



State of New Jersey

DEPARTMENT OF HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

P.O. Box 712
Trenton, NJ 08625-0712

CHRIS CHRISTIE
Governor

JENNIFER VELEZ
Commissioner

KIM GUADAGNO
Lt. Governor

VALERIE HARR
Director

MEDICAID COMMUNICATION NO. 15-03

DATE: March 2, 2015

TO: County Welfare Agency (CWA) Directors
NJ FamilyCare Liaisons
Medicaid Only Liaisons
Statewide Eligibility Determination Agency
Institutional Services Section (ISS) Area Supervisors
Medicare Savings Program (MSP)/SLMB/QI Supervisors

SUBJECT: Increased Income Eligibility Standards Effective January 1, 2015


The Federal Poverty Level (FPL) guidelines for 2015 were announced on January 21, 2015 by the Centers for Medicare and Medicaid Services (CMS) and made available online via the electronic version of the Federal Register. Attached is the new income standards chart which is for all Medicaid and NJ FamilyCare programs. It has a different format than previous charts because of the Medicaid expansion. These new standards are retroactively effective January 1, 2015 for all programs.

All eligibility determining agencies shall immediately review all cases that would otherwise have been terminated 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, 2015. 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, 2015, 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, 2015. 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 Policy field service staff for your agency at 609-588-2556.

Sincerely,

A handwritten signature in blue ink that reads "Valerie Harr".

Valerie Harr
Director

VH:s

c: Jennifer Velez, Commissioner
Department of Human Services

Dawn Apgar, Deputy Commissioner
Division of Developmental Disabilities

Lowell Arye, Deputy Commissioner
Aging and Community Services

Lynn Kovich, Assistant Commissioner
Division of Mental Health and Addiction Services

Joseph Amoroso, Director
Division of Disability Services

Jeanette Page-Hawkins, Director
Division of Family Development

Allison Blake, Commissioner
Department of Children and Families

Mary E. O'Dowd, Commissioner
Department of Health

DMAHS INCOME STANDARDS EFFECTIVE JANUARY 1, 2015

HH	100% of the Federal Poverty Level		MAGI-AFDC Medicaid - A		Medicaid Special - A		Children's Medicaid- A 107% FPL		Single Adults & Parents- ABP 133% FPL		Single Adults & Parents- ABP 138% FPL*	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
1	\$ 11,770	\$ 981	\$ 2,776	\$ 233	\$ 6,108	\$ 509	\$ 12,594	\$ 1,050	\$ 15,655	\$ 1,305	\$ 16,243	\$ 1,354
2	15,930	1,328	5,052	421	9,660	805	17,046	1,421	21,187	1,766	21,984	1,832
3	20,090	1,675	6,096	508	11,892	991	21,497	1,792	26,720	2,227	27,725	2,311
4	24,250	2,021	7,020	585	14,004	1,167	25,948	2,163	32,253	2,688	33,465	2,789
5	28,410	2,368	7,896	658	16,068	1,339	30,399	2,534	37,786	3,149	39,206	3,268
6	32,570	2,715	8,748	729	18,096	1,508	34,850	2,905	43,319	3,610	44,947	3,746
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
HH	Children's Medicaid- MCHIP - A 142% FPL		Children's Medicaid MCHIP - A 147% FPL*		CHIP Children - B 150% FPL		CHIP Children- C 185% FPL		Newborns & Pregnant Women - A		Newborns and Pregnant Women - A 199% FPL*	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
1	\$ 16,714	\$1,393	\$ 17,302	\$1,442	\$ 17,655	\$ 1,472	\$ 21,775	\$1,815	\$ 22,834	\$ 1,903	\$ 23,423	\$ 1,952
2	22,621	1,886	23,418	1,952	23,895	1,992	29,471	2,456	30,905	2,576	31,701	2,642
3	28,528	2,378	29,533	2,462	30,135	2,512	37,167	3,098	38,975	3,248	39,980	3,332
4	34,435	2,870	35,648	2,971	36,375	3,032	44,863	3,739	47,045	3,921	48,258	4,022
5	40,343	3,362	41,763	3,481	42,615	3,552	52,559	4,380	55,116	4,593	56,536	4,712
6	46,250	3,855	47,878	3,990	48,855	4,072	60,255	5,022	63,186	5,266	64,815	5,402
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
HH	CHIP Pregnant Women - A CHIP Children - C 200% FPL		CHIP Pregnant Women - A 205% FPL*		CHIP Children - D NJ Workability - A BCC - A 250% FPL		CHIP Children - D 300% FPL		CHIP Children - D 350% FPL		CHIP Children - D 355% FPL*	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
1	\$ 23,540	\$ 1,962	\$ 24,129	\$ 2,011	\$ 29,425	\$ 2,453	\$ 35,310	\$ 2,943	\$ 41,195	\$ 3,433	\$ 41,784	\$ 3,482
2	31,860	2,655	32,657	2,722	39,825	3,319	47,790	3,983	55,755	4,647	56,552	4,713
3	40,180	3,349	41,185	3,433	50,225	4,186	60,270	5,023	70,315	5,860	71,320	5,944
4	48,500	4,042	49,713	4,143	60,625	5,053	72,750	6,063	84,875	7,073	86,088	7,174
5	56,820	4,735	58,241	4,854	71,025	5,919	85,230	7,103	99,435	8,287	100,856	8,405
6	65,140	5,429	66,769	5,565	81,425	6,786	97,710	8,143	113,995	9,500	115,624	9,636
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
HH	Medically Needy		Medicaid Only/SSI - A		New Jersey Care... Special Medicaid Programs - A 100% FPL**		SLMB 120% FPL		PAAD		Community Spouse Maintenance Allowance	
	Monthly	Resource	Monthly	Resource	Monthly	Resource	Annual	Resources		Annual		
1	\$ 367	\$ 4,000	\$ 764.25	\$ 2,000	\$ 981	\$ 4,000	\$ 14,124	\$ 7,280	Single	\$26,575		Spousal Housing Allowance
2	434	6,000	1,125.36	3,000	1,328	6,000	19,116	10,930	Couple	\$32,582		
3	567	6,100			Long Term Care		SLMB QI-1 135% FPL		Senior Gold			\$ 589.88
4	659	6,200										Community Spouse Resources
5	742	6,300			Medicaid "Cap"	\$ 2,199	Annual \$ 15,890	Resources \$ 7,280	Single	\$36,575		
6	825	6,400					21,506	10,930	Couple	\$42,582	Minimum	\$ 23,844
											Maximum	119,220

*5% MAGI Related Disregard

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

Rev 2/2015