



State of New Jersey

DEPARTMENT OF HUMAN SERVICES

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

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PHILIP D. MURPHY
Governor

SHEILA Y. OLIVER
Lt. Governor

CAROLE JOHNSON
Acting Commissioner

MEGHAN DAVEY
Director

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

B.J.P.,	:	
	:	
PETITIONER,	:	ADMINISTRATIVE ACTION
	:	
v.	:	FINAL AGENCY DECISION
	:	
HUDSON COUNTY DEPARTMENT	:	OAL DKT. NO. HMA 18593-17
	:	
OF FAMILY SERVICES	:	
	:	
RESPONDENT.	:	

As Director of the Division of Medical Assistance and Health Services, I have reviewed the record in this case, including the OAL case file and the Initial Decision approving the Settlement Agreement reached by the parties. Procedurally, the time period for the Agency Head to file a Final Decision is March 12, 2018, 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 January 25, 2018.

This matter arises from Hudson County Department of Family Services' denial of Petitioner's Medicaid eligibility based on Petitioner's failure to provide required documentation. The parties entered into a settlement on the record whereby Hudson agreed to evaluate her eligibility for Medicaid. By Initial Decision dated January 22, 2017, 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. 1:11-19.1.

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

THEREFORE, it is on this *16th* day of FEBRUARY 2018,

ORDERED:

That the Initial Decision affirming the Settlement Agreement in this matter is hereby ADOPTED.



Meghan Davey, Director
Division of Medical Assistance
and Health Services
