



State of New Jersey

DEPARTMENT OF HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES
P.O. Box 712
Trenton, NJ 08625-0712

CHRIS CHRISTIE
Governor

ELIZABETH CONNOLLY
Acting Commissioner

KIM GUADAGNO
Lt. Governor

MEGHAN DAVEY
Director

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

M.T.,

PETITIONER,

v.

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

ADMINISTRATIVE ACTION

FINAL AGENCY DECISION

OAL DKT. NO. HMA 12856-17

As Director of the Division of Medical Assistance and Health Services, I have reviewed the record in this matter, consisting of the case file, the documents in evidence and the Initial Decision. No exceptions to the Initial

Decision were filed. Procedurally, the time period for the Agency Head to file a Final Agency Decision is November 17, 2017, 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 was received on October 3, 2017.

I hereby ADOPT the Initial Decision affirming the denial of Medicaid eligibility. The undisputed evidence in the record indicates that Petitioner's monthly income exceeds the maximum income limit for the Medicaid Program for an individual. 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.

Of course, if Petitioner's financial circumstances change, he may reapply for benefits.

THEREFORE, it is on this *8th* day of NOVEMBER 2017,

ORDERED:

That the Initial Decision AFFIRMING the denial of Medicaid benefits based upon excess income is hereby ADOPTED as the Final Decision.


Meghan Davey, Director
Division of Medical Assistance
and Health Services