



STATE OF WEST VIRGINIA
DEPARTMENT OF HEALTH AND HUMAN RESOURCES
OFFICE OF INSPECTOR GENERAL

Bill J. Crouch
Cabinet Secretary

BOARD OF REVIEW
Raleigh District Office
407 Neville Street
Beckley, WV 25801

M. Katherine Lawson
Inspector General

August 16, 2018

[REDACTED]

RE: [REDACTED] v. WV DHHR
ACTION NO.: 18-BOR-1694/18-BOR-1965/18-BOR-1966

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 Health and Human Resources. These same laws and regulations are used in all cases to assure 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,

Kristi Logan
State Hearing Officer
Member, State Board of Review

Encl: Appellant's Recourse to Hearing Decision
Form IG-BR-29

cc: Ashley Adams, [REDACTED] County DHHR

WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES
BOARD OF REVIEW

██████████,

Appellant,

v.

Action Number: 18-BOR-1964 SNAP
18-BOR-1965 MED
18-BOR-1966 SCA

WEST VIRGINIA DEPARTMENT OF
HEALTH AND HUMAN RESOURCES,

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 Department of Health and Human Resources' Common Chapters Manual. This fair hearing was convened on July 25, 2018, on an appeal filed July 2, 2018.

The matter before the Hearing Officer arises from the June 25, 2018, and July 5, 2018, decisions by the Respondent to deny School Clothing Allowance (SCA), terminate Adult Medicaid and reduce Supplemental Nutrition Assistance Program (SNAP) benefits.

At the hearing, the Respondent appeared by Ashley Adams, Economic Service Worker. The Appellant appeared *pro se*. All witnesses were sworn and the following documents were admitted into evidence.

Department's Exhibits:

- D-1 Hearing Request received July 2, 2018
- D-2 Employment Statement dated May 29, 2018
- D-3 Paystubs dated May 18, 2018, June 1, 2018 and June 15, 2018
- D-4 SCA Denial Notice dated June 25, 2018
- D-5 Notice of Medicaid Termination dated July 5, 2018
- D-6 Notice of SNAP Reduction dated July 5, 2018
- D-7 Case Comments from March 2018 through July 2018
- D-8 West Virginia Income Maintenance Manual §§4.7, 4.4.3, and Appendices A and B

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) The Appellant was automatically evaluated for SCA benefits in June 2018.
- 2) The monthly earned income of \$1,591 used to determine the Appellant's eligibility for SCA was based upon an employer statement submitted to the Respondent in May 2018 to verify new employment (Exhibit D-3).
- 3) The Respondent issued a notice of denial June 25, 2018, advising the Appellant that her income was excessive to receive SCA benefits (Exhibit D-4).
- 4) A SNAP review was processed on July 2, 2018. The Appellant's monthly earned income was determined to be \$2,348.05 based upon the paystubs submitted with the review form (Exhibit D-3).
- 5) The Respondent issued a notice of termination of Adult Medicaid benefits and a notice of SNAP reduction to the Appellant on July 5, 2018 (Exhibits D-5 and D-6).

APPLICABLE POLICY

West Virginia Income Maintenance Manual §19.3.1 states active SNAP assistance groups (AGs) who have indicated they want to be evaluated for automatic issuance of School Clothing Allowance (SCA) if determined eligible by the deadline for the current program year will not be mailed WVSCA application forms and will be included in the automatic issuance.

West Virginia Income Maintenance Manual §19.4.5 states all WV WORKS income requirements in Chapter 4 apply. No deductions or disregards are applied. For SCA, income eligibility is based only on the month of July, the program month. When income has been previously verified within the last two months, additional income verification is not required. If appropriate, income must be updated in the eligibility system. If the gross non-excluded income is equal to or greater than 100% of the federal poverty level (FPL), the family is ineligible for SCA.

West Virginia Income Maintenance Manual §4.4.3 (SNAP) states when no AG member is elderly or disabled, the gross income must be equal to, or less than, the gross income limit in Appendix A. If so, the AG qualifies for the disregards and deductions. If the gross income exceeds the amount in Appendix A, the AG is ineligible. When at least one AG member is elderly, which is at least

age 60, or disabled, eligibility is determined by comparing the countable income to the maximum net monthly income found in Appendix A. There is no gross income test.

The following steps are used to determine countable income for cases meeting the eligibility tests above.

- Step 1: Combine monthly gross countable earnings and monthly gross profit from self-employment.
- Step 2: Deduct 20% of Step 1.
- Step 3: Add the gross countable unearned income
- Step 4: Subtract the Standard Deduction (\$160)
- Step 5: Subtract allowable Dependent Care Expenses
- Step 6: Subtract the amount of legally obligated child support actually paid.
- Step 7: Subtract the Homeless Shelter Standard Deduction found in Appendix B.
- Step 8: Subtract allowable medical expenses in excess of \$35 (elderly/disabled AGs only)
- Step 9: Calculate 50% of the remaining income and compare it to the actual monthly shelter/SUA amount. The Heating/Cooling SUA is \$462.
- Step 10: If the shelter/SUA costs are equal to or less than the amount found in step 9, no further computation is needed, the amount from step 8 is the countable income. If the shelter/SUA costs are greater than step 9, the amount in excess of 50% is deducted to arrive at the countable income. Elderly/disabled households are not subject to the shelter/utility cap.
- Step 11: Compare the countable income to the maximum net income in Appendix A for the AG size.

To determine the SNAP allotment, find the countable income and the number in the AG in Appendix C, Basis of Issuance.

West Virginia Income Maintenance Manual §4.7.4 states that eligibility for MAGI (Adult Medicaid) is determined by using the following steps:

- Step 1: Determine the MAGI-based gross monthly income for each MAGI household income group (IG).
- Step 2: Convert the MAGI household's gross monthly income to a percentage of the Federal Poverty Level (FPL) by dividing the current monthly income by 100% of the FPL for the household size. Convert the result to a percentage. If the result from Step 2 is equal to or less than the appropriate income limit (133% FPL), no disregard is necessary and no further steps are required.
- Step 3: If the result from Step 2 is greater than the appropriate limit, apply the 5% FPL disregard by subtracting five percentage points from the converted monthly gross income to determine the household income.
- Step 4: After the 5% FPL income disregard has been applied, the remaining percent of FPL is the final figure that will be compared against the applicable modified adjusted gross income standard for the MAGI coverage groups.

West Virginia Income Maintenance Manual Chapter 4 Appendix A lists the income limits for SNAP, MAGI, and SCA:

- 100% FPL for a 2-person AG is \$1,372 (SCA)

- 130% FPL for a 2-person AG is \$1,760 (SNAP)
- 133% FPL for a 2-person AG is \$1,825 (MAGI)

DISCUSSION

Pursuant to policy, eligibility for SCA benefits is determined for the program month of July only. For individuals who chose to be automatically evaluated for SCA, income that has been previously verified within the last two (2) months of the automatic issuance date is used and additional income verification is not required. The gross countable income must be below 100% of the FPL, or \$1,372 for a 2-person assistance group.

The Appellant reported the onset of new employment in May 2018 and provided an employer's statement on May 29, 2018, to verify this new income. Based on the employer's statement, the Appellant was anticipated to earn \$1,591 monthly. The Respondent correctly determined the Appellant to be ineligible for the automatic SCA issuance in June 2018 based on this income.

The Appellant provided paystubs with the SNAP review that was processed on July 3, 2018. The Appellant's earnings were calculated as \$2,348.05. The increase in the Appellant's earnings resulted in a reduction in her monthly SNAP allotment from \$192 to \$15, and the termination of her Adult Medicaid benefits.

The Appellant contended that she normally works a 12-hours shift for eight (8) days consecutively, with six (6) consecutive days off from work. However, in June, the Appellant reported that her employer was not fully staffed, and she worked several weeks consecutively without any days off. The Appellant testified that she is no longer receiving the overtime as reflected on the paystubs that were submitted with the July SNAP review. The Appellant also reported shelter costs and child care costs.

The Appellant was given additional time to submit evidence documenting the decrease in her income and her shelter and child care costs due to a last-minute change in venue for the hearing. As of the date of this decision, the Appellant has not submitted any evidence and will not be considered in this decision.

Based on the documentation provided by the Respondent, the Appellant's income is excessive to receive SCA benefits and to continue receiving Adult Medicaid. The Appellant's monthly SNAP allotment was correctly reduced based on an increase in income.

CONCLUSIONS OF LAW

- 1) The income limit for a 2-person assistance group for School Clothing Allowance benefits is \$1,372 monthly.
- 2) The Appellant's monthly income of \$1,591 that was used to determine eligibility for the automatic issuance of SCA was excessive to receive this benefit.

- 3) The income limit for a 2-person assistance group for Adult Medicaid is \$1,825 monthly.
- 4) The Appellant's income verified for the July SNAP review was \$2,348.05 monthly, which is excessive to continue receiving Adult Medicaid benefits.
- 5) To determine an individual's monthly SNAP allotment, the gross countable income and the number in the assistance group are compared to the Issuance Chart in policy.
- 6) The Appellant's reported increase in income resulted in a decrease in her monthly SNAP allotment.

DECISION

It is the decision of the State Hearing Officer to **uphold** the decision of the Respondent to deny School Clothing Allowance, reduce Supplemental Nutrition Assistance Program benefits and terminate Adult Medicaid benefits.

ENTERED this 16th day of August 2018

**Kristi Logan
State Hearing Officer**