

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

IN THE MATTER OF:

[REDACTED]

Reg. No.: 14-015465
Issue No.: 2001
Case No.: [REDACTED]
Hearing Date: February 24, 2015
County: Genesee Dist 2 (Mc Cree)

ADMINISTRATIVE LAW JUDGE: Darryl Johnson

HEARING DECISION

Following Claimant's request for a hearing, this matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and 400.37; 7 CFR 273.15 to 273.18; 42 CFR 431.200 to 431.250; 45 CFR 99.1 to 99.33; and 45 CFR 205.10. After due notice, a three-way telephone hearing was held on February 24, 2015, from Lansing, Michigan. Participants on behalf of Claimant included Claimant. Participants on behalf of the Department of Human Services (Department) included Hearings Facilitator [REDACTED].

ISSUE

Due to excess income, did the Department properly close Claimant's case for Medical Assistance (MA)?

FINDINGS OF FACT

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

1. Claimant received MA benefits.
2. On August 12, 2014, the Department mailed a Redetermination form to Claimant. His response was due by September 2, 2014 for the Department to be able to determine his continued eligibility.
3. On September 19, 2014, the Department mailed a notice that his MA would be closing because he did not return the Determination.
4. On September 29, 2014, Claimant completed an online Determination.

5. The Department obtained evidence that Claimant and his wife were both employed, and their income exceeded the limit of \$ [REDACTED] annually for a group of four.
6. On October 10, 2014, the Department closed Claimant's case due to excess income.
7. On October 24, 2014, Claimant filed a hearing request, protesting the Department's actions.

CONCLUSIONS OF LAW

Department policies are contained in the Department of Human Services Bridges Administrative Manual (BAM), Department of Human Services Bridges Eligibility Manual (BEM), and Department of Human Services Reference Tables Manual (RFT).

The Medical Assistance (MA) program is established by Title XIX of the Social Security Act, 42 USC 1396-1396w-5; 42 USC 1315; the Affordable Care Act of 2010, the collective term for the Patient Protection and Affordable Care Act, Pub. L. No. 111-148, as amended by the Health Care and Education Reconciliation Act of 2010, Pub. L. No. 111-152; and 42 CFR 430.10-.25. The Department (formerly known as the Family Independence Agency) administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.105-.112k.

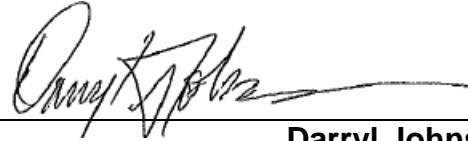
Claimant and his family were enrolled in the MA Other Healthy Kids (OHK) program, based upon reported income. When Claimant completed the Redetermination, the Department became aware that Claimant was employed at the [REDACTED]. During the hearing he testified that his gross wages for 2014, as reported in his W-2 form, were \$ [REDACTED]. His wife worked at [REDACTED] and [REDACTED] in 2014. Her W-2 gross wages from [REDACTED] were [REDACTED], and for [REDACTED] were \$ [REDACTED]. Claimant's monthly income was \$ [REDACTED] and his wife's income averaged \$ [REDACTED] in 2014. Their monthly income was \$ [REDACTED]. Annualized, their income \$ [REDACTED]. The annual household income limit for a group of four to be eligible for the OHK program is \$ [REDACTED]. Claimant's household income significantly exceeds the upper limit.

Claimant testified that it would cost him \$ [REDACTED] per month to add one child to his insurance through work, and another \$ [REDACTED] to add the extra child. It was explained that he might be able to obtain coverage through the open marketplace, but he is not eligible through the OHK program.

The Administrative Law Judge, based upon the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, if any, finds that the Department acted in accordance with Department policy when it closed Claimant's MA.

DECISION AND ORDER

Accordingly, the Department's decision is **AFFIRMED**.



Darryl Johnson
Administrative Law Judge
for Nick Lyon, Interim Director
Department of Human Services

Date Signed: **2/25/2015**

Date Mailed: **2/25/2015**

DJ/jaf

NOTICE OF APPEAL: A party may appeal this Hearing Decision in the circuit court in the county in which he/she resides, or the circuit court in Ingham County, within 30 days of the receipt date.

A party may request a rehearing or reconsideration of this Hearing Decision from the Michigan Administrative Hearing System (MAHS) within 30 days of the mailing date of this Hearing Decision, or MAHS **MAY** order a rehearing or reconsideration on its own motion.

MAHS **MAY** grant a party's Request for Rehearing or Reconsideration when one of the following exists:

- Newly discovered evidence that existed at the time of the original hearing that could affect the outcome of the original hearing decision;
- Misapplication of manual policy or law in the hearing decision which led to a wrong conclusion;
- Typographical, mathematical or other obvious error in the hearing decision that affects the rights of the client;
- Failure of the ALJ to address in the hearing decision relevant issues raised in the hearing request.

The party requesting a rehearing or reconsideration must specify all reasons for the request. MAHS will not review any response to a request for rehearing/reconsideration. A request must be *received* in MAHS within 30 days of the date this Hearing Decision is mailed.

A written request may be faxed or mailed to MAHS. If submitted by fax, the written request must be faxed to (517) 335-6088 and be labeled as follows:

Attention: MAHS Rehearing/Reconsideration Request

If submitted by mail, the written request must be addressed as follows:

Michigan Administrative Hearings
Reconsideration/Rehearing Request
P.O. Box 30639
Lansing, Michigan 48909-8139

cc:

