

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

IN THE MATTER OF:



Reg. No.: 2013 15000
Issue No.: 2021
Case No.:
Hearing Date: April 29, 2013
County: Wayne County DHS (17)

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 April 29, 2013, from Detroit, Michigan. Participants on behalf of Claimant included the Claimant. Participants on behalf of the Department of Human Services (Department) included , FIM.

ISSUE

Due to excess assets, did the Department properly ☒ deny the Claimant's application
☐ close Claimant's case for:

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

FINDINGS OF FACT

The Administrative Law Judge, based on the competent, material, and substantial evidence on the whole record, including the testimony at the hearing, 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 checked="" type="checkbox"/> Medical Assistance (MA). | <input type="checkbox"/> State Disability Assistance (SDA). |
| <input type="checkbox"/> Food Assistance Program (FAP) | |

2. Due to excess assets, on 7/1/12, the Department
☒ denied Claimant's application. ☐ closed Claimant's case.
3. On November 20, 2012, the Department sent

☒ Claimant notice of the ☐ Claimant's Authorized Representative (AR) denial. ☐ closure.

4. On November 15, 2012, Claimant filed a hearing request, protesting the ☒ denial of the application. ☐ closure of the case.

CONCLUSIONS OF LAW

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

☒ 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 (formerly known as the Family Independence Agency) administers the MA program pursuant to MCL 400.10, *et seq.*, and MCL 400.105.

Additionally, in this case the evidence presented demonstrated that the Claimant had a savings account in her name which contained \$3,000 on the date she applied. Even though the account was set up for her disabled son, the account was solely in the Claimant's name and thus the Department correctly considered that the Claimant had a savings account asset in the amount of \$3,000. At the hearing the Claimant confirmed that the amount of funds in the savings account was \$3,000 and that she also had a checking account. The Claimant's case was denied because the Department determined that Claimant had more than \$3,000 in assets when she applied for medical assistance as a group 2 caretaker. Based upon the asset limit established by BEM 400 an applicant for medical assistance assets cannot exceed \$3,000. BEM 400 pp4 (7/1/12). In this case the Department established that the Claimant's assets exceeded \$3,000 at application. The Claimant's chief argument was that the \$3,000 savings account was established solely for the use of her son, however the account was in Claimant's name only and thus was properly attributed to Claimant as her asset.

Therefore, it is concluded that the Department properly denied the Claimant's application for medical assistance. The Claimant may reapply for Medical Assistance at any time, subject to the asset limit.

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, due to excess assets, the Department

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

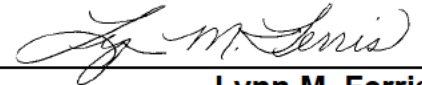
for: ☐ AMP ☐ FIP ☐ FAP ☒ MA ☐ SDA.

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 decision is
☒ AFFIRMED ☐ REVERSED for the reasons stated on the record.



Lynn M. Ferris

Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: May 21, 2013

Date Mailed: May 21, 2013

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 affect the substantial rights of the claimant:
 - 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

LMF/tm

cc:

