

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 Commissioner

Meghan Davey Director

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

K.C.H.,

PETITIONER,

۷.

OCEAN COUNTY BOARD OF SOCIAL SERVICES,

RESPONDENT.

ADMINISTRATIVE ACTION FINAL AGENCY DECISION OAL DKT. NO. HMA 18596-17

As Director of the Division of Medical Assistance and Health Services, I have reviewed the record in this matter, consisting of the Initial Decision, the documents in evidence, and the entire contents of the OAL case file. Neither Petitioner nor Respondent filed exceptions to the Initial Decision. Procedurally, the time period for the Agency Head to render a Final Agency Decision is May 14, 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 the agency's receipt.. The Initial Decision in this case was received on March 29, 2018.

:

Based upon my review of the record, I hereby adopt the findings and conclusions of the Administrative Law Judge in their entirety and I incorporate the same herein by reference. This matter arises from the Ocean County Board of Social Services' (OCBSS) determination that Petitioner was eligible for Medicaid benefits effective September 1, 2016 with retroactive eligibility for the preceding June, July and August. At issue is whether Petitioner's Medicaid eligibility should be granted retroactively beginning May 1, 2016.

The evidence in the record shows that Petitioner, through her representative at Future Care Consultants, submitted a new application for Medicaid on September 6, 2016 and that Petitioner was granted eligibility effective September 1, 2016 with retroactive benefits beginning June 1, 2016. Petitioner has not provided any evidence to support an earlier date of eligibility. Instead, Petitioner's representative argues that OCBSS should not have rejected her previously submitted application despite the fact that she utilized the incorrect form and that the form contained whited out sections of information. To that point, Petitioner also argues that OCBSS should have provided her with appeal rights when they notified her that the August 2016 application contained administrative errors and was improperly submitted.

In August 2016, Petitioner's representative submitted an invalid Medicaid application to OCBSS in violation of <u>N.J.A.C.</u> 10:71-1.63 which requires Medicaid applicants to use the appropriate form. OCBSS notified Petitioner's representative and provided said representative with a new application and the previously submitted materials. This was not a denial, termination or failure to act by OCBSS, and therefore, does not warrant a determination notice or appeal rights. Furthermore, Petitioner's representatives had notice of OCBSS' rejection as early as April 30, 2016, yet made no

attempt to address the so called determination. Instead, Petitioner's representative waited until over a year later when she received the July 2017 eligibility notice.

Petitioner provided no evidence that the September 1, 2016 effective date of eligibility, and three months retroactive eligibility, determined in connection with Petitioner's September 6, 2016 Medicaid application were improper.

THEREFORE, it is on this Hay of MAY 2018,

ORDERED:

That the Initial Decision is hereby ADOPTED.

Meghan Davey, Director Division of Medical Assistance and Health Services