



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**

R.P.,

PETITIONER,

v.

DIVISION OF MEDICAL ASSISTANCE

AND HEALTH SERVICES AND

CAMDEN COUNTY BOARD OF

SOCIAL SERVICES,

RESPONDENTS.

ADMINISTRATIVE ACTION

FINAL AGENCY DECISION

OAL DKT. NO. HMA 10709-16

As Director of the Division of Medical Assistance and Health Services, I have reviewed the record in this case, including the Initial Decision and the documents in evidence. Neither party filed exceptions. Procedurally, the time period for the Agency Head to file a Final Agency Decision in this matter is

February 6, 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 the agency's receipt. The Initial Decision in this matter was received on December 23, 2016.

This matter concerns the May 2, 2016 denial of Petitioner's application due to the failure to provide financial verifications. The only issue presented here is whether Petitioner provided the necessary verification for the Camden County Board of Social Services (CCBSS) to make an eligibility determination. On January 7, 2016, Petitioner, through her step-daughter, filed a Medicaid application with CCBSS. On that same day, CCBSS handed Petitioner a request for verifications which included proof of all resources and income. There is no dispute that Petitioner received CCBSS' first request. The second request, issued on February 22, 2016, and the denial letter included an incorrect zip code. Neither notice was returned to CCBSS as undeliverable. At the hearing, Petitioner's step-daughter testified that she did not receive the February 22, 2016 request, but that she did receive the May 2, 2016 denial letter.

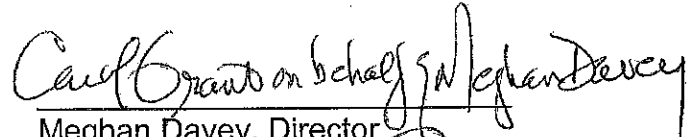
After reviewing the record and listening to the testimony, the ALJ concluded and I agree that the credible evidence in the record demonstrates that Petitioner failed to provide the needed information prior to the May 2, 2016 denial of benefits. Without this information, the County was unable to complete its eligibility determination and the denial was appropriate.

Based on my review of the record, I concur with the ALJ's findings and hereby ADOPT the Initial Decision.

THEREFORE, it is on this ^{28th} day of FEBRUARY 2017,

ORDERED:

That the Initial Decision is hereby ADOPTED.


Meghan Davey, Director
Division of Medical Assistance
and Health Services