



State of West Virginia  
DEPARTMENT OF HEALTH AND HUMAN RESOURCES  
Office of Inspector General  
Board of Review  
P.O. Box 1736  
Romney, WV 26757

Joe Manchin III  
Governor

February 14, 2005

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

Attached is a copy of the findings of fact and conclusions of law on your hearing held February 10, 2005. Your request was based on the Department of Health and Human Resources' proposed action to discontinue your Medicaid coverage when a re-determination was not completed in your case.

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.

Eligibility for the Medicaid program is determined based on current regulations. One of these regulations states that Non-Spenddown medicaid cases are redetermined in the 6<sup>th</sup> month of the Period of Consideration. Failure by the client to keep an appointment for a redetermination usually results in ineligibility. (West Virginia Income Maintenance Manual § 1.2 & 1.22)

The information which was submitted at the hearing revealed that on November 29, 2004 the agency issued an appointment letter to you advising you that your Medicaid eligibility would need to be reviewed on December 09, 2004. This letter also advised your case would be closed if an interview was not completed.

It is the decision of the State Hearing Officer to **uphold** the action of the Agency to close your Medicaid case until a review is completed and a determination made that you remain eligible.

Sincerely,

Sharon K. Yoho  
State Hearing Officer  
Member, State Board of Review

cc: Chairman, Board of Review  
Teresa Stevanus, DHHR

**WEST VIRGINIA DEPARTMENT OF HEALTH & HUMAN RESOURCES  
SUMMARY AND DECISION OF THE STATE HEARING OFFICER**

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\_\_\_\_\_

**February 14, 2005**

**I. INTRODUCTION:**

This is a report of the State Hearing Officer resulting from a fair hearing concluded for \_\_\_\_\_ on February 10, 2005. 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 convened on February 10, 2005 on a timely appeal filed December 21, 2004.

It should be noted, that benefits have continued through this hearing process.

All persons giving testimony were placed under oath.

**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.

SSI Related Medicaid is a segment of the Medicaid Program available to individuals who meet the requirement of categorical relatedness by qualifying as aged, disabled, or blind as those terms are defined by the Social Security Administration for purposes of eligibility for SSI.

**III. PARTICIPANTS:**

\_\_\_\_\_, Claimant  
Teresa Stevanus, DHHR Representative

Presiding at the hearing was Sharon K. Yoho, 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 Agency was correct in their proposal to discontinue the claimant's SSI related Medicaid coverage, at the end of the Period of Consideration, when a review was not completed.

**V. APPLICABLE POLICY:**

West Virginia Income Maintenance Manual § 1.22 and 1.2  
42 CFR § 435.916 Code of Federal Regulations:

**February 14, 2005**

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

Departments' Exhibits:

Exhibit # D1 - Redetermination appointment letter dated November 29, 2004

Exhibit # D2 - WV Income Maintenance Manual § 1.22 N and R

Exhibit # D3 - Approval Letter dated November 05, 2004

Exhibit # D4 - WV Income Maintenance Manual § 1.2

Exhibit # D5 - Notice of proposed closure of case dated December 17, 2004

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

- 1) Mr. \_\_\_\_\_ disability was established by the Department's Medical Review Team (MRT) in the month of November 2004. His SSI related Medicaid case was opened in that same month, but his benefits were backdated to include a Period of Consideration (POC) for months June 2004 thru November 2004.
- 2) Mr. \_\_\_\_\_ was advised in his approval letter dated November 05, 2004 that his case must be reviewed in the month of November 2004 to determine if his benefits could continue.
- 3) An appointment letter was sent to the claimant on November 29, 2004 advising of an appointment date and time of December 09, 2004 at 10:20. This notice advised that the case could be closed if this appointment was not kept.
- 4) Mr. \_\_\_\_\_ did not keep his appointment nor did he contact the Agency to reschedule. A closure letter was sent to Mr. \_\_\_\_\_ dated December 17, 2004 to the same address of the previous letters. This closure letter prompted the request for this hearing.
- 5) The claimant does understand the necessity of a review being completed, however he does not believe he ever saw his appointment letter. He was hospitalized for three weeks in November and went to his sister's house upon his discharge from the hospital. He believes that his appointment letter may have been delivered to his house but never opened.
- 6) Another redetermination appointment was to be made following this hearing.

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

- 1) West Virginia Income Maintenance Manual § 1.2:  
Periodic reviews of total eligibility for recipients are mandated by law. These are redeterminations and take place at specific intervals, depending on the Program or coverage group. Failure by the client to keep an appointment for a redetermination usually results in ineligibility.
- 2) West Virginia Income Maintenance Manual § 1.22:  
Non-Spenddown cases are redetermined in the 6<sup>th</sup> month of the POC.
- 3) Code of Federal Regulations § 42 CFR § 435.916:  
The Agency must redetermine the eligibility of Medicaid recipients, with respect to circumstance that may change.

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**IX. DECISION:**

Policy holds that SSI- Related Medicaid eligibility is based on a 6-month period of consideration. Policy is also clear, that SSI- Related Medicaid cases must undergo a redetermination at the end of each six (6) month Period of Consideration to determine continued eligibility.

Evidence reveals that the claimant was made aware at approval that a review must be completed in November 2004. The Agency sent an appointment letter which prompted no action from the claimant. His failure to keep his appointment or to request a new appointment time resulted in the proposed closure of his Medicaid case.

It is the decision of the State Hearing Officer to **uphold** the action of the Agency to terminate the claimant's SSI-Related Medicaid case until which time a review of his circumstances determines continued eligibility.

**X. RIGHT OF APPEAL:**

See Attachment.

**XI. ATTACHMENTS:**

The Claimant's Recourse to Hearing Decision.

Form IG-BR-29