

STATE OF CONNECTICUT
DEPARTMENT OF SOCIAL SERVICES
OFFICE OF LEGAL COUNSEL, REGULATIONS, AND ADMINISTRATIVE HEARINGS
55 FARMINGTON AVENUE
HARTFORD, CT 06105-3725

██████████ 2014
Signature Confirmation

Client ID # ██████████
Request # 611814

NOTICE OF DECISION

PARTY

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██████████
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PROCEDURAL BACKGROUND

On ██████████ 2014, the Department of Social Services (the "Department") sent ██████████ the "Appellant") a Notice of Action ("NOA") denying the Appellant's application for Long Term Care ("LTC") Medicaid benefits.

On ██████████ 2014, the Appellant requested an administrative hearing to contest the Department's decision to deny the Appellant's application for Medicaid.

On ██████████ 2014, the Office of Legal Counsel, Regulations, and Administrative Hearings ("OLCRAH") issued a notice scheduling the administrative hearing for ██████████ 2014.

On ██████████ 2014, in accordance with sections 17b-60, 17b-61, and 4-176e to 4-189, inclusive, of the Connecticut General Statutes, OLCRAH held an administrative hearing. The following individuals were present at the hearing:

██████████, Appellant's Niece and Representative

██████████, Appellant's Niece

██████████, Appellant's Brother

██████████, for the Appellant

Pat Hamill, Wadsworth Glen Administrator

Ross Bruno, Wadsworth Glen Business Manager

Laynette Serrano, Department's Representative

Christopher Turner, Hearing Officer

STATEMENT OF THE ISSUE

The issue to be decided is whether the Department's decision to deny the Appellant's application for LTC Medicaid due to failure to submit information needed to establish eligibility was correct.

FINDINGS OF FACT

1. The Appellant was admitted to Wadsworth Glen on [REDACTED] 2013. (Exhibit 1: Department's narrative)
2. On [REDACTED] 2014, the Department received an application for Medicaid LTC Assistance for the Appellant. (Exhibit 1: Department's narrative; Hearing record)
3. On [REDACTED] 2014, the Department sent the Appellant's representative a W-1348LTC "We Need Verification from You" form requesting Wells Fargo bank statements, Itemized contract for service goods, Deed for [REDACTED] Ownership verification of Discover Card and Bank of America credit cards, Real estate tax bills for [REDACTED] and [REDACTED] [REDACTED] and Explanation of deposits and withdrawals from Liberty Bank, Webster Bank and Citizen's Bank. A due date of [REDACTED]/14 was given. (Exhibit 1; Exhibit 3: W-1348LTC dated [REDACTED]/14)
4. On [REDACTED] 2014, the Department received from the Appellant's representative: Itemized statements of funeral goods, Quitclaim, Contractor bill, Real estate tax bills for [REDACTED] and [REDACTED] [REDACTED] and Tax returns. (Exhibit 1; Hearing record)
5. On [REDACTED] 2014, the Department sent the Appellant a W-1348LTC form requesting Wells Fargo bank statements, Quitclaim for [REDACTED] [REDACTED] A due date of [REDACTED]/14 was given. (Exhibit 4: W-1348LTC dated [REDACTED]/14; Hearing record)
6. On [REDACTED], 2014, the Department sent the Appellant a W-1348LTC form requesting Wells Fargo CD, Ownership verification of Discover Card and Bank of America credit card with a due date of [REDACTED]/14. (Exhibit 1; Exhibit 5: W-1348LTC dated [REDACTED]/14)
7. On [REDACTED] 2014, the Department reviewed 69 pages of submitted materials. The submitted materials included ownership information of Bank of America credit card account. (Exhibit 1; Department's representative testimony)

8. On ██████ 2014, the Department denied the Appellant's application for LTC assistance for failure to return the information requested to determine eligibility. (Exhibit 6: NOA dated ██████/14)
9. On ██████ 2014, the Appellant's representative hired ██████
██████ (Testimony)

CONCLUSIONS OF LAW

1. Section 17b-2 and § 17b-260 of the Connecticut General Statutes, authorizes the Department of Social Services to administer the Medicaid program pursuant to Title XIX of the Social Security Act.
2. Regulation provides that the assistance unit must supply the Department in an accurate and timely manner as defined by the Department, all pertinent information, and verification that the Department requires to determine eligibility and calculate the amount of benefits. Uniform Policy Manual ("UPM") § 1010.05 (A) (1)
3. Regulation provides that the Department must inform the assistance unit regarding the eligibility requirements of the programs administered by the Department, and regarding the unit's rights and responsibilities. UPM § 1015.10(A)
4. The Department correctly sent the Appellant multiple Application Verification Requirements lists requesting information needed to establish eligibility.
5. Regulation provides that the following promptness standards are established as maximum time periods for processing applications: forty-five calendar days for AABD or MA applicants applying on the basis of age or blindness. UPM § 1505.35 (C)
6. Regulation provides that the Department determines eligibility within the standard of promptness for the AFDC, AABD, and MA programs except when verification needed to establish eligibility is delayed and one of the following is true: the client has good cause for not submitting verification by the deadline, or the client has been granted a 10 day extension to submit verification which has not elapsed. UPM § 1505.35 (D) (2)
7. Regulation provides that the verification of information pertinent to an eligibility determination or a calculation of benefits is provided by the assistance unit or obtained through the direct efforts of the Department. The assistance unit bears the primary responsibility for providing evidence to corroborate its declarations. UPM § 1540.10 (A)

8. Regulation provides that the eligibility determination is delayed beyond the AFDC, AABD or MA processing standard if because of unusual circumstances beyond the applicant's control, the application process is incomplete and one of the following conditions exists:

1. Eligibility cannot be determined; or
2. Determining eligibility without the necessary information would cause the application to be denied.

UPM § 1505.40 (B) (4) (a)

9. Regulations provides that if the application is delayed, the Department continues to process the application until

1. The application is complete; or
2. Good cause no longer exists.

UPM § 1505.40 (B) (4) (b)

10. Regulation provides that additional 10-day extensions for submitting verification shall be granted as long as after each subsequent request for verification the assistance unit submits at least one item of verification within each extension period. UPM § 1505.40 (B) (5) (b)

11. The Department incorrectly did not provide the Appellant an additional 10 day extension as it did receive at least one item of verification on [REDACTED]/14.

12. The Department incorrectly denied the Appellant's application for failure to submit information needed to establish eligibility.

DISCUSSION

After reviewing the evidence and testimony presented, the Department's action to deny the Appellant's request for LTC assistance is not upheld. Regulations provide that an application must remain pending as long as the client provides at least one requested item before the due date given. Since the Appellant's representative did submit one article of needed verification before the deadline, the Department must keep the Appellant's application pending and send the Appellant another 1348LTC.

DECISION

The Appellant's appeal is **GRANTED**.

ORDER

1. The Department will reopen the Appellant's LTC application as of [REDACTED] 2014 and request any outstanding verification.
2. The Department will submit to the undersigned verification of compliance with this order by providing a copy of the Appellant's status screen no later than [REDACTED] 2014.


Christopher Turner
Hearing Officer

Cc: Cathy Robinson-Patton, Operations Manager, Middletown Regional Office

RIGHT TO REQUEST RECONSIDERATION

The appellant has the right to file a written reconsideration request within 15 days of the mailing date of the decision on the grounds there was an error of fact, law, and new evidence has been discovered, or other good cause exists. If the request for reconsideration is granted, the appellant will be notified within 25 days of the request date. No response within 25 days means that the request for reconsideration has been denied. The right to request a reconsideration is based on §4-181a (a) of the Connecticut General Statutes.

Reconsideration requests should include specific grounds for the request: for example, indicate what error of fact or law, what new evidence, or what other good cause exists.

Reconsideration requests should be sent to: Department of Social Services, Director, Office of Legal Counsel, Regulations, and Administrative Hearings, 55 Farmington Avenue, Hartford, CT 06105.

RIGHT TO APPEAL

The appellant has the right to appeal this decision to Superior Court within 45 days of the mailing of this decision, or 45 days after the agency denies a petition for reconsideration of this decision, if the petition for reconsideration was filed timely with the Department. The right to appeal is based on §4-183 of the Connecticut General Statutes. To appeal, a petition must be filed at Superior Court. A copy of the petition must be served upon the Office of the Attorney General, 55 Elm Street, Hartford, CT 06106, or the Commissioner of the Department of Social Services, 55 Farmington Avenue, Hartford, CT 06105. A copy of the petition must also be served on all parties to the hearing.

The 45-day appeal period may be extended in certain instances if there is good cause. The extension request must be filed with the Commissioner of the Department of Social Services in writing no later than 90 days from the mailing of the decision. Good cause circumstances are evaluated by the Commissioner or his designee in accordance with §17b-61 of the Connecticut General Statutes. The Agency's decision to grant an extension is final and is not subject to review or appeal.

The appeal should be filed with the clerk of the Superior Court in the Judicial District of New Britain or the Judicial District in which the appellant resides.