



State of New Jersey

DEPARTMENT OF HUMAN SERVICES

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

PO Box 712

TRENTON, NJ 08625-0712

PHILIP D. MURPHY
Governor

SHEILA Y. OLIVER
Lt. Governor

CAROLE JOHNSON
Commissioner

JENNIFER LANGER JACOBS
Assistant Commissioner

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

R.B.,

PETITIONER,

v.

DIVISION OF MEDICAL ASSISTANCE :

AND HEALTH SERVICES AND :

ESSEX COUNTY BOARD OF :

SOCIAL SERVICES, :

RESPONDENTS. :

ADMINISTRATIVE ACTION

FINAL AGENCY DECISION

OAL DKT. NO. HMA 07623-2019

As Assistant Commissioner of the Division of Medical Assistance and Health Services, I have reviewed the record in this case, including the Initial Decision, the OAL case file and the documents filed below. Essex County filed exceptions in this matter. Procedurally, the time period for the Agency Head to render a Final Agency Decision is October 11, 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

was received on August 27, 2019.

The matter arises regarding the denial of Petitioner's Medicaid benefits due to excess income. Essex County determined that Petitioner received Social Security benefits totaling \$1,072 a month. In 2019, the income limit is \$1,041. See Medicaid Communication No.19-03. As such, she was denied benefits.

The Initial Decision reversed the denial finding that the file lacked supporting documentation including "which Medicaid program petitioner applied for and was rejected, and if it was based on income, what calculation was used." The decision also states that the denial notice was not produced. For the reasons that follow, I hereby REVERSE the Initial Decision and reinstate the denial.

I am puzzled by the findings that there was a lack of documentation regarding the denial of benefits. The matter was transmitted to the OAL on June 5, 2019 and contains a copy of the May 6, 2019 denial notice for "ABD Medicaid" due to excess income pursuant to N.J.A.C. 10:71-5.6 as well as the eligibility worksheet showing the calculation used to deny Petitioner's application. These documents were provided by Petitioner when she asked for a fair hearing so there is no doubt she received it. See also N.J.A.C. 1:1-8.2 regarding OAL transmittals.

The fair hearing summary report entered as R-1 contains a printout of the State Online Query (SOLQ) screens confirming her Social Security benefit amount to be \$1,072.50. See https://www.ssa.gov/edds/SOLQi/SOLQi_index.htm. As such, the record shows sufficient notice and documentation as to why the case was denied.

Petitioner did not provide any information that the income used by Essex County on the worksheet was incorrect. State agencies rely on the SOLQ system for real time verification of Petitioner's income. There is no reduction of countable income for garnishments like the one for an unpaid student loan imposed on Petitioner's benefits. P-1. See 20 CFR § 416.1123(b)(2) ("(1) We include more than you actually receive where

another benefit payment (such as a social security insurance benefit) (see § 416.1121) has been reduced to recover a previous overpayment. You are repaying a legal obligation through the withholding of portions of your benefit amount, and the amount of the debt reduction is also part of your unearned income.”).

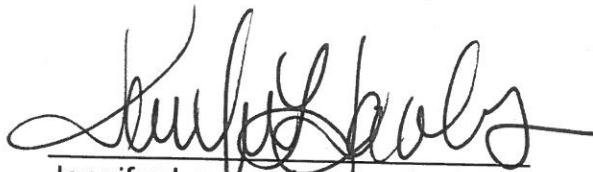
Thus, for the reason set forth above and based on the documents contained in the record, I hereby REVERSE the Initial Decision and uphold Essex County’s denial of Petitioner’s application for Medicaid due to excess income.

THEREFORE, it is on this ^{30th} day of SEPTEMBER 2019,

ORDERED:

That the Initial Decision is hereby REVERSED; and

That the denial of benefits is upheld.



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