

STATE OF MICHIGAN
STATE OFFICE OF ADMINISTRATIVE HEARINGS AND RULES

ADMINISTRATIVE HEARINGS FOR THE
DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF: [REDACTED]

Claimant

Reg. No: 2009-21140
Issue No: 2001
Case No: [REDACTED]
Load No: [REDACTED]
Hearing Date:
May 26, 2010
Branch County DHS

ADMINISTRATIVE LAW JUDGE: Landis Y. Lain

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 upon claimant's request for a hearing. After due notice, a telephone hearing was held on May 26, 2010. Claimant personally appeared and testified.

ISSUE

Did the Department of Human Services (the department) properly deny claimant's application for the Adult Medical Program (AMP)?

FINDINGS OF FACT

The Administrative Law Judge, based upon the competent, material and substantial evidence on the whole record, finds as material fact:

- (1) On March 5, 2009, claimant applied for the Adult Medical Program.
- (2) On March 13, 2009, a budget was run reflecting his unearned income of \$ [REDACTED] every two weeks, which he received in unemployment.
- (3) Taken out of the income was the average of \$ [REDACTED] which he paid in child

support.

(4) The budget came out excess income for the Adult Medical Program.

(5) On March 13, 2009, the department caseworker sent claimant notice that his application was denied based upon the fact that he had excess income for the purposes of Adult Medical Program.

(6) On March 19, 2009, claimant filed a request for a hearing to contest the department's negative action.

CONCLUSIONS OF LAW

The Adult Medical Program (AMP) is established by Title XXI of the Social Security Act; (1115)(a)(1) of the Social Security Act, and is administered by the Department of Human Services (DHS or department) pursuant to MCL 400.10, *et seq.* Department policies are contained in the Program Administrative Manual (PAM), the Program Eligibility Manual (PEM) and the Program Reference Manual (PRM).

Based on claimant's age and the fact that he does not live with any minor children and did not demonstrate on his application that he was disabled, the Adult Medical Program (AMP) is the only form of Medical Assistance (MA) available through the Department of Human Services. According to RFT 236, the income limit for the Adult Medical Program for a person in claimant's circumstances was \$ [REDACTED] at the time that claimant requested a hearing. Claimant receives \$ [REDACTED] every two weeks in unemployment compensation benefits for a total of \$ [REDACTED] in total monthly unearned income. He paid an average of \$ [REDACTED] in child support at that time for a net monthly income of \$ [REDACTED]. \$ [REDACTED] exceeds the Adult Medical Program limit of \$ [REDACTED].

The Adult Medical Program (AMP) is available to individuals who meet all the eligibility factors in this item. The Department of Community Health (DCH) would refer to this quota as

the Adult Benefit waiver 1. Certain aliens are limited to coverage of the emergency services.

BEM, Item 640, p. 1. There are two categories of AMP:

- G Program (AMP-G), which is SDA cash payment recipients are automatically eligible for AMP when they:
 - Are not eligible for MA
 - Or other agency medical programs, and
 - Do not have private health care coverage.
- H Program (AMP-H), which is for customers who receives medical benefits only.

Customers must meet all eligibility factors in this item. PEM, Item 640, p. 1.

Income eligibility exists when the program group's net income does not exceed the program groups AMP income limit. The AMP income limit is AMP PRT 236 when the customers living arrangement changes during a month, use the living arrangement with the higher income limit. BEM, Item 640, pp. 2-3.

The Administrative Law Judge has examined the evidence and finds that the department correctly determined that claimant's countable unearned income was in excess of the Adult Medical Program gross income limit for a group size of one person which is \$ [REDACTED] PRT 236. Claimant did not dispute the accuracy of the budget nor the amount of his gross monthly income at the hearing. Claimant only stated for the record that he paid approximately of \$ [REDACTED] in child support, which would still leave him with excess income for purposes of the Adult Medical Program. The 1171 application indicated that claimant was not disabled. Claimant testified on the record that he has many household bills, which does not leave him any money for his monthly medications.

The claimant's grievance centers on dissatisfaction with the department's current policy. The claimant's request is not within the scope of authority delegated to this Administrative Law Judge pursuant to a written directive signed by the Department of Human Services Director, which states:

Administrative Law Judges have no authority to make decisions on constitutional grounds, overrule statutes, overrule promulgated regulations or overrule or make exceptions to the department policy set out in the program manuals.

Furthermore, administrative adjudication is an exercise of executive power rather than judicial power, and restricts the granting of equitable remedies. *Michigan Mutual Liability Co. v Baker*, 295 Mich 237; 294 NW 168 (1940).

This Administrative Law Judge has no equity powers and cannot make a decision in contravention to department policy.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that the department did act in compliance with department policy when it determined that claimant was not eligible to receive the Adult Medical Program (AMP), based upon his possession of excess income. The department has established this case by preponderance of the evidence.

Accordingly, the department's decision is AFFIRMED.

/s/

Landis Y. Lain
Administrative Law Judge
for Ismael Ahmed, Director
Department of Human Services

Date Signed: June 04, 2010

Date Mailed: June 7, 2010

NOTICE: Administrative Hearings may order a rehearing or reconsideration on either its own motion or at the request of a party within 30 days of the mailing date of this Decision and Order. Administrative Hearings will not order a rehearing or reconsideration on the Department's motion where the final decision cannot be implemented within 90 days of the filing of the original request.

The Claimant may appeal the Decision and Order to Circuit Court within 30 days of the mailing of the Decision and Order or, if a timely request for rehearing was made, within 30 days of the receipt date of the rehearing decision

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