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

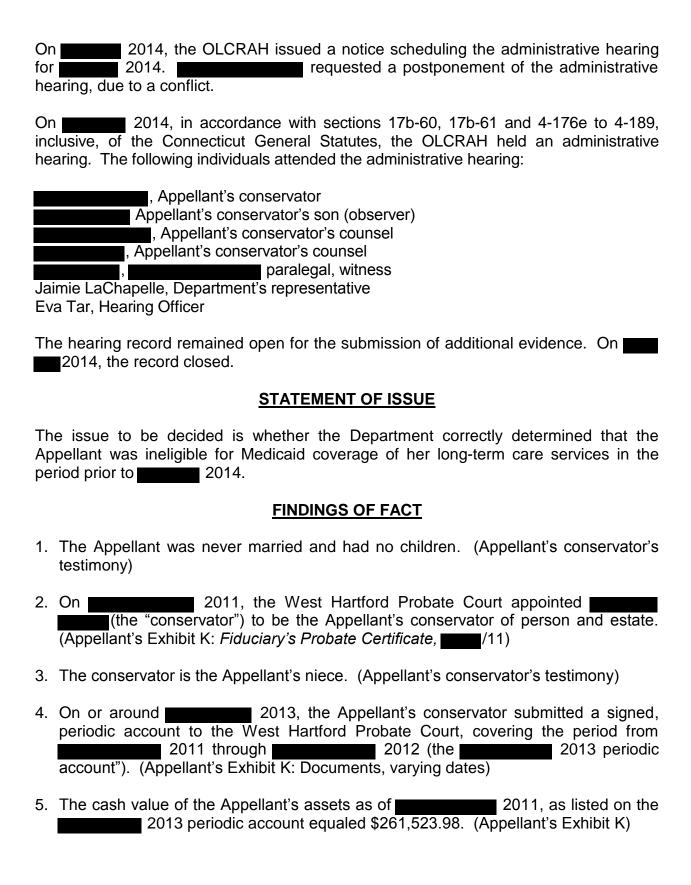
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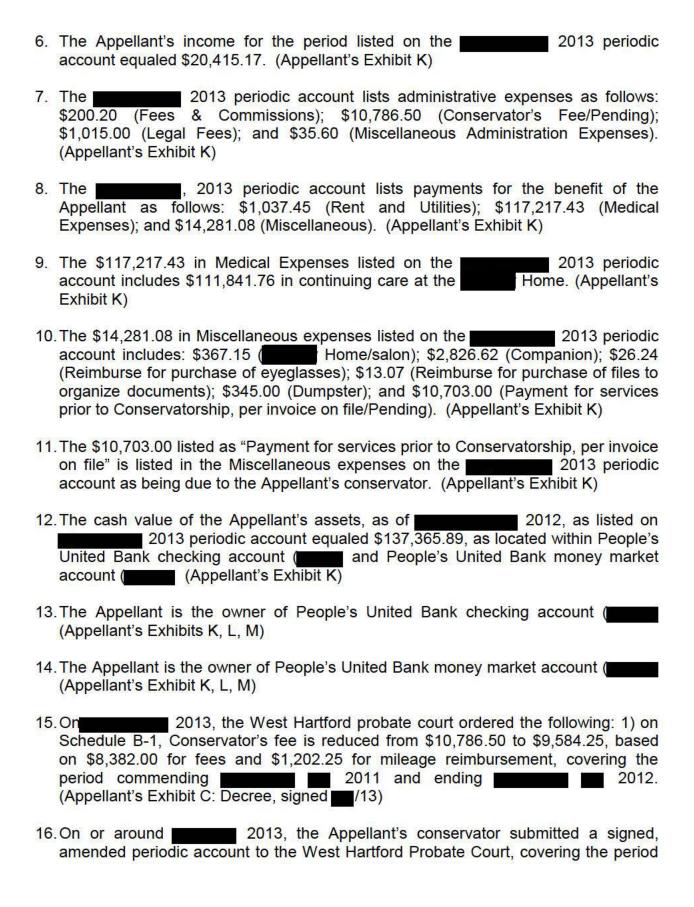
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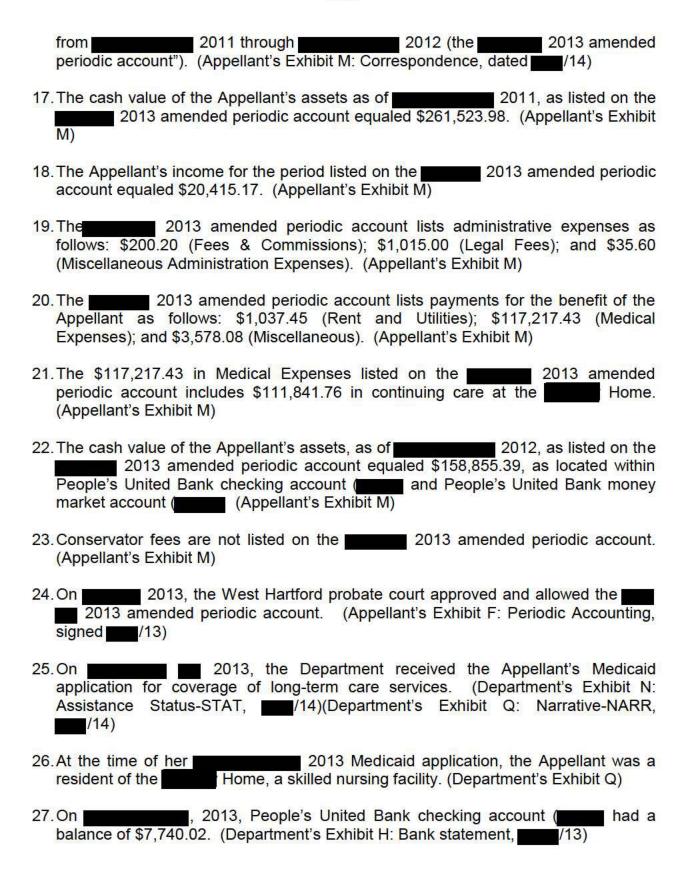
NOTICE OF DECISION

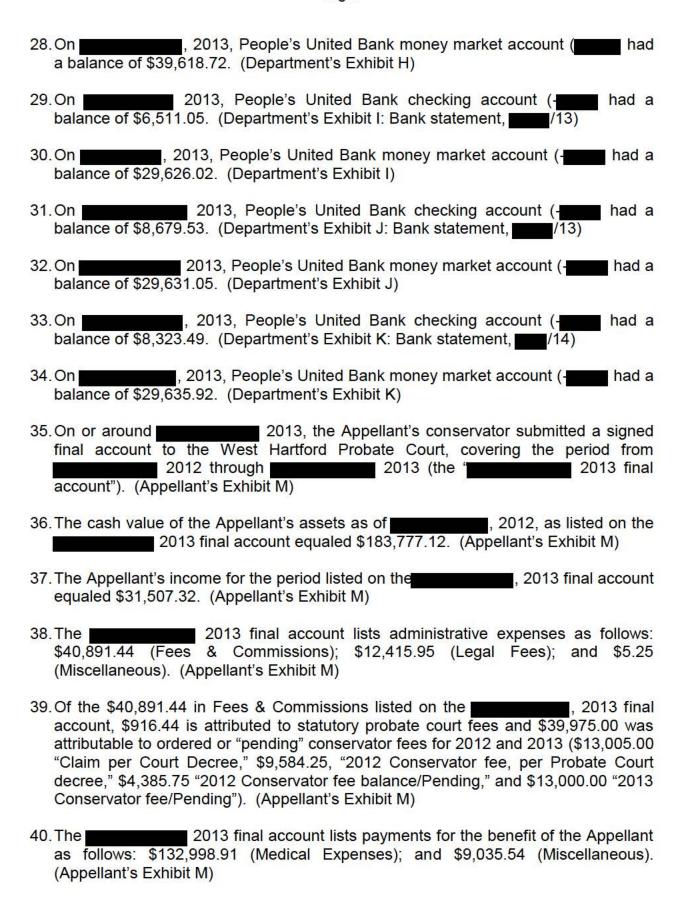
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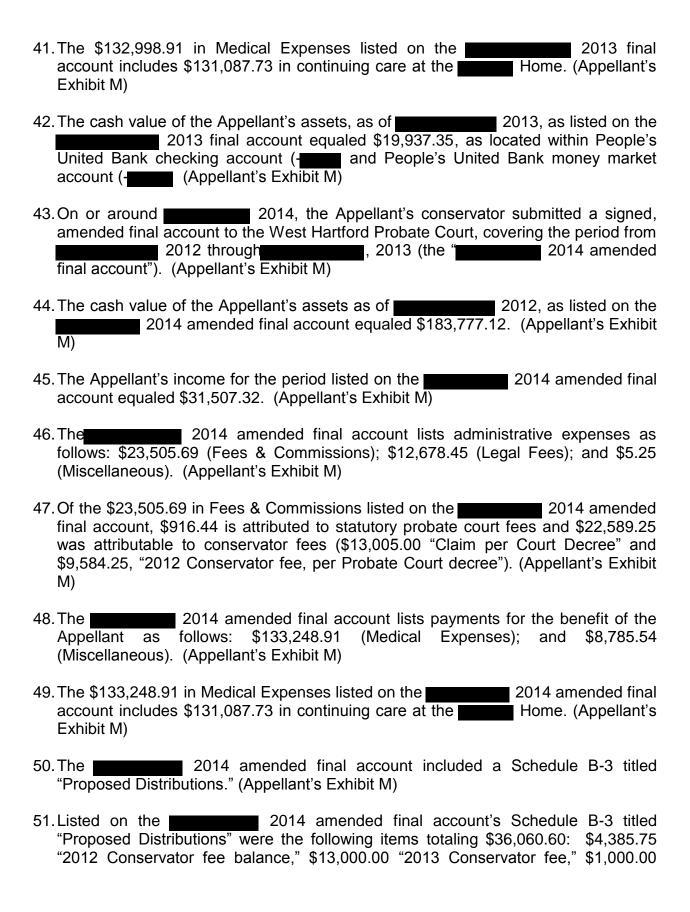
PROCEDURAL BACKGROUND	
On 2014, the Department of Social Services (the "Department") issued (the "Appellant") a notice denying her 2013 Medicaid application for coverage of long-term care services, for the reason that the value of her assets was more than the program's limit. The Department issued copies of the 2013 notice to, the Appellant's conservator of estate and person (the "conservator"), and Rome McGuigan PC.	
The Appellant died on 2014.	
On 2014, of Rome McGuigan, PC filed a request for an administrative hearing with the Office of Legal Counsel, Regulations, and Administrative Hearings ("OLCRAH") to dispute the Department's action.	
On 2014, the Department issued the Appellant a notice stating that the agency was granting her Medicaid coverage for long-term care services, effective 2014.	
A 2013 West Hartford Probate Court document lists of Rome McGuigan PC as the conservator's attorney, and as the Appellant's attorney. 2014 West Hartford Probate Court document lists of Rome McGuigan PC as an individual to be sent notices according to the Probate Court Rules of Procedure, section 8.2. At the 2014 administrative hearing before the OLCRAH hearing officer, stated that he represented the Appellant's conservator, and that his firm had retained and identified themselves as "co-counsel" for the 2014 administrative hearing.	

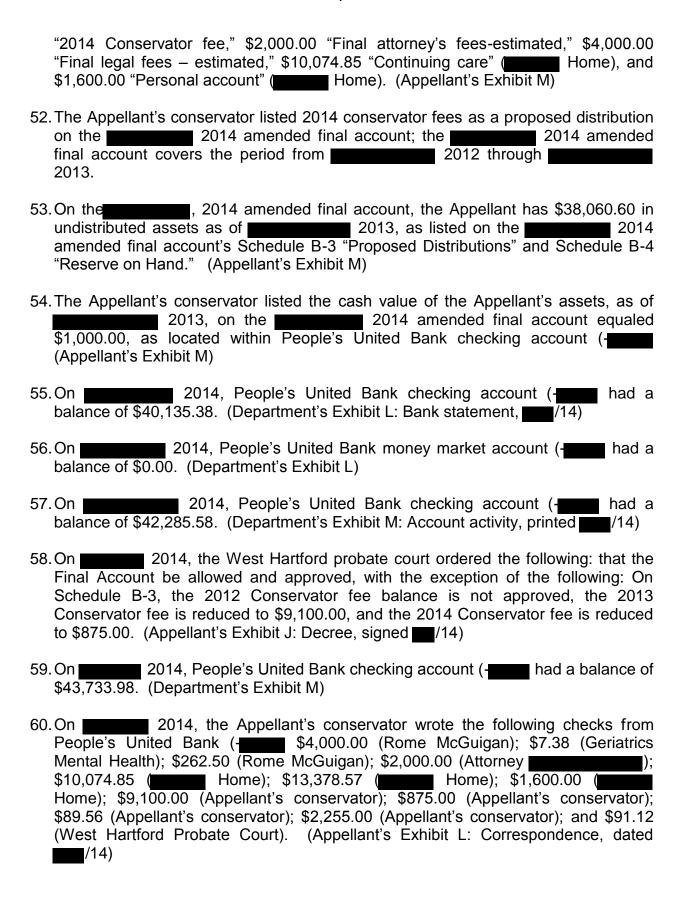


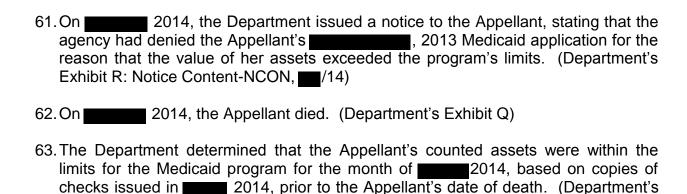












64. On 2014, the Department issued a notice to the Appellant, stating that the agency had found the Appellant eligible for medical assistance effective 2014. (Department's Exhibit S: Notice Content-NCON, 5/16/14)

representative's testimony)(Department's Exhibit Q)

CONCLUSIONS OF LAW

- 1. Section 1-2z of the Connecticut General Statutes provides for the plain meaning rule. The meaning of a statute shall, in the first instance, be ascertained from the text of the statute itself and its relationship to other statutes. If, after examining such text and considering such relationship, the meaning of such text is plain and unambiguous and does not yield absurd or unworkable results, extratextual evidence of the meaning of the statute shall not be considered.
- The Department is designated the state agency for the administration of the Medicaid program pursuant to Title XIX of the Social Security Act. Conn. Gen. Stat. § 17b-2.
- 3. For the purposes of determining eligibility for the Medicaid program, an available asset is one that is actually available to the applicant or one that the applicant has the legal right, authority or power to obtain or to have applied for the applicant's general or medical support. If the terms of a trust provide for the support of an applicant, the refusal of a trustee to make a distribution from the trust does not render the trust an unavailable asset. Notwithstanding the provisions of this subsection, the availability of funds in a trust or similar instrument funded in whole or in part by the applicant or the applicant's spouse shall be determined pursuant to the Omnibus Budget Reconciliation Act of 1993, 42 USC 1396p. Conn. Gen. Stat. § 17b-261 (c).
- 4. Under all programs except [the Supplemental Nutrition Assistance Program], 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. Uniform Policy Manual ("UPM") § 4005.05 (B)(2).

5. Section 4000.01 of the Uniform Policy Manual provides in part the following definitions:

Asset Limit: The asset limit is the maximum amount of equity in counted assets which an assistance unit may have and still be eligible for a particular program administered by the Department.

<u>Available Asset</u>: An available asset is cash or any item of value which is actually available to the individual or which the individual has the legal right, authority or power to obtain, or to have applied for, his or her general or medical support.

<u>Counted Asset</u>: A counted asset is an asset which is not excluded and either available or deemed available to the assistance unit.

- 6. For every program administered by the Department, there is a definite asset limit. UPM § 4005.05 (A).
- 7. 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. UPM § 4005.05 (B)(1).
- 8. The Department compares the assistance unit's equity in counted assets with the program asset limit when determining whether the unit is eligible for benefits. UPM § 4005.05 (D)(1).
- The Appellant is the legal owner of People's United Bank checking account (and People's United Bank money market account (-
- 10. Property in probate is inaccessible to an individual only in the case where he or she has an interest in a decedent's estate that is undergoing administration provided that: a. the individual does not have the legal right to make the assets available until the probate court completes such administration; and b. the individual takes reasonable steps to ensure that the administration of the decedent estate is not unduly prolonged. UPM § 4015.10 (A)(1).
- 11. The Appellant's circumstances did not meet the criteria established in section 4015.10 (A)(1) of the Uniform Policy Manual.
- 12. The Appellant's assets as administered in the period from through 2014 were accessible to the Appellant.
- 13. The Appellant had the legal right to obtain the monies in People's United Bank checking account (- and People's United Bank money market account (- so as to have the monies in those financial instruments applied for her general or medical support.
- 14. For the purposes of the Medicaid program, People's United Bank checking account (- and People's United Bank money market account (- are counted assets.

- 15. With respect to the Appellant's 2013 Medicaid application, the value of the Appellant's People's United Bank checking account (-2014 and People's United Bank money market account (-2014 are counted in full toward the program's asset limit.
- 16. 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, unless the assistance unit is categorically eligible for the program and the asset limit requirement does not apply (cross reference: 2500 Categorical Eligibility Requirements). UPM § 4005.05 (D)(2).
- 17. With respect to the Medicaid program associated with the elderly and disabled, the asset limit is \$1,600.00 for a needs group of one and \$2,400.00 for a needs group of two. UPM § 4005.10 (A)(2).
- 18. In the period prior to 2014, the value of the Appellant's counted assets for the purposes of the Medicaid program exceeded \$1,600.00.
- 19. In the period prior to 2014, the Appellant was ineligible for Medicaid coverage of her long-term care services.
- 20. As of 2014, the date of the Appellant's death, the Appellant had reduced her counted assets for the purposes of the Medicaid program to less than \$1,600.00.
- 21. The Department correctly determined that the Appellant was ineligible for Medicaid coverage of her long-term care services in the period prior to 2014.

DISCUSSION

The Appellant asserts that the Appellant's assets were "unavailable" and should not be counted toward the \$1,600.00 Medicaid program limit, as the Appellant had retained assets in anticipation of paying out conservatorship, attorney fees, and using whatever remained after those payments for fees to pay the skilled nursing facility in which the Appellant resided. The Appellant argues that while the monies for conservator and attorney fees could be disbursed from the estate prior to approval of the West Hartford Probate Court, there was no guarantee that the court would retroactively approve the expenditure. The Appellant opines that the Appellant's Medicaid case should not be disadvantaged by the delay in approval of conservatorship fees, as a petitioner has no control over a probate judge's hearing schedule.

The Appellant's arguing that a Connecticut probate court judge's busy schedule and professionally diligent oversight of petitions for conservator's fees cause a conserved person's assets to be "unavailable" for the purposes of the Medicaid program is an interesting tactic. This argument is without merit.

The Appellant ignores the broad circumstances under which the Medicaid program considers an asset to be "available" to an individual and the single exception under which the Medicaid program treats assets held in probate to be "unavailable" to an individual.

The Appellant fails to take into account the plain meaning of statute and regulation governing the administration of the Medicaid program; for the purposes of this program, an asset is available should the applicant (or recipient) have the legal right, authority, or power to obtain it. Far from establishing that the Appellant lacked the legal right, authority, or power to have the funds in her People's United Bank checking and money market accounts used to pay for her medical bills or general support, the hearing record shows that the Appellant's conservator regularly used the Appellant's funds to pay for the Appellant's medical bills and continuing support at the Home, a skilled nursing facility.

Under a single, limited exception, Medicaid regulations do provide that property in probate is inaccessible to an individual: property in probate is inaccessible to an individual only in the case where he or she has an interest in a decedent's estate that is undergoing administration, provided that (a) the individual does not have the legal right to make the assets available until the probate court completes such administration; and (b) the individual takes reasonable steps to ensure that the administration of the decedent's estate is not unduly prolonged (UPM § 4015.10 (A)). The Appellant's circumstances do not fall within this exception; the Appellant's funds were not part of a decedent estate in which the Appellant had an interest.

The hearing officer finds that the Appellant's counted assets exceeded the Medicaid program's \$1,600.00 asset limit until 2014. The Department's actions are supported by state statute and regulation, with respect to the administration of the Medicaid program.

DECISION

The Appellant's appeal is DENIED.

Eva Tar Hearing Officer

CC:

Albert Williams, Field Operations Manager, DSS-Hartford (10) Musa Mohamud, Field Operations Manager, DSS-Hartford (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 <u>what</u> error of fact or law, <u>what</u> new evidence, or <u>what</u> 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.