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

IN THE MATTER OF:



| Reg. No.: | 2013-34685 |
|---------------|-------------|
| Issue No.: | 2009 |
| Case No.: | |
| Hearing Date: | May 1, 2013 |
| County: | Macomb #20 |

ADMINISTRATIVE LAW JUDGE: Carmen G. Fahie

HEARING DECISION

This matter is before the undersigned Administ rative 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 Wednesday, Ma y 1, 2013, from Lansing, Michigan. Participants on behalf of Claim ant included t he claimant's authorized representative,

, from . Participants on behalf of Department of Human Services (Department) included , MCW.

ISSUE

Did the Departm ent properly \boxtimes deny Claiman t's application \square close Claimant's case for:

| Family Independence Program (FIP)? | Adult Medical Assistance (AMP) |
|------------------------------------|----------------------------------|
| Food Assistance Program (FAP)? | State Disability Assistance (SDA |
| | |

Medical Assistance (MA)?

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

FINDINGS OF FACT

he competent, material, and substantial The Administrative Law Judge, based on t evidence on the whole record, finds as material fact:

1. Cla imant 🛛 applied for benefits 🗌 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 March 23, 2012, the Department denied Claimant's application closed Claimant's case due to not being eligible for MA retroactive to his SSI eligibility date.

- On March 23, 2012, the Department sent
 ☐ Claimant
 ☐ Claimant's Authorized Representative (AR)
 notice of the
 ☐ denial.
 ☐ closure.
- 4. On March 12, 2012, Claimant filed a hearing request, protesting the \square denial of the application. \square closure of the case.

CONCLUSIONS OF LAW

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

☐ The Family Independence Program (FIP) was established purs uant 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) [for merly 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 1999 AC, R 400.3001 through Rule 400.3015.

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 of Human Services (formerly known as the Family Independ ence Agency) administers the MA pr ogram pursuant to MCL 400.10, *et seq*., and MC L 400.105.

| The Adult M | edical Program (A | AMP) is | established by 42 | USC 1315, and is |
|-----------------|-------------------|-------------|---------------------|------------------|
| administered by | y the Department | pursuant to | MCL 400.10, et seq. | |

The State Disabilit y Assistance (SDA) program, which provides financial assistance for disabled persons, is established by 2004 PA 344. The D epartment of Human Services (formerly known as the Family Independence Agency) administers the SDA program pursuant to MCL 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. The Depart ment provides servic es to adults and children pursuant to MCL 400.14(1) and 1999 AC, R 400.5001 through Rule 400.5015.

BAM 115- APPLICATION PROCESSING, page 9-11

RETRO MA APPLICATIONS

MA Only

Retro MA coverage is available back to the first day of the third calendar month prior to:

The current application for FIP and MA applicants and persons applying to be added to the group.

The most recent application (**not** redetermination) for FIP and MA recipients.

For SSI, entitlement to SSI.

For department wards; see DEPARTMENT WARDS, TITLE IV-E AND ADOPTION RECIPIENT, the date DHS received the court order for a department ward.

For title IV-E and special needs adoption assistance recipients; see DEPARTMENT WARDS, TITLE IV-E AND ADOPTION RECIPIENT, entitlement to title IV-E or special needs adoption assistance.

Full-coverage QMB eligibility **cannot** be retroactive. ALMB **cannot** be authorized for a previous calendar year; see BEM 165.

A person might be eligible for one, two or all three retro months, **even if not** currently eligible. The DHS-3243, Retroactive Medicaid Application, is used to apply for retro MA. Only one DHS-3243 is needed to apply for one, two or all three retro MA months. See RETRO MA APPLICATIONS in BAM 110.Do **not** get a DHS-3243 if the person is eligible under Healthy Kids Retro MA Eligibility Requirements.

Standard Retro MA Eligibility Requirements

MA Only

Determine eligibility for each retro MA month separately.

To be eligible for a retro MA month, the person must:

Meet all financial and nonfinancial eligibility factors in that month, and

Have an unpaid medical expense incurred during the month, or

Do not consider bills that the person thinks may be paid by insurance as paid bills. It is easier to determine eligibility sooner rather than later.

Have been entitled to Medicare Part A.

Additionally, the claimant was determined eligible for So cial Security SSI with a disability onset date of Decemb er 2011. The cla imant is not a utomatically eligible for MA retroactive to September 2011. A dete rmination of not disabl ed was made by t he Medical Review Team (MRT) for retroacti ve MA on March 19, 2012. Since a MRT determination was pr eviously made that f ound the claimant not disabled for the contested time period, the department action stands and another MRT determination is not required. Therefore, the department has met its burden that the claimant is not eligible for retroactive MA to September 2011.

Based upon the abov e Findings of Fact and Co nclusions of Law, and for the reasons stated on the record, the Administrative Law Judge concludes that the Department

properly denied Claimant's application properly closed Claimant's case

improperly denied Claimant's application improperly closed Claimant's case

for: \square AMP \square FIP \square FAP \bowtie MA \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 \boxtimes did act properly. did not act properly.

Accordingly, the Department's AMP FIP FAP MA SDA CDC decision is \square AFFIRMED \square REVERSED for the reasons stated on the record.

/s/

Carmen G. Fahie Administrative Law Judge For Maura Corrigan, Director Department of Human Services

Date Signed: May 30, 2013

Date Mailed: May 31, 2013

NOTICE: Michigan Administrative Hearing Syst em (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, math ematical 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

CGF/hj

