

RESOURCES FOR THE AT-RISK AND ELDERLY

The CARES Act includes an additional \$70 million in added funding for the Supplemental Nutrition Assistance Program (SNAP) for New Jersey to ensure everyone, including seniors and children, receive the food they need.

If you need help affording groceries, find out if you qualify for New Jersey's Supplemental Nutrition Assistance Program by visiting www.nj.gov/humanservices/njsnap/ or by calling the NJ SNAP Hotline number at 1-800-687-9512.

For seniors, contact the Aging & Disability Resource Connection to find out if you qualify for programs that provide meal services to your area: **Call 1-877-222-3737** or visit the Aging & Disability Resource Connection's website at: www.state.nj.us/humanservices/doas/home/saaaa.html

Additional meal delivery resources, please call to make arrangements:

Catholic Family & Community Services

Delivers to Passaic and Sussex Counties 973-209-0123

Essex County Division of Senior Services

Delivers nutritious meals to homebound seniors in all of Essex County 973-395-8375

Meals on Wheels Association of America

703-548-5558

Mobile Meals of Westfield

Delivers to Westfield and surrounding towns 908-233-6146

Morris County's Senior Citizen Nutrition Project 973-285-6857

Morristown Meals on Wheels

Delivers to Morristown, Morris Township and Convent Station 973-538-2160

Passaic County Division of Nutrition Services

Delivers nutritious meals to homebound seniors in all of Passaic County 973-569-4099

SAGE Eldercare

Delivers to Summit and surrounding towns 908-273-5554

Somerset County Office on

Delivers to Somerset County 908-704-6346

Sussex County Division of Senior Services

973-579-0555

Trinity Lutheran Church

Delivers to Dover, Mine Hill and Wharton 973-366-2821

<u>Union County Department of</u> Human Services

Serves all of Union County 908-486-5100

Warren County Division of Aging and Disability Services

Delivers nutritious meals to homebound seniors in all of Warren County 908-475-6591



FREQUENTLY ASKED QUESTIONS: SENIORS

How does this bill increase access to telehealth services for seniors and other Medicare beneficiaries?

The CARES Act gives the Secretary of Health and Human Services (HHS) broad authority to allow more health care providers to provide telehealth services to Medicare beneficiaries, including in the beneficiaries' homes to avoid potential exposure to COVID-19, and provide more flexibility in terms of how those telehealth services can be provided. Once enacted into law, the HHS Secretary must put out guidance explaining how this expanded waiver authority will be used to increase access to telehealth services for seniors and other Medicare beneficiaries.

How much will patients have to pay for the COVID-19 vaccine once it becomes available?

The CARES Act ensures that the vaccine itself and its administration is free to beneficiaries with Medicare Part B and those with Medicare Advantage who receive the vaccine from an in-network provider.

Additionally, the Families First Coronavirus Act required that all private insurance plans cover coronavirus testing without deductibles, coinsurance, or co-pays. That bill also prohibited plans from using tools like prior authorization to limit access to testing. The CARES Act makes a technical correction to ensure that the policy covers all tests that meet the appropriate standards. Insurers also have to cover fees for visits to the ER, an urgent care center, or a doctor's office associated with getting a test without cost sharing.

The Affordable Care Act required that preventive services and vaccines be covered by private insurance without cost-sharing. Normally, these services and vaccines are covered starting on the first day of the plan year beginning after they get a favorable rating or recommendation from the United States Preventive Services Task Force or the Advisory Committee on Immunization Practices. This section requires that coverage without cost sharing begin fifteen days after getting a favorable rating or recommendation.

How will seniors access the medications they need while also being told it's better to stay at home? In the past, Medicare drug plans only let beneficiaries receive a 30 day supply of their prescription.

Under the CARES Act, during the COVID-19 Public Health Emergency (PHE) a senior on Medicare can get up to 90 days of a prescription if that is what the doctor prescribed, as long as there are no safety concerns. Medicare drug plans will also allow beneficiaries to fill prescriptions early for refills up to 90 days, depending on the prescription.

If a patient has COVID-19 and has to enter the hospital, can their regular personal care attendant, who they depend on at home, still help while the patient is in the hospital?

Under the CARES Act, state Medicaid programs now have the ability, should they choose to pick up the option, to allow direct support professionals to continue to provide care and services for patients they are supporting in the hospital, including seniors and individuals with disabilities.