



# OCEAN COUNTY BOARD OF SOCIAL SERVICES

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July 17, 2009  
JB: 015

Mr. Craig Henry, Supt  
Southern Regional Schools  
105 Cedar Bridge Road  
Manahawkin, New Jersey 08752

Dear Sir or Madam,

SUBJECT: New Jersey Family Care

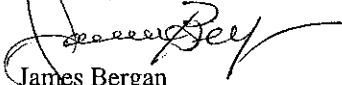
Enclosed is information regarding our NJ Family Care Program Parts A, B, C, and D. As you may already know, this program provides medical coverage for children age 19 and under. Additionally, there have been recent changes in regulations and in income calculations that allow parents as well as more children to have medical coverage under this program. NJ Family Care provides many services, some of which are well-child visits, doctor office visits, prescriptions, dental care, vision care, hearing services, x-ray, laboratory testing, and inpatient hospital care.

NJ Family Care Parts A and B do not require premiums or co-payments. Parts C and D affords even higher maximum yearly income eligibility guidelines for medical and dental services, but may require a premium and/or co-payments. Families with a premium will have a co-payment which will never exceed 5% of the family's income.

Also enclosed is an application that schools may use to order NJ Family Care forms directly from the State. There is no additional cost to the school districts for the forms. You may also access these applications online at [www.NJFamilyCare.org](http://www.NJFamilyCare.org).

Should you have any questions regarding this, please contact any of our NJ Family Care Supervisors: Ms. Penny Steckler at 732-286-5890, Mr. Christopher Bauer at 732-286-5174, or Ms. Karen Campbell at 609-242-6160.

Sincerely,

  
James Bergan  
Administrative Supervisor  
Of Income Maintenance

Enc.

c: Dr. Bruce Greenfield, Ocean County Superintendent of Schools,  
212 Washington Street, Toms River, New Jersey 08753 w/enc.  
Mary Fran Mc Fadden, Director w/enc.  
Adrienne Lawrence, Assistant Administrative Supervisor of Income Maintenance, w/enc.  
Christopher Bauer, Human Services Specialist 4, w/enc.  
Karen Campbell, Human Services Specialist 4, w/enc.  
Penny Steckler, Human Services Specialist 4, w/enc.

ESTA AGENCIA NO DISCRIMINA POR RAZA, CREDO, NACIONALIDAD DE ORIGEN, SEXO, IDENTIDAD DE GENERO O EXPRESIÓN, EDAD, ESTADO CIVIL O SOCIOS DOMÉSTICOS O UNIONES CIVILES, ANCESTROS, INCAPACIDAD, NACIONALIDAD, ORIENTACIÓN SEXUAL O AFECTIVA, RASGOS CELULARES O SANGRE HEREDITARIA ANORMAL, INFORMACIÓN GENÉTICA (INCLUYENDO LA DENGACIÓN A SOMETER A LA PRUEBA GENÉTICA), POR SERVICIOS EN LAS FUERZAS ARMADAS.

THIS AGENCY DOES NOT DISCRIMINATE ON THE BASIS OF RACE, CREED, COLOR, NATIONAL ORIGIN, AGE, ANCESTRY, NATIONALITY, MARITAL, OR DOMESTIC PARTNERSHIP OR CIVIL UNION STATUS, SEX, GENDER IDENTITY OR EXPRESSION, DISABILITY, LIABILITY FOR MILITARY SERVICE, AFFECTIONAL OR SEXUAL ORIENTATION, ATYPICAL CELLULAR OR BLOOD TRAIT, GENETIC INFORMATION (INCLUDING THE REFUSAL TO SUBMIT TO GENETIC TESTING).

# FAMILYCARE

Affordable health coverage. Quality care.

Offered by the State of New Jersey

Jon S. Corzine, Governor  
State of New Jersey

NJ FamilyCare provides quality free or low-cost health coverage for uninsured children 18 and younger and low-income parents. This program already covers more than a half million New Jersey children.

### What's Covered?

NJ FamilyCare offers full health care coverage through established Health Maintenance Organizations (HMOs) that operate throughout the state.

NJ FamilyCare covers just about every health care need, including:

- doctor visits
- prescriptions
- lab tests
- x-rays
- hospitalization
- dental (for most kids)
- eyeglasses
- mental health services
- specialist visits

### Who is Eligible?

Only children 18 and younger and certain low-income parents living in New Jersey are eligible for NJ FamilyCare. Eligibility is based on a family's size, including children and parents, and monthly income. Assets are not considered. (See the chart at right.)

### What Does it Cost?

For many families, it costs nothing: no monthly premiums or co-payments. For families with higher monthly incomes, there is a sliding scale for small co-payments and monthly premiums may be required.

### Are There Any Restrictions?

Pre-existing conditions do not affect eligibility. In most cases, children must have been without medical insurance for at least 3 months. Because there are exceptions, it's a good idea to call NJ FamilyCare if you have a question.

Most immigrants whose documents allow them to live here permanently are eligible. For undocumented residents, their children may be eligible if born in the U.S.

### How to Find Out More

To find out if you are eligible, or for more information, call or visit our website.

**1-800-701-0710**  
(Multilingual operators available)

**www.njfamilycare.org**  
Apply on line!

**TTY 1-800-701-0720**  
(For hearing impaired individuals)

### 2009 Maximum Family Income

Please review the chart. It is based on family size and monthly income before taxes. If you earn less than the amount listed and your family is uninsured, you and/or your children are probably eligible.

2009 Maximum Gross Monthly Income Limits		
Family Size*	Children's Coverage (Age 18 and younger)	Parent/Guardian Coverage
2	\$4,250	\$2,429
3	\$5,341	\$3,052
4	\$6,432	\$3,675
5	\$7,523	\$4,299
6**	\$8,613	\$4,922

\* Includes parents/guardians and their children in the household  
\*\* For larger families, call to determine your monthly guidelines



Affordable health coverage. Quality care.

# LITERATURE ORDER FORM

Order Requested Date \_\_\_\_\_

Items shipped UPS Ground.  
Allow 7-10 business days for delivery.

## SHIP TO INFORMATION

Site #	Organization		
	Attention (Name)		
	Address (cannot ship to PO Box)		
Signature	City	State	Zip
Date	Phone Number	Email Address	

## LITERATURE NEEDED

APPLICATION KITS	Qty Needed	Item #	For Use By	Description
All application kits contain: • NJ FamilyCare Application • Instructions • Choosing an HMO Flyer • HIPAA Privacy Notice • Rights & Responsibilities • Postage-Paid Envelope All items are English front/Spanish back	(100 max)	NJFC-APP-KIT	General	Application Kit
	(500 max)	NJFC-APP-CO-KIT	County	Application Kit - COUNTY version
	(20 max)	NJFC-APP-SLP-KIT	School	Application Kit - SCHOOL version
ENROLLMENT KITS	Qty Needed	Item #	For Use By	Description
All enrollment kits contain: • Enrollment Brochure • HMO Plan Selection Form • HIPAA Privacy Notice • Statement of Understanding • Postage-Paid Envelope	(20 max)	NJHBC-ENROLL-KIT	ACS Regional	Medicaid/NJ FamilyCare Enrollment Kit
	(20 max)	DYFS-ENROLL-KIT	DYFS only	Medicaid/NJ FamilyCare Enrollment Kit with DYFS Business Reply Envelope
BROCHURES, FLYERS & OTHER MATERIALS	Qty Needed	Item #	For Use By	Description
	(100 max)	NJFC-FS	General	Fact Sheet (English/Spanish)
	(100 max)	NJFC-IMM	General	Immigration Outreach Flyer (English)
	(100 max)	NJFC-IMM-S	General	Immigration Outreach Flyer (Spanish)
	(5 max)	NJFC-INCOME	General	Income Guideline Chart (English/Spanish)
	(100 max)	NJFC-BM	General	Band-Aid Bookmark
	(5 max)	NJFC-POSTER	General	18x24 FamilyCare Poster (English/Spanish)
	(100 max)	NJFC-INSERT	General	Who Provides Low Cost Insurance? Insert (English/Spanish)
	(5 max)	NJFC-NPAD	General	Nurses Communications Pad
	(100 max)	NJFC-BTS	General	Back to School Checklist (English)
1	NJFC-LOF	General	Literature Order Form	

## PLACE THE ORDER VIA FAX, PHONE OR EMAIL (choose one method)

<b>FAX ORDER TO:</b>  <b>(609) 747-7710</b>	<b>PHONE ORDER TO:</b>  <b>(609) 747-7716</b>	<b>EMAIL ORDER TO:</b>  <b>njfcbo@bartoncooney.com</b>
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