



received by December 24, 2018. Thereafter, the Administrative Law Judge (ALJ) determined Petitioner had good cause to refuse her Social Security benefits and was income eligible for Medicaid benefits. Based on my review of the record, I hereby ADOPT in part and REVERSE in part the findings and conclusions of the ALJ.

The March 23, 2019 notice found Petitioner ineligible for Medicaid because she was over the income limit for the Aged, Blind and Disabled (ABD) program and because she failed to provide information necessary to determine eligibility. With regard to the latter, both the County Welfare Agency (CWA) and the applicant have responsibilities with regard to the application process. N.J.A.C. 10:71-2.2. The CWA, here MCBSS, exercises direct responsibility in the application process to inform applicants about the process, eligibility requirements and their right to a fair hearing; receive applications; assist applicants in exploring their eligibility; make known the appropriate resources and services; assure the prompt accurate submission of data; and promptly notify applicants of eligibility or ineligibility. N.J.A.C. 10:71-2.2(c) and (d). Applicants must provide the CWA with verification requested. N.J.A.C. 10:71-2.2 (e). I recognize that Petitioner's failure to timely provide an adequate response to MCBSS' request for information would be sufficient to deny Petitioner's Medicaid application. However, the record here does not support a finding that MCBSS requested the verifications at issue, by what date the information was due, or that Petitioner provided the requested information. Neither Petitioner's motion for summary decision nor Respondent's reply satisfactorily addresses this issue.

The second issue before the court concerns Petitioner's income and whether or not she had good cause for not obtaining the Social Security benefits to which she was entitled. Pursuant to 42 C.F.R. §435.608, states "must require applicants and beneficiaries to take all necessary steps to obtain any annuities, pensions, retirements, and disability benefits to which they are entitled, unless they can show good cause for not doing so." 42 C.F.R. §435.608(a). I agree with the ALJ that Petitioner demonstrated good cause for not obtaining her Social Security Disability (SSD) benefits. The record shows that Petitioner

attempted to avail herself of the highest amount of benefits available to her without penalty. Consequently, she intentionally returned previous SSD benefits received and refused to reapply for SSD benefits because receipt of said benefits would have required her to repay more than \$30,000 in temporary disability insurance benefits received through her union, in addition to other costs. However, while Petitioner may have had good cause to refuse her SSD benefits, this is not in and of itself determinative of Petitioner's Medicaid eligibility.

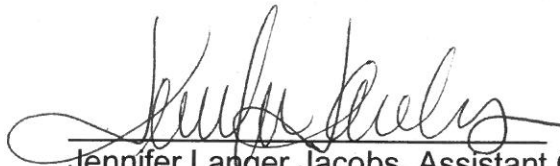
THEREFORE, it is on this <sup>14<sup>th</sup></sup> day of DECEMBER 2019,

ORDERED:

That the Initial Decision is hereby ADOPTED with regard to the finding that Petitioner showed good cause for not obtaining her SSD benefits; and

That the Initial Decision is hereby REVERSED with regard to any findings or conclusions concerning Petitioner's Medicaid eligibility pursuant to the March 23, 2019 notice; and

That the matter is RETURNED to MCBSS to determine Petitioner's eligibility for Medicaid in connection with the application denied in the March 23, 2019 notice. This Final Agency Decision should not be construed as making any findings regarding Petitioner's eligibility.



Jennifer Langer Jacobs, Assistant Commissioner  
Division of Medical Assistance  
and Health Services