



State of West Virginia
DEPARTMENT OF HEALTH AND HUMAN RESOURCES
Office of Inspector General
Board of Review
1400 Virginia Street
Oak Hill, WV 25901

Joe Manchin III
Governor

Martha Yeager Walker
Secretary

June 19, 2008

Dear Mr. and Mrs. _____:

Attached is a copy of the findings of fact and conclusions of law on your hearing held June 18, 2008. Your hearing request was based on the Department of Health and Human Resources' decision to terminate your SSI-Related Medicaid due to your period of consideration ending.

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 SSI-Related Medicaid is based on current policy and regulations. Some of these regulations state as follows: Spenddown Medicaid is not re-determined and is closed at the end of the six month period of consideration. An individual must reapply for a new period of consideration (West Virginia Income Maintenance Manual § 1.22 N).

The information which was submitted at your hearing revealed that your six month period of consideration ended April 30, 2008 and a new application is required to continue receiving SSI-Related Medicaid.

It is the decision of the State Hearings Officer to **uphold** the decision of the Department to terminate your SSI-Related Medicaid.

Sincerely,

Kristi Logan
State Hearings Officer
Member, State Board of Review

Cc: Erika Young, Chairman, Board of Review
Murriel Hylton, Economic Service Supervisor

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

_____ and _____,

Claimant,

v.

Action Number: 08-BOR-1367

**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 June 18, 2008 for _____ and _____. 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 18, 2008 on a timely appeal, filed April 22, 2008.

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

II. PROGRAM PURPOSE:

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

The SSI Related Medicaid Program is a segment of the 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 for purposes of eligibility for SSI.

III. PARTICIPANTS:

_____, Claimant
_____, Co-Claimant

Murriel Hylton, Economic Service Worker

Presiding at the Hearing was Kristi Logan, 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's decision to terminate Claimants' SSI-Related Medicaid was correct.

V. APPLICABLE POLICY:

West Virginia Income Maintenance Manual § 1.22

VI. LISTING OF DOCUMENTARY EVIDENCE ADMITTED:

Department's Exhibits:

- D-1 Form IG-BR-29
- D-2 Hearing Request received April 22, 2008
- D-3 Notification Letter dated April 18, 2008
- D-4 West Virginia Income Maintenance Manual § 1.22
- D-5 Department's Case Summary

Claimants' Exhibits:

- C-1 Physician's Notes dated August 1, 2005 from [REDACTED]
- C-2 MRI Report dated October 13, 2005
- C-3 Referrals for Dr. [REDACTED] from [REDACTED] Hospital dated May 13, 2008 and May 17, 2008
- C-4 Prescriptions List from _____ Pharmacy and _____
- C-5 Referral to Know Pain Clinic from Dr. [REDACTED]
- C-6 Handwritten List of Ailments for Co-Claimant

VII. FINDINGS OF FACT:

- 1) Claimant and Co-Claimant applied for SSI-Related Medicaid on June 8, 2007. Claimant receives Social Security Disability but Co-Claimant was referred to the state Medical Review Team (MRT) for a disability determination. Co-Claimant was determined disabled by MRT in October 2007. A spenddown was met and Claimants' six month period of consideration (POC) was November 2007 – April 2008.
- 2) On April 18, 2008 a notification letter was issued and read in part (D-3):

Your Medicaid will end on April 30, 2008. The time limit for this coverage has expired. If you wish to be re-evaluated for Medicaid, you must reapply for coverage.

- 3) Co-Claimant testified that she has numerous medical conditions that require prescription medications and needs the Medicaid to continue for her to be able to afford them. Her Social Security Disability hearing is in July 2008. Claimants do not have additional medical bills to meet another spenddown since Claimant has Medicare and Qualified Medicare Beneficiary (QMB) and Co-Claimant's doctors will not see her without Medicaid.
- 4) West Virginia Income Maintenance Manual § 1.22 N states:

Spenddown Assistance Group's (AG) are not re-determined and are closed at the end of the 6th month of the POC. The client must reapply for a new POC.
- 5) West Virginia Income Maintenance Manual § 1.22 R states:

Spenddown AG's receive a computer-generated letter at the end of the 5th month of the POC. This letter informs the client that his eligibility will end at the end of the following month and that he must reapply for Medicaid coverage.

VIII. CONCLUSIONS OF LAW:

- 1) Policy states that spenddown Assistance Groups receive Medicaid for a six month period of consideration at a time. At the end of that period of consideration, Medicaid is closed and the individual must reapply for another period of consideration.
- 2) Claimants were properly notified by the Department that their period of consideration was ending and a new application was required to continue receiving Medicaid. Claimants failed to reapply for Medicaid. Claimants' SSI-Related Medicaid was correctly terminated.

IX. DECISION:

It is the decision of the State Hearing Officer to **uphold** the decision of the Department to terminate your SSI-Related Medicaid.

X. RIGHT OF APPEAL:

See Attachment

XI. ATTACHMENTS:

The Claimant's Recourse to Hearing Decision

Form IG-BR-29

ENTERED this 19th Day of June, 2008.

**Kristi Logan
State Hearing Officer**