

State of New Jersey

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

K.W.

PETITIONER.

V.

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES AND GLOUCESTER COUNTY BOARD OF SOCIAL SERVICES,

RESPONDENTS.

ADMINISTRATIVE ACTION FINAL AGENCY DECISION

OAL DKT. NO. HMA 15227-19

As Assistant Commisioner for 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 entire contents of the OAL case file. Neither party filed exceptions. Procedurally, the time period for the Agency Head to file a Final Agency Decision is January 10, 2020 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 November 26, 2019.

The Affordable Care Act regulations establish a new method for counting income based upon an applicant's Modified Adjusted Gross Income (MAGI). The countable income for MAGI is gross income according to the Internal Revenue Service Code. See 42 CFR 435.603. In accordance with the adoption of MAGI eligibility determinations, there is also a new method to determine household composition. The household unit is no longer based on who lives together. Rather each individual is required to have their own separate household determination. Med Comm 14-12. As a result, there may be several household units within one home.

Since MAGI methodology is based on the Internal Revenue Code, household compositions are identified as either tax filing or non-tax filing, with corresponding regulations governing each. 42 CFR 435.603(f). For individuals who neither file a tax return nor are claimed as a tax dependent, the household consists of the individual and, if living with the individual:

- (i) The individual's spouse;
- (ii) The individual's natural, adopted and step children under the age specified in paragraph (f)(3)(iv) of this section; and
- (iii) In the case of individuals under the age specified in paragraph (f)(3)(iv) of this section, the individual's natural, adopted and step parents and natural, adoptive and step siblings under the age specified in paragraph (f)(3)(iv) of this section.
- (iv) The age specified in this paragraph is either of the following, as elected by the agency in the State plan—
 - (A) Age 19; or
 - (B) Age 19 or, in the case of full-time students, age 21.
 - 42 CFR 435.603(f)(3).

Petitioner and E.B. are not married. The evidence presented by Gloucester County Board of Social Services (GCBSS) indicates that Petitioner and E.B. reside together. Under MAGI, because Petitioner and E.B. are not married, their living arrangement does not alter the household composition for Petitioner. Therefore, Petitioner's failure to provide definitive proof of that E.B. did not reside with her is irrelevant and her Medicaid benefits should not be terminated on that basis.

However, E.B.'s living arrangements may alter the household composition with regard to his children's eligibility. As stated above, "the household consists of the individual, and if living with the individual: the individual's natural, adopted and step children..." 42 CFR 435.603(f)(3). To the

extent E.B. is living with any of his children, the household composition for that child may be affected and may alter his or her Medicaid eligibility. To this end, E.B.'s financial information would be necessary to determine the children's eligibility. While the September 18, 2019 termination letter states that Petitioner failed to provide this information, the record is silent with regard to GCBSS' request for said information. Accordingly, I am returning the matter to the GCBSS for determination of household composition and Medicaid eligibility.

THEREFORE, it is on this day of JANUARY 2020,

ORDERED:

That the Initial Decision upholding the termination of benefits for failure to provide verification regarding E.B.'s residence and financial information is hereby REVERSED; and

That this matter is RETURNED to GCBSS to process Petitioner's eligibility in accordance with this Final Agency Decision.

IT IS FURTHER ORDERED:

That GCBSS shall continue Petitioner's household Medicaid benefits pending the redetermination of eligibility pursuant to this Final Agency Decision.

Jennifer Langer Jacobs, Assistant Commissioner

Division of Medical Assistance and Health Services