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

IN THE MATTER OF:				
	Reg. No.: Issue No.: Case No.: Hearing Date: County:	2013-35430 2017 June 20, 2013 Wayne (35)		
ADMINISTRATIVE LAW JUDGE: Jan Leventer				
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 20, 2013, from Detroit, Michigan. Participants on behalf of Claimant included the Claimant. Participants on behalf of the Department of Human Services (Department) included Eligibility Specialist.				
<u>ISSUE</u>				
Due to excess income, did the Department properly $\square$ deny the Claimant's application $\square$ close Claimant's case $\boxtimes$ reduce Claimant's benefits for:				
Food Assistance Program (FAP)?		sistance (AMP)? ssistance (SDA)? nt 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 ☐ applied for benefits for: ☐ red	ceived benefits fo	r:		
☐ Family Independence Program (FIP). ☐	Adult Medical As	ssistance (AMP).		

State Disability Assistance (SDA).
Child Development and Care (CDC).

Food Assistance Program (FAP).

Medical Assistance (MA).

2.	On April 1, 2013, the Department			
3.	On February 27, 2013, the Department sent  Claimant Claimant's Authorized Representative (AR)  notice of the denial. closure. reduction.			
4.	On March 11, 2013, Claimant or Claimant's AHR filed a hearing request, protesting the			
	denial of the application.			
CONCLUSIONS OF LAW				
	partment policies are contained in the Bridges Administrative Manual (BAM), the dges Eligibility Manual (BEM), and the Reference Tables Manual (RFT).			
Se Th	The Medical Assistance (MA) program is established by the Title XIX of the Social curity Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). e Department (formerly known as the Family Independence Agency) administers the A program pursuant to MCL 400.10, et seq., and MCL 400.105.			
Additionally, the Department's Reference Table (RFT) 242, "AD-Care and Medicare Savings Program Income Limits," is applicable in this case. It is a set of three tables which set forth the maximum income a customer can have in order to be qualified for Medicare premium assistance. The three tables are based on the client's net countable income. RFT 242 also references RFT 246, "MA Poverty Levels," in setting these income limits. Department of Human Services Reference Tables (RFT) 242 (2012), 246 (2012).				
Ho co Ac	aimant's income falls in the third table based on his countable net income of wever, the income limit is \$1 . The \$1000 income limit excludes Claimant from verage because his income is higher than \$1000 by twenty-eight dollars. cordingly, it is found and determined that the Department acted correctly in minating Claimant's Medicare premium coverage, and shall be affirmed.			
sta	sed upon the above Findings of Fact and Conclusions of Law, and for the reasons ited on the record, the Administrative Law Judge concludes that, due to excess some, the Department $\square$ properly $\square$ improperly			
	<ul> <li>☐ denied Claimant's application</li> <li>☐ reduced Claimant's benefits</li> <li>☐ closed Claimant's case</li> </ul>			
for	: ☐ AMP ☐ FIP ☐ FAP ☒ MA ☐ SDA ☐ CDC.			

## **DECISION AND ORDER**

The Administrative Law Judge, based upon the above of Law, and for the reasons stated on the record, finds ☑ did act properly ☐ did not act properly.	<u> </u>
Accordingly, the Department's ☐ AMP ☐ FIP ☐ FAFis Is ☐ AFFIRMED ☐ REVERSED for the reasons state	
	Jan Leventer Administrative Law Judge for Maura Corrigan, Director Department of Human Services

Date Signed: June 20, 2013
Date Mailed: June 24, 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 <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 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

JL/tm

CC: