

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

IN THE MATTER OF:



Reg. No.: 2013-52629
Issue No.: 2001
Case No.: [REDACTED]
Hearing Date: August 14, 2013
County: Wayne (82-41)

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 August 14, 2013, from Detroit, Michigan. Participants on behalf of Claimant included Claimant. Participants on behalf of the Department of Human Services (Department) included [REDACTED]

ISSUE

Did the Department properly deny Claimant's Adult Medical Program (AMP) application?

FINDINGS OF FACT

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

1. Claimant applied for AMP online in the evening of April 30, 2013.
2. The Department registered Claimant's AMP application on May 1, 2013.
3. On May 8, 2013, the Department sent Claimant a Notice of Case Action denying her MA application on the basis that the program was closed to new enrollees.
4. On June 10, 2013, Claimant filed a request for hearing concerning AMP denial.

CONCLUSIONS OF LAW

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

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.*

Additionally, the Department testified that, although it originally registered Claimant's AMP application on May 1, 2013, and denied the AMP application on the basis that enrollment in the program was closed to new enrollees, when it received Claimant's hearing request on June 10, 2013, it reregistered the application for April 30, 2013, and reprocessed it. The Department testified that it subsequently sent Claimant a June 12, 2013, Notice of Case Action notifying her that her application was denied because her income exceeded the income limit for AMP eligibility.

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 (October 2012), 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.

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. The Department provided an AMP budget showing that it concluded that Claimant's net unearned income was \$1,104 and testified that it based this calculation on Claimant's biweekly unemployment benefits of \$552, as shown on the consolidated inquiry, the Department's data exchange with the Michigan Unemployment Insurance Agency. Based on \$552 in biweekly payments, the Department acted in accordance with Department policy when it concluded that Claimant received gross unemployment income of \$1,104 in April 2013. See BEM 530 (October 2012), pp. 2-3. Because there was no evidence that Claimant had any court-ordered child or spousal support that she paid, she was not eligible for any income deductions. BEM 640, p. 4. Therefore, her net income for AMP purposes was \$1,104. Because Claimant's net income of \$1,104 exceeded the AMP income limit of \$316, the Department acted in accordance with Department policy when it denied Claimant's AMP application.

The Department must consider a client's eligibility for other categories of MA when processing AMP eligibility. BEM 640, p. 1. An individual may receive MA coverage if he qualifies under an 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 an FIP-related category, the person must have dependent children who live with her, 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 it was unclear whether the Department considered Claimant's eligibility for other MA programs when it processed Claimant's AMP application, Claimant's testimony on the record established that she was not under 21 or 65 or over, blind, the parent or caretaker of minor children, or pregnant or recently pregnant. She also admitted that she had not identified herself as disabled in her application. Based on the information available to the Department at the time of application, Claimant was not eligible for MA coverage under any other MA category.

DECISION AND ORDER

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 AMP application and found Claimant ineligible for MA.

Accordingly, the Department's decision is AFFIRMED.



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

Date Signed: August 20, 2013

Date Mailed: August 20, 2013

NOTICE OF APPEAL: 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 or Reconsideration was made, within 30 days of the receipt date of the Decision and Order of Reconsideration or Rehearing Decision.

A Request for Rehearing or Reconsideration may be granted when one of the following exists:

- Newly discovered evidence that existed at the time of the original hearing that could affect the outcome of the original hearing decision;
- Misapplication of manual policy or law in the hearing decision which led to a wrong conclusion;
- Typographical, mathematical or other obvious error in the hearing decision that affects the rights of the client;
- Failure of the ALJ to address in the hearing decision relevant issues raised in the hearing request.

The Department, AHR or the claimant must specify all reasons for the request. MAHS will not review any response to a request for rehearing/reconsideration. A request must be *received* in MAHS within 30 days of the date the hearing decision is mailed.

The written request must be faxed to (517) 335-6088 and be labeled as follows:

Attention: MAHS Rehearing/Reconsideration Request

If submitted by mail, the written request must be addressed as follows:

Michigan Administrative Hearings
Reconsideration/Rehearing Request
P.O. Box 30639
Lansing, Michigan 48909-07322

ACE/pf

cc:

