



STATE OF WEST VIRGINIA  
DEPARTMENT OF HEALTH AND HUMAN RESOURCES  
OFFICE OF INSPECTOR GENERAL  
BOARD OF REVIEW  
2699 Park Avenue, Suite 100  
Huntington, WV 25704

Earl Ray Tomblin  
Governor

Karen L. Bowling  
Cabinet Secretary

September 29, 2016

[REDACTED]  
[REDACTED]  
[REDACTED]

RE: [REDACTED] v. WV DHHR  
ACTION NO.: 16-BOR-2267

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,

Todd Thornton  
State Hearing Officer  
Member, State Board of Review

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

cc: Deborah Marcum, Department Representative

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

██████████,

**Appellant,**

v.

**Action Number: 16-BOR-2267**

**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 August 18, 2016, on an appeal filed July 11, 2016.

The matter before the Hearing Officer arises from the Respondent's May 27, 2016 decision to terminate the Appellant's Medicaid benefits.

At the hearing, the Respondent appeared by Deborah Marcum and Tiffany Cobb. The Appellant appeared *pro se*. Appearing as a witness for the Appellant was ██████████. All witnesses were sworn and the following documents were admitted into evidence.

**Department's Exhibits:**

- D-1 West Virginia Income Maintenance Manual (WVIMM), Chapter 10.8
- D-2 WVIMM, Chapter 10, Appendix A
- D-3 Notice of decision, dated May 27, 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 was a recipient of Medicaid based on receipt of Supplemental Security Income (SSI).
- 2) The Appellant stopped receiving SSI.
- 3) This Respondent stopped the Appellant's SSI Medicaid on this basis.
- 4) The Respondent reevaluated the Medicaid eligibility of the Appellant's household in conjunction with the termination of his SSI Medicaid.
- 5) The Respondent notified the Appellant that his household was over the income limit for the reevaluated adult Medicaid category. (Exhibit D-3)

### **APPLICABLE POLICY**

The West Virginia Income Maintenance Manual (WVIMM), at §16.6.A, reads, "West Virginia elected to cover all SSI recipients and to accept [Social Security Administration's] determination of SSI as the sole eligibility determination for Medicaid," and, "Consequently, there is no application or eligibility determination for Medicaid. The Department depends upon [Social Security Administration] for the information needed to open, evaluate and close continuing eligibility for SSI Medicaid cases."

WVIMM, §16.5.F, sets the income limit for the Adult Group category of Medicaid as 133% of the Federal Poverty Level (FPL).

WVIMM, §10, Appendix A, indicates this income limit (133% FPL) is \$1,776 for a household size of two at the time of the Respondent's decision.

### **DISCUSSION**

The Respondent terminated the Appellant's Medicaid and the Appellant requested this hearing to contest this action.

The Respondent must show by a preponderance of the evidence that the Appellant's household is ineligible for Medicaid. The Respondent clearly established this in the hearing.

The Appellant's household consists of himself and his wife. The Appellant received Medicaid based on his receipt of SSI. The Appellant's wife received a category of Medicaid for adults that evaluated her without consideration of the Appellant's eligibility factors because he was receiving SSI Medicaid.

The Respondent determined the Appellant was no longer eligible for SSI, and acted correctly to close the Medicaid on this basis. The Appellant provided unconvincing testimony that he may be receiving payments from the Social Security Administration (SSA), but provided no evidence to clearly dispute the Respondent's data match with SSA.

As a result of the Respondent's termination of the Appellant's SSI Medicaid, his household was reevaluated for other Medicaid coverage. This reevaluation combined the household and their income sources for the adult Medicaid category. The combined household income (\$2032.12) was compared to the income limit for a household of two (\$1776) in the adult Medicaid category and determined excessive. The Appellant had no dispute of these income amounts. The Respondent was correct to terminate Medicaid for the Appellant's household based on this reevaluation and Medicaid category shift triggered by the SSI closure.

### **CONCLUSIONS OF LAW**

- 1) Because the Appellant stopped receiving SSI, the Respondent was correct to terminate his Medicaid benefits in the category based on receipt of SSI.
- 2) Because the Appellant's household had excessive income for the remaining Medicaid category for adults, the Respondent was correct to terminate Medicaid for the Appellant's household.

### **DECISION**

It is the decision of the State Hearing Officer to **uphold** the Respondent's termination of Medicaid for the Appellant's household.

**ENTERED this \_\_\_\_ Day of September 2016.**

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**Todd Thornton**  
**State Hearing Officer**