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

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Reg. No.: 2013 15549

Issue No.: 2026

Case No.:

Hearing Date: February 25, 2013

County: Wayne County DHS (55)

ADMINISTRATIVE LAW JUDGE: Lynn M. Ferris

HEARING DECISION

This matter is before the undersigned Admini strative 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 February 25, 2013, from Detroit, Michigan. Participants on behalf of Claim ant inc luded the Claimant. No Pa rticipants on behalf of the Department of Human Services (Department) appeared for the hearing.

ISSUE

Due to excess income, did the Department properly ☐ deny the Claimant's applic ation ☐ close Claimant's case ☐ reduce Claimant's benefits ☒ impose a medical deductible for:					
☐ Family Independence Program (FIP)?☐ Food Assistance Program (FAP)?☐ Medical Assistance (MA)?	☐ Adult Medical Assistance (AMP)?☐ State Disability Assistance (SDA)?☐ Child Development and Care (CDC)?				
FINDINGS OF FACT					
The Administrative Law Judge, based on t he competent, material, and substantial evidence on the whole record, finds as material fact:					
I. Cla imant ☐ applied for benefits for: ☐ received benefits for:					
☐ Family Independence Program (FIP).☐ Food Assistance Program (FAP).☒ Medical Assistance (MA).	☐ Adult Medical Assistance (AMP).☐ State Disability Assistance (SDA).☐ Child Development and Care (CDC).				

2. On December 5, 2012, the Department ☐ denied Claimant's application ☐ closed Claimant's case ☐ reduced Claimant's benefits ☒ imposed a m edical deductible of \$365, due to excess income.
3. On November 28, 2012, the Department sent ☐ Claimant ☐ Claimant's Authorized Representative (AR) notice of the ☐ denial. ☐ closure. ☐ reduction ☐ medical deductible in the amount of \$365.
 On December 3, 2012 , Claimant or Claimant's AHR filed a hearing request, protesting the ☐ denial of the app lication. ☐ closure of the case. ☐ reduction of benefits ☐ imposition of a medical deductible.
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 Adult Medical Program (AMP) is established by 42 USC 1315, and is administered by the Department pursuant to MCL 400.10, <i>et seq</i> .
☐ The Family Independence Program (FIP) was established pursuant to the Personal Responsibility and W ork Opportunity Reconciliation 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 1999 AC, Rule 400.3101 through Rule 400.3131. FIP replaced the Aid to Dependent Children (ADC) program effective October 1, 1996.
☐ The Food Assistanc e Program (FAP) [fo rmerly known as the Food Sta mp (FS) program] is establis hed by the Food St amp Act of 1977, as amend ed, 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.
\square 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 (formerly known as the F amily Independence Agency) administers the MA program pursuant to MCL 400.10, <i>et seq.</i> , and MCL 400.105.
☐ The State Disabilit y Assistance (SDA) program, which provides financial ass istance for disabled persons, is established by 2004 PA 344. The Department (formerly known as the F amily Independence Agency) admini sters the SDA program pursuant to M CL 400.10, et seq., and 2000 AACS, Rule 400.3151 through Rule 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 Child 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 Department provides services to adult and children pursuant to MCL 400.14(1) and 1999 AC, Rule 400.5001 through Rule 400.5015.
Additionally, the Department did not appear for the telephone hearing. The undersigned ALJ notes that the hearing was scheduled to begin at 2:30 pm. The undersigned called the Claimant at 3:05 pm hav ing waited more than one half hour before beginning the hearing. The hearing was conducted without the Department as the Department was notified at 2:43pm by the undersigned's sec retary that the hearing would begin at 3:00 pm and if the Department failed to call in for the hearing by 3:00 pm the hearing would be conducted without the Department. The Department did not call in by 3:00 pm and the hearing was conducted without the Department.
At the hearing, as no ev idence was produced it was determined that no proofs regarding the Claimant's dispute regarding the amount of the medical deductible were given. As no evidence was introduced and the Department did not appear, the Department did not meet its bur denof proof to establish the basis for the imposition of the medical deductible in the amount of \$365. Accordingly, the Department's decision is reversed.
Based upon the abov e Findings of Fact and Conclus ions of Law, and for the reasons stated on the record, the Administrative La w Judge concludes t hat, due to excess income, the Department properly improperly
 ☐ denied Claimant's application ☐ reduced Claimant's benefits ☐ closed Claimant's case ☑ improperly imposed a medical deductible in the amount of \$365.
for:
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 \square did act properly \square did not act properly.
Accordingly, the Department's \square AMP \square FIP \square FAP \boxtimes MA \square SDA \square CDC decision is \square AFFIRMED \boxtimes 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. The Department shall recalculate and recompute the Claimant's Medical Deductible and provide the Cla imant with the basis for it s determination including the income it used and the method of calculation.
- 2. The Department shall not ify the Claimant in writing of its determination of the deductible in accordance with Department policy.

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

Date Signed: March 6, 2013

Date Mailed: March 6, 2013

NOTICE: Michigan Administrative Hearing S ystem (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 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 <u>MAY</u> 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

Re consideration/Rehearing Request

P. O. Box 30639

Lansing, Michigan 48909-07322

2013-15549/LMF

LMF/cl

