

State of West Virginia DEPARTMENT OF HEALTH AND HUMAN RESOURCES Office of Inspector General Board of Review

Earl Ray Tomblin Governor P.O. Box 1736 Romney, WV 26757

Michael J. Lewis, M.D., Ph.D. Cabinet Secretary

October 17, 2011

Dear	:

Attached is a copy of the Findings of Fact and Conclusions of Law on your hearing held October 11, 2011. Your hearing request was based on the Department of Health and Human Resources' proposal to reduce your homemaker service hours under 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 and Disabled Waiver program is based on current policy and regulations. These regulations provide that the number of homemaker service hours are determined based on the Level of Care (LOC). The Level of Care is determined by evaluating the Pre-Admission Screening Form (PAS) and assigning points to documented medical conditions that require nursing services. Program services are limited to a maximum number of units/hours which are reviewed and approved by West Virginia Medical Institute (WVMI) (Aged/Disabled Home and Community Based Waiver Policy and Procedures Manual 501.3).

The information which was submitted at your hearing revealed that while you remain medically eligible for participation in the Aged and Disabled Waiver program, your Level of Care should be reduced from a level "C" to a level "B" Level of Care. As a result, you are eligible to receive 3 hours per day or 93 hours per month of homemaker services.

It is the decision of the State Hearing Officer to Uphold the action of the Department to reduce your homemaker service hours under the Medicaid Aged/Disabled (HCB) Title XIX Waiver Services program.

Sincerely,

Eric L. Phillips State Hearing Officer Member, State Board of Review

cc: Erika Young, Chairman, Board of Review Kay Ikerd, Bureau of Senior Services

WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES BOARD OF REVIEW

IN RE: ----,

Claimant,

v. ACTION NO.: 11-BOR-1814

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 convened on a timely appeal, filed August 12, 2011.

It should be noted here that the Claimant's benefits under the Aged and Disabled Waiver program continue at the previous level of determination pending a decision from the State Hearing Officer.

II. PROGRAM PURPOSE:

The Aged and Disabled Waiver program, hereinafter ADW, 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
-----, Homemaker Aide
Cecilia Brown, Quality Assurance Manager-Bureau of Senior Services (BoSS)
Barbara Plum, RN-West Virginia Medical Institute (WVMI)

Presiding at the hearing was Eric L. Phillips, State Hearing Officer and a member of the 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 reduce the Claimant's homemaker service hours provided through the Medicaid Aged and Disabled Waiver program.

V. APPLICABLE POLICY:

Aged and Disabled Home and Community Based Waiver Policy Manual Chapter 501.3.2.1 and Chapter 501.3.2.2

VI. LISTING OF DOCUMENTARY EVIDENCE ADMITTED:

Department's Exhibits:

- D-1 Aged and Disabled Home and Community Based Waiver Policy Manual Chapter 501.3.2.1 and Chapter 501.3.2.2
- D-2 Pre-Admission Screening Assessment dated August 2, 2011
- D-3 Notice of Decision dated August 10, 2011

VII. FINDINGS OF FACT:

- On August 2, 2011, the Claimant was medically assessed to determine his continued eligibility and to assign an appropriate Level of Care, hereinafter LOC, in participation with the Aged and Disabled Waiver program. Prior to the re-evaluation, the Claimant was assessed at a Level "C" LOC under the program guidelines.
- On August 10, 2011, the Claimant was issued a Notice of Decision, Exhibit D-3. This exhibit noted that the Claimant had been determined medically eligible to continue to receive in-home services under the program guidelines, but his corresponding level of care would be reduced to 93 hours per month (LOC "B" determination).
- Ms. Barbara Plum, West Virginia Medical Institute (WVMI) assessing nurse completed Exhibit D-2, the Pre-Admission Screening assessment, hereinafter PAS, as part of her medical assessment of the Claimant. Ms. Plum testified that the Claimant was awarded a total of 16 points during the evaluation, which qualifies for a Level "B" LOC.
- 4) The Claimant and his representatives contend that additional points should have been awarded for Medical Conditions and Symptoms and Professional and Technical Care Needs:

The following address the contested areas:

Medical Conditions and Symptoms-The Claimant contends that he has been prescribed medications of nitroglycerin for chest and heart related pain, oxycodone for arthritis pain, and ativan for depression. Ms. Plum testified that she was unaware of these conditions because the Claimant failed to acknowledge these conditions and medications during the assessment.

The matter before the Board of Review is whether or not the assessment completed by the assessing nurse in August, 2011 was accurate based on information known at the time. The Claimant failed to relate information concerning any symptoms or medications for pain or depression at the assessment. Therefore, the assessing nurse acted correctly in the assessment of the Claimant's medical conditions and symptoms and additional points in the contested area cannot be awarded.

Professional and Technical Care Needs-The Claimant contends that an additional point should have been awarded for Professional and Technical Care needs; specifically, for continuous oxygen. The Claimant indicated that he has a breathing machine that he utilizes twice a day and -----, added that the Claimant requires continuous oxygen at night. Ms. Plum testified that an additional point is awarded when the individual requires continuous oxygen twenty-four hours a day and noted in the assessment that the Claimant utilizes breathing treatments.

Policy requires that points are awarded in the area of Professional and Technical Care Needs for continuous oxygen. Testimony from the Claimant indicated that he receives breathing treatments twice a day and continuous oxygen at night. Because the Claimant does not receive continuous oxygen on a continuous period of twenty-four hours a day, an additional point cannot be awarded in the contested area.

- 5) Aged/Disabled Home and Community-Based Services Waiver Policy Manual 501.3.2.1 and 501.3.2.2: There will be four levels of care for clients of ADW homemaker services. Points will be determined based on the following sections of the PAS:
 - #23 Medical Conditions/Symptoms- 1 point for each (can have total of 12 points)
 - #24 Decubitus- 1 point
 - #25 1 point for b., c., or d.
 - #26 Functional abilities

Level 1-0 points

Level 2- 1 point for each item a. through i.

Level 3- 2 points for each item a. through m.; i. (walking) must be equal to or greater than Level 3 before points are given for j. (wheeling)

Level 4 - 1 point for a., 1 point for e., 1 point for f., 2 points for g. through m.

- #27 Professional and Technical Care Needs- 1 point for continuous oxygen
- #28 Medication Administration- 1 point for b. or c.
- #34 Dementia- 1 point if Alzheimer's or other dementia
- #35 Prognosis- 1 point if terminal

The total number of points allowable is 44.

LEVELS OF CARE SERVICE LIMITS

Level A - 5 points to 9 points - 2 hours per day or 62 hours per month

Level B - 10 points to 17 points- 3 hours per day or 93 hours per month

Level C - 18 points to 25 points- 4 hours per day or 124 hours per month

Level D - 26 points to 44 points- 5 hours per day or 155 hours per month

VIII. CONCLUSIONS OF LAW:

- 1) Medicaid policy dictates that an individual's Level of Care (LOC) is determined by the number of points awarded on the Pre-Admission Screening (PAS) assessment tool.
- 2) On August 2, 2011, 2011, the Claimant was assessed a total of 16 points as part of his PAS assessment completed by West Virginia Medical Institute.
- 3) As a result of evidence and testimony presented during the hearing process, no additional points may be awarded. The Claimant's total points remain at 16.
- 4) In accordance with existing policy, an individual with 16 points qualifies as a Level "B" LOC and is therefore eligible to receive 3 hours per day or 93 hours per month of homemaker services.

IX. DECISION:

It is the decision of the State Hearing Officer to uphold the Agency's proposal to reduce the Claimant's homemaker service hours under the Aged/Disabled, Title XIX (HCB) Waiver Program.

X. RIGHT OF APPEAL:

See Attachment

XI. ATTACHMENTS:

The Claimant's Recourse to Hearing Decision

Form IG-BR-29		
ENTERED this	day of October, 2011.	
	Eric L. Phillip	
	State Hearing	Officer