



necessary to determine eligibility. Based upon my review of the record, I hereby ADOPT the Initial Decision in its entirety and incorporate the same herein by reference.

The issue presented here is whether Petitioner provided the necessary verifications for the CCBSS to make an eligibility determination. On November 30, 2021, Petitioner, through her attorney, filed a Medicaid application with CCBSS. On March 10, 2022, CCBSS issued a request for verifications necessary to determine Petitioner's eligibility. On that same day, CCBSS reached out to Petitioner's attorney instructing him to complete the enclosed application for Medicaid benefits. Accordingly, on March 22, 2022, Petitioner's attorney submitted a new application with CCBSS. On April 7, 2022, the application was denied.

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 CCBSS 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 filed two Medicaid applications on November 30, 2021 and then on March 22, 2022. The November 2021 application is the only one in the record. According to CCBSS, this application was denied for failure to provide information and that is why it instructed Petitioner to file a new application. However, there is no copy of the denial letter in the record. Therefore, there is no way of knowing when the November 2021 application was denied, or if the pending letter was sent in connection with that application? Moreover, if the November 2021 application was denied prior to the March 10, 2022 request for information, the March 10<sup>th</sup> letter would not relate to Petitioner's first application. Furthermore, if Petitioner's second application was not filed until March 22, 2022, the March

10<sup>th</sup> letter would not relate to Petitioner's second application. Another request for information would have to be sent to Petitioner before the denial for failure to provide would be appropriate in connection with the March Medicaid application.

Therefore, I am REMANDING the matter to the OAL for a copy of the denial letter issued with respect to the Petitioner's November 2021 Medicaid application and a copy of the March 2022 Medicaid application.

THEREFORE, it is on this 9th day of SEPTEMBER 2022,

ORDERED:

That the Initial Decision is hereby REVERSED and REMANDED.



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