31. PROGRAM STATUS CODE

ACTIVE

*110 OAA CN - SSI Money Payment (MP) - (Federal Match (FM))
*120 OAA CN - Medicaid only, No Money Payment (NMP) - FM
140 OAA CN - Institutional Resident - NFM
*170 Aged MN - No Spenddown - FM
*180 Aged MN - Spenddown - FM
*190 NJC - Aged, OCN - Optional Categorically Needy - FM
*210 DA - CN SSI MP - FM
*220 DA - CN Medicaid only - NMP - FM
240 DA - CN Institutional resident, NFM
*270 DA - MN - No Spend-down - FM
*280 DA - MN - Spend-down - FM
*290 NJC - Disabled, Optional Categorically Needy - FM
*291 NJ Workability, 100-150% FPL - FM
*292 NJ Workability, 151-185% FPL - FM
*293 NJ Workability, 186-200% FPL - FM
*294 NJ Workability, 201-250% FPL - FM
*295 Breast and Cervical Cancer - FM
*310 AFDC Children 0-18-FM
*320 AFDC Parents - FM
*330 Household of One (State Use Only) NMP-FM
*340 MN - Pregnant Women - No Spenddown - FM
*350 MN - Pregnant Women - Spenddown - FM
*360 MN - Child - No Spenddown - FM
*370 MN - Child - Spenddown - FM
*380 Parent 19-64, >AFDC < 133% FPL - FM
*390 PEPW - Presumptively Elig. Pregnant Women - FM
*381 Aid Category 30 - Parent w/dependent children 138-205% FPL
391 NJ Suppl Prenatal Care Program-Other Pregnant Women - NFM
*461 Child 6-18, 107-142% FPL-FM
*462 Medicaid Special 19-21, 0-58% FPL-FM
*481 Child 1-5, >AFDC>142% FPL-FM
*482 Newborn <1,>AFDC < 194% FPL-FM
*483 Child 6-18,>AFDC< 107% FPL-FM
*485 MCHIP Uninsured Child 6-18, 107-142% FPL-FM
486 Plan B Child 142%-150% FPL-FM
487 CHIP Child 1-18, 150-185% FPL, Plan C-FM
488 CHIP Child 1-18, 185-200% FPL, Newborn 194-200% FPL, Plan C - FM
489 NJFC FFS Newborns > 194% to < or = 200% FPL-FM
*490 Pregnant Women 0-194% FPL-FM

493 CHIP Child 0-18, 200-250% FPL, Plan D-FM
494 CHIP Child 0-18, 250-300% FPL, Plan D-FM
495 CHIP Child 0-18, 300-350% FPL, Plan D-FM
496 NJFC, FFS, Newborn 201% - 350% FPL-FM
499 AFDC Pregnant Women, 194-200% FPL-FM
*510 AB - CN SSI MP - FM
*520 AB - CN NMP - FM
540 AB - CN Institutional Resident - NFM
*570 Blind - MN - No Spend-down - FM
*580 Blind - MN - Spend-down - FM
*590 NJC - Blind - Optional Categorically Needy - FM
*591 NJ Workability, 100-150% FPL - FM
*592 NJ Workability, sliding premium scale 151-185% - FM
*593 NJ Workability, sliding premium scale 186-200% - FM
*594 NJ Workability, sliding premium scale 201-250% - FM
*600 DCP&P - Optional Foster Care - Adoption Assistance
*620 DCP&P Medicaid Extension for Young Adults - FM
*630 ISS - First Two Bytes of Current ID > 21 - AFDC Related AFDC Recipient - FM
640 ISS - Institutional Resident - NFM 641 DCF/CSOC - Only - NFM
650 DCP&P - State Program - NFM
730 PAAD Under 65 - Disabled Casino Fund
740 PAAD Over 65 - Upper Income Casino Fund
750 PAAD Over 65 - Lower Income General Fund
*762 Single Adult/Childless Couple 19-64, 0-133% FPL - FM
770 Cystic Fibrosis - NFM
780 ADDP - NFM (DOH receives Ryan White funds) 800 Juvenile Services - NFM
801 DOC (Department Of Corrections) - NFM (Not On The RHMF, Assigned Internally)
810 County Juvenile Services - NFM 830 Senior Gold - Disabled
840 Senior Gold - Aged

INACTIVE

130 OAA CN - Categorically Related - NMP- (No Federal Match (NFM)) 150 PRUCOL - Aged - NFM
160 OAA CN - HCEP - NFM
230 DA - CN Categorically Related, NMP, NFM 250 PRUCOL - Disabled - NFM
260 DA - CN HCEP - NFM
300 FC Health Access, 0-150%, Plan D Services 100% State funds - NFM
301 FC Health Access, 151-250%, Plan D Services 100% State funds - NFM
*310 Pre MAGI: AFDC-C-CN Regular-MP-FM
*320 Pre MAGI: AFDC-C-CN Regular-NMP-FM

*330 Pre MAGI: AFDC-C - CN Regular - Categorically Related-No Money Payment (NMP) - FM
*380 Pre MAGI: Parents up to 133% FPL FM (Age < 21 Plan A; 21+ Plan D)
*410 Pre MAGI: Adult/Child not receiving TANF but AFDC/Medicaid Eligible
*420 Pre MAGI: AFDC-F - CN NMP - FM
430 Pre MAGI: AFDC-C-CN Regular-NMP-NFM
440 Pre MAGI: AFDC-F - CN NMP - NFM
450 Pre MAGI: AFDC-N - CN Adults - MP/NMP - NFM
451 AFDC-N Adult and Temporary Assistance Needy family (TANF) Approved
452 AFDC-N Adult but no TANF Approval
470 Pre MAGI: Adult/Child receiving TANF and in a non-Federally Matched Medicaid Extension (J or V) or an Adult/Child not receiving TANF and in a Medicaid Extension (any reason)
*480 Pre MAGI: NJ Care-Child, Optional Categorically Needy-FM
*481 Pre MAGI: NJ Care-Child, OCN, 2-6 Years to 133%-FM
*482 Pre MAGI: NJ Care-Child < 1 Yr, 133% to 185% FPL-FM
*483 Pre MAGI: NJC Child age 6 & over to 19 < or = to 100% FPL-FM
484 NJC-Child born before 10/1/83, but < or equal to 19, < or equal to 100% FPL-FM
*485 Pre MAGI: Plan A Child 6-19 100% to 133% FPL-FM
486 Pre MAGI: Plan B Child 133% to 150% FPL-FM
487 Pre MAGI: Plan C Child 150% to < or = 185% FPL-FM
488 Pre MAGI: Plan C Child 185% to < or = 200% FPL-FM
489 Pre MAGI: FC FFS Newborns (DOB until end of month following birth), 185% to < or = 200% FPL-FM
*490 Pre MAGI: NJC Pregnant Women, OCN, < or = 100% FPL-FM
*491 Pre MAGI: NJC Pregnant Women, OCN, to 133% FPL-FM
*492 Pre MAGI: NJC Pregnant Women, 133% to 185% FPL-FM
493 Pre MAGI: Plan D Child 200% to 250% FPL-FM
494 Pre MAGI: Plan D Child 250% to 300% FPL-FM
495 Pre MAGI: Plan D Child 300% to 350% FPL-FM
496 Pre MAGI: NJFC, FFS Newborn (DOB until the end of the month following birth), 201%-350%, FPL-FM
497 Plan D Parent 134%-150% FPL - FM
498 Plan D Parent 150% to 200% FPL - FM
499 Pre MAGI: AFDC Pregnant Women, 186-200% FPL-FM 530 AB - CN Categorically Related - NMP - NFM
550 PRUCOL - Blind - NFM
560 AB - CN HCEP - NFM
*600 Pre MAGI: ISS - First Two Bytes of Current ID > 21 - SSI MP - FM
*620 Pre MAGI: ISS - First Two Bytes of Current ID > 21 - Medicaid Only - SSI Related - FM

*630 Pre MAGI:DYFS - Title IV-E Foster Children - FM
700 FC HealthAccess, 0-150%, Plan D Services 100% State funds - NFM
701 FC HealthAccess, 151-250%, Plan D Services 100% State funds - NFM
760 GA - General Assistance Program (pre 9/2000 usage) - NFM
761 Pre MAGI:FamilyCare General Assistance Adults 0-23% FPL - FM as of 4/2011
763 Pre MAGI:FamilyCare Other Adults 51-100% FPL - NFM
764 Aid Category 70 - Single Adult/ Childless Couple 138-205% FPL
*These PSCs are considered Medicaid Title XIX when the SPC is not 40. Title XIX beneficiaries are Medicare Part D eligible when they are eligible for Medicare A, B, or C (including Part C SNPs).
Note: SPC 10, 11 and 18 are NOT eligible for Medicare. FPL = Federal Poverty Level
MAGI = Modified Adjusted Gross Income