RICK SNYDER GOVERNOR

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

MIKE ZIMMER



Date Mailed: March 17, 2016

MAHS Docket No.: 15-004028-RECON

Agency No.:
Petitioner:

ADMINISTRATIVE LAW JUDGE: Kevin Scully

REHEARING 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. A hearing was scheduled for May 7, 2015. On May 8, 2015, an order dismissing Petitioner's request for a hearing was issued. On November 25, 2015, an order granting Petitioner's motion for reconsideration was issued. On February 18, 2015, an order vacating the order of dismissal and granting Petitioner's request for a rehearing was issued. After due notice, telephone rehearing was held on March 15, 2016, from Lansing, Michigan. Participants on behalf of Petitioner included the Petitioner's authorized hearing representative represented the Department of Health and Human Services (Department).

ISSUE

Did the Department of Health and Human Services (Department) properly deny the Petitioner's application 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:

- On November 19, 2014, the Department received the Petitioner's application for Medical Assistance (MA).
- 2. On December 4, 2014, the Department denied the Petitioner's application for Medical Assistance (MA).
- 3. On March 6, 2015, the Department received the Petitioner's request for a hearing.

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.

All earned and unearned income available to the Claimant is countable. Earned income means income received from another person or organization or from self-employment for duties for duties that were performed for compensation or profit. Unearned income means all income that is not earned, including but not limited to funds received from the Family Independence Program (FIP), State Disability Assistance (SDA), Child Development and Care (CDC), Medicaid (MA), Social Security Benefits (RSDI/SSI), Veterans Administration (VA), Unemployment Compensation Benefits (UCB), Adult Medical Program (AMA), alimony, and child support payments. The amount counted may be more than the client actually receives because the gross amount is used prior to any deductions. Department of Human Services Bridges Eligibility Manual (BEM) 500 (July 1, 2015).

All income is converted to a standard monthly amount. If the client is paid weekly, the Department multiplies the average weekly amount by 4.3. If the client is paid every other week, the Department multiplies the average bi-weekly amount by 2.15. Department of Human Services Bridges Eligibility Manual (BEM) 505 (July 1, 2014), pp 7-8.

Modified adjusted gross income (MAGI) is a methodology for how income is counted and how household composition and family size are determined. It is based on federal tax rules for determining adjusted gross income. It eliminates asset tests and special deductions or disregards. Every individual is evaluated for eligibility based on MAGI rules. The MAGI rules are aligned with the income rules that will be applied for determination of eligibility for premium tax credits and cost-sharing reductions through exchanges. The 5% disregard is the amount equal to 5% of the Federal Poverty Level for the applicable family size. It is not a flat 5% disregard from the income. The 5%

disregard shall be applied to the highest income threshold. The 5% disregard shall be applied only if required to make someone eligible for Medicaid.¹

Household income is the sum of the MAGI-based income of every individual included in the individual's household, minus an amount equivalent to 5 percentage points of the Federal poverty level for the applicable family size. 42 CFR 435.603.

MA-only eligibility is determined on a calendar month basis. Unless policy specifies otherwise, circumstances that existed, or are expected to exist, during the calendar month being tested are used to determine eligibility for that month. When determining eligibility for a future month, assume circumstances as of the processing date will continue unchanged unless you have information that indicates otherwise. Department of Human Services Bridges Eligibility Manual (BEM) 105 (October 1, 2014), p 2.

Department policy is consistent with federal regulations under 42 CFR § 435.603(h) that state:

Financial eligibility for Medicaid for applicants, and other individuals not receiving Medicaid benefits at the point at which eligibility for Medicaid is being determined, must be based on current monthly household income and family size.

The income limit to participate in the Healthy Michigan Plan (HMP) is 133% of the federal poverty level. Department of Health and Human Services Reference Table Manual (RFT) 246 (April 1, 2014), p 1.

On November 19, 2014, the Department received the Petitioner's application for MA benefits. The evidence presented on the record supports a finding that the Petitioner's actual income in November of 2014, consisted of four weekly paychecks in the gross monthly amounts of \$ 100 months are supported by the 4.3 conversion factor, this results in a prospective gross monthly income of \$ 100 months are supported by the 4.3 conversion factor, this results in a prospective gross monthly income of \$ 100 months are supported by the 4.3 conversion factor, this results in a prospective gross monthly income of \$ 100 months are supported by the 4.3 conversion factor, this results in a prospective gross monthly income of \$ 100 months are supported by the 4.3 conversion factor, this results in a prospective gross monthly income of \$ 100 months are supported by the 4.3 conversion factor, this results in a prospective gross monthly income of \$ 100 months are supported by the 4.3 conversion factor, this results in a prospective gross monthly income of \$ 100 months are supported by the 4.3 conversion factor, this results in a prospective gross monthly income of \$ 100 months are supported by the 4.3 conversion factor, this results in a prospective gross monthly income of \$ 100 months are supported by the 4.3 conversion factor, this results in a prospective gross monthly income of \$ 100 months are supported by the 4.3 conversion factor, this results in a prospective gross monthly income of \$ 100 months are supported by the 4.3 conversion factor, this results in a prospective gross monthly income of \$ 100 months are supported by the 4.3 conversion factor, this results in a prospective gross months are supported by the 4.3 conversion factor, this results in a prospective gross months are supported by the 4.3 conversion factor, this results in a prospective gross months are supported by the 4.3 conversion factor, the factor of the factor o

The production of evidence to support the department's position is clearly required under BAM 600 as well as general case law (see e.g., Kar v Hogan, 399 Mich 529; 251 NW2d 77 [1976]). In McKinstry v Valley Obstetrics-Gynecology Clinic, PC, 428 Mich167; 405 NW2d 88 (1987), the Michigan Supreme Court addressed the issue of burden of proof, stating in part:

The term "burden of proof" encompasses two separate meanings. [citation omitted.] One of these meanings is the burden of persuasion or the risk of nonpersuasion. The other is the risk of going forward or the risk of

¹ Department of Health and Human Services Modified Adjusted Gross Income (MAGI) Related Eligibility Manual, pp 14-15. This manual is available on the internet at http://www.michigan.gov/documents/mdch/MAGI_Manual_457706_7.pdf

nonproduction. The burden of producing evidence on an issue means the liability to an adverse ruling (generally a finding or a directed verdict) if evidence on the issue has not been produced. It is usually on the party who has pleaded the existence of the fact, but..., the burden may shift to the adversary when the pleader has discharged [its] initial duty. The burden of producing evidence is a critical mechanism[.]

The burden of persuasion becomes a crucial factor only if the parties have sustained their burdens of producing evidence and only when all of the evidence has been introduced.

McKinstry, 428 Mich at 93-94, quoting McCormick, Evidence (3d ed), Sec. 336, p. 946.

This Administrative Law Judge finds that the Department failed to establish that the Petitioner is not eligible for HMP benefits based on income.

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 did not act in accordance with Department policy when it denied the Petitioner's application for Medical Assistance (MA).

DECISION AND ORDER

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

THE DEPARTMENT IS ORDERED TO BEGIN DOING THE FOLLOWING, IN ACCORDANCE WITH DEPARTMENT POLICY AND CONSISTENT WITH THIS HEARING DECISION, WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:

- 1. Initiate a determination of the Petitioner's eligibility for Medical Assistance (MA) based on his November 19, 2014, application.
- 2. Provide the Petitioner with written notice describing the Department's revised eligibility determination.
- 3. Issue the Petitioner any retroactive benefits he may be eligible to receive, if any.

KS/las

Kevin Scully

Administrative Law Judge for Nick Lyon, Director

Department of Health and Human Services

NOTICE OF APPEAL: A party may appeal this Order in circuit court within 30 days of the receipt date. A copy of the circuit court appeal must be filed with the Michigan Administrative Hearing System (MAHS).

A party may request a rehearing or reconsideration of this Order if the request is received by MAHS within 30 days of the date the Order was issued. The party requesting a rehearing or reconsideration must provide the specific reasons for the request. MAHS will not review any response to a request for rehearing/reconsideration.

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

