

The matter arises regarding the denial of Petitioner's August 2021 application for Medicaid. It appears that Petitioner is seeking Medicaid benefits to cover services she received at Jersey Shore Medical Center for an admission on May 7, 2021. Petitioner does not meet the citizenship requirements to qualify for Medicaid and CBIZ KA Consulting Services, who is Petitioner's Designate Authorized Representative (DAR), is seeking to have Petitioner's hospital bills paid by Medicaid under the rules that permit individuals who are either subject to the five year waiting period for qualified aliens or who are not qualified aliens be covered for an emergency medical condition. This requires that these individuals meet all other Medicaid requirements but for their alien status.

The federal law permits federal payments to states for medical assistance provided to aliens who are not lawfully admitted to the United States for permanent residence ("undocumented aliens") when the services are "necessary for the treatment of an emergency medical condition of the alien." 42 U.S.C. § 1396(v). The federal regulation implementing 42 U.S.C. § 1396(v) similarly provides that federal funding is available to states for medical services rendered to undocumented aliens that are "necessary to treat an emergency medical condition." 42 CFR § 440.255(a). However, those individuals must meet all other requirements for Medicaid. N.J.A.C. 10:49-2.19

The hearing discussed Petitioner's application which was filed when the process for applying for coverage under Emergency Services for Aliens was undergoing a change. ID at 3-4. The only issue here is whether Petitioner could have an eligibility segment opened to permit hospital claims to be processed. The payment of claims due to the hospital is a separate determination by Medicaid's fiscal intermediary and would create separate appeal rights. See N.J.A.C. 10:49-5.4 and N.J.A.C. 10:49-7.1. As such, the

determination of eligibility does not guarantee payment of all the claims. N.J.A.C.10:49-2.10.

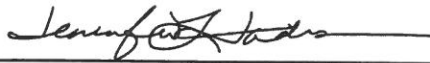
Based on the facts of this case including the deadline that Monmouth set for provision of additional information needed to process the application and the timing of the change in the application process, I agree with the Initial Decision's findings the denial was not appropriate. To that end Monmouth County should continue to process the application.

THEREFORE, it is on this ^{24th} day of MAY 2022,

ORDERED:

That the Initial Decision is hereby ADOPTED as set for the above; and

That matter is hereby RETURNED to Monmouth County to continue processing the case for determination.



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