



**State of New Jersey**  
OFFICE OF ADMINISTRATIVE LAW

**FINAL DECISION**

OAL DKT. NO. HMA 13973-24

AGENCY DKT. NO. N/A

**M.L.,**

Petitioner,

v.

**MORRIS COUNTY, DEPARTMENT  
OF HUMAN SERVICES, OFFICE OF  
TEMPORARY ASSISTANCE,**

Respondent.

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**Stacey Courter**, Designated representative., for M.L., petitioner, pursuant to  
N.J.A.C. 1:10B-5.1

**Maira Rogers**, appearing for respondent Morris County DHS/Office of  
Temporary Assistance, pursuant to N.J.A.C. 1:1-5.4(a)(3)

Record Closed: December 3, 2024

Decided: March 12, 2025

BEFORE **ANDREW M. BARON**, ALJ:

**STATEMENT OF THE CASE AND PROCEDURAL HISTORY**

Petitioner appeals a denial of Medicaid eligibility date for failure to provide documents.

The within appeal was filed on her behalf and the matter was transferred and filed as a contested case with the Office of Administrative Law under N.J.S.A. 52:14B-2(b).

### **DISCUSSION**

The issue in this case concerns whether or not petitioner through her designated representative supplied requested information in a timely manner.

This appeal concerns the first of three applications, with petitioner's designated representative re-applying for Medicaid coverage each time after a denial.

There is no dispute that petitioner is and has been a resident of the Lincoln Park facility where services continue to be rendered on an uninterrupted basis, even though throughout Medicaid has not paid for her stay.

As of the date of the hearing, the facility had generated a bill of over \$52,000.00 which remains unpaid.

The matter was assigned to Division worker Ana Garcia who pursuant to standard protocol send petitioner's designated representative Ms. Courter a request for additional information.

The Division says it denied the first application due to failure to cooperate and provide required information including but not limited to copies of the bank account where petitioner deposits her income and a copy of the funded QIT trust.

Not only are the instructions unclear regarding how much information is needed about petitioner's bank accounts, but towards the end of the request, there is no date deadline to submit the additional requested information.

For instance, the verification request only seems to ask where your income is deposited, not for copies of bank statements reflecting that. On July 8, 2024, Ms. Courter on behalf of petitioner responded with documents.

Though subsequent to the hearing date, Ms. Rodgers outlined and specified the reasons why the County denied the application, it is critical to point out as a matter of due process that twenty-three days elapsed from the time of Ms. Courter's submission of what she believed to be the necessary documents to the July 31<sup>st</sup> denial letter from Ms. Garcia.

The lack of communication from Ms. Garcia resulted in two subsequent applications being filed.

No further communications were sent from Ms. Garcia to Ms. Courter within that twenty-three-day period other than the denial. Though there is no official Medicaid Communication to this effect, the County says it is their standard practice post-Covid to only send one verification letter to potential applicants.

Petitioner's representative says this is unfair and arbitrary and for the reasons set forth herein, based on fact and law, I agree, and **I HEREBY FIND** that petitioner has complied with the verification requirements as set forth in her June 26, 2024 application for Medicaid eligibility.

### **LEGAL DISCUSSION AND CONCLUSIONS**

N.J.A.C. 10:70-2.1 and N.J.A.C. 10:70-2.3 respectively provide for the County's role in the Medicaid application review process.

More specifically, subsection 5 (c) (1) of 10:70-2.1 requires an applicant to assist the county board in securing evidence that supports his statements, and 5 (d) (2) requires the county board to allow for additional time when evidence of eligibility or entitlement is inconclusive, in order to provide sufficient evidence of eligibility before final action on the application is taken. Emphasis added.

Under N.J.A.C. 10:70-2.3, Collateral Verification, although program applicants have the primary responsibility to provide proof of eligibility, when it is difficult for applicants to do so, the county board shall provide assistance.

Here, the initial request for verification is vague and only states; 'provide where your income is deposited.' Petitioner's designated representative did so.

Although the County says it is not obligated to do so, upon review of what was submitted, if Ms. Garcia wasn't satisfied, she could have sent the same email that Ms. Rodgers did post hearing explaining why from the county's perspective, the application was incomplete. She failed to do so, and twenty-three days later, without any effort to contact Ms. Courter, the application was simply denied.

The county through its fair hearing liaison. Rodgers, who I find to be a credible witness, says it is not obligated to send a follow up and/or a second request.

But this situation was not an outright refusal or failure to cooperate. In fact, Ms. Courter had provided extensive information, there was someone for Ms. Garcia to write to, she just chose not to do so based on office policy.

Post Covid, high volume in these cases is understandable, but **I CONCLUDE** that it does not relieve the division, especially when it knows something missing will result in denial, from at least making one additional attempt to contact the designated representative in an effort to secure the missing information.

Twenty-three days is sufficient time to inform Ms. Courter two items were still missing and still deny the application within that timeframe if it was not provided.

Petitioner did not receive due process here, and accordingly, **I CONCLUDE** the denial was arbitrary and capricious and should be **REVERSED**.

Accordingly, based on my review of the documents requested and subsequently supplied, **I THEREFORE CONCLUDE** that petitioner's representative fully cooperated and provided the necessary information to render a favorable decision on the June 26, 2024 application.

### **FINDINGS OF FACT**

Based upon due consideration of the documents provided and the testimony of the parties, **I FIND** the following **FACTS**:

1. Petitioner, age 85 was a resident of the Lincoln Park facility at the time of her initial application.
2. On June 29, 2024, by its representative Ana Garcia, the division sent a verification letter and request for documents to Stacey Courter, petitioner's designated representative.
3. Among other things, the certification letter sought information on where petitioner's income was deposited.
4. Ms. Courter responded in a timely manner on July 8, 2024.
5. Nothing further was communicated from Ms. Garcia to Ms. Courter for twenty-three days to indicate that more information was needed. Instead, a simple denial letter went out on July 31, 2024.
6. The county says it has no obligation to send a second verification, even in cases where an applicant's representative provides what the county deems to be incomplete information.
7. The lack of communication from Ms. Garcia resulted in two subsequent applications being filed on behalf of petitioner.
8. **I FIND**, this is a violation of petitioner's due process rights, especially when a known and identifiable designated representative can be contacted and advised that certain information, which was not clearly spelled out in the original verification letter is still missing.

**ORDER**


Based upon the foregoing, it is **ORDERED** that the decision of the agency denying eligibility due to failure to cooperate and provide documents in connection with the June 26, 2024 application is **REVERSED**.

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.

March 12, 2025

DATE



**ANDREW M. BARON, ALJ**

Date Record Closed:

March 12, 2025

Date Filed with Agency:

March 12, 2025

Date Sent to Parties:

March 12, 2025

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**APPENDIX**

**LIST OF WITNESSES**

**For Petitioner:**

Stacey Courter.

**For Respondent:**

Maira Rogers

**LIST OF EXHIBITS IN EVIDENCE**

**For Petitioner:**

P-1 Miscellaneous emails between Stacey Courter and Division rep. Ana Garcia

**For Respondent:**

R-1 1<sup>st</sup> application

R-2 Request for information

R-3 Initial denial

R-4 Second application

R-5 Third application