



**COUNTY OF BERGEN
DEPARTMENT OF HUMAN SERVICES
DIVISION OF SENIOR SERVICES/ADRC**

One Bergen County Plaza, 2nd Floor Hackensack, NJ 07601
(201) 336-7400 • seniors@co.bergen.nj.us

James J. Tedesco III
Bergen County Executive

Melissa DeBartolo, Esq.
Department Director

Lorraine Joewono
Division Director

Quick Guide to State, Federal and County Programs for Older Adults
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PHARMACEUTICAL ASSISTANCE TO THE AGED AND DISABLED (PAAD)

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
Prescription drug co-pay is \$5.00 for generic drug & \$7.00 for brand name drug. Medicare beneficiaries must also enroll in a Medicare Part D drug plan with monthly premium not above the regional benchmark. Medicare Advantage participants must add prescription to their coverage and PAAD pays up to the regional benchmark amount.	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: <u>Single</u> : \$53,446 (\$4,454 month) <u>Married</u> : \$60,690 (\$5,058 month)	Print applications or apply online NJ Save application For additional information and assistance contact: Division of Senior Services/ADRC 201-336-7400 Or PAAD 1-800-792-9745 www.aging.nj.gov	Verify creditable coverage before applying. Mail completed applications to: PAAD Revenue Processing Center PO Box 637 Trenton, NJ 08646-0637 <u>PAAD and Lifeline also qualifies for:</u> Reduced Motor Vehicle Fees Low-Cost Spaying/Neutering

SENIOR GOLD PRESCRIPTION DISCOUNT PROGRAM

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
Prescription drug co-pay is \$15 plus 50% of the remaining cost of the prescription drug. Medicare beneficiaries must enroll in a Medicare Part D or Medicare Advantage with prescription coverage. Senior Gold <u>does not</u> pay for Medicare Part D or MA-PD costs.	Must be a NJ resident for at least 30 days, 65 years or older OR receiving Social Security Disability. Gross annual income between : <u>Single</u> : \$53,446 and \$63,446 (\$4,454 - \$5,287month) <u>Married</u> : \$60,690 and \$70,690 (\$5,058 - \$5,891 month)	Apply online NJ Save application For additional information and assistance contact: Division of Senior Services/ADRC 201-336-7400 Or PAAD 1-800-792-9745 www.aging.nj.gov	Verify creditable coverage before applying. When annual out-of-pocket expenses reach catastrophic cap <u>Single</u> : \$2,000; <u>Married</u> : \$3,000 then there is only a flat co-pay of \$15 during the eligibility period. Mail completed application to same address as PAAD above

H:/M.George/ADRC/QG/2-2025 *NOTE: Gross income includes Social Security & other monthly income. Resources may include bank accounts, retirement accounts, stocks, and anything else that can be easily converted to cash.

MEDICARE PRESCRIPTION DRUG BENEFIT

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
<p>Medicare Part D Stand-Alone Prescription Drug Coverage is optional prescription drug coverage that works with Original Medicare (Parts A and B). It is offered by private insurance companies, and you pay a monthly premium, copays, and an annual deductible.</p>	<p>Must be enrolled in Medicare Part A or Part B. If you don't enroll in Medicare Part D when first eligible, you may face a late enrollment penalty unless you already have creditable prescription drug coverage.</p> <p>Dual eligible beneficiaries (Medicare and Medicaid), and PAAD participants are eligible for the premium-free benchmark plans. These plans are will not charge a late enrollment penalty. They also include coverage for the deductible, gap limits, and other plan benefits.</p> <p>The regional benchmark premium for Medicare Part D plans is \$56.86</p> <p>Medicare Part D deductible: \$590/yr.</p>	<p>The Annual Open Enrollment Period for Medicare Part D is from October 15 to December 7 each year. During this time, you can review, change, or enroll in a new Part D plan. Medicare Part D plans run on a calendar year.</p> <p>There is a (SEP) Special Enrollment Period to switch to a stand-alone Part D plans earlier in certain circumstances and if you have Medicaid, Medicare Savings Program or Extra Help.</p> <p>Verify if your current prescription drug coverage is creditable before enrolling in a Part D plan.</p> <p>If you have a Medicare Advantage Plan (MA) with drug coverage, you should not enroll in a stand-alone Part D plan.</p>	<p>The Coverage Gap, also known as the “donut hole,” is eliminated for 2025. After meeting your deductible, your plan will cover about 75% of the retail price of the drug. Once your out-of-pocket costs reach \$2,000, you will enter catastrophic coverage. In this phase, you will pay \$0 for covered drugs, and the plan will pay 100% of the costs for the rest of the year.</p> <p>Medicare Prescription Payment Plan (MPPP) offers an option to sign up for a payment plan for Part D out-of-pocket costs. The plan sends monthly bills for the cost share with no fees or interest.</p> <p>State Health Insurance Assistance Program (SHIP): 201-336-7413</p> <p>Medicare: 1-800-MEDICARE (1-800-633-4227) www.medicare.gov</p>

MEDICARE COSTS

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	PART A COSTS	PART B COSTS/COMMENTS
<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, HMO's, PPO's 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. Medicare covers about 80% of your allowable medical expenses after deductible and other costs are met.</p> <p>www.medicare.gov</p>	<p>Part A Hospital Deductibles and Co-Payment per benefit period: \$1,676 deductible 1-60 days \$0 61-90 days \$419 per day 91-150 is \$838 per day</p> <p>Part A Co-Payments in Skilled Nursing Facility: Days 1-20: \$0 Days 21- 100: \$209.50</p> <p>Part A monthly premium: 40 or more quarters: \$0 30-39 quarters: \$285/month <30 quarters:\$518/month</p>	<p>Part B Medical Insurance: Standard monthly premium \$185.00 Part B premiums are higher based on income related monthly-adjusted amount (IRMAA). Part B annual deductible: \$257.00</p> <p>Medicare Rights Center (appeals): 1-800-333-4114 www.medicarerights.org</p> <p>Senior Medicare Patrol (SMP): 1-877-767-4359 www.smpresource.org Report Medicare fraud, such as unsolicited calls from anyone that claims to be from Medicare</p>

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

QUALIFIED MEDICARE BENEFICIARY (QMB-ONLY)

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
<p>Pays for Medicare Part A & B premiums, deductibles, coinsurance, and copayments, Part D and Medicare Advantage plan drug premium up to benchmark amount \$56.86</p>	<p><u>Single</u>: \$1,325/mo. <u>Married</u>: \$1,783/mo.</p> <p>QMB-Only Resources: Single: \$9,660 Married: \$14,470</p> <p>QMB-Plus Resources: Single: \$4,000 Married: \$6,000</p>	<p>QMB Only apply online NJ Save application</p> <p>Division of Aging Services 1-800-792-9745</p> <p>QMB Plus apply through Medicaid ABD application or contact Board of Social Services: 201-368-4200</p>	<p><i>Income disregard</i>: Add \$20/month or \$240/annual to 100% FPL (Federal Poverty Level)</p>

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

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
<p>SLMB Pays for Medicare Part B premium, Part D and Medicare Advantage plan drug premium up to benchmark amount \$56.86</p>	<p><u>Single</u>: Income between: \$1,325/mo. AND \$1,585/mo. <u>Married</u>: Income between: \$1,783/mo. AND \$2,135/mo.</p> <p><u>Resources</u>: Single: \$9,660 Married: \$14,470</p>	<p>Division of Aging Services 1-800-792-9745</p>	<p>SLMB income is between 100% to 120% FPL and income disregard.</p> <p><i>Income disregard</i>: Add \$20/month or \$240/annual to 100% to 120% FPL (Federal Poverty Level)</p>
<p>SLMB-QI-1 Pays for Medicare Part B premium, Part D and Medicare Advantage plan drug premium up to benchmark amount \$56.86</p>	<p><u>Single</u>: Income between: \$1,585/mo. AND \$1,781/mo. <u>Married</u>: Income between: \$2,135/mo. AND \$2,400/mo.</p> <p><u>Resources</u>: Single: \$9,660 Married: \$14,470</p>	<p>Apply online for SLMB NJ Save application</p>	<p>SLMB-QI-1 income is between 120% to 135% FPL and income disregard</p> <p><i>Income disregard</i>: Add \$20/month or \$240/annual to 120% to 135% FPL (Federal Poverty Level)</p>

SOCIAL SECURITY

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
<p>Social Security is a federal program that replaces a percentage of pre-retirement income based on lifetime earnings. It also provides disability income to qualified individuals and their spouses, children, and survivors.</p>	<p>Benefit payment is based on how much you earned throughout your working career. Most people need 40 credits or 10 years of work, to qualify for benefits.</p> <p>You can get Social Security retirement benefits as early as age 62 with a reduced benefit</p> <p>Full retirement age for those born between 1943 and 1954 is age 66. Those born between 1955 to 1960 is age 67</p> <p>Delayed benefits will continue to increase up until age 70</p>	<p>Apply for retirement benefits online at www.ssa.gov or contact a local Social Security office.</p> <p>Continental Plaza 401 Hackensack Ave, 2FL Hackensack, NJ 07601</p> <p>Office Hours: M-Fri. 9-4PM 1-866-964-4680</p> <p><u>Social Security hotline:</u> 1-800-772-1213 TTY 1-800-325-0778 Hours: M-Fri. 7AM-7PM</p>	<p>Access online services by creating a <i>my Social Security Account</i>:</p> <ul style="list-style-type: none"> • Social Security benefit verification letter • Request replacement Social Security card and Medicare card • Change of address • Estimate your personalized retirement benefit • Set up or change direct deposit <p>And more....</p> <p>Cost-of-Living Adjustment (COLA) for 2025 is 2.5 % increase in benefit</p>

SUPPLEMENTAL SECURITY INCOME (SSI)

WHAT IT DOES	PAYMENT	HOW TO APPLY	COMMENTS
<p>Provides payments to persons who have limited income and resources and are 65 or older, blind or disabled. Must be citizen or meet non-citizen requirements. Payments are determined by income, living situation, things you own, and other factors such as support from other household members.</p>	<p>The payment below is a combined <u>Federal AND State</u> maximum payment. This payment is based on an individual or a couple living alone or with others in own household:</p> <p><u>Single:</u> \$988.25/month <u>Married:</u> \$1,475.35/month</p> <p>Resources must be less than: <u>Single:</u> \$2,000 <u>Married:</u> \$3,000</p>	<p>Continental Plaza, 401 Hackensack Ave, 2FL. Hackensack, NJ 07601</p> <p>Office Hours: M-Fri. 9-4PM 1-866-964-4680</p> <p>Social Security hotline 1-800-772-1213 TTY 1-800-325-0778</p> <p>www.ssa.gov</p>	<p>The amount of countable income determines monthly payment amount, after allowed exclusions.</p> <p>There are resources that are also excluded such as home that one resides in, one vehicle per household, life insurance policies with a face value of \$1,500 or less, burial funds, valued at \$1,500 or less. Certain resource exclusions are based after calculated review of combined resources.</p>

HEARING AID ASSISTANCE TO THE AGED AND DISABLED (HAAAD)

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
Reimbursement towards custom fitted ear level or body worn electronic device per calendar year. A reimbursement of \$500.00 towards the purchase of a hearing aid or \$1,000 for two hearing aids. Cost of the hearing aid(s) must be equal to or greater than the reimbursement amount.	Age 65+ or OR receiving Social Security Disability. Gross income limits are less than: <u>Single</u> : \$53,446 (\$4,454 month) <u>Married</u> : \$60,690 (\$5,058 month)	If currently enrolled in PAAD or Lifeline then complete a HAAAD application and submit a hearing aid receipt and a physician statement for medical necessity. If <u>not</u> enrolled in PAAD or Lifeline, then verify eligibility by completing a PAAD application	Hearing aid receipt should be dated on or after approval for PAAD. Medicaid recipients and individuals with full hearing aid coverage through health insurance or retirement benefits are <u>not</u> eligible. Individuals with partial coverage can receive supplementary payment. <p style="text-align: center;">HAAAD PO BOX 715 Trenton, NJ 08625-0715 1-800-792-9745</p>

Hearing Aid Project

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
Free refurbished hearing aids	Age 65+ or have a hearing loss and are disabled receiving Social Security Disability Income SSD Gross income limits are less than: <u>Single</u> : \$53,446 (\$4,454 month) <u>Married</u> : \$60,690 (\$5,058 month)	Division of the Deaf and Hard of Hearing PO Box 074 Trenton, NJ 08625-0074 800-792-8339 Toll Free in NJ 609-588-2648 609-503-4862 Videophone 609-588-2528 Fax DDHH.communications2@dhs.state.nj.us	Applications available online: NJ HAP Form NJHAP application Form A (enrolled in PAAD) NJHAP application Form B (not enrolled in PAAD)

NJ SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (FOOD STAMPS)

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
<p>Provides supplemental food allowance. Food stamps is 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>	<p>October 2024 to September 2025 Household size: (1) \$2,322/month (2) \$3,152/month</p> <p>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>Resources <u>may</u> count to determine eligibility in <u>certain cases</u>. Countable resource limits for 60 years of age and older is \$4,500</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 online: www.mynjhelps.gov/home</p> <p>Printable application available online: https://bcbs.com/snap-food-stamps/</p> <p><u>Apply in person:</u> 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</p> <p>Contact SNAP Navigators to receive assistance with the application process: <u>Community Food Bank of NJ</u> 1-908-838-4831 SNAPOutreach@cfnj.org</p>	<p>Once application is submitted then an eligibility interview is typically completed over the phone.</p> <p>Contact BL unit: New and ongoing SNAP applications for GA/SNAP clients over 60, 201-368-4340 Fax: 201-368-4337</p> <p>Report changes in circumstance https://bcbs.com/report-change/</p> <p>The minimum monthly SNAP benefit in New Jersey is \$95. National Public Health Emergency (PHE) expired on May 11, 2023.</p> <p>New Jersey EBT hotline: 1-800-997-3333</p>

LIFELINE UTILITY ASSISTANCE PROGRAM

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
<p>A \$225 annual credit on electric and gas utility bills.</p>	<p>Must be 65 or older OR receiving Social Security Disability.</p> <p>Gross annual income limit is less than <u>Single:</u> \$53,446 (\$4,454 month) <u>Married:</u> \$60,690 (\$5,058 month)</p>	<p>Apply online NJ Save application</p> <p>Printable applications available online www.aging.nj.gov or call:</p> <p>PAAD/Lifeline: 1-800-792-9745 Or Division of Senior Services/ADRC: 201-336-7400</p>	<p><u>Tenants Lifeline Assistance Program:</u> Eligible tenants receive a \$225 credit by check if utilities are included in their rent.</p> <p><u>Special Utility Supplement:</u> 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>

Low-Income Home Energy Assistance Program (LIHEAP)

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
<p>Universal Service Fund (USF) Receive monthly credits on utility bill for gas & electric which is based on household income and consumption. USF applications are accepted all year. If eligible, there is an automatic enrollment by utility company for the <i>Fresh Start Program</i>. Eligible to receive every 5 years. Fresh start provides additional assistance and forgiveness for overdue balances of \$60 or more.</p> <p>Heating: Must be responsible for directly paying your own heat. This also applies to heat included in rent.</p> <p>Cooling Benefit is \$300 and applicant must have a medical condition that requires the use of any cooling device.</p> <p>Weatherization: The weatherization program provides savings through home energy efficiency assessment and upgrades. Customers may receive energy smart products, insulation upgrades in walls, ceilings, attics and air sealing of windows and doors.</p>	<p>Heating, Cooling, Winter Termination, Weatherization and Universal Service Fund: Gross income limits for a household size: (1) \$47,896 yr. (\$3,991/mo.) (2) \$62,633 yr. (\$5,219/mo.)</p> <p>Entire household is counted for all programs. Persons who live in public housing and/or receive rental assistance are not eligible for assistance unless they pay for their own heating costs directly to the fuel supplier.</p> <p>LIHEAP accepts applications from October 1st to June 30th</p> <p><i>Emergency LIHEAP</i> assistance funds may be available from March 15 to June 30 for shut off notices for those who are currently enrolled in LIHEAP.</p>	<p>How to submit applications:</p> <p><u>In-person application assistance OR place in drop box:</u> (First come, first serve basis) Mon. Wed. Thurs. 9-3pm 294 Union Street, Hackensack *Not wheelchair-accessible</p> <p>Email: LIHEAP@greaterbergen.org</p> <p>Fax: 201-342-7452</p> <p>Mail: Greater Bergen LIHEAP 294 Union Street Hackensack, NJ 07601</p> <p>Greater Bergen Community Action: 201-488-5100, Ext. 2</p> <p>Download applications: https://www.greaterbergen.org/liheap</p> <p>Homebound seniors or disabled individuals can call to arrange visit from an outreach representative to assist with application. Have required documents ready for representatives when they arrive.</p>	<p>PSE&G Customer Service Center 214 Hudson Street Hackensack 1-800-436-7734</p> <p>PSE&G Collection Department: 1-800-357-2262</p> <p>NJ Board of Public Utilities 44 S. Clinton Avenue Trenton, NJ 08625 (800) 624-0241 www.nj.gov/bpu/</p> <p>GBCA Headquarters: 392 Main Street, Hackensack, NJ 07601 201-968-0200 Email: info@greaterbergen.org</p> <p>Weatherization Assistance: 61 Voorhis Lane Hackensack, NJ 07601 (973) 910-2500, Ext. 7122 or 7011 201-488-5100, Ext 5 Email: www.GreaterBergen.org</p> <p>Lead Safe Home 201-488-5100, Ext. 6</p> <p>Winter Termination: November 15 to March 15 Contact utility company and request WTP protection.</p>

COMFORT PARTNERS

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
<p>Energy conservation program to lower natural gas & electric bills through energy education and installation of energy saving home improvements. Program representatives will work with each household to evaluate current level of energy efficiency to reduce household energy consumption.</p>	<p>Household income limits: (1) \$39,125/yr. (\$3,260/mo.) (2) \$52,875/yr. (\$4,406/mo.)</p> <p>Households that do not meet income guidelines can also apply if they receive benefits from the following programs: LIHEAP, Lifeline, PAAD, Section 8 Housing, SSI, TANF, USF, Medicaid, SNAP (Food Stamps) or GA.</p>	<p>Call 1-866-378-4345 or visit online: www.njcleanenergy.com/cp</p>	<p><u>Energy efficiency upgrades</u>: water saving devices, light bulbs, pipe insulation, insulation, weather-stripping, caulking, appliances, water heaters and heating and cooling equipment. <u>Health & Safety</u>: Carbon monoxide and smoke detectors, mold and moisture remediation, minor roof repairs, plumbing and dryer venting, gas leak repair</p>

NJ SHARES

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
<p>Financial assistance during unexpected circumstances and temporary financial crisis. Programs assist with energy, water, and telephone bills. NJ SMART program, provides one-time payments for rent, taxes, and mortgage assistance.</p>	<p><u>NJBPU PAGE & NJ SHARES SMART</u> Income limits for <u>household</u> size: 1-\$6,652/mo. 2-\$8,699/mo.</p> <p><u>NJ SHARES Energy Assistance Grant</u> Income limits: 1-\$5,216/mo. 2-\$7,050/mo.</p>	<p>New Jersey SHARES 4 Walter E. Foran Boulevard, Suite 105 Flemington, NJ 08822</p> <p>http://www.njshares.org</p> <p>1-866-657-4273</p>	<p>Must first apply for LIHEAP and/or USF and provide a determination letter. Those who are over-income for LIHEAP/USF, may be eligible for NJS Energy Assistance. A "good faith" payment of up to \$100 may be required within 90 days prior to applying. Applications accepted year-round (while funds are available).</p>

LIFELINE PHONE

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
Free smartphone and wireless phone service (free data, free monthly minutes and unlimited texting).	<p>Eligibility based on household income below 135% FPL or if enrolled in programs below: 1-\$21,127/yr. (\$1,760/mo.) 2-\$28,552/yr. (\$2,379/mo.)</p> <p>Receive benefits from one of these programs: Medicaid, SNAP (Food Stamps), SSI, Federal Public Housing, Veterans Pension and Survivor's benefit, tribal specific programs</p>	<p>Apply online through the following providers:</p> <p>Assurance Wireless 1-888-321-5880</p> <p>Safe link Wireless 1-800-723-3546</p>	<p>To inquire about other types of phone discounts call:</p> <p>NJ SHARES: 1-866-657-4273</p> <p>USAC Lifeline Support Center: 1-800-234-9473 www.lifelinesupport.org</p>

STATEWIDE RESPITE CARE PROGRAM

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
Provides a short term and intermittent break ("Respite") to unpaid caregivers that includes spouse, family members, neighbor, friend who are responsible for basic daily care. The program offers care recipients services such as home care, companion care, adult day care, campership, or a short stay in a long term care facility. There is also a Caregiver Directed Option for the caregiver to pay for services or items that are reimbursed.	<p><u>Maximum income and resources:</u> Single: \$34,812 yr. (\$2,901/month) Resources: \$40,000; Married: \$69,624 yr. (\$5,802/month) Resources: \$60,000</p> <p>Care recipients are either a frail elderly adult or disabled individual that is 18 or over and resides in the community. Individuals must have a caregiver that provides daily care. The care recipient must not be on Medicaid or receiving home care services through other programs such as JACC, MLTSS, VA Aid & Attendance, etc.</p>	<p>Apply for Statewide Respite Services by calling Bergen County Division on Disability Services: 201-336-6503 OR 201-336-6506</p>	<p>Income is assessed on a sliding scale. Cost share begins at income level:</p> <p>\$1,402/month for single \$2,804/month for a couple.</p>

Managed Long Term Services and Support (MLTSS)

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
<p>Medicaid waiver program that provides access to a range of services at home in the community or in a long term care facility.</p> <ul style="list-style-type: none"> *Home Care *NJ Family Care Plan A Benefits *Care Management *Home and Vehicle Modifications *Home Delivered Meals *Respite *Personal Emergency Response *Mental Health *Assisted Living *Nursing Home Care 	<p>Must meet financial, clinical (nursing facility level of care), age or disability requirements. Must be 65 years or older or determined disabled by the Social Security Administration or the State of New Jersey. Must be a U.S. Citizen or meet immigration status.</p> <p><u>MLTSS</u> Monthly income limit: \$2,901/month Countable resource limit: \$2,000</p> <p>Community Spouse Resource Allowance (CSRA) allows a greater portion of the couple's assets to be protected for the non-applicant spouse. The minimum CSRA is \$31,584 and the maximum CSRA is \$157,920.</p> <p>If income exceeds \$2,901 then there is the option to set up a Qualified Income Trust (QIT). Qualified Income Trusts</p>	<p>For information and screening process call Division of Senior Services/ADRC: 201-336-7400</p> <p>Financial screening process: Board of Social Services 201-368-4200 www.bcbss.com</p>	<p>Managed Care Organization (MCO's) administers and coordinates MLTSS services.</p> <p><u>Managed Care Organizations:</u> <u>Aetna Better Health</u> 1-855-232-3596 <u>WellPoint</u> 1-855-661-1996 <u>Horizon NJ Health</u> 1-844-444-4410 <u>United Healthcare</u> 1-800-941-4647 <u>Fidelis Care</u> 1-855-642-6185</p> <p>Enroll in a Medicaid MCO contact NJ Family Care : 1-866-472-5338 1-800-701-0710</p> <p><u>BG Unit:</u> (Institutional Medicaid) 201-368-7667 Fax: 201-368-4772</p>

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

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
<p>Provides health insurance for low income individual 65 years of age and over, blind or disabled. Program pays for hospital services, healthcare needs, doctor visits, prescriptions.</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: Single: \$15,650 yr. (\$1,304/month) Married: \$21,150 yr. (\$1,763/month)</p> <p>Maximum allowable resources for : Single: \$4,000; Married: \$6,000</p>	<p>Online applications are encouraged www.bcbss.com Printable applications are also available on this site. Mail completed Medicaid ABD application with copies of required verification or visit agency.</p> <p>Board of Social Services 218 Route 17 North Rochelle Park, NJ 07662 8 am thru 4:30 pm weekdays</p>	<p>NJ Family Care: 1-800-701-0710</p> <p>Medical Assistance Customer Center: 862-338-9890</p> <p>Bergen County Board of Social Services Tel: 201-368-4200</p> <p>Report changes in circumstance https://bcbss.com/report-change/</p> <p><u>AA Unit:</u> New and Ongoing ABD Medicaid 201-368-7693 Fax: 201-368-4337</p>

JERSEY ASSISTANCE FOR COMMUNITY CAREGIVING (JACC)

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
<p>JACC program provides home care and other community based services to seniors at risk of placement in a nursing facility. JACC is designed to supplement the cost and assistance that is provided by the caregiver. The service package provided is based on a clinical assessment of the JACC participants' activities of daily living (ADL) needs, collaboration with a care manager to set up a care plan, availability of services and funding. JACC participants' have the option to choose their own service providers such as a family member to become the paid caregiver. JACC services are limited to \$1,156 per month or \$13,872 per year.</p>	<p>New Jersey resident age 60 and older that:</p> <ul style="list-style-type: none"> • Requires a nursing facility level of care and choose to remain at home. • Cannot be participating in other state funded programs such as Medicaid or Medicaid Waiver Services • Meets immigration status and financial guidelines <p><u>Single:</u> \$4,760/month Maximum resources: \$40,000</p> <p><u>Married:</u> \$6,433/month Maximum resources: \$60,000</p>	<p>Division of Senior Services/ADRC: 201-336-7400 for information and an initial screening.</p>	<p>Participants of JACC have a co-pay that is determined by an income-based sliding scale and standard medical deductions.</p> <p>The JACC program may have a wait list.</p>

PROPERTY TAX RELIEF PROGRAMS

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
<p><u>PROPERTY TAX REIMBURSEMENT (SENIOR FREEZE)</u> Provides tax relief for homeowners. The “Senior Freeze” program reimburses eligible senior citizens and disabled persons for property tax or mobile home park site fee increases on their principal residence. The program covers the property tax that is increased after you become eligible, effectively “freezing” your tax amount at a base level.</p>	<ul style="list-style-type: none"> • Must be 65 years of age or older or receiving Social Security Disability benefits on or before December 31, 2023 • Owned and lived in your home since December 31, 2020, or earlier and still owned and lived in your home on December 31, 2024 • Property is subject to taxes • Meet the total combined income limits: (Single/Married/Civil Union): <u>2023: \$163,050</u> <u>2024: \$168,268</u> 	<p>A single combined Property Tax Relief application (2024 PAS-1 Form) will be mailed to eligible residents. This single application allows you to apply for the PTR (Senior Freeze), ANCHOR, and Stay NJ programs simultaneously.</p> <p>Print application and online filing: Property Tax Relief</p>	<p>Application deadline is October 31, 2025</p> <ul style="list-style-type: none"> • For those with life tenancy, a copy of an official document must be included with application. Life Tenancy means you are considered the owner of the property. • There is a one-time exception for income increase in order to retain the base year.
<p><u>Affordable New Jersey Communities for Homeowners and Renters (ANCHOR)</u> Provides property tax relief for eligible homeowners and renters.</p>	<p>NJ resident who owned, occupied and taxes were paid on <u>principal</u> residence on October 1, 2024.</p> <p>Homeowner’s income in 2024 was \$250,000 or less.</p> <p>NJ resident renters should have name on lease, paid rent and gross income was \$150,000 or less.</p>	<p>A single combined Property Tax Relief application (2024 PAS-1 Form) will be mailed to eligible residents. This single application allows you to apply for the PTR (Senior Freeze), ANCHOR, and Stay NJ programs simultaneously.</p> <p>nj.gov/treasury/taxation/anchor</p>	<p>Application deadline is October 31, 2025</p> <p>Gross income can be located on your NJ-1040 Line 29 tax return. If you were not required to file a 2024 New Jersey Income Tax return, report zero as your gross income</p>
<p><u>Stay NJ Property Tax Credit</u> Provides property tax relief for eligible homeowners aged 65 and older. It reimburses 50% of property tax bills, up to \$13,000, with a 2024 benefit cap of \$6,500.</p>	<p>Eligibility Requirements:</p> <ul style="list-style-type: none"> • Must be 65 years or older as of December 31, 2024 • Owned and lived in the home for the entire year of 2024 • Income below \$500,000 • Not available for mobile homeowners 	<p>A single combined Property Tax Relief application (2024 PAS-1 Form) will be mailed to eligible residents. This single application allows you to apply for the PTR (Senior Freeze), ANCHOR, and Stay NJ programs simultaneously.</p> <p>Property Tax Relief Hotline: 1-888-238-1233</p>	<p>Application deadline is October 31, 2025</p> <ul style="list-style-type: none"> • Benefits are calculated after ANCHOR and Senior Freeze benefits. • Payments expected in early 2026

For inquires and assistance with property tax relief contact:

- Hotline 1-888-238-1233
- Schedule telephone assistance: <https://www.nj.gov/treasury/taxation/contact.shtml>
- For In-Person Tax Assistance Visit
Fair Lawn Regional Information Center
NJ Division of Taxation
22-08 Route 208 South, Fairlawn, NJ 07410

ADDITIONAL PROPERTY TAX BENEFITS

Senior Citizens or Disabled Persons Property Tax Deduction:

Annual deduction of up to \$250 from property tax for homeowners that are 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. 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. Check with your municipality about necessary forms.

Deductions, exemptions and abatements: <https://www.state.nj.us/treasury/taxation/lpt/lpt-deductions.shtml>

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 (\$1,304-\$2,608) Married (\$1,762- \$3,525)** 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

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