



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

Jim Justice
Governor

Bill J. Crouch
Cabinet Secretary

October 25, 2017



RE: [REDACTED] v. WV DHHR
ACTION NO.: 17-BOR-2263

Dear Mr. [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: Vickie Ranson, Department Representative

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

██████████,

Appellant,

v.

Action Number: 17-BOR-2263

**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 September 7, 2017, on an appeal filed August 9, 2017.

The matter before the Hearing Officer arises from the Respondent's July 31, 2017 decision to terminate the Appellant's Medicaid benefits.

At the hearing, the Respondent appeared by Vickie Ranson. The Appellant appeared *pro se*. All witnesses were sworn and the following documents were admitted into evidence.

Department's Exhibits:

- D-1 Notice of Decision, dated July 31, 2017
- D-2 West Virginia Income Maintenance Manual (WV IMM), §11.3; §23.11
- D-3 Hearing Summary

Appellant's Exhibits:

- A-1 Letter from the Appellant; Financial and medical documentation regarding the Appellant

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 benefits, under a category of Medicaid known as “M-WIN,” or Medicaid Work Incentive.
- 2) During a July 18, 2017 review of his ongoing eligibility for Medicaid, the Appellant reported assets that had not been previously considered in determining his Medicaid eligibility.
- 3) The Appellant owns 1,172 shares of common stock in First Community Bancshares, Inc. (“FCBC”) (Exhibit A-1)
- 4) The closing price for a share of common stock in FCBC was \$27.35 on June 30, 2017 – the last business day of the month prior to the month of the Appellant’s Medicaid review. (www.nasdaq.com/symbol/fcbc/historical - retrieved October 25, 2017)
- 5) The Respondent advised the Appellant, by notice dated July 31, 2017 (Exhibit D-1), that his Medicaid benefits would be terminated because “The amount of assets is more than is allowed for this benefit.”

APPLICABLE POLICY

The West Virginia Income Maintenance Manual (WV IMM), at §23.11.A, sets the asset limit for M-WIN as \$2,000 for a single individual.

At §23.11.C.2, this policy allows the exclusion of \$5,000 in liquid assets – including stocks – when determining total countable assets.

At §11.4.QQ, the WVIMM notes that stocks are considered in determining asset eligibility for Medicaid. This policy reads, “To establish the [current market value] of a stock for applicants, the Worker must use the closing stock market price as of the last business day of the prior month.”

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 had assets over the limit allowed by policy. The Respondent clearly proved this in the hearing.

The Appellant did not dispute his ownership of the assets in question. Although the Appellant has other assets considered in determining his Medicaid eligibility, the only asset relevant to the overall decision was his shares of common stock in "FCBC." This asset was worth \$32,054.20 (1,172 shares at \$27.35 per share) on the date considered by policy. After allowing for a \$5,000 liquid asset exclusion, the remaining countable value of \$27,054.20 exceeds the \$2,000 asset limit applicable to the Appellant's household size and Medicaid category.

The Respondent proved that it acted correctly in determining the Appellant was over the asset limit and terminating the Appellant's eligibility for this Medicaid category on that basis.

CONCLUSION OF LAW

Because the Appellant has assets over the limit allowed by policy, the Respondent must terminate his Medicaid benefits.

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 October 2017.

Todd Thornton
State Hearing Officer