

IN THE CIRCUIT COURT OF _____ COUNTY, WEST VIRGINIA

IN RE: _____ Case No. _____ -G- _____

A Protected Person

**ORDER APPROVING COMPENSATION TO GUARDIAN
THROUGH WEST VIRGINIA MEDICAID WAIVER PROGRAM**

The above matter came before the undersigned pursuant to the Motion of the Guardian,
_____, of the above-referenced Protected Person,
requesting authority to receive compensation through the West Virginia Medicaid Waiver Program for services
provided to the Protected Person and to continue as Guardian for the Protected Person.

Upon review of the Motion, in accordance with *W. Va. Code § 44A-1-15*, the Court finds as follows:

- Guardian has presented to the Court proper documentation of the West Virginia Medicaid Waiver Program's approval for the Guardian to provide on behalf of the Protected Person services through and receive payment by the West Virginia Medicaid Waiver Program (*§ 44A-1-15(a)(1)*).
- Guardian has demonstrated proof of relationship by blood, marriage, or adoption with the Protected Person (*§44A-1-15(a)(2)*).
- Guardian has met his/her duty of disclosure to the Court (*§ 44A-1-15(a)(3)*).
- The appointment/payment is in the best interest of the Protected Person (*§44A-1-15(a)(4)*).

THEREFORE, the Court orders that the above-mentioned Guardian is authorized to receive compensation through the West Virginia Medicaid Waiver Program for the services provided by the Guardian to the Protected Person and that he/she shall continue as Guardian for the above-named Protected Person.

FURTHERMORE, the Clerk of this Court shall provide two (2) certified copies of this Order to the Guardian, who shall provide one copy to the Protected Person and one copy to the applicable licensed provider of behavioral health services.

ORDERED this _____ day of _____, 20 ____.

Circuit Judge

PRESENTED AND RECOMMENDED BY (if applicable):

Mental Hygiene Commissioner