

STATEMENT OF THE CASE

Respondent denied petitioner's Medicaid Only application for failure to provide the following evidence of eligibility under N.J.A.C. 10:71-2.2(e):

Documentation regarding a Qualified Income Trust, in order to determine income eligibility in a timely manner. 42 CFR 4235-952

FINDINGS OF FACT AND CONCLUSIONS OF LAW

I.

- ☒ I **FIND** that petitioner or petitioner's representative is **AUTHORIZED** to pursue this appeal; therefore, I **CONCLUDE** that petitioner has **STANDING** to pursue this appeal.
- ☐ I **FIND** that petitioner or petitioner's representative is **NOT AUTHORIZED** to pursue this appeal; therefore, I **CONCLUDE** that petitioner has **NO STANDING** to pursue this appeal.

II.

- ☒ I **FIND** that petitioner did not provide all the necessary documentation under N.J.A.C. 10:71-2.2(e) and -2.3(a), and that no exceptional circumstances exist under N.J.A.C. 10:71-2.3(c); therefore, I **CONCLUDE** that the Medicaid Only application must be **DENIED** under N.J.A.C. 10:71-2.2(e).
- ☐ I **FIND** that petitioner did not provide all the necessary documentation under N.J.A.C. 10:71-2.2(e) and -2.3(a), but that exceptional circumstances exist under N.J.A.C. 10:71-2.3(c) (*note exceptional circumstances in "Additional Findings of Fact/Conclusions of Law"*); therefore, I **CONCLUDE** that the time limit for verification must be **EXTENDED** under N.J.A.C. 10:71-2.3(c).
- ☐ I **FIND** that petitioner did not provide all the necessary documentation under N.J.A.C. 10:71-2.2(e) and -2.3(a); exceptional circumstances exist under N.J.A.C. 10:71-2.3(c) (*note exceptional circumstances in "Additional Findings of Fact/Conclusions of Law"*); and petitioner has since provided all the necessary documentation; therefore, I **CONCLUDE** that the Medicaid Only application must be **PROCESSED** to determine eligibility under N.J.A.C. 10:71.

- ☐ I **FIND** that petitioner provided all the necessary documentation under N.J.A.C. 10:71-2.2(e) and -2.3(a); therefore, I **CONCLUDE** that the Medicaid Only application must be **PROCESSED** to determine eligibility under N.J.A.C. 10:71.

ADDITIONAL FINDINGS OF FACT/CONCLUSIONS OF LAW

After the April 2, 2025 application and subsequent Request For Information (RFI), Petitioner's DAR did not provide the relevant documentation regarding the QIT in question in a timely fashion and thus it was properly denied on April 23, 2025. P-1 and P-2 were discussed at hearing but I did not admit them as they could not be authenticated. The DAR was not present at this hearing after I noted that she should have been at the prior hearing date. Additionally, P-1 references attachments that do not appear on the document, or to have actually been attached to that e-mail. Petitioner offered no witness except for the cross-examination of Ms. Gilbert- Paul. Ms. Gilbert-Paul testified credibly that she did have many conversations with the DAR and that the DAR did provide most of the documents but never the QIT. As there was no explanation for why they needed an extension for the outstanding documents, she did not grant an extension. She has no independent recollection of an extension even being requested or receiving P-1. P-1 reflects a request for extension, but as that could not be authenticated I cannot find that there was even a valid request for an extension. To be sure, there certainly was no exceptional circumstance.

ORDER

I **ORDER** that:

- ☐ Petitioner's appeal is **DISMISSED** because petitioner has **NO STANDING**.
- ☒ Petitioner's Medicaid Only application is **DENIED** under N.J.A.C. 10:71-2.2(e).
- ☐ Respondent must **EXTEND** the time limit for verification under N.J.A.C. 10:71-2.3(c).
- ☐ The case be **RETURNED** to respondent for respondent to **PROCESS** the application to determine eligibility under N.J.A.C. 10:71.

I **FILE** this initial decision with the **ASSISTANT COMMISSIONER OF THE DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES**. This recommended decision is deemed adopted as the final agency decision under 42 U.S.C. § 1396a(e)(14)(A) and N.J.S.A. 52:14B-10(f). The **ASSISTANT COMMISSIONER OF THE DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES** cannot reject or modify this decision.

If you disagree with this decision, you have the right to seek judicial review under New Jersey Court Rule 2:2-3 by the Appellate Division, Superior Court of New Jersey, Richard J. Hughes Complex, PO Box 006, Trenton, New Jersey 08625. A request for judicial review must be made within 45 days from the date you receive this decision. If you have any questions about an appeal to the Appellate Division, you may call (609) 815-2950.

5/18/26

DATE

Date Record Closed:

Date Filed with Agency:

Date Sent to Parties:

Danielle Pasquale

DANIELLE PASQUALE, ALJ

05/18/2026

5/18/26

5/18/26

APPENDIX

Witnesses

For Petitioner:

None.

For Respondent:

Kethly Gilbert-Paul, FSW

Exhibits

For Petitioner:

P-1 E-mail dated 4/21/25

P-2 E-mails between DAR (not present at hearing) and Respondent

For Respondent:

R-1 Agency's packet submitted 5/06/2026 (mostly irrelevant)

R-2 (a) Agency's submittal with relevant denial and dates.