



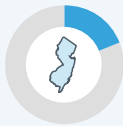
## Medicaid Matters to New Jersey's 4th Congressional District (NJ-04)

### New Jersey's Medicaid program (NJ FamilyCare) is a lifeline on the Jersey Shore

NJ FamilyCare provides health coverage for children, working families, veterans, vulnerable seniors, people with disabilities and many others in New Jersey.<sup>1</sup>

NJ FamilyCare serves as the core financial backbone of the Jersey Shore's health care system, paying for care and services at local clinics and hospitals and serving as a critical engine for the local economy.

#### In NJ-04, Medicaid Serves:



A total of 147,500 people — **19% of all residents** in the district.<sup>2</sup>



A total of 67,500 children — **34% of all children** in the district.<sup>3</sup>



A total of **18,100 seniors and people with disabilities**.<sup>4</sup>

**Nearly 2 million people in New Jersey are at risk of losing access to care if Congress cuts or caps Medicaid funding, forcing the state to offset budget holes by throwing people off coverage, cutting provider reimbursement, and/or eliminating essential health services.**<sup>5</sup> Any cut to Medicaid is a direct attack on the health and financial security of people living on the Jersey Shore and runs counter to the will of the vast majority of voters from across political parties who want Congress to continue to guarantee coverage for low-income people through Medicaid.<sup>6</sup>



A total of **82% of adults** want Congress to maintain or increase Medicaid spending.<sup>7</sup>



A total of **67% of Republicans** want Congress to maintain or increase Medicaid spending.<sup>8</sup>



A total of **71% of voters** want Congress to continue to guarantee coverage for low-income people through Medicaid.<sup>9</sup>

## Protecting Medicaid Means:

### CHILDREN IN NJ-04

Have access to newborn care, checkups, care for diabetes and asthma, and more.

Stay healthy and ready to learn, miss fewer school days, are more likely to graduate, and earn more as adults.<sup>10</sup>



### FAMILIES IN NJ-04

Have access to cancer screenings, mental health and substance use disorder treatment, and diabetes and blood pressure medications.

Have less risk of medical debt and eviction and can better afford to buy groceries or pay rent.<sup>11</sup>



### SENIORS IN NJ-04

Have access to nursing home care, transportation to medical appointments, and home health services.

Stay healthy and receive needed care in their homes and communities.



## Medicaid keeps families on the Jersey Shore healthy and working

Many low-wage jobs either do not offer health coverage or offer coverage that is unaffordable. Medicaid provides health coverage for workers at these jobs so they can remain healthy and earn income for their families.

- **At least 41,358 low-wage workers** in NJ-04 are covered by NJ FamilyCare.<sup>12</sup>
- Nationwide, **92% of adults** covered by Medicaid either work, care for a family member, have an illness or disability, or attend school.<sup>13</sup>

*Cutting Medicaid would make our country's affordability crisis much worse for families in New Jersey who already face significant health care costs.*

## Medicaid is the bedrock of the Jersey Shore's health system

**NJ FamilyCare keeps hospitals in the district open.** It pays for 25% of all hospital services provided at the RWJ Barnabas Monmouth Medical Center Southern Campus.<sup>14</sup> If Medicaid is cut, hospitals will treat more uninsured people, and the amount of uncompensated care will increase.

**Hospitals in NJ-04 are at risk of losing as much as \$100 million in federal matching funds if Congress cuts Medicaid.**<sup>15</sup>

NJ FamilyCare also plays important roles in providing access to behavioral health care and nursing home care. Medicaid is the largest payer for mental health care, substance use disorder treatment, and other community services to curb the opioid epidemic and care for people with mental illness.<sup>16</sup> **NJ FamilyCare also covers 4 in 7 nursing home residents in New Jersey.**<sup>17</sup>

## Medicaid stabilizes New Jersey's state and local economies

Medicaid is the largest source of federal funding for New Jersey, accounting for 36% of the federal funds received by the state.<sup>18</sup> Medicaid dollars ensure New Jersey can deliver essential health care without depleting resources reserved for other essential services, including public safety, transportation, housing and education.

Cutting Medicaid would make our country's affordability crisis much worse. Americans from all backgrounds just voted for economic security, imploring their representatives to lower costs on everyday needs, including health care. Cutting Medicaid would be a direct betrayal of constituents by making health care more unaffordable. **Families on the Jersey Shore already face significant health care costs:**

- **86% of people living in South Jersey** are worried about affording health care.
- **36% of people living in South Jersey** had to deplete savings, take on debt or sacrifice basic necessities to obtain medical care.
- **50% of people living in South Jersey** skipped needed care due to cost.<sup>19</sup>

Congress has the responsibility to stand with families in New Jersey and across the country by protecting Medicaid and opposing any attempts to weaken this essential program.

## Endnotes

- <sup>1</sup>Rhiannon Euhus, Alice Burns, and Robin Rudowitz, “Congressional District Interactive Map: Medicaid Enrollment by Eligibility Group,” KFF, March 11, 2025, <https://www.kff.org/medicaid/issue-brief/congressional-district-interactive-map-medicaid-enrollment-by-eligibility-group/>.
- <sup>2</sup>Euhus, Burns, and Rudowitz, “Congressional District Interactive Map.”
- <sup>3</sup>Families USA analysis of data from Euhus, Burns, and Rudowitz, “Congressional District Interactive Map” and U.S. Census Bureau, U.S. Department of Commerce, “Age and Sex,” American Community Survey, ACS 1-Year Estimates Subject Tables, Table S0101, 2023, accessed February 10, 2025, <https://data.census.gov/table/ACSST1Y2023.S0101?q=S0101&g=500XX00US3402>.
- <sup>4</sup>Euhus, Burns, and Rudowitz, “Congressional District Interactive Map.”
- <sup>5</sup>Centers for Medicare & Medicaid Services, Medicaid and CHIP profile, November 2024. <https://www.medicaid.gov/state-overviews/state-profiles>.
- <sup>6</sup>Grace Sparks, Robin Rudowitz, and Ashley Kirzinger, “Public Opinion on the Future of Medicaid: Results From the KFF Medicaid Unwinding Survey and KFF Health Tracking Poll,” KFF, June 4, 2024, <https://www.kff.org/medicaid/poll-finding/public-opinion-on-the-future-of-medicaid-kff-medicaid-unwinding-kff-health-tracking-poll/>.
- <sup>7</sup>KFF, “7 Charts About Public Opinion on Medicaid,” March 7, 2025, <https://www.kff.org/medicaid/poll-finding/7-charts-about-public-opinion-on-medicaid/>.
- <sup>8</sup>KFF, “7 Charts About Public Opinion on Medicaid.”
- <sup>9</sup>Sparks, Rudowitz, and Kirzinger, “Public Opinion.”
- <sup>10</sup>“How Medicaid Supports Student Success,” Georgetown University Center for Children and Families, accessed March 11, 2025, <https://ccf.georgetown.edu/2025/01/09/how-medicaid-supports-student-success/>.
- <sup>11</sup>David U. Himmelstein et al., “Prevalence and Risk Factors for Medical Debt and Subsequent Changes in Social Determinants of Health in the US,” *JAMA Network Open* 5, no. 9 (2022): e2231898, <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2796358>; Raymond Kluender et al., “Medical Debt in the US, 2009–2020,” *JAMA* 326, no. 3 (2021): 250–256, <https://jamanetwork.com/journals/jama/fullarticle/2782187>.
- <sup>12</sup>U.S. Census Bureau, U.S. Department of Commerce, “Health Insurance Coverage Status and Type by Work Experience by Sex,” American Community Survey, ACS 1-Year Estimates Detailed Tables, Table B27012, 2023, accessed February 10, 2025, <https://data.census.gov/table/ACSDT1Y2023.B27012?q=Table+B27012&g=500XX00US3404>.
- <sup>13</sup>Jennifer Tolbert et al., “Understanding the Intersection of Medicaid and Work: An Update,” KFF, February 4, 2025, <https://www.kff.org/medicaid/issue-brief/understanding-the-intersection-of-medicaid-and-work-an-update/>.
- <sup>14</sup>“Hospital Cost Tool,” National Academy for State Health Policy, last updated February 7, 2025, <https://tool.nashp.org/>.
- <sup>15</sup>“Modeling Impact to NJ Medicaid of Congressional Budget Proposals,” Appendix II: Hospital/Health System Impact by Congressional District, New Jersey Department of Human Services, February 2025, <https://www.nj.gov/humanservices/news/publications/FEB%202025%20-%20Human%20Services%20Modeling%20Impact%20to%20NJ%20Medicaid%20of%20Congressional%20Budget%20Proposals.pdf>.
- <sup>16</sup>“Behavioral Health Services,” Medicaid.gov, Centers for Medicare & Medicaid Services, n.d., <https://www.medicaid.gov/medicaid/benefits/behavioral-health-services/index.html>; “How Medicaid Helps People With Substance Use Disorders,” Georgetown University McCourt School of Public Policy, Center for Children and Families, accessed on February, 29, 2025, <https://ccf.georgetown.edu/2025/02/19/how-medicaid-helps-people-with-substance-use-disorders/>; “Medicaid Is Vital to New Jersey,” Georgetown University McCourt School of Public Policy, Center for Children and Families, <https://ccf.georgetown.edu/wp-content/uploads/2025/02/Medicaid-is-Vital-to-New-Jersey-2025-Fact-Sheet.pdf>.
- <sup>17</sup>“Medicaid in New Jersey,” KFF, August 2024, <https://files.kff.org/attachment/fact-sheet-medicaid-state-NJ>.
- <sup>18</sup>Georgetown University McCourt School of Public Policy, Center for Children and Families, “Medicaid Is Vital.”
- <sup>19</sup>“New Jersey Residents Struggle to Afford High Healthcare Costs; Worry About Affording Healthcare in the Future; Support Government Action Across Party Lines,” Healthcare Value Hub, Data Brief no. 140, January 2023, <https://healthcarevaluehub.org/wp-content/uploads/NJ-2023-Affordability-PDF.pdf>.

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