



State of New Jersey

DEPARTMENT OF HUMAN SERVICES

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

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TRENTON, NJ 08625-0712

CHRIS CHRISTIE
Governor

KIM GUADAGNO
Lt. Governor

JENNIFER VELEZ
Commissioner

VALERIE HARR
Director

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

A.P.,	:	
	:	
PETITIONER,	:	ADMINISTRATIVE ACTION
	:	
v.	:	FINAL AGENCY DECISION
	:	
DIVISION OF MEDICAL ASSISTANCE	:	OAL DKT. NO. HMA 05783-14
	:	
AND HEALTH SERVICES AND	:	
	:	
BERGEN COUNTY BOARD OF	:	
	:	
SOCIAL SERVICES,	:	
	:	
RESPONDENTS.	:	

As Director of the Division of Medical Assistance and Health Services, I have reviewed the record in this case, including the Initial Decision, the OAL case file and the documents in evidence. Procedurally, the time period for the Agency Head to file a Final Agency Decision in this matter is August 25, 2014, in accordance with N.J.S.A. 52:14B-10 which requires an Agency Head to adopt, reject, or modify the Initial Decision within 45 days of receipt. The Initial Decision in this matter was received on July 10, 2014.

By Initial Decision dated July 9, 2014, the ALJ found that Petitioner's income was in excess of the Medicaid limit due to his receipt of Social Security Disability benefits.

Based on my review of the record, I hereby ADOPT the Initial Decision. However I note Petitioner may be eligible for other Medicaid programs. Petitioner should contact Bergen County Board of Social Services for more information.

THEREFORE, it is on this 21st day of AUGUST 2014,

ORDERED:

That the Initial Decision in this matter is hereby ADOPTED.



Valerie Harr, Director
Division of Medical Assistance and Health Services