

## 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

KIM GUADAGNO
Lt. Governor

CHRIS CHRISTIE

Governor

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

E.K.,

PETITIONER,

**ADMINISTRATIVE ACTION** 

FINAL AGENCY DECISION

OAL DKT. NO. HMA 09862-17

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DIVISION OF MEDICAL ASSISTANCE

AND HEALTH SERVICES AND

SOUTHERN REGIONAL COMMUNITY

CHOICE OPTIONS OFFICE.

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 and the contents of the OAL case file. Neither Party filed exceptions to the Initial Decision. Procedurally, the time period for the Agency Head to render a Final Agency Decision is November 30, 2017 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 was received on October 16, 2017.

Based upon my review of the record, I hereby ADOPT the findings, conclusions and recommended decision of the Administrative Law Judge in their entirety and incorporate the same herein by reference. I agree with the Administrative Law Judge that the credible evidence in this record establishes that Petitioner does not satisfy the clinical eligibility criteria necessary to qualify for nursing facility level of care pursuant to N.J.A.C. 8:85-2.1 and 2.2. Petitioner presented no evidence to contradict this determination.

THEREFORE, it is on this May of NOVEMBER 2017,

## ORDERED:

That the Initial Decision affirming the denial of clinical eligibility for nursing home placement is hereby ADOPTED as the Final Decision in this matter.

Meghan Davey, Director

Division of Medical Assistance

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and Health Services