RICK SNYDER GOVERNOR State of Michigan DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS MICHIGAN ADMINISTRATIVE HEARING SYSTEM

SHELLY EDGERTON DIRECTOR



Date Mailed: November 9, 2017 MAHS Docket No.: 17-011651 Agency No.: Petitioner:

ADMINISTRATIVE LAW JUDGE: Zainab A. Baydoun

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 October 10, 2017 from Detroit, Michigan. The Petitioner appeared for the hearing and represented himself. The Department of Health and Human Services (Department) was represented by Megan Sterk, Assistance Payments Supervisor.

ISSUE

Did the Department properly close Petitioner's Medical Assistance (MA) case under the Healthy Michigan Plan (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 an ongoing recipient of MA benefits under the HMP category.
- 2. On August 4, 2017 Petitioner submitted a New Hire Client Notice to the Department and reported that: he has been employed at which is a temp agency since December 2016; he is paid \$9.00 per hour and works possibly 40 hours per week; and that he is paid weekly. (Exhibit A, pp. 7-8)
- 3. On August 8, 2017 the Department sent Petitioner a Health Care Coverage Determination Notice advising him that effective September 1, 2017 his MA case

would be closed because his countable income exceeds the income limit for his group size. (Exhibit A, pp. 9-11)

- 4. Petitioner confirmed: that he is years old; that he is not disabled; that he is not enrolled in Medicare; that he is not the parent or caretaker of any minor children; that he files a tax return; that he does not claim any dependents on his tax return and that he is not claimed as a dependent on another individual's tax return. Petitioner's household size for MA purposes is one.
- 5. On August 24, 2017 Petitioner requested a hearing disputing the Department's actions with respect to the closure of his MA case effective September 1, 2017.

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.

MA is available (i) to individuals who are aged (65 or older), blind or disabled under SSIrelated categories, (ii) to individuals who are under age 19, parents or caretakers of children, or pregnant or recently pregnant women, and (iii) to individuals who meet the eligibility criteria for Healthy Michigan Plan (HMP) coverage, which provides health care coverage for a category of eligibility authorized under the Patient Protection and Affordable Care Act and Michigan Public Act 107 of 2013 effective April 1, 2014. BEM 105 (January 2016), p. 1; BEM 137 (January 2016), p. 1.

HMP is a Modified Adjusted Gross Income (MAGI)-related MA category that provides MA coverage to individuals who (i) are 19 to 64 years of age; (ii) have income at or below 133% of the federal poverty level (FPL) under the Modified Adjusted Gross Income (MAGI) methodology; (iii) do not qualify for or are not enrolled in Medicare; (iv) do not qualify for or are not enrolled in other MA programs; (v) are not pregnant at the time of application; and (vi) are residents of the State of Michigan. BEM 137, p. 1.

Petitioner, who is under age 64, not disabled, and not the caretaker of any minor children is potentially only eligible for MA under the HMP category. An individual is eligible for HMP if his household's income does not exceed 133% of the FPL applicable to the individual's

group size. A determination of group size under the MAGI methodology requires consideration of the client's tax status and dependents. The evidence showed that Petitioner's household size for MAGI purposes is one. 133% of the annual FPL in 2017 for a household with one member is \$16,039.80. https://aspe.hhs.gov/poverty-guidelines. Therefore, to be income eligible for HMP, Petitioner's annual MAGI cannot exceed \$16,039.80, as he is a current MA beneficiary.

At the hearing, the Department testified that after processing the completed New Hire Client Notice verifying Petitioner's income, it applied the updated pay information and determined that he had excess income for MA under the HMP category.

To determine financial eligibility under HMP, income must be calculated in accordance with MAGI under federal tax law. MAGI is based on Internal Revenue Service rules and relies on federal tax information. BEM 500 (January 2016), p. 3. Income is verified via electronic federal data sources in compliance with MAGI methodology. MREM, § 1. In determining an individual's eligibility for MAGI-related MA, 42 CFR 435.603(h)(2) provides that for current beneficiaries and "for individuals who have been determined financially-eligible for Medicaid using the MAGI-based methods . . . , a State may elect in its State plan to base financial eligibility either on current monthly household income . . . or income based on projected annual household income . . . for the remainder of the current calendar year."

Effective January 1, 2014, when determining financial eligibility of current beneficiaries for MAGI-related MA, the State of Michigan has elected to base eligibility on projected annual household income and family size for the remaining months of the current calendar year. The State has also elected to use reasonable methods to include a prorated portion of a reasonably predictable increase in future income and/or family size and to account for a reasonably predictable decrease in future income and/or family Medicaid Plan TΝ MI-13-0110-MM3 size. (See State Amendment No: https://www.michigan.gov/documents/mdch/SPA 13 0110 MM3 MAGI-Based_Income_Meth_446554_7.pdf and http://www.michigan.gov/mdhhs/0,5885,7-339-73970 5080-108153--.00.html).

The Department testified that in calculating Petitioner's annual income, it considered his earnings, as reported on the New Hire Client Notice, of \$9.00 per hour at 40 hours per week to conclude that he had monthly income of \$1,440. The Department stated that when projected annually, Petitioner's earnings are in excess of the \$16,039.80 income limit for his HMP group size of one. Although the Department did not project Petitioner's annual income based on the months remaining in the current calendar year, Petitioner testified that he has been employed with this same employer for one year and that his employment is expected to continue. Thus, based on the information presented, the Department properly concluded that Petitioner's projected annual income is in excess of the income limit for his HMP group size of one.

The evidence established that after the hearing was requested, Petitioner submitted updated paystubs to the Department on September 1, 2017 verifying his actual earnings

(Exhibit A, pp. 12-16). The Department stated that it reviewed Petitioner's MA eligibility for October 2017 ongoing, using the updated paystubs and determined that he remained ineligible for HMP based on his excess income. The Department notified Petitioner of the subsequent denial of his MA eligibility with a Health Care Coverage Determination Notice dated September 5, 2017 (Exhibit A, pp. 17-18). Petitioner was informed that should he dispute the information contained in the September 5, 2017 Health Care Coverage Determination Notice, he was required to submit a new hearing request to have the matter addressed, as this is considered to be a subsequent negative action taken by the Department after the current August 24, 2017 hearing request was submitted. (See BAM 600 (April 2017).

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 closed Petitioner's MA case effective September 1, 2017.

DECISION AND ORDER

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

ZB/tlf

Lamab Raydown

Zainab A. Baydoun 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

Via Email:

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Petitioner – Via First-Class Mail: