



State of West Virginia
DEPARTMENT OF HEALTH AND HUMAN RESOURCES
Office of Inspector General
Board of Review
P. O. Box 2590
Fairmont, WV 26555-2590

Joe Manchin III
Governor

Martha Yeager Walker
Secretary

August 1, 2005

Dear Ms. _____:

Attached is a copy of the findings of fact and conclusions of law on your hearing held June 29, 2005. Your hearing request was based on the Department of Health and Human Resources' proposal to terminate your SSI Medicaid.

In arriving at a decision, the State Hearings 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 Medicaid Program is determined based on current regulations. One of these regulations specifies that SSI recipients receive Medicaid coverage under the West Virginia Medicaid Program on the basis of their eligibility for SSI. The West Virginia Department of Health and Human Resources depends on information from the Social Security Administration in certifying Medicaid cases under this coverage group. (West Virginia Income Maintenance Manual ' 16.6).

The information submitted at your hearing reveals that you are no longer receiving SSI. As a result, you are no longer eligible to participate in the SSI Medicaid Program.

It is the decision of the State Hearings Officer to **uphold** the Department's proposal to terminate your SSI Medicaid benefits.

Sincerely,

Thomas E. Arnett
State Hearing Officer
Member, State Board of Review

cc: Erika H. Young, Chairman, Board of Review
Brian Martin, ESW, DHHR

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

_____,

Claimant,

v.

Action Number: _____

**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 concluded on August 1, 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 June 29, 2005 on a timely appeal, filed March 1, 2005.

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

II. PROGRAM PURPOSE:

The program entitled **Medicaid** is set up cooperatively between the Federal and State Government and administered by the West Virginia Department of Health and Human Resources.

Medicaid for Recipients of SSI is a segment of the department's Medicaid Program available to individuals who meet the requirement of categorical relatedness by qualifying as either aged, disabled or blind as those terms are defined by the Social Security Administration and who are eligible for Supplemental Security Income benefits (SSI) as determined by the Social Security Administration.

III. PARTICIPANTS:

_____, Claimant
Brian Martin, ESW, DHHR

Presiding at the Hearing was Thomas E. Arnett, State Hearing Officer and a member of the State Board of Review.

IV. QUESTIONS TO BE DECIDED:

The question(s) to be decided is whether the Department is correct in their proposal to terminate the Claimant's Medicaid benefits under the SSI Medicaid Program.

V. APPLICABLE POLICY:

West Virginia Income Maintenance Manual § 16.6, A&B.

VI. LISTING OF DOCUMENTARY EVIDENCE ADMITTED:

Department's Exhibits:

- D-1 Notice of Decision dated 3/29/05
- D-2 Case Comments from the RAPIDS System - 2/28/05 thru 4/7/05
- D-3 WVIMM 16.6

VII. FINDINGS OF FACT:

- 1) The Department received an electronic correspondence via data exchange with the Social Security Administration (SSA) on or about March 23, 2005 indicating that the Claimant was no longer receiving SSI.
- 2) The Department confirmed that the Claimant's SSI had been terminated with the SSA and sent a Notice of Decision on March 29, 2005. This notice states in pertinent part:

Action: Your SSI Medicaid will stop. You will not receive this benefit after April 2005.

Reason: The individual listed below no longer receives SSI.

- 3) The Department presented exhibit D-2 to show the sequence of events that resulted in the proposed case closure and exhibit D-3 was submitted to cite applicable policy. The Claimant was evaluated for Medicaid under Deemed SSI Recipients but she did not meet the criteria to be eligible under this program. The Claimant's income from Disability is \$544 per month and Widow's benefits are \$502 per month. The Claimant has been evaluated for a spenddown and could be eligible once medical bills sufficient to meet the spenddown amount are received.
- 4) The Claimant testified that she has multiple medical problems and that she needs her Medicaid card. She stated that she did not ask to receive Widow's benefits and she is not sure what she is going to do. She does not believe that a spenddown will work for her.

- 5) West Virginia Income Maintenance Manual, Chapter 16.6 (A):

The amendment to the Social Security Act which established SSI and subsequent rules and regulations gave the states some options regarding Medicaid coverage for SSI recipients. West Virginia elected to cover all SSI recipients and to accept SSA's determination of eligibility for SSI as the sole eligibility determination for Medicaid (for Recipients of SSI).

Consequently, 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.

VIII. CONCLUSIONS OF LAW:

- 1) In accordance with West Virginia Income Maintenance Manual, the Department was notified by the Social Security Administration that the Claimant was no longer eligible to receive SSI. The Department confirmed this information, evaluated the Claimant for participation in an alternative Medicaid Program, and determined that she is no longer eligible to receive Medicaid.

IX. DECISION:

It is the decision of the State Hearing Officer to **uphold** the Department in their proposal to terminate the Claimant's SSI Medicaid.

X. RIGHT OF APPEAL:

See Attachment

XI. ATTACHMENTS:

The Claimant's Recourse to Hearing Decision

Form IG-BR-29

ENTERED this 1st Day of August 2005.

Thomas E. Arnett
State Hearing Officer