



State of New Jersey

DEPARTMENT OF HUMAN SERVICES

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

PO Box 712

TRENTON, NJ 08625-0712

CHRIS CHRISTIE
Governor

KIM GUADAGNO
Lt. Governor

JENNIFER VELEZ
Commissioner

VALERIE HARR
Director

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

E.S.,	:	
	:	
PETITIONER,	:	
	:	
v.	:	
	:	ADMINISTRATIVE ACTION
	:	
DIVISION OF MEDICAL ASSISTANCE	:	FINAL AGENCY DECISION
	:	
AND HEALTH SERVICES AND	:	OAL DKT. NO. HMA 11012-14
	:	
HUNTERDON COUNTY BOARD	:	
	:	
OF SOCIAL SERVICES,	:	
	:	
RESPONDENTS.	:	

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, the contents of the OAL case file and Hunterdon County's exceptions to the Initial Decision. Procedurally, the time period for the Agency Head to file a Final Agency Decision is January 15, 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 December 1, 2014.

Based upon my review of the record, I hereby ADOPT the Initial Decision of the Administrative Law Judge with CLARIFICATION.

The Division is statutorily authorized to seek reimbursement of Medicaid overpayments. Indeed, recovery in this matter is based upon N.J.S.A. 30:4D-7.i., which mandates the Division:

To take all necessary action to recover the cost of benefits incorrectly provided to . . . a recipient . . .

However, pursuant to N.J.S.A. 30:4D-7.i., I am authorized to “compromise, waive or settle any claim under this act.” Based upon my review of the record, I agree with the Administrative Law Judge that Petitioner was unaware that she was eligible for Medicaid coverage as evidenced by the fact that she received no benefit or services paid for by Medicaid. As a result, I am reluctant to penalize E.S. under the specific facts presented here and conclude that this is an appropriate case to exercise the authority granted to me by N.J.S.A. 30:4D-7.i. to waive the claim for the overpayment

THEREFORE, it is on this 8th day of January 2015,

ORDERED:

That the Division waive recovery of the claim.



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