

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

IN THE MATTER OF:

[REDACTED]

Reg. No: 2013 -62775
Issue No: 2009; 4009
Case No: [REDACTED]
Hearing Date: November 5, 2013
Iosco County DHS

ADMINISTRATIVE LAW JUDGE: Landis Y. Lain

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; 42 CFR 431.200 to 431.250; and 45 CFR 205.10. After due notice, an in-person hearing was held on November 5, 2013, from East Tawas, Michigan. Participants on behalf of Claimant included Claimant and authorized hearings representative [REDACTED] from [REDACTED]. Participants on behalf of the Department of Human Services (Department) included [REDACTED], Eligibility Specialist.

ISSUE

Whether Claimant meets the disability criteria for Medical Assistance (MA-P) and State Disability Assistance (SDA)?

FINDINGS OF FACT

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

1. On January 17, 2013, Claimant filed an application for Medical Assistance (MA-P) and State Disability Assistance benefits alleging disability.
2. On May 1, 2013, the Medical Review Team denied Claimant's application stating that Claimant's impairments were non-severe.
3. On May 16, 2013, the Department case worker sent Claimant notice that his application was denied.
4. On July 23, 2013, Claimant filed a request for a hearing to contest the Department's negative action.

5. On October 1, 2013, the State Hearing Review Team again denied Claimant's application.
6. The hearing was held on November 5, 2013. At the hearing, Claimant waived the time periods and requested to submit additional medical information.
7. Additional medical information was submitted and sent to the State Hearing Review Team on December 6, 2013.
8. On February 4, 2014, the State Hearing Review Team approved Claimant stating in its recommendation: The disability determination service approved this claim for benefits in [REDACTED]. At this point it is not clear whether the Claimant has been put into [REDACTED] or not, as his claim is being reviewed by [REDACTED]. However it is anticipated that he will be placed into payment status. Therefore, MA-P and retro MA-P is approved effective [REDACTED]. SDA is approved per BEM 261.

CONCLUSIONS OF LAW

The State Disability Assistance (SDA) program which provides financial assistance for disabled persons is established by 2004 PA 344. The Department of Human Services (DHS or Department) administers the SDA program pursuant to MCL 400.10, *et seq.*, and MAC R 400.3151-400.3180. Department policies are found in the Program Administrative Manual (BAM), the Program Eligibility Manual (BEM) and the Program Reference Manual (PRM).

The Medical Assistance (MA) program is established by 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 (DHS or Department) administers the MA program pursuant to MCL 400.10, *et seq.*, and MCL 400.105. Department policies are found in the Program Administrative Manual (PAM), the Program Eligibility Manual (PEM) and the Program Reference Manual (PRM).

Because of the SHRT determination, it is not necessary for the Administrative Law Judge to discuss the issue of disability, per BAM, Item 600. The Department is required to initiate a determination of Claimant's financial eligibility for the requested benefits, if not previously done.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that the Claimant meets the definition of medically disabled under the Medical Assistance Program as of [REDACTED] and the State Disability Assistance Program as of the [REDACTED] application date.

Accordingly, the Department is **ORDERED** to initiate a review of the [REDACTED] application if it is not already done so, to determine if all other non-medical eligibility criteria are met. The Department shall inform the Claimant of the determination in writing.

A medical review should be scheduled [REDACTED]. The Department should check to see if Claimant is in current payment status or not. If the Claimant is in current payment status at the medical review no further action will be necessary. However, if the Claimant is not in current payment status at the medical review, the Department is to obtain updated application forms (DHS49) and obtain updated medical records.

It is ORDERED that the Department shall review this case in one year from the date of this Decision and Order.



Landis Y. Lain
Administrative Law Judge
for Maura D. Corrigan, Director
Department of Human Services

Date Signed: 2/13/14

Date Mailed: 2/14/14

NOTICE: Administrative Hearings 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. Administrative Hearings 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.

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.

LYL/tb

cc:

[REDACTED]