



July 3, 2024

[REDACTED]

RE: [REDACTED] v. WVDoHS
ACTION NO.: 24-BOR-2270

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: Carla Marsh, DoHS

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

████████████████████,

Appellant,

v.

Action Number: 24-BOR-2270

**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 Office of Inspector General Common Chapters Manual. This fair hearing was convened on July 2, 2024.

The matter before the Hearing Officer arises from the Respondent's termination of Medicare Premium Assistance Program (MPA) benefits effective March 2024 as outlined in the notice dated January 30, 2024, and its decision to approve a new MPA coverage period effective May 2024.

At the hearing, the Respondent appeared by Carla Marsh, Economic Service Worker Senior, WVDoHS. The Appellant appeared *pro se*. Appearing as a witness for the Appellant was ██████████ the Appellant's granddaughter. All witnesses were sworn and the following documents were admitted into evidence.

Department's Exhibits:

- D-1 Medicaid review form submitted on October 25, 2023
- D-2 Verification Checklist dated December 1, 2024
- D-3 ██████████ Bank checking account verification (account ending in ██████████) received by Respondent on December 8, 2023
- D-4 Notice of Decision dated January 30, 2024
- D-5 ██████████ Bank checking account verification of closure (account ending in ██████████) received by Respondent on April 30, 2024
- D-6 Application for Medicare Buy-In Program submitted on May 15, 2024
- D-7 Notice of Decision dated May 23, 2024

- D-8 West Virginia Income Maintenance Manual Chapter 7.2.3
- D-9 West Virginia Income Maintenance Manual Chapter 1.16.9.A

Appellant's Exhibits:

- A-1 [REDACTED] Bank checking account verification (account ending in [REDACTED])

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 Medicare Premium Assistance (MPA) benefits through the Qualified Medicare Beneficiary (QMB) Program.
- 2) The Appellant submitted a QMB review form on October 25, 2023 (Exhibit D-1).
- 3) The review form indicates that the Appellant has two checking accounts (Exhibit D-1).
- 4) The Respondent sent the Appellant a Verification Checklist on December 1, 2023, requesting verification of her checking account balance (Exhibit D-2).
- 5) The Appellant submitted verification of the balance of her [REDACTED] checking account ending in [REDACTED] on December 8, 2023 (Exhibit D-3).
- 6) The Respondent sent the Appellant a Notice of Decision on January 30, 2024, indicating that her QMB benefits would stop effective March 2024 because she failed to submit all requested information (Exhibit D-4).
- 7) On April 30, 2024, the Appellant submitted verification that her other checking accounts with [REDACTED] had been closed in 2019 and 2022 (Exhibit D-5).
- 8) The Appellant submitted a new MPA application on May 15, 2024 (Exhibit D-6).
- 9) The Respondent considered the Appellant's date of application as April 30, 2024, after determining that she should have been provided with an application on the date she clarified her additional bank account information with the Respondent.
- 10) The Respondent sent the Appellant a Notice of Decision on May 23, 2024, indicating that QMB benefits had been approved effective May 1, 2024.

APPLICABLE POLICY

West Virginia Income Maintenance Manual Chapter 1.16.9.A states that the beginning date of eligibility for QMB is the first day of the month following the month in which the application for QMB coverage is approved. Eligibility for QMB cannot be backdated unless there is a corrective action (Exhibit D-9).

West Virginia Income Maintenance Manual Chapter 7.2.3 states that the primary responsibility for providing verification rests with the client. 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 that the client has access to such information and is physically and mentally able to provide it (Exhibit D-8).

West Virginia Income Maintenance Manual Chapter 1.2.4 states that the client's responsibility is to provide complete and accurate information about his circumstances so that the worker can make a correct determination about his eligibility.

West Virginia Income Maintenance Manual Chapter 5.5.4.A states that checking accounts are countable assets for SSI Medicaid Groups.

DISCUSSION

Policy states that checking accounts are countable assets for SSI Medicaid Groups, and the client's responsibility is to provide complete and accurate information about his/her circumstances so that the worker can make a correct determination about his/her eligibility. Failure to provide necessary information results in closure of an active case. The beginning date of eligibility for QMB is the first day of the month following the month in which the application for QMB coverage is approved.

The Appellant testified that she currently only has one checking account and that the Respondent's verification checklist did not specify which bank account she needed to verify.

The Respondent's representative, Carla Marsh, testified that the Appellant's review form was prepopulated with information concerning two previously reported checking accounts and the Appellant was required to report if she no longer had those accounts. As the Appellant made no changes to bank account information on the review form, the Respondent sought verification of the amount in both bank accounts. There is no indication that the Appellant attempted to report that she only had one remaining bank account until April 30, 2024, when she informed the Respondent that the second account had been closed. The Respondent determined that April 30, 2024, was the Appellant's new QMB application date; therefore, the beginning date of the new QMB coverage was May 1, 2024.

The Appellant testified that the Social Security Administration is continuing to deduct Medicare Premiums from her Social Security income and took about half of her check one month to recover premiums. Ms. Marsh stated that the Appellant would be reimbursed for Medicare premiums for

months that she was eligible for QMB and that she would contact the Respondent's Medicare Buy-In Unit to try and remedy the issue of ongoing premium deductions.

Based on information provided during the hearing, the Respondent's decision to terminate QMB benefits effective March 2024 based on failure to provide requested verification is correct. The Respondent's decision to approve new QMB benefits effective May 2024 is correct.

CONCLUSIONS OF LAW

- 1) Policy states that it is the client's responsibility to provide complete and accurate information about his/her circumstances so that the worker can make a correct determination about his/her eligibility.
- 2) The Appellant failed to indicate on her QMB review form that she only had one remaining checking account and failed to inform the Respondent that one of the accounts had been closed when the Respondent requested verification of the account balances.
- 3) As the Respondent had no information that the Appellant had closed one of her reported checking accounts, the Respondent acted correctly in terminating the Appellant's QMB benefits effective March 2024 based on failure to verify information.
- 4) The beginning date of eligibility for QMB is the first day of the month following the month in which the application for QMB coverage is approved.
- 5) The Appellant reapplied for QMB benefits in April 2024 and was approved effective May 2024.
- 6) The Respondent's decision to approve QMB benefits effective May 2024 is correct.

DECISION

It is the decision of the State Hearing Officer to **UPHOLD** the Respondent's action to terminate QMB benefits effective March 2024 and approve the Appellant's reapplication for QMB effective May 2024.

ENTERED this 3rd day of July 2024.

**Pamela L. Hinzman
State Hearing Officer**