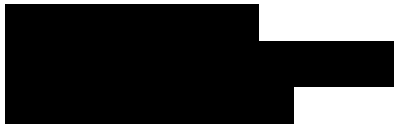


STATE OF MICHIGAN
MICHIGAN ADMINISTRATIVE HEARING SYSTEM
ADMINISTRATIVE HEARINGS FOR THE
DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF:



Reg. No.: 2011-41816
Issue No.: 2001
Case No.: [REDACTED]
Hearing Date: August 25, 2011
DHS County: Wayne (19)

ADMINISTRATIVE LAW JUDGE: Michael J. Bennane

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9; MSA 16.409 and MCL 400.37; MSA 16.437 upon the claimant's request for a hearing. After due notice a telephone hearing was held from Detroit, Michigan on August 25, 2011. The claimant appeared and testified.

ISSUE

Did the Department of Human Services (Department) properly close the claimant's Medical Assistance (MA)?

FINDINGS OF FACT

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

1. On April 27, 2011, the claimant's AMP case was redetermined.
2. The AMP coverage was not closed.
3. On June 10, 2011, the claimant filed a request for a 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 (formerly known as the Family Independence Agency) pursuant to MCL 400.10, *et seq.* Department policies are contained in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) and the Bridges Reference Manual (BRM).

This Administrative Law Judge finds the Department did not close the claimant's AMP coverage.

The claimant was also concerned about a medical bill he received for \$20,000.00. The Department correctly informed the claimant that AMP covers office visits, prescriptions, emergency room visits, and outpatient visits.

EXHIBIT I - AMP COVERED SERVICES

AMP Covered Services:

Physician services (covered by the Medicaid program) provided by an MD or DO.

Prescribed drug products ordered by an MD, DO, Dentist (covered by the Medicaid program).

Laboratory tests and radiology (x-ray) services ordered by an MD, DO, or Nurse Practitioner for diagnostic and treatment purposes. Hospital outpatient services.

Non-emergency services rendered in the hospital or emergency room require a written medical authorization. Diabetes patient education is covered in the outpatient setting.

Limited medical supplies.

Ambulance.

Annual physical exams, including a pelvic exam, breast exam and pap test.

Mental health services through CMHSP.

Physician services rendered by an oral surgeon who is enrolled as a Medicaid provider.

Substance abuse treatment through CMHSP. (BEM 640, p.5).

The Department should inform the claimant about Wayne County Plus Care.

DECISION AND ORDER

The Administrative Law Judge, based on the above findings of fact and conclusions of law, AFFIRMS the Department's decision in the instant case.

Michael



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

Date Signed: September 15, 2011

Date Mailed: September 15, 2011

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.

MJB/cl

cc:

