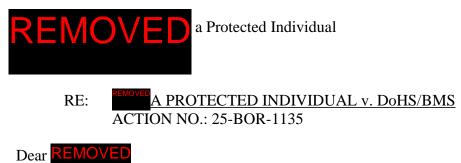


March 11, 2025



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 Human Services. 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,

Kristi Logan Certified State Hearing Officer Member, State Board of Review

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

cc: Bureau for Medical Services PC&A Acentra Health

WEST VIRGINIA OFFICE OF INSPECTOR GENERAL BOARD OF REVIEW

A PROTECTED INDIVIDUAL,

Appellant,

v.

Action Number: 25-BOR-1135

WEST VIRGINIA DEPARTMENT OF HUMAN SERVICES BUREAU FOR MEDICAL SERVICES,

Respondent.

DECISION OF STATE HEARING OFFICER

INTRODUCTION

This is the decision of the State Hearing Officer resulting from a fair hearing for a Protected Individual. This hearing was held in accordance with the provisions found in Chapter 700 of the Office of Inspector General Common Chapters Manual. This fair hearing was convened on March 5, 2025.

The matter before the Hearing Officer arises from the December 23, 2024, decision by the Respondent to deny medical eligibility for services under the I/DD Waiver Program.

At the hearing, the Respondent appeared by Charley Bowen, consulting psychologist for the Bureau for Medical Services. The Appellant appeared by her mother, **RENOVED** The witnesses were placed under oath and the following documents were admitted into evidence.

Department's Exhibits:

- D-1 Bureau for Medical Services Provider Manual §513.6
- D-2 Notice of Denial dated December 23, 2024
- D-3 Independent Psychological Evaluation (IPE) dated December 4, 2024
- D-4 Initial Comprehensive Psychological Evaluation dated May 21, 2008
- D-5 <u>Psychological Evaluation dated April 23, 2014</u>
- D-6 Visit Summary dated November 27, 2024
- D-7 Clinic Progress Notes dated November 27, 2024
 - Diagnostic Impression dated April 14, 2008
- D-9 Letter from **REMOVED**, Licensed Psychologist dated April 20, 2008
- D-10 Individualized Education Plan (IEP) dated April 20, 2023
- D-11 **REMOVED** County Schools Performance Summary and Transcript

D-8

Appellant's Exhibits:

- A-1 Division of Rehabilitation Services CRP Progress Report dated January 31, 2025
- A-2 Community Based Assessment Worksheet dated December 15, 2023
- A-3 Community Based Assessment Worksheet dated March 4, 2024
- A-4 Community Based Assessment Worksheet dated March 27, 2024
- A-5 Community Based Assessment Worksheet dated April 4, 2024
- A-6 Letter from **REMOVED** County Sheriff's Department dated February 5, 2025
- A-7 **REMOVED**Rural Clinic Progress Note dated January 24, 2025

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 services under the I/DD Waiver Program.
- 2) An Independent Psychological Evaluation (IPE) was conducted with the Appellant in conjunction with the I/DD Waiver application on December 4, 2024 (Exhibit D-3).
- 3) The Appellant was diagnosed with Autism Spectrum Disorder, Level 2 and Generalized Epilepsy (Exhibit D-3).
- 4) The Respondent sent a notice of denial on November 20, 2024, advising that the Appellant's application for the I/DD Waiver Program had been denied as the documentation submitted for review does not reflect an eligible diagnosis of Intellectual Disability or a related condition which is severe. To be considered a severe related condition, Autism Spectrum Disorder must be diagnosed as a Level 3 (Exhibit D-2).

APPLICABLE POLICY

Code of Federal Regulations 42 CFR § 440.150(a)(2) *Intermediate Care Facility (ICF/IID) services* provided that *ICF/IID services* means health or rehabilitative services furnished to persons with Intellectual Disability or persons with related conditions in an intermediate care facility for individuals with Intellectual Disabilities.

Code of Federal Regulations 42 CFR § 435.1010 *Definitions relating to institutional status* provides in relevant sections:

Active Treatment in intermediate care facilities for individuals with intellectual disabilities means treatment that meets the requirements specified in the standard concerning active treatment for intermediate care facilities for persons with Intellectual Disability under § 483.440(a) of this subchapter.

Persons with related conditions means individuals who have a severe, chronic disability that meets all of the following conditions:

- (a) It is attributable to
 - (1) Cerebral palsy or epilepsy; or

(2) Any other condition, other than mental illness, found to be closely related to Intellectual Disability because this condition results in impairment of general intellectual functioning similar to that of mentally retarded persons, and requires treatment or services similar to those required for these persons.

- (b) It is manifested before the person reaches age 22.
- (c) It is likely to continue indefinitely.

Code of Federal Regulations 42 CFR § 456.70(b) Medical, psychological, and social evaluations:

A psychological evaluation, not older than three months, is required to establish eligibility for Medicaid ICF/IID admission or authorization of payment. The psychological evaluation is required to include a diagnosis; summary of present medical, social, and developmental findings; medical and social family history; mental and physical functional capacity; prognoses; types of services needed; an assessment of the Appellant's home, family, and community resources; and a recommendation for ICF admission.

Code of Federal Regulations 42 CFR § 456.372 Medicaid agency review of need for admission:

The Medicaid agency or its designee must evaluate each applicant's need for admission by reviewing and assessing the evaluations required by § 456.370.

Bureau for Medical Services Provider Manual Chapter 513 explains medical eligibility for the I/DD Waiver program:

513.6.2 Initial Medical Eligibility

To be medically eligible, the applicant must require the level of care and services provided in an ICF/IID as evidenced by required evaluations and other information requested by the IP or the MECA and corroborated by narrative descriptions of functioning and reported history. An ICF/IID provides services in an institutional setting for persons with intellectual disability or a related condition. An ICF/IID provides monitoring, supervision, training, and supports. Evaluations of the applicant must demonstrate:

- A need for intensive instruction, services, assistance, and supervision in order to learn new skills, maintain current level of skills, and/or increase independence in activities of daily living; and
- A need for the same level of care and services that is provided in an ICF/IID.

The MECA determines the qualification for an ICF/IID level of care (medical eligibility) based on the IPE that verifies that the applicant has intellectual disability with concurrent substantial deficits manifested prior to age 22 or a related condition which constitutes a

severe and chronic disability with concurrent substantial deficits manifested prior to age 22. For the IDDW Program, individuals must meet criteria for medical eligibility not only by test scores, but also narrative descriptions contained in the documentation.

In order to be eligible to receive I/DD Waiver Program Services, an applicant must meet the medical eligibility criteria in each of the following categories:

- Diagnosis;
- Functionality;
- Need for active treatment; and
- Requirement of ICF/IID Level of Care.

513.6.2.1 Diagnosis

The applicant must have a diagnosis of Intellectual Disability with concurrent substantial deficits manifested prior to age 22 or a related condition which constitutes a severe and chronic disability with concurrent substantial deficits manifested prior to age 22.

Examples of related conditions which, if severe and chronic in nature, may make an individual eligible for the I/DD Waiver Program include but are not limited to, the following:

- Autism;
- Traumatic brain injury;
- Cerebral Palsy;
- Spina Bifida; and
- Any condition, other than mental illness, found to be closely related to Intellectual Disability because this condition results in impairment of general intellectual functioning or adaptive behavior similar to that of intellectually disabled persons, and requires services similar to those required for persons with intellectual disability.

Additionally, the applicant who has a diagnosis of intellectual disability or a severe related condition with associated concurrent adaptive deficits must meet the following requirements:

- Likely to continue indefinitely; and,
- Must have the presence of at least three substantial deficits out of the six identified major life areas listed in Section 513.6.2.2.

513.6.2.2 Functionality

The applicant must have substantial deficits in at least three of the six identified major life areas listed below:

- Self-care;
- Receptive or expressive language (communication);

- Learning (functional academics);
- Mobility;
- Self-direction; and,
- Capacity for independent living which includes the following six sub-domains: home living, social skills, employment, health and safety, community and leisure activities. At a minimum, three of these sub-domains must be substantially limited to meet the criteria in this major life area.

Substantial deficits are defined as standardized scores of three standard deviations below the mean or less than one percentile when derived from a normative sample that represents the general population of the United States, or the average range or equal to or below the 75th percentile when derived from Intellectual Disability (ID) normative populations when ID has been diagnosed and the scores are derived from a standardized measure of adaptive behavior. The scores submitted must be obtained from using an appropriate standardized test for measuring adaptive behavior that is administered and scored by an individual properly trained and credentialed to administer the test. The presence of substantial deficits must be supported not only by the relevant test scores, but also the narrative descriptions contained in the documentation submitted for review, i.e., psychological report, the IEP, Occupational Therapy evaluation, etc. if requested by the IP for review.

513.6.2.3 Active Treatment

Documentation must support the applicant would benefit from continuous active treatment. Active treatment includes aggressive consistent implementation of a program of specialized and generic training, treatment, health services, and related services. Active treatment does not include services to maintain generally independent individuals who are able to function with little supervision or in the absence of a continuous active treatment program.

DISCUSSION

Pursuant to policy, an individual must meet the medical eligibility criteria of a diagnosis of Intellectual Disability or related condition, which constitutes a severe and chronic disability that manifested prior to age 22, the functionality criteria of at least three substantial adaptive deficits out of the six major life areas that manifested prior to age 22, the need for active treatment and a requirement of ICF/IID level of care to receive services under the I/DD Waiver Program.

The Respondent denied the Appellant's application as she did not meet the diagnostic criteria of an eligible diagnosis of an Intellectual Disability, or related condition, which is severe. Charley Bowen, witness for the Respondent, testified that the Appellant's diagnosis of Autism Spectrum Disorder Level 2 does not meet the severity criteria as a qualifying condition for program eligibility. Furthermore, Mr. Bowen stated that there is no evidence that the Appellant has an Intellectual Disability. The Appellant was administered the Weschler Adult Intelligence Scale (WAIS) during the December 2024 IPE and received an Intelligence Quotient (IQ) score 80, in the low average range of intellectual functioning.

The Appellant was initially diagnosed with Autistic Disorder in 2008, at the age of three. Mr. Bowen noted that there was no level assigned to the Autism diagnosis in 2008 to determine the severity (Exhibit D-4). The Childhood Autism Rating Scale (CARS) administered to the Appellant in 2014 during a psychological evaluation yielded a score of 51, in the severe range. The Appellant received a diagnosis of Autistic Disorder, with no severity level assigned to the diagnosis in accordance with the Diagnostic and Statistical Manual of Mental Disorders (DSM). (Exhibit D-5).

The Gilliam Autism Rating Scale (GARS) was administered to the Appellant in April 2008. The Appellant received a score of 91. Mr. Bowen testified that for the GARS instrument, scores falling between 71 and 100 indicate a Level 2 severity level of Autism (Exhibit D-8). The Appellant was given the CARS during the December 2024 IPE and received a score of 40, falling in the severe range. However, Mr. Bowen stated that based on the information provided during the IPE, the administering psychologist diagnosed the Appellant's Autism Spectrum Disorder as Level 2, which does not meet the severity criteria for program eligibility.

REMOVED the Appellant's mother, testified that she overestimated the Appellant's abilities when completing the Adaptive Behavior Assessment Scale (ABAS), contending that the Appellant has deficits in all six of the major life areas. **REMOVED** did not dispute her daughter's IQ scores, stating she is smart. **REMOVED** argued that the Respondent should consider the Appellant's overall functionality when determining eligibility and not just her Autism Level 2 diagnosis. **REMOVED** stated the Appellant cannot live independently and requires an aide to maintain employment. **REMOVED** testified that the Appellant cannot express herself, has limited social skills and does not recognize dangers to her safety.

Policy requires the presence of a diagnosis of an Intellectual Disability or a severe related condition as the first step in determining medical eligibility for the I/DD Waiver Program. The documentation provided failed to establish that the Appellant had an eligible diagnosis of an Intellectual Disability or related condition, which is severe, Whereas the Appellant did not meet the diagnostic criteria for the I/DD Waiver Program, the Respondent's decision to deny the Appellant's application is affirmed.

CONCLUSIONS OF LAW

- 1) Pursuant to policy, an individual must meet the diagnostic criteria of a diagnosis of Intellectual Disability or related condition, which constitutes a severe and chronic disability that manifested prior to age 22.
- 2) The documentation provided failed to establish that the Appellant had an eligible diagnosis of an Intellectual Disability or related condition, which is severe.
- 3) The Appellant does not meet the diagnostic criteria for services under the I/DD Waiver Program.

DECISION

It is the decision of the State Hearing Officer to **uphold** the decision of the Respondent to deny the Appellant's application for services under the I/DD Waiver Program.

ENTERED this 11th day of March 2025.

Kristi Logan Certified State Hearing Officer