

State of New Jersey OFFICE OF ADMINISTRATIVE LAW

INITIAL DECISION

OAL DKT. NO. HMA 09034-24

D.D.

Petitioner,

V. MONMOUTH COUNTY DIVISION 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):

Senior Planning Service (SPS), D.D.'s designated representative,

applied for Medicaid for D.D., did not provide Monmouth County

Board of Social Services with requested information, causing

its denial. Must the Medicaid application be denied for failure

to provide the requested information? Yes, an applicant shall

assist the Case Worker in securing evidence that corroborates

her statements, failure to do so can result in a denial of the

application. N.J.A.C. 10:71-2.2(e)(2) and Med Comm 22-04.

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 has been established.

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

11.

- ✓ 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 should 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 should 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 should 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 should be **PROCESSED** to determine eligibility under N.J.A.C. 10:71.

ADDITIONAL FINDINGS OF FACT/CONCLUSIONS OF LAW

Application for Medicaid with attachments filed November 28,2023.

Request for Information sent April 30, 2024, due May 14, 2024.

Notably the trust papers were never sent in response to the

request for information due May 14, 2024.

Applicants response to request for information May 14,2024.

Copy of the trust not provided in response.

Application Denied on May 22, 2024.

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.

12/19/2024 DATE

Allison Friedman

, ALJ

Date Record Closed:

Date Filed with Agency:

Date Sent to Parties:

12/16/2024

3

APPENDIX

Witnesses

For Petitioner:

Ms. Ahern: Senior Planning Services Supervisor in New Jersey

For Respondent:

Merideth Winick : Human Services Specialist 3

Exhibits

For Petitioner:

P-1 Deposit from Daughter

P-2 Schedule A

P-3 Trust Bank Statement

P-4 Screenshot of portal upload (page 1)

P-5 Screenshot of portal upload (page 2)

P-6 Cover letter sent with application regarding items attached 1

P-7 Cover letter sent with application regarding items attached 2

P-8 Cover letter sent with application regarding items attached 3

P-9 Letter from Senior Planning, dated May 14, 2024

P-10 Picture to demonstrate the amount of materials

provided to Monmouth County

For Respondent:

R-1 Medicaid Application, dated November 28, 2023

R-2 Completed Designation of Authorized Representitive

R-3 Denial Letter, dated May 22, 2024

R-4 Request for Information, dated April 30, 2024

R-5 Spreadsheet, dated April 30, 2024