

PHILIP D. MURPHY
Governor

SHEILA Y. OLIVER
Lt. Governor

DEPARTMENT OF HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES
PO Box 712
TRENTON, NJ 08625-0712

CAROLE JOHNSON Commissioner

JENNIFER LANGER JACOBS
Assistant Commissioner

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

G.Z.

PETITIONER,

ADMINISTRATIVE ACTION

FINAL AGENCY DECISION

OAL DKT. NO. HMA 00770-20

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BERGEN COUNTY BOARD OF SOCIAL SERVICES

RESPONDENTS.

As the Assistant Commissioner for 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 contents of the OAL case file. No exceptions were filed. Procedurally, the time period for the Agency Head to file a Final Decision is May 25, 2020 in accordance with and Order of Extension. The Initial Decision was received on February 20, 2020.

This matter arises from the Bergen County Board of Social Services' (BCBSS)

December 19, 2019 termination of Petitioner's Medicaid benefits for failure to provide verifications. At the hearing on February 13, 2020, the Petitioner agreed to withdraw his fair

hearing request and reapply for Medicaid benefits. BCBSS agreed to process the application and issue a new determination. By Initial Decision dated February 19, 2020, the ALJ concluded that these matters are no longer contested cases before the Office of Administrative Law and ordered that the matters be dismissed. I concur with the ALJ's conclusion.

THEREFORE, it is on this Hay of MAY 2020,

ORDERED:

That the Initial Decision is hereby ADOPTED.

Jennifer Langer Jacobs, Assistant Commissioner

Division of Medical Assistance

and Health Services