

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

IN THE MATTER OF:

[REDACTED]

Reg. No: 2012-56787
Issue No: 2027

[REDACTED]

ADMINISTRATIVE LAW JUDGE: [REDACTED]

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 telephone hearing was held on [REDACTED]. The claimant was not present, but was represented by [REDACTED]

ISSUES

Did the department properly deny the claimant's retro MA application for March, 2006?

FINDINGS OF FACT

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

1. On [REDACTED], the claimant applied for MA and retro MA after receiving a favorable decision from the Social Security Administration (SSA) granting SSI benefits to the claimant, effective [REDACTED].
[REDACTED])
2. The claimant's application for retro MA for the month of [REDACTED] was denied by the department on [REDACTED]. ([REDACTED])
[REDACTED])
3. The claimant submitted a hearing request on [REDACTED]
4. On [REDACTED] the Administrative Law Judge Suzanne Morris issued a Decision and Order following a [REDACTED] hearing which stated: This Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that the department improperly denied the claimant's retro MA application for March, 2006. Therefore, the department's determination is REVERSED. The department shall

reprocess the claimant's retro MA application for [REDACTED] and approve if he meets all other financial and non-financial eligibility factors. SO ORDERED. [REDACTED]

5. The application was reprocessed by the Department.
6. The department denied the application for [REDACTED]
7. On [REDACTED] DHS -1843 was issued explaining the reasons for the decision.
8. On [REDACTED], the department caseworker sent notice of the denial to [REDACTED] informing them that pursuant to BEM 260, eligibility for MA based upon disability or blindness does not exist once SSA's determination is final.
9. On [REDACTED] filed a request for a hearing to contest the denial of the application for the Month of [REDACTED].

CONCLUSIONS OF LAW

The regulations governing the hearing and appeal process for applicants and recipients of public assistance in Michigan are found in the Michigan Administrative Code, MAC R 400.901-400.951. An opportunity for a hearing shall be granted to an applicant who requests a hearing because his or her claim for assistance has been denied. MAC R 400.903(1). Clients have the right to contest a department decision affecting eligibility or benefit levels whenever it is believed that the decision is incorrect. The department will provide an administrative hearing to review the decision and determine the appropriateness of that decision. BAM 600.

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 Program Reference Manual (PRM).

Pertinent department policy states:

Supplemental Security Income (SSI) is a cash benefit for needy individuals who are aged (at least 65), blind or disabled. The Social Security Administration (SSA) determines SSI eligibility.

In Michigan, DHS supplements federal SSI payments based on the client's living arrangement. Thus, in this item **SSI recipient** means a Michigan resident who receives the basic federal payment, the state supplement, or both.

To be **automatically** eligible for Medicaid (MA) an SSI recipient must both:

- Be a Michigan resident.
- Cooperate with third-party resource liability requirements.

DHS administers MA for SSI recipients, including a continued MA eligibility determination when SSI benefits end.

Ongoing MA eligibility begins the first day of the month of SSI entitlement. Some clients also qualify for **retroactive** (retro) MA coverage for up to three calendar months prior to SSI entitlement; see [BAM 115](#). BEM, Item 150, page 1.

Retro MA coverage is available back to the first day of the third calendar month prior to:

- The current application for FIP and MA applicants and persons applying to be added to the group.
- The most recent application (**not** redetermination) for FIP and MA recipients.
- For SSI, entitlement to SSI. Bam, Item 115, page 9.

To be eligible for a retro MA month, the person must:

- Meet all financial and nonfinancial eligibility factors in that month, and
- Have an unpaid medical expense incurred during the month, or

Do **not** consider bills that the person thinks may be paid by insurance as paid bills. It is easier to determine eligibility sooner rather than later.

- Have been entitled to Medicare Part A. BAM, Item 115, page 11

In this case, the claimant filed an application for disability with the SSA on [REDACTED]. Claimant was issued a favorable SSA decision awarding him SSI benefits on [REDACTED]. The favorable decision letter specifically established a disability onset date of [REDACTED] then submitted an application for retro MA benefits on [REDACTED], requesting coverage for an unpaid hospital bill for the month of [REDACTED].

Department policy states that ongoing MA eligibility begins the first day of the month of SSI entitlement. **Some** clients also qualify for retro MA coverage for up to three calendar months prior to SSI entitlement. BEM 150. (Emphasis Added) Retro MA coverage is **available** back to the first day of the third calendar month prior to SSI entitlement if the client meets the non-financial and financial criteria for benefit eligibility. BAM 115.

The claimant was determined to be eligible for SSI as of [REDACTED] by the SSA. There is no evidence in this case that the client was eligible for SSI in the month of [REDACTED] either financially or non-financially. There was no medical information

submitted for this hearing nor was any submitted for the prior hearing, [REDACTED]-[REDACTED], that would allow an Administrative Law Judge to make a disability determination. Thus, this Administrative Law Judge would be unable to determine whether or not claimant was disabled for purposes of MA disability in the month of [REDACTED]. The eligibility for potential retroactive coverage for a client who has established SSI eligibility is not automatic. A separate disability determination must be made. Evidence in the record does not show that there was an MA application filed by claimant (or on claimant's behalf) in [REDACTED].

Claimant filed an application for SSI with the SSA on [REDACTED]. The award letter from the SSA indicates that on [REDACTED] claimant was found disabled, with a disability onset date of [REDACTED], effectively denying disability status for all prior months. (Exhibit 24). The client was given notice that he had 60 days in which to appeal the decision. Either no appeal was filed or the appeal was denied and the [REDACTED] decision took effect as a final decision as of [REDACTED]. Thus, this Administrative Law Judge has no jurisdictional ability to overturn a final decision of the SSA and the department actions must be upheld.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that the department properly denied the claimant's retro MA application for [REDACTED].

Therefore, the department's determination is **AFFIRMED**. It is SO ORDERED.

/s/ _____
[REDACTED]
Administrative Law Judge
for Maura D. Corrigan, Director
Department of Human Services

Date Signed: [REDACTED]

Date Mailed: [REDACTED]

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.

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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.

LYL/jk

cc:



MAHS