



State of New Jersey
Department of Human Services
Division of Medical Assistance and Health Services
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Governor

Sheila Y. Oliver
Lt. Governor

Carole Johnson
Commissioner

Meghan Davey
Director

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

L.K.,

PETITIONER,

v.

OFFICE OF COMMUNITY CHOICE

OPTIONS,

RESPONDENT.

ADMINISTRATIVE ACTION

FINAL AGENCY DECISION

OAL DKT. NO. HMA 00753-2019

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. Petitioner filed exceptions in the matter. Procedurally, the time period for the Agency Head to file a Final Agency Decision in this matter is April 22, 2019, 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 March 6, 2019.

This matter concerns the termination of Petitioner's clinical eligibility in November 2018. At the time Petitioner was residing in a nursing home since October 2017. As a result of a review by Petitioner's managed care organization, an assessment of her clinical status was performed by the Office of Community Choice Options (OCCO) in the Division of Aging Services.

During that assessment Petitioner was observed ambulating independently. She had no cognitive impairment and reported she was independent in all her activities of daily living (ADLs). She was supervised during bathing, however, that was done pursuant to the facility's safety protocols rather than due to Petitioner's abilities.

In December 2018, Petitioner suffered a seizure that required hospitalization as well as physical therapy for ambulation. OCCO performed another assessment in late January 2019 which again showed her to be independent in ADLs. Petitioner was observed at the hearing ambulating with a rolling walker but was otherwise unassisted.

The ALJ found that OCCO was correct in determining that Petitioner did not meet nursing home level of care. Petitioner was found to not meet the clinical eligibility criteria for nursing facility level of care so as to receive Managed Long Term Services and Supports (MLTSS) benefits. Eligibility for nursing facility services is determined by the professional staff designated by the Department based on a comprehensive needs assessment that demonstrates that the beneficiary requires nursing home level of care. N.J.A.C. 8:85-2.1.

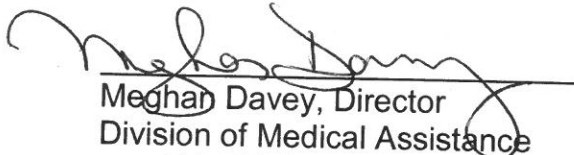
Based upon my review of the record, I hereby ADOPT the recommended decision of the Administrative Law Judge in its entirety and incorporate the same herein by reference. I agree that that Petitioner does not satisfy the clinical eligibility criteria necessary to qualify for nursing facility level of care pursuant to N.J.A.C. 8:85-2.1 and

2.2. Petitioner presented no evidence to contradict the clinical determination. She is independent in areas of daily living and does not suffer from any cognitive impairment.

THEREFORE, it is on this 10th day of APRIL 2019,

ORDERED:

That the Initial Decision is hereby ADOPTED.


Meghan Davey, Director
Division of Medical Assistance
and Health Services