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

IN THE MATTER OF:



 Reg. No.:
 2013-64851

 Issue No.:
 2009

 Case No.:
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ADMINISTRATIVE LAW JUDGE: Christian Gardocki

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, an in-person hearing was held on February 13, 2014, from Detroit, Michigan. Participants included the above-named Claimant. testified and appeared as Claimant's authorized hearing representative (AHR). Participants on behalf of the Department of Human Services (DHS) included Medical Contact Worker.

ISSUE

The issue is whether DHS properly denied Claimant's application for Medical Assistance (MA) for the reason that Claimant is not a disabled individual.

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 **Determine**, Claimant applied for MA benefits, including retroactive MA benefits from 8/2012.
- 2. Claimant's only basis for MA benefits was as a disabled individual.
- 3. On Claimant applied for Supplemental Security Income (SSI) benefits from the Social Security Administration (SSA).

- 4. On **Marcon**, the Medical Review Team (MRT) determined that Claimant was not a disabled individual (see Exhibits 6-7).
- 5. On **Mattern**, DHS denied Claimant's application for MA benefits and mailed a Notice of Case Action informing Claimant of the denial.
- 6. On **Sector**, SSA denied Claimant's SSI application and Claimant failed to appeal the denial.
- 7. On Claimant requested a hearing disputing the denial of MA benefits.
- 8. On SHRT determined that Claimant was not a disabled individual, in part, by application of Medical-Vocational Rule 203.14 (see Exhibits 65-66).
- 9. On , Claimant reapplied for SSI benefits.
- 10. On , an administrative hearing was held.
- 11. Claimant presented new medical documents (Exhibits A1-A16) at the hearing.
- 12. During the hearing, Claimant waived the right to receive a timely hearing decision.
- 13. During the hearing, Claimant and DHS waived any objections to allow the admission of any additional medical documents considered and forwarded by SHRT.
- 14. On **Example**, an Updated Interim Order Extending the Record was mailed to Claimant to allow 30 days from the date of hearing to submit a consultative examination report from 2/2014 and treatment records; DHS was also given 30 days to submit information concerning Claimant's SSA application dated
- 15. On 3 , SSA determined that Claimant was a disabled individual, beginning (see Exhibits D1-D23).
- 16. On Claimant presented additional documents (Exhibits B1-B51).
- 17. On **Claimant**, Claimant presented additional medical documents (Exhibits C1-C19).
- 18. On **Extending**, an updated hearing packet was forwarded to SHRT and an Interim Order Extending the Record for Review by State Hearing Review Team was subsequently issued which extended the record an additional 90 days.

- 19. On **SHRT** determined that Claimant was not disabled from 9/2013 and prior, based on a final SSA decision; SHRT further determined that Claimant was disabled beginning 10/2013, based on a favorable finding of disability by SSA.
- 20. On the Michigan Administrative Hearings System received the hearing packet, a Disability Determination Explanation (Exhibits D1-D23) and updated SHRT decision (Exhibit D24).

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. Department policies are contained in the Department of Human Services Bridges Administrative Manual (BAM) and Department of Human Services Reference Tables Manual (RFT).

The Medicaid program is comprised of several sub-programs which fall under one of two categories; one category is FIP-related and the second category is SSI-related. BEM 105 (10/2010), p. 1. To receive MA under an SSI-related category, the person must be aged (65 or older), blind, disabled, entitled to Medicare or formerly blind or disabled. *Id.* Families with dependent children, caretaker relatives of dependent children, persons under age 21 and pregnant, or recently pregnant, women receive MA under FIP-related categories. *Id.* AMP is an MA program available to persons not eligible for Medicaid through the SSI-related or FIP-related categories though DHS does always offer the program to applicants. It was not disputed that Claimant's only potential category for Medicaid eligibility would be as a disabled individual.

Disability for purposes of MA benefits is established if one of the following circumstances applies:

- by death (for the month of death);
- the applicant receives Supplemental Security Income (SSI) benefits;
- SSI benefits were recently terminated due to financial factors;
- the applicant receives Retirement Survivors and Disability Insurance (RSDI) on the basis of being disabled; or
- RSDI eligibility is established following denial of the MA benefit application (under certain circumstances).
 BEM 260 (7/2012) pp. 1-2

Following the administrative hearing, Claimant was approved for SSI benefits beginning 10/2013 (see Exhibits D1-D23). DHS (through SHRT) conceded that Claimant was disabled beginning 10/2013. It is found that Claimant is a disabled individual beginning

10/2013. Claimant's eligibility must still be determined for the period of 8/2012 (the earliest retro MA month requested) and 9/2013 (the latest month in which SSA did not address Claimant's disability status). The issue of disability can again be resolved by reliance on SSA determined eligibility.

Eligibility for MA based on disability or blindness does not exist once SSA's determination is final. *Id.*, p. 3. SSA's determination that disability or blindness does not exist for SSI is final for MA if:

- The determination was made after 1/1/90, and
- No further appeals may be made at SSA; or
- The client failed to file an appeal at any step within SSA's 60 day limit, and
- The client is not claiming:
 - A totally different disabling condition than the condition SSA based its determination on, or
 - An additional impairment(s) or change or deterioration in his condition that SSA has not made a determination on.

Id., pp. 3-4.

The Disability Determination Explanation made by SSA noted that Claimant applied for SSI benefits on 3/25/13. It was noted that Claimant was denied SSI benefits based on an unfavorable disability determination on 6/20/13. Claimant failed to appeal the denial thereby making the SSA decision final. The denial can be presumed to continue until the month before Claimant's subsequent SSI approval date. Based on the presented evidence, Claimant is found to be not disabled for the period of 9/2013 and prior.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, finds that DHS properly determined Claimant to be not disabled for the period of 8/2012-9/2013. The actions taken by DHS are **PARTIALLY AFFIRMED**.

The Administrative Law Judge, based upon the above findings of fact and conclusions of law finds that DHS improperly denied Claimant's application for MA benefits. It is ordered that DHS:

- (1) reinstate Claimant's MA benefit application dated
- (2) issue Medicaid benefits to Claimant, effective 10/2013, based on Claimant's receipt of SSI benefits;
- (3) initiate a supplement for any benefits not issued as a result of the improper application denial; and
- (4) schedule a review of benefits in one year from the date of this administrative decision, if Claimant is found eligible for future MA benefits.

The actions taken by DHS are **PARTIALLY REVERSED**.

Christin Bardoch

Christian Gardocki Administrative Law Judge for Maura Corrigan, Director Department of Human Services

Date Signed: 4/11/2014

Date Mailed: <u>4/11/2014</u>

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:

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

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