



State of West Virginia  
**DEPARTMENT OF HEALTH AND HUMAN RESOURCES**  
Office of Inspector General  
Board of Review  
235 Barrett Street  
Grafton WV 26354  
May 24, 2005

Joe Manchin III  
Governor

Martha Yeager Walker  
Secretary

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dear Mr. \_\_\_\_\_:

Attached is a copy of the findings of fact and conclusions of law on your hearing held April 1, 2005. Your hearing request was based on the Department of Health and Human Resources' proposal to discontinue your benefits/services under the Medicaid, Aged/Disabled Title XIX (Home & Community Based) Waiver 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.

Medicaid, Aged/Disabled (HCB) Title XIX Waiver is granted to those individuals who continue to meet all eligibility requirements. 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. In order to medically qualify for Aged/Disabled Waiver services an individual must have a total of five (5) qualifying deficits in specific categories of nursing services. [Aged/Disabled (HCB) Services Manual ' 570- 570.1b (11/1/03)].

The information submitted at your hearing failed to establish 5 qualifying deficits therefore demonstrating that you do not require the *level of care* commonly provided in a nursing facility.

It is the decision of the State Hearing Officer to **uphold** the proposal of the Agency to discontinue your benefits under the Aged/Disabled Title XIX (HCB) Waiver Program as set forth in the January 28, 2005 notification letter.

Sincerely,

Ron Anglin  
State Hearing Officer  
Member, State Board of Review

cc: Erika Young, Chairman, Board of Review  
Libby Boggess, BoSS  
Oretta Keeney, WVMI  
[REDACTED] Central WV Aging Services

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

\_\_\_\_\_,

**Claimant**

**Action Number** \_\_\_\_\_

**v.**

**West Virginia Department of  
Health and Human Resources,**

**Respondent.**

**SUMMARY AND DECISION OF THE STATE HEARING OFFICER**

**I. INTRODUCTION:**

This is a report of the State Hearing Officer resulting from a fair hearing concluded on May 24, 2005 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 April 1, 2005 on a timely appeal requested February 2, 2005 and received by the State Hearings Officer March 9, 2005. All persons giving testimony were placed under oath. Benefits have continued.

**II. PROGRAM PURPOSE:**

The Program entitled Medicaid Title XIX Waiver (HCB) is set up cooperatively between the Federal and State governments and administered by the West Virginia Department of Health & Human Resources.

Under Section 2176 of the Omnibus Budget Reconciliation Act of 1981, states were allowed to request a waiver from the Health Care Financing Administration (HCFA) so that they could use Medicaid (Title XIX) funds for home and community-based services. The program's target population is individuals who would otherwise be placed in an intermediate or skilled nursing facility (if not for the waiver services).

Services offered under the Waiver Program will include: (1) chore, (2) homemaker and (3) case management services. West Virginia has been offering the Waiver Services Program since July, 1982 to those financially eligible individuals who have been determined to need ICF level care but who have chosen the Waiver Program Services as opposed to being institutionalized.

### **III. PARTICIPANTS:**

\_\_\_\_\_, claimant

\_\_\_\_\_, spouse

\_\_\_\_\_, homemaker

\_\_\_\_\_ CM, Central WV Aging Services

Brian Holstine, LSW, Bureau of Senior Services (by phone)

Heather Randolph, RN, West Virginia Medical Institute (by phone)

Presiding at the hearing was Ron Anglin, State Hearing Officer and a member of the State Board of Review.

### **IV. QUESTION TO BE DECIDED:**

The question to be decided is whether the claimant continues to be medically eligible for services under the Aged/Disabled Waiver (HCB) Program?

### **V. APPLICABLE POLICY:**

Aged/Disabled Home and Community Based Services Manual ' 570- 570.1

### **VI. LISTING OF DOCUMENTARY EVIDENCE ADMITTED:**

E-1- A/D Waiver Manual 560.1- 570.1.b

E-2- WVMi Independent Review (PAS) 12/17/04

E-3- Notification 12/28/04 (Potential Denial)

E-4- Notification, 1/28/05 (Termination)

C-1- Information submitted by the CMA.

C-2- Written statement of Mrs. \_\_\_\_\_ dated 2/15/05

### **VII. FINDINGS OF FACT:**

(1) The claimant=s A/D Waiver case was due for an annual review and a WVMi Independent Review (E-2) was completed by the WVMi on December 17, 2004. WVMi determined that the claimant was no longer medically eligible for Waiver services and a notification of potential closure was mailed December 28, 2004. A termination notification was then mailed to the claimant January 28, 2005. A hearing request dated January 29, 2005 was received by BMS February 3, 2005 and by the BOR/Hearings Officer March 9, 2005. The claimant was notified of the hearing date in a notification dated March 11, 2005. The hearing was convened April 1, 2005. Benefits have been continued pending a hearing decision.

(2) During the hearing, Exhibits as noted in Section VI above were presented.

(3) Brian Holstine provided information concerning waiver program policy and requirements from Exhibit E-1.

(4) Heather Randolph noted from the evaluation (E-2) which she completed 12/17/04 in the claimant=s home. Claimant found to be mentally unable to vacate in an emergency. Under item #26, claimant had a qualifying deficit only in grooming. Claimant only requires supervision/prompting with medication administration, which is not considered a deficit. Total deficits found were 2. Contact made with physician [REDACTED] and reviewed information provided by Homemaker Agency RN. During the evaluation the HM reported that she didn't provide assistance with bathing, dressing, grooming or eating.

(5) \_\_\_\_\_ testified her husband has mental difficulties. He does not focus well. She read exhibit C-2 into the record. He currently takes no medication for seizures. She sets up the medication. He could not setup pills or keep track of medication. He is able to handle finger sticks for diabetes. She is a full- time college student and not in the home all the time which precipitated their application for the program.

(6) [REDACTED] testified she has been SM since 10/03 and he has been approved as a level C during that time. His condition is unchanged. He has a history of falls. Feels evaluation would have been different had wife been present.

(7) \_\_\_\_\_ testified that she helps claimant shower as he cannot reach his backside. Doesn't always get cleaned up after bowel movement. Sometimes helps him dress or adjust clothing – belt etc. He does OK with shoes and socks. Needs help walking. He falls if not helped in and out of shower.

(8) Exhibit C-2 (Mrs. \_\_\_\_\_'s statement) reads in part: \_\_\_\_\_ needs help with meal prep, showering, and dressing. She cuts nails and assists in shaving and dental care. Feels he cannot vacate home in an emergency. He gets dizzy and is wobbly. He has seizures and is bi-polar.

## **VIII. CONCLUSIONS OF LAW:**

(1) Aged/Disabled Home and Community Based Services Manual ' 570 reveals that individuals medically eligible for the ADW program must meet the same criteria as those medically eligible for a nursing facility level of care.

(2) Aged/Disabled Home and Community Based Services Manual ' 570.1.b. Medical Criteria: An individual must have five deficits on the PAS to qualify medically for the ADW Program. These deficits are derived from a combination of assessment elements on the medical evaluation- Decubitus - Stage 3 or 4; in the event of an emergency, the individual ability to vacate a building; functional abilities of individual in the home (eating, bathing, grooming, dressing, continence, orientation, transferring, walking, wheeling); skilled needs; and ability to self-administer medication.

## IX. DECISION:

The agency acknowledged 2 qualifying deficits – vacating a building and grooming. Evidence provided as to the claimant's ability to self-medicate and bathe independently indicate that substantial deficits exist in both categories. Testimony indicates that the claimant is unable to properly set up his medication and with the exception of ingesting is totally dependent on others for proper administration. His ability to bathe independently appears restricted- he requires assistance in and out of the shower due to his instability and is unable to adequately clean his entire body. However, testimony and evidence concerning other areas of personal care (dressing, continence, walking, and orientation) did not adequately demonstrate functional deficits rising to the level of qualifying.

In conclusion, evidence offered established only 4 qualifying deficits. Eligibility for the program requires 5 qualifying deficits. This number of deficits is required to demonstrate that an individual requires the level of care provided in a nursing facility or the Medicaid (HCB) Waiver Program. I am therefore ruling to **uphold** the proposal of the Agency to terminate benefits under the Medicaid Waiver Program as set forth in the January 28, 2005 notification.

The claimant is advised, with the aid of the case management agency, to seek services from other programs offering care at a level less than that of a nursing home.

## X. RIGHT OF APPEAL:

See Attachment.

## XI. ATTACHMENTS:

The Claimant's Recourse to Hearing Decision.

Form IG-BR-29.

**ENTERED this 24<sup>th</sup> Day of May, 2005**

---

**Ron Anglin**  
**State Hearing Examiner**