



COUNTY OF BERGEN
DEPARTMENT OF HUMAN SERVICES
DIVISION OF DISABILITY SERVICES
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MEALS-ON-WHEELS PROGRAM

OVERVIEW

The Bergen County Department of Human Services, Division of Disability Services provides a balanced meal, five days a week, to eligible individuals with disabilities, age 0 to to 59. Meals can be obtained through the ***Disabled Meals-on-Wheels Program*** (DMOW) if you are:

Homebound or unable to shop and or prepare a nutritious meal for oneself/in a regular diet/ if Meals on Wheels will be your only balanced meal for the day/ Receives Home Health care for no greater than 4 hours per day/ Bergen County Resident

There is no fee for the meals; however, a donation of \$1.25 for each meal is suggested.

Disabled Meals-on-Wheels (DMOW) purpose is to help those with disabilities maintain their independence in the community and in many cases prevents them from being forced to enter a supervised residential facility. More importantly than helping persons remain independent, our program seeks to improve the consumer's overall living conditions through referrals to agencies and self-help organizations. Our office has the unique opportunity to service a population that in many cases are isolated from their outside environment. We work to eliminate this **isolation** by connecting our consumers to other agencies.

The program assists adults with either **permanent or temporary disabilities**, either through **physical, mental, or emotional causes**. Each case is reviewed on the basis of a person's living condition, contact with friends and family, ability to obtain food, cooking facilities, abilities to plan and prepare meals, and other factors involved in meal preparation.

You can request the service by contacting:

Phone: (201)-336-7381
TTY: (201)-336-6505

www.co.bergen.nj.us

Attachment I

**U.S. Department of Health and Human
Services
2021 Poverty Guidelines**

The following figures are the HHS guidelines published in the *Federal Register*.

The following guideline figures represent annual income.

GROSS YEARLY INCOME
48 Contiguous States

| Persons in family | Poverty guideline |
|--------------------------|--------------------------|
| 1 | \$12,880 |
| 2 | \$17,420 |
| 3 | \$21,960 |
| 4 | \$26,500 |
| 5 | \$31,040 |
| 6 | \$35,580 |
| 7 | \$40,120 |
| 8 | \$44,660 |
| *Each additional person | \$4,540 |

*For families with more than 8 persons, add amount for each additional person at 100%

Source: Annual Update of the HHS Poverty Guidelines, Federal Register, 86 FR 7732 (February 1, 2021, pages 7732-7734).

<https://www.federalregister.gov/documents/2021/02/01/2021-01969/annual-update-of-the-hhs-poverty-guidelines>

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