



**State of New Jersey**  
OFFICE OF ADMINISTRATIVE LAW

**INITIAL DECISION**

OAL DKT. NO. HMA 20923-25

***New Jersey Care . . . Special Medicaid  
Excess Income Appeal  
N.J.A.C. 10:72-4***

R.U.

\_\_\_\_\_  
\_\_\_\_\_

Petitioner,

v.

Middlesex County of

Social Services

\_\_\_\_\_  
\_\_\_\_\_

Respondent.

For petitioner: R.U., pro se

For respondent: Kurt Eichenlaub, H.S.S.3, FHL

BEFORE: Catherine A. Tuohy, ALJ

**STATEMENT OF THE CASE**

Respondent denied petitioner's Special Medicaid application due to excess income under N.J.A.C. 10:72-4.1.

**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's:

- (1) Earned income is \$ \_\_\_\_\_ (N.J.A.C. 10:72-4.4; N.J.A.C. 10:71-5)
- (2) Unearned income is \$ 1,345. (R-1 at 39) (N.J.A.C. 10:72-4.4; N.J.A.C. 10:71-5)
- (3) Income exclusions total \$ 20. (R-1 at 39) (N.J.A.C. 10:72-4.4; N.J.A.C. 10:71-5)
- (4) Countable income total \$ 1,325. (R-1 at 39) (N.J.A.C. 10:72-4.4; N.J.A.C. 10:71-5)
- (5) The applicable income eligibility standard under N.J.A.C. 10:72-4.1 is:
- \$1,305(Household of 1)       \$1,763 (Household of 2)

III.

- I **CONCLUDE** that petitioner is over the applicable income limit and is therefore income **INELIGIBLE** for Special Medicaid benefits under N.J.A.C. 10:72-4.1.
- I **CONCLUDE** that petitioner is not over the applicable income limit and is therefore income **ELIGIBLE** for Special Medicaid benefits as of \_\_\_\_\_ (*fill in date of eligibility*) under N.J.A.C. 10:72-4.1.

**ADDITIONAL FINDINGS OF FACT/CONCLUSIONS OF LAW**

Petitioner argues that he was eligible for Medicaid when he was sixty-four years of age and the income limit was \$1800. Once he turned sixty-five years old he was no longer eligible as the income eligibility limit changed to \$1,305. He believes this is age discrimination as older people need more medical coverage, not less.

**ORDER**

I **ORDER** that:

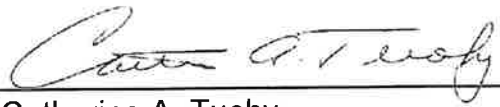
- Petitioner's appeal is **DISMISSED** because petitioner has **NO STANDING**.
- Petitioner is income **INELIGIBLE** for Special Medicaid benefits under N.J.A.C. 10:72-4.1.
- Petitioner is income **ELIGIBLE** for Special Medicaid benefits as of \_\_\_\_\_ under N.J.A.C. 10:72-4.1.

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.

**March 16, 2026**  
\_\_\_\_\_

DATE

  
\_\_\_\_\_  
Catherine A. Tuohy, ALJ

**March 11, 2026**  
\_\_\_\_\_

Date Record Closed:

Date Filed with Agency:

Date Sent to Parties:

\_\_\_\_\_  
\_\_\_\_\_

**APPENDIX**

**Witnesses**

**For Petitioner:**

R.U.

**For Respondent:**

Kurt Eichenlaub, Human Services Specialist 3 and Medicaid Fair Hearing Liaison

Exhibits

For Petitioner:

None

For Respondent:

R-1 CWA Submission packet (thirty-nine pages)