



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

August 6, 2008

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dear Ms. \_\_\_\_\_:

Attached is a copy of the findings of fact and conclusions of law on your hearing held August 5, 2008. Your hearing request was based on the Department of Health and Human Resources' decision to terminate your SSI-Related Medicaid due to the spenddown 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 program is based on current policy and regulations. Some of these regulations state as follows: Spenddown Medicaid Assistance Groups are not redetermined and are 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 period of consideration ended June 30, 2008 and a new application was 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  
Susan Godby, Economic Service Supervisor

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

\_\_\_\_\_,

**Claimant,**

**v.**

**Action Number: 08-BOR-1643**

**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 6, 2008 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 August 5, 2008 on a timely appeal, filed June 23, 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

\_\_\_\_\_, Claimant's Friend

Susan Godby, Economic Service Supervisor

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 Claimant's 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 Notification Letter dated June 18, 2008
- D-3 West Virginia Income Maintenance Manual § 1.22
- D-4 Department's Case Summary

**Claimants' Exhibits:**

- C-1 None

**VII. FINDINGS OF FACT:**

- 1) Claimant had been receiving SSI-Related Medicaid with a Period of Consideration (POC) of January 2008 – June 2008. A notification letter dated June 18, 2008 was issued and read in part (D-2):

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

- 2) Claimant testified that she has to have eye injections every three (3) months which cost \$1800 each. She cannot see without them. Her prescription eye drops that she takes daily are \$288 a bottle. She also has bulging discs in her back and needs to have a MRI. She cannot afford these medical costs without Medicaid. She will not be eligible for Medicare until July 2009.

Claimant's income is Social Security Disability \$760 monthly. Her spenddown would be approximately \$3240. Claimant stated she does not have the bills to meet another spenddown. She is still paying on the ones she used to meet her previous spenddown.

- 3) West Virginia Income Maintenance Manual § 1.22 N states:

Spenddown Assistance Group's (AG) are not redetermined and are closed at the end of the 6<sup>th</sup> month of the POC. The client must reapply for a new POC.

- 4) West Virginia Income Maintenance Manual § 1.22 R states:

Spenddown AG's receive a computer-generated letter at the end of the 5<sup>th</sup> 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) Claimant was properly notified by the Department that her period of consideration was ending and a new application was required to continue receiving Medicaid. Claimant failed to reapply for Medicaid. Claimant's SSI-Related Medicaid was correctly terminated.

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

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

#### **X. RIGHT OF APPEAL:**

See Attachment

#### **XI. ATTACHMENTS:**

The Claimant's Recourse to Hearing Decision

Form IG-BR-29

**ENTERED this 6<sup>th</sup> Day of August, 2008.**

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**Kristi Logan**  
**State Hearing Officer**