

Information Memorandum Transmittal Oregon Eligibility Program



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Number: OEP-IM-22-003

Issue date: 4/20/22

Topic: Other

Due date: 4/20/22

Subject: Hearing Requests: Changes and Procedural Updates

Applies to (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County Mental Health Directors |
| <input checked="" type="checkbox"/> Area Agencies on Aging: Type B | <input type="checkbox"/> Health Services |
| <input checked="" type="checkbox"/> Aging and People with Disabilities | <input type="checkbox"/> Office of Developmental Disabilities Services (ODDS) |
| <input checked="" type="checkbox"/> Self Sufficiency Programs | <input type="checkbox"/> ODDS Children's Intensive In Home Services |
| <input type="checkbox"/> County DD program managers | <input type="checkbox"/> Stabilization and Crisis Unit (SACU) |
| <input type="checkbox"/> Support Service Brokerage Directors | <input type="checkbox"/> Other (<i>please specify</i>): |
| <input type="checkbox"/> ODDS Children's Residential Services | |
| <input type="checkbox"/> Child Welfare Programs | |

Evolving work processes, the statewide roll out of ONE, and the development of Oregon Eligibility Programs (OEP) have identified a need to **clarify** the hearing referral process.

SSP/CAF Hearings is now OEP Hearings and will be taking ownership of aged/disabled SNAP and Non-Magi hearing requests that were historically sent to APD Hearings. OEP Hearings will now be processing these hearing requests with some variances outlined in this transmittal.

OEP hearing requests will now be sent to:

ODHS-OEP.Hearings@dhsosha.state.or.us

APD hearing requests will continue to be sent to:

APD.HEARINGS@dhsosha.state.or.us.

Types of Hearing Requests that will be sent to
ODHS-OEP.Hearings@dhsoha.state.or.us

<p>All SNAP (including aged and disabled) MAGI TANF/REF CASH TA-DVS Child Care</p>	<p>Non-Magi Medical that are not connected to LTC decisions (see types of hearing requests that are sent to APD Hearings for clarification)</p>
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Types of Hearing Requests that will be sent to
APD.HEARINGS@dhsoha.state.or.us:

<p>All LTC Cases OSIPM denials for reason of not meeting LTC criteria SPPC PMDDT GA</p>	<p>Combination LTC/Medical cases Resource Assessments LTC Disqualifications HCW/PSW Terminations ODDS Hearing Requests</p>
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Requests for Administrative Hearings ([Form MSC 0443](#)) received or completed by a SFO or VEC must be promptly screened and submitted to the appropriate Hearings and Rules Unit **within 24 hours**.

Please follow the standardized steps below in processing hearing requests:

- All 443's must be routed to a lead or designated hearings point person to be screened and reviewed regarding the Department's decision prior to submission to the appropriate Hearings unit.
- Attempt a conversation with the customer focusing on resolving the dispute at the SFO or VEC level.
- Fill out and attach the cover sheet ([443C](#)).
- 443's must be sent to the appropriate hearings mailbox within 24 hours, *even if resolved*.

NOTE: Uploading documents to ONE or EDMS, without emailing to the appropriate hearings unit, will not notify or alert the hearings unit and will cause delays in processing. If 443's are submitted to the hearings mailbox without the appropriate pre-screening and without the Expedite/COB documents, the 443 will

be returned to the sender with expectation of completion within the **same 24 hours**.

Continuation of Benefits (COB) and Expedited:

- Cases primarily processed outside of ONE (example: LTC/GA): Follow prior directions found on the APD Staff Tools Hearing Representative Web Page: <http://www.dhs.state.or.us/spd/tools/hearing/Hearing%20Instructions%204-2-21.pdf>.
- Cases primarily processed in ONE: Address any request for Expedited Hearings and/or Continuation of Benefits (COB). Eligibility for expedited and COB procedures can be found in the OPEN/Worker Guide/Cpt. 7/section 1/Page 940.
- Mail applicable notices for expedited and COB to the customer and include signed copies of these with the 443 & 443C upon submission.
 - [5303](#) Denial of Continuation of Benefits
 - [1114](#) Continuation Benefits Approved
 - [1115](#) Expedited Hearing Denial Notice

NOTE: COB approval and denial notices can also be sent through ONE.

- If COB is approved, please follow the instructions on [the Eligibility Override Quick Reference Guide](#), to update the case appropriately.
- Add a case note to ONE regarding the information addressed above. Include notices sent and a clear explanation of how the issue was resolved if applicable.

Signature Requirements on 443:

- Signature requirements vary among programs. Signature requirements to establish a completed 443 are stated on the back of the 443 (i.e. the [447](#)). If a signature is required for the program requested, notify the customer, and arrange for a signature. If multiple programs are requested and one or more requires a signature, do not delay sending the 443/443C to the appropriate Hearings unit because of lack of signature. SNAP and most medical do not require a signature.

Example: *Oregonian requests a hearing for reduction of SNAP and TANF over the phone. The ODHS agent completes the 443 on the Oregonian's behalf, marking both SNAP and TANF. Mail a copy of the 443 to the claimant for signature for TANF. Follow the process outlined above for lead worker or point person review for SNAP.*

443 and 443C:

- All fields on the 443 for Department use must be completed prior to sending to the appropriate Hearings unit.
- Complete the 443C (cover sheet) and send the completed 443 along with the 443C to the appropriate Hearings unit.

Questions or assistance regarding hearing request or decisions regarding COB and expedited can be addressed to ODHS-OEP.Hearings@dhsosha.state.or.us or APD.Hearings@dhsosha.state.or.us. These email boxes are monitored multiple times a day.

If you have any questions about this information, contact:

Contact: OEP Hearings or APD Hearings	
Phone:	Fax:
Email: ODHS-OEP.Hearings@dhsosha.state.or.us APD.Hearings@dhsosha.state.or.us	