



eligibility determination. On or about March 30, 2023, Petitioner, through his Designated Authorized Representative (DAR) filed a Medicaid application with the CWA. On April 4, 2023, the CWA made an additional request for information necessary to determine Petitioner's eligibility.<sup>1</sup> P-7. The CWA requested Petitioner provide: 1) Wells Fargo bank statements for account ending in #4248 for December 2020 - January 2021; April 2021 - May 2021 and January 2022 - February 2022; 2) direct express statements from May 2018 – September 2020; 3) pre-paid account statements and 4) valid PAS documentation.<sup>2</sup> Ibid. Petitioner was required to respond by April 18, 2023. On May 5, 2023, Petitioner's Medicaid application was denied for failure to provide the requested financial, bank, pre-paid and direct express statements from April 2018 through September 2020 and for his failure to explain withdrawals made from Wells Fargo bank account #4248 on January 4, 2021 for \$2,100, April 5, 2021 for \$3,000 and January 10, 2022 for \$2,000.

The Administrative Law Judge (ALJ) determined that the Petitioner's DAR had "substantially complied with all regulations and directives of the CWA, and that the DAR provided all documentation as soon as same became available." The ALJ further determined that although the Citizens Bank documents were not provided until June 2023 after the denial had been sent, the DAR did provide all documentation in a "timely fashion" to establish eligibility.<sup>3</sup> I disagree. Petitioner failed to provide all of the required documentation to the CWA within the allowable timeframe.

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<sup>1</sup> I note the Initial Decision references April 20, 2023 as an additional date CWA requested information, however, there is nothing in the record that shows that a second request was made by the CWA.

<sup>2</sup> PAS is the acronym for Pre-Admission Screening.

<sup>3</sup> The ALJ erroneously considered Petitioner's submission of Citizens Bank documentation in reaching his decision since these documents had neither provided to or considered by the CWA in its determination to deny Petitioner's Medicaid application for failure to provide the required documentation.

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).

The record contains no documented exceptional circumstance warranting an extension of time or that Petitioner requested additional time to provide the requested information. Petitioner's DAR claims that she was unaware that Petitioner had a Citizens Bank account when the CWA requested additional documentation in its April 2023 request and the additional documentation was provided immediately upon receipt. Here, the May 5, 2023 denial of Medicaid benefits was based on Petitioner's failure to provide all documents requested in the April 4, 2023 request for information. The April 4, 2023


request did not include any information about Petitioner's Citizen Bank account. In fact, the CWA was unaware that Petitioner had a Citizens Bank account until the documents were provided in June 2023, one month after the denial had already been issued. Petitioner's submissions were not provided within the allocated timeframe required by the CWA. Accordingly, I FIND that the CWA correctly denied Petitioner's May 5, 2023 application for failing to provide information necessary to determine eligibility.

Accordingly, for the reasons set forth above, I hereby REVERSE the Initial Decision and FIND that the CWA's denial of Petitioner's May 2023 application for failure to provide requested verifications, was appropriate.

THEREFORE, it is on this 26th day of OCTOBER 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