



GRETCHEN WHITMER
GOVERNOR

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

MARLON I. BROWN, DPA
ACTING DIRECTOR

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Date Mailed: October 24, 2023
MOAHR Docket No.: 23-005469
Agency No.: ██████████
Petitioner: ██████████ ██████████

ADMINISTRATIVE LAW JUDGE: Kevin Scully

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; 45 CFR 99.1 to 99.33; and 45 CFR 205.10. After due notice, a telephone hearing was held on October 11, 2023, from Lansing, Michigan. Petitioner represented herself and her husband ██████████ ██████████ testified on her behalf. The Department was represented by Lianne Scupholm.

ISSUE

Did the Department of Health and Human Services (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. On July █ 2023, Petitioner was an ongoing recipient of Medical Assistance (MA) when the Department received her Redetermination form. Exhibit A, p 5.
2. Petitioner reported on her July █ 2023, Redetermination form that she and her husband are employed. Exhibit A, p 7.
3. On June █ 2023, Petitioner's husband received a paycheck in the gross amount of \$█████ Exhibit A, p 18.
4. Petitioner received paychecks in the gross amount of \$█████ on June 2, 2023, \$█████ on June 16, 2023, and \$█████ on June 30, 2023. Exhibit A, pp 21-22.
5. Petitioner had her husband filed a joint federal income tax return for 2022 and did not claim any tax dependents. Exhibit A, p 24.

6. On July █ 2023, the Department notified Petitioner that she and her husband are not eligible for Medical Assistance (MA) effective August 1, 2023. Exhibit A, pp 12-13.
7. On August 29, 2023, the Department received Petitioner's request for a hearing protesting the denial of Medical Assistance (MA). Exhibit A, pp 3-4.

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 through 42 USC 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 through 42 CFR 420.25. The Department administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.103 through MCL 400.112k of the Social Welfare Act, MCL 400.1 *et seq.*

The income limit to participate in the Healthy Michigan Plan (HMP) is 133% of the federal poverty level. Department of Health and Human Services Reference Table Manual (RFT) 246 (April 1, 2014), p 1.

MA-only eligibility is determined on a calendar month basis. Unless policy specifies otherwise, circumstances that existed, or are expected to exist, during the calendar month being tested are used to determine eligibility for that month. When determining eligibility for a future month, assume circumstances as of the processing date will continue unchanged unless you have information that indicates (October 1, 2023), p 2.

Department policy is consistent with federal regulations under 42 CFR § 435.603(h) that state:

Financial eligibility for Medicaid for applicants, and other individuals not receiving Medicaid benefits at the point at which eligibility for Medicaid is being determined, must be based on current monthly household income and family size.

Petitioner and her husband were ongoing recipients of MA benefits when they filed their Redetermination form with the Department on July █ 2023. Petitioner and her husband reported that they are employed. The hearing record supports a finding that Petitioner and her husband filed a joint federal tax return for 2022 and did not claim any tax dependents, which makes them a MA household group of two.

Petitioner received gross earned income from employment totaling \$[REDACTED] in June of 2023, and Petitioner's husband received a paycheck in the gross amount of \$[REDACTED]. The income limit to remain eligible for MA benefits under the Healthy Michigan Program (HMP) is 133% of the federal poverty level, which is \$2,185.63 for a household of two.

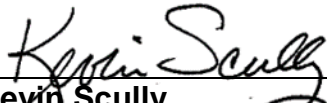
Since the gross taxable income received by Petitioner and her husband exceeds 133% of the federal poverty level, they are not eligible for HMP benefits. Since they have not been found to be disabled, are not over the age of 64, and do not care for dependents under the age of 18, they are not eligible for MA benefits under any other category. If Petitioner's circumstances change in the future, their eligibility for MA may also change as well.

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 eligibility for Medical Assistance (MA) under the Healthy Michigan Program (HMP).

DECISION AND ORDER

Accordingly, the Department's decision is AFFIRMED.

KS/dm



Kevin Scully
Administrative Law Judge
Michigan Office of Administrative Hearings
and Rules (MOAHR)

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
Kristina Etheridge
Calhoun County DHHS
**MDHHS-Calhoun-
Hearings@michigan.gov**

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Via-First Class Mail :

Petitioner

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