

STATE OF MICHIGAN
STATE OFFICE OF ADMINISTRATIVE HEARINGS AND RULES
ADMINISTRATIVE HEARINGS FOR THE
DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF:

[REDACTED]

Reg. No.: 201039959
Issue No.: 2026
Case No.: [REDACTED]
Load No.: [REDACTED]
Hearing Date: July 19, 2010
Wayne County DHS (82)

ADMINISTRATIVE LAW JUDGE: Christian Gardocki

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 July 19, 2010. The claimant appeared and testified; [REDACTED] also appeared and testified on behalf of Claimant.

ISSUE

Whether DHS properly calculated Claimant's eligibility for Medical Assistance (MA).

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 was an ongoing MA recipient.
2. Claimant is at least 65 years of age.
3. Claimant receives \$1116/month from Retirement Survivors, Disability Insurance (RSDI) income; he has no other income.
4. Claimant has received \$1116 in RSDI income since 1/2010.
5. Claimant pays a \$110.50 monthly Medicare premium that is deducted from his RSDI benefits.
6. DHS verified that Claimant's Medicare Savings Program (MSP) benefits terminated but did not indicate why it was terminated.

7. DHS verified that Claimant was eligible for Medicaid subject to a monthly deductible and that Claimant met his deductible for 5/2010 and 6/2010 based on previously submitted medical expenses.
8. Claimant submitted a hearing request on 6/16/10 primarily objecting to termination of chore services/home help care; Claimant's request also objected to his eligibility for Medicaid subject to a deductible.

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 Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) and the Reference Tables Manual (RFT).

MA provides medical assistance to individuals and families who meet financial and nonfinancial eligibility factors. The goal of the MA program is to ensure that essential health care services are made available to those who otherwise would not have financial resources to purchase them.

A recipient with excess income for ongoing Medicaid may still be eligible for Medicaid under the deductible program. Clients with a Medicaid deductible may receive Medicaid 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.

MA benefits may include eligibility for the Medicare Savings Program (MSP). MSP programs offer various degrees of assistance to clients in paying Medicare premiums and copayments. Eligibility for MSP programs may be concurrent with Medicaid eligibility.

Persons may qualify under more than one MA category. Federal law gives them the right to the most beneficial category. The most beneficial category is the one that results in eligibility or the least amount of excess income. BEM 105 at 2.

As a person over 65 years of age, Claimant's most beneficial MA program is through Aged-Disabled Care (AD-Care). As a client responsible for paying a Medicare premium, Claimant may also be considered for MSP eligibility.

In the present case, DHS and Claimant were not very helpful in explaining Claimant's current MA benefits status. Documents submitted following the hearing indicated that

Claimant's MSP eligibility terminated effective 6/2010. DHS failed to give any evidence explaining why the benefits were closed. Due to the failure of DHS to explain their actions, it must be found that DHS improperly terminated Claimant's MSP benefits.

Claimant's eligibility for AD-Care was also unclear. DHS submitted a Bridges Eligibility Summary which indicated that Claimant was approved for G2S as of 6/2010. "G2S" is taken to mean "Group 2 spend-down" which would mean that Claimant was eligible for Medicaid subject to a deductible. DHS failed to indicate the amount of Claimant's ongoing Medicaid deductible.

Income eligibility exists for AD-care exists when a client's net income does not exceed the income limit in RFT 242. The AD-care net income limit for a one person MA group is \$903/month. RFT 242. Claimant's monthly net income (\$1116) exceeds the AD-care net income limits. It is found that DHS properly determined Claimant to have excess income for ongoing Medicaid. Based on all of the evidence presented, Claimant is eligible for Medicaid subject to a monthly \$721/month deductible.

The undersigned lacks jurisdiction to consider a termination of chore services benefits. That jurisdiction properly belongs to an administrative law judge that specialized in Department of Community Health decisions. Claimant was advised that a hearing concerning termination of his eligibility for chore services will be scheduled for an unknown date in the future.

DECISION AND ORDER

The actions taken by DHS are partially AFFIRMED. The Administrative Law Judge, based upon the above findings of fact and conclusions of law, finds that DHS properly found Claimant eligible for Medicaid subject to a monthly deductible.

The actions taken by DHS are partially REVERSED. The Administrative Law Judge, based upon the above findings of fact and conclusions of law, finds that DHS improperly terminated Claimant's ongoing MSP coverage. DHS also failed to verify Claimant's current deductible amount which is found to be \$721/month. It is ordered that DHS redetermine Claimant's eligibility for MA benefits effective 6/2010 including Claimant's eligibility for MSP and to calculate Claimant's deductible amount.

/s/



Christian Gardocki
Administrative Law Judge
For Ismael Ahmed, Director
Department of Human Services

Date Signed: September 1, 2010

Date Mailed: September 1, 2010

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 cannot be implemented within 60 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.

CG/ hw

cc:

A large black rectangular redaction box covers the names and email addresses of the recipients listed in the 'cc:' field.