



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**

S.T.,

PETITIONERS,

v.

DIVISION OF MEDICAL ASSISTANCE

AND HEALTH SERVICES AND

SALEM COUNTY BOARD OF

SOCIAL SERVICES,

RESPONDENTS.

ADMINISTRATIVE ACTION

FINAL AGENCY DECISION

OAL DKT. NO. HMA 05443-14

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. No exceptions to the Initial Decision were filed. Procedurally, the time period for the Agency Head to render a Final Agency Decision is October 6, 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 the agency's receipt. The Initial Decision was received on August 20, 2014.

I hereby ADOPT the Initial Decision affirming the denial of NJ FamilyCare benefits. The undisputed evidence in the record indicates that Petitioner's monthly income exceeds the \$1744 income limit under this program. There is simply no authority that permits the relaxation or waiver of the income limits in any individual case.

However, I suggest that Petitioner apply for coverage through the Health Insurance Marketplace at www.healthcare.gov or by calling 1-800-318-2596.

THEREFORE, it is on this 9th day of September 2014,

ORDERED:

That the Initial Decision affirming the denial of Petitioners' Medicaid application is hereby ADOPTED as the Final Decision in this matter.

A handwritten signature in black ink, appearing to read "Valerie J. Harr", with a horizontal line underneath.

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