



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. Applicants 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 circumstances. 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. 10:71-2.2(c) and (d). CWAs must determine eligibility for Aged cases within forty-five days and Blind and Disabled cases within ninety days N.J.A.C. 10:71-2.3(a) and 42 CFR § 435.912. The timeframe may be extended when documented exceptional circumstances arise preventing the processing of the application within the prescribed time limits. N.J.A.C. 10:71-2.3(c). The regulations do not require that the CWA grant an extension beyond the designated time period when the delay is due to circumstances outside the control of both the applicant and the CWA. At best, an extension is permissible. N.J.A.C. 10:71-2.3; S.D. v. DMAHS and Bergen County Board of Social Services, No. A-5911-10 (App. Div. February 22, 2013).

Here, on August 27, 2021,<sup>1</sup> Petitioner's former counsel and Designated Authorized Representative (DAR)<sup>2</sup> Kevin Cropsey, Esq., filed a Medicaid application on Petitioner's behalf with MCDSS. ID at 3. This was Petitioner's second application for Medicaid benefits. Mr. Cropsey's letter advised that he was including statements for a TD Bank account owned by Petitioner for the period of April 6, 2021 through August 5, 2021 and further advised that

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<sup>1</sup> The application was signed by Mr. Cropsey on August 27, 2021. The application was not marked as received by MCDSS until August 30, 2021. R-1.

<sup>2</sup> I note that the Designation of Authorized Representative Form submitted with Petitioner's August 27, 2021 application was not complete, as Mr. Cropsey's signature was not witnessed. R-1.

he was informed that documentation that was previously submitted in relation to Petitioner's first application would be used for processing the present application. P-1. On October 28, 2021, MCDSS sent a letter to Mr. Cropsey, requesting verification of certain information that was necessary to process the application, including copies of bank statements for one of Petitioner's TD bank accounts for the period of August 6, 2021 through the current date. R-2. The October 28, 2021 letter advised that "IF YOU DO NOT PROVIDE THE FOLLOWING ADDITIONAL INFORMATION BY 11/7/21, YOUR APPLICATION MAY BE DENIED." Ibid. (emphasis in original). On November 9, 2021, MCDSS issued a second letter seeking the verification of the same information requested in the October 28, 2021 letter. R-3. The November 9, 2021 letter advised that "IF YOU DO NOT PROVIDE THE FOLLOWING ADDITIONAL INFORMATION BY 11/19/21, YOUR APPLICATION WILL BE DENIED." Ibid. (emphasis in original).

Through letter dated November 18, 2021, Mr. Cropsey submitted a response, including various requested documents to MCDSS. P-4. In his letter, he stated that Exhibit D contained "copies of account statements from March 20, 2017 through November 5, 2021." Ibid. The Initial Decision provided that the submission included approximately 2,000 pages. ID at 5.

On November 29, 2021, MCDSS denied Petitioner's application due to her failure to provide requested verifications, specifically noting that Petitioner failed to provide bank statements from September 1, 2021 through present. R-4.

Petitioner appealed the denial and after a hearing at the OAL, an Initial Decision was issued, which found that "respondent failed to establish that the DAR omitted the TD bank statements for the account ending . . . for the period of September 1, 2021 through October 1, 2021."<sup>3</sup> On November 22, 2022, the undersigned reversed and remanded the matter for

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<sup>3</sup> The original Initial Decision in this matter also addressed MCDSS's argument that Petitioner's application was also denied due to her being over the income limit to qualify for benefits. However, in a November 22, 2022 Order of Remand, the undersigned found that

further development of the record in relation to the exact statements that MCDSS alleged were not provided prior to the denial being issued. After an opportunity for the MCDSS to address the issue of the outstanding statements and present documentation showing when the statements were received by MCDSS, the present Initial Decision was issued, finding that Petitioner's representatives were responsive to MCDSS's requests for verifications and that "[i]t is possible that the bank statements in question were misplaced by the respondent or used for the third Medicaid application after the bank statements were received and stamped. . . ." I disagree. At issue in this matter is whether Petitioner timely provided copies of her TD Bank statements to MCDSS as requested. At the remand hearing, MCDSS clarified that the TD Bank statements that were not received covered the period of September 1, 2021 through October 5, 2021.<sup>4</sup>

It is Petitioner's burden to prove that the requested bank statements were provided to MCDSS. It is not MCDSS's burden to prove that the statements were not sent by Petitioner. Nevertheless, MCDSS provided date-stamped copies of the outstanding bank statements on remand, as requested. The date-stamped copies show that while the bank statement for the period of October 6, 2021 through November 5, 2021 was received on November 19, 2021, prior to the November 29, 2021 denial, the statements for the periods of August 6, 2021 through September 5, 2021 and September 6, 2021 through October 5, 2021 were received by MCDSS on March 7, 2022, over three months after the November 29, 2021 denial and during the course of Petitioner's third Medicaid application. P-7, R-9, and R-10. Petitioner's

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this issue was not properly before the OAL, and the only issue present was whether Petitioner had provided the requested documentation necessary to determine eligibility.

<sup>4</sup> I note that the bank statements at issue cover the periods of August 6, 2021 through September 5, 2021 and September 6, 2021 through October 5, 2021. R-9 and R-10. However, as noted by counsel for MCDSS at the remand hearing, "MCDSS needed to know what happened on the first day of the first month." ID at 5. Accordingly, while Petitioner's bank statements covered the period from the 6<sup>th</sup> of the first month to the 5<sup>th</sup> of the following month, the pertinent dates at issue in this matter were September 1, 2021 and October 1, 2021 in order to determine Petitioner's account balance as of the first day of the months at issue.


representatives alleged that these statements were provided, but failed to provide credible documentary evidence that shows that these statements were timely provided prior to the denial being issued. Petitioner's representatives alleged that Mr. Cropsey forwarded over 2,000 pages of documentation to MCDSS; however, Petitioner's representatives failed to supply a copy of that documentation, with or without bates stamping, at the underlying hearings in this matter, which may have supported their argument that the documentation was actually submitted to MCDSS. While it may have been an oversight on Mr. Cropsey's office's part to include these statements in his package to MCDSS, there is no evidence in the record that shows that the requested statements were timely provided to MCDSS, as MCDSS did not have these statements until March 2022 in connection with Petitioner's third application for Medicaid benefits. Without these statements, MCDSS was unable to determine Petitioner's eligibility and the denial of her application was appropriate.

Accordingly, for the reasons set forth above, I hereby REVERSE the Initial Decision and FIND that MCDSS's denial of Petitioner's August 2021 application due to her failure to provide requested verifications was appropriate.

THEREFORE, it is on this 17th day of MAY 2023,

ORDERED:

That the Initial Decision is hereby REVERSED.

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