

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

IN THE MATTER OF:

[REDACTED]

Reg. No.: 2013-42627
Issue No.: 2015
Case No.: [REDACTED]
Hearing Date: July 18, 2013
County: Wayne (82-82)

ADMINISTRATIVE LAW JUDGE: Alice C. Elkin

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 October 29, 2012, from Detroit, Michigan. Participants on behalf of Claimant included [REDACTED] Participants on behalf of the Department of Human Services (Department) included [REDACTED].

ISSUE

Did the Department properly process Claimant's December 27, 2012, application for Medical Assistance (MA) coverage and application for retroactive MA coverage to September 2012?

FINDINGS OF FACT

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

1. On December 27, 2012, Claimant's AHR filed a filing form regarding Claimant's intent to file an MA application.
2. On January 24, 2013, the AHR submitted an application requesting MA coverage for Claimant with an application for retroactive coverage to September 2012. The application included an authorization to represent signed by Claimant on January 23, 2013, authorizing the AHR to act as his authorized representative (AR).

3. On February 20, 2013, the Department sent Claimant a Notice of Case Action denying the application on the basis that Claimant had failed to provide requested medical verifications and a letter authorizing the AHR to represent him.
4. On April 15, 2013, the AHR filed a request for hearing disputing the Department's actions.

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), and Department of Human Services Reference Tables Manual (RFT).

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.

Additionally, there are two categories of MA coverage: FIP-related MA and SSI-related MA. MA under an SSI-related category is available to persons who are aged (65 or older), blind, disabled, entitled to Medicare or formerly blind or disabled. BEM 105 (October 2010), p. 1. MA under an FIP-related category is available to families with dependent children, caretaker relatives of dependent children, person under age 21, and pregnant (or recently pregnant) women. BEM 105, p. 1. Persons may qualify under more than one MA category, and federal law gives them the right to the most beneficial category. BEM 105, p. 2. The most beneficial category is the one that results in eligibility or the least amount of excess income. BEM 105, p. 2.

In this case, Claimant's AHR testified that a filing form for Claimant was filed on December 27, 2012, preserving that date for the MA application submitted on Claimant's behalf on January 24, 2013. See BAM 220 (November 2012), p. 1. The application listed Claimant's two minor children as members of his household and identified Claimant as disabled. Based on the information in the application, Claimant was eligible for both SSI-related MA on the basis of his alleged disability and FIP-related MA on the basis of being the parent of, and living with, his minor children. See BEM 135 (January 2011), p. 1; BEM 166 (October 2010), p. 1.

In this case, the Department testified that it denied Claimant's application because he had failed to provide requested medical verifications and documentation of the AHR's authority to represent him. The evidence at the hearing showed that the AHR provided documentation signed by Claimant on January 23, 2013, authorizing the AHR to act as his authorized representative with the January 24, 2013, application. Thus, the Department could not rely on the failure to provide documentation of authorization to close Claimant's case. The AHR acknowledged that it did not return medical verifications. However, while Claimant's failure to verify his disability would preclude his

eligibility for SSI-related MA, it would not preclude his eligibility for FIP-related MA. Although the Department expressed concerns at the hearing that Claimant had not included the minor children in his household with respect to his ongoing Food Assistance Program (FAP) case during the same period he was alleging in his MA application that they were members of his household, the Department acknowledged that it did not process Claimant's eligibility for MA coverage under a FIP-related program. The Department must consider all the MA category options for which the client may be eligible in order for the client's right to choose the most beneficial program to be meaningful. BEM 105, p. 2. Because the Department did not process Claimant's eligibility for MA coverage under a FIP-related program, the Department did not act in accordance with Department policy.

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 not act in accordance with Department policy when it failed to process Claimant's MA application for eligibility under a FIP-related MA program.

Accordingly, the Department's decision is REVERSED.

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

1. Reregister Claimant's December 27, 2012, MA application and application for retroactive coverage to September 2012;
2. Begin reprocessing the applications in accordance with Department policy and consistent with this Hearing Decision;
3. Provide Claimant with any MA coverage he is eligible to receive from the date of eligibility ongoing; and
4. Notify Claimant and Claimant's AHR in writing of its decision in accordance with Department policy.



Alice C. Elkin
Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: July 24, 2013

Date Mailed: July 24, 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,
 - the 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

ACE/pf

cc:

