STATE OF MICHIGAN MICHIGAN ADMINISTRATIVE HEARING SYSTEM ADMINISTRATIVE HEARINGS FOR THE DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF:

Reg. No: 2010-47813

Issue No: 2009

Case No:

Hearing Date: September 15, 2010

Newaygo County DHS



ADMINISTRATIVE LAW JUDGE: Landis Y. Lain

HEARING DECISION

This matter is before the undersigned Admini strative Law Judge pursuant to MCL 400.9 and MCL 400.37 upon claimant's request for a hearing. After due notic e, a telephone hearing was held on September 15, 2010. Claimant personally appeared and testified.

ISSUE

Did the Department of Human Services (the department) properly deny claimant's application for Medical Ass istance (MA-P) and retroactive Medical Assist ance (retro MA-P)?

FINDINGS OF FACT

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

- On September 18, 2009, c laimant filed an application for Medica l Assistance and retroactive Medical Assistance benefits alleging disability.
- (2) On February 10, 2010, the Medi cal Review Te am denied claimant's application stating that claimant c ould perform other work pursuant to Medical Vocational Rule 201.21.
- (3) On February 16, 201 0, the department casework er sent claimant notice that his application was denied.
- (4) On May 11, 2010, claimant filed a request for a hearing to contest the department's negative action.

- (5) On 19, 2010, the St ate Hearing Rev iew T eam again denied c laimant's application stating in its' analys is and recommended decision: that it had insufficient evidence and requested an independent internist evaluation.
- (6) The hearing was held on September 15, 2010. At the hearing, claimant waived the time periods and request ed to submit additional medical information.
- (7) Additional medical information wa s submitted and sent to the State Hearing Review Team on August 9, 2011.
- (8) On August 22, 2011, the State Hear ing Review Team approved claimant for Medical Assistance and retroactive Medical Assistance benefits stating in its' analysis and recommended decisio n: the claimant has recurring deep vein thrombosis of the lower extremities sinc e June 2009. He experiences swelling and pain when on his feet for an extended amount of time. The medical evidence sufficient ly demonstrates that the intent and severity of listing 4.11 is met. MA-P is approved. Retroactive MA-P was considered in this c ase and is approved effective June 1, 2009. At the medical review of August 2012 request medical records from the last 6 months.
- (9) Claimant is a 48-year-old man w hose bir th date is Claimant is 6'1" tall and weighs 260 pounds. Claimant attended the 12 grade and has no GED. Claimant is able to read and write, add, subtract and count money. Claimant was in Special Educ ation for math and reading.
- (10) Claimant last worked in 2009 as a relocation specialist and mover.
- (11) Claimant alleges as disabling impairments: blood clots and diabete s mellitus.

CONCLUSIONS OF LAW

The regulations governing the hearing and a ppeal process for applicants and recipients of public assistance in Michigan are found in the Michigan Administrative Code, MAC R 400.901-400.951. An oppor tunity for a hearing shall be granted to an ap plicant who requests a hearing because his or her claim for assistance has been denied. MAC R 400.903(1). Clients have the right to contest a department decision affecting eligibility or benefit levels whenever it is believed that the decision is incorrect. The department will provide an administrative hearing to review the decision and determine the appropriateness of that decision. BAM 600.

The Medical Assistance (MA) program is estab lished by Title XIX of the Social Sec urity Act and is implemented by Title 42 of the C ode 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 Program Reference Manual (PRM).

Because of the State Hearing Review Team determination it is not neces sary for this Administrative Law Judge to discuss the is sue of disability per BAM, Item 600. The department is required to initiate a determination of claimant's financial eligibility for the requested benefits if not previously done.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusion sof law, decides that the claimant meets the definition of medically disabled for the Medical Assistance program and the retroactive Medical Assistance program as of the September 18, 2009, application date and for the 3 months prior of June, July and August 2009.

Accordingly, the department's decision is REVERSED. The depar tment is ORDERED to initiate a review of the Sept ember 18, 2009, Medical Ass istance and retroactive Medical Assistance application if it has not already done so to determine if all other non-medical eligibility criteria are met. The department shall inform the claimant of a determination in writing. The department shall conduct a medical review in August 2012.

	<u>/s/</u>
Landis	Y. Lain
	Administrative Law Judge
	for Maura D. Corrigan, Director
	Department of Human Services
Date Signed: August 26, 2011	
Date Mailed:August 29, 2011	

NOTICE: Administrative Hearings may or der 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 Hear ings 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.

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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 ti mely request for rehearing was made, within 30 days of the receipt date of the rehearing decision.

LYL/alc

