

ASSEMBLY, No. 14

STATE OF NEW JERSEY

INTRODUCED NOVEMBER 7, 1996

By Assemblyman CHARLES and Assemblywoman  
VANDERVALK

1 AN ACT concerning welfare reform, supplementing Title 44 of the  
2 Revised Statutes and amending P.L.1968, c.413, P.L.1987, c.283  
3 and P.L.1994, c.182.

4  
5 **BE IT ENACTED** by the Senate and General Assembly of the State  
6 of New Jersey:

7  
8 1. (New section) As used in this act:

9 "Assistance unit" means: a single person without dependent  
10 children; a couple without dependent children; dependent children  
11 only; or a person with one or more dependent children who are legally  
12 or blood-related, or who is their legal guardian, and who live together  
13 as a household unit.

14 "Benefits" means any assistance provided to needy persons and  
15 their dependent children and single persons under the Work First New  
16 Jersey program.

17 "Commissioner" means the Commissioner of Human Services.

18 "Community work experience" means unpaid work experience and  
19 training with a public, private nonprofit or private charitable employer,  
20 provided to a recipient when, and to the extent, that such experience  
21 is necessary to enable the recipient to adjust to, and learn how to  
22 function in, an employment setting.

23 "Dependent child" means a child:

24 a. under the age of 18;

25 b. under the age of 19 and a full-time student in a secondary school  
26 or an equivalent level of vocational or technical training, if, before the  
27 student attains age 19, the student may reasonably be expected to  
28 complete the student's program of secondary school or training; or

29 c. under the age of 21 and enrolled in a special education program,  
30 who is living in New Jersey with the child's natural or adoptive parent  
31 or legal guardian, or with a relative designated by the commissioner in  
32 a place of residence maintained by the relative as the relative's home.

33 "Income" means, but is not limited to, commissions, salaries, self-

**EXPLANATION - Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and intended to be omitted in the law.**

**Matter underlined thus is new matter.**

1 employed earnings, interest and dividend earnings, wages, receipts,  
2 unemployment compensation, any legal or equitable interest or  
3 entitlement owed that was acquired by a cause of action, suit, claim  
4 or counterclaim, insurance benefits, temporary disability claims, estate  
5 income, trusts, federal income tax refunds, State income tax refunds,  
6 homestead rebates, lottery prizes, casino and racetrack winnings,  
7 annuities, retirement benefits, veterans' benefits, union benefits, or  
8 other sources that may be defined as income by the commissioner;  
9 except that in the event that individual development accounts for  
10 recipients are established by regulation of the commissioner, any  
11 interest or dividend earnings from such an account shall not be  
12 considered income.

13 "Income eligibility standard" means the income eligibility threshold  
14 based on assistance unit size established by regulation of the  
15 commissioner for benefits provided within the limit of funds  
16 appropriated by the Legislature.

17 "Poverty level" means the official poverty level based on family  
18 size, established and adjusted under Section 673 (2) of Subtitle B of  
19 the "Community Services Block Grant Act, " Pub.L.97-35 (42 U.S.C.§  
20 9902 (2)).

21 "Recipient" means a recipient of benefits under the Work First New  
22 Jersey program.

23 "Services" means any Work First New Jersey benefits that are not  
24 provided in the form of cash assistance.

25 "Standard of need" means the minimum amount of income and in-  
26 kind benefits or services needed by families and single persons living  
27 in New Jersey in order to maintain a decent and healthy standard of  
28 living, as established by regulation of the commissioner, and shall  
29 include necessary items such as housing, utilities, food, work-related  
30 transportation, clothing and personal and household essentials.

31 "Title IV-A" means the provisions of Title IV-A of the federal  
32 Social Security Act governing the program of aid to families with  
33 dependent children established pursuant to P.L.1959, c.86 (C.44:10-1  
34 et seq.) and the State Plan to implement those provisions that were in  
35 effect on July 16, 1996, including income methodologies for  
36 determining eligibility under those provisions and plan.

37 "Work activity" includes, but is not limited to, the following, as  
38 defined by regulation of the commissioner: employment; work  
39 experience; on-the-job training; job search and job readiness  
40 assistance; vocational educational training; job skills training related  
41 directly to employment; community work experience; alternative work  
42 experience; supportive work; community service programs, including  
43 the provision of child care as a community service project; in the case  
44 of a teenage parent or a recipient under the age of 19 who is expected  
45 to graduate or complete their course of study by their 19th birthday,  
46 satisfactory attendance at a secondary school or in a course of study

1 leading to a certificate of general equivalence; and education that is  
2 necessary for employment in the case of a person who has not received  
3 a high school diploma or a certificate of high school equivalency, a  
4 course of study leading to a certificate of general equivalence, or post-  
5 secondary education, when combined with community work  
6 experience participation or other approved work activities, including  
7 employment.

8 "Work First New Jersey program" or "program" means the  
9 program established pursuant to P.L. c. (C. )(pending before the  
10 Legislature as Assembly Bill No. 12 of 1996).

11

12 2. (New section) A person who is a care giver to a dependent child  
13 who is that care giver's legal or blood relative shall be evaluated to  
14 determine whether that person is eligible for benefits if that person's  
15 income is not in excess of 150% of the poverty level.

16

17 3. (New section) A parent who is eligible for benefits who is  
18 married to a person who is not the parent of one or more of the  
19 eligible parent's children shall not be eligible for benefits if the  
20 household income exceeds the income eligibility standard. The eligible  
21 parent's natural children, however, shall be eligible for benefits  
22 according to a sliding income scale established by the commissioner,  
23 which does not take into account the income of the eligible parent's  
24 spouse, if the total annual household income does not exceed 150% of  
25 the poverty level. The spouse of the eligible parent and the spouse's  
26 natural child, if any, who is living with the family, who is not the  
27 eligible parent's natural child, shall not be eligible for benefits.

28

29 4. (New section) In computing the cash assistance benefit  
30 provided to recipients, the following disregards shall be applied to the  
31 earned income of each person in the assistance unit:

32 a. 100% for the first month of employment; and

33 b. 50% for each month thereafter.

34

35 5. (New section) a. The program shall provide supportive services  
36 to a recipient as a last resort when no other source of support is  
37 available, except that the recipient shall be required to continuously  
38 seek other sources of support. The commissioner shall determine the  
39 amounts and extent of the support. The supportive services shall  
40 include, but not be limited to, one or more of the following:

41 (1) child care services for a recipient's eligible dependent child, to  
42 be provided to persons with dependent children for 24 consecutive  
43 months following ineligibility for benefits as a result of receipt of  
44 earned income;

45 (2) transportation services to be provided directly by the program  
46 or through an allowance or other means of subsidy by which the

1 recipient may purchase transportation; and

2 (3) a limited allowance for each assistance unit to cover work-  
3 related expenses necessary to engage in required work activities, as  
4 determined by the commissioner.

5 b. Medical assistance shall be provided to an assistance unit with  
6 dependent children pursuant to P.L.1968, c.413 (C.30:4D-1 et seq.),  
7 in accordance with the provisions of section 2 of P.L.1987, c.283  
8 (C.30:4D-6c) which provides for a continuation of medical assistance  
9 for a period of 24 consecutive months under certain circumstances,  
10 except that:

11 (1) coverage solely of the adult head of an assistance unit by an  
12 employer's health insurance plan shall not preclude other members of  
13 the assistance unit from receiving the additional 24 months of medical  
14 assistance; and

15 (2) an assistance unit with dependent children which, using the  
16 limits and methodologies contained in Title IV-A, would not be  
17 eligible for cash assistance under Title IV-A as a result of the  
18 collection of child or spousal support under Title IV-D of the federal  
19 Social Security Act (42 U.S.C. §651 et seq.), shall receive an  
20 additional four months of medical assistance beginning with the first  
21 month of ineligibility under the provisions of Title IV-A.

22

23 6. (New section) Single adults and couples without dependent  
24 children shall not be eligible for medical assistance for inpatient or  
25 outpatient hospital care or long-term care under the program, except  
26 that medical assistance shall be provided for the following, in  
27 accordance with regulations adopted by the commissioner:

28 (1) inpatient hospitalization costs for a recipient of general public  
29 assistance pursuant to P.L.1947, c.156 (C.44:8-107 et seq.) who is  
30 admitted to a special hospital licensed by the Department of Health  
31 and Senior Services which is not eligible to receive a charity care  
32 subsidy from the Health Care Subsidy Fund established pursuant to  
33 P.L.1992, c.160 (C.26:2H-18.51 et al.) and to which payments were  
34 made prior to July 1, 1991 on behalf of patients receiving general  
35 public assistance;

36 (2) nursing home costs for a person residing in a non-Medicaid  
37 certified nursing facility prior to July 1, 1995, whose income is above  
38 the Medicaid institutional cap and who does not otherwise qualify for  
39 State-funded nursing home care as a medically needy person pursuant  
40 to P.L.1968, c.413 (C.30:4D-1 et seq.), to be paid for out of a  
41 separate account from the Medicaid program; which assistance shall  
42 continue until the person is no longer eligible for long-term care; and

43 (3) nursing home costs for an alien residing in a Medicaid certified  
44 nursing facility prior to the effective date of this act who is not  
45 Medicaid-eligible under Pub.L.104-193; which assistance shall  
46 continue until the person is no longer eligible for long-term care.

1       7. (New section) a. The commissioner, in cooperation with other  
2 affected agencies of State government, shall report biennially to the  
3 Governor and the Legislature on the Work First New Jersey program,  
4 and shall include in that report any recommendations for changes in  
5 the law or regulations governing the program that the commissioner  
6 deems necessary to further the goals of the program. The  
7 commissioner shall determine the manner and terms of the reporting  
8 in accordance with the requirements of federal law.

9       b. The commissioner shall issue a public report on at least a  
10 quarterly basis concerning the number of recipients in the program, the  
11 number of recipients classified as exempt from time limits or deferred  
12 from work requirements, the number of recipients classified as to the  
13 degree of employability as defined by the commissioner, the number  
14 of recipients who have obtained employment, the number of recipients  
15 terminated from the program and the reasons for the terminations, the  
16 average wages and benefits earned by recipients, the types of  
17 employment obtained by recipients and whether the employment is in  
18 the public or private sector, the average length of stay by recipients in  
19 their jobs, and the number of former recipients who have re-entered  
20 the program after being terminated.

21       c. To the extent not otherwise provided pursuant to subsections a.  
22 or b. of this section, the commissioner shall conduct such research as  
23 he deems appropriate to evaluate the outcomes for recipients, and the  
24 benefits, costs and other effects of the program, and shall submit any  
25 report resulting from that research to the Governor and the Legislature  
26 and otherwise make copies available to the public.

27

28       8. (New section) The commissioner shall establish by regulation  
29 a standard of need and update the standard annually. The standard of  
30 need shall serve only as a benchmark against which the Legislature  
31 may decide on appropriations to fund cash assistance benefits to  
32 recipients.

33

34       9. Section 3 of P.L.1968, c.413 (C.30:4D-3) is amended to read  
35 as follows:

36       3. Definitions. As used in this act, and unless the context  
37 otherwise requires:

38       a. "Applicant" means any person who has made application for  
39 purposes of becoming a "qualified applicant."

40       b. "Commissioner" means the Commissioner of Human Services.

41       c. "Department" means the Department of Human Services, which  
42 is herein designated as the single State agency to administer the  
43 provisions of this act.

44       d. "Director" means the Director of the Division of Medical  
45 Assistance and Health Services.

46       e. "Division" means the Division of Medical Assistance and

1 Health Services.

2 f. "Medicaid" means the New Jersey Medical Assistance and  
3 Health Services Program.

4 g. "Medical assistance" means payments on behalf of recipients to  
5 providers for medical care and services authorized under this act.

6 h. "Provider" means any person, public or private institution,  
7 agency or business concern approved by the division lawfully  
8 providing medical care, services, goods and supplies authorized under  
9 this act, holding, where applicable, a current valid license to provide  
10 such services or to dispense such goods or supplies.

11 i. "Qualified applicant" means a person who is a resident of this  
12 State and is determined to need medical care and services as provided  
13 under this act, and who:

14 (1) Is a recipient of [Aid to Families with Dependent Children]  
15 benefits under the Work First New Jersey program established  
16 pursuant to P.L. , c. (C. )(pending before the Legislature as  
17 Assembly Bill No.12 of 1996);

18 (2) Is a recipient of Supplemental Security Income for the Aged,  
19 Blind and Disabled under Title XVI of the Social Security Act;

20 (3) Is an "ineligible spouse" of a recipient of Supplemental Security  
21 Income for the Aged, Blind and Disabled under Title XVI of the Social  
22 Security Act, as defined by the federal Social Security Administration;

23 (4) Would be eligible to receive public assistance under a  
24 categorical assistance program except for failure to meet an eligibility  
25 condition or requirement imposed under such State program which is  
26 prohibited under Title XIX of the federal Social Security Act such as  
27 a durational residency requirement, relative responsibility, consent to  
28 imposition of a lien;

29 (5) Is a child between 18 and 21 years of age who would be  
30 eligible for [Aid to Families with Dependent Children] the Work First  
31 New Jersey program, living in the family group except for lack of  
32 school attendance or pursuit of formalized vocational or technical  
33 training;

34 (6) Is an individual under 21 years of age who qualifies for  
35 categorical assistance on the basis of financial eligibility, but does not  
36 qualify as a dependent child under the [State's program of Aid to  
37 Families with Dependent Children (AFDC)] Work First New Jersey  
38 program, or groups of such individuals, including but not limited to,  
39 children in foster placement under supervision of the Division of  
40 Youth and Family Services whose maintenance is being paid in whole  
41 or in part from public funds, children placed in a foster home or  
42 institution by a private adoption agency in New Jersey or children in  
43 intermediate care facilities, including [institutions for the mentally  
44 retarded] developmental centers for the developmentally disabled, or  
45 in psychiatric hospitals;

46 (7) Meets the standard of need applicable to his circumstances

1 under a categorical assistance program or Supplemental Security  
2 Income program, but is not receiving such assistance and applies for  
3 medical assistance only;

4 (8) Is determined to be medically needy and meets all the eligibility  
5 requirements described below:

6 (a) The following individuals are eligible for services, if they are  
7 determined to be medically needy:

8 (i) Pregnant women;

9 (ii) Dependent children under the age of 21;

10 (iii) Individuals who are 65 years of age and older; and

11 (iv) Individuals who are blind or disabled pursuant to either 42  
12 C.F.R.435.530 et seq. or 42 C.F.R.435.540 et seq., respectively.

13 (b) The following income standard shall be used to determine  
14 medically needy eligibility:

15 (i) For one person and two person households, the income  
16 standard shall be the maximum allowable under federal law, but shall  
17 not exceed 133 1/3% of the State's payment level to two person  
18 households eligible to receive assistance pursuant to [P.L.1959, c.86  
19 (C.44:10-1 et seq.)] P.L. \_\_\_\_\_, c. \_\_\_\_\_ (C. \_\_\_\_\_)(pending before the  
20 Legislature as Assembly Bill No.12 of 1996); and

21 (ii) For households of three or more persons, the income standard  
22 shall be set at 133 1/3% of the State's payment level to similar size  
23 households eligible to receive assistance pursuant to [P.L.1959, c.86  
24 (C.44:10-1 et seq.)] P.L. \_\_\_\_\_, c. \_\_\_\_\_ (C. \_\_\_\_\_)(pending before the  
25 Legislature as Assembly Bill No.12 of 1996).

26 (c) The following resource standard shall be used to determine  
27 medically needy eligibility:

28 (i) For one person households, the resource standard shall be  
29 200% of the resource standard for recipients of Supplemental Security  
30 Income pursuant to 42 U.S.C.1382(1)(B);

31 (ii) For two person households, the resource standard shall be  
32 200% of the resource standard for recipients of Supplemental Security  
33 Income pursuant to 42 U.S.C.1382(2)(B);

34 (iii) For households of three or more persons, the resource  
35 standard in subparagraph (c)(ii) above shall be increased by \$100.00  
36 for each additional person; and

37 (iv) The resource standards established in (i), (ii), and (iii) are  
38 subject to federal approval and the resource standard may be lower if  
39 required by the federal Department of Health and Human Services.

40 (d) Individuals whose income exceeds those established in  
41 subparagraph (b) of paragraph (8) of this subsection may become  
42 medically needy by incurring medical expenses as defined in 42  
43 C.F.R.435.831(c) which will reduce their income to the applicable  
44 medically needy income established in subparagraph (b) of paragraph  
45 (8) of this subsection.

46 (e) A six-month period shall be used to determine whether an

1 individual is medically needy.

2 (f) Eligibility determinations for the medically needy program shall  
3 be administered as follows:

4 (i) County welfare agencies are responsible for determining and  
5 certifying the eligibility of pregnant women and dependent children.  
6 The division shall reimburse county welfare agencies for 100% of the  
7 reasonable costs of administration which are not reimbursed by the  
8 federal government for the first 12 months of this program's operation.  
9 Thereafter, 75% of the administrative costs incurred by county welfare  
10 agencies which are not reimbursed by the federal government shall be  
11 reimbursed by the division;

12 (ii) The division is responsible for certifying the eligibility of  
13 individuals who are 65 years of age and older and individuals who are  
14 blind or disabled. The division may enter into contracts with county  
15 welfare agencies to determine certain aspects of eligibility. In such  
16 instances the division shall provide county welfare agencies with all  
17 information the division may have available on the individual.

18 The division shall notify all eligible recipients of the Pharmaceutical  
19 Assistance to the Aged and Disabled program, P.L.1975, c.194  
20 (C.30:4D-20 et seq.) on an annual basis of the medically needy  
21 program and the program's general requirements. The division shall  
22 take all reasonable administrative actions to ensure that  
23 Pharmaceutical Assistance to the Aged and Disabled recipients, who  
24 notify the division that they may be eligible for the program, have their  
25 applications processed expeditiously, at times and locations convenient  
26 to the recipients; and

27 (iii) The division is responsible for certifying incurred medical  
28 expenses for all eligible persons who attempt to qualify for the  
29 program pursuant to subparagraph (d) of paragraph (8) of this  
30 subsection;

31 (9) (a) Is a child who is at least one year of age and under six years  
32 of age; and

33 (b) Is a member of a family whose income does not exceed 133%  
34 of the poverty level and who meets the federal Medicaid eligibility  
35 requirements set forth in section 9401 of Pub.L.99-509 (42  
36 U.S.C.1396a);

37 (10) Is a pregnant woman who is determined by a provider to be  
38 presumptively eligible for medical assistance based on criteria  
39 established by the commissioner, pursuant to section 9407 of  
40 Pub.L.99-509 (42 U.S.C.1396a(a));

41 (11) Is an individual 65 years of age and older, or an individual  
42 who is blind or disabled pursuant to section 301 of Pub.L.92-603 (42  
43 U.S.C.1382c), whose income does not exceed 100% of the poverty  
44 level, adjusted for family size, and whose resources do not exceed  
45 100% of the resource standard used to determine medically needy  
46 eligibility pursuant to paragraph (8) of this subsection;

1 (12) Is a qualified disabled and working individual pursuant to  
2 section 6408 of Pub.L.101-239 (42 U.S.C.1396d) whose income does  
3 not exceed 200% of the poverty level and whose resources do not  
4 exceed 200% of the resource standard used to determine eligibility  
5 under the Supplemental Security Income Program, P.L.1973, c.256  
6 (C.44:7-85 et seq.);

7 (13) Is a pregnant woman or is a child who is under one year of  
8 age and is a member of a family whose income does not exceed 185%  
9 of the poverty level and who meets the federal Medicaid eligibility  
10 requirements set forth in section 9401 of Pub.L.99-509 (42  
11 U.S.C.1396a), except that a pregnant woman who is determined to be  
12 a qualified applicant shall, notwithstanding any change in the income  
13 of the family of which she is a member, continue to be deemed a  
14 qualified applicant until the end of the 60-day period beginning on the  
15 last day of her pregnancy;

16 (14) Is a child born after September 30, 1983 who has attained six  
17 years of age but has not attained 19 years of age and is a member of  
18 a family whose income does not exceed 100% of the poverty level; or

19 (15) (a) Is a specified low-income medicare beneficiary pursuant  
20 to 42 U.S.C.1396a(a)10(E)iii whose resources beginning January 1,  
21 1993 do not exceed 200% of the resource standard used to determine  
22 eligibility under the Supplemental Security Income program, P.L.1973,  
23 c.256 (C.44:7-85 et seq.) and whose income beginning January 1,  
24 1993 does not exceed 110% of the poverty level, and beginning  
25 January 1, 1995 does not exceed 120% of the poverty level.

26 (b) An individual who has, within 36 months, or within 60 months  
27 in the case of funds transferred into a trust, of applying to be a  
28 qualified applicant for Medicaid services in a nursing facility or a  
29 medical institution, or for home or community-based services under  
30 section 1915(c) of the federal Social Security Act (42  
31 U.S.C.1396n(c)), disposed of resources or income for less than fair  
32 market value shall be ineligible for assistance for nursing facility  
33 services, an equivalent level of services in a medical institution, or  
34 home or community-based services under section 1915(c) of the  
35 federal Social Security Act (42 U.S.C.1396n(c)). The period of the  
36 ineligibility shall be the number of months resulting from dividing the  
37 uncompensated value of the transferred resources or income by the  
38 average monthly private payment rate for nursing facility services in  
39 the State as determined annually by the commissioner. In the case of  
40 multiple resource or income transfers, the resulting penalty periods  
41 shall be imposed sequentially. Application of this requirement shall be  
42 governed by 42 U.S.C. 1396p(c). In accordance with federal law, this  
43 provision is effective for all transfers of resources or income made on  
44 or after August 11, 1993. Notwithstanding the provisions of this  
45 subsection to the contrary, the State eligibility requirements  
46 concerning resource or income transfers shall not be more restrictive

1 than those enacted pursuant to 42 U.S.C. 1396p(c).

2 (c) An individual seeking nursing facility services or home or  
3 community-based services and who has a community spouse shall be  
4 required to expend those resources which are not protected for the  
5 needs of the community spouse in accordance with section 1924(c) of  
6 the federal Social Security Act (42 U.S.C. 1396r-5(c)) on the costs of  
7 long-term care, burial arrangements, and any other expense deemed  
8 appropriate and authorized by the commissioner. An individual shall  
9 be ineligible for Medicaid services in a nursing facility or for home or  
10 community-based services under section 1915(c) of the federal Social  
11 Security Act (42 U.S.C. 1396n(c)) if the individual expends funds in  
12 violation of this subparagraph. The period of ineligibility shall be the  
13 number of months resulting from dividing the uncompensated value of  
14 transferred resources and income by the average monthly private  
15 payment rate for nursing facility services in the State as determined by  
16 the commissioner. The period of ineligibility shall begin with the  
17 month that the individual would otherwise be eligible for Medicaid  
18 coverage for nursing facility services or home or community-based  
19 services.

20 This subparagraph shall be operative only if all necessary approvals  
21 are received from the federal government including, but not limited to,  
22 approval of necessary State plan amendments and approval of any  
23 waivers.

24 j. "Recipient" means any qualified applicant receiving benefits  
25 under this act.

26 k. "Resident" means a person who is living in the State voluntarily  
27 with the intention of making his home here and not for a temporary  
28 purpose. Temporary absences from the State, with subsequent returns  
29 to the State or intent to return when the purposes of the absences have  
30 been accomplished, do not interrupt continuity of residence.

31 l. "State Medicaid Commission" means the Governor, the  
32 Commissioner of Human Services, the President of the Senate and the  
33 Speaker of the General Assembly, hereby constituted a commission to  
34 approve and direct the means and method for the payment of claims  
35 pursuant to this act.

36 m. "Third party" means any person, institution, corporation,  
37 insurance company, group health plan as defined in section 607(1) of  
38 the federal "Employee Retirement and Income Security Act of 1974,"  
39 29 U.S.C.1167(1), service benefit plan, health maintenance  
40 organization, or other prepaid health plan, or public, private or  
41 governmental entity who is or may be liable in contract, tort, or  
42 otherwise by law or equity to pay all or part of the medical cost of  
43 injury, disease or disability of an applicant for or recipient of medical  
44 assistance payable under this act.

45 n. "Governmental peer grouping system" means a separate class  
46 of skilled nursing and intermediate care facilities administered by the

1 State or county governments, established for the purpose of screening  
2 their reported costs and setting reimbursement rates under the  
3 Medicaid program that are reasonable and adequate to meet the costs  
4 that must be incurred by efficiently and economically operated State  
5 or county skilled nursing and intermediate care facilities.

6 o. "Comprehensive maternity or pediatric care provider" means  
7 any person or public or private health care facility that is a provider  
8 and that is approved by the commissioner to provide comprehensive  
9 maternity care or comprehensive pediatric care as defined in  
10 subsection b. (18) and (19) of section 6 of P.L.1968, c.413  
11 (C.30:4D-6).

12 p. "Poverty level" means the official poverty level based on family  
13 size established and adjusted under Section 673(2) of Subtitle B, the  
14 "Community Services Block Grant Act," of Pub.L.97-35 (42  
15 U.S.C.9902(2)).

16 (cf: P.L.1995, c.292, s.1)

17

18 10. Section 2 of P.L.1987, c.283 (C.30:4D-6c) is amended to read  
19 as follows:

20 2. [A] Subject to the provisions of section 5 of P.L. , c. (C. )  
21 (pending before the Legislature as this bill), a person who becomes  
22 ineligible for financial assistance under the [aid to families with  
23 dependent children program, P.L.1959, c.86 (C.44:10-1 et seq.)]  
24 Work First New Jersey program established pursuant to P.L. , c.  
25 (C. ) (pending before the Legislature as Assembly Bill No. 12 of  
26 1996), due to earnings from, or increased hours of, employment, or  
27 receipt of benefits under the "unemployment compensation law,"  
28 R.S.43:21-1 et seq. or the "Temporary Disability Benefits Law,"  
29 P.L.1948, c.110 (C.43:21-25 et seq.), is eligible to continue receiving  
30 Medicaid benefits pursuant to P.L.1968, c.413 (C.30:4D-1 et seq.) for  
31 a period of 24 consecutive months, commencing with the month in  
32 which eligibility for [aid to families with dependent children] the Work  
33 First New Jersey program ceases, if the person:

34 [a. received financial assistance under the aid to families with  
35 dependent children program for three of the last six months prior to  
36 the person's becoming ineligible for the assistance, except in the case  
37 of a person who becomes eligible for aid to families with dependent  
38 children benefits on or after the effective date of this act; and]  
39 (Deleted by amendment, P.L. , c. )(pending before the Legislature  
40 as this bill).

41 b. would be eligible for [aid to families with dependent children]  
42 Work First New Jersey financial assistance, except for the person's  
43 income, resources or hours of employment.

44 (cf: P.L.1991, c.523, s.17)

45

46 11. Section 30 of P.L.1994, c.182 (C.44:10-5.9) is amended to

1 read as follows:

2 30. The director or other chief administrative officer of each  
3 agency or office administering assistance under the ["Aid to Families  
4 With Dependent Children" program] Work First New Jersey program  
5 established pursuant to P.L. , c. (C. )(pending before the  
6 Legislature as Assembly Bill No. 12 of 1996) shall:

7 a. cause copies of the voter registration forms and instructions  
8 provided for under subsections e. and f. of section 16 of P.L.1974,  
9 c.30 (C.19:31-6.4) and the declination form provided for in subsection  
10 b. of section 26 of P.L.1994, c.182 (C.19:31-6.11) to be distributed at  
11 each such agency or office to each person appearing in person thereat  
12 to apply for services or assistance provided thereby or to seek a  
13 recertification, renewal or change of address relative to the assistance  
14 provided at such office. An employee of the agency or office shall  
15 inquire of every such person whether the person, if not already  
16 registered to vote from the place of his or her present residence,  
17 wishes to be so registered and shall inform the person that whether or  
18 not the applicant chooses to register will not affect the person's  
19 eligibility for those services. The employee shall subsequently review  
20 the forms to determine whether or not the person wishes to register to  
21 vote. If the person does not wish to register, the employee shall  
22 provide the person with any assistance necessary to complete the  
23 declination form and then inform the person that the form will be  
24 retained by the employee. If the person wishes to register, the  
25 employee shall provide the person with any assistance necessary in  
26 completing the voter registration form; shall inform the applicant that  
27 the applicant may leave the completed form with the employee or mail  
28 it personally to the Secretary of State; and if the applicant chooses to  
29 leave the form, shall accept the completed form, stamp or otherwise  
30 mark the lower right hand corner of the document with the date on  
31 which it was so received, and forward it to the Secretary of State. The  
32 employee shall provide to each applicant who does not decline to  
33 register to vote the same degree of assistance with regard to the  
34 completion of the voter registration form as is provided by the office  
35 with regard to the completion of its own forms, unless the applicant  
36 refuses such assistance;

37 b. provide for the continuous supply of the forms and instructions  
38 specified in subsection a. of this section to every agency and office  
39 which provides assistance under [P.L.1959, c.86 (C.44:10-1) and]  
40 P.L. , c. (C. )(pending before the Legislature as Assembly Bill  
41 No. 12 of 1996), 42 U.S.C. §601 et seq. and the federal "Food Stamp  
42 Act of 1977," Pub.L.95-113 (7 U.S.C. §2011 et seq.);

43 c. provide the forms and instructions specified in subsection a. of  
44 this section in both the English and Spanish languages to the agencies  
45 and offices which are located in any county in which bilingual sample  
46 ballots must be provided pursuant to R.S.19:14-21, R.S.19:49-4 or

1 section 2 of P.L.1965, c.29 (C.19:23-22.4);

2 d. provide for the collection of completed voter registration forms  
3 by any employee of the agency or office for the transmittal of the  
4 forms to the Secretary of State;

5 e. provide that the forms, instructions and assistance specified in  
6 subsection a. of this section shall be provided to any person with a  
7 disability who receives assistance or services at that person's home  
8 from an employee of the agency or office;

9 f. inform each employee of the agency or office who assists in  
10 registering a person to vote that employee shall not:

11 (1) seek to influence an applicant's political preference or party  
12 registration;

13 (2) display any such political preference or party allegiance;

14 (3) make any statement to an applicant or take any action the  
15 purpose or effect of which is to discourage the applicant from  
16 registering to vote; or

17 (4) make any statement to an applicant or take any action the  
18 purpose or effect of which is to lead the applicant to believe that a  
19 decision to register or not to register has any bearing on the  
20 availability of services or benefits; and

21 g. make certain that no information relating to a declination to  
22 register to vote by an individual in connection with any type of  
23 application for service made by that individual at any agency or office  
24 is used for any purpose other than voter registration.

25 (cf: P.L.1994, c.182, s.30)

26

27 12. The commissioner, pursuant to the "Administrative Procedure  
28 Act," P.L.1968, c.410 (C.52:14B-1 et seq.), shall adopt rules and  
29 regulations to effectuate the purposes of this act and to comply with  
30 the requirements of Pub.L.104-193.

31

32 13. This act shall take effect immediately.

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#### 35 STATEMENT

36

37 This bill is part of a legislative package which establishes the "Work  
38 First New Jersey" program in the Department of Human Services as  
39 the State's consolidated public assistance program, replacing the  
40 current programs of aid to families with dependent children, (AFDC),  
41 AFDC emergency assistance, general assistance (GA), GA emergency  
42 assistance, the GA employability program, and the Family  
43 Development Initiative.

44 Specifically, concerning eligibility, the bill provides that a person  
45 who is a care giver to a dependent child who is that care giver's legal  
46 or blood relative shall be evaluated to determine whether that person

1 is eligible for benefits if that care giver's income is not in excess of  
2 150% of the poverty level. Also, the bill clarifies the eligibility of  
3 children in households with step parents.

4 The bill requires the program to provide supportive services to  
5 program recipients, including transportation and work expense  
6 vouchers, as well as an extension of Medicaid benefits and a child care  
7 subsidy for up to two years for households that become ineligible for  
8 cash assistance because of income from employment.

9 The bill also specifies that single adults and couples without  
10 dependent children shall not be eligible for medical assistance for  
11 inpatient or outpatient hospital care or long-term care under the  
12 program, except that medical assistance shall be provided for:

13 (1) inpatient hospitalization costs for a recipient of general public  
14 assistance pursuant to P.L.1947, c.156 (C.44:8-107 et seq.) who is  
15 admitted to a special hospital licensed by the Department of Health  
16 and Senior Services which is not eligible to receive a charity care  
17 subsidy from the Health Care Subsidy Fund;

18 (2) nursing home costs for a person residing in a non-Medicaid  
19 certified nursing facility prior to July 1, 1995, whose income is above  
20 the Medicaid institutional cap and who does not otherwise qualify for  
21 State-funded nursing home care as a medically needy person; and

22 (3) nursing home costs for an alien residing in a Medicaid certified  
23 nursing facility prior to the effective date of this act who is not  
24 Medicaid-eligible under Pub.L.104-193.

25 The bill requires the Commissioner of Human Services to report to  
26 the Legislature and Governor biennially on the program and to make  
27 certain quarterly reports available to the public.

28 The bill directs the Commissioner of Human Services to establish,  
29 by regulation, a standard of need and update that standard annually.  
30 The standard of need will serve as a benchmark against which the  
31 Legislature may decide on appropriations to fund cash assistance  
32 benefits to recipients.

33 Finally, the bill amends P.L.1994, c.182, the "motor voter" law, to  
34 update references in that bill to reflect the Work First New Jersey  
35 program.

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40 Enacts various provisions of welfare reform including supportive  
41 services and income disregards.