

# A CENTURY OF CARING

**In 1918**, with the world beginning to recover from World War I and confronting a global influenza pandemic, leaders of seven New Jersey hospitals gathered in Newark to discuss the challenges and changes facing hospitals. A united organization was needed to provide leadership on these common concerns. That was the genesis of the New Jersey Hospital Association.

**Founding Members:**

- Newark City Hospital (now University Hospital)
- Muhlenberg Hospital (an ambulatory care facility part of Hackensack Meridian Health)
- Elizabeth General Hospital (Trinitas Regional Medical Center)
- Morristown Memorial Hospital (Morristown Medical Center)
- Paterson General Hospital (St. Joseph's Wayne Medical Center)
- Christ Hospital (CarePoint Health Christ Hospital), and
- Hudson County Tuberculosis Hospital and Sanitarium (closed in 1961).

**SOME OF THE IMPORTANT MILESTONES FOR THE HEALTHCARE COMMUNITY SINCE THAT ORIGINAL MEETING:**

**1926** Rutgers University graduate, researcher and professor Selman Waksman publishes his book *Enzymes*. Waksman coined the term antibiotics, and it was at Rutgers that Waksman's team discovered streptomycin, the first antibiotic to cure tuberculosis. New Jersey hospitals were some of the first to treat patients with antibiotics, including penicillin.



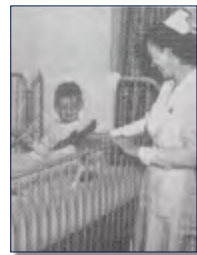
**1935** Financial security was a priority for everyone following the 1929 stock market crash. In 1935, President Franklin D. Roosevelt signed the Social Security Act, which provides income and other benefits to the elderly. In the '30s, NJHA joined with 17 of its members to form the Hospital Service Plan of New Jersey – the first precursor to the Blue Cross plans, also to respond to financial issues.

*A nurse who worked 12 hours at St. Mary's Hospital in Orange in 1935 would make \$7 for her shift.*

**1947** Medical advances from the battlefields of World War II made medical care more complex and sophisticated. New hospitals were built around the state. As the medical community grew, NJHA also grew in complexity and sophistication; the first full-time executive, J. Harold Johnston, was hired and the first budget of \$12,000 was established.



**1951** In the 1950s and '60s, a changing world focused NJHA's attention on emergency planning, workforce development and the first use of computers to aggregate hospital data statewide. Post-war prosperity also meant growing families. In 1951, when this photo of a child at Valley Hospital was taken, New Jersey saw 105,218 births, an increase of 7,484 babies from the prior year and an increase of 38,114 from 10 years earlier.



**1965** Federal health insurance programs Medicare and Medicaid were signed into law by President Lyndon B. Johnson, changing the way healthcare is paid for in the United States. To explore innovative ways to solve challenges facing hospitals, NJHA's second president, Jack Owen, began the first state affiliate of the American Hospital Association's Health Research and Educational Trust.

**1977** The Health Care Financing Administration, precursor to the Centers for Medicare and Medicaid Services, was created in 1977 to combine oversight of Medicare, the federal portion of Medicaid and related quality assurance activities. Also in 1977, Dr. Frederick F. Buechel, of the University of Medicine and Dentistry of New Jersey, and Dr. Michael J. Pappas, of the New Jersey Institute of Technology, invented the "New Jersey Knee" – the first total knee replacement that replicated the natural movement of the joint.

*Between 1976 and 1987, NJ's Supreme Court heard three cases involving life-sustaining care, making New Jersey a trailblazer in end-of-life medical and legal frameworks.*



**1982** The Medicare program instituted DRGs – Diagnostic-Related Groups – as its way to reimburse healthcare providers. DRGs were innovated in New Jersey, and the success of the program led to a national roll-out. Later in the '80s, New Jersey became one of two states in the country to mandate all hospitals to provide care to any patient, regardless of their ability to pay.

**1994** "Healthcare Reform" earned its first go-round as a buzzword during the Clinton presidency, and NJHA was there to ensure protection for patients, providers and communities throughout the debate. In August of that year, NJHA President Gary Carter, Board Chair Rick Pitman and several other members met with Rep. Jim Saxton and Rep. Chris Smith at the Capitol to protest proposed drastic cuts to Medicare reimbursement.



*In 1993, 2,294 people died from HIV/AIDS complications in NJ, 75 percent of whom were adults ages 25-44. In 2015, a total of 255 people died from complications of HIV/AIDS.*

**2001** The world changed Sept. 11, 2001, and New Jersey's healthcare community was on the front line of response to the terrorist attack. Hospitals along the Hudson River provided immediate care to victims, and NJHA staff helped create a hotline for families to call in search of New Jersey victims. After the initial response, NJHA created a dedicated Emergency Preparedness department, which has deployed best-practices for emergencies ranging from Superstorm Sandy to Ebola.



**2010** The Patient Protection and Affordable Care Act of 2010 is passed and signed into law, making sweeping changes to how care is delivered, paid for and assessed. NJHA took the opportunity to launch quality improvement initiatives through the new Partnership for Patients effort. A gainsharing program, piloted in New Jersey, that encouraged physicians and hospitals to work closer together, was adopted by CMS as a national payment model through the ACA.

**2018** In its centennial year, NJHA adopts a new, simplified mission "to improve the health of the people of New Jersey."

