



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. Redacted

Redacted

Appearances: Redacted, pro se, Appellant

Kristi White, Sr. Social Worker/Case Manager, Division of Social Services
Michelle Twilley, Social Worker Supervisor, Division of Social Services

I.

Redacted ("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 Appellant's medical assistance benefits.

II.

On February 4, 2010, DSS sent to Appellant a Notice to Close Your Medical Assistance, effective February 28, 2010. (Exhibit 3)

On February 25, 2010, the Appellant filed a request for a fair hearing and requested that benefits continue until a hearing decision was issued. (Exhibit 2). According to the Fair Hearing Summary benefits have continued. (Exhibit 1)

The Appellant was notified by certified letter dated March 18, 2010, that a fair hearing would be held on April 9, 2010. The hearing was conducted on that date in Dover, Delaware.

This is the decision resulting from that hearing.

III.

The Appellant applied for medical assistance benefits on October 28, 2009 after her employment with WalMart was terminated. She began receiving medical assistance benefits as of November 11, 2009. On November 15, 2009, the Department of Labor Data Exchange occurred to update the agency's computer system in reference to individuals currently receiving unemployment compensation. The Appellant continued to receive no income at that time. She began receiving unemployment compensation in the amount of \$209.00 per week on November 18, 2009. On December 15, 2009, the agency learned, through the Department of Labor Data Exchange, that the Appellant was receiving \$209.00 per week in unemployment compensation payments.

Pursuant to the requirements of Delaware Social Services Manual ("DSSM") 16230, \$209.00 was multiplied by a factor of 4.33 to account for months that have five (5) weeks, and the calculation resulted in a gross income figure of

\$904.97. ($\$290.00 \times 4.33 = \904.97). In this case, the Appellant did not receive an earned income deduction (disregard) of \$90.00 because none of her income is considered earned under DSSM 16250.

Pursuant to 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. Accordingly, DSS determined that the Appellant's monthly income amounted to \$904.97. DSS applied a monthly income limit for a family of one (1) of \$903.00 and closed the Appellant's medical assistance.

The Appellant testified that she has several impairments including: generalized degenerative joint disease; inflammatory arthritis; mixed connective tissue disease; a speech impediment and lupus. She takes many medications and incurred significant debt when she was without medical insurance previously. She asked for an exception from the regulations preventing her from being eligible for medical assistance. She testified that she had significant medical impairments and only \$1.97 in income prevented her from maintaining medical assistance eligibility.

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.

A careful review of the relevant statutes and regulations does not provide a basis for a more favorable outcome in this matter.

Based upon the information provided, DSS correctly determined that the Appellant's unearned monthly household 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 February 4, 2010 decision of the Division of Social Services to close the Appellant's Medical Assistance effective February 28, 2010 is AFFIRMED.

Date: April 19, 2010



Michael L. Steinberg, J.D.
HEARING OFFICER

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

April 19, 2010
POSTED

cc: Redacted
Kristi White, Team 312
Michelle Twilley, DSS

EXHIBITS FILED IN OR FOR THE PROCEEDING

EXHIBIT #1 – Copy of DSS Hearing Summary consisting of two (2) pages dated March 2, 2010.

EXHIBIT #2 – Copy of the Appellant's request for a fair hearing date-stamped February 25, 2010, consisting of one (1) page.

EXHIBIT #3 – Copy of the Notice to Close Your Medical Assistance dated February 4, 2010, consisting of two (2) pages.

EXHIBIT #4 – Copy of the Department of Labor printout dated February 4, 2010 consisting of two (2) pages.

EXHIBIT #5 – Copy of the Appellant's medical documentation consisting of fifteen (15) pages.