



State of New Jersey

DEPARTMENT OF HUMAN SERVICES

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

PO Box 712

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**

N.R.

PETITIONER,

v.

DIVISION OF MEDICAL ASSISTANCE
AND HEALTH SERVICES AND
UNION COUNTY BOARD OF
SOCIAL SERVICES,
RESPONDENTS.

ADMINISTRATIVE ACTION

FINAL AGENCY DECISION

OAL DKT. NO. HMA 07734-14

As Director of the Division of Medical Assistance and Health Services, I have reviewed the record in this matter, consisting of the Initial Decision, the documents in evidence and the entire contents of the OAL case file. Neither Party filed exceptions. Procedurally, the time period for the Agency Head to file a Final Agency Decision is October 30, 2014, in accordance with an Order of Extension. The Initial Decision was received on July 30, 2014.

This matter arises from Petitioner's April 14, 2014 appeal citing agency inaction. There is an underlying matter regarding the denial of Petitioner's eligibility for failure to provide verifications in accordance with N.J.A.C. 10:72-2.3 and N.J.A.C. 10:72-3.4(A). For the reasons that follow, I hereby MODIFY the Initial Decision to address the issue of agency inaction and ADOPT the Initial Decision with regard to the underlying issue of Petitioner's Medicaid eligibility.

On September 26, 2013, Petitioner herself submitted a Medicaid application to the Union County Board of Social Services (UCBSS). On that day, and again on November 8, 2013, November 22, 2013 and December 11, 2013, UCBSS requested information necessary to process Petitioner's application. All requests and notifications were sent to Petitioner at the address she provided in her Medicaid application. After failing to receive all the required documentation, UCBSS issued a denial notice to Petitioner effective January 14, 2014.

The rules provide that the application must be processed within 90 days of filing. N.J.A.C. 10:71-2.3(a). Under Medicaid Communication No. 10-09, the time frame may be extended when "documented exceptional circumstances arise." UCBSS timely processed the application, issuing its final request for information by December 11, 2014 and its denial notice in January 2014. There is no evidence in the record that anyone other than Petitioner was to receive notices from UCBSS.¹ Petitioner's claim that UCBSS failed to act is unsubstantiated.

¹ The ALJ notes that Robert Wood Johnson financial counselor John Barrera was not identified as Petitioner's authorized representative until April 2014.

The underlying matter of Medicaid eligibility was not cited in Petitioner's request for a hearing.² Nevertheless, the ALJ reviewed the underlying reason for denial and correctly found that Petitioner failed to provide the verifications prior to the January 2014 denial of benefits. Without this information, the County was unable to complete its eligibility determination and the denial was appropriate.

THEREFORE, it is on this *19th* day of September 2013,

ORDERED:

That the Initial Decision is hereby ADOPTED. Petitioner's Medicaid application was properly denied for failure to provide necessary verification.



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

²The UCBSS timely and properly processed the Petitioner's Medicaid application. Consequently, an appeal of the underlying matter would be considered untimely as the request was not made until three months after the denial letter was issued.