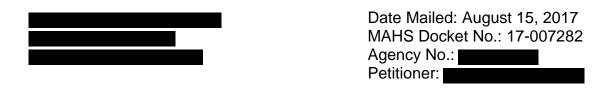
RICK SNYDER GOVERNOR

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

SHELLY EDGERTON



ADMINISTRATIVE LAW JUDGE: Lynn M. Ferris

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; 42 CFR 438.400 to 438.424; 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 petroit, Michigan. The Petitioner was represented by herself. The Department of Health and Human Services (Department) was represented by the service of th

ISSUE

Did the Department properly close the Petitioner's Health Michigan Plan (HMP) medical assistance (MA) benefits?

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 Petitioner was an ongoing recipient of HMP MA.
- 2. The Department sent the Petitioner a Wage Match Client Notice on requesting the Petitioner to have her employer complete a verification of employment due . The Wage Verification was returned by the Petitioner on Exhibit C.
- 3. On _____, the Department also received a Compensation Report for the period _____. Exhibit F.

4.	On the Department issued a Health Care Coverage Determination Notice advising the Petitioner that her HMP benefits would close effective due to excess income as her income exceeded the HMP limit of for a household size of one person. Exhibit A.
5.	On, the Petitioner provided a pay information for the pay period , with adjusted gross earnings of \$ Exhibit D.
6.	On, the Petitioner provided the Department a Tax Form 8879 showing her adjusted gross income for was \$ Exhibit E.
7.	The Petitioner was employed as an instructional assistant and is unemployed as of The Petitioner has earned \$ as her hearing request.
8.	The Petitioner requested a hearing on protesting the Department's actions closing her HMP.

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).

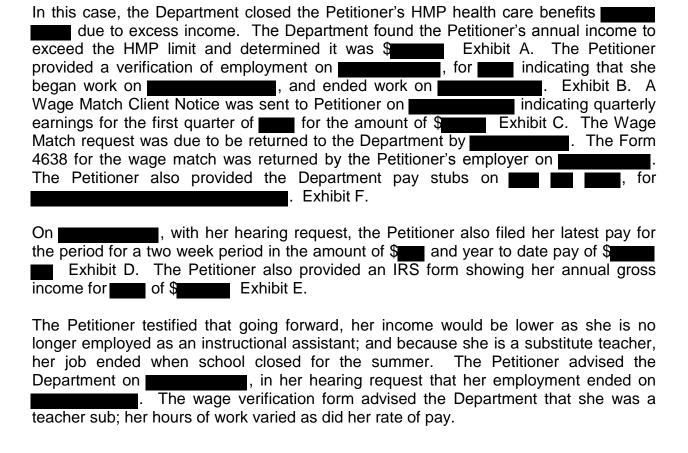
The Medical Assistance (MA) program is established by Title XIX of the Social Security Act, 42 USC 1396-1396w-5; 42 USC 1315; the Affordable Care Act of 2010, the collective term for the Patient Protection and Affordable Care Act, Pub. L. No. 111-148, as amended by the Health Care and Education Reconciliation 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.

MA is available (i) to individuals who are aged (65 or older), blind or disabled under SSI-related categories, (ii) to individuals who are under age 19, parents or caretakers of children, or pregnant or recently pregnant women, and (iii) to individuals who meet the eligibility criteria for Healthy Michigan Plan (HMP) coverage. BEM 105 (January 2016), p. 1.

HMP is a MAGI-related MA category that provides MA coverage to individuals who (i) are 19 to 64 years of age; (ii) have income at or below 133% of the federal poverty level (FPL) under the Modified Adjusted Gross Income (MAGI) methodology; (iii) do not qualify for or are not enrolled in Medicare; (iv) do not qualify for or are not enrolled in other MA programs; (v) are not pregnant at the time of application; and (vi) are residents of the State of Michigan. BEM 137 (January 2016), p. 1.

Petitioner, who is under age not enrolled in Medicare and not the caretaker of any minor children, is potentially eligible for MA under the HMP. An individual is eligible for HMP if her household's income does not exceed 133% of the FPL applicable to the individual's group size. A determination of group size under the MAGI methodology requires consideration of the client's tax status and dependents. In this case, the evidence showed that Petitioner's household size for MAGI purposes is one. 133% of the annual FPL in for a household with one member is \$\text{https://aspe.hhs.gov/poverty-guidelines.}\$ Therefore, to be income eligible for HMP, Petitioner's annual income cannot exceed \$\text{perion}\$

To determine financial eligibility under HMP, income must be calculated in accordance with MAGI under federal tax law. MAGI is based on Internal Revenue Service rules and relies on federal tax information. BEM 500 (January 2016), p. 3. Income is verified via electronic federal data sources in compliance with MAGI methodology. MREM, § 1. In determining an individual's eligibility for MAGI-related MA, 42 CFR 435.603(h)(2) provides that for current beneficiaries and "for individuals who have been determined financially-eligible for Medicaid using the MAGI-based methods . . ., a State may elect in its State plan to base financial eligibility either on current monthly household income . . . or income based on projected annual household income . . . for the remainder of the current calendar year."



The Department's Health Care Coverage Determination Notice was issued on ■ Based upon the last 30 days of earnings provided by the Petitioner, which were available at the time, the Department made its determination. The Petitioner's monthly income based upon the pay stubs was \$ for pay dated pay dated I , and \$ pay dated , for a total of When this figure is annualized (multiplied by 12), the total income is Even using the two pays for \$ and eliminating the pay for the monthly income is \$ which when multiplied by 12 totals As the annual income limit for HMP is \$ the Department correctly closed the Petitioner's HMP based on the information it had available at the time. The Department was not advised that the Petitioner's employment was ending until after it took action and thus its decision is correct.

As discussed at the hearing the Petitioner may reapply for medical assistance at any time and must verify that she is no longer employed.

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 closed the Petitioner's HMP medical Assistance due to excess income.

DECISION AND ORDER

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

LF/jaf

Lynn M. Ferris

Administrative Law Judge for Nick Lyon, Director

M. Jenis)

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 **MDHHS**

Petitioner

