



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: July 29, 2020  
MOAHR Docket No.: 20-002041  
Agency No.: [REDACTED]  
Petitioner: [REDACTED]

**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 June 30, 2020, from Lansing, Michigan. The Petitioner was represented by herself. The Department of Health and Human Services (Department) was represented by Cishawn Dunham, Eligibility Specialist.

### **ISSUE**

Did the 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. Petitioner was recipient of MA where the State of Michigan was paying her MA Part B premium benefits.
2. On October 1, 2019, Petitioner's MA Part B premium discontinued so the Department Caseworker removed the medical expense from her budget with an end date of October 1, 2019. Department Exhibit A.
3. On November 26, 2019, Petitioner applied for MA.
4. On November 30, 2019, Department Caseworker sent Petitioner an MA Cost Share Redetermination application. Department Exhibit B.

5. On December 3, 2019, Department Caseworker determined the Petitioner's eligibility for MA and sent her a Healthcare Coverage Determination Notice, DHS 1606, that she was eligible for the Freedom to Work (FTW) effective January 1, 2020 with a premium of \$41.05. Department Exhibit C.
6. On December 30, 2019, Department Caseworker determined Petitioner's eligibility for MA and sent her a Healthcare Coverage Determination Notice, DHS-1606, that she was not eligible from February 1, 2020, because she did not return the redetermination application to determine MA eligibility. Department Exhibit D.
7. On January 8, 2020, Department Caseworker determined Petitioner's eligibility for MA and sent her a Healthcare Coverage Determination Notice, DHS-1606, that she qualified for the Medicare Savings Program with full benefits effective February 1, 2020. Department Exhibit E.
8. On January 31, 2020, Department Caseworker determined Petitioner's eligibility for MA and sent her a Healthcare Coverage Determination Notice, DHS-1606, that she qualified for the Medicare Savings Program with full benefits effective March 1, 2020. Department Exhibit F.
9. On February 28, 2020, Department Caseworker determined Petitioner's eligibility for MA and sent her a Healthcare Coverage Determination Notice, DHS-1606, that she was not eligible for the Medicare Savings Program effective April 1, 2020, due to excess assets, which was in error because lottery winnings did not end. Department Exhibit G.
10. On March 5, 2020, the Department received a hearing request from Petitioner, contesting the Department's negative action.
11. On March 6, 2020, Petitioner confirmed to the Department Caseworker that her job ended on February 3, 2020. As a result, her MA FTW will close on March 31, 2020. She was approved for MA with a spend down and MSP for April 2020. Her lottery winnings were end dated for 2018 and 2019.

### **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 recipient of MA where the State of Michigan was paying her MA Part B premium benefits. On October 1, 2019, Petitioner's MA Part B premium discontinued so the Department Caseworker removed the medical expense from her budget with an end date of October 1, 2019. Department Exhibit A.

On November 26, 2019, Petitioner applied for MA. On November 30, 2019, Department Caseworker sent Petitioner a MA Cost Share Redetermination application. Department Exhibit B. On December 3, 2019, Department Caseworker determined Petitioner's eligibility for MA and sent her a Healthcare Coverage Determination Notice, DHS-1606, that she was eligible for the Freedom to Work (FTW) effective January 1, 2020, with a premium of \$41.05. Department Exhibit C. On December 30, 2019, Department Caseworker determined Petitioner's eligibility for MA and sent her a Healthcare Coverage Determination Notice, DHS-1606, that she was not eligible from February 1, 2020, because she did not return redetermination application to determine MA eligibility. Department Exhibit D.

On January 8, 2020, Department Caseworker determined Petitioner's eligibility for MA and sent her a Healthcare Coverage Determination Notice, DHS-1606, that she qualified for the Medicare Savings Program with full benefits effective February 1, 2020. Department Exhibit E. On January 31, 2020, Department Caseworker determined Petitioner's eligibility for MA and sent her a Healthcare Coverage Determination Notice, DHS-1606, that she qualified for the Medicare Savings Program with full benefits effective March 1, 2020. Department Exhibit F. On February 28, 2020, Department Caseworker determined Petitioner's eligibility for MA and sent her a Healthcare Coverage Determination Notice, DHS-1606, that she was not eligible for the Medicare Savings Program effective April 1, 2020, due to excess assets, which was in error because lottery winnings did not end. Department Exhibit G.

On March 5, 2020, the Department received a hearing request from Petitioner, contesting the Department's negative action. On March 6, 2020, Petitioner confirmed to the Department Caseworker that her job ended on February 3, 2020. As a result, her MA FTW will close on March 31, 2020. She was approved for MA with a spend down and Medicare Savings Program for April 2020. Her lottery winnings were end dated for 2018 and 2019. BEM 400 and ERM 205.

### **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 acted in accordance with Department policy when it determined the Petitioner's eligibility for MA, MA FTW, and the Medicare Savings Program based on her income, employment, and lottery winnings.

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

CF/hb



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**Carmen G. Fahie**  
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**

Macomb County (District 20) via electronic mail

BSC4 via electronic mail

D. Smith via electronic mail

EQADHShearing via electronic mail

**Petitioner**

[REDACTED], MI