## **800 APPEALS**

- **801** Administrative hearings are available to persons, herein referred to as petitioners, who disagree with determinations of employment or licensure disqualification made by the Office of Long Term Care as described in these regulations. These provisions do not apply to a person's challenge of the record obtained from the Bureau (see Section 207 of these regulations).
- **802** When a petitioner wishes to appeal, he/she may do so by mailing a written notice of appeal to Appeals and Hearings (Slot 1001), Office of Chief Counsel, Arkansas Department of Health and Human Services, P.O. Box 1437, Little Rock, Arkansas 72203. The notice shall be mailed by certified mail, return receipt requested. The notice of appeal shall state the following:
- 1. Name of the petitioner;
- 2. Address of the petitioner;
- Date of birth of the petitioner;
- 4. Phone number, if any, of the petitioner;
- 5. The petitioner's place of employment;
- 6. A short statement explaining why the petitioner believes the determination/decision is in error.
- **803** The notice of appeal must be received within 30 calendar days from the mailing date of the notification document of the determination of employment disqualification or waiver denial. No appeal shall be accepted prior to such a determination/decision.
- **804** A hearing shall be conducted by the Appeals and Hearings Section, Office of Chief Counsel, Department of Health and Human Services. The procedures to conduct the hearing are as follows:
- 1. The hearing record will contain all documents, exhibits and testimony admitted into evidence by the hearing officer. Within 20 calendar days of receipt of notice that a petitioner has requested a hearing, the petitioner and the Office of Long Term Care will prepare a file to be submitted to the Appeals and Hearings Section, and mail a copy of the file by certified mail, return receipt requested, to the other party. The file will contain only documentary evidence supporting or tending to support each party's allegations. The Office of Long Term Care will also submit an Administrative Hearing Statement summarizing the determination/decision. This statement is not evidence. Only such portions of each file as are

determined by the hearing officer to be relevant shall be included in the Administrative Hearing Record.

2. Both parties will be advised by the Appeals and Hearings Section via certified mail, return receipt requested, that they have ten (10) calendar days from the date the certified mail receipt was signed to review the hearing file and submit a request to subpoena witnesses. The request shall include the name, address and telephone number of all witnesses not employed by the Department of Health and Human Services (DHHS). DHS employees will be expected to attend hearings and present testimony without the benefit of a subpoena and will be notified by the Appeals and Hearings Section of their required presence at the hearing. Each party will be notified of any witnesses requested and will have five (5) working days from the receipt of this notice to request subpoenas for rebuttal witnesses.

The Department of Health and Human Services, Office of Chief Counsel, will issue the subpoenas, pursuant to the terms and authority of Ark. Code Ann. § 20-76-103.

- 3. After the time frame has expired for subpoenaing witnesses, the hearing officer will schedule the hearing to afford the petitioner, the Office of Long Term Care, and their attorneys, if any, at least ten (10) calendar days notice of the date, place and time of the hearing. The scheduling letter, sent via certified mail with return receipt requested, shall also contain the name of the hearing officer who will conduct the hearing. In the event the petitioner, the Office of Long Term Care representative, or an attorney representing the petitioner suffers from illness or cannot attend the hearing due to scheduling conflicts, that party may request the hearing be continued. The hearing will be rescheduled by the hearing officer upon a showing of good cause. A request for continuance made by the petitioner or the petitioner's attorney will constitute a waiver of any objection as to timeliness of the hearing. In each case, the hearing and hearing record must be completed within one hundred twenty (120) calendar days of receipt of the request for a hearing.
- 4. The hearing will take place at a place and time convenient for the petitioner.
- 5. If the petitioner fails to appear for the hearing and does not contact the Appeals and Hearings Section prior to the date of the hearing of his/her inability to attend, the appeal will be deemed abandoned. The petitioner will be advised of this fact in the scheduling letter.
- 6. It is the responsibility of the Office of Long Term Care to designate a representative prior to the time of the hearing. The representative should be familiar with the circumstances of the determination/decision and be able to summarize the pertinent aspects of the situation and present the documentation to support the basis for the determination/decision. The representative should

also be able to answer questions posed by the petitioner or the hearing officer relative to the issues and should be prepared to cross examine adverse witnesses. The representative may request the services of an Office of Chief Counsel attorney for representation at the hearing.

- 7. If any party is to be represented by an attorney, notice shall be given to all parties and to the Appeals and Hearings Section at least ten (10) calendar days prior to the hearing. Failure to furnish notice shall entitle other parties to a continuance to obtain counsel. Petitioner's failure to furnish notice shall constitute a waiver of objection as to timeliness of the hearing.
- 8. The hearing will be conducted by a hearing officer from the Appeals and Hearings Section who had no part in the determination/decision upon which the hearing is being conducted.
- 9. The petitioner may be accompanied by friends or other persons and may be represented by a friend, legal counsel, or other designated representative.
- 10. The hearing officer may not review the case record or other material either prior to or during the hearing unless such material is made available to the petitioner or his/her representative.
- 11. The hearing will be conducted in an informal but orderly manner. The hearing officer will explain the hearing procedure to the petitioner. The administrative hearing statement will be read by the Office of Long Term Care representative who will present his/her case which includes introducing evidence and questioning and witnesses. After completion of the Office's case, the petitioner's case will be presented. This includes the opportunity to present witnesses, advance arguments, offer additional evidence, question the representative, and to confront and cross examine adverse witnesses. If the petitioner is unable to present his evidence in a logical manner, the hearing officer will assist him/her. Questioning of all parties will be confined to the issue(s) involved.
- 12. The hearing officer will prepare a comprehensive report of the proceedings. The report will consist of an introduction, recommended findings of fact, conclusions of law and decision. The report shall be submitted to the Director of the Division of Medical Services who, after reviewing the record, may accept, reverse or remand the report. If the Director accepts the report, such acceptance shall be reduced to writing and shall constitute the final agency determination. That determination shall be mailed to the petitioner and the Office of Long Term Care. If the Director remands the report, the hearing officer shall proceed in accordance with the instructions contained in the remand determination. The concluding determination made by the Director shall constitute the final agency determination. The determination shall be mailed to the petitioner and the Office of Long Term Care.

**805** Any further review must be pursued in accordance with the Administrative Procedure Act, Arkansas Code Annotated § 25-15-101 et seq.