


STATE OF NEW YORK
DEPARTMENT OF HEALTH

REQUEST: May 3, 2017

AGENCY: MAP

FH #: 7527309Q

In the Matter of the Appeal of	:	DECISION
	:	ON
	:	STIPULATION
	:	AFTER
	:	FAIR
from a determination by the New York City	:	HEARING
Department of Social Services	:	

JURISDICTION

Pursuant to Section 22 of the New York State Social Services Law (hereinafter Social Services Law) and Part 358 of Title 18 NYCRR, (hereinafter Regulations), a fair hearing was held on May 31, 2017, in New York City, before an Administrative Law Judge. The following persons appeared at the hearing:

For the Appellant



For the Managed Long Term Care plan

Alicia Jacobs, Centers Plan for Healthy Living, Fair Hearing Representative

ISSUE

Was the May 3, 2017, determination of the managed long term care plan, Centers Plan for Healthy Living to reduce the Appellant's Medical Assistance authorization for Personal Care Services from 24-hour daily constant care ("split-shift") services to 24-hour daily care via "live-in" services correct?

FINDINGS OF FACT

An opportunity to be heard having been afforded to all interested parties and evidence having been taken and due deliberation having been had, it is hereby found that:

1. The Appellant, age eighty (80), has been in receipt of a Medical Assistance authorization, Medicaid, and is enrolled in a Managed Long Term Care plan with Centers Plan for Healthy Living.

2. The Appellant has been in receipt of personal care services via her Managed Long Term Care plan in the amount of 24-hour daily constant care (“split-shift”) services.

3. By written “Authorization Notice” dated May 3, 2017, the Plan advised the Appellant of the Plan’s “approval” of an authorization of “Personal Care Aide level 2 Live-In per diem” services for the period from May 8, 2017, through August 31, 2017.

4. The Plan’s May 3, 2017, fails to identify the fact that the “authorization” of Personal Care Services is not an authorization of a continuing level of services but is, in fact, a reduction of the level of services which the Appellant has been receiving.

5. On May 3, 2017, the Appellant requested this fair hearing.

DISCUSSION

At the hearing the Plan’s representative agreed to withdraw the May 3, 2017, “Authorization Notice” and to continue unchanged the authorization of Personal Care Services in the amount of 24-hour daily constant care (“split-shift”) services for the Appellant.

Based on the Plan’s agreements made at the hearing, no issue remains to be decided with respect to the plan’s notice dated May 3, 2017.

DECISION AND ORDER

With respect to May 3, 2017, determination of the Managed Long Term Care plan, Centers Plan for Healthy Living, to reduce the Appellant’s Medical Assistance authorization for Personal Care Services from 24-hour daily constant care (“split-shift”) services to 24-hour daily care via “live-in” services, the Plan is directed to take the following actions in accordance with the Plan’s agreement at the hearing:

1. Withdraw its May 3, 2017, “Authorization Notice;”
2. Take no further action upon the May 3, 2017, “Authorization Notice;”
3. Restore the Medical Assistance, Managed Long Term Care, authorization of Personal Care Services for the Appellant in the amount of 24-hour daily constant care (“split-shift”) services and continue providing said level of services unchanged.

Should Centers Plan for Healthy Living need additional information from the Appellant in order to comply with the above directives, it is directed to notify the Appellant promptly in writing as to what documentation is needed. If such information is requested, the Appellant must provide same to the Plan in order to facilitate such compliance.

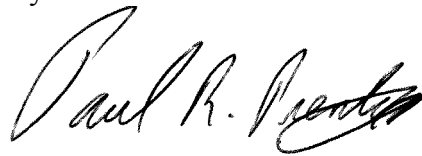
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As required by 18 NYCRR 358-6.4, Centers Plan for Healthy Living must comply immediately with the directives set forth above.

DATED: Albany, New York
06/05/2017

NEW YORK STATE
DEPARTMENT OF HEALTH

By

A handwritten signature in black ink, appearing to read "Paul R. Prentiss", with a stylized flourish at the end.

Commissioner's Designee