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

IN THE MATTER OF:



Reg. No:	2011-24185
Issue No:	2015
Hillsdale County DHS	

ADMINISTRATIVE LAW JUDGE: Suzanne L. Morris

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 The claimant appeared and provided testimony, along with her husband,

ISSUES

Did the department properly close the claimant's Medical Assistance (MA) case?

FINDINGS OF FACT

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

- 1. The claimant had been receiving MA benefits on the basis of having a dependent child in the home.
- 2. The claimant's child turned
- 3. The department mailed the claimant a Notice of Case Action (DHS-1605) on March 1, 2011 that indicated beginning April 1, 2011 the claimant's MA benefits would close because she was not under 21, over 65, blind, disabled, pregnant or a caretaker of a minor child in the home. (Department Exhibit 4 5)
- 4. The claimant submitted a hearing request on March 16, 2011.

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 Program Reference Manual (PRM).

The goal of the Medicaid program is to ensure that essential health care services are made available to those who otherwise could not afford them. Medicaid is also known as Medical Assistance (MA). The local office is responsible for determining a client's eligibility, calculating their level of benefits and protecting their rights. BAM 105.

The Medicaid program is comprised of several sub-programs or categories. One category is FIP recipients. Another category is SSI recipients. There are several other categories for persons not receiving FIP or SSI. However, the eligibility factors for these categories are based on (related to) the eligibility factors in either the FIP or SSI program. Therefore, these categories are referred to as either FIP-related or SSI-related.

To receive Medicaid under an SSI-related category, the person must be aged (65 or older), blind, disabled, entitled to Medicare or formerly blind or disabled. Families with dependent children, caretaker relatives of dependent children, persons under age 21 and pregnant, or recently pregnant women, receive Medicaid under FIP-related categories.

In this case, the claimant is disputing the department's closure of her MA benefits. Claimant had been receiving FIP-related MA benefits, on the basis that she had a minor child in the home. However, the claimant's minor son turned 18 in April, 2011. According to department policy, the minor child must be under age 18 or must be age 18 and a full-time student in a high school or in the equivalent level of vocational or technical training as defined in FIP policy in BEM 245. The student must be expected to complete his educational or training program before age 19. BEM 135.

The claimant testified in the hearing that her son is currently a junior in high school. He will complete his high school education in June, 2012, which is after he reaches age . Therefore, the department properly determined the claimant was no longer eligible for MA on the basis of having a minor child.

The claimant testified at the hearing that her husband is disabled and requires 24-hour care, which precludes her from working outside the home and obtaining health insurance through employment. Department policy requires the claimant to meet eligibility criteria to qualify for an MA program. Claimant acknowledged at the hearing that she is not blind, disabled, and pregnant, a parent or caretaker relative of a

dependent child, over years old or under years old. Thus, the department correctly determined there is no basis for MA coverage for the claimant.

While this Administrative Law Judge is entirely sympathetic to the claimant's situation, Administrative law judges have no authority to make decisions on constitutional grounds, overrule statutes, overrule promulgated regulations or overrule or make exceptions to the department policy set out in the program manuals. Delegation of Hearing Authority, February 22, 2011, per PA 1939, Section 9, Act 280. The ALJ determines the facts based only on evidence introduced at the hearing, draws a conclusion of law, and determines whether DHS policy was appropriately applied. In this case, this Administrative Law Judge is unable to find that the department did not properly apply department policy.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that the department properly closed the claimant's Medical Assistance benefits.

Accordingly, the department's determination is UPHELD. SO ORDERED.

_/s/___ Suzanne L. Morris Administrative Law Judge for Maura D. Corrigan, Director **Department of Human Services**

Date Signed:_ 5/31/11_____

Date Mailed:_ 5/31/11_____

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.

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SM/ds

