

COUNTY OF BERGEN DEPARTMENT OF HUMAN SERVICES DIVISION OF SENIOR SERVICES/ADRC One Bergen County Plaza • 2nd Floor Hackensack, NJ 07601 (201) 336-7400 • FAX: (201) 336-7424

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# Quick Guide to State, Federal and County Programs for Older Adults

Updated November 2018

#### PHARMACEUTICAL ASSISTANCE TO THE AGED AND DISABLED (PAAD)

| Co-pay is \$5.00 for generic drug   Must be NJ resident for at least 30 days.   For further details and an   |   |
|--|---|
| & \$7.00 for brand name drug.<br>Must also enroll in a Medicare<br>Part D plan unless otherwise<br>specified. The plan should have<br>a monthly premium not above<br>the regional benchmark andMust be 65 or older OR receiving Social<br>Security Disability.<br>*Gross annual income limit is less than:<br>Single: \$27,189 (\$2,265 mo.*)<br>Married: \$33,334 (\$2,777 mo.*)application contact Division of<br>Senior Services at<br>201-336-7400, local<br>pharmacy or PAAD/Senior<br>Gold 1-800-792-9745<br>Or www.aging.nj.gov_forPA<br>PA<br>PA<br>PA | PAAD/Senior Gold<br>PO Box 637<br>Frenton, NJ 08646-0637<br>www.njpaad.gov<br>PAAD does not pay for diabetic<br>esting supplies |

#### SENIOR GOLD PRESCRIPTION DISCOUNT PROGRAM

| WHAT IT DOES                      | ELIGIBILITY REQUIREMENTS              | HOW TO APPLY                        | COMMENTS                              |
|-----------------------------------|---------------------------------------|-------------------------------------|---------------------------------------|
| Co-pay is \$15 plus 50% of the    | Must be a NJ resident for at least 30 | For further details and an          | Co-pay is \$15 after annual           |
| remaining cost of the             | days, 65 years or older or receiving  | application contact Division of     | out-of-pocket expenses                |
| prescription or actual drug cost, | Social Security Disability.           | Senior Services at                  | reaches catastrophic cap:             |
| whichever is less. Must enroll in | *Gross annual income between:         | 201-336-7400, local                 | S: \$2,000 ; C:\$3,000                |
| a Medicare Part D plan unless     | Single:\$27,189 and \$37,189          | pharmacy or PAAD/Senior             | www.njsrgold.gov                      |
| otherwise specified AND also pay  | (\$2,265 - \$3,099 mo.*)              | Gold 1-800-792-9745                 | Does not pay for diabetic             |
| for Medicare Part D monthly       | Married: \$33,334 and \$43,334        |                                     | testing supplies                      |
| premium.                          | <b>(</b> \$2,777- \$3,611mo.*)        |                                     |                                       |
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\*NOTE: Gross income includes Social Security & Monthly income approximate

## MEDICARE PRESCRIPTION DRUG BENEFIT

| WHAT IT DOES  | ELIGIBILITY REQUIREMENTS  | HOW TO APPLY   | COMMENTS  |
|---|---|--|---|
| Medicare Part D is an<br>optional program which adds<br>prescription drug coverage to<br>original Medicare.<br>Involves monthly premiums,<br>Co-pay and may include<br>annual deductible.<br>Plans run on a calendar year<br>and cover about 75% of drug<br>costs until cap level is<br>reached. Any further drug<br>costs for the remainder of the<br>year will be out-of-pocket<br>unless one reaches a<br>catastrophic level then there<br>will be either a flat or<br>5% co-pay | Must be enrolled in Medicare, either<br>Part A or Part B. There is a penalty for<br>late enrollment for those who choose<br>not to join Medicare Part D when first<br>eligible. Those who have been<br>determined to have creditable coverage<br>may not need to enroll.<br>PAAD participants and dual eligible<br>(Medicare/Medicaid) must enroll in a<br>Medicare Part D benchmark plan. For<br>PAAD participants, Rx deductibles, cap<br>limit, gap coverage and premium do not<br>apply. Dual eligible have premium free<br>but mandatory low rate co-pay | Annual open enrollment<br>period begins October 15 <sup>th</sup> to<br>December 7th<br>For more information and to<br>research plans call:<br>SHIP (State Health Insurance<br>Program) 201-336-7413<br>or contact Medicare<br>1-800-MEDICARE | Check creditable coverage<br>statements before enrolling in<br>any Medicare Part D plan.<br>Those with Medicare Part C<br>must choose the drug<br>component of that<br>Advantage Plan. For plans<br>w/out Rx coverage do not<br>enroll in a Medicare Part D<br>"stand alone" plan.<br>The Medicare Part D<br>benchmark premium for NJ in<br>2019 is \$37.16<br>www.medicare.gov |

### MEDICARE COSTS (2019)

| <u>Medicare Part A</u> : Hospital<br>insurance helps pay for<br>inpatient hospital care and<br>certain follow-up services<br><u>Medicare Part B</u> : Medical<br>insurance helps pay for<br>physician services,<br>outpatient hospital care<br>and other medical services<br><u>Medicare Part C</u> : Medicare<br>Advantage Plans<br>All Medicare covered health<br>care services through a<br>provider network plan. | Medicare is health insurance for people<br>age 65 or older and eligible for Social<br>Security benefits based on their own or<br>their spouse's employment and for<br>those with disabilities and permanent<br>kidney damage.<br>Medicare covers about 80% of your<br>allowable medical expenses after<br>deductible is met.<br>www.medicare.gov | Part A Inpatient Hospital<br>Stay Deductibles per benefit<br>period:<br>1-60 days \$1,364 deductible<br>61-90 days \$341 per day<br>91-150 is \$682 per day<br>( <i>lifetime reserve days</i> )<br>Part A Skilled Nursing Facility:<br>*Coinsurance<br>Days 1-20: \$0<br>Covered in full for the first 20<br>days after a minimum 3-day<br>qualifying hospital stay<br>Days 21- 100: \$170.50/day | Part B Medical Insurance:<br>Standard monthly premium \$135.50<br>Part B premiums may be higher<br>based on income related monthly<br>adjusted amount (IRMAA).<br>Beneficiaries that were 'held<br>harmless" for Part B increase in<br>previous years will have an increase.<br>*Annual Deductible: \$185/yr.<br>Medicare Rights Center for appeals:<br>1-888-466-9050 |
|---|--|---|--|
|---|--|---|--|

## HEARING AID ASSISTANCE TO THE AGED AND DISABLED (HAAAD)

| WHAT IT DOES   | ELIGIBILITY REQUIREMENTS   | HOW TO APPLY                      | COMMENTS   |
|--|--|-----------------------------------|--|
| Gives \$100.00 toward<br>the purchase of a<br>hearing aid. | Income eligibility requirements are<br>the same as for the PAAD program.<br>Income limits are less than:<br>Single: \$27,189 (\$2,265 mo.)<br>Couple: \$33,334 (\$2,777 mo.) | 1-800-792-9745<br>Or 201-336-7400 | *Must be currently enrolled in the PAAD<br>program. Then complete a HAAAD<br>application with a hearing aid receipt<br>and a written statement attested by a<br>physician. |

| WHAT IT DOES   | ELIGIBILITY REQUIREMENTS  | HOW TO APPLY   | COMMENTS  |
|--|---|--|---|
| WHAT IT DOES<br>Benefit used to<br>purchase food at<br>authorized retail<br>food stores. | 185% of Federal Poverty Level:<br>Family size:<br>(1) \$1,872/mo.<br>(2) \$2,537/mo.<br>Resource limit is \$3,000 for 60 years of<br>age and older.<br>You can own a home and qualify. Life | Following are websites to<br>apply online:<br>www.njhelps.org<br>www.bcbss.com<br>https://oneapp.dhs.state.nj.us<br>There are also outreach<br>centers throughout Bergen | Note Well: Income limits vary. Elderly or<br>disabled member may be eligible for<br>Food Stamps even if the gross<br>monthly income exceeds the income<br>eligibility because medical and shelter<br>deductibles are applied<br>NJ SNAP Hotline: 1-800-687-9512<br>Board of Social Services |
|  | Insurance policies and most pension funds are not counted at all.   | County where you can apply.<br>Home visits can be arranged<br>if you are disabled and/or<br>homebound.   | 218 Route 17 N. Rochelle Park,<br>New Jersey 07662<br>Tel: 201-368-4200<br>Hours: M-Fri. 8am to 4:30 pm<br>(Tues. until 8:00 pm)  |

### 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<br>Medicare Part A, B & C<br>premiums, deductibles<br>and co-pay.<br>Covers the of cost of<br>Part D premiums up to<br>benchmark amount with<br>LIS Level 1 co-pay. | Aged, Blind and Disabled, Medicare<br>(A & B) beneficiaries.<br>Max. Annual Gross Income:<br>\$12,140 yr. (\$1,012/mo.) for Single<br>\$16,460 yr. (\$1,372/mo.) for Couple<br><u>Resources</u> : Single - \$7,560<br>Couple - \$11,340 | State of New Jersey<br>Division of Aging Services<br>1-800-792-9745 | 100% FPL (Federal Poverty Level) +<br>income disregard.<br><u>*Income disregard</u> : Add \$20 to the<br>monthly amount. If receiving income<br>from employment, \$65/month plus<br>one-half of remainder of gross salary is<br>not counted).<br>LIS also allows additional assets of \$1,500<br>per person if assets are to be used for<br>burial expenses. |

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

| WHAT IT DOES   | ELIGIBILITY REQUIREMENTS   | HOW TO APPLY  | COMMENTS   |
|--|--|---|--|
| SLMB<br>Pays for Medicare Part B<br>premiums. Pays for Part C<br>& Part D premium up to<br>benchmark amount.<br>Individuals with LIS only<br>have LIS Level 1 copay.<br>Part D deductible is<br>covered. | <u>Single</u> : Between \$12,140 yr.<br>(\$1,012/mo.) and \$14,568 yr.<br>(\$1,214/mo.)<br><u>Couple</u> : Between \$16,460 yr.<br>(\$1,372/mo.) and \$19,752 yr.<br>(\$1,646/mo.)<br><u>Resources</u> : Single - \$7,560<br>Couple- \$11,340            | State of New Jersey<br>Division of Aging Services<br>1-800-792-9745 | SLMB income is between 100% to<br>120% FPL + income disregard.<br>See explanation for income disregard<br>above (QMB- Only)      |
| SLMB-QI-1<br>Covers the cost of<br>Medicare premiums Same<br>benefit as SLMB but<br>income eligibility guidelines<br>are higher.   | Single: Between \$14,568 yr.         (\$1,214/mo.) and \$16,389 yr.         (\$1,366/mo.)         Couple: Between \$19,752 yr.         (\$1,646/mo.) and \$22,221 yr.         (\$1,852/mo.)         Resources: Single - \$7,560         Couple- \$11,340 | State of New Jersey<br>Division of Aging Services<br>1-800-792-9745 | SLMB-QI-1 income is between 120%<br>to 135% FPL + income disregard.<br>*See explanation for income<br>disregard above (QMB-Only) |

# SOCIAL SECURITY

| WHAT IT DOES  | ELIGIBILITY REQUIREMENTS   | HOW TO APPLY   | COMMENTS  |
|---|--|--|---|
| Source of income after<br>retirement, for the disabled,<br>survivors of workers who<br>have died and dependents<br>of beneficiaries | Most people need 40 credits (10 years<br>of work) to qualify for benefits. Younger<br>people need fewer credits to be eligible<br>for disability benefits or for survivor's<br>benefits when the worker dies. Receive<br>full benefit amount when choosing to<br>retire when one reaches full retirement<br>age. Reduced benefits if one retires<br>before full retirement age.<br>Full retirement age for those born<br>between 1943-1954 is 66;<br>1960 and later is 67.<br>*Social Security and Supplemental<br>Security Income (SSI) beneficiaries<br>receive a 2.0 percent Cost-of-Living<br>Adjustment (COLA) for 2018 | Contact Social Security from<br>7 a.m. to 7p.m.<br>MonFri. 1-800-772-1213,<br>TTY 1-800-325-0778<br>Social Security<br>Continental Plaza,<br>401 Hackensack Ave,<br>Second FI.<br>Hackensack, NJ 07601<br>Office Hours;<br>M, Tue; Thurs; Fri : 9-4pm<br>Wed. 9-12pm | <ul> <li>Set up a <i>my</i> social security account online <u>www.ssa.gov</u> and get access to the following:</li> <li>Get a benefit verification letter</li> <li>Request replacement Social Security and Medicare card</li> <li>Change of address and phone number</li> <li>And more</li> </ul> |

### SUPPLEMENTAL SECURITY INCOME (SSI)

| WHAT IT DOES  | PAYMENT   | HOW TO APPLY   | COMMENTS  |
|---|---|--|---|
| Provides payments to<br>persons who are 65 or older,<br>blind or disabled and have<br>limited income and<br>resources. Must meet<br>requirements under<br>Citizen/Non-Citizen Status. | Combined federal and state maximum<br>payment for individual/couple living<br>alone or with others in own household:<br><u>Individual</u> : \$781/month<br><u>Couple</u> : \$1,150/month<br>Resources you own must be less than:<br><u>Single</u> : \$2,000<br><u>Couple</u> :\$3,000 | Call Social Security Administration at<br>1-800-772-1213<br><u>www.ssa.gov</u> | Value of home and car is not counted. SSI may<br>also not count the value of certain resources<br>such as a burial plot.<br>Payments are determined by your living<br>situation and if you have other income<br>or support. |

# Low-Income Home Energy Assistance Program (2018-2019)

| WHAT IT DOES  | ELIGIBILITY REQUIREMENTS   | HOW TO APPLY  | COMMENTS   |
|---|--|---|--|
| <u>Universal Service Fund (USF)</u><br>Receive credit on utility bill for gas & electric.   | USF:<br>*Gross income limits for a household<br>(1) \$21,252/yr. (\$1,771/mo.)<br>(2) \$28,812/yr. (\$2,401/mo.)<br>Income must be below 175% FPL & pay<br>more than 3% of annual income for<br>electric & natural gas. Household with<br>electric heat must spend more than 6%<br>of annual income on electricity | Greater Bergen Community<br>Action, Inc.<br>316 State St.<br>Hackensack, NJ 07601<br>201-488-5100 ext. 7008<br>Fax: 201-342-7452<br><u>Intake hours</u> :<br>M/W/TH 8:30 am-3pm.<br>End of November has extended  | Application for programs is<br>from October 1 <sup>st</sup> thru<br>August 30th<br>Note:<br>The USF program accepts<br>application all year.<br>PSE&G CSC<br>214 Hudson Street |
| Heating:<br>Must be responsible for directly paying your own<br>heat. This also applies to heat included in rent<br>Cooling<br>Benefit is \$200 and applicant must have a<br>medical condition that requires the use of any<br>cooling device.<br>Winter Termination:<br>Provides protection from having your gas and/or<br>electric shut-off from Nov. 15 <sup>th</sup> - March 15 <sup>th</sup><br>(Program may continue past March 15 if cold<br>weather persists) Winter Termination Program<br>applies to those households who receive NJ<br>Lifeline credit, PAAD, LIHEAP, SSI, NJ<br>SHARES,U.S.F.,GA,TANF or unable to pay<br>because of circumstances beyond your control.<br>Weatherization:<br>The weatherization program lowers<br>heating cost through home improvement<br>for heat loss due to poor insulation or<br>inefficient heating system. Repairs such as faulty<br>windows and doors, install high efficiency<br>insulation, repair or replace boilers, furnaces, | Heating, Cooling, Winter Termination,<br>Weatherization:<br>*Gross income limits for a household<br>size:<br>(1) \$24,288 yr. (\$2,024/mo.)<br>(2) \$32,928 yr. (\$2,744/mo.)<br>Entire household is counted for all<br>programs. Income must be below<br>200% of FPL.   | hours on Thursday's<br>8:30 am-7:00 pm<br>Closed Tuesday and Friday<br>Homebound and disabled may<br>request an outreach specialist<br>to visit for assistance with<br>application<br><u>Weatherization office</u> :<br>99 Passaic St.<br>Garfield, NJ 07026<br>For information call:<br>973-546-1441 | 214 Hudson Street<br>Hackensack<br>1-800-357-2262<br><u>NJ Board of Public Utilities</u><br>1-800-624-0241<br>www.bpu.state.nj.us<br>www.greaterbergen.org                     |

## LIFELINE UTILITY CREDIT PROGRAM

| WHAT IT DOES                                    | ELIGIBILITY REQUIREMENTS  | HOW TO APPLY                              | COMMENTS  |
|---|---|---|---|
| Gives a \$225 credit<br>per year on your Public | Income eligibility requirements are the same as for the PAAD program. | Call PAAD/Lifeline<br>1-800-792-9745 Or   | If utilities are included in your rent, you may receive a direct payment. Credit is |
| Service bill.                                   | Single: \$27,189 (\$2,265 mo.*)<br>Couple: \$33,334 (\$2,777 mo.*)    | Division of Senior Services 201- 336-7400 | given to everyone at different times during the year.                               |

## COMFORT PARTNERS

| WHAT IT DOES  | ELIGIBILITY REQUIREMENTS   | HOW TO APPLY          | COMMENTS  |
|---|--|-----------------------|---|
| Assists to lower  | 225% FPL income limits for a household   | Call 1-888-773-8326   | Program representatives will  |
| natural gas & electric<br>bills through energy<br>education and<br>installation of energy | size:<br>(1) \$27,315/yr. (\$2,276/mo.)<br>(2) \$37,035/yr. (\$3,086/mo.)        | www.njcleanenergy.com | work with each household to evaluate current level of energy efficiency |
| saving home<br>improvements   | Households that receive USF, SSI, HEAP,<br>Lifeline, and PAAD are also eligible. |                       |   |

# VERIZON COMMUNICATIONS LIFELINE

| WHAT IT DOES                 | ELIGIBILITY REQUIREMENTS                  | HOW TO APPLY              | COMMENTS                             |
|------------------------------|---|---------------------------|--------------------------------------|
| Provides discount on local   | Receive benefits from one of these        | For information and       | Send a copy showing proof of         |
| telephone service. Three     | programs: Medicaid, SNAP                  | applications call:        | current benefit to enroll in program |
| rate options for local       | (Supplemental Nutrition Assistance),      | NJ SHARES 1-888-337-3339  | & also for re-certifications         |
| service are (Flat, Moderate, | SSI, Sec 8, Veterans Pension, Veterans    | www.njshares.org          |                                      |
| Low rate).                   | Survivors Pension or eligibility based on | OR                        | Universal Service Administration     |
| Link Up America gives new    | income (see below)                        | VERIZON 1-800-837-4966    | Company (USAC) administers           |
| customers a 50% discount     | <u>OR</u>                                 | www.verizon.com/lifeline  | Lifeline for the FCC                 |
| on initial connection        | Below 135% FPL                            | OR                        | 1-888-641-8722                       |
|                              | Household:                                | Division of Senior        | www.LlfelineSupport.org              |
|                              | 1-\$16,389/yr. (\$1,366/mo.)              | Services/ADRC             |                                      |
|                              | 2- \$22,221/yr. (\$1,852/mo.)             | (201)-336-7400            |                                      |
|                              |   |                           |                                      |
|                              |   | Fax Application to:       |                                      |
|                              |   | NJ SHARES: 1-609-883-0133 |                                      |

#### NJ SHARES

| WHAT IT DOES  | ELIGIBILITY REQUIREMENTS  | HOW TO APPLY   | COMMENTS  |
|---|---|--|---|
| Assists individuals and families<br>who need help paying energy<br>bills due to a temporary<br>financial crisis or behind on<br>their energy bill. Grant amounts<br>can be up to \$700 for gas and<br>\$500 for electric. | Not eligible for LIHEAP, USF, TRUE or<br>PAGE programs.<br>Eligibility for seniors 65 and older and<br>applicants receiving SSD with one or<br>two household members are as follows:<br>Maximum household income:<br>\$70,000/yr.<br>\$5,833/month. | Can demonstrate a<br>temporary financial need.<br>Assistance for those who<br>made a "good faith" payment<br>of \$100 or more within 90<br>days prior to applying.<br>Call NJ SHARES<br>866-657-4273 to locate<br>nearest agency<br>www.njshares.org | Application for NJ SHARES<br>available all year.<br><b>Water bill</b> assistance also<br>available:<br><u>Suez Water Cares</u> :<br>888-942-8080<br><u>NJ American Water's Assistance</u><br><u>Program</u><br>800-272-1325 |

|   | PAGE (Payment Assistance   |   |  |
|---|--|---|--|
| WHAT IT DOES  | ELIGIBILITY REQUIREMENTS   | HOW TO APPLY  | COMMENTS   |
| Assist with electric and natural<br>gas bills for those facing a crisis<br>situation and economic<br>hardship | Income guideline as of October 2017:<br><u>Household size Minimum to Maximum</u> :<br>(1) \$24,132 - \$57,307<br>(2) \$32,496 - \$74,940<br>Liquid assets below 10,000<br>Must meet program requirements such<br>as providing payment history, 45 days<br>or more past due balance and/or<br>received a shut-off notice. Also not have<br>received USF benefit within last 6<br>months and LIHEAP benefits within the<br>current heating season. | May apply at nearest service<br>center:<br>Greater Bergen Community<br>Action, Inc.<br>316 State St. Hackensack,<br>NJ 07601<br>201-488-5100<br>Online applications<br>available OR print and<br>download application:<br><u>www.njpoweron.org</u><br>Mail to:<br>59 Broad St.<br>Eatontown, NJ 07724 | The Affordable Housing Alliance<br>(AHA) is the administrator for<br>the PAGE program and funded<br>by the Board of Public Utilities<br>(BPU).<br>For additional information call:<br>732-982-8710 |

#### PAGE (Payment Assistance for Gas & Electric)

| New Jersey Care Special Medicaid Program for ABD (Aged, Blind, Disabled) | New Jersey Care Special Medicaid Prog | ram for ABD (Aged, Blind, Disabled) |
|--|---------------------------------------|-------------------------------------|
|--|---------------------------------------|-------------------------------------|

| WHAT IT DOES   | ELIGIBILITY REQUIREMENTS  | HOW TO APPLY  | COMMENTS  |
|--|---|---|---|
| Full Medicaid coverage pays for physician in office, hospital  | Persons 65 years of age or older,blind or permanently disabled who may not  | Board of Social Services<br>218 Route 17 N. Rochelle  | NJ Care Medicaid ABD<br>Single: \$1,012/mo. \$12,140 yr. \$4,000                |
| or nursing home or other medical facility & cost of  | be eligible for SSI.  | Park, New Jersey 07662<br>Tel: 201-368-4200           | Couple: \$1,372/mo. \$16,460 yr. \$6,000  |
| prescribed drugs, eye glasses,<br>dentists, podiatrist, mental<br>health service, ambulance<br>services, hospice, and home | Maximum gross income:<br>S- \$12,140 yr. (\$1,012/month)<br>C-\$16,460 yr. (\$1,372/month)<br>Maximum allowable resources for : | Hours: M-Fri. 8am to 4:30<br>pm (Tues. until 8:00 pm) | Institutional Medicaid<br>Max. Income Limit : \$2,250<br>Max Resources: \$2,000 |
| health care.   | Single: \$4,000; Couple: \$6,000  | www.bcbss.com   | Medicaid District office at<br>973-977-4077                                     |

## Managed Long Term Services and Support (MLTSS)

| WHAT IT DOES                   | ELIGIBILITY REQUIREMENTS                | HOW TO APPLY                        | COMMENTS                                   |
|--------------------------------|---|-------------------------------------|--|
|                                | •                                       |                                     |  |
| M.L.T.S.S. uses NJ Family care | Must meet financial, clinical, age      | For information and                 | Beginning July 1, 2014 participants in the |
| MCO's (Managed Care            | and/or disability requirements.         | screening process call              | Medicaid waiver programs: Global Options   |
| Organization) to coordinate    | Must be 65 years of age and older OR    | Division of Senior Services         | (GO); AIDS Community Care Alternative      |
| acute and primary health care  | 21 -64 yrs. old and determined disabled | ADRC 201-336-7400                   | Program (ACCAP); Community Resource for    |
| services in the community and  | by SSA or by Disability Review Section- | Financial screening:                | People with Disabilities (CRPD) and        |
| long term care facility.       | Division of the Medical Assistance and  | Board of Social Services at         | Traumatic Brain Injury (TBI) were          |
|                                | Health Services-NJDHS. Must be a U.S.   | 201-368-7667                        | automatically enrolled in MLTSS program    |
|                                | Citizen or a Qualified Alien.           | www.bcbss.com                       | through their current MCO or health plan.  |
|                                | <u>M.L.T.S.S.</u>                       |                                     | www.nj.gov/humanservices/dmahs/home        |
|                                | Max. monthly income S: \$2,250          | Managed Care Organizations:         | /mltss.html                                |
|                                | Max. Resource: \$2,000                  | <u>Aetna</u>                        |  |
|                                |   | 1-855-232-3596                      |  |
|                                | *If income is above \$2,250 then can    | Amerigroup NJ                       | To enroll in a Medicaid MCO :              |
|                                | apply for Qualified Income Trust (QIT)  | 1-800-600-4441                      | 1-866-472-5338                             |
|                                |   | Horizon NJ Health                   |  |
|                                | **The maximum assets can be higher      | 1-877-765-4325<br>United Healthcare |  |
|                                | for applicant that is married or for a  | 1-800-941-4647                      |  |
|                                | married couple that are both applying.  | Wellcare 1-888-453-2534             |  |
|                                |   |                                     |  |

| WHAT IT DOES<br>JACC provides in-home<br>services to seniors at risk of<br>placement in a nursing | ELIGIBILITY REQUIREMENTS<br>365% of Federal Poverty Level<br>S-(\$3,694/mo.) C-(\$5,008/mo.)  | HOW TO APPLY<br>For information and<br>screening process<br>call Division of | Participants in JAC<br>sliding scale based<br><b>Co-Pay 2018</b>  | COMMENTS<br>C share in the cost<br>I on income.                            | of their care on a |
|---|---|--|---|--|--------------------|
| facility. JACC services are   | A New Jersey resident age 60 and  | Senior Services:   | Individual  | Couple   | Co-pay Amnt.       |
| designed to supplement help   | older who:  | 201-336-7400   | \$0\$1,346  | \$0-\$1,825  | \$0.00             |
| given by the caregiver.   | *Requires a nursing facility level of   |  | \$1,347-\$1,771   | \$1,826 -\$2,401   | \$15.00            |
|   | care but wishes to remain at home.  |  | \$1,772-\$2,277   | \$2,402 -\$3,087   | \$30.00            |
|   | * Is not financially eligible for   |  | \$2,278-\$2,783   | \$3,088-\$3,773  | \$60.00            |
|   | Medicaid or Medicaid Waiver Services.   |  | \$2,784-\$3,289   | \$3,774-\$4,459  | \$90.00            |
|   |   |  | \$3,290-\$3,694   | \$4,460-\$5,008  | \$120.00           |
|   | <ul> <li>*Has resources at or below \$40,000 for an individual or \$60,000 for a couple.</li> <li>* Meet requirements under Citizen/Non-Citizen Status</li> </ul> |  | Cost cap in service<br>annually. There is o<br><u>Standard medical o</u><br>Individual \$222 Co<br><u>Monthly income lin</u><br>Individual- | currently a wait list<br><u>deductions</u> :<br>puple \$430<br><u>nits</u> | for JACC.          |

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

#### HOMESTEAD BENEFIT

| WHAT IT DOES  | ELIGIBILITY REQUIREMENTS  | HOW TO APPLY  | COMMENTS   |
|---|---|---|--|
| Provides property tax relief to<br>eligible homeowners. | You may be eligible for a 2016 New<br>Jersey Homestead Benefit if you were<br>a New Jersey resident that owned and<br>occupied a home in New Jersey that<br>was your <u>principal</u> residence on<br>October 1, 2016 AND property taxes<br>for 2016 were paid on that home AND<br>met the income requirements.<br>Maximum income limits<br>(Single/Married/Civil Union):<br>• \$150,000 for homeowners<br>age 65 or older, blind or<br>disabled<br>• \$75,000 for homeowners<br>under age 65 and not blind or<br>disabled. | File applications<br>online OR<br>by phone<br>1-877-658-2972<br>NJ Homestead<br>Benefit Hotline<br>1-888-238-1233 | <ul> <li>Deadline to File 2016 Homestead Benefit application is November 30, 2018</li> <li>In 2018, most eligible homeowners received their 2015 Homestead Benefit as a credit on their second-quarter property tax bill and will receive additional credit or check in their third- quarter property tax bill.</li> <li>Income eligibility does not include Social Security and any income that is not subject to NJ tax</li> <li>For current eligibility update and due date please refer to NJ Division of Taxation - (Property Tax Relief) www.njtaxation.org</li> </ul> |

| WHAT IT DOES  | ELIGIBILITY REQUIREMENTS   | HOW TO APPLY   | COMMENTS   |
|---|--|--|--|
| Provides tax relief for<br>homeowners by reimbursing<br>the difference between the<br>amount of property taxes paid<br>for the base year and the<br>amount paid for the year you<br>are applying. The base year is<br>the year you first become<br>eligible for the program and<br>you must meet all<br>requirements up to the year<br>you claim reimbursement. | <ul> <li>Total annual income for<br/>PTR-1 (Single/Married/Civil Union) :<br/>2016: \$87,007 or less, and<br/>2017: \$87,268 or less AND <ul> <li>Must be 65 years of age or older<br/>or on Social Security Disability</li> <li>Resident of NJ continuously for<br/>last 10 years as a homeowner or<br/>renter</li> <li>Owned and lived in NJ home for at<br/>least the last 3 years</li> <li>Property taxes should be paid in<br/>full for base year and succeeding<br/>years</li> <li>Meet income limits</li> </ul> </li> </ul> | File PTR-1 or PTR-2<br>application.<br>Form PTR-1 are for first<br>time applicants<br>Form PTR-2<br>Personalized application<br>that are mailed to those<br>who met the eligibility<br>requirements the<br>previous year | <ul> <li>*Filing deadline for 2017 PTR applications<br/>October 31, 2018</li> <li>* For those with life tenancy, a copy of an official<br/>document must be included with application</li> <li>*Mobile homeowners must have paid the full<br/>amount of mobile home park site fees.</li> <li>Tax relief program may be subject to change<br/>according to the state budget. For current<br/>eligibility update and due date please refer to NJ<br/>Division of Taxation -(Property Tax Relief)<br/>www.njtaxation.org</li> <li>Property Tax Reimbursement Hotline:<br/>800-882-6597</li> </ul> |

## PROPERTY TAX REIMBURSEMENT (SENIOR FREEZE)

## **OTHER PROPERTY TAX BENEFITS**

#### NJ Income Tax - Property Tax Deduction/Credit

Homeowners and tenants who pay property taxes, either directly or through rent, on their principal residence in New Jersey may qualify for either a deduction or a refundable credit on their New Jersey resident income tax return. The tax benefit varies depending on the amount of the taxpayer's taxable income, the amount of property taxes or rent paid, and filing status. Refer to the New Jersey Resident Income Tax Return instruction booklet (Form NJ-1040). Homeowners that are 65 or older and/or disabled (or filing jointly with spouse/civil union partner) that are not required to file a tax return will automatically receive their property tax credits when they file a Homestead Benefit application. Tenants and homeowners that are not eligible for Homestead Benefit and are not required to file a tax return can claim credit by completing Form NJ-1040-H.

#### 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 have less than \$10,000 annual income, excluding Social Security income. Benefit is administered by the local municipality.

#### **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. Benefit is administered by the local municipality.

#### Other Property Tax Benefits continued:

#### Property Tax Exemption for Disabled Veterans:

Full exemption from property taxes on a principal residence for certain totally and permanently disabled war veterans and veterans who served in peacekeeping missions and operations. This exemption also applies to the unmarried surviving spouse/civil union/domestic partner. Benefit is administered by the local municipality.

Income Tax Exemption for Veterans : A Veteran who was honorably discharged is eligible for a \$3,000 exemption on their income tax return. This exemption can also be claimed by qualifying Veterans spouse/civil union partner who was honorably discharged. A copy of official documentation must be submitted the first time along with a Veterans Income Tax Exemption Form by mail,online or fax. Further instructions, a list of official documentation and Tax Exemption Submission Form can be found at the following website: <a href="http://www.state.nj.us/treasury/taxation/military/vetexemption.shtml">http://www.state.nj.us/treasury/taxation/military/vetexemption.shtml</a>

\*Claim Forms available online at NJ Division of Taxation (View Property Tax Relief -Other Property Tax Benefits) www.njtaxation.org

New Jersey Division of Taxation: 1-800-323-4400

NJ Division of Taxation Regional Information Center: (Bergen County) 22-08 Route 208 South Fair Lawn, New Jersey 07410 201-791-0500

Frail/Disabled: Person 60+ with Physical/Mental disability,including Alzheimers & Dementia, 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+ (1) exposed to unravorable environmental (living) conditions *OR* (2) person 60+ without social/economic resources to maintain adequate well-being: including low income (100%-200% Federal Poverty level) S (\$1,012-2,024) C (\$1,372-\$2,743) OR (3) language barrier (1<sup>st</sup> language other than English or illiteracy) *OR* (4) isolated (living alone), with no "informal support system" (helping family or friends)

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# **COUNTY OF BERGEN**



James J. Tedesco III County Executive

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