

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

IN THE MATTER OF:



Reg. No.: 2010-46994
Issue No.: 2019
Case No.: [REDACTED]
Load No.: [REDACTED]
Hearing Date: October 28, 2010
DHS County: Wayne (43)

ADMINISTRATIVE LAW JUDGE: Jan Leventer

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to Michigan Compiled Laws (MCL) 400.9 and 400.37 and Claimant's request for a hearing. After due notice, a telephone hearing was held on October 28, 2010. Claimant appeared and testified. [REDACTED] appeared and testified on behalf of the Department of Human Services (DHS).

ISSUE

Whether DHS properly required a Patient Pay Amount ("spend-down" or deductible) as a condition of Claimant's Medical Assistance (MA or Medicaid) benefits?

FINDINGS OF FACT

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

1. In 2003, Claimant began receiving MA benefits.
2. On or about June 1, 2010, DHS notified Claimant that based on her income, her Patient Pay Amount was \$599 per month.
3. On June 3, 2010, Claimant filed a notice of hearing request with DHS.

CONCLUSIONS OF LAW

MA was established by Title XIX of the Social Security Act and is implemented by Title 42 of the Code of Federal Regulations. DHS administers the MA program pursuant to MCL 400.10, *et seq.*, and MCL 400.105. DHS policies are found in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) and the Reference

Tables Manual (RFT). These policies are available online at www.michigan.gov/dhs-manuals.

In this case, Claimant is disputing the spend-down amount. DHS correctly refers the Judge to BEM 163, "AD-Care," which states:

Income Eligibility


Income eligibility exists when net income does not exceed the income limit in RTF 242. Income eligibility cannot be established with a patient-pay amount or by meeting a deductible. BEM 163, p. 2 of 2.

I have reviewed DHS' calculations in this case. I find and conclude that DHS correctly calculated Claimant's net income to be \$974. I find no error in this calculation. I find and conclude that based on her net income, Claimant is required to pay a spend-down amount in order to receive MA coverage.

I next turn to the table that is referenced in BEM 163 to determine if Claimant has been awarded the appropriate deductible. RFT 242, "AD-Care and Medicare Savings Program Income Limits," contains a series of tables showing income levels for clients who have income at varying levels. RFT 242 Table 2 states that as of April 1, 2009, a client whose family group is one and whose income is between \$904 and \$1,083 is required to pay a spend-down. I find and conclude, therefore, that DHS properly assigned a spend-down requirement in Claimant's case. DHS acted properly in this case and is AFFIRMED. DHS need take no further action in this case.

DECISION AND ORDER

The Administrative Law Judge, based on the above findings of fact and conclusions of law, AFFIRMS DHS' action in this case. DHS need take no further action in this case.



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

Date Signed: November 1, 2010

Date Mailed: November 1, 2010

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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 mailing 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.

JL/pf

cc:

