

**BEFORE THE ALASKA OFFICE OF ADMINISTRATIVE HEARINGS ON
REFERRAL BY THE COMMISSIONER OF HEALTH AND SOCIAL SERVICES**

In the Matter of)
)
 L B)
_____)

OAH No. 14-0975-MDE
Agency No.

DECISION

L B applied for Medicaid benefits for herself and her one year-old daughter, M C. Ms. B was pregnant at the time of the application.¹ The Division of Public Assistance (Division) approved Medicaid for Ms. B, but denied benefits to her daughter.² The Division denied Ms. C benefits because she was over income.³ Ms. B appealed the Division’s denial of Medicaid benefits for her daughter.⁴ A hearing was held on July 2, 2014. Ms. B represented herself and Jeff Miller represented the Division. The Division’s decision is affirmed because M C is over the Medicaid income limits.

Ms. B applied for Medicaid benefits for her and her daughter on May 5, 2014.⁵ On the application Ms. B listed that she lives with R C, M C’s father, and his grandmother, D C.⁶ Ms. B wrote “see attached paystubs” under her wages.⁷ She wrote, “18+ an hour” under R C’s wages.⁸ Both Ms. B and Mr. C work at the No Name City School District.⁹

The Division combined Ms. B’s and Mr. C’s income, totaling \$5,575.21 monthly, in order to determine the household income for M C.¹⁰ The Division used wage information from the Department of Labor to calculate income.¹¹ M C’s household size is 3 persons, herself and her parents, Ms. B and Mr. C.¹² The income limit for a child under 19 without

¹ Ex. 2.1.
² Division’s position statement, Ex. 6.
³ Ex. 6.
⁴ Ex. 5.
⁵ Ex. 2-2.11.
⁶ Ex. 2-2.11.
⁷ Ex. 2.5.
⁸ Ex. 2.5.
⁹ Ex. 2.5.
¹⁰ Ex. 6.
¹¹ Division’s position statement, Ex. 3.1-3.3.
¹² Ex. 18.

insurance in a 3 person household is \$4,186.¹³ M C's household income is over the Medicaid income limit.

Ms. B did not present any evidence at hearing. When asked, Ms. B did not have any specific challenge to the Division's calculations or decision, but did not agree with Ms. C's Medicaid denial.

The Division correctly denied M C's Medicaid enrollment because she was over income. Accordingly, the Division's denial is affirmed.

Dated August 11, 2014.

Signed _____
Bride Seifert
Administrative Law Judge

Adoption

The undersigned by delegation from the Commissioner of Health and Social Services, adopts this decision as final under the authority of AS 44.64.060(e)(1).

Judicial review of this decision may be obtained by filing an appeal in the Alaska Superior Court in accordance with AS 44.62.560 and Alaska R. App. P. 602(a)(2) within 30 days after the date of this decision.

DATED this 27th day of August, 2014.

By: Signed _____
Signature
Bride A. Seifert _____
Name
Administrative Law Judge _____
Title

[This document has been modified to conform to the technical standards for publication.]

¹³ Ex. 7.1. It is not clear whether Ms. C has insurance. Whether she has insurance or not is not determinative in this matter. The household is over income under either scenario.