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



Client ID #: Hearing ID #: 601059

NOTICE OF DECISION

PARTY



, Appellant

Liz Perez, Department's Representative

Karen Brown, Hearing Officer

, Appellant's spouse

PROCEDURAL BACKGROUND

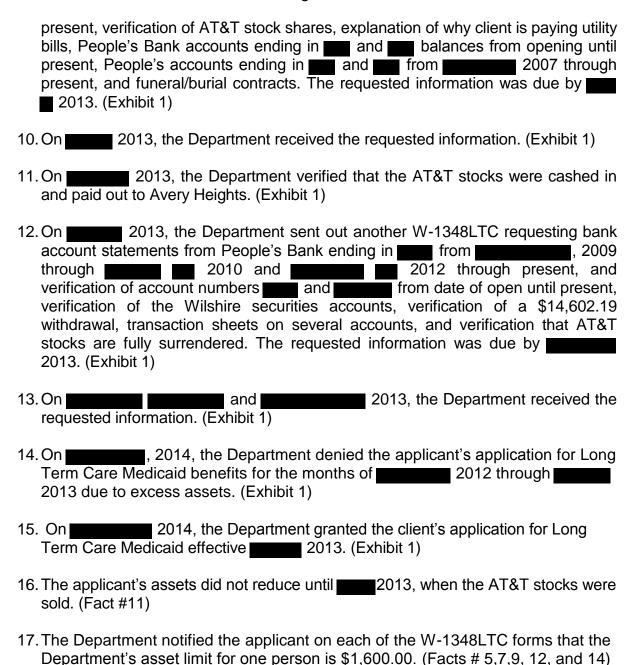
On 2014, the Department of Social Services (the "Department") sent ("Appellant") a Notice indicating that her mother ("applicant") application for Long Term Care (LTC) Medicaid benefits are granted effective 2013 and are denied for the months of 2012 through 2013.
On, 2014, the Appellant requested an administrative hearing to contest the Department's decision to grant eligibility effective 2013 and deny the preceding months.
On 2014, the Office of Legal Counsel, Regulations, and Administrative Hearings ("OLCRAH") issued a Notice originally 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:

STATEMENT OF THE ISSUE

The issues are whether the Department was correct in its determination of the applicant's Long Term Care Medicaid benefits effective date and denial of the preceding months of 2012 through 2013.

FINDINGS OF FACT	
1.	The applicant owned 2 accounts with People's United Bank with a total balance of \$7,379.42 as of the application date. (Exhibit 3: Department's assets worksheet)
2.	The applicant owned 302 shares of AT&T stocks with a cash value of \$10,520.92 as of the application date. (Exhibit 3; Exhibit 1: Department's narrative notes)
3.	The applicant resided at Avery Heights Nursing Facility. (Exhibit 1)
4.	On 2012, the Department received the applicant's request for Long Term Care Medicaid benefits. (Exhibit 1)
5.	On 2013, the Department sent the Appellant a W-1348LTC, "We Need Verification from You" requesting the following: verification of birth certificate, social security card, death certificate for spouse, gross income, 5 year history on all assets, and proof of life insurance. The requested information was due by 2013. (Exhibit 1)
6.	On 2013, the Department received some of the requested information. (Exhibit 1)
7.	On 2013, the Department sent the Appellant a second W-1348LTC requesting People's United Bank statements from 2008 to present, First Wilshire Securities account statements from 2007 to present, disposition of \$24,595.04 withdrawal from 2011, an itemized list of all payments made out by MetLife life insurance policy, and verification of ownership of the 302 AT&T stock shares, copy of funeral contract, full trust, all accounting and inventories from 2007 to present, and a letter listing client's addresses from 2007 to present. The requested information was due by 2013. (Exhibit 1)
8.	On 2013, the Department received more of the requested information. (Department's Testimony)
9.	On 2013, the Department sent a third W-1348LTC requesting bank accounts from People's Bank ending in open until 2010, 2010, 2012 through 2010. First Wilshire Securities account ending in

2007 through 2011 and 2011 through



CONCLUSIONS OF LAW

- 1. Section I7b-2, section (9) of the Connecticut General Statutes designates the Department of Social Services as the state agency for the administration of the Medicaid program pursuant to Title XIX of the Social Security Act.
- Section 17b-2 of the Connecticut General Statutes authorizes the Commissioner of the Department of Social Services to administer the Medicaid program.
- 3. Section 17b-80(a) of the Connecticut General Statutes states that the Department shall grant aid only if the applicant is eligible for that aid.

- 4. Uniform Policy Manual ("UPM") Section 4005.05.B provides that:
 - 1. 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:
 - a. available to the unit; or
 - b. deemed available to the unit.
 - 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.
- 5. UPM Section 1010.05.A.1 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 which the Department requires to determine eligibility and calculate the amount of benefits (cross reference: 1555).
- 6. UPM Section 4030.75.A.1 provides that the equity value of a share of stock is the net amount the owner would receive upon selling the share.
- 7. The Department received the verification that the applicant's assets, her AT&T stock, reduced to below the asset limit on 2013.
- 8. UPM Section 4005.10.A.2.a provides that the Medicaid asset limit for one person is \$1,600.
- 9. The Department correctly determined that the applicant's assets exceeded the \$1,600.00 Medicaid asset limit from 2012 through 2013.
- 10. The Department correctly denied the applicant's eligibility for LTC Medicaid for the months of 2012 through 2013.
- 11. UPM Section 4005.15.A.2 provides that for Medicaid and AABD residents of Long Term Care Facilities, at the time of application, the assistance unit is ineligible until the first day of the month in which it reduces its equity in counted assets to within the asset limit.
- 12. The applicant's assets were within the Medicaid asset limit as of 2013.
- 13. The Department correctly granted the applicant's Medicaid effective 2013, the month that the applicant's assets reduced to below the asset limit.

DISCUSSION

At the hearing, the Appellant testified that she was under the impression that assets

referred to bank accounts only, that it was a misunderstanding. The Department counts stocks as assets. The Department granted a diversion of the applicant's applied income.

DECISION

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

Karen Brown Hearing Officer

Cc: Albert Williams, Operations Manager, Hartford RO #10

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 <u>specific</u> 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, 25 Sigourney Street, Hartford, CT 06106.

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, 25 Sigourney Street, Hartford, CT 06106. 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.