

# State of West Virginia DEPARTMENT OF HEALTH AND HUMAN RESOURCES Office of Inspector General Board of Review 9083 Middletown Mall White Hall, WV 26554

Earl Ray Tomblin Governor		Michael J. Lewis, M.D., Ph.D. Cabinet Secretary	
	February 27, 2012	•	
Dear:			

Attached is a copy of the Findings of Fact and Conclusions of Law for your hearing held on February 24, 2012. Your hearing request was based on the Department of Health and Human Resources' proposal to terminate your benefits and services through the Medicaid Aged/Disabled (HCB) Title XIX Waiver Services Program.

In arriving at a decision, the State Hearing Officer is governed by the Public Welfare Laws of West Virginia and the rules and regulations established by the Department of Health and Human Resources. These same laws and regulations are used in all cases to assure that all persons are treated alike.

Eligibility for the Aged/Disabled Waiver Program is based on current policy and regulations. Some of these regulations state as follows: The Aged/Disabled (HCB) Title XIX Waiver Services Program is granted to those individuals who meet all eligibility requirements. One of these requirements is that the individual must qualify medically. Eligible individuals are those who qualify medically for a nursing facility level of care but have chosen the waiver program as a means to remain in their home where services can be provided. [Aged/Disabled (HCB) Services Manual Section 501]

Information submitted at the hearing fails to demonstrate that your continue to need a sufficient number of services and the degree of care required to medically qualify you for the Aged/Disabled Home and Community Based Waiver Services Program.

It is the decision of the State Hearing Officer to **uphold** the Department's proposal to terminate your benefits and services provided through the Medicaid Aged/Disabled Waiver Services Program.

Sincerely,

Thomas E. Arnett State Hearing Officer Member, State Board of Review

cc: Chairman, Board of Review BoSS / WVMI ------, RN, CCIL

## WEST VIRGINIA DEPARTMENT OF HEALTH & HUMAN RESOURCES BOARD OF REVIEW

,	
Claimant,	
v.	Action Number: 11-BOR-2243
WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES,	
Respondent.	

#### **DECISION OF STATE HEARING OFFICER**

## I. INTRODUCTION:

This is a report of the State Hearing Officer resulting from a fair hearing for -----. This hearing was held in accordance with the provisions found in the Common Chapters Manual, Chapter 700 of the West Virginia Department of Health and Human Resources. This fair hearing was originally scheduled to convene on January 4, 2012, but was rescheduled and convened via telephone conference call on February 24, 2012 on a timely appeal filed October 19, 2011.

### II. PROGRAM PURPOSE:

The ADW Program is defined as a long-term care alternative that provides services that enable an individual to remain at or return home rather than receiving nursing facility (NF) care. Specifically, ADW services include Homemaker, Case Management, Consumer-Directed Case Management, Medical Adult Day Care, Transportation, and RN Assessment and Review.

### III. PARTICIPANTS:

-----, Claimant
-----, RN, CCIL – Claimant's representative
Kay Ikerd, RN, BoSS – Department's representative
Sarah "Betsy" Carpenter, RN, WVMI – Department's witness

Presiding at the hearing was Thomas E. Arnett, State Hearing Officer and a member of the State Board of Review.

# IV. QUESTION TO BE DECIDED:

The question to be decided is whether or not the Department was correct in its proposal to terminate the Claimant's benefits and services provided through the Medicaid Aged/Disabled Home and Community-Based Waiver Services Program.

## V. APPLICABLE POLICY:

Medicaid Aged/Disabled Home and Community-Based Waiver Services Manual, Chapter 500, Section 501

## VI. LISTING OF DOCUMENTARY EVIDENCE ADMITTED:

## **Department's Exhibits:**

- D-1 Aged/Disabled Home and Community-Based Services Manual Section 501
- D-2 Pre-Admission Screening (PAS) for Aged/Disabled Waiver Services dated 9/20/10
- D-3 Pre-Admission Screening (PAS) for Aged/Disabled Waiver Services dated 8/10/11
- D-4 Notice of Potential Denial dated 8/11/11
- D-5 Notice of Decision dated 9/1/11

#### VII. FINDINGS OF FACT:

- On August 10, 2011 the Claimant was evaluated (medically assessed) to determine continued medical eligibility for participation in the Aged and Disabled Waiver Services Program, hereinafter ADW Program. (See Exhibit D-3, Pre-Admission Screening (PAS), completed on 8/10/11).
- 2) On or about August 11, 2011, the Claimant was notified of Potential Denial (Exhibit D-4). This notice states, in pertinent part:

To be eligible for benefits you must be deficient in at least 5 of 13 critical areas as mandated in the Medicaid Program Regulations, <u>Aged/Disabled Home and Community Based Services Waiver</u>, Policy and Procedures Manual, Chapter 501.3.2.

Based on your PAS you have deficiencies in only 4 areas – Vacate a building, Bathing, Grooming, and Dressing.

This notice goes on to advise the Claimant that additional medical information would be considered if received within two weeks. It should be noted that there was no evidence to indicate additional information was received/reviewed.

3) The Claimant was notified that continued medical eligibility could not be established via a Termination/Denial Notice dated September 1, 2011 (Exhibit D-5). This notice states, in pertinent part:

The West Virginia Medical Institute (WVMI) recently conducted an assessment of your medical eligibility for the Aged and Disabled Waiver Program. You have been determined medically ineligible for Waiver services.

This decision results in the denial or termination of your Waiver services. This is based on policy in the Medicaid program regulations, Aged and Disabled Waiver Policy Manual, Section 501.5.1.1 and the Pre-Admission Screening (PAS) Form (attached).

**Reason for Decision:** Medial eligibility for the Aged and Disabled Waiver Program requires deficits in at least five (5) of the health areas listed below. This section indicates that deficits were identified in the following areas: Vacate a Building, Bathing, Grooming and Dressing.

Your Pre-Admission Screening Form (PAS) indicates deficiencies in four (4) areas. Because you have less than five (5) deficits, you are not medically eligible for the Aged and Disabled Waiver Program.

- As noted in the previous findings, the Department stipulated that the Claimant demonstrates four (4) deficits, but indicated the medical assessment completed in August 2011 fails to identify five (5) functional deficits required to establish medical eligibility for participation in the ADW Program.
- The Claimant's representative, ------, RN, Coordinating Council for Independent Living (CCIL), initially indicated that the Claimant wanted to contest bladder incontinence. The Claimant, however, testified that she does not have bladder incontinence, but that she has bowel incontinence. It should be noted that the Claimant was awarded bladder incontinence on the previous PAS (D-2) completed on September 20, 2010.

Information included in Exhibit D-3 reveals that the Claimant indicated she had multiple incidents of bowel incontinence several weeks before the assessment due to an illness, but reported that she did not have any accidents recently, "only now and then." As a matter of record, the Claimant testified that she was untruthful about the frequency of bowel incontinence episodes at the time of the assessment and indicated that she is now taking medication to help control it.

Betsy Carpenter, RN, WVMI, testified that the Claimant was not taking any medication for bowel incontinence at the time of the assessment and further noted the Claimant reported that her doctor told her she did not need pull-ups (incontinent garments). RN Carpenter testified that because incontinence can be a sensitive issue, she covered this area thoroughly with the Claimant and determined that the Claimant has occasional bowel incontinence (level-2). Occasional (bowel) incontinence does not constitute a functional deficit.

6) Aged/Disabled Home and Community-Based Services Manual Section 501 (D-1) - Program Eligibility for Client:

> Applicants for the ADW Program must meet the following criteria to be eligible for the program:

- C. Be approved as medically eligible for NF Level of Care.
- 7) Aged/Disabled Home and Community-Based Services Manual Section 503.1.1 – Purpose: The purpose of the medical eligibility review is to ensure the following:
  - New applicants and existing clients are medically eligible based on A. current and accurate evaluations.
  - B. Each applicant/client determined to be medically eligible for A/DW services receives an appropriate LOC that reflects current/actual medical condition and short and long-term services needs.
  - C. The medical eligibility determination process is fair, equitable and consistently applied throughout the state.
- 8) Aged/Disabled Home and Community-Based Services Waiver Policy Manual 501.3.2 Medical Criteria: An individual must have five (5) deficits on the Pre Admission Screening (PAS) to qualify medically for the ADW Program. These deficits are derived from a combination of the following assessment elements on the PAS.
  - #24 Decubitus - Stage 3 or 4
  - #25 In the event of an emergency, the individual is c) mentally unable or d) physically unable to vacate a building. a) Independently and b) With Supervision are not considered deficits.
  - #26 Functional abilities of individual in the home Eating----- Level 2 or higher (physical assistance to get

nourishment, not preparation)

Bathing ---- Level 2 or higher (physical assistance or more)

Dressing ---- Level 2 or higher (physical assistance or more)

Grooming--- Level 2 or higher (physical assistance or more)

Continence (bowel, bladder) -- Level 3 or higher; must be incontinent

Orientation-- Level 3 or higher (totally disoriented, comatose)

Transfer---- Level 3 or higher (one-person or two-person assistance

in the home)

Walking----- Level 3 or higher (one-person assistance in the home)

Wheeling---- Level 3 or higher (must be Level 3 or 4 on walking in the home to use Level 3 or 4 for wheeling in the home. Do not count outside the home)

- #27 Individual has skilled needs in one or more of these areas:
  (g) suctioning, (h) tracheostomy, (i) ventilator, (k) parenteral fluids, (l) sterile dressings, or (m) irrigations.
- #28 Individual is not capable of administering his/her own medications.

### VIII. CONCLUSIONS OF LAW:

- 1) Medicaid policy requires that an individual must demonstrate five (5) deficits on the PAS assessment in order to qualify medically for the Aged/Disabled Waiver Program.
- 2) The evidence reveals that the Claimant was awarded four (4) deficits on a PAS completed by WVMI in August 2011 Vacating a building, bathing, grooming and dressing.
- The hearing process is designed to conduct an administrative review of the information provided to the Department and determine if policy was applied correctly. The information provided by the Claimant during the assessment is consistent with the findings on the August 10, 2011 PAS. As a result, the Claimant was correctly assessed at Level-2, occasional bowel incontinence, therefore, no additional deficits can be awarded as a result of the evidence.
- 4) Whereas the Claimant was demonstrating only four (4) program qualifying deficits, the Department was correct in its determination that continued medical eligibility for participation in the Aged/Disabled Waiver Program could not be established.

## IX. DECISION:

It is the decision of the State Hearing Officer to **uphold** the Department's proposal to terminate the Claimant's benefits and services through the Medicaid Aged/Disabled Title XIX (HCB) Waiver Services Program.

## X. RIGHT OF APPEAL:

See Attachment

## **XI. ATTACHMENTS:**

The Claimant's Recourse to Hearing Decision

Form IG-BR-29

ENTERED this Day of February, 2012.		
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	Thomas E. Arnett	
	State Hearing Officer	
	Member, Board of Review	