



State of New Jersey
OFFICE OF ADMINISTRATIVE LAW

INITIAL DECISION

OAL DKT. NO. HMA 20508-25

T.D.F.,

Petitioner,

v.

UNION COUNTY BOARD OF

SOCIAL SERVICES,

Respondent.

Michael Heinemann, Esq., for petitioner (Law Office of Michael Heinemann,
attorneys)

Steve Hockaday, Deputy County Counsel, for respondent (Bruce H. Bergen,
County Counsel)

Record Closed: April 14, 2026

Decided: May 5, 2026

BEFORE **SUSANA E. GUERRERO, ALJ:**

STATEMENT OF THE CASE

Petitioner appeals the denial of MLTSS Medicaid by respondent, the Union County Board of Social Services (Agency), for failing to provide requested verifications. Petitioner asserts that the denial was premature and unreasonable.

PROCEDURAL HISTORY

The Division of Medical Assistance and Health Services (DMAHS) transmitted the matter to the Office of Administrative Law (OAL), where it was filed on November 18, 2025. The hearing was initially scheduled for January 23, 2026 but adjourned at the request of the petitioner. The hearing was rescheduled to February 24, 2026, but was adjourned due to County's unavailability. The hearing was rescheduled to March 16, 2026, but adjourned following a telephone conference, at the request of the parties, and rescheduled to March 25, 2026. The parties again requested additional time to attempt to resolve the matter, and the hearing was rescheduled for April 14, 2026. The hearing took place via telephone on that day, and the record closed later that day upon receipt of relevant cases emailed by petitioner's counsel.

FINDINGS OF FACT

Kate O'Connor (O'Connor), Human Services Specialist 3, testified on behalf of the Agency. Keila Hildeshaim (Hildeshaim), Medicaid Manager for LTC Ally who oversaw the petitioner's designated authorized representative (DAR), testified on behalf of the petitioner. Based on my review of the documentary evidence and assessment of the testimony presented, I **FIND** the following **FACTS**:

T.D.F. applied for MLTSS Nursing Home Medicaid on or around March 4, 2025. The application was submitted by the DAR. The Agency sent T.D.F., through the DAR, a Request for Information (RFI) on or about April 28, 2025, requesting, bank account and other information. Petitioner submitted the requested information, including information from Affinity Federal Credit Union (Affinity), in a timely fashion.

On or around July 8, 2025, the Agency sent petitioner a second RFI, directing that T.D.F. provide the requested information by July 22, 2025. Petitioner provided documents and information in response to this RFI prior to the July 22, 2025 deadline. The Agency denied the application on September 5, 2025 because, the Agency asserts, the petitioner failed to provide the following requested verifications: "Bank statements,

all pages, no redactions for account ending in #0011 . . . [and] for accounts ending in #7152 and #7153”

The Agency agrees that all other requested information was provided in a timely fashion.

The second RFI specifically notes that Affinity statements previously provided to the Agency show transfers to and from an account ending in #0011, #7152 and #7153, and it requests bank statements for these three accounts, and verification of account closure if any of the accounts were closed.

In response to these requests concerning accounts ending in #0011, #7152 and #7153, petitioner provided the Agency with a letter from Affinity, dated July 17, 2025, in which Affinity advises that it received the request for verifications but that “there are no accounts ending in #0011, #7152 or #7153 in the name of [T.D.F].” On July 25, 2025, Affinity sent a second letter noting that account #7152 “is [also] not listed in the name of [T.D.F].”

At no time prior to the denial did the Agency inform the DAR that the letters from Affinity were not sufficiently responsive to the Agency’s RFI. About six weeks later, the Agency denied the application.

Following the denial, the petitioner sent the Agency another letter from Affinity, dated September 16, 2025, stating that “Accounts #0011, #7152, and #7153 are Affinity accounts but are not in . . . [T.D.F.’s] name.” The petitioner filed a second application.

The Agency asserts that while the petitioner provided two letters from Affinity indicating that there are no Affinity accounts ending in #0011, #7152 or #7153 in T.D.F.’s name, it did not know whether those account numbers were associated with another bank, or whether someone other than T.D.F. held the accounts. The Affinity bank statements provided to the Agency in response to the first RFI reflect electronic transfers between that account and others ending in #7152 and #0011, and they do not reflect that those account numbers are with another bank.

Petitioner asserts that they complied with the Agency's RFIs; that the letters from Affinity should suffice as they reflect that those account numbers do not belong to T.D.F.; and that if the Agency had any questions concerning the Affinity letters, they should have requested clarification from the petitioner and not denied the application without making any inquiry or follow-up request.

Even though the Agency did not request any follow-up information concerning the information obtained from Affinity regarding the three questionable accounts, the petitioner sent the Agency another letter shortly after the denial clarifying further that Affinity identified those accounts as Affinity accounts that do not belong to T.D.F. During a conference prior to the hearing, the petitioner informed the Agency that those accounts are Affinity accounts owned by the petitioner's mother. Petitioner asserts that the denial was premature and unreasonable. Petitioner's DAR was proactive in supplying the Agency with all information requested, and she responded to all requests for information with responsive documents. Petitioner asserts that if the Agency had any questions concerning the Affinity letters, they should have communicated those questions or concerns to petitioner before denying the application.

ANALYSIS AND CONCLUSIONS OF LAW

Under N.J.A.C. 10:71-2.2, a Medicaid applicant must provide sufficient information for the Agency to determine financial eligibility. In fact, "the applicants or beneficiaries are the primary source of information." N.J.A.C. 10:71-1.6(a)(2). However, the Agency also has responsibilities with regard to the application process, including to "[a]ssist the applicants in exploring their eligibility for assistance" and "[m]ake known to the applicants the appropriate resources and services both within the agency and the community, and, if necessary, assist in their use." N.J.A.C. 10:71-2.2(c).

According to N.J.A.C. 10:71-2.2, the Agency worker must communicate with the applicant regarding any missing documentation. After that, the Agency may use

collateral contacts to verify, supplement, or clarify essential information. N.J.A.C. 10:71-2.10.

Here, to verify petitioner's eligibility for the Medicaid program, the Agency requested information concerning account numbers referenced in the Affinity statements. Petitioner did not ignore this request. Rather, petitioner provided all documents in response to the first RFI and at least substantially responsive documents to the second RFI. Regarding the information requested concerning the accounts ending in #0011, #7152 or #7153, which are referenced in the Affinity statements, petitioner provided letters from Affinity noting that those accounts do not belong to T.D.F. The Agency has no right to bank records belonging to another individual, and if the Agency questioned whether those accounts were with another bank, the Agency could have easily sought clarification. Both the petitioner and the worker had a duty under the regulations to take affirmative steps to communicate with each other about the application, and to clarify or seek clarification concerning the information exchanged. See M.L. v. Essex County Division of Family Assistance and Benefits, 2025 N.J. Super. Unpub. LEXIS 407, at *9 (App. Div. March 18, 2025). I **CONCLUDE** that the Agency's action in denying the application without seeking any clarification from the petitioner did not satisfy its regulatory obligations. T.D.F. timely responded to the RFIs and produced numerous substantially compliant documents while the Agency failed to reasonably advise T.D.F. as to what further verification information was needed to complete the application process. The applicant provided written confirmation from Affinity that the three accounts did not belong to her. If the Agency did not deem those letters sufficient, the worker could have easily requested clarification from T.D.F. to confirm that the accounts were Affinity accounts and did not belong to another bank. If T.D.F. was required to further disprove that she had accounts in another bank or banks ending in #0011, #7152 or #7153 (accounts which were ultimately determined to be the applicant's mother's Affinity accounts), it was incumbent on the worker to provide T.D.F. fair notice of this before denying the application. I **CONCLUDE** that the Agency's denial was premature and should be reversed.

ORDER

Based upon the foregoing, I **ORDER** that the Agency's denial be **REVERSED** and that the petitioner's Medicaid application be reopened by the Agency for further consideration.

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 5, 2026

DATE



SUSANA E. GUERRERO, ALJ

Date Received at Agency: _____

Date Mailed to Parties: _____

jb

APPENDIX

WITNESSES

For Petitioner:

Keila Hildeshaim

For Respondent:

Kate O'Connor

EXHIBITS

For Petitioner:

P-1 None

For Respondent:

- R-1 Application
- R-2 DAR form
- R-3 RFI dated April 28, 2025
- R-4 Affinity records
- R-5 Not in evidence
- R-6 Not in evidence
- R-7 Not in evidence
- R-8 RFI dated July 8, 2025
- R-9 July 17, 2025 letter from Affinity
- R-10 July 25, 2025 letter from Affinity
- R-11 Denial dated September 5, 2025
- R-12 Not in evidence
- R-13 September 16, 2025 letter from Affinity