

**LEGAL NOTICE
STATE OF NEW JERSEY
DEPARTMENT OF HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES**

Federally Qualified Health Centers (FQHC) Reimbursement

TAKE NOTICE the New Jersey Department of Human Services (DHS), Division of Medical Assistance and Health Services (DMAHS) intends to seek approval from the United States Department of Health and Human Services (HHS), Centers for Medicare and Medicaid Services (CMS), for amendments to the New Jersey Medicaid (Title XIX) State Plan in order to implement budget provisions subject to the passage of the New Jersey Fiscal Year 2025 Appropriations Act.

Notwithstanding the provisions of any law or regulation to the contrary, DHS intends to seek any necessary amendments such that the base payment rate per medical encounter, as described in N.J.A.C.10:66-4.1, for a federally qualified health center (FQHC) shall be equal to 100 percent of the Medicare FQHC prospective payment system base rate, as adjusted according to the geographic location of the FQHC, plus an add-on payment of \$19.35 and an additional amount when aggregated for all FY 2025 payments that totals \$2,000,000 in State Funding. This equals an increase of \$4.70 per encounter.

The fee schedule will be published on the Department's fiscal agent's website at <https://www.njmms.com> under "rate and code information" when available.

The estimated costs for the fee-for-service FQHC increase for SFY 2025 and SFY 2026 are projected to be \$4.7 million (\$2.0 million State share) and \$4.7 million (\$2.0 million State Share) respectively.

This Notice is intended to satisfy the requirements of Federal statutes and regulations, specifically 42 CFR 447.205, and 42 U.S.C. 1396a(a)(13). A copy of this Notice is available for public review at the Medical Assistance Customer Centers, County Welfare Agencies, and the Department's website at:

<http://www.state.nj.us/humanservices/providers/grants/public/index.html>.

Comments or inquiries must be submitted in writing within 30 days of the date of this notice to:

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