

Services, filed a Medicaid application with CCBSS. The application required the disclosure of Petitioner's resources, including cash, investments, properties and life insurance policies. On October 13, 2020 and November 10, 2020, CCBSS requested additional information needed to determine her eligibility. Petitioner requested extensions of time to respond to both notices. Both requests for extension were granted and Petitioner was given until December 1, 2020 to provide the still outstanding information. On January 22, 2021, CCBSS issued its final notice imposing a deadline of February 1, 2021. If the information requested was not received by February 1, 2021, the application would be denied and Petitioner would have to reapply. CCBSS reviewed the information Petitioner provided and discovered previously unreported accounts. As a result, CCBSS denied Petitioner's Medicaid application after holding in open for 131 days.

Both the County Welfare Agency (CWA) and the applicant have responsibilities with regard to the application process. N.J.A.C. 10:71-2.2. Applicants must complete any forms required by the CWA; assist the CWA in securing evidence that corroborates his or her statements; and promptly report any change affecting his or her circumstance. N.J.A.C. 10:71-2.2(e). MCBSS as the County Welfare Agency (CWA) exercises direct responsibility in the application process to inform applicants about the process, eligibility requirements and their right to a fair hearing; receive applications; assist applicants in exploring their eligibility; make known the appropriate resources and services; assure the prompt and accurate submission of data; and promptly notify applicants of eligibility or ineligibility. N.J.A.C. 10:71-2.2(c) and (d). CWAs must determine eligibility for Aged cases within 45 days and Blind and Disabled cases within 90 days. N.J.A.C. 10:71-2.3(a); MedCom No. 10-09, and Fed. Reg. 42 CFR 435.91. However, the time frame may be extended when "documented exceptional circumstances arise" preventing the processing of the application within the prescribed time limits. N.J.A.C. 10:71-2.3(c). The regulation does not require MCBSS to grant an extension beyond the designated time period when the delay is due to circumstances outside the control of both the applicant and the CWA. At best, an extension is permissible. N.J.A.C.

10:71-2.3; S.D. vs. DMAHS and Bergen County Board of Social Services, No. A-5911-10 (App. Div. February 22, 2013). CWAs must determine eligibility for Aged cases within 45 days and Blind and Disabled cases within 90 days. N.J.A.C. 10:71-2.3(a); MedCom No. 10-09, and Fed. Reg. 42 CFR 435.91. However, the time frame may be extended when “documented exceptional circumstances arise” preventing the processing of the application within the prescribed time limits. N.J.A.C. 10:71-2.3(c). The regulation does not require MCBSS to grant an extension beyond the designated time period when the delay is due to circumstances outside the control of both the applicant and the CWA. At best, an extension is permissible. N.J.A.C. 10:71-2.3; S.D. vs. DMAHS and Bergen County Board of Social Services, No. A-5911-10 (App. Div. February 22, 2013).

The Medicaid application requires the applicant to disclose all of his or her financial information, including resources such as cash, properties and investments. Petitioner’s September 24, 2020 application disclosed three TD bank accounts, a single investment, a home and a life insurance policy. On October 13, November 10, and November 21, 2020, CCBSS requested additional information necessary to determine eligibility. The first two requests asked for the same information. The third request showed two pieces of outstanding information and one additional request for a newly discovered Liberty Mutual Policy. Each notice reminded the recipient that she was responsible to provide verification of how resources were spent and the origins of funds used for deposit. Despite this, Petitioner had still not provided a complete picture of her finances, particularly information regarding a \$9,556.91 deposit.

As a result, CCBSS had to request still outstanding documentation and additional information. Petitioner was notified that this information needed to be provided by February 1, 2021 or the application would be denied and she would have to reapply. This notice contained the same reminder that Petitioner needed to provide the origins of funds deposited. It also noted that verifications were required for checks over \$2000, and that any deposit over \$2,000 would need to be explained and have supporting documentation. In response,

Petitioner provided information that resulted in more, not fewer, questions about her finances. Petitioner either knew or should have known of these accounts and did not disclose them until they were already 129 days in to the application process.

At all times relevant to the application process, Petitioner was assisted by Rikki Kirwan of Senior Planning Services, a company specializing in Medicaid applications.¹ Petitioner and her representative were in the best position, at the earliest possible date, to provide CCBSS with all the information regarding her resources. It is an applicant's duty to candidly and promptly provide their financial information, rather than wait for CCBSS to ask for verification of a specific piece of information, transaction or account. Here, Petitioner waited until the eve of the deadline to provide information with regard to a \$9,556.91 transaction, revealing additional CD accounts Petitioner had not previously disclosed. At this point, CCBSS had already made four requests, granted three extensions and held open the application for 131 days. This new information would result in the need for additional verifications, and CCBSS had already held open Petitioner's application for almost three months beyond the forty-five day limit.

THEREFORE, it is on this 8th day of OCTOBER 2021,

ORDERED:

That the Initial Decision is hereby REVERSED.



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

¹ The company's website claims to have successfully assisted more than 10,000 clients.