GRETCHEN WHITMER
GOVERNOR

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

MARLON BROWN DIRECTOR



Date Mailed: September 27, 2024 MOAHR Docket No.: 24-009555

Agency No.:
Petitioner:

ADMINISTRATIVE LAW JUDGE: Amanda M. T. Marler

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 September 23, 2024. The Petitioner was self-represented. The Department of Health and Human Services (Department) was represented by Philip Jones, Eligibility Specialist.

ISSUE

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

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 4, 2023, the Department issued a Redetermination to Petitioner which was due by November 3, 2023.
- 2. Petitioner did not return the completed form, and his MA benefits were closed effective January 1, 2024 after a Health Care Coverage Determination Notice (HCCDN) was issued to him on December 15, 2023 advising him of the closure.
- 3. On May 10, 2024, the Department received an application for MA benefits indicating he was the only one in the household, no earned income, Retirement Survivors Disability Insurance (RSDI) benefit, and some medical expenses.
- 4. On June 3, 2024, the Department issued a HCCDN to Petitioner advising him that he is eligible for MA benefits effective July 1, 2024 with a deductible of \$1,201.00 per month.

 On August 12, 2024, the Department received Petitioner's request for hearing disputing the Department's closure of his MA benefits and determination of MA eligibility.

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.

In this case, Petitioner submitted a hearing request disputing the closure of his MA benefits and determination of MA eligibility based on his subsequent application.

On October 4, 2023, the Department issued a Redetermination to Petitioner with a due date of November 3, 2023 and the Department did not receive a completed Redetermination in response. On December 15, 2023, the Department issued a HCCDN to Petitioner advising him that his MA benefits were closing for failure to complete the Redetermination. Pursuant to policy, and as noted on page 3 of the HCCDN, all requests for hearing must be received by the Department within 90 days of the date of the notice of case action. BAM 600 (March 2021), p. 6. In the common law, the proper mailing and addressing of a letter creates a presumption of receipt which may be rebutted by evidence. Stacey v Sankovich, 173 NW2d 225 688 (1969); Good v Detroit Automobile Inter-Insurance Exchange, 241 NW2d 71 (1976); Long-Bell Lumber Co v Nynam, 108 NW 1019 (1906). The Department has shown that it properly addressed and mailed the HCCDN to Petitioner and Petitioner has not adequately rebutted the presumption of receipt. Therefore, Petitioner's hearing request as it relates to the closure of his MA benefits is not timely and is not addressed by this decision.

Petitioner also disputed the determination of his MA eligibility based on his May 2024 application. 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, (iii) to individuals who meet the eligibility criteria for Healthy Michigan Plan (HMP) coverage, and (iv) to individuals who meet the eligibility criteria for Plan First Medicaid (PF-MA) coverage. 42 CFR 435.911; 42 CFR 435.100 to 435.172; BEM 105 (January 2024), p. 1; BEM 137

(January 2024), p. 1; BEM 124 (July 2023), p. 1. HMP is a MAGI-related MA category that provides MA coverage to individuals who (i) are 19 to 64 years of age; (ii) have income under the MAGI methodology at or below 133% of the federal poverty level (FPL); (iii) do not qualify for or are not enrolled in Medicare; (iv) do not qualify for or are not enrolled in other MA programs; (v) are not pregnant at the time of application; and (vi) are residents of the State of Michigan. BEM 137, p. 1; 42 CFR 435.603.

Because Petitioner is eligible for Medicare and age and age and there was no evidence that Petitioner was the parent or caretaker of a minor child, Petitioner was potentially eligible for MA under an SSI-related category. In determining the SSI-related MA category Petitioner is eligible for, MDHHS must determine Petitioner's MA fiscal group size and net income. As an unmarried individual, Petitioner has fiscal group size for SSI-related MA purposes of one. BEM 211 (October 2023), p. 8.

The AD-Care program, an SSI-related MA category, requires that net group income cannot exceed one hundred percent of the federal poverty level plus \$20.00 or by looking to the income limits seen in RFT 242, \$1,275.00 for a group size of one effective April 1, 2024. BEM 163, pp. 1-2; RFT 242 (April 2024), p. 1; BEM 163 (July 2017), p. 2.

Since Petitioner has excess income for eligibility under the AD-Care program, the full coverage SSI-related MA program, an evaluation of Petitioner's eligibility for MA coverage under the Group 2-Aged, Blind, Disabled (G2S) follows. Group 2 provides MA coverage with a deductible. BEM 105, p. 1. The deductible is the amount that the client's net income (less any allowable deductions) exceeds the applicable Group 2 MA protected income level (PIL). PIL is a set allowance for non-medical need items such as shelter, food, and incidental expenses. BEM 544 (January 2020), p. 1. It is based on the client's MA fiscal group size and the county in which the client resides. *Id.* Petitioner resides in County and has a group size of one; therefore, he is in shelter area VI, and his PIL is \$408.00. RFT 200 (April 2017), p. 3; RFT 240 (December 2013), p. 1. Thus, if Petitioner's monthly net income (less allowable needs deductions) is in excess of \$408.00, Petitioner is eligible for MA assistance under the G2S program with a deductible equal to the amount of income remaining after the appropriate and allowed deductions which is greater than \$408.00.

As discussed above, Petitioner's net income was \$. In calculating the deductible, allowances are made for health insurance premiums and remedial services. BEM 544,

pp. 1-2. Petitioner is responsible for his Medicare Part B premium of \$174.70 and there was no evidence presented of other insurance premiums. Petitioner does not have any remedial services. Therefore, the PIL is subtracted to reach a deductible of \$1,026.00 (rounded to the nearest dollar). The Department has not met its burden of proof in establishing that it properly calculated Petitioner's G2S deductible of \$1,201.00 for June 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 calculated Petitioner's G2S deductible.

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 deductible effective as of June 1, 2024;
- 2. If otherwise eligible, issue MA coverage on Petitioner's behalf for benefits not previously received; and,
- 3. Notify Petitioner in writing of its decision.

AM/cc

Amanda M. T. Marler 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: Interested Parties

MDHHS-Oakland-DistrictII-Hearings BSC4-HearingDecisions EQADHearings M. Schaefer MOAHR

<u>Via-First Class Mail :</u> Petitioner

