

Looking Out For Your Legal Rights®

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*Cuáles Son Sus
Derechos Legales*

La versión en
español la encontrará
al reverso.

FAMILY LAW:

Child Support Issues for Parents Living in Different States

This is the third in a series of three articles about parents and children who live or hope to live in different states. The first article, about the legal steps necessary to relocate with a child to another state, was published in the May 2009 issue of *Looking Out for Legal Your Rights*. The second article, in the July-August 2009 issue, discussed the importance of maintaining the child's relationship with both parents. This article will address child support issues for parents who live in different states.



The law that helps courts decide which state will hear child support cases when parents live in different states is called the Uniform Interstate Family Support Act.

Note: If you missed any of the articles in this series, they are all available on our Web site, www.lsnjlaw.org.

When a custodial parent (the parent with custody of a child) needs child support from a non-custodial parent who lives in another state, it can be confusing

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Child Support

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to try to figure out which state court to turn to for help. There are rules that guide which court in which state may consider child support cases.

Usually, a state court may enter an order requiring payment of money from a parent who lives in another state only if that out-of-state parent has a specific connection to the other state. This connection gives the court something that is known as *personal jurisdiction* or *jurisdiction over the person*. Personal jurisdiction is a set of rules for determining whether or not a specific state court may hear a case involving certain specific persons.

How does a court decide which state will hear child support cases?

The law that helps courts decide which state will hear child support cases when parents live in different states is called the Uniform Interstate Family Support Act (UIFSA). UIFSA has rules for each step of the process of getting child support.

- Step One: Getting a court to issue the first child support order (*establishment*);
- Step Two: Changing the amount of a child support order when the income of either parent has changed (*modification*); and
- Step Three: Pursuing collection of the order (*enforcement*).

How does a state court get personal jurisdiction over a parent?

Under UIFSA, a state may get or keep personal jurisdiction over a non-custodial parent if:

- The non-custodial parent is personally served (given a copy of documents in person) with a summons or notice (an official document telling the parent that he or she is directed to come to court) within that state;
- The non-custodial parent voluntarily agrees to have the court of a particular state hear the matter;
- The non-custodial parent fails to contest (object to) the jurisdiction issue;

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As long as at least one parent still lives in the first state to enter a child support order, that state is the *only* state that can change the order.



- The non-custodial parent lived with the child in the particular state at any point in the past;
 - The non-custodial parent lived in the state before the child's birth and provided prenatal expenses or support for the child;
 - The child lives in the state as a result of the acts or directives of the non-custodial parent; or
 - The non-custodial parent engaged in sexual intercourse in the state, and the child may have been conceived by that act of intercourse.
- If the court of the custodial parent's home state does not have personal jurisdiction over the non-custodial parent, the custodial parent may voluntarily submit to the jurisdiction of the court in the home state of the non-custodial parent. The custodial parent would then file his or her application for child support in the non-custodial parent's home state.

The laws of the state that enters the first child support order are the laws that will determine the following:

- How should the amount of child support be calculated?
- When does a child no longer need child support?
- Should parents contribute to the child's college education?

STEP ONE:

Getting the First Child Support Order (Establishment)

Personal jurisdiction over both parents required: To hear a new child support case, a court must have personal jurisdiction over both parents. (See *How does a state court get personal jurisdiction over a parent?* above for ways a state court can declare personal jurisdiction over a parent in another state.)

- If, at the time the custodial parent first applies for a child support order, both parents and child reside in the same state, the court of that state will enter the order.
- If the whole family previously lived in the home state of the custodial parent and child, that state will continue to have personal jurisdiction over the non-custodial parent, even after he or she moves away.

STEP TWO:

Applying to the Court to Change (Modify) a Child Support Order

If at least one parent still lives in the state that entered the first child support order:

Under UIFSA, the state where the first child support order was entered has *continuing exclusive jurisdiction* over the case. This means that, as long as at least one parent still lives in the first state to enter a child support order, that state is the *only* state that can change the order. So, whether the custodial or non-custodial parent wants to change the child support order, he or she must apply for modification through the court of the

same state that entered the first child support order. (*Note:* If a parent moves to a *different county within the state* after the first interstate child support order is entered, an application to modify the order may have to be filed in a different county courthouse within the state, but the state does not change.)

If both parents have moved out of the state that issued the first child support order: If both parents have moved out of the state that issued the first child support order, the same rules used to determine where to get the first child support order are used to determine which state should decide the application for a change (modification) in the order.

Jurisdiction after the Modified Child Support Order Is Entered

After the court hears the application to modify the order, the court that enters the modified order becomes the court that will have continuing exclusive jurisdiction over the case. From this point forward, the following rules apply:

- *Where at least one parent remains in the state of the court that issued the modified order:* Only that state may hear future applications about this child support case.

- *Where both parents move out of the state that issued the modified order:* The same rules used to determine where to get the first child support order are used to determine which state should decide any future applications for a modification of the order.

Which state laws does a court use to determine certain issues in an application to modify a child support order?

In applications to modify child support orders, different state laws are applied to decide different issues, such as the amount of child support, whether a child still requires support, and whether parents should contribute to college expenses. This is important, because states have different laws about these issues. For example, New Jersey requires parents to contribute financially to the college education costs of their children. This is not the law in many other states. The UIFSA rules for the most common issues are:

- *Determining the amount of child support to be paid:* The laws of the state that gains jurisdiction to modify or change a child support order are used to determine this issue.
- *Determining the issue of when a child no longer requires support:* The laws of the state that entered the original



In applications to modify child support orders, different state laws are applied to decide different issues, such as the amount of child support, whether a child still requires support, and whether parents should contribute to college expenses.

child support order are used to determine this issue.

- **Determining the issue of whether parents should contribute to the child's college education:** The laws of the state that entered the original child support order are used to determine this issue.

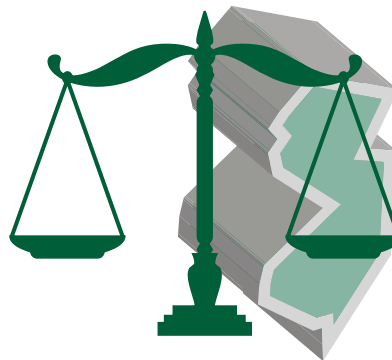
STEP THREE: Collecting Child Support (Enforcement)

As described above, under UIFSA, only one state at a time is allowed to enter or modify the amount of a child support order. However, enforcement is a different matter. The custodial parent can bring an application to enforce child support in either of two places:

- The state that has the “continuing exclusive jurisdiction” (the last state to enter or modify the child support award), or
- The state where the non-custodial parent lives.

The UIFSA statute gives the custodial parent two choices for enforcement. This is so that he or she may get help from local authorities in the state where the non-custodial parent resides. It is often easier for local authorities to garnish wages or execute arrest warrants against the non-custodial parent than it is for child support officials in a distant state.

And, often, in cases where a non-custodial parent lives out of state but a New Jersey court has jurisdiction to enter or modify a child support order, the New Jersey Superior Court probation department (the agency in charge of helping with child support collection) will send the case to the state of the non-custodial



In New Jersey, each county courthouse has a UIFSA coordinator.

parent for enforcement of the court order and collection of the child support.

UIFSA Coordinators

The UIFSA statute requires each state to provide a UIFSA coordinator to help parents who need to file interstate child support orders. The UIFSA coordinator knows about UIFSA procedures and will work with a parent who needs to file an interstate child support application. This way, a parent seeking support does not have to travel to another state to file an application for child support.

In New Jersey, each county courthouse has a UIFSA coordinator. If you live in New Jersey and have questions about whether or not the New Jersey courts may hear your child support case, you may apply through the court in your county for child support. If you need to file your application in another state, the UIFSA coordinator will advise you and assist you with the procedure. To get in touch with a UIFSA coordinator in your local county courthouse, see the list of telephone numbers for Superior Court Family Division Managers at www.judiciary.state.nj.us/directory/familymgr.htm. □

*By Mary M. McManus-Smith, Senior Attorney,
Legal Services of New Jersey*

The 2010 Census: An Opportunity for New Jersey Communities

THE CENSUS is a count of everyone living in the United States. Census counts happen every 10 years, and the next census will take place in 2010. In the past, low-income people were especially likely

In 2008, about 740,000 New Jerseyans (8.7 percent of the state's population) had a household income below the federal poverty level. This count was done well before the recession was in full swing. Currently, many more people are jobless, making it more likely that the number of people in poverty has risen since 2008.

to be passed over in census counts. It is important for all New Jerseyans to make sure that the residents of their communities are correctly counted in the 2010 census.

tribal governments in the U.S. These funds are used for education, health care, neighborhood improvements, transportation, and other services. Census data also affects how New Jersey citizens are represented in local, state, and national government. For example, census counts are used to decide how many representatives New Jersey has in Congress.

Who is counted?

The census counts every person who lives in the 50 states, in the District of

Columbia, and U.S. territories, such as Puerto Rico. Both citizens and non-citizens are counted, including undocumented immigrants. The census form does not ask about immigration status.

Is my privacy protected?

All information gathered in the census is protected and kept private. Census information is protected by the strongest privacy laws we have. The information is *not* made available to other government agencies, courts, law enforcement, banks, employers, landlords, or credit agencies. None of these agencies or people may get access to individuals' census responses.

When is the census held, and do I have to participate?

Federal law requires that everyone participate in the census. Census forms with 10 short questions and a postage-paid return envelope will be mailed or delivered in March 2010. The form will be available in English and in English/Spanish. Households that do not complete the form may receive a visit from a census taker, who will ask the 10 census questions in person.

Census Bureau Web site

You may read more about the census on the Census Bureau Web site at <http://2010.census.gov/2010census/how/index.php>. (*Note:* The census form cannot be filled out online.)

By Sabine Schoenbach, Senior Researcher and Policy Analyst, LSNJ Poverty Research Institute

The Federal Payment Levy Program

A LEVY IS a special way to collect taxes where the government takes what a taxpayer owes by taking money from the income of the taxpayer. The IRS may levy on the assets or income of all taxpayers owing taxes, including Social Security benefits. There are two ways that the IRS may levy upon Social Security benefits: through the automated Federal Payment Levy Program (FPLP) or by a manual (non-FPLP) levy.

The Federal Payment Levy Program

The Federal Payment Levy Program (FPLP) is a simple way for the IRS to collect taxes. All the IRS has to do is match its records of delinquent taxes to the government's Financial Management Service records, which show who is entitled to receive Social Security benefits. After making a match, the IRS sends several notices telling a taxpayer that the IRS will begin a levy on his/her Social Security benefits. Under the FPLP, the IRS may levy up to 15 percent of a person's Social Security benefits each month. This includes retirement, survivors, and disability insurance benefits. The IRS is not allowed to levy certain benefits, including children's benefits, Supplemental Security Income

payments (SSI), and lump sum death benefits.

The Non-Federal Payment Levy Program (Manual Levy Program)

The manual levy is a more difficult process for the IRS. This process is usually used only when a taxpayer has been completely uncooperative and/or unresponsive. For a manual levy, an IRS Revenue Officer is assigned to the taxpayer's account. Under a manual levy, the IRS may take up to 100 percent of the taxpayer's income or assets each month until the tax debt is satisfied. However, under the manual levy program, the taxpayer may set aside a certain amount of income for reasonable living expenses. The IRS may not levy on that amount. The set-aside amount is currently \$779.17 each month for a single taxpayer.

What should I do if I receive a letter or notice from the IRS?

If you receive any sort of letter or notice from the IRS, such as a Notice of Intent to Levy or a Final Notice of Intent to Levy, you should take action immediately. If you do not respond to the notice, it is likely that you will forfeit your

Under the Federal Payment Levy Program, the IRS may levy up to 15 percent of a person's Social Security benefits each month. This includes retirement, survivors, and disability insurance benefits.





If you believe that you owe the tax debt, but you are unable to pay it, you have several options.

Social Security benefits to the IRS. The first thing you should do is to try to figure out if you actually owe the tax.

What can I do if I do not owe the tax?

If you feel that you do not owe the tax, you may do one of two things:

- File for an audit reconsideration, and show evidence that the debt is wrong, or
- File for innocent spouse protection.

The IRS will suspend the levy action while it considers these applications. Both of these actions may take months to be reviewed.

What should I do if I owe the tax but cannot pay it?

If you believe that you owe the tax debt, but you are unable to pay it, you may:

- Enter into an installment agreement with the IRS,
- Request that the IRS consider your account to be currently not collectible, or
- Submit an offer in compromise to the IRS.

Call LSNJ's Low-Income Tax Clinic

The Low-Income Tax Clinic at Legal Services of New Jersey is available to assist you if you receive a levy notice from the IRS. For any tax-related questions, contact the Low-Income Tax Clinic at 1-888-576-5529. Remember, if you do not respond to the notice, it is likely that you will forfeit your Social Security benefits to the IRS.

*By Marcie Harrison, Senior Attorney,
Legal Services of New Jersey Tax Legal Assistance Project*

www.LSNJLAW.org

Visit our Web site for legal information, forms, publications, resource calculators, and much more.

HEALTH LAW: Managed Care Plans What Are They and What Are My Rights?

MANAGED CARE plans are businesses that manage the delivery of health care services to consumers to control the costs of providing care. There are many types of managed health care plans, but HMOs (Health Maintenance Organizations) are the most common. Other types of managed care plans include PPOs (Preferred Provider Organizations) and POS (Point of Service plans).

What most managed care plans have in common are cost-saving factors, such as covering only a set package of services, limiting the number of providers that an enrollee can use (in-network), and/or higher costs for enrollees who go to doctors outside the plan's network. The plans also contract with doctors and health care providers on what is called a *capitation* basis. Under a capitation agreement, a plan pays providers a set amount for each enrollee they see and not according to the cost or the complexity of the services they give the enrollee. Also, managed care plans usually require enrollees to have one doctor as their primary care provider who must approve and authorize the enrollee's use of any medical specialists.

Examples of managed care plans in New Jersey:

- **HMOs (Health Maintenance Organizations).** HMOs arrange for the coverage of specific health care services that are needed by plan enrollees for a fixed, prepaid premium. Most HMOs also require a co-payment from enrollees for such services as office visits and prescription drugs.

There are currently 12 HMOs that are approved by the New Jersey Department of Banking and Insurance (DOBI) to issue HMO and POS products. Some are commercial HMOs (they sell their benefit plans/policies to the public) and some cover only Medicare and/or Medicaid beneficiaries. You can see by the charts at www.state.nj.us/dobi/lifehealthactuarial/hmo2008/contacthmo.html that two of the five Medicaid-contracted HMOs for New Jersey also have benefit plans ("product lines") that they sell directly to individuals and employers.

- **PPOs (Preferred Provider Organizations).** PPOs pay providers an agreed-upon amount to treat their enrollees. Enrollees often have a larger selection of providers in a PPO plan.
- **POS (Point of Service Plans).** A POS plan generally permits its enrollees to decide, at the time the service is needed, whether to see an in-network or out-of-network provider. Enrollees will have a much larger co-pay if they choose an out-of-network provider.



Do I have any legal rights to get the care I need in managed care plans?

If you are enrolled in a managed care organization, such as an HMO, and you have Medicaid or Medicare in New Jersey, you have special rights under federal and state law to appeal decisions that affect your Medicaid and Medicare eligibility, coverage, and access to medical care. Please see the NJ FamilyCare, Medicaid, or Medicare topics on www.lsnjlaw.org for more information.

All consumers who are enrolled in a managed care organization in New Jersey are protected by the Consumer Bill of Rights. These legal rights include such important protections as having access to a primary care provider 24 hours a day for 365 days a year for urgent care,

the right to have a doctor—and not an administrator—make the decision if your care is denied or limited, and the right to appeal decisions that deny or limit coverage of your medical care.

All managed care consumers have the legal right to appeal decisions that negatively affect their health care.

If you need help, you should also contact your nearest Legal Services office or call LSNJ-LAW™, Legal Services of New Jersey's statewide, toll-free legal hotline, at 1-888-LSNJ-LAW (1-888-576-5529) to see if you are eligible for free legal assistance. Hotline hours are Monday through Friday, 8:00 a.m. to 5:30 p.m. If you are not eligible for assistance from Legal Services, the hotline will refer you to other possible resources. □

By Linda Garibaldi, Senior Attorney Emeritus, Legal Services of New Jersey

Do You Have a Complaint about a Hospital in New Jersey?

Most hospital facilities in New Jersey are licensed and monitored by the state's Department of Health and Senior Services through its Division of Health Facilities Evaluation and Licensing. One of the Division's responsibilities is to investigate and resolve complaints about the following types of health care facilities:

- Hospitals
- Nursing Homes
- Assisted Living or Comprehensive Personal Care Homes
- Assisted Living Programs
- Adult/Pediatric Day Health Services
- Intermediate Care Facilities for the Mentally Retarded
- Residential Facilities
- Sub-Acute Care Facilities
- Ambulatory Surgical Centers
- Other Ambulatory Care Facilities

You may find a complete list and descriptions of the types of facilities and services that the Division licenses at www.state.nj.us/health/healthfacilities/types.shtml.

You do not have to be a patient or a resident of one of these facilities to make a complaint to the state about an incident or situation that you think should be reported (including involuntary discharge, mistreatment, theft, errors, and more).

You may make the complaint by using the Division's 24-hour complaint hotline, 1-800-792-9770. You do not have to give your name if you make your complaint by phone. You may also file a complaint by fax, online, or by mail. More information is available at www.state.nj.us/health/healthfacilities/hotlines.shtml. When an address is provided with the complaint, the Division will provide a written response following their investigation.

NEW JERSEY LEGAL SERVICES PROGRAMS

State Coordinating Program

Legal Services of New Jersey

(732) 572-9100

www.LSNJ.org

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REGIONAL LEGAL SERVICES PROGRAMS

Central Jersey Legal Services

- Mercer County (609) 695-6249
- Middlesex County—New Brunswick (732) 249-7600
- Middlesex County—Perth Amboy (732) 324-1613
- Union County (908) 354-4340

Essex-Newark Legal Services (973) 624-4500

Legal Services of Northwest Jersey

- Hunterdon County (908) 782-7979
- Morris County (973) 285-6911
- Somerset County (908) 231-0840
- Sussex County (973) 383-7400
- Warren County (908) 475-2010

Northeast New Jersey Legal Services

- Bergen County (201) 487-2166
- Hudson County (201) 792-6363
- Passaic County (973) 523-2900

Ocean-Monmouth Legal Services

- Monmouth County (732) 866-0020
- Ocean County (732) 341-2727

South Jersey Legal Services

- Atlantic County (609) 348-4200
- Burlington County (609) 261-1088
- Camden County (856) 964-2010
- Cape May County (609) 465-3001
- Centralized Intake 1-800-496-4570
- Cumberland County Workers Rights Project (856) 691-0494
- Gloucester County (856) 848-5360
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11/09

Cuáles Son Sus Derechos Legales

Noviembre 2009

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El censo es un conteo de todas las personas que viven en los Estados Unidos. *Página 1*

¿Qué son los planes médicos administrados y cuáles son mis derechos? *Página 3*

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

El censo del 2010: una oportunidad para las comunidades de Nueva Jersey

EL CENSO ES un conteo de todas las personas que viven en los Estados Unidos. El conteo se lleva a cabo cada 10 años, y el siguiente será en el 2010. Es especialmente posible que en los pasados censos no se contara a las personas de bajos ingresos. Es importante que todas las personas que viven en Nueva Jersey se aseguren de que todos los habitantes sean correctamente censados en el 2010.

continúa en la página 2

El boletín de educación jurídica para los habitantes de Nueva Jersey

¿Por qué es importante?

En el 2008, aproximadamente 740.000 de los habitantes del estado (el 8,7 por ciento de la población total) tenían un ingreso familiar por debajo del índice federal de pobreza. Este conteo se hizo mucho antes de que la recesión cogiera fuerza. En la actualidad, hay mucha más gente desempleada, lo cual hace muy probable que el número de personas viviendo en la pobreza haya aumentado desde el 2008.

La información del censo tiene un gran impacto en los habitantes de Nueva Jersey. Los datos se usarán para decidir cómo se les otorgan cada año casi 400 mil millones de dólares a los gobiernos locales, estatales, y tribales. Estos fondos se utilizan en educación, asistencia médica, mejoras a la comunidad, transporte y otros servicios. Los datos también afectan la representación de los habitantes en el gobierno local,

estatal y nacional. Por ejemplo, las cifras del censo son usadas para decidir cuántos representantes tendrá Nueva Jersey en el Congreso.

¿A quién van a contar en el censo?

Toda persona que esté viviendo en cualquiera de los 50 estados, el Distrito de Columbia o los territorios estadounidenses, como Puerto Rico será censada. Los ciudadanos al igual que las personas que no son ciudadanas, incluyendo a los inmigrantes indocumentados serán contados. El cuestionario del censo no pregunta sobre su estatus migratorio.

¿Van a proteger mi privacidad?

Toda la información obtenida en el censo se protege y mantiene como confidencial. Esta información tiene la protección de las leyes de confidencialidad más fuertes que tenemos y no se pondrá a disposición de ninguna agencia del orden público, gubernamental, tribunales, bancos, patrones, propietarios o instituciones de crédito. Ninguna de estas entidades

Cuales Son Sus Derechos Legales

Con respecto a *Looking Out*

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La suscripción cuesta \$10 dólares por año.

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Puede ver números atrasados en www.lsnj.org/espanol/selfhelp.htm. Los números atrasados impresos, en caso de estar disponibles, cuestan \$3 dólares cada uno.

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Comentarios

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

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

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tendrá acceso a las respuestas dadas por individuo alguno.

¿Cuándo se llevará a cabo el censo y tengo que participar?

La ley federal exige que todos participemos en el censo. El cuestionario del censo tiene 10 preguntas cortas y en marzo de 2010 se le enviará o se le entregará junto con un sobre con el franqueo pagado. El

cuestionario estará disponible en inglés y en inglés/español. Los hogares que no completen el cuestionario serán visitados por un funcionario de la oficina del censo quien le hará las 10 preguntas en persona. Puede obtener más información en el sitio Web de la Oficina del censo <http://2010.census.gov/2010census/how/index.php>. (Nota: El cuestionario del censo no se puede llenar ni enviar por el internet). □

Traducido por: Al Moreno, M.A., Coordinador de los servicios lingüísticos en los Servicios Legales de Nueva Jersey

¿Qué son los planes médicos administrados y cuáles son mis derechos?

SE TRATA DE corporaciones que administran la forma en que se les brinda la atención médica a los consumidores, para controlar los costos de la misma. Hay muchos tipos de planes médicos administrados, pero los HMOs (Organizaciones para el mantenimiento de la salud o en inglés, Health Maintenance Organizations) son los más comunes. Otros planes administrados incluyen los PPOs (*Preferred Provider Organizations*) y los POS (*Point of Service*).

El factor común entre la mayoría de los planes administrados es la técnica para ahorrar dinero, así como cubrir sólo un paquete fijo de servicios, limitar la cantidad de profesionales médicos que una persona inscrita puede visitar (dentro de la red) y/o aumentar el costo de atenderse con un médico que no esté dentro de la red del plan. Estos planes también forman contratos con doctores y profesionales médicos por medio de lo

que se llama la capitación. Bajo un acuerdo de capitación, el plan le paga al profesional médico una cantidad fija por cada persona que atienda y no según el costo ni la complejidad de los servicios que brindaron. Además, los planes administrados usualmente requieren que el inscrito tenga un doctor de cabecera que tiene que aprobar y autorizar la visita a cualquier especialista.

Ejemplos de los planes administrados en Nueva Jersey:

- **HMOs (Organizaciones para el mantenimiento de la salud).** Los HMOs consiguen que los inscritos obtengan los servicios médicos específicos que necesiten a cambio de una prima fija pre pagada. La mayoría de los HMOs también requieren que el inscrito dé un copago por servicios tales como visitas al consultorio médico y medicamentos de receta.

Actualmente, hay 12 HMOs que han sido aprobados por el Departamento de Banca y Seguro de Nueva Jersey (DOBI) para brindar los servicios de un HMO y POS. Algunos son HMOs comerciales (que venden sus planes/pólizas al público) y algunos cubren solamente a los beneficiarios de Medicare y/o Medicaid. Puede ver en los diagramas del sitio Web del DOBI (véase Comuníquese con su HMO) que dos de los cinco HMOs que tienen contratos con Medicaid también tienen planes (“líneas de productos”) que les venden directamente a los individuos y empleadores.

- **PPOs (*Preferred Provider Organizations*)**. Los PPOs les pagan a los médicos una cantidad acordada para que les brinden tratamiento a los inscritos. Usualmente, tienen una selección más grande de profesionales en un plan PPO.
- **POS (*Point of Service Plans*)**. Un plan POS por lo general permite que sus inscritos decidan si quieren atenderse con un médico dentro o fuera de su red al momento en que necesiten algún servicio. La persona tendrá que dar un copago mucho

más alto si escoge a alguien fuera de su red.

¿Tengo algún derecho legal a obtener la atención médica que necesito si tengo un plan administrado?

Si está inscrito en una organización que ofrece planes administrados, tal como un HMO, y tiene Medicaid o Medicare en Nueva Jersey, usted tiene derechos especiales, conforme a las leyes federales y estatales, para apelar las decisiones que afectan su capacidad de recibir cobertura y acceso a la atención médica bajo Medicaid y Medicare. Véase los temas de NJ Familycare, Medicaid o Medicare en la sección de salud de LSNJLAW para obtener más información. Si necesita ayuda, también debería comunicarse con la oficina más cercana de Servicios Legales o llamar a LSNJ-LAW™, 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) para ver si llena los requisitos para recibir asistencia gratuita. Las horas de funcionamiento son de lunes a viernes, desde las 8 de la mañana hasta las 5:30 de la tarde. Si no puede recibir asistencia de los Servicios Legales, le remitirán a otros posibles recursos.



Todo consumidor inscrito en dichos planes tiene el derecho a apelar las decisiones que le afecten la salud de manera negativa.

Todo consumidor que esté inscrito en una organización que brinda planes administrados en Nueva Jersey tiene la protección de las Garantías Constitucionales para los consumidores (del Departamento de Banca y Seguro de Nueva Jersey). Estos derechos legales incluyen protecciones importantes, tales como tener acceso a un profesional médico 24 horas al día durante 365 días al año en caso de que necesite atención urgente, el derecho a que la persona que tome las decisiones si le niegan o limitan la atención sea un médico (y no un administrador) y el derecho de apelar las decisiones que nieguen o limiten su capacidad de recibir dicha

atención médica.

Todo consumidor inscrito en dichos planes tiene el derecho a apelar las decisiones que le afecten la salud de manera negativa. Se explican estos derechos de apelación en Las apelaciones y reclamaciones en cuestiones de HMOs y la página de la Sección de Seguros de la Oficina para la Atención Administrada del Departamento de Banca y Seguro en NJ. Si necesita ayuda, puede comunicarse con la oficina de Servicios Legales que le quede más cerca o con la línea de asistencia gratuita de LSNJ-LAW al 1-888-LSNJ-LAW (1-888-576-5529).

Traducido por: Beatriz A. Viera, M.A., de los servicios lingüísticos en los Servicios Legales de Nueva Jersey

www.LSNJLAW.org/espanol

Para información acerca de las leyes y asuntos relacionados con la ley

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