



STATE OF MICHIGAN

GRETCHEN WHITMER
GOVERNOR

DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
MICHIGAN OFFICE OF ADMINISTRATIVE HEARINGS AND RULES
SUZANNE SONNEBORN
EXECUTIVE DIRECTOR

MARLON I. BROWN, DPA
ACTING DIRECTOR

[REDACTED]
MI [REDACTED]

Date Mailed: December 20, 2023
MOAHR Docket No.: 23-008039
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Jeffrey Kemm

HEARING DECISION

On October 31, 2023, Petitioner, [REDACTED] requested a hearing to dispute her Medical Assistance (MA) eligibility and her Food Assistance Program (FAP) benefit amount. As a result, a hearing was scheduled to be held on December 14, 2023, pursuant to MCL 400.9; 42 CFR 431.200 to 431.250; 7 CFR 273.15; and Mich Admin Code, R 792.11002. Petitioner appeared and represented herself. Respondent, Department of Health and Human Services (Department) had Amber Gibson, Hearing Facilitator, appear as its representative. Neither party had any additional witnesses.

One exhibit was admitted into evidence during the hearing. A 17-page packet of documents provided by the Department was admitted collectively as the Department's Exhibit A.

ISSUES

Did the Department properly determine Petitioner's MA eligibility?

Did the Department properly determine Petitioner's FAP benefit 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. Petitioner is aged or disabled.
2. Petitioner has a household size of one. Petitioner lives with her parents, but Petitioner purchases and prepares food separately. Petitioner does not pay any housing expenses.

3. Petitioner receives gross pay of [REDACTED] per month from social security RSDI.
4. On October 16, 2023, Petitioner was approved for social security SSI, and Petitioner received full coverage SSI-MA automatically upon her approval. Petitioner has had full coverage SSI-MA since then.
5. On October 21, 2023, the Department mailed a health care coverage determination notice to Petitioner to notify Petitioner that she was not eligible for MA through the Healthy Michigan Plan effective November 1, 2023.
6. On November 15, 2023, the Department mailed a notice of case action to Petitioner to notify her that she was approved for a FAP benefit amount of \$33.00 per month effective December 1, 2023.
7. On December 1, 2023, Petitioner's SSI closed.
8. The Department began the process to determine Petitioner's MA eligibility following her SSI closure. Petitioner has full coverage SSI-MA through December 31, 2023. The Department is currently in the process of determining Petitioner's MA eligibility through other programs. The Department has not taken any negative action on Petitioner's MA.
9. Petitioner is disputing her MA because she is afraid of losing full coverage MA, and Petitioner is disputing her FAP benefit amount.

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).

MEDICAL ASSISTANCE

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 administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.105-.112k.

On October 21, 2023, the Department mailed a health care coverage determination notice to Petitioner to notify Petitioner that she was no longer eligible for MA through the Healthy Michigan Plan. It is unclear why the Department's notice did not also notify Petitioner that she was eligible for full-coverage SSI-MA. An individual is only eligible for MA through the Healthy Michigan Plan if she does not qualify for any other MA

programs. BEM 137 (June 1, 2020), p. 1. An individual who becomes an SSI recipient is automatically eligible for SSI-MA beginning the first month of entitlement to SSI. BEM 150 (July 1, 2021), p. 1. Thus, Petitioner's MA had to switch to SSI-MA when Petitioner was approved for SSI because MA through the Healthy Michigan Plan is only available when a client is not eligible for MA through any other MA program, and Petitioner was eligible for MA through another program once she was approved for SSI. Therefore, the Department properly found Petitioner ineligible for MA through the Healthy Michigan Plan once Petitioner was approved for SSI.

Petitioner requested a hearing to dispute her MA because she is afraid of losing full coverage MA. Petitioner currently has full coverage MA through the SSI-MA program through December 31, 2023. The Department must determine Petitioner's eligibility for MA through other programs before Petitioner's SSI-MA closes. BEM 150 at p. 7. The Department has not taken any negative action on Petitioner's MA yet, so Petitioner's hearing request is premature. If the Department decides to take negative action on Petitioner's MA, then the Department will send Petitioner another health care coverage determination notice to notify Petitioner of the action that the Department is taking and the effective date. If Petitioner receives a health care coverage determination notice that she disagrees with, Petitioner can then request another hearing.

FOOD ASSISTANCE

The Food Assistance Program (FAP) is established by the Food and Nutrition Act of 2008, as amended, 7 USC 2011 to 2036a and is implemented by the federal regulations contained in 7 CFR 273. The Department administers FAP pursuant to MCL 400.10, the Social Welfare Act, MCL 400.1-.119b, and Mich Admin Code, R 400.3001-.3011.

Petitioner requested a hearing to dispute her FAP benefit amount after the Department determined that Petitioner is eligible for a FAP benefit amount of \$33.00 per month effective December 1, 2023.

The Department determines a client's monthly FAP benefit amount by determining the client's group size and net household income, and then looking that information up in its applicable Food Issuance Table. BEM 212 (January 1, 2022), BEM 213 (January 1, 2023), BEM 550 (April 1, 2023), BEM 554 (April 1, 2023), BEM 556 (January 1, 2023), RFT 255 (October 1, 2023), and RFT 260 (October 1, 2023). Here, there is no evidence that the Department did not properly determine Petitioner's FAP benefit amount.

Based on Petitioner's household size of one and Petitioner's monthly gross income of [REDACTED], Petitioner's net income is [REDACTED] per month. Based on Petitioner's net income of [REDACTED] per month and Petitioner's group size of one, the maximum FAP benefit amount that Petitioner is eligible for is \$33.00 per month. Thus, the Department properly determined Petitioner's FAP benefit amount.

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 did act in accordance with its policies and the applicable law when it determined Petitioner's Medical Assistance eligibility, and the Department did act in accordance with its policies and the applicable law when it determined Food Assistance Program benefit amount.

IT IS ORDERED, the Department's decision is **AFFIRMED**.

JK/ml



Jeffrey Kemm
Administrative Law Judge

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

Via Electronic Mail:

DHHS

Amber Gibson
Ingham County DHHS
5303 South Cedar
Lansing, MI 48911

MDHHS-Ingham-Hearings@michigan.gov

Interested Parties

BSC2
M Schaefer
EQAD
M Holden
B Cabanaw
N Denson-Sogbaka
MOAHR

Via First Class Mail:

Petitioner

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