



**STATE OF WEST VIRGINIA
DEPARTMENT OF HEALTH
Office of the Inspector General
Board of Review**

**Sherri A. Young, DO, MBA, FAAFP
Cabinet Secretary**

**Ann Vincent-Uriling
Interim Inspector General**

March 12, 2024

[REDACTED]

RE: [REDACTED] v. WVDoHS/BFA
ACTION NO.: 24-BOR-1277

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 Health and 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,

Tara B. Thompson, MLS
State Hearing Officer
Member, State Board of Review

Encl: Decision Recourse
Form IG-BR-29

CC: Pamela Trickett, DoHS
Stephanie Smith, DoHS

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

██████████,

Appellant,

v.

Action Number: 24-BOR-1277

**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 West Virginia Board of Review Common Chapters Manual. This fair hearing was convened on March 5, 2024.

The matter before the Hearing Officer arises from the Respondent's December 29, 2023 decision to terminate the Appellant's Medicaid Qualified Individual (QI) coverage for payment of her Medicare premium.

At the hearing, the Respondent was represented by Lisa Ward, ██████████ DoHS BFA. The Appellant appeared and represented herself. All those present were placed under oath and the following documents were admitted into evidence.

Department's Exhibits:

- D-1 DoHS Notice, dated December 29, 2023
- D-2 Handwritten Hearing Request, received January 29, 2024
- D-3 Case Comment Screenshot, dated December 28, 2023
- D-4 West Virginia Income Maintenance Manual (WVIMM) § 14.12 excerpts
WVIMM Chapter 4 Appendix A

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 following Findings of Fact are set forth.

FINDINGS OF FACT

- 1) The Appellant received Medicaid Qualified Individual (QI-1) benefits to pay her Medicare premium.
- 2) On December 28, 2023, the Appellant completed her Medicaid eligibility review and the Respondent verified her income amount with the State On-Line Query (SOLQ) (Exhibit D-2).
- 3) On December 29, 2023, the Respondent issued a notice advising the Appellant her QI-1 benefits would end after January 31, 2024, because her \$1,642 monthly countable net income exceeded the \$1,641.00 QI income eligibility limit (Exhibit D-1).
- 4) The Respondent applied a \$20 unearned income disregard to the Appellant's \$1,662 gross monthly unearned income (Exhibit D-1).
- 5) At the time of the December 29, 2023 decision, the QI-1 income eligibility limit for a one-person Assistance Group (AG) was \$1,641 (Exhibits D-1 and D-4).

APPLICABLE POLICY

Families First Coronavirus Response Act and Fiscal Year (FY) 2023 Omnibus Appropriations Bill provide in relevant sections:

During the COVID-19 PHE, provisions were stipulated permitting the Respondent to provide continuous coverage to Medicaid recipients, regardless of income, during the PHE. On December 23, 2022, Medicaid continuous enrollment was set to end on April 1, 2023.

West Virginia Income Maintenance Manual (WVIMM) § 1.2.2.B Redetermination Process provides in relevant sections:

Periodic reviews of total eligibility for recipients are mandated by federal law.

WVIMM § 1.2.1.A Right to Apply provides in relevant parts: No person may be denied the right to apply for any program administered by the Division of Family Assistance Every person must be allowed to apply for all programs on the date she expresses her interest.

WVIMM § 6.3.4.B Worker Requested Verification — State On-line Query (SOLQ) provides in relevant sections: SOLQ provides direct access to the Social Security Administration's databases ... The information received includes SSI details.

WVIMM § 23.12.3 *Qualified Individual (QI-1)* provides in relevant parts: To be eligible for QI coverage, the household's income cannot exceed 121-135% of the Federal Poverty Level.

Medicaid coverage is limited to payment of the Medicare Part B premium. An individual is eligible for limited Medicaid coverage when all the following conditions are met: ... the individual or couple must meet the income test detailed in Chapter 4; ...

WVIMM Chapter 4, Appendix A provides in relevant parts: For a one-person AG to be eligible for QI-1 benefits, the household's monthly income could not exceed \$1,641.

WVIMM § 4.12.1 *Medicaid for QMB, SLIMB, QI-1: Determining Eligibility* provides in relevant parts: 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 total monthly countable income.

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 ... QI-1 income levels for the appropriate number of persons ... If the amount is less than or equal to the QI-1 income level, the client is eligible To be eligible for QI-1 benefits, the income must be greater than 120% FPL, but less than or equal to \$135 FPL. See Appendix A.

WVIMM § 4.14.2 *Income Disregards and Deductions* and 4.14.2.B *Unearned Income* provides in relevant parts: Disregards and deductions may be applied if applicable: Earned Income, SSI \$20 Disregard, SSI Earned Income Disregard, SSI Impairment-Related Work Expenses, Earnings Diverted to a Plan to Achieve Self-Support (PASS), and SSI Student Child Earned Income Disregard.

For unearned income, 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, before the application of any other earned income disregards and deductions.

WVIMM Chapter 10, Appendix A *RSDI/SSI Increases 2024* provides in relevant sections:

In January 2024, the Supplemental Security Income (SSI) and Retirement, Survivors, and Disability Insurance (RSDI) recipients received a cost-of-living adjustment (COLA) of 3.2% In 2024, the standard Part B premium amount will be \$174.70.

WVIMM §§ 10.15.3 *Qualified Individuals (QI-1)* provides in part: If the increase in income results in the client being ineligible for this Medicaid coverage group, the benefit is discontinued after advance notice.

DISCUSSION

The Respondent terminated the Appellant's Medicaid QI-1 benefits because her income exceeded the income eligibility limit. The Appellant contended that she requires medically necessary treatments and medications and cannot afford her Medicare premium.

The Respondent bears the burden of proof and had to demonstrate by a preponderance of the evidence that the Appellant's Medicaid QI-1 coverage was correctly terminated because her income exceeded the income eligibility limit in December 2023.

During the hearing, testimony was provided by the parties regarding increases in the QI-1 income eligibility limit. As of the date of the decision, the QI-1 income eligibility limit for a one-person AG is \$1,695. However, the Medicaid income eligibility limit effective at the time of the Respondent's December 2023 decision must be applied. The QI-1 income eligibility limit effective in December 2023 was \$1,641 for a one-person AG. The Respondent had to demonstrate by a preponderance of the evidence that the Appellant's monthly income exceeded \$1,641.

The evidence revealed that the Respondent verified the amount of the Appellant's \$1,641 monthly unearned income from the Social Security Administration (SSA). The Appellant did not dispute the verified amount of unearned income. The preponderance of the evidence revealed that the Appellant's monthly unearned income exceeded the QI-1 income eligibility limit in December 2023.

While the evidence indicated the Appellant only exceeded the income eligibility limit by \$1, the policy does not grant the Board of Review authority to grant income deductions or Medicaid eligibility exceptions beyond those stipulated in the policy. The preponderance of the evidence did not establish that the Appellant should have received any additional income deductions.

Because the Appellant's \$1,642 monthly unearned income exceeded the \$1,641 income eligibility limit, the Respondent correctly denied the Appellant's QI-1 benefit eligibility. The policy instructs that an applicant may re-apply for eligibility at any time.

CONCLUSIONS OF LAW

- 1) The Respondent may terminate an individual's Medicaid QI-1 coverage when the household's monthly income exceeds 135% of the Federal Poverty Level (FPL).
- 2) The preponderance of the evidence demonstrated the Appellant's gross monthly unearned income exceeded 135% of the FPL in December 2023.

- 3) The Respondent correctly terminated the Appellant's Medicaid QI-1 coverage because her gross monthly income exceeded the Medicaid income eligibility limit for a one-person AG.

DECISION

It is the decision of the State Hearing Officer to **UPHOLD** the Respondent's decision to terminate the Appellant's Medicaid QI-1 coverage.

Entered this 12th day of March 2024.

Tara B. Thompson, MLS
State Hearing Officer