



State of New Jersey
OFFICE OF ADMINISTRATIVE LAW

INITIAL DECISION

OAL DKT. NO. HMA 02916-25

R.M.

Petitioner,

v.

ATLANTIC COUNTY DEPARTMENT OF
FAMILY & COMMUNITY DEVELOPMENT

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):

Income information relating to two pensions, bank statements

from 7/2024 forward and \$1,000 deposit history for a 9/30/24

application that was the first of 3 applications. (R-1). Benefits

approved on third application retroactive to 10/2024.

Petitioner seeks benefits retroactive to 7/2024.

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

The County issued two RFIs dated 10/2/24 and 10/22/24 (R-2, R-3).

Both RFIs asked for bank statements from 9/2019 to present,

all accounts, and copies of checks and non-electronic deposits

over \$500. 9/30/24 application did not disclose pension. Response

to RFIs were incomplete, missing bank statements, and failing

to identify all sources of income, including 2 pension sources.

N.J.A.C. 10:71-2.2(e).

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.

07/11/2025

DATE



GAURI SHIRALI SHAH

ALJ

Date Record Closed:

06/23/2025

Date Filed with Agency:

Date Sent to Parties:

APPENDIX

Witnesses

For Petitioner:

Sarah Finkel, DAR

For Respondent:

Mary Lange, Administrative Supervisor Long Term Care Medicaid

Exhibits

For Petitioner:

P-1 Denial letter, dated 11/12/24

P-2 RFI, dated 10/22/24

P-3 Fax cover sheet and response to RFI, dated 11/5/24

P-4 Email between parties regarding RFI response of 11/5/24

P-5 Not in evidence

For Respondent:

R-1 Medicaid application, dated 09/30/24

R-2 Denial letter, dated 11/12/24

R-3 RFI, dated 10/2/24

R-4 RFI, dated 10/22/24