



State of West Virginia
DEPARTMENT OF HEALTH AND HUMAN RESOURCES
Office of Inspector General
Board of Review
P.O. Box 1247
Martinsburg, WV 25402

Jim Justice
Governor

Bill J. Crouch
Cabinet Secretary

February 16, 2017

[REDACTED]

RE: [REDACTED] v. WV DHHR
ACTION NO.: 17-BOR-1121

Dear [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 Official 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,

Lori Woodward
State Hearing Official
Member, State Board of Review

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

cc: Rachel Hartman, WV DHHR

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

██████████,

Appellant,

v.

Action Number: 17-BOR-1121

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

Respondent.

DECISION OF STATE HEARING OFFICIAL

INTRODUCTION

This is the decision of the State Hearing Official 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' Common Chapters Manual. This fair hearing was convened on February 15, 2017, on a timely appeal filed January 20, 2016.

The matter before the Hearing Officer arises from the December 1, 2016 decision by the Respondent to deny Long Term Care (LTC) Medicaid due to excessive assets.

At the hearing the Respondent appeared by Rachel Hartman, Economic Services Supervisor. The Appellant appeared *pro se* and testified on her own behalf. All witnesses were sworn and the following documents were admitted into evidence.

Department's Exhibits:

- D-1 Application for Health Coverage & Help Paying Costs (DFA SLA-1), dated November 28, 2016
- D-2 West Virginia Department of Health and Human Services Supplement to Application for Healthcare Coverage (DFS-SLA-S1)
- D-3 Copy of Vehicle Assets screen prints from the Appellant's eRAPIDS case
- D-4 Notice of denial, dated December 1, 2016
- D-5 WV Income Maintenance Manual (IMM), Chapter 11, §11.3 (excerpt)
- D-6 Hearing Summary

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

FINDINGS OF FACT

- 1) The Appellant applied for Long-Term Care (LTC) Medicaid on November 28, 2016. (Exhibit D-1)
- 2) The Respondent determined that the Appellant had vehicle assets as follows: she jointly owned a 1995 Saab with a trade-in value of \$2050, 1997 Dodge Ram with a trade-in value of \$1425, 1994 Ford Explorer with a trade-in value of \$1150, and independently owned a 2002 Suzuki Vitara with a trade-in value of \$1100, a 1994 GMC Sierra with a trade in value of \$2000. The trade-in values were determined by using National Automobile Dealers Association (NADA) valuations. (Exhibits D-3 and D-6)
- 3) The jointly owned automobiles were assessed to the Appellant at half of their trade-in values with the highest valued vehicle, the 1994 GMC Sierra, being excluded from the calculation of these assets.
- 4) The Respondent determined the total value of vehicle assets to be \$3412.50 at the time of application, which was over the allowable asset limit of \$2000 for LTC Medicaid eligibility for an Assistance Group (AG) of one.
- 5) The Respondent issued notification to the Appellant on December 1, 2016, indicating that her application for LTC Medicaid was denied due to excessive assets for the program. (Exhibit D-4).
- 6) The Appellant had excessive assets in the form of vehicles at the time of her application of November 28, 2016. (Exhibit D-3)

APPLICABLE POLICY

West Virginia Income Maintenance Manual (IMM), Chapter 11.3, shows the SSI-Related Medicaid asset limit for a one-person assistance group as \$2000.

IMM, Chapter 11.2.A establishes the date of asset eligibility for SSI-Related Medicaid as the first moment of the month of application. The client is not eligible for any month in which countable assets are in excess of the maximum, as of the first moment of the month.

IMM, Chapter 11.4.VV explains that the owner of a vehicle is generally the individual to whom it is titled. However, when the title of a vehicle is not in the client's name, but the client states he is the owner, the vehicle is counted as the client's asset. If the title is in the client's name, and he indicates the vehicle no longer belongs to him, and the name on the title has not been changed, the vehicle is presumed to be his, unless he can prove otherwise. The trade-in value is usually used as the CMV for AFDC and AFDC-Related, SSI-Related Medicaid, M-WIN, CDCS, PAC, QDWI, QMB, SLIMB, QI-A and WV WORKS. Possible sources for obtaining the trade-in value are listed in Section 4.2. Throughout the following items, the term "listed value" refers to the value obtained from one of the sources in Section 4.2.

IMM, Chapter 11.4.VV.3, SSI-Related Medicaid, M-WIN, CDCS, PAC, QDWI, QMB, SLIMB and QI-1, allows for one vehicle is excluded as an asset for these coverage groups regardless of value, when it is used for transportation of the AG or a member(s) of the AG's household. When there is more than one vehicle, the vehicle exclusion is always applied in a manner which benefits the AG. The car with the highest value may not be the vehicle used for transportation; however, it may be excluded for that reason, if it is to the AG's advantage. The listed trade-in value of the vehicle is used to determine equity value, unless one of the following conditions exist: 1) The client disagrees with the listed value; or 2) The vehicle value is not listed. In either of these situations, the client is responsible for obtaining one estimate at his expense on form DFA-V-1, Vehicle Estimate, or provide similar documentation that contains the necessary information to establish CMV.

DISCUSSION

The Appellant made an application for Long-Term Care Medicaid on November 28, 2016. In processing her application, the Respondent found she had several vehicles titled in her name. The Appellant jointly owned a 1995 Saab with a trade-in value of \$2050, 1997 Dodge Ram with a trade-in value of \$1425, 1994 Ford Explorer with a trade-in value of \$1150, and independently owned a 2002 Suzuki Vitara with a trade-in value of \$1100, a 1994 GMC Sierra with a trade in value of \$2000. The trade-in values were determined by using National Automobile Dealers Association (NADA) valuations. The jointly owned automobiles were assessed to the Appellant at half of their trade-in values with the highest valued vehicle being excluded from the calculation of these assets. The Respondent determined the total value of vehicle assets to be \$3412.50, which was over the allowable asset limit of \$2000 for LTC Medicaid eligibility for an Assistance Group (AG) of one.

The Appellant contended she submitted to the department verification from the Department of Motor Vehicles showing she no longer had any of these vehicles in her name except for the 2002 Suzuki Vitara and the 1994 Ford Explorer. The Respondent acknowledged that the Appellant turned in this verification, but noted these vehicles were titled in her name at the date of application on November 28, 2016. The Appellant testified that the 1995 Saab was actually sold sometime in the summer of 2016. However, she did confirm that the other vehicles were not actually transferred out of her name until December 19, 2016. Even if the apportioned value of the 1995 Saab (\$1025) was subtracted from the total amount of the valuation of the Appellant's other vehicles (\$3412.50), she would still have been over the allowable asset limit for Medicaid eligibility at the time of application.

CONCLUSIONS OF LAW

- 1) At the time of her Medicaid application on November 28, 2016, the Appellant did have several vehicles registered in her name with an asset total over the allowable limit of \$2000 for Medicaid eligibility.
- 2) The Respondent correctly denied the Appellant's application for Long-Term Medicaid based on excessive assets.

DECISION

It is the decision of the State Hearing Officer to **UPHOLD** Respondent's action to deny Appellant's application for Long-Term Care Medicaid based on excessive assets.

ENTERED this 16th day of February 2017.

Lori Woodward, State Hearing Official