



State of West Virginia  
DEPARTMENT OF HEALTH AND HUMAN RESOURCES  
Office of Inspector General  
Board of Review  
203 East Third Avenue  
Williamson, WV 25661

Earl Ray Tomblin  
Governor

Karen L. Bowling  
Cabinet Secretary

April 8, 2015



RE: [REDACTED] v. WV DHHR  
ACTION NO.: 15-BOR-1245

Dear Mr. [REDACTED]

Enclosed is a copy of the decision resulting from the hearing held in the above-referenced matter.

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.

You will find attached an explanation of possible actions you may take if you disagree with the decision reached in this matter.

Sincerely,

Stephen M. Baisden  
State Hearing Officer  
Member, State Board of Review

Encl: Claimant's Recourse to Hearing Decision  
Form IG-BR-29

cc: Jennifer Fischer, Economic Service Supervisor

**WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES  
BOARD OF REVIEW**

██████████,

**Claimant,**

v.

**Action Number: 15-BOR-1245**

**WEST VIRGINIA DEPARTMENT OF  
HEALTH AND HUMAN RESOURCES,**

**Respondent.**

**DECISION OF STATE HEARING OFFICER**

**INTRODUCTION**

This is the decision of the State Hearing Officer resulting from a fair hearing for ██████████. This hearing was held in accordance with the provisions found in Chapter 700 of the West Virginia Department of Health and Human Resources' (WV DHHR) Common Chapters Manual. This fair hearing was convened on March 24, 2015, on an appeal filed February 5, 2015.

The matter before the Hearing Officer arises from the February 2, 2015 decision by the Respondent to discontinue the Claimant's receipt of Specified Low-Income Medicare Beneficiary (SLIMB) Medicaid due to excessive income.

At the hearing, the Respondent appeared by Representative Jennifer Fischer, Economic Service Supervisor for the WV DHHR, ██████████ Office. The Claimant appeared pro se. Both participants were sworn and the following documents were admitted into evidence.

**Department's Exhibits:**

- D-1 Print-out from the WV DHHR – Social Security Administration on-line information sharing service, State On-Line Query (SOLQ)
- D-2 Letter from Department to Claimant dated November 17, 2014
- D-3 Letter from Department to Claimant dated December 16, 2014
- D-4 Letter from Department to Claimant dated December 16, 2014
- D-5 Letter from Department to Claimant dated February 2, 2015
- D-6 Letter from Department to Claimant dated February 9, 2015

**Claimant's Exhibits:**

None

After a review of the record, including testimony, exhibits, and stipulations admitted into evidence, and after assessing the credibility of all witnesses and weighing the evidence in consideration of the same, the Hearing Officer sets forth the following Findings of Fact.

## **FINDINGS OF FACT**

- 1) The Claimant was a recipient of Qualified Individuals (QI-1) Medicaid, a medical assistance program that pays a recipient's \$104 per month Medicare Part B premium. The Department sent him a letter (Exhibit D-2) on November 17, 2014, informing him that he was due to complete a QI-1 benefit review in December 2014. The Claimant completed his review in a timely fashion.
- 2) The Department issued the Claimant a letter on December 16, 2014 (Exhibit D-3), informing him that his QI-1 was being discontinued. On the same day, the Department issued a second letter to the Claimant (Exhibit D-4), informing him that he was approved for Specified Low-Income Medicare Beneficiary (SLIMB) Medicaid, a medical assistance program that also pays the recipient's Medicare Part B premium.
- 3) The Department's representative submitted into evidence a print-out (Exhibit D-1) from SOLQ, an on-line information exchange service between the WV DHHR and the U.S. Social Security Administration. This print-out indicated that the Claimant's Social Security – Disability income was \$1,270 per month in December 2014.
- 4) The Department's representative testified that she did not know why the Claimant's Medicaid program for Medicare premium coverage shifted from QI-1 to SLIMB. She stated that it could have been a worker's error or a computer malfunction that caused the change. She stated that both programs pay the Medicare premium. However, she added, the Claimant's monthly income of \$1,270 was excessive for SLIMB.
- 5) On February 2, 2015, the Department sent the Claimant a letter (Exhibit D-5) indicating his SLIMB coverage was being discontinued effective in March 2015. On February 9, 2015, the Department sent the Claimant a letter (Exhibit D-6) indicating that he was approved for QI-1 in March 2015. The Department's representative stated that throughout these coverage program changes, the Claimant remained eligible for one or the other of these programs, and the Claimant never had to pay the Medicare premium.
- 6) The Claimant testified that he requested this hearing because he did not understand these seemingly contradictory letters. He testified that he should not have to pay a Medicare premium, and the Department should not have to pay this as well. He stated that he paid Social Security and Medicare income deductions throughout his working life, and he did not think either he or the state of West Virginia should have to pay any more money for this.

## **APPLICABLE POLICY**

WV DHHR's Income Maintenance Manual (IMM) Chapter 10, §10.16.B, states that in order to be eligible for SLIMB, a person's income must be greater than 100% of the Federal Poverty Level (FPL), which was \$973 in December 2014, but less than or equal to 120% of the FPL. Additionally it explains that in order to be eligible for QI-1, a person's income must be greater than 120% of the FPL, but less than or equal to 135% of the FPL.

WV IMM Chapter 10, Appendix A indicates that in December 2014, the income guidelines for SLIMB was between \$974 and \$1167 per month for one person. Appendix A indicates that in December 2014, the income guidelines for QI-1 was between \$1,168 and \$1,313 per month for one person.

WV IMM Chapter 16, §16.6.D states that SLIMB and QI-1 pay the Medicare Part B premium.

### **DISCUSSION**

Policy is clear that in order to be eligible for Specified Low-Income Medicare Beneficiaries (SLIMB) Medicare premium coverage, an applicant's gross monthly income should be between \$974 and \$1,167 per month. The Claimant's monthly income is in excess of this amount. Because his income is \$1,270, he is eligible to receive Qualified Individuals (QI-1) Medicaid. The Claimant has been approved for QI-1.

### **CONCLUSION OF LAW**

Because the Claimant's monthly income is above the income guidelines for SLIMB, the Department acted correctly to discontinue his SLIMB eligibility and approve him for QI-1, in accordance with WV Income Maintenance Manual Chapter 10, §10.16.B and Appendix A.

### **DECISION**

It is the decision of the state Hearing Officer to uphold the Department's decision to discontinue Claimant's receipt of Specified Low-Income Medicare Beneficiaries (SLIMB). He remains eligible for Qualified Individuals (QI-1) Medicaid.

**ENTERED this 8<sup>th</sup> Day of April, 2015.**

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Stephen M. Baisden  
**State Hearing Officer**