

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.: 2009-35242
Issue No.: 2003
Case No.: [REDACTED]
Load No.: [REDACTED]
Hearing Date:
October 21, 2009
Wayne County DHS (59)

ADMINISTRATIVE LAW JUDGE: Colleen M. Mamelka

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 upon the Claimant's request for hearing. After due notice, a hearing was conducted from Detroit, Michigan on October 21, 2009. The Claimant appeared along with her authorized representative, [REDACTED] of [REDACTED]. [REDACTED] appeared on behalf of the Department.

ISSUE

Whether the Department properly determined the Claimant's Medical Assistance ("MA") eligibility date?

FINDINGS OF FACT

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

1. The Claimant is a MA/FAP recipient.
2. On February 18, 2009, the Claimant submitted an application for public assistance seeking in part MA benefits retroactive for January 2009.

3. In April of 2009, the Department completed a review of the Claimant's case.
4. The Claimant was previously covered under the "Plan First" MA program but was eligible for the MA-N program due to having a minor child in the home.
5. The Claimant requested that the Plan First coverage be removed in order to process the Claimant under the MA-N benefit program effective January 2009.
6. The Plan First coverage was recently cancelled and the MA-N program was activated effective December 1, 2009.
7. The Department acknowledged that it had agreed to activate MA-N coverage from January 2009 to current but was unable to put the coverage on for the prior months because the Plan First coverage was active.
8. The Department received the Claimant's written request for hearing protesting the Department's failure to process the Claimant's MA-N coverage effective January 2009.

CONCLUSIONS OF LAW

The Medical Assistance ("MA") program is established by Title XIX of the Social Security Act and is implemented by Title 42 of the Code of Federal Regulations ("CFR"). The Department of Human Services, formally known as the Family Independence Agency, administers the MA program pursuant to MCL 400.10, *et seq* and MCL 400.105. Department policies are found in the Program Administrative Manual ("PAM"), the Program Eligibility Manual ("PEM"), and the Program Reference Manual ("PRM").

The goal of the Medicaid program is to ensure that essential health care services are made available to those who otherwise could not afford them. PEM 105 Medicaid is also known as Medical Assistance ("MA"). *Id.* The Medicaid program is comprised of several categories; one category is for FIP recipients while another is for SSI recipients. *Id.* Programs for individuals

not receiving FIP or SSI are based on eligibility factors in either the FIP or SSI program thus are categorized as either FIP-related or SSI-related. *Id.* To receive MA under an SSI-related category, the person must be aged (65 or older), blind, disabled, entitled to Medicare or formally blind or disabled. *Id.* Families with dependent children, caretaker relatives of dependent children, persons under age 21 and pregnant, or recently pregnant women, receive MA under FIP-related categories. *Id.*

The Plan First Family Planning Program is a health coverage program operated by the Department of Community Health (“DCH”). PEM 124 Plan First enables DCH to provide family planning services to woman who would not have coverage for these services and who do not have other comprehensive health insurance. *Id.* In general, the plan targets non-pregnant women who are 19 to 44 years of age who are not covered by MA or other comprehensive health insurance. *Id.* In addition, family income must be at or below 185% of the federal poverty level; Michigan residents; and meet the Medicaid citizenship requirements. *Id.* Plan First coverage is limited to family planning services only. PEM 124

MA is available to a person who is under age 21 and meets the eligibility requirements in the calendar month being tested. PEM 132 MA is available to parents and other caretaker relatives who meet the eligibility factors outlined in PEM 135. These categories of MA coverage are FIP-related Group 2.

The Claimant submitted an application for MA benefits in February 2009 as a result of a [REDACTED] hospitalization. The Claimant has a minor child in the home. Apparently, the case was activated under the Plan First program although the Claimant was eligible under the MA-N program due to the dependent child. The Department agreed, however, until the Plan First coverage was removed, it was unable to activate the MA-N. Recently, the Plan First coverage

was removed but the Department was only able to activate MA-N coverage effective December 2009. Under these facts it is found that the Department's actions are not upheld.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, finds the Department's actions are not upheld.

Accordingly, it is ORDERED:

1. The Department's determination is REVERSED.
2. The Department shall reprocess the Claimant's February 2009 application seeking retroactive coverage for January 2009 in accordance with department policy.
3. The Department shall notify the Claimant and her authorized representative of the determination.
4. The Department shall supplement the Claimant for any lost benefits she was otherwise entitled to receive if otherwise eligible and qualified in accordance with department policy.

Colleen M. Mamelka

Colleen M. Mamelka
Administrative Law Judge
for Ismael Ahmed, Director
Department of Human Services

Date Signed: 11/05/09

Date Mailed: 11/05/09

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 receipt 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.

CMM/jlg

cc:

