

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 March 2024

PHARMACEUTICAL ASSISTANCE TO THE AGED AND DISABLED (PAAD)

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
Prescription drug co-pay is \$5.00	Must be NJ resident for at least 30 days.	Print applications or apply online	Verify creditable coverage before applying.
for generic drug & \$7.00 for brand	Must be 65 or older OR receiving Social	NJ Save application	
name drug. Medicare beneficiaries	Security Disability.	For additional information and	Mail completed applications to:
must also enroll in a Medicare Part	Gross annual income limit is less than:	assistance contact:	PAAD
D drug plan with monthly premium	Single: \$52,142 (\$4,345 month)	Division of Senior Services/ADRC	Revenue Processing Center
not above the regional benchmark.	Married: \$59,209 (\$4,934 month)	201-336-7400 Or PAAD	PO Box 637
Medicare Advantage participants		1-800-792-9745	Trenton, NJ 08646-0637
must add prescription to their		www.aging.nj.gov	
coverage and PAAD pays up to the			PAAD and Lifeline also qualifies for:
regional benchmark amount.			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	Must be a NJ resident for at least 30	Apply online NJ Save application	Verify creditable coverage before applying. When
plus 50% of the remaining cost of	days, 65 years or older OR receiving	For additional information and	annual out-of-pocket expenses reach catastrophic
the prescription drug. Medicare	Social Security Disability.	assistance contact:	cap
beneficiaries must enroll in a	Gross annual income between:	Division of Senior Services/ADRC	Single: \$2,000; Married: \$3,000 then there is only
Medicare Part D or Medicare	Single: \$52,142 and \$62,142	201-336-7400 Or PAAD	a flat co-pay of \$15 during the eligibility period.
Advantage with prescription	(\$4,345 - \$5,178 month)	1-800-792-9745	
coverage. Senior Gold does not pay	Married: \$59,209 and \$69,209	www.aging.nj.gov	*Mail completed application to same address as
for Medicare Part D or MA-PD	(\$4,934 - \$5,767 month)		PAAD above
costs.			

H;/M.George/ADRC/QG/3-2024 *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
Medicare Part D "stand alone" prescription drug coverage are a	Must be enrolled in Medicare, either Part A or Part B. There is a penalty for late	Annual open enrollment period begins October 15 th to December	Verify creditable coverage before enrolling in any Medicare Part D plan. Medicare Prescription drug
selection of private plans that	enrollment in Medicare Part D when first	7th	benefit is also available as part of a Medicare
contract with Medicare and is	eligible. Those who have been		Advantage Plan (MA). Those who have MA plans
optional. It adds to original Medicare. There are monthly	determined to have creditable coverage may not need to enroll.	For more information and to research plans call:	without Rx coverage should not enroll in a Medicare Part D "stand alone" plan.
premiums, co-pays and annual	may not need to enion.	State Health Insurance Program	Wedicare Part D. Stand alone plan.
deductible. Medicare Part D plans	PAAD participants and dual eligible	(SHIP) 201-336-7413	The Medicare Part D benchmark premium for NJ in
run on a calendar year and cover about 75% of drug costs until the	(Medicare/Medicaid) must enroll in one of the Medicare Part D "benchmark	Or Medicare 1-800-MEDICARE	2024 is \$45.51
cap level is reached. Any further	plans". Benchmark plans for dual eligible		www.medicare.gov
drug costs for the remainder of the	and PAAD participants are premium free		
year will be out-of-pocket (about	and are waived late enrollment penalty.		
25%). If a catastrophic level is reached	Also included are plan's cap limit, deductibles & gap coverage.		
then there will be a flat rate or 5%			
co-pay.			

MEDICARE COSTS

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
Medicare Part A: Hospital insurance helps pay for inpatient hospital care and certain follow-up services Medicare Part B: Medical insurance helps pay for physician services, outpatient hospital care and other medical services Medicare Part C: Medicare Advantage Plans, HMO's, PPO's All Medicare covered health care services through a provider network plan.	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 is met.	Part A Hospital Deductibles and Co-Payment per benefit period: \$1,632 deductible 1-60 days \$0 61-90 days \$408 per day 91-150 is \$816 per "lifetime reserve day" Part A Co-Payments in Skilled Nursing Facility: Days 1-20: \$0 Days 21- 100: \$204/day Part A monthly premium: 40 or more quarters: \$0 30-39 quarters: \$278/month <30 quarters:\$505/month	Part B Medical Insurance: Standard monthly premium \$174.70 Part B premiums can be higher based on income related monthly-adjusted amount (IRMAA). Part B annual deductible: \$240/yr. www.medicare.gov Medicare Rights Center for appeals: www.medicarerights.org 1-800-333-4114

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	*Income disregard included	QMB Only apply online	Income disregard: 100% FPL (Federal Poverty
Part A & B premium; Part A, B & C	Single: \$15,300 yr. (\$1,275/mo.) *	NJ Save application	Level) + \$20/month or \$240/annual
deductibles and co-pay;	Married: \$20,680 yr. (\$1,723/mo.) *		
Part D and Medicare Advantage		Division of Aging Services	Income disregard: Add \$20/month unearned
plan drug premium up to	OMB-Only Resources:	1-800-792-9745	income to the monthly amount or \$240 to the
benchmark amount \$45.51	Single: \$9,430 Married: \$14,130		annual income. If receiving income from
	=======================================	=======================================	employment, \$65/month plus one-half of
	OMB-Plus Resources:	<i>QMB Plus</i> apply through Medicaid	remainder of gross salary is not counted.
	Single: \$4,000 Married: \$6,000	ABD application or contact Board	,
	·	of Social Services: 201-368-4200	

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

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
SLMB Pays for Medicare Part B premium,	*Income disregard included Single: Income between	Division of Aging Services 1-800-792-9745	*SLMB income is between 100% to 120% FPL + income disregard. (See QMB explanation above for
Part D and Medicare Advantage plan drug premium up to	\$15,300 yr. (\$1,275/mo.) AND \$18,312 yr. (\$1,526/mo.) *		income disregard).
benchmark amount \$45.51		Apply online for SLMB	
	Married: Income between \$20,680 yr. (\$1,723/mo.) AND \$24,768 yr. (\$2,064/mo.) *	NJ Save application	
	Resources: Single: \$9,430 Married: \$14,130		
SLMB-QI-1 Pays for Medicare Part B premium, Part D and Medicare Advantage	*Income disregard included Single: Income between \$18,312 yr. (\$1,526/mo.) AND	Division of Aging Services 1-800-792-9745	*SLMB-QI-1 income is between 120% to 135% FPL + income disregard (See QMB explanation above for income
plan drug premium up to benchmark amount \$45.51	\$20,571 yr. (\$1,714/mo.) *	Apply online for SLMB QI-1 NJ Save application	disregard).
Solioillian amount \$ 10.01	Married: Income between \$24,768 yr. (\$2,064/mo.) AND	113 Gave application	
	\$27,834 yr. (\$2,319/mo.) *		
	Resources: Single: \$9,430 Married: \$14,130		

SOCIAL SECURITY

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
Social Security replaces a percentage of pre-retirement income based on lifetime earnings People who have already retired. People who are disabled.	Most people need 40 credits (10 years of work) to qualify for benefits. Full retirement age for those born between 1943 and 1954 is 66. The full retirement age increases gradually if you were born from 1955 to 1960, until it reaches 67.	Social Security Continental Plaza, 401 Hackensack Ave, Second Floor Hackensack, NJ 07601 1-866-964-4680 Office Hours: M-Fri. 9-4pm	Set up a my social security account online www.ssa.gov and get access to the following: Get a benefit verification letter Request replacement Social Security and Medicare card Change of address and phone number Plan for retirement
 Survivors of workers who have died. Dependents of beneficiaries. 	You can get Social Security retirement benefits as early as age 62 with a reduced benefit. Delayed benefits will continue to increase up until age 70.	Social Security hotline 1-800-772-1213 MonFri 7 a.m. to 7p.m. TTY 1-800-325-0778	And more
	Cost-of-Living Adjustment (COLA) for 2024 is 3.2 % increase in benefit.		

SUPPLEMENTAL SECURITY INCOME (SSI)

WHAT IT DOES	PAYMENT	HOW TO APPLY	COMMENTS
Provides payments to persons who are 65 or older, as well as people of any age, including children, who are blind or disabled and have limited income and resources. Must be citizen or meet non-citizen requirements. Payments are determined by living situation and if you receive other maintenance and support.	Following payment is based on combined federal AND state maximum payment for individual/couple living alone or with others in own household: Individual: \$974/month Married: \$1,440/month Resources must be less than: Single: \$2,000 Married: \$3,000	Social Security Continental Plaza, 401 Hackensack Ave, Second Floor Hackensack, NJ 07601 1-866-964-4680 Office Hours: M-Fri. 9-4pm Social Security hotline 1-800-772-1213 TTY 1-800-325-0778 www.ssa.gov	Not all SSI recipients receive the maximum amount. SSI does not count the value of certain resources such as a burial plot, value of the home and car.

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	Must be 65 or older Or receiving Social Security Disability. Gross income limits are less than:	If currently enrolled in PAAD or Lifeline then complete a HAAAD application and submit a hearing aid receipt and a physician	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
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	Single: \$52,142 (\$4,345 month) Married: \$59,209 (\$4,934 month)	statement for medical necessity. If <u>not</u> enrolled in PAAD or Lifeline, then verify eligibility by completing a PAAD application	retirement benefits are <u>not</u> eligible. Individuals with partial coverage can receive supplementary payment.
reimbursement amount.			HAAAD PO BOX 715
			Trenton, NJ 08625-0715 1-800-792-9745

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	Division of the Deaf and Hard of Hearing PO Box 074	Applications available online: www.nj.gov/humanservices/ddhh/services/hearingaid/project/
	Gross income limits are less than:	Trenton, NJ 08625-0074	If enrolled in PAAD fill out NJHAP application Form A
	<u>Single</u> : \$52,142 (\$4,345 month) <u>Married</u> : \$59,209 (\$4,934 month	800-792-8339 Toll Free in NJ 609-588-2648 609-503-4862 Videophone	If not enrolled in PAAD fill out NJHAP application Form B
		609-588-2528 Fax DDHH.communications2@dhs.state.nj.us	

NJ SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (FOOD STAMPS)

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
Benefit used to purchase food at	October 2023 to September 2024	Apply online:	NJ SNAP Information Line: 1-800-687-9512
authorized retail stores.	Household size:	www.mynjhelps.gov/home	
Families First Electronic Benefits	(1) \$2,248/month		Once application is submitted then an eligibility
Transfer card (EBT card) are issued	(2) \$3,041/month	Printable application available	interview is typically completed over the phone.
to recipients, which works similar		online:	
to a debit card.	Elderly or disabled member may be	https://bcbss.com/snap-food-	Contact AA unit for ongoing SNAP clients over 60,
	eligible for Food Stamps even if the gross	stamps/	General Assistance (GA), ABD Medicaid.
	monthly income exceeds the income		201-368-7693
	eligibility because medical and shelter	Apply in person:	Fax: 201-368-4337
	deductibles are applied.	Board of Social Services	aa@bcbss.com
		218 Route 17 N. Rochelle Park,	
	Resources may count to determine	New Jersey 07662	
	eligibility in <u>certain cases</u> . Countable	Tel: 201-368-4200	The minimum monthly SNAP benefit in New Jersey
	resource limits for 60 years of age and	Hours: M-Fri. 8 am to 4:30	is \$95. National Public Health Emergency (PHE)
	older is \$4,250		expired on May 11, 2023.
		Contact SNAP Navigators to	
	You can own a home and qualify.	receive assistance with the	
	Retirement and pension funds are not	application process: Community	
	counted depending on withdrawal	Food Bank of NJ	
	activity. Licensed vehicles may count as a	1-908-838-4831	
	resource unless used under certain	SNAPOutreach@cfbnj.org	
	exclusions and may be subject to an		
	equity test.		

LIFELINE UTILITY ASSISTANCE PROGRAM

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
A \$225 annual credit on electric	Must be 65 or older OR receiving Social	Apply online NJ Save application	<i>Tenants Lifeline Assistance Program</i> : Eligible
and gas utility bills.	Security Disability.		tenants receive a \$225 credit by check if utilities
		Printable applications available	are included in their rent.
	Gross annual income limit is less than	online <u>www.aging.nj.gov</u> or call:	
	Single:\$52,142 (\$4,345 month)		Special Utility Supplement : SSI recipients receive a
	Married: \$59,209 (\$4,934 month)	PAAD/Lifeline: 1-800-792-9745	supplement of up to \$18.75/month that is
		Or	automatically included in their SSI checks. SSI
		Division of Senior Services/ADRC:	recipients should <u>not</u> file an application.
		201- 336-7400	

Low-Income Home Energy Assistance Program (LIHEAP)

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
<u>Universal Service Fund (USF)</u>	Heating, Cooling, Winter Termination,	How to submit applications:	PSE&G Customer Service Center
Receive monthly credits on utility	Weatherization and Universal Service		214 Hudson Street
bill for gas & electric which is	Fund:	In-person OR drop off application:	Hackensack
based on consumption and certain	Gross income limits for a household size:	Mondays and Wednesdays 9-3pm.	1-800-436-7734
percentage of income. USF	(1) \$44,111 yr. (\$3,676/mo.)	294 Union Street, Hackensack	
applications are accepted all year.	(2) \$57,684 yr. (\$4,807/mo.)	No appointment necessary.	PSE&G Collection Department:
If eligible, there is an automatic		Not wheelchair-accessible	1-800-357-2262
enrollment by utility company for			
the Fresh Start Program. Fresh		Email: LIHEAP@GreaterBergen.org	NJ Board of Public Utilities
start provides additional assistance	Entire household is counted for all		44 S. Clinton Avenue
and forgiveness of overdue	programs.	Mail:	Trenton, NJ 08625
balances of \$60 or more.	Persons who live in public housing	Greater Bergen LIHEAP	(800) 624-0241
	and/or receive rental assistance are not	294 Union Street	www.nj.gov/bpu/
Heating:	eligible for assistance unless they pay for	Hackensack, NJ 07601	
Must be responsible for directly	their own heating costs directly to the		GBCA Headquarters: www.GreaterBergen.org
paying your own heat. This also	fuel supplier.	Contact GBCA LIHEAP:	392 Main Street,
applies to heat included in rent.		201-488-5100, Press 2 for Energy	Hackensack, NJ 07601
	LIHEAP accepts applications from	Assistance	201-968-0200
Cooling	October 1 st to June 30 th		Email: info@greaterbergen.org
Benefit is \$500 and applicant must			
have a medical condition that	Emergency LIHEAP assistance funds may	Home visits are also available to	Weatherization Services:
requires the use of any cooling	be available from March 15 to June 30	assist with applications for the	294 Union Street
device.	for shut off notices for those who are	disabled and homebound.	Hackensack, NJ 07601
	currently enrolled in LIHEAP. Eligible		(973) 910-2500, Ext. 7149 OR
Weatherization:	households can receive up to \$1,000		201-488-5100, Ext. 5
The weatherization program	credit applied to utility bills.		
provides savings through home			<u>Lead Safe Home</u>
energy efficiency assessment and			201-488-5100, Ext. 6
upgrades. Customers may receive			
energy smart products, insulation			Winter Termination:
upgrades in walls, ceilings, attics			Contact utility company and request WTP
and air sealing of windows and			protection.
doors.			

COMFORT PARTNERS

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
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 (1) (2)	come limits for a household: .) \$37,650/yr. (\$3,138/mo.) .) \$51,100/yr. (\$4,258/mo.) ouseholds that do not meet income widelines can also apply if they receive enefits from the following programs: HEAP, Lifeline, PAAD, Section 8 ousing, SSI, TANF, USF, Medicaid, SNAP	Call 1-866-378-4345 or visit online: www.njcleanenergy.com/cp	Ask your utility company about energy efficiency programs.

NJ SHARES

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
Financial assistance during unexpected circumstances and temporary financial crisis. Grants offered for gas/electric, water bill, telecommunications and housing resources. Grants for energy consumption prevents customers from service disconnection. A few of the programs: New Jersey Board of Public Utilities Payment Assistance for Gas & Electric (NJBPU PAGE), NJ SHARES SMART, NJ SHARES ENERGY GRANT.	NJBPU PAGE & NJ SHARES SMART Income limits for household size: 1-\$73,524/yr. (\$6,127/mo.) 2-\$96,144/yr. (\$8,012/mo.) NJ SHARES Energy Assistance Grant Income limits for household size is between: 1-\$3,677-\$5,020/mo. 2-\$4,808-\$6,813/mo.	Must first apply for LIHEAP and/or USF and provide a determination letter. Apply at local agency, online or print application and send by mail, fax or email. New Jersey SHARES 4 Walter E. Foran Boulevard, Suite 105 Flemington, NJ 08822 Phone: 609-883-1626 Toll Free: 866-657-4273 Fax: 609-883-6364 Email: info@njshares.org	Go to the Get Help tab to view various program assistance www.njshares.org Links for each utility company can be found here: https://nipoweron.org/resources/utility-companies/

VERIZON NJ COMMUNICATIONS LIFELINE

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
WHAT IT DOES Discount on residential telephone service.	ELIGIBILITY REQUIREMENTS Discount is limited to one per household. Receive benefits from one of these programs: Medicaid, SNAP (Food Stamps), SSI, Federal Public Housing, Veterans Pension and Survivor's benefit, tribal specific programs. OR Eligibility based on household income below 135% FPL: 1-\$20,331/yr. (\$1,694/mo.) 2-\$27,594/yr. (\$2,299/mo.)	HOW TO APPLY Complete a USAC application for Verizon Lifeline service. NJ SHARES provides enrollment assistance for the Verizon Lifeline Program. Applications can be obtained online at www.njshares.org or call 609-883-1626 Mail, fax or email completed USAC application with required documents to: New Jersey SHARES 4 Walter E. Foran Boulevard,	COMMENTS The FCC (Federal Communications Commission) requires Verizon to recertify all customers each year. USAC Lifeline Support Center www.lifelinesupport.org 1-800-234-9473 Verizon NJ does not offer discount on their wireless service. Apply for Lifeline by contacting most used providers which are Assurance Wireless and Safe Link. www.assurancewireless.com 1-888-321-5880 www.safelinkwireless.com
		Suite 105 Flemington, NJ 08822 Fax: 609-883-0133 Email: telco@njshares.org	1-800-723-3546

STATEWIDE RESPITE CARE PROGRAM

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
Provides a short term and	Maximum income and resources:	Apply for Statewide Respite	Income is assessed on a sliding scale and cost
intermittent break ("Respite") to	Single: \$33,948 yr. (\$2,829/month)	Services by calling Bergen County	share begins at income level \$1,367/month for
unpaid caregivers that includes	Resources: \$40,000;	Division on Disability Services:	single and \$2,734/month for a couple.
spouse, family members, neighbor,	Married: \$67,896 yr. (\$5,658/month)	201-336-6503 OR	
friend who are responsible for	Resources: \$60,000	201-336-6506	
basic daily care. The program			
offers care recipients services such	Care recipients are either a frail elderly		
as home care, companion care,	adult or disabled individual that is 18 or		
adult day care, campership, or a	over and resides in the community.		
short stay in a long term care	Individuals must have a caregiver that		
facility. There is also a Caregiver	provides daily care. The care recipient		
Directed Option for the caregiver to	must not be on Medicaid or receiving		
pay for services or items that are	home care services through other		
reimbursed.	programs such as JACC, MLTSS, VA Aid &		
	Attendance, etc.		

Managed Long Term Services and Support (MLTSS)

	Thanagea zong ronn corne		
WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
Provides comprehensive support	Must be a U.S. Citizen or a Qualified	For information and screening	Managed Care Organization (MCO's) administers
services in the community or long	Alien. Must meet financial, clinical	process call Division of Senior	and coordinates MLTSS services.
term care facility.	(nursing facility level of care), age or	Services/ADRC: 201-336-7400	
_	disability requirements. Must be 65 years		Managed Care Organizations:
*Access to all NJ Family Care	or older or under 65 years of age and	Financial screening process:	Aetna Better Health
Plan A Benefits	determined to be blind or disabled by the	Board of Social Services at	1-855-232-3596
*Care Management	Social Security Administration or the	201-368-7667	<u>Wellpoint</u>
*Home and Vehicle Modifications	State of New Jersey.	www.bcbss.com	1-800-600-4441
*Home Delivered Meals			Horizon NJ Health
*Respite	M.L.T.S.S.	www.state.nj.us/humanservices/	1-800-682-9090
*Personal Emergency Response	Maximum gross monthly income for	dmahs/home/mltss.html	<u>United Healthcare</u>
*Mental Health & Addiction	individual applying: \$2,829/month		1-800-941-4647
Services	Maximum countable assets/resources:		Fidelis Care
*Assisted Living	\$2,000.		1-888-453-2534
*Community Residential Services	Couples, with both spouses applying, can		
*Nursing Home Care	have \$3,000. The community spouse (the		To enroll in a Medicaid MCO:
	spouse not requiring care) with a single		1-866-472-5338
	spouse applying, are permitted to shift up		
	to \$154,140 in assets to the non-		NJ Medical assistance hotline:1-800-356-1561
	applicant spouse. This is known as a		
	community spouse resource allowance		To contact or to report changes:
	(CSRA).		Contact BG Unit (Institutional Medicaid)
			201-368-7667
	If resource limits are met and individual		Fax: 201-368-4772
	income is above \$2,829 then the option		<u>bgintake@bcbss.com</u>
	is to set up a Qualified Income Trust (QIT).		

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

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
Provides health insurance for low	Persons 65 years of age or older, blind or	Online applications are	NJ Family Care information line:
income individual 65 years of age	permanently disabled who may not be	encouraged <u>www.bcbss.com</u>	1-800-701-0710
and over, blind or disabled. Program pays for hospital services,	eligible for SSI.	Printable applications are also available on this site. Mail	Medicaid District office 973-977-4077
healthcare needs, doctor visits, prescriptions.	Maximum gross income: Single: \$15,060 yr. (\$1,255/month) Married: \$20,440 yr. (\$1,703/month)	completed Medicaid ABD application with copies of required verification or visit agency.	Bergen County Board of Social Services Tel: 201-368-4200
	Maximum allowable resources for : Single: \$4,000;	Board of Social Services 218 Route 17 North	To contact or to report changes: BL Unit for new applications for GA, SNAP clients over 60, and ABD Medicaid.
	Married: \$6,000	Rochelle Park, NJ 07662 8 am thru 4:30 pm weekdays	201-368-4340 Fax: 201-368-4337 Email: <u>bl@bcbss.com</u>

JERSEY ASSISTANCE FOR COMMUNITY CAREGIVING (JACC)

WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY		COMMENTS	
JACC program provides	New Jersey resident age 60 and older	Division of Senior Services/ADRC:	Participants of JA		
in-home and community based	that:	201-336-7400 for information and	determined by an	income-based sli	ding scale.
services to seniors at risk of	 Requires a nursing facility level 	an initial screening.	Individual	Couple	Co-pay
placement in a nursing facility.	of care and choose to remain at				Amount
JACC is designed to supplement	home.		\$0 - \$1,669	\$0 - \$2,265	\$0.00
the cost and assistance that is	 Not financially eligible for 		\$1,670 -\$2,196	\$2,266 -\$2,981	\$15.00
provided by the caregiver. JACC	Medicaid or Medicaid Waiver		\$2,197 -\$2,824	\$2,982 -\$3,833	\$30.00
services are limited to \$1,090 per	Services.		\$2,825 -\$3,451	\$3,834 -\$4,684	\$60.00
participant per month, or \$13,080 per year. The service package	Meets immigration status		\$3,452 -\$4,079	\$4,685 -\$5,536	\$90.00
provided is based on an	<u>Single</u> : \$4,581/month		\$4,080 -\$4,581	\$5,537 -\$6,217	\$120.00
assessment of the JACC	Maximum resources: \$40,000		Standard Medical	Deductions:	
participant's needs, unique plan of	,		Individual: \$275	Couple: \$535	
care, and availability of services	Married: \$6,217/month				
and funding.	Maximum resources: \$60,000		The JACC program	n may have a wait	list.

Affordable New Jersey Communities for Homeowners and Renters (ANCHOR)

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WHAT IT DOES	ELIGIBILITY REQUIREMENTS	HOW TO APPLY	COMMENTS
Provides property tax relief for eligible homeowners and renters.	NJ resident who owned, occupied and taxes were paid on <u>principal</u> residence on October 1, 2020. NJ Gross Income for Homeowners on YR 2020 was \$250,000 or less. NJ resident renters should have name on lease, paid rent and gross income was \$150,000 or less.	Homeowners file applications online or by phone. Paper applications required in certain cases. Tenants/renters do not have a PIN and ID and should apply online or by paper application.	 ANCHOR program is different from the PTR "Senior Freeze" program. May qualify for both programs (See eligibility PTR-1) Based on 2020 age, residency & income. Filing deadline was December 29, 2023.
	ANCHOR 2020 PAYMENT benefit based on income:	File by phone: 1-877-658-2972	Payments were released from Jan 2 to Jan 2024.
	Homeowners with income of \$150,000 or less received \$1,500 (64 years of age and under) and \$1,750 (65 years of age or older)	File or check benefit status: nj.gov/treasury/taxation/anchor	Gross income can be located on your 2020 NJ- 1040 Line 29 tax return. If you were not required to file a 2020 New Jersey Income Tax return,
	Homeowners with income of more than \$150,000 and up to \$250,000 received \$1,000 (age 64 and under) and \$1,250 (age 65 or older).	ANCHOR Hotline: 1-888-238-1233 M-Fri 8:30-5:30 p.m.	report zero as your gross income
	Renters receive \$450 if age 64 or younger and \$700 for age 65 or older.		

PROPERTY TAX REIMBURSEMENT (SENIOR FREEZE) 2023

WHAT IT DOES 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	ELIGIBILITY REQUIREMENTS Maximum annual income for PTR-1 (Single/Married/Civil Union): YR 2022: \$150,000 YR 2023: \$163,050 Must be 65 years of age or older	HOW TO APPLY File PTR-1 or PTR-2 application. Form PTR-1: First time applicants Form PTR-2: Personalized applications that are	COMMENTS The deadline for 2023 Senior Freeze is October 31, 2024, or extended due date. 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.
the amount paid for the year you		Form PTR-2:	application. Life Tenancy means you are

OTHER 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.

For further information on deductions, exemptions and abatements: https://www.state.nj.us/treasury/taxation/lpt/lpt-deductions.shtml

Fair Lawn Regional Information Center

NJ Division of Taxation

22-08 Route 208 South, Fairlawn, NJ 07410

Schedule appointment: www.nj.gov/taxation 1-609-943-4093

Main Customer Service Center: 1-609-292-6400

Mon- Fri. 8:00 am until 4:30

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 (\$1,255-\$2,510) Married (\$1,703-\$3,406) 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 COUNTY COMMISSIONERS

Germaine M. Ortiz Chairwoman

Mary J. Amoroso Vice Chairwoman

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