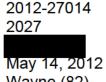
STATE OF MICHIGAN MICHIGAN ADMINISTRATIVE HEARING SYSTEM ADMINISTRATIVE HEARINGS FOR THE DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF:

Reg. No.: Issue No.: 2027 Case No.: Hearing Date: County: Wayne (82)



ADMINISTRATIVE LAW JUDGE: Michael J. Bennane

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 following Claim ant's request for a hearing. After due notice, a telephone hearing was held on Ma y 14, 2012, from Detroit, Mi chigan. Participants on behalf of Claimant included the claimant's Authorized Representative epartment of Human Services (Department) (AR). Participants on behalf of the D included

ISSUE

Did the Department properly close the claimant's MA case?

FINDINGS OF FACT

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

- 1. On December 13, 2011, the Department sent the Claimant a notice of case action, notifying her that her MA would be ended on December 31, 2011.
- 2. On December 31, 2011, the Department closed the Claimant's MA because her SSI benefits were terminated.
- 3. On December 20, 2011, the Claimant requested a hearing protesting the closing of her MA.
- On January 13, 2012, the Claimant reapplied for MA benefits.

CONCLUSIONS OF LAW

Department policies are contained in the Br idges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM), and the Reference Tables Manual (RFT).

☐ The Family Independence Program (FIP) was established pursuant to the Personal Responsibility and W ork Opportunity Reconc iliation Act of 1996, Public Law 104-193, 42 USC 601, *et seq*. The Department (formerly k nown as the Family Independence Agency) administers FIP pursuant to MCL 400.10, *et seq*., and Mich Admin Code, R 400.3101 t hrough R 400.3131. FI P replaced the Aid to Dependent Children (ADC) program effective October 1, 1996.

☐ The Food Assistanc e Program (FAP) [for merly known as the Food Stamp (FS) program] is established by the Food Stamp Act of 1977, as amended, and is implemented by the federal regulations contained in Title 7 of the Code of Federal Regulations (CFR). The Department (formerly known as the Family Independence Agency) administers FAP pursuant to MCL 400.10, *et seq*., and Mich Admin Code, R 400.3001 through R 400.3015.

The Medical Ass istance (MA) program is es tablished by the Title XIX of the Soc ial Security Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). The Department of Human Services (formerly known as the Family Independ ence Agency) administers the MA pr ogram pursuant to MCL 400.10, *et seq*., and MC L 400.105.

The Adult M	edical Program (A	MP) is	established by	/ 42 USC 1315	b, and is
administered by	y the Department	pursuant to M	ICL 400.10, et	seq.	

The State Disabilit y Assistance (SDA) program, which provides financial assistance for disabled persons, is established by 2004 PA 344. The D epartment of Human Services (formerly known as the Family Independence Agency) administers the SDA program pursuant to MCL 400.10, *et seq*., and 2000 AACS, R 400.3 151 through R 400.3180.

The Child Development and Care (CDC) program is establis hed by Titles IVA, IVE 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 Mich Admin Code, R 400.5001 through R 400.5015.

Additionally, Department policy demands ce rtain departmental actions when SSI is terminated.

SSI TERMINATIONS

When SSI benefits stop, central office evaluates the reason based on SSA's negative action code, then does one of the following:
SSI Closure. MA-SSI is closed in Bridges if SSI stopped for a reason that prevents continued MA eligibility (for example, death, moved out of state). Bridges sends the recipient an DHS-1605.

• Transfer to SSIT. SSI cases not closed due to the policy above

are transferred to the SSI Termination (SSIT) Type of Assistance.

A redetermination date is set for the second month after transfer to allow for an ex parte review; see glossary.

Local Office Responsibilities for Cases Transferred to SSIT

Based on current circumstances, determine whether the client qualifies for MA under: MA While Appealing Disability Termination in this item, or

Any other MA category; see BEM 105.

An ex parte review (see glossary) is required before Medicaid closures when there is an actual or anticipated c hange, unless the change would re sult in clos ure due to ineligibility for all Med icaid. When possible, an ex parte review sh ould begin at least 90 days before the antic ipated change is expected to result in c ase closure. The review includes consideration of all MA categories; see BAM 115 and 220.

When an SSI-T EDG is set in Bridges, the specialist will receive the following Task/Reminder (T/R): Send DHS-1171 to client as Medicaid Transitional SSI case newly Certified. The T /R has a 15 day due date. On or before t he Task/Reminder du e date the s pecialist s hould mail a redeter mination packet to the client and authorized representative. The redetermination packet should include the DH S-1171 Assistance Application and the Word version of the DHS -3503 Verification Checklist. The specialist should mark the verifications required for Medicaid on the DHS-3503.

Process the application through Initiate In appropriate disability forms Do not require you know eligibility exists under MA While Appealing Disability Termination in this item. Complete the review during the second month of the SSI-T. Document all f actors in the case record, including disability and blindness.

If continued MA eligibility does not exist, use standard negative action procedures. MA While Appealing Disability Termination

MA eligibility continues for an individual who:

Has been t erminated from SSI because he is no longer consider ed disabled or blind, and

See BEM 260 about SSI denial codes.

Has filed an appeal of the termination with SSA within SSA's 60-day time limit, and See BEM 260 for information about the SSA appeal process and appeal codes. Is a Michigan resident.

Other eligibility factors such as income, a ssets and third party resource liab ility are not an issue.

MA eligibility continues until the person:

Exhausts his SSA appeal rights, or

Fails to file an appeal at any step within SSA's 60-day time limit, or

Is no longer a Michigan resident. (BEM 150, p. 5-6)

In the inst ant case t he Department did no t follow the above procedure. In addition, at the hearing the Claimant testified that SSI benefits had been reinstated.

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 i did act properly when it closed the claimant's MA.

Accordingly, the Department's AMP FIP FIP ARA SDA CDC decision is AFFIRMED REVERSED for the reasons stated on the record.

THE DEPARTMENT IS ORDERED TO DO THE FOLLOWING WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:

1. Reregister and process t he Claimant's January 13, 2012 MA applic ation, accept documentation of the Claimant's reinstatment with SSI and replace any benefits lost if appropriate.

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

Date Signed: May 24, 2012

Date Mailed: May 24, 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.

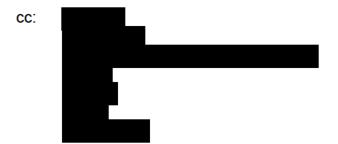
Claimant may request a rehearing or reconsideration for the following reasons:

- 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 <u>MAY</u> be granted for any of the following reasons:
 - misapplication of manual policy or law in the hearing decision,
 - typographical errors, mathematical error, or other obvious errors in the hearing 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

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

MJB/cl



2012-27014/MJB