



May 22, 2025

**REMOVED**

RE: **REMOVED** v. WVDoHS-BFA  
ACTION NO.: 25-BOR-1962

Dear **REMOVED**

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,

Eric L. Phillips  
State Hearing Officer  
Member, State Board of Review

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

cc: Kristyne Hoskins, BFA

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

**REMOVED**

**Appellant,**

**v.**

**Action Number: 25-BOR-1962**

**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 **REMOVED**. 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 May 22, 2025, on an appeal filed May 6, 2025.

The matter before the Hearing Officer arises from the April 29, 2025 decision by the Respondent to deny the Appellant's application for Medicare Premium Assistance.

At the hearing, the Respondent appeared by Kristyne Hoskins, Economic Service Worker Senior. The Appellant was represented by her father **REMOVED**. The Appellant testified on her own behalf. All witnesses were sworn and the following documents were admitted into evidence.

**Department's Exhibits:**

- D-1 Application for Medicare Buy-In Program dated April 1, 2025
- D-2 Case comments dated April 8, 2025
- D-3 Verification Checklist dated April 9, 2025
- D-4 Application for Medicare Buy-In Program dated April 16, 2025
- D-5 Case comments dated April 17, 2025
- D-6 Operations Log
- D-7 Case comments dated April 22, 2025
- D-8 Notice of Decision dated April 23, 2025
- D-9 West Virginia Income Maintenance Manual § 7

**Appellant's Exhibits:**

- A-1 Savings Statement March 27, 2025 through April 24, 2025
- A-2 Checking Statement March 27, 2025 through April 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) On April 1, 2025, the Appellant completed an application for Medicare Premium Assistance benefits. (Exhibit D-1)
- 2) The Appellant reported monthly Social Security income in the amount of \$1086.00.
- 3) The Appellant reported assets of one vehicle, one savings account, and one checking account.
- 4) On April 9, 2025, the Respondent issued a Verification Checklist (Exhibit D-3) requesting verification of the Appellant's checking and savings accounts by April 18, 2025.
- 5) On April 16, 2025, the Appellant completed a second application for Medicare Premium Assistance benefits. (Exhibit D-4)
- 6) The Respondent considered the second application as a duplicate application.
- 7) The Appellant failed to return the requested verifications.
- 8) On April 23, 2025, the Respondent issued a Notice of Decision (Exhibit D-8) informing the Appellant that her application had been denied, effective May 1, 2025, because she did not turn in all requested information.

**APPLICABLE POLICY**

West Virginia Income Maintenance Manual 7.2.3 documents in pertinent part:

The primary responsibility for providing verification rests with the client.

It is an eligibility requirement that the client cooperate in obtaining necessary verifications, with an exception being that a client must never be asked to provide verification that he is or is not either a fleeing felon or a probation/parole violator.

The client is expected to provide information to which he has access and to sign authorizations needed to obtain other information.

Failure of the client to provide necessary information or to sign authorizations for release of information results in denial of the application or closure of the active case, provided the client has access to such information and is physically and mentally able to provide it.

For Medicaid Coverage Groups and WVCHIP Only:

- Client self-attestation is verified by electronic data sources.
- The client must not be required to provide verification unless information cannot be obtained electronically or self-attestation, and electronic data sources are not reasonably compatible. See Section 7.2.5 below.

Refusal to cooperate, failure to provide necessary information, or failure to sign authorizations for release of information, provided the client has access to such information and is physically and mentally able to provide it, may result in one of the following:

- Denial of the application
- Closure of the assistance group (AG)
- Determination of ineligibility
- Disallowance of an income deduction or an incentive payment

West Virginia Income Maintenance Manual 7.3 documents in part:

#### 9. Bank Accounts, Certificates of Deposit (CDs), and Other Liquid Assets

Program- All programs and coverage groups subject to an asset test

When to Verify- At application and redetermination; or when client reports an increase SNAP Only: To determine if used solely for a deployed service person's benefit

Possible Sources of Verification- Bank statements; the CD; stock market prices; whole life insurance policies; statement of stockbroker; Asset Verification System (AVS)

### **DISCUSSION**

On April 23, 2025, the Respondent denied the Appellant's application for Medicare Premium Assistance benefits when the Appellant failed to provide verification of her liquid assets, specifically checking and savings account. The Appellant appeals the Respondent's decision. The Respondent must prove by a preponderance of the evidence that it correctly denied the Appellant's

application based on her failure to comply with verification requirements.

At application, the Appellant reported asset information including a checking and savings account which resulted in the requirement to provide verification of the assets by April 18, 2025. The Appellant failed to provide the verifications by the established due date. The Appellant's failure to provide the verification resulted in a denial of her Medicare Premium Assistance application.

The Appellant, through her representative, testified that verification of the checking and savings account information was submitted to the Respondent on April 29, 2025. (Exhibit A-1 and Exhibit A-2). The Appellant's representative testified that the approval of Medicare Premium Assistance would elevate some financial burden on the Appellant's household.

Governing policy requires the verification of all liquid assets for programs which require an asset test. Because Medicare Premium Assistance requires an asset test and the Appellant failed to provide verification of her liquid asset by the established deadline, the Respondent was correct in its decision to deny the benefit application.

### **CONCLUSIONS OF LAW**

- 1) The Medicare Premium Assistance program has a maximum asset test of \$9660.
- 2) All programs subject to an asset test require the verification of liquid assets.
- 3) The Appellant was required to verify information concerning her liquid assets by April 18, 2025.
- 4) The Appellant failed to provide verification of liquid assets by the established due date.
- 5) The Respondent was correct in its decision to deny the Appellant's application for Medicare Premium Assistance.

### **DECISION**

It is the decision of the State Hearing Officer to uphold the Respondent's decision to deny the Appellant's application for Medicare Premium Assistance.

**ENTERED this \_\_\_\_\_ day of May 2025.**

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**Eric L. Phillips  
State Hearing Officer**