

## State of New Jersey

DEPARTMENT OF HUMAN SERVICES DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES P.O. Box 712

CHRIS CHRISTIE Governor

KIM GUADAGNO Lt. Governor

Trenton, NJ 08625-0712

ELIZABETH CONNOLLY Acting Commissioner

> MEGHAN DAVEY Director

STATE OF NEW JERSEY DEPARTMENT OF HUMAN SERVICES DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

J.B.,

PETITIONER,

**ADMINISTRATIVE ACTION** 

**FINAL AGENCY DECISION** 

OAL DKT. NO. HMA 01139-16

DIVISION OF MEDICAL ASSISTANCE

AND HEALTH SERVICES AND

CUMBERLAND COUNTY BOARD

OF SOCIAL SERVICES,

RESPONDENTS.

As Director of the Division of Medical Assistance and Health Services, I have reviewed the record in this matter, consisting of the Initial Decision, the documents in evidence and the OAL case file. No Exceptions to the Initial Decision were filed. Procedurally, the time period for the Agency Head to file a Final Agency Decision is May 19, 2016, in accordance with N.J.S.A. 52:14B-10, which requires an Agency Head to adopt, reject or modify the Initial Decision within 45 days of the agency's receipt. The Initial Decision was received on April 4, 2016.

Based upon my review of the record, I hereby ADOPT the Initial Decision in its entirety and incorporate the same herein by reference. In a thorough and well-reasoned decision, the ALJ concluded that Petitioner's application was filed in May 2015 and that he was eligible for three months of retroactive eligibility for February, March and April. I find no reason to disturb that decision. As noted by the ALJ, the long term care facility became Petitioner's authorized representative in September 2014. That representative could have submitted an application prior to May 2015.

THEREFORE, it is on this

day of May 2016,

ORDERED:

That the Initial Decision affirming Cumberland County's decision to grant retroactive eligibility as of May 1, 2015 is hereby ADOPTED.

MeghanDavey, Director

Division of Medical Assistance

and Health Services