

State of New Jersey

DEPARTMENT OF HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES
P.O. Box 712
Trenton, NJ 08625-0712

ELIZABETH CONNOLLY
Acting Commissioner

MEGHAN DAVEY Director

KIM GUADAGNO Lt. Governor

CHRIS CHRISTIE

Governor

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

A.P.,

PETITIONER,

ADMINISTRATIVE ACTION

FINAL AGENCY DECISION

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OAL DKT. NO. HMA 12489-16

DIVISION OF MEDICAL ASSISTANCE

AND HEALTH SERVICES AND

SOMERSET 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 contents of the OAL case file. No exceptions to the Initial Decision were filed. Procedurally, the time period for the Agency Head to render a Final Agency Decision is January 26, 2017 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 December 12, 2016.

Based upon my review of the record, I hereby ADOPT the Initial Decision in its entirety and incorporate the same herein by reference. I agree that Petitioner is eligible for benefits pursuant to 42 CFR § 457.320(a)(2) which permits eligibility for children under the age of 19.

THEREFORE, it is on this Andry of January 2017,

ORDERED:

That the Initial Decision reversing the denial of benefits is hereby ADOPTED as the Final Decision.

Meghan Davey, Director
Division of Medical Assistance

Health Services

Meghan Davey