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

IN THE MATTER OF:



Reg. No.: 2013-64336

Issue No(s).:

Case No.:

Hearing Date: February 25, 2014

2001

County: Oakland - 3

ADMINISTRATIVE LAW JUDGE: DARRYL T. JOHNSON

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 F ebruary 25, 2014, from Lansing, Michigan. Participants on behalf of Claimant incl. uded the Claimant, and her mother, Participants on b ehalf of the Department of Human Service s (Department) included Assistance Payments Worker

<u>ISSUE</u>

Did the Department properly deny Claimant's application for retroactive Medic al Assistance (MA) and grant her Adult Medical Program (AMP) benefits?

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. Claimant applied on January 7, 2013 for retroactive MA for the month of November 2012.
- That applic ation was denied. The Depa rtment conceded that the denial was in error while her State Disab ility Assistance case was pending before the Medica I Review Team (MRT).
- 3. On April 23, 2013 Claimant applied for the AMP benefits.
- 4. On June 13, 2013, the Department denied Claimant's application for retro-active Medicaid Group 2 Aged, Blind, Disabled, in a Notice of Case Action (Exhibit 1 Pages 4-5) because she is "not aged, b lind, disabled, under 21, pregnant, or parent/caretaker relative of adependent child." The Department awarded her AMP benefits with a \$0.00 deductible
- 5. On August 7, 2013 Claimant requested a hearing.

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).

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.

The Adult Medical Pr ogram (AMP) is established by 42 USC 1315 and is administered by the Department pursuant to MCL 400.10.

The State Disability Assistance (SDA) program is established by the Social Welfare Act, MCL 400.1-.119b. The Department of Human Services (formerly known as the Family Independence Agency) administers the SDA program pursuant to MCL 400.10 and Mich Admin Code, R 400.3151-.3180.

BEM 260 provides that "A person meets the di sability or blindness factor for a month if he is determined disabled or blin d for the month being tested." The Claimant's health condition was reviewed by the MRT and she was found not to be blind or disabled. BAM 815 at pages 7-8 puts the responsibility on the MRT to review the Claimant's medical condition. If the MRT finds that the Claimant is neither b lind nor disabled, the Claimant is not eligible for benefits.

The eligibility requirements for AMP are found in BEM 640. Enrollment in AMP is limited to only that period when the Department of Co mmunity Health declares enrollment to be open. The la st open enrollment period was last April, and Claimant was approved for AMP beginning April 1, 2013.

The Claimant and her mother were under the mistaken assumption that the hearing was their oppor tunity to contest the finding that Claimant is not disa bled. Claimant was found by the MRT, and by the Social Sec urity Administration, not to be di sabled. Her disability is not an issue properly before the undersigned and therefore no decision can be rendered on that 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 acted in accordance with Department policy when it denied Claimant's a pplication for MA SDA and approved her application for AMP.

DECISION AND ORDER

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

Darryl T. Johnson
Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: February 27, 2014

Date Mailed: February 27, 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 disc overed 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

DTJ/las

