

**WEST VIRGINIA DEPARTMENT OF HEALTH & HUMAN RESOURCES  
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 April 21, 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 21, 2005 on a timely appeal, filed February 26, 2005.

It should be noted here that the claimant's benefits have been continued pending a hearing decision.

**II. PROGRAM PURPOSE:**

The Program entitled SSI Medicaid is set up cooperatively between the Federal and State governments and administered by the West Virginia Department of Health & Human Resources.

The purpose of the SSI Medicaid Program is to cover all SSI recipients and to accept SSA's determination of eligibility for SSI as the sole eligibility determination for Medicaid. Consequently, there is no application or eligibility process for SSI Medicaid. Instead the Department depends upon SSA for the information needed to open and evaluate continuing eligibility for SSI Medicaid cases.

**III. PARTICIPANTS:**

\_\_\_\_\_, Claimant

\_\_\_\_\_, Paralegal, Legal Aid of WV, Claimant's Representative

\_\_\_\_\_, Claimant's Spouse

Susan Godby, Department Hearing Representative

Ethel Oney, ESW, DHHR

Observing:

\_\_\_\_\_ FMRS

Presiding at the hearing was Margaret M. Mann, State Hearing Officer and a member of the State Board of Review.

**IV. QUESTIONS TO BE DECIDED:**

The question to be decided is whether the Department is correct in the decision to discontinue the claimant's medical card under SSI Medicaid as the claimant is no longer a recipient of SSI.

**V. APPLICABLE POLICY:**

**Section 2.11D of the West Virginia Income Maintenance Manual reads in part:**

The worker closes the SSI Medicaid case when the client appears on the Need to Evaluate printout and worker determines he is no longer eligible for SSI Medicaid.

**Section 16.6A of the West Virginia Income Maintenance Manual reads in part:**

There is no application or eligibility determination process for SSI Medicaid. Instead the Department depends upon SSA for the information needed to open and evaluate continuing eligibility for SSI Medicaid cases.

**Section 9.10C of the West Virginia Income Maintenance Manual reads:**

SSA makes the determination of the need for SSI. Receipt of SSI is the only eligibility factor.

**Section 16.3A of the West Virginia Income Maintenance Manual reads in part:**

IN NO INSTANCE IS MEDICAID COVERAGE UNDER ONE COVERAGE GROUP TO BE STOPPED WITHOUT CONSIDERATION OF MEDICAID ELIGIBILITY UNDER ALL OTHER COVERAGE GROUPS. This is done before the client is notified that his Medicaid eligibility will end. Eligibility is determined based on case record information. The client may be required to visit the office only for completion of a Social Summary for MRT.

**Section 780D of the Common Chapters Manual reads in part:**

The hearing officer's decision must also be based on facts as they existed at the time of the Department's action or proposed action at issue.

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

### **Department' Exhibits:**

Exhibit D-1) Copy of IG/BR/29 Hearing.Grievance Record Information  
Exhibit D-2) Copy of Notification Letter dated 02/14/05  
Exhibit D-3) Copy of Section 16.6A of the West Virginia Income Maintenance Manual  
Exhibit D-4) Department's Summary

### **Claimants' Exhibits:**

Exhibit C-1) Letter from Dr. [REDACTED] dated 03/24/05

It should be noted a letter was received from [REDACTED] Paralegal on 04/26/05. The letter was not entered as a part of the record as the hearing was concluded on 04/21/05.

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

- 1) The case worker had received a mobius report dated 02/10/05 which showed the claimant was no longer receiving SSI.
- 2) The claimant was sent a letter dated 02/14/05 (Exhibit D-2) which reads in part:  
  
Your SSI Medicaid will stop. Reason: \_\_\_\_\_ no longer receives SSI.
- 3) The claimant requested a hearing on 02/24/05 and benefits have continued pending the hearing decision.
- 4) Ms. Oney testified that at the time she received notice that the claimant was not receiving SSI, she did not evaluate the claimant for other types of Medicaid. As far as she knew, the claimant was not eligible for any other type of Medicaid. She gave proper 13-day notice.
- 5) The claimant has been treated for depression since 1976. She has been hospitalized for this condition three times the last being in 1981. Dr. [REDACTED] is her treating psychiatrist. He has treated her for twenty-seven years. (Exhibit C-1) She has also received medical treatment for osteoporosis and a thyroid condition.
- 6) The claimant was found disabled by the Social Security Administration in the early 1990's and benefits continued until 1998 when they were terminated due to a life insurance policy. She still has the life insurance policy but thinks the value has decreased. Her husband helps her with chores around the house. She has not

worked outside the home for the past ten years and does not feel she is able to work now.

- 7) Mr. \_\_\_\_\_ testified that he and his wife have been married 29 years. She has had depression for 28 of those years. He does most of the housework while his wife does most of the cooking. She gets nervous, uptight going out in crowds. She drives only if she has to. The life insurance policy which caused the SSI to be terminated has for the most part been depleted. Ms. \_\_\_\_\_ has a life insurance policy but he thinks it is a term policy. Mr. \_\_\_\_\_ is an accountant. They have a joint savings and checking account.

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

- 1) Policy dictates that receipt of SSI is the only eligibility factor for the SSI Medicaid Program.
- 2) Policy also requires that in no instance is Medicaid coverage under one coverage group to be stopped without consideration of Medicaid eligibility under all other coverage groups.
- 3) The hearing officer's decision must be based on facts as they existed at the time of the Department's action or proposed action at issue.
- 4) The claimant was receiving a medical card based on the fact she is a recipient of SSI. Testimony revealed she has not received SSI since 1998. The Department received notice of this fact on a printout received 02/10/05.
- 5) Testimony revealed while a closure notice was sent, the claimant was not evaluated for other Medicaid coverage groups prior to case closure.

#### **IX. DECISION:**

It is the finding of the State Hearing Officer that the Agency did not follow correct procedures when closing the claimant's SSI Medicaid case. The claimant does not meet the eligibility requirement for SSI Medicaid as she is no longer a recipient of SSI. However, prior to closure, the Agency needs to evaluate her eligibility for other Medicaid coverage groups. The Agency is reversed in the decision to close the claimant's SSI Medicaid case until eligibility is evaluated for other Medicaid coverage groups.

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**May 25, 2005**  
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**X. RIGHT OF APPEAL:**

See Attachment

**XI. ATTACHMENTS:**

The Claimant's Recourse to Hearing Decision

Form IG-BR-29