

RICK SNYDER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

SHELLY EDGERTON DIRECTOR



Date Mailed: May 2, 2018 MAHS Docket No.: 18-003170 Agency No.: Petitioner:

ADMINISTRATIVE LAW JUDGE: Kevin Scully

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. After due notice, a telephone hearing was held on April 26, 2018, from Lansing, Michigan. Petitioner represented herself and her mother, testified on her behalf. The Department was represented by **Exercise 1**, Eligibility Specialist.

<u>ISSUE</u>

Did the Department of Health and Human Services (Department) properly determine Petitioner's eligibility 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:

- 1. On Medical Assistance (MA) effective . Exhibit A, pp 6-8.
- 2. On eligible for Medical Assistance (MA) effective eligible for Medica
- 3. On Medical Assistance (MA). Exhibit A, pp 16-23.

- 4. On example, the Department sent Petitioner a Verification Checklist (DHS-3503) requesting verification of a checking account by Exhibit A, pp 24-25.
- 5. On Medical Assistance (MA) effective . Exhibit A, pp 26-29.
- 6. On personal, the Department notified Petitioner the she was not eligible for Food Assistance Program (FAP) benefits effective for Exhibit A, pp 30-33.
- 7. On **Contract of** the Department received a copy of Petitioner's checking account statement. Exhibit A, p 35.
- 8. On percent of the Department notified Petitioner that she was approved for Food Assistance Program (FAP) benefits effective monthly allotment. Exhibit A, pp 36-39.
- 9. On **Medical Assistance** (MA) effective **Medical Assistance** (MA) effective **Medical Assistance** (MA) effective **Medical Assistance** (MSP) benefits effective February 1, 2018. Exhibit A, pp 47-50.
- 10. Petitioner receives monthly Retirement, Survivors, and Disability Insurance (RSDI) in the gross monthly amount of **Security** Exhibit A, pp 53-54.
- 11. The Department determined Petitioner's eligibility for the Medicare Savings Program (MSP) based on a gross monthly unearned income of **\$1000** and applied a **\$100** cost of living allowance deduction. Exhibit A, p 67.
- 12. The Department determined Petitioner's eligibility for Medical Assistance (MA) effective **sector**, based on a gross monthly unearned income of **\$** Exhibit A, p 68.
- 13. On **Exercise**, the Department received Petitioner's request for a hearing, protesting the amount of her monthly Medical Assistance (MA) deductible, and the amount of her monthly allotment of Food Assistance Program (FAP) benefits. Exhibit A, pp 2-3.

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.

Assets means cash, any other personal property and real property. Real property is land and objects affixed to the land such as buildings, trees and fences. Condominiums are real property. Personal property is any item subject to ownership that is not real property. Countable assets cannot exceed the applicable asset limit. An asset is countable if it meets the availability tests and is not excluded. Available means that someone in the asset group has the legal right to use or dispose of the asset. Department of Human Services Bridges Eligibility Manual (BEM) 400 (January 1, 2018), pp 1-7.

Clients must cooperate with the local office in determining initial and ongoing eligibility and this includes the completion of necessary forms. Department of Human Services Bridges Assistance Manual (BAM) 105 (January 1, 2018), p 8.

Verification means documentation or other evidence to establish the accuracy of the client's verbal or written statements. Verification is usually required at application/redetermination and for a reported change affecting eligibility or benefit level when it is required by policy, required as a local office option, or information regarding an eligibility factor is unclear, inconsistent, incomplete, or contradictory. The Department uses documents, collateral contacts, or home calls to verify information. A collateral contact is a direct contact with a person, organization, or agency to verify information from the client. When documentation is not available, or clarification is needed, collateral contact may be necessary. Department of Human Services Bridges Assistance Manual (BAM) 130 (April 1, 2017), pp 1-10.

On **example**, and **example**, the Department notified Petitioner that she was no longer eligible for MA benefits after she failed to verify the balance of a checking account, a countable cash asset.

A request for hearing must be in writing and signed by the claimant, petitioner, or authorized representative. Rule 400.904(1). Moreover, the Department of Human Services Bridges Administrative Manual (BAM) 600 (January 1, 2018), p. 6, provides in relevant part as follows:

The client or authorized hearing representative has 90 calendar days from the date of the written notice of case action to request a hearing. The request must be received anywhere in DHS within the 90 days. Petitioner's **protection**, hearing request is not a timely hearing request entitling her to a hearing to protest either the **protection**, or **protection**, closure of MA benefits because her hearing request was received more than 90 days after the Department mailed its notice.

On **Department**, the Department received Petitioner's application for MA benefits. Due to Department error, Petitioner was approved for MA benefits under the Healthy Michigan Plan (HMP). As a Medicare eligible individual, Petitioner is not eligible for MA benefits under the HMP program. Department of Health and Human Services Bridges Eligibility Manual (BEM) 137 (April 1, 2018), p 1.

The Department determined that Petitioner is eligible for MA benefits under the G2-S category, a SSI related category of Medicaid, based on a gross monthly unearned income of \$

A review of Petitioner's case reveals that the Department budgeted the correct amount of income received by Petitioner. Petitioner's "protected income level" is and this amount cannot be changed either by the Department or by this Administrative Law Judge. Department of Human Services Reference Table Manual (RFT) 240 (December 1, 2013), p 1. Department's determination that Petitioner has a side deductible per month she must meet in order to qualify for MA for any medical expenses above is therefore correct.

Petitioner is not eligible for MA under the HMP category, and she is not eligible for "full Medicaid" under the AD-CARE category because her gross monthly income exceeds the **Support** limit. Department of Health and Human Services Reference Table Manual (RFT) 242 (April 1, 2018), p 1.

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 eligibility for Medical Assistance (MA) benefits effective **Conclusion**, and placed her in the most beneficial category available based on her circumstances.

Petitioner's **protection**, request for a hearing indicated that she was protesting her eligibility for the Food Assistance Program (FAP), but she withdrew her request during the **protection**, hearing while on the record. Therefore, Respondent's hearing request is dismissed with respect to FAP benefits only.

DECISION AND ORDER

Accordingly, the Department's decision is **AFFIRMED** with respect to Medical Assistance (MA) benefits. Petitioner's hearing request is **DISMISSED** with respect to the Food Assistance Program (FAP).

KS/hb

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).

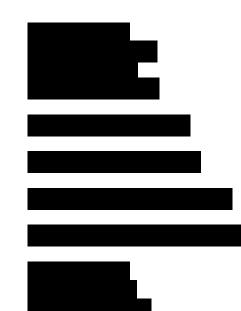
A party may request a rehearing or reconsideration of this Order if the request is received by MAHS within 30 days of the date the Order was issued. The party requesting a rehearing or reconsideration must provide the specific reasons for the request. MAHS will not review any response to a request for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





Petitioner