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Lt. Governor

DEPARTMENT OF HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES
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CAROLE JOHNSON Commissioner

MEGHAN DAVEY Director

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

J.R.

PETITIONER,

V.

DIVISION OF MEDICAL ASSISTANCE
AND HEALTH SERVICES AND
OCEAN COUNTY BOARD OF
SOCIAL SERVICES.

RESPONDENTS.

ADMINISTRATIVE ACTION
FINAL AGENCY DECISION
OAL DKT. NO. HMA 06220-17

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 Respondent's exceptions. Procedurally the time period for the Agency Head to file a Final Agency Decision in this matter is April 23 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 in this matter was received on March 9, 2018.

This matter arises from the Ocean County Board of Social Services (OCBSS) April 12, 2017 letter denying Petitioner's application for failure to timely provide information necessary to determine eligibility and excess resources. The only issue presented here is whether Petitioner timely provided the necessary verification for OCBSS to make an eligibility determination. The issue of a spousal waiver was not transmitted to the Office of Administrative Law (OAL) and is not properly before the court.

On January 12, 2017, Petitioner filed an application for Medicaid benefits with OCBSS. On January 12, 2017, February 2, 2017 and March 16, 2017, OCBSS requested information from Petitioner in connection with his application. The information requested, specifically information regarding Petitioner's spouse, was not provided and on April 12, 2017, Petitioner's application for Medicaid was denied for failure to provide the outstanding information.

County Welfare Agencies (CWAs) must determine eligibility for Aged cases within 45 days and Blind and Disabled cases within 90 days. N.J.A.C. 10:71-2.3(a); MedCom No. 10-09, and Fed. Reg. 42 CFR 435.91. The time frame may be extended when "documented exceptional circumstances arise" preventing the processing of the application within the prescribed time limits. N.J.A.C. 10:71-2.3(c). The regulation does not require BCBSS to grant an extension beyond the designated time period. At best, an extension is permissible. N.J.A.C. 10:71-2.3; S.D. vs. DMAHS and Bergen County Board of Social Services, No. A-5911-10 (App. Div. February 22, 2013).

At some point during the application process, OCBSS became aware that Petitioner was estranged from his wife and daughter. Neither Petitioner nor OCBSS was able to successfully contact these individuals. Apparently, Petitioner's strained familial relationships are the result of some sort of domestic violence as evidenced by his wife's statements and the fact that Petitioner's daughter had a protective order against him.

Issues of domestic violence are exceptional circumstances which would permit additional time to process a Medicaid application. Petitioner should have been allotted more time to provide his estranged spouse's contact information. Thus, I FIND that OCBSS should process Petitioner's January 12, 2017 application to determine if he was eligible for Medicaid benefits. This Final Agency Decision should not be construed as making any findings regarding Petitioner's eligibility.

THEREFORE, it is on this 19

day of APRIL 2018,

ORDERED:

That the Initial Decision is hereby REVERSED with regard to the determination that OCBSS should grant a spousal waiver to the Petitioner; and

That the matter is hereby RETURNED to OCBSS for a determination regarding Petitioner's eligibility in accordance with this Final Agency Decision.

Meghan Davey, Director

Division of Medical Assistance

and Health Services