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

#### IN THE MATTER OF:

Reg. No.: 201369324

Issue No.: Case No.:

Hearing Date:

November 20, 2013

County: Monroe

ADMINISTRATIVE LAW JUDGE: Gary F. Heisler

# **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 November 20, 2013, from Lansing, Michigan. Claimant appeared and testified. Participants on behalf of the Department of Human Services (Department) included ES and AP Supervisor.

# <u>ISSUE</u>

Did the Department of Human Services determine the proper Medical Assistance (MA) eligibility for Claimant on August 26, 2013?

#### FINDINGS OF FACT

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

- Claimant was an ongoing recipient of AD-Care Medical Assistance (MA) benefits.
- 2. On August 26, 2013, the Department ran an MA financial eligibility budget to include Claimant's spouse's earned income. The budget showed that Claimant's current household income required MA coverage of a deductible. Claimant was sent notice of the determination.
- 3. On September 6, 2013, Claimant submitted a request for hearing.

### **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), 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.

During this hearing Claimant and her souse's incomes were verified. Following the hearing this Administrative Law Judge reviewed the MA financial eligibility budget submitted by the Department. It is noted that the budget submitted (Department Exhibit 7) states it is for a Group 2 FIP Related MA (Adult). Evidence in the record shows there is a dependent child (Daniel) in the household.

Claimant receives Retirement, Survivors, Disability Insurance (RSDI) benefits based on a disability onset date of July 1, 2011 (Department Exhibit 5). Claimant was previously receiving full MA under AD-Care which is an SSI Related category. Group 2 FIP Related MA financial eligibility budgeting is contained in Department of Human Services Bridges Eligibility Manual (BEM) 536 (2013). Department of Human Services Bridges Eligibility Manual (BEM) 541 MA Income Deductions – SSI Related Adults (2013) contains provisions for income deductions which are not applicable to MA FIP Related adults.

Department of Human Services Bridges Eligibility Manual (BEM) 105 Medicaid Overview (2013) provides that persons may qualify under more than one MA category and Federal law gives them the right to the most beneficial category. The evidence presented by the Department does not address whether MA coverage for Claimant under Group 2 FIP Related or Group 2 SSI Related categories is more beneficial. While it is possible that BRIDGES has already made that comparison, there is no evidence in this record on the issue.

The Administrative Law Judge, based on the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, if any, finds that the Department failed to satisfy its burden of showing that it acted in accordance with Department policy when it determined Claimant's Medical Assistance (MA) eligibility on August 26, 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. Re-determine Claimant's Medical Assistance (MA) eligibility from October 1, 2013 in accordance with Department policy.
- 2. Issue Claimant a current Notice of Case Action (DHS-1605) showing the results of the re-determination.

/s/

Gary F. Heisler Administrative Law Judge for Maura Corrigan, Director Department of Human Services

Date Signed: <u>12/06/2013</u>

Date Mailed: 12/09/2013

**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

## GFH/sw

cc: