

GRETCHEN WHITMER GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS MARLON I. BROWN, DPA LANSING

DIRECTOR



Date Mailed: October 11, 2024 MOAHR Docket No.: 24-008966 Agency No.: Petitioner:

ADMINISTRATIVE LAW JUDGE: Caralyce M. Lassner

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 hearing was held by telephone on September 11, 2024. Petitioner appeared and represented himself. The Department of Health and Human Services (Department) was represented by Michael Whitehead, Eligibility Specialist, and Corlette Brown, Hearings Facilitator.

ISSUE

Did the Department properly determine Petitioner's eligibility for Medicaid (MA)?

FINDINGS OF FACT

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

- On March 17, 2024, the Department received a completed redetermination 1. application for MA from Petitioner.
- In June 2024, Petitioner turned years old. 2.
- On June 20, 2024, the Department sent Petitioner a Health Care Coverage 3. Determination Notice (HCCDN) that denied Petitioner MA effective July 1, 2024. (Exhibit A, p. 6).
- 4. On July 31, 2024, the Department received a request for hearing from Petitioner disputing denial or closure of his MA. (Exhibit A, p. 4).

 On August 30, 2024, the Department sent Petitioner a HCCDN that approved Petitioner for Medicare Savings Program (MSP) – NMB for August 2024 and MSP – QMB effective September 1, 2024 ongoing. (Exhibit B, pp. 1 – 3).

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.

Petitioner requested a hearing to dispute the closure or denial of his MA. The Department denied Petitioner's MA effective July 1, 2024 because he was not aged, blind, disabled, or under 21, pregnant, or the caretaker of a minor child.

Under federal law, an individual is entitled to the most beneficial category, which is the one that results in a) eligibility, b) the least amount of excess income, or c) the lowest cost share. BEM 105 (January 2024), p. 2. All MA category options must be considered in order for the Petitioner's right of choice to be meaningful. BEM 105, p. 2.

MA is available (i) under SSI-related categories to individuals who are aged (65 or older), blind or disabled, (ii) to individuals who are under age 19, parents or caretakers of children, or pregnant or recently pregnant women, and (iii) to individuals who meet the eligibility criteria for Healthy Michigan Plan (HMP) coverage. 42 CFR 435.911; 42 CFR 435.100 to 435.172; BEM 105, p. 1; BEM 137 (January 2024), p. 1; BEM 124 (July 2023), p. 1. Because Petitioner turned 65 in June and is not the caretaker of a minor child, Petitioner is eligible for MA under only SSI-related categories.

Based on Petitioner's turning in June 2024, he was potentially eligible for MA under SSI-related categories only. The AD-Care program is a Group 1, full-coverage, SSI-related MA program for individuals who are income-eligible based on their MA fiscal group size. BEM 163 (July 2017), p. 1. Clients who are ineligible for full-coverage MA coverage because of excess income may still be eligible for Group 2 SSI-related (G2S) MA, an SSI-related MA program which provides for MA coverage with a monthly deductible. BEM 105, p. 1.

In this case, while the Department testified at the onset of the hearing that Petitioner was approved for AD-Care MA for August 2024 and later testified that Petitioner has been continuously approved for AD-Care MA ongoing, it did not present any evidence to support its testimony and could not clearly explain what precipitated the June 20, 2024 HCCDN that denied Petitioner MA effective July 1, 2024. (Exhibit A, p. 6). Therefore, the Department failed to satisfy its burden of showing that it acted in accordance with Department policy when it determined Petitioner's MA eligibility for July 1, 2024 ongoing.

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 failed to satisfy its burden of showing that it acted in accordance with Department policy when it determined Petitioner's MA eligibility for July 1, 2024 ongoing.

DECISION AND ORDER

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

THE DEPARTMENT IS ORDERED TO BEGIN DOING THE FOLLOWING, IN ACCORDANCE WITH DEPARTMENT POLICY AND CONSISTENT WITH THIS HEARING DECISION, WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:

- 1. Redetermine Petitioner's MA eligibility for July 2024 ongoing;
- 2. If eligible, provide Petitioner with the most beneficial MA coverage he was eligible to receive for July 2024 ongoing; and
- 3. Notify Petitioner of its decision in writing.

CML/nr

Caralyce M. Lassner 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

Keisha Koger-Roper Wayne-District 31 (Grandmont) 17455 Grand River Detroit, MI 48227 MDHHS-Wayne-31-Grandmont-Hearings@Michigan.gov

Interested Parties BSC4 M. Schaefer EQAD MOAHR

Via-First Class Mail :

Petitioner

