



State of New Jersey
OFFICE OF ADMINISTRATIVE LAW

INITIAL DECISION

OAL DKT. NO. HMA 09624-2024

G.M.

Petitioner,

v.

Sussex County Board of
Social Services

Respondent.

Medicaid Only

Failure to Verify Eligibility Appeal

N.J.A.C. 10:71-2.2 and -2.3

STATEMENT OF THE CASE

Respondent denied petitioner's Medicaid Only application for failure to provide the following evidence of eligibility under N.J.A.C. 10:71-2.2(e):

Medical history; complete financial history - G.M. has seven bank accounts;

a fully executed designated authorized representative form; billing ledger from Chelsea;

life insurance information; credit card statements; title and car insurance information;

supporting documentation for the large expenditures from bank accounts; 401K, stocks and bond information;

FINDINGS OF FACT AND CONCLUSIONS OF LAW

I.

- ☒ I **FIND** that petitioner or petitioner's representative is **AUTHORIZED** to pursue this appeal; therefore, I **CONCLUDE** that standing is established.
- ☐ I **FIND** that petitioner or petitioner's representative is **NOT AUTHORIZED** to pursue this appeal; therefore, I **CONCLUDE** that standing is not been established.

II.

- ☐ I **FIND** that petitioner did not timely provide all the required documentation under N.J.A.C. 10:71-2.2(e) and -2.3(a), and that no exceptional circumstances exist under N.J.A.C. 10:71-2.3(c); therefore, I **CONCLUDE** that the Medicaid Only application must be **DENIED** under N.J.A.C. 10:71-2.2(e).
- ☒ I **FIND** that petitioner did not timely provide all the required documentation under N.J.A.C. 10:71-2.2(e) and -2.3(a), but that exceptional circumstances exist under N.J.A.C. 10:71-2.3(c); therefore, I **CONCLUDE** that the time limit for verification must be **EXTENDED** under N.J.A.C. 10:71-2.3(c).
- ☐ I **FIND** that petitioner did not timely provide all the required documentation under N.J.A.C. 10:71-2.2(e) and -2.3(a); exceptional circumstances exist under N.J.A.C. 10:71-2.3(c); and petitioner has since provided all the required documentation; therefore, I **CONCLUDE** that the Medicaid Only application must be **PROCESSED** to determine eligibility under N.J.A.C. 10:71.
- ☐ I **FIND** that petitioner timely provided all the required documentation under N.J.A.C. 10:71-2.2(e) and -2.3(a); therefore, I **CONCLUDE** that the Medicaid Only application must be **PROCESSED** to determine eligibility under N.J.A.C. 10:71.

ADDITIONAL FINDINGS OF FACT/CONCLUSIONS OF LAW

Please see attached.

ORDER

I **ORDER** that:

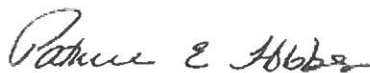
- ☐ Petitioner's appeal is **DISMISSED** because petitioner has no standing.
- ☐ Petitioner is **INELIGIBLE** for Medicaid Only under N.J.A.C. 10:71-2.2(e).
- ☒ Respondent must **EXTEND** the time limit for verification under N.J.A.C. 10:71-2.3(c).
- ☐ The case be **RETURNED** to respondent for respondent to **PROCESS** the application to determine eligibility under N.J.A.C. 10:71.

I **FILE** this initial decision with the **ASSISTANT COMMISSIONER OF THE DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES**. This recommended decision is deemed adopted as the final agency decision under 42 U.S.C. § 1396a(e)(14)(A) and N.J.S.A. 52:14B-10(f). The **ASSISTANT COMMISSIONER OF THE DIVISION OF MEDICAL ASSISTANCE AND HEALTH SERVICES** cannot reject or modify this decision.

If you disagree with this decision, you have the right to seek judicial review under New Jersey Court Rule 2:2-3 by the Appellate Division, Superior Court of New Jersey, Richard J. Hughes Complex, PO Box 006, Trenton, New Jersey 08625. A request for judicial review must be made within 45 days from the date you receive this decision. If you have any questions about an appeal to the Appellate Division, you may call (609) 815-2950.

12/03/2024

DATE



Patrice E. Hobbs

, ALJ

Date Record Closed:

12/03/2024

Date Filed with Agency:

12/03/2024

Date Sent to Parties:

12/03/2024

APPENDIX

Witnesses

For Petitioner:

Yale Hauptman, Esq.

For Respondent:

Kerry Garvey, Assistant Administrative Supervisor Family Services

Exhibits

For Petitioner:

P-A Request for Information

P-B Family Care Application

P-C Section 4 of Family Care Application

P-D Designation of Authorized Representative

P-E HIPPA Privacy Rule

For Respondent:

R-1 Hearing Summary

R-2 Family Care Application

R-3 Request for Information

R-4 Letter from Hauptman to Agency dated 05/14/24

R-5 Designation of Authorized Representative dated 12/20/23

R-6 Power of Attorney

R-7 Letter of Denial

R-8 List of Missing Documentation

Petitioner filed an application for NJ Family Care (R-2) on January 12, 2024. This form was signed by Yale Hauptman as her attorney. An attorney does not need a Designation of Authorized Representative Form (R-5). However, one was submitted, naming him as the authorized representative. The form is signed by Node Kludze as the authorized representative and not Hauptman. In addition, Kludze's signature is not witnessed. The form specifically states that the form has no effect unless each signature is witnessed. In addition, petitioner submitted a Power of Attorney (POA) (R-6) which states that her agents are Vladislav Miransky and/or Charline Bernard. Garvey admits that because of the many different names, it was unclear who they should have spoken to. However, the application itself is very clear. Section 1 lists the attorney's name and address for all mailings. Section 4 of the application also lists the attorney as the contact person for information. Garvey admits that the agency made a mistake and should have contacted Hauptman. Garvey states that Hauptman did not provide the documentation within the fourteen days as required. Hauptman argues that he would not have provided the documentation because the case was denied and closed. He further argues that he had to pursue the appeal to reopen the application. Based on the foregoing, I **CONCLUDE** that the petitioner must be given more time to submit the necessary documents to determine her eligibility.