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



Date Mailed: February 6, 2025 MOAHR Docket No.: 24-013903

Agency No.: Petitioner:

ADMINISTRATIVE LAW JUDGE: Zainab A. Baydoun

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 January 22, 2025, from Michigan. Petitioner appeared for the hearing with her son, who served as Authorized Hearing Representative (AHR). The Department of Health and Human Services (Department) was represented by Lori Turner, Eligibility Specialist.

<u>ISSUE</u>

Did the 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. Petitioner was previously approved for MA under the Healthy Michigan Plan (HMP).
- 2. A Notice of Award from the Social Security Administration (SSA) confirms that effective 2024, Petitioner became entitled to monthly spouse's Retirement Survivors Disability Insurance (RSDI) benefits and that Petitioner began receiving the RSDI in 2024. The Notice of Award indicated that Petitioner also became entitled to Medicare Part A and Part B. (Exhibit A, p. 15)
- 3. The Department received notification that Petitioner was approved for RSDI and was enrolled in Medicare. The Department reviewed Petitioner's eligibility for Medicare Savings Program (MSP) benefits.

- 4. The Department asserted that Petitioner was approved for MSP benefits under the Qualified Medicare Beneficiaries (QMB) category effective March 1, 2024.
- 5. On or around 2024, the Department sent Petitioner a Health Care Coverage Determination Notice advising that effective April 1, 2024, Petitioner was approved for MA under the limited coverage Plan First category. (Exhibit A, pp. 8-10)
- 6. On or around December 11, 2024, the Department sent Petitioner a Health Care Coverage Determination Notice again advising Petitioner that effective April 1, 2024, she was approved for MA under the limited coverage Plan First category. (Exhibit A, pp. 11-14)
- 7. On December 11, 2024, Petitioner requested a hearing disputing the Department's actions with respect to the MA program.

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 disputed the Department's determination that she was eligible for MA under the limited coverage Plan First category.

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 (October 2023), p. 1; BEM 137 (June 2020), p. 1; BEM 124 (July 2023), p. 1. Under federal law, an individual eligible under more than one MA category must have eligibility determined for the category selected and is entitled to the most beneficial coverage available, which is the one that results in eligibility and the least amount of excess income or the lowest cost share. BEM 105, p. 2; 42 CFR 435.404.

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.

Ad-Care is an SSI-related Group 1 MA category available to persons who are aged or disabled. BEM 165 (July 2017), p.1. If a client is not eligible for RSDI based on disability or blindness, the Disability Determination Service (DDS) determines and certifies disability. See BEM 260 (January 2023), pp. 1-5.

Because Petitioner is enrolled in Medicare, she is no longer eligible for full coverage MA under the HMP. There was also no evidence that Petitioner was the parent or caretaker of any minor children, and thus, is not eligible for MA as a parent/caretaker. Petitioner confirmed that she is years old. Although Petitioner's AHR asserted that Petitioner was approved for RSDI based on a disability, the Notice of Award confirmed that Petitioner receives monthly spouse's RSDI benefits. Additionally, the Department reviewed the State Online Query (SOLQ) during the hearing and testified that there was no disability onset date identified and no application for disability benefits referenced on Petitioner's SOLQ. Petitioner did not present any documentary evidence to support the testimony that Petitioner was found disabled by either the SSA or the DDS. The Department asserted that there was no information in Petitioner's case file that she alleged a disability prior to the approval for MA under the Plan First category. The Department representative testified that the Department first became aware that Petitioner alleged a disability during the hearing. At the hearing, Petitioner presented a note from her doctor indicating that she has end stage renal disease. Petitioner's AHR argued that Petitioner's doctor determined she was disabled. (Exhibit 1). Petitioner's AHR further asserted that Petitioner notified the Department that she alleged a disability as a basis for MA eligibility but did not identify when this notification occurred and the testimony regarding this notification was inconsistent. Notwithstanding the testimony provided during the hearing by Petitioner's AHR, based on the information available to the Department at the time the MA review was completed, Petitioner did not meet the aged or disabled criteria for SSI-related MA under the Ad-Care category.

Upon review, because Petitioner is enrolled in Medicare, is not the parent or caretaker of a minor child, is under age 65, and no evidence was presented that Petitioner was determined disabled by the SSA or DDS, the Department properly concluded that Petitioner was eligible for limited coverage MA under the Plan First category effective April 1, 2024.

However, because the Department is now aware that Petitioner is alleging a disability, a referral to DDS to determine Petitioner's MA eligibility under an SSI-related category should be considered.

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 processed Petitioner's MA eligibility.

DECISION AND ORDER

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

ZB/pt

Zainab A. Baydoun
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

Tara Roland 82-17

Wayne-Greenfield/Joy-DHHS

8655 Greenfield Detroit, MI 48228

MDHHS-Wayne-17-hearings@michigan.gov

Interested Parties

BSC4

M. Schaefer

EQAD MOAHR

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

MI

Authorized Hearing Representative

