

STATE OF VERMONT

HUMAN SERVICES BOARD

In re) Fair Hearing No. 18,402
)
Appeal of)

INTRODUCTION

The petitioner appeals a decision by the Department of Prevention, Assistance, Transition, and Health Access (PATH) finding that he is no longer eligible for Medicaid. The issue is whether the petitioner's income is in excess of the program maximum.

FINDINGS OF FACT

1. The petitioner lives with his wife and their two children. The petitioner's son, who is disabled, and his daughter are eligible for medical benefits under the Dr. Dynasaur program. The petitioner is presently disabled and has medical problems that require expensive medications.

2. The petitioner receives unearned income from various sources totaling \$2,442 per month.

3. The petitioner reapplied for Medicaid VHAP in March 2003. At that time the Department calculated the petitioner's eligibility both as being the parent of needy children (ANFC-related) and as a disabled individual (SSI-related). Due to

the fact that other household members have income that would be counted if he was considered ANFC-related, the Department found that it was more advantageous to the petitioner to have his eligibility determined as being SSI-related.

4. Based on its new determination that the petitioner's net monthly income is \$1,041 (see infra) the Department found the petitioner eligible for Medicaid only after he incurs a spenddown amount of \$689 (see infra) in the six-month period of eligibility.

5. The petitioner does not dispute the Department's calculations of his income and benefits. The loss of his Medicaid will be a hardship because of his high medical expenses.

ORDER

The decision of the Department is affirmed.

REASONS

The regulations governing Medicaid require that an applicant meet certain income eligibility guidelines in order to be eligible. W.A.M. §§ M350. The petitioner's countable income, \$1,041 per month, made him ineligible for Medicaid until he incurs medical expenses over \$689. These figures were arrived at by allowing the petitioner deductions from

gross income of \$20 as a standard deduction and \$297 as an allowable allocation to dependent children. The Department then subtracted the income maximum (or "protected income level") applicable to the petitioner (\$766) from his net countable monthly income and multiplying by six (the number of months in the eligibility period). From that figure the Department subtracted the petitioner's expenses for private health insurance and over-the-counter medications in the six-month period (a total of \$773). The petitioner does not dispute any of these calculations.

At the hearing in this matter, held on June 12, 2003, the petitioner was advised to promptly reapply for benefits if his income is reduced. The petitioner was also advised to apply for general assistance (GA) if he ever faces an emergency need to obtain medications or any other medical service. However, inasmuch as the Department's decision in this matter was in accord with the pertinent regulations it must be affirmed. 3 V.S.A. § 3091(d), Fair Hearing Rule 17.

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