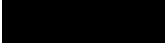


**STATE OF MICHIGAN  
MICHIGAN ADMINISTRATIVE HEARING SYSTEM  
ADMINISTRATIVE HEARINGS FOR THE  
DEPARTMENT OF HUMAN SERVICES**



**IN THE MATTER OF:**



Reg. No.: 201257524  
Issue No.: 2018  
Case No.:   
Hearing Date: September 20, 2012  
County: Wayne (35)

**ADMINISTRATIVE LAW JUDGE:** Alice C. Elkin

**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 September 20, 2012, from Detroit, Michigan. Participants on behalf of Claimant included Claimant. Participants on behalf of Department of Human Services (Department) included  Eligibility Specialist, and , Assistance Payment Supervisor.

**ISSUE**

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

- |  |   |
|--|---|
| <input type="checkbox"/> Family Independence Program (FIP)?  | <input 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)?  |
| <input type="checkbox"/> Direct Support Services (DSS)?      |   |

**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  applied for benefits  received benefits for:

- |  |   |
|--|---|
| <input type="checkbox"/> Family Independence Program (FIP).  | <input 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).  |
| <input type="checkbox"/> Direct Support Services (DSS).      |   |

2. On June 1, 2012, the Department  
 denied Claimant's application       closed Claimant's case  
due to freeze on Adult Medical Program (AMP) enrollment and Claimant's failure to  
meet other eligibility factors.
3. On June 1, 2012, the Department sent  
 Claimant       Claimant's Authorized Representative (AR)  
notice of the       denial.       closure.
4. On June 6, 2012, Claimant filed a hearing request, protesting the  
 denial of the application.       closure of the case.

### **CONCLUSIONS OF LAW**

Department policies are contained in the Department of Human Services Bridges Administrative Manual (BAM), Department of Human Services Bridges Eligibility Manual (BEM), and Department of Human Services 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 Mich Admin Code, R 400.3101 through R 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 Mich Admin Code, R 400.3001 through R 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 Mich Admin Code, R 400.3151 through R 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 Mich Admin Code, R 400.5001 through R 400.5015.

Direct Support Services (DSS) is administered by the Department pursuant to MCL 400.57a, *et. seq.*, and Mich Admin Code R 400.3603.

Additionally, in this case, Claimant applied for MA on June 1, 2012. That same day the Department sent Claimant a Notice of Case Action denying her application on the basis that there was a freeze on Adult Medical Program (AMP) enrollment, and she was not eligible for other MA coverage because she was not blind, disabled, pregnant or the parent/caretaker relative of a dependent child or within the age requirement.

An individual may receive Medical Assistance (MA) coverage if the individual qualifies under an a FIP-related MA category or an SSI-related MA category. To receive MA under an SSI-related category, the person must be aged (65 or older), blind, disabled, entitled to Medicare or formerly blind or disabled. BEM 105 (October 1, 2010), p 1. To receive MA under a FIP-related category, the person must have dependent children, be a caretaker relative of dependent children, or be under age 21 and pregnant or recently pregnant. BEM 105, p 1. AMP provides limited medical services for persons not eligible for MA coverage. BEM 100 (June 1, 2012), p 4.

The evidence at the hearing established that Claimant was 56 years old. While Claimant testified that she was the parent or relative caretaker of a handicapped child, she acknowledged that the child was 21 years old. Because FIP-related MA is only available to a parent when the child is under age 18 (or age 18 and a full-time high school or vocational education student), the Department properly concluded that she did not qualify for FIP-related MA. See BEM 135 (January 1, 2011), p 3. The Department also properly concluded that Claimant was not eligible for AMP medical coverage because the program was closed to new enrollees at the time of her application.

Claimant contended, however, that she was entitled to MA based on the fact that she was diabetic, had high blood pressure, and took several medication for both these health issues. The Department refers cases to the Medical Review Team (MRT) when a client claims a disability or blindness. BAM 815 (June 1, 2012), p 2. Claimant acknowledged that she had stated "none" on that portion of the her [REDACTED] application that asked her to identify her disabilities. At the hearing, the Department testified that MRT would not process a MA application that did not identify a disability on the portion of the application where disabilities are to be identified. However, Claimant noted, and the Department acknowledged, that the worker who had spoken to Claimant

regarding her application had hand-written notes in the application indicating that Claimant was diabetic, had high blood pressure, and took various medications. The Department is required to assist clients in completing the application form. BAM 115 (May 1, 2012), p 1. Once Claimant claimed a disability, the worker should have assisted her in identifying those conditions under the disability portion of the application. Claimant testified that the worker informed her that diabetes was not a disability for MA purposes. However, disability determinations are made by MRT, not workers. BAM 815 (June 1, 2012), pp 5-6; BEM 260 (October 1, 2011), pp 2-4, 6-8. By failing to assist Claimant to properly identify her alleged disability on her MA application and initiating the process for having the disability determination referred to MRT, the Department did not act in accordance with Department policy.

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    DSS.

**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  DSS 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 Claimant's June 1, 2012 MA application;
2. Begin reprocessing the application in accordance with Department policy and consistent with this Hearing Decision, including allowing Claimant to revise her response in the application concerning her disability;
3. Provide Claimant with MA coverage she is eligible to receive from June 1, 2012, ongoing; and
4. Notify Claimant in writing of its decision in accordance with Department policy.

  
**Alice C. Elkin**  
Administrative Law Judge  
For Maura Corrigan, Director  
Department of Human Services

Date Signed: 9/28/12

Date Mailed: 9/28/12

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

ACE/hw

cc:



A. Elkin  
MAHS