

Paul R. LePage, Governor

Mary C. Mayhew, Commissioner

Department of Health and Human Services
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*O.K.
JB 4-27-16*

TO: Mary C. Mayhew, Commissioner
Department of Health and Human Services
221 State Street
11 State House Station
Augusta, ME 04333

DATE MAILED JAN 29 2016

In Re: Seniors Plus- Appeal of Audit Examination Report Transmittal for 2012 Contract

**CORRECTED
RECOMMENDED DECISION**

An administrative hearing was held on November 9, 2015, at Lewiston, Maine based on Seniors Plus' appeal of the Audit Examination Report Transmittal of their 2012 Contract before Norma L. Meyer, Administrative Hearing Officer. The hearing record was left open until November 30, 2015, to allow for the submission of written closing arguments. These documents were received and have been made a part of this hearing record. The hearing record closed November 30, 2015. On January 28, 2016, this Recommended Decision was corrected to state that the issue was for an overpayment for State funded services and did not involve Medicaid/MaineCare funds. Accordingly, the Exceptions and Response period was changed to 20 days and not 15 days.

The Hearing Officer's jurisdiction was conferred by special appointment from the Commissioner, Department of Health and Human Services.

FACTUAL BACKGROUND AND ISSUE PURSUANT TO ORDER OF REFERENCE:

On or about September 30, 2014, the Division of Audit (hereafter "the Department") issued an Audit Examination Report Transmittal for Seniors Plus for the year ending June 30, 2012 that found Seniors Plus had been overpaid in the amount of \$27,698.00 for the period from 07/01/2011 to 06/30/2012. Seniors Plus agreed with the Department that it owed \$1,133.00 for

other services for fiscal year ended June 30, 2012. Therefore, the amount in dispute is \$26,565.00. On November 21, 2014, Seniors Plus appealed the Audit Examination Report Transmittal. On January 31, 2015, the Department issued a Final Informal Review Decision that upheld the Audit Report indicating that Seniors Plus had not followed the cost settlement methodology agreed upon in Contracts: OES-12-351, OES-12-351A, and OES-12-351B.

Pursuant to an Order of Reference dated April 2, 2015, this matter was assigned by James D. Bivins, Esq., Chief Administrative Hearing Officer to the undersigned Hearing Officer to conduct an administrative hearing and to submit to the Commissioner written findings of fact and recommendations on the following issue:

Was the Department correct when for the fiscal year ending June 30, 2012, it determined that Seniors Plus owes the Department \$27,698.00 because Seniors Plus did not follow the cost sharing settlement method as illustrated in the agreement pro forma? See, Exhibit HO-2.

APPEARING ON BEHALF OF APPELLANT:

Betsy Sawyer-Manter, Executive Director, Seniors Plus
Brian LaCroix, Finance Manager, Seniors Plus

APPEARING ON BEHALF OF THE DEPARTMENT:

Halliday Moncure, AAG
Anthony Madden, Deputy Director, Division of Audit

ITEMS INTRODUCED INTO EVIDENCE

Hearing Officer Exhibits:

- HO-1. Notice of Hearing dated 04/08/2015
- HO-2. Order of Reference dated 04/02/2015
- HO-3. Fair Hearing Report Form dated 03/30/2015
- HO-4. Reschedule request from Seniors Plus dated 5/12/2015
- HO-5. Reschedule letter dated 5/20/2015
- HO-6. Reschedule correspondence
- HO-7. Reschedule letter dated 09/16/2015
- HO-8. Notice of appearance from AAG Moncure dated 10/06/2015

HO-9. E-mail response to parties regarding issuance of Corr. Recommended Decision dated 01/28/2016

Department Exhibits:

- D-1. Maine Uniform Accounting and Auditing Practices for Community Agencies (MAAP) 10-144 CMR Chapter 30, Effective July 1, 2011
- D-2. Maine Uniform Accounting and Auditing Practices for Community Agencies (MAAP) 10-144 CMR Chapter 30, Effective October 6, 2011
- D-3. Federal Regulation, OMB Circular No. A-122
- D-4. Federal Regulation, OMB Circular No. A-110
- D-5. Seniors Plus Agreement #OES -12-351, in the amount of \$8,120 million for the period 7-1-11 to 6-30-12
- D-6. Seniors Plus First Amended Agreement #OES-12-351A, in the amount of \$8,665 million
- D-7. Seniors Plus Second Amended Agreement #OESW-12-351B, in the amount of \$9,215 Million
- D-8. Seniors Plus Financial Statements, Reports and Agreements, Settlement Forms for the year ended June 30, 2012
- D-9. September 30, 2014 DHHS Audit Examination Report Transmittal for Seniors Plus for year Ended June 30, 2012
- D-10. November 21, 2014 Seniors Plus Appeal
- D-11. January 31, 2015 DHHS Audit Appeal Decision
- D-12. March 23, 2015 Seniors Plus Appeal
- D-13. Email August 24, 2015, from Seniors Plus (Betsy Sawyer-Manter) to DHHS (Ricker Hamilton, Herbert Downs)
- D-14. MAAP rules effective 07/01/2012
- D-15. Closing Arguments
- D-16. E-mail request correct from AAG Moncure dated 01/28/2016

Seniors Plus Exhibits:

- A-1. E-mail reference wait lists dated 11/16/2011
- A-2. Seniors Plus unit summary for 2012 Contract
- A-3. Seniors Plus Weekly Status Report for 06/24/11-06/30/2011

- A-4. Seniors Plus Weekly Status Report for 10/24/2011-10/28/2011
- A-5. Seniors Plus Weekly Status Report for 06/24/2012-06/30/2012
- B-1. 10-144 Chapter 30 Appendices, p18
- B-2. E-mail from M. McCluskey to Audit dated 09/24/2014
- B-3. E-mail from M. McCluskey to Audit dated 09/23/2014
- C-1. Seniors Plus Home Based Care program budget
- C-2. Seniors Plus Agreement for Special Services Amendment signed 10/25/2012
- D-1. Closing Arguments

RECOMMENDED FINDINGS OF FACT:

1. Notice of these proceedings was given timely and adequately. Seniors Plus made a timely appeal.
2. Seniors Plus is a "Tier Two"¹ private non-profit corporation doing business in the State of Maine.
3. Seniors Plus is licensed as a Home Care Coordination Agency (HCCA), and it provides Home Care Coordination Services to eligible Maine residents pursuant to Section 63 of Office of Elder Services (OES) Policy Manual. See, Exhibit D-14.
4. On or about July 1, 2011, Seniors Plus signed a contract (Contract) with the Department to provide Direct Services and Home Care Coordination Services for the agreed upon amount of \$8,120,000.00 for the fiscal year July 1, 2011 through June 30, 2012. This Contact is identified as OES-12-351. See, Exhibit D-5.
5. The Contact provided State funds for two programs administered by Seniors Plus. The Contract budgeted \$6,407,958.00 for Direct Services which are "cost shared"² and

¹ TIER 2 - Audited Financial Statements: If a community agency has \$300,000 or greater in total annual agreement expenditures of agreement funding (state and federal pass-through) from the Department, they must at a minimum have an entity-wide audit of their financial statements and a compliance audit of the supplemental SAO(s) prepared by a qualified Independent Public Accountant (IAP) in accordance with Section .03 of these rules. See, Exhibit D-1, p6.

² When using the cost shared/cost settled methodology, the agency reports the actual revenues and expenditures attributable to each program to the Department. After adjustments are made, the Department determines if there is any money due the Department or owed to the agency. See, Exhibit D-15.

\$1,712,042.00 Home Care Coordination Services which are "fee for services"³. See, Exhibit D-5.

6. The Contract provided two Rider F-1 Agreement Settlement Forms (ASFs). The Rider F-1 forms identified the two programs and the settlement methodology for each program. See, Exhibit D-5.
7. On November 14, 2011, Seniors Plus signed an amendment agreement to its Contract with the Department that increased its budget from \$8,120,000.00 to \$8,665,000.00, which was an increase of \$545,000.00. This amended Contract is identified as OES-12-351A. See, Exhibit D-6.
8. The November 14, 2011 amendment provided \$6,810,266.00 for Direct Services and \$1,854,734.00 for Home Care Coordination Services. See, Exhibit D-6.
9. On March 26, 2012, Seniors Plus signed another amendment agreement to its Contract with the Department that increased its budget from \$8,665,000.00 to \$9,215,000.00, which was an increase of \$550,000.00. This second amended Contract is identified as OES-12-351B. See, Exhibit D-7.
10. The March 26, 2012 amendment provided \$7,383,036.00 for Direct Services and \$1,831,965.00 for Home Care Coordination Services. See, Exhibit D-7.
11. The Contract and amendments signed by Seniors Plus for the purpose of this appeal are governed by MAAP rules effective July 1, 2011 and MAAP rules effective October 1, 2011. See, Exhibits D-1 & D-2.
12. The Contract and amendments also incorporated the Federal Office of Management and Budget (OMB) Circular A-110 and Circular A-122. See, Exhibits D-3 & D-4.

³ Using the fee for service settlement method, the amount of money paid to the agency is compared to the amount of the agency's reported earnings to determine if there is any money due to the Department or to the agency. See, Exhibit D-15.

13. Pursuant to MAAP rule, Section .2G, Seniors Plus was required to submit a Contract Closeout Report to the Department by no later than March 31, 2013. See, Exhibits D-1 & D-10.
14. The Department received Seniors Plus' Contract Closeout Report on July 29, 2013. See, Exhibit D-10.
15. On September 30, 2014, the Department issued an Examination Report Transmittal based on an audit it had conducted on Seniors Plus. The Report found that Seniors Plus owed the Department \$27,698.00 for the fiscal year from July 1, 2011 to June 30, 2012 based on its non-compliance with MAAP standards. See, Exhibit D-9.
16. The Summary of Agreement and Close Out report showed that Seniors Plus agreed that it owed the Department \$1,133.00 for the fiscal ended June 30, 2012. See, Exhibit D-9.
17. Seniors Plus had spent a total of \$7,409,601.00 for Direct Services for fiscal year ended June 30, 2012, which exceeded its Contract by \$26,565.00. See, Exhibit D-8.
18. Seniors Plus reallocated \$26,565.00 from its Home Care Coordination funds, which are settled as Fee for Service to reimburse the Direct Services program. See, Exhibit D-8.
19. On November 21, 2014, Seniors Plus appealed the Department's audit decision. See, Exhibit D-10.
20. On January 31, 2015, the Department issued its Appeal Decision, which upheld the Examination Report Transmittal issued on September 30, 2014. See, Exhibit D-11.
21. On March 30, 2015, Seniors Plus requested a hearing on the Appeal Decision. See, Exhibit HO-3.
22. Seniors Plus reallocated \$26,565.00 of unexpended funds to cover Direct Service cost for fiscal year ended June 30, 2012, which was in violation of the MAAP rules.
23. The Contract signed by Seniors Plus on July 1, 2011 provided that Seniors Plus may formally request a reallocation of unexpended funds within 60 days of the end of the agreement by

submitting the required information to the Agreement Administrator pursuant to the rules outlined in OES-12-351-Rider A, page 3. See, Exhibit D-5.

24. Seniors Plus did not request a budget revision for the Contact ended June 30, 2012.

RECOMMENDED DECISION:

The Department was correct when it found that for the fiscal period July 1, 2011 through June 30, 2012, Seniors Plus owed an overpayment in the amount of \$27,698.00, pursuant to OES-12-351, OES 12-351A, and OES 12-351-B, because Seniors Plus did not follow the cost sharing settlement method as illustrated in the agreement pro forma.

REASON FOR RECOMMENDATION:

The Contract and amendments signed by Seniors Plus for the purpose of this appeal are governed by MAAP rules effective July 1, 2011 and MAAP rules effective October 1, 2011. See, Exhibits D-1 & D-2. The Contract and amendments also incorporated the Federal Office of Management and Budget (OMB) Circular A-110 and Circular A-122. See, Exhibits D-3 & D-4.

On July 1, 2011, Seniors Plus signed a Contract with the Department identified as OES-12-351, in which Seniors Plus agreed to provide Home Care Coordination Services to consumers for the total amount of \$8,120,000.00 for the fiscal year from July 1, 2011 through June 30, 2012. See, Exhibit D-5. The Contract provided State funds for two separate programs administered by Seniors Plus. The Contract budgeted \$6,407,958.00 for Direct Services which are "cost settled" and \$1,712,042.00 for Home Care Coordination Services, which are a Fee for Services program which are "cost shared". Id. The June 21, 2011 Contract provided two Rider F-1 Agreement Settlement Forms (ASFs). The Rider F-1 forms identified the two programs and the settlement methodology for each program. Id.

On November 14, 2011, Seniors Plus signed an amendment agreement to its Contact with the Department that increased its budget from \$8,120,000.00 to \$8,665,000.00, which was an increase of \$545,000.00. This amended Contact is identified as OES-12-351A. See, Exhibit D-6.

The November 14, 2011 amendment provided \$6,810,266.00 for Direct Services and \$1,854,734.00 for Fee for Service. The amendment also included two Rider F-1 ASP forms, one for each program. Id.

On March 26, 2012, Seniors Plus signed another amendment agreement to its Contract with the Department that increased its budget from \$8,665,000.00 to \$9,215,000.00, which was an increase of \$550,000.00. This second amended Contract is identified as OES-12-351B. See, Exhibit D-7. The March 26, 2012 amendment provided \$7,383,036.00 for Direct Services and \$1,831,965.00 for Fee for Services. The amendment also included two Rider F-1 ASP forms, one for each program. Id.

On September 30, 2014, the Department issued an Examination Report Transmittal based on the Department's audit of Seniors Plus for the fiscal year ending June 30, 2012. See, Exhibit D-9. The examination Report stated (in relevant part), "1. **Agreement Close Out Summary:** The Report indicates there is a balance of \$27,698.00 due to the Department to finalize the agreements ended in the year ended June 30, 2012. 2. **Findings:** The Report indicates three instances of non-compliance with MAAP standards; Pro-forma presentation and settlement, late submission of financial statements and due balances not promptly repaid to the Department. ..." Id. On page two of the Department's Examination Report, it stated the specifics of Seniors Plus' non-compliance. It states (in relevant part), "Finding 1. The agency did not follow the presentation and settlement as reflected in the agreement Pro-Forma on the Schedule of Agreement Operations (SAO) and the Agreements Settlement Forms (ASFs). MAAP Section .02,D,2 states "The form and method of agreement supplement referenced in the agreement Contract Compliance Rider will be used to determine the final settlement." The Pro-Forma ASFs for agreement OES-12-351B separated the settlements into two programs: Direct Services (cost settled) and Home Care Coordination (fee-for-service). These separate presentations should have been reflected on the SAO. In addition, the agency included all revenues and expenses on one cost settled ASF, removing dollar for dollar the fee for service program. The agreement Pro-Forma ASFs settled each program separately. We have separated the above programs and agreements on our Exhibit A, and made an adjustment on Exhibit A-1 to remove the fee for service revenues and expenses from the pro-forma. This results in a deficit for Direct Services and an overpayment by the Department for Home Care Coordination by \$26,565.00. In the future, we recommend the agency follow the settlement as described in the Pro-Forma ASFs.

Findings 2: The MAAP submission was received on July 29, 2013. MAAP standards, Section 0.2G requires Tier 2 agencies to submit the required financial statements, schedules, and reports no later than nine (9) months after the end of the agency's fiscal year or in this instance March 31, 2013. Future MAAP submissions must be submitted on a timely basis. Finding 3: The MAAP reports the fiscal year ending June 30, 2012 indicated unpaid balances due to the Department for agreements OES-12-194 A and CDC-11-1128. OMB Circular A-110, Subpart D_.71(b) states that a recipient shall liquidate all obligations incurred under an award no later than 90 calendar days after the funding period. We recommend that in the future the agency remit all balances identified in the ASFs as due to the Department within 90 days after the ending date of the agreement or sooner if specified in the agreement." Id.

On November 21, 2014 Seniors Plus appealed the Examination Report Transmittal. See, Exhibit D-10. In its appeal letter, Seniors Plus indicated stated that it agreed with all of the contract settlements the Department had provided except for the settlement of the Home Based Program identified as OES-12-351B agreement. Seniors Plus asserted (in relevant part), "The Seniors Plus agreement ES-12-351B (and amendments) contains one appropriation of general fund's money from the state with a final total of \$9,215,000. In this agreement it has one budget in which the money is divided into three parts. 1) HCCA fees, which is \$1,514,964, 2) HBC Co-pay funding, which is \$317,000, and 3) HBC Direct Services \$7,383,036. This agreement is then settled in two different reimbursement methodologies: Fee for Services (four the HCCA and HBC Co-pay funding, and Cost Shared (for Direct service Cost Reimbursement). As a result of the fiscal year, Seniors Plus was under in the number of coordination units (PMPM) compared to budget. This amount \$26,565 was reallocated to cover services (direct service costs) to the consumers still under coordination plans of care rather than amending future agreements. As these funds are from one appropriation under one budget and as also indicated under Rider A of the Agreement, it was our understanding the agreement allowed for a reallocation of unexpended funds regardless of settlement methodologies. We feel based on MAAP IV Section 4-C-3 that we have complied with the agreement. Therefore, we disagree with the Examination Report for the \$26,565 amount due out of the \$27,698 as indicated. We feel the Agreement (OES-12-351B) and MAAP does direct us to break out these two components in the settlement. If the Department of Audit directs us prior to the end of the agreement to request a budget reallocation we will do so going forward. We therefore asked the Department to rescind the \$26,565 recoupment." Id.

The Department alleged that Seniors Plus had failed to comply with MAAP Section .02,D,2., which required that agencies follow the presentation and settlement rules per the Pro-Forma agreement pursuant to the Schedule of Agreement Operations (SAO) and the Agreements Settlement Forms (ASFs). MAAP Section .02,D,2 states "The form and method of agreement supplement referenced in the agreement Contract Compliance Rider will be used to determine the final settlement." Seniors Plus' Pro-Forma ASFs agreement OES-12-351B required that it separate the settlements into two programs: Direct Services (cost settled) and Home Care Coordination (fee-for-service). These separate presentations must comply with the SAO. The agency must also include all revenues and expenses on one cost settled ASF, removing dollar-for-dollar the fee for service program. The agreement Pro-Forma ASFs settled each program separately. This resulted in a budget deficit for Direct Services and an overpayment by the Department for Home Care Coordination by \$26,656.

Seniors Plus' Executive Director, Betsy Sawyer-Manter stated that she considered the Home Based Care program to be one program. She explained that Seniors Plus is subcontracted by the State under a very large contract to deliver services across the State to people who are not MaineCare eligible, but are income eligible and disabled. These services are intended to help people remain in their homes instead of more costly institutions. Mrs. Sawyer-Manter said that the Fee for Services part of the program pays for social workers and nurses who are the coordinators for the consumers who receive services through this program. She stated that Seniors Plus receives a per-member-per month payment for the consumers who are actively enrolled for that month and they also collect copayments from those consumers.

Mrs. Sawyer-Manter explained that when establishing the budget for a fiscal year, they must rely on historical data to determine the amount of funds needed to run its programs. She stated that Seniors Plus comes up with an estimate of the fee for services budget based on how many consumers are enrolled and the budget is prospective. Mrs. Sawyer-Manter reported that for 2012, they knew that the amount of money in the contract was insufficient and Seniors Plus requested permission from the Department to establish a wait list. See, Exhibit A-1. She indicated Seniors Plus had received approval to create a wait list on November 16, 2011, which was five months into the contract year. Id. Mrs. Sawyer-Manter explained that when Seniors Plus found that it was over the budget allotment for Direct Services, it transferred the funds from the

Home Care Coordination Fee for Services funds. She asserted that because there were only two lines; the Fee for Service and the Direct Service lines, Seniors Plus was allowed to transfer funds between the two lines because the amount required did not exceed the 10% rule. See, Exhibit B-1. Mrs. Sawyer-Manter said that they had interpreted the 10% rule to mean that Seniors Plus could move money between lines without consequence. She indicated that they had not considered that the lines had two different cost settlement methods. Mrs. Sawyer-Manter stated that Seniors Plus' position is that they took the \$26,565.00 not to use in an unrelated activity but to use it to pay for direct services under the Home Based Care program under Section 63.

The rule Mrs. Sawyer-Manter referred to as the "10% rule" is found in MAAP Rules, Section .04, B, 2, under Revisions of Budgets and Program Plans. See, Exhibit D-1. It states, "The community agency shall request prior written approval for budget revisions whenever one or more of the following occur. (a) The total expenses in any category (personnel, equipment, subcontract, all other) exceeds the debt amount for that category by at least ten percent or \$1,000, whichever is greater; (b) Total program income differs from the budgeted amount by at least ten percent or \$5,000, whichever is greater; (c) no one budgeted equipment items are substituted for specific budgeted equipment items (equipment is defined in the federal circular), and (d) are not in budgeted line items in excess of \$1,000. The community agency may request a budget revision at any time. If approval is not granted, costs that exceed the above thresholds shall be deemed questionable costs." Id.

Audit Program Manager, Tony Madden responded to Mrs. Sawyer-Manter's testimony regarding the 10% rule. He explained that the 10% rule did not apply to the Home Care Coordination program or the Direct Services program involved in the reallocation of funds. He indicated that the 10% change applied to operating expenses, e.g., rent, personnel, etc... Mr. Madden stated that MAAP rules required that Seniors Plus request a budget revision in order to reallocate funds. There was no dispute, Seniors Plus did not file a request for a budget revision, and or receive approval from the Department prior to transferring funds from the Home Care Coordination program to the Direct Services program.

At the hearing, this Hearing Officer asked Mrs. Sawyer-Manter if she had any policy or instruction memo that stated that Seniors Plus was allowed to transfer funds from one program to another. She indicated she did not.

Mrs. Sawyer-Manter also stated that it had based its permission to transfer funds on MAAP IV Section 4-C-3, and that it felt that it had complied with the Contract. See, Exhibit D-14. The Department stated that MAAP IV Section 4-C-3 was not in effect until after June 30, 2012. The MAAP rules in effect required that Seniors Plus seek prior approval before moving funds from one program to another.

The Hearing Officer finds that based on the evidence and testimony, Seniors Plus failed to comply with the MAAP rules and its Contract with the Department when it transferred \$26,565.00 from its Home Care Coordination program funds to its Direct Services program. Pursuant to the July 1, 2011 Contract and its final amendment signed on or before November 14, 2011, Seniors Plus was allocated \$7,383,036.00 in funds for its Direct Services Program for fiscal year ending June 30, 2012. Seniors Plus spent \$7,409,601.00 for Direct Services, which exceeded its funding by \$26,565.00. Seniors Plus reallocated \$26,565.00 from its HCC Fee for Services program to make up the budget deficit. Seniors Plus argued that it believed that the program was one program. However, the Contract and amendments clearly show that the funding is for two different types of services with two distinct settlement methodologies. Seniors Plus argued that based on its interpretation of the 10% rule, it was allowed to reallocate funds between programs. However, even if the 10% rule had applied to this situation; the rule required that the agency request approval for a budget revision. Seniors Plus did not request a budget revision. Therefore, Seniors Plus did not follow the cost sharing settlement method as illustrated in this agreement pro forma.

Accordingly, the Hearing Officer recommends that the Commissioner find that Seniors Plus did not follow the cost sharing settlement method as illustrated in the agreement pro forma. Seniors Plus owes the Department \$26,565.00, and the agreed amount of \$1,133.00, for a total of \$27,698.00 for fiscal year ended June 30, 2012.

CITATIONS:

Maine Uniform Accounting and Auditing Practices for Community Agencies (MAAP) 10-144
CMR Chapter 30, Effective July 1, 2011

Maine Uniform Accounting and Auditing Practices for Community Agencies (MAAP) 10-144

CMR Chapter 30, Effective October 6, 2011

Federal Regulation, OMB Circular No. A-122

Federal Regulation, OMB Circular No. A-110

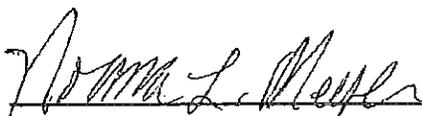
Maine Uniform Accounting and Auditing Practices for Community Agencies (MAAP) 10-144

CMR Chapter 30, Effective July 1, 2012

EXCEPTIONS AND RESPONSES:

THE PARTIES MAY FILE WRITTEN RESPONSES AND EXCEPTIONS TO THE ABOVE RECOMMENDATIONS. ANY WRITTEN RESPONSES AND EXCEPTIONS MUST BE RECEIVED BY THE DIVISION OF ADMINISTRATIVE HEARINGS WITHIN TWENTY (20) CALENDAR DAYS OF THE DATE OF MAILING OF THIS RECOMMENDED DECISION. A REASONABLE EXTENSION OF TIME TO FILE EXCEPTIONS AND RESPONSES MAY BE GRANTED BY THE CHIEF ADMINISTRATIVE HEARING OFFICER FOR GOOD CAUSE SHOWN OR IF ALL PARTIES ARE IN AGREEMENT. RESPONSES AND EXCEPTIONS SHOULD BE FILED WITH THE DIVISION OF ADMINISTRATIVE HEARINGS, 11 STATE HOUSE STATION, AUGUSTA, ME 04333-0011. COPIES OF WRITTEN RESPONSES AND EXCEPTIONS MUST BE PROVIDED TO ALL PARTIES. THE COMMISSIONER WILL MAKE THE FINAL DECISION IN THIS MATTER.

Dated: January 28, 2016

Signed: 
Norma L. Meyer, J.D.
Administrative Hearing Officer

cc: Halliday Moncure, AAG

Betsy Sawyer-Manter, Executive Director, Seniors Plus

Tony Madden, Program Manager, Division of Audit