



# Medicaid Eligibility Basics For Adults

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ADVANCING JUSTICE. ADVOCATING INCLUSION.



# Presenter



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# Disability Rights New Jersey

- We are NJ's designated protection and advocacy agency:
  - Investigate reports of abuse and neglect
  - Monitor institutions/providers to ensure the protection of rights
  - Represent clients with disabilities in legal matters
  - Provide information, referral, and technical assistance
  - Engage in outreach, training, education of self-advocates+
- Our mission is to preserve and advance the human, civil, and legal rights of persons with disabilities.

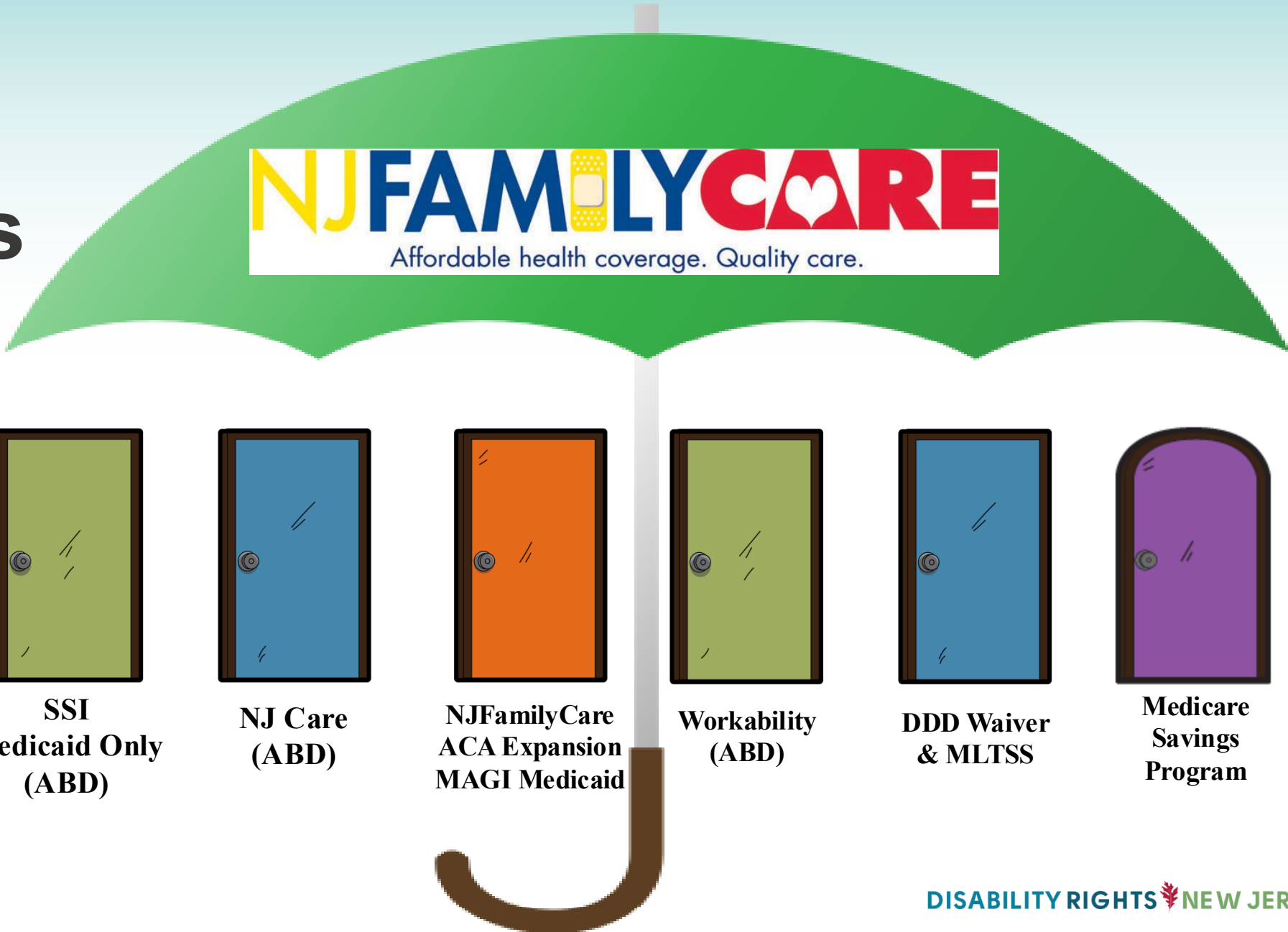


# Today's Learning Take-Aways

1. There are many ways to be eligible for Medicaid
2. You only need to be eligible under one Medicaid program
3. No termination until all program eligibility reviewed
4. You have appeal rights and a right to continuation of benefits pending appeal



# Medicaid Programs



**SSI  
Medicaid Only  
(ABD)**

**NJ Care  
(ABD)**

**NJFamilyCare  
ACA Expansion  
MAGI Medicaid**

**Workability  
(ABD)**

**DDD Waiver  
& MLTSS**

**Medicare  
Savings  
Program**



# SSI-Related Medicaid

- **Eligibility**

- Aged:  $\geq 65$  years old
- Blind or Disabled (any age)

- **Income\***

- $\leq \$998.25$  /mo. individual;  $\leq \$1,475.35$  /mo. couple
- (person or couple living alone or with others in own household)

- **Resources**

- $\leq \$2,000$  for individual;  $\leq \$3,000$  for couples
- Exempt resources include: home and 1 car



# SSI-Related Medicaid: Where do I apply?

- SSI-related Medicaid → SSI application = Medicaid application
  - Service Package = Plan A  
(includes Personal Care Assistance)



# Medicaid Only

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- Exempt resources include: home and 1 car





# Section 1634 Childhood Disability Benefits (CDB)

- **Eligibility Criteria:**

- At least 18 years old
- Disabled or blind prior to 22
- Has been receiving SSI on basis of disability
- Has lost SSI as a result of receipt of SS benefits on parent's record due to retirement, death, or disability of the parent
- Resources  $\leq$  \$2000 (not including a Special Needs Trust or ABLE)
- Financially eligible for "Medicaid Only" door if not for the parental SS benefit.



# How to Confirm Your CDB Status

- CDBs are relevant when you're up for redetermination
- To obtain proof of CDB Status, contact your local SSA office

<https://www.ssa.gov/locator/>



# Medicaid Only: Where do I apply?

- Medicaid Only → Online or with County Social Service Associations (CSSAs) with paper application
  - [www.nj.gov/humanservices/dmahs/clients/medicaid/abd/index.html](http://www.nj.gov/humanservices/dmahs/clients/medicaid/abd/index.html)
    - Service Package = Plan A  
(includes Personal Care Assistance)



# NJ Care: Aged, Blind, & Disabled

- **Eligibility**

- Aged:  $\geq 65$  years old
- Blind or Disabled (any age)

- **Income**

- $\leq \$1,305$  /mo. individual;  $\leq \$1,763$  /mo. couple (100% of FPL)

- **Resources**

- $\leq \$4,000$  for individual;  $\leq \$6,000$  for couples
- Exempt resources include: home and 1 car



# NJ Care: Aged, Blind, & Disabled

## Where do I apply?

- New Jersey Care → Online or with County Social Service Associations (CSSAs) with paper application
  - [www.nj.gov/humanservices/dmahs/clients/medicaid/abd/index.html](http://www.nj.gov/humanservices/dmahs/clients/medicaid/abd/index.html)
    - Benefit Package = Plan A  
(includes Personal Care Assistance)



# NJ Workability

- **Eligibility**

- Age 16 years or older
- Working full-time, part-time or self-employed with proof of employment
- Must have net earnings of \$400 or more and file federal taxes
- Disability determination (SSA or NJ Medical Review Team)

- **Income**

- Unlimited (premiums may apply to higher incomes)

- **Resources**

- Unlimited



# NJ WorkAbility Premiums

## NJ WorkAbility Premium Chart 2025

Tier Levels	Countable Income - % of Federal Poverty Level	Individual's Annual Countable Annual Income 2025	Equivalent Annual Earned Income, if no Unearned Income 2025	Monthly Premium Amount 2025
None	≤250% Age 16-64 ≤250% Age 65+	≤\$39,125	≤\$79,284	None
Tier 1	251 – 350%	>\$39,125 - \$54,775	>\$79,284 – \$110,580	\$185
Tier 2	351 – 450%	>\$54,775 - \$70,425	>\$110,580 – \$141,876	\$370
Tier 3	451 – 550%	>\$70,425 - \$86,075	>\$141,876 – \$173,172	\$555
Tier 4	551 – 650%	>\$86,075 - \$101,725	>\$173,172 – \$204,492	\$740
Tier 5	651 – 750%	>\$101,725 - \$117,375	>\$204,492 – \$235,788	\$925
Tier 6	>750%	>\$117,375	>\$235,788	\$1,110



# NJ Workability

## Where do I apply?

- NJ Workability → On-Line or with County Social Service Association (CSSAs) with paper application
- [www.nj.gov/humanservices/dds/programs/njworkability/](http://www.nj.gov/humanservices/dds/programs/njworkability/)
- Benefit Package = Plan A





# Single Adults and Parents: ACA Expansion or MAGI Medicaid

- **Ages: 21 – 64 years old\***
  - Under 21 can qualify for expansion, different income threshold
  - No longer eligible upon turning 65
- **No Disability Determination Needed:**
  - OK → disability determination (ex: SSDI)
  - No longer eligible for MAGI Medicaid once eligible to receive Medicare
- **Modified Adjusted Gross Income (MAGI)**
  - Think line #11 on the 2024 IRS Form 1040
- **Income**
  - ≤ \$1,800 / mo. for individual; ≤ \$2,433 /mo. for household of two (138% of FPL)
- **No Resource Limit**



# Single Adults and parents

## Where do I apply?

- Online at [dmahs-nj.my.site.com/familycare/quickstart](https://dmahs-nj.my.site.com/familycare/quickstart)
  - Online application
  - Most are done at the State level through vendor
  - If you have questions or need help filling out the application, call **1-800-701-0710**
- Alternative Benefits Plan = ABP



# Medicaid Waiver Programs



# Managed Long Term Services and Supports (MLTSS)

- **Financial Eligibility**

- Income  $\leq$  **\$2,901 / mo.** for an individual
  - Qualified Income Trust/QIT
- Resources  $\leq$  **\$2,000** for individual
- Spousal impoverishment protections
- 5 year look-back: No gifting
  - Transfer Penalty: total amt. transferred / avg. daily cost of nursing home services = # of days ineligible



# Managed Long Term Services and Supports (MLTSS)

- **Clinical Eligibility**

- Hands-on assistance in 3 or more Activities of Daily Living (ADLs) **OR**
- If an applicant has a cognitive impairment, a combination of supervision and cueing and hands on assistance in 3 or more ADLs
- ADLS include:
  - Eating
  - Bathing
  - Dressing
  - Toileting
  - Bed Mobility
  - Transfers
  - Locomotion



# Managed Long Term Services and Supports (MLTSS) includes:

- Personal Care Assistance (PCA)(state plan)
- Private Duty Nursing (PDN)
- Respite
- Care management
- Home and vehicle modifications
- Home delivered meals
- Personal emergency response systems
- Mental health and addiction services
- TBI specific community-based services
- Assisted Living Facilities
- Nursing Homes



# Where do I apply for MLTSS?

- **Clinical Eligibility Determination:**
  - **If Currently Enrolled in Medicaid:**
    - Call your Managed Care Organization (MCO) for Clinical Eligibility Screen
  - **If Not Currently Enrolled in Medicaid:**
    - Aging Disability Resource Center (ADRC): 1(877) 222-3737
    - ADRC conducts preliminary screening over the phone and sends information to the Office of Community Choice Options (OCCO)
    - Office of Community Choice Options (OCCO) does the clinical screen
    - OCCO does not usually accept a direct application



# Where do I apply for MLTSS?

- **Financial Eligibility Determination:**
  - **If Currently Enrolled in Medicaid:**
    - Fill out a Medicaid ABD application online or at the CSSA
  - **If Not Currently Enrolled in Medicaid:**
    - Fill out a new Medicaid ABD application online or at the CSSA
  - **Either way be sure to check ‘yes’ on question asking if you need “nursing home like” services**
- **Financial Documents:**
  - Will need to provide financial records from the past 5 years
  - Some CSSAs ask for every month, others for quarterly records





# DD Supports Program and Supports Plus PDN

- **Financial Eligibility**

- Income  $\leq$  \$2,901 income
- Resources  $\leq$  \$2,000 resources

- **Clinical Eligibility**

- An individual must meet the functional criteria of having a developmental disability

- **Private Duty Nursing**

- Medically necessary; covered by Medicaid MCO



# DD Supports Includes

- Assistive Technology
- Behavioral Supports
- Cognitive Rehabilitation
- Community Inclusion Services
- Day Habilitation
- Direct Service Professionals (DSPs)
- Occupational Therapy
- Prevocational Training
- Support Coordination
- Supported Employment
- Private Duty Nursing (if medically necessary)



# Community Care Program (CCP)

- **Financial Eligibility**

- Income  $\leq$ \$2,901 income
- Resources  $\leq$ \$2,000 resources (not including Special Needs Trust and ABLE accounts)

- **Other Eligibility**

- Meet functional criteria for DDD services
- Meet LoC for ICF-IID
- Be reached on the CCP waiting list



# Where do I apply for CCP or DD Supports?

- Eligibility for DDD services req. Medicaid (any door discussed)
- To be evaluated for eligibility for DDD-funded services, visit [www.nj.gov/humanservices/ddd/individuals/applyservices/](http://www.nj.gov/humanservices/ddd/individuals/applyservices/)
- DDD Application for Eligibility → DDD Intake Process



# Medicare Savings Programs (MSPs)

- **Qualified Medicare Beneficiary (QMB)**
  - Income:  $\leq \$1,305$  (100% FPL)
  - **QMB “Plus”** = individual has full-scope Medicaid
  - **QMB “Only”** = ineligible for full scope Medicaid (resources b/w \$4,000 - \$9,660)
- **Specified Low-Income Medicare Beneficiary Program (SLMB)**
  - Income:  $\leq \$1,565$  / mo. (120% FPL)
- **Qualified Individual or QI**
  - Income:  $\leq \$1,761$  / mo. (135% FPL)
- **Resources**
  - Resource limit for all MSPs:  $\leq \$9,660$



# Where do I apply for MSPs?

- Division of Aging Services: 1 (800) 792-9745
- Online at: [www.nj.gov/humanservices/doas/services/l-p/njsave/](http://www.nj.gov/humanservices/doas/services/l-p/njsave/)





# Prior to Termination: Medicaid Must Consider **ALL** Program Eligibility!

- Federal Right: 42 C.F.R. §435.916(d)(1)
- SSI: Medicaid Communication 19-01
- Medicare Savings Programs: Appellate Division Decision: D.C. v. M.L. (July 28, 2020)
- **Medicaid agency must transition to eligible program with no gap in coverage**



# What if my Medicaid is Terminated?

## Written Notice:

- Right to a fair hearing
- Right to continuation of services pending the outcome of the hearing
- **Constitutionally** protected rights!





# Fair Hearings & Continuation of Benefits

- You have a constitutional right to a fair hearing.
- You have 60\* days to request a fair hearing (for terminations).
- You have 10 days to request a fair hearing (for service authorizations).
- You have a right to the continuation of services pending the outcome of the hearing.



# Where to Send Your Fair Hearing Request

- Fair Hearing requests can be faxed or mailed.
  - Fax: 1-609-588-2435
  - Mail: State of New Jersey,  
Division of Medical Assistance and Health Services  
Fair Hearing Unit  
P.O. Box 712  
Trenton, NJ 086255-0712
- **Keep copy of request & proof you submitted it!!!**



# Contact Us for More Information:

We are located at:

**210 South Broad Street, Third Floor  
Trenton, New Jersey 08608**

We can be reached at:

**800-922-7233 (NJ Only)**

**609-292-9742**

**[advocate@disabilityrightsnj.org](mailto:advocate@disabilityrightsnj.org)**



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