



State of New Jersey

DEPARTMENT OF HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

CHRIS CHRISTIE
Governor

P.O. Box 712
Trenton, NJ 08625-0712

ELIZABETH CONNOLLY
Acting Commissioner

KIM GUADAGNO
Lt. Governor

MEGHAN DAVEY
Director

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

T.M.,

PETITIONER,

v.

DIVISION OF MEDICAL ASSISTANCE
AND HEALTH SERVICES AND
SALEM COUNTY BOARD OF
SOCIAL SERVICES,

RESPONDENTS.

ADMINISTRATIVE ACTION

FINAL AGENCY DECISION

OAL DKT. NO. HMA 09583-16

As Director of the Division of Medical Assistance and Health Services, I have reviewed the record in this matter, consisting of the case file, the documents in evidence and the Initial Decision. No Exceptions to the Initial Decision were filed. Procedurally, the time period for the Agency Head to file a Final Agency Decision is September 30, 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 August 16, 2016.

I hereby ADOPT the Initial Decision affirming the denial of Medicaid benefits. The undisputed evidence in the record indicates that Petitioner's monthly unemployment income exceeds the maximum income to qualify for New Jersey Family Care program benefits. There is simply no authority that permits the relaxation or waiver of the income limits in any individual case.

THEREFORE, it is on this *29th* day of SEPTEMBER 2016,

ORDERED:

That the Initial Decision AFFIRMING the termination of Medicaid benefits based upon excess income is hereby ADOPTED as the Final Decision in this matter.


Meghan Davey, Director
Division of Medical Assistance
and Health Services
