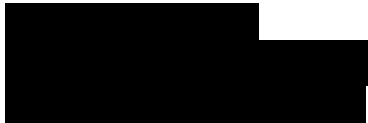


STATE OF MICHIGAN  
MICHIGAN ADMINISTRATIVE HEARING SYSTEM  
ADMINISTRATIVE HEARINGS FOR THE  
DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF:



Reg. No: 201131314  
Issue No: 2000  
Case No: [REDACTED]  
Hearing Date:  
June 23, 2011  
Wayne County DHS (18)

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 June 23, 2011.

ISSUE

Were claimant's AMP benefits properly placed into closure?

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 MA recipient in Wayne County.
- (2) Claimant had a MA deductible of \$947.
- (3) A hearing was held before the Administrative Law Judge on June 23, 2011 in Detroit, Michigan. The witnesses participated by telephone from the Department of Human Services office in Wayne County, Michigan, District 18.

- (4) The Department failed to consider claimant's Medicare premiums of \$96 when calculating whether claimant had met their deductible for each month since March 2010.
- (5) The Department agreed to recalculate claimant's Medicaid eligibility for each month retroactive to March 2010.
- (6) As a result of this agreement, claimant indicated that he no longer wished to proceed with the hearing.

### 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).

Under Bridges Administrative Manual Item 600, clients have the right to contest any agency decision affecting eligibility or benefit levels whenever they believe the decision is illegal. The agency provides an Administrative Hearing to review the decision and determine if it is appropriate. Agency policy includes procedures to meet the minimal requirements for a fair hearing. Efforts to clarify and resolve the client's concerns start when the agency receives a hearing request and continues through the day of the hearing.

In the present case, the Department agreed to recalculate claimant's Medicaid eligibility for each month retroactive to March 2010 taking into account claimant's Medicare premiums.

Therefore, as a result of the settlement, it is unnecessary for the Administrative Law Judge to render a decision.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that the Department and the claimant have reached a settlement in the current case. Therefore, it is unnecessary for the Administrative Law Judge to render a decision.

The Department is ORDERED to recalculate claimant's Medicaid eligibility for each month retroactive to March, 2010, taking into account claimant's Medicare premiums.



---

Robert J. Chavez  
Administrative Law Judge  
for Maura Corrigan, Director  
Department of Human Services

Date Signed: 07/06/11

Date Mailed: 07/07/11

**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.

RJC/dj

CC:

