 individuals were referred for initial CHHA licensure, and 688 existing aides completed specialized mental health and dementia training, strengthening the workforce needed to help residents age at home.

System-level reforms ensured care followed people, not institutions. The Program of All-Inclusive Care for the Elderly (PACE) expanded statewide. Investments in state-funded home- and community-based programs increased reimbursement rates and achieved parity with Medicaid for weekends and holidays, improving access to aides, increasing hours of care, and reducing waitlists that had persisted for years.

During the COVID-19 public health emergency, DoAS demonstrated agility and leadership. Emergency flexibilities enabled the delivery of over 4.6 million meals, rapid shifts from congregate to home-delivered services, remote wellness programming, and uninterrupted caregiver supports. Prescription access was safeguarded through PAAD and Senior Gold allowances, while emergency preparedness initiatives distributed 3,740 Go Bag kits - nearly 15,000 total items - across all counties.

Adult Protective Services received a \$1 million budget increase, the first since 2013, stabilizing county staffing and supporting responses to over 10,000 reports annually.

NJSave



GetSetUp



Behind these programmatic advances was an investment in modern infrastructure. DoAS implemented Salesforce-based eligibility systems, cloud-based document management, AI-enabled contact centers, automated eligibility bots, and new portals for nursing facilities and managed care partners. These upgrades reduced processing times by days, improved routing accuracy by 300 percent, shortened call handling times by 3–5 minutes, and allowed staff to focus on complex cases rather than paperwork, bringing the “No Wrong Door” vision to life.

New Jersey's leadership has been recognized nationally, including the 2023 Public Service Award from the National PACE Association, the Innovations in Benefits Outreach Award, and participation in prestigious national leadership programs.

In addition to these accomplishments is Age Friendly New Jersey, an initiative dedicated to creating communities where older adults can thrive with dignity, independence, and safety. Through this platform, the Division has worked to implement programs that enhance accessibility, promote social inclusion, and improve the overall quality of life for people of all ages across the state. In 2021, New Jersey was the ninth state to be accepted into AARP's Network of Age-Friendly States. Since

then, DoAS has released a statewide Age-Friendly Blueprint as a guide for leaders across all sectors and distributed \$3 million to support local Age-Friendly initiatives.. By collaborating with local governments, nonprofits, and community members, it has helped advance policies and projects that ensure New Jersey's aging population



remains connected, supported, and empowered - a mission that reflects Human Services' commitment to fostering equitable and sustainable communities for all residents.

Together, these accomplishments reflect a Division committed not only to helping New Jerseyans age, but to ensuring they do so with security, respect, and access to the care they deserve.

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES



Under the Murphy Administration, NJ FamilyCare, administered by the Division of Medical Assistance and Health Services (DMAHS), has undertaken a broad transformation of how Medicaid serves people, pays for care, and holds itself accountable. This work has touched nearly every aspect of the program: maternal health, behavioral health, long-term care, eligibility systems, provider payment, and fiscal stewardship. The throughline has been simple but demanding - design policy around real people, test solutions rigorously, and manage public dollars with integrity.

Nowhere is this more evident than in maternal and child health. DMAHS invested \$30 million in maternity care provider rate increases, expanding access to obstetricians, licensed midwives, and community doulas, while establishing payment parity between midwives and physicians. The program secured federal approval to extend postpartum coverage to 12 months, modernized lactation equipment coverage, and added reimbursement for lactation consultant services, steps shown to reduce maternal morbidity and support infant health.

Community doulas became a covered Medicaid benefit through a stakeholder-led design process. As a result, more than 300 NJ FamilyCare members have already received doula services, while the doula workforce continues to grow through cross-agency partnerships. These changes were reinforced by system upgrades that enabled the enrollment and reimbursement of birth centers and expanded access to licensed midwives statewide.

When the COVID-19 pandemic upended health systems nationwide, NJ FamilyCare moved decisively to protect coverage, preserve access to care, and keep people safe following the public health emergency, then managed one of the most complex eligibility unwinding efforts in Medicaid history with the same focus on equity and outcomes. Throughout the Public Health Emergency, New Jersey maintained continuous eligibility for over 2 million residents, rapidly expanded telehealth, relaxed prior authorization and administrative requirements, and coordinated closely with managed care organizations to reach high-risk members. DMAHS provided critical technical support to distribute federal relief funding, including provider data submissions to support PPE and stabilization dollars, while equipping its workforce for remote operations without interrupting service.



As federal protections ended, the Division launched a year-long, carefully staged unwinding supported by major system upgrades: online, telephonic, automated, and pre-populated renewals; new data sharing with SNAP to increase ex parte renewals; collection of address updates; and a statewide StayCoveredNJ outreach campaign with community partners and MCOs. New call center flexibilities, digital mailroom transformation, and new renewal channels helped ensure eligible residents kept coverage while those no longer eligible transitioned smoothly, demonstrating that even in crisis and complexity Medicaid can be administered with precision, compassion, and accountability.

Equity also meant expanding coverage itself through Cover All Kids. Through deliberate policy choices and systems work, New Jersey built the infrastructure to enroll more than 40,000 undocumented children in comprehensive NJ FamilyCare coverage and implemented coverage for undocumented adults for specific services, including prenatal and contraceptive care.

DMAHS reshaped behavioral health access and integration at scale. Provider reimbursement increased, strengthening networks for mental health and substance use disorder services. Prior authorization barriers were eliminated for HIV treatment in support of the state's "End the Epidemic" strategy. Interoperability expanded rapidly: 108 SUD facilities and more than 2,200 clinicians now exchange information electronically across behavioral and physical health settings, with federal approval extending this capability to mental health providers.

Access to Autism services for youth expanded significantly, as services there were previously available only on a pilot basis were incorporated as a permanent part of the Medicaid benefit package.



At the same time, New Jersey took a deliberative and stakeholder- driven approach to further integrating behavioral and physical health. To support this work, DMAHS (in partnership with the Division of Mental Health and Addiction Services) launched the Behavioral Health Integration Hub—bringing providers, advocates, managed care organizations, and sister agencies together to align around best practices and future system design.

The NJ WorkAbility program was expanded to remove age-based eligibility barriers, enabling more people with disabilities to work without losing health coverage.

Long-term services and supports underwent equally significant reform. DMAHS increased rates across personal care assistance (PCA), private duty nursing (PDN), medical day care, traumatic brain injury services, assisted living, and nursing facilities, addressing workforce shortages and stabilizing care delivery. The nursing facility Quality Incentive Payment Program (QIPP) was created and evolved over time with growing participation and funding \$50 million in bonus payments to facilities achieving the some of the highest quality benchmarks in the nation.

The Division also coordinated complex nursing facility closures, transitioned fiscal intermediary responsibilities without disruption, and launched stakeholder-driven efforts to strengthen self-directed care, ensuring safety, choice, and continuity for people with the highest needs.

Innovation at DMAHS has been practical, not performative. Value-based payment models now align incentives around outcomes, including the Perinatal Episode of Care, which covers providers delivering care for more than 10,000 Medicaid births annually. The Integrated Care for Kids model was expanded with federal approval and DMAHS focused on housing as a critical area of need for our members that was not well integrated with their physical and mental health needs. DMAHS launched housing case management services to support those member needs as well as an innovative housing production model in partnership with DCA, Healthy Homes, that aims to provide affordable housing units to Medicaid members..

Technology investments transformed eligibility and enrollment. DMAHS modernized systems to support online, telephonic, automated, and pre-populated renewals, protecting coverage while reducing administrative burden. New flexibilities enabled the collection of more than 197,000 address updates, expanded automated renewals using SNAP data, and supported over 1,000 telephonic renewals in the first month alone. These improvements were critical during the unprecedented unwinding of the Public Health Emergency.

DMAHS paired innovation with rigorous accountability. Transportation contracts were amended to improve performance. Provider enrollment backlogs were reduced. Managed care organizations were held to new standards for network adequacy, preventive dental care, and member assistance and DMAHS introduced new regularly recurring “360 Degree” reviews of each managed care organization to identify strengths and weaknesses, and ensure performance issues are rapidly addressed.

Additionally, the Department has invested \$1.5 million annually into long-term care integrity and oversight, supporting audits of nursing home cost reports and workforce research. The County Option Hospital Fee Program alone generated more than \$860 million in additional federal funding for New Jersey providers, without new state appropriations, strengthening hospitals that serve Medicaid communities. DMAHS also resolved long-standing federal budget neutrality issues under the 1115 waiver and helped establish a fairer national framework for Medicaid financing.

New Jersey’s Medicaid program offers a clear lesson: government works best when it measures success not by promises made, but by lives improved.

OFFICE OF NEW AMERICANS

Immigrants are central to New Jersey’s identity and economic strength. Under Governor Phil Murphy, Human Services’ Office of New Americans has matched that reality with policy leadership, building systems that promote inclusion, protect families, and reduce barriers to contributing to civic and economic life. Through the Office of New Americans and related initiatives, the Murphy Administration has advanced one of the most comprehensive state-level immigrant integration agendas in the nation.

To ensure long-term inclusion, Governor Murphy established the Office of New Americans, creating the state’s first-ever centralized office dedicated to immigrant and refugee integration. ONA was designed to help immigrants and refugees settle, access social services, and participate in New Jersey’s economy. The Administration also convened an Interagency Workgroup on New American Integration, co-chaired by the Departments of Human Services and Labor and Workforce Development



and joined by ten additional state departments. Together, these agencies coordinate best practices across government, embedding immigrant inclusion into the fabric of state operations.

At moments of crisis, the Administration acted decisively. During the height of the COVID-19 pandemic, many immigrant families, despite contributing to state and federal taxes, were excluded from federal relief due to immigration status. In response, New Jersey created the Excluded New Jerseyans Fund, directing COVID relief dollars to families who otherwise had no access to financial assistance. This intervention recognized both the humanity and the economic contributions of immigrant communities at a time of unprecedented need.

One of the Administration's earliest and most consequential actions was restoring refugee resettlement to state oversight. After the prior administration removed the Refugee Resettlement Program from state government and outsourced it entirely to a nongovernmental organization, Governor Murphy requested its return in 2019, restoring transparency, public health oversight, and accountability. Since 2021, the program has been administered by ONA, which now serves as home to the State Refugee Coordinator and State Refugee Health Coordinator. Through the Refugee Health Program and Domestic Medical Screening initiative, newly arrived refugees are connected to the U.S. health care system and receive care for urgent and chronic conditions upon arrival.

That infrastructure proved essential during Operation Allies Welcome, launched in August 2021 following the U.S. withdrawal from Afghanistan. New Jersey played a national leadership role, with Joint Base McGuire-Dix-Lakehurst serving as one of the country's largest safe haven sites. More than 13,000 Afghan evacuees received vaccinations, meals, shelter, and medical care through a coordinated, multi-agency effort that included ONA. As evacuees transitioned into communities, local refugee resettlement agencies welcomed nearly 800 Afghan families to New Jersey. ONA facilitated domestic medical screenings and access to mainstream benefits for those making the state their permanent home.

The Murphy Administration has also expanded support for humanitarian parolees. Since 2022, New Jersey has supported the federal Uniting for Ukraine (U4U) program, providing a legal pathway for Ukrainians displaced by Russia's invasion. In 2023, the state similarly responded to the Cuban, Haitian, Nicaraguan, and Venezuelan (CHNV) humanitarian parole program. Through ONA, refugee resettlement agencies, and state partners, New Jersey delivered resettlement supports, domestic medical screenings, and access to benefits—ensuring parolees could stabilize quickly and begin rebuilding their lives.

Protecting due process has been another hallmark of the Administration's approach. In 2018, Governor Murphy allocated funding for the Detention and Deportation Defense Initiative (DDDI), recognizing that deportation is among the harshest penalties under U.S. law and that most immigrants lack the right to appointed counsel. DDDI has provided critical legal representation to low-income New Jersey residents detained and facing deportation, ensuring that families are not separated simply because they cannot afford an attorney.

The Administration has paid particular attention to children and youth. In 2022, New Jersey partnered with Kids in Need of Defense (KIND) to provide free legal counsel and social services coordination for unaccompanied immigrant children arriving in the state. This program ensures expert representation in immigration court and connects young people to the supports they need to safely make New Jersey their home.

Language access has likewise moved from aspiration to law. In 2024, New Jersey began implementing a new law (P.L. 2024, c.63), requiring state agencies to provide translation and interpretation services for nearly one million residents with Limited English Proficiency. Through infrastructure established at the ONA, the Language Access Initiative team provides departments with training, technical assistance, and planning support to meaningfully engage with New Jerseyans who speak languages other than English.

Health coverage has been expanded through outreach as well. Through Cover All Kids, ONA has partnered to conduct statewide, multilingual outreach to immigrant communities, raising awareness and increasing enrollment in NJ FamilyCare for income-eligible children. Community-based organizations receive education and hands-on support to help families complete applications and host enrollment events.

The Murphy Administration has also linked immigration policy to workforce opportunity. In 2023, New Jersey invested federal funding to expand awareness of work authorization processes and provide application assistance to newly arrived migrants eligible to work lawfully. These efforts accelerate employment, protect worker safety, and help families achieve stability while strengthening the state's economy.

Taken together, these accomplishments represent a coherent vision: immigrant integration is not charity—it is smart governance. Under Governor Murphy, New Jersey has chosen inclusion, legality, and humanity, building systems that recognize immigrants and refugees not as outsiders, but as essential contributors to the state's future.

The Legal Representation for Children & Youth Program

Providing free legal services
to children and youth in
immigration proceedings.

Call or text: 201-305-9217
Email: uacscreening@NJCIC.org

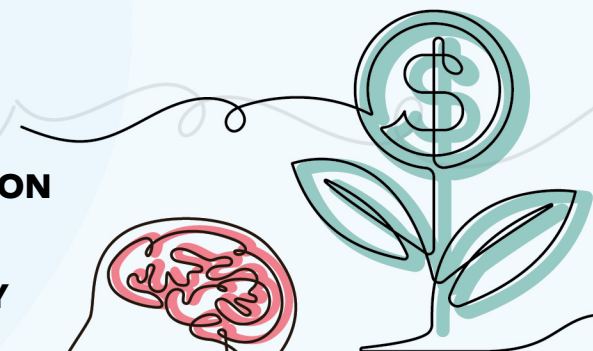


INCLUSIVITY AS A CORNERSTONE OF PROGRESS IN NEW JERSEY HUMAN SERVICES



Inclusivity as a Cornerstone of Progress in New Jersey Human Services

- **DIRECT SUPPORT PROFESSIONAL WAGE INCREASES**
- **INCREASED DIRECT SUPPORT PROFESSIONAL TRAINING**
- **STEPHEN KOMNINOS' LAW**
- **QUALITY MANAGEMENT TEAMS TO ENFORCE PROTECTIONS FOR I/DD INDIVIDUALS**
- **NEW LICENSED PROVIDER REPORT CARD**
- **LOAN REDEMPTION PROGRAM FOR HEALTH CARE PROFESSIONALS**
- **INCREASED COMMUNITY OPTIONS FOR I/DD INDIVIDUALS**
- **MORE TEACHERS FOR THE BLIND AND VISUALLY IMPAIRED**
- **CONTINUED EDUCATIONAL AND VOCATIONAL SUPPORTS FOR THE BLIND AND VISUALLY IMPAIRED**
- **NJ ABLE**
- **INCLUSIVE HEALTH COMMUNITIES GRANT PROGRAM**
- **TBI SURVIVOR BOARD**
- **DISABILITY INFORMATION HUB**
- **REVAMPED NEW JERSEY RESOURCES GUIDE**
- **DEAF AND HARD OF HEARING EQUIPMENT DISTRIBUTION EXPANSION**
- **INCREASED HEARING AID ASSISTANCE**
- **LANGUAGE INSTRUCTION PROGRAM FOR DEAF AND HEARING YOUTH**
- **DEAF AND HARD OF HEARING COMMUNICATION ACCESS GRANTS TO COUNTIES**



Inclusivity as a Cornerstone of Progress in New Jersey Human Services

Under Governor Phil Murphy's Administration, New Jersey's Department of Human Services has advanced a unifying and transformative vision: inclusivity as a central measure of effective government. Across multiple divisions serving people with disabilities, Human Services has worked to dismantle barriers, expand access, and build systems rooted in dignity, equity, and lived experience.

The Murphy Administration has pursued an approach that recognizes inclusion as both a moral imperative and a practical strategy for strengthening communities. By investing in people, modernizing infrastructure, strengthening community-based supports, and elevating the voices of those most directly impacted, New Jersey has made measurable progress toward a more inclusive system.

The accomplishments together tell a comprehensive story of how inclusivity has been operationalized across policy, funding, workforce development, and service delivery.

DIVISION OF DEVELOPMENTAL DISABILITIES

The Division of Developmental Disabilities (DDD) supports over 30,000 adults with intellectual and developmental disabilities (IDD) in leading independent, active lives. Under the Murphy Administration, DDD's budget has increased by 200%, enhancing services mainly through wage increases for Direct Support Professionals and expanding service utilization. Committed to transparency, DDD engages the community via monthly webinars, hosting nearly 100 since the pandemic's onset. It has also formed a Self-Advocacy Advisory Council and meets with a Family Advisory Council for regular policy discussions.



From 2018 to 2025, intake applications surged by nearly 200%, reflecting growing demand for community-based support. In 2025, DDD processed over 4,800 applications and since the start of Murphy's term has moved over 3,600 individuals off the Community Care Program waiting list. It has also invested in affordable supported housing, supporting the creation of over 3,000 new residential beds for adults with IDD in the community. The use of self-direction has increased by over 900%, supported by DDD's Office of Education on Self-Directed Services, enabling tailored service delivery. DDD now allows family members to be hired as self-directed employees, expanding the workforce and recognizing family caregivers' contributions.

A comprehensive support system is essential to address the unique challenges faced by adults with IDD who also have complex behavioral and medical needs. Effective systems not only intervene before crises occur but also facilitate transitions from crisis care to community-based support, thereby reducing the reliance on emergency psychiatric services. Recognizing these gaps, Human Services, during Governor Murphy's Administration, has taken significant steps to strengthen and enhance services for this vulnerable population. Early in Governor Murphy's Administration, Human Services assessed the needs and gaps in existing services, leading to the development of evidence-based services to better support individuals with intense, specialized needs.



The Department's efforts have focused on creating a cohesive support system that includes preventive measures, crisis intervention, and community integration strategies. Through the creation of new services and implementing evidence-based strategies, New Jersey has taken strides to prevent crises and reduce trauma aiming to ensure that all individuals have access to the care and support they need. The following describes these successful initiatives.

- The Murphy Administration invested nearly \$2.3 billion to support adults with intellectual and developmental disabilities, including increasing the hourly wages for direct support professionals from an average of \$12.66 to \$21 an hour.
- DDD awarded nearly \$11m in new funding for over 300 new beds in licensed residential settings for adults with IDD and complex medical and behavioral needs, which includes 54, 4-bedroom group homes.
- Launching in October of 2025, START Services NJ, offers community crisis prevention and intervention



services to individuals with IDD and co-occurring mental health needs in 11 counties. The START Services NJ is funded by DDD and operated by multidisciplinary clinical and therapeutic coaching teams that provide in home support services to individuals enrolled in DDD who are experiencing or at risk of a behavioral health crisis.

- In 2023, DHS dedicated \$4m to a new contract to establish three four-bedroom Behavioral Health Stabilization Homes, providing adults with IDD and complex behavioral and mental health needs with short-term, intensive support. Thus far, two homes have opened, serving a total of 28 individuals with behavioral health needs and referred to behaviors such as physical aggression, self-injurious behavior, elopement, severe property destruction, and verbal aggression. Preliminary data show a reduction of over 60% in emergency room visits within the first six months post-discharge, a trend that continued in the one year post-discharge. Additionally, there was an observed decline of over 40% in reportable behavioral incidents among discharged clients when comparing the one-year period prior to admission with the one-year period following discharge. Caregivers have reported a measurable decline in maladaptive behaviors, underscoring the effectiveness of this model in reducing behavioral escalations and helping both clients and caregivers better manage behavioral needs.
- To enhance training for direct support professionals (DSPs), DDD doubled the required training hours from about 30 to about 60 hours, covering new topics such as trauma-informed care, working with families, and cultural competency.
- In 2025, DDD awarded funding to providers to train and certify direct support professionals to specialize in supporting individuals with IDD and a mental illness through the National Association of the Dually Diagnosed (NADD) Competency-Based IDD/MI Dual Diagnosis Direct Support Professional Certification.
- To invest in the workforce that supports people with disabilities and behavioral health needs, in early 2025, DDD collaborated with the Higher Education Student Assistance Authority and the Department of Children and Families (DCF) to launch the Home and Community Based Services Loan Redemption Program, offering up to \$50,000 in loan redemption to healthcare professionals in exchange for one year of service at a qualified provider. The program funded over 450 healthcare professionals, including 100 professionals serving adults with IDD through DDD provider agencies.
- DDD also streamlined their application process to ease the process of transitioning young adults from the Children's System of Care in DCF to the adult system in DDD. Through a shorter variant of the application, individuals can now indicate their previous enrollment in CSOC, allowing DDD to obtain supporting documentation directly from DCF.

COMMISSION FOR THE BLIND AND VISUALLY IMPAIRED

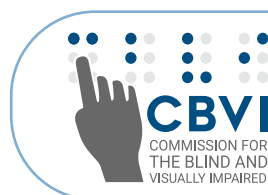
Under the Murphy Administration, Human Services' Commission for the Blind and Visually Impaired (CBVI) has strengthened every stage of support for blind, deafblind, and visually impaired residents, from early childhood through adulthood, with a focus on equity, accessibility, and real-world outcomes.

Education has remained a cornerstone of CBVI's mission. Each year, the Commission provides educational services to more than 1,700 legally blind and visually impaired students, from infancy through high school graduation, ensuring access to a free and appropriate public education. CBVI supports 392 Local Education Agencies statewide and serves students enrolled in both district and charter schools. In the 2024–2025 school year alone, CBVI held approved service contracts for 1,710 students, including 21 students across 12 charter schools, with \$96,283 in direct payments for those charter placements and a total of \$5.49 million in state aid investment to support LEA services.

CBVI has also strengthened pathways to employment and economic independence. Through its Vocational Rehabilitation programs, caseworkers partner closely with consumers seeking to enter or remain in the workforce, providing job placement assistance, skill development, and advocacy. As a result, many consumers have successfully transitioned into employment and reduced or eliminated reliance on Social Security disability benefits. Programs like CREATE, CBVI's pre-employment transition initiative, have supported more than 40 blind and visually impaired students ages 16 to 21 in exploring postsecondary education and career pathways through assessments, job shadowing, and campus-based learning experiences.

Accessibility improvements have expanded inclusion across CBVI facilities and services. The installation of a looping system at the Joseph Kohn Training Center dramatically improved access for individuals who are deaf or hard of hearing, providing automatic compatibility with hearing aids and meeting all ADA assistive listening requirements. CBVI also enhanced independent living services for deafblind consumers by increasing staff training, expanding specialized instruction, providing safety equipment, and strengthening collaboration with partner agencies.

Programs that promote independence and self-advocacy have grown in both reach and impact. CBVI's Pre-High



School Upwardly Mobile Program (PUMP) offers middle school students immersive summer learning experiences focused on independence, technology, recreation, and transition planning. Hosted at the Joseph Kohn Training Center, PUMP prepares students in grades 7 and 8 for the transition to high school while familiarizing them with future CBVI opportunities. In addition, CBVI's Fellowship mentorship program connects older blind adults with blind youth ages 18 to 21, fostering peer learning, self-advocacy, and professional development. Since its launch, the program has supported approximately 60 participants, who report increased confidence, skills, and a stronger sense of community.

CBVI's Independent Living programs further reinforce daily independence. Orientation and Mobility staff in the Southern Region provided Access Link travel training to more than 500 consumers, helping individuals navigate public transportation safely and independently. The Independent Living Older Blind CCTV Program has enabled visually impaired residents to read mail, manage medications, and pay bills independently, supporting aging in place and long-term self-sufficiency.

Workforce investments have strengthened CBVI's capacity during a period of national shortage. Since 2021, CBVI invested \$260,000 to recruit Teachers of the Blind and Visually Impaired, successfully hiring 11 new TVIs statewide to support students from birth through graduation. The Commission has also advanced inclusive employment by hiring 32 blind, deafblind, or visually impaired staff members during the Administration, supported by the addition of 29 Driver Aide personnel to ensure workplace accessibility.

During the COVID-19 pandemic, CBVI demonstrated resilience and innovation. The Education Unit transitioned to a comprehensive virtual instructional model within days, delivering braille, technology instruction, and emotional support through platforms such as Zoom, Google Meet, and FaceTime. Teachers and technology specialists collaborated creatively to ensure continuity of learning and foster lasting gains in digital skills that continue to benefit students today.

Finally, CBVI strengthened accountability and fairness through the formalization of waiver and appeals policies statewide. By standardizing processes, offering timely resolution of disputes, often within the same month, and ensuring consistent service delivery, CBVI reinforced trust and transparency for consumers across New Jersey.

Together, these efforts reflect a Commission that understands independence is built through access, opportunity, and respect. By investing in education, employment, accessibility, and inclusive workforce practices, CBVI has not only expanded services, it has strengthened the ability of blind and visually impaired New Jerseyans to fully participate in their communities and shape their own futures.



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NEW JERSEY HUMAN SERVICES
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COMMISSION FOR
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DIVISION OF DISABILITY SERVICES

Disability policy succeeds when it expands choice, strengthens independence, and makes systems easier to navigate. Under the Murphy Administration, Human Services' Division of Disability Services (DDS) has been doing precisely that: modernizing programs, investing in community infrastructure, and centering the voices of people with disabilities in how policy is designed and delivered.



Affordability has been a critical starting point. By expanding the adoption of NJ ABLE accounts and dedicating full-time staff to outreach and public awareness, DDS strengthened a nationally recognized tool that allows people with disabilities to save for qualified expenses without jeopardizing benefits. Today, 3,788 New Jersey residents actively use NJ ABLE accounts, with more than \$42 million in assets under management, a tangible measure of increased financial stability and long-term planning for people with disabilities and their families.

Inclusivity and accessibility have driven some of the Division's most significant investments. Through the Inclusive Healthy Community Grants Program, DDS awarded \$10.9 million over three funding cycles to more than 40 New Jersey organizations, improving accessibility, inclusion, and community participation for people with disabilities where they live, work, and socialize. At the same time, DDS initiated sustained funding for disability-led Centers for Independent Living, supporting core services such as information and referral, peer support, transitions, advocacy, and independent living skills training.

Ensuring that lived experience informs policy has been more than a principle; it has been a practice. DDS secured a five-year federal grant totaling \$1.7 million to address gaps in services for people living with traumatic brain injury.



That investment established a TBI Survivor Board to work alongside the Governor-appointed Advisory Council and produce a State Action Plan for TBI, embedding survivor perspectives directly into statewide policy development. In parallel, DDS strengthened supports for women with disabilities who have experienced domestic or sexual violence by funding a six-part, comprehensive needs assessment conducted by the Rutgers University Center for Research on Ending Violence, laying the groundwork for more responsive and effective services under the Violence Against Women Act.

Caregiving and navigation support have also been modernized to meet families where they are. In 2024, Human Services, the Office of Innovation, and Governor Murphy launched the Disability Information Hub, a fully accessible website that provides information about key disability-related state resources and programs, designed by incorporating feedback

from people with disabilities at every step. Nearly 200 programs offered by the State of New Jersey can be found through this site. The Hub meets WCAG and Section 508 accessibility requirements, uses high-contrast colors, and is compatible with screen readers. DDS now serves as the designated state agency for the Disability Information Hub, partnering with other state agencies and investing in dedicated staff to ensure the Hub's long-term sustainability and growth. The Division expanded its Information and Referral unit by adding specialist capacity, responding to individuals seeking help navigating complex disability systems. To further simplify access, DDS rebranded and fully redesigned NJ Resources, creating a comprehensive directory of disability supports across state government. Since May 2024, 21,850 English-language and 1,400 Spanish-language copies have been distributed statewide, with online access expanding reach even further.

These service improvements have been matched by internal operational reforms. Workforce development was strengthened through a partnership with the Rutgers University School of Public Health, delivering seven months of training to two cohorts on public health fundamentals, community outreach, program planning, cultural humility, and evaluation. Fifty individuals, including DDS staff, Centers for Independent Living staff, Brain Injury Alliance staff, and TBI case managers, completed this comprehensive training, building expertise across the disability system.

Beyond formal programs, DDS launched a Disability Community Resources Listserv that now reaches approximately 6,000 individuals and organizations, distributing twice-weekly updates on services, funding opportunities, and events. DDS also strengthened relationships with community partners statewide,

increasing its presence on boards, councils, and collaborative initiatives to ensure disability perspectives are consistently represented.

Program integrity and operational accountability have been key focuses for DDS. DDS strengthened controls and operations of the TBI Fund by enhancing case management oversight, hiring in-house case managers, enhanced enforcement of service caps and eligibility requirements, launched an online application, and formalized the Review Committee, with meetings now held monthly to expedite service delivery. The division is also procuring a comprehensive database to further strengthen the Fund's management and integrity.

Taken together, these efforts reflect a disability policy that is fiscally responsible, operationally sound, and rooted in lived experience. By pairing targeted investments with structural reform and community partnership, the Division of Disability Services has shown that government can deliver systems that are not only effective, but humane. The result is a disability infrastructure that is more accessible, more accountable, and better equipped to support independence and dignity for thousands of New Jersey residents.

DIVISION OF THE DEAF & HARD OF HEARING

Access to communication is access to opportunity, health, and civic life. Under Governor Phil Murphy, New Jersey Human Services' Division of the Deaf and Hard of Hearing has made that principle real for Deaf and Hard of Hearing residents through historic investments, policy leadership, and a sustained commitment to inclusion.

At the foundation of this work is a system-wide focus on inclusivity and accessibility across all programs and services. The Administration created a dedicated Deaf and Hard of Hearing title series to formally recognize specialized skills within state government, resulting in the creation of five new positions. This structural change signaled a long-overdue acknowledgment that serving Deaf and Hard of Hearing residents requires expertise, lived experience, and professional recognition. In parallel, New Jersey issued guidance for hospitals and health care providers to improve communication





access, ensuring Deaf and Hard of Hearing patients are not left behind in medical settings.

Affordability and access to technology and hearing supports have also been dramatically expanded. The Murphy Administration significantly strengthened the Equipment Distribution Program (EDP) by adding wireless devices to increase digital accessibility - its first major expansion since the program's inception. Eligibility for EDP was raised to 400 percent of the federal poverty level, opening the door to thousands more residents. As a result, the number of individuals served by EDP increased from 60 to 207.

Through the Hearing Aid Assistance for the Aged and Disabled (HAAAD) program, hearing aid reimbursements were increased from a flat \$100 to \$500 per hearing aid - the first increase since 1987. This additional \$400 per device has made hearing aids meaningfully more affordable, driving extraordinary growth in the program. From FY21

to FY24, HAAAD enrollment rose from 53 individuals to 412.

The New Jersey Hearing Aid Project (NJHAP) was similarly expanded to meet residents where they are. The Murphy Administration added mobile audiology services to reach seniors in underserved areas, now serving residents across 14 counties. Between FY21 and FY24, NJHAP participation expanded from 60 to 207 individuals. The Administration also strengthened NJHAP's infrastructure through expanded information and referral services, hearing aid resources, case management, advocacy, and the addition of Deaf and Hard of Hearing Specialists to support program teams.

DDHH launched the Language Instruction Program (LIP) to support inclusion and exposure to American Sign Language (ASL) to children from birth to five years old in early child education settings and homes. Language access and early intervention have been central to ensuring long-term success for Deaf and Hard of Hearing children and families. The LIP received expanded staffing support, including consultants, program assistants, and field workers. From FY21 to FY24, LIP participation increased, growing from 19 to 45 families and currently serving 57 families statewide. The program formed a historic partnership with The College of New Jersey, was recognized internationally as a model program at the Family Centered Early Intervention Conference, and launched caregiver support groups to strengthen families enrolled in LIP.

No area better illustrates the Murphy Administration's leadership than communication access during crises and daily civic life. New Jersey became one of the first states to consistently provide sign language interpreters at COVID-19 vaccination megasites and during the Governor's press briefings.

Beyond visibility, the Administration built lasting infrastructure. DDHH partnered with the Department of Labor to ensure Deaf and Hard of Hearing residents could access unemployment services. Recognizing workforce shortages, New Jersey created the Interpreter Mentorship Program to support emerging interpreters and bridge the gap between academic training and professional practice. The State also onboarded 12 additional sign language interpreters and formalized memoranda of understanding with agencies including the Department of Education and Department of Labor to expand access to interpretation services statewide. The Division hired its first-ever Certified Deaf Interpreter, increasing high-quality language access and expanding ASL translation across the Disability Information Hub website.

To bring resources directly into communities, the Murphy Administration implemented three rounds of the Division's first-ever communication access grants. These grants provided \$1.5 million over three cycles to 17 counties, expanding sign language interpretation, captioning services, and hearing induction loops in the places where Deaf and Hard of Hearing residents live and work. From FY21 to FY24, participation in communication access programs increased by more than 49 percent, growing from 374 to 558 individuals served.

Taken together, these accomplishments reflect a clear philosophy: accessibility is not optional, and equity requires investment. Under Governor Murphy, New Jersey has paired policy leadership with concrete funding, workforce development, and measurable growth across every major Deaf and Hard of Hearing program. The result is a state that listens, communicates, and leads, setting a national standard for what inclusive government can and should be.



Language Instruction Program for Deaf, Hard of Hearing, and Deafblind Children Ages 0 - 5



State of New Jersey
Phil Murphy, Governor | Tahesha L. Way, Lt. Governor



Division of the Deaf and Hard of Hearing
Department of Human Services
Sarah Adelman, Commissioner



ACCESSIBLE COMMUNICATIONS

Under Governor Murphy's leadership, the New Jersey Human Services has been deeply committed to inclusive, accessible communication that ensures all residents can access critical information and services. The Department has embedded accessibility across its communications by producing accessible documents and publications, maintaining accessible social media content, and creating American Sign Language (ASL) videos, as well as audio-described videos and advertisements for individuals who are blind or visually impaired. NJ Human Services also provided communication cards to support effective interactions with Deaf and hard of hearing residents and routinely offers Spanish-language documents to better serve New Jersey's diverse communities. Together, these efforts reflect Human Services' ongoing dedication to equity, inclusion, and meaningful access for all New Jerseyans.

OFFICE OF PROGRAM INTEGRITY & ACCOUNTABILITY

Protecting vulnerable residents requires vigilance, transparency, and action. Under Governor Phil Murphy, New Jersey Human Services' Office of Program Integrity and Accountability has strengthened oversight, accountability, and prevention, setting a higher standard for how government safeguards individuals with disabilities and their families.



At the heart of this transformation is the full implementation of Stephen Komminos' Law, one of the most comprehensive individual protection statutes in the nation. OPIA ensured the law moved from promise to practice, requiring two unannounced visits each year to every licensed setting to assess risks of abuse, neglect, and exploitation. OPIA staff now conduct in-person verification of reported injuries, and families or guardians must be notified within two hours when serious incidents occur. The law strengthened pre-employment, random, and for-cause drug testing requirements for community caregivers, guaranteed families the right to attend investigative interviews, and requires investigators to provide detailed findings letters at the conclusion of investigations. Families may also request full investigation reports once cases are closed. Providers must exchange family and guardian contact information, and penalties and fines were increased for caregivers who fail to report abuse, neglect, or exploitation. Since the law's enactment, OPIA has conducted over 22,000 unannounced site visits across 2,200 adult residential settings to assess whether individuals are at risk of or being subjected to abuse, neglect, or exploitation. This includes having visited every individual living in a group home multiple times, for a total of over 80,000 face-to-face visits. Together, these reforms have shifted the system toward transparency, accountability, and family partnership.

Recognizing that prevention is as important as enforcement, OPIA creates proactive Quality Management Teams (QMTs) to stabilize struggling providers before harm occurs. While DDD and OPIA's Office of Licensing, Office of Performance Management, and Office of Prevention address specific instances of provider noncompliance with licensing requirements and ensure appropriate actions are taken to improve quality following incidents, QMTs provide comprehensive support to providers when pervasive issues have been identified. Five QMTs have been deployed to support Division of Developmental Disabilities provider agencies at risk of serious performance failures, helping avert potential takeovers or service disruptions. The ultimate goal of a QMT is to help providers meet all quality and compliance standards, leading to better outcomes for the people they serve. Whenever possible, DHS tries to work proactively with providers to remediate issues before a QMT becomes necessary. However, if a provider does not show sustained improvement in areas identified by the QMT, OPIA escalates licensing actions.

Transparency for families has been expanded through the redesigned DHS Licensed Provider Report Card. The updated report card is user-friendly and outcomes-focused, measuring whether providers meet health and safety standards rather than simply listing risk areas. A clear, color-coded star system allows families to quickly understand provider performance, while a redesigned Companion Guide explains scoring metrics, defines terms, and demystifies oversight data. This tool empowers families to make informed decisions and holds providers publicly accountable.

The Murphy Administration also embedded prevention into OPIA's core mission. In January 2023, OPIA created a dedicated Office of Prevention, bringing together the Field Safety and Services Unit with a Research and Prevention team. This office analyzes incident data for trends and insights and provides providers with in-depth, individualized reviews focused on preventing harm—particularly for individuals with complex or challenging needs.

To modernize oversight, New Jersey invested in advanced data infrastructure. OPIA procured a purpose-built software platform that strengthens quality oversight, health equity, transparency, and accountability, transforming operations from reactive, report-driven responses to proactive, person-centered decision-making grounded in holistic data about individuals, providers, and services.

Even during crisis, OPIA maintained its commitment to safety. Throughout the COVID-19 pandemic, field staff were trained in proper use of personal protective equipment, new protocols were developed for safe field work, and weekly COVID testing was conducted for all field staff. These measures allowed staff to return to programs as early as possible while protecting individuals receiving services.



OPIA also strengthened workforce safeguards statewide. Division of Developmental Disabilities caregivers must now undergo checks through the CARI system. State and federal background check requirements were implemented for a wide range of sensitive roles, including DHS and County Welfare Agency employees handling federal tax information, Medicaid-funded doulas and lactation specialists, high-risk Medicaid providers, Intensive In-Community and Intensive In-Home services, in-home Applied Behavior Analysis providers, and Deaf and Hard of Hearing ASL specialists.

Taken together, the Murphy Administration's record on program integrity and accountability reflects a clear philosophy: safety is proactive, transparency is non-negotiable, and families deserve both information and action. Through OPIA, New Jersey has built an oversight system that works every day to prevent harm, enforce standards, and protect the dignity of those who rely on state services.



**STRENGTHENING MENTAL HEALTH
AND ADDICTION SERVICES
THROUGH ACCESS, WORKFORCE,
AND COMMUNITY CARE**



Strengthening Mental Health and Addiction Services Through Access, Workforce, and Community Care

 **NJ DIRECT NALOXONE**


 **OPIOID OVERDOSE
RECOVERY PROGRAM**

 **NALOXONE AT
PHARMACIES**

 **OFFICE BASED
ADDICTION
TREATMENT**


 **OPIOID RECOVERY
AND REMEDIATION
ADVISORY COUNCIL
INVESTMENTS**

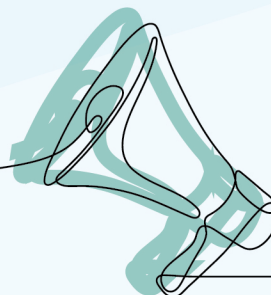
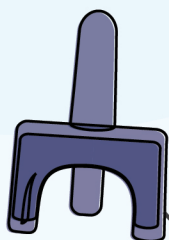
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OF CARE
IMPLEMENTATION**

 **EXPANDED
REACHNJ AND
988 ADVERTISING
CAMPAIGNS**

 **ELIMINATING PRIOR
APPROVAL FOR
MEDICAID COVERAGE OF
MEDICATION ASSISTED
TREATMENT**

 **CREATION OF
STAYINTHEPIC.NJ.GOV
TO PROMOTE FENTANYL
AWARENESS**

 **MEDICATION ASSISTED
TREATMENT IN COUNTY
JAILS FOR OPIOID
ADDICTION RECOVERY**



Strengthening Mental Health and Addiction Services Through Access, Workforce, and Community Care

Under Governor Phil Murphy's Administration, New Jersey Human Services has advanced a clear and urgent priority: building a behavioral health system that delivers timely, effective care without barriers. Mental health and addiction services are foundational to individual well-being, community safety, and economic stability, and Human Services has treated them as essential infrastructure backed by investment, inclusive policy design, and measurable results.

Across prevention, crisis response, treatment, recovery, and workforce development, New Jersey has aligned its behavioral health strategy around access, equity, and continuity of care. That means investing in community-based services, strengthening the workforce needed to deliver care, and ensuring people can access help early, before challenges escalate into crises.

By pairing policy leadership with targeted funding, the Murphy Administration has reshaped how mental health and addiction services are delivered across the state. These efforts reflect a comprehensive approach that recognizes recovery as a long-term process, values providers and individuals impacted by mental illness and/or addiction as essential partners, and centers dignity, stability, and outcomes for individuals and families alike. The result is a behavioral health system that is more accessible, more resilient, and better equipped to meet rising demand while delivering real, life-saving impact in communities statewide.

DIVISION OF MENTAL HEALTH AND ADDICTION SERVICES

Mental health and addiction services are not peripheral issues. They are central to public health, public safety, and economic stability. Under Governor Phil Murphy, New Jersey Human Services has treated them as such, backing policy commitments with sustained, measurable investments that are reshaping how care is delivered and who can access it.

The Murphy Administration has focused on inclusivity and accessibility, investing directly in community-based settings that allow people to receive care with dignity and stability. The state has committed \$3.5 million in funding to support home- and community-based residential services, strengthening group homes and ensuring ongoing state support for services provided in those settings. These investments reflect a deliberate shift away from institutional care toward environments that foster recovery, independence, and long-term success.


A second cornerstone of the Administration's strategy has been rebuilding and stabilizing the behavioral health workforce after years of shortages. New Jersey allocated \$17 million for workforce loan redemption, benefiting eligible mental health and addiction professionals and helping retain providers in high-need communities. To improve cultural and linguistic access to care, the state also funded a bilingual stipend initiative, supporting 35 awardees in FY24 and FY25 with \$1,242,500 in total state funding. In parallel, New Jersey has invested \$800,000 annually in psychiatry residency and child psychiatry fellowship programs, expanding training capacity and strengthening the pipeline of specialized providers.

Human Services has also prioritized growing the next generation of behavioral health professionals. Through targeted scholarship and stipend programs, 21 graduate students are currently participating and are eligible to receive up to \$10,000 in scholarships and \$4,000 in stipends, an investment designed to reduce financial barriers and encourage long-term careers in public behavioral health.

Recovery-oriented services have seen equally significant progress. New Jersey dramatically expanded access to overdose reversal medication, distributing naloxone kits at participating pharmacies and directly to eligible organizations. These efforts have saved lives and strengthened community-level overdose response capacity. Human Services has also invested \$7.8 million to expand medication-assisted treatment (MAT) for justice-involved individuals, ensuring continuity of care during reentry. As a result, more than 20,403 individuals continued on MAT at the time of release, reducing overdose risk and supporting recovery.


Individuals with intellectual and developmental disabilities (IDD) are at a higher risk for mental health challenges compared to the general population. Despite this, they often face significant barriers in accessing appropriate mental health services, leading to unmet needs and, frequently, mental health crises. These crises can result in interactions with law enforcement,






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prolonged emergency room visits, or admissions to psychiatric hospitals, which are traumatizing for both the individuals and their families.

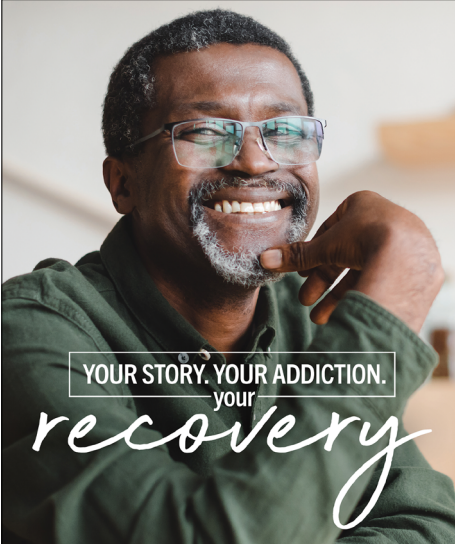
Beyond treatment, the Murphy Administration has invested in crisis response and early intervention. Since the launch of 988 in July 2022, New Jersey has significantly expanded call center capacity and staffing, strengthening the behavioral health crisis safety net for residents in moments of acute need. At the community level, Early Intervention Support Services (EISS) have expanded over the past three years to every county in New Jersey, ensuring statewide access to preventive mental health supports.

These investments are not abstract. They translate into people served in their communities, providers retained, and lives saved.

Taken together, the Murphy Administration's record on mental health and addiction services tells a clear story: by pairing policy leadership with targeted investments, the state is building a behavioral health system that is more accessible, more equitable, and more responsive to real-world needs. At a time when demand for services continues to rise nationwide, New Jersey's approach stands as proof that sustained public investment can strengthen systems, support recovery, and change lives.

988


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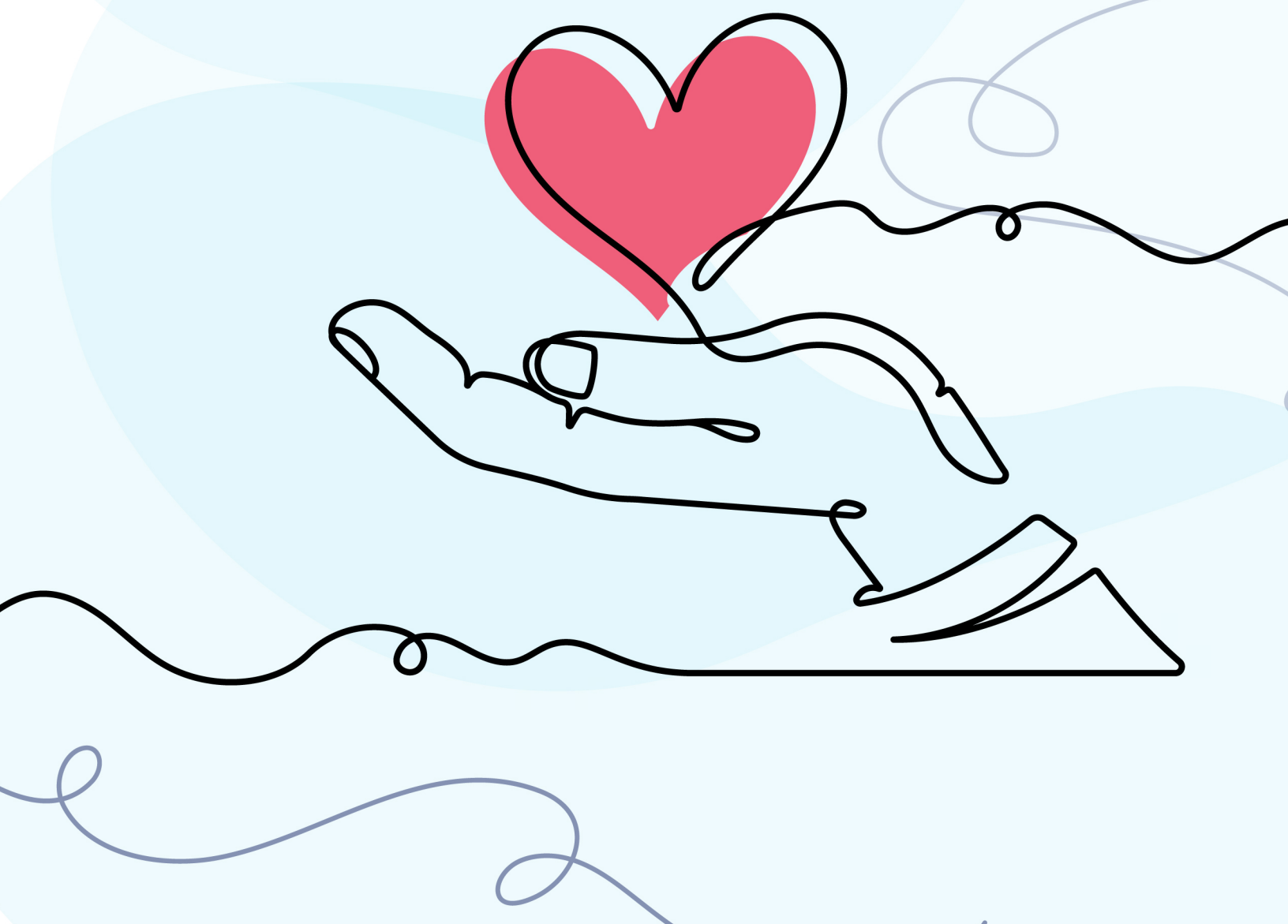
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STRENGTHENING DIRECT CARE THROUGH WORKFORCE INVESTMENT AND OPPORTUNITY



Strengthening Direct Care Through Workforce Investment and Opportunity

● **WAGE AND RATE INCREASES FOR HOME- AND COMMUNITY-BASED WORKERS**

● **EXPANDED TRAINING OPPORTUNITIES**

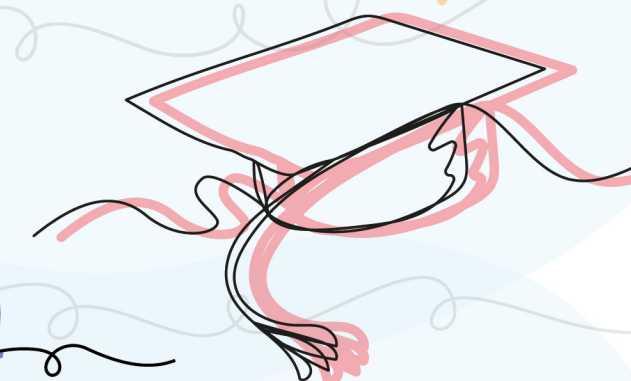
● **THE LAUNCH OF JOBSTHATCARE.NJ.GOV, A STATEWIDE RESOURCE DESIGNED TO CONNECT JOB SEEKERS WITH COMMUNITY-BASED DIRECT CARE CAREERS.**

● **LOAN REDEMPTION PROGRAM FOR 450 CARE WORKERS**

● **DIRECT SUPPORT PROFESSIONAL CAREER DEVELOPMENT**

● **CERTIFIED HOME HEALTH AIDE SCHOLARSHIP PROGRAM**

● **COMPREHENSIVE DIRECT CARE WORKFORCE STRATEGIC PLAN**



Strengthening Direct Care Through Workforce Investment and Opportunity

Under Governor Phil Murphy's Administration, New Jersey Human Services has elevated the direct care workforce as a central pillar of the state's human services system. Direct care workers are essential to the daily functioning of services for older adults, individuals with disabilities, people with behavioral health needs, and families across the state, and Human Services has recognized that the stability of these systems depends on the stability, dignity, and economic security of the workers themselves.

Across compensation, training, recruitment, and career advancement, New Jersey has advanced a comprehensive strategy to strengthen this workforce. That strategy reflects a clear understanding that sustained public investment can lift wages, expand opportunity, and build durable career pathways in community-based care.

By pairing immediate actions, such as wage increases and loan redemption, with longer-term system reforms including credentialing, apprenticeships, and workforce planning, Human Services has aimed reshape the direct care profession into one defined by respect, opportunity, and stability.

DIRECT CARE WORKERS

In communities across New Jersey, direct care workers are the anchors of our health and human services system. They help older adults live with dignity, support individuals with disabilities, assist people with behavioral health needs, and ensure families can remain stable and connected. Yet until recently, this essential workforce struggled with low pay, limited career pathways, and chronic staffing shortages.

Under Governor Phil Murphy's leadership, New Jersey Human Services has taken meaningful steps to change that reality. The most recent evidence of this commitment comes in the form of tangible, sustained policy action to support the very people who support our most vulnerable residents.

Driven by the recognition that direct care workers are indispensable, Human Services has advanced a series of initiatives that reflect a comprehensive approach to strengthening this workforce:

- Wage and rate increases for state and Medicaid-funded home- and community-based services, including six direct support professional (DSP) wage raises that help lift compensation closer to a living wage.
- Expanded training opportunities, giving workers access to new skills that increase their ability to deliver high-quality care while expanding career possibilities.
- Support for DSPs seeking industry-recognized certification, such as the National Association of the Dually Diagnosed Competency-Based IDD/MI Dual Diagnosis DSP Certification.
- The launch of **JobsThatCare.nj.gov**, a statewide resource designed to connect job seekers with community-based direct care careers.
- A \$17.5 million federal loan redemption program, providing relief to nearly 450 home- and community-based care workers in partnership with the Department of Children and Families and the Higher Education Student Assistance Authority.
- Scholarship and workforce development pilots with Rutgers University's Heldrich Center, offering training, transportation and childcare stipends, and mentoring to more than 470 participants — a crucial investment in both recruitment and job readiness.
- Improvements to the Certified Home Health Aide (CHHA) certification process, driving annual certifications from roughly 4,300 in 2020 to over 9,000 in 2023.
- New DSP career development programs through community colleges and apprenticeship supports via the Department of Labor and Workforce Development's GAINS initiative.



These accomplishments are not abstract goals. They represent concrete progress toward a workforce that has long been undervalued and left behind, even as demand for care continues to grow statewide.

Building on these advances, the Murphy Administration recently released a comprehensive Direct Care Workforce Strategic Plan - a detailed roadmap to strengthen recruitment, retention, and training for the direct care workforce. This plan is the product of more than a year of collaboration among seven state agencies and extensive listening sessions with workers, employers, and care recipients.

Key priorities in the plan include:

- Regular listening sessions with workers and employers.
- A formal advisory board to amplify worker voices.
- Expanded surveys to better understand job satisfaction, turnover, and barriers to advancement.
- Attracting talent and building educational pathways:
- Integration of direct care pathways into state job seeker services.
- Scholarships, apprenticeships, and strengthened training from high school through community college.
- Development of stackable credentials to help workers advance across roles.
- Career ladders and advancement opportunities, especially for roles without traditional credentials.
- Improved supervisor training and recognition programs.
- Supports that address employment barriers, from child care and transportation to mental health resources, and targeted burnout prevention.

This strategic plan is a breakthrough in how state government approaches workforce challenges. It acknowledges that no single policy can solve the direct care staffing crisis on its own. Instead, it needs a coordinated, holistic strategy grounded in worker experience and data-driven solutions.

With the strategic plan now in hand, the state has laid the foundation. The next step is ensuring that these strategies translate into measurable improvements for workers, families, and communities.

