State of New Jersey

OFFICE OF ADMINISTRATIVE LAW

INITIAL DECISION

OAL DKT. NO. HMA 06469-26

AGENCY DKT. NO. N/A

A.S.,

Petitioner,

v.

SOMERSET COUNTY BOARD OF SOCIAL SERVICES,

Respondent.

A.S., petitioner, pro se

Sushma Patel, Human Services Specialist, for respondent, appearing pursuant to N.J.A.C. 1:1-5.4(a)(3)

Record Closed: June 9, 2026 Decided: July 1, 2026

BEFORE **SARAH G. CROWLEY**, ALJ:

STATEMENT OF THE CASE AND PROCEDURAL HISTORY

A.S., petitioner, appeals the termination of Medicaid benefits on the grounds that she was over the income eligibility limit. Petitioner requested a fair hearing, and the

matter was filed at the Office of Administrative Law (OAL) on April 24, 2026, to be heard as a contested case pursuant to N.J.S.A. 52:14B-1 to -15 and 14F-1 to -13. The matter was heard on June 9, 2026, and the record closed at that time.

TESTIMONY AND FINDINGS OF FACT

Sushma Patel is a human services specialist for the Somerset County Board of Social Services (Board). She testified regarding the process of determining eligibility under New Jersey Family Care. She explained that based upon the petitioner's monthly income of $1,676 in social security benefits and $126 in pension, she did not qualify for Medicaid. The income limit for eligibility for the Aged Blind and Disable (ABD) Medicaid program is $1,305.

Petitioner testified on her own behalf. A.S. testified that she was no longer receiving her social security income. She did not explain why it may have been terminated, nor did she have any proof that it had been terminated. She confirmed that she had been receiving $1,676 monthly in social security benefits. It was explained to her that she could reapply if her income or circumstances changed, but under the income reported at the time of the recertification she did not qualify for the program.

LEGAL ANALYSIS AND CONCLUSION

The sole issue under consideration is whether the petitioner qualified for Medicaid under the provision of N.J.A.C. 10:71-5.1. On January 11, 2026, the applicant was sent an NJ Family Care/Medicaid renewal packet. Based upon her income of $1,802 per month, she exceeded the eligibility income limit of $1,305. The petitioner does not dispute that she exceeded the income eligibility for the program. However, she claims that she no longer receives social security benefits. However, she did not have any evidence of a termination of the social security benefits and the documentation from the Board confirmed the social security payment of $1,676 and pension of $126.

I **CONCLUDE** that petitioner does not qualify for Medicaid due to her monthly income of $1,802, exceeding the maximum eligibility limit of $1,305. I further **CONCLUDE**

that the respondent appropriately calculated the income level based upon the information that was provided for the household and that benefits were properly **TERMINATED**.

ORDER

Based upon the foregoing, the determination of the Board is **AFFIRMED** as to its decision to deny the petitioner's eligibility in the NJ Medicaid program.

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.

July 1, 2026
DATE

Sarah G. Crowley
SARAH G. CROWLEY, ALJ

Date Received at Agency: _____

Date Mailed to Parties: _____

SGC/lam/onl

APPENDIX

Witnesses

For petitioner:

A.S.

For respondent:

Sushma Patel, Human Services Specialist

Exhibits

For petitioner:

None

For respondent:

R-1 Packet from the Board