

## State of New Hersey

DEPARTMENT OF HUMAN SERVICES DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES P.O. Box 712

CHRIS CHRISTIE Governor

Trenton, NJ 08625-0712

ELIZABETH CONNOLLY Acting Commissioner

KIM GUADAGNO Lt. Governor

MEGHAN DAVEY Director

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

 H.D., :	
PETITIONER,	ADMINISTRATIVE ACTION
V	FINAL AGENCY DECISION
DIVISION OF MEDICAL ASSISTANCE:	OAL DKT. NO. HMA 01709-16
AND HEALTH SERVICES AND :	
 CAMDEN 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 and the documents in evidence. Neither party filed exceptions. Procedurally, the time period for the Agency Head to file a Final Agency Decision in this matter is October 31, 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 the agency's receipt. The Initial Decision in this matter was received on September 15, 2016.

This matter concerns the September 24, 2016 denial of Petitioner's application due to the failure to provide financial verifications. The only issue presented here is whether Petitioner provided the necessary verification for Camden County to make an eligibility determination. The credible evidence in the record demonstrates that Petitioner failed to provide the needed information prior to the September 24, 2016 denial of benefits. Without this information, the County was unable to complete its eligibility determination and the denial was appropriate.

Based on my review of the record, I concur with the ALJ's findings and

hereby ADOPT the Initial Decision.

THEREFORE, it is on this H' day of OCTOBER 2016

ORDERED:

That the Initial Decision is hereby ADOPTED.

Megh<del>an</del> Davey, Director

Division of Medical Assistance

and Health Services