

Supreme Court of the State of New York  
Appellate Division: Second Judicial Department

D36896  
G/hu

\_\_\_\_\_AD3d\_\_\_\_\_

Argued - December 3, 2012

MARK C. DILLON, J.P.  
RUTH C. BALKIN  
CHERYL E. CHAMBERS  
ROBERT J. MILLER, JJ.

2011-09760

DECISION & ORDER

In the Matter of Signature Health Center, LLC,  
appellant, v New York State Office of Medicaid  
Inspector General, respondent.

(Index No. 8251/11)

Sanders Law Firm, PLLC, Garden City, N.Y. (Craig B. Sanders of counsel), for  
appellant.

Eric T. Schneiderman, Attorney General, New York, N.Y. (Michael S. Belohlavek  
and Simon Heller of counsel), for respondent.

In a proceeding pursuant to CPLR article 78, inter alia, to compel the final  
adjudication of the petitioner's "pending" Medicaid claims and to review the determination of the  
New York State Office of the Medicaid Inspector General, dated on or about December 15, 2010,  
denying payment on some of the petitioner's previously "pending" Medicaid claims, the petitioner  
appeals from a judgment of the Supreme Court, Nassau County (Adams, J.), dated August 8, 2012,  
which, in effect, dismissed the proceeding.

ORDERED that the judgment is affirmed, with costs.

The Supreme Court properly, in effect, dismissed so much of the proceeding as  
sought an order directing the final adjudication of the petitioner's "pending" Medicaid claims and to  
compel the respondent to provide the petitioner with electronic remittance advice as to the result of  
the adjudication for each claim in accordance with an order of the Supreme Court, Nassau County  
(McCarty III, J.), dated August 16, 2010, issued in a prior proceeding (*Matter of Signature Health*

December 26, 2012

Page 1.

MATTER OF SIGNATURE HEALTH CENTER, LLC v NEW YORK  
STATE OFFICE OF MEDICAID INSPECTOR GENERAL

*Ctr., LLC v New York State Dept. of Health*, 29 Misc 3d 769 [Index No. 6610/10], *affd* 91 AD3d 959), as duplicative of the relief sought in the prior proceeding (*see* CPLR 3211[a][4], [5]). The remainder of the petition, which sought to challenge the respondent's determination denying payment on some of the petitioner's previously "pending" Medicaid claims, is barred by the applicable four-month statute of limitations, which began to run when the administrative determination at issue became final and binding upon the petitioner (*see* CPLR 217[1]). The final determination as to these claims was made by the respondent on or about December 15, 2010, and provided to the petitioner's counsel on December 20, 2010. The latest date on which the determination at issue became final and binding on the petitioner was December 30, 2010, when the respondent informed the petitioner's counsel of its position that "the adjudication process is complete." The petitioner did not commence this proceeding until June 3, 2011, more than five months later. Accordingly, the judgment, in effect, dismissing the proceeding in its entirety, must be affirmed, albeit, in part, on grounds different from those relied upon by the Supreme Court.

DILLON, J.P., BALKIN, CHAMBERS and MILLER, JJ., concur.

ENTER:

  
Aprilanne Agostino  
Clerk of the Court