

New Jersey Medicaid Eligibility

Division of Medical Assistance and Health Services

March 2013

Elena M. Josephick
 Assistant Division Director
 Office of Eligibility Policy
 and County Operations

Applying for Medicaid

- Before you apply for Community Medicaid, please call your local County Welfare Agency (CWA)/Board of Social Services (BSS) for an appointment. To view or print a list of County Welfare Agencies (Boards of Social Services), please visit:
<http://www.state.nj.us/humanservices/dfd/programs/njsnap/cwa/index.html>
- When you apply for Medicaid you will be asked to provide personal papers that will prove who you are, where you live, what you own, how much money you receive each month, where it comes from and how much you spend on living expenses. The more information you are able to bring the better.
- On the day of the appointment, please provide your worker with all necessary documents to ensure accurate processing of your application.
- Programs available to you in the community are Medicaid Only and New Jersey Care...Special Medicaid Programs, as well as NJ Workability.

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

Financial Eligibility

Medicaid Only


- Maximum Monthly Gross Income of \$741.25
- Resources at or below \$2,000

New Jersey Care

Special Medicaid Program - Aged, Blind and Disabled

- Income less than or equal to 100% of the federal poverty level
- For 2013, maximum gross income is \$958
- Resources at or below \$4,000


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


 **Eligibility for Disabled Adult Children**

An individual who was receiving Supplemental Security Income (SSI) benefits and who meets the following:


- Is at least 18 years of age;
- Has blindness or a disability which began before the age of 22;
- Has been receiving Supplemental Security Income (SSI) based on blindness or disability; and
- Has lost Supplemental Security Income (SSI) due to the receipt of Social Security benefits on a parent's record due to the retirement, death or disability of a parent.


* If the person meets all the above criteria, she/he may qualify as a Disabled Adult Child (DAC)

 STATE OF NEW JERSEY
DEPARTMENT OF HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE & HEALTH SERVICES

 **Disabled Adult Children (DAC)**

- **Disabled Adult Child (DAC) are a protected population**
- **Designation comes from the Social Security Administration**
- **The County Welfare Agency does not count the increased parent benefit amount**
- **Eligibility for Medicaid will continue as long as the person is determined blind or disabled. However, if the person receives income from another source or exceeds the resource limits, they may become ineligible for Medicaid coverage.**


 STATE OF NEW JERSEY
DEPARTMENT OF HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE & HEALTH SERVICES

 **Disabled Adult Children (DAC)**

The Social Security Administration website may be used to check information and to obtain award letters.

Personal information may be accessed by going to the My Social Security website.

<http://www.ssa.gov/myaccount/>

 STATE OF NEW JERSEY
DEPARTMENT OF HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE & HEALTH SERVICES

Documents to Provide

Who are you?

- You will be asked to show proof of your identity, age, citizenship and marital status.
- Please provide one document from each column.

Identity	Age	Citizenship	Marital Status
<ul style="list-style-type: none"> - U.S. Passport - Driver's License - State Issued ID - Voter Registration - Work Registration ID - Work or School ID - Clinical/Medical Card - Medicare Card (serves as proof of citizenship) 	<ul style="list-style-type: none"> - U.S. Passport - Birth Certificate - Driver's License - Baptismal Certificate 	<ul style="list-style-type: none"> - U.S. Passport - Birth Certificate - Naturalization Papers - Alien Registration Card 	<ul style="list-style-type: none"> - Marriage License - Divorce Decree - Death Certificate - Separation Papers

Be aware that some documents will give proof for more than one category; a U.S. Passport will prove your identity, age and citizenship

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

Documents to Provide

Where do you live?

- Any of the following documents will provide proof of New Jersey residency:

- Copy of Deed to Home
- Apartment Lease
- New Jersey Driver's License
- Rent Receipt
- Current Utility Bill
- Statement from Landlord

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

Documents to Provide

What do you own?

Many people do not realize how much they own. Ownership is not limited to homes and automobiles. It can include cash values of life insurance policies, trust fund accounts, burial plots and many other things. In order to present the clearest picture of your financial situation, please bring copies of any of the following items:

<ul style="list-style-type: none"> - Property Tax Statements - All Life Insurance Policies - Pre-Paid Funeral Arrangements - Special Needs Trusts - Christmas/Vacation Club - Automobile - Annuities - 401(k)/403(b) Retirement Accounts, Keogh Accounts 	<ul style="list-style-type: none"> - IRAs - Stocks or Bonds - Certificates of Deposit - Deed to Burial Plots - Trusts or Other Holding Instruments - Registrations - Other Vehicles
---	--

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

Excluded Resources

- Life Insurance policies that do not exceed resource limit for the cash surrender value
- Burial spaces
- Burial accounts not to exceed \$1,500
- Funds assigned to an irrevocable funeral trust
- Funds assigned to a special needs trust
- Anything deemed not accessible through no fault of the individual
- Excluded resources must be re-evaluated at every Medicaid redetermination for accessibility

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

Income

How much do you make?

The next area that you will be asked to provide documentation for is your monthly income. The income can be earned, such as receiving a pay check, or unearned, such as receiving social security benefits. Listed below are some examples of documents that can prove how much money you receive each month and its source.

- Social Security Verification
- Most Recent Pay Stubs
- Income Statement from Employer
- Support/Alimony Payments
- Unemployment Verification
- Temporary Disability Verification
- Worker's Compensation Verification

- Interest and dividends count as income
- In kind support will be assessed if you do not pay fair market value for room and board expenses

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

Authorized Agents

Parents can elect to be **Authorized Agents** on behalf of their children. Please provide any documents showing that you have a designated **Guardianship or Power of Attorney** . You may be asked to provide additional information to ensure that Medicaid has the most complete understanding of your situation as possible.

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

NJ WorkAbility

- Must meet the same criteria as New Jersey Care... Special Medicaid Programs
- Must be between the ages of 16-64
- Unearned income received under the applicant's own account is disregarded
- Can earn up to \$4,918 monthly gross income
- Individuals can have less than \$20,000 in resources
- IRA/401K plans are not counted

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

Check List for Community Medicaid	
Information Required	One of the following documents should be provided as verification
Proof of Age	<input type="checkbox"/> US Passport <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Special Needs Trusts <input type="checkbox"/> Driver's License <input type="checkbox"/> Other _____
Proof of Citizenship	<input type="checkbox"/> US Passport <input type="checkbox"/> Birth Certificate <input type="checkbox"/> Naturalization Papers <input type="checkbox"/> Alien Registration Card <input type="checkbox"/> Voter's Registration Card <input type="checkbox"/> Medicare Card <input type="checkbox"/> Other _____
Marital Status	<input type="checkbox"/> Marriage Certificate <input type="checkbox"/> Separation Papers <input type="checkbox"/> Divorce Decree <input type="checkbox"/> Spouse's Death Certificate <input type="checkbox"/> Other _____
To accurately assess income information and financial resources, copies of all that is applicable must be provided	
Income Verification <small>When applicable, please provide documentation showing designation of POWER OF ATTORNEY or GUARDIANSHIP or a THIRD PARTY SIGNATOR who has signed an Authorized Representative form.</small>	<input type="checkbox"/> Most recent paystubs <input type="checkbox"/> Temporary Disability Award Notification <input type="checkbox"/> Social Security Award Notification <input type="checkbox"/> Railroad Retirement Notification <input type="checkbox"/> Support/Alimony Checks or Court Order <input type="checkbox"/> Pension Checks <input type="checkbox"/> Unemployment Notification <input type="checkbox"/> Workers' Comp Notification <input type="checkbox"/> Other _____
* This is not a complete list, but rather an itemization of the most common types of receivable income. Please keep in mind, the importance of providing all sources of income.	
Resource Verification	<input type="checkbox"/> Checking Acct Statements <input type="checkbox"/> Burial Plot Information <input type="checkbox"/> Savings Acct Statements <input type="checkbox"/> Special Needs Trusts <input type="checkbox"/> Certification of Deposit <input type="checkbox"/> Funds Set Aside for Burial <input type="checkbox"/> Amount of Cash on Hand <input type="checkbox"/> Life Insurance Policies with Cash Value Statement <input type="checkbox"/> IRA, 401K, 403B, Keogh Accounts <input type="checkbox"/> Trusts or other financial instruments <input type="checkbox"/> Money Market Accounts Mortgages <input type="checkbox"/> Prepaid Funeral Contracts <input type="checkbox"/> Christmas/Vacation Clubs <input type="checkbox"/> Other _____

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

NOTE: All applicants should provide their Social Security Card and Medicare Card
