Resource Development

5.4 PENALTY FOR FAILURE TO APPLY FOR OR RETAIN BENEFITS WITHOUT GOOD CAUSE

The penalties apply only when development and retention are a condition of eligibility. See Section 5.2.

The penalty imposed depends upon the source of the potential resource and who fails to meet the requirement, as follows.

NOTE: For WV WORKS benefits, a client who fails, without good cause, to develop and retain potential resources as identified in the PRC, has failed to adhere to the terms of his PRC. The penalties below are not applied to WV WORKS benefits, but failure to comply may affect Medicaid. For WV WORKS benefits, a sanction, as found in Chapter 13, is imposed when good cause does not exist for the failure to comply. Failure to apply for or accept potential resources that are not specified on the PRC does not result in a sanction or penalty.

A. ENROLLMENT IN MEDICARE, PART A AND PART B (Medicaid Only)

All applicants for and recipients of Medicaid, who qualify for Medicare Buy-In, must enroll in Medicare, Parts A and B, unless an exemption to enrollment is met. Exemptions include, but are not limited to, no established record of birth or the individual has other creditable health insurance and will be disadvantaged by Medicare enrollment. See Section 5.6,A,5 for Medicare eligibility requirements. See Section 22.2 for Medicaid coverage groups subject to Department buy-in.

Failure, without an exemption, to enroll in Medicare for the above specified Medicaid applicants and recipients, results in denial of Medicaid or exclusion from the Medicaid AG. When the individual is the only Medicaid AG member, Medicaid is closed. The individual remains ineligible until he enrolls.

SSI recipients not Medicare-enrolled, but who appear eligible, are contacted by the BMS Medicare Buy-In Unit. If the individual fails to enroll within the time prescribed by the Buy-In Unit, the unit notifies the appropriate local office to close Medicaid. Medicaid is closed after proper notice. See Section 5.6,A,5,f for additional information.

Individuals who meet all other QMB, SLIMB and QI-1 eligibility requirements, but who are not yet enrolled in Part B, must be referred to the BMS Medicare Buy-In Unit by sending a message by GroupWise to **Medicare BuyIn** or an e-mail to medbuyin@wvdhhr.org. The message must contain the applicant's name, address, date of birth and Social Security number. The Buy-In Unit contacts Social Security to facilitate enrollment. This avoids any late enrollment penalty which may apply to the individual and permits enrollment outside the yearly open enrollment period.

B. CHILD SUPPORT (WV WORKS and Medicaid)

This includes financial support for WV WORKS and financial and medical support for Medicaid.

See Chapters 13, 15 and 16.

C. OTHER BENEFITS (Medicaid **Only**)

If an individual fails, without good cause, to take the necessary steps to develop a resource to which he is referred and which, if he were found eligible, would result in additional income **or a medical benefit**, the penalty is as follows:

1. SSI Medicaid

Medicaid for the individual who failed to comply is closed.

2. SSI-Related Medicaid

Medicaid for the individual who failed to comply is closed or the application is denied.

3. AFDC Medicaid and AFDC-Related Medicaid

If the individual who did not comply is a parent of a dependent child(ren), the application is denied or the AG closed.

If the individual is a caretaker relative, other than a parent, he is excluded from the AG.

The AG or individual remains ineligible until corrective action is taken.

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