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State/Territory Name: New Jersey

State Plan Amendment (SPA) NJ: 25-0008

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services
7500 Security Boulevard, Mail Stop S3-14-28
Baltimore, Maryland 21244-1850



Financial Management Group

May 14, 2026

Gregory Woods
Assistant Commissioner
Division of Medical Assistance and Health Services
P.O. Box 712, Mail Code #26
Trenton, NJ 08625-0712

Reference: TN NJ-25-0008

Dear Commissioner Woods,

We have reviewed the proposed amendment to Attachment 4.19-A of your Medicaid State plan submitted under transmittal number (TN) NJ-25-0008. This amendment revises the distribution of Graduate Medical Education Supplemental Trauma (GME-T) payments for State Fiscal Year 2026.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(2), 1902(a)(13), 1902(a)(30), 1923 and 1903(a) of the Social Security Act and the implementing Federal regulations at 42 CFR 447 Subpart C.

This is to inform you that Medicaid State plan amendment NJ-24-0009 is approved effective July 1, 2025. The CMS-179 and the amended plan page(s) are attached.

If you have any additional questions or need further assistance, please contact Blake Holt at (303)-844-6218 or Blake.Holt@cms.hhs.gov.

Sincerely,



Rory Howe
Director
Financial Management Group

Enclosures

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL
FOR: CENTERS FOR MEDICARE & MEDICAID SERVICES**

1. TRANSMITTAL NUMBER

2 4 — 0 0 0 8

2. STATE

N J

3. PROGRAM IDENTIFICATION: TITLE OF THE
SOCIAL SECURITY #

XIX XXI

TO: CENTER DIRECTOR
CENTERS FOR MEDICAID & CHIP SERVICES
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

July 1, 2025

5. FEDERAL STATUTE/REGULATION CITATION

Social Security Act 1902(a)(13)

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 2025 \$ 14,405,994
b. FFY 2026 \$ 43,217,983

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Attachment 4.19-A Page I-227(g2) and I-227(g2)(a)

8. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (If Applicable)

new

Attachment 4.19-A Page I-227(g2)

9. SUBJECT OF AMENDMENT

SFY 2026 Graduate Medical Education Trauma (GME-T) Program

10. GOVERNOR'S REVIEW (Check One)

- GOVERNOR'S OFFICE REPORTED NO COMMENT
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

OTHER, AS SPECIFIED:

11. SIGNATURE OF STATE AGENCY OFFICIAL

12. TYPED NAME
Sarah Adelman

13. TITLE
Commissioner, Department of Human Services

14. DATE SUBMITTED
9/26/25

15. RETURN TO

Gregory Woods, Assistant Commissioner Division
of Medical Assistance and Health Services P.O. Box
712, Mail Code #26 Trenton, NJ 08625-0712

FOR CMS USE ONLY

16. DATE RECEIVED

09/26/25

17. DATE APPROVED

PLAN APPROVED - ONE COPY ATTACHED

18. EFFECTIVE DATE OF APPROVED MATERIAL

July 1, 2025

19. SIGNATURE OF APPROVING OFFICIAL

20. TYPED NAME OF APPROVING OFFICIAL

Rory Howe

21. TITLE OF APPROVING OFFICIAL

Director, Financial Management Group

22. REMARKS

04/23/2026: State concurs with pen and ink change to Boxes 7 and 8.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State of New Jersey

Reimbursement for In-State Acute Care Inpatient Hospital Services Graduate Medical
Education Trauma (GME-T)

Effective for State Fiscal Year (SFY) 2026, \$84,500,000 in GME-T payments (paid in 12 equal monthly payments) shall be distributed to all eligible State's Level I and Level II Trauma Centers according to the following table

HOSP NO	HOSPITAL NAME	SFY 2026 GME-T
1	Hackensack University Medical Center	\$6,735,237
14	Cooper Hospital/University MC	\$21,598,920
15	Morristown Medical Center	\$3,751,993
19	St. Joseph's University Medical Center	\$9,028,656
38	Robert Wood Johnson University Hospital	\$10,370,264
73	Jersey Shore University Medical Center	\$4,558,761
74	Jersey City Medical Center	\$3,380,579
92	Capital Health Regional Medical Center	\$2,957,287
119	University Hospital	\$19,859,834
640	Atlanticare Regional Medical Center	\$2,258,470
TOTAL		\$84,500,000

Distribution of GME-T in the Event of a Hospital Closure or Hospital Acquisition During or After SFY 2026: In the event of a hospital closure or hospital acquisition, GME-T allocations that would have been provided to the closed hospital are to be redistributed to the acquiring hospital. If the acquiring hospital is not receiving GME-T full-time equivalents (FTEs) from the closed or acquired hospital, the GME-T amount will be redistributed to all eligible hospitals by applying the current SFY GME-T payment formula excluding the closed or acquired hospital from the payment formula.

GME-T payments made to providers as referenced above are made pursuant to 42 CFR §438.60.

The New Jersey GME formula adopts the Medicare DGME logic for calculating direct training costs, using per-resident cost x resident FTEs x Medicaid share of managed care days; and replicates the Medicare IME formula exactly, applying it to Medicaid managed care encounters

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State of New Jersey

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instead of Medicare IPPS payments.

The State's formula also splits funding proportionally between DME and IME, as Medicare does via separate payment mechanisms.

The result is a Medicare-modeled GME system, adapted for Medicaid managed care populations and calibrated to a fixed annual subsidy amount.

The appeal process for distribution of GME-T is the same as the appeal process for GME.

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TN: 25-0008 MA (NJ)

Approval Date: May 14, 2026

Supersedes: NEW

Effective Date: 7/1/25