

## **Table of Contents**

**State/Territory Name: New Jersey**

**State Plan Amendment (SPA) NJ: 26-0004**

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



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**Financial Management Group**

June 18, 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-26-0004

Dear Commissioner Woods,

The Centers for Medicare & Medicaid Services (CMS) has reviewed the proposed New Jersey state plan amendment (SPA) to Attachment 4.19-A NJ-26-0004, which was submitted to CMS on March 31, 2026. This plan amendment updates the revises the pool for Graduate Medical Education Supplemental (GME-S) payments for State Fiscal Year 2026. e

We reviewed your SPA submission for compliance with statutory requirements, including in sections 1902(a)(2), 1902(a)(13), 1902(a)(30), 1903 as it relates to the identification of an adequate source for the non-federal share of expenditures under the plan, as required by 1902(a)(2), of the Social Security Act and the applicable implementing Federal regulations.

Based upon the information provided by the state, we have approved the amendment with an effective date of March 1, 2026. We are enclosing the approved CMS-179 and a copy of the new state plan pages.

If you have any additional questions or need further assistance, please contact Blake Holt at (303)-844-6218 or via email at [Blake.Holt@cms.hhs.gov](mailto: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 6 — 0 0 0 4

2. STATE

N J

3. PROGRAM IDENTIFICATION: TITLE OF THE SOCIAL SECURITY ACT

XIX  XXI

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

4. PROPOSED EFFECTIVE DATE

March 1, 2026

5. FEDERAL STATUTE/REGULATION CITATION

Social Security Act 1902(a)(13)

6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)

a. FFY 2026 \$ 337,280  
b. FFY 2027 \$ 0

7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT

Attachment 4.19-A Page I-227(g)(1) and I-227(g)(1)(a)

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 PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable)

Same (NJ-25-0007)

9. SUBJECT OF AMENDMENT

SFY 2026 Graduate Medical Education (GME) Supplemental Program add-on

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  
Stephen Cha, MD, MSHR

13. TITLE  
Commissioner, Department of Human Services

14. DATE SUBMITTED  
3/31/2026

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  
3/31/2026

17. DATE APPROVED

**PLAN APPROVED - ONE COPY ATTACHED**

18. EFFECTIVE DATE OF APPROVED MATERIAL  
March 1, 2026

19. SIGNATURE OF APPROVING OFFICIAL

20. TYPED NAME OF APPROVING OFFICIAL  
Rory Howe

21. TITLE OF APPROVING OFFICIAL  
Director, Financial Management Group

22. REMARKS

6/01/26: State concurs with pen and ink change to Box 7.

**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 (GME) and Indirect Medical Education (IME)  
GME Supplemental Program**

Effective for State Fiscal Year (SFY) 2026, the GME Supplemental (GME-S) Subsidy equals \$34,496,000. Payments in substantially equal monthly payments shall be made to eligible hospitals in the following manner:

<b>HOSP NO</b>	<b>HOSPITAL NAME</b>	<b>SFY 2026 GME-S</b>
2	Newark Beth Israel Medical Center	\$4,362,443
3	Hackensack UMC – Palisades	\$561,036
6	St. Mary’s General Hospital	\$496,000
14	Cooper Hospital/University MC	\$8,657,332
16	CarePoint Health – Christ Hospital	\$168,554
19	St. Joseph’s University Medical Center	\$3,607,264
27	Trinitas Regional Medical Center	\$785,337
40	CarePoint Health – Hoboken University Medical Center	\$432,584
58	New Bridge Medical Center (Bergen Regional)	\$472,301
70	St. Peter’s University Hospital	\$1,268,667
74	Jersey City Medical Center	\$1,348,812
92	Capital Health Regional Medical Center	\$1,183,153
96	St. Michael’s Medical Center	\$1,063,886
119	University Hospital	\$7,945,915
324	Inspira Medical Center - Vineland	\$2,142,717
	<b>TOTAL</b>	<b>\$34,496,000</b>

Distribution of GME-S 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-S 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-S FTEs from the closed or acquired hospital, the GME-S amount will be redistributed to all eligible hospitals by applying the current SFY GME-S payment formula excluding the closed or acquired hospital from the payment formula.

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

TN: 26-0004

Approval Date: June 18, 2026

Supersedes: 25-0007

Effective Date: 3/1/26

**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 (GME) and Indirect Medical Education (IME)  
GME Supplemental Program**

The New Jersey GME formula adopts the Medicare DGME logic for calculating direct training costs, using per-resident cost <sup>x</sup> resident FTEs <sup>x</sup> Medicaid share of managed care days; and replicates the Medicare IME formula exactly, applying it to Medicaid managed care encounters 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-S is the same as the appeal process for GME.

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