

State of West Virginia DEPARTMENT OF HEALTH AND HUMAN RESOURCES

Office of Inspector General Board of Review 235 Barrett Street Grafton WV 26354 June 14, 2005

Joe Manchin III Governor Martha Yeager Walker Secretary

Dear	Mc	
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Attached is a copy of the findings of fact and conclusions of law on your hearing held May 11, 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 December 30, 2004 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
Central WV Aging Services

WEST VIRGINIA DEPARTMENT OF HEALTH & HUMAN RESOURCES BOARD OF REVIEW

Claimant

Action Number 05-BOR- 5359

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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 June 14, 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 May 11, 2005 on a timely appeal requested January 4, 2005 and received by the State Hearings Officer March 31, 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:

Libby Boggess, RN, 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) 11/22/04

E-3- Notification 12/7/04 (Potential Denial)

E-4- Notification, 12/30/04 (Termination)

C-1- Statement, 9/13/04

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 November 22, 2004. WVMI determined that the claimant was no longer medically eligible for Waiver services and a notification of potential closure was mailed December 7, 2004. A termination notification was then mailed to the claimant December 30, 2004. A hearing request dated January 3, 2005 was received by BMS January 4, 2005 and by the Hearings Officer March 31, 2005. The claimant was notified of the hearing date of April 20 in a notification dated April 5, 2005. At the request of BoSS, the hearing was rescheduled and convened May 11, 2005. Benefits have been continued pending a hearing decision.
- (2) During the hearing, Exhibits as noted in Section VI above were presented.
- (3) Libby Boggess provided information concerning waiver program policy and requirements from Exhibit E-1.
- noted the following from the evaluation (E-2) which she completed 11/22/04 in the claimant=s home. Claimant found to be unable to vacate in an emergency. Under item #26, claimant had a qualifying deficit only in continence. Total deficits found



(5)	testified claimant	does have	difficulty with	breathing.	Needs assistance	with
housewor	k and someone to	check on h	er.			

(6) testified that claimant receives SSI and has been on the waiver program 2 plus years. Receives 6 hours per week of services.

VIII. CONCLUSIONS OF LAW:

- (1) Aged/Disabled Home and Community Based Services Manual ¹ 570 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 ¹ 570.1.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. (see section IX below)

IX. DECISION:

The agency acknowledged 2 qualifying deficits – vacating a building and continence. The claimant failed to provide evidence to substantiate any additional needs which might demonstrate qualifying deficits. The claimant's concerns entailed needs of a chore nature – cleaning etc. rather than additional personal care issues.

In conclusion, evidence offered established only 2qualifying deficits. Eligibility for the program requires 5 qualifying deficits. This number of deficits is required to demonstrate that an individual requires the <u>level of care</u> provided in a <u>nursing facility</u> 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 December 30, 2004 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	ng Decision.		
Form IG-BR-29.			
ENTERED this 14th Day of June, 2005			
_	Ron Anglin		
	State Hearing Examiner		