

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

IN THE MATTER OF:

████████████████████
██
██

Reg. No.: 2013 24028
Issue No.: 2018
Case No.: ██████████
Hearing Date: May 16, 2013
County: Wayne (17)

ADMINISTRATIVE LAW JUDGE: Lynn M. Ferris

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 May 16, 2013, from Detroit, Michigan. Participants on behalf of Claimant included the Claimant and ██████████. Participants on behalf of the Department of Human Services (Department) included ██████████ Medical Contact Worker and CIS, and ██████████ Assistance Payments Worker.

ISSUE

Did the Department properly deny the Claimant's application for Medical Assistance based upon disability?

Did the Department properly deny the Claimant's application for FIP Cash Assistance.

FINDINGS OF FACT

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

1. The Claimant applied for Medical Assistance based upon disability, and FIP cash assistance on December 11, 2012. Exhibit 1
2. The Department held a telephone interview with the Claimant on December 13, 2012 at which time the Claimant informed the caseworker that he was not disabled. Exhibit 2

3. On December 13, 2012 the Department sent the Claimant a Notice of Case Action denying the Claimant's request for Medical Assistance based upon Disability based upon Claimant's statement that he was not disabled.
4. The Claimant requested a hearing on January 9, 2013 protesting the denial of his application on the basis of disability and the denial of FIP cash assistance.

CONCLUSIONS OF LAW

Department policies are contained in the Bridges 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 Work Opportunity Reconciliation Act of 1996, Public Law 104-193, 42 USC 601, *et seq.* The Department (formerly known as the Family Independence Agency) administers FIP pursuant to MCL 400.10, *et seq.*, and Mich Admin Code, R 400.3101 through R 400.3131. FIP replaced the Aid to Dependent Children (ADC) program effective October 1, 1996.

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.*

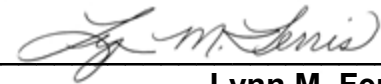
Additionally, in this case the Department denied the Claimant's application for the Adult Medical Program (AMP) because the program was closed to new enrollment at the time of the application. The Department also denied the Claimant's request for Medical Assistance based upon the fact that during a telephone interview, even though the Claimant's application stated that he was disabled due to bipolar, depression and was unable to focus due to these conditions, the Department was advised during the interview that the Claimant did not want to work and was not disabled. Based upon the best information then available to the Department, the application was denied as it was advised by the Claimant that he was not disabled. BAM 130 (5/1/12). Likewise, because the Department determined that the Claimant was not disabled, a dependent child (under age of 18), or aged (over 65), it properly found that Claimant was not eligible for cash assistance and thus it is determined that the Department correctly denied the application. BEM 210,

The Claimant may reapply for medical assistance based upon disability at any time.

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 did act properly when the Department denied the Claimant's application for Medical Assistance on the basis of Disability and Cash Assistance.

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



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

Date Signed: June 5, 2013

Date Mailed: June 5, 2013

NOTICE: 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 was made, within 30 days of the receipt date of the rehearing decision.

Claimant may request a rehearing or reconsideration for the following reasons:

- A rehearing **MAY** be granted if there is newly discovered evidence that could affect the outcome of the original hearing decision.
- A reconsideration **MAY** be granted for any of the following reasons:
 - misapplication of manual policy or law in the hearing decision,
 - typographical errors, mathematical error, or other obvious errors in the hearing decision that affect the substantial rights of the claimant:
 - failure of the ALJ to address other relevant issues in the hearing decision.

Request must be submitted through the local DHS office or directly to MAHS by mail at
Michigan Administrative Hearings
Reconsideration/Rehearing Request
P. O. Box 30639
Lansing, Michigan 48909-07322

LMF/cl

cc:

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]