



State of New Jersey

DEPARTMENT OF HUMAN SERVICES

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

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TRENTON, NJ 08625-0712

PHILIP D. MURPHY
Governor

SHEILA Y. OLIVER
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CAROLE JOHNSON
Acting Commissioner

MEGHAN DAVEY
Director

MEDICAID COMMUNICATION NO. 18-01

DATE: February 1, 2018

TO: NJ FamilyCare Eligibility Determining Agencies

SUBJECT: Income Eligibility Standards Effective January 1, 2018

The Federal Poverty Level (FPL) guidelines for 2018 were announced on January 13, 2018 and made available online via the electronic version of the Federal Register. Attached is the new income standards chart which is for all NJ FamilyCare programs. These new standards are retroactively effective January 1, 2018 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, 2018. 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, 2018, 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, 2018. 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.

MD:jm

c: Carole Johnson, Acting Commissioner
Department of Human Services

Jonathan Seifried, Acting Assistant Commissioner
Division of Developmental Disabilities

Harry Pizutelli, Acting Director
Division of Disability Services

Natasha Johnson, Director
Division of Family Development

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Department of Health

Valerie Mielke, Assistant Commissioner
Division of Mental Health and Addiction Services

Christine Norbut Beyer, Acting Commissioner
Department of Children and Families

DMAHS INCOME STANDARDS EFFECTIVE JANUARY 1, 2018

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	\$ 12,140	\$ 1,012	\$ 2,776	\$ 233	\$ 6,108	\$ 509	\$ 12,990	\$ 1,083	\$ 16,147	\$ 1,346	\$ 16,754	\$ 1,397
2	16,460	1,372	5,052	421	9,660	805	17,613	1,468	21,892	1,825	22,715	1,893
3	20,780	1,732	6,096	508	11,892	991	22,235	1,853	27,638	2,304	28,677	2,390
4	25,100	2,092	7,020	585	14,004	1,167	26,857	2,239	33,383	2,782	34,638	2,887
5	29,420	2,452	7,896	658	16,068	1,339	31,480	2,624	39,129	3,261	40,600	3,384
6	33,740	2,812	8,748	729	18,096	1,508	36,102	3,009	44,875	3,740	46,562	3,881
7	38,060	3,172	9,540	795	20,076	1,673	40,725	3,394	50,620	4,219	52,523	4,377
8	42,380	3,532	10,308	859	22,032	1,836	45,347	3,779	56,366	4,698	58,485	4,874
+1	4,320	360	756	63	1,944	162	4,623	386	5,746	479	5,962	497
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 194% FPL		Newborns and Pregnant Women - A 199% FPL*	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
1	\$ 17,239	\$ 1,437	\$ 17,846	\$ 1,488	\$ 18,210	\$ 1,518	\$ 22,459	\$ 1,872	\$ 23,552	\$ 1,963	\$ 24,159	\$ 2,014
2	23,374	1,948	24,197	2,017	24,690	2,058	30,451	2,538	31,933	2,662	32,756	2,730
3	29,508	2,459	30,547	2,546	31,170	2,598	38,443	3,204	40,314	3,360	41,353	3,447
4	35,642	2,971	36,897	3,075	37,650	3,138	46,435	3,870	48,694	4,058	49,949	4,163
5	41,777	3,482	43,248	3,604	44,130	3,678	54,427	4,536	57,075	4,757	58,546	4,879
6	47,911	3,993	49,598	4,134	50,610	4,218	62,419	5,202	65,456	5,455	67,143	5,596
7	54,046	4,504	55,949	4,663	57,090	4,758	70,411	5,868	73,837	6,154	75,740	6,312
8	60,180	5,015	62,299	5,192	63,570	5,298	78,403	6,534	82,218	6,852	84,337	7,029
+1	6,135	512	6,351	530	6,480	540	7,992	666	8,381	699	8,597	717
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	\$ 24,280	\$ 2,024	\$ 24,887	\$ 2,074	\$ 30,350	\$ 2,530	\$ 36,420	\$ 3,035	\$ 42,490	\$ 3,541	\$ 43,097	\$ 3,592
2	32,920	2,744	33,743	2,812	41,150	3,430	49,380	4,115	57,610	4,801	58,433	4,870
3	41,560	3,464	42,599	3,550	51,950	4,330	62,340	5,195	72,730	6,061	73,769	6,148
4	50,200	4,184	51,455	4,288	62,750	5,230	75,300	6,275	87,850	7,321	89,105	7,426
5	58,840	4,904	60,311	5,026	73,550	6,130	88,260	7,355	102,970	8,581	104,441	8,704
6	67,480	5,624	69,167	5,764	84,350	7,030	101,220	8,435	118,090	9,841	119,777	9,982
7	76,120	6,344	78,023	6,502	95,150	7,930	114,180	9,515	133,210	11,101	135,113	11,260
8	84,760	7,064	86,879	7,240	105,950	8,830	127,140	10,595	148,330	12,361	150,449	12,538
+1	8,640	720	8,856	738	10,800	900	12,960	1,080	15,120	1,260	15,336	1,278
HH	Medically Needy		Medicaid Only/ SSI - A		New Jersey Care... Special Medicaid Programs - A 100% FPL**		SLMB 120% FPL		MLTSS + Amounts may be adjusted in July			
	Monthly	Resource	Monthly	Resource	Monthly	Resource	Annual	Resources	Medicaid "Cap"		\$ 2,250	
1	\$ 367	\$ 4,000	\$ 781.25	\$ 2,000	\$ 1,012	\$ 4,000	\$ 14,568	\$ 7,560	Community Spouse Maintenance Allowance+		\$ 2,030	
2	434	6,000	1,150.36	3,000	1,372	6,000	19,752	11,340	Spousal Housing Allowance+		\$ 609	
3	567	6,100					SLMB QI-1 135% FPL		Utility Allowance+		\$ 514	
4	659	6,200							Maximum Home Equity Limit		\$ 858,000	
5	742	6,300					Annual	Resources	Community Spouse Resources	Minimum	\$ 24,720	
6	825	6,400					\$ 16,389	\$ 7,560		Maximum	\$ 123,600	
							22,221	11,340				

*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