



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

SHELLY EDGERTON
DIRECTOR

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Date Mailed: August 28, 2018
MAHS Docket No.: 18-005573
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 31, 2018, from Lansing, Michigan. Petitioner was represented by himself. The Department of Health and Human Services (Department) was represented by Terri Stheiner, Eligibility 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 HMP.
2. On April 23, 2018, a Wage Match Client Notice, DHS 4638, was sent to Petitioner for ██████████ for the 4th quarter of 2017 that was due May 23, 2018. Department Exhibit 1, pgs. 6-7.
3. On May 22, 2018, the Department Caseworker received a completed DHS 4638 and supporting documentation. Department Exhibit 1, pgs. 6-33.

4. On May 24, 2018, the Department Caseworker sent Petitioner a Health Care Determination Notice, DHS 1606, that he had excess income and was not eligible for HMP effective July 1, 2018. Department Exhibit 1, pgs. 34-37.
5. On May 30, 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 determined that Petitioner had excess income for HMP. The burden is on the Department to prove that they followed the Department's policy and procedure. There was no budget submitted with the hearing package. A rough estimate at the hearing of ██████ annual income, with a monthly income of ██████, showed that Petitioner should be eligible for HMP. BAM 105, 130, 220, 600, and 802. BEM 137, 500, 501, and 502. MSA 13-35 and 14-11.

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 failed to satisfy its burden of showing that it acted in accordance with Department policy when it determined that Petitioner had excess income for HMP. The Department failed to submit a budget for HMP that showed that Petitioner had excess income for HMP based on household composition.

DECISION AND ORDER

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

The Department is ordered to begin doing the following, in accordance with department policy and consistent with this hearing decision, within 10 days of the date of mailing of this decision and order of initiating a redetermination of Petitioner's eligibility for HMP retroactive to July 1, 2018.

Based on policy, the Department should provide Petitioner with written notification of the Department's revised eligibility determination and issue Petitioner any retroactive benefits she/he may be eligible to receive, if any.

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

Lindsay Miller
125 E. Union St 7th Floor
Flint, MI 48502

Genesee County, DHHS

EQAD via electronic mail

D. Smith via electronic mail

Petitioner

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