#### 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 DHS:



## ADMINISTRATIVE LAW JUDGE: Kevin Scully

## **HEARING DECISION**

This matter is before the undersigned Administrative 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 the former of the participants on participants on behalf of Claimant included Human Services (Department) included

## <u>ISSUE</u>

Due to excess income, did the Department properly deny the Claimant's applic ation close Claimant's case X reduce Claimant's benefits for:

Family Independence Program (FIP)?	Adult Medical Assistance (AMP)?
Food Assistance Program (FAP)?	State Disability Assistance (SDA)?
Medical Assistance (MA)?	Child Development and Care (CDC)?

Due to excess income, did the Department properly 🗌 den	
Close Claimant's case reduce Claimant's benefits for:	

Family Independence Program (FIP)?
Food Assistance Program (FAP)?

Medicare Savings Plan?

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:



1. Cla imant  $\square$  applied for benefits for:  $\square$  received benefits for:

Family Independence Program (FIP).

 $\boxtimes$  Food Assistance Program (FAP).

Medicare Savings Plan

Adult Medical Assistance (AMP).

State Disability Assistance (SDA).

- Child Development and Care (CDC).
- 2. On the Department  $\bigotimes$  closed Claimant's Medicare Savings Plan and  $|\times|$  reduced Claimant's Food Assistance Pr ogram (FAP) benefits due to exce ss income.
- the Department sent 🛛 Claimant 🗌 Claimant's Authoriz ed 3. On Representative (AR) notice of the:

 $\boxtimes$  closure of the Medicare Savings Plan and

reduction of Food Assistance Program (FAP) benefits.

4. On , the Department received the Claimant's hearing request, protesting the |X| closure of the Medicare Savings Plan and  $\bowtie$  reduction of Food Assistance Program (FAP) benefits.

# 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, et seq.

The Family Independence Program (FIP) was established pursuant to the Personal Responsibility and W ork Opportunity Reconc iliation 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. R 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 r egulations contained in Title 7 of the Code of Federal Department (formerly known as the Family Independenc e Regulations (CFR). The Agency) administers FAP pursuant to MCL 400.10, et seg., and 1999 AC, R 400.3001 through Rule 400.3015.

 $\boxtimes$  The Medical Ass istance (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 F amily Independence Agency) administers the MA program pursuant to MCL 400.10, et seq., and MCL 400.105.

The State Disabilit y Assistance (SDA) progr am, 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, R 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 Ch ild 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. T he Department provides servic es to adult s and children pursuant to MCL 400.14(1) and 1999 AC, R 400.5001 through Rule 400.5015.

The Department failed to present testimony or documentary evidence supporting its determination that the Claimant is not eligible for the Medicare Savings Plan, or that it properly reduced her monthly Food Assist ance Program (FAP) allotment due to her countable income.

Based upon the abov e Fi	ndings of Fact and	Conclus i	ions of Law,	and for the re	easons
stated on the record, the A	Administrative La	w Judge	concludes t	hat, due to e	excess
income, the Department	properly	🛛 impr	roperly		

] denied Claimant's application

Reduced Claimant's Food Assistance Program (FAP) benefits

 $\boxtimes$  closed Claimant's Medicare Savings Plan

for:  $\square$  AMP  $\square$  FIP  $\boxtimes$  FAP  $\boxtimes$  Medicare Savings Plan  $\square$  SDA  $\square$  CDC.

## 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 indicact properly indicact properly.

Accordingly, the Department's  $\square$  AMP  $\square$  FIP  $\boxtimes$  FAP  $\boxtimes$  Medicare Savings Plan  $\square$  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. Initiate a determination of the Claimant 's eligibility for the Medicare Saving s Program, and the Food Assistance Program (FAP) as of
- 2. Provide the Claimant with a Notice of Case Acti on (DHS-1605) describing the Department's revised eligibility determination.



3. Issue the Claimant any retroactive benefits she may be eligible to receive, if any.

<u>/s/</u>

Kevin Scully Administrative Law Judge For Maura Corrigan, Director Department of Human Services

Date Signed: 03/12/2013

Date Mailed: 03/12/2013

**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 ti mely 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 <u>MAY</u> be granted for any of the following reasons:
  - misapplication of manual policy or law in the hearing decision,
  - typographical errors, mathematical e rror, 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 Recons ideration/Rehearing Request P. O. Box 30639 Lansing, Michigan 48909-07322

#### KS/kl

