

State of New Hersey

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

Governor KIM GUADAGNO

Lt. Governor

CHRIS CHRISTIE

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

M.S.,

PETITIONER,

ADMINISTRATIVE ACTION

FINAL AGENCY DECISION

DIVISION OF MEDICAL ASSISTANCE:

OAL DKT. NO. HMA 19377-2015

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 case, including the Initial Decision, the OAL case file and the documents filed below. No exceptions were filed in this matter. Procedurally, the time period for the Agency Head to file a Final Agency Decision is May 26, 2016 in accordance with an Order of Extension.

The matter arises regarding the termination of Petitioner's Medicaid benefits. Petitioner resides in an assisted living facility and had been found eligible as of August During redetermination in 2015 it was discovered that Petitioner's bank 1, 2012.

account exceeded the \$2,000 limit for three months. In August 2015, her bank account has a balance of over \$5,000 and it was \$5,217.88 as of September 2015. As a result Petitioner's benefits were terminated.

The Initial Decision found that the record supported the finding that Petitioner was not eligible for benefits due to excess resources. In reviewing the OAL case file, I concur with that recommendation. Thus, I hereby ADOPT the Initial Decision.

THEREFORE, it is on this day of MAY 2016,

ORDERED:

That the Initial Decision is hereby ADOPTED.

Division of Medical Assistance and Health Services