



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

VALERIE HARR
Director

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

V.B.,

PETITIONER,

v.

DIVISION OF MEDICAL ASSISTANCE
AND HEALTH SERVICES AND
MERCER COUNTY BOARD OF
SOCIAL SERVICES,

RESPONDENTS.

Vertical line of dots separating petitioner and respondents

ADMINISTRATIVE ACTION

FINAL AGENCY DECISION

OAL DKT. NO. HMA 02262-15

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 file a Final Agency Decision is July 27, 2015 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 June 10, 2015.

Based upon my review of the record, I hereby ADOPT the Initial Decision of the Administrative Law Judge (ALJ). The Division is statutorily authorized to seek reimbursement of Medicaid overpayments. Indeed, the Division is mandated to "to take all necessary action to recover the cost of benefits incorrectly provided to...a recipient..." N.J.S.A. 30:4D-7.i

The undisputed facts in this case indicate that Petitioner was ineligible for Medicaid from June 1, 2010 through October 31, 2014 due to excess resources resulting from an unreported life insurance policy. As a result, I agree with the ALJ that Mercer County appropriately sought reimbursement for Medicaid payments made during the period of ineligibility.

THEREFORE, it is on this <sup>7<sup>th</sup></sup> day of JULY 2015,

ORDERED:

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That Petitioner reimburses the Mercer County Board of Social Services for incorrectly paid benefits in the amount of \$18,589.37 pursuant to a reasonable repayment plan.



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