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

### IN THE MATTER OF:



Reg. No.: Issue No.: Case No.: Hearing Date: County: 15-011402 2001

September 02, 2015 Oakland-District 3

ADMINISTRATIVE LAW JUDGE: Carmen G. Fahie

# **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; and Mich Admin Code, R 792.11002. After due notice, a telephone hearing was held on September 2, 2015, from Lansing, Michigan. Participants on behalf of Claimant included the Claimant. Participants on behalf of the Department of Health and Human Services (Department) included

## **ISSUE**

Due to excess income, did the Department properly reduce Claimant's benefits 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. The Claimant received MA benefits of Ad Care without a deductible, but was due for redetermination.
- 2. On June 18, 2015, the Department reduced Claimant's benefits due to excess income.
- 3. On June 18, 2015, the Department sent the Claimant a notice that she had to meet a deductible of **\$ a before she was eligible for MA**.
- 4. On June 29, 2015, Claimant/Claimant's Authorized Hearing Representative (AHR) filed a hearing request, protesting the Department's actions.

## CONCLUSIONS OF LAW

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

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 Department of Human Services) administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.105-.112k.

In this case, the Claimant was a recipient of MA Ad Care but was due for redetermination. On June 18, 2015, the Department reduced Claimant's benefits due to excess income. On June 18, 2015, the Department sent the Claimant a notice that she had to meet a deductible of \$ before she was eligible for MA. Based on the Claimant's income of \$ from Social Security RSDI of \$ and Pension of \$ the Claimant had excess income for MA Ad Care.

As a result of her excess income for MA AD-Care, the Claimant was determined eligible for a MA Spenddown/Deductible case. The Claimant had Social Security income of After deductions of a the unearned income general exclusion and a protected income of and insurance premiums of the Claimant had a deductible of that she must meet before being eligible for MA. Department Exhibit 1-11. BEM 210.

The Department has met its burden. The Claimant had excess income for MA AD-Care, which resulted in the Claimant being eligible for MA with a deductible of **that** she must meet before being eligible for MA.

The Administrative Law Judge, based on 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 to Department policy when it determined that the Claimant had excess income for MA Ad Care, resulting in a MA deductible of \$

# **DECISION AND ORDER**

Accordingly, the Department's decision is AFFIRMED.

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Carmen G. Fahie Administrative Law Judge for Nick Lyon, Director Department of Health and Human Services

Date Signed: 9/4/2015

Date Mailed: 9/4/2015

CGF/las

**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 copy of the claim or application for appeal must be filed with the Michigan Administrative Hearing System (MAHS).

A party may request a rehearing or reconsideration of this Hearing Decision from MAHS within 30 days of the mailing date of this Hearing Decision, or MAHS <u>MAY</u> order a rehearing or reconsideration on its own motion. MAHS <u>MAY</u> 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

