State of New Jersey
DEPARTMENT OF HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES
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Governor

JAMES M. DAVY
Commissioner

ANN CLEMENCY KOHLER
Director

MEDICAID COMMUNICATION NO. 04-05 **DATE:** April 7, 2004

TO: County Board of Social Services Directors
NJ FamilyCare Liaisons
Statewide Eligibility Determination Agency
ISS Area Supervisors

SUBJECT: Increased Income Eligibility Standards; New Jersey Care...Special Medicaid Programs and NJ FamilyCare
N.J.A.C. 10:69
N.J.A.C. 10:72
N.J.A.C. 10:78
N.J.A.C. 10:79

This is to advise that the federal poverty level guidelines for 2004 were published in the February 13, 2004 issue of the Federal Register. Attached are the corresponding new income standards for the New Jersey Care...Special Medicaid Programs and NJ FamilyCare. These new standards are retroactively effective to January 1, 2004 for both programs.

The county board of social services (CBOSS) and the institutional services section (ISS) offices shall immediately review all cases that would otherwise have been terminated from the aged, blind or disabled segment of the New Jersey Care...Special Medicaid Programs as a result of the Social Security cost-of-living increase. No action is required for those cases that remain eligible under the new income standards. Any of the continued cases that are not eligible under the new standards shall be terminated effective May 1, 2004. Adverse action requirements must, of course, be met.

Because these standards are retroactively effective to January 1, 2004, the CBOSS and statewide eligibility determination agency shall also review all applicable New Jersey Care and NJ FamilyCare cases determined ineligible after January 2004 using the former standards. These cases should be reevaluated for eligibility under the new standards. It is important that any Plan A case found to be eligible shall be accreted to the eligibility file with an effective date of January 1, 2004, or the date of application, whichever is later.

Additionally, if you are aware of any current NJ FamilyCare Plan B case that may now qualify for Plan A coverage as a result of the increase in the FPL, you are asked to reevaluate eligibility for Plan A coverage, retroactive to January 2004, and to advise the beneficiary of the change in coverage and change in Medicaid Eligibility Identification Number, if necessary.

Questions regarding this communication should be referred to the Bureau of Eligibility Policy by calling (609) 588-2556.

Sincerely,

Ann Clemency Kohler
Director

KAP:Gg
Attachment
c: Clifton R. Lacy, M.D., Commissioner
Susan Reinhard, Deputy Commissioner
Department of Health and Senior Services

Jeanette Page-Hawkins, Director
Division of Family Development

Edward E. Cotton, Director
Division of Youth and Family Services

James W. Smith, Director
Division of Developmental Disabilities

2004 Income Standards for New Jersey Care and NJ FamilyCare

Family Size	AFDC Medicaid (July 16,1996) Plan A		Children/ Pregnant Women A Up to 100% of the Poverty Level		Children/ Pregnant Women A Parents I/D Up to 133% of the Poverty Level		Children B Parents D Up to 150% of the Poverty Level		Pregnant Women and Children Under the Age of 1 A Up to185% of the Poverty Level	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
1	$2,220	$185	$9,310	$776	$12,383	$1,032	$13,965	$1,164	$17,224	$1,436
2	4,428	369	12,490	1,041	16,612	1,385	18,735	1,562	23,107	1,926
3	5,316	443	15,670	1,306	20,842	1,737	23,505	1,959	28,990	2,416
4	6,084	507	18,850	1,571	25,071	2,090	28,275	2,357	34,873	2,907
5	6,804	567	22,030	1,836	29,300	2,442	33,045	2,754	40,756	3,397
6	7,488	624	25,210	2,101	33,530	2,795	37,815	3,152	46,639	3,887
7	8,124	677	28,390	2,366	37,759	3,147	42,585	3,549	52,522	4,377
8	8,736	728	31,570	2,631	41,989	3,499	47,355	3,947	58,405	4,868
Each Add.	600	50	3,180	265	4,230	353	4,770	398	5,883	491

Family Size	Pregnant Women A Children C Parents D Up to 200% of the Poverty Level		Children D Up to 250% of the Poverty Level		Children D Up to 300% of the Poverty Level		Children D Up to 350% of the Poverty Level	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
1	$18,620	$1,552	$23,275	$1,940	$27,930	$2,328	$32,585	$2,716
2	24,980	2,082	31,225	2,603	37,470	3,123	43,715	3,643
3	31,340	2,612	39,175	3,265	47,010	3,918	54,845	4,571
4	37,700	3,142	47,125	3,928	56,550	4,713	65,975	5,498
5	44,060	3,672	55,075	4,590	66,090	5,508	77,105	6,426
6	50,420	4,202	63,025	5,253	75,630	6,303	88,235	7,353
7	56,780	4,732	70,975	5,915	85,170	7,098	99,365	8,281
8	63,140	5,262	78,925	6,578	94,710	7,893	110,495	9,208
Each Add.	6,360	530	7,950	663	9,540	795	11,130	928

Adults/Couples without Dependent Children

NJ FamilyCare

Family Size	WFNJ/General Assistance Plan G		
	Annual	Monthly	Resources
1	$1,680	$140*	$2,000
2	$2,316	$193	$2,000
100% FPL Plan H			
1	$9,310	$776	
2	$12,490	$1,041	

*210/$289 for unemployable

New Jersey Care

Family Size	Aged, Blind, & Disabled 100% of Poverty Level Plan A		
	Annual	Monthly	Resources
1	$9,310	$776	$4,000
2	$12,120	$1,041	$6,000
NJ WorkAbility (250% FPL) Plan A			
1	$23,275	$1,940	$20,000
2	$31,225	$2,603	$30,000
Breast & Cervical (250% FPL) Plan A			
1	$23,275	$1,940	
2	$31,225	$2,603	