

State of New Jersey

PHILIP D. MURPHY Governor

SHEILA Y. OLIVER
Lt. Governor

DEPARTMENT OF HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES
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SARAH ADELMAN
Acting Commissioner

JENNIFER LANGER JACOBS
Assistant Commissioner

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

D.P.,

PETITIONER,

V.

ADMINISTRATIVE ACTION

FINAL AGENCY DECISION

OAL DKT. NO. HMA 06889-20

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 June 10, 2021 in accordance with an Order of Extension. The Initial Decision was received on March 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) June 22, 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. During the course of the hearing, Respondent acknowledged that Petitioner had provided a complete response to the requested items, but that they were misfiled.

THEREFORE, it is on this 28thday of MAY 2021,

ORDERED:

That the Initial Decision is hereby ADOPTED.

Jennifer Langer Jacobs, Assistant Commissioner Division of Medical Assistance

And Health Services