

New Jersey hospital shut down after months of deception by owners

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Heights University Hospital (HUH), a 152-year-old community hospital in Jersey City, New Jersey, has shut down all services except for its emergency department and limited support functions. The sudden closure forces tens of thousands of patients to travel to Hoboken or Bayonne for inpatient care, surgeries, maternity services, imaging and routine treatment.

Workers learned last week that paychecks for the previous pay period would not be issued. Hudson Regional Health (HRH), the network that operated the hospital, began laying off staff in early November without issuing the legally required WARN Act notices. It claims to have “absorbed” about 100 workers into its network and may reassign another 100 workers. This leaves most of the hospital’s 699 employees facing layoffs or unemployment.

HRH justified the shutdown of HUH by claiming in a November 13 statement that “the state will not be providing the critical funding needed to sustain operations.” But in October, HRH received a \$2 million emergency grant from the New Jersey government that was intended to stabilize payroll and prevent service disruptions.

On October 14, HRH filed a certificate of need requesting a staged, full closure of the hospital—weeks before it publicly alleged that it faced a funding crisis. HRH executives insisted that they had “pumped \$300 million into operations.” They blamed the community for the hospital’s losses by claiming that “six out of every 10 patients cannot afford the health care they need.”

The collapse reveals as a fraud what was publicized as HRH’s “rescue” of the hospital. In January, the network assured a bankruptcy court and state regulators that it had the funds to keep the facility, then known as Christ Hospital, running. During a ribbon-cutting event

on September 15, HRH executives, flanked by state and local officials, announced a \$75–100 million investment in “transformative upgrades to services, technology and infrastructure.” They declared HUH to be a key part of a new regional network.

Yet an HUH healthcare worker, who spoke under condition of anonymity, told *World Socialist Web Site* (WSWS) reporters that he had seen no improvements since the HRH takeover. “I’ve worked at several hospitals. There’s no way you can miss improvements,” he said. “[During construction,] people are talking about them. Contractors are walking around; they stand out. There are areas closed off temporarily, employees being shifted around. That never happened here.”

After HRH took over in January, one floor was permanently shut down, followed by a second, he added. These changes happened long before HRH announced its sudden “financial crisis” in October.

The true reason for HRH’s takeover is now clear. In its certificate of need filing, HRH, which owns the land beneath HUH, described plans to develop the property into a mixture of residential units and commercial space. It vaguely mentioned plans of building a “future hospital” elsewhere. This scheme was consistent with the record of HRH’s Chair Yan Moshe.

Since 2007, major insurers have sued Moshe nine times under the federal RICO Act for fraudulent billing schemes, kickbacks and using straw owners to conceal his control of medical practices. In 2018, one of his surgical centers was shut down after state inspectors found sterilization lapses that exposed hundreds of patients to infection.

Moshe donated more than \$400,000 to Jersey City Mayor Steven Fulop, who publicly backed HRH’s takeover of HUH. Under outgoing Democratic

Governor Phil Murphy, a former Goldman Sachs executive and millionaire, the New Jersey Department of Health approved HRH's takeover despite Moshe's well-documented record.

The closure of Heights University Hospital is not the result of poor judgment but the predictable outcome of the state's placement of health services in the hands of profiteers. Regulators stood aside as HRH closed floors, emptied departments and withheld workers' pay. Even as HRH moved toward shutdown, the Department of Health told NJ Advance Media it was merely "monitoring the situation." In its own correspondence, the Department has since admitted that HRH "failed to fund their payroll ... failed to fully perform as it represented" and "has not followed through on its commitments to the community it serves and to the state."

The Health Professionals and Allied Employees (HPAE) union has played a central role in suppressing any organized resistance to the shutdown. In a November 14 statement, HPAE labeled HRH "the worst employer in Hudson County" and condemned what it described as the illegal closure of the hospital after workers were left without paychecks for two weeks' labor. But the union has taken no action to defend its members. There has been no strike, walkout, mass meeting or appeal to workers at HRH hospitals in Hoboken, Bayonne or Secaucus. By limiting its "response" to issuing statements about possible lawsuits and appealing to the Department of Health and Democratic officials, HPAE contained opposition rather than mobilizing it. It kept its members isolated and uninformed.

The closure of HUH is part of a nationwide breakdown of public health. Under President Donald Trump, federal public health programs have been gutted, scientific agencies have been undermined and emergency preparedness systems have been dismantled. These attacks intensify a decades-long bipartisan process that has starved hospitals of funding, accelerated mergers and handed the healthcare system over to private equity, insurance conglomerates and real estate developers. Community hospitals across the country are being closed or stripped down not because they are "unsustainable" but because they are unprofitable.

Healthcare workers cannot prevent hospital closures

or defend their jobs through appeals to the political establishment that enabled the closure of HUH. Instead, they must act independently by forming rank-and-file committees that connect them with other workers across the state and internationally.

Defending healthcare requires a fight against capitalism and for socialized medicine. Hospitals must be placed under public ownership and controlled democratically by the workers to fulfill human need rather than to generate private profit. Only from this perspective can the working class fight to restore and expand public health on a truly humane and scientific basis.



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