

**CHAPTER 85**

**GENERAL ASSISTANCE MANUAL**

**Authority**

N.J.S.A. 44:8-111(d).

**Source and Effective Date**

R.1994 d.591, effective November 4, 1994.  
See: 26 N.J.R. 2757(b), 26 N.J.R. 4765(b).

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Chapter 85, General Assistance Manual, expires on November 4, 1999.

**Chapter Historical Note**

Chapter 85, General Assistance Manual, was originally adopted pursuant to authority of N.J.S.A. 44:8-107 et seq. and was filed and became effective prior to September 1, 1969. Revisions were filed and became effective on August 31, 1971, as R.1971 d.155. See: 3 N.J.R. 154(b), 3 N.J.R. 206(a). Further revisions were filed on October 21, 1976, as R.1976 d.334 to become effective on January 1, 1977. See: 8 N.J.R. 284(a), 8 N.J.R. 557(b). Subchapter 12, "Allowance and Income Standards", was added by R.1980 d.29, effective February 1, 1980. See: 11 N.J.R. 556(b), 12 N.J.R. 86(d). Subchapter 12 was amended by Emergency Rule R.1980 d.295, effective July 1, 1980. See: 12 N.J.R. 482(a). Pursuant to Executive Order No. 66(1978), Chapter 85 (Subchapters 1 through 6, and 10) was readopted as R.1983 d.328, effective July 25, 1983. See: 15 N.J.R. 938(a), 15 N.J.R. 1378(a). Subchapter 12 was repealed by R.1985 d.81, effective March 4, 1985. See: 16 N.J.R. 3165(a), 17 N.J.R. 595(a). Pursuant to Executive Order No. 66(1978), Chapter 85 was readopted as R.1990 d.33, effective December 20, 1989. See: 21 N.J.R. 3221(a), 22 N.J.R. 218(a).

Pursuant to Executive Order No. 66(1978), Chapter 85 was readopted as R.1994 d.591. See: Source and Effective Date. See, also, section annotations.

**Law Review and Journal Commentaries**

Nursing Homes in the Garden State: A Legal Perspective. Janice Chapin, 141 N.J.Law. 38 (Mag.) (July/August 1991).

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### SUBCHAPTER 1. GENERAL PROVISIONS

#### 10:85-1.1 Purpose of the General Assistance program

(a) General Assistance is a program under which financial and medical aid is provided by municipal departments of welfare to persons who are citizens of the United States or who have eligible alien status and are currently ineligible for participation in any other public assistance program in New Jersey.

(b) Each municipality in New Jersey is required by law (Chapter I of Title 44, Revised Statutes) to provide financial assistance and medical care to all eligible persons residing in the community at the time of application and not otherwise provided for under the laws of this State and to such other persons who may be in the municipality and require emergency assistance. (See N.J.A.C. 10:85-3.2(f) for definition of resident and N.J.A.C. 10:85-4.6 for emergency assistance.)

1. The General Assistance Manual is a compilation of rules based on State law (Chapter 8 of Title 44, Revised Statutes) which govern the provision of assistance to eligible needy persons by all municipalities and authorize 100 percent State funding for non-administrative costs incurred by those municipalities in the administration of the General Assistance program.

(c) The General Assistance program shall be administered by the municipality's director of welfare, under the supervision of the local assistance board. The director shall be responsible for the determination of applicant eligibility in accordance with State law and regulations.

(d) There must be strict adherence to State law and regulations. Requirements other than those established pursuant to State law and regulations shall not be imposed as a condition to receiving assistance.

(e) Any person who is in need and believes him/herself to be eligible for general assistance shall be given the opportunity to apply (see N.J.A.C. 10:85-7.1(b)).

(f) An applicant or recipient shall have the right to appeal any action on the part of the municipal welfare department which results in a denial, reduction or termination of assistance; amount of grant or designation of temporary payee. (See subchapter 7, Notices and Hearings).

(g) Financial assistance for maintenance requirements or other needs, including medical assistance, shall not be authorized through General Assistance when, during the same period, such needs are actually being provided by any other source.

1. Receipt of food stamp benefits shall not constitute duplication of assistance.

2. Receipt of duplicate assistance from more than one MWD in any one month shall render the client ineligible for General Assistance benefits for a period of 90 days beginning with the month subsequent to the month in which the benefit infraction was identified. Sanctions imposed are for additional/cumulative periods of ineligibility for each infraction.

i. Client payment records from the various MWDs shall provide the necessary documentation to initiate the 90 day penalty.

3. The following situation shall be included as duplicative assistance within the meaning of the penalty provisions stipulated in this subsection:

i. General Assistance benefits received from any MWD during any imposed sanction period, such as set forth at N.J.A.C. 10:85-3.2(g)7.

Amended by R.1978 d.171, effective July 1, 1978.

See: 10 N.J.R. 150(a), 10 N.J.R. 285(b).

Amended by R.1978 d.420, effective December 12, 1978.

See: 10 N.J.R. 284(c), 11 N.J.R. 17(d).

Amended by R.1983 d.328, effective July 25, 1983.

See: 15 N.J.R. 938(a), 15 N.J.R. 7378(a).

Originally adopted as an Emergency Adoption as R.1983 d.209, effective May 23, 1983, operative June 1, 1983.

N.J.A.C. citation corrected.

Amended by R.1991 d.521, effective October 21, 1991 (operative November 1, 1991).

See: 23 N.J.R. 1741(a), 23 N.J.R. 3155(a).

At (b)1, 100 percent State funding of non-administrative costs; at (g)2, 90-day ineligibility penalty and sanctions established. Amended by R.1992 d.503, effective December 21, 1992. See: 24 N.J.R. 3075(a), 24 N.J.R. 4538(a).

Only U.S. citizens eligible; (g)3 added, defining duplicative assistance.

Amended by R.1993 d.382, effective August 2, 1993.

See: 25 N.J.R. 1714(a), 25 N.J.R. 3466(a).

#### Case Notes

See *Gilbert v. Tull*, 145 N.J.Super. 53, 62, 366 A.2d 1012 (Law Div.1976) (general statement of purposes of program).

### 10:85-1.2 Administration of municipal welfare

(a) Each municipality shall have a legally constituted local assistance board (LAB) unless such board has been discontinued or abolished. (See N.J.A.C. 10:85-2.2(a)1). When an LAB exists, it shall consist of unsalaried citizens appointed by the chief executive of the municipality with the approval of the governing body. The Board shall meet at regular intervals, not less than four times a year, and shall oversee the municipality's General Assistance program, as administered by the Director of Welfare. (See also N.J.A.C. 10:85-2.2).

(b) Each municipality shall have a director of welfare, who has been legally appointed by the local assistance board as the salaried employee responsible for the administration of the municipality's General Assistance program. Appointments to the position of welfare director shall be approved by the Division of Family Development prior to consideration for State aid. (See also N.J.A.C. 10:85-2.2(d).) The director of welfare shall be the chief executive and administrative officer of the board, but shall not be a member of such board. A permanently appointed director of welfare shall, therefore, not concurrently serve as a member of the local assistance board (LAB) and hold the position of welfare director. This provision is not applicable to temporary appointees as set forth at N.J.A.C. 10:85-2.2(d)3ii.

(c) The municipality must have a public assistance trust fund bank account which is clearly and separately identifiable from other municipals funds. The account shall be reserved exclusively for the receipt, accumulation, and disbursement of nonadministrative funds (including funds granted as State aid) used in the General Assistance program. (See also N.J.A.C. 10:85-6.3).

(d) The administration of general assistance must be free from involvement in partisan political activity. The director of welfare shall not hold any political office, nor use his/her position to influence the political actions of any other person, nor be permitted to solicit, collect or receive political contributions of any nature. (See also N.J.A.C. 10:85-2.2(d)6).

(e) Municipalities shall administer General Assistance in conformance with standards, policies, procedures and rules developed by the Division of Family Development. This requirement shall include adherence to additional policy

directives as distributed by official letters signed by the Director of the Division of Family Development, as well as to the rules set forth in this manual.

Amended by R.1982 d.61, effective March 15, 1982.

See: 13 N.J.R. 301(a), 14 N.J.R. 281(b).

(a): Deleted "consisting" and added "unless such board . . . it shall consist".

Amended by R.1990 d.33, effective January 16, 1990.

See: 21 N.J.R. 3221(b), 22 N.J.R. 218(a).

Stylistic changes.

Amended by R.1991 d.521, effective October 21, 1991 (operative November 1, 1991).

See: 23 N.J.R. 1741(a), 23 N.J.R. 3155(a).

Reference to State participation deleted.

#### Case Notes

Involvement of administrators in partisan political activity.

*State v. Malone*, 16 N.J.Super. 383, 84 A.2d 745 (Ch. Div.1978).

### 10:85-1.3 Funding of the program

Municipalities shall be provided 100 percent State funding for non-administrative costs expended in compliance with State standards in the administration of the General Assistance program.

Amended by R.1978 d.171, effective June 1, 1978.

See: 10 N.J.R. 150(a), 10 N.J.R. 285(b).

Amended, by R.1978 d.217, effective June 30, 1978.

See: 10 N.J.R. 345(b).

Amended by R.1991 d.521, effective October 21, 1991 (operative November 1, 1991).

See: 23 N.J.R. 1741(a), 23 N.J.R. 3155(a).

State funds 100 percent of administrative costs.

### 10:85-1.4 Policy of nondiscrimination

(a) Eligibility for program benefits shall be determined without regard to race, color, sex, religious creed, marital or birth status, national origin, political beliefs, or disability.

1. Purchase of services: The municipality shall not purchase services for beneficiaries of the program from any organization, agency, or institution which practices discrimination.

i. The director shall notify appropriate vendors of this policy.

(1) Official statement on invoices: The director shall see that the following statement appears on all official invoices used in the municipality's General Assistance program:

Services are provided to all recipients without regard to race, color, sex, religious creed, marital or birth status, national origin, political beliefs, or disability.

ii. Evidence of noncompliance by vendor: If the municipal welfare director shall become aware of the employment of discriminatory practices by any vendor with whom general assistance business is conducted, the matter shall be promptly referred to the Director of the Division of Family Development.

2. Notification of staff: The director of welfare shall inform his or her staff of the policy of nondiscrimination in the administration of the General Assistance program.

3. Complaint procedure: Any person seeking or receiving general assistance, who feels that he or she has been discriminated against, shall be given the opportunity to file a complaint.

i. Filing the complaint: The aggrieved person may file his or her complaint directly with the Division of Family Development, CN 716, Trenton, New Jersey 08625. If a complaint has been filed with the local agency, it shall be forwarded immediately to the Division of Family Development. All complaints are to be addressed to the attention of the Division Director.

ii. Action by the Director of the Division of Family Development (DFD): Upon receipt of a complaint, the Director shall take whatever action he or she deems appropriate. This action may include, but is not limited to, the securing of reports from whatever sources may have knowledge pertinent to the situation, and/or referral to the Division on Civil Rights of the Department of Law and Public Safety for investigation, evaluation and recommendation.

iii. Cooperation by the municipal welfare director: The municipal director of welfare shall cooperate fully with any agency investigations involving alleged discrimination.

iv. Final disposition of the complaint: The Director of the Division of Family Development shall be responsible for the final disposition of any complaint involving discrimination. In rendering a final decision, the Director shall take into consideration relevant decisions or actions on the part of a court or government agency. v. Implementation of final disposition: The municipal director of welfare shall comply with the final decision of the director regarding the disposition of the discrimination complaint. If staff disciplinary action is required by the decision, the municipal director of welfare shall take such action.

Amended by R.1983 d.328, effective July 25, 1983.  
See: 15 N.J.R. 938(a), 15 N.J.R. 1378(a).

Originally adopted as an Emergency Adoption as R.1983 d.209, effective May 23, 1983, operative June 1, 1983. Address correction.  
Amended by R.1990 d.33, effective January 16, 1990.  
See: 21 N.J.R. 3221(b), 22 N.J.R. 218(a).

Stylistic changes.

Amended by R.1994 d.591, effective December 5, 1994.  
See: 26 N.J.R. 2757(b), 26 N.J.R. 4765(b).

#### 10:85-1.5 Disclosure of information

(a) The municipal welfare department shall restrict the use or disclosure of information concerning applicants or recipients to persons directly connected with the administration of the General Assistance program whose official duties require access to the information. Municipal officials and appointees, members of the governing body and municipal employees not under the jurisdiction of the municipal welfare director are not permitted such access.

(b) Allowable disclosure of information: The municipal welfare department shall release information concerning an applicant or recipient in the following situations only:

1. Judicial summons: A staff member shall provide such testimony as may be mandated by a court of competent jurisdiction.

2. Waiver of confidentiality: If an applicant or recipient chooses to waive, in writing, his/her right to confidentiality of information, the municipal welfare department shall make disclosure of information to the extent specifically authorized by the waiver.

3. Fair hearings: Pertinent information and records shall be released to the parties directly involved upon request for a local or State fair hearing.

4. Release of lists of names and addresses: The furnishing of any lists of names and addresses, or both, for purposes not directly involved in the administration of general assistance is specifically prohibited; however, this shall not preclude furnishing information by list (or otherwise) to other municipal, State, or Federal agencies lawfully charged with the administration of public welfare functions or services, for the purpose of such administration only.

5. Quality control reviews: Information in connection with a quality control review or State audit shall be furnished to authorized representatives of the Division of Family Development.

6. Information necessary to the performance of regular or special audits by State staff or by the municipality's registered municipal accountant (RMA).

As amended, R.1982 d.61, effective March 15, 1982.  
See: 13 N.J.R. 301(a), 14 N.J.R. 281(b).

(a): Added "whose official duties . . . access."  
Amended by R.1988 d.146, effective April 4, 1988.  
See: 19 N.J.R. 2376(b), 20 N.J.R. 809(b).

Added (b)6.  
Amended by R.1990 d.33, effective January 16, 1990.  
See: 21 N.J.R. 3221(b), 22 N.J.R. 218(a).  
Stylistic changes.

#### 10:85-1.6 Purpose of the manual

(a) The purpose of this manual is to outline the policies and procedures applicable to the administration of and eligibility requirements for general assistance.

(b) The director of welfare shall assign copies of this manual to administrative staff and to other staff working with applicants and recipients, as appropriate. The director shall ensure that each staff member is thoroughly familiar with its contents and that the required policy and procedures are consistently applied.

(2) Exploitation by prostitution or overwork, having the child beg or involving the child in illegal activities.

(3) Neglect as shown by apparent malnutrition or lack supervision necessary for the health and safety of the child.

NOTE: In the event of any indication that the death of a child resulted from abuse or neglect, such matter shall be reported immediately to DYFS.

iii. To Federal authorities: Knowledge of the actual commission of a Federal felony unless disclosure of such information is prohibited by law (see N.J.A.C. 10:85-1.5 and 2.2(g)2). (Refer to legal counsel for identification of Federal felonies.)

2. Procedures: When the MWD becomes aware of facts that would indicate that one of the above mentioned crimes has been or may have been committed or receives a direct allegation in any form, written, verbal or anonymous, that such a crime has been committed, it shall proceed as follows:

i. The director shall personally, and in collaboration with counsel, review whatever facts and circumstances are immediately available in order to determine whether there is suspicion that a crime was committed.

ii. If the director is satisfied that there is evidence to support an investigation as to whether a crime has been committed, he/she shall, after consultation with counsel, report the matter to the county prosecutor, or to a local police department or to the State Police if so directed by the Office of the Prosecutor. If such matter involves suspected child abuse or neglect, it shall also be reported to the Division of Youth and Family Services.

iii. When a decision has been made to report the alleged or suspected commission of the crime, such report shall be made in written form to the appropriate law enforcement agency.

iv. The MWD shall cooperate fully with any subsequent investigation initiated by the law enforcement agency within the limits of the policy and regulations of the Division of Family Development. An MWD staff member may sign a written complaint only upon a written request from the law enforcement agency, provided his or her information of the facts to be stated in such complaint is based upon his or her own personal knowledge and belief.

R.1977 d.141, effective May 1, 1979.  
See: 10 N.J.R. 488(a), 11 N.J.R. 249(c).  
As amended, R.1983 d.328, effective July 25, 1983.  
See: 15 N.J.R. 938(a), 15 N.J.R. 1378(a).

Originally adopted as an Emergency Re-adoption as R.1983 d.209, effective May 23, 1983, operative June 1, 1983.

Internal citation corrected.

Amended by R.1987 d.448, effective November 2, 1987.  
See: 19 N.J.R. 1393(a), 19 N.J.R. 2056(b).

Substantially amended.  
Amended by R.1990 d.33, effective January 16, 1990.  
See: 21 N.J.R. 3221(b), 22 N.J.R. 218(a).  
Stylistic changes.

## SUBCHAPTER 3. ELIGIBILITY FOR ASSISTANCE

### Law Review and Journal Commentaries

Protecting the Home in Government Benefits Planning. Gary Martz, 164 N.J.Law. 34 (Mag.) (Oct. 1994).

### 10:85-3.1 Persons eligible for General Assistance

(a) General Assistance shall be provided to all eligible needy persons who, while in the State, are entitled to receive such assistance. Entitlement does not extend to persons who have been found eligible for or are recipients of public assistance programs administered by the county welfare agency, or who have been found ineligible for such programs due to voluntary refusal to comply with program requirements. (See also (c) and (d) below.)

#### 1. Exceptions relevant to medical care:

i. Individuals and families who are ineligible for public assistance (General Assistance, AFDC, Refugee Resettlement Program) or for SSI payments because their income exceeds the standards established for the applicable program may apply to the MWD on a monthly basis for assistance in paying excessive medical costs. The provisions of this section are not applicable to the payment of bills for inpatient or outpatient hospitalization or for medical services rendered to an inpatient or outpatient;

ii. See N.J.A.C. 10:85-3.3(g)2 regarding Medicaid coverage for individuals under age 21.

2. Citizen/alien status: To be eligible for GA an individual shall be either a citizen of the United States or otherwise permanently residing in the United States under color of law. Such permanently residing persons include individuals lawfully present in the United States under color of law including any alien who is lawfully present in the United States as a result of the application of the following sections of the Immigration and Nationality Act, 8 U.S.C. § 1101 et seq.: Section 207(c) concerning refugees; Section 203(a)(7) (prior to April 1, 1980) related to conditional entrants; Section 208 concerning asylees; and Section 212(d)(5) covering parolees.

i. An alien who is legally admitted as a student or visitor shall not be eligible for GA.

ii. Legal alien status shall be verified and documented in accordance with provisions set forth at N.J.A.C. 10:85-3.2(c)6.

iii. Sponsorship of an alien admitted for permanent residency shall be pursued in accordance with provisions at N.J.A.C. 10:85-3.4(b)1.

3. In the GA program, there are two distinct categories of persons eligible for financial assistance, those who are "employable" and those who are "unemployable."

4. An "employable" person is any person applying for or receiving assistance who is able-bodied and does not meet any one of the criteria of "unemployable" delineated in (a)5 below.

5. An "unemployable" person is any person who meets any of the unemployable criteria below:

- i. Persons who are 65 years of age or older;
- ii. Persons receiving inpatient hospital care and treatment who were receiving an unemployable grant prior to entering the hospital. (Persons who were listed as employable shall retain such employable status until hospital discharge);
- iii. Persons who are residents in long term care facilities;
- iv. Persons in the first 12 months of residential treatment in centers licensed by the New Jersey Department of Health for the treatment of drug abuse, when medical evidence exists that the residential treatment is necessary. The 12 month period starts anew for each commencement of treatment, previous incomplete or unsuccessful courses of treatment notwithstanding;
- v. Persons normally eligible to receive RSDI (Title II benefits), SSI or Railroad Retirement benefits on the basis of disability, but due to recovery of overpayments or administrative delays in that respective program, payments are being withheld;
- vi. Persons who have been determined to be legally blind by the New Jersey Commission for the Blind and Visually Impaired;
- vii. Persons in the third trimester of pregnancy when an examining physician certifies to both the pregnancy and its term;
- viii. Pregnant persons when an examining physician certifies that employment poses a threat to the mother or the fetus;
- ix. Persons whose presence is required at home to care for one or more children under age two or for disabled family member(s). No more than one person in an eligible unit may be considered unemployable for this reason without written authorization from the Division of Family Development (DFD)/GAP Unit; and/or
- x. Persons determined to be incapacitated by the MWD are unemployable when such determination of incapacity is supported by any of the following circumstances:

(1) Form GA-40, Medical Employability Evaluation, shall be completed to provide written certification by an examining physician that the individual is, by reason of an identified physical or mental defect, disease, or impairment, unable to engage in any useful occupation. Such certification shall include the date of examination, diagnosis, length of incapacity, functional limitations, prescribed treatment, an indication of whether or not reevaluation will be necessary, and the examining physician's signature. Any time period or termination date included in the written certification shall be observed. A time period of "indefinite" shall be construed to mean "three months" unless renewed by the examining physician or extended under (a)5x(4) below. When no date or time period is indicated, the certification shall be renewed monthly or such longer period as may be specified under (a)5x(4) below;

(2) An obvious disability or impairment which makes employment unrealistic at the time of application/redetermination. A determination on this basis shall be valid for up to three months or such longer period as may be specified under (a)5x(4) below;

(3) The individual's history of unemployment and lack of vocational training and/or education, combined with medical evidence of the existence of a mental or physical disability or impairment, negates all possible employment. Facts leading to such determination must be recorded in the case file. A determination on this basis shall be valid for three months or such longer period as may be specified under (a)5x(4) below; and/or

(4) Written Record of Action (Form GA-38) from DFD/GAP Unit. The record may be applied for by MWD submission of such documentary material as the MWD finds appropriate. This may include, but is not limited to, medical or hospital reports and the MWD's own statement of specific observations and recommendations with reasons. Form PA-5/DRS-1, Examining Physician's Report, may be used in this process. MWDs shall submit social information on Form GA-39. Evaluation for General Assistance Employable/Unemployable Status, which provides such pertinent social information as client's age, educational level attained, experience, and a general description of the individual, especially as it relates to employment. The DFD/GAP Unit shall consider the individual's age, experience, education, vocational training, and work history as well as physical or mental defects, diseases or impairments in determining whether an individual is able to engage in any useful occupation for which he or she has competence, or his or her ability to engage in retraining.

(b) Eligibility for general assistance is determined according to the number of persons applying as a unit (eligible unit).

1. Eligible unit: The eligible unit shall be comprised of one or more persons. In most cases, it will consist of a single individual, 18 years old or over, or a couple without children. In room and board or residential treatment situations, each person is an eligible unit of one. In all other situations, the eligible unit shall consist of:

- i. The applicant/recipient;
- ii. The spouse of the applicant/recipient who lives in the home unless the spouse is receiving SSI or public assistance through another program;
- iii. The person with whom the applicant/recipient lives as a couple representing themselves to the community as husband and wife unless such person is receiving SSI or public assistance through another program;
- iv. All children under age 18 of persons identified in (b)1i, ii, and iii above who live in the home and who are not receiving SSI or public assistance under another program.

2. Income to be counted: All income of persons in the eligible unit shall be taken into account as prescribed in N.J.A.C. 10:85-3.3 and subtracted from the applicable general assistance allowance standard.

(c) Rules concerning persons found ineligible by CWA are as follows:

1. Families:

i. When the county welfare agency determines a family to be financially ineligible for AFDC, such family is not eligible to receive general assistance from the MWD. The family should be advised, however, that it may apply for medical assistance and that excessive medical costs will be considered in accordance with N.J.A.C. 10:85-3.3(g)1.

ii. Families determined by the CWA to be ineligible for AFDC due to eligibility factors other than financial need (such as age of children) may be eligible for general assistance. Applications will be accepted and processed in accordance with the rules stated in this manual.

(1) An individual member (parent or child) of an AFDC unit who is otherwise eligible but incurs a penalty of ineligibility and whose needs are therefore deleted from the AFDC grant, or whose application is therefore denied, is not eligible for general assistance.

iii. When adult family members are determined ineligible for AFDC-N by the CWA because the father has voluntarily ceased employment within 90 days prior to application, such persons are ineligible for general assistance.

2. Child temporarily in home on visit: When an institutionalized child is on temporary visit home but is not a

member of an AFDC eligible unit, he/she may be eligible for general assistance if the visit does not exceed 21 consecutive days. If the length of such child's visit exceeds 21 days, he/she shall be referred to the CWA.

(d) Rules concerning aged, blind and disabled are as follows:

1. Referral for SSI: Individuals who are aged, blind or disabled shall be referred to the nearest Social Security district office (SSA/DO) to apply for supplemental security income (SSI). However, any immediate need shall be met through General Assistance as a loan to the needy individual. (See N.J.A.C. 10:85-8.3(c)3ii for referral procedures and N.J.A.C. 10:85-6.5 for reimbursement procedures.)

2. Ineligible for SSI: In the event an aged, blind or disabled individual is determined by the SSA/DO to be ineligible for SSI, he/she may apply for and/or continue to receive general assistance, so long as financial eligibility exists. (See N.J.A.C. 10:85-8.3(c)3iii for procedures for appeal of SSI denials).

3. SSI Recipients: If an individual (or couple) who is receiving SSI benefits does not receive his or her SSI payment promptly, such person(s) may be in immediate need and may apply for General Assistance. Under these circumstances the MWD shall contact the SSA/DO to determine the anticipated length of the delay and shall provide assistance for that period, based on the allowance standards in Schedule I and provide that financial eligibility exists in accordance with this subchapter. (See N.J.A.C. 10:85-4.2 regarding periods for which assistance may be granted.)

i. This provision also applies when a new SSI applicant has been officially notified of eligibility to receive SSI benefits and a Form GA-30 was not submitted in accordance with N.J.A.C. 10:85-6.5(c).

ii. In any situation where a Form GA-30 is not in effect, reimbursement to the MWD of any assistance granted to an eligible SSI beneficiary will be on a voluntary basis only. The MWD shall not require the client to sign a voluntary agreement to repay.

iii. Refer to N.J.A.C. 10:85-7.2(b)2 regarding use of a time-limited notice.

(e) Rules concerning eligibility of young people are as follows:

1. Single persons under age 18: Assistance is provided through the AFDC program for needy families with children under age 18 (or in certain situations under age 19 if the child is attending secondary school/vocational training). Therefore, when an unmarried individual under age 18 applies for General Assistance, the MWD shall make every effort to locate the family and refer it and the child to the appropriate county welfare agency.

i. An unmarried, unattached child under the age of 18, although not legally an adult, may in fact be emancipated. That he or she is under age 18 is not, of itself, a bar to eligibility for assistance; it is, however, reason for additional action relating to eligibility. The MWD will provide assistance to any such person who applies and is eligible, based on the following action:

(1) The MWD will make all reasonable efforts to bring about the return of the child to his/her own family and/or support by his/her own parents.

(2) If such efforts are not successful within one week of the first grant of assistance or if no such efforts are possible, the MWD will immediately refer the case to the appropriate district office of the Division of Youth and Family Services (DYFS).

(A) For cases between ages 16 and 18, the DYFS office may accept those for which it can provide services and/or maintenance. The MWD will continue assistance for each case so long as the case remains eligible or until the date on which DYFS assumes responsibility for maintenance.

(B) For all cases under age 16, it is expected that DYFS will act promptly to accept responsibility for services and maintenance. The MWD will continue assistance until the date on which DYFS assumes responsibility. The MWD will notify DFD/GAP Unit of any case under age 16 which is still active on the GA rolls 30 days after referral to DYFS.

(C) The MWD will be notified in writing by DYFS when a case referred to DYFS cannot be accepted for services.

ii. See paragraph (c)2 of this section regarding an institutionalized child who visits his/her home.

2. Married person under age 18: Persons under age 18 who are married, living with their spouses, and without children of their own may be eligible for General Assistance.

i. An individual who is married but does not live with his or her spouse shall be treated in accordance with (e)1 above.

3. Persons aged 18 or over: An individual aged 18 or over may be eligible for General Assistance, whether or not he or she is residing with his or her family.

(f) This subsection applies to persons released from State and/or county psychiatric hospitals, State schools for the mentally retarded, the New Jersey Neuropsychiatric Institute, and Veterans Administration (V.A.) hospitals (see also N.J.A.C. 10:85-3.2(h)). For procedures to be followed for individuals released from a State psychiatric hospital refer to N.J.A.C. 10:85-3.2(i).

1. Eligibility for public assistance:

i. Voluntary patient: Eligibility for public assistance is not affected by periods of care in a mental institution or V.A. hospital for an individual who was admitted as a voluntary patient. The individual must, however, be again living outside the institution and free of institution restraint, control and supervision prior to receipt of assistance.

(1) Exception: When a voluntary patient is on convalescent leave with relatives who are unable to provide support, he/she may apply for and receive general assistance if he/she is otherwise eligible.

ii. Involuntary commitment; officially discharged: An individual who was involuntarily committed by the court and who has been officially discharged from a mental institution or V.A. hospital resumes his or her former status in the community and is fully entitled to apply for and receive public assistance if otherwise eligible.

(1) An individual released on a Trial Visit, Convalescent Visit or Extended Visit is likewise eligible to apply for and receive assistance.

iii. Interim Assistance-Trial Placement/Family Care: An individual who is placed in an Interim Assistance-Trial Placement program by a State psychiatric hospital is not eligible for any form of public assistance; this applies to both voluntary and involuntarily committed patients. However, veterans placed in Family Care by a V.A. hospital or individuals discharged to Family Care by a State school for the mentally retarded may apply for and receive public assistance if otherwise eligible.

iv. Referral application: See N.J.A.C. 10:85-3.2(h).

As amended, R.1977 d.134, effective June 1, 1977.

See: 9 N.J.R. 123(c), 9 N.J.R. 238(b).

As amended, R.1977 d.410, effective November 1, 1977.

See: 9 N.J.R. 367(b), 9 N.J.R. 535(a).

As amended, R.1977 d.444, effective December 1, 1977.

See: 9 N.J.R. 432(a), 10 N.J.R. 15(a).

As amended, R.1978 d.420, effective December 12, 1978.

See: 10 N.J.R. 284(c), 11 N.J.R. 17(d).

As amended, R.1978 d.303, effective October 1, 1978.

See: 9 N.J.R. 523(b), 10 N.J.R. 443(d).

As amended, R.1978 d.420, effective December 12, 1978.

See: 10 N.J.R. 284(c), 11 N.J.R. 17(d).

As amended, R.1979 d.365, effective October 1, 1979.

See: 11 N.J.R. 378(a), 11 N.J.R. 519(f).

As amended, R.1980 d.116, effective March 19, 1980.

See: 11 N.J.R. 507(a), 12 N.J.R. 194(a).

(f): Added county hospitals. Added last sentence.

(f)iii: "Interim Assistance-Trial Placement" was "Family Care", "Psychiatric hospital" was "institution" and "or individuals ... mentally retarded" was added.

As amended, R.1981 d.160, eff. June 4, 1981.

See: 13 N.J.R. 145(a), 13 N.J.R. 363(b).

(d)1 and 2: Code cross-references added.

As amended, R.1982 d.102, eff. April 5, 1982 (Operative May 1, 1982).

See: 13 N.J.R. 927(a), 14 N.J.R. 344(b).

(b)2: deleted "as a family unit"; added "without regard ... programs"; deleted "such persons ... in common".

As amended, R.1982 d.355, eff. October 18, 1982.

See: 14 N.J.R. 815(a), 14 N.J.R. 1162(a).

Change in eligibility from children under 21 if attending school to children under 19, if attending secondary school. Reflects Federal change in AFDC standards.

As amended, R.1983 d.328, eff. July 25, 1983.

See: 15 N.J.R. 938(a), 15 N.J.R. 1378(a).

Originally adopted as an Emergency Readoption as R.1983 d.209, effective May 23, 1983, operative June 1, 1983.

Internal citations corrected throughout text.

As amended, R.1984 d.16, effective February 6, 1984.

See: 15 N.J.R. 1629(a), 16 N.J.R. 245(a).

Clarification of unrelated persons functioning as households.

Amended by R.1985 d.168, effective April 15, 1985 (operative May 1, 1985).

See: 17 N.J.R. 37(a), 17 N.J.R. 968(a).

(b)2ii added; old 2ii recodified to 2iii with substantial changes.

Correction: (a)1 and 2 missing from text.

See: 18 N.J.R. 307(b).

Amended by R.1990 d.33, effective January 16, 1990.

See: 21 N.J.R. 3221(b), 22 N.J.R. 218(a).

Stylistic changes.

Amended by R.1992 d.260, effective June 15, 1992.

See: 24 N.J.R. 926(a), 24 N.J.R. 2263(a).

In (b)2: deleted text regarding household size in the determination of GA allowances.

Recodified existing 3 as 2, with no change in text.

Amended by R.1992 d.503, effective December 21, 1992.

See: 24 N.J.R. 3075(a), 24 N.J.R. 4538(a).

Outpatient costs excluded at (a)1i; inpatient references deleted; only certain U.S. citizens or lawful permanent residents eligible for service; employability defined.

Amended by R.1993 d.382, effective August 2, 1993.

See: 25 N.J.R. 1714(a), 25 N.J.R. 3466(a).

Amended by R.1994 d.591, effective December 5, 1994.

See: 26 N.J.R. 2757(b), 26 N.J.R. 4765(b).

#### Case Notes

Former regulation (cited as General Assistance Manual § 2.300A(III)(4)) invalid as contrary to statute in providing for distinction between recipients unemployable because of a disability and those unemployable because of lack of job availability. *Pascucci v. Vagott*, 71 N.J. 40, 362 A.2d 566 (1976).

Alcoholism not good cause for failing to perform worksite assignment. *Township of Union, Department of Human Services v. M.B.*, 92 N.J.A.R.2d (DEA) 28.

### 10:85-3.2 Application process

(a) The application process begins with an individual's initial contact with the agency and includes determination of eligibility, verification of the applicant's statements and decision by the municipal welfare department regarding issuance of assistance. Both the applicant and the MWD have responsibility in verifying and documenting eligibility (see subsection (e) of this section).

1. Initial contact with agency: An individual's initial contact with the municipal welfare department may be in form of an inquiry, a referral or an application for public assistance.

i. Inquiry: Any request for information about assistance programs which does not result in an application. A record is necessary only when the inquiry requires follow-up action.

ii. Referral: A request from a public or private agency or individual for assistance on behalf of a person who has indicated need of such help. All

referrals must be recorded, including appropriate facts and action taken.

iii. Application: A written request for General Assistance by an individual who wishes to apply for him/herself and his/her dependent, if any, or a request from an authorized agent acting on behalf of such an individual (see (c)2 below).

(b) Rules concerning responsibilities of the agency are:

1. Initial contact: Upon initial contact, the municipal welfare department is responsible for informing the individual of the following:

i. The general requirements of the application process, including the necessity of contacting certain relatives and of making certain other collateral contacts; the right of the applicant to confidentiality and to be the primary source of information; an explanation of the blanket consent statement; and the fact that the applicant is, by signing this form, consenting to have the MWD contact others (except the Social Security Administration which releases information only upon written consent of the client).

ii. The availability of the Food Stamp Program to eligible nonpublic assistance households, with instructions about where to apply.

iii. Other programs (services and assistance) which are appropriate and for which the individual may be eligible. (See subchapter 8 of this chapter.)

2. Decision to apply: The agency shall determine whether or not the individual does indeed wish to apply, with his/her full understanding of the MWD's need to verify essential eligibility factors and of the requirement for a personal interview.

3. Immediate application: When the individual indicates his or her decision to apply for General Assistance, an application shall be taken immediately.

4. Referral to CWA:

i. When, during the initial contact, it appears that potential eligibility for AFDC exists, the municipal welfare department shall immediately refer the individual(s) to the county welfare agency to make application.

ii. When such referral is made at a time other than the normal business hours of the county welfare agency or when, in the opinion of the municipal welfare director, the individual cannot reasonably be expected to reach the CWA offices before the end of the business day, general assistance may be granted on an emergency basis only, in accordance with N.J.A.C. 10:85-4.6.

(1) When immediate need exists (see N.J.A.C. 10:85-3.3(a)1), such emergency grant shall be made in an amount sufficient to provide for the family's immediate needs from the date of application until

the reopening of the CWA office. (See N.J.A.C. 10:85-4.2(a)3 for method of prorating allowance.)

(c) Rules concerning taking applications are:

1. Application/affidavit: Any person who indicates a wish to apply for General Assistance shall be recognized as an applicant. Such individual will be assisted by an MWD worker in completing the application (Form GA-1). He or she shall then be required to sign under oath the attached affidavit attesting to the correctness of his or her statements.

i. Form GA-1 (Application and Affidavit for General Assistance) shall be used in every case for the initial application. The director of welfare or MWD caseworker is empowered to receive the oath and witness the applicant's signature or the signature of an authorized agent acting in situations described in (c)2 below.

ii. When application is being made for more than one person, it must be signed by all persons for whom assistance is requested except dependent children under age 18.

iii. The following procedures apply at the time of application:

(1) All applicants shall be required to sign two copies of Form GA-51 (Important Reminder of Your Obligation to Report Changes). The applicant shall retain one copy and the original shall be filed in the case record. The MWD shall explain to the applicant(s) that it is his or her obligation to promptly report changes in income, resources or other circumstances.

(2) All applicants shall be provided with a copy of Form GA-197, Your Rights and Responsibilities in the General Assistance Program. The MWD shall provide any oral explanations the applicant(s) may request.

iv. Upon request, the MWD shall provide the applicant(s) with a copy of the completed GA-1 form.

2. Authorized agent:

i. A legally appointed guardian shall always be recognized as an authorized agent to initiate an application to establish eligibility for General Assistance.

ii. In General Assistance, an individual who wishes to apply may be confined at home or at an institution, or may be subject to a critical illness or injury which impedes action on his/her own behalf. Consequently, the MWD shall accept any one of the following, in the order of priority as listed, as an authorized agent for the purpose of initiating an application:

(1) A relative by blood or marriage;

(2) A staff member of a public or private welfare agency of which the person is a client, who has been designated by the agency to so act;

(3) A physician or attorney of whom the person is respectively a patient or client;

(4) A staff member of an institution or facility in which a person is receiving care, who has been designated by the institutional facility to so act.

3. Binding upon eligible unit: The application and affidavit is binding upon the individual(s) signing this document and upon any other member(s) of the eligible unit for whom he/she is applying. An authorized agent is obliged to complete the application to the best of his/her knowledge.

4. Personal interview: The application shall be taken at a personal interview with the client unless an authorized agent is acting on behalf of a client in accordance with (c)2 above. The interview may occur at the welfare office or in the client's home (or hospital or other institution, if necessary).

5. Social Security number: The Social Security number of every recipient of General Assistance must be recorded on the application form (Form GA-1) and elsewhere in the record as may be appropriate to the facts of the case. Any person who has a number and whose number is not disclosed and recorded is not eligible for assistance.

i. When assistance is requested for a person who does not have a Social Security number, the MWD will make referral (using Referral for Services Form PA-14) to the appropriate district office of the Social Security Administration. Form PA-14 shall explain that the purpose of the referral is to make application for a Social Security number. The MWD will grant assistance while issuance of the number is pending if the person is otherwise eligible. Failure to apply for a number or to cooperate with the Social Security Administration in those things necessary for issuance of a number renders the applicant ineligible for assistance.

ii. The MWD will maintain appropriate follow-up of the referral.

6. If at the time of application a client indicates on Form GA-1, Application and Affidavit for General Assistance, that he or she is not a United States citizen, he or she shall be required to provide the MWD documentation from the Immigration and Naturalization Service (INS) which indicates his or her alien status. Additionally, the appropriate corresponding Alien Registration Number shall be made available as soon as possible but no later than 10 calendar days from the date of application. If the applicant, who is otherwise GA eligible, cannot provide documentation concerning alien status because he or she is awaiting receipt of that information, assistance shall not be withheld pending the receipt of the information. A copy of such documentation shall be retained in the case file. Information about the applicant/recipient's alien status shall not be used to violate the individual's right to confidentiality by the MWD or INS, except in instances of fraudulent activity committed by the individual to establish eligibility for GA.

(c): Added paragraph 2.  
 (c)2: Renumbered as 3 and added last sentence.  
 (c)3: Renumbered as 4 and added "unless an . . . of this subsection".  
 (c): Renumbered paragraphs 4 and 5 as 5 and 6.  
 Amended by R.1980 d.153, effective May 1, 1980.  
 See: 12 N.J.R. 121(b), 12 N.J.R. 278(c).  
 (g): Substantially amended.  
 Amended by R.1980 d.245, effective July 1, 1980.  
 See: 12 N.J.R. 191(a), 12 N.J.R. 418(b).  
 (f) amended to include persons entering a New Jersey medical facility from out-of-state in the definition of municipal resident.  
 (f)1 amended to include current exception and sentence immediately following.  
 (f)1iii added.  
 Amended by R.1980 d.252, effective July 1, 1980.  
 See: 12 N.J.R. 275(c), 12 N.J.R. 419(a).  
 (f)1i: Exception language added.  
 Amended by R.1980 d.514, effective January 1, 1981.  
 See: 12 N.J.R. 584(c), 13 N.J.R. 18(a).  
 (c)1iv amended to provide applicant with pamphlet and oral explanations. (c)1v added.  
 Amended by R.1981 d.160, effective June 4, 1981.  
 See: 13 N.J.R. 145(a), 13 N.J.R. 363(b).  
 (g)4i(3): cross-references added.  
 Amended by R.1982 d.103, effective April 5, 1982 (operative May 1, 1982).  
 See: 13 N.J.R. 927(b), 14 N.J.R. 344(c).  
 (g)3ii deleted-v. deleted and replaced with new (g)3ii through (g)3v9(D).  
 Amended by R.1982 d.104, effective April 5, 1982 (operative May 1, 1982).  
 See: 13 N.J.R. 929(a), 14 N.J.R. 344(d).  
 (g)7 substantially amended.  
 Amended by R.1982 d.418, effective December 6, 1982.  
 See: 14 N.J.R. 956(a), 14 N.J.R. 1398(a).  
 Information regarding verification of Unemployment/Disability Insurance added.  
 Amended by R.1983 d.160, effective May 16, 1983.  
 See: 15 N.J.R. 314(a), 15 N.J.R. 807(a).  
 Medical evidence of mental or physical disability or impairment added as necessary proof of unemployability.  
 Amended by R.1983 d.328, effective July 25, 1983.  
 See: 15 N.J.R. 938(a), 15 N.J.R. 1378(a).  
 Originally adopted as an Emergency Readoption as R.1983 d.209, effective May 23, 1983, operative June 1, 1983.  
 Internal N.J.A.C. citation form corrected throughout text.  
 Amended by R.1983 d.374, effective September 6, 1983.  
 See: 15 N.J.R. 313(a), 15 N.J.R. 1476(a).  
 Determination of municipal responsibility added.  
 Amended by R.1983 d.622, effective January 17, 1984.  
 See: 15 N.J.R. 1630(a), 16 N.J.R. 145(b).  
 Clear directives added routing forms from General Assistance offices to N.J. Division of Employment Services.  
 Amended by R.1984 d.506, effective November 5, 1984 (operative December 1, 1984).  
 See: 16 N.J.R. 2219(b), 16 N.J.R. 3031(c).  
 (f)2: deleted old text and inserted new.  
 Amended by R.1985 d.692, effective January 21, 1986 (operative February 1, 1986).  
 See: 17 N.J.R. 2338(a), 18 N.J.R. 192(b).  
 N.J.A.C. 10:85-3.2(g)(7)ii terminating general assistance recipients from welfare for a 90-day period if they are discharged because of their negligence held invalid as not in furtherance of legislative policy. *Newark Div. of Public Welfare v. Ragin*, 197 N.J.Super. 225 (App. Div. 1984).  
 Correction: (e)4ii(1) omitted from text.  
 See: 19 N.J.R. 307(b).  
 Amended by R.1987 d.409, effective October 5, 1987.  
 See: 18 N.J.R. 2183(a), 19 N.J.R. 1812(a).  
 (g) substantially amended.  
 Amended by R.1988 d.425, effective September 6, 1988.  
 See: 20 N.J.R. 879(a), 20 N.J.R. 2292(c).  
 Added (g)9.  
 As amended by R.1989 d.161, effective March 20, 1989.

See: 20 N.J.R. 2968(a), 21 N.J.R. 764(b).  
 Residency of person in health care facility clarified.  
 See: 21 N.J.R. 1147(a).  
 Correction: Erroneously entered text at N.J.A.C. 10:85-3.2(e)3.iii(1) deleted.  
 Amended by R.1989 d.398, effective August 7, 1989.  
 See: 21 N.J.R. 835(a), 21 N.J.R. 2384(a).  
 Stipulation of 30 consecutive day residency time frame deleted.  
 Amended by R.1990 d.33, effective January 16, 1990.  
 See: 21 N.J.R. 3221(b), 22 N.J.R. 218(a).  
 Stylistic changes.  
 Administrative change to (g)2.  
 See: 23 N.J.R. 1412(a).  
 Amended by R.1991 d.521, effective October 21, 1991 (operative November 1, 1991).  
 See: 23 N.J.R. 1741(a), 23 N.J.R. 3155(a).  
 Verification requirements and definition of resident clarified.  
 Amended by R.1992 d.368, effective September 21, 1992 (operative October 1, 1992).  
 See: 24 N.J.R. 2160(b), 24 N.J.R. 3356(a).  
 Text at (g) amended to conform to Family Development Program requirements.  
 Amended by R.1992 d.503, effective December 21, 1992.  
 See: 24 N.J.R. 3075(a), 24 N.J.R. 4538(a).  
 Application procedures revised and clarified; text conformed to penalty at N.J.S.A. 44:8-114.  
 Amended by R.1993 d.382, effective August 2, 1993.  
 See: 25 N.J.R. 1714(a), 25 N.J.R. 3466(a).  
 Amended by R.1994 d.591, effective December 5, 1994.  
 See: 26 N.J.R. 2757(b), 26 N.J.R. 4765(b).  
 Amended by R.1995 d.383, effective July 17, 1995.  
 See: 27 N.J.R. 864(a), 27 N.J.R. 2689(a).  
 New (c)7 is added and old (c)7 is redesignated as (c)8.

#### Case Notes

Public assistance to strikers. *Super Tire Engineering Co. v. McCorkle*, 412 F. Supp. 192 (D.N.J. 1976) affirmed 550 F.2d 903, certiorari denied 98 S.Ct. 106, 434 U.S. 827, 54 L.Ed.2d 86, rehearing denied 98 S.Ct. 753, 434 U.S. 1025, 54 L.Ed.2d 773.

Tardiness to work did not indicate unwillingness to work. *Robinson v. New Jersey Dept. of Human Services, Div. of Family Development*, 270 N.J.Super. 191, 636 A.2d 1066 (A.D.1994).

Regulation terminating general assistance recipients from welfare for a 90-day period if they are discharged from work because of that negligence is invalid as it does not further legislative intent (also cited as N.J.A.C. 10:85-2.2). *Newark Div. of Public Welfare v. Ragin*, 197 N.J.Super. 225, 484 A.2d 716 (App.Div.1984).

Immediate application. *Faison v. Green*, 171 N.J.Super. 341, 344, 409 A.2d 282 (App. Div. 1979).

Participation in workfare program did not preclude agency from obtaining reimbursement by withholding general assistance payments from recipient's retroactive SSI check. *J.H. v. Willingboro Township*, 95 N.J.A.R.2d (DEA) 11.

Money for school-related expenses disregarded. *J.C. v. New Brunswick City Welfare Department*, 92 N.J.A.R.2d (DEA) 41.

Domicile of Alzheimer's patient changed by operation of law. *A.S. v. Dumont Municipal Welfare Agency*, 92 N.J.A.R.2d (DEA) 30.

Alcoholism not good cause for failing to perform worksite assignment. *Township of Union, Department of Human Services v. M.B.*, 92 N.J.A.R.2d (DEA) 28.

Failure to comply with work requirement as basis for general assistance ineligibility. *J.B. v. Newark Div. of Public Welfare*, 5 N.J.A.R. 493 (1979).

#### 10:85-3.3 Financial eligibility

(a) Rules concerning immediate need are as follows.

1. Definition: Immediate need is the condition in which the available resource of an applicant are insufficient to meet current living expenses.

2. Immediate assistance: When immediate need is apparent and the applicant provides affirmative evidence of eligibility by a written application signed under oath (Form GA-1), the director of welfare shall issue a grant, effective as of the date of application, in an amount sufficient to assure that the applicant is provided with food, shelter and clothing pending further verification of the case. Refer to N.J.A.C. 10:85-4.2 for periods for which assistance may be granted. (See N.J.A.C. 10:85-3.2(e) regarding verification and sources of evidence.)

(b) Rules concerning countable income are as follows.

1. Requirement: All income from whatever source must be considered in establishing the applicant's eligibility and in computing the grant.

2. Definition: Income is countable when it is in cash or in some other form readily available to meet the needs of the eligible unit.

i. "Some other form" means income-in-kind, such as shelter or food provided at no cost to the client. See (c)3 and (e)4 below.

ii. Income which is not readily available is considered a resource and will be counted only when it actually becomes available. See N.J.A.C. 10:85-3.4 for regulations regarding resources.

3. Availability of income: For purposes of determining immediate need either at the time of initial application or at any point prior to completion of verification, moneys which may have been received in the past, even though recently, and which the applicant has already spent cannot be counted as available so long as he/she provides reasonable explanation or evidence of such expenditures.

i. Having provided for immediate need, the MWD shall determine financial eligibility for continuing assistance on a monthly or weekly basis (see N.J.A.C. 10:85-4.2), in accordance with (c), (d) and (e) below.

4. Demand deposits: Funds which are available to the applicant(s) or any member(s) of the eligible unit upon demand, i.e., signature authority, are to be considered fully available for purposes of eligibility determination. This includes funds in joint accounts regardless of the source of the funds when the applicant or eligible unit member may make unrestricted withdrawals, i.e., "or" accounts. When use of funds is restricted by the need for the signature of a person(s) who is/are not a member(s) of the eligible unit, i.e., "and" account(s), a pro rata share of the funds shall be considered available unless a demonstration is made that actual ownership is in a different proportion. Such different proportion shall then be recognized. If it is demonstrated that funds in such an account are totally inaccessible, they shall not be considered. Information relating to accessibility or the lack of it must be verified.

(c) Rules concerning earned income are as follows.

1. Definition: Earned income is income earned by an individual through the receipt of wages, salaries or commissions from activities in which he/she is engaged as an employee or from his/her self-employment. It includes earnings over a period of time for which settlement is made in one payment, as in the sale of farm crops.

2. Self employment: Earned income from self-employment is the total income from a trade, business or enterprise adjusted by deducting business expenses or the cost of producing the income. Personal expenses, income tax payments, lunches, transportation, child care, and so forth, are not classified as business expenses for this purpose.

i. Persons who are self-employed shall be required to submit evidence of business receipts and expenditures as the basis for determining earned income. A reliable, accurate accounting system or the method utilized in reporting to the Internal Revenue Services shall be acceptable for determining net income.

ii. An individual who is providing extensive personal services together with room and board accommodation to an adult other than a relative shall be considered self-employed. Any income from this arrangement in excess of the room and board cost figure as given in (e)2 below shall be recognized as earned income.

(1) "Extensive personal services" means care given an ill or aged person, such as feeding, bathing and dressing.

(2) "Relative" in this section includes spouse, child, parent, grandparent, brother or sister.

3. Shelter or food as part of wages: When an individual is provided with shelter and/or food without charge in return for performing work duties, the monetary value shall be counted as gross earned income. Such value shall not exceed \$55.00 per month for shelter and/or \$45.00 per month for food; however, a lesser amount may be counted where warranted by conditions. (See (e)4 below for other income-in-kind situations.)

4. Disregards: Certain earnings shall be disregarded in determining the amount of countable income.

i. A standard disregard of \$60.00 per month (\$14.00 per week) for each employed member of the eligible unit engaged in either full or part-time employment shall be deducted from gross earned income. This amount represents mandatory payroll deductions and all other expenses of employment.

ii. In addition, after initial eligibility has been established (see (d) below), one-third of the total remaining earned income of all employed members of the eligible unit shall be disregarded.

iii. When the earnings of an individual are less than \$60.00 per month or \$14.00 per week, the entire amount of such earnings shall be disregarded.

5. Monthly earnings: Monthly gross earnings are established by multiplying the client's weekly gross earnings by 4 $\frac{1}{2}$ .

6. Irregular earnings: When earnings are irregular, the weekly gross earnings for the four weeks preceding the date the grant becomes effective shall be averaged to determine a weekly amount for the purpose of grant computation.

i. When the client has been employed less than four weeks prior to the determination, the average shall be based on the actual employment period of one, two or three weeks.

(1) Example: New employment began three weeks ago, with wages (gross earnings) in amounts of \$80.00, \$62.00 and \$68.00. Average weekly earnings are \$70.00.

ii. The weeks must be identified in the case record and the amounts of earnings utilized in determining the average documented therein.

7. Change in earned income: Any change in employment circumstances, such as change in base pay, change to full or part-time work or to a different job, must be reported to the MWD immediately and a recalculation of earned income promptly made. If this change has occurred less than four weeks prior to the date the new determination is made and the earnings are irregular, an average shall be determined only for the period since the change occurred. (See example in (c)6 above.)

8. Contract income: Earnings payable under the terms of a renewable contract, e.g., earnings of school teachers, are to be prorated over the stated term of the contract only.

9. Income from tips: When the client is employed in a position where tipping is customary, a daily log or other acceptable documentation of tips received shall be used for income calculation. Tip income calculation shall not be based on the estimated tips information as reported on W-2 forms.

(d) Initial eligibility must be established for all persons who have earned income and are applying for assistance.

1. Determination: To determine initial eligibility, an initial disregard of \$60.00 shall be deducted from the total monthly gross earnings or the net earned income from self-employment. When the resultant amount is less than the applicable allowance standard, according to Schedule II, financial eligibility exists.

i. When initial eligibility has been established, the income shall be computed in accordance with (c)4

above to determine the amount of assistance to which the eligible unit is entitled.

2. Continuing eligibility: A continuing case remains financially eligible so long as the income as computed on Form GA-19 is less than the applicable allowance standard.

3. Eligibility for excessive medical costs: When computation of initial eligibility or of the grant results in a surplus (income exceeds assistance standard), eligibility for excessive medical costs may nevertheless exist, subject to provisions of subsection (g) of this section. Any such surplus, as determined on Form GA-19, shall be subtracted from applicant's total medical costs and payment provided for the remaining unpaid medical bills.

(e) Rules concerning unearned income are:

1. Definition: Unearned income includes net income from roomers, roomer-boarders (except as in (c)2ii above,) table-boarders, rental of apartments or house-keeping units, returns from capital investments such as dividends and interest, benefits and pensions, annuities, contributions from relatives or others, compensation payment and so forth.

i. All unearned income which is actually being received during the period for which assistance is being provided shall be counted in determining eligibility and in computing the grant. When available unearned income can be increased by action of an applicant/recipient, e.g., terminate a voluntary tax deduction, the applicant/recipient must, as a condition of eligibility, take such action.

ii. Income in the form of benefits, grants or earnings received from any Federal bureau or agency must be applied in computing the amount of the eligible unit's grant.

2. Income from roomers, roomer-boarders and table-boarders: The presence of roomers, roomer-boarders, or boarders in the eligible unit's home constitutes a business arrangement. Moneys received from such arrangements shall be considered gross unearned income to the eligible unit. (Note that income from provision of extensive personal services is earned income. See (c)2ii above.)

i. The monthly cost figures to be used in determination of net income are as follows:

(1) Roomer	\$ 40.00;
(2) Table-boarder	\$ 80.00;
(3) Roomer-boarder	\$120.00.

ii. To determine the net income, subtract the appropriate monthly cost figure from the monthly amount paid to the eligible unit. The difference is net unearned income.

iii. If the roomer, table-boarder or roomer-boarder pays an amount less than the applicable monthly cost

figure; no countable income shall be recognized. However, the eligible unit shall be advised that it is in fact subsidizing such person and urged to request a more equitable payment.

3. Income from rental or apartment or housekeeping unit: When payment is received for rental of an apartment or housekeeping unit in the eligible unit's home, the countable net income shall be determined by deducting the cost of operation and maintenance from the gross income received.

i. Monthly cost figure: The monthly cost figure per room for operation and maintenance are as follows:

(1) With no utilities—\$23.00;

(2) Including one major utility such as heat or electricity—\$29.00;

(3) Including two or more (or all) utilities—\$34.00.

ii. To determine the total cost, multiply the monthly cost figure by the number of rooms in each apartment or housekeeping unit, excluding any room used solely as a bathroom.

iii. Deduct the total cost from the amount of rental income received by the eligible unit. The difference is the net unearned income.

4. Income-in-kind: Income or benefits received in the form of goods, services or via third party payments, rather than cash, are to be treated in accordance with the provisions below. Cash contributions, however, made to or for a client, are to be treated as countable unearned income, except those income items specifically identified in (e)5 below.

i. Shelter/utilities: When shelter and/or utilities are provided without charge or to a third party by an individual who is under an obligation to make the contribution, it shall be recognized as income-in-kind. Deduct 25 percent of the applicable allowance standard for shelter only and 30 percent when utilities are included. When shelter and/or utilities are provided without charge or to a third party by an agency or organization or by an individual who is not under an obligation to make contribution, the value of such shelter and/or utilities shall not be considered in the determination of eligibility or in the calculation of grants of assistance.

ii. Hospital services: When grants are being continued under the provisions for shelter continuity (see (f)5 below), an adjustment in grant computations shall be used to accommodate for the absence of the individual from his or her home if inpatient hospital services continued for more than 30 days. The amount for employable persons is \$17.00 monthly; for unemployable persons, \$25.00 monthly.

iii. Other items: No deductions will be made for other income items, except for wages as described in (c) above and contributions by an LRR in accordance with N.J.A.C. 10:85-9.5.

5. Income exclusions: The following shall not be counted when determining financial eligibility:

i. Excess value of food stamps: For any household participating in the Federal Food Stamp Program, the value of the coupon allotment.

ii. Supplemental aid by other agencies or organizations, whether public or private, provided that:

(1) There is no duplication between such aid and the public assistance grant; and

(2) Such aid is for a special purpose not within the function of the public assistance agency (for example, vocational rehabilitation).

iii. Subsidization of adoption: Any income received through the subsidized adoption program of the Division of Youth and Family Services pursuant to N.J.S.A. 30:4C-45 thru 49 (P.L. 1973 c.81).

iv. Foster care payments: The regular monthly payment and clothing allowance paid by DYFS for care of children shall be considered as equal to the cost of providing the care. Extra payments for special services shall, however, be considered as earned income from self-employment.

v. Occasional gifts and contributions of nominal amount or value, such as those received on birthdays, Christmas or other holidays.

vi. HUD payments: Any HUD (Housing and Urban Development) vendor payments made on behalf of recipients.

vii. Payments for supportive services or reimbursement of out-of-pocket expenses made to individual volunteers, grandparents, senior health aides, senior companions, volunteers under Title I (VISTA) or Public Law 93-113, persons serving in the Service Corps of Retired Executives (SCORE) and Active Corps of Executives (ACE) and any programs under Titles II and III of the Domestic Volunteer Service Act of 1973 (Public Law 93-113) shall be disregarded.

viii. Personal loans: Personal loans are exempt when such loans are evidenced by a document, signed by the client and the lender, which states the amount of the loan and terms of repayment. (See also (e)5ix below for student loans.)

ix. Student income: Loans, grants, scholarships and income from work-study programs which may be received by full time undergraduate students are to be disregarded in computing eligibility or the amount of General Assistance to be granted. Stipends provided for living expenses, however, are not to be disregarded. (See also N.J.A.C. 10:85-3.2(f)3 on eligibility of college students.)

x. Relocation payments: Payments made under the authority of the New Jersey Relocation Assistance Act (Chapter 362, Laws of 1971, N.J.S.A. 20:4-1 et seq.).

xi. Energy Assistance payments and credits made under the Home Energy Assistance (HEA) Program, the Lifeline Assistance Program (LAP) and the Tenants Lifeline Assistance Program (TLAP).

xii. Unemployment Insurance Benefits for which a check(s) was/were issued, endorsed by the payee, and returned to the issuing agency in repayment of an overpayment. Verification shall be by examination of Employment Service Form B-65, Receipt for Refund of Benefits, a copy of which shall be retained in the case record.

xiii. Agent Orange payments: Money received because of a settlement agreement or judgment in a lawsuit brought against a manufacturer or distributor of "Agent Orange" for damages resulting from exposure to "Agent Orange".

(f) Assistance allowance standards are as follows:

1. An allowance standard is the total amount of need recognized for a particular eligible unit for a specified period of time, other than payment for medical needs, homemaker service, travel costs or such emergency grants as may be deemed necessary under N.J.A.C. 10:85-4.6.

2. Allowance schedules: Schedules I and II at N.J.A.C. 10:85-4.1 have been established under the authority in N.J.S.A. Title 44 and give the standards, in monthly amounts, to be used as the basis for granting assistance.

i. The eligible unit represents the person(s) applying for and eligible to receive General Assistance (see N.J.A.C. 10:85-3.1(b)1).

ii. Assistance allowance standards as given in Schedule I apply only to persons who, because of physical, mental, or emotional disabilities, are unable to accept employment.

iii. In all situations when the eligible unit includes at least one individual who is employable, Schedule II shall be used.

iv. If assistance is required for a period of less than one month, the allowance standard as given in Schedules I or II shall be prorated as necessary.

v. To prorate, divide the monthly allowance by 30 (regardless of the actual number of days in that particular month) to determine the per diem amount. Multiply the per diem amount by the number of days for which the grant is to be made.

vi. The payment granted for any period shall be determined from the applicable monthly allowance standard less any countable income (see N.J.A.C. 10:85-4.2).

3. Recognized for State aid: State aid will be provided in accordance with the appropriate allowance standard when payments, as related to the periods of time described in N.J.A.C. 10:85-4.2, adhere to the standards and regulations in this manual.

i. A MWD providing additional amounts of assistance in any given month (other than for homemaker service, travel costs, emergency assistance or medical care) will receive no State aid for the amount in excess of the applicable standard.

4. Room and board living arrangements: When an individual is purchasing a room and board living arrangement, the following shall apply:

i. Residential health care facility: When an individual who is in need of extensive personal services on a regular and continuous basis is purchasing a room and board living arrangement in a residential health care facility: (licensed by the N.J. Department of Health for purposes other than the care or treatment of drug or alcohol abuse), the monthly assistance payment including a personal allowance, shall not exceed the rate approved by the New Jersey Department of the Treasury, less any countable income. When a rate increase is approved, a public notice to that effect will be published in the New Jersey Register. Information about the current rate may also be obtained by contacting the Division of Family Development. However, the cost of purchasing such living arrangement shall not exceed the minimum amount which the establishment customarily charges to or for other guests not dependent on public assistance, for the same accommodations and/or services.

ii. Other boarding homes: When an individual is purchasing room and board in a group facility or a boarding home (including a private home) other than a Residential Health Care Facility as in (f)4i above, or a center for treatment of drug or alcohol abuse as in (f)4iv below, the total monthly allowance shall be the amount for a single individual as given in Schedule I or Schedule II, as appropriate, less any countable income.

(1) The spouse of a boarding home operator when living in the same home is also considered a boarding home operator. Neither the spouse nor a child under age 18 of a boarding home operator may be considered a boarder there.

iii. Long term care facilities: See N.J.A.C. 10:85-5.3 regarding care in nursing facilities.

iv. Drug and alcohol treatment centers: When an individual is receiving room and board in a residential center for the treatment of drug or alcohol abuse, whether or not the center is licensed by the New Jersey Department of Health, the total allowance shall not exceed the amount to which the individual would be entitled as an eligible unit of one as given in Schedule I or Schedule II, as appropriate. Of that amount, \$25.00 shall be considered as an allowance for personal incidentals and the remainder as the room and board payment to the center. (Note: Licensure of the center by the New Jersey Department of Health as a medical institution will not affect the payment rate.)

v. Maternity homes: When an eligible individual has been found by the Division of Family Development, General Assistance Program (GAP) Unit (DFD/GAP Unit) to be in need of the services provided by a maternity home approved by the Division of Youth and Family Services (DYFS) and the individual is receiving such services, the monthly allowance shall be the rate established by DYFS. The MWD may obtain current rate information by communicating with the DFD/GAP Unit. However, the MWD shall not accept responsibility for payment at that rate prior to receipt of a report of affirmative findings from the DFD/GAP Unit. Until the report is received, the allowance shall be that for a single individual as given in Schedule I or II, as appropriate, less any countable income. For the DFD/GAP Unit approved cases, the DYFS rate shall apply with retroactive adjustment, if necessary, from the date of application or the date of admission to the maternity home, whichever is later.

(1) The submittal to the DFD/GAP Unit may be in any appropriate form or format. It shall consist of the objective recommendation of the MWD with supporting documentation. The DFD/GAP Unit will consider the individual's age, mental and physical health, family circumstances, and other conditions peculiar to the situation. Form PA-5 (Examining Physician's Report) and/or Form PA-6 (Medical-Social Information Report) may be used in presenting the documentation.

5. Shelter continuity: When a person who had been living alone and is otherwise eligible for General Assistance is hospitalized for more than 30 days, grants of assistance may be continued for up to 60 additional days for the purpose of retaining shelter to which the person can return.

(g) Medical care: Persons found eligible for General Assistance maintenance payments in accordance with the procedures and standards established in this subchapter (N.J.A.C. 10:85-3) are likewise eligible for medical care (see N.J.A.C. 10:85-5 regarding medical services). In addition, certain other individuals and families are eligible for medical assistance from the MWD or for referral to the county welfare agency.

1. Medically needy: Individuals and families who are ineligible for General Assistance, AFDC, the Refugee Resettlement Program or SSI, because their income exceeds the standards established for the applicable program may apply to the MWD on a monthly basis for assistance in paying excessive medical costs. The provisions of this subsection are not applicable to the payment of bills for inpatient or outpatient hospitalization or for medical services rendered to an inpatient or outpatient by a hospital or hospital clinic. The MWD shall refer to the county welfare agency those persons who appear to be potentially eligible for the Medically Needy Program administered by that agency. Except as stated in (g)1i below, any person found eligible under the provisions of that program is not eligible for benefits under this subsection.

i. Elderly, blind or disabled individuals who are ineligible for the SSI Program, because their income exceeds the SSI standard, will be referred to the Medically Needy Program as in (g)1 above. That program, however, does not provide payment for prescribed drugs. Therefore, individuals not entitled to receive assistance in meeting the cost of drugs from any other source may apply to the MWD on a monthly basis for assistance in meeting such costs.

ii. "Excessive" defined: When an individual's or family's income over and above the appropriate income level as explained in (g)1iii below has been used to pay medical bills, any additional medical costs are considered excessive.

iii. Income levels: For the purpose of determining excessive medical costs, the total available monthly income (see (g)1iv below) of individuals, couples, or families with children is measured against the appropriate allowance standard. (See N.J.A.C. 10:85-3.1(b) regarding eligible unit concept.) For elderly, blind, or disabled persons, the Medically Needy Program standard applies. For families with children, the AFDC (C and F) standard applies. (See N.J.A.C. 10:82-1.2 for current AFDC standard.) For all others, the General Assistance standard (Schedule I or II as appropriate) applies. Information about the standards may be obtained by contacting the Division of Family Development.

iv. Computing total income: Form GA-19 will be used to determine income and the amount of excessive medical costs. Monthly earned income is adjusted by deducting \$60.00 plus any child care necessary for employment of the parent(s) and/or court ordered support payments; no further disregards are recognized. This adjusted amount added to any unearned income equals the total monthly income available to the eligible unit.

v. Payment determination: When the appropriate standard ((g)liii above) is subtracted from the total available income, the difference or "surplus" is the amount of medical expenses the client is expected to pay him/herself. When the client has proof of paid medical bills in the amount of the "surplus", the MWD shall provide payment for any unpaid medical costs in excess of the "surplus", in accordance with the regulations and rates set forth in N.J.A.C. 10:85-5.

vi. Application required: N.J.A.C. 10:85-3.2(c), (e) and (f) shall constitute the application process relevant to the medically needy. See also N.J.A.C. 10:85-3.5(a) regarding redeterminations.

2. Medicaid Special: Certain low income persons under age 21 and certain low income pregnant women, regardless of age, may be eligible for Medicaid even though they may or may not be living with parents, may or may not be eligible for General Assistance, and may not be eligible for cash assistance from a county welfare agency.

i. The MWD will, via Form PA-14, refer all GA recipients under age 21 and all pregnant recipients to the county welfare agency for Medicaid Special. Referral of those who have income marginally above GA eligibility standards is also indicated. The CWA will advise as to the eligibility determination made.

ii. Persons found eligible for Medicaid Special are not thereby disqualified for grants of General Assistance but the MWD will make no medical payments for such persons.

As amended, R.1977 d.291, effective September 1, 1977.

See: 9 N.J.R. 277(a), 9 N.J.R. 434(c).

As amended, R.1977 d.444, effective December 1, 1977.

See: 9 N.J.R. 432(a), 10 N.J.R. 15(a).

As amended, R.1977 d.488, effective December 29, 1977.

See: 10 N.J.R. 64(c).

As amended, R.1977 d.445, effective January 1, 1978.

See: 9 N.J.R. 433(a), 10 N.J.R. 15(b).

As amended, R.1977 d.446, effective January 1, 1978.

See: 9 N.J.R. 471(b), 10 N.J.R. 15(c).

As amended, R.1979 d.197, effective July 1, 1979.

See: 11 N.J.R. 184(a), 11 N.J.R. 283(c).

As amended, R.1979 d.366, effective September 13, 1979.

See: 11 N.J.R. 378(b), 11 N.J.R. 520(a).

As amended, R.1979 d.365, effective October 1, 1979.

See: 11 N.J.R. 378(a), 11 N.J.R. 519(f).

As amended, R.1979 d.446, effective November 13, 1979.

See: 11 N.J.R. 515(a), 11 N.J.R. 627(a).

As amended, R.1979 d.448, effective November 13, 1979.

See: 11 N.J.R. 516(b), 11 N.J.R. 627(c).

As amended, R.1979 d.447, effective January 1, 1980.

See: 11 N.J.R. 516(a), 11 N.J.R. 627(b).

As amended, R.1980 d.11, effective February 1, 1980.

See: 11 N.J.R. 506(b), 12 N.J.R. 86(a).

(g)2i: "Referral for Services" was "Interagency referral".

As amended, R.1980 d.29, effective February 1, 1980.

See: 11 N.J.R. 556(b), 12 N.J.R. 86(d).

(g)liiii: Amended cross-references.

As amended, R.1980 d.84, effective May 1, 1980.

See: 12 N.J.R. 30(a), 12 N.J.R. 127(d).

(c): Added paragraph 8.

As amended, R.1980 d.310, effective August 1, 1980.

See: 12 N.J.R. 85(b), 12 N.J.R. 483(a).

(f)4iv: Reference to Schedules I and II added.

As amended, R.1980 d.311, effective August 1, 1980.

See: 12 N.J.R. 123(a), 12 N.J.R. 483(b).

(f)4ii substantially amended.

As amended, R.1980 d.388, effective November 1, 1980.

See: 12 N.J.R. 469(d), 12 N.J.R. 599(f).

(b)4 added.

As amended, R.1980 d.466, effective December 1, 1980.

See: 12 N.J.R. 534(c), 12 N.J.R. 704(a).

(g)2i, ii, and "note" deleted and replaced with new material.

As amended, R.1980 d.486, effective December 1, 1980.

See: 12 N.J.R. 534(b), 12 N.J.R. 724(a).

(a)1 amended by redefining "immediate need".

As amended, R.1980 d.547, effective February 1, 1981.

See: 12 N.J.R. 622(c), 13 N.J.R. 100(a).

(f)4i and ii amended from "Licensed Board Home for Sheltered Care" to "Residential Health Care Facility"; (f)4i "\$40" was "up to \$30"; "\$369" was "\$339".

As amended, R.1981 d.46, effective February 5, 1981.

See: 13 N.J.R. 16(b), 13 N.J.R. 147(a).

(c)8: old text requiring 12-month prorating deleted; new text requiring prorating over the "stated term of the contract only" substituted therefor.

As amended, R.1981 d.263, effective July 9, 1981.

See: 13 N.J.R. 225(a), 13 N.J.R. 433(a).

(e)5i: deleted after "allotment"; "in excess of the amount paid by the household for such allotment."

As amended, R.1982 d.53, effective March 1, 1982.

See: 13 N.J.R. 879(a), 14 N.J.R. 235(d).

(f)4i: Deleted "of \$40 per month"; "\$408.50" was "\$360.00".

As amended, R.1982 d.98, effective April 5, 1982 (operative May 1, 1982).

See: 13 N.J.R. 930(a), 14 N.J.R. 345(a).

(e)4ii added and existing ii renumbered as iii.

(f)5 added.

As amended, R.1982 d.185, effective June 21, 1982.

See: 14 N.J.R. 270(a), 14 N.J.R. 659(b).

(e)4: added "Contributions . . . in-kind income"; (e)4ii: Deleted "these percentages . . . different amount".

As amended, R.1982 d.375, effective November 1, 1982.

See: 14 N.J.R. 893(b), 14 N.J.R. 1216(a).

Defined who may be considered a boarder.

As amended, R.1983 d.105, effective April 4, 1983.

See: 14 N.J.R. 894(a), 14 N.J.R. 550(a).

Maximum monthly assistance payment, for person in RHCF, increased from \$408.50 to \$430.20.

As amended, R.1983 d.328, effective July 25, 1983.

See: 15 N.J.R. 938(a), 15 N.J.R. 1378(a).

Originally adopted as an Emergency Readoption as R.1983 d.209, effective May 23, 1983, operative June 1, 1983.

At (e)5vii, references to other volunteers added to that of VISTA. At (e)5xi, energy assistance payments added. At (f)4v, maternity homes added. At (g)3, references to inpatient hospitalization added.

As amended, R.1984 d.111, effective April 2, 1984.

See: 16 N.J.R. 119(a), 16 N.J.R. 729(a).

Amount of \$430.20 replaced by "the rate approved by the New Jersey Dept. of the Treasury. . . ."

As amended, R.1984 d.403, effective September 17, 1984 (operative October 1, 1984).

See: 16 N.J.R. 683(a), 16 N.J.R. 2441(a).

Text in (f)4v, deleted and replaced with new text.

As amended, R.1984 d.507, effective November 5, 1984 (operative December 1, 1984).

See: 16 N.J.R. 2056(a), 16 N.J.R. 3032(a), 16 N.J.R. 3063(c).

Effective October 1, 1984, rate for General Assistance has been increased from \$461.97 to \$464.05.

Amended by R.1985 d.81, effective March 4, 1985.

See: 16 N.J.R. 3165(a), 17 N.J.R. 595(a).

Subsection (g) substantially amended.

Public Notice: General Assistance Rate has been increased from \$464.05 to \$475.05 monthly.

See: 17 N.J.R. 485(c).

Amended by R.1986 d.47, effective March 3, 1986.

See: 17 N.J.R. 2519(a), 18 N.J.R. 483(a).  
(g) substantially amended.  
Amended by R.1986 d.57, effective March 3, 1986 (operative April 1, 1986).

See: 17 N.J.R. 2849(a), 18 N.J.R. 482(a).  
(e)xii added.  
Public Notice: General Assistance Rate has been increased from \$475.05 to \$486.05 monthly.

See: 18 N.J.R. 712(b).  
Amended by R.1986 d.299, effective July 21, 1986 (operative August 1, 1986).

See: 18 N.J.R. 928(b), 18 N.J.R. 1464(a).  
(f)2vii added.  
Amended by R.1986 d.319, effective August 4, 1986.

See: 18 N.J.R. 1056(b), 18 N.J.R. 1595(b).  
(c)9 added.  
Correction: (f)4ii and (g)2i and ii omitted from text.

See: 19 N.J.R. 307(b).  
Public Notice: In accordance with N.J.A.C. 10:85-3.3(f)4i, the Department of Human Services announces that the rate to be paid for General Assistance recipients in Residential Health Care Facilities has been increased from \$486.05 to \$490.05 monthly. This change is effective January 1, 1987 and is the same in both the amount and effective date as the change in the rate for the same service paid to recipients under the Federal program of Supplemental Security Income.

See: 19 N.J.R. 570(c).  
Amended by R.1987 d.177, effective April 20, 1987.

See: 19 N.J.R. 32(b), 19 N.J.R. 645(b).  
(e)5xiii added.  
Amended by R.1988 d.425, effective September 6, 1988.

See: 20 N.J.R. 879(a), 20 N.J.R. 2292(c).  
Added travel costs to (f)1 and 3.  
Amended by R.1989 d.7, effective January 3, 1989.

See: 20 N.J.R. 2238(a), 21 N.J.R. 20(a).  
Deleted old (e)4 and substituted new; deleted text from (f)5 "See N.J.A.C. 10:85-3.3(e)4ii . . .".  
Amended by R.1989 d.138, effective March 20, 1989.

See: 20 N.J.R. 2688(b), 21 N.J.R. 765(a).  
Payment for the cost of drugs to otherwise eligible persons added to N.J.A.C. 10:85-3.3(g)1.  
Amended by Public Notice, effective July 3, 1989.

See: 21 N.J.R. 1914(b).  
Rate paid for General Assistance recipients in Residential Health Care Facilities increased from \$504.05 to \$518.05 monthly.  
Amended by R.1990 d.33, effective January 16, 1990.

See: 21 N.J.R. 3221(b), 22 N.J.R. 218(a).  
Stylistic changes.

Public Notice: In accordance with N.J.A.C. 10:85-3.3(f)4i, General Assistance Rate in Residential Health Care Facilities raised from \$536.05 to \$557.05 monthly.

See: 23 N.J.R. 911(d).  
Amended by R.1991 d.521, effective October 21, 1991 (operative November 1, 1991).

See: 23 N.J.R. 1741(a), 23 N.J.R. 3155(a).  
Text regarding chargeback deleted.

Amended by Public Notice: In accordance with N.J.A.C. 10:85-3.3(f)4i, General Assistance Rate in Residential Health Care Facilities increased from \$557.05 monthly to \$572.05 monthly, effective January 1, 1992, as consistent with the rate for the same services paid to recipients under the Federal Supplemental Security Income program.  
Amended by R.1992 d.260, effective June 15, 1992.

See: 24 N.J.R. 926(a), 24 N.J.R. 2263(a).  
Deleted text at (f)2ii, (f)4ii, and (f)4ii(2) regarding household size and determination of children age 18 or over living in the home of a parent/operator of a boarding home, who is over age 60.

See: 24 N.J.R. 1645(b).  
Amended by R.1992 d.503, effective December 21, 1992.

See: 24 N.J.R. 3075(a), 24 N.J.R. 4538(a).  
Payment for inpatient services deleted at (g)3 and 4; text on illegal aliens deleted at (b)1i; hospital payment reference deleted.  
Administrative Correction.

See: 26 N.J.R. 1658(a).  
Amended by R.1994 d.591, effective December 5, 1994.

See: 26 N.J.R. 2757(b), 26 N.J.R. 4765(b).  
Public Notice: General Assistance rate for Residential Health Care Facilities raised from \$596.05 to \$608.05 monthly.

See: 27 N.J.R. 1483(a).  
Public Notice: General assistance rate for Residential Health Care Facilities raised from \$608.05 to 620.05 monthly.

See: 28 N.J.R. 3675(b).  
Amended by R.1997 d.105, effective March 3, 1997.

See: 28 N.J.R. 3862(a), 29 N.J.R. 767(a).  
In (f)4iii, amended N.J.A.C. reference and substituted "nursing facilities" for "skilled nursing home and intermediate care facilities"; and in (g), substituted "regarding medical services" for "regarding provision of medical care".

#### Case Notes

Immediate need. *Faison v. Green*, 171 N.J.Super. 341, 345, 409 A.2d 282 (App. Div. 1979).

Income received from Federal bureau or agency to be applied in computing amount of grant. *Gilbert v. State*, 167 N.J.Super. 217, 400 A.2d 803 (App. Div. 1979).

Money for school-related expenses disregarded. *J.C. v. New Brunswick City Welfare Department*, 92 N.J.A.R.2d (DEA) 41.

Agency should have acted independently to verify financial eligibility. *A.S. v. Dumont Municipal Welfare Agency*, 92 N.J.A.R.2d (DEA) 30.

#### 10:85-3.4 Resources

(a) Definition: For purposes of this manual, resources are defined as real or personal property which is within the control of one or more of the individuals applying for General Assistance or to which he or she (they) may have a valid claim; and certain other benefits and contributions of support which may become available.

1. Resources must be reported in full to the agency and a determination made as to status as either exempt or potential.

i. Medical benefits must be utilized first before determining the amount of unpaid medical bills.

ii. No-fault auto insurance shall be utilized in the payment of medical expenses relative to auto accidents, hit and run accidents, and so forth.

2. No person shall be eligible for assistance within two years after having disposed of a resource for less than adequate consideration or after having abandoned a resource of value when such disposal or abandonment was made for the purpose of qualifying for assistance or of avoiding repayment of assistance. Any assistance granted by reason of nondisclosure during such two year period represents an overpayment and is to be processed accordingly.

i. There shall be an initial presumption, rebuttable, that the abandonment of any resource of value, exempt, or otherwise, or the disposal of any resource, exempt or otherwise, for less than adequate consideration, was made for the purpose of qualifying for assistance or of avoiding repayment of assistance.