

## **Table of Contents**

**State/Territory Name: New Jersey**

**State Plan Amendment (SPA) #: NJ 18-0012**

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form
- 3) Approval SPA Page

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
7500 Security Boulevard, Mail Stop S2-26-12  
Baltimore, MD 21244-1850



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**Financial Management Group**

January 29, 2019

Meghan Davey  
State Medicaid Director  
Department of Human Services  
Division of Medical Assistance and Health Services  
State of New Jersey  
P.O. Box 712  
Trenton, New Jersey 08625-0712

RE: State Plan Amendment (SPA) 18-0012


Dear Ms. Davey:

We have reviewed the proposed amendment to Attachment 4.19-A of your Medicaid State Plan submitted under transmittal number (TN) 18-0012. Effective October 1, 2018 this amendment provides funding for supplemental Graduate Medical Education payments.

We conducted our review of your submittal according to the statutory requirements at sections 1902(a)(2), 1902(a)(13), 1902(a)(30), 1903(a) and 1923 of the Social Security Act and the implementing Federal regulations at 42 CFR Part 447. This letter is to inform you SPA 18-0012 is approved effective October 1, 2018. We are enclosing the CMS-179 and the approved plan pages.

If you have any questions, please contact Charlene Holzbaur at 609-882-4103 Ext. 104.

Sincerely,

  
Kristin Fan  
Director

Enclosures

cc: R. Holligan  
R. Weaver  
T. Brady  
C. Holzbaur

**TRANSMITTAL AND NOTICE OF APPROVAL OF  
STATE PLAN MATERIAL**

1. TRANSMITTAL NUMBER:

2. STATE:

**18-0012-MA**

**New Jersey**

FOR: CENTERS FOR MEDICARE AND MEDICAID SERVICES

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE  
SOCIAL SECURITY ACT (MEDICAID)

TO: REGIONAL ADMINISTRATOR  
CENTERS FOR MEDICARE AND MEDICAID SERVICES  
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE:  
**October 1, 2018**

5. TYPE OF PLAN MATERIAL (Check One):

NEW STATE PLAN       AMENDMENT TO BE CONSIDERED AS NEW PLAN       AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION:

**Social Security Act Section 1902(a)(13)**

7. FEDERAL BUDGET IMPACT:

**FFY 2019: \$ 16,190,476**

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

**Attachment 4.19-A Page 1-227(g)(1)**

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 PAGE NUMBER OF THE SUPERSEDED PLAN SECTION  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

**New**

10. SUBJECT OF AMENDMENT:

**GME Supplemental Program**

11. GOVERNOR'S REVIEW (Check One):

GOVERNOR'S OFFICE REPORTED NO COMMENT

OTHER, AS SPECIFIED:

**Not required, pursuant to 7.4 of the Plan**

COMMENTS OF GOVERNOR'S OFFICE ENCLOSED

NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL:

13. TYPED NAME: **Carole Johnson**

14. TITLE: **Commissioner**

15. DATE SUBMITTED: **11/27/18**

16. RETURN TO:

**Meghan Davey, Director  
Division of Medical Assistance and Health Services  
P.O. Box 712, #26  
Trenton, NJ 08625-0712**

**FOR REGIONAL OFFICE USE ONLY**

17. DATE RECEIVED:

18. DATE APPROVED: **JAN 29 2019**

**PLAN APPROVED - ONE COPY ATTACHED**

19. EFFECTIVE DATE OF APPROVED MATERIAL: **OCT 01 2018**

20. SIGNATURE OF REGIONAL OFFICIAL:

21. TYPED NAME: **Kristin Fan**

22. TITLE: **Director, FMG**

23. REMARKS:

**1/10/19 State requested 'Pen + Ink' Change to  
Box 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 (GME) and Indirect Medical Education (IME)**

**GME Supplemental Program**

Effective for State fiscal year 2019, the Graduate Medical Education Supplemental Subsidy equals \$24,285,714. Payments to eligible hospitals shall be made in the following manner:

<b>Atlanticare Regional Medical Center</b>	504,924.35
<b>Capital Health Regional Medical Center</b>	222,616.67
<b>CarePoint Health - Christ Hospital</b>	193,307.89
<b>CarePoint Health - Hoboken University Medical Center</b>	389,939.78
<b>Cooper Hospital/University MC</b>	5,066,237.86
<b>Inspira Medical Center - Vineland</b>	1,738,966.59
<b>Jersey City Medical Center</b>	1,466,360.67
<b>New Bridge Medical Center (Bergen Regional)</b>	15,011.00
<b>Newark Beth Israel Medical Center</b>	4,179,210.62
<b>St. Francis Medical Center</b>	189,124.20
<b>St. Joseph's University Medical Center</b>	3,120,234.84
<b>St. Michael's Medical Center</b>	852,692.70
<b>Trinitas Regional Medical Center</b>	590,968.81
<b>University Hospital</b>	5,756,118.02
<b>TOTAL</b>	<b>24,285,714.00</b>

18-0012 MA NJ

TN: 18-0012 MA (NJ)

Approval Date: JAN 29 2019

Supersedes: New

Effective Date: OCT 01 2018