

## State of New Jersey

DEPARTMENT OF HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES
P.O. Box 712
Trenton, NJ 08625-0712

ELIZABETH CONNOLLY
Acting Commissioner

MEGHAN DAVEY Director

Governor

CHRIS CHRISTIE

KIM GUADAGNO Lt. Governor

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

C.E.,

PETITIONER,

ADMINISTRATIVE ACTION

ν

**FINAL AGENCY DECISION** 

DIVISION OF MEDICAL ASSISTANCE:

.

OAL DKT. NO. HMA 02528-16

AND HEALTH SERVICES AND

MERCER COUNTY BOARD OF

SOCIAL SERVICES,

RESPONDENTS.

As Director of the Division of Medical Assistance and Health Services, I have reviewed the record in this case, including the Initial Decision, the Settlement Agreement and the documents in evidence. No exceptions were filed. Procedurally, the time period for the Agency Head to file a Final Agency Decision in this matter is July 5, 2016 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 May 19, 2015.

This matter concerns the overpayment assessed due to Petitioner's receipt of incorrectly paid benefits. By way of settlement, Petitioner withdraws the request for a fair hearing and will make monthly repayment.

By Initial Decision dated May 18, 2016, the ALJ approved the Settlement Agreement because it was consistent with the law, fully disposed of all issues in controversy and was voluntarily entered into by both parties, in accordance with N.J.A.C. 1:1-19.1.

Based on my review of the record, I concur with the ALJ's findings. Thus, I hereby ADOPT the Settlement Agreement.

THEREFORE, it is on this day of JUNE 2016,

ORDERED:

That the Initial Decision approving the Settlement Agreement is hereby ADOPTED.

Meghan-Davey, Director

Division of Medical Assistance

and Health Services