

**CHAPTER 71  
MEDICAID ONLY**

**Authority**

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R.2006 d.133, effective March 14, 2006.  
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**Chapter Expiration Date**

Chapter 71, Medicaid Only, expires on March 14, 2011.

**Chapter Historical Note**

Chapter 71, Medicaid Only, was originally codified in Title 10 as Chapter 94, Medicaid Only Manual. Chapter 94, was adopted as R.1976 d.157, effective July 1, 1976. See: 7 N.J.R. 464(d), 8 N.J.R. 287(d).

Subchapter 3, Eligibility Factors, was readopted as R.1983 d.317, effective July 20, 1983. See: 15 N.J.R. 948(a), 15 N.J.R. 1382(a).

Subchapter 4, Resources, and Subchapter 5, Income, were readopted as R.1983 d. 373, effective August 22, 1983. See: 15 N.J.R. 999(b), 15 N.J.R. 1477(a).

Subchapter 7, Other Payments, Subchapter 8, Responsibilities, and Subchapter 9, Medical Assistance for the Aged Continuation, were readopted as R.1986 d.5, effective January 6, 1986. See: 17 N.J.R. 2340(a), 18 N.J.R. 276(a).

Chapter 94, Medicaid Only Manual, was recodified as N.J.A.C. 10:71, effective March 16, 1987. See: 19 N.J.R. 466(e).

Pursuant to Executive Order No. 66(1978), Chapter 71, Medicaid Only Manual, was readopted as R.1991 d.33, effective December 24, 1990. See: 22 N.J.R. 3357(a), 23 N.J.R. 215(a).

Pursuant to Executive Order No. 66(1978), Chapter 71, Medicaid Only Manual, was readopted as R.1995 d.651, effective November 17, 1995. See: 27 N.J.R. 3543(a), 27 N.J.R. 5046(a).

Pursuant to Executive Order No. 66(1978), Chapter 71, Medicaid Only, was readopted as R.2000 d.415, effective September 15, 2000. See: 32 N.J.R. 2565(a), 32 N.J.R. 3844(a).

Chapter 71, Medicaid Only, was readopted by R.2006 d.133, effective March 14, 2006. See: Source and Effective Date. See, also, section annotations.

**Law Review And Journal Commentaries**

Healthy Financial Planning for Nursing Home Care. Michael K. Feinberg, 138 N.J.Law. 33 (Mag.) (Jan./Feb. 1991).

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**SUBCHAPTER 1. INTRODUCTION**

**10:71-1.1 General introduction**

On January 1, 1974, Title XVI of the Social Security Act replaced previous Titles I (Old Age Assistance), X (Aid to the Blind) and XIV (Aid to the Disabled), which were repealed. The Social Security Administration administers Title XVI, Supplemental Security Income (SSI), which provides cash payments to the aged, blind and disabled. Individuals who desire medical care only apply through the county board of social services for the Medicaid Only program under Title XIX.

Amended by R.2000 d.415, effective October 16, 2000.  
See: 32 N.J.R. 2565(a), 32 N.J.R. 3844(a).

Substituted "board of social services" for "welfare board".

**10:71-1.2 Choice of program by applicant**

(a) An aged, blind or disabled person who desires Medicaid and does not wish to receive a money payment may apply for the Medicaid Only program. To qualify for this program, he/she must have financial eligibility as determined by the regulations and procedures set forth in this chapter.

(b) Persons who are neither aged, blind nor disabled qualify for Medicaid benefits when they are determined by the county board of social services to be eligible for AFDC-related Medicaid program. Persons whose eligibility is thus established may choose to receive Medicaid Only benefits without accepting money payments. Regulations governing these programs are set forth in the AFDC-related Medicaid chapter (N.J.A.C. 10:69).

Amended by R.2000 d.415, effective October 16, 2000.  
See: 32 N.J.R. 2565(a), 32 N.J.R. 3844(a).

In (a), substituted "chapter" for "manual"; and rewrote (b).

**10:71-1.3 Living arrangements**

(a) Aged, blind and disabled persons who are living in the community and meet the requirements of the SSI program may receive Medicaid Only.

(b) Aged, blind and disabled persons who are receiving care in an eligible medical institution and, because of income or resources, do not qualify for SSI may be eligible for Medicaid Only.

**10:71-1.4 Information on the chapter**

This chapter sets forth the policies and procedures necessary for the orderly and equitable administration of the Medicaid Only program as it relates to the aged, blind and disabled. It is a statement of policy and procedures separate from all other assistance programs, and is applicable to "Medicaid Only." The criteria for determination of eligibility are based on SSI policy and procedure which do not necessarily coincide with standards for other public assistance programs and therefore require separate instructions.

Amended by R.2000 d.415, effective October 16, 2000.  
See: 32 N.J.R. 2565(a), 32 N.J.R. 3844(a).

Substituted "chapter" for "manual".

**10:71-1.5 Administrative organization**

The Medicaid Only program is administered by the county boards of social services (CBOSS) of the State of New Jersey through the Division of Medical Assistance and Health Services in the Department of Human Services. The CBOSSs contract with the Division of Medical Assistance and Health Services for the purpose of providing Medicaid Only benefits to eligible persons.

Amended by R.1995 d.651, effective December 18, 1995.  
See: 27 N.J.R. 3543(a), 27 N.J.R. 5046(a).

Amended by R.2000 d.415, effective October 16, 2000.  
See: 32 N.J.R. 2565(a), 32 N.J.R. 3844(a).

Substituted references to county boards of social services for references to County Welfare Agencies throughout.

**10:71-1.6 Basic principles of administration**

(a) The following principles of administration shall apply to the Medicaid Only program.