



August 6, 2025



RE: [REDACTED] v. WVDoHS  
ACTION NO.: 25-BOR-2411

Dear Ms. [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 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**

██████████,

**Appellant,**

**v.**

**Action Number: 25-BOR-2411**

**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 July 31, 2025, on an appeal filed with the Board of Review on July 14, 2025.

The matter before the Hearing Officer arises from the July 9, 2025 decision by the Respondent to deny the Appellant's application for Medicare Premium Assistance (MPA) benefits.

At the hearing, the Respondent appeared by Kristyne Hoskins, Economic Service Worker Senior. The Appellant was self-represented. Appearing as witnesses for the Appellant was ██████████. All witnesses were placed under oath and the following documents were admitted into evidence.

**Department's Exhibits:**

- D-1 Application for Medicare Buy-In Program dated June 27, 2025
- D-2 Case Comments dated February 13, 2025
- D-3 Notice of Decision dated July 9, 2025
- D-4 West Virginia State Online Query for RSDI
- D-5 Income Summary
- D-6 West Virginia Income Maintenance Manual Chapter 1.16.1

**Appellant's Exhibits:**

- A-1 Hearing Summary
- A-2 Miscellaneous Notices and Notes

### A-3 Monthly Expenses

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 is non-verbal.
- 2) On June 27, 2025, the Appellant applied for MPA program benefits. (Exhibit D-1)
- 3) The Appellant's household consists of herself.
- 4) The Appellant reported a monthly income from the Social Security Administration in the amount of \$1782.00. (Exhibit D-1)
- 5) The Appellant was evaluated for coverage for Qualified Individual-1 (QI-1), a MPA program.
- 6) The income limit for the QI-1 program cannot exceed \$1761.00.
- 7) On July 9, 2025, the Respondent issued notice to the Appellant (Exhibit D-3) informing her of the denial of her application for Medicare Premium Assistance benefits due to excessive income. (Exhibit D-3)

#### **APPLICABLE POLICY**

West Virginia Income Maintenance Manual 4.12.1 documents in pertinent part:

Countable income is determined by subtracting any allowable disregards and deductions from the total countable gross income.

Countable income is determined as follows:

Step 1: Determine the total countable gross unearned income and subtract the appropriate disregards and deductions. See Section 4.14.2.

Step 2: Determine the total countable gross earned income and subtract the appropriate disregards and deductions. See Section 4.14.2.

Step 3: Add the results from Step 1 and Step 2 to achieve the total monthly countable income.

Step 4: Compare the amount in Step 3 to the QMB, SLIMB, or QI-1 income levels for the appropriate number of persons. See Section 4.14 for SSI-Related deeming procedures.

If the amount is less than or equal to the QMB, SLIMB, or QI-1 income levels, the client(s) is eligible.

Eligibility for these coverage groups is determined as follows:

- QMB – Income is less than or equal to 100% FPL.
- SLIMB – Income is greater than 100% FPL, but less than or equal to 120% FPL.
- QI-1 – Income is greater than 120% FPL, but less than or equal to 135% FPL

West Virginia Income Maintenance Manual Chapter 4 Appendix A lists the income limits for a one-person household for Medicare Premium Assistance as follows:

QMB-\$1305 (100% FPL)

SLIMB-\$1306-\$1565 (Between 100% FPL and 120% FPL)

QI-1-\$1566-\$1761 (Between 120% FPL and 135% FPL)

West Virginia Income Maintenance Manual 4.14.2.B regarding income disregards document:

A \$20 disregard is applied to the total gross unearned income. If unearned income is less than \$20, the remainder is subtracted from earned income, prior to the application of any other earned income disregards and deductions.

## **DISCUSSION**

On July 9, 2025, the Respondent denied the Appellant's application for Medicare Premium Assistance (MPA) benefits due to excessive income. 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 due to excessive income.

At application, the Appellant reported a total amount of income from the Social Security Administration in the amount of \$1782.00, which the Respondent verified through an online query. (Exhibit D-4) After attributing a \$20.00 unearned disregard, the Appellant's countable income for MPA was calculated at \$1762.00. The income limit set forth by policy for MPA benefits is \$1761.00 or 135% of the Federal Poverty Level. The Appellant's income was excessive by \$1.00 and the Respondent issued notice on July 9, 2025, informing her of the denial of the MPA application.

The Appellant provided a statement indicating that payment of Medicare premiums creates a financial burden. The Appellant was previously approved for MPA benefits and now receives a monthly income of \$1597.00 after the payment of Medicare premiums. The Appellant provided her monthly expenses to demonstrate and support her claims of the financial burden.

Policy documents that eligibility for MPA programs, specifically Qualified Individual, is established when a household's total countable gross unearned income, minus appropriate disregards and deductions, does not exceed 135% of the Federal Poverty Level, or \$1761.00. Evidence reveals that the Appellant's total household income, after considered deductions, is \$1762.00 exceeding the income guidelines. Therefore, the Respondent was correct in its decision to deny the Appellant's MPA application.

### **CONCLUSIONS OF LAW**

- 1) Policy requires that income eligibility for MPA, specifically Qualified Individual 1 (QI-1) is established when a household's total countable income, after deduction and disregards, is greater than 120% of the Federal Poverty Level, but less than or equal to 135% of the Federal Poverty Level.
- 2) A household's monthly income cannot exceed \$1761.00, 135% of the Federal Poverty Level.
- 3) The Appellant's total monthly countable income, after a \$20.00 unearned income disregard, is \$1762.00.
- 4) The Appellant's total monthly countable income exceeds 135% of the Federal Poverty Level.
- 5) The Respondent's action to deny the Appellant's application for MPA benefits is affirmed.

### **DECISION**

It is the decision of the State Hearing Officer to uphold the action of the Respondent to deny the Appellant's application for MPA programs.

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

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**Eric L. Phillips  
State Hearing Officer**