



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
MICHIGAN OFFICE OF ADMINISTRATIVE HEARINGS AND RULES
SUZANNE SONNEBORN
EXECUTIVE DIRECTOR

MARLON I. BROWN, DPA
DIRECTOR

[REDACTED]
[REDACTED]
[REDACTED] MI [REDACTED]

Date Mailed: November 7, 2024
MOAHR Docket No.: 24-010777
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Danielle R. Harkness

HEARING DECISION

On September 16, 2024, Petitioner, [REDACTED], requested a hearing to dispute a Medical Assistance (MA) determination. As a result, a hearing was scheduled to be held on November 4, 2024. Public assistance hearings are held 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. Petitioner appeared and represented himself. Respondent, Michigan Department of Health and Human Services (Department), had Assistance Payments Supervisor Jennifer Richard appear as its representative.

A 23-page packet of documents provided by the Department was admitted collectively as Exhibit A.

ISSUE

Did the Department properly close Petitioner's Medicare Savings Program (MSP) coverage due to a failure to provide requested verification?

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 [REDACTED] 2024, the Department mailed a verification checklist to Petitioner to obtain information to determine Petitioner's eligibility for MSP coverage. The verification checklist instructed Petitioner to provide proof of Petitioner's checking/savings account(s) or call the Department by August 15, 2024.
2. After Petitioner received the verification checklist, he provided the Department with verification of his [REDACTED] savings account.
3. The Department received the verification for Petitioner's savings account. However, the Department determined that the verification was insufficient because Petitioner

did not provide proof of the patient trust fund account that Petitioner's name is listed on.

4. The patient trust fund account belongs to Petitioner's mother and Petitioner is unable to access the funds without his mother's approval.
5. On August 29, 2024, the Department mailed a health care coverage determination notice to Petitioner to notify Petitioner that he was ineligible for MSP coverage because he failed to provide verification to show whether he met the eligibility criteria, and he was determined eligible for Plan First Medicaid coverage effective June 1, 2024.
6. On September 16, 2024, Petitioner requested a hearing to dispute the Department's determination.

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 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 administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.105-.112k.

The Department must periodically redetermine or renew a client's eligibility for active programs. BAM 210 (January 1, 2024), p. 1. The redetermination/renewal process includes a thorough review of all eligibility factors. Benefits stop at the end of the benefit period unless a renewal is completed, and a new benefit period is certified. *Id.* at 4.

Verification is usually required by the Department at the time of application/redetermination and for a reported change. BAM 130 (May 1, 2024), p. 1. The Department must tell a client what verification is required, how to obtain it, and the due date. *Id.* at 3. The Department must allow the client 10 calendar days to provide requested verification. *Id.* at 8. The client must obtain the verification, but the local office must assist if the client needs it and asks for help. *Id.* Verifications are only considered timely if they are received by the due date. *Id.* The Department must send a Negative Action Notice when the client refuses to provide the verification, or the client has failed to provide the verification by the due date. *Id.*

The Department must determine the client's available countable assets in determining MSP eligibility. The asset limit is:

- For an asset group of one:

\$ [REDACTED] effective [REDACTED], 2024.
\$ [REDACTED] effective [REDACTED], 2023.
\$ [REDACTED] effective [REDACTED], 2022.
\$ [REDACTED] effective [REDACTED], 2021.
\$ [REDACTED] effective [REDACTED], 2020.

- For an asset group of two:

\$ [REDACTED] effective [REDACTED], 2024.
\$ [REDACTED] effective [REDACTED], 2023.
\$ [REDACTED] effective [REDACTED], 2022.
\$ [REDACTED] effective [REDACTED], 2021.
\$ [REDACTED] effective [REDACTED], 2020.

An asset is unavailable if all the following are true, and an owner **cannot** sell or spend his share of an asset:

- Without another owner's consent.
- The other owner is not in the asset group.

BAM 400 and BEM 165.

Based on the evidence presented, the Department properly sent Petitioner a verification checklist requesting verification of Petitioner's bank accounts to determine whether he met the eligibility criteria for MSP. Petitioner provided the Department with verification of one of his bank accounts, but failed to provide verification of the patient trust fund account that Petitioner's name is listed on. Petitioner argued that Petitioner's name is on the patient trust fund account that belongs to his mother, but that he is unable to access the funds in that account without Petitioner's mother's approval. However, no evidence was provided that Petitioner informed the Department prior to the due date that he was unable to obtain the requested verification or that Petitioner provided proof to the Department that the patient trust fund account that his name is listed on is unavailable to him.

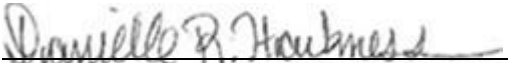
In this case, Petitioner failed to provide all of the requested verifications needed to determine his MSP eligibility by the due date after the Department properly requested the verifications. Therefore, the Department properly closed Petitioner's MSP coverage and determined that Petitioner is eligible for Plan First coverage.

DECISION AND ORDER

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 its policies and the applicable law when it closed Petitioner's MSP coverage and found Petitioner eligible for Plan First coverage.

IT IS ORDERED the Department's decision is **AFFIRMED**.

DH/pt


Danielle R. Harkness
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
Kimberly Kornoelje
Kent County DHHS
121 Martin Luther King Jr St SE
Ste 200
Grand Rapids, MI 49507
MDHHS-Kent-Hearings@michigan.gov

Interested Parties

BSC3
M. Schaefer
EQAD
MOAHR

Via-First Class Mail:

Petitioner
[REDACTED]
[REDACTED]
[REDACTED] MI [REDACTED]