

State of New Jersey

DEPARTMENT OF HUMAN SERVICES DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES PO Box 712 Trenton, NJ 08625-0712

CAROLE JOHNSON Commissioner

JENNIFER LANGER JACOBS Assistant Commissioner

MEDICAID COMMUNICATION NO. 20-02

DATE: February 19, 2020

TO: NJ FamilyCare Eligibility Determining Agencies

SUBJECT: Income Eligibility Standards Effective January 1, 2020

The Federal Poverty Level (FPL) guidelines for 2020 were announced and posted online via the electronic version of the Federal Register on January 17, 2020. Attached is the new income standards chart for all NJ FamilyCare programs. These new standards are retroactively effective January 1, 2020 for all programs.

Eligibility determining agencies shall immediately review all cases that would otherwise have been terminated or denied as a result of any income increases. 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 no later than April 30, 2020. Adverse action requirements must be met.

It is important that any Plan A or Plan ABP cases found to be newly eligible shall be accreted to the eligibility file with an effective date of January 1, 2020, or the date of application, whichever is later. Additionally, any NJ FamilyCare Plan B cases that may now qualify for Plan A coverage also need to be eligible retroactive to January 1, 2020. Please be sure to advise the beneficiary of the change in coverage and change in Medicaid Eligibility Identification Number, when applicable.

If you have any questions regarding this Medicaid Communication, please refer them to the Division's Office of Eligibility field service staff member for your agency at 609-588-2556.

PHILIP D. MURPHY Governor

SHEILA Y. OLIVER Lt. Governor Page 2 of 2 Medicaid Communication 20-02

JLJ:jm

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Joshua Lichtblau, Director Medicaid Fraud Division Office of the State Comptroller

DMAHS INCOME STANDARDS EFFECTIVE JANUARY 1, 2020

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3 43,440 3,620 44,526 3,711 54,300 4,525 65,160 5,430 76,020 4 52,400 4,367 53,710 4,476 65,500 5,459 78,600 6,550 91,700 5 61,360 5,114 62,894 5,242 76,700 6,392 92,040 7,670 107,380 6 70,320 5,860 72,078 6,007 87,900 7,325 105,480 8,790 123,060 7 79,280 6,607 81,262 6,772 99,100 8,259 118,920 9,910 138,740	. ,			
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7 79,280 6,607 81,262 6,772 99,100 8,259 118,920 9,910 138,740	10,255			
	11,562 12,869			
+1 8,960 747 9,184 766 11,200 934 13,440 1,120 15,680	1,307	· · ·	1,326	
New Jersey Care Special		MLTSS		
	Amounts m	nay be adjusted	in July	
SSI - A 100% FPL** 120% FPL	Medicaid "C	Cap"	\$ 2,349	
		Maintenance	. ,	
Monthly Resource Monthly Resource Monthly Resource Monthly Resources	Allowance		\$ 2,113.75	
1 \$ 367 \$ 4,000 \$ 814.25 \$ 2,000 \$ 1,064 \$ 4,000 \$ 1,276 \$ 7,860	Anowante			
Spous	l Housing A	Allowance+	\$ 634.13	
2 434 6,000 1,200.36 3,000 1,437 6,000 1,724 11,800	-			
3 567 6,100 SLMB QI-1 U	Utility Allowance+ \$		\$ 548	
1 659 6 200 135% FPL			1.	
Maxim			\$ 893,000	
			ć <u>25 720</u>	
		Minimum	\$ 25,728	
1,940 11,800 Resc	ty Spouse	Maximum	\$ 128,640	

*5% MAGI Related Disregard

+ Amounts may be adjusted in July/October

** New Jersey Care...Special Medicaid Program Resource Limits Only Apply to Aged, Blind and Disabled Programs

Rev 2/2020