



PHILIP D. MURPHY  
Governor

SARAH ADELMAN  
Commissioner

**State of New Jersey**  
**DEPARTMENT OF HUMAN SERVICES**  
Division of Medical Assistance and Health Services  
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TAHESHA L. WAY  
Lt. Governor

JENNIFER LANGER JACOBS  
Assistant Commissioner

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

A.P.,

PETITIONER,

**ADMINISTRATIVE ACTION**

**ORDER OF RETURN**

v.

**OAL DKT. NO. HMA 06242-23**

DIVISION OF MEDICAL ASSISTANCE :

AND HEALTH SERVICES AND :

MIDDLESEX COUNTY BOARD :

OF SOCIAL SERVICES, :

RESPONDENTS. :

As Assistant Commissioner for the Division of Medical Assistance and Health Services, I have reviewed the record in this case, including the Initial Decision, the Office of Administrative Law (OAL) case file, and the documents filed below. Respondent, Middlesex County Board of Social Services (Board), filed Exceptions in this matter. Procedurally, the time period for the Agency Head to render a Final Agency Decision is December 11, 2023, in accordance with an Order of Extension.

This matter arises from the June 12, 2023 notice from the Board's denying Petitioner's Medicaid application based on Petitioner's failure to provide information

necessary to determine eligibility. The issue presented here is whether Petitioner provided the necessary verification for the Board to make an eligibility determination.

Both the County Welfare Agency (CWA) and the applicant have responsibilities with regard to the application process. N.J.A.C. 10:71-2.2. Applicant must complete any forms required by the CWA; assist the CWA in securing evidence that corroborates his or her statements; and promptly report any change affecting his or her circumstance. N.J.A.C. 10:71-2.2 (e). The CWA exercises direct responsibility in the application process to inform applicants about the process, eligibility requirements and their right to a fair hearing; receive applications; assist applicants in exploring their eligibility; make known the appropriate resources and services; assure the prompt accurate submission of data; and promptly notify applicants of eligibility or ineligibility. N.J.A.C. 10:72-2.2 (c) and (d). The CWA must determine eligibility of an application for the aged in 45 days and for blind and disabled applicants within 90 days. N.J.A.C. 10:71-2.3(a); MedComm No.10-09, and 42 CFR 435.91. Medicaid Communication No. 10-09 states:

If additional verifications are needed and the applicant or their representative does not respond to the worker's request after a time period, as specified by the Agency, an additional request for information must be sent informing the applicant of what documentation is still needed in order to determine their eligibility. This letter will also inform the applicant or their representative that if the information is not received within the specified time period from the receipt of the request, the case will be denied.

The Initial Decision in this matter reversed the denial of Petitioner's application. The Administrative Law Judge (ALJ) found that Petitioner complied with the Board's request for additional verification by email dated June 5, 2023.

Here, on April 25, 2023, Petitioner, through their representative, filed a Medicaid application with the Board. In a letter dated May 1, 2023, the Board requested additional information to process the application. The information the Board asked for included a request to verify various financial transactions. After receiving some of the requested

documents, a second letter dated May 24, 2023, was sent by the Board asking Petitioner's representative to provide additional documentation about a Fidelity Investment account ending #8689 check deposit of \$166,195.52 and a Kearney Bank account ending #1015 check deposit of \$13,586.41. The letter noted a deadline of June 7, 2023, after which the application would be denied. On June 5, 2023, Petitioner's attorney submitted additional information to the Board. The Board was satisfied with the verification of the \$13,586.31 deposit because Petitioner's attorney emailed both sides of the deposit check into the Kearney Bank account ending #1015. However, the Board was not satisfied with the explanation of the \$166,195.52 deposit. The information that Petitioner's representative submitted for the \$166,195.52 deposit was a print-out with handwritten notations under an August 17, 2018 withdrawal of \$171,572.46, as follows: VOYA IRA Rollover to Fidelity IRA in the amount of \$166,195.52 and YOYA RMD for \$4,839.25. The print-out alone was not sufficient for the Board because Petitioner's representative did not provide verification of the source of the \$166, 195.52 deposit into the Fidelity Investment account and did not explain the difference of \$4,839.25 on the print-out.

On the basis of the facts set forth above, I conclude that there was ambiguity in the verification of the \$166,195.52. The Board did not explain specifically that they were seeking a copy of the physical check for verification. Although Petitioner's attorney provided other physical checks for verification requested by the Board, Petitioner's attorney only provided the account statement for verification of the \$166,195.52. On June 12, 2023, the Board denied Petitioner's application for failure to provide the requested verifications. Petitioner seems to have been attempting to be responsive in providing the statement, and should have been provided a further opportunity to develop additional evidence of eligibility before final action on his or her application. N.J.A.C. 10:71-2.3(c)2.

Based upon my review of the record and for the reasons set forth herein, I MODIFY the Initial Decision accordingly and RETURN the matter to Middlesex County to allow Petitioner the opportunity to provide sufficient credible evidence to determine eligibility.

THEREFORE, it is on this 11th day of December 2023,

ORDERED:

That the Initial Decision is hereby MODIFIED in accordance with the language set forth above and RETURNED to Middlesex County for a review of Petitioner's eligibility and the issuance of a new outcome letter.



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Jennifer Langer Jacobs, Assistant Commissioner  
Division of Medical Assistance and Health Services