



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

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

**Christopher G. Nelson
Interim Inspector General**

August 23, 2023

[REDACTED]

RE: [REDACTED] v. WV DHHR
ACTION NO.: 23-BOR-1944

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, J.D.
Certified State Hearing Officer
Member, State Board of Review

Encl: Recourse to Hearing Decision
Form IG-BR-29

cc: Ann Hubbard, BFA, WV DHHR

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

██████████,

Appellant,

v.

ACTION NO.: 23-BOR-1944

**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 22, 2023, on an appeal filed June 27, 2023.

The matter before the Hearing Officer arises from the Respondent's May 10, 2023 decision to deny Medicaid benefits.

At the hearing, the Respondent appeared by Ann Hubbard, Economic Services Supervisor. The Appellant appeared *pro se*. Appearing as a witness for the Appellant was her son, ██████████. The witnesses were placed under oath and the following documents were admitted into evidence:

Department's Exhibits:

- D-1 Hearing Summary
- D-2 Medicaid Review Form, submitted on April 20, 2023
- D-3 Denial Notice, dated May 10, 2023
- D-4 West Virginia Income Maintenance Manual, Chapter 3, §3.7.1.B

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 Hearing Officer sets forth the following Findings of Fact.

FINDINGS OF FACT

- 1) The Appellant was a recipient of MAGI Adult Medicaid benefits. (Exhibit D-1)
- 2) On April 20, 2023, the Appellant completed a redetermination for continued eligibility for Medicaid benefits. (Exhibit D-2)
- 3) The Appellant is enrolled in Medicare Part A coverage.
- 4) On May 10, 2023, the Respondent sent notification to the Appellant that she no longer was eligible for Medicaid and/or WVCHIP benefits due to her Medicare eligibility.
- 5) The Appellant was approved for Medicaid Qualified Medicare Beneficiary assistance.

APPLICABLE POLICY

Families First Coronavirus Response Act (FFCRA) and Fiscal Year (FY) 2023 Omnibus Appropriations Bill permitted the Respondent to provide continuous coverage to Medicaid recipients during the declared public health emergency (PHE). The Medicaid continuous enrollment ended on April 1, 2023.

To be eligible for Medicaid Adult Group benefits, individuals must be age 19 or older and under age 65 and cannot be entitled to or enrolled in Medicare Part A or B. (WV Income Maintenance Manual, Chapter 3, §3.7.1.B)

DISCUSSION

On April 20, 2023, the Appellant submitted her Medicaid review form to continue her Adult Medicaid benefits. Because the Appellant was enrolled in Medicare, the Respondent denied the Appellant's application and sent notification on May 10, 2023 of the denial.

The Appellant does not contest the fact that she is enrolled in Medicare Part A. The Appellant testified that she also had been enrolled in Medicare Part B but had mistakenly cancelled her participation. Although the May 10, 2023 denial of Adult Medicaid benefits also included a denial of Medicare Premium Assistance (MPA) benefits, the testimony provided by the parties showed that she is receiving MPA benefits under Qualified Medicare Beneficiary coverage.

Because the Appellant is eligible for Medicare Part A and B, she is ineligible for Adult Medicaid benefits, but is currently receiving MPA benefits. The Respondent's decision to deny the Appellant's Adult Medicaid application is affirmed.

CONCLUSION OF LAW

Whereas the Appellant is enrolled in Medicare Part A, she is not eligible for Adult Group Medicaid benefits, per policy.

DECISION

It is the decision of the State Hearing Officer to **UPHOLD** the Respondent's decision to deny the Appellant's request for Adult Group Medicaid benefits.

ENTERED this 23rd day of August 2023.

Lori Woodward, Certified State Hearing Officer