



COUNTY OF BERGEN
 DEPARTMENT OF HUMAN SERVICES
 DIVISION OF SENIOR SERVICES/ADRC
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Quick Guide to State, Federal and County Programs for Older Adults
Updated February 2020

PHARMACEUTICAL ASSISTANCE TO THE AGED AND DISABLED (PAAD)

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
Co-pay is \$5.00 for generic drug & \$7.00 for brand name drug. Must also enroll in a Medicare plan with prescription coverage (Part D or MA-PD) unless otherwise specified. The plan should have a monthly premium not above the regional benchmark and then PAAD pays Medicare Part D costs.	Must be NJ resident for at least 30 days. Must be 65 or older OR receiving Social Security Disability. *Gross annual income limit is less than: Single: \$28,399 (\$2,366 mo.) Married: \$34,817 (\$2,901 mo.)	For further details and an application contact Division of Senior Services at 201-336-7400 Or PAAD/Senior Gold 1-800-792-9745 Or www.aging.nj.gov for NJ Save application	PAAD does not pay for diabetic testing supplies Mail completed application to: PAAD/Senior Gold PO Box 637 Trenton, NJ 08625-9826 www.njpaad.gov

SENIOR GOLD PRESCRIPTION DISCOUNT PROGRAM

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
Co-pay is \$15 plus 50% of the remaining cost of the prescription or actual drug cost, whichever is less. Must also enroll in a Medicare plan with prescription coverage (Part D or MA-PD) unless otherwise specified. Senior Gold <u>does not</u> pay for Medicare Part D costs.	Must be a NJ resident for at least 30 days, 65 years or older or receiving Social Security Disability. *Gross annual income between: Single: \$28,399 and \$38,399 (\$2,366 - \$3,199 mo.) Married: \$34,817 and \$44,817 (\$2,901 - \$3,734 mo.)	For further details and an application: Contact Division of Senior Services at 201-336-7400 Or PAAD/Senior Gold 1-800-792-9745 Or www.aging.nj.gov for NJ Save application	Does not pay for diabetic testing supplies After annual out-of-pocket expenses reaches catastrophic cap of S: \$2,000; C: \$3,000 then there is only co-pay \$15 or drug cost if it is less. www.njsgold.gov

MEDICARE PRESCRIPTION DRUG BENEFIT

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
<p>Medicare Part D is an optional program, which adds prescription drug coverage to original Medicare. There is a monthly premiums, co-pay and may include annual deductible. Plans run on a calendar year and cover about 75% of drug costs until one reaches cap level. Any further drug costs for the remainder of the year will be out-of-pocket unless one reaches a catastrophic level then there will be either a flat or 5% co-pay</p>	<p>Must be enrolled in Medicare, either Part A or Part B. There is a penalty for late enrollment in Medicare Part D when first eligible. Those who have been determined to have creditable coverage may not need to enroll.</p> <p>PAAD participants and dual eligible (Medicare/Medicaid) must enroll in a Medicare Part D “benchmark plan”. There is a co-pay for PAAD & dual eligible participants and waived late enrollment penalty. In addition, Rx deductibles, cap limit, gap coverage and premium <u>do not</u> apply.</p>	<p>Annual open enrollment period begins October 15th to December 7th</p> <p>For more information and to research plans call: SHIP (State Health Insurance Program) 201-336-7413 or contact Medicare 1-800-MEDICARE</p>	<p>Check creditable coverage statements before enrolling in any Medicare Part D plan.</p> <p>Medicare Prescription drug benefit is also available as part of a Medicare Advantage Plan. Should not enroll in a Medicare Part D “stand alone” (drugs only) plan for those who have MA plans without Rx coverage</p> <p>The Medicare Part D benchmark premium for NJ in 2020 is \$35.48</p> <p>www.medicare.gov</p>

MEDICARE COSTS

<p>Medicare Part A: Hospital insurance helps pay for inpatient hospital care and certain follow-up services</p> <p>Medicare Part B: Medical insurance helps pay for physician services, outpatient hospital care and other medical services</p> <p>Medicare Part C: Medicare Advantage Plans</p> <p>All Medicare covered health care services through a provider network plan.</p>	<p>Medicare is health insurance for people age 65 or older and eligible for Social Security benefits based on their own or their spouse’s employment. Medicare is also for those with disabilities and/or permanent kidney damage.</p> <p>Medicare covers about 80% of your allowable medical expenses after deductible is met.</p> <p>www.medicare.gov</p> <p>Medicare Rights Center for appeals: 1-888-466-9050</p>	<p>Part A Hospital Deductibles and Co-Payment per benefit period: 1-60 days \$1,408 deductible 61-90 days \$352 per day 91-150 is \$704 per day (lifetime reserve days)</p> <p>Part A Co-Payments in Skilled Nursing Facility: Days 1-20: \$0 after 3-day qualifying hospital stay Days 21- 100: \$176/day</p> <p>Part A monthly premium: 40 or more quarters: \$0 30-39 quarters: \$252/month < 30 quarters: \$458/month</p>	<p>Part B Medical Insurance: Standard monthly premium \$144.60 or less if protected by “hold harmless” provision.</p> <p>Part B premiums may be higher based on income related monthly-adjusted amount (IRMAA).</p> <p>Part B annual deductible: \$198/yr.</p>
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HEARING AID ASSISTANCE TO THE AGED AND DISABLED (HAAAD)

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
\$100.00 toward the purchase of a hearing aid.	Income limits are less than: Single: \$28,399 (\$2,366 mo.) Married: \$34,817 (\$2,901 mo.)	1-800-792-9745 Or 201-336-7400	Complete a HAAAD application with a hearing aid receipt and a written statement attested by a physician.

NJ SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (FOOD STAMPS)

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
Benefit used to purchase food at authorized retail stores. Families First Electronic Benefits Transfer card (EBT card) are issued to recipients, which works similar to a debit card.	<p>185% of Federal Poverty Level</p> <p>Household size: (1) \$1,967/month (2) \$2,658/month</p> <p>Resources may count to determine eligibility in certain cases. Countable resource limits for 60 years of age and older is \$3,500.</p> <p>You can own a home and qualify. Retirement and pension funds are not counted depending on withdrawal activity. Licensed vehicles may count as a resource unless used under certain exclusions and may be subject to an equity test.</p>	<p>Apply in person: Board of Social Services 218 Route 17 N. Rochelle Park, New Jersey 07662 Tel: 201-368-4200 Hours: M-Fri. 8 am to 4:30 (Tues. until 8:00 pm)</p> <p>Apply online: www.nihelps.org</p> <p>For paper application or to apply at community outreach locations listed: www.bcbss.com</p>	<p>Note Well: Income limits vary. Elderly or disabled member may be eligible for Food Stamps even if the gross monthly income exceeds the income eligibility because medical and shelter deductibles are applied.</p> <p>NJ SNAP Hotline: 1-800-687-9512</p> <p>Once application is submitted then an eligibility interview is typically completed over the phone or in-person.</p> <p>SNAP Special Rules for the Elderly or Disabled: www.fns.usda.gov/snap/eligibility/elderly-disabled-special-rules</p>

MEDICARE SAVING PROGRAMS (QMB-Only, SLMB, SLMB-QI-1)

QUALIFIED MEDICARE BENEFICIARY (QMB-ONLY)

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
Assist with the costs for Medicare Part A, B & C premiums (benchmark \$35.48), deductibles and co-pay.	Aged, Blind and Disabled, Medicare (A & B) beneficiaries. Max. Annual Gross Income: <u>Single:</u> \$12,760 yr. (\$1,064/mo.)* <u>Couple:</u> \$17,240 yr. (\$1,437/mo.)* <u>Resources:</u> S: \$7,860 C: \$11,800	State of New Jersey Division of Aging Services 1-800-792-9745	100% FPL (Federal Poverty Level) + income disregard. * <u>Income disregard:</u> Add \$20 to the monthly amount. If receiving income from employment, \$65/month plus one-half of remainder of gross salary is not counted).

SPECIFIED LOW-INCOME MEDICARE BENEFICIARY (SLMB) & (SLMB QI-1)

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
<u>SLMB</u> Pays for Medicare Part B & C premiums (benchmark \$35.48).	<u>Single:</u> Income between \$12,760 yr. (\$1,064/mo.) AND \$15,312 yr. (\$1,276/mo.) * <u>Couple:</u> Income between \$17,240 yr. (\$1,437/mo.) AND \$20,688 yr. (\$1,724/mo.) * <u>Resources:</u> S: \$7,860 C: \$11,800	State of New Jersey Division of Aging Services 1-800-792-9745	SLMB income is between 100% to 120% FPL + income disregard. See explanation for income disregard above (QMB- Only)
<u>SLMB-QI-1</u> Pays for Medicare Part B & C premiums (benchmark \$35.48).	<u>Single:</u> Income between \$15,312 yr. (\$1,276/mo.) AND \$17,226 yr. (\$1,436/mo.) * <u>Couple:</u> Income between \$20,688 yr. (\$1,724/mo.) AND \$23,274 yr. (\$1,940/mo.) * <u>Resources:</u> S: \$7,860 C: \$11,800	State of New Jersey Division of Aging Services 1-800-792-9745	SLMB-QI-1 income is between 120% to 135% FPL + income disregard. See explanation for income disregard above (QMB-Only)

SOCIAL SECURITY

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
<p>Source of income after retirement, determined disabled or eligible for survivor benefits.</p>	<p>Most people need 40 credits (10 years of work) to qualify for benefits. Younger people need fewer credits to be eligible for disability benefits or for survivor's benefits when the worker dies. Receive full benefit amount when choosing to retire when one reaches full retirement age. Reduced benefits if one retires before full retirement age. Full retirement age for those born between 1943-1954 is 66; 1960 and later is 67.</p> <p>*Social Security and Supplemental Security Income (SSI) beneficiaries receive a 1.6 percent Cost-of-Living Adjustment (COLA) for 2020</p>	<p>Contact Social Security from 7 a.m. to 7p.m. Mon.-Fri. 1-800-772-1213, TTY 1-800-325-0778</p> <p>Social Security Continental Plaza, 401 Hackensack Ave, Second Floor Hackensack, NJ 07601</p> <p>Office Hours; Mon. Tue. Thurs. Fri. 9-4pm Wed. 9:00 AM - 12:00 PM</p>	<p>Set up a <i>my social security</i> account online www.ssa.gov and get access to the following:</p> <ul style="list-style-type: none"> • Get a benefit verification letter • Request replacement Social Security and Medicare card • Change of address and phone number <p>And more....</p>

SUPPLEMENTAL SECURITY INCOME (SSI)

WHAT IT DOES	PAYMENT	HOW TO APPLY	COMMENTS
<p>Provides payments to persons who are 65 or older, blind or disabled and have limited income and resources. Must be citizen or meet non-citizen requirements.</p>	<p>Combined federal and state maximum payment for individual/couple living alone or with others in own household: <u>Individual:</u> \$814/month <u>Couple:</u> \$1200/month Resources you own must be less than: <u>Single:</u> \$2,000 <u>Couple:</u>\$3,000</p>	<p>Social Security Administration at 1-800-772-1213</p> <p>www.ssa.gov</p>	<p>Value of home and car is not counted. SSI also does not count the value of certain resources such as a burial plot.</p> <p>Payments are determined by your living situation and if you are receiving other maintenance and support.</p>

Low-Income Home Energy Assistance Program

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
<p><u>Universal Service Fund (USF)</u> Receive credit on utility bill for gas & electric.</p>	<p><u>Universal Service Fund (USF):</u> *Gross income limits for a household (1) \$23,112/yr. (\$1,926/mo.) (2) \$31,284/yr. (\$2,607/mo.)</p> <p>Income must be below 175% FPL & pay more than 3% of annual income for electric & natural gas. Household with electric heat must spend more than 6% of annual income on electricity</p>	<p>All programs under LIHEAP are in one application. Application period for most programs is from October, 2019 – August, 2020</p> <p><u>Greater Bergen Community Action, Inc.</u> 316 State St. Hackensack, NJ 07601 201-488-5100 ext. 7008 Fax: 201-342-7452</p>	<p><u>PSE&G</u> 214 Hudson Street Hackensack 1-800-357-2262</p> <p><u>NJ Board of Public Utilities</u> 1-800-624-0241 www.bpu.state.nj.us</p>
<p><u>Heating:</u> Must be responsible for directly paying your own heat. This also applies to heat included in rent</p> <p><u>Cooling</u> Benefit is \$200 and applicant must have a medical condition that requires the use of any cooling device.</p> <p><u>Winter Termination:</u> Provides protection from having your gas and/or electric shut-off from Nov. 15th - March 15th (Program may continue past March 15 if cold weather persists) Winter Termination Program applies to those households who receive NJ Lifeline credit, PAAD, LIHEAP, SSI, NJ SHARES, U.S.F., GA, TANF or unable to pay because of circumstances beyond your control.</p> <p><u>Weatherization:</u> The weatherization program lowers heating cost through home improvement for heat loss due to poor insulation or inefficient heating system. Repairs such as faulty windows and doors, install high efficiency insulation, repair or replace boilers, furnaces, water heaters, air filters, etc.</p>	<p><u>Heating, Cooling, Winter Termination, Weatherization:</u> *Gross income limits for a household size: (1) \$24,984 yr. (\$2,082/mo.) (2) \$33,828 yr. (\$2,819/mo.)</p> <p>Entire household is counted for all programs. Income must be below 200% of FPL.</p>	<p><u>Intake hours:</u> M/W/TH 8:30 am-3pm. End of November has extended hours on Thursday's 8:30 am-7:00 pm Closed Tuesday and Friday</p> <p>Homebound and disabled may request an outreach specialist to visit for assistance with application</p>	<p>www.greaterbergen.org</p> <p><u>USF:</u> 1-800-510-3102</p>

LIFELINE CREDIT PROGRAM

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
Utility assistance program that provides a \$225 annual credit for electric and gas.	<p>Must be either a PAAD recipient; meet PAAD eligibility requirements, or receive SSI, Medicaid.</p> <p>*Gross annual income limit is less than: Single: \$28,399 (\$2,366 mo.) Married: \$34,817 (\$2,901 mo.)</p>	PAAD/Lifeline 1-800-792-9745 Or Division of Senior Services/ADRC 201- 336-7400	<p><i>Tenants Lifeline Assistance Program:</i> Eligible tenants receive a \$225 annual check if utilities are included in their rent.</p> <p><i>Special Utility Supplement:</i> SSI recipients receive a supplement of up to \$18.75/month that is automatically included in their SSI checks. SSI recipients should <u>not</u> file an application</p>

COMFORT PARTNERS

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
Assists to lower natural gas & electric bills through energy education and installation of energy saving home improvements.	250% FPL income limits for a household size: (1) \$31,900/yr. (\$2,658/mo.) (2) \$43,100/yr. (\$3,592/mo.)	Call 1-800-915-8309 www.njcleanenergy.com	Program representatives will work with each household to evaluate current level of energy efficiency. Program offered until June 30, 2020.

VERIZON NJ COMMUNICATIONS LIFELINE

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
Verizon offers Lifeline discount plans for home phone service (landline) OR FIOS broadband (internet) service.	<p>Receive benefits from one of these programs: Medicaid, SNAP (Food Stamps), SSI, Sec 8, Federal Veterans and Survivors Pension.</p> <p style="text-align: center;">OR</p> <p>Eligibility based on household income below 135% FPL: 1-\$17,226/yr. (\$1,436/mo.) 2-\$23,274/yr. (\$1,940/mo.)</p>	NJ SHARES 1-888-337-3339 www.njshares.org Mail/Fax or email application with required documents to: New Jersey SHARES 1901 North Olden Avenue Ext Suite 40 Floor 2 Ewing, NJ 08618 Fax: 609-883-0133 telco@njshares.org	<p>Documents for Medicaid, SNAP and SSI are <u>NOT</u> required to be sent with application.</p> <p>Lifeline discount also provides free wireless (cell phone) service. Most commonly used providers are Assurance Wireless and Safe Link. www.assurancewireless.com www.safelinkwireless.com</p>

NJ SHARES

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
Assists individuals and families who need help paying energy bills due to a temporary financial crisis or behind on their energy bill. Grant amounts can be up to \$700 for gas and electric.	Not eligible for LIHEAP, USF, PAGE program. Eligibility for seniors 65 and older and applicants receiving SSD with one or two household members are as follows: Maximum household income: \$70,000/yr. \$5,833/month.	Can demonstrate a temporary financial need. Assistance for those who made a "good faith" payment of \$100 or more within 90 days prior to applying. Call NJ SHARES 866-657-4273 to locate nearest agency www.njshares.org	Application for NJ SHARES available all year. Water bill assistance also available: <u>Suez Water Cares:</u> 888-942-8080 <u>NJ American Water's Assistance Program</u> 800-272-1325

PAGE (Payment Assistance for Gas & Electric)

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
Assist with electric and natural gas bills for those facing a crisis situation and economic hardship	Income guideline as of October 2019: <u>Household size Minimum to Maximum:</u> (1) \$24,996 - \$61,588 (2) \$33,840 - \$80,540 Liquid assets below \$15,000 Must meet program requirements such as providing payment history, 45 days or more past due balance and/or received a shut-off notice. Also not receiving LIHEAP/USF benefits within the current heating season.	May apply at nearest service center: Greater Bergen Community Action, Inc. 316 State St. Hackensack, NJ 07601 201-488-5100 Online applications available OR download and print application: www.njpoweron.org Mail to: 59 Broad St. Eatontown, NJ 07724	The Affordable Housing Alliance (AHA) is the administrator for the PAGE program and funded by the Board of Public Utilities (BPU). For additional information call: 732-982-8710

New Jersey Family Care ABD (Aged, Blind, Disabled)

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
<p>Full Medicaid coverage pays for physician in office, hospital or nursing home or other medical facility & cost of prescribed drugs, eye glasses, dentists, podiatrist, mental health service, ambulance services, hospice, and home health care.</p>	<p>Persons 65 years of age or older, blind or permanently disabled who may not be eligible for SSI.</p> <p>Maximum gross income: S-\$12,760 yr. (\$1,063/month) C-\$17,240 yr. (\$1,437/month)</p> <p>Maximum allowable resources for : Single: \$4,000; Couple: \$6,000</p>	<p>Board of Social Services 218 Route 17 N. Rochelle Park, NJ 07662</p> <p>Tel: 201-368-4200 Hours: M-Fri. 8am - 4:30 pm (Tues. until 8:00 pm)</p> <p>Go to www.bcbss.com to access an online Aged Blind Disabled application. Printable application is also available along with additional forms and ABD checklist.</p>	<p>NJ Family Care 1-800-356-1561</p> <p>Medicaid District office 973-977-4077</p>

Managed Long Term Services and Support (MLTSS)

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
<p>M.L.T.S.S. uses NJ Family care MCO's (Managed Care Organization) to coordinate acute and primary health care services in the community and long term care facility.</p>	<p>Must meet financial, clinical, age and/or disability requirements. Must be 65 years of age and older OR 21 -64 yrs. old and determined disabled by SSA or by Disability Review Section-Division of the Medical Assistance and Health Services-NJDHS. Must be a U.S. Citizen or a Qualified Alien.</p> <p><u>M.L.T.S.S.</u> Single: \$2,349 Maximum Resources: \$2,000</p> <p>*If income is above \$2,349 then can apply for Qualified Income Trust (QIT)</p> <p>**The maximum resources may be higher for applicant that is married or for a married couple that are <u>both</u> applying.</p>	<p>For information and screening process call Division of Senior Services ADRC 201-336-7400 Financial screening process: Board of Social Services at 201-368-7667 www.bcbss.com</p> <p><u>Managed Care Organizations:</u> <u>Aetna</u> 1-855-232-3596 <u>Amerigroup NJ</u> 1-800-600-4441 <u>Horizon NJ Health</u> 1-877-765-4325 <u>United Healthcare</u> 1-800-941-4647 <u>Wellcare</u> 1-888-453-2534</p>	<p>Beginning July 1, 2014 participants in the Medicaid waiver programs: Global Options (GO); AIDS Community Care Alternative Program (ACCAP); Community Resource for People with Disabilities (CRPD) and Traumatic Brain Injury (TBI) were automatically enrolled in MLTSS program through their current MCO or health plan. www.nj.gov/humanservices/dmahs/home/mltss.html</p> <p>To enroll in a Medicaid MCO : 1-866-472-5338</p> <p><u>Institutional Medicaid:</u> Single: \$2,349 Maximum Resources: \$2,000</p>

****JERSEY ASSISTANCE FOR COMMUNITY CAREGIVING (JACC)**

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS																					
<p>JACC provides in-home services to seniors at risk of placement in a nursing facility. JACC services are designed to supplement help given by the caregiver.</p>	<p>A New Jersey resident age 60 and older who: *Requires a nursing facility level of care but wishes to remain at home. * Is not financially eligible for Medicaid or Medicaid Waiver Services. * Meets legal status requirements</p> <p>Single: (\$3,881/mo.) Maximum resources: \$40,000</p> <p>Married: (\$5,244/mo.) Maximum resources: \$60,000</p>	<p>For information and an initial screening process call Division of Senior Services: 201-336-7400</p> <p>**Bergen County JACC wait list is currently closed. Please call the Division of Senior Services for information on other available programs.</p>	<p>Participants of JACC have a co-pay that is determined by an income-based sliding scale.</p> <table border="1" data-bbox="1268 321 1885 594"> <thead> <tr> <th>Individual</th> <th>Couple</th> <th>Co-pay Amount</th> </tr> </thead> <tbody> <tr> <td>\$0-\$1,414</td> <td>\$0-\$1,911</td> <td>\$0.00</td> </tr> <tr> <td>\$1,415-\$1,861</td> <td>\$1,912-\$2,514</td> <td>\$15.00</td> </tr> <tr> <td>\$1,862-\$2,393</td> <td>\$2,515-\$3,233</td> <td>\$30.00</td> </tr> <tr> <td>\$2,394-\$2,924</td> <td>\$3,234-\$3,951</td> <td>\$60.00</td> </tr> <tr> <td>\$2,925-\$3,456</td> <td>\$3,952-\$4,669</td> <td>\$90.00</td> </tr> <tr> <td>\$3,457-\$3,881</td> <td>\$4,670-\$5,244</td> <td>\$120.00</td> </tr> </tbody> </table> <p><u>2020 Monthly Income Limits:</u> Individual: \$3,881 Couple: \$5,244 <u>Standard Medical Deductions:</u> Individual: \$233 Couple : \$451 Cost cap in services not to exceed \$600/month; \$7,200 annually.</p>	Individual	Couple	Co-pay Amount	\$0-\$1,414	\$0-\$1,911	\$0.00	\$1,415-\$1,861	\$1,912-\$2,514	\$15.00	\$1,862-\$2,393	\$2,515-\$3,233	\$30.00	\$2,394-\$2,924	\$3,234-\$3,951	\$60.00	\$2,925-\$3,456	\$3,952-\$4,669	\$90.00	\$3,457-\$3,881	\$4,670-\$5,244	\$120.00
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HOMESTEAD BENEFIT

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
<p>Provides property tax relief to eligible homeowners.</p>	<p>You may be eligible for a New Jersey Homestead Benefit if you were a New Jersey resident that owned and occupied a home in New Jersey that was your <u>principal</u> residence on October 1 (year stated on application) AND property taxes were paid on that home AND met the income requirements. Maximum income limits (Single/Married/Civil Union):</p> <ul style="list-style-type: none"> ▪ \$150,000 for homeowners age 65 or older, blind or disabled ▪ \$75,000 for homeowners under age 65 and not blind or disabled. 	<p>File applications online OR by phone 1-877-658-2972</p> <p>NJ Homestead Benefit Hotline 1-888-238-1233</p>	<ul style="list-style-type: none"> • Income eligibility does not include Social Security and any income that is not subject to NJ tax • For current eligibility update and due date please refer to NJ Division of Taxation -(Property Tax Relief) www.njtaxation.org

PROPERTY TAX REIMBURSEMENT (SENIOR FREEZE)

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
<p>Provides tax relief for homeowners by reimbursing the difference between the amount of property taxes paid for the base year and the amount paid for the year you are applying. The base year is the year you first become eligible for the program and you must meet all requirements up to the year you claim reimbursement.</p>	<p>Total annual income for PTR-1 (Single/Married/Civil Union) : 2018: \$89,013 or less, and 2019: \$91,505 or less and</p> <ul style="list-style-type: none"> • Must be 65 years of age or older or on Social Security Disability • Resident of NJ continuously for last 10 years as a homeowner or renter • Owned and lived in NJ home for at least the last 3 years • Property taxes should be paid in full for base year and succeeding years • Meet income limits 	<p>File PTR-1 or PTR-2 application.</p> <p>Form PTR-1 are for first time applicants</p> <p>Form PTR-2 Personalized application that are mailed to those who met the eligibility requirements the previous year</p>	<p>*Filing deadline for 2019 PTR application is November 2, 2020 * For those with life tenancy, a copy of an official document must be included with application *Mobile homeowners must have paid the full amount of mobile home park site fees.</p> <p>Tax relief program may be subject to change according to the state budget. For current eligibility update and due date please refer to NJ Division of Taxation -(Property Tax Relief) www.njtaxation.org</p> <p>Property Tax Reimbursement Hotline: 800-882-6597</p>

OTHER PROPERTY TAX BENEFITS

Senior Citizens or Disabled Persons Property Tax Deduction:

Annual deduction of up to \$250 from property tax for homeowners age 65 or older or disabled who meet residency requirements and surviving spouse may also qualify. Check with your municipality about necessary Forms.

Veterans Deduction:

Annual deduction of up to \$250 from property taxes due for qualified war veterans or for veterans who served in peacekeeping missions and operations. This deduction also applies to the unmarried surviving spouse/civil union/domestic partner. There is also full exemption from property taxes on a principal residence for total and permanently disabled war veterans and veterans who served in peacekeeping missions and operations. Check with your municipality about necessary Forms.

NJ Division of Taxation

Regional Information Center:

(Bergen County)
 22-08 Route 208 South
 Fair Lawn, New Jersey 07410
 201-791-0500
 New Jersey Division of Taxation: 1-800-323-4400

Frail/Disabled: Person 60+ with Physical/Mental disability including Dementia & Alzheimer’s, that restricts ADL’s to the point of losing capacity to live alone or independently.

Vulnerable Client: Person 60+ (1) exposed to unfavorable environmental (living) conditions OR (2) person 60+ without social/economic resources to maintain adequate well-being that includes low income (**100%-200% Federal Poverty Level**) **Single (\$1,063-\$2,126) Married (\$1,437- \$2,874)** OR (3) language barrier (1st language other than English or illiteracy) OR (4) isolated (living alone), with no “informal support system” (helping family or friends).

COUNTY OF BERGEN



James J. Tedesco III
County Executive

BOARD OF CHOSEN FREEHOLDERS

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