**NEW HAMPSHIRE BUREAU OF FAMILY ASSISTANCE (BFA) PROGRAM FACT SHEET**

This fact sheet gives basic information about eligibility, income, and resource requirements for each of the following programs: Financial Assistance to Needy Families, the State Supplement Program (Old Age Assistance, Aid to the Permanently & Totally Disabled, and Aid to the Needy Blind), Medicaid (Modified Adjusted Gross Income [MAGI] and non-MAGI categories, including Qualified Medicaid Beneficiaries and Specified Low Income Beneficiaries), the Supplemental Nutrition Assistance Program, Nursing Facility Care, Child Support Services, and NH Child Care Scholarship.

By policy, different types of income and resources are either counted or not counted to determine eligibility. This varies from program to program. In addition, there are amounts that can be subtracted from income; these also vary by program and are shown below as "disregards and deductions." Examples of income are wages, rental income, and most benefit income, including Social Security and SSI. Examples of resources are cash on hand, bank accounts, stocks/bonds, and unoccupied real property. Applicants must verify income, resources, disregards and deductions, identity, citizenship or alien status, social security numbers, residency, and all other eligibility factors required by the specific programs of assistance.

If you think a family or individual may be eligible for one of our programs, please have them visit [www.nhheasry.nh.gov](http://www.nhheasry.nh.gov) or [https://www.dhhs.nh.gov/apply-assistance](https://www.dhhs.nh.gov/apply-assistance), or contact the nearest DHHS District Office for more details.

### PROGRAM TITLE

<table>
<thead>
<tr>
<th>PROGRAM TITLE</th>
<th>FINANCIAL ASSISTANCE TO NEEDY FAMILIES (FANF)</th>
<th>STATE SUPPLEMENT PROGRAM (SSP)</th>
<th>MEDICAL ASSISTANCE (MEDICAID)</th>
<th>SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description</td>
<td>Financial Assistance to Needy Families offers financial assistance to eligible families with dependent children and certain relatives who need help caring for related children.</td>
<td>The State Supplement program provides financial assistance and/or medical assistance to needy individuals who meet the definition of one of the following categories: 1. Old Age Assistance (OAA) - 65 years of age or older, or 2. Aid to the Permanently &amp; Totally Disabled (APTD) - physically or mentally disabled and between the ages of 18 &amp; 64, or 3. Aid to Needy Blind (ANB) - blind (no age limit)</td>
<td>The Medicaid program pays for certain health care costs (doctor and hospital bills, prescriptions, dental care for children, etc.) for individuals who meet the medical and categorical requirements of the program.</td>
<td>The Supplemental Nutrition Assistance Program provides assistance to eligible families to purchase food items essential for good health.</td>
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</tr>
<tr>
<td>MONTHLY INCOME LIMITS</td>
<td>1</td>
<td>$720</td>
<td>$943</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>$986</td>
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<tr>
<td>4</td>
<td>$1,500</td>
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<td>4</td>
<td>$1,311</td>
</tr>
</tbody>
</table>

### RESOURCE LIMITS

- $1,000 for applicants, and $5,000 for recipients.

### DISREGARDS & DEDUCTIONS

- 20% of earned income for applicants
- Child/Dependent Care Costs
- Court-Ordered Child/Spousal Support
- Self-Employment Expenses

### OTHER ELIGIBILITY CRITERIA

- Receipt of FANF cash benefits is limited to 60 months over a lifetime. In most cases, parents must cooperate with Child Support Services in establishing paternity, if unknown, and establishing medical and financial child support. Some parents may also have to assign all rights to child support to DHHS while receiving financial assistance.

### MEDICAL ASSISTANCE (MEDICAID)

- The Medicaid program pays for certain health care costs (doctor and hospital bills, prescriptions, dental care for children, etc.) for individuals who meet the medical and categorical requirements of the program.

### SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP)

- The Supplemental Nutrition Assistance Program provides assistance to eligible families to purchase food items essential for good health.

### NURSING FACILITY CARE (NF)

- The Medicaid program can cover the cost of nursing facility care for individuals who are unable to afford the cost. To receive payments for nursing facility care, an individual must:
  - meet the general, technical, categorical, and financial requirements of a Medicaid program; and
  - have medical needs that require nursing facility care.

- Certain individuals meeting these requirements may be eligible to receive community-based services under one of several Home and Community-Based Care waivers instead of entering a nursing facility.

### INCOME LIMITS

- Categorically eligible households have no resource limit.
- Households in which at least one member is disabled or aged 60 or older: $2,500
- All other households: $2,750

### UTILITIES

- Shelter
- Child/Dependent Care
- Utilities
- Paid Child Support
- Self-Employment Expenses
- Medical for seniors and disabled
- Standard household deduction

### MEDICAID

- The individual's: gross monthly income must be less than $2,829 or net income must be less than $888.
- The individual's, income, expenses, and deductions, is used to offset the cost of care, with the balance paid by Medicaid.

### MEDICAL ASSISTANCE

- Medical assistance is $1,500. Certain life insurance policies and burial funds are not counted.

### DISREGARDS & DEDUCTIONS

- $13 standard disregard
- For working individuals: up to $50 (APTD or OAA) or $85 (ANB), and
- $18 or actual employment expenses (APTD or OAA) or ¼ of remaining earned income (ANB)

### OTHER ELIGIBILITY CRITERIA

- Cash applicants must apply for SSI, and must agree to a lien on all real estate owned by the assistance group. If living together, a spouse’s income, resources, and needs are considered when determining eligibility.

### MEDICAL ASSISTANCE

- Medical for seniors and disabled

### MEDICAL ASSISTANCE

- Medically needy resource limits: One person - $2,500
- Two persons - $4,000
- Three or more - $4,000 plus $100 for each additional person in the assistance group above two.

### MEDICAL ASSISTANCE

- Deductions may apply for the Non-MAGI Medicaid Assistance programs.

### MEDICAL ASSISTANCE

- Shelter
- Child/Dependent Care
- Utilities
- Paid Child Support
- Self-Employment Expenses
- Medical for seniors and disabled
- Standard household deduction

### MEDICAL ASSISTANCE

- When determining cost of care:
  - $74 Personal Needs Allowance ($90 VA)
  - Allocation to dependents
  - Uncovered Medical expenses

### MEDICAL ASSISTANCE

- The nursing facility must be licensed and certified by the State of NH. If appropriate, the individual must apply for VA Aid and Attendance allowance benefits.
The Bureau of Child Support Services (BCSS) locates responsible parents, establishes paternity, establishes child and medical support orders, reviews orders for possible adjustment per NH Guidelines, and enforces legal support orders. These services are provided regardless of whether the responsible parent lives in NH or in another state or country.

BCSS collects, tracks, and disburses support payments. Methods to collect child and medical support include interception of tax refund checks, mandatory wage withholding, interception of NH lottery prizes, interception of Unemployment Compensation and lens against real or personal property. BCSS can also report non-compliant obligors to a credit bureau, and can request that a licensing board or agency suspend, revoke, or deny an obligor’s license if he or she is not in compliance with a legal order for support. Passports may also be denied.

In addition, BCSS provides services to families that are not receiving public assistance. BCSS will charge a $35.00 annual fee to obligors who have never received public assistance, after the first $550.00 in support has been collected beginning October 1st of each year.

### Child Support Services NH Child Care Scholarship

- **Qualified Medical Assistance (MA)**: Certain Medicaid beneficiaries who are entitled to Medicaid Part A insurance, and whose income is no more than 100% of federal poverty guidelines (FPG). The MA categories that use MA GI are:
  - Children's Medicaid (CM): Children under age 19 with income no higher than 196% FPG. Children with severe disabilities (CSD) are also covered under this category.
  - Expanded CM: Children under age 19 with income higher than 196% FPG, but no higher than 318% FPG.
  - Pregnant Women (PW): Income can be no higher than 196% FPG.
  - Parents/Caretaker Relative (PCR): Adults must be a parent/caretaker relative of a dependent child, defined as a child under age 18, or under age 19 and a full time student in secondary school (or equivalent). The child must meet FAFN deprivation requirements. Net income must be less than or equal to a set income limit that is based on the FAFN payment standard, not the FPG.
  - Granite Advantage Health Care Program (Granite Advantage):

### Monthly Maximum Income Limits

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Monthly Observed Income Limits (PMI) ≤ 220% FPG</th>
<th>Monthly Maximum Income Limits (% FPG)</th>
</tr>
</thead>
<tbody>
<tr>
<td>PCR</td>
<td>CM/PX/FP</td>
<td>Expanded CM</td>
</tr>
<tr>
<td>&lt;100% FPG</td>
<td>&lt;196% FPG</td>
<td>&gt;196% FPG</td>
</tr>
<tr>
<td>1</td>
<td>$670</td>
<td>$1,616</td>
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<td>$2,756</td>
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<tr>
<td>4</td>
<td>$1,108</td>
<td>$3,325</td>
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<table>
<thead>
<tr>
<th>HH</th>
<th>QMB</th>
<th>SLMB120</th>
<th>SLMB135</th>
</tr>
</thead>
<tbody>
<tr>
<td>One person</td>
<td>$5,468*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Two people</td>
<td>$7,395*</td>
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</table>

*Note that MOAD’s net income limit is < 250% FPG; however, a special MOAD disregard makes the effective MOAD limit 450% FPG, to align it with MEAD’s net income limit.

### Medicaid for Employed Adults with Disabilities

- Medicaid for Employed Adults with Disabilities (MAED) and Medicaid for Employed Older Adults with Disabilities (MOAD) provide medical coverage to disabled working adults. MEAD and MOAD have higher income and resource limits than other Medicaid programs and also eligible recipients to return to work or increase their earnings. Some individuals who are eligible for MEAD or MOAD may be required to pay a health insurance premium.

To be eligible for MEAD, an individual must be 18 through 64 years old; to be eligible for MOAD, an individual must be 65 or older.

### Medicaid and MOAD individuals must:

- be employed or self-employed for pay; contribute to FICA;
- meet MEAD and MOAD income and resource criteria noted below;
- meet ANB or APTD medical criteria; or
- have a documented medical impairment that is included in the Social Security Administration’s Listing of Impairments and is expected to last 48 months or longer, and
- enroll in cost-free health insurance if their employer offers it.

Individuals and couples with income less than 150% FPG are not required to pay a premium. MEAD and MOAD premiums are reduced by the cost of other health insurance paid by the individual and/or his or her spouse.

### An applicant must also meet the general financial requirements/conditions of eligibility for Medicaid.

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