

STATE OF CONNECTICUT
DEPARTMENT OF SOCIAL SERVICES
OFFICE OF LEGAL COUNSEL, REGULATIONS, AND ADMINISTRATIVE HEARINGS
25 SIGOURNEY STREET
HARTFORD, CT 06106-5033

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

Client ID # ██████████
Request # 596148

NOTICE OF DECISION

PARTY

██████████
██████████
██████████

In Re: ██████████

PROCEDURAL BACKGROUND

On ██████████ 2014, the Department of Social Services (the "Department") sent ██████████ ██████████, (the "Appellant") a Notice of Action ("NOA") denying her application for Medicaid benefits for ██████████ 2013 through ██████████ 2013 and granting effective ██████████ 2013.

On ██████████, 2014, the Appellant's Conservator, ██████████ (the "Conservator"), 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. The original issue listed on the notice was failure to provide information.

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:

██████████ Conservator
Maureen Harry, Department's Representative
Sybil Hardy, Hearing Officer

At the hearing both the Department and the Conservator agreed that the correct issue was the effective date of eligibility for Long Term Care and were prepared to discuss that issue.

STATEMENT OF THE ISSUE

The issue is whether the Department determined the correct effective date of eligibility when it granted the Appellant's application for Long Term Care effective [REDACTED] 2013.

FINDINGS OF FACT

1. Effective [REDACTED] 2013, [REDACTED] was appointed as Conservator of Person for [REDACTED]. (Exhibit 14: Fiduciary's Probate Certificate, [REDACTED]/14)
2. On [REDACTED] 2013 the Department received an application on behalf of the Appellant for Long Term Care assistance under the Medicaid program. (Exhibit 4: Notice of Action, [REDACTED]/14)
3. During [REDACTED] 2013, the Appellant was discharged from the hospital to Meriden Center, Meriden, CT. (Hearing Record)
4. On [REDACTED] 2013, the Department sent the Conservator a We Need Verification From You ("W1348LTC") document requesting Chase bank accounts, Prudential Life Insurance policy and real estate ownership. (Exhibit 2: W1348LTC form, [REDACTED]/13)
5. For the period of [REDACTED] 2013 through [REDACTED] 2013, the Appellant's monthly Social Security benefit payments of \$1,030.00 were directly deposited to her Quinnipiac Bank and Trust Company checking account. (Exhibit A: Quinnipiac Bank and Trust Company checking account statements period [REDACTED]/14 through [REDACTED]/14)
6. For the period of [REDACTED] 2014 through [REDACTED] 2014, the Appellant's monthly Social Security benefit payments of \$1,047.00 were directly deposited to her Quinnipiac Bank and Trust Company checking account. (Exhibit A)
7. For the period of [REDACTED] 2013 through [REDACTED] 2013, the Appellant's monthly [REDACTED] Pension ([REDACTED]) payments of \$587.24 were directly deposited to her Quinnipiac Bank and Trust Company checking account. (Exhibit A)

8. For the period of [REDACTED] 2013 through [REDACTED] 2014, the Appellant's monthly [REDACTED] pension payments of \$593.65 were directly deposited to her Quinnipiac Bank and Trust Company checking account. (Exhibit A)
9. During [REDACTED] 2013, the Appellant's [REDACTED] pension payment of \$337.31 was deposited to her Quinnipiac Bank and Trust Company checking account. (Exhibit A)
10. During [REDACTED] 2013, the Appellant's [REDACTED] pension payment of \$339.52 was directly deposited to her Quinnipiac Bank and Trust Company checking account. (Exhibit A)
11. For the period of [REDACTED] 2013 through [REDACTED] 2014, the Appellant's [REDACTED] pension payment of \$342.92 was directly deposited to her Quinnipiac Bank and Trust Company checking account. (Exhibit A)
12. For the period of [REDACTED] 2013 through [REDACTED] 2013, the Appellant's balance in her Quinnipiac Bank and Trust Company checking account was \$1,043.00 (\$2,073.50, highest balance - \$1030.00, SSA).
13. For the period of [REDACTED] 2013 through [REDACTED] 2013, the Appellant's balance in her Quinnipiac Bank and Trust Company checking account was \$1,168.81 (\$3,462.09, highest balance - \$1,030.00, SSA Payment - 679.04, [REDACTED] pension -\$587.24, [REDACTED] pension) (Exhibit A)
14. For the period of [REDACTED] 2013 through [REDACTED] 2013, the Appellant's balance in her Quinnipiac Bank and Trust Company checking account was \$3,625.56 (\$5,582.32, highest balance - \$1,030.00, SSA payment - \$587.24, [REDACTED] - \$339.52, [REDACTED] (Exhibit A)
15. For the period of [REDACTED] 2013 through [REDACTED] 2013, the Appellant's balance in her Quinnipiac Bank and Trust Company checking was \$5,526.62 (\$7,493.19, highest balance - \$1,030.00, SSA - \$593.65, [REDACTED] - \$342.92, [REDACTED] (Exhibit A)
16. On [REDACTED] 2013, the Department sent Prudential Life Insurance a Insurance Verification document ("W-279") requesting information on policy number [REDACTED]. (Exhibit 5: W-279 form, [REDACTED]/14)
17. On [REDACTED] 2013, Prudential Insurance sent the Appellant a letter verifying the current face value of her policy was \$4,000.00. (Exhibit 6: Letter from Prudential Insurance, [REDACTED]/13)
18. The Conservator does not dispute the value of the Appellant's assets. (Conservator's testimony)

19. During ██████████ 2013, the Conservator submitted verification to the Department that the Prudential Insurance Policy was dispersed. (Conservator's testimony)
20. On ██████████ 2014, the Department sent the Appellant's Conservator a Notice of Denial for Long Term Care because the required verifications were not received by the Department. (Exhibit 4: Notice of Action, ██████████/14)
21. On ██████████ 2014, the Appellant died. (Conservator's testimony)
22. On ██████████ 2014, the Department reopened the Long Term Care application effective ██████████ 2014. (Ex. 3: Notice of Action, ██████████/2014)
23. On ██████████ 2014, the Department sent the Conservator a Notice denying medical assistance from ██████████ 2013 through ██████████ 2013 and granting effective ██████████ 2013. (Exhibit 3)

CONCLUSIONS OF LAW

1. Section 17b-260 of the Connecticut General Statutes authorizes the Commissioner of the Department of Social Services to administer the Medicaid program.
2. Uniform Policy Manual ("UPM") § 4005.05 (B) (1) provides that the Department counts the assistance unit's equity in an asset toward the asset limit if the asset is not excluded by state or federal law and is either: available to the unit; or deemed available to the assistance unit.
3. UPM § 4005.05 (B) (2) provides that under all programs except Food Stamps, the Department considers an asset available when actually available to the individual or when the individual has the legal right, authority or power to obtain the asset, or to have it applied for, his or her general or medical support.
4. UPM § 4005.05 (D) provides that an assistance unit is not eligible for benefits under a particular program if the unit's equity in counted assets exceeds the asset limit for the particular program.
5. The Department correctly determined that the Quinnipiac Bank and Trust Company bank accounts and the Prudential Life Insurance Policy are owned by the Appellant.
6. UPM § 4030.05 provides in part for the treatment of income deposited into checking accounts:
 - B. Checking Account
Part of a checking account to be considered as a counted asset during a given month is calculated by subtracting the actual amount of income the assistance unit deposits into the account that month from the highest balance in the account for that month
 - C. Income Versus Assets

Money which is received a income during a month and deposited into an account during the month is not considered an asset for that month, unless the source of the money is:

1. An income tax refund; or
 2. Cash received upon the transfer or sale of property; or
 3. A security deposit returned by the landlord.
7. The Department correctly subtracted the Appellant Social Security Income and pension payments from the highest balance of the checking account.
 8. UPM § 4005.10 (A) (2) (a) provides that the asset limit for Medicaid for a needs group of one is \$1,600.
 9. UPM § 4015.05 pertains to inaccessible assets and states in part: Subject to the conditions described in this session, equity in an asset that is inaccessible to the assistance unit is not counted as long as the asset remains inaccessible. The burden is on the assistance unit to demonstrate that an asset is inaccessible.
 10. The Department correctly determined that the Quinnipiac Bank and Trust Company bank accounts and the Prudential Life Insurance Policy were accessible assets for the Appellant.
 11. The Department correctly determined that the Appellant's assets exceeded the \$1,600.00 asset limit for period [REDACTED] 2013 through [REDACTED] 2013.
 12. The Department correctly denied the Appellant's Long Term Care Application from [REDACTED] 2013 through [REDACTED] 2013.

DISCUSSION

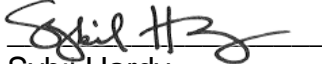
After reviewing the evidence and testimony presented, the Department's action to deny the Appellant's request for Medicaid for the months of [REDACTED] 2013 through [REDACTED] 2013 and granting effective [REDACTED] 2013 is upheld.

The Appellant owned the Prudential Insurance Policy until the Conservator was able to disperse the policy in [REDACTED] 2013. The asset was accessible to the Appellant during that period.

The Department was correct to deny the Applicant's request for Medicaid for failure to provide the necessary verification.

DECISION

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


Sybil Hardy
Hearing Officer

Pc: Cathy Robinson-Patton, Operations Manager; DSS R.O. # 50; Middletown

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 or law, 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 Administrative Hearings and Appeals, 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, provided that 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 the Commissioner's 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.