



GRETCHEN WHITMER
GOVERNOR

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

ORLENE HAWKS
DIRECTOR

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██████████, MI ██████████

Date Mailed: April 28, 2021
MOAHR Docket No.: 21-001088
Agency No.: ██████████
Petitioner: ██████████

ADMINISTRATIVE LAW JUDGE: Aaron McClintic

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 March 31, 2021, from Lansing, Michigan. The Petitioner was represented by herself. The Department of Health and Human Services (Department) was represented by Brad Reno Hearing Facilitator. Department Exhibit 1, pp. 1-45 was received and admitted.

ISSUE

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

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 ██████████ 2021, Petitioner applied for Medical Assistance.
2. On February 22, 2021, a Health Care Coverage Determination Notice was sent to Petitioner informing her she was not eligible for MA and that household member Andy Williams was eligible for MA with a \$1,851 deductible for January 2021 and a \$1,680 deductible from February 2021 through ongoing.
3. On February 25, 2021, Petitioner requested hearing disputing the determination of MA benefits and deductible amount.
4. In January 2020, Petitioner's household had \$██████████ in unearned income.
5. In January 2020, Petitioner's household had \$██████████ in earned income.

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.

FEBRUARY 3, 2021 HEALTH CARE COVERAGE DETERMINATION NOTICE

On February 3, 2021, the Department issued to Petitioner a Health Care Coverage Determination Notice informing Petitioner that she was not eligible for MA benefits and household member was eligible for MA subject to a \$1,851 monthly deductible under the G2S program, effective January 1, 2021.

Petitioner verified at the hearing that her household income consisted of her monthly unearned income of \$██████ in the form of RSDI household member ██████████ receives from the Social Security Administration. Accordingly, the Department properly determined that Petitioner was not eligible for either AD-Care or LIF MA as her income exceeded the limit for eligibility based on the rules applicable to those programs. BEM 163 (July 2020), p. 1; BEM 110 (April 2020), p. 1.

Petitioner may still be eligible for MA benefits subject to a monthly deductible through the G2S or G2C program, which are both SSI-related MA categories. BEM 135 (October 2015), p. 1; BEM 166 (April 2020), p. 1. Petitioner's fiscal group size for SSI-related MA benefits is two. BEM 211 (July 2020), pp. 7-8. Petitioner's monthly income of \$██████ and \$██████ is reduced by the earned income disregard and a \$65 disregard to arrive at a figure of \$██████████ BEM 541 (July 2020), p. 3.

The deductible is the amount that the client's net income (less any allowable needs deductions) exceeds the applicable G2S protected income levels (PIL); the PIL is based on the client's MA fiscal group size and the county in which she resides. BEM 105 (April 2020), p. 1; BEM 166, pp. 1-2; BEM 544 (July 2020), p. 1; RFT 240 (December 2019), p. 1; RFT 200 (April 2017), p. 3. The monthly PIL for a client in Petitioner's position, with an MA fiscal group size of two living in Genesee County, is \$541 per month. RFT 200, p. 3; RFT 240, p. 1. Thus, if Petitioner's monthly net income (less allowable needs deductions) is in excess of \$541, ██████████ is eligible for MA assistance under the deductible program, with the deductible equal to the amount that

her monthly net income, less allowable deductions, exceeds \$541. BEM 545 (July 2020), pp. 2-3.

In determining the monthly deductible, net income is reduced by health insurance premiums paid by the MA group and remedial service allowances for individuals in adult foster care or homes for the aged. BEM 544, pp. 1-3. Petitioner has countable income of \$ [REDACTED]. That figure is further reduced by the \$541 PIL, which results in a deductible of \$1,851. As Petitioner is not eligible for more favorable MA coverage than the MA coverage the Department determined, the Department's decision with respect to [REDACTED] [REDACTED] MA benefits, effective January 1, 2020, is affirmed.

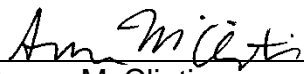
The Administrative Law Judge, based on the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, if any, finds that the Department acted in accordance with Department policy when it issued the February 24, 2021, Health Care Coverage Determination Notice finding [REDACTED] [REDACTED] eligible for MA benefits subject to a \$1,851 monthly deductible, effective January 1, 2020.

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 Petitioner's MA eligibility and deductible amount.

DECISION AND ORDER

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

AM/nr



Aaron McClintic
Administrative Law Judge
for Elizabeth Hertel, 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

Tamara Morris
125 E. Union St 7th Floor
Flint, MI
48502

Genesee Union St. County DHHS- via
electronic mail

BSC2- via electronic mail

C. George- via electronic mail

EQAD- via electronic mail

Petitioner

██████████ - via first class mail
██████████
██████████, MI
██████████