TO: County Welfare Agency Directors
Statewide Eligibility Determination Agencies

SUBJECT: Assessing NJ FamilyCare Beneficiaries for Other Programs

As a reminder, per federal regulation 42 C.F.R. 435.916(f)(1), prior to termination of redetermined NJ FamilyCare cases, individuals must be assessed for eligibility for all other Medicaid programs.

Therefore, when processing NJ FamilyCare redeterminations that result in a determination of ineligibility the beneficiary must be assessed for all other NJ FamilyCare programs, including programs for Children, Pregnant Women, Parents, Single Adults, and Aged, Blind and Disabled prior to terminating the case. If there is potential eligibility for another NJ FamilyCare program, but there is information that does not currently exist in the case file, use proper verification procedures to capture that missing information prior to termination of the current eligibility; this ensures no gap in coverage.

If an individual does not appear to meet the basic eligibility criteria for any other NJ FamilyCare program, the termination notice should be sent referring the terminated beneficiary to the Federal Marketplace to apply for health coverage.

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

Sincerely,

Valerie Harr
Director

VH:s
c: Elizabeth Connolly, Acting Commissioner
   Department of Human Services

   Dawn Apgar, Deputy Commissioner
   Division of Developmental Disabilities

   Lowell Arye, Deputy Commissioner
   Aging and Community Services

   Lynn Kovich, Assistant Commissioner
   Division of Mental Health and Addiction Services

   Joseph Amoroso, Director
   Division of Disability Services

   Natasha Johnson, Acting Director
   Division of Family Development

   Allison Blake, Commissioner
   Department of Children and Families

   Mary E. O'Dowd, Commissioner
   Department of Health