

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: 2010-6037
Issue No: 2001
Case No: [REDACTED]
Load No: [REDACTED]
Hearing Date:
March 18, 2010
Montmorency County DHS

ADMINISTRATIVE LAW JUDGE: Gary F. Heisler

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 March 18, 2010. Claimant appeared and testified.

ISSUE

Did the Department of Human Services properly close Claimant's Adult Medical Program (AMP) because he had private health care coverage?

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 Medical Assistance (MA) benefits. On the application Claimant disclosed that he had [REDACTED] health coverage under [REDACTED]
- (2) On April 7, 2009, Claimant was incorrectly approved for the Adult Medical Program (AMP).

(3) On July 1, 2009, Claimant was sent a Notice of Case Action (DHS-1605) which stated his Adult Medical Program (AMP) would close on August 1, 2009. Claimant had paid for, and still had private health care coverage under [REDACTED] through [REDACTED]

(4) On August 1, 2009, Claimant's Adult Medical Program (AMP) closed.

(5) On September 2, 2009, Claimant submitted a request for hearing.

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

It is undisputed that Claimant had private health care coverage at the time of application and up until August 16, 2009. Department policy provides the following guidance for case workers. The Department's policies are available on the internet through the Department's website.

ADULT MEDICAL PROGRAM

DEPARTMENT POLICY

DETERMINE IF AN ENROLLMENT FREEZE IS IN EFFECT BEFORE CONSIDERING ELIGIBILITY FOR THIS PROGRAM.

AMP Only

The Adult Medical Program (AMP) is available to individuals who meet all the eligibility factors in this item. Certain aliens are limited to coverage of emergency services (ESO).

CATEGORIES

There are two categories of AMP.

- **G program (AMP-G)** - SDA cash payment recipients are eligible for AMP when they:
 - Are not eligible for MA (see “**Exceptions**” on page 1) or other Department medical programs, **and**
 - Do not have private health care coverage (see “Private Health Coverage” below), and
 - There is not an enrollment freeze in effect in the month of application.

- **H program (AMP-H)** –

Clients receive medical benefits only. Clients must meet all eligibility factors in this item.

NONFINANCIAL ELIGIBILITY FACTORS

AMP-H

Private Health Care Coverage

A person who has private health care coverage is **not** eligible for AMP.

Health care coverage includes comprehensive health insurance (see PRG) and enrollment in a medical care plan such as a health maintenance organization (HMO).

Medicare is considered health insurance for AMP purposes. Persons whose coverage is limited to dental and/or vision coverage are eligible for AMP. (BEM 640)

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides the Department of Human Services properly closed Claimant’s Adult Medical Program (AMP) because he had private health care coverage.

It is ORDERED that the actions of the Department of Human Services, in this matter, are UPHELD.

/s/ _____
Gary F. Heisler
Administrative Law Judge
for Ismael Ahmed, Director
Department of Human Services

Date Signed: April 13, 2010


Date Mailed: April 13, 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.

GFH/alc

cc:

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