

RICK SNYDER GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

SHELLY EDGERTON DIRECTOR



Date Mailed: July 24, 2018 MAHS Docket No.: 18-004492

Agency No.: 114445160 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 5, 2018, from Lansing, Michigan. Petitioner was represented by himself. The Department of Health and Human Services (Department) was represented by Sheryl Dykstra, Family Independence Specialist and Tamara Nobris, Eligibility Specialist.

ISSUE

Did the Department properly determine Petitioner's eligibility for Medical Assistance (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:

- Petitioner was a recipient of MA with a redetermination due March of 2018.
- 2. On March 28, 2018, Petitioner submitted his redetermination application with the required verifications. Department Exhibit 1, pgs. 7-15.
- 3. On April 19, 2018, the Department Caseworker sent Petitioner a Health Care Coverage Determination Notice, DHS 1606, that his HMP case was closed effective May 1, 2018, because he had excess assets for HMP. Department Exhibit 1, pgs. 4-6.

4. On April 28, 2018, 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, the Department Caseworker found that Petitioner had excess assets for MA. The asset limit for MA was \$7,560.00. Petitioner had assets of from a savings account () and the value of a cars (). Department Exhibit 1, pgs. 16-37. During the hearing, Petitioner stated that his assets have decreased because he gave the motorcycle to his son and he also had medical expenses. Petitioner is entitled to reapply for MA benefits if his assets have decreased under the \$7,560.00 asset limit. BAM 210 and 220. BEM 400.

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 assets for MA.

DECISION AND ORDER

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

CF/dh

Carmen G. Fahie

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) 763-0155; 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	Alison Gordon 430 Barfield Drive Hastings, MI 49058
	Barry County, DHHS
	BSC3 via electronic mail
	D. Smith via electronic mail
	EQAD via electronic mail
Petitioner	
	MI