



**STATE OF WEST VIRGINIA  
DEPARTMENT OF HEALTH AND HUMAN RESOURCES  
Office of the Inspector General  
Board of Review**

**Sherri A. Young, DO, MBA, FAAFP  
Interim Cabinet Secretary**

**Sheila Lee  
Interim Inspector General**

July 10, 2023

[REDACTED]

RE: [REDACTED] v. WVDHHR  
ACTION NO.: 23-BOR-1728

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,

**Tara B. Thompson, MLS**  
State Hearing Officer  
Member, State Board of Review

Encl: Decision Recourse  
Form IG-BR-29

CC: Lona Charley, [REDACTED] DHHR

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

██████████,

**Appellant,**

v.

**Action Number: 23-BOR-1728**

**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 May 31, 2023.

The matter before the Hearing Officer arises from the Respondent's April 14, 2023 decision to terminate the Appellant's Medicaid Long-Term Care benefit eligibility.

At the hearing, the Respondent was represented by Lona Charley, Economic Services Worker, ██████████ DHHR. Appearing as a witness for the Respondent was Carrie Casto, Economic Services Supervisor, ██████████ DHHR. The Appellant appeared and was represented by ██████████, Social Services Worker at ██████████. All those present were sworn in and the following documents were admitted into evidence.

**Department's Exhibits:**

D-1    Hearing Request Form  
        Handwritten Statement, by ██████████  
        West Virginia Income Maintenance Manual § 5.4  
        ██████████ Statement, dated February 28, 2023  
        ██████████ Statement, dated February 28, 2023

**Appellant's Exhibits:**

None

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 following Findings of Fact are set forth.

### **FINDINGS OF FACT**

- 1) The Appellant was a recipient of Medicaid Long-Term Care benefits for a one-person Assistance Group (AG).
- 2) On April 14, 2023, the Respondent issued a notice advising the Appellant that her Medicaid benefits would end after April 30, 2023, because her assets exceeded the Medicaid eligibility limit.
- 3) The handwriting reflected on the exhibits was made by the Respondent's representative (Exhibit D-1).
- 4) At the time of the Respondent's decision, the asset limit for a one-person AG was \$2,000.
- 5) On March 29, 2023, the Appellant submitted a Medicaid Long-Term Care eligibility review.
- 6) On February 28, 2023, the Appellant had a \$5.09 savings account balance (Exhibit D-1).
- 7) On February 28, 2023, the Appellant had a \$6,692.74 checking account balance (Exhibit D-1).
- 8) The Appellant's checking account statement reflected a \$184.12 pension deposit and a \$1,517.00 social security income deposit for February 2023 (Exhibit D-1).
- 9) The Respondent deducted the Appellant's February 2023 pension and social security income from her countable assets (Exhibit D-1).
- 10) After deducting the Appellant's pension and social security income, the Appellant was \$2,996.71 over the \$2,000 Medicaid eligibility asset limit (Exhibit D-1).
- 11) After the Respondent's April 14, 2023 termination, the Appellant submitted a new application and bank statements that reflected a reduction in the Appellant's assets (Exhibit D-1).
- 12) The Appellant's Medicaid Long-Term Care eligibility was reinstated, effective June 1, 2023 (Exhibit D-1).

## **APPLICABLE POLICY**

**West Virginia Income Maintenance Manual (WVIMM) § 1.2.2.B *Redetermination Process* provides in relevant sections:**

Periodic reviews of total eligibility for recipients are mandated by federal law.

**WVIMM § 1.2.4 *Client Responsibility* provides in relevant sections:**

The client must provide complete and accurate information about her circumstances so that the Worker is able to make a correct determination about her eligibility.

**WVIMM § 5.4 *Maximum Allowable Assets* provides in relevant sections:**

For a one-person AG, the Medicaid eligibility asset limit is \$2,000.

**WVIMM §§ 5.5.4 and 5.5.4.A *Bank Accounts and Savings Accounts, Christmas Clubs, Checking Accounts, CDs* provides in relevant sections:**

Bank accounts and savings accounts are countable assets for determining Medicaid eligibility. The current month's income deposited in accounts is not counted as an asset for that month.

## **DISCUSSION**

Following the Appellant's submission of an eligibility review, the Respondent determined the Appellant's assets exceeded the Medicaid eligibility asset limit. The Respondent subsequently notified the Appellant her eligibility would be terminated after April 30, 2023. The Appellant's hearing request indicated she wanted her Medicaid eligibility to be reinstated. The Respondent had to prove by a preponderance of evidence that the Appellant's assets exceeded the Medicaid eligibility limit at the time of the Respondent's April 14, 2023 decision.

During the hearing, the Respondent's representative testified that the Appellant submitted an eligibility review form on March 29, 2023. The Appellant's February 28, 2023 bank statement revealed the Appellant had a \$6,692.74 checking account balance. The policy stipulates that the current month's income deposited in accounts is not counted as an asset for that month. During the hearing, the Respondent's representative testified that she subtracted the Appellant's \$1,517 social security income, and \$184.12 pension from the Appellant's balance amount when determining the Appellant's eligibility.

Following the current month's income deductions, the evidence revealed the Appellant's remaining liquid asset balance was \$4,991.62. Pursuant to the policy, the asset limit for a one-person AG is \$2,000. After adding the \$5.09 savings account amount to the Appellant's countable assets, the evidence revealed that the Appellant was over the asset limit in February

2023. The Appellant did not protest the Respondent's calculations or the amount of her balance at the time of the Respondent's April 14, 2023 decision.

The Respondent's representative testified that after the April 14, 2023 decision, the Appellant submitted a new application and an updated bank statement that reflected a new asset balance below the \$2,000 Medicaid eligibility asset limit. The Respondent's representative testified that the Appellant's eligibility was reinstated in June 2023. While asset reductions subsequent to the Respondent's April 14, 2023 decision resulted in the reinstatement of the Appellant's Medicaid eligibility in June 2023, the Hearing Officer may only consider the assets that were accessible to the Appellant at the time of the Respondent's April 14, 2023 decision. No information was provided to specify when the Appellant's assets fell within Medicaid eligibility guidelines or to indicate that she should have been eligible in May 2023. Any asset reduction that occurred after the Respondent's April 14, 2023 decision could not be considered when determining whether the Respondent correctly terminated the Appellant's Medicaid eligibility after April 30, 2023.

The preponderance of the evidence revealed that the Appellant's assets exceeded the Medicaid eligibility guidelines. Therefore, the Respondent's April 14, 2023 decision to terminate the Appellant's Medicaid Long-Term Care benefit eligibility based on her February 2023 asset balance was correct.

### **CONCLUSIONS OF LAW**

- 1) To be financially eligible for Medicaid Long-Term Care benefits, the Appellant's assets could not exceed \$2,000.
- 2) The preponderance of the evidence demonstrated the Appellant's assets exceeded the Medicaid eligibility limit in February 2023.
- 3) The Respondent correctly terminated the Appellant's Medicaid benefits because her assets exceeded the Medicaid income eligibility limit for a one-person AG.

### **DECISION**

It is the decision of the State Hearing Officer to **UPHOLD** the Respondent's April 14, 2023 decision to terminate the Appellant's Medicaid Long-Term Care benefit eligibility.

Entered this 10<sup>th</sup> day of July 2023.

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**Tara B. Thompson, MLS**  
State Hearing Officer