

GRETCHEN WHITMER GOVERNOR

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

MARLON I. BROWN, DPA DIRECTOR



Date Mailed: March 15, 2024 MOAHR Docket No.: 23-009533

Agency No.: Petitioner:

ADMINISTRATIVE LAW JUDGE: Colleen Lack

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 February 14, 2023, from Lansing, Michigan. The Petitioner, appeared on her own behalf. The Department of Health and Human Services (Department) was represented by Melissa Stanley, Hearing Facilitator (HF).

During the hearing proceeding, the Department's Hearing Summary packet was admitted as Exhibit A, pp. 1-34.

ISSUE

Did the Department properly determine eligibility for Medical Assistance (MA) for Petitioner's daughter?

FINDINGS OF FACT

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

- 1. The Department was notified that Petitioner's daughter's Social Security Administration (SSA) issued Supplemental Security Income (SSI) benefits were ending, therefore, she would no longer be eligible for MA as an SSI recipient. (Exhibit A, pp. 1 and 9; HF Testimony)
- 2. On October 9, 2023, an SSI Terminated MA Coverage letter was sent to Petitioner's daughter with an application for MA and a Supplemental Questionnaire with due date of November 13, 2023. (Exhibit A, pp. 1 and 9)

- 3. On or about 2023, Petitioner completed and submitted pages 2-4 of 4 for Petitioner's daughter's Supplemental Questionnaire and pages 2-7 of 16 an application for MA. (Exhibit A, pp. 10-18).
- 4. On November 15, 2023, a Health Care Coverage Supplemental questionnaire was issued to Petitioner with a due date of November 27, 2023, (Exhibit A, p, 26)
- 5. On December 1, 2023, Petitioner submitted pages 1-2 of 4 from her Supplemental Questionnaire. (Exhibit A, pp. 26-27)
- 6. On December 6, 2023, a Health Care Coverage Determination Notice was issued to Petitioner stating MA was denied for her daughter effective November 1, 2023 because the Supplemental Questionnaire was not returned. (Exhibit A, pp. 4-6 and 29-31)
- 7. On or about December 13, 2023, Petitioner filed a hearing request contesting a denial of MA for her daughter. (Exhibit A, pp. 3-6)
- 8. The Department determined that Petitioner's daughter's MA coverage would end based on not returning the recertification packet and no eligible members. (Exhibit A, p. 22)
- On December 15, 2023, a Health Care Coverage Determination Notice was issued to Petitioner's daughter stating her MA coverage would end effective January 1, 2024 based on a failure to return the redetermination form sent to her and/or required proofs and because she did not meet program requirements. (Exhibit A, pp. 19-21)
- 10. On December 28, 2023, Petitioner filed a hearing request contesting a denial of MA for her daughter. (Exhibit A, p. 7)
- 11. The Department verified Petitioner's income. (Exhibit A, p. 28)
- 12. The Department determined Petitioner's daughter was not eligible for SSI-related MA categories due to assets in excess of program limits. (Exhibit A, p. 32; HF Testimony)
- 13. The Department determined that Petitioner's daughter exceeded the income limits to qualify under the Modified Adjusted Gross Income (MAGI) related MA categories she was potentially eligible for. (Exhibit A, p. 24)
- 14. On January 2, 2024 a Health Care Coverage Determination Notice was issued to Petitioner stating MA was denied for Petitioner's daughter based on income and assets in excess of program limits and failing to return all of the Supplemental Questionnaire. (Exhibit A, pp. 32-34)

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.

The Department must periodically redetermine or renew an individual's eligibility for active programs. The redetermination/renewal process includes thorough review of all eligibility factors. BAM 210, October 1, 2023, p. 1. MA Benefits stop at the end of the benefit period unless a renewal is completed, and a new benefit period is certified. BAM 210, p. 4.

The Department administers MA for SSI recipients, including a continued MA eligibility determination when SSI benefits end. BEM 150, July 1, 2021, p. 1. A redetermination/ex-parte review packet is sent to the client to complete so that eligibility can be considered for all MA categories. BEM 150, July 1, 2021, p. 6.

The Medicaid program comprise several sub-programs or categories. To receive MA under an SSI-related category, the person must be aged (65 or older), blind, disabled, entitled to Medicare or formerly blind or disabled. Medicaid eligibility for children under 19, parents or caretakers of children, pregnant or recently pregnant women, former foster children, MOMS, MIChild, Flint Water Group and Healthy Michigan Plan is based on Modified Adjusted Gross Income (MAGI) methodology. In general, the terms Group 1 and Group 2 relate to financial eligibility factors. For Group 1, net income (countable income minus allowable income deductions) must be at or below a certain income limit for eligibility to exist. The income limit, which varies by category, is for nonmedical needs such as food and shelter. Medical expenses are not used when determining eligibility for MAGI-related and SSI-related Group 1 categories. For Group 2, eligibility is possible even when net income exceeds the income limit. This is because incurred medical expenses are used when determining eligibility for Group 2 categories. Group 2 categories are considered a limited benefit as a deductible is possible. BEM 105, October 1, 2023, p. 1.

Aged or Disabled (MA-AD) is an SSI-related Group 1 MA category. MA-AD is available to persons who are aged or disabled. Net income cannot exceed 100% of the poverty level.

Additionally, asset eligibility is required for SSI-related MA categories as well as Group 2 Persons Under Age 21 (G2U) MA. Countable assets cannot exceed the asset limit in BEM 400. Countable assets are determined based on MA policies in BEM 400, 401 and 402 BEM 163, July 1, 2017, pp. 1-2. For SSI-related MA categories, for a group size of two, the asset limit is \$3,000.00. For G2U MA the asset limit is \$3,000.00. BEM 400, January 1, 2024, pp. 6-8.

In this case, ongoing MA was denied, or Petitioner's daughter based on the failure to return complete forms needed to redetermine her eligibility, as well as income and assets in excess of program limits.

The Department properly sent Petitioner's daughter the October 9, 2023 SSI Terminated MA Coverage letter with an application for MA and a Supplemental Questionnaire with due date of November 13, 2023. (Exhibit A, pp. 1 and 9). On or about 2023, Petitioner completed and submitted pages 2-4 of 4 for Petitioner's daughter's Supplemental Questionnaire and pages 2-7 of 16 an application for MA. (Exhibit A, pp. 10-18). On November 15, 2023, a Health Care Coverage Supplemental questionnaire was issued to Petitioner with a due date of November 27, 2023, (Exhibit A, p, 26). On December 1, 2023, Petitioner submitted pages 1-2 of 4 from her Supplemental Questionnaire. (Exhibit A, pp. 26-27). Accordingly, on December 6, 2023, the Health Care Coverage Determination Notice was stating MA was denied for Petitioner's daughter effective November 1, 2023 because no complete Supplemental Questionnaire was returned. (Exhibit A, pp. 4-6 and 29-31).

After Petitioner's December 13, 2023, hearing request was filed the Department determined that Petitioner's daughter's MA coverage would end based on not returning the recertification packet and no eligible members. (Exhibit A, pp. 3-6 and 22). As Petitioner's daughter's SSI ended, she was no longer eligible for MA as an SSI recipient. Further, no complete Supplemental Questionnaire was returned. Accordingly, on December 15, 2023, the Health Care Coverage Determination Notice was issued to Petitioner's daughter stating her MA coverage would end effective January 1, 2024 based on a failure to return the redetermination form sent to her and/or required proofs and because she did not meet program requirements. (Exhibit A, pp. 19-21).

It appears that after Petitioner's December 28, 2023, hearing request was filed the Department determined Petitioner's daughter was not eligible for SSI-related MA categories due to assets in excess of program limits. (Exhibit A, p. 32; HF Testimony) The Department also verified Petitioner's income. (Exhibit A, p. 28). The Department determined that Petitioner's daughter exceeded the income limits to qualify under the MAGI related MA categories she was potentially eligible for. (Exhibit A, p. 24). Accordingly, on January 2, 2024 the Health Care Coverage Determination Notice was issued stating MA was denied for Petitioner's daughter based on income and assets in excess of program limits and failing to return all of the Supplemental Questionnaire. (Exhibit A, pp. 32-34).

As discussed above, the documentary evidence shows that when forms were submitted, not all pages were received. Further, Petitioner's testimony did not indicate she disagreed with the determinations that they exceeded the income and asset limits. Rather, Petitioner stated she just wants her daughter to have coverage and asked about any other programs that may provide coverage for her daughter. (Petitioner Testimony).

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 acted in accordance with Department policy.

DECISION AND ORDER

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

CL/nr

Colleen Lack

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

Elisa Daly Saginaw County DHHS 411 East Genesee Saginaw, MI 48607 MDHHS-Saginaw-

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Interested Parties

Saginaw County DHHS

BSC2

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EQAD MOAHR

Via-First Class Mail:

Petitioner

