



July 30, 2025



RE: [REDACTED] v. WV DoHS
ACTION NO.: 25-BOR-2016

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 Human Services. These same laws and regulations are used in all cases to ensure that all people 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,

Pamela L. Hinzman
State Hearing Officer
Member, State Board of Review

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

cc: Connie Sankoff, BoSS

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

██████████,

Appellant,

v.

Action Number: 25-BOR-2016

**WEST VIRGINIA DEPARTMENT OF HUMAN SERVICES,
BUREAU OF SENIOR SERVICES,**

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 Office of Inspector General Common Chapters Manual. This fair hearing was convened on June 24, 2025.

The matter before the Hearing Officer arises from the March 25, 2025, decision by the Respondent to discontinue Aged/Disabled Waiver Medicaid services.

At the hearing, the Respondent appeared by Connie Sankoff, Registered Nurse/Fair Hearings Representative, Bureau of Senior Services. The Appellant was present for the hearing and was represented by his wife, ██████████. All witnesses were placed under oath, and the following documents were admitted into evidence.

Department's Exhibits:

- D-1 Request for Hearing
- D-2 Scheduling Order for hearing dated June 3, 2025
- D-3 Notice of Decision dated March 25, 2025
- D-4 Notice of Decision Re-Evaluation Assessment – Approved dated April 23, 2024
- D-5 Pre-Admission Screening (PAS) Summary dated April 22, 2024

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 Aged/Disabled Waiver (ADW) Medicaid services.
- 2) The Appellant was determined to be medically eligible for the Aged/Disabled Waiver Medicaid Program based on a Pre-Admission Screening (PAS) completed in April 2024 (Exhibits D-4 and D-5).
- 3) On March 25, 2025, the Bureau of Senior Services informed the Appellant that his in-home ADW services would be discontinued because no personal attendant services had been provided to him for 180 consecutive days (Exhibit D-3).
- 4) In-home services were not provided to the Appellant for 180 consecutive days because the Appellant's financial eligibility was not verified/approved as part of his 2024 case redetermination.
- 5) The Appellant was notified of his financial ineligibility for ADW services in a Notice of Decision dated July 22, 2024, and had filed a fair hearing request with the Respondent's Bureau for Family Assistance on August 5, 2024, concerning the denial.
- 6) The Bureau for Family Assistance forwarded the Appellant's August 5, 2024 hearing request to the Board of Review on July 1, 2025, at which time a telephonic hearing was scheduled for July 22, 2025, to address the denial of financial eligibility.
- 7) The Appellant failed to attend the July 22, 2025 hearing and subsequently failed to establish good cause for failing to appear.
- 8) The Appellant's August 5, 2024 hearing request concerning financial ineligibility was dismissed on July 30, 2025 (Dismissal Order attached hereto as BOR Exhibit A).

APPLICABLE POLICY

Bureau for Medical Services Provider Manual Section 501.38 provides information concerning the discontinuation of services under the Aged and Disabled Waiver Program:

The following require a Request for Discontinuation of Services form:

- No personal attendant services have been provided for 180 continuous days – for example, an extended placement in LTC or rehabilitation facility.

- Unsafe Environment – an unsafe environment is one in which the personal attendant and/or other agency staff are threatened or abused, and the staff's welfare is in jeopardy. This may include, but is not limited to, the following circumstances:
 - The member or other household members demonstrate sexually inappropriate behavior; display verbally and/or physically abusive behavior; and/or threaten a personal attendant or other agency staff with guns, knives, or other potentially dangerous weapons, including menacing animals or verbal threats to harm the personal attendant and/or other agency staff.
 - The member or other household members display an abusive use of alcohol and/or drugs and/or illegal activities in the home.
 - The ADW provider agency has been forewarned by a mental health professional/law enforcement of harm or ideations of harm by the member.
 - The physical environment of the member's home is either hazardous or unsafe.
- The provider must follow the steps in the ADW Procedural Guidelines for Non-Compliance and Unsafe Closures. This can be found on the ADW website.
- The member is non-compliant with the Service Plan, the responsibility agreement (if applicable), the program requirements by policy, and the Member Rights and Responsibility Guide.
- The member no longer desires services.
- The member no longer requires services.
- The members can no longer be safely maintained in the community with ADW program services.
- The applicant/member has received a slot but does not accept the required case management services and/or will not allow a service plan to be developed.

The Request for Discontinuation of Services form must be uploaded into the Utilization Management Contractor's (UMC's) web portal by the case manager and a notification is sent to the Operating Agency (OA) that it has been uploaded. The OA will review all requests for a discontinuation of services. If it is an appropriate request, and the OA approves the discontinuation, the OA will send notification of discontinuation of services to the person (or legal representative) with a copy to the case management agency or FE/A). Fair hearing rights will also be provided except if the member (or legal representative) no longer desires services. The effective date for the discontinuation of services is 13 calendar days after the date of the OA notification letter if the member (or legal representative) does not request a hearing...

It is the case management agency's responsibility to monitor the health and safety of the member during any time that services are suspended. In all cases, the member must be provided their right to a Fair Hearing by the OA. However, due to the nature of unsafe environment closure, the member is not eligible for the option to continue existing services during the fair hearing process.

The following do not require a Request for Discontinuation of Services form but must be reported to the OA and a discharge request in the UMC's web-based portal:

- Death
- Moved Out of State
- Medically Ineligible
- Financially Ineligible

DISCUSSION

Policy states that ADW services are discontinued when no personal attendant services have been provided for 180 continuous days.

Connie Sankoff, Registered Nurse and Fair Hearings Representatives for the Bureau of Senior Services, testified that the Appellant remained medically eligible for ADW services, but his services were discontinued for 180 days because his financial eligibility for the program was not verified by the Department.

The Appellant's wife, [REDACTED] testified that the Department had requested verification in conjunction with a financial redetermination for ADW benefits, including a bank statement and verification of Social Security income. She stated that she faxed the bank statement to the Department, but did not recall the date on which the verification was provided. [REDACTED] contended that the Appellant's Social Security income was listed on the Appellant's bank statement and that the Department could have verified Social Security income via data exchange with the Social Security Administration. [REDACTED] stated that her husband is very ill and she needs help with his in-home care.

In an effort to resolve any outstanding issues regarding financial eligibility prior to the issuance of a decision in the current appeal, a hearing was set for July 22, 2025. The Appellant failed to appear or establish good cause for failure to appear at the hearing, resulting in dismissal of the matter.

As the Appellant had no personal attendant services for 180 continuous days, and the Appellant's 2024 hearing request concerning the denial of ADW benefits based on financial eligibility was dismissed, the Respondent's action to discontinue ADW services is affirmed.

CONCLUSIONS OF LAW

- 1) Policy states that ADW services are discontinued when no personal attendant services have been provided for 180 continuous days.
- 2) In-home services were not provided to the Appellant for 180 consecutive days because the Appellant's financial eligibility for ADW was not verified/approved as part of his 2024 case redetermination .

- 3) The Respondent acted correctly in discontinuing ADW services.

DECISION

It is the decision of the State Hearing Officer to **UPHOLD** the Respondent's action to discontinue the Appellant's ADW Medicaid services.

ENTERED this 30th day of July, 2025.

**Pamela L. Hinzman
State Hearing Officer**