

PHILIP D. MURPHY
Governor

SHEILA Y. OLIVER
Lt. Governor

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

CAROLE JOHNSON Commissioner

MEGHAN DAVEY
Director

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

A.P.,

PETITIONER.

ADMINISTRATIVE ACTION

V.

FINAL AGENCY DECISION

NJ OFFICE OF COMMUNITY CHOICE:

OAL DKT. NO. HMA 1845-2018

OPTIONS.

RESPONDENT.

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 file a Final Agency Decision in this matter is July 9, 2018 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 receipt. The Initial Decision in this matter was received on May 25, 2018.

Petitioner is appealing the determination that she does not meet nursing home level of care. Petitioner contends that she needs someone to help her cook and clean. She resides with her husband. Both of them testified at the hearing.

It appears that Petitioner's income only permits her to be found eligible Medicaid benefits using of a higher income standard - 300 percent of the SSI benefit amount. In

order for eligibility to be granted at this higher income level, nursing level of care must be necessary. See 42 CFR § 435.236 and 42 CFR § 435.1005. To make this determination, a pre-admission screening (PAS) is completed by "professional staff designated by the Department, based on a comprehensive needs assessment which demonstrates that the recipient requires, at a minimum, the basic NF services described in N.J.A.C. 8:85-2.2."

N.J.A.C. 8:85-2.1(a). See also, N.J.S.A. 30:4D-17.10, et seq. The assessment was performed by staff from the Division of Aging Services, Office of Community Care Options (OCCO). R-1.

The Initial Decision found that OCCO had properly denied Petitioner's application for clinical eligibility for nursing home level services. The record is clear that Petitioner does not meet nursing home level of care. Testimony by OCCO staff described Petitioner was independent in nearly all activities of daily living and there was no cognitive impairment. Petitioner appeared at the hearing and was "able to spontaneously answer questions." ID at 5. Indeed, Petitioner testified that she did not need a personal care assistant but wanted to have someone cook and clean for her. ID at 4. Thus, I FIND that Petitioner was properly denied and that there is no basis to set that finding aside.

THEREFORE, it is on this day of JULY 2018,

ORDERED:

That the Initial Decision is hereby ADOPTED.

Meghan Davey, Director

Division of Medical Assistance

and Health Services