



# State of New Jersey

DEPARTMENT OF HUMAN SERVICES

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

PO Box 712

TRENTON, NJ 08625-0712

PHILIP D. MURPHY  
Governor

SHEILA Y. OLIVER  
Lt. Governor

CAROLE JOHNSON  
Commissioner

MEGHAN DAVEY  
Director

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

D.W.,	:	
	:	
PETITIONER,	:	<b>ADMINISTRATIVE ACTION</b>
	:	
v.	:	<b>FINAL AGENCY DECISION</b>
	:	
DIVISION OF MEDICAL ASSISTANCE	:	<b>OAL DKT. NO. HMA 05601-2018</b>
	:	
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 OAL case file and the documents filed below. Procedurally, the time period for the Agency Head to file a Final Decision is July 23, 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 June 7, 2018.

The matter arises regarding the denial of Petitioner's application for Medicaid benefits. Petitioner did not contest that she receives a monthly benefit of \$1,117 from Social Security. Nor did she contest that the income from Social Security exceeds the

standard for Medicaid under the Affordable Care Act. Instead, Petitioner requests that she be given eligibility in order to help with her medical expenses.

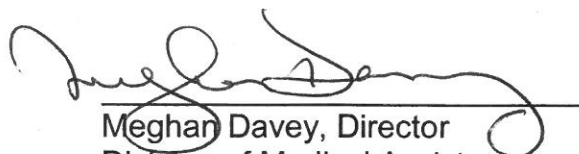
As indicated in the Initial Decision, eligibility for the NJ FamilyCare aged, blind and disabled persons “is based on 100 percent of the poverty income guidelines as defined by the U.S. Department of Health and Human Services.” N.J.A.C. 10:72-4.1(a). The 2018 annual federal poverty income guideline for a household of one is \$12,140 per year, or \$1,012 per month. The Initial Decision held that Petitioner’s income exceeded the federal poverty guideline and was properly applied to the standard and that benefits were correctly denied by Mercer County.

Based on my review of the record, I concur with the Initial Decision. If Petitioner’s income changes, she may reapply for benefits.

THEREFORE, it is on this <sup>27<sup>th</sup></sup> day of JUNE 2018,

ORDERED:

That the Initial Decision is hereby ADOPTED.

  
Meghan Davey, Director  
Division of Medical Assistance  
and Health Services