



State of New Jersey
OFFICE OF ADMINISTRATIVE LAW

INITIAL DECISION

OAL DKT. NO. HMA 07930-26

AGENCY DKT. NO. N/A

T.R.,

Petitioner,

v.

**OCEAN COUNTY BOARD OF
SOCIAL SERVICES,**

Respondent.

T.R., petitioner, pro se

Christina Edwards, Human Services Specialist 3, for respondent under N.J.A.C.

1:1-5.4(a)(3)

Record Closed: June 30, 2026

Decided: July 9, 2026

BEFORE **JOHN K. MALONEY, ALJ:**

STATEMENT OF THE CASE

Petitioner T.R.'s monthly adjusted gross income (MAGI) exceeds \$1,836. Is petitioner eligible for Medicaid? No. Petitioner's monthly household income is \$2,120, and no household whose MAGI exceeds \$1,836 is eligible for Medicaid. 42 CFR § 435.119(b)(5); 42 CFR § 435.118(c)(2)(i).

PROCEDURAL HISTORY

On February 25, 2026, T.R. applied for Medicaid Only coverage for herself. On March 20, 2026, the Ocean County Board of Social Services (Ocean County) denied coverage. On April 23, 2026, T.R. appealed to the Division of Medical Assistance and Health Services (DMAHS) and requested a fair hearing.

On May 18, 2026, DMAHS transmitted the case to the Office of Administrative Law (OAL) as a contested case under N.J.S.A. 52:14B-1 to -15 and 14F-1 to -13.

On June 30, 2026, I held a hearing and closed the record.

FINDINGS OF FACT

Based upon the testimonial and documentary evidence presented at the hearing, I **FIND** the following as **FACT**:

On February 25, 2026, T.R. applied to Ocean County for Medicaid Only coverage for herself. On March 20, 2026, Ocean County denied the application because T.R. was over income. Christina Edwards, a human services specialist III for Ocean County, informed that to determine eligibility, the agency used New Jersey's State On-Line Query (SOLQ) portal, which permits agencies to access federal Social Security information. The SOLQ query confirmed that T.R.'s current monthly Social Security amount is \$2,120. Under federal regulations, the maximum MAGI for an individual is \$1,836, which equates to 133% of the federal poverty level. 42 CFR § 435.119(b)(5); 42 CFR § 435.118(c)(2)(i).

At the time of application, T.R. confirmed her monthly Social Security income was \$2,120. In her appeal, T.R. explained that her disagreement with Ocean County's denial centered on the fact that she has "a very intense, high special needs son who requires around the clock care," as well as the fact that T.R. is a widow. Before and during the hearing, T.R.'s contentions continuously revolved around the fact that she could not afford

the monthly payments for other State-sponsored health coverages available under "Get Covered NJ." A passionate advocate for her disabled son, T.R.'s repeated pleas centered on what Ocean County could globally do services-wise for her and her son. Ocean County's representative frequently noted that there were ancillary services and grants that could benefit T.R. Although these services and grants would not result in Medicaid coverage for T.R., they could arguably free up financial resources to help pay for health care insurance coverage under "Get Covered NJ." T.R. eschewed discussion of these other means of support and consistently argued for changes in federal and/or state policies. It was explained multiple times that the federal government determines eligibility standards, and such global and structural policy changes are beyond the authority of Ocean County or this tribunal.

T.R. only submitted one document – a letter from MOCEANS Support Coordination, the agency which provides various services to T.R.'s son. While detailing the services T.R.'s son needs and receives, MOCEANS' letter has no bearing on T.R.'s eligibility for Medicaid.

I **FIND** that Ocean County correctly determined T.R.'s monthly income was \$2,120.

CONCLUSIONS OF LAW

The sole issue under consideration is whether petitioner qualified for Medicaid Only under N.J.A.C. 10:71-5.1. The Medicaid Only Program defines income as "[the] receipt, by the individual, of any property or service which he or she can apply, either directly or by sale or conversion, to meet his or her basic needs for food or shelter. All income, whether cash in hand or in-kind, shall be considered in the determination of eligibility, unless exempt under the provisions of N.J.A.C. 10:71-5.3." N.J.A.C. 10:71-5.1(b).

Utilizing the SOLQ system, Ocean County learned that T.R.'s monthly income is \$2,120. Under the federal regulations, the maximum income limit for a household of one is \$1,836. 42 CFR § 435.119(b)(5); 42 CFR § 435.118(c)(2)(i). Thus, T.R.'s income exceeds the maximum allowable monthly income. Since T.R.'s income exceeds the

maximum allowable monthly income, I **CONCLUDE** that T.R. does not qualify for Medicaid Only.

ORDER

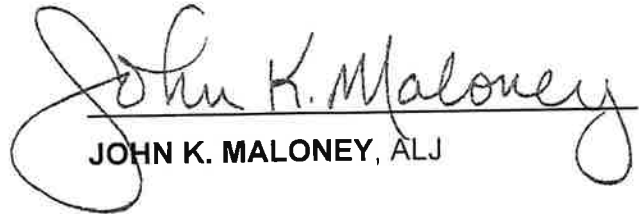
I **ORDER** that petitioner's application for Medicaid Only is **DENIED**.

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 9, 2026

DATE


JOHN K. MALONEY, ALJ

Date Received at Agency:

Date Mailed to Parties:

JKM/kl

APPENDIX

Witnesses

For petitioner:

T.R.

For respondent:

Christina Edwards

Exhibits

For petitioner:

P-1 MOCEANS Support Coordination Letter, dated April 28, 2026

For respondent:

- R-1 Case Summary
- R-2 MAGI Eligibility Report With Income Verifications
- R-3 DMAHS Income Standards Sheet
- R-4 MNP-L05A Denial Letter
- R-5 NJ FamilyCare Application