

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

M.W.

PETITIONER,

ADMINISTRATIVE ACTION

FINAL AGENCY DECISION

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OAL DKT. NO. HMA 11410-20

MONMOUTH COUNTY BOARD OF SOCIAL SERVICES,

RESPONDENTS.

As 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 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 April 22, 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 March 8, 2021.

This matter concerns the November 9, 2020 denial of Petitioner's Medicaid application due to the failure to provide requested verifications. In July 2020, Petitioner filed a Medicaid

application with the Monmouth County Board of Social Services (MCBSS). On October 6 and 21, 2020, MCBSS issued requests for verifications necessary to determine eligibility. On October 22, 2020, Petitioner's representative requested additional time to provide the requested verifications. This request was denied. Petitioner rushed to provide the majority of the documents by the November 4, 2020 deadline, but was unable to completely fulfill the request. Despite Petitioner's demonstrated cooperation and request for an extension to provide the requested verifications, his Medicaid application was denied.

I agree with the ALJ that Petitioner's representative cooperated in good faith with MCBSS to provide the information necessary to determine eligibility and should have been afforded an extension of time to provide the needed documents. Therefore, I FIND that MCBSS should process Petitioner's July 2020 application to determine if he was eligible for Medicaid benefits. This Final Agency Decision should not be construed as making any findings regarding Petitioner's eligibility.

THEREFORE, it is on this ^{22nd}day of APRIL 2021,

ORDERED:

That the Initial Decision is hereby ADOPTED.

Jennifer Langer Jacobs, Assistant Commissioner

Division of Medical Assistance And Health Services