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STATE OF FLORIDA DEPARTMENT OF CHILDREN AND FAMILIES OFFICE OF APPEAL HEARINGS DEPT OF CHILDREN & FAMILIES OFFICE OF APPEAL HEARINGS



PETITIONER,

APPEAL NO. 14F-05680

Vs.

CASE NO.

FLORIDA DEPARTMENT OF CHILDREN AND FAMILIES CIRCUIT: 03 Columbia

UNIT: 88369

RESPONDENT.

FINAL ORDER

Pursuant to notice, the undersigned convened an administrative hearing telephonically in the above-referenced matter on August 1, 2014 at 10:02 a.m.

APPEARANCES

For the Petitioner:

For the Respondent: Frank Ciotti, Economic Self Sufficiency Specialist II

STATEMENT OF ISSUE

Petitioner is appealing the Department's action of April 19, 2014 enrolling him in a Medically Needy (MN) Program with a Share of Cost (SOC) as opposed to receiving Medicaid without share of cost.

FINDINGS OF FACT

- 1. The petitioner is a 41 years old, is disabled and lives alone.
- 2. The petitioner received Supplemental Security Income (SSI) from the date of his disability decision, February 2013, with full Medicaid coverage until January 2014. The payment was then converted to Social Security Disability with no medical coverage. The petitioner then applied for Medicaid and was enrolled in the MN Program on April 19, 2014 with a SOC of \$1164.
- 3. The Department submitted into evidence Respondent Composite Exhibit

 1. This exhibit contains a copy of the SSI-Related Medicaid eligibility budget. The
 petitioner receives \$1364 in Social Security benefits. The Department then subtracted
 the \$20 standard disregard from the \$1364 to arrive at the petitioner's countable
 unearned income amount of \$1344. Next, the Medically Needy Income Level (MNIL)
 amount of \$180 (the \$180 represents an MNIL amount for one person) was subtracted
 from \$1344 to arrive at the SOC amount of \$1164 for the petitioner.
- 4. The petitioner does not dispute the amount the Department included in its budget process, but is appealing the fact that he has a SOC as opposed to receiving Medicaid without a SOC.
- 5. The Department explained how the SOC and "bill tracking" process works and provided the contact information for this process.

CONCLUSIONS OF LAW

- 6. The Department of Children and Families, Office of Appeal Hearings has jurisdiction over the subject matter of this proceeding and the parties, pursuant to Fla. Stat § 409.285. This order is the final administrative decision of the Department of Children and Families under § 409.285, Fla. Stat.
- 7. This proceeding is a de novo proceeding pursuant to Fla. Admin. Code § 65-2.056.
- 8. In accordance with Fla. Admin. Code § 65-2.060 (1), the burden of proof was assigned to the petitioner.
- 9. The Department determines Medicaid eligibility based on the household circumstances. When the household consists of an elderly or disabled individual, Medicaid is determined under Adult-Related Medicaid policy (also referred to as SSI-Related Medicaid or Medicaily Needy). Medicaid eligibility is based on federal regulations.
- 10. Federal Regulations at 20 C.F.R. §435.500 sets forth the regulations for requirements in determining the eligibility of both categorically and medically needy individuals. 20 C.F.R §435.541 defines disability as either determined by the Social Security Administration (SSA) or the Medicaid agency.
 - 11. Fla. Admin. Code 65A-1.701, Definitions, states in part:
 - (20) MEDS-AD Demonstration Waiver: Medicaid coverage group for aged or disabled individuals who meet all SSI-related Medicaid non-financial eligibility criteria, whose resources do not exceed the limit in the Medically Needy Program, whose income is at or below 88 percent of the federal poverty level and are not receiving Medicare.....

FINAL ORDER (Cont.) 14F-05680 PAGE - 4

- 12. Fla. Admin. Code 65A-1.713 SSI-Related Medicaid Income Eligibility Criteria states in part:
 - (1) Income limits. An individual's income must be within limits established by federal or state law and the Medicaid State Plan. The income limits are as follows:
 - (h) For Medically Needy, income must be less than or equal to the Medically Needy income standard after deduction of allowable medical expenses.
 - (2) (c) Medically Needy. The amount by which the individual's countable income exceeds the Medically Needy income level, called the "share of cost", shall be considered available for payment of medical care and services.
- 13. The SSI-Related Programs-Financial Eligibility Standards found in the Department's Program Policy Manual, 165-22, Appendix A-9 for January 2014 lists the income limits for the MEDS-AD (Full Community Medicaid) program for individuals 65 and over or disabled at \$856 each month.
- 14. According to the above authorities, to receive full Medicaid in the SSI-Related Medicaid Program, the monthly countable income must be under \$856 for an individual. Because the petitioner's income exceeded that amount, the Department was correct to enroll petitioner in the MN Program. The Department also correctly deducted \$20 and \$180 from petitioner's income before determining the SOC. (See 20 C.F.R. 416.1124(a))
- 15. A review of the rules did not find any exceptions to the income limits. The petitioner was enrolled in the MN Program with a SOC. The SOC is gross monthly income less a standard \$20 deduction and the Medically Needy Income Level (MNIL) for one. The countable unearned income in the amount of \$1344, less the MNIL of \$180 equals a share of cost of \$1164. The hearing officer found no exception to this

FINAL ORDER (Cont.) 14F-05680 PAGE - 5

calculation. The undersigned concludes that the Department's actions to enroll the petitioner in the MN Program and to determine the amount of the monthly SOC as \$1164, was a correct action.

DECISION

Based upon the foregoing Findings of Fact and Conclusions of Law, this appeal is denied and the Department's action affirmed.

NOTICE OF RIGHT TO APPEAL

This decision is final and binding on the part of the Department. If the petitioner disagrees with this decision, the petitioner may seek a judicial review. To begin the judicial review, the petitioner must file one copy of a "Notice of Appeal" with the Agency Clerk, Office of Legal Services, Bldg. 2, Rm. 204, 1317 Winewood Blvd., Tallahassee, FL 32399-0700. The petitioner must also file another copy of the "Notice of Appeal" with the appropriate District Court of Appeal. The Notices must be filed within thirty (30) days of the date stamped on the first page of the final order. The petitioner must either pay the court fees required by law or seek an order of indigency to waive those fees. The petitioner is responsible for any financial obligations incurred as the Department has no funds to assist in this review.

DONE and ORDERED this

_, 2014, in

Tallahassee, Florida.

Larry LaBelle

Hearing Officer

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Tallahassee, FL 32399-0700

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ACCESS Circuit 3 - Lynn Dann