



State of New Jersey

DEPARTMENT OF HUMAN SERVICES

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

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Assistant Commissioner

MEDICAID COMMUNICATION NO. 20-02

DATE: February 19, 2020

TO: NJ FamilyCare Eligibility Determining Agencies

SUBJECT: Income Eligibility Standards Effective January 1, 2020

The Federal Poverty Level (FPL) guidelines for 2020 were announced and posted online via the electronic version of the Federal Register on January 17, 2020. Attached is the new income standards chart for all NJ FamilyCare programs. These new standards are retroactively effective January 1, 2020 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, 2020. Adverse action requirements must be met.

It is important that any Plan A or Plan ABP cases found to be newly eligible shall be accreted to the eligibility file with an effective date of January 1, 2020, 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, 2020. 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.

JLJ:jm

c: Carole Johnson, Commissioner
Department of Human Services

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DMAHS INCOME STANDARDS EFFECTIVE JANUARY 1, 2020

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	\$ 12,760	\$ 1,064	\$ 2,776	\$ 233	\$ 6,108	\$ 509	\$ 13,654	\$ 1,138	\$ 16,971	\$ 1,415	\$ 17,609	\$ 1,468
2	17,240	1,437	5,052	421	9,660	805	18,447	1,538	22,930	1,911	23,792	1,983
3	21,720	1,810	6,096	508	11,892	991	23,241	1,937	28,888	2,408	29,974	2,498
4	26,200	2,184	7,020	585	14,004	1,167	28,034	2,337	34,846	2,904	36,156	3,013
5	30,680	2,557	7,896	658	16,068	1,339	32,828	2,736	40,805	3,401	42,339	3,529
6	35,160	2,930	8,748	729	18,096	1,508	37,622	3,136	46,763	3,897	48,521	4,044
7	39,640	3,304	9,540	795	20,076	1,673	42,415	3,535	52,722	4,394	54,704	4,559
8	44,120	3,677	10,308	859	22,032	1,836	47,209	3,935	58,680	4,890	60,886	5,074
+1	4,480	374	756	63	1,944	162	4,794	400	5,959	497	6,183	516
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	\$ 18,120	\$1,510	\$ 18,758	\$1,564	\$ 19,140	\$ 1,595	\$ 23,606	\$1,968	\$ 24,755	\$ 2,063	\$ 25,393	\$ 2,117
2	24,481	2,041	25,343	2,112	25,860	2,155	31,894	2,658	33,446	2,788	34,308	2,859
3	30,843	2,571	31,929	2,661	32,580	2,715	40,182	3,349	42,137	3,512	43,223	3,602
4	37,204	3,101	38,514	3,210	39,300	3,275	48,470	4,040	50,828	4,236	52,138	4,345
5	43,566	3,631	45,100	3,759	46,020	3,835	56,758	4,730	59,520	4,960	61,054	5,088
6	49,928	4,161	51,686	4,308	52,740	4,395	65,046	5,421	68,211	5,685	69,969	5,831
7	56,289	4,691	58,271	4,856	59,460	4,955	73,334	6,112	76,902	6,409	78,884	6,574
8	62,651	5,221	64,857	5,405	66,180	5,515	81,622	6,802	85,593	7,133	87,799	7,317
+1	6,362	531	6,586	549	6,720	560	8,288	691	8,692	725	8,916	743
HH	CHIP Pregnant Women - A Plan First - Family Planning CHIP Children - C 200% FPL		CHIP Pregnant Women - A Plan First - Family Planning 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	\$ 25,520	\$ 2,127	\$ 26,158	\$ 2,180	\$ 31,900	\$ 2,659	\$ 38,280	\$ 3,190	\$ 44,660	\$ 3,722	\$ 45,298	\$ 3,775
2	34,480	2,874	35,342	2,946	43,100	3,592	51,720	4,310	60,340	5,029	61,202	5,101
3	43,440	3,620	44,526	3,711	54,300	4,525	65,160	5,430	76,020	6,335	77,106	6,426
4	52,400	4,367	53,710	4,476	65,500	5,459	78,600	6,550	91,700	7,642	93,010	7,751
5	61,360	5,114	62,894	5,242	76,700	6,392	92,040	7,670	107,380	8,949	108,914	9,077
6	70,320	5,860	72,078	6,007	87,900	7,325	105,480	8,790	123,060	10,255	124,818	10,402
7	79,280	6,607	81,262	6,772	99,100	8,259	118,920	9,910	138,740	11,562	140,722	11,727
8	88,240	7,354	90,446	7,538	110,300	9,192	132,360	11,030	154,420	12,869	156,626	13,053
+1	8,960	747	9,184	766	11,200	934	13,440	1,120	15,680	1,307	15,904	1,326
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	Monthly	Resources	Medicaid "Cap"		\$	2,349
1	\$ 367	\$ 4,000	\$ 814.25	\$ 2,000	\$ 1,064	\$ 4,000	\$ 1,276	\$ 7,860	Community Spouse Maintenance Allowance+		\$	2,113.75
2	434	6,000	1,200.36	3,000	1,437	6,000	1,724	11,800	Spousal Housing Allowance+		\$	634.13
3	567	6,100							Utility Allowance+		\$	548
4	659	6,200							Maximum Home Equity Limit		\$	893,000
5	742	6,300							Community Spouse Resources		Minimum	\$ 25,728
6	825	6,400							Community Spouse Resources		Maximum	\$ 128,640
								1,940	11,800			

*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

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