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

SHELLY EDGERTON DIRECTOR



Date Mailed: December 19, 2016 MAHS Docket No.: 16-015236 Agency No.: Petitioner:

## ADMINISTRATIVE LAW JUDGE: Gary Heisler

# **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 November 16, 2016, from Lansing, Michigan. Petitioner was represented by herself. The Department was represented by Hearing Facilitator **10**. Department's Exhibit A, pages 1-17 was admitted into evidence.

## <u>ISSUE</u>

Did the Department properly determine Petitioner's Medical Assistance (MA) eligibility on September 15, 2016?

## 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 and her husband were ongoing recipients of Medical Assistance (MA).
- 2. On July 25, 2016, Petitioner began employment again.
- 3. On August 18, 2016, Petitioner was sent a New Hire Client Notice (DHHS-4635).
- 4. On September 1, 2016, Petitioner submitted earned income information to the Department on the New Hire Client Notice (DHHS-4635).
- 5. On September 15, 2016, the Department updated Petitioner's income information. A Health Care Coverage Determination Notice (DHHS-1606) was sent to Petitioner

which stated that Petitioner and her husband were not eligible for Medical Assistance (MA) beginning October 1, 2016 due to exceeding the income limit of eligibility.

6. On October 6, 2016, Petitioner submitted a hearing request.

### 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.

Petitioner does not dispute the calculation of her group's income or that it exceeds the income level for eligibility. 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 with Department policy when it determined Petitioner's Medical Assistance (MA) eligibility on September 15, 2016.

## DECISION AND ORDER

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

GH/nr

Gary Heisler

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

DHHS



Petitioner