

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

IN THE MATTER OF:

[REDACTED]

Reg. No.: 2013-46605
Issue Nos.: 2001, 2013, 3000
Case No.: [REDACTED]
Hearing Date: July 25, 2013
County: Oakland (63-03)

ADMINISTRATIVE LAW JUDGE: Alice C. Elkin

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 July 25, 2013, from Detroit, Michigan. Participants on behalf of Claimant included Claimant. Participants on behalf of Department of Human Services (Department) included [REDACTED]

ISSUE

Did the Department properly deny Claimant's Medical Assistance (MA) application, including coverage under Adult Medical Program (AMP)?

FINDINGS OF FACT

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

1. April 24, 2013, Claimant applied for MA and AMP.
2. On April 30, 2013, the Department sent Claimant a Notice of Case Action denying Claimant's MA application.
3. On May 10, 2013, Claimant filed a request for hearing concerning MA and FAP.

CONCLUSIONS OF LAW

The Food Assistance Program (FAP) [formerly 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 Mich Admin Code, R 400.3001 through R 400.3015.

The Medical Assistance (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 of Human Services (formerly known as the Family Independence Agency) administers the MA program pursuant to MCL 400.10, et seq., and MCL 400.105.

The Adult Medical Program (AMP) is established by 42 USC 1315, and is administered by the Department pursuant to MCL 400.10, et seq. Department policies are contained in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) and the Reference Tables Manual (RFT).

Additionally, Claimant requested a hearing concerning MA and FAP. At the hearing, Claimant testified that the Department notified him that his FAP benefits were increasing to \$200 monthly beginning August 1, 2013. He further testified that he was satisfied with the Department's actions concerning his FAP case and agreed to dismiss his hearing request with respect to his FAP case. The Department agreed to dismissal of the hearing concerning Claimant's FAP case. The hearing proceeded to address the Department's denial of Claimant's MA application.

On April 24, 2013, Claimant filed an MA application. On April 30, 2013, the Department denied the application because he was not blind, disabled, pregnant, the parent/caretaker relative of a dependent child, over the age of 65, or under the age of 21 and because his income exceeded the limit for the program.

An individual may receive MA coverage if he qualifies under a FIP-related MA category or an SSI-related MA category. To receive MA under an SSI-related category, the person must be aged (65 or older), blind, disabled, entitled to Medicare, or formerly blind or disabled. BEM 105, p. 1. To receive MA under a FIP-related category, the person must have dependent children who live with her or him, be a caretaker relative of dependent children, be under age 21, or be a pregnant or recently pregnant woman. BEM 105, p 1; BEM 132 (October 2010), p 1; BEM 135 (January 2011), p. 1. Although Claimant indicated in his hearing request that he had medical conditions, he acknowledged that he did not identify himself as disabled in his MA application. The evidence at the hearing established that Claimant was not eligible for MA under any of the other criteria. Based on the information available to the Department at the time of application, the Department acted in accordance with Department policy when it denied Claimant's MA application.

The Department testified that it also considered Claimant's eligibility for AMP coverage but concluded that he was income ineligible for coverage under the AMP program. See BEM 640 (October 2012), p. 3. AMP provides limited medical services for persons not

eligible for MA coverage. BEM 100 (June 2012), p. 4. Income eligibility for AMP coverage exists when the AMP group's net income does not exceed the group's AMP income limit. BEM 640, p. 3. At the time of Claimant's April 2013 AMP application, the AMP income limit for an individual in an independent living arrangement was \$316. RFT 236 (April 2009), p. 1.

The Department did not provide a budget showing its calculation of Claimant's income eligibility but testified that, in calculating Claimant's AMP budget, it considered Claimant's monthly gross unemployment income of \$1,120. In processing an applicant's AMP income at application, the Department must use amounts already received by the applicant in the processing month and estimate amounts likely to be received during the remainder of the month. BEM 640, p. 4.

In this case, although Claimant testified that his unemployment income ended in May 2013, he verified that he received gross unemployment income of \$1,120 in April 2013. Because there was no evidence that Claimant had any court-ordered child support that he paid, he was not eligible for any income deductions. BEM 640, p. 4. Therefore, his net income for AMP purposes was \$1,120. Because Claimant's net income of \$1,120 exceeded the AMP income limit of \$316, the Department acted in accordance with Department policy when it denied Claimant's AMP application.

DECISION AND ORDER

Pursuant to the Claimant's withdrawal of the hearing request concerning his FAP case, the Request for Hearing concerning FAP is hereby DISMISSED

With respect to Claimant's request for hearing concerning his MA application, the Administrative Law Judge, based on the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, finds that the Department acted in accordance with Department policy when it denied Claimant's MA application, including his coverage under AMP.

Accordingly, the Department's MA and AMP decision is AFFIRMED.



Alice C. Elkin
Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: July 30, 2013

Date Mailed: July 30, 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.

The Claimant may appeal the Decision and Order to Circuit Court within 30 days of the mailing 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 **MAY** 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,
 - 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 48909-07322

ACE/pf

cc:

