



STATE OF WEST VIRGINIA
DEPARTMENT OF HEALTH AND HUMAN RESOURCES
OFFICE OF INSPECTOR GENERAL
BOARD OF REVIEW
P.O. Box 1247
Martinsburg, WV 25402

Earl Ray Tomblin
Governor

Karen L. Bowling
Cabinet Secretary

June 16, 2016

[REDACTED]

RE: [REDACTED] v. WV DHHR
ACTION NO.: 16-BOR-1774

Dear [REDACTED]:

Enclosed is a copy of the decision resulting from the hearing held in the above-referenced matter.

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.

You will find attached an explanation of possible actions you may take if you disagree with the decision reached in this matter.

Sincerely,

Lori Woodward
State Hearing Officer
Member, State Board of Review

Encl: Appellant's Recourse to Hearing Decision
Form IG-BR-29

cc: Toniue Dyer, WV DHHR

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

██████████,

Appellant,

v.

Action Number: 16-BOR-1774

**WEST VIRGINIA DEPARTMENT OF
HEALTH AND HUMAN RESOURCES,**

Respondent.

DECISION OF STATE HEARING OFFICER

INTRODUCTION

This is the decision of the State Hearing Officer resulting from a fair hearing for ██████████. This hearing was held in accordance with the provisions found in Chapter 700 of the West Virginia Department of Health and Human Resources' Common Chapters Manual. This fair hearing was convened on June 16, 2016, on an appeal filed April 11, 2016.

The matter before the Hearing Officer arises from the decision by the Respondent to deny the Appellant's application for Specified Low Income Medicare Beneficiaries (SLMB) coverage benefits.

At the hearing, the Respondent appeared by Toniue Dyer, Family Support Supervisor. The Appellant appeared *pro se*. The witnesses were sworn and the following documents were admitted into evidence.

Department's Exhibits:

- D-1 Letter dated April 25, 2016 to Appellant from Toniue Dyer
- D-2 Notice of denial dated April 6, 2016

After a review of the record, including testimony, exhibits, and stipulations admitted into evidence at the hearing, and after assessing the credibility of all witnesses and weighing the evidence in consideration of the same, the Hearing Officer sets forth the following Findings of Fact.

FINDINGS OF FACT

- 1) The Appellant applied for WV Medicaid limited Medicare program benefits in March 2016.
- 2) On April 6, 2016, the Department sent a denial letter to the Appellant citing WV Income Maintenance Manual policy section 16.6.D as the reason for the denial. (Exhibit D-2)
- 3) The Appellant was not a recipient of Medicare Part B benefits at the time of his application.
- 4) The Appellant did not dispute any of the facts.

APPLICABLE POLICY

West Virginia Income Maintenance Manual (IMM) §16.6.D explains that an individual is eligible for Specified Low Income Medicare Beneficiaries (SLMB) coverage when all of the following conditions are met:

- The individual must be enrolled in Medicare, Part A. He must be entitled in any of the following three ways:

- By being age 64 years, 9 months old or older; or
- By having been totally and continuously disabled and receiving RSDI or Railroad Retirement benefits for 24 months or longer; or
- By having end stage renal disease

- The individual or couple must meet the income test detailed in Chapter 10.

NOTE: RSDI COLA's are disregarded in determining income eligibility until the new FPL limits become effective.

- The individual or couple must meet the asset test detailed in Chapter 11.

Medicaid coverage is limited to payment of the Medicare, Part B, premium.

DISCUSSION

The Appellant applied for WV Medicaid limited Medicare premium assistance in March 2016. The Respondent's witness explained that the U.S. Social Security Administration (SSA) data exchange service, SOLQ (State On-Line Query), showed the Appellant would not begin receiving Medicare Part B benefits until July 2016. She explained that per policy, the

Appellant's application for the Medicare premium assistance program could only be open for 30 days. As his Medicare Part B would not begin until July 2016, the Department denied his application. The Respondent's witness did add, however, that the Appellant could re-apply this month since his Medicare Part B benefit would begin in July.

The Appellant did not dispute the facts or the Department's decision. He stated that he was instructed to make an application for the Medicare premium assistance program when he was released from prison. He was uncertain as to the reason he was denied, thus he requested this fair hearing.

CONCLUSION OF LAW

SLMB Medicaid coverage is limited to payment of the Medicare Part B premium. The Appellant was not receiving Medicare Part B benefits at the time of his in March 2016. The Department correctly denied the Appellant's March 2016 application for Medicare premium assistance benefits.

DECISION

It is the decision of the State Hearing Officer to **uphold** the Department's decision to deny the Appellant's March 2016 Medicare premium assistance benefits.

ENTERED this 16th day of June 2016.

Lori Woodward, State Hearing Officer