

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

SARAH ADELMAN Acting Commissioner

JENNIFER LANGER JACOBS
Assistant Commissioner

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

B.V.,

PETITIONER.

٧.

ADMINISTRATIVE ACTION

FINAL AGENCY DECISION

OAL DKT, NO. HMA 08501-20

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 matter, consisting of the Initial Decision, the

documents in evidence and the contents of the OAL case file. No exceptions were filed.

Procedurally, the time period for the Agency Head to file a Final Decision is November 29,

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 receipt. The Initial Decision was received on

October 12, 2021.

Based upon my review of the record, I hereby ADOPT the Initial Decision in its entirety and incorporate the same herein by reference. This matter arises from the

Monmouth County Board of Social Services' (MCBSS) August 3, 2020 denial of Petitioner's Medicaid application for failure to provide verifications. The issue presented here is whether Petitioner provided the necessary verifications for the MCBSS to make an eligibility determination. On June 19, 2019, Petitioner's daughter, E.S., filed a Medicaid application with MCBSS on behalf of Petitioner. On August 7, 2019, MCBSS sent a letter requesting information to E.S. On August 23, 2019, MCBSS received a Designated Authorized Representative (DAR) form appointing Pia Gutterman, business office manager of the facility in which Petitioner resided. On June 11, 2020, MCBSS made another request for verifications, including source of several deposits, and an explanation of two transactions. MCBSS communicated with the DAR about these transactions and ultimately gave an extension until June 25, 2020 to provide the requested verifications. Petitioner did not provide the requested documentation. Without this information, MCBSS was unable to complete its eligibility determination and the August 3, 2020 denial was appropriate.

THEREFORE, it is on this ^{23rd}day of NOVEMBER 2021,

ORDERED:

That the Initial Decision is hereby ADOPTED.

Jennifer Langer Jacobs, Assistant Commissioner Division of Medical Assistance

And Health Services