

2026 COMPARISON OF PAAD and SENIOR GOLD

1-800-792-9745

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| <p>Pharmaceutical Assistance to the Aged and Disabled Program https://www.nj.gov/humanservices/doas/services/1-p/paad/</p> | <p>Senior Gold Prescription Discount Program https://www.nj.gov/humanservices/doas/services/q-z/senior-gold/</p> |
| <p>Income limit: less than \$54,943 (single) less than \$62,390 (married)</p> | <p>Income limit: between \$54,943 & \$64,943 (single) between \$62,390 & \$72,390 (married)</p> |
| <p>ID Number starts with 6.</p> | <p>ID Number starts with 7.</p> |
| <p>PAAD co-pay is:</p> <ul style="list-style-type: none"> • \$5 per PAAD covered generic drug • \$7 per PAAD covered brand name drug. | <p>Senior Gold co-pay for Senior Gold covered drugs is \$15 + 50% of the remaining cost of the prescription or actual drug cost, whichever is less. (Co-pay will change with change in drug price.)</p> |
| <p>PAAD does not have a Catastrophic cap.</p> | <p>Catastrophic cap: \$2,000 (single) \$3,000 (married) Once the beneficiary’s annual out of pocket expenses reach the catastrophic cap, co-pay is \$15 (or the reasonable cost of the drug, whichever is less) for the balance of that eligibility period.</p> |
| <p>If Medicare-eligible, must enroll in a Medicare Plan with Prescription Drug Coverage (Part D or MA-PD) unless they have other creditable drug coverage. PAAD pays Part D premium for certain Part D plans.</p> | <p>If Medicare-eligible, must enroll in a Medicare Plan with Prescription Drug Coverage (Part D or MA-PD), unless have other creditable drug coverage. Beneficiary responsible for paying Part D monthly premium.</p> |
| <p>If a Part D plan is the primary payer for a drug covered on its formulary, PAAD will provide coverage as secondary payer if needed for that drug, and the PAAD beneficiary will pay the regular PAAD copayment <u>for PAAD covered drugs</u>. However, if a Part D plan does not pay for a medication because the drug is not on its formulary, PAAD beneficiaries will have to switch to a drug on their Part D plan’s formulary, or their doctor will have to request an exception due to medical necessity directly to the Part D plan.</p> | <p>If a Part D plan is the primary payer for a drug covered on its formulary, Senior Gold will provide coverage as secondary payer if needed for that drug and the Senior Gold beneficiary will pay the regular Senior Gold copayment <u>for Senior Gold covered drugs</u>. However, if a Part D plan does not pay for a medication because the drug is not on its formulary, Senior Gold beneficiaries will have to switch to a drug on their Part D plan’s formulary, or their doctor will have to request an exception due to medical necessity directly to the Part D plan.</p> |
| <p>Third-party insurance must be billed BEFORE PAAD.</p> | <p>Third-party insurance must be billed BEFORE Senior Gold.</p> |
| <p>PAAD DOES NOT pay for diabetic testing supplies (for example, test strips & lancets).</p> | <p>Senior Gold DOES NOT pay for diabetic testing supplies (for example, test strips & lancets).</p> |

Can also apply on-line at <https://nj-dhsas.my.site.com/njsave/quickstart> Updated 1/13/2026