



September 16, 2024



RE: [REDACTED] v. WV DoHS  
ACTION NO.: 24-BOR-2609

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 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: Recourse to Hearing Decision  
IG-BR-29 Form

cc: Carrie Casto, [REDACTED] DoHS

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

██████████,

**Appellant,**

v.

**Action Number: 24-BOR-2609**

**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 August 13, 2024.

The matter before the Hearing Officer arises from the Respondent's June 12, 2024 decision to terminate the Appellant's SSI Related Medicaid or SSI Related/Non-Case Assistance MA benefits.

At the hearing, the Respondent was represented by Carrie Casto, DoHS. The Appellant appeared and represented herself at the hearing. Both witnesses were placed under oath and the following exhibits were submitted:

**Department's Exhibits:**

- D-1 DoHS Notice, dated April 15, 2024
- D-2 Verification Checklist, dated May 15, 2024
- D-3 DoHS Notice, dated June 12, 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) On June 12, 2024, the Respondent issued notices advising the Appellant's SSI Related Medicaid or SSI Related/ Non-Cash Assistance MA benefits would stop after June 30, 2024, and that she was ineligible for Medicaid benefits because the Appellant failed to return all requested information (Exhibit D-3).
- 2) On May 13, 2024, the Appellant's completed Medicaid review form was scanned into the Respondent's record (Exhibit D-1).
- 3) On the May 13, 2024 review form, the Appellant reported that [REDACTED] was self-employed but other areas regarding wage amount and frequency were left blank (Exhibit D-1).
- 4) The May 13, 2024 form reflected a pre-populated gross income of \$591.08 for [REDACTED] (Exhibit D-1)
- 5) The Appellant reported \$500 in checking assets for [REDACTED] (Exhibit D-1).
- 6) On May 15, 2024, the Respondent issued a verification checklist to the Appellant at her address of record, requesting that she submit proof of the value of [REDACTED] checking account; proof of gross income from self-employment for [REDACTED]; proof of self-employment expenses for [REDACTED]; and proof of the value of checking account for the Appellant (Exhibit D-2). Verifications were due by May 25, 2024 (Exhibit D-2).
- 7) The notice advised that if the information was not supplied by the due date, the Appellant's benefits may be denied or closed. (Exhibit D-2).
- 8) The notice stated, "A list of acceptable documentation required for verifications can be found on the last page" (Exhibit D-2).
- 9) The last page of the notice indicated that acceptable documentation to verify income included: *Pay stubs, written statement from employer, self-employment records, award letter, computer matches, written statement from source.* (Exhibit D-2).
- 10) All requested self-employment income verification information was not submitted to the Respondent by May 25, 2024.

## APPLICABLE POLICY

**West Virginia Income Maintenance Manual (WVIMM) §§ 7.2 and 7.2.3** provide that verification of a client's statement is required when: the policy requires routine verification; information provided is inconsistent with information in the case file; information is outdated; or the client doesn't know the required information.

The primary responsibility for providing verification rests with the client. It is an eligibility requirement that the client cooperate in obtaining necessary verification .... Failure of the client to provide necessary information results in the denial of the application provided that the client has access to such information and is physically and mentally able to provide it.

**WVIMM § 7.3 (41) *Earned Income*** provides that for all programs and coverage groups subject to an income test, verification may include: Pay stubs; written statement from the employer, and self-employment records.

**WVIMM § 9.2.1 *Notification of Action Taken on an Application – DFA-6, Notice of Information Needed*** provides that the DFA-6 may be used during any phase of the eligibility determination process. If the client fails to adhere to the requirements detailed on the DFA-6, the application is denied as appropriate.

### **DISCUSSION**

The Appellant’s Medicaid benefits were terminated because she did not submit the requested verification of self-employment income to the Respondent as required by May 25, 2024. The Appellant contested the closure and contended she submitted verification by May 25, 2024, via People’s Access to Help (PATH). The Appellant argued that she turned in “a thing” that showed proof of income from the IRS and how much she was required to pay. During the hearing, the Respondent’s representative stipulated that checking account verification was received.

The Respondent had to prove by a preponderance of evidence that the Respondent requested verification from the Appellant and that the Appellant failed to submit verification of [REDACTED] self-employment income and expenses by May 25, 2024.

The policy provides that the primary responsibility for verifying rests with the client and stipulates that it is an eligibility requirement that the client cooperates in obtaining the necessary verification. The policy states that failure of the client to provide the necessary information results in the denial of eligibility when the client has access to such information and is physically and mentally able to provide it.

The evidence revealed that the Respondent issued a verification checklist to the Appellant’s address of record that indicated “proof of gross income from self-employment” and “proof of self-employment expenses” must be submitted by May 25, 2024. The notice provided examples of potential verification documentation, including self-employment records or a written statement from a source. During the hearing, the Appellant affirmed her address of record and did not refute receiving the verification checklist.

The Respondent contended that the Appellant failed to present self-employment verification such as the information used by the AG to file taxes or tax forms such as a Schedule K, Schedule C, or Schedule I form. The Respondent’s representative testified that the Appellant submitted a tax account transcript which did not contain the needed self-employment income information. While

the form submitted by the Appellant was not provided for evidentiary review, the Respondent's representative provided testimony that the submitted form demonstrated the adjusted gross income, not the gross income and expenses. The Appellant did not refute the form lacked the relevant gross self-employment income information.

The Respondent testified that verification of self-employment income and expenses would need to be submitted. The Respondent's representative testified that when tax forms are unavailable, the Respondent may consider self-employment records for the last six or twelve months and average the income received but argued no records were submitted as verification.

The Appellant testified that she files her taxes electronically, the IRS processes the filing, and that she receives a response indicating whether she owes the IRS money. The Appellant contended that she cannot access a Schedule C record. While the Appellant testified that she did not have access to specific tax forms, the Appellant's testimony indicated that as the tax preparer, she would have access to [REDACTED] self-employment income and expense information needed to file the household's taxes. No evidence was submitted to indicate that the Appellant was physically or mentally unable to provide the needed information.

The Appellant testified that insurance companies provided statements to her husband for work completed. May 15, 2024 verification checklist listed *written statements from source* and *self-employment records* as potential documents acceptable for verifying earned income.

The preponderance of evidence demonstrated that the Appellant was physically and mentally capable of complying with the self-employment income and expense verification request but failed to submit the required verification by May 25, 2024. Because the Appellant failed to submit the requested verification, the Respondent was required to terminate the Appellant's Medicaid eligibility.

### CONCLUSIONS OF LAW

- 1) Failure of the client to provide necessary information —provided the client has access to such information and is physically and mentally able to provide it— or to sign authorizations for release of information may result in denial of the application or a determination of ineligibility.
- 2) The Appellant was required to submit the requested income and asset verification by May 25, 2024.
- 3) The preponderance of evidence proved that the Appellant did not submit the requested self-employment income and expense verification by the required date.
- 4) The Respondent proved by a preponderance of evidence that the Respondent correctly terminated the Appellant's Medicaid eligibility.

**DECISION**

It is the decision of the State Hearing Officer to **UPHOLD** the Respondent's decision to terminate the Appellant's Medicaid eligibility.

**ENTERED this 16<sup>th</sup> day of September 2024.**

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Tara B. Thompson, MLS  
**State Hearing Officer**