



GRETCHEN WHITMER  
GOVERNOR

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

MARLON I. BROWN, DPA  
DIRECTOR

[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]

Date Mailed: March 19, 2024  
MOAHR Docket No.: 24-000665  
Agency No.: [REDACTED]  
Petitioner: [REDACTED] [REDACTED]

**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 March 12, 2024, from Lansing, Michigan. Petitioner represented [REDACTED] [REDACTED]. The Department was represented by Avery Smith.

### **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. Petitioner receives monthly Retirement, Survivors, and Disability Insurance (RSDI) in the gross monthly amount of \$ [REDACTED] as of December 1, 2022. Exhibit A, p 10.
2. On January 21, 2023, the Department received Petitioner's request for a hearing protesting the level of Medical Assistance (MA) benefits that she is receiving. Exhibit A, pp 3-8.

### **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.*

Extended-Care MA is available to disabled individuals receiving long term care and receiving a gross monthly income that does not exceed 300% of the Supplemental Security Income (SSI) benefits rate (\$943 for a household of one). Department of Health and Human Services Bridges Eligibility Manual (BEM) 164 (July 1, 2020), pp 1-3.

Petitioner is disabled and receiving long term care. Petitioner's RSDI benefits, not counting the excluded cost of living allowance, amount to 252% of SSI benefits for a household of one. Therefore, Petitioner is eligible for extended-care MA.

A post-eligibility patient-pay amount is the share of the cost of long term care the patient is responsible for. The patient-pay amount is total income minus total need. Total income is the client's countable unearned income plus any earned income. Total need is the sum of any allowances allowed by policy. Department of Health and Human Services Bridges Eligibility Manual (BEM) 546 (January 1, 2024), p 1.

Petitioner is not eligible for a home maintenance disregard because she has been in long term care for more than six months. BEM 546, pp 3-4.

Petitioner is not eligible for a spousal allowance because she is not married. BEM 546, p 4.

Petitioner is not eligible for an allowance for her child because her child receives SSI. BEM 546, p 8.

Petitioner did not report an obligation to pay health insurance premiums.

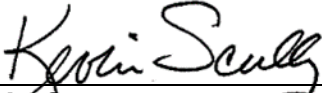
Petitioner does not receive earned income. The Department properly determined that Petitioner's patient-pay amount is \$[REDACTED] which is her monthly income after the \$60 patient allowance has been deducted.

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 the level of Medical Assistance (MA) that she is eligible for.

**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**  
Yaita Turner  
Oakland County Southfield District III  
**MDHHS-Oakland-6303-  
Hearings@michigan.gov**

**SchaferM**

**EQADHearings**

**BSC4HearingDecisions**

**MOAHR**

**Via-First Class Mail :**

**Petitioner**

[REDACTED]  
[REDACTED]  
[REDACTED]

**Authorized Hearing Rep.**

[REDACTED]  
[REDACTED]  
[REDACTED]