

FINAL DECISION

OAL DKT. NO. HMA 03213-24 AGENCY DKT. NO. N/A

T.H.,

Petitioner,

ESSEX COUNTY DIVISION OF SOCIAL SERVICES,

Respondent.

T.H., pro se petitioner

Sandra Rix-Asante, appearing for respondent Essex County Department of Human Services/Office of Temporary Assistance pursuant to N.J.A.C. 1:1-5.4(a)(3)

Record Closed: July 9, 2024

Decided: September 25, 2024

BEFORE ANDREW M. BARON, ALJ:

STATEMENT OF THE CASE AND PROCEDURAL HISTORY

Petitioner appeals a determination denying eligibility for New Jersey Family Care based on excess income over the eligibility limit.

DISCUSSION

Based upon the testimony, I FIND the following facts:

Petitioner, age sixty-four at the time of filing a renewal application, came up for review on November 1, 2023, for coverage under the New Jersey Family Care program.

Monthly income was verified showing petitioner, who is considered a household of one, receiving \$1,999.00 a month in RSDI, which is approximately \$300.00 more than the maximum amount allowed of \$1,677.00. Thereafter on January 17, 2024, the Division determined that petitioner was over the maximum allowable monthly income limit. There were no significant exemptions that would bring petitioner under the maximum allowable limit for this program.

Essentially, petitioner, cooperated and submitted financial documents as required under the statutes and regulations in accordance with N.J.A.C. 10:71-4.1 et seq.

I THEREFORE FIND for purposes of this application, that the Division correctly determined that at the time of renewal/review, petitioner was not eligible under the income limits of the program.

At the conclusion of the hearing, to avoid an interruption in coverage, Ms. Rix-Asante encouraged petitioner to explore filing for coverage under alternate programs including but not limited to AB&D, MLTSS and Get Covered New Jersey.

LEGAL ANALYSIS AND DISCUSSION

In this matter, the only dispute is whether the Division correctly determined that petitioner was not eligible to receive benefits at the time of application for the New Jersey family care Program due to excess income.

N.J.A.C. 10:71-5.1 establishes financial eligibility standards for applicants.

Under subsection (b), Income is defined as receipt, by the individual, of any property or service which he or she can apply, either directly or indirectly or by sale or conversion, to meet his or her basic needs of food and shelter. All household income, whether in cash or in kind, shall be considered in the determination of eligibility, unless such income is exempt under N.J.A.C. 10:71-5.3.

Earned income is defined as payment received by an individual for services performed as an employee. Unearned income is defined as any income which is not coincident with the provisions set forth above.

N.J.A.C. 10:71-5.1 et seq. differentiates between earned income as gross income, and net income as self-employment income.

Here, it is clear that petitioner was employed at the time of application and had a combined household income in excess of the maximum Federal poverty limit.

On the basis of the facts set forth above, I **CONCLUDE** that the Division correctly determined that at the time of renewal/review, petitioner was not eligible to receive benefits under the New Jersey Family Care Program due to excess income.

<u>ORDER</u>

Based upon the foregoing, it is **ORDERED** that the decision of the agency to deny petitioner's application for benefits is hereby **AFFIRMED**.

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.

| <u>September 25, 2024</u> | Martill. Para |
|---------------------------|----------------------|
| DATE | ANDREW M. BARON, ALJ |
| Date Record Closed: | September25, 2024 |
| Date Filed with Agency: | September 25, 2024 |
| Date Sent to Parties: | |

APPENDIX

LIST OF WITNESSES

For Petitioner:

T.H., Pro Se

For Respondent:

Sandra Rix-Asante

LIST OF EXHIBITS IN EVIDENCE

For Petitioner:

None

For Respondent

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