



GRETCHEN WHITMER
GOVERNOR

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

ORLENE HAWKS
DIRECTOR

[REDACTED], MI [REDACTED]

Date Mailed: January 6, 2020
MOAHR Docket No.: 19-011852
Agency No.: [REDACTED]
Petitioner: [REDACTED]

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 December 12, 2019, from Lansing, Michigan. Petitioner represented herself and her husband [REDACTED] testified on her behalf. The Department of Health and Human Services was represented by Katie Howk and Susie Perez.

ISSUE

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 March 20, 2019, the Department notified Petitioner that she was no longer eligible for Medical Assistance (MA) because household income was not verified in a timely manner. Exhibit A, pp 14-16.
2. On April 1, 2019, the Department received Petitioner's application for Medical Assistance (MA). Exhibit A, pp 17-43.
3. On April 1, 2019, the Department notified Petitioner that she was eligible for Medical Assistance (MA). Exhibit A, pp 44-47.
4. On April 11, 2019, the Department sent Petitioner a Verification Checklist (DHS-3503) requesting verification of income by April 22, 2019. Exhibit A, pp 48-49.

5. On May 8, 2019, the Department sent Petitioner a Verification Checklist (DHS-3503) requesting verification of income by May 20, 2019. Exhibit A, pp 50-51.
6. On June 18, 2019, the Department notified Petitioner that she was not eligible for Medical Assistance (MA) as of August 1, 2019. Exhibit A, pp 57-59.
7. On July 17, 2019, the Department notified Petitioner that she was eligible for Medical Assistance (MA) as of August 1, 2019. Exhibit A, pp 62-65.
8. On October 1, 2019, the Department notified Petitioner that she was eligible for Medical Assistance (MA) as of November 1, 2019 with a \$77 monthly deductible. Exhibit A, p 76.
9. On October 10, 2019, the Department notified Petitioner that she was eligible for Medical Assistance (MA) with a \$77 monthly deductible. Exhibit A, pp 78-83.
10. Petitioner receives monthly earned income from employment in the gross monthly amount of \$ [REDACTED]. Exhibit A, p 70.
11. Petitioner's daughter receives monthly earned income from employment in the gross monthly amount of \$ [REDACTED]. Exhibit A, p 69.
12. Petitioner's husband receives monthly Supplemental Security Income (SSI) in the gross monthly amount of \$ [REDACTED].
13. On October 22, 2019, the Department received Petitioner's request for a hearing protesting the level of Medical Assistance (MA) benefits she is eligible for. Exhibit A, pp 1-3.

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.

All earned and unearned income available is countable unless excluded by policy. Earned income means income received from another person or organization or from self-employment for duties that were performed for compensation or profit. Unearned income means all income that is not earned, including but not limited to funds received from the Family Independence Program (FIP), State Disability Assistance (SDA), Child Development and Care (CDC), Medicaid (MA), Social Security Benefits (RSDI/SSI), Veterans Administration (VA), Unemployment Compensation Benefits (UCB), Adult Medical Program (AMA), alimony, and child support payments. The amount counted may be more than the client actually receives because the gross amount is used prior to any deductions. Department of Human Services Bridges Eligibility Manual (BEM) 500 (July 1, 2017).

The size of the household will be determined by the principles of tax dependency in the majority of cases. Parents, children and siblings are included in the same household. The household for a tax filer, who is not claimed as a tax dependent, consists of the individual, the individual's spouse, and any tax dependents. The household for an individual who is a tax dependent of someone else, consists of the household of the tax filer claiming the individual as a tax dependent.¹

The income limit to participate in the Healthy Michigan Plan (HMP) is 133% of the federal poverty level. Department of Health and Human Services Reference Table Manual (RFT) 246 (April 1, 2014), p 1.

Petitioner is an ongoing MA recipient as a household of four. As a household of four, the household receives a combined gross monthly income of \$██████████, which is 176% of the federal poverty level for a household of four. Therefore, Petitioner is not eligible for full MA benefits under the HMP category.

Persons may qualify under more than one MA category. Federal law gives them the right to the most beneficial category. The most beneficial category is the one that results in eligibility or the least amount of excess income. Department of Health and Human Services Bridges Eligibility Manual (BEM) 105 (April 1, 2017), p 2.

Petitioner remains eligible for MA benefits as a parent caretaker. A review of Petitioner's case reveals that the Department budgeted the correct amount of income received by Petitioner. The Department's determination that Petitioner has a \$77 deductible per month she must meet in order to qualify for MA for any medical expenses above is therefore correct.

Petitioner disputed the determination of the earned income received by herself and her daughter. No evidence was presented on the record to establish that Petitioner does not receive the income level applied towards her eligibility for MA benefits.

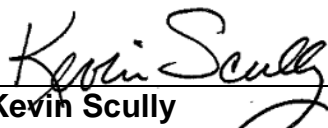
¹ Department of Health and Human Services Modified Adjusted Gross Income (MAGI) Related Eligibility Manual, pp 12-13. This manual is available on the internet at http://www.michigan.gov/documents/mdch/MAGI_Manual_457706_7.pdf

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 the level of Medical Assistance (MA) benefits that Petitioner is eligible for.

DECISION AND ORDER

Accordingly, the Department's decision is AFFIRMED.

KS/hb



Kevin Scully
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

DHHS

Jennifer Dunfee
692 E. Main
Centreville, MI 49032

St. Joseph County, DHHS

BSC3 via electronic mail

D. Smith via electronic mail

EQADHS via electronic mail

Petitioner

[REDACTED]
[REDACTED]
[REDACTED], MI [REDACTED]