

## State of New Jersey

DEPARTMENT OF HUMAN SERVICES DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES PO Box 712 TRENTON, NJ 08625-0712

SARAH ADELMAN Commissioner

JENNIFER LANGER JACOBS Director

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

J.D.,

PETITIONER,

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ADMINISTRATIVE ACTION FINAL AGENCY DECISION OAL DKT. NO. HMA 04668-20

HUDSON COUNTY DEPARTMENT OF :

FAMILY 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 OAL case file and the documents in evidence. Procedurally, the time period for the Agency Head to file a Final Agency Decision in this matter is March 9, 2023, in accordance with an Order of Extension. The Initial Decision in this matter was received on December 7, 2022.

Based upon my review of the record, I hereby ADOPT the Initial Decision in its entirety and incorporate the same herein by reference. The undisputed evidence in the record indicates that Petitioner's monthly income is \$2,065.57. This amount exceeds the maximum income limit of \$1,468 for a household of one under the NJ Family Care Medicaid

PHILIP D. MURPHY Governor

SHEILA Y. OLIVER Lt. Governor program. There is simply no authority that permits the relaxation or waiver of the income limits in any individual case.

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

THEREFORE, it is on this 14th day of FEBRUARY 2023,

ORDERED:

That the Initial Decision is hereby ADOPTED.

Jennifer Langer Jacobs, Director Division of Medical Assistance and Health Services