

### Non-Discrimination Policy

Title VI of the Civil Rights Act of 1964, as amended; Section 504 of the Rehabilitation Act of 1973; Age Discrimination Act of 1975; and Americans With Disabilities Act of 1990 prohibit discrimination on the basis of race, age, color, national origin and/or disability in any program receiving federal funds.

### Services Available At

*18 Rector Street  
Newark, New Jersey 07102*

**Monday through Friday - 7:30 AM until 4:00 PM**

Wednesday evenings until 7:45 PM {First Floor}  
Saturday mornings - 9:00 AM until 12:45 PM {First Floor}



*50 South Clinton Street  
East Orange, New Jersey 07018*

**Monday through Friday - 7:30 AM until 4:00 PM**

*{973} 733-3000*

*Putting Essex County First*



## **COUNTY OF ESSEX DEPARTMENT OF CITIZEN SERVICES DIVISION OF WELFARE**



### **PUBLIC ASSISTANCE PROGRAMS**

*Putting Essex County First*

***Joseph N. DiVincenzo, Jr.***

County Executive

*Anibal Ramos, Jr.*

Director - Department of Citizen Services

*Bruce Nigro*

Director - Division of Welfare

## THE MISSION

To contribute to the mission of the Department of Citizen Services by providing financial assistance and social services to citizens in a manner that will strengthen family life, develop personal responsibility, foster self-reliance leading to productive work experience, provide shelter, and increase productivity through cost effective administration of programs which comply with Federal and State Regulations.

## WHAT WE DO

It is the Division's responsibility to ensure that the following State and/or Federal mandated programs and services are administered and delivered to eligible citizens of the county in a professional, cost-effective, and compassionate manner.

## INTRODUCTION

Each Social Service program is different. Each was designed for a specific purpose and has its own eligibility requirements. Those requirements may change due to Federal or State laws and regulations, or court decisions. All services are based on the availability of County, State, and/or Federal funds.

All services and programs are available to eligible Essex County residents, unless otherwise noted.

All agency staff will make every effort to meet your social service needs as provided for by law and regulation. We are committed to serve you.

All services are provided without regard to race, color, creed, sex, sexual orientation, national origin, ethnic background, marital status or disability.

## YOUR RIGHTS

### ALL SERVICES:

#### YOU HAVE THE RIGHT TO:

- Have information that you give during the application process be kept private and confidential.
- Receive a written advance notice Whenever your benefits are reduced or discontinued.
- Get an answer to any questions about benefits and/or information concerning other programs and services.
- Receive immediate and/or emergency assistance benefits, if eligible.
- Request a fair hearing if you don't agree with any decision by this agency about your eligibility for benefits.

### SPECIAL FOOD STAMPS PROVISIONS:

#### YOU HAVE THE RIGHT TO:

- Receive a Food Stamp application by mail or in person on the day you request to file an application.
- Have an adult who knows your circumstances make an application for you.
- Not be interviewed before filing an application. You need only to complete the applicant's name and address and have the application signed by a responsible adult household member or authorized representative.
- A home visit or telephone interview if you are 65 years of age or older or are disabled and you cannot find someone to go to the Food Stamp office for you.
- Receive Food Stamps within seven days if you are in immediate need and qualify for expedited services.
- Receive Food Stamps within thirty days from your application date if you are eligible and we have received the necessary information.

## YOUR RESPONSIBILITIES

### ALL SERVICES:

#### THE APPLICANT/HOUSEHOLD MUST:

- Complete and sign the application, be interviewed and cooperate in the verification of information.
- Provide agency with proof to support its income statements and cooperate in resolving any unconfirmed information.
- Cooperate in all reviews of its eligibility for benefits.
- Report changes in household circumstances, including but not limited to:
  - ▶ changes of address
  - ▶ changes in household size or composition
  - ▶ changes in income
  - ▶ increases in resources
  - ▶ acquisition of a motor vehicles
  - ▶ changes in shelter costs
  - ▶ changes in child care costs
  - ▶ changes in medical costs

### SPECIAL FOOD STAMPS

#### PROVISIONS:

#### THE APPLICANT/HOUSEHOLD MUST:

- Use food stamps only to purchase eligible items.
- Not put their money or possessions in someone else's name in order to qualify for food stamps.
- Not make changes on any food stamp cards, coupons or documents.
- Not sell, trade or give away any food stamps, coupons or documents.



### **Important Agency Telephone Numbers to Keep Handy**

<b><u>Program</u></b>	<b><u>Telephone Number</u></b>
FOOD STAMP	973-395-8000
MEDICAID/FAMILY CARE	973-645-7134 973-733-2468/2440
TEMPORARY ASSISTANCE FOR NEEDY FAMILIES	973-733-2319/3183
GENERAL ASSISTANCE	973-395-8000
EMERGENCY ASSISTANCE	973-645-8369
CHILD SUPPORT & PATERNITY	973-733-3392
NURSING HOME SERVICES	973-645-7084
ADULT MEDICAID PROGRAM	973-645-8342
INFORMATION & REFERRAL	973-733-3000

Inquiry calls will be referred to specific offices/staff

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## DOCUMENTS YOU WILL NEED TO APPLY FOR ASSISTANCE

This is a list of documents you will need to apply for different kinds of assistance. {Some of them may not apply to you or your family}. You need to bring **original documents** with you. We will make copies.

**You must prove who you are with one of the following:**

- ☞ Birth Certificate
- ☞ Driver's License
- ☞ Old Food Stamp ID
- ☞ School Photo ID
- ☞ Work Photo ID
- ☞ Voter Registration Card

**You must have the Social Security Number for all household members**

**You must prove where you live, unless you are homeless, with one of the following:**

- ☞ Current rent receipt showing landlord's name and phone number, your mailing address, and amount of rent
- ☞ Current rental assistance agreement
- ☞ Current mortgage statement and/or tax bill
- ☞ Current lease
- ☞ Utility bill

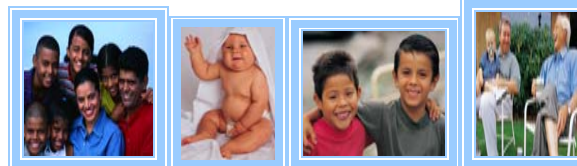
**If you are not able to work for medical reasons, you must bring a doctor's note.**

**If you are not a U.S. citizen, you need a current I-94 or current I-551 {green card}.**

**Resources:** If you have any of the following, you must bring records, statements, or proof of their current value:

- ☞ Bank Account {saving/checking}
- ☞ Vehicle {s} registration {car/truck/motorcycle, boat}
- ☞ Savings bonds
- ☞ Money in a credit union
- ☞ Christmas Club
- ☞ IRA, Keogh or other investments
- ☞ Property deed
- ☞ Vehicle registration
- ☞ Life, medical and/or auto Insurance policies
- ☞ Real estate {other than your home}
- ☞ Burial plots/pre-paid funeral arrangements

**YOU MAY BE ASKED FOR ADDITIONAL DOCUMENTS FOR LONGTERM MEDICAID**



**New Jersey FamilyCare/KidCare** FamilyCare provides affordable health care coverage. [NJ KidCare is now NJ FamilyCare](#). That means uninsured kids, parents, couples, and single adults can all enjoy affordable health coverage like the kind that already covers thousands of New Jersey children. NJ FamilyCare is not a welfare program, it is low cost health coverage through a variety of recognized Health Maintenance Organizations (HMOs).

**Refugee Resettlement Program** The Refugee Resettlement Program provides financial assistance, Medicaid and social services to individuals and/or families who have been designated refugees by the Immigration and Naturalization Service (INS) because they fled from, and cannot return to, their place of national origin due to fear of persecution because of race, religion or political opinion.

**Supplemental Living Support (SLS)** Cash assistance received under the WFNJ/TANF and WFNJ/GA programs is limited to 60 cumulative months, lifetime. The SLS program allows those who have reached the 60 month lifetime limit, based on SLS program criteria, to receive a monthly financial supplement.

**Supplemental Security Income** We provide services for clients who receive the Supplemental Security Income (SSI). This program is administered by the Social Security Administration.

**Supportive Assistance To Individuals and Families (SAIF):** The Supportive Assistance to Individuals and Families Program {SAIF} is a program for individuals and families who have received the maximum 60 months of public assistance. As long as you apply and adhere to program rules, your case will still receive cash benefits plus support services such as child care and transportation for up to 24 months.

**WFNJ Temporary Assistance for Needy Families** WFNJ Temporary Assistance for Needy Families is a program which provides financial assistance, Medicaid and social services to low-income families with children who are without parental support or care due to death, absence, or physical or mental incapacity of one or both parents. Families with both parents, who have very low or no income or resources, may also receive assistance.

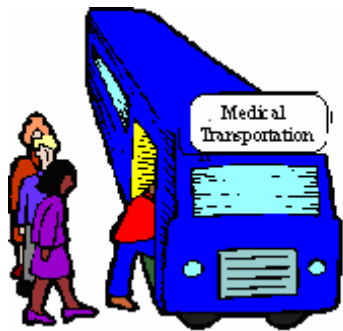
**Kinship Care Subsidy Program** The Kinship Care Subsidy Program provides monthly childcare subsidies to certain low-income individuals raising children whose parents are unwilling or unable to do so. Usually blood or marriage relates such caregivers to the children, but such a relationship is not necessary if the court awards guardianship to the caregiver.

**Medicaid Only Program** Medicaid Only is a program which provides full Medicaid services to aged (65 or over), blind or disabled individuals who are financially needy. These individuals may reside in a nursing home, a boarding home, their own home, or the home of another person.

**Medicaid Special Program** Medicaid Special is a program which provides full Medicaid services to individuals under 21 who are financially needy.

#### Medical Transportation Services

Medical Transportation Services is a program which provides for payment of reasonable and appropriate transportation cost for Medicaid recipients to obtain legitimate and required medical services covered by Medicaid. This is accessed through the State Division of Medical Assistance and Health Service.



**Medically Needy Program** Medically Needy is a program which provides limited Medicaid services to pregnant women, children under 21 and to aged (65 or over), blind or disabled individuals who are financially needy.

**New Jersey Care** New Jersey Care is a program which provides full Medicaid services to pregnant women, children born after September 30, 1983 and to aged (65 or over), blind or disabled individuals who are financially needy.

## DOCUMENTS YOU WILL NEED

continued

**Income:** You must show how much, how often you receive it, and where it comes from, with any of the following that apply to you.

- ☞ Your last 4 pay stubs, showing gross wages and deductions. If you are self employed, use last year's tax records, with signatures
- ☞ Copy of SSI, SSA, VA disability check or award letter
- ☞ Copy of Unemployment Insurance {UI} check or statement
- ☞ Copy of social security/pension check
- ☞ Copy of interest statement from bank
- ☞ Letter from employer giving amount of private disability
- ☞ Child Support-copy of court order or letter from absent parent/copy of check stub
- ☞ Signed/dated letter from provider of any money you receive on a regular basis
- ☞ Property deed
- ☞ Temporary State Disability
- ☞ Worker's Compensation

**Expenses: What you pay each month:**

- ☞ Rent Receipt
- ☞ Mortgage statement
- ☞ Home Owner's Insurance {if not included in your mortgage}
- ☞ Gas/Electric bill
- ☞ Phone bill
- ☞ Water/Sewer bill
- ☞ Coal/Wood/Oil bills
- ☞ Residential insurance
- ☞ Condo fees

**Medical Bills that you pay on a regular basis {only if you are over age 60 or are disabled}.**

**Child care:** If you pay for child care so you can work, go to job training or look for a job, you need a signed and dated letter from your child care provider with the following information:

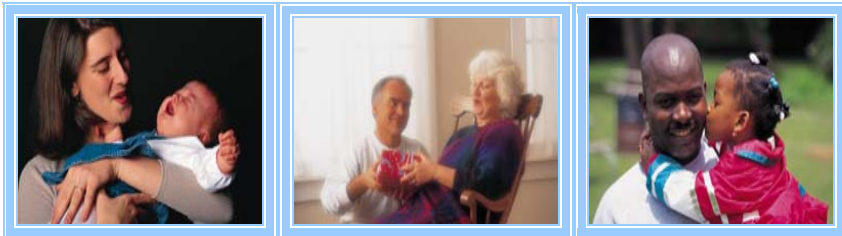
- °Name of child care provider
- °Hourly fee
- ° Number of hours per week they provide child care

**Child Support:** If you are under a court order to pay child support and you are paying it, you need proof of the following:

- °Who you pay
- °Child {ren}'s name
- °Court order number

**Boarding Home Services Program** The Boarding Home Services Program provides services to residents of boarding homes in Essex County which are intended to ensure their health and safety in the community. Some of the services provided include outreach, information and referral, case management and protective services to prevent possible abuse, neglect or exploitation.

**Child Support and Paternity Program Services** The Child Support and Paternity Program (CSP) has the responsibility to locate absent parents, establish paternity for children born out-of-wedlock, establish court orders for payment of child support and collect these monies for the support of the children. For more information 973-733-4703



**Global Options Program** The Global Options Program (G.O.) provides certain free in-home care services to aged (65 or over), blind or disabled individuals who are in need of such care as a result of serious illness. For more information call 973-645-8377

**Drug and Alcohol Abuse (SAI)** The Substance Abuse Initiative program is a free service that is provided through Work First NJ (WFNJ) to help individuals get treatment for alcohol or drug abuse problems.

**Early Periodic Screening, Diagnosis & Treatment** Early Periodic Screening, Diagnosis and Treatment (EPSDT) is a program which provides free medical and dental check-ups for Medicaid eligible recipients under 21 years of age. By regular check-ups problems can be identified early and be treated before they become more serious. These services are free to recipients. The only exception is that recipients of Medically Needy are not eligible for free EPSDT services.

An enhanced aspect of EPSDT, called Health Start, provides case management, follow-up and support services for EPSDT children under 2 years of age and pregnant women. Certified Health Start providers can determine a pregnant woman to be presumptively eligible and immediately provide free services. The woman then has 45 days to file application for Medicaid.

**Emergency Assistance Program** Emergency Assistance is a program which provides financial assistance and social services to eligible WFNJ/TANF/GA and SSI eligible. For more information 973-733-4645

**Family Violence Program** The domestic violence assistance program provides financial assistance, Medicaid and counseling services in a safe environment to eligible WFNJ/TANF/GA families and/or SSI individuals who are the victims of domestic violence.

**Food Stamp Program** Food Stamps is a program which provides benefits to low income families to increase their food purchasing power. Family First cards used in stores to purchase food (EBT).

**Funeral and Burial Expenses** Payment toward the cost of funeral and burial or cremation expenses may be made by the WFNJ Agency for certain eligible individuals.

**General Assistance (GA)** WFNJ/GA is a program for single adults and couples without dependent children. This program is designed to give you the assistance you need to get off Welfare and improve the quality of life. For more information 973-395-8000

**Home Energy Assistance** The Home Energy Assistance (HEA) program offers assistance to low-income families with the payment of heating costs during winter months as well as help with the payment of cooling costs during the summer months to individuals with a medically certified condition. Public assistance recipients automatically receive consideration for payment. Eligibility for low-income residents which includes emergency assistance for the purchase of fuel, completion of furnace repairs, correction of infiltration of cold air and other services is determined by:

**La Casa de Don Pedro  
317 Roseville Avenue  
Newark, New Jersey 07107  
973- 485-0701**