



State of New Jersey
OFFICE OF ADMINISTRATIVE LAW

INITIAL DECISION

OAL DKT. NO. HMA 03961-26

***New Jersey Care . . . Special Medicaid
Failure to Verify Eligibility Appeal
N.J.A.C. 10:72-2.1 and N.J.A.C. 10:72-2.3***

G.T.

Petitioner,

v.

HUDSON COUNTY BOARD
OF SOCIAL SERVICES

Respondent.

For petitioner: G.T. with assistance from Rabbi N.R.

For respondent: Bethania Peguero, HSS4, Adult Medicaid Specialist

BEFORE: SANDRA L. LASCARI, ALJ

STATEMENT OF THE CASE

Respondent denied petitioner's Special Medicaid application for failure to provide the following evidence of eligibility under N.J.A.C. 10:72-2.1(c) and 10:72-2.3(e):

- 1) Direct Express Account statements for December of 2024, March of 2025, and June of 2025.
- 2) Information pertaining to Mutual of Omaha Life Insurance and TruStage Life Insurance.

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. 10:72-2.1(c) and (d), and that no exceptional circumstances exist under N.J.A.C. 10:72-2.1(d)(2); therefore, I **CONCLUDE** that the Special Medicaid application must be **DENIED** under N.J.A.C. 10:72-2.1(c) and 10:72-2.3(e).
- ☐ I **FIND** that petitioner did not provide all the necessary documentation under N.J.A.C. 10:72-2.1(c) and (d), but that exceptional circumstances exist under N.J.A.C. 10:72-2.1(d)(2) (*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. 10:72-2.1(d)(2).
- ☒ I **FIND** that petitioner did not provide all the necessary documentation under N.J.A.C. 10:72-2.1(c) and (d); exceptional circumstances exist under N.J.A.C. 10:72-2.1(d)(2) (*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 Special Medicaid application must be **PROCESSED** to determine eligibility under N.J.A.C. 10:72.

- ☐ I **FIND** that petitioner provided all the necessary documentation under N.J.A.C. 10:72-2.1(c) and (d); therefore, I **CONCLUDE** that the Special Medicaid application must be **PROCESSED** to determine eligibility under N.J.A.C. 10:72.

ADDITIONAL FINDINGS OF FACT/CONCLUSIONS OF LAW

Petitioner G.T. had a stroke several years ago, and due to his disability and lack of understanding, he needed assistance in providing the requested information to Hudson. His neighbor, Rabbi N.R., provided necessary assistance and eventually helped him obtain the required documentation; without the Rabbi's assistance, G.T. would not have been able to complete the requirements.

On June 19, 2025, a renewal letter for Medicaid Only Managed Long Term Services and Supports (MLTSS), along with an application, was sent to the petitioner due July 19, 2025 (Exhibit R-A). Receiving no response, on August 18, 2025, a termination letter was sent. (Exhibit R-C)

On August 28, 2025, almost two months later, Hudson received the original renewal application. (Exhibit R-B) Upon review, the application was reopened, and additional information was requested. On September 9, 2025, a Request for Information (RFI) was issued due September 23, 2025 (Exhibit R-D) seeking the following: Marital status, resources, accounts, investments, property, life insurance policies, and vehicles. On September 30, 2025, G.T. submitted a response. (Exhibit R-E)

On November 12, 2025, Hudson informed G.T. that his eligibility was terminated as of August 31, 2025, for failure to submit Direct Express Account statements for December of 2024, March of 2025, and June of 2025, and failure to submit information about Mutual of Omaha Life Insurance and TruStage Life Insurance. (Exhibit R-F) On December 16, 2025, G.T. filed his appeal. Although the appeal document indicated his benefits would continue until a final agency decision, a "code 19" was never issued. G.T.'s MLTSS Medicaid terminated as of August 31, 2025. See (Exhibit J-1) (Code 19 is a designation in the internal computer program utilized by the agency that allows a person to remain on MLTSS Medicaid pending final agency decision)

The case was transmitted to the OAL on March 6, 2026. On June 11, 2026, I heard the matter. G.T. participated in the hearing with the assistance of Rabbi NR. Both were credible, and their testimony was consistent. Direct Express documents, along with letters from both insurance companies, were submitted by Rabbi N.R. (P-1). Mutual of Omaha indicated that the policy in question was terminated April 3, 2022, and was no longer providing G.T. coverage. However, TruStage's letter of May 11, 2026, indicated that the "policy was no longer active as of **August 5, 2026**, due to your request to cancel." Hudson wanted further clarification from TruStage regarding the policy, so I adjourned the case until July 1, 2026. On June 1, 2026, TruStage sent a second letter stating, "the policy was no longer active as of **August 5, 2025**, due to nonpayment of premiums." P-2 . Given the diligence of Rabbi N.R. and his continued cooperation with Hudson County on G. T.'s behalf, I FIND that his ongoing participation constituted a request for an extension of time to submit verifications. Further, given G.T.'s inability to act independently and the inconsistency in TruStage's letters, exceptional circumstances were created. Also, during the continued hearing on July 1, 2026, Rabbi NR was to assist G.T. in submitting a new Application for MLTSS

For all of these reasons, I **FIND** that exceptional circumstances exist and petitioner has since provided all the necessary documentation; therefore, I **CONCLUDE** that the Special Medicaid application must be **PROCESSED** to determine eligibility under N.J.A.C. 10:72. If found eligible, as Hudson concedes, G.T. should be reinstated to September 1, 2025, since he did not remain on MLTSS Medicaid pending final agency decision

ORDER

I **ORDER** that:

- ☐ Petitioner's appeal is **DISMISSED** because petitioner has **NO STANDING**.
- ☐ Petitioner's Special Medicaid application is **DENIED** under N.J.A.C. 10:72-2.1(c) and 10:72-2.3(e)
- ☒ Respondent must **EXTEND** the time limit for verification under N.J.A.C. 10:72-2.1(d)(2).
- ☐ The case be **RETURNED** to respondent for respondent to **PROCESS** the application to determine eligibility under N.J.A.C. 10:72.

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.

August 24, 2026

DATE

Date Record Closed:

Date Filed with Agency:

Date Sent to Parties:



SANDRA L. LASCARI, ALJ

July 1, 2026

August 24, 2026

August 24, 2026

APPENDIX

Witnesses

For Petitioner:

G.T.
Rabbi N.R.

For Respondent:

Bethania Peguero HSS4, Adult Medicaid Specialist
Osvaldo Vagni, HSS 4, Fair Hearing Liaison

Exhibits

For Petitioner:

P-1 Packet Dated June 11, 2026

P-2 Packet Dated July 1, 2026

Joint Exhibits

J-1 Email Dated July 1, 2026

For Respondent:

R-A Renewal letter sent to G.T.

R-B GT 's renewal application

R-C Termination letter

R-D RFI Letter

R-E RFI Letter Response

R-F Reconsideration Denial Letter

R-G NJAC Code- not in Evidence