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

2015 Signature Confirmation

Client ID # Request # 673146

NOTICE OF DECISION

PARTY

CIO		

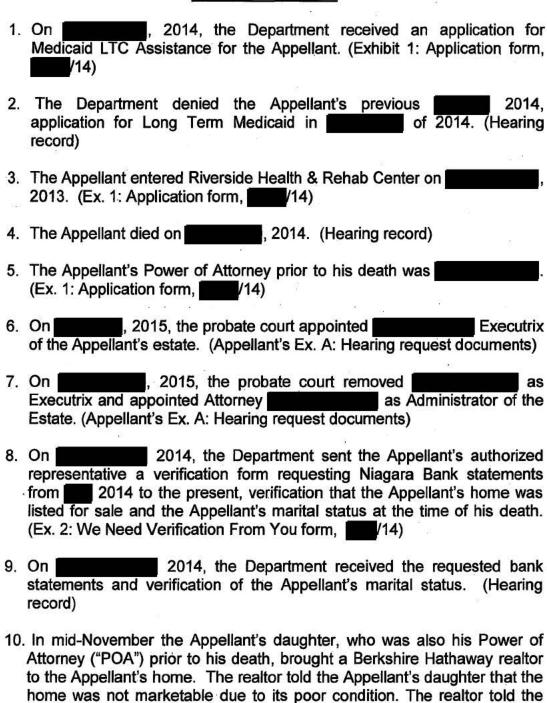
PROCEDURAL BACKGROUND

On, 2014, the Department of Social Services (the "Department")
sent the authorized representative for the (the
"Appellant") a Notice of Action ("NOA") denying the Appellant's
application for Long Term Care ("LTC") Medicaid benefits.
On, 2015, the Appellant's representative requested an
administrative hearing to contest the Department's decision to deny the
Appellant's application for Medicaid.
On 2015, the Office of Legal Counsel, Regulations, and Administrative
Hearings ("OLCRAH") issued a notice scheduling the administrative hearing for
2015.
On 2015, 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:
administrative nearing. The following individuals were present at the nearing.
Attorney for the Appellant
Attorney , for the Appellant
, Riverside Health Care, for the Appellant
Diane Wood, Department's Representative
Thomas Monahan, Hearing Officer

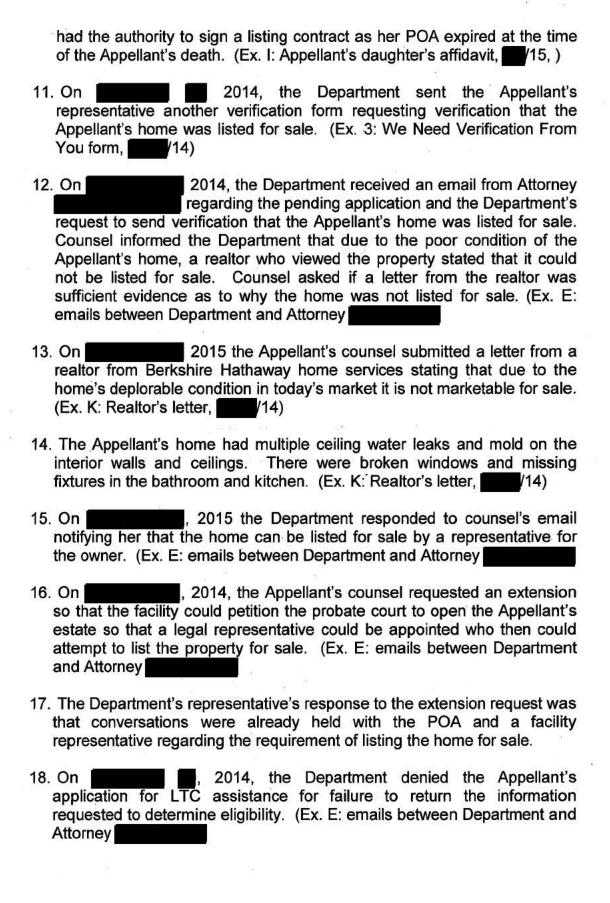
STATEMENT OF THE ISSUE

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



Appellant's daughter to contact a probate lawyer because she no longer



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.
- Section 1-56b of the Connecticut General Statutes provides that if the principal dies, the power of attorney shall cease at the time of the principal's death.
- 3. 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 which the Department requires to determine eligibility and calculate the amount of benefits. Uniform Policy Manual ("UPM") § 1010.05(A)(1)
- 4. 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 § 10.15.10(A)
 - 5. The Department correctly sent the Appellant multiple Application Verification Requirements lists requesting information needed to establish eligibility.
 - 6. 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)
 - 7. 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)
 - 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

Determining eligibility without the necessary information would cause the application to be denied.

UPM § 1505.40(B)(4)(a)

- 9. Regulation 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)

- The Appellant's representatives requested an extension on 2014, because the Appellant did not have a legal representative to sign a real estate contract.
- 11. The Appellant's representatives demonstrated good cause in not listing the home property for sale.
- 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 Medicaid is not upheld.

Regulations provide that an application must remain pending as long as the client
has good cause for not submitting verification by the deadline. The Appellant
died on 2014. The POA for 2014, the Appellant's daughter,
ended on the Appellant's date of death. The case was denied on
2014. was appointed Executrix of the Appellant's Estate
2015. No one had legal authority to sign a real estate contract until
2015, which was after the application was denied. The Appellant's representatives
had good cause on 2014, when they requested and extension so
that a legal representative could be appointed by the court. The Department
argued that the Appellant's were aware of the requirement of listing the home for
sale for over a year. The previous application and denial has no bearing on the
2014 application. The POA for the appellant's daughter was in effect at
the time of the last application. The Appellant's representatives demonstrated good
cause and requested a reasonable extension in order to prepare and list the home
for sale.

DECISION

The Appellant's appeal is GRANTED.

ORDER

- 1. The Department will reopen the LTC Medicaid application to the original application date of 2014.
- 2. The Department will request any outstanding verifications and determine eligibility.
- 3. No later than twenty days of the date of this decision, the Department will submit to the undersigned verification of compliance with this order.

Thomas Monahan Hearing Officer

Pc: John Hesterberg, Operations Manager, Manchester Regional Office Diane Wood, Hearing Liaison, Hartford Regional Office Attorney

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 Administrative Hearings and Appeals, 25 Sigourney Street, Hartford, CT 06106-5033.

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 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.