

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: 2010-2550
Issue No: 2001;2009
Case No: [REDACTED]
Load No: [REDACTED]
Hearing Date:
January 7, 2010
Oakland County DHS

ADMINISTRATIVE LAW JUDGE: Robert J. Chavez

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 hearing was held on January 7, 2009.

ISSUES

Was the claimant's AMP application properly denied for an enrollment freeze?

Was the claimant's MA application properly denied because claimant did not allege that he was disabled?

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 July 8, 2009, claimant applied for Medicaid.
- (2) Claimant's application did not state that he alleged disability.
- (3) Claimant was subsequently evaluated for all other Medicaid programs and was found ineligible.

- (4) Claimant was then evaluated for the Adult Medical Program.
- (5) At the time of the application, enrollment in AMP was frozen.
- (6) Claimant's Medicaid application was subsequently denied.
- (7) On October 2, 2009, claimant requested a hearing.

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 (DHS or department) administers the MA program pursuant to MCL 400.10, *et seq.*, and MCL 400.105. Department policies are found in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) and the Bridges Reference Manual (BRM) and Reference Tables (RFT).

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 Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) and the Bridges Reference Manual (BRM).

Claimants must meet all eligibility requirements to receive AMP benefits. BEM 640. However, a claimant may only be eligible for AMP if there is not an enrollment freeze. Any AMP application received during an enrollment freeze must be registered and denied. BEM 640. Claimant's application was registered during an enrollment freeze in AMP. Therefore, claimant's AMP application was correctly denied.

However, there must also be an examination of whether the Department should have been considering claimant as eligible for the AMP program to begin with. Claimant applied for Medicaid on July 8, 2009. Medicaid applicants must be given consideration for the program that

would be most beneficial to the claimant. BEM 105. Claimant argued that he should have been considered for disability-based Medicaid. The Department argued that claimant's application did not notify the Department that he was disabled.

It is true that the Department must consider claimant's eligibility for all Medicaid programs. However, claimant is in error when he argues that he was not considered for disability-based Medicaid. Claimant was considered for disability-based Medicaid—the Department examined his application, saw that claimant was not alleging disability, and concluded that claimant did not meet the standards for disability-based Medicaid.

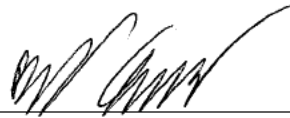
As claimant has not presented any evidence or allegations that the Department did not consider him for any other Medicaid program, and given that the Department testified that all other Medicaid programs were considered for the claimant, the undersigned holds that the Department followed all applicable regulations when considering claimant's Medicaid application, and was correct in its conclusion that claimant was not eligible for any other Medicaid program but AMP. Therefore, the Department's actions in the current case are correct.

As a side-note, the undersigned will note that the claimant was not actually harmed by this decision; claimant filed a second Medicaid application a few weeks after he filed the first application. The Department has not acted on this application in any way, and assured claimant at hearing that this application alleged disability, and also would include a retroactive application. Therefore, even though this first application must be denied, the second application would cover all time periods that were applied for with the first application. As such, claimant will not be harmed by the proper denial of the first application.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, finds that the Department was correct when it determined claimant was not eligible for either the Medicaid disability program or AMP.

Accordingly, the Department's decision in the above stated matter is, hereby,
AFFIRMED.



Robert J. Chavez
Administrative Law Judge
for Ismael Ahmed, Director
Department of Human Services

Date Signed: 03/01/10

Date Mailed: 03/05/10

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.

RJC/dj

cc:

