

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES CHRIS CHRISTIE P.O. Box 712 Governor Trenton, NJ 08625-0712

ELIZABETH CONNOLLY Acting Commissioner

> **MEGHAN DAVEY** Director

KIM GUADAGNO Lt. Governor

> **MEDICAID COMMUNICATION NO. 16-03** DATE: February 22, 2016

TO: County Welfare Agency (CWA) Directors

Statewide Eligibility Determination Agencies

Institutional Services Section (ISS) Area Supervisors

SUBJECT: Income Eligibility Standards Effective January 1, 2016

The Federal Poverty Level (FPL) guidelines for 2016 were published on January 25, 2016 online via the electronic version of the Federal Register and were announced on February 9, 2016 by the Centers for Medicare and Medicaid Services (CMS). Attached is the new income standards chart which is for all NJ FamilyCare programs. These new standards are retroactively effective January 1, 2016 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, 2016. Adverse action requirements must be met.

It is important that any Plan A case found to be newly eligible shall be accreted to the eligibility file with an effective date of January 1, 2016, 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, 2016. 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 for your agency at 609-588-2556.

MD:jm

c: Elizabeth Connolly, Acting Commissioner Department of Human Services

Dawn Apgar, Deputy Commissioner Department of Human Services

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Joseph Amoroso, Director Division of Disability Services

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Allison Blake, Commissioner Department of Children and Families

DMAHS INCOME STANDARDS EFFECTIVE JANUARY 1, 2016

							EITECTIVE 37(IV		·				
	Poverty Level		MAGI-AFDC Medicaid - A		Medicaid Special - A		Children's Medicaid- A 107% FPL		Single Adults &		Single Adults &		
НН									Parents - ABP		Parents - ABP		
									133% FPL		138% FPL*		
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	
1	\$ 11,880	\$ 990	\$ 2,776	\$ 233	\$ 6,108	\$ 509	\$ 12,712	\$ 1,060	\$ 15,801	\$ 1,317	\$ 16,395	\$ 1,367	
2	16,020	1,335	5,052	421	9,660	805	17,142	1,429	21,307	1,776	22,108	1,843	
3	20,160	1,680	6,096	508	11,892	991	21,572	1,798	26,813	2,235	27,821	2,319	
4	24,300	2,025	7,020	585	14,004	1,167	26,001	2,167	32,319	2,694	33,534	2,795	
5	28,440	2,370	7,896	658	16,068	1,339	30,431	2,536	37,826	3,153	39,248	3,271	
6	32,580	2,715	8,748	729	18,096	1,508	34,861	2,906	43,332	3,611	44,961	3,747	
7	36,730	3,061	9,540	795	20,076	1,673	39,302	3,276	48,851	4,071	50,688	4,224	
8	40,890	3,408	10,308	859	22,032	1,836	43,753	3,647	54,384	4,532	56,429	4,703	
+1	4,160 347		756 63		1,944	162	4,452	371	5,533	462	5,741	479	
	Children's Medicaid				CHIP Children - B		CHIP Children- C				Newborns and Pregnant		
НН			MCHIP - A		150% FPL		185% FPL		Pregnant Women		Women - A		
	142% FPL		147% FPL*						194% FPL - A		199% FPL*		
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	
1	\$ 16,870	\$1,406	\$ 17,464	\$1,456	\$ 17,820	\$ 1,485	\$ 21,978	\$1,832	\$ 23,048	\$ 1,921	\$ 23,642	\$ 1,971	
2	22,749	1,896	23,550	1,963	24,030	2,003	29,637	2,470	31,079	2,590	31,880	2,657	
3	28,628	2,386	29,636	2,470	30,240	2,520	37,296	3,108	39,111	3,260	40,119	3,344	
4	34,506	2,876	35,721	2,977	36,450	3,038	44,955	3,747	47,142	3,929	48,357	4,030	
5	40,385	3,366	41,807	3,484	42,660	3,555	52,614	4,385	55,174	4,598	56,596	4,717	
6	46,264	3,856	47,893	3,992	48,870	4,073	60,273	5,023	63,206	5,268	64,835	5,403	
7	52,157	4,347	53,994	4,500	55,095	4,592	67,951	5,663	71,257	5,939	73,093	6,092	
8	58,064	4,839	60,109	5,010	61,335	5,112	75,647	6,304	79,327	6,611	81,372	6,781	
+1	5,908	493	6,116	510	6,240	520	7,696	642	8,071	673	8,279	690	
	CHIP Pr	CHIP Pregnant				CHIP Children - D							
	Wome	n - A		regnant	NJ Workability - A		CHIP Children - D		CHIP Children - D		CHIP Children - D		
НН	CHIP Children - C 200% FPL		Women - A 205% FPL*		BCC - A 250% FPL		300% FPL		350% FPL		355% FPL*		
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	
1	\$ 23,760	\$ 1,980	\$ 24,354	\$ 2,030	\$ 29,700	\$ 2,475	\$ 35,640	\$ 2,970	\$ 41,580	\$ 3,465	\$ 42,174	\$ 3,515	
2	32,040	2,670	32,841	2,737	40,050	3,338	48,060	4,005	56,070	4,673	56,871	4,740	
3	40,320	3,360	41,328	3,444	50,400	4,200	60,480	5,040	70,560	5,880	71,568	5,964	
4	48,600	4,050	49,815	4,152	60,750	5,063	72,900	6,075	85,050	7,088	86,265	7,189	
5	56,880	4,740	58,302	4,859	71,100	5,925	85,320	7,110	99,540	8,295	100,962	8,414	
6	65,160	5,430	66,789	5,566	81,450	6,788	97,740	8,145	114,030	9,503	115,659	9,639	
7	73,460	6,122	75,297	6,275	91,825	7,653	110,190	9,183	128,555	10,713	130,392	10,866	
8	81,780	6,815	83,825	6,986	102,225	8,519	122,670	10,223	143,115	11,927	145,160	12,097	
+1	8,320	694	8,528	711	10,400	867	12,480	1,040	14,560	1,214	14,768	1,231	
	, , ,				New Jersey Care		, ,		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	Medically Needy		Medicaid Only/SSI - A		Special Medicaid		SLMB 120% FPL		PAAD		Community Spouse Maintenance Allowance		
нн													
	Monthly	Resource	Monthly	Pasauraa	Monthly	Resource	Annual	Resources		Annual	Ċ1	,991	
				Resource	·		Annual			Annual			
1	\$ 367	\$ 4,000	\$ 764.25	\$ 2,000	\$ 990	\$ 4,000	\$ 14,256	\$ 7,280	Single	\$26,575	· ·	Housing	
2	434	6,000	1,125.36	3,000	1,335	6,000	19,224	10,930	Couple	\$32,582	Allowance		
3	567 6,100 659 6,200					Long Term Services &		SLMB QI-1		Sonior Cold		\$597	
4					Sup	ports	135% FPL		Senior Gold		Community Spouse		
5		742 6,300 Medicaid			Annual	Resources	Single \$36,575		Resources				
6					"Сар"	Resources	\$ 16,038			\$42,582	Minimum	\$ 23,844	
0	825	6,400			·	40.000		,	Couple	<i>ې</i> 42,382			
					\$2,199	\$2,000	21,627	10,930			Maximum	\$ 119,220	

^{*5%} MAGI Related Disregard

^{**} New Jersey Care...Special Medicaid Program Resource Limits Only Apply to Aged, Blind and Disabled Programs $Rev\ 2/2016$