

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

IN THE MATTER OF:

[REDACTED]

Reg. No.: 2012 54146
Issue No.: 3000, 2001
Case No.: [REDACTED]
Hearing Date: June 21, 2012
County: Wayne County DHS(55)

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 following Claimant's request for a hearing. After due notice, a telephone hearing was held on June 21, 2012, from Detroit, Michigan. Participants on behalf of Claimant included the Claimant. An interpreter, [REDACTED] also participated and interpreted for the Claimant. Participants on behalf of the Department of Human Services (Department) included [REDACTED], Assistance Payments Supervisor and [REDACTED], ES.

ISSUE

Did the Department properly deny Claimant's application close Claimant's case for:

- | | |
|--|---|
| <input type="checkbox"/> Family Independence Program (FIP)? | <input checked="" type="checkbox"/> Adult Medical Assistance (AMP)? |
| <input type="checkbox"/> Food Assistance Program (FAP)? | <input type="checkbox"/> State Disability Assistance (SDA)? |
| <input checked="" type="checkbox"/> Medical Assistance (MA)? | <input type="checkbox"/> Child Development and Care (CDC)? |

FINDINGS OF FACT

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

1. Claimant
2. applied for benefits Medical Assistance and Adult Medical Program
3. received benefits for:

<input type="checkbox"/> Family Independence Program (FIP).	<input checked="" type="checkbox"/> Adult Medical Assistance (AMP).
<input checked="" type="checkbox"/> Food Assistance Program (FAP).	<input type="checkbox"/> State Disability Assistance (SDA).

Medical Assistance (MA). Child Development and Care (CDC).

On 5/1/12, the Department
 denied Claimant's application closed Claimant's case
due to the AMP program was closed to new enrollment and the Claimant did not
apply for disability when he applied for Medical Assistance.

The Claimant currently receives food assistance (FAP) and no longer has any issue
regarding his FAP, and did not wish to proceed with the Request for Hearing
regarding FAP.

4. On 5/1/12, the Department sent
 Claimant Claimant's Authorized Representative (AR)
notice of the denial. closure.
5. On 5/10/12 , Claimant filed a hearing request, protesting the
 denial of the application for Medical Assistance and AMP. closure of the case.

CONCLUSIONS OF LAW

Department policies are contained in the Bridges 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 Work Opportunity Reconciliation Act of 1996, Public Law 104-193,
42 USC 601, *et seq.* The Department (formerly known as the Family Independence
Agency) administers FIP pursuant to MCL 400.10, *et seq.*, and 1999 AC, Rule 400.3101
through Rule 400.3131. FIP replaced the Aid to Dependent Children (ADC) program
effective October 1, 1996.

The Food Assistance Program (FAP) [formerly 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 1999 AC, Rule
400.3001 through Rule 400.3015.

The Medical Assistance (MA) program is established by the 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 (formerly known as the Family Independence
Agency) administers the MA program pursuant to MCL 400.10, *et seq.*, and MCL
400.105.

The Adult Medical Program (AMP) is established by 42 USC 1315, and is
administered by the Department pursuant to MCL 400.10, *et seq.*

The State Disability Assistance (SDA) program, which provides financial assistance for disabled persons, is established by 2004 PA 344. The Department of Human Services (formerly known as the Family Independence Agency) administers the SDA program pursuant to MCL 400.10, *et seq.*, and 2000 AACS, Rule 400.3151 through Rule 400.3180.

The Child Development and Care (CDC) program is established by Titles IVA, IVE and XX of the Social Security Act, the Child Care and Development 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 Federal Regulations, Parts 98 and 99. The Department provides services to adults and children pursuant to MCL 400.14(1) and 1999 AC, Rule 400.5001 through Rule 400.5015.

Additionally, the evidence produced at the hearing indicated that the Department denied the Claimant's application for Medical Assistance due to the Adult Medical Program being closed to new enrollment. The Claimant was not otherwise qualified for Medical Assistance, as he did not indicate that he sought MA on the basis that he was medically disabled. A review of the application filed by the Claimant indicates that at the time he applied, he did not complete an answer to question 10, page k of his application which asks the applicant to list anyone applying for assistance who is physically or mentally unable to work full time. Exhibit 4. Based on Claimant's answer to question 10, the Department properly denied the application as the Claimant did not fit any of the other categories for Medical Assistance. Exhibit 1.

The Claimant may reapply for Medical Assistance at any time.

Based upon the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, the Administrative Law Judge concludes that the Department

properly denied Claimant's application improperly denied Claimant's application
 properly closed Claimant's case improperly closed Claimant's case

for: AMP FIP FAP MA SDA CDC.

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

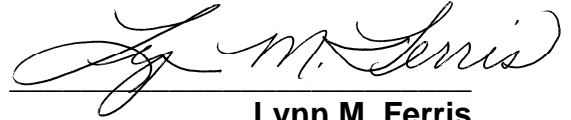
did act properly. did not act properly.

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

The Claimant's hearing request as regards food assistance is ordered DISMISSED as no issue remains with regard to food assistance.

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

1.



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

Date Signed: June 29, 2012

Date Mailed: June 29, 2012

NOTICE: Michigan Administrative Hearing System (MAHS) 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. MAHS 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. (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 timely 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 **MAY** 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, 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 to:

Michigan Administrative Hearings
Reconsideration/Rehearing Request
P. O. Box 30639
Lansing, Michigan 48909-07322

LMF/hw

201254146/ LMF

cc:

