

ISSUE

Did the Department properly deny Petitioner's request for payment to be made towards a \$734.00 medical bill from Pine Ridge Rehab?

FINDINGS OF FACT

The Administrative Law Judge, based upon the competent, material, and substantial evidence on the whole record, finds as material fact:

1. As of August 1, 2020 and continuing, Petitioner was approved for Medicaid with a \$734.00 patient pay amount (spenddown). (Exhibit A, p 8; Testimony.)
2. In REDACTED and continuing into REDACTED 2020, following a foot operation, Petitioner was admitted at Pine Ridge Rehab and Nursing Center. (Exhibit A, p 5; Testimony.)

3. Petitioner's stay at Pine Ridge Rehab and Nursing Center resulted in medical bills. Medicaid covered all the medical bills from the stay except for the spenddown amount of \$734.00. (Exhibit A, pp 5, 7-8, 12; Testimony.)
4. Petitioner did not pay the outstanding medical bill from Pine Ridge Rehab and Nursing Center and the \$734.00 was turned over to collections. (Exhibit A, pp 10-12; Testimony.)
5. On April 15, 2021, the Michigan Office of Administrative Hearings and Rules, received from Petitioner, a request for hearing. (Exhibit A, p 10.)

CONCLUSIONS OF LAW

The Medical Assistance Program is established pursuant to Title XIX of the Social Security Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). It is administered in accordance with state statute, the Social Welfare Act, the Administrative Code, and the State Plan under Title XIX of the Social Security Act Medical Assistance Program.

All claims must be submitted in accordance with the policies, rules, and procedures as stated in the Medicaid Provider Manual (MPM), which provides, in pertinent parts:

12.1 PATIENT PAY AMOUNT

12.1.A. NURSING FACILITY DETERMINATIONS

After the Medicaid application has been submitted, the local MDHHS office determines eligibility for medical assistance. All allowable expenses and income are calculated, and any remaining income is then considered in determining the amount the beneficiary must pay toward his medical expenses each month. This monthly contribution by the beneficiary toward his care is called the Patient Pay Amount (PPA).¹

Here, the Department witness testified that Petitioner requested to have a \$734.00 medical bill paid. The bill was from an August 2020 service period. During this service period, Petitioner had a PPA of \$734.00. Because of the PPA, Petitioner was responsible for the first \$734.00 of all medical bills incurred in the month of August 2020.

The Petitioner argued she was not aware of the requirement to pay the PPA and was told she had Medicaid during August of 2020. Petitioner went on to indicate that a social worker indicated she should request a hearing.

¹ MPM, Beneficiary Eligibility, July 1, 2020, p 51.

Based on the evidence presented, it is clear the Petitioner had Medicaid but with a PPA. As a result, the Petitioner would be responsible for the first \$734.00 of all medical billings prior to Medicaid payments being issued. As a result, I have no choice but to affirm the Department's decision to not pay the \$734.00 medical billing from Pine Ridge Rehab and Nursing Center.

DECISION AND ORDER

The Administrative Law Judge, based on the above findings of fact and conclusions of law, finds that, the Department properly denied the Petitioner's request to have the Pine Ridge Rehab and Nursing Center bill be paid with Medicaid funds.

IT IS THEREFORE ORDERED THAT:

The Department's decision is **AFFIRMED**.