



State of New Jersey

DEPARTMENT OF HUMAN SERVICES

DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES

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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

T.B.,

PETITIONER,

v.

DIVISION OF MEDICAL ASSISTANCE

AND HEALTH SERVICES AND

OCEAN COUNTY BOARD OF

SOCIAL SERVICES,

RESPONDENTS.

Vertical line of dots separating the case name from the case details

ADMINISTRATIVE ACTION

FINAL AGENCY DECISION

OAL DKT. NO. HMA 5604-2018

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 the documents filed below. Neither party filed exceptions in this matter. Procedurally, the time period for the Agency Head to file a Final Agency Decision in this matter is October 15, 2018 in accordance with an Order of Extension.

The matter arises regarding the recovery of \$43,741.45 in incorrectly paid benefits. Petitioner and her children received Medicaid benefits from December 2009 through October 2016. However, in January 2014, Petitioner lost custody of her children who went to reside with their father. Petitioner continued to represent that her children resided with

her in two subsequent Medicaid redeterminations. As a result Ocean County Board of Social Services terminated her Medicaid benefits on October 31, 2016.

Based upon my review of the record, I hereby ADOPT the Administrative Law Judge's recommended decision concluding that the Ocean County Board of Social Services was authorized to seek reimbursement of the incorrectly paid benefits pursuant to N.J.S.A. 30:4D-7.i during the time period Petitioner was over income. The recitation of facts show that Petitioner consistently represented that her children lived with her and were part of her household.

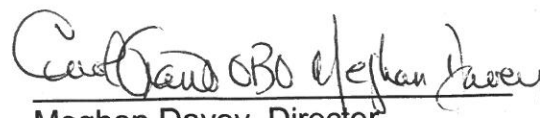
If Petitioner had applied without her children, Petitioner's income during the time in question exceeded the Medicaid standard as a single adult except for the months of July 2014, July 2015 and January 2016. The overpayment of \$7,778.76 includes the Medicaid payments for July 2014 and July 2015. R-7. There were no Medicaid payments for January 2016 included in the overpayment. Thus, I hereby reduce the overpayment amount for Petitioner by those two months or \$7,225.14 and the total overpayment is reduced to \$43,187.83. Ocean County shall enter into a payment plan with Petitioner for this amount.

THEREFORE, it is on this 12<sup>th</sup> day of OCTOBER 2018,

ORDERED:

That the Initial Decision is hereby ADOPTED in part in that Petitioner's incorrectly paid benefits are subject to recoupment;

That the Initial Decision regarding the amount is MODIFIED as set forth above.

  
Meghan Davey, Director  
Division of Medical Assistance  
and Health Services