



*State of New Jersey*

DEPARTMENT OF HUMAN SERVICES  
DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

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CHRIS CHRISTIE  
*Governor*

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**

E.S.,

PETITIONER,

v.

DIVISION OF MEDICAL ASSISTANCE

AND HEALTH SERVICES AND

BERGEN COUNTY BOARD OF

SOCIAL SERVICES,

RESPONDENTS.

**ADMINISTRATIVE ACTION**

**FINAL AGENCY DECISION**

**OAL DKT. NO. HMA 11683-17**

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 January 8, 2018 in accordance with an Order of Extension. The Initial Decision in this matter was received on October 10, 2017. Based upon my review of the

record, I hereby ADOPT the Administrative Law Judge's recommended decision in its entirety.

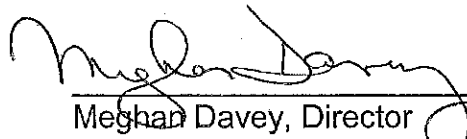
Participation in the Medicaid program will be denied if the resources of an individual exceed \$2000 as of the first moment of the first day of the month. See N.J.A.C. 10:71-4.5. Here, Petitioner's application was filed on June 12, 2017. As of July 28, 2017, the Bergen County Board of Social Services (BCBSS) was unable to find Petitioner eligible for Medicaid since an initial review showed Petitioner had resources totaling \$13,815.97. Thereafter, a review of additional information resulted in a finding of eligibility effective August 1, 2017. Petitioner's representative acknowledged receipt of eligibility but sought reimbursement of out of pocket medical expenses incurred after August 1, 2017.

Petitioner does not dispute the effective date of eligibility. BCBSS cannot reimburse Petitioner for out of pocket medical expenses. BCBSS has provided Petitioner with the information necessary to file a claim for reimbursement.

THEREFORE, it is on this *7th* day of DECEMBER 2017,

ORDERED:

That the ALJ's determination that Petitioner's appeal of the denial of Medicaid eligibility is moot is hereby ADOPTED.

  
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Meghan Davey, Director  
Division of Medical Assistance  
and Health Services