

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

IN THE MATTER OF:

[REDACTED]

Reg. No: 2011 8284  
Issue No: 2001, 2014  
Case No: [REDACTED]  
Hearing Date:  
February 7, 2011  
Macomb County DHS (12)

ADMINISTRATIVE LAW JUDGE: Lynn M. Ferris

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 by telephone in Detroit on February 7, 2011 at which time the Claimant appeared and testified. The Claimant's authorized representative, [REDACTED] [REDACTED] also appeared and testified. Belinda Howard, ES and Renatta Carter, Assistant Payments Supervisor appeared and testified on behalf of the Department.

ISSUE

Was the claimant's application for Medical Assistance properly denied?

Whether the Department's late notice to the Claimant's authorized representative of the Facility Admission Notice denial and Notice of Case Action requires that the Department's denial of the application be reversed.

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 applied for medical assistance on May 26, 2010. At the time of the application the Claimant's authorized representative was noted on the application and several additional forms were filed including an authorization to represent and a retroactive application. Exhibit 1
2. Thereafter, the Department denied the Claimant's application because the Adult Medical Program for which the Claimant might be eligible for was closed to applicants. Exhibit 2
3. No verification checklist was sent out by the Department with regard to the May 26, 2010 application.
4. The Department sent a Notice of Case Action to the Claimant on June 8, 2010 which denied the application because the AMP program was closed. Exhibit 2
5. The Claimant was also not eligible for GP 2 caretaker medical assistance because the Claimant's children were not residing in the home at the time of the application as they were in foster care homes.
6. The Claimant reapplied for Medical Assistance in November 2010 and is currently eligible for AMP.
7. The Claimant's authorized representative did not challenge the action denying the application taken by the Department and stated the issue was not substantive, but a procedural issue based on the fact that the Representative did not receive a verification checklist and proper notice of case action denying the application.
8. The Department sent the Claimant the Notice of Case Action and sent the Claimant's authorized representative the Facility Admission Notice on two

occasions, July 14, 2010 and October 13, 2010 indicating the application was denied. Exhibit 3

9. The Claimant's representative acknowledged receiving the Facility Admission Notice denial on September 24, 2010 and the Notice of Case Action in October 2010. Claimant Exhibit 1
10. The Claimant's representative, [REDACTED], filed a request for a hearing dated November 12, 2010, which was received by the Department November 17, 2010, protesting the failure of the Department to provide notice of the denial of the Claimant's application, that no verification checklist was received and that the Department did not consider FIP related MA as the Claimant has children in the home.

#### 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 Program Administrative Manual (PAM), the Program Eligibility Manual (PEM) and the Program Reference Manual (PRM) and Reference Tables (RFT).

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 (DHS or Department) pursuant to MCL 400.10, *et seq.* Department policies are contained in the Program Administrative Manual (PAM), the Bridges Eligibility Manual (PEM) and the Reference Manual (PRM).

Claimants must meet all eligibility requirements to receive AMP benefits. BEM 640. In this case no eligibility requirements were analyzed as the AMP program was closed to new applicants when the Claimant applied. Thus the Department's denial of the application is correct and is affirmed.

As regards the issue of whether the Department considered FIP based Medical Assistance, by the Claimant's own admission there were no children living in the family home at the time the application was filed and thus the Claimant was not eligible for Group 2 caretaker MA. The Authorized Representative's belief that the Claimant had children living in the home was mistaken. BEM 135. The only potentially substantive issue regarding whether the Department considered the FIP Medical Eligibility raised by the hearing request is moot as the Claimant did not qualify at the time of the application as none of his children were in the home.

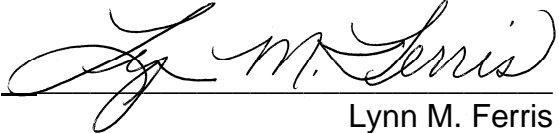
The issue with regard to the verification checklist not being received by the authorized representative is also moot as no verification checklist was requested to be completed in regards to the application.

Lastly, while the Authorized Representative should have received notice at the time the application was denied as did the Claimant, this issue is strictly procedural and does not require that the Department's denial of the application be reversed as this procedural issue is not a substantive challenge to the Department's decision to deny the application. In addition the Authorized Representative did receive the Admission Notice denial and ultimately the Notice of Case Action and its appeal was not challenged as being untimely so its appeal rights were not affected.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, finds that the Department was correct when it determined that the Claimant's application for Medical Assistance was denied due to the AMP program being closed and that the Claimant was not eligible as a FIP MA caretaker relative.

Accordingly, the Department's decision in the above stated matter is, hereby, AFFIRMED.



Lynn M. Ferris  
Administrative Law Judge  
for Maura Corrigan, Director  
Department of Human Services

Date Signed: 02/15/11

Date Mailed: 02/16/11

**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.

LMF/dj

cc:

