

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

O.A.,

PETITIONERS.

ADMINISTRATIVE ACTION **FINAL AGENCY DECISION**

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OAL DKT. NO. HMA 00814-21

UNION COUNTY BOARD OF SOCIAL SERVICES,

RESPONDENTS.

As Assistant Commissioner for the Division of Medical Assistance and Health Services (DMAHS), I have reviewed the record in this matter, including the Initial Decision and the OAL case file. Neither party filed exceptions to the Initial Decision. Procedurally, the time period for the Agency Head to render a Final Agency Decision is August 23, 2021, in accordance with an Order of Extension. The Initial Decision was received on May 25, 2021.

The issue presented here is whether the Petitioner is responsible for a Medicaid overpayment due because Petitioner had received benefits despite the fact that she had not been a lawful permanent resident of the United States for five years. N.J.A.C. 10:78-3.2. Based upon my review of the record, I hereby ADOPT the Initial Decision in its entirety and incorporate the same herein by reference.

Petitioner became a lawful permanent resident of the United States on October 18, 2014. On December 7, 2014, Petitioner applied for Medicaid benefits and was found eligible effective December 1, 2014. On May 10, 2019, Union County conducted a redetermination and discovered that Petitioner was ineligible because she had not been a lawful permanent resident for five years and would not have been eligible for benefits until October 18, 2019.

The Division is statutorily authorized to seek reimbursement of Medicaid overpayments. Indeed, recovery in this matter is based upon N.J.S.A. 30:4D-7(i), which mandates the Division:

To take all necessary action to recover the cost of benefits incorrectly provided to . . . a recipient . . .

Pursuant to N.J.S.A. 30:4D-7.I., I am authorized to "compromise, waive or settle any claim under this act." The undisputed facts in this case indicate that Petitioner was ineligible for Medicaid from October 2014 through October 2019 because she had not met the five-year requirement for lawful permanent residents. However, the Petitioner was determined eligible pursuant to the Federally-Facilitated Marketplace and the verification information showed an inconsistency with Petitioner's citizenship and immigration status at the time of application. As a result, I am reluctant to penalize

Petitioner under the specific facts presented here and conclude that this is an appropriate case to exercise the authority granted to me by <u>N.J.S.A</u>. 30:4D-7.I. to waive the claim for the overpayment.

Therefore, I FIND that based on the unique facts and circumstances presented here, Petitioner is not responsible for the assessed Medicaid overpayment.

THEREFORE, it is on this 15th day of AUGUST 2021,

ORDERED:

That the Initial Decision is hereby ADOPTED.

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