

contested case on May 15, 2019. Following the transmittal, Hudson issued a second letter dated May 23, 2019, denying Petitioner's request for a caregiver exception. Petitioner never requested a hearing regarding the caregiver exception, and until reviewing the OAL case file, DMAHS had no knowledge of the denial of the caregiver exception. However, on the date of the hearing, the parties entered into a settlement whereby Hudson County agreed to accept Petitioner's request for a caregiver exception "subject to the State's approval." The eligibility date, which was the issue transmitted to the OAL for hearing, was not addressed in the settlement.

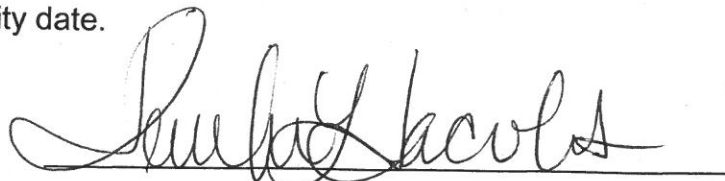
I hereby REJECT the Settlement Agreement as the issue before the OAL was the eligibility date. The issue of a caregiver exception was not transmitted. As such, the settlement did not resolve the issue certified to the OAL. The April 16, 2019 letter concerning Petitioner's eligibility date was contested and no determination was made regarding the eligibility date. As such, the Agreement does not dispose of the controversy.

THEREFORE, it is on this 19th day of DECEMBER 2019,

ORDERED:

That the Initial Decision approving the terms of the Settlement Agreement in this matter is hereby REJECTED; and

That the matter is hereby REMANDED to the Office of Administrative Law for further action on Petitioner's Medicaid eligibility date.



Jennifer Langer Jacobs, Assistant Commissioner
Division of Medical Assistance and Health Services



State of New Jersey
OFFICE OF ADMINISTRATIVE LAW

INITIAL DECISION

SETTLEMENT

OAL DKT. NO. HMA 06748-19

A.R.,

Petitioner,

v.

HUDSON COUNTY DEPARTMENT

OF FAMILY SERVICES,

Respondent.

Maurice Giro, Esq., for petitioner

Vanessa Aquino, for respondent, Hudson County Department of Family Services, pursuant to N.J.A.C. 1:1-5.4(a)(3)

Record Closed: October 30, 2019

Decided: November 6, 2019

BEFORE **ANDREW M. BARON, ALJ:**

At the hearing on October 30, 2019, the parties settled the matter and executed the attached Stipulation of Settlement indicating the terms of agreement.

Having reviewed the record and the settlement terms, I **FIND**:

1. The parties have voluntarily agreed to the settlement as evidenced by their signatures or the signatures of their representatives.
2. The settlement fully disposes of all issues in controversy and is consistent with the law.

I **CONCLUDE** that this agreement meets the requirements of N.J.A.C. 1:1-19.1 and that settlement should be approved. Accordingly, I approve the settlement and **ORDER** that the parties comply with the settlement terms and that these proceedings be concluded.

I hereby **FILE** my initial decision with the **DIRECTOR OF THE DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES** for consideration.

This recommended decision may be adopted, modified or rejected by the **DIRECTOR OF THE DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES**, who by law is authorized to make a final decision in this matter. If the (title of agency head) does not adopt, modify or reject this decision within forty-five days and unless such time limit is otherwise extended, this recommended decision shall become a final decision in accordance with N.J.S.A. 52:14B-10.

November 6, 2019
DATE


ANDREW M. BARON, ALJ

Date Received at Agency: November 8, 2019

Date Mailed to Parties: November 8, 2019
mm



OFFICE OF ADMINISTRATIVE LAW

STIPULATION OF SETTLEMENT

for

DIVISION OF MEDICAL ASSISTANCE

OAL DKT. NO.: HMA - 06748-19

CASE NAME: Ana Rodriguez

A hearing was requested in this case because _____

Denial of caregiver exemption

The County of Hudson and Ana Rodriguez by her son
have reached an agreement. The terms of the settlement are as follows: Jose Rodriguez PoD

Basis and Terms of Settlement:

The County approves the
petitioner's child caregiver exemption
subject to the State's approval. Petitioner
renoves his right to appeal any decision by
the State.

_____ is /is not entitled to
benefits as of _____ in the amount of _____.

This agreement becomes effective upon approval by the Division of Medical Assistance.

10/30/19
Date of Settlement:

Jose A Rodriguez
Client

[Signature], ALJ
Approved by ALJ
Andrew M. Brown

[Signature]
Agency Representative
Fernando Lopez
[Signature] EGO.