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:	201344639 2009 July 10, 2013 Macomb 12
ADMINISTRATIVE LAW JUDGE: Susanne E.	Harris	
SETTLEMENT	ORDER	
This matter is before the undersigned Administrated and MCL 400.37 following Claimant's request telephone hearing was held on July 10, 2013, for behalf of Claimant included the Claimant's Autority of the Claimant included the Claimant's Autority of the Claimant included the Claimant's Autority of the Claimant's Autority of the Claimant's Autority of the Claimant's Participants on Services (Department) included Eligibility Special	st for a hearing. rom Lansing, Michion horized Representa n behalf <u>of the De</u>	After due notice, a gan. Partic <u>ipants on</u>
ISSUE		
Whether the Department properly:		
☑ denied Claimant's application for benefits☐ reduced Claimant's benefits for:	closed Claimant's	s case for benefits
☐ Family Independence Program (FIP)? ☐ Food Assistance Program (FAP)? ☐ Medical Assistance (MA)? ☐ Adult Medical Assistance (AMP)? ☐ State Disability Assistance (SDA)? ☐ Child Development and Care (CDC) ☐ State Emergency Services (SER)?		ent and Care (CDC)?
FINDINGS OF	FACT	
The Administrative Law Judge, based upon the evidence on the whole record, finds as material	•	rial, and substantial
1. On May 18, 2011, the Department:		
 ☑ denied Claimant's application for benefits ☑ closed Claimant's case for benefits ☑ reduced Claimant's benefits under the 		s):
☐FIP ☐FAP ☐MA ☐AMP ☐	SDA CDC [SER.

2.	On May 18, 2011, the Department sent notice to Claimant (or Claimant's Authorized Hearing Representative) of the:
3.	□ denial □ closure □ reduction.
4.	On April 29, 2013, Claimant filed a request for hearing concerning the Department's action.
	CONCLUSIONS OF LAW
Eligibi	tment policies are found in the Bridges Administrative Manual (BAM), the Bridges lity Manual (BEM), the Reference Tables Manual (RFT), and the State Emergency Manual (ERM).
Respo 42 US Agend throug	e Family Independence Program (FIP) was established pursuant to the Personal ensibility and Work Opportunity Reconciliation Act of 1996, Public Law 104-193, SC 601, et seq. The Department (formerly known as the Family Independence by) administers FIP pursuant to MCL 400.10, et seq., and 1999 AC, Rule 400.3101 th Rule 400.3131. FIP replaced the Aid to Dependent Children (ADC) program we October 1, 1996.
progra impler Regula Agend	the Food Assistance Program (FAP) [formerly known as the Food Stamp (FS) arm] is established by the Food Stamp Act of 1977, as amended, and is mented by the federal regulations contained in Title 7 of the Code of Federal ations (CFR). The Department (formerly known as the Family Independence by) administers FAP pursuant to MCL 400.10, et seq., and 1999 AC, Rule 2001 through Rule 400.3015.
Securi The D	e Medical Assistance (MA) program is established by the Title XIX of the Social ity Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). Department of Human Services (formerly known as the Family Independence by) administers the MA program pursuant to MCL 400.10, et seq., and MCL 05.
	ne Adult Medical Program (AMP) is established by 42 USC 1315, and is istered by the Department pursuant to MCL 400.10, et seq.
for dis Servic progra	e State Disability Assistance (SDA) program, which provides financial assistance sabled persons, is established by 2004 PA 344. The Department of Human es (formerly known as the Family Independence Agency) administers the SDA am pursuant to MCL 400.10, et seq., and 2000 AACS, Rule 400.3151 through 400.3180.

The law provides that disposition may be made of a contested case by stipulation or agreed settlement. MCL 24.278(2).

In the present case, Claimant's AR requested a hearing to dispute the Department's inaction upon his request that the Claimant's MA application be re-processed because the Claimant has since been found to be disabled by the Social Security Administration. Soon after commencement of the hearing, the parties testified that they had reached a settlement concerning the disputed action. Consequently, the Department agreed to do the following: initiate action to issue a DHS-1605, Notice of Case Action indicating that the Claimant has full MA coverage, with no deductible, for the months of October and November of 2010. As a result of this settlement, Claimant's AR no longer wishes to proceed with the hearing. As such, it is unnecessary for this Administrative Law Judge to render a decision regarding the facts and issues in this case.

DECISION AND ORDER

The Administrative Law Judge concludes that the Department and Claimant have come to a settlement regarding Claimant's request for a hearing.

THE DEPARTMENT IS ORDERED TO DO THE FOLLOWING:

1. Initiate action to issue a DHS-1605, Notice of Case Action indicating that the Claimant has full MA coverage, with no deductible, for the months of October and November of 2010.

/s/

Susanne E. Harris Administrative Law Judge for Maura Corrigan, Director Department of Human Services

Date Signed: 7/12/13

Date Mailed: 7/12/13

NOTICE: Administrative Hearings 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. Administrative Hearings will not order a rehearing or reconsideration on the Department's motion where the final decision cannot be implemented within 60 days of the filing of the original request.

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
Reconsideration/Rehearing Request
P.O. Box 30639
Lansing, Michigan 48909

SEH/tb

