



Aetna Better Health® of New Jersey
3 Independence Way, Ste. 400
Princeton, NJ 08540

How NJ FamilyCare is Working to Support New Jerseyans' Health Care Needs During the Coronavirus Emergency

Visit njfamilycare.org to learn more and apply

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(TRENTON) – The Department of Human Services is taking action to support the more than 1.6 million New Jerseyans who receive health care coverage through NJ FamilyCare – the collective name for NJ Medicaid and the NJ Children's Health Insurance Program – and to ensure new applications are processed in a timely way.

The Department has received more than 12,000 new NJ FamilyCare applications electronically since the March 21st Executive Order implementing a statewide stay-at-home order. Additional applications also are being received through the 21 county boards of social services.

"The essential health care coverage that NJ FamilyCare provides is always a critical lifeline for individuals and families in need, but never more so than at this moment," Human Services Commissioner Carole Johnson said. "Our Department will continue to take action and pull all available levers to support the needs of our NJ FamilyCare members at this challenging time and help get those who may be newly eligible enrolled in coverage."

As a result of the Department's policy actions in response to the coronavirus:

- No one will lose their Medicaid or Children's Health Insurance Program coverage during the emergency, regardless of whether their enrollment was up for annual review. Ongoing eligibility will be reinstated for Medicaid and CHIP enrollees who may have systemically disenrolled at the end of March.
- No Medicaid or Children's Health Insurance Program enrollee will have to pay copays for COVID testing or office visits related to COVID testing.
- No Medicaid or Children's Health Insurance Program enrollee will have to pay premiums during the emergency.
- No Medicaid or Children's Health Insurance Program enrollee will have to go through a prior authorization process for any hospitalization.

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The Department also has made additional policy changes to make it easier for individuals and families to get the health care services they need, including:

- NJ FamilyCare enrollees are able to refill their prescriptions early and are able to get 90 days of their maintenance medication prescriptions filled at one time, in order to avoid having to leave home too frequently.
- NJ FamilyCare enrollees are now able to see their doctor, nurse practitioner, mental health practitioner or substance use disorder provider through telehealth, including via phone or video. Members and providers can each be at home when the visit occurs, and the health care provider will be paid the same as if the visit was in-person.
- NJ FamilyCare members who depend on home-based personal care assistance for daily activities like bathing, toileting and other care are able to pay pre-cleared family members to provide these services, given the emergency's impact on access to services and the increased number of family members at home under the Governor's order.
- NJ FamilyCare providers and health plans are delivering care and support to our members in unprecedented ways. For example, NJ FamilyCare members who attended medical day care programs that have closed due to the emergency can now receive help with personal care and meals at home.
- Care managers from NJ FamilyCare health plans are proactively reaching out to high risk members to help them access services and to update care plans as needed.
- Transportation to and from medical services is available for NJ FamilyCare members, with appropriate protocols in place for individuals who have symptoms or a positive test for COVID-19.
- Special hospital discharge arrangements are available for NJ FamilyCare members with behavioral health or long-term care needs.

Who is eligible for NJ FamilyCare?

- Single adults with incomes up to \$1,468 per month and couples with incomes up to \$1,938 per month (138% of the federal poverty level or FPL);
- Parents and others with dependent children with incomes up to 138% of the federal poverty level, for example, parents in a family of four with incomes up to \$3,013 per month;
- Children 18 and under with incomes up to 355% of FPL, for example, a child in a family of two with income up to \$5,101 per month;

- Pregnant women with incomes up to 205% of FPL, for example, a single woman with an income up to \$2,946 per month; and
- Older and disabled residents needing long-term care who meet certain requirements.

How can someone apply for NJ FamilyCare?

You can apply for NJ FamilyCare any time at www.njfamilycare.org. If you recently lost your health insurance, you may be eligible for Medicaid depending on your circumstances. You also may have a special enrollment period to apply for affordable Marketplace coverage at www.healthcare.gov.

What is covered by NJ FamilyCare?

Hospitalization, primary care and other doctor visits, prescriptions, lab tests, mental health care, substance use treatment, and many other health care services.

Who pays for NJ FamilyCare?

Medicaid and the Children's Health Insurance Program are programs funded through shared federal-state responsibility.

- For traditional Medicaid populations, such as pregnant women, many children, or older and disabled residents, New Jersey pays 50 percent of costs and the federal government pays 50 percent of costs.
- For children in families with incomes above traditional Medicaid income who are enrolled in the Children's Health Insurance Program, the federal government currently pays 76.5 percent, and New Jersey pays 23.5 percent.

Finally, for the Medicaid expansion population, which was created through the Affordable Care Act, individuals and couples without dependent children under 138 percent of the federal poverty level are largely covered at federal cost, with the federal government paying 90 percent and New Jersey paying 10 percent.