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: | 2013-5359 2027 February 14, 2013 Kalamazoo County DHS | | |
|---|--|--|--|--|
| ADMINISTRATIVE LAW JUDGE: Carmen G. Fahie | | | | |
| HEARING DE | ECISION | | | |
| This matter is before the undersigned Administration and MCL 400.37 following Claim ant's requestelephone hearing was held on Thursday, February and the Participants on behalf of Claimant included the representative, from Department of Human Services (Department) | est for a hearing. Afte oruary 14, 2013, fron ne claimant and the cl Particip | r due notice, a n Lansing, Michigan. | | |
| <u>ISSUI</u> | <u>E</u> | | | |
| Did the Departm ent properly ⊠ deny Claiman t's application ☐ close Claimant's case for: | | | | |
| ☐ Family Independence Program (FIP)? ☐ Food Assistance Program (FAP)? ☐ Medical Assistance (MA)? | | sistance (AMP)? ssistance (SDA)? ent and Care (CDC)? | | |
| FINDINGS OF FACT | | | | |
| The Administrative Law Judge, based on t evidence on the whole record, finds as materia | he competent, materi al fact: | al, and substantial | | |
| 1. Cla imant ⊠ applied for benefits □ receive | d benefits for: | | | |
| ☐ Family Independence Program (FIP).☐ Food Assistance Program (FAP).☐ Medical Assistance (MA). | State Disability A | ssistance (AMP). Assistance (SDA). ent and Care (CDC). | | |

| 2. | On September 11, 2012, the Department ightharpoonup denied Claimant's application ightharpoonup closed Claimant's case due to MRT denial of MA during the contested time period. | | | | |
|-----------------------|---|--|--|--|--|
| 3. | On September 11, 2012, the Department sent Claimant Claimant's Authorized Representative (AR) notice of the denial. Closure. | | | | |
| 4. | On October 10, 2012, Claimant filed a hearing request, protesting the ⊠ denial of the application. ☐ closure of the case. | | | | |
| | CONCLUSIONS OF LAW | | | | |
| | epartment policies are contained in the Br idges Administrative Manual (BAM), the idges Eligibility Manual (BEM), and the Reference Tables Manual (RFT). | | | | |
| Re 42 Ag thr | The Family Independence Program (FIP) was established purs uant to the Personal esponsibility and W ork Opportunity Reconc iliation Act of 1996, Public Law 104-193, USC 601, et seq. The Department (formerly k nown as the Family Independence jency) administers FIP pursuant to MCL 400.10, et seq., and 1999 AC, R 400.3101 rough Rule 400.3131. FIP replaced the Aid to Dependent Children (ADC) program fective October 1, 1996. | | | | |
| pro im Re Ag | The Food Assistanc e Program (FAP) [fo rmerly known as the Food Sta mp (FS) ogram] is establis hed by the Food St amp Act of 1977, as amend ed, and is plemented by the federal regulations contained in Title 7 of the Code of Federal egulations (CFR). The Department (formerly known as the Family Independence plency) administers FAP pursuant to MCL 400.10, et seq., and 1999 AC, R 400.3001 rough Rule 400.3015. | | | | |
| Se Th Ag | The Medical Ass istance (MA) program is es tablished by the Title XIX of the Soc ial ecurity Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). The Department of Human Services (formerly known as the Family Independenc equency) administers the MA program pursuant to MCL 400.10, et seq., and MC L 0.105. | | | | |
| | The Adult Medical Program (AMP) is established by 42 USC 1315, and is ministered by the Department pursuant to MCL 400.10, <i>et seq</i> . | | | | |
| for Se | The State Disabilit y Assistance (SDA) program, which provides financial assistance disabled persons, is established by 2004 PA 344. The D epartment of Human ervices (formerly known as the Family Independence Agency) administers the SDA ogram pursuant to MCL 400.10, et seq., and 2000 AACS, R 400. 3151 through Rule 0.3180. | | | | |

☐ The Child Development and Care (CDC) program is establishhed by Titles IVA, IVE and XX of the Soc ial Security Act, the Child Care and Development 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 Federal Regulations, Parts 98 and 99. The Department provides services to adults and children pursuant to MCL 400.14(1) and 1999 AC, R 400.5001 through Rule 400.5015.

Additionally, the claimant was approved by Social Security for SSI with a dis ability eligibility date of June 30, 2010. The claimant had a prior application for MA dated July 28, 2010 with retroactive MA to May 2010. The claimant is eligible for MA for 3 months retroactive to his eligibility dat e if the c laimant is a recipient of SSI a ccording the department policy.

BAM 115, page 9, Application Process

RETRO MA APPLICATIONS

MA Only

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

For SSI, entitlement to SSI.

BEM 150, page 1, MA for SSI Recipients

DEPARTMENT POLICY

MA Only

Supplemental Securit y Income (SSI) is a cash benefit for needy individuals who are aged (at leas t 65), blind or disabled. The Social Sec urity Ad ministration (SSA) determines SSI eligibility.

In Michigan, DHS supplements federal SSI payments based on the c lient's liv ing arrangemen t. Thus, in this item SSI recipient means a Michigan resident who receives the basic federal payment, the state supplement, or both.

To be automatically eligible f or Medicaid (MA) an SSI recipient must both:

Be a Michigan resident.

Cooperate with third-party resource liability requirements.

DHS administers MA for SSI recipients, including a continued MA eligibility determination when SSI benefits end.

Ongoing MA eligibility begins the first day of the month of SSI entitlement. Some clients also qualify for retroactive (retro) MA coverage for up to three calendar months prior to SSI entitlement; see BAM 115.

As a result, the depar tment has not met their burden that they followed policy, by not awarding the claimant retroactive MA benefits to May 2010.

| awarding the claimant retroactive MA benefits to May 2010. | | | | |
|---|-------|--|--|--|
| Based upon the abov e Findings of Fact and Co nclusions of Law, and for the reasonstated on the record, the Administrative Law Judge concludes that the Department | ons | | | |
| □ properly denied Claimant's application □ properly closed Claimant's case □ improperly closed Claimant's case | ition | | | |
| for: | | | | |
| DECISION AND ORDER | | | | |
| The Administrative Law Judge, based upon the above Findings of Fact and Conclus of Law, and for the reasons stated on the record, finds that the Department ☐ did act properly. ☐ did not act properly. | ions | | | |
| Accordingly, the Department's \square AMP \square FIP \square FAP \boxtimes MA \square SDA \square CDC decis \square AFFIRMED \boxtimes REVERSED for the reasons stated on the record. | sion | | | |
| oxtimes THE DEPARTMENT IS ORDERED TO DO THE FOLLOWING WITHIN 10 DAYS THE DATE OF MAILING OF THIS DECISION AND ORDER: | OF | | | |
| Initiate a redetermination of the Claimant's eligibility for MA retroactive to May 20 based on asset and income eligibility. |)10 | | | |
| 2. Provide the Claimant and her authorized representative with written notification the Department's revised eligibility determination. | of | | | |
| 3. Issue the Claimant any retroactive benefits she/he may be eligible to receive, if a | any. | | | |
| <u>/s/</u> | | | | |
| Carmen G. F | - | | | |
| Administrative Law Ju For Maura Corrigan, Dire | | | | |
| Department of Human Serv | | | | |

Date Signed: <u>February 25, 2013</u> Date Mailed: <u>February 26, 2013</u> **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, math ematical error, or other obvious errors in the he aring 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

