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 67762 2021 October 28, 2013 Wayne (57)
ADMINISTRATIVE LAW JUDGE: Lynn M. Ferris		
HEARING DECISION		
Following Claimant's request for a hearing, this matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and 400.37; 7 CFR 273.15 to 273.18; 42 CFR 431.200 to 431.250; 45 CFR 99.1 to 99.33; and 45 CFR 205.10. After due notice, a telephone hearing was held on October 28, 2013, from Detroit, Michigan Participants on behalf of Claimant included the Claimant and the Claimant's Authorized Hearing Representative, her son. Participants on behalf of the Department of Human Services (Department) included and FIM.		
<u>ISSUE</u>		
Due to excess assets, did the Department properly ⊠ deny Claimant's application □ close Claimant's case for:		
☐ Family Independence Program (FIP)? ☐ Food Assistance Program (FAP)? ☐ Medical Assistance (MA)? ☐	State Disability	Assistance (AMP)? Assistance (SDA)? cy Relief (SER)?
FINDINGS OF FACT		
The Administrative Law Judge, based on the competent, material, and substantia evidence on the whole record, including the testimony at the hearing, finds as materia fact:		
Claimant ⊠ applied for ☐ received: ☐ FIP ☐ FAP ☑ MA ☐ AMP ☐ Septimized benefits.	SDA SER	

- Due to excess assets, on July 1, 2013, the Department

 ☐ denied Claimant's application. ☐ closed Claimant's case.
- 3. On July 8, 2013, the Department sent Claimant/Claimant's Authorized Representative (AR) its decision.
- 4. On August 17, 2013, Claimant/Claimant's Authorized Hearing Representative (AHR) filed a hearing request, protesting the Department's actions.

CONCLUSIONS OF LAW

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

☑ The Medical Assistance (MA) program is established by the Title XIX of the Social Security Act, 42 USC 1396-1396w-5, and is implemented by 42 CFR 400.200 to 1008.59. The Department of Human Services (formerly known as the Family Independence Agency) administers the MA program pursuant to MCL 400.10 and MCL 400.105.

Additionally, in this case the Department denied the claimant's application for Medical Assistance due to excess assets. The claimant was asked to provide bank account statements and did reply in a timely manner and provided the department bank statements showing the average daily balance and current balance as of June 10, 2013. In order to be eligible for medical assistance, the applicable asset limit must be met. The claimant was a one-person applicant group and therefore the asset limit was \$2000.

Policy applicable to this situation is found in BEM 400 at page 6 and provides:

Asset eligibility exists when the asset group's countable assets are less than, or equal to, the applicable asset limit at least one day during the month being tested. BEM 400 (10/1/13).

In this case the claimant's assets at the time of application were determined to be in excess of the \$2000 asset limit, in the amount of \$2431. To make this determination the Department used the current available balance provided on a one-page bank account statement provided by the claimant pursuant to a verification request. At no time did the Department seek to determine the lowest available balance in the claimant's three accounts to determine whether the asset tests for medical assistance

was met. The Department only utilized the current balance provided. The claimant, who is 92 years of age, and her Authorized Hearing Representative were never requested to provide account balances showing the daily balance, had same been requested the claimant may well have been eligible, particularly in light of the fact that her Social Security check is deposited into the account on a monthly basis. Based on the facts and the testimony provided in this case, it is determined that the Department did not have sufficient information to determine the lowest daily balance in all of the claimant's three accounts and therefore did not properly determine whether the \$2000 asset limit was met one day during the month.

The Administrative Law Judge, based upon the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, if any, finds that the Department

☑ did not act in accordance with Department policy when it based its determination that the claimant was over asset limit on the current balance only, rather than the lowest daily balance, for the accounts during the month of June 2013.

DECISION AND ORDER

Accordingly, the Department's decision is

REVERSED.

- ☑ THE DEPARTMENT IS ORDERED TO BEGIN DOING THE FOLLOWING, IN ACCORDANCE WITH DEPARTMENT POLICY AND CONSISTENT WITH THIS HEARING DECISION, WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:
 - 1. The Department shall initiate re-registration of the claimant's medical assistance application and seek further verification of bank account information to determine whether or not the claimant met the asset limitation of \$2000 for June 2013 on any day during that month when her three accounts are examined.
 - 2. The claimant may submit additional verifications showing the actual daily balances for her three accounts with for the month of June 2013 so that the Department can determine the lowest balance for each of claimant's accounts during the month of June 2013, and thereby determine whether the asset limit was met for at least one day in that month.

3. The Department shall make a determination of asset eligibility for June 2013 once the verifications are requested and provided in accordance with Department policy.

Lynn M. Ferris
Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: November 12, 2013

Date Mailed: November 12, 2013

NOTICE OF APPEAL: 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.

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).

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

