

State of New Jersey

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'Lt. Governor

DEPARTMENT OF HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES
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CAROLE JOHNSON

Commissioner

JENNIFER LANGER JACOBS
Assistant Commissioner

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

M.G.

PETITIONER,

ADMINISTRATIVE ACTION

V.

FINAL AGENCY DECISION

OAL DKT. NO. HMA 04195-20

MONMOUTH COUNTY BOARD OF SOCIAL SERVICES,

RESPONDENTS.

As the Assistant Commissioner for the Division of Medical Assistance and Health Services, I have reviewed the record in this case, consisting of the Initial Decision, the

documents in evidence and the entire contents of the OAL file. Neither Party filed Exceptions.

Procedurally, the time period for the Agency Head to render a Final Agency Decision is

February 14, 2021 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 the agency's receipt. The Initial

Decision in this case was received on November 16, 2020.

The matter arises from the Monmouth County Board of Social Services' (MCBSS) March 4, 2020 notice of eligibility and transfer penalty. At issue is a series of approximately eighty-two transfers to Petitioner's daughter and her daughter's business between 2014 and 2019 totaling \$145,850. In determining Medicaid eligibility for someone seeking institutionalized benefits, the counties must review five years of financial history. Under the regulations, "[i]f an individual . . . (including any person acting with power of attorney or as a guardian for such individual) has sold, given away, or otherwise transferred any assets (including any interest in an asset or future rights to an asset) within the look-back period" a transfer penalty of ineligibility is assessed. N.J.A.C. 10:71-4.10 (c). "A transfer penalty is the delay in Medicaid eligibility triggered by the disposal of financial resources at less than fair market value during the look-back period." E.S. v. Div. of Med. Assist. & Health Servs., 412 N.J. Super. 340, 344 (App. Div. 2010). "[T]ransfers of assets or income are closely scrutinized to determine if they were made for the sole purpose of Medicaid qualification." <u>Ibid.</u> Congress's imposition of a penalty for the disposal of assets for less than fair market value during or after the look-back period is "intended to maximize the resources for Medicaid for those truly in need." It is Petitioner's burden to overcome the presumption that the transfer was done - even in part - to establish Medicaid eligibility. The presumption that the transfer of assets was done to qualify for Medicaid benefits may be rebutted "by presenting convincing evidence that the assets were transferred exclusively (that is, solely) for some other purpose." N.J.A.C. 10:71-4.10(j).

I agree with the ALJ that the Petitioner failed to present any evidence to rebut the presumption that the transfers in question were made to qualify for Medicaid. Based on my

¹ Congress understands that applicants and their families contemplate positioning assets to achieve Medicaid benefits long before ever applying. To that end, Congress extended the look back period from three years to five years. Deficit Reduction Act of 2005, P.L. 109-171, § 6011 (Feb. 8, 2006).

review of the record and for the reasons set forth above, I hereby ADOPT the Initial Decision and uphold the transfer penalty.

THEREFORE, it is on this ^{15th}day of DECEMBER 2020,

ORDERED:

That the Initial Decision is hereby ADOPTED.

Jennifer Langer Jacobs, Assistant Commissioner Division of Medical Assistance

and Health Services