

STATE OF MICHIGAN  
STATE OFFICE OF ADMINISTRATIVE HEARINGS AND RULES  
ADMINISTRATIVE HEARINGS FOR THE  
DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF:

[REDACTED]

Reg. No: 201029431

Issue No: 2015

Case No: [REDACTED]

Load No: [REDACTED]

Hearing Date:

September 16, 2010

Macomb 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 September 16, 2010.

ISSUE

Did the Department properly consider claimant for all Medicaid programs?

FINDINGS OF FACT

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

- (1) Claimant was a Medicaid applicant in Macomb County.
- (2) Claimant applied for Medicaid on March 9, 2009, with a retroactive application back to January 2009.
- (3) Claimant's only child turned 19 years old in [REDACTED] 2009.
- (4) Claimant was not evaluated for eligibility for all Medicaid programs.
- (5) Claimant was represented at hearing by [REDACTED].

### 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).

Persons may qualify under more than one MA category. Federal law gives them the right to the most beneficial category. The most beneficial category is the one that results in eligibility or the least amount of excess income. The Department must consider all the MA category options in order for the client's right of choice to be meaningful. Eligibility under all categories must be considered when eligibility ceases in one category. BEM 105.

The Department testified that claimant had been denied for AMP when claimant applied for Medicaid. Claimant was also considered for Group 2 Caretaker MA at application and found to be ineligible. However, claimant's representative, during cross-examination, asked the Department representative if claimant had been considered for LIF Medicaid; the Department representative testified that she was unsure if claimant had been evaluated or not.

As the only negative action notice in the file is for AMP, and as there is nothing in the file that shows that the claimant was evaluated for all other forms of Medicaid, and as the Department was unsure as to whether the claimant was evaluated for all other forms of Medicaid, and as the circumstances of the case provide an indication that

claimant may have been eligible for LIF Medicaid, the undersigned holds that the claimant was not evaluated for all forms of Medicaid.

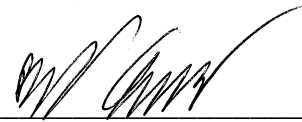
As such, the Department committed a clear error, and must reconsider the application.

### 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 denied claimant's Medicaid application.

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

The Department is ORDERED to process claimant's Medicaid application retroactive to the date of application, and evaluate claimant's eligibility for all Medicaid programs.



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

Date Signed: 09/28/10

Date Mailed: 09/28/10

**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:

