State of New Jersey
OFFICE OF ADMINISTRATIVE LAW

INITIAL DECISION
OAL DKT. NO. HMA 02174-26

Medicaid Only
Failure to Verify Eligibility Appeal
N.J.A.C. 10:71-2.2 and -2.3

L.D.

Petitioner,

v.

SALEM COUNTY BOARD OF SOCIAL SERVICES

Respondent.

For petitioner: Eliyahu Pekier, Esq. (Law Office of Simon P. Wercberger, LLC)

For respondent: Megan Baus, Fair Hearing Liasion

BEFORE: WILLIAM T. COOPER, III, ALJ

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):

Current bank statements for all existing accounts.

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

Respondent recieved four applications for ABD Medicaid for petitioner; July 8, 2025, October 1, 2025, Novemeber 6, 2025, and January 2, 2026. This appeal only pertains to the Novemebr 6, 2025, application.

On November 6, 2025, respondent acknowledged receipt of an ABD Medicaid application. (P-1 pg.'s 6-10). On November 13, 2025, respondent requested verification of all bank accounts for petitioner by Novemebr 27, 2025. (P-1 pg.'s 11-12).

Petitioner's DAR admitted that she recieved the request for verification but was unable to obtain the PNC bank statements due to the named fiduciary being uncooperative. The DAR also admitted that she did not request an extension to submit the PNC bank statements.

On December 1, 2025, the petitioner's November 6, 2025, application was denied. (P-1 pg 3-5).

On January 2, 2026, a subsequent application for ABD Medicaid was submitted for petitioner. On Jansury 22, 2026, the PNC bank statements were provided to respondent. On March 16, 2026, petitioners January 2, 2026, application was approved effective January 1, 2026, with retro coverage from October 1, 2025, to December 31, 2025.

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.

May 8, 2026.
DATE

WILLIAM T. COOPER, III , ALJ

Date Record Closed: 04/30/2026

Date Filed with Agency: 2/5/2026

Date Sent to Parties:

APPENDIX

Witnesses

For Petitioner:

Frumy Rosenberg, DAR

For Respondent:

Jennifer Barbara, HS II

Exhibits

For Petitioner:

P-1 12/31/25 OCCO PAS correspondence
P-2 3/02/26 PAS response
P-3 3/20/25 PNC bank
P-4 06/10/25 PNC bsnk
P-5 42 CFR 435.907

For Respondent:

R-2 Fair Hearing package (20 pages)