

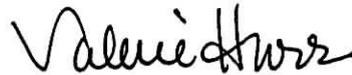
modify the Initial Decision within 45 days of the agency's receipt. The Initial Decision was received on July 21, 2014.

Based upon my review of the record, I hereby ADOPT the Initial Decision in its entirety and incorporate the same herein by reference. I agree with the ALJ that Petitioner has provided sufficient income information for the County to make an eligibility determination. See 42 CFR 435.945.

THEREFORE, it is on this 18th day of August 2014,

ORDERED:

That the Union County Board of Social Services shall evaluate Petitioner's eligibility for Medicaid benefits based upon the information A.M. has provided.



Valerie J. Harr, Director
Division of Medical Assistance
and Health Services