



State of New Jersey
Department of Human Services
Division of Medical Assistance and Health Services
P.O. BOX 712
TRENTON NJ 08625-0712

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

H.R.,	:	
	:	
PETITIONER,	:	ADMINISTRATIVE ACTION
	:	
v.	:	FINAL AGENCY DECISION
	:	
DIVISION OF MEDICAL ASSISTANCE :	:	OAL DKT. NO. HMA 7011-2017
	:	
AND HEALTH SERVICES AND	:	
	:	
ATLANTIC COUNTY BOARD OF	:	
	:	
SOCIAL SERVICES,	:	
	:	
RESPONDENTS.	:	

As Director of the Division of Medical Assistance and Health Services, I have reviewed the record in this matter, consisting of the case file, the documents in evidence and the Initial Decision. Petitioner and Respondent filed exceptions. Procedurally, the time period for the Agency Head to file a Final Agency Decision is January 29, 2017 pursuant to an Order of Extension.

This matter concerns Petitioner's application for benefits. Petitioner has since died so his estate is pursuing the matter. At issue is the second application filed by Petitioner, through his guardian. The first application was denied as of February 1,

2017 and was not appealed.¹ It was transmitted to the OAL and is not subject to review. The second application was denied as of April 27, 2017 as over the resource standard. That denial was appealed.

Petitioner claims that his second application should not have been denied as he was unable to access his resources. However, “[r]esource eligibility is determined as of the first moment of the first day of the month.” N.J.A.C. 10:71-4.5(a)(1); see also N.J.A.C. 10:71-4.1(e). At the time of that March 2017 application, Petitioner had a guardian who had authority to access Petitioner’s assets. As such, I concur with the Initial Decision that Petitioner’s assets, including the bank accounts that exceeded \$7,000 and real estate, were correctly applied to the Medicaid standard and Atlantic County correctly found him ineligible for benefits.

Congress provided that retroactive benefits are available when the applicant would have been financially eligible in any of the three months prior to the application. See N.J.A.C. 10:49-2.9(b) and 42 U.S.C. § 1396a(a)(34). It is not clear if Petitioner’s application was reviewed for retroactive benefits as he did not acknowledge unpaid medical bills on the March 2017 application. Thus, I am returning the matter to Atlantic County to determine if Petitioner was eligible for retroactive benefits.

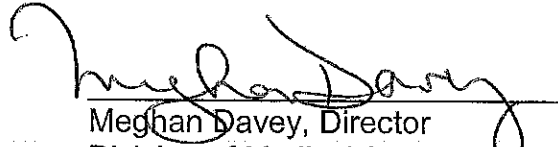
¹ Petitioner’s guardian stated that she could not file for a fair hearing on this application as she did not have the Letters of Guardianship. ID at 10. However, those letters were issued February 23, 2017, which would have permitted her to file within 20 days from the February 6, 2017 denial notice.

THEREFORE, it is on this *24th* day of JANUARY 2018,

ORDERED:

That the Initial Decision is hereby ADOPTED as to the finding that Petitioner is not eligible for benefits in March 2017; and

That the matter is RETURNED to Atlantic County to determine if Petitioner was eligible for any of the three months comprising the retroactive period.


Meghan Davey, Director
Division of Medical Assistance
and Health Services