

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

JENNIFER LANGER JACOBS
Assistant Commissioner

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

E.A..

PETITIONER.

V.

DIVISION OF MEDICAL ASSISTANCE:

AND HEALTH SERVICES AND

BERGEN COUNTY BOARD OF

SOCIAL SERVICES,

RESPONDENTS.

ADMINISTRATIVE ACTION

FINAL AGENCY DECISION

OAL DKT. NO. HMA 06740-19

As Assistant Commissioner of the Division of Medical Assistance and Health Services, I have reviewed the record in this case, including the OAL case file and the Initial Decision approving the Settlement Agreement reached by the parties. Procedurally, the time period for the Agency Head to file a Final Decision is October 24, 2019, pursuant to an Order for Extension. The Initial Decision was received on July 24, 2019.

This matter arises from Bergen County Board of Social Services' denial of Petitioner's Medicaid eligibility based on Petitioner's failure to provide required verification documents. The parties entered into a settlement on the record whereby the Board agreed to issue a revised notice of ineligibility based on income. Petitioner may appeal the revised notice if he disagrees with the revised determination letter. By Initial Decision dated July

24, 2019, the ALJ approved the Settlement Agreement because it was consistent with the law, fully disposed of all issues in controversy and was voluntarily entered into by both parties in accordance with N.J.A.C. 1:11-19.1.

Based on my review of the record, I concur with the ALJ's findings. I hereby ADOPT the Settlement Agreement.

THEREFORE, it is on this day of SEPTEMBER 2019,

ORDERED:

That the Initial Decision affirming the Settlement Agreement in this matter is hereby ADOPTED.

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