

Looking Out For Your Legal Rights®

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*Cuáles Son Sus
Derechos Legales*
La versión en
español la encontrará
al reverso.

Can Charity Care Help Me With My Hospital Bills?

DO YOU not have health insurance that covers bills for medical care that you received from a hospital in New Jersey? Do you have insurance, but like Medicare or some other health insurance, it covers only part of your hospital bills? If you do not have insurance coverage or you have coverage that does not cover all of your hospital bills—and you don't have Medicaid/NJ FamilyCare—you may be eligible for the New Jersey Charity Care Program to pay all or some of your hospital bills.

If you are eligible, Charity Care will cover the costs of hospital services that you receive in an acute care/general hospital in New Jersey.

What does Charity Care cover?

If you are eligible, Charity Care will cover the costs of hospital services that you receive in an acute care/general hospital in New Jersey. It will also cover the costs of hospital outpatient services, including dialysis and advanced life support services (often provided during emergency or ambulance services) if you are found eligible. Be aware, however, that some doctors who treat you in the hospital in which you have been approved for Charity Care will bill you for

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their services. These doctors claim that their services are not covered by Charity Care because they are not employees of the hospital. But there is a strong legal argument that all services provided in or by the hospital are covered by Charity Care. If you have been found eligible for Charity Care but you get bills afterwards from doctors connected to your hospital care, you should call the Legal Services office nearest you for assistance or LSNJLAWSM, Legal Services of New Jersey's statewide, toll-free legal hotline, at 1-888-576-5529.



To be eligible for Charity Care, you must meet income and asset requirements.

Who is eligible for Charity Care?

To be eligible for Charity Care, you must meet the following requirements:

- **Financial Eligibility—Income:** You will be eligible for full Charity Care coverage in 2018 if your annual gross income for the 12 months before your hospital care was not more than 200% of the federal poverty level, which is \$24,280 in 2018 for a single person. If your annual gross income is more than 200% of poverty but does not exceed 300%, Charity Care will cover up to 80% of your total bill based on a sliding income scale. This scale can be found on the New Jersey Hospital Care Payment Assistance Fact Sheet at www.state.nj.us/health/charitycare/documents/charitycare_factsheet_en.pdf. If family size is larger—your family includes you, your spouse, any minor children you support, and adults for whom you are legally responsible—the income eligibility limit is higher. For example, an applicant in a family of four will be eligible for full Charity Care coverage in 2018 if the family's

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annual gross income is \$50,200 (200% FPL) or less. And the applicant will still be eligible for partial Charity Care coverage in a family of four with income that is greater than \$50,200, if the income does not exceed \$75,300 (300% FPL). The income eligibility limit usually increases a small amount every year. Therefore, if you are being billed for hospital care that you received in 2016, 200% of the poverty level in 2016 was \$23,760 for a single person and \$48,600 for a family of four.

- **Financial Eligibility—Assets:** Assets are items that can be easily converted into cash. They include such things as savings and checking accounts, certificates of deposit (CDs), and Individual Retirement Accounts (IRAs). If you own the home you live in, however, the value of your home will not be counted as an asset. Assets are valued as of the date of the medical care you received at the hospital. The asset limit for one person is \$7,500; for a family it is \$15,000.
- **New Jersey Residency:** You must show that you lived in New Jersey at the time you received the hospital care. Non-New Jersey residents can also apply for Charity Care if their health or life would have been at serious risk if they had not sought immediate medical care at a New Jersey hospital. There is no citizenship or immigration status requirement for Charity Care eligibility.
- **Ineligibility for Medicaid/NJ FamilyCare:** You will not be eligible for Charity Care if you are eligible for Medicaid or NJ FamilyCare. The hospital can require that you apply first



There is no citizenship or immigration status requirement for Charity Care eligibility.

for Medicaid/NJ FamilyCare to show that you are not eligible for these programs before the hospital considers your application for Charity Care. You may have commercial insurance (individual or group insurance) or Medicare, however, and still be eligible for Charity Care. Often, these types of health insurance do not cover all the costs of your hospital care.

How is your income calculated?

When you apply for Charity Care, the hospital can calculate your annual income in three different ways. The hospital must then use the calculation for the period of time when your income was the lowest to determine your eligibility.

1. You may give the hospital proof of your gross income for the entire 12 months immediately before you received the hospital care;
2. You may give the hospital proof of your gross income for the three months immediately before your hospital care, and the hospital will multiply the three months' total by four to determine your gross annual income; and
3. You may also give the hospital proof of your gross income in the month

The hospital is required to inform you in writing about the availability of Charity Care. You must apply for Charity Care at the hospital where you received the medical care.

immediately before you received the hospital care, and the hospital will calculate your annual income by multiplying this amount by 12.

Therefore, if your income had not been the same in the 12 previous months before you received the health care, then you want the hospital to calculate your income with one of the alternate methods. It is very important to provide the hospital with the proofs of your income that allow them to make a decision most favorable to you.

What if I make too much money?

If your medical expenses are greater than 30% of your family's annual income (and you meet the Charity Care asset limit), the amount greater than 30% will be fully covered by Charity Care.

If your income meets the Charity Care income limit, but your assets are too high (\$7,500 for an individual; \$15,000 for a family), you may spend down your assets on the unpaid hospital bill until your assets are within the Charity Care limit. This can make you eligible for Charity Care coverage for the rest of your bill.

The Catastrophic Illness in Children Relief Fund is a special program for children in New Jersey with very large medical bills that are not covered by insurance. For more information, call 1-800-335-FUND (3863).

How much should a hospital charge me if my annual income is more than 200% of the poverty level?

A New Jersey law requires hospitals to charge uninsured patients *no more than 15%* above what the Medicare program pays the hospital for the same procedure. Medicare's fee schedules can be found online by matching the CPT codes (Current Procedural Technology, 4th Edition) at www.cms.gov/Center/Provider-Type/All-Fee-For-Service-Providers-Center.html?redirect=/center/provider.asp.

The law also requires the creation of a sliding scale, based on income up to 500% of poverty for the percentage of that amount that an uninsured patient must pay. That sliding scale has not yet been established by the State. If your income is between 200% and 300% of the poverty level, however, the Charity Care discount applied must be applied to a hospital bill that has already been adjusted to not more than 15% of the Medicare rate.

When and where do I apply?

The hospital is required to inform you in writing about the availability of Charity Care. You must apply for Charity Care at the hospital where you received the medical care. When you apply, a hospital may accept your Charity Care determination from another hospital, but is not required to do so. You can apply

for Charity Care at the hospital's business office or billing department.

You may submit a completed application for Charity Care up to a year from the date that you were discharged from being admitted as an inpatient at the hospital or a year from the date you received outpatient care at the hospital. That is why it is very important to apply for Charity Care as soon as possible after you receive the medical care. The hospital may accept an application within two years of these dates, but the hospital is not required to take an application past one year.

If the hospital thinks you may be eligible for another medical assistance program to pay for your hospital bill, like Medicaid/NJ FamilyCare, the hospital must refer you to that program. If you do not apply for that medical assistance program within three months, the hospital may bill you for the cost of your hospital care. *But if the hospital fails to inform you in writing that you can apply for Charity Care and Medicaid/NJ FamilyCare to cover the cost of your care, the hospital cannot bill you.*



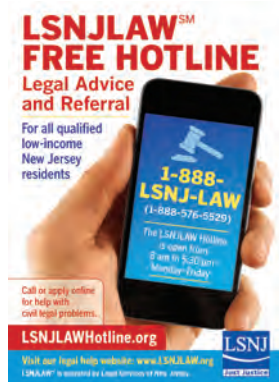
You may submit a completed application for Charity Care up to a year from the date that you were discharged as an inpatient at the hospital or a year from the date you received outpatient care.

For more information...

For more information about eligibility for New Jersey's Charity Care Program, please see our website, www.lsnjlaw.org. If you have been denied Charity Care or you would like legal help because you are being billed for medical care, please contact your regional Legal Services office or call our statewide legal hotline, LSNJLAWSM, at 1-888-LSNJ-LAW (1-888-576-5529). The hotline is open Monday through Friday, 8 a.m. to 5:30 p.m.

By Josh Spielberg, Chief Counsel, Legal Services of New Jersey

LSNJLAWSM, Legal Services of New Jersey's Statewide, Toll-Free Legal Hotline



Read more about your legal rights on our website, www.lsnjlaw.org. If you have questions or need legal advice with a civil legal matter, contact LSNJLAWSM, Legal Services of New Jersey's statewide, toll-free legal hotline, at 1-888-LSNJ-LAW (1-888-576-5529). You may also apply online at <https://lsnjlawhotline.org>. Hotline hours are Monday through Friday, 8 a.m. to 5:30 p.m. The Hotline provides free legal assistance to low-income New Jersey residents in civil legal issues. If you are not eligible for assistance from Legal Services, the hotline will refer you to other possible resources.

Maximizing SNAP Benefits— Getting Credit for Medical Expenses

WHEN SNAP decides the amount of your benefit, they consider the size of your household, your income, and some of your expenses. They take expenses like housing, child care, and medical expenses (for elderly and disabled people) into account when they look at your income by giving you a credit for certain necessary expenses. They subtract these credits, called “deductions,” from your income, so your “countable income” is lower. Once they have calculated your countable income, they compare it to your household size to determine your monthly SNAP benefit. Generally, the lower your countable income, the higher your benefit will be.

How do I know if I can deduct medical expenses?

You may be able to deduct medical expenses if:

- You are age 60 or older.
- OR**
- You receive Supplemental Security Income (SSI).
- OR**
- You receive disability benefits from Social Security (RSDI or SSDI).

If you qualify, you can deduct medical expenses that are more than \$35 in a month.

What medical expenses can be deducted?

Medical expenses you can deduct include:

- Medical and dental care
- Hospitalization or outpatient treatment, nursing care, and nursing home care
- Prescription drugs
- Health and hospitalization insurance policy premiums
- Medicare premiums paid by the household
- Dentures, hearing aids, eyeglasses, and prosthetics
- Securing and maintaining a specially trained service animal, including the cost of dog food and veterinarian bills
- Reasonable costs of transportation and lodging to obtain medical treatment or service
- Maintaining an attendant, homemaker, home health aide, child care services, or housekeeper, when necessary due to age, infirmity, or illness.

What expenses are not counted?

- You can only count medical bills that are actually paid or due from you. If insurance or another agency is paying the cost, you can't deduct that expense.
- You can only deduct medical expenses for someone who is elderly or disabled, even if you live with other people and get SNAP benefits with them.
- You can't deduct the cost of medically prescribed marijuana.
- You can't deduct food even if you need a special diet due to a disability.

You can only deduct medical expenses for someone who is elderly or disabled, even if you live with other people and get SNAP benefits with them.

How are medical expenses counted?

For ongoing and recurring expenses, the amount you pay each month will be deducted monthly. For one-time expenses, like a hospitalization or eye-glasses, you can deduct the total expense in one month or you can spread the total over your recertification period. Which way is better for you depends on your income and other expenses. If you need help deciding which method to use, you can ask your caseworker what the difference would be for each method. You can also contact the LSNJLAWSM hotline at 1-888-LSNJ-LAW (1-888-576-5529) or your regional Legal Services program.

What if I disagree with a decision about medical expenses?

If you think you are eligible for a medical deduction and the SNAP agency doesn't agree, you can ask for a fair hearing.

How do I get a fair hearing?

- ***Call the State Fair Hearings Hotline at 1-800-792-9773.***
- ***Put it in writing.*** If you go to the agency office to ask for a hearing, you should still make your request in writing, keep a copy for yourself, and get a receipt. That way, you will have proof that you asked for the hearing.

- ***Call the welfare office.*** Speak with your SNAP caseworker or with the Fair Hearing Liaison and tell them that you want a hearing. Make sure you get the name of the person you speak to and write it down. Ask them to send you a letter confirming that you asked for the hearing.

How much time do I have to ask for a fair hearing?

You have **90 days** from the date of the Division of Social Services' decision to ask for a fair hearing on a SNAP denial.

If you want your SNAP benefits to continue unchanged while you wait for a hearing, you must ask for a hearing within **15 days** of the day you get notice of a change in your case. Make sure that you say that you want your benefits to continue when you ask for the hearing. (If you lose your appeal, you will have to pay the extra benefits back. Usually, the SNAP office will recoup this out of future benefits you receive until it is paid back.)

If you need help with your SNAP benefits, you can call LSNJLAWSM, Legal Services of New Jersey's statewide, toll-free legal hotline, at 1-888-LSNJLAW (1-888-576-5529) for legal advice, information, and referral. □

*By Maura Sanders, Chief Counsel,
Legal Services of New Jersey*

UNEMPLOYMENT LAW

Additional Benefits During Training (ABT)

You may be eligible for training and continued unemployment benefits

IF YOUR UNEMPLOYMENT benefits are about to end and you still have not found employment, you may be eligible for training and continued benefits during training. The training is provided by the New Jersey Department of Labor (NJDOL), through its Workforce Development Partnership (WDP) Program.

What kind of help is available?

The Additional Benefits during Training (ABT) program provides up to 26 weeks of additional benefits to help people complete approved training programs that extend past the regular unemployment benefit period. The WDP counselor must work with a claimant on an employability plan for these benefits before a worker can enroll in a training program. If you are near the end of your regular unemployment benefits, speak with the unemployment agency about an employability plan.

You have until the latest of the following dates to tell the NJDOL that you are interested in enrolling in a training program:

- Within 60 days of the last day you worked,
- Within 30 days from the time the agency informed you about the ABT program, or
- Within 30 days from the time you and your counselor make an employability plan.

You must also meet basic requirements for ABT benefits. The NJDOL requires that claimants:

- Have been permanently terminated by their current employer.
- Are eligible for benefits at the time of termination.
- Did not have a simple misconduct disqualification
- Engaged in employment counseling with the agency.
- Notified the agency of the intent to enter into training identified in the employability plan.

How do I get started?

You cannot be considered for ABT benefits or for a training grant, such as payment of course expenses, if you enroll in training without the prior authorization of a WDP counselor. Contact your local One-Stop Career Center for an appointment with a WDP counselor. You can find the address and telephone number of the local One-Stop Career Center at www.careerconnections.nj.gov.

What if I'm not living in New Jersey?

If you live in another state and are claiming unemployment benefits through New Jersey, you may contact the New Jersey claims office at 1-888-795-6672 if you are interested in these benefits. You can enroll in training in another state with the help of your local career counselor and apply for New Jersey ABT benefits. □

*By Keith Talbot, Senior Counsel,
Legal Services of New Jersey*

Cuáles Son Sus Derechos Legales

Mayo 2018

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Si los beneficios que recibe por desempleo están a punto de expirar y aún no ha encontrado un empleo, usted podría reunir los requisitos para recibir capacitación y continuar recibiendo los beneficios durante dicho entrenamiento. *Página 1*

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*Looking Out
For Your Legal Rights*
Flip issue over for the
English edition of
*Looking Out for Your
Legal Rights.*

Los beneficios adicionales durante la capacitación (ABT)

Usted podría recibir capacitación y continuar recibiendo los beneficios

SI LOS BENEFICIOS que recibe por desempleo están a punto de expirar y aún no ha encontrado un empleo, usted podría reunir los requisitos para recibir capacitación y continuar recibiendo los beneficios durante dicho entrenamiento. El Departamento del Trabajo de Nueva Jersey, brinda esta capacitación a través de su programa *Workforce Development Partnership* (WDP).

continúa en la página 2

El boletín de educación jurídica para los habitantes de Nueva Jersey

continúa de la página 1

¿Qué tipo de ayuda hay disponible?

El programa para los beneficios adicionales durante el entrenamiento (ABT) proporciona auxilios adicionales por hasta 26 semanas, con el fin de permitirle a la gente completar los programas de formación aprobados que se extienden más allá del período regular de prestaciones por desempleo. El asesor del programa WDP tendrá que colaborar con el solicitante para hacer un plan de empleabilidad o inserción laboral antes de que el trabajador se



Usted podría recibir hasta 26 semanas de auxilios adicionales con el fin de completar un programa de formación aprobado.

pueda inscribir en un programa de capacitación. Si ya casi se le terminan los beneficios regulares, hable con la agencia de desempleo acerca de un plan de inserción laboral.

Usted tendrá hasta la última de las fechas presentadas a continuación para indicarle al Departamento del Trabajo de Nueva Jersey (NJDOL) que usted está interesado en inscribirse en un programa de capacitación:

- Dentro de los 60 días siguientes al último día que trabajó,
- Dentro de los 30 días a partir del momento en que el organismo le informó acerca del programa ABT, o
- Dentro de los 30 días desde el momento en que usted y su consejero(a) hacen un plan de empleabilidad.

¿Reúno los requisitos?

Para recibir los beneficios, ABT también tendrá que satisfacer los requisitos básicos. El NJDOL exige que todo reclamante:

Cuáles Son Sus Derechos Legales

Con respecto a *Looking Out*

Looking Out for Your Legal Rights® es publicada 10 veces al año por los Servicios Legales de Nueva Jersey. Si usted es un cliente de los Servicios Legales, puede obtener una copia en la oficina de Servicios Legales de su localidad. También puede leer *Looking Out* en nuestro sitio Web www.lsnj.org/espanol.

Suscripciones

La suscripción cuesta \$20 dólares por año.

Números atrasados

Puede ver números atrasados en www.lsnj.org/espanol.

Cambio de dirección

Si se muda, envíenos su nueva dirección y una copia de la etiqueta pegada al último ejemplar de *Looking Out*.

Comentarios

Si tiene alguna sugerencia o comentario con respecto a *Looking Out*, nos gustaría oírlo. Envíe toda correspondencia a:

Editor, *Looking Out*
 Legal Services of New Jersey
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 Edison, NJ 08818-1357
publicaciones@lsnj.org

Este boletín de noticias es sólo una información general. Si tiene un problema jurídico, usted debería ver a un abogado.

Una parte del costo de esta publicación se cubrió con la ayuda proporcionada por el fondo IOLTA del colegio de abogados de Nueva Jersey.

- Haya sido despedido permanentemente de su empleo actual.
- Al momento del despido, reunía los requisitos para recibir dichos beneficios.
- No tenía ninguna falta simple que le inhabilitara.
- Participe en la consejería laboral por medio de la agencia.
- Notifique al organismo la intención de conseguir la formación identificada en el plan de empleabilidad.

¿Cómo puedo empezar?

Si se inscribe en un entrenamiento sin previa autorización de un consejero de WDP, no se le podrá considerar apto para recibir los beneficios ABT o una beca, tal como el pago de los gastos del curso. Póngase en contacto con el centro local *One-Stop Career Center* para hacer una cita con un consejero de WDP. En el sitio www.careerconnections.nj.gov podrá encontrar la dirección y el número de teléfono de la oficina local de *One-Stop Career Center*.



En el sitio www.careerconnections.nj.gov podrá encontrar la dirección y el número de teléfono de la oficina local de *One-Stop Career Center*.

¿Qué pasa si no estoy viviendo en Nueva Jersey?

Si vive en otro estado y está solicitando los beneficios por desempleo en Nueva Jersey, puede ponerse en contacto con la oficina de reclamaciones en Nueva Jersey marcando el 1-888-795-6672. Con la ayuda de su asesor profesional local, puede inscribirse en un programa de formación en otro estado y solicitar los beneficios ABT en Nueva Jersey.

Este artículo fue traducido del inglés por Al Moreno, coordinador del servicio lingüístico en LSNJ.

¿Si no puedo encontrar un abogado, a dónde puedo acudir?

Llame a LSNJLAWSM, la línea directa gratuita de asistencia jurídica de los Servicios Legales de Nueva Jersey para todo el estado, al 1-888-LSNJ-LAW (1-888-576-5529) o solicite por medio de la Internet (sólo en inglés por el momento) en www.lsnjlawhotline.org. El horario de la línea directa es de lunes a viernes, desde las 8 de la mañana hasta las 5:30 de la tarde. Si no llena los requisitos para recibir asistencia de los Servicios Legales, la línea directa le enviará a otras posibles fuentes de información.

Cuáles son sus derechos legales, 2017

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