

WGIUPD

**GENERAL INFORMATION SYSTEM**

07/19/13

**DIVISION:** Office of Health Insurance Programs

**PAGE 1**

**GIS 13 MA/015**

**TO:** Local District Commissioners, Medicaid Directors

**FROM:** Judith Arnold, Director  
Division of Health Reform & Health Exchange Integration

**SUBJECT:** Fair Hearing Decisions Reversing Agency Denials of Medicaid Applications

**EFFECTIVE DATE:** Immediately

**CONTACT PERSON:** Local District Support Unit  
Upstate (518) 474-8887 New York City (212) 417-4500

The purpose of this General Information System (GIS) message is to remind local departments of social services (LDSS) of action they should take when a fair hearing decision reverses a LDSS denial of a Medicaid application.

At a fair hearing to review a LDSS denial of a Medicaid application, the Medicaid applicant has the burden of proving that the LDSS's denial was incorrect. When the applicant prevails, the fair hearing decision will reverse the LDSS's denial. The LDSS cannot deny the application based on the reason that was set forth in the agency's denial that was reversed.

When a fair hearing reverses a LDSS denial of a Medicaid application and no remaining eligibility factors need to be considered, the LDSS must find the applicant eligible for Medicaid. The LDSS must find the applicant eligible for Medicaid even if the LDSS requests that the New York State Office of Temporary and Disability Assistance review the fair hearing decision to correct an error of law or fact. The original fair hearing decision is binding and must be complied with pending the review.

When a fair hearing decision reverses a LDSS denial of a Medicaid application and one or more remaining eligibility factors need to be considered, the LDSS must continue to process the application and issue a decision as soon as possible. In such cases, the applicant's original application date must be preserved.