

Medicaid program due to excess income. This is the notice that was appealed and transmitted to the Office of Administrative Law (OAL). The undisputed evidence in the record indicates that Petitioner's gross social security benefits are \$1,781 per month. When combined with his wife's income, Petitioner's total countable income is \$5,532.43. This amount exceeds the maximum income limit for a household of two under the Medicaid program income eligibility standards. There is simply no authority that permits the relaxation or waiver of the income limits in any individual case, and the ECBSS was correct to deny Medicaid eligibility for the ABD program based on Petitioner's total countable income.

However, ECBSS' decision to evaluate Petitioner for the ABD program was based on the assumption that Petitioner's initial MLTSS application had been denied as a result of the PAS being denied. There is no evidence in the record to establish that Petitioner's PAS was rejected. While the determination of clinical eligibility lies with the Office of Community Choice Options (OCCO) and not the county, I am concerned with the proper processing of Petitioner's initial Medicaid application for MLTSS services. Therefore, this matter should be returned to the County for follow up with OCCO regarding Petitioner's Medicaid status.

THEREFORE, it is on this 14th day of FEBRUARY 2023,

ORDERED:

That the Initial Decision is hereby REVERSED with regard to Petitioner's ABD eligibility; and

That the Initial Decision is RETURNED to ECBSS for further evaluation of the Petitioner's May 2022 Medicaid application.



Jennifer Langer Jacobs, Assistant Commissioner
Division of Medical Assistance
and Health Services