



State of New Jersey
OFFICE OF ADMINISTRATIVE LAW

INITIAL DECISION

OAL DKT. NO. HMA 12483-25

K.P.

Petitioner,

v.

ESSEX COUNTY BOARD OF
SOCIAL SERVICES

Respondent.

Medicaid Only

Failure to Verify Eligibility Appeal

N.J.A.C. 10:71-2.2 and -2.3

STATEMENT OF THE CASE

Respondent denied petitioner's Medicaid Only application for failure to provide the following evidence of eligibility under N.J.A.C. 10:71-2.2(e):

On 5/27/2025, Respondent issued a denial of Medicaid Insurance

for Petitioner due to a claim that Petitioner did not provide

bank statements evidencing unearned income and resources as

under N.J.A.C. 10:72-2.3(a)8.

FINDINGS OF FACT AND CONCLUSIONS OF LAW

I.

- ☒ I **FIND** that petitioner or petitioner's representative is **AUTHORIZED** to pursue this appeal; therefore, I **CONCLUDE** that standing has been established.
- ☐ I **FIND** that petitioner or petitioner's representative is **NOT AUTHORIZED** to pursue this appeal; therefore, I **CONCLUDE** that standing has not been established.

II.

- ☒ I **FIND** that petitioner did not timely provide all the required documentation under N.J.A.C. 10:71-2.2(e) and -2.3(a), and that no exceptional circumstances exist under N.J.A.C. 10:71-2.3(c); therefore, I **CONCLUDE** that the Medicaid Only application should be **DENIED** under N.J.A.C. 10:71-2.2(e).
- ☐ I **FIND** that petitioner did not timely provide all the required documentation under N.J.A.C. 10:71-2.2(e) and -2.3(a), but that exceptional circumstances exist under N.J.A.C. 10:71-2.3(c); therefore, I **CONCLUDE** that the time limit for verification should be **EXTENDED** under N.J.A.C. 10:71-2.3(c).
- ☐ I **FIND** that petitioner did not timely provide all the required documentation under N.J.A.C. 10:71-2.2(e) and -2.3(a); exceptional circumstances exist under N.J.A.C. 10:71-2.3(c); and petitioner has since provided all the required documentation; therefore, I **CONCLUDE** that the Medicaid Only application should be **PROCESSED** to determine eligibility under N.J.A.C. 10:71.
- ☐ I **FIND** that petitioner timely provided all the required documentation under N.J.A.C. 10:71-2.2(e) and -2.3(a); therefore, I **CONCLUDE** that the Medicaid Only application should be **PROCESSED** to determine eligibility under N.J.A.C. 10:71.

ADDITIONAL FINDINGS OF FACT/CONCLUSIONS OF LAW

SEE ATTACHED PAGE.

ATTACHMENT TO FINDINGS OF FACT AND CONCLUSIONS OF LAW

1. Deborah Hicks (Hicks), Petitioner's court appointed Legal Guardian, applied for Medicaid on May 2, 2025.
2. Respondent issued a Request for Information (RFI) on May 7, 2025 (P-1), requesting the following: "3 months of bank statements for account where social security income is deposited and any other account active in your name for dates February 2025 through April 2025. Our system indicates your income is being deposited into a checking account." Id. The requested documents were due by May 21, 2025.
3. On May 16, 2025, Hicks provided a copy of two pages of bank statements for TD Bank account ending #7479 (P-3). However the bank statements submitted by Hicks did not reflect the monthly deposit of Petitioner's Social Security Benefits.
4. Hicks testified that she submitted the requested bank statements on May 16, 2025, by uploading the statements using her cellphone. However, the record reflects that the three months of bank statements requested by Respondent were not provided by May 21, 2025.
5. Hicks testified that she was not aware that the bank statements did not fully upload as she intended.
6. As a result of the foregoing, Petitioner's application for Medicaid was denied on May 27, 2025. (P-2).

I **CONCLUDE** that Petitioner did not provide the documents requested in a timely manner as required under N.J.A.C. 10:72-2.3 (a) 8.

ORDER

I **ORDER** that:

- ☐ Petitioner's appeal is **DISMISSED** because petitioner has no standing.
- ☒ Petitioner is **INELIGIBLE** for Medicaid Only under N.J.A.C. 10:71-2.2(e).
- ☐ Respondent must **EXTEND** the time limit for verification under N.J.A.C. 10:71-2.3(c).
- ☐ The case be **RETURNED** to respondent for respondent to **PROCESS** the application to determine eligibility under N.J.A.C. 10:71.

I **FILE** this initial decision with the **ASSISTANT COMMISSIONER OF THE DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES**. This recommended decision is deemed adopted as the final agency decision under 42 U.S.C. § 1396a(e)(14)(A) and N.J.S.A. 52:14B-10(f). The **ASSISTANT COMMISSIONER OF THE DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES** cannot reject or modify this decision.

If you disagree with this decision, you have the right to seek judicial review under New Jersey Court Rule 2:2-3 by the Appellate Division, Superior Court of New Jersey, Richard J. Hughes Complex, PO Box 006, Trenton, New Jersey 08625. A request for judicial review must be made within 45 days from the date you receive this decision. If you have any questions about an appeal to the Appellate Division, you may call (609) 815-2950.

08/25/2025

DATE

Julio C. Morejon

JULIO C. MOREJON, ALJ

Date Record Closed:

08/21/2025

Date Filed with Agency:

Date Sent to Parties:

APPENDIX

Witnesses

For Petitioner:

DEBORAH HICKS

For Respondent:

ERICA SAMPSON, CASE WORKER

Exhibits

For Petitioner:

P-1 Request for Information 5/7/2025

P-1 Termination letter 5/27/2025

P-3 TD Bank statement (2 pages) 3/2025

For Respondent:

NONE