RICK SNYDER

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

SHELLY EDGERTON



Date Mailed: August 15, 2017 MAHS Docket No.: 17-007630

Agency No.:
Petitioner:

ADMINISTRATIVE LAW JUDGE: Carmen G. Fahie

## **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 July 20, 2017, from Lansing, Michigan. Petitioner was represented by herself and her mother, The Department of Health and Human Services (Department) was represented by Family Independence Manager, and Family Independence Specialist.

#### **ISSUE**

Did the Department properly determine that Petitioner had excess income for the Medicaid (MA) Healthy Michigan Program (HMP)?

#### 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 a recipient of MA HMP.
- 2. On April 25, 2017, the Department Caseworker sent Petitioner a Wage Match Client Notice, which was due on May 25, 2017, for Petitioner's employer at to provide written verification of her earned income. Department Exhibit 1, pgs. 11-12.
- 3. On May 11, 2017, the Department Caseworker received check stubs from Petitioner to verify her earned income. Department Exhibit 1, pgs. 13-18.

- On May 15, 2017, the Department Caseworker sent Petitioner a Health Care Coverage Determination Notice, DHS 1606, that Petitioner was not eligible for MA from June 1, 2017, ongoing due to excess income. Department Exhibit 1, pgs. 6-9.
- 5. On May 30, 2017, the Department received a hearing request from Petitioner, contesting the Department's negative action.

#### **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, Petitioner was a recipient of MA. On April 25, 2017, the Department Caseworker sent Petitioner a Wage Match Client Notice, which was due on May 25, 2017, for Petitioner's employer at to provide written verification of her earned income. Department Exhibit 1, pgs. 11-12. On May 11, 2017, the Department Caseworker received check stubs from Petitioner to verify her earned income. Department Exhibit 1, pgs. 13-18. On May 15, 2017, the Department Caseworker sent Petitioner a Health Care Coverage Determination Notice, DHS 1606, that Petitioner was not eligible for MA from June 1, 2017, ongoing due to excess income. Department Exhibit 1, pgs. 6-9. On May 30, 2017, the Department received a hearing request from Petitioner, contesting the Department's negative action. BAM 105, 130, 220, and 600. BEM 500, 501, 502, 503, and 505.

During the hearing, the Department Caseworker stated that Petitioner had excess income for HMP. The income limit for HMP was \$ but Petitioner's annual income was \$ as a result, Petitioner had excess income for HMP.

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 that Petitioner had excess in income for HMP.

## **DECISION AND ORDER**

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

CF/md

Carmen G. Fahie

Administrative Law Judge for Nick Lyon, Director Department of Health and Human Services

Carmon S. Salvie

**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

**Authorized Hearing Rep.** 

