

6. [Petitioner] requested a fair hearing on April 22, 1992.

7. [Petitioner's] monthly income consists of \$748.80 from Social Security and \$173.29 from a pension through the General Electric Co.

8. A Medicare premium in the amount of \$31.80 is deducted from his gross income, leaving [petitioner] with a net monthly income of \$926.29.

9. From his monthly income [petitioner] pays \$881.29 to the [name] home.

10. The [name] home has stated that [petitioner's] health care costs amount to \$359.87 per month. This cost includes health care services for a 24 hour period, such as nursing overview, dispensation of medication, the daily care of a resident's needs and an administrative service that may be rendered on a resident's behalf.

11. [Petitioner] has requested that the medical and personal care he receives at the [name] Home be considered by the department as a "non-covered medical expense," the cost of which should be deducted from his applied income in determining his financial eligibility for Medicaid.

It appears that on its facts this case is identical to Fair Hearing No. 10,525, decided by the Board on October 31, 1991.

ORDER

The Department's decision is reversed and the matter should be remanded to the Department to determine the cost

of the medically necessary personal services personal services provided by the petitioner's Level III home and to allow the petitioner a deduction from his applied income to reflect those costs.

REASONS

The Board's decision in Fair Hearing No. 10,525 is attached hereto and incorporated by reference herein. If, after remand, the petitioner is dissatisfied with the amount allowed by the Department as a deduction from his applied income, he can petition the board for further hearing on this issue.

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