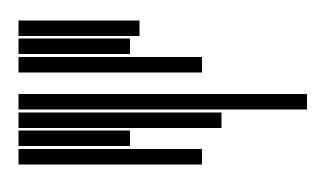
STATE OF CONNECTICUT DEPARTMENT OF SOCIAL SERVICES OFFICE OF LEGAL COUNSEL, REGULATION AND ADMINISTRATIVE HEARINGS 55 FARMINGTON AVENUE HARTFORD, CONNECTICUT 06105

2022 Signature Confirmation

Client ID Number: Request #: 203574

NOTICE OF DECISION

PARTY



PROCEDURAL BACKGROUND

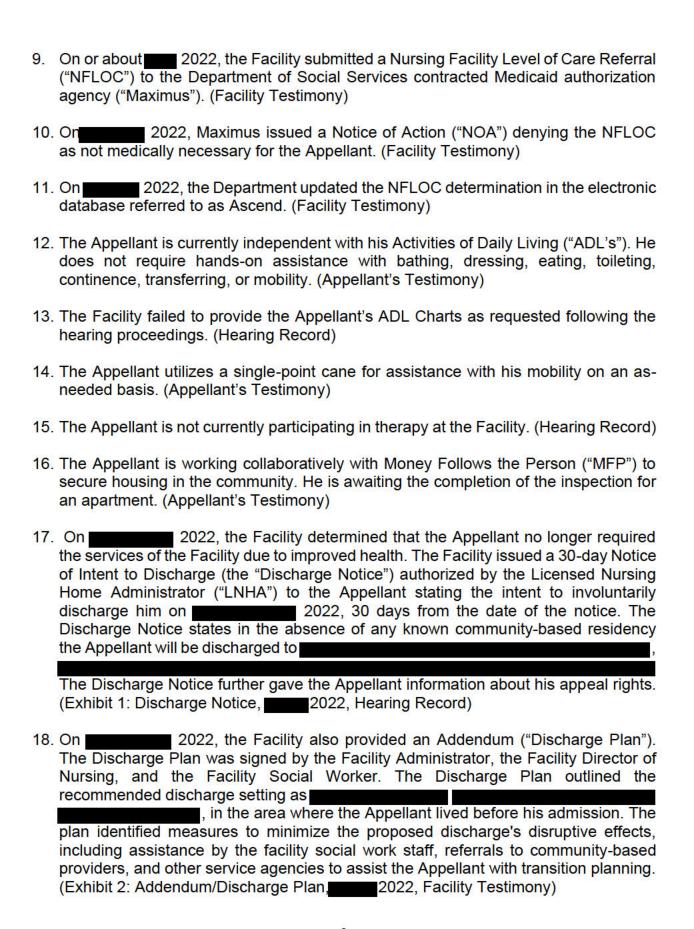
On to involuntarily 2022, within 30		(the "Appellant"), fro	") issued a letter proposi om care on	
On Facility's propos	2022, the Appellant requesed discharge.	ested an Administrati	ive Hearing to contest t	he
	■ 2022, the Office of Le CRAH") issued a notice 2022.		•	
On Administrative I	2022, the OLCRAH Hearing.	issued a notice am	ending the issue of t	the
On § 4-176e to § 4-Facility.	2022, in accordance with 189, inclusive, OLCRAH h			

The following individuals participated in the hearing:

	Appellant Director of Social Services, Assistant Director of Nursing, Jessica Gulianello, Hearing Officer					
The hearing record remained open to allow the Facility time to submit additional information on behalf of the Appellant. No additional documents were received and on 2022, the hearing record closed accordingly.						
STATEMENT OF THE ISSUE						
	The Administrative Hearing was initially scheduled for involuntary transfer due to a scheduling error.					
	The issue to be decided is whether the Facility acted in accordance with state law when it proposed to discharge, involuntarily, the Appellant from the Facility due to improved health.					
FINDING OF FACTS						
	1. The Appellant is years old (D.O.B. (Hearing Record)					
	2. The Appellant was involved in a motor vehicle accident that resulted in hospitalization and sustained injuries that required surgery. (Appellant's Testimony)					
	3. On 2022, the Appellant was admitted to the Facility for rehabilitation. (Hearing Record)					
	4. The Appellant's medical history includes . (Facility Testimony)					
	5. The Appellant recently completed a monitored by the Facility. (Facility Testimony)					
	6. The Appellant does not require supervised medication management. (Appellant's Testimony)					
	7. The Appellant's current medications are unknown as the Facility failed to provide his					

8. The Appellant is not currently being treated for an acute medical condition. (Facility Testimony)

medication list as requested following the hearing proceedings. (Hearing Record)



19. The Facility social worker is available to assist the Appellant with the intake process at the identified following the issuance of this decision. (Exhibit 2: Addendum/Discharge Plan, 2022, Facility Testimony)
20. The issuance of this decision is timely under Connecticut General Statutes § 19a-535 (h) (1) which requires that a decision be issued not later than thirty days after the termination of the hearing or not later than sixty days after the date of the hearing request, whichever occurs sooner. Sixty days from 2022, is 2022, is 2022. This decision is due no later than 2022, and is therefore timely.

CONCLUSIONS OF LAW

- 1. Section 19a-535(h)(1) of the Connecticut General Statutes (Conn. Gen. Stat.) authorizes the Commissioner of the Department of Social Services to hold a hearing to determine whether the transfer or discharge is in accordance with this section.
- 2. Conn. Gen. Stat. 19a-535(a)(4) provides that the term "discharge" means the movement of a resident from a facility to a non-institutional setting.
- 3. Conn. Gen. Stat. §19a-535(b) provides that a facility shall not transfer or discharge a resident from the facility except to meet the welfare of the resident which cannot be met in the facility, or unless the resident no longer needs the services of the facility due to improved health; the facility is required to transfer the resident pursuant to section 17b-359 or section 17b-360, or the health or safety of individuals in the facility is endangered, or in the case of a self-pay resident, for the resident's nonpayment or arrearage of more than fifteen days of the per diem facility room rate, or the facility ceases to operate. In each case the basis for transfer or discharge shall be documented in the resident's medical record by a physician or the resident's advanced practice registered nurse. In each case where the welfare, health or safety of the resident is concerned the documentation shall be by the resident's physician or the resident's advanced practice registered nurse.

Because Maximus and the Facility determined that the Appellant is no longer in need of the services of the Facility due to improved health, there is a legal basis upon which the Facility may seek to discharge the Appellant.

5. Conn. Gen. Stat. §19a-535(c)(1) provides that before effecting a transfer or discharge of a resident from the facility, the facility shall notify, in writing, the resident and resident's guardian or conservator, if any, or legally liable relative or other responsible party if known, of the proposed transfer or discharge the reasons therefore, the effective date of the proposed transfer or discharge, the location to which the resident is to be transferred or discharged, the right to appeal the proposed transfer or discharge and the procedures for initiating such an appeal as determined by the Department of Social Services, the

date by which an appeal must be initiated in order to preserve the resident's right to an appeal hearing and the date by which an appeal must be initiated in order to stay the proposed transfer or discharge and the possibility of an exception to the date by which an appeal must be initiated in order to stay the proposed transfer or discharge for good cause, that the resident may represent himself or herself or be represented by legal counsel, a relative, a friend or other spokesperson, and information as to bed hold and nursing home readmission policy when required in accordance with section 19a-537. The notice shall also include the name, mailing address and telephone number of the State Long-Term Care Ombudsman. If the resident is, or the facility alleges a resident is, mentally ill or developmentally disabled, the notice shall include the name, mailing address and telephone number of the Office of Protection and Advocacy for Persons with Disabilities. The notice shall be given at least thirty days and no more than sixty days prior to the resident's proposed transfer or discharge, except where the health or safety of individuals in the facility are endangered, or where the resident's health improves sufficiently to allow a more immediate transfer or discharge, or where immediate transfer or discharge is necessitated by urgent medical needs or where a resident has not resided in the facility for thirty days, in which cases notice shall be given as many days before the transfer or discharge as practicable.

The Facility correctly gave the Appellant at least 30-day notice of the proposed discharge date which included the effective date of the discharge, the reason for the discharge, a location to which he would be discharged, and his appeal rights.

6. Section 19a-535(e) of the Connecticut General Statutes provides that except in an emergency or in the case of transfer to a hospital, no resident shall be transferred or discharged from a facility unless a discharge plan has been developed by the personal physician or advanced practice registered nurse of the resident or the medical director in conjunction with the nursing director, social worker or other health care provider. To minimize the disruptive effects of the transfer or discharge on the resident, the person responsible for developing the plan shall consider the feasibility of placement near the resident's relatives, the acceptability of the placement to the resident and the resident's guardian or conservator, if any or the resident's legally liable relative or other responsible party, if known, and any other relevant factors which affect the resident's adjustment to the move. The plan shall contain a written evaluation of the effects of the transfer or discharge on the resident and a statement of the action taken to minimize such affects. In addition, the plan shall outline the care and kinds of service which the resident shall receive upon transfer or discharge. Not less than thirty days prior to an involuntary transfer or discharge, a copy of the discharge plan shall be provided to the resident's personal physician if the discharge plan was prepared by the medical director, to the resident and the resident's guardian or conservator, if any, or legally liable relative or other responsible party, if known.

The Facility's discharge plan contains a written evaluation of the effects of the proposed discharge on the resident and the actions taken to minimize such affects. The discharge plan is also properly signed by the Facility's Administrator, the Director of Nursing, and the Social Worker.

The Facility's proposal to discharge the Appellant is in accordance with state statutes and is upheld.

	<u>DECISION</u>		
The Appellant's appeal is DENIED .			
		Iessica Gulianello	

Jessica Gulianello Hearing Officer

Cc:
Director of Social Services
Assistance Director of Nursing

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, 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. 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 his/her 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.