

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

**IN THE MATTER OF:**

[REDACTED]

Reg. No.: 20141871  
Issue No.: 2001, 3001  
Case No.: [REDACTED]  
Hearing Date: February 11, 2014  
County: DHS SSPC-WEST

**ADMINISTRATIVE LAW JUDGE:** Kevin Scully

**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 February 11, 2014, from Lansing, Michigan. Participants on behalf of Claimant included [REDACTED] Participants on behalf of the Department of Human Services (Department) included [REDACTED]

**ISSUE**

Whether the Department of Human Services (Department) properly determined the Claimant's Medical Assistance (M.A.) and Food Assistance Program (FAP) eligibility?

**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 December 9, 2013, the Claimant applied for Medical Assistance (M.A.) and Food Assistance Program (FAP) benefits.
2. On December 10, 2013, the Department denied the Claimant's application for Medical Assistance (M.A.), and approved the Claimant for Food Assistance Program (FAP) with a prorated allotment of \$ [REDACTED]
3. The Department received the Claimant's request for a hearing on January 13, 2014, protesting Medical Assistance (M.A.) and Food Assistance Program (FAP) benefits.

### **CONCLUSIONS OF LAW**

The Medical Assistance (MA) program is established by the Title XIX of the Social 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 Food Assistance Program (FAP) [formerly known as the Food Stamp program] is established by the Food Stamp Act of 1977, as amended, 7 USC 2011 to 2036a and is implemented by the federal regulations contained in 7 CFR 271.1 to 285.5. The Department (formerly known as the Family Independence Agency) administers FAP pursuant to MCL 400.10 and Mich Admin Code, R 400.3001 to .3015.

On December 9, 2013, the Claimant submitted an application for Medical Assistance (M.A.). The Claimant is not a minor, does not care for a minor child in his household, is not pregnant, is not a senior applicant, and is not disabled. The Claimant failed to establish that he meets the criteria for any category of Medical Assistance (M.A.) other than the Adult Medical Program (AMP). The Department denied the Claimant Adult Medical Program (AMP) benefits due to a current freeze on enrollment in that program.

The Department will prorate Food Assistance Program (FAP) for the initial month by multiplying the monthly benefits by the number of days remaining in the month including the application date, and dividing this amount by the total number of days in the month. Department of Human Services Bridges Eligibility Manual (BEM) 556 (July 1, 2013), p 6.

On December 10, 2013, the Department notified the Claimant that it had approved him for a monthly allotment of \$ [REDACTED] for December of 2013.

Based on the evidence and testimony available during the hearing, the Department has established that as of January 13, 2013, when it received the Claimant's request for a hearing, that the Department had properly determined the Claimant's eligibility for the Food Assistance Program (FAP).

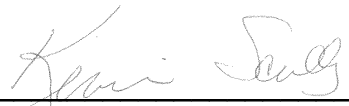
Any action taken by the Department after January 13, 2014, is not relevant to this hearing, but may be addressed by another request for a hearing if the Claimant believes that the Department has not acted in accordance with its policies.

### **DECISION AND ORDER**

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 Medical Assistance (M.A.), and determined Food Assistance Program (FAP) for December of 2013.

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

Kevin

  
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Scully  
Administrative Law Judge  
for Maura D. Corrigan, Director  
Department of Human Services

Date Signed: February 12, 2014

Date Mailed: February 12, 2014

**NOTICE OF APPEAL:** 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 or Reconsideration was made, within 30 days of the receipt date of the Decision and Order of Reconsideration or Rehearing Decision.

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).

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 original 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 claimant must specify all reasons 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:

201421871/KS

Michigan Administrative Hearings  
Reconsideration/Rehearing Request  
P.O. Box 30639  
Lansing, Michigan 48909-07322

KS/hj

cc:

