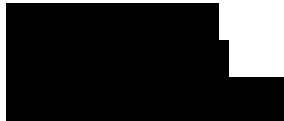




April 30, 2025



RE: [REDACTED] v. WV DoHS/BFA
ACTION NO.: 25-BOR-1684

AMENDED COVER LETTER

Dear Mr. [REDACTED]

Enclosed is a copy of the decision resulting from the hearing held in the above-referenced matter. The cover letter has been amended to reflect the correct letter recipient. No other changes have been made to the attached *Decision*.

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 (DOHS). These same laws and regulations are used in all cases to ensure 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: Recourse to Hearing Decision
Form IG-BR-29

cc: James Hilling, [REDACTED] County DoHS
Justin Thorne, [REDACTED] County DoHS
Pamela Trickett, [REDACTED] County DoHS

**WEST VIRGINIA OFFICE OF INSPECTOR GENERAL
BOARD OF REVIEW**

██████████,

Appellant,

v.

Action Number: 25-BOR-1684

**WEST VIRGINIA DEPARTMENT OF
HUMAN SERVICES
BUREAU FOR FAMILY ASSISTANCE,**

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 Office of Inspector General Common Chapters Manual. This fair hearing was convened on April 9, 2025.

The matter before the Hearing Officer arises from the Respondent's January 8, 2025 decision to terminate his Supplemental Security Income (SSI) Medicaid benefits.

At the hearing, the Respondent appeared by James Hilling, ██████████ County DoHS. The Appellant was self-represented. All witnesses were placed under oath and the following documents were admitted into evidence.

Department's Exhibits:

- D-1 Notice, dated March 1, 2024
- D-2 Notice, dated January 8, 2025
- D-3 West Virginia Income Maintenance Manual (WVIMM) § 23.11
- D-4 Notice, dated February 26, 2025
- D-5 WVIMM § 4.12
- D-6 WVIMM Chapter 4 Income Limits

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 receives monthly unearned income from Retirement, Survivors, and Disability Insurance (hereafter, RSDI).
- 2) On March 1, 2024, the Appellant was approved for SSI Medicaid (Exhibit D-1).
- 3) When determining his March 1, 2024 Medicaid eligibility, the Respondent's worker incorrectly entered the Appellant's income source as SSI.
- 4) On January 8, 2025, the Respondent issued a notice advising the Appellant his SSI Medicaid benefits would end after January 31, 2025 because the Appellant was not an SSI recipient (Exhibit D-2).
- 5) The Respondent evaluated the Appellant for other types of Medicaid assistance (Exhibit D-4).
- 6) The Appellant is a Medicare recipient.

APPLICABLE POLICY

WVIMM § 10.6.5.A AG Closures provides that when the client's circumstances change to the point he becomes ineligible, the AG is closed.

WVIMM § 3.13 Supplemental Security Income (SSI) Recipients provides in relevant sections: Only the SSI recipient or an individual who is otherwise entitled to SSI is included in the AG.

WVIMM § 10.6.5.B Consideration of Eligibility under Other Coverage Groups provides that in no instance is Medicaid under one coverage group stopped without consideration of Medicaid eligibility under other coverage groups. This evaluation is done before the client is notified that his Medicaid eligibility will end. Eligibility is evaluated based on case record information.

DISCUSSION

The Respondent decided to terminate the Appellant's SSI Medicaid eligibility because he was not an SSI recipient. The Appellant received full coverage Medicaid under the SSI Medicaid coverage group. The Appellant contested the termination of his coverage and argued that the loss of full coverage Medicaid would cause him financial hardship.

The Respondent bears the burden of proof and had to demonstrate by a preponderance of evidence that the Appellant was ineligible for SSI Medicaid because he is not an SSI recipient. The Board of Review must follow policy and cannot change the policy or award eligibility beyond the circumstances provided in the policy.

The Respondent's representative testified that the Respondent's worker made an error entering in the Appellant's income source which resulted in erroneous approval of the Appellant's SSI Medicaid eligibility. The Respondent's representative testified that when the Appellant applied for Low-Income Energy Assistance Program (LIEAP) eligibility, the Respondent's worker identified the error and corrected the Appellant's income type, which caused his SSI Medicaid to be terminated. The submitted evidence revealed the Appellant was evaluated for eligibility for other types of Medicaid coverage but was determined to be ineligible.

The policy provides that only the Social Security Administration (SSA) may determine eligibility for SSI payments. According to the evidence, the Appellant is not entitled to receive an SSI payment. The Appellant did not dispute that he receives RSDI, rather than SSI, and did not contest the Respondent's responsibility in causing the error in his SSI Medicaid approval. The Appellant testified that he understood he was approved in error but requested that his benefits remain open to allow for completion of his dental restoration.

As the Appellant is not an SSI recipient and Board of Review does not have the authority to change or make exceptions to the policy beyond the established criteria, the Respondent correctly terminated the Appellant's SSI Medicaid eligibility.

CONCLUSIONS OF LAW

- 1) Eligibility for SSI Medicaid is determined by an individual's eligibility for SSI benefits.
- 2) The Appellant is not a recipient of SSI benefits.
- 3) Because the Appellant is not entitled to receive SSI payments, he is not eligible for SSI Medicaid benefits.

DECISION

It is the decision of the State Hearing Officer to **UPHOLD** the Respondent's decision to terminate the Appellant's SSI Medicaid benefits.

ENTERED this 29th day of April 2025.

Tara B. Thompson, MLS
State Hearing Officer