

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

J.W.,

PETITIONER,	:	ADMINISTRATIVE ACTION
ν.		FINAL AGENCY DECISION
DIVISION OF MEDICAL ASSISTANCE	:	OAL DKT. NO. HMA 00652-2018
AND HEALTH SERVICES AND	:	
BURLINGTON COUNTY BOARD	:	
OF SOCIAL SERVICES,	:	
RESPONDENTS.	:	

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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. No exceptions were filed. Procedurally, the time period for the Agency Head to file a Final Decision is April 27, 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 March 13, 2018.

This matter arises from the termination of Petitioner's Medicaid eligibility effective December 31, 2017 by Respondent Burlington County due to Petitioner's failure to complete a redetermination application. The parties entered into a settlement whereby Burlington County agreed to grant Petitioner Medicaid benefits effective January 1, 2018. By Initial Decision dated March 8, 2018, 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  $\sqrt{7}$  day of APRIL 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