

STATE OF MICHIGAN  
STATE OFFICE OF ADMINISTRATIVE HEARINGS AND RULES

ADMINISTRATIVE HEARINGS FOR THE  
DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF: [REDACTED],  
Claimant

Reg. No: 2010-11412  
Issue No: 2018  
Case No: [REDACTED]  
Load No: [REDACTED]  
Hearing Date:  
May 6, 2010  
Eaton County DHS

ADMINISTRATIVE LAW JUDGE: Jana A. Bachman

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 upon claimant's request for a hearing. After due notice, a telephone hearing was held on May 6, 2010.

ISSUE

Whether the Department of Human Services (department) properly determined 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) On or about March 1, 2009, claimant was determined to be eligible for MA with a monthly deductible of [REDACTED]. Department Exhibit A, pg 17.
- (2) On or about August 29, 2009, claimant had not provided evidence that she met her monthly deductible for the previous three months.

(3) On or about August 29, 2009, the department sent claimant written notice that her Medical Assistance would terminate due to lack of meeting the deductible for three months prior. Department Exhibit A, pgs 5-6.

#### 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 (DHS or department) 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).

Department manuals provide the following policy statements and instructions for caseworkers:

Monthly deductible is a process by which a person or household with excess income may qualify for MA coverage. Meeting a deductible means reporting and verifying allowable medical expenses that equal or exceed the monthly deductible amount for the calendar month being tested. The group must report expenses by the last day of the third month following the month it wants MA coverage.

Redetermine eligibility for active deductible cases at least every 12 months unless the group has not met its deductible within the past three months. If a group has not met its deductible in at least one of the three calendar months prior to the month the redetermination is due and none of the members are eligible for QMB, SLM, or ALM, the department is to change the redetermination date to nine and the MA eligibility end date to be the last day of the month

the redetermination is due. Computer system will automatically notify the group of closure. Bridges Eligibility Manual (BEM) 545.

In this case, the department credibly testified that claimant did not report and verify medical expenses during the three months prior to the month that the department was notified a redetermination would be due. At hearing, claimant conceded on the record that she did not have the money to pay her deductible and so did not make any report to the department. Accordingly, the department properly ended claimant's MA eligibility. As such, the department's action must be upheld. Finding of Fact 1-2.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that the Department of Human Services properly determined claimant's eligibility for Medical Assistance.

Accordingly, the department's action is, hereby, UPHELD.

/s/ \_\_\_\_\_  
Jana A. Bachman  
Administrative Law Judge  
for Ismael Ahmed, Director  
Department of Human Services

Date Signed: August 10, 2010

Date Mailed: August 12, 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 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.

JAB/db

cc:

