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

п	1 TI		BA A	T-	ΓFR		┏.
П	u II	HE	IVI	۱ı	ırk	U	-

	Reg. No.: Issue No.: Case No.: Hearing Date: County:	201146740 2018 April 30, 2012 SSPC-West
ADMINISTRATIVE LAW JUDGE: Alice C. El	kin	
HEARING D	<u>ECISION</u>	
This matter is before the undersigned Adminis and MCL 400.37 following Claim ant's reque telephone hearing was held on Apr il 30, 2012 behalf of Claimant inc luded Claimant. Part ici Services (Department) included Specialized Medicaid Processing Unit.	est for a hearing. Afte 2, from Detroit, Mi_chi pants on behalf of De	er due notice, a gan. Participants on
<u>ISSU</u>	<u>E</u>	
Did the Departm ent properly 🔀 deny Claima for:	n t's application 🔲 cl	ose Claimant's case
☐ Family Independence Program (FIP)? ☐ Food Assistance Program (FAP)? ☐ Medical Assistance (MA)? ☐ Direct Support Services (DSS)?		sistance (AMP)? Assistance (SDA)? ent and Care (CDC)?
FINDINGS C	OF FACT	
The Administrative Law Judge, based on t evidence on the whole record, finds as materia	he competent, materi al fact:	al, and substantial
 Cla imant ☐ applied for benefits ☒ received ☐ Family Independence Program (FIP). ☐ Food Assistance Program (FAP). ☒ Medical Assistance (MA). ☐ Direct Support Services (DSS). 	Adult Medical As	ssistance (AMP). Assistance (SDA). ent and Care (CDC).

2.	On May 1, 2011, the Department I denied Claimant's MA application due to no continued eligibility. I closed Claimant's interim MA case
3.	On July 20, 2011, the Department sent Claimant Claimant's Authorized Representative (AR) notice of the denial. Closure.
4.	On July 27, 2011, Claimant filed a hearing request, protesting the \boxtimes denial of the application. \square closure of the case.
	CONCLUSIONS OF LAW
	partment policies are contained in the Br idges Administrative Manual (BAM), the dges Eligibility Manual (BEM), and the Reference Tables Manual (RFT).
Re 42 Ag thr	The Family Independence Program (FIP) was established purs uant to the Personal sponsibility and W ork Opportunity Reconc iliation Act of 1996, Public Law 104-193, USC 601, et seq. The Department (formerly k nown as the Family Independence ency) administers FIP pursuant to MCL 400.10, et seq., and 1999 AC, R 400.3101 ough Rule 400.3131. FIP replaced the Aid to Dependent Children (ADC) program ective October 1, 1996.
pro im Re Ag	The Food Assistanc e Program (FAP) [fo rmerly known as the Food Sta mp (FS) ogram] is establis hed by the Food St amp Act of 1977, as amend ed, and is plemented by the federal regulations contained in Title 7 of the Code of Federal egulations (CFR). The Department (formerly known as the Family Independenc eercy) administers FAP pursuant to MCL 400.10, et seq., and 1999 AC, R 400.3001 ough Rule 400.3015.
Se Th Ag	The Medical Ass istance (MA) program is es tablished by the Title XIX of the Soc ial curity Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). e Department of Human Services (formerly known as the Family Independ ence ency) administers the MA program pursuant to MCL 400.10, et seq., and MC L 0.105.
	The Adult Medical Program (AMP) is established by 42 USC 1315, and is ministered by the Department pursuant to MCL 400.10, <i>et seq</i> .
for Se pro	The State Disabilit y Assistance (SDA) program, which provides financial assistance disabled persons, is established by 2004 PA 344. The D epartment of Human rvices (formerly known as the Family Independence Agency) administers the SDA ogram pursuant to MCL 400.10, et seq., and 2000 AACS, R 400. 3151 through Rule 0.3180.

and XX of the Soc ial Security Act, the Ch ild Care and Developm ent Block Grant of
1990, and the Personal Responsibility and Work Opportunity Reconciliation Act of 1996
The program is implemented by Title 45 of the Code of Fede ral Regulations, Parts 98
and 99. The Depart ment provides servic es to adults and children pursuant to MCL
400.14(1) and 1999 AC, R 400.5001 through Rule 400.5015.
☐ Direct Support Services (DSS) is adminis tered by the Department pursuant to MCL
400.57a, et. seq., and Mich Admin Code R 400.3603.

Additionally, an individual may be eligible for Medical Assistance (MA) coverage if the individual qualifies under a FIP-related MA category or an SSI-related MA cat egory. To receive MA under an SSI-related category, the person must be aged (65 or older), blind, disabled, entitled to Medicare or formerly blind or disabled. BEM 105. To receive MA under a FIP-related category, the person must have dependent children, be a caretaker relative of dependent children, or be under age 21 and pregnant or recently pregnant. BEM 105. Adult Medical Program (AMP) provides limited medical services for persons not eligible for MA coverage. BEM 100.

In this cas e, the Department provided CI aimant with interim MA coverage under the terms of a settlement agreement while it ass essed his ongoing eligibility for MA. At the hearing, the Department test ified that Claimant comple ted a Medicaid Settlement Agreement Supplem ental Questionnaire (DHS-1011A), which it used to determine Claimant's eligibility for MA. Claimant indicated in his DHS-1011A that he was disabled. However, the Department learned in processing Claimant's DHS-1011A that on May 24, 2011 Claimant had withdrawn his ap peal with the Social Securi ty Administration (SSA) concerning the SSA's denial of his application for Social Sec urity Insurance (SSI) benefits based on his disability. Claimant confirmed that he had withdrawn his appeal with the SSA. Eligibility for MA based on disability or blindness does not exist once the SSA's d etermination is final. BEM 260. By withdrawin g his appea I con cerning the SSA's finding that he was not disabled fo r SSI purpos es, Claimant caused the SSA's determination to become final. As such, Claim ant was not disabled for MA purposes. At the hearing, Claimant also verified that, consistent with the information he provided in the DHS-1011A, he was not under age 21 or over age 65 and there were no minor children in his home. Thus , the Department acted in a ccordance with Department policy when it found that Claim ant did not meet any of the eligibility requirements for SSI-related or FIP-related MA and denied his MA application effective May 1, 2011.

At the hearing, the Department testified that, because Claimant received AMP coverage prior to being covered by the interim MA, if Claimant was found ine ligible for continued MA coverage, his coverage would revert to AMP.

Based upon the abov e Findings of Fact and Co nclusions of Law, and for the reasons stated on the record, the Administrative Law Judge concludes that the Department

 ☑ properly denied Claimant's application ☐ properly closed Claimant's case ☐ improperly closed Claimant's case ☐ improperly closed Claimant's case 					
for:					
DECISION AND ORDER					
The Administrative Law Judge, based upon the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, finds that the Department ☐ did not act properly. ☐ did not act properly.					
Accordingly, the Department's AMP FIP FAP MA SDA CDC DSS decision is AFFIRMED REVERSED for the reasons stated above and on the record.					

Alice C. Elkin
Administrative Law Judge
For Maura Corrigan, Director
Department of Human Services

Date Signed: May 3, 2012

Date Mailed: May 3, 2012

NOTICE: Michigan Administrative Hearing Syst em (MAHS) may order a rehearing or reconsideration on either its own motion or at the request of a par ty within 30 days of the mailing date of this Dec ision and Order. MAHS will not or der a rehearing or 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. (60 days for FAP cases)

The Claimant may appeal the Decision and Order to Circuit Court within 30 days of the receipt 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.

Claimant may request a rehearing or reconsideration for the following reasons:

- A rehearing <u>MAY</u> be granted if there is newly discovered evidence that could affect the outcome of the original hearing decision.
- A reconsideration **MAY** be granted for any of the following reasons:
- misapplication of manual policy or law in the hearing decision,
- typographical errors, math ematical error, or other obvious errors in the he aring decision that effect the substantial rights of the claimant:
- the failure of the ALJ to address other relevant issues in the hearing decision.

Request must be submitted through the local DHS office or directly to MAHS by mail at Michigan Administrative hearings

Re consideration/Rehearing Request
P. O. Box 30639
Lansing, Michigan 48909-07322

ACE/cl

