

**FILED**

**FEB 11 2015**

**OFFICE OF APPEAL HEARINGS  
DEPT OF CHILDREN & FAMILIES**

STATE OF FLORIDA  
DEPARTMENT OF CHILDREN AND FAMILIES  
OFFICE OF APPEAL HEARINGS



PETITIONER,

Vs.

APPEAL NO. 14F-09375

CASE NO. 

FLORIDA DEPARTMENT OF  
CHILDREN AND FAMILIES  
CIRCUIT: 06 Pinellas  
UNIT: 883CF

RESPONDENT.

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**FINAL ORDER**

Pursuant to notice, the undersigned convened a telephonic administrative hearing in the above-referenced matter on January 7, 2015, at 1:29 p.m.

**APPEARANCES**

For the Petitioner: The petitioner and his parents,   


For the Respondent: Anjali Pant, ES senior human services program specialist

**STATEMENT OF ISSUE**

The petitioner is asserting that the respondent delayed in processing his Medicaid Program applications.

**PRELIMINARY STATEMENT**

The respondent presented one exhibit which were accepted into evidence and marked as Respondent's Exhibits "1". The record was left open for 12 days for

additional evidence. On January 15, 2015, the respondent presented 20 exhibits which were accepted into evidence and marked as Respondent's Exhibits "2" through "21", respectively. On January 19, 2015, the record closed.

### **FINDINGS OF FACT**

1. The petitioner was deriving his eligibility for Medicaid Program benefits, as a Supplemental Security Income (SSI) recipient. On April 28, 2014, Social Security terminated the petitioner's SSI benefits effective May 2014 and extended his SSI recipient Medicaid Program benefits through July 2014.

2. The termination of Medicaid Program benefits by Social Security is considered an application for Medicaid Program benefits through the respondent. The petitioner's eligibility for SSI-Related Medicaid Program benefits needed to be determined. On May 6, 2014, a notice was sent to the petitioner requesting a signed Financial Information Release form and proof of income, notifying the petitioner that the due date to return the information was May 16, 2014. Eligibility cannot be determined without this form and proof of income. The requested information was not received within the allotted time. On May 29, 2014, a Notice of Case Action was sent to the petitioner informing him that his application for SSI-related Medicaid Program benefits was denied.

3. On August 27, 2014, the petitioner reapplied for SSI-Related Medicaid Program benefits. Income indicated on the application was Social Security benefits and child support. The respondent attempted to assist the petitioner in verifying his Social Security benefit amount, but did not receive computer match information for the petitioner from Social Security. On September 2, 2014, a notice was sent to the

petitioner requesting a signed Financial Information Release form and proof of income reported on the application. The due date for this information was September 12, 2014. The requested information was not received within the allotted time. On September 29, 2014, a Notice of Case Action was sent to the petitioner informing him that his application for SSI-Related Medicaid Program benefits was denied.

4. On October 24, 2014, the respondent received verification of the petitioner Social Security benefits. On October 31, 2014, the respondent received the completed Financial Information Release form dated October 21, 2014. The respondent received a second completed Financial Information Release form dated November 7, 2014.

5. On November 25, 2014, the petitioner reapplied for SSI-Related Medicaid Program benefits. As the requested information was received except for verification of child support income, the petitioner was enrolled in a SSI-Related Medically Needy Program with a share of cost effective August 2014.

6. On December 3, 2014, the petitioner's father verified that the petitioner was not receiving child support and the petitioner was not receiving Medicare benefits. On December 4, 2014, a Notice of Case Action was sent to the petitioner informing him that his SSI-Related Medicaid Program benefits were approved effective August 2014.

7. The petitioner and his parents argued that the petitioner could not get his medicine in August 2014, as the respondent did not timely process the petitioner's application and that the petitioner suffered because of this.

#### **CONCLUSIONS OF LAW**

8. The Department of Children and Families, Office of Appeal Hearings has jurisdiction over the subject matter of this proceeding and the parties, pursuant to

§ 409.285, Fla. Stat. This order is the final administrative decision of the Department of Children and Families under Fla. Stat. § 409.285.

9. This proceeding is a de novo proceeding pursuant to Fla. Admin. Code R. 65-2.056.

10. In accordance with Fla. Admin. Code R. 65-2.060(1), the burden of proof was assigned to the petitioner.

11. The Fla. Admin. Code R. 65A-1.205 sets for the eligibility determination process:

(1)(a) The Department must determine an applicant's eligibility initially at application and if the applicant is determined eligible, at periodic intervals thereafter. It is the applicant's responsibility to keep appointments with the eligibility specialist and furnish information, documentation and verification needed to establish eligibility...

(c) If the eligibility specialist determines during the interview or at any time during the application process that the applicant must provide additional information or verification, or that a member of the assistance group must comply with Child Support Enforcement or register for employment services, the eligibility specialist must give the applicant written notice to provide the requested information or to comply, allowing ten calendar days from request or the interview, whichever is later. For all programs, verifications are due ten calendar days from the date of written request or the interview, or 60 days from the date of application, whichever is later...If the applicant does not provide required verifications or information by the deadline date the application will be denied...

(d) In accordance with 42 C.F.R. § 435.911, unusual circumstances that might affect the timely processing of Medicaid applications include applicant delay...

1. Applicant delay is the time attributed to the applicant who does not keep any scheduled appointment or provide requested and required eligibility information or verification. Applicant delay begins the date the applicant does not keep a Department scheduled appointment with either the Department or health professionals and ends the date the applicant keeps that appointment as rescheduled; or, the date the applicant does not provide requested and required information for the initial interview and ends the date the applicant provides the information to the Department...

12. The Fla. Admin. Code R. 65A-1.713 sets forth the SSI-Related Medicaid income eligibility criteria:

(1) Income limits. An individual's income must be within limits established by federal or state law and the Medicaid State Plan. The income limits are as follows:

(a) For MEDS-AD Demonstration Waiver, income cannot exceed 88 percent of the federal poverty level after application of exclusions specified in subsection 65A-1.713(2), F.A.C.

13. As income is necessary to determine eligibility, the respondent followed the rules in requesting the petitioner provide a signed Financial Information Release form and proof of income. The respondent attempted, but was unable to assist the petitioner in obtaining verification of his Social Security benefits. The evidence sets forth that the petitioner provided the requested verification partly in October 2014, November 2014, and the remainder of the verification in December 2014. Therefore, the respondent could not authorize the August 2014 SSI-Related Medicaid Program benefits until December 2014. It is concluded that the delay of the approval of SSI-Related Medicaid Program benefits effective August 2014 was not caused by the respondent, and the two applications were processed as set forth in the rules. As the petitioner's SSI-Related Medicaid Program benefits have been approved effective August 2014, there is no further action to be taken by the undersigned hearing officer.

#### **DECISION**

Based upon the foregoing Findings of Fact and Conclusion of Law, the appeal is denied.

**NOTICE OF RIGHT TO APPEAL**

This decision is final and binding on the part of the Department. If the petitioner disagrees with this decision, the petitioner may seek a judicial review. To begin the judicial review, the petitioner must file one copy of a "Notice of Appeal" with the Agency Clerk, Office of Legal Services, Bldg. 2, Rm. 204, 1317 Winewood Blvd., Tallahassee, FL 32399-0700. The petitioner must also file another copy of the "Notice of Appeal" with the appropriate District Court of Appeal. The Notices must be filed within thirty (30) days of the date stamped on the first page of the final order. The petitioner must either pay the court fees required by law or seek an order of indigency to waive those fees. The petitioner is responsible for any financial obligations incurred as the Department has no funds to assist in this review.

DONE and ORDERED this 11 day of FEB, 2015,

in Tallahassee, Florida.

  
Linda Jo Nicholson

Hearing Officer  
Building 5, Room 255  
1317 Winewood Boulevard  
Tallahassee, FL 32399-0700  
Office: 850-488-1429  
Fax: 850-487-0662  
Email: Appeal\_Hearings@dcf.state.fl.us

Copies Furnished To: [REDACTED] Petitioner  
Office of Economic Self Sufficiency  
NEIL MCMULLEN, JR.