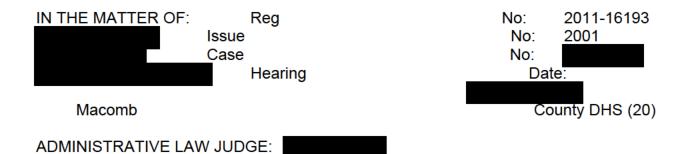
STATE OF MICHIGAN STATE OFFICE OF ADMINISTRATIVE HEARINGS AND RULES ADMINISTRATIVE HEARINGS FOR THE DEPARTMENT OF HUMAN SERVICES



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 telephone hearing was conducted from Detroit, Michigan on The Claimant appeared and testified.

ES appeared on behalf of the Department.

ISSUE

Whether the Department properly denied the Claimant's Adult Medical Program ("AMP") application based on excess income.

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 applied for Medical Assistance on

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2. On the Claimant was sent a Notice of Case Action, which denied her application for Medical Assistance and specifically for the Adult Medical Program (AMP) due to excess income.

- 3. The Claimant received monthly in unemployment compensation benefits at the time of the application. This amount was confirmed by the Claimant.
- 4. The Department determined that the Claimant's unearned income exceeded the income eligibility limit for AMP and denied the Claimant's application for AMP. Exhibit 2.
- 5. The Claimant requested a hearing on hearing regarding the denial of his application for medical assistance AMP. The Department received the application on

CONCLUSIONS OF LAW

The Adult Medical Pr ogram (AMP) is establis hed by Title XXI of the Social Security Act; (1115) (a) (1) of the Social Security Act, and is administ ered by the Department of Human Services (formerly known as the Family Independence Agency) pursuant to MCL 400.10, et se q.. Department policies are contained in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) and the Program Reference Manual (PRM).

The Adult Medical Pr ogram (AMP) is available to individuals who meet all the eligibility factors. BEM 640. There are two categories of AMP. The G program (AMPG) is for SDA cash payment recipients who are not eligible for MA or other Department medical programs, and who do not have private health care coverage. The H program

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(AMP-H) is available to clients who receive medical benefits only. BEM 640, p. 2. The Claimant if eligible for AMP would be in the H category.

Income eligibility exis ts when the applic ant's net income does not exceed the program group's AMP income limit. BEM 640, p. 3, RFT 236. C ountable income is income remaining after applying AMP policy in PEM 500. Id. Only available income is used. Available means income which is received or can reasonably be anticipated.

The monthly inc ome limit in for an AM P group of one living independently was per month. BEM 640, RFT 236. In the present case, Claimant received unemployment benefits in the amount of per month. The Department's decision finding the Claimant's income exceeded the AMP income limit was correct. Based upon the foregoing facts and relevant law, it is found that the Department's determination to deny the Claimant's AMP application is AFFIRMED.

DECISION AND ORDER

The Department's dec ision to deny the Claim ant's application for AMP benef its, because the Claimant's income exceeded the AMP income limit, is AFFIRMED.



for Department

Law Judge Maura Corrigan, Director of Human Services

Date Signed: 04/21/11

Date Mailed: 04/25/11

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 orde rarehearing or

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reconsideration on the Department's mo tion where the final decis ion 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 ti mely request for rehearing was made, within 30 days of the receipt date of the rehearing decision.

LMF/dj

