

**STATE OF MICHIGAN
MICHIGAN ADMINISTRATIVE HEARING SYSTEM
ADMINISTRATIVE HEARINGS FOR THE
DEPARTMENT OF HUMAN SERVICES**

IN THE MATTER OF:

[REDACTED]

Reg No.: 2012-59944
Issue No.: 2000
Case No.: [REDACTED]
Hearing Date: September 26, 2012
County: Oakland (03)

ADMINISTRATIVE LAW JUDGE: Colleen M. Mamelka

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 conducted from Detroit, Michigan on Wednesday, September 26, 2012. The Claimant appeared and testified. Participating on behalf of the Department of Human Services ("Department") was [REDACTED] and [REDACTED].

ISSUE

Whether the Department properly processed the Claimant's case under the Medicare Savings Program ("MSP")?

FINDINGS OF FACT

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

1. The Claimant is a Social Security Income ("SSI") recipient.
2. The Claimant participates in the MSP.
3. In June 2012, the Claimant's coverage was changed from Full-coverage AD-Care to Full-Coverage under the QMB program. (Exhibit 1)
4. In July 2012, the Claimant's Full-Coverage QMB changed back to Full-Coverage AD-Care. (Exhibit 1)

5. There has been no lapse in MA coverage. (Exhibit 1)
6. On June 8, 2012, the Department received the Claimant's timely written request for hearing.

CONCLUSIONS OF LAW

The Medical Assistance program is established by Subchapter XIX of Chapter 7 of The Public Health & Welfare Act, 42 USC 1397, and is administered by the Department of Human Services, formerly known as the Family Independence Agency, 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 Bridges Reference Manual ("RFT").

The goal of the Medicaid program is to ensure that essential health care services are made available to those who otherwise could not afford them. BEM 105 (2010), p. 1. Medicaid is also known as Medical Assistance ("MA"). BEM 105, p. 1. The Medicaid program is comprised of several categories; one category is for FIP recipients while another is for SSI recipients. BEM 105, p. 1. The Medicare Savings Programs are SSI-related MA Categories. BEM 165 (2010), p. 1. The three Medicare Savings Programs are Qualified Medicare Beneficiaries (also known as full-coverage QMB); Specified Low-Income Medicare Beneficiaries (also referred to as limited coverage QMB); and Additional Low-Income Medicare Beneficiaries (also known as ALMB or Q1). BEM 165, p. 1.

Income is the major determiner of which category an individual falls under. BEM 165, p. 1. Effective April 1, 2012, to be eligible for full coverage AD-Care/QMB, income cannot exceed \$931.00; for limited coverage QMB, \$932.00 to \$1,117.00; and for ALMB \$1,118.00 to \$1,257.00. RFT 242 (2012), p. 1. A person who is eligible for one of these categories cannot choose to receive a different Medicare Savings Program category. BEM 165, p. 1. All eligibility factors must be met in the calendar month being tested. BEM 165, p. 1. Full coverage QMB pays for Medicare premiums, co-insurances, and deductibles; limited QMB (also known as SLMB) pays Medicare Part B premiums; and ALMB pays Medicare Part B premiums provided funding is available. BEM 165, pp. 2, 3. The Department of Community Health determines whether funding is available. BEM 165, 2.

Regulations governing the hearing and appeal process for applicants and recipients of public assistance in Michigan are found in Mich Admin Code, R 400.901 through R 400.951. Rule 400.903 provides in relevant part:

An opportunity for a hearing shall be granted to an applicant who requests a hearing because a claim for assistance is denied or is not acted upon with reasonable promptness, and to any recipient who is aggrieved by a Department

action resulting in suspension, reduction, discontinuance, or termination of assistance. R 400.903(1)

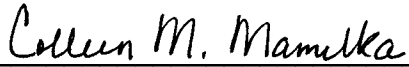
In this case, the Claimant requested a hearing regarding her MA benefits. Based on the submitted evidence, the Department changed the Claimant's MA benefits for the month of June from AD-Care to QMB. The Claimant's coverage was switched back to AD-Care in July 2012. There was no lapse in MA coverage and, importantly, no reduction in MA coverage. As detailed above, AD-Care and Full-Coverage QMB provide the same coverage. As such, the Claimant is not aggrieved by a Department action. Accordingly, the Claimant's June 8th Request for hearing is DISMISSED.

DECISION AND ORDER

The Administrative Law Judge, based on the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, finds the Claimant is not aggrieved by a Department action with respect to the June 8, 2012 Request for Hearing.

Accordingly, it is ORDERED:

The Claimant's June 8, 2012 hearing request is DISMISSED.



Colleen M. Mamelka

Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: October 12, 2012

Date Mailed: October 12, 2012

NOTICE: Michigan Administrative Hearing System (MAHS) 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. MAHS 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. (60 days for FAP cases)

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.

Claimant may request a rehearing or reconsideration for the following reasons:

- A rehearing **MAY** be granted if there is newly discovered evidence that could affect the outcome of the original hearing decision.
- A reconsideration **MAY** be granted for any of the following reasons:

- misapplication of manual policy or law in the hearing decision,
- typographical errors, mathematical error, or other obvious errors in the hearing decision that effect the substantial rights of the claimant:
- the failure of the ALJ to address other relevant issues in the hearing decision.

Request must be submitted through the local DHS office or directly to MAHS by mail at

Michigan Administrative Hearings
Re consideration/Rehearing Request
P. O. Box 30639
Lansing, Michigan 48909-07322

CMM/ctl

cc: [REDACTED]
Oakland County DHS (03)

C. Mamelka