



State of New Jersey

DEPARTMENT OF HUMAN SERVICES

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

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SARAH ADELMAN
Acting Commissioner

JENNIFER LANGER JACOBS
Assistant Commissioner

MEDICAID COMMUNICATION NO. 22-02

DATE: February 25, 2022

TO: NJ FamilyCare Eligibility Determining Agencies

SUBJECT: Income Eligibility Standards Effective January 1, 2022

The Federal Poverty Level (FPL) guidelines for 2022 were announced and posted online via the electronic version of the Federal Register. Attached is the new income standards chart for all NJ FamilyCare programs. These new standards are retroactively effective January 1, 2022 for all programs.

Eligibility determining agencies shall immediately review all cases that would otherwise have been denied as a result of any income increases. No action is required for those cases that remain eligible under the new income standards.

It is important that any Plan A or Plan ABP cases found to be newly eligible shall be accreted to the eligibility file with an effective date of January 1, 2022, or the date of application, whichever is later. Additionally, any NJ FamilyCare Plan B cases that may now qualify for Plan A coverage also need to be eligible retroactive to January 1, 2022. Please be sure to advise the beneficiary of the change in coverage and change in Medicaid Eligibility Identification Number, when applicable.

If you have any questions regarding this Medicaid Communication, please refer them to the Division's Office of Eligibility field service staff member for your agency at 609-588-2556.

JLJ:jm

c: Sarah Adelman, Acting Commissioner
Department of Human Services

Elisa Neira, Deputy Commissioner
Department of Human Services

Natasha Johnson, Assistant Commissioner
Division of Family Development

Valerie Mielke, Assistant Commissioner
Division of Mental Health and Addiction Services

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Christine Norbut Beyer, Commissioner
Department of Children and Families

Judith M. Persichilli, RN, BSN, MA, Commissioner
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Joshua Lichtblau, Director, Medicaid Fraud Division
Office of the State Comptroller

DMAHS INCOME STANDARDS EFFECTIVE JANUARY 1, 2022

Variances due to rounding may occur.

HH	100% of the Federal Poverty Level		MAGI - AFDC Medicaid - A		Medicaid Special - A		Children's Medicaid- A 107% FPL		Single Adults & Parents ABP 133% FPL		Single Adults & Parents- ABP 138% FPL*	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
1	\$ 13,590	\$ 1,133	\$ 2,776	\$ 233	\$ 6,108	\$ 509	\$ 14,542	\$ 1,212	\$ 18,075	\$ 1,507	\$ 18,755	\$ 1,563
2	18,310	1,526	5,052	421	9,660	805	19,592	1,633	24,353	2,030	25,268	2,106
3	23,030	1,920	6,096	508	11,892	991	24,643	2,054	30,630	2,553	31,782	2,649
4	27,750	2,313	7,020	585	14,004	1,167	29,693	2,475	36,908	3,076	38,295	3,192
5	32,470	2,706	7,896	658	16,068	1,339	34,743	2,896	43,186	3,599	44,809	3,735
6	37,190	3,100	8,748	729	18,096	1,508	39,794	3,317	49,463	4,122	51,323	4,277
7	41,910	3,493	9,540	795	20,076	1,673	44,844	3,737	55,741	4,646	57,836	4,820
8	46,630	3,886	10,308	859	22,032	1,836	49,895	4,158	62,018	5,169	64,350	5,363
+1	4,720	394	756	63	1,944	162	5,051	421	6,278	524	6,514	543
HH	Children's Medicaid MCHIP - A 142% FPL		Children's Medicaid MCHIP - A 147% FPL*		CHIP Children - B 150% FPL		CHIP Children- C 185% FPL		Newborns & Pregnant Women - A 194% FPL		Newborns and Pregnant Women - A 199% FPL*	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
1	\$ 19,298	\$1,609	\$ 19,978	\$1,665	\$ 20,385	\$ 1,699	\$ 25,142	\$2,096	\$ 26,365	\$ 2,198	\$ 27,045	\$ 2,254
2	26,001	2,167	26,916	2,243	27,465	2,289	33,874	2,823	35,522	2,961	36,437	3,037
3	32,703	2,726	33,855	2,822	34,545	2,879	42,606	3,551	44,679	3,724	45,830	3,820
4	39,405	3,284	40,793	3,400	41,625	3,469	51,338	4,279	53,835	4,487	55,223	4,602
5	46,108	3,843	47,731	3,978	48,705	4,059	60,070	5,006	62,992	5,250	64,616	5,385
6	52,810	4,401	54,670	4,556	55,785	4,649	68,802	5,734	72,149	6,013	74,009	6,168
7	59,513	4,960	61,608	5,134	62,865	5,239	77,534	6,462	81,306	6,776	83,401	6,951
8	66,215	5,518	68,547	5,713	69,945	5,829	86,266	7,189	90,463	7,539	92,794	7,733
+1	6,703	559	6,939	579	7,080	590	8,732	728	9,157	764	9,393	783
HH	CHIP Pregnant Women - A Plan First - Family Planning CHIP Children - C 200% FPL		CHIP Pregnant Women - A Plan First - Family Planning 205% FPL*		CHIP Children - D NJ Workability - A BCC - A 250% FPL		CHIP Children - D 300% FPL		CHIP Children - D 350% FPL		CHIP Children - D 355% FPL*	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
1	\$ 27,180	\$ 2,265	\$ 27,860	\$ 2,322	\$ 33,975	\$ 2,832	\$ 40,770	\$ 3,398	\$ 47,565	\$ 3,964	\$ 48,245	\$ 4,021
2	36,620	3,052	37,536	3,128	45,775	3,815	54,930	4,578	64,085	5,341	65,001	5,417
3	46,060	3,839	47,212	3,935	57,575	4,798	69,090	5,758	80,605	6,718	81,757	6,814
4	55,500	4,625	56,888	4,741	69,375	5,782	83,250	6,938	97,125	8,094	98,513	8,210
5	64,940	5,412	66,564	5,547	81,175	6,765	97,410	8,118	113,645	9,471	115,269	9,606
6	74,380	6,199	76,240	6,354	92,975	7,748	111,570	9,298	130,165	10,848	132,025	11,003
7	83,820	6,985	85,916	7,160	104,775	8,732	125,730	10,478	146,685	12,224	148,781	12,399
8	93,260	7,772	95,592	7,966	116,575	9,715	139,890	11,658	163,205	13,601	165,537	13,795
+1	9,440	787	9,676	807	11,800	984	14,160	1,180	16,520	1,377	16,756	1,397
HH	Medically Needy		Medicaid Only/ SSI - A		New Jersey Care... Special Medicaid Programs - A 100% FPL**		SLMB 120% FPL		MLTSS + Amounts may be adjusted in July or October			
	Monthly	Resource	Monthly	Resource	Monthly	Resource	Monthly	Resources	Medicaid "Cap"		\$	2,523
1	\$ 367	\$ 4,000	\$ 872.25	\$ 2,000	\$ 1,133	\$ 4,000	\$ 1,359	\$ 8,400	Community Spouse Maintenance Allowance+		\$	2,177.50
2	434	6,000	1,286.35	3,000	1,526	6,000	1,831	12,600	Spousal Housing Allowance+		\$	653.25
3	567	6,100			QMB Only 100% FPL		SLMB QI-1 135% FPL		Utility Allowance+		\$	583
4	659	6,200			Monthly	Resources	Monthly	Resources	Maximum Home Equity Limit		\$	955,000
5	742	6,300							Community Spouse Resources	Minimum	\$	27,480
6	825	6,400			\$ 1,133	\$ 8,400	\$ 1,529	\$ 8,400		Maximum	\$	137,400
					1,526	12,600	2,060	12,600				

*5% MAGI Related Disregard

** New Jersey Care...Special Medicaid Program Resource Limits Only Apply to Aged, Blind and Disabled Programs

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