



State of New Jersey

DEPARTMENT OF HUMAN SERVICES
DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES
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Assistant Commissioner

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

A.C.,

PETITIONER,

v.

UNION COUNTY BOARD OF

SOCIAL SERVICES,

RESPONDENTS.

ADMINISTRATIVE ACTION

FINAL AGENCY DECISION

OAL DKT. NO. HMA 06808-21
HMA 06814-21

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 8, 2022 in accordance with an Order of Extension. The Initial Decision was received on February 7, 2022.

Based upon my review of the record, I hereby ADOPT the Initial Decision in its entirety and incorporate the same herein by reference. This matter arises from the Union County Board of Social Services' (UCBSS) July 20, 2020 denial of Petitioner's first Medicaid

application for failure to provide verifications, and its subsequent July 19, 2021 determination of eligibility with regard to Petitioner's second Medicaid application. These issues were transmitted to the Office of Administrative Law (OAL) on August 26, 2020 and August 13, 2021 respectively, were consolidated and heard on December 21, 2021.

The first issue presented here is whether UCBSS correctly denied Petitioner's first Medicaid application for failure to provide verification necessary to determine eligibility. Petitioner filed her first Medicaid application in October 2019. It is undisputed that Petitioner failed to provide to UCBSS the information it requested before the July 20, 2020 denial. Specifically at issue was the verification of the source of a \$51,193 deposit. Without this information, UCBSS was unable to complete its eligibility determination and the denial was appropriate.

The second issue presented here concerns the effective date of eligibility with regard to Petitioner's second Medicaid application. Approximately six months after the above referenced denial, on January 22, 2021, Petitioner filed a second Medicaid application with UCBSS. On February 22, 2021 and March 29, 2021, UCBSS requested verifications necessary to determine eligibility, this time in connection with the sale of property. Petitioner was able to provide all the necessary verifications and on July 19, 2021, UCBSS found Petitioner eligible January 1, 2021 but with a penalty of 65 days for the transfer of \$23,787.24. Petitioner argues that she is entitled to retroactive benefits effective June 1, 2021 because her attorney was not able to reach UCBSS to discuss the denial of the first application, which delayed the filing of her second application.

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. Applicants must complete any forms required by the CWA; assist the CWA in securing evidence that corroborates his or her statements; and promptly report any change affecting his or her circumstance. N.J.A.C. 10:71-2.2(e). UCBSS as the County Welfare Agency (CWA) 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 and accurate submission of data; and promptly notify applicants of eligibility or ineligibility. N.J.A.C. 10:71-2.2(c) and (d). CWAs must determine eligibility for Aged cases within 45 days and Blind and Disabled cases within 90 days. N.J.A.C. 10:71-2.3(a); MedCom No. 10-09, and Fed. Reg. 42 CFR 435.91. However, the time frame may be extended when “documented exceptional circumstances arise” preventing the processing of the application within the prescribed time limits. N.J.A.C. 10:71-2.3(c). The regulation does not require UCBSS to grant an extension beyond the designated time period when the delay is due to circumstances outside the control of both the applicant and the CWA. At best, an extension is permissible. N.J.A.C. 10:71-2.3; S.D. vs. DMAHS and Bergen County Board of Social Services, No. A-5911-10 (App. Div. February 22, 2013).

Petitioner argues that her eligibility date was negatively impacted by the delay in processing her first application. UCBSS denied Petitioner's first application due to her failure to provide information necessary to determine eligibility, including the source of the \$51,193 deposit. Although the Petitioner does not dispute that she was given ample time and opportunity to produce the requested information, her representative argues that this information was not readily available to the family. (Pt. Reply Brief p. 2). Consequently, the impetus for their communications with the UCBSS was to seek out alternative forms of verification for this deposit. (Pt. Reply Brief p. 2). However, the record contains no specific requests to this effect. Additionally, the emails provided do not show outreach to UCBSS until September 2020, 45 days after the denial was issued. At this point, asking UCBSS to reopen and reconsider based on alternative documentation would be tantamount to asking for an extension of time to provide the requested documentation or some alternate form thereof. Petitioner has not presented any evidence of exceptional circumstances to warrant additional time to process the application.

Petitioner also argues that her eligibility date was negatively impacted by UCBSS'

disinclination to respond to requests to negotiate alternative verifications pending the fair hearing of her first Medicaid application. Petitioner's application was denied in July 20, 2020. On August 11, 2020, her attorney requested a fair hearing. On August 26, 2020, the matter was transmitted to the office of administrative law. At all times relevant to these applications and proceedings, Petitioner was represented by a firm specializing in Medicaid and estate planning. Counsel argues that had it not waited for UCBSS to respond to its September 2020 emails, it could and would have filed a new Medicaid application as early as September 2020. Yet, Petitioner's counsel knew as early as July 20, 2020 that she had been found ineligible, and could have immediately filed a new application, just as counsel immediately requested a fair hearing in response to the denial. Nothing, including UCBSS' response, precluded Petitioner from filing a new Medicaid application when she was denied in July 2020.

THEREFORE, it is on this 5th day of APRIL 2022,

ORDERED:

That the Initial Decision is hereby ADOPTED.



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