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Assistant Commissioner

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

L.D.

PETITIONER,

v.

DIVISION OF MEDICAL ASSISTANCE
AND HEALTH SERVICES

RESPONDENTS.

ADMINISTRATIVE ACTION

FINAL AGENCY DECISION

OAL DKT. NO. HMA 00681-25

As Assistant Commissioner for the Division of Medical Assistance and Health Services (DMAHS), I have reviewed the record in this case, including the Initial Decision and the Office of Administrative Law (OAL) case file. No exceptions were filed in this matter. Procedurally, the time period for the Agency Head to render a Final Agency Decision is May 19, 2025.

This matter arises from the August 23, 2024, termination of Petitioner's Qualified Medicare Beneficiary (QMB), Specified Low-Income Medicare Beneficiary (SLMB), and Qualifying Individual (QI) Medicare Savings Program by the Division of Aging Services of

the New Jersey Department of Human Services due to the failure to provide information that was necessary to determine eligibility. The Initial Decision affirmed the termination finding that Petitioner failed to provide the requested verifications in a timely manner. Based upon my review of the record, I hereby ADOPT the findings and conclusions of the Administrative Law Judge (ALJ) holding that Petitioner failed to timely comply with producing evidence to corroborate program eligibility.

New Jersey offers several Medicare Savings Programs—Qualified Medicare Beneficiary (QMB), Specified Low-Income Medicare Beneficiary (SLMB), and Qualifying Individual (QI)—to help low-income Medicare recipients afford premiums. To qualify as an SLMB beneficiary under N.J.A.C. 10:72-1.1, an individual must be aged, blind, or disabled; a New Jersey resident; enrolled in Medicare Parts A and B; and meet the income and resource limits outlined in N.J.A.C. 10:72-4.1(b) and 4.5(b). Beneficiaries must recertify eligibility annually, pursuant to N.J.A.C. 10:72-2.5. DMAHS is required to provide written notice to applicants or beneficiaries of any decisions affecting their benefits, with at least 10 days' notice before implementing any adverse actions, in accordance with N.J.A.C. 10:72-5.1(b).

Per N.J.A.C. 10:72-1.4, applicants are considered the primary source of information regarding their eligibility. As outlined in N.J.A.C. 10:72-2.1(c), applicants are responsible for completing the required forms, with assistance from the agency if needed. The agency must verify all factors related to eligibility and render a timely decision. To meet these deadlines, applicants must submit the required documents in a timely manner.

Here, the required recertification application was mailed to Petitioner on December 23, 2023, to the Jersey City address of file with DMAHS. (R-1). The notice included in

the mailing provided instructions and a checklist for documents that are required to verify income and assets to process the application. The notice further states "if you do not submit a completed application within 30 days your QMB/SLMB/QI will be terminated."

(R-1). Receiving no response, DMAHS issued an August 23, 2024, termination notice.

(R-3). On September 16, 2024, DMAHS received a request for a Fair Hearing stating the re-certification request was not received and provided a new address and representative,

J.R. (R-4). On September 19, 2024, DMAHS mailed a second notice to Petitioner at the new address to complete a renewal application for QMB/SLMB/QI benefits. (R-5).

At the OAL hearing, J.R. acknowledged receipt of the renewal application for QMB/SLMB/QI benefits. Nevertheless, a renewal application was not submitted. (ID-3).

I agree with the ALJ's findings that Petitioner failed to timely provide the required documentation, and no exceptional circumstances were found to justify an extension. Consequently, the Petitioner's Medicaid QMB/SLMB/QI benefits were appropriately terminated.

Accordingly, for the reasons set forth above, I hereby ADOPT the Initial Decision and FIND that DMAHS' termination of Petitioner's application was appropriate in this matter.

THEREFORE, it is on this 16th day of MAY 2025,

ORDERED:

That the Initial Decision is hereby ADOPTED.



Gregory Woods, Assistant Commissioner
Division of Medical Assistance and Health Services