

State of New Jersey

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Governor

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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

M.A.,

PETITIONER,

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AND HEALTH SERVICES AND
HUDSON COUNTY BOARD OF
SOCIAL SERVICES.

RESPONDENTS.

ADMINISTRATIVE ACTION
FINAL AGENCY DECISION

OAL DKT. NO. HMA 03694-18

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, the contents of the OAL case file. Neither party filed exceptions to the Initial Decision. Procedurally, the time period for the Agency Head to render a Final Agency Decision in this matter is August 13, 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 matter was received on June 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. At issue is Petitioner's resource eligibility for Medicaid benefits due to her access to a jointly held bank account with her daughter. As of January 2018, the account balance totaled \$57,512.05, which exceeds the resource standard of \$4,000 for an individual and \$6,000 for a couple. The ALJ concluded that the Petitioner had unrestricted access to the joint bank account she held with her daughter, and therefore, was properly denied Medicaid eligibility.

THEREFORE, it is on this day of AUGUST 2018,

ORDERED:

That the recommended decision affirming the denial of Medicaid eligibility is hereby ADOPTED.

Meghan Davey, Director Davey

Division of Medical Assistance

and Health Services