



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
MICHIGAN OFFICE OF ADMINISTRATIVE HEARINGS AND RULES

ORLENE HAWKS
DIRECTOR

[REDACTED]
[REDACTED]
[REDACTED]

Date Mailed: May 14, 2020
MOAHR Docket No.: 20-001276
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Ellen McLemore

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 May 11, 2020, from Detroit, Michigan. Petitioner was present and was represented by his son/Authorized Hearing Representative, [REDACTED]. The Department of Health and Human Services (Department) was represented by Mohamad El Hajj, Assistance Payments Worker.

ISSUE

Did the Department properly determine Petitioner's Medical Assistance (MA) eligibility?

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 an ongoing MA recipient under the Group 2 SSI-related (G2S) program with a monthly deductible amount of \$1,026 (Exhibit A).
2. As of January 1, 2020, the Department has not processed any medical expenses submitted by Petitioner to satisfy his monthly deductible.
3. On January 6, 2020, Petitioner submitted medical expenses.
4. On [REDACTED], 2020, Petitioner submitted a request for hearing.

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 an ongoing MA recipient under the G2S program subject to a monthly deductible of \$1,026. Prior to January 2020, Petitioner was submitting medical expenses to satisfy his monthly deductible and received full coverage MA benefits after meeting his deductible. The Department testified that Petitioner has not met his deductible since December 2019.

Deductible is a process which allows a client with excess income to become eligible for Group 2 MA if sufficient allowable medical expenses are incurred. BEM 545 (October 2018), p. 10. Meeting a deductible means reporting and verifying allowable medical expenses that equal or exceed the deductible amount for the calendar month tested. BEM 545, p. 11. The Department will count allowable expenses incurred in the month in which eligibility is being determined, whether paid or unpaid. BEM 545, p. 16. Once the client's medical expenses exceed their excess income (their deductible), the client no longer has liability, meaning they have full-coverage MA benefits for the remainder of the month. BEM 545, pp. 5-6.

The Department testified that, upon further review, Petitioner did submit medical expenses in the amount of \$1,171 on January 6, 2020. The Department was unsure as to why Petitioner did not receive full coverage MA benefits in January 2020. The Department stated that Petitioner did not submit any medical expenses after January 6, 2020. Petitioner's AHR testified that Petitioner stopped submitting medical expenses due to COVID-19. Petitioner's AHR stated that Petitioner is only able to receive his medication through mail-order deliveries and has had difficulty obtaining verification of his prescription expenses. Petitioner is also remaining at home due to health concerns, further limiting his ability to obtain medical expense verifications.

Based on the evidence presented, the Department failed to establish that it properly processed Petitioner's medical expenses for January 2020. It is unclear as to whether the medical expenses submitted on January 6, 2020, were utilized to satisfy Petitioner's deductible in months previous to January 2020 or if the Department failed to properly

process the documents. Petitioner did not submit any medical expenses subsequent to January 6, 2020. Therefore, the Department correctly determined that Petitioner did not meet his deductible after January 2020. Thus, the Department acted in accordance with policy when it determined Petitioner's MA eligibility as of February 1, 2020, ongoing.

DECISION AND ORDER

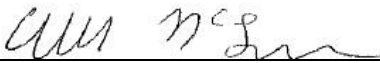
The Administrative Law Judge, based on the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, if any, finds that the Department did not act in accordance with Department policy when it determined Petitioner's MA eligibility for January 2020.

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:

1. Redetermine Petitioner's MA eligibility for January 2020;
2. Review the medical expenses submitted on January 6, 2020 and determine if Petitioner's medical expenses exceeded his deductible;
3. If Petitioner satisfied his deductible in January 2020, provide him with full-coverage MA benefits as of the date that his medical expenses exceeded his deductible in January 2020; and
4. Notify Petitioner of its decision in writing.

EM/cg



Ellen McLemore
Administrative Law Judge
for Robert Gordon, 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 Office of Administrative Hearings and Rules (MOAHR).

A party may request a rehearing or reconsideration of this Order if the request is received by MOAHR 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. MOAHR will not review any response to a request for rehearing/reconsideration.

A written request may be mailed or faxed to MOAHR. If submitted by fax, the written request must be faxed to (517) 763-0155; Attention: MOAHR Rehearing/Reconsideration Request.

If submitted by mail, the written request must be addressed as follows:

Michigan Office of Administrative Hearings and Rules
Reconsideration/Rehearing Request
P.O. Box 30639
Lansing, Michigan 48909-8139

Via Email:

MDHHS-Wayne-17-Hearings
D. Smith
EQAD
BSC4- Hearing Decisions
MOAHR

Petitioner – Via First-Class Mail:

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