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

IN THE MATTER OF:



2013-50041
2026
August 7, 20
Wayne-17

026 ugust 7, 2013

ADMINISTRATIVE LAW JUDGE: Jan Leventer

HEARING DECISION

This matter is before the undersigned Admini strative 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 August 7, 2013, fr om Detroit, Michigan. Participants on behalf of Claimant inc luded the Claimant and her Authorized Representative. Participant s on behalf of the Depar tment of Human Services (Department)

included

Eligibility Specialist.

ISSUE

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

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Family Independence Program (FIP)? Food Assistance Program (FAP)?

Medical Assistance (MA)?

Adult Medical Assistance (AMP)?

State Disability Assistance (SDA)?

Child Development and Care (CDC)?

FINDINGS OF FACT

The Administrative Law Judge, based on t he competent, material, and substantial 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 June 1, 2013, the Department denied Claimant's application

 \boxtimes closed Claimant's case

due to a determination that she failed to m eet her Medicaid deductible (Pat ient Pay Amount or PPA) in at least one of the last three months.

3. On May 1, 2013, the Department sent

Claimant notice of the

Claimant's Authorized Representative (AR)

4. On May 24, 2013, Claimant filed a hearing request, protesting the ☐ denial of the application. ⊠ closure of the case.

CONCLUSIONS OF LAW

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

☐ The Family Independence Program (FIP) was established pursuant 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, Rule 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, Rule 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 Medical Program (AMP) is established by 42 USC 1315, and is administered by the Department pursuant to MCL 400.10, *et seq*.

The State Disabilit y Assistance (SDA) program, which provides financial ass istance for disabled persons, is established by 2004 PA 344. The Department of Human Services (formerly known as the Family Independence Agency) administers the SDA program pursuant to MCL 400.10, *et seq*., and 20 00 AACS, Rule 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 Feder al Regulations, Parts 98 and 99. The Depart ment provides servic es to adults and children pursuant to MCL 400.14(1) and 1999 AC, Rule 400.5001 through Rule 400.5015.

Additionally, the following findings of fact and conclusions of la w are entered in this case.

In this case the Department terminated Cla imant's MA benefits due to a determination that she failed to meet her deductible for at least one of the past three months. Dept. Exh. 1, p. 7.

However, the Depart ment never informed Cla imant of her responsibility to pay a deductible and to present receipts to the Department to prove that she met her deductible. Claimant brought timely receip ts to the hearing to present to the Department.

The Department's Bridges Administra tive Manual (BAM) 105, "Rights and Responsibilities," requires the Department to determine eligibility for benefits, provid e benefits and protect client rights. The client for her or his part must provide all information and documents necessary for the Department's calculations. Department of Human Services Bridges Administrative Manual (BAM) 105 (2013).

Applying BAM 105 to this case, it is found and determined that the Department failed to protect Claimant's rights to benefits. T he Department failed to tell Claimant about the deductible requirements, and in addition it fa iled to inform her of the requirement to submit health care receipts to the Department. This is found to be a failure of the protection of the client's rights to benefits. Cli ents cannot perform th eir responsibilities unless the Department makes them aware of these responsibilities. BAM 105.

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 \boxtimes 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 idid act properly. idid not act properly.

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

THE DEPARTMENT IS ORDERED TO DO THE FOLLOWING WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:

- 1. Reinstate Claimant's MA benefits effective June 1, 2013.
- 2. Review Claimant's health care receipts for the months of February, March and April, 2013, to determine if she met her deductible in each month.

- 3. Notify the Claimant of t he Department's decision in a Notice of Case Action or other document.
- 4. Provide retroactive and ongoing MA benef its to Claimant at the benefit lev el to which she is entitled.
- 5. All steps shall be taken in accordance with Department policy and procedure.

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Jan Leventer Administrative Law Judge for Maura Corrigan, Director Department of Human Services

Date Signed: August 28, 2013

Date Mailed: August 29, 2013

NOTICE OF APPE AL: 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 dec ision cannot be implemented within 90 days of the filing of the original request (60 days for FAP cases).

The claimant may appeal the De cision and Order to Circuit Court within 30 days of the receipt of the Dec ision a nd Order or, if a tim ely 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 disc overed evidence that existed at the time of the or iginal 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 clai mant 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

