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

IN THE MATTER OF:



Reg. No.: 2014-7608

Issue No(s).: 2002

Case No.: December 19, 2013

County: Washtenaw

ADMINISTRATIVE LAW JUDGE: Vicki L. Armstrong

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 December 19, 2013, from Lansing, Michigan. Participants on behalf of Clai mant included Language Line interpreter and Participants on behalf of the Department of Human Services (Department) included Assistant Attorney General Family Independence Manager Candace Baker and Eligibility Specialist

ISSUE

Did the Department properly deny Claimant's application for Medical Assistance (MA)?

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. On September 20, 2013, Claimant applied online for Family Independenc e Program (FIP), Food Assistance Program (FAP) and Medical Assistance (MA).
- 2. On September 23, 2013, the Department attempted to contact Claimant. The telephone was answered and hung up. The Department then mailed Claimant an Appointment Notice for an in-person interview for Claimant and his wife for 9/30/13 at 8:45AM. (Dept Ex 1, p 1).
- 3. On September 25, 2013, the Department mail ed Claimant a Ver ification Checklist with a due date of 10/7/13. (Dept Ex 1, pp 2-3).
- 4. On September 30, 2013, Claimant and his wif e failed to show for the in-person interview. A Notice of Missed Interview was mailed to Claim ant informing him that he had to rescheduled the interview before 10/20/13 or his application for FAP would be denied. The Department also mailed Claim and a Notice of Case Action

informing Claimant his application for FIP h ad been denied for failing to verify the requested information. Claimant's wife and children were approved for MA. (Dept Ex 1, pp 8-11).

- 5. On October 3, 2013, Claim ant and his wife attended an in -person interview at the Washtenaw County office. The Departm ent used the Language Link as the interpreter during the interview. On October 3, 2013, the Department mailed Claimant a Notice of Case Act ion closing MA for Claimant effective 11/1/13 because the group's countable income exceeded the limit for the program. MA was approved for Claimant's wife and children effective 11/1/13. FAP was also approved effective 9/20/13 for and beginning 10/1/13 at per month. A Verification Checklist was also mailed to Claimant with a due date of 10/14/13. (Dept Ex 1, pp 12-17).
- 6. On October 15, 2013, Claimant submitted a Request for a Hearing.
- 7. On October 21, 2013, the Department mailed Claimant a Notice of Case Action denying his application for MA and FAP for failing to turn in verification of unearned income. (Dept Ex 1, pp 18-20).

CONCLUSIONS OF LAW

Department policies are contained in the Department of Human Service s Bridges Administrative Manual (BAM), Department of Human Services Bridges Eligibility Manual (BEM), D epartment of Human Service es Reference Tables Manual (RFT), and Department of Human Services Emergency Relief Manual (ERM).

As a preliminary matter, Claimant submitt ed a Request for a Hearing on 10/15/13. Therefore, the Notice of Ca se Action dated 10/21/13 is not applicable to this hearing because those actions had not taken effect at the time of the hearing request. Therefore, at the time of the hearing request, Claimant had been denied MA, but had been approved for FAP, and a decision regarding FIP had not been made. Therefore, the only negative action to be decided is whether the D epartment had properly denied Claimant Medicaid at the time of his hearing request.

The Medic al Assistance (MA) program is est ablished by the Title XIX of the Socia I 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.

According to the Notice of Case Acti on dated 10/3/13, Claim ant's application for Medicaid had been denied because his group's countable income exceeded the limit for the program. Claimant's wife and childr en had been approved for Medicaid. The dispute centers on whet her the monies given to Claimant from was countable or uncountable unearned income.

First, Claimant's application and subsequent budgets were not submitted in the hearing packet. Therefore, this Administrative Law J udge is at a loss as to what monies were counted as countable income.

As a result, this Administrative Law Ju dge, 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 show ing that it acted in accordance with Department policy when it denied Claimant Medicaid (see Notice of Case Action, 10/3/13 pp 12-14).

DECISION AND ORDER

Accordingly, the Department's decision is **REVERSED**.

- THE DEPARTMENT IS ORDERED TO BEGIN DOING THE FOLLOWING, IN ACCORDANCE WIT H DE PARTMENT P OLICY AND CONSIS TENT WIT H THIS HEARING DECISION, WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:
- Redetermine Claimant's MA eligib ility as of 10/3/13, showing what income was counted and what specific policy was re lied on in finding the inc ome was "countable" as opposed to "uncountable."
- 2. After the redetermination, issue an up dated Notic e of Case Action showing the decision reached as to Claimant 's (not hi s wife's or children's) MA determination and which policy was used in reaching that decision.

Vicki L. Armstrong Administrative Law Judge for Maura Corrigan, Director Department of Human Services

Date Signed: January 3, 2014

Date Mailed: January 6, 2014

NOTICE OF APP EAL: The claimant may appea I the Dec ision and Order to Circuit Court within 30 days of the receipt of the Decision and Order or, i f a timely Request for Rehearing or Reconsiderati on was made, within 30 days of the receipt date of the Decision and Order of Reconsideration or Rehearing Decision.

Michigan Administrative Hearing S ystem (MAHS) may order a rehearing or reconsideration on either its own motion or at the request of a par ty within 30 days of

the mailing date of this Dec ision and Order. MAHS will not order a rehearing or reconsideration on the Department's mo tion where the final decis ion 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 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 reas ons 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

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