



State of New Jersey  
Department of Human Services  
Division of Medical Assistance & Health Services

# NEWSLETTER

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July 2025

**TO:** Primary Care Providers and Managed Care Organizations (MCOs) -  
**For Information Only**

**SUBJECT:** Information Regarding Primary Care Rate Increase

**EFFECTIVE:** July 1, 2025

**PURPOSE:** To support primary care providers in New Jersey's Medicaid program and to satisfy federal conditions of approval of the State's Section 1115 Waiver renewal.

**BACKGROUND:** Beginning July 1, 2025, NJ FamilyCare/Medicaid (NJFC) will reimburse eligible primary care providers in Medicaid fee-for-service (FFS) in accordance with Governors SFY26 approved budget.

The updated reimbursement levels for eligible Medicaid primary care providers will be applied to eligible primary care services in FFS and managed care. The selected procedure codes align with the definition of primary care services as defined in the "Health Care and Education Reconciliation Act of 2010," which includes the evaluation and management category in the Healthcare Common Procedure Coding System (CPT codes 99202-99499) as well as services related to immunization administration for vaccines and toxoids (CPT codes 90465, 90466, 90467, 90468, 90471, 90472, 90473, 90474, and 90480).

The updated primary care rates were established using 2025 Northern NJ (Locality 01), non-facility Medicare rate for participating providers. For services that do not have an equivalent Medicare rate, rates were increased proportionally with other services included in this rate increase. These procedure codes and rates are increasing to 70% of the Medicare fee for SFY26 and will be continuously updated to be equal to a percent of Medicare and will serve as the Medicaid FFS rates and as a minimum reimbursement rate under Medicaid managed care.

Managed Care Organizations are directed to use the fee schedule as a minimum for eligible in-network primary care providers. A list of eligible services and provider taxonomies will be made available at [www.njmmis.com](http://www.njmmis.com). The minimum reimbursement rates are subject to adjustment for pricing modifiers based on the actual claim information according to the MCO's contracted payment methodology or as indicated on the FFS fee schedule. The directed payment requirements will apply to services for both adults and children.

The only exceptions to the directed payment requirements are those providers participating in the Medicaid Access to Physician Services (MAPS) program. Providers eligible for MAPS program would continue to receive the appropriate MAPS reimbursement.

**ACTION:**

For questions regarding this Newsletter providers can contact Gainwell Technologies Provider Services unit at 1-800-776-6334.

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