

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

██████████ 2021  
Signature Confirmation

Client ID # ██████████  
Hearing Id. # 1 ██████████

**NOTICE OF DECISION**

**PARTY**

██████████  
████████████████████  
██

**PROCEDURAL BACKGROUND**

On ██████████ 2020, the Department of Social Services (the “Department”) issued ██████████ (the “Appellant”) a Notice of Action stating that she must meet a spend-down for the period of ██████████ 2020, through ██████████, 2021, before her Husky C Medical Assistance for the Aged, Blind and Disabled (“Husky C”) can be activated.

On ██████████ 2020, the Appellant requested an administrative hearing to contest the Department’s action.

On ██████████ 2020, the Office of Legal Counsel, Regulations, and Administrative Hearings (“OLCRAH”) issued a notice scheduling an administrative hearing for ██████████  
██████████

On ██████████ 2021, 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:

██████████, Appellant  
Garfield White, Eligibility Services Worker, Department’s Representative  
Roberta Gould, Hearing Officer

## **STATEMENT OF THE ISSUE**

The issue to be decided is whether the Appellant must meet a spend-down amount before being eligible for Husky C medical assistance because the Department has determined that her applied income exceeds the Medically Needy Income Limit (“MNIL”) for Medicaid.

## **FINDINGS OF FACT**

1. The Appellant is requesting medical assistance for herself and her spouse, [REDACTED]. (Hearing record)
2. The Appellant and her spouse are disabled. (Exhibit 2: SOLQ-I results details)
3. The Appellant resides in [REDACTED], CT. (Appellant’s testimony)
4. In [REDACTED] of 2020, the Appellant received \$563.00 per month in gross Retirement, Survivors, and Disability Insurance benefits (“RSDI”). Effective [REDACTED] 2021, her RSDI benefits increased to \$570.00 gross per month. (Exhibit 2 and Appellant’s testimony)
5. In [REDACTED] of 2020, the Appellant’s spouse received \$960.00 per month in gross RSDI benefits. Effective [REDACTED] 2021, his RSDI benefits increased to \$960.00 gross per month. (Exhibit 2 and Appellant’s testimony)
6. The Appellant and her spouse are receiving Qualified Medicare Beneficiary assistance, through which their Medicare B premiums and co-pays are paid by the Department. (Exhibit 1: NOA dated [REDACTED] and Department’s testimony)
7. On [REDACTED] 2020, the Department determined that the Appellant has a Medicaid spenddown of \$2,781.54 for the period of [REDACTED] 2020, through [REDACTED] 2021. (Exhibit 1)
8. The Appellant nor her spouse have submitted any medical bills to the Department. (Hearing record)
9. The issuance of this decision is timely under Connecticut General Statutes § 17b-61(a), which requires that the decision be issued within 90 days of the request for an administrative hearing. The Appellant requested an administrative hearing on [REDACTED] 2020. Therefore, the decision is due not later than [REDACTED] 2021.

## **CONCLUSIONS OF LAW**

1. Section 17b-2 of the Connecticut General Statutes authorizes the Commissioner of the Department of Social Services to administer the Medicaid program.

2. "The Department's Uniform Policy Manual ("UPM") is the equivalent of a state regulation and, as such, carries the force of law." (*Bucchere v. Rowe*, 43 Connecticut Supp. 175, 178 (1994) (citing Connecticut General Statutes § 17b-10; *Richard v. Commissioner of Income Maintenance*, 214 Connecticut 601, 573 A.2d 712 (1990))).
3. Uniform Policy Manual ("UPM") § 2540.01(C) provides that individuals qualify for medical assistance ("MA") as medically needy if:
  1. their income or assets exceed the limits of the Aid to Families with Dependent Children ("AFDC") or Aid to the Aged, Blind and Disabled ("AABD") programs; and
  2. their assets are within the medically needy asset limit; and
  3. their income either:
    - a. is within the Medically Needy Income Limit ("MNIL"); or
    - b. can be reduced to the MNIL by a spend-down of medical expenses.
4. UPM § 4530.15(A) provides that a uniform set of income standards is established for all assistance units who do not qualify as categorically needy. It further states that the MNIL of an assistance unit varies according to the size of the assistance unit and the region of the state in which the assistance unit resides.
5. UPM § 4510.10(A) provides that the standard of need which is applicable to a particular assistance unit is based on: a. the current region of residence; and b. the appropriate needs group size.
6. UPM § 4530.15(B) provides that the medically needy income limit is the amount equivalent to 143 percent of the benefit amount that ordinarily would be paid under the TFA program to an assistance unit of the same size with no income for the appropriate region of residence.
7. UPM § 4510.10(B) provides that West Simsbury is in Region B.

**The Department correctly determined that the Appellant resides in Region B and that the MNIL for the Appellant's assistance unit of two persons is \$696.41 (\$487.00 x 1.43).**

8. UPM § 5050.13(A) provides that income from Social Security and Veterans' benefits are treated as unearned income in all programs. It further states that this income is subject to unearned income disregards in the AABD and MAABD programs.

**The Department correctly determined that the Appellant's assistance unit's total monthly unearned income in ██████████ 2020, was \$1,511.00 per month (\$563.00 + \$948.00).**

9. UPM § 5030.15( B)(1)(a) provides that the disregard is \$227.00 for those individuals who reside in their own homes in the community or who live as roomers in the homes of others and those who reside in long term care facilities, shelters for the homeless or battered women shelters. Effective January 1, 2008, and each January 1<sup>st</sup> thereafter, this disregard shall be increased to reflect the annual cost of living adjustment used by the Social Security Administration.
10. Agency guidelines effective January 1, 2020, in UPM § 5030.15P provide that for an individual who resides in their own home in the community, reside as a roomer in someone else's home, or reside in a long term care facility, the standard disregard of \$351.00 is subtracted from the individual's gross unearned income.

**The Department correctly applied the standard unearned income disregard of \$351.00 per month to the Appellant's income.**

11. UPM § 5020.72(A)(1)(a) provides that "The Department deems income from:  
  
the spouse of an MAABD applicant or recipient if he or she is considered to be living with the assistance unit member, except in cases involving working individuals with disabilities. In these cases, spousal income is deemed only in determining the cost of the individual's premium for medical coverage (Cross Reference: 2540.85)"

**The Department correctly deemed the Appellant's spouse's income and determined that the Appellant's applied income for ██████████ of 2020, was \$1,160.00 per month ( $\$563.00 + \$948.00 = \$1,511.00 - \$351.00$ ).**

12. UPM § 5520.20(B)(1) provides that a six-month period for which eligibility will be determined is established to include the month of application and the five consecutive calendar months which follow.
13. UPM § 5520.20(B)(5) provides that the total of the assistance unit's applied income for the six-month period is compared to the total of the MNIL's for the same six-months.
14. UPM § 5520.20(B)(5)(b) provides that when the unit's total applied income is greater than the total MNIL, the assistance unit is ineligible until the excess income is offset through the spend-down process.
15. UPM § 5520.25(B) provides that when the amount of the assistance unit's monthly income exceeds the MNIL, income eligibility for a medically needy assistance unit does not occur until the amount of excess income is offset by medical expenses. This process of offsetting is referred to as a spend-down.

**The Department correctly determined that the Appellant's applied income exceeds the MNIL by \$463.59 per month ( $\$1,160.00 - \$696.41$  MNIL) for**

██████████ of 2020.

The Department incorrectly determined that the Appellant's six-month spend-down amount is \$2,781.54 for the period from ██████████ 2020, through ██████████ 2021 (\$463.59 x 6 months). The correct spenddown amount is \$2,876.54 (\$570.00 + \$960.00 = \$1,530.00 - \$351.00 disregard = \$1,179.00 - \$696.41 MNIL = \$482.59/month x 5 months = \$2,412.95 + \$463.59 [██████████] = \$2,876.54 spenddown amount).

On ██████████ 2020, the Department correctly determined that the Appellant's income exceeded the MNIL for the MAABD program and that she must meet a spend-down, but incorrectly calculated the spend-down amount for the period of ██████████ 2020, through ██████████, 2021.

### DISCUSSION

After reviewing the evidence and testimony presented at this hearing, I find that although the Department appears to have incorrectly calculated the Appellant's Husky C Medicaid spenddown amount, it did correctly determine that her assistance unit's applied income exceeds the Medically Needy Income Limit ("MNIL") for Medicaid. The hearing record reflects that both the Appellant and her spouse's monthly RSDI income increased effective ██████████ 2021, resulting in an increase in the overall spend-down amount.

### DECISION

The Appellant's appeal is DENIED.

  
Roberta Gould  
Hearing Officer

Cc: Judy Williams, Social Services Operations Manager, DSS Hartford  
Jessica Carroll, Social Services Operations Manager, DSS Hartford  
Musa Mohamud, Social Services Operations Manager, DSS Hartford  
Jay Bartolomei, Eligibility Supervisor, DSS Hartford  
Garfield White, 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.