



**State of New Jersey**

DEPARTMENT OF HUMAN SERVICES  
DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

P.O. Box 712  
Trenton, NJ 08625-0712  
Telephone 1-800-356-1561

JON S. CORZINE  
*Governor*

KEVIN M. RYAN  
*Acting Commissioner*

ANN CLEMENCY KOHLER  
*Director*

**MEDICAID COMMUNICATION NO. 06-03      DATE: February 15, 2006**

**TO:** County Board of Social Services Directors  
NJ FamilyCare Liaisons  
Statewide Eligibility Determination Agency  
ISS Area Supervisors

**SUBJECT:** Increased Income Eligibility Standards; New Jersey  
Care...Special Medicaid Programs and NJ FamilyCare  
N.J.A.C. 10:69  
N.J.A.C. 10:72  
N.J.A.C. 10:78  
N.J.A.C. 10:79

This is to advise that the federal poverty level guidelines for 2006 were published in the January 24, 2006 issue of the Federal Register. Attached are the corresponding new income standards for the New Jersey Care...Special Medicaid Programs and NJ FamilyCare. These new standards are retroactively effective to January 1, 2006 for both programs.

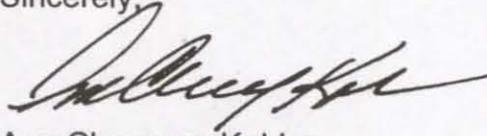
The county board of social services (CBOSS) and the institutional services section (ISS) offices shall immediately review all cases that would otherwise have been terminated from the aged, blind or disabled segment of the New Jersey Care...Special Medicaid Programs as a result of the Social Security cost-of-living increase. 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 effective May 1, 2006. Adverse action requirements must, of course, be met.

Because these standards are retroactively effective to January 1, 2006, the CBOSS and statewide eligibility determination agency shall also review all applicable New Jersey Care and NJ FamilyCare cases determined ineligible after January 2006 using the former standards. These cases should be reevaluated for eligibility under the new standards. It is important that any Plan A case found to be eligible shall be accreted to the eligibility file with an effective date of January 1, 2006, or the date of application, whichever is later.

Additionally, if you are aware of any current NJ FamilyCare Plan B case that may now qualify for Plan A coverage as a result of the increase in the FPL, you are asked to reevaluate eligibility for Plan A coverage, retroactive to January 2006, and to advise the beneficiary of the change in coverage and change in Medicaid Eligibility Identification Number, if necessary.

Questions regarding this communication should be referred to the Office of Policy Development or appropriate field staff by calling (609) 588-2556.

Sincerely,



Ann Clemency Kohler  
Director

ACK:Ff  
Attachment

c: Fred M. Jacobs, M.D., J.D., Commissioner  
Kathleen M. Mason, Assistant Commissioner  
Department of Health and Senior Services

Jeanette Page-Hawkins, Director  
Division of Family Development

Carol Grant, Director  
Division of Developmental Disabilities

## 2006 Income Standards for New Jersey Care and NJ FamilyCare

Family Size	AFDC Medicaid (July 16, 1996) Plan A		Children/Pregnant Women A Up to 100% of the Poverty Level		Children/Pregnant Women A Parents I/D Up to 133% of the Poverty Level		Children B Parents D Up to 150% of the Poverty Level		Pregnant Women and Children Under the Age of 1 A Up to 185% of the Poverty Level	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
1	\$2,220	\$185	\$9,800	\$817	\$13,034	\$1,087	\$14,700	\$1,225	\$18,130	\$1,511
2	4,428	369	13,200	1,100	17,556	1,463	19,800	1,650	24,420	2,035
3	5,316	443	16,600	1,384	22,078	1,840	24,900	2,075	30,710	2,560
4	6,084	507	20,000	1,667	26,600	2,217	30,000	2,500	37,000	3,084
5	6,804	567	23,400	1,950	31,122	2,594	35,100	2,925	43,290	3,608
6	7,488	624	26,800	2,234	35,644	2,971	40,200	3,350	49,580	4,132
7	8,124	677	30,000	2,517	40,166	3,348	45,300	3,775	55,870	4,656
8	8,736	728	33,600	2,800	44,688	3,724	50,400	4,200	62,160	5,180
Each Add.	600	50	3,400	284	4,522	377	5,100	425	6,290	525

Family Size	Pregnant Women A Children C Parents D Up to 200% of the Poverty Level		Children D Up to 250% of the Poverty Level		Children D Up to 300% of the Poverty Level		Children D Up to 350% of the Poverty Level	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
1	\$19,600	\$1,634	\$24,500	\$2,042	\$29,400	\$2,450	\$34,300	\$2,859
2	26,400	2,200	33,000	2,750	39,600	3,300	46,200	3,850
3	33,200	2,767	41,500	3,459	49,800	4,150	58,100	4,842
4	40,000	3,334	50,000	4,167	60,000	5,000	70,000	5,834
5	46,800	3,900	58,500	4,875	70,200	5,850	81,900	6,825
6	53,600	4,467	67,700	5,584	80,400	6,700	93,800	7,817
7	60,400	5,034	75,500	6,292	90,600	7,550	105,700	8,809
8	67,200	5,600	84,000	7,000	100,800	8,400	117,600	9,800
Each Add.	6,800	567	8,500	709	10,200	850	11,900	992

### Adults/Couples without Dependent Children

#### NJ FamilyCare

Family Size	WFNJ/General Assistance Plan G		
	Annual	Monthly	Resources
1	\$1,680	\$140*	\$2,000
2	2,316	193	2,000
100% FPL Plan H			
1	\$ 9,800	\$817	
2	13,200	1,100	

\*210/\$289 for unemployable

#### New Jersey Care

Family Size	Aged, Blind, & Disabled 100% of Poverty Level Plan A		
	Annual	Monthly	Resources
1	\$9,800	\$817	\$4,000
2	13,200	1,100	6,000
NJ WorkAbility (250% FPL) Plan A			
1	\$24,500	\$2,042	\$20,000
2	33,000	2,750	30,000
Breast & Cervical (250% FPL) Plan A			
1	\$24,500	\$2,042	
2	33,000	2,750	