



GRETCHEN WHITMER
GOVERNOR

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

MARLON I. BROWN, DPA
DIRECTOR

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Date Mailed: March 5, 2024
MOAHR Docket No.: 24-000379
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 February 28, 2024, from Lansing, Michigan. Petitioner represented herself. The Department was represented by Melissa Stanley.

ISSUE

Did the Department of Health and Human Services (Department) properly determine Petitioner’s eligibility for Medical Assistance (MA) benefits?

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 October █████ 2023, the Department received Petitioner’s application for Medical Assistance (MA) benefits as a household of one and she reported that she is disabled. Exhibit A, p 6.
2. On October █████ 2023, the Department notified Petitioner that she was eligible for Medical Assistance (MA) under the Healthy Michigan Plan (HMP). Exhibit A, p 13.
3. On an application for Food Assistance Program (FAP) benefits, Petitioner reported having cash assets totaling \$████████ Exhibit A, p 20.
4. Petitioner receives monthly Retirement, Survivors, and Disability Insurance (RSDI) in the gross monthly amount of \$████████ Exhibit A, p 16.
5. Petitioner receives monthly pension payments in the gross monthly amount of \$████████ Exhibit A, p 16.

6. On November █ 2023, the Department notified Petitioner that she was eligible for limited coverage Medical Assistance (MA) under the Plan First category effective January 1, 2024. Exhibit A, p 30.
7. On January 4, 2024, the Department received Petitioner's request for a hearing protesting the closure of her Medical Assistance (MA) benefits. 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.*

On October █ 2023, the Department received Petitioner's application for MA benefits, and she was approved for full coverage benefits based on the income she reported on her application form. The income listed on Petitioner's application form was not a complete representation of Petitioner's household income. How Petitioner's income was underreported on the application form is not relevant for the purposes of this hearing, but Petitioner's social security benefits were discoverable by the Department and Petitioner's eligibility for ongoing benefits was redetermined based on the best information available.

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.

Petitioner receives a gross monthly income of \$█ consisting of her RSDI benefits and her pension payments is 193% of the federal poverty level for a household of one, and Petitioner is not eligible for full coverage MA benefits based on her income.

Petitioner testified that she is undergoing cancer treatments and claims to be disabled. Based on Petitioner's reported physical disability, Petitioner is potentially eligible for MA benefits, but her eligibility is limited to categories that have an asset limit. The asset limit for a household of one is \$2,000. Department of Health and Human Services Bridges Eligibility Manual (BEM) 400 (January 1, 2024), p 8.

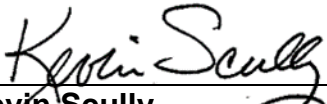
Therefore, the Department placed petitioner in the limited overage category of MA called Plan First.

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) effective January 1, 2024.

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
Elisa Daly
Saginaw County DHHS
MDHHS-Saginaw-
Hearings@michigan.gov

SchaferM

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Via-First Class Mail :

Petitioner

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