

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

██████████ 2016
SIGNATURE CONFIRMATION

CLIENT ID #: ██████████
HEARING ID #: 746193

NOTICE OF DECISION

PARTY

██████████
c/o ██████████
██████████
██████████

PROCEDURAL BACKGROUND

On ██████████ 2015, the Department of Social Services (the "Department") sent ██████████ (the "Appellant") a Notice of Denial imposing a transfer of assets penalty for the period from ██████████ 2014, through ██████████ 2015.

On ██████████ ██████████ 2016, the Appellant's conservator, ██████████ ██████████, requested an administrative hearing to contest the Department's decision to impose a penalty on the Applicant's Long Term Care Medicaid benefits.

On ██████████ 2016, the Office of Legal Counsel, Regulations, and Administrative Hearings ("OLCRAH") issued a notice scheduling the administrative hearing for ██████████ 2016.

On ██████████ 2016, 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 for the Appellant
██████████, Conservator's spouse
Shawn Hardy, Eligibility Services Worker, Department's representative
Roberta Gould, Hearing Officer

At the Appellant's representative's request, the hearing record remained open for the submission of additional evidence. On ██████████ 2016, the record closed.

STATEMENT OF THE ISSUE

The issue is whether the Department's decision to impose a Transfer of Assets ("TOA") penalty beginning [REDACTED] 2014, and ending on [REDACTED] 2015, was correct.

FINDINGS OF FACT

1. On [REDACTED] 2014, the Appellant applied for Long Term Care Medicaid assistance for himself. (Hearing summary)
2. [REDACTED] is the Appellant's conservator. (Hearing record)
3. On [REDACTED] 2015, the Department sent the Appellant's conservator a W-495C Transfer of Assets final Decision Notice indicating that the Appellant had transferred assets to become eligible for Medicaid and would not be eligible for Medicaid benefits for the period of [REDACTED] 2014, through [REDACTED] 2015. (Exhibit 5: W-495C and Hearing summary)
4. On [REDACTED] 2016, the Appellant's conservator requested an administrative hearing to contest the Department's decision to impose a penalty on the Applicant's Long Term Care Medicaid benefits. (Hearing record)
5. On [REDACTED] 2016, an administrative hearing was held. (Hearing record)
6. On [REDACTED] 2016, the Department reviewed the Appellant's file and rescinded the transfer of asset penalty it had previously imposed for the period of [REDACTED] 2014, through [REDACTED] 2015. (Hearing record)
7. The hearing record reflects that there is no transfer of asset penalty being imposed for the Appellant's Long Term Care Medicaid assistance.

CONCLUSIONS OF LAW

1. Section 17b-260 of the Connecticut General Statutes provides for the administration of the Medicaid program pursuant to Title XIX of the Social Security Act.
2. Section 17b-260 of the Connecticut General Statutes authorizes the Commissioner of Social Services to take advantage of the medical assistance programs provided in Title XIX, entitled "Grants to States for Medical Assistance Programs", contained in the Social Security Amendments of 1965.
3. UPM § 1570.05(B) provides, in part, that subject to the conditions described in this chapter, the requester has the right to a Fair Hearing if:
 1. the Department denies the assistance unit's application for benefits.


4. The Department granted Long Term Care Medicaid assistance to the Appellant. Therefore, there is no issue on which to rule.

DISCUSSION

After the administrative hearing was held on [REDACTED] 2016, the Department rescinded the transfer of asset penalty it had imposed for the period of [REDACTED] 2014, through [REDACTED] 2015. Because the record shows that the Department has granted assistance for the Appellant, there is no issue on which to rule.

DECISION

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



Roberta Gould
Hearing Officer

PC: Musa Mohamud, Social Services Program Manager, DSS Hartford
Judy Williams, Social Services Operations Manager, DSS Hartford
Tricia Morelli, Social Services Program Manager, DSS Hartford
Shawn Hardy, Eligibility Services Worker, DSS Hartford

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 06105-3725.

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.