



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
MICHIGAN ADMINISTRATIVE HEARING SYSTEM
Christopher Seppanen
Executive Director

MIKE ZIMMER
DIRECTOR

[REDACTED]

Date Mailed: February 29, 2016
MAHS Docket No.: 15-023721
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: C. Adam Purnell

HEARING DECISION

Following Petitioner'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 February 23, 2016, from Lansing, Michigan. Petitioner personally appeared and provided testimony. [REDACTED] (Hearing Facilitator) represented the Department of Health and Human Services (Department).

ISSUE

Did the Department properly close Petitioner's Medical Assistance (MA)-Health Michigan Plan (HMP) case due to excess income?

FINDINGS OF FACT

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

1. Petitioner was active for MA-HMP benefits.
2. On or about November 4, 2015, the Department received Petitioner's completed Redetermination (DHS-1010) form, which indicated, in pertinent part, as follows:
 - a. There were two household members (Petitioner and Petitioner's husband). [Exhibit 1, p. 24].
 - b. Petitioner had two jobs and received \$ [REDACTED] per week from one job and \$ [REDACTED] bi-weekly from the second job. [Exh. 1, p. 26].

- c. Petitioner's husband received \$ [REDACTED] per month from the social security administration for disability. [Exh. 1, p. 26].
3. Prior to receipt of Petitioner's completed redetermination form, the Department was unaware that Petitioner had two jobs.
4. During the relevant time period, Petitioner's annual earned income from employment was \$ [REDACTED] [Exh. 1, pp. 15-22].
5. During the relevant time period, Petitioner's husband's annual unearned income from Retirement, Survivors, and Disability Income (RSDI) was \$ [REDACTED] [Exh. 1, p.10-14].
6. During the relevant time period, the total household monthly income was \$ [REDACTED]
7. There was no Medicare Part A or Medicare Part B during the relevant time period.
8. On November 20, 2015, the Department mailed Petitioner a Health Care Coverage Determination Notice (DHS-1606) which indicated, in pertinent part, that:
 - a. Petitioner and her husband were not eligible for HMP due to excess income. [Exh. 1, p. 7].
 - b. Petitioner's annual income was \$ [REDACTED] and Petitioner's husband's annual income was \$ [REDACTED] [Exh. 1, p. 7].
 - c. The income limit for a household size of 2 for members between the ages of 19 through 64 is \$ [REDACTED] [Exh. 1, p. 7].
9. At the time, Petitioner (DOB: [REDACTED]) was 61 years old and her husband was 54 years old (DOB: [REDACTED]).
10. On December 1, 2015, Petitioner requested a hearing to dispute the denial of HMP for herself and her husband. [Exh. 1, p. 3].
11. The hearing occurred on February 23, 2015.
12. During the hearing, the Department representative provided credible testimony concerning Petitioner's household income and showed how the Department determined HMP eligibility.
13. During the hearing, Petitioner did not dispute the Department's calculations of her household income, but she stated that she planned to quit one of her jobs and she hoped that her circumstances would change in the future.

14. The Department correctly calculated the total household income and properly determined that Petitioner and her husband, were both no longer eligible for HMP due to excess income.

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.

The Healthy Michigan Plan (HMP) provides health care coverage for a category of eligibility authorized under the Patient Protection and Affordable Care Act and Michigan Public Act 107 of 2013 effective April 1, 2014. BEM 137, p. 1. HMP is based on Modified Adjusted Gross Income (MAGI) methodology. BEM 137, p. 1.

For HMP, the income limit for adults age 19-64 is 133 percent of the federal poverty limit. Michigan Department of Community Health, Modified Adjusted Gross Income Related Eligibility Manual, May 28, 2014, p. 2. The Health Care Coverage Determination Notice provides a chart of the annual income limits for HMP. For a group size of two between the age of 19-64, the annual income limit is \$ [REDACTED]. See also Federal Register, Vol. 80, No. 14, January 22, 2015, pp. 3236-3237.

The Department determined that Petitioner was not eligible for HMP because the total household income exceeded the limit for this program. This was based on verification of Petitioner's earned income and her husband's unearned income contained in the record. Again, it should be noted that Petitioner did not dispute the Department's calculations. [Exh. 1, pp. 10-22]. Although Petitioner testified that she planned to quit of her jobs and expected her circumstances to change in the near future, there was no dispute that the Department properly calculated her household income at the time.

The Department properly determined Petitioner's eligibility for MA based on the available income information. Petitioner's income, at the time this application was processed, exceeded the income limit for HMP. There was no evidence in the record that Petitioner met the eligibility criteria for any other MA category.

DECISION AND ORDER

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

IT IS SO ORDERED.



CP/las

C. Adam Purnell
Administrative Law Judge
for Nick Lyon, Director
Department of Health and Human
Services

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 **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

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]