



The Delaware Code (31 Del. C. §520) provides for judicial review of hearing decisions. In order to have a review of this decision in Court, a notice of appeal must be filed with the clerk (Prothonotary) of the Superior Court within 30 days of the date of the decision. An appeal may result in a reversal of the decision. Readers are directed to notify the DSS Hearing Office, P.O. Box 906, New Castle, DE 19720 of any formal errors in the text so that corrections can be made.

**DELAWARE DEPARTMENT OF HEALTH AND SOCIAL SERVICES  
DIVISION OF SOCIAL SERVICES**

In re:

DCIS No.: 0000000000

Ms Jones

Appearances: Ms Jones, pro se, Appellant

Denise Curtis, Social Worker Supervisor, Division of Social Services

I.

Ms Jones ("Appellant") opposes a decision by the Division of Social Services ("DSS") to close her medical assistance benefits, based upon being over the income limit for a household of one (1).

The Division of Social Services ("DSS") contends that the Appellant is over the income limit for a household of one (1) and that they properly closed the Appellant's medical assistance benefits.

II.

On May 18, 2012, DSS sent to Appellant a Notice to Close Your Medical Assistance, effective May 31, 2012. (Exhibit 3)

On May 25, 2012, the Appellant filed a request for a fair hearing. (Exhibit 2).

The Appellant was notified by certified letter dated July 3, 2012, that a fair hearing would be held on July 23, 2012. The hearing was conducted on that date in Dover, Delaware.

This is the decision resulting from that hearing.

III.

The agency learned that the Appellant was receiving unemployment compensation benefits in the amount of \$252.00 per week. Pursuant to the requirements of Delaware Social Services Manual ("DSSM") 16230, \$252.00 was multiplied by a factor of 4.33 to account for months that have

five (5) weeks, and the calculation resulted in a monthly gross income figure of \$1,091.16. (4.33 X \$252.00 = \$1,091.16).

Pursuant to the Division of Social Services Manual (“DSSM”) 16230, countable income is used to determine eligibility for benefits. DSSM 16230 defines countable income as earned or unearned income minus any disregards, if applicable. In this instance, a \$90.00 disregard was not applied because all of the Appellant’s income is unearned. Accordingly, DSS determined that the Appellant’s monthly income amounted to \$1,091.16. DSS applied a monthly income limit for a family of one (1) amounting to \$931.00 and closed the Appellant’s medical assistance.

The Appellant testified that she has diabetes and takes insulin. She additionally has rheumatoid arthritis and her injections cost \$1,900.00 per month. She pays almost \$2,500.00 for medications with an income of a little more than \$1,000.00. When considering her other household expenses, she does not have enough income to pay for her medications.

Pursuant to DSSM 16230.1.1, DSS is only permitted to utilize gross income, and not net income (after expenses), for purposes of eligibility. As this benefit is based solely on income, there are no deductions made for medical or other expenses and a person’s medical condition is not taken into consideration when determining eligibility.

Based upon the information provided, DSS correctly determined that the Appellant’s total monthly countable income is over the income limit for a family of one (1). As a result, substantial evidence supports the agency’s decision to send the Appellant a Notice to Close Your Medical Assistance.

#### IV.

For these reasons, the May 18, 2012 decision of the Division of Social Services to close the Appellant’s Medical Assistance effective May 31, 2012 is AFFIRMED.

Date: August 10, 2012



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MICHAEL L. STEINBERG, J.D.  
HEARING OFFICER

THE FOREGOING IS THE FINAL DECISION OF THE  
DEPARTMENT OF HEALTH AND SOCIAL SERVICES

August 10, 2012  
POSTED

cc: Ms Jones  
Karen Swartz, Team 910  
Denise Curtis, Maintenance Team

EXHIBITS FILED IN OR FOR THE PROCEEDING

EXHIBIT #1 – Copy of DSS Hearing Summary consisting of two (2) pages dated June 1, 2012.

EXHIBIT #2 – Copy of the Appellant's request for a fair hearing date-stamped May 25, 2012, consisting of two (2) pages.

EXHIBIT #3 – Copy of the Notice to Close Your Medical Assistance dated May 18, 2012, consisting of two (2) pages.