STATE OF MICHIGAN STATE OFFICE OF ADMINISTRATIVE HEARINGS AND RULES

ADMINISTRATIVE HEARINGS FOR THE DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF:

Claimant

Reg. No.: 2009-20469

Issue No.: 2026

Case No.:

Load No.: Hearing Date:

December 17, 2009

Macomb County DHS (36)

ADMINISTRATIVE LAW JUDGE: Aaron McClintic

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 upon the Claimant's request for a hearing. After due notice, a telephone hearing was held on December 17, 2009. The Claimant was present along with and testified.

ES and appeared on behalf of the Department.

<u>ISSUE</u>

Is the department correct in determining claimant's MA eligibility?

FINDINGS OF FACT

The Administrative Law Judge, based upon the competent, material and substantial evidence on the whole record, finds as material fact:

- (1) Claimant filed a Medical Assistance review application on February 5, 2009.
- (2) A Medical Assistance budget was completed on February 18, 2009 and the department determined that claimant had excess income that resulted in a Medicaid deductible of \$1008.

- On February 24, 2009 after a correction to claimant's health insurance costs, the

 Department determined that claimant had excess income that resulted in Medicaid deductible of \$912 per month.
- (4) Claimant requested a hearing on March 11, 2009 contesting the determination of Medicaid eligibility.

CONCLUSIONS OF LAW

The Medical Assistance (MA) program is established by Title XIX of the Social Security Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). The Department of Human Services (formerly known as the Family Independence Agency) administers the MA program pursuant to MCL 400.10, *et seq.*, and MCL 400.105. Department policies are found in the Program Administrative Manual (PAM), the Program Eligibility Manual (PEM) and the Program Reference Manual (PRM).

The Medical Assistance program was designed to assist needy persons with medical expenses. The State of Michigan has set guidelines for income, which determines if a MA group falls within the needy classification. Under PEM Items 544 and 545, an eligible Medical Assistance group (Group II MA) has income the same as or less than the "protected income level" plus medical insurance premiums as set forth in the policy contained in the program reference table. An individual or MA group whose income is in excess of the monthly protected income level is ineligible to receive MA. However a MA group may become eligible for assistance under the deductible program. A deductible is a process, which allows a client with excess income to be eligible for MA, if sufficient allowable medical expenses are incurred. Each calendar month is a separate deductible period. The fiscal group's monthly excess income is called the deductible amount. Meeting a deductible means reporting and verifying allowable

medical expenses that equal or exceed the deductible amount for the calendar month. The MA group must report expenses by the last day of the third month following the month it wants medical coverage. (PEM 545; 42 CFR 435.831.)

In the present case, claimant is contesting the deductible amount for her MA benefits. Claimant's RSDI benefit is \$1089 and she has \$387 unearned income from a pension, this combines for \$1476 gross income. In determining net income a standard deduction of \$20 is deducted for SSI-related Medical Assistance recipients (disabled). Claimant has total needs of \$543.90; this is calculated by adding the protected income level of \$408 to the health insurance premiums of \$136. Claimant's net income \$1456 exceeds the total needs of \$544 by \$912 per month. Claimant is consequently ineligible to receive Medical assistance. However under the deductible program, if the claimant incurs medical expenses in excess of \$912 during the month she may then be eligible for Medical Assistance. This ALJ finds that the department has acted in accordance with department policy and law in denying ongoing Medical assistance and determining her deductible amount.

Claimant complained at hearing about the difficulty she is having paying for her basic needs when she is largely responsible for her health care costs. This Administrative Law Judge sympathizes with her predicament but is unable to do anything in this forum to address her plight.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law decides that the department was correct in the determination of MA benefits, and it is ORDERED that the department's decision in this regard be and is hereby AFFIRMED.

Aaron McClintic

Administrative Law Judge for Ismael Ahmed, Director Department of Human Services

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Date Signed: <u>1/12/2010</u>

Date Mailed: <u>1/12/2010</u>

NOTICE: Administrative Hearings may order a rehearing or reconsideration on either its own motion or at the request of a party within 30 days of the mailing date of this Decision and Order. Administrative Hearings will not order a rehearing or reconsideration on the Department's motion where the final decision cannon be implemented within 90 days of the filing of the original request.

The Claimant may appeal the Decision and Order to Circuit Court within 30 days of the receipt of the Decision and Order or, if a timely request for rehearing was made, within 30 days of the receipt date of the rehearing decision.

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