

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

**IN THE MATTER OF:**

██████████  
██████████  
████████████████████████████████████████

Reg. No.: 2014-11272  
Issue No(s): 2009  
Case No.: ██████████  
Hearing Date: March 5, 2014  
County: Wayne (19)

**ADMINISTRATIVE LAW JUDGE:** Robert J. Chavez

**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, a telephone hearing was held on March 5, 2014, from Detroit, Michigan. Participants on behalf of Claimant included ██████████ ██████████ ██████████ ██████████ ██████████ ██████████. Participants on behalf of the Department of Human Services (Department) included ██████████, MCW.

**ISSUE**

Whether the Department properly determined that Claimant was not disabled for purposes of the Medical Assistance (MA) and/or State Disability Assistance (SDA) benefit programs?

**FINDINGS OF FACT**

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

1. Claimant applied for MA-P on May 16, 2013.
2. On August 16, 2013, the Medical Review Team denied MA-P.
3. On August] 21, 2013, claimant was sent a notice of case action.
4. On October 25, 2013, claimant filed for hearing.
5. On December 13, 2013 the State Hearing Review Team denied MA-P.

6. On March 5, 2014, a hearing was held before the Administrative Law Judge.
7. On September 13, 2013, Claimant was denied SSI due to a negative disability determination by the Social Security Administration.
8. Claimant did not appeal this determination.
9. Claimant's Medicaid application did not claim an additional impairment or a change or deterioration in his condition that the Social Security Administration had not made a determination upon.

### **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 State Disability Assistance (SDA) program, which provides financial assistance for disabled persons, was established by 2004 PA 344. The Department administers the SDA program pursuant to MCL 400.10 *et seq.* and Mich Admin Code, Rules 400.3151 – 400.3180. Department policies are found in BAM, BEM, and RFT. A person is considered disabled for SDA purposes if the person has a physical or mental impairment which meets federal Supplemental Security Income (SSI) disability standards for at least ninety days. Receipt of SSI benefits based on disability or blindness, or the receipt of MA benefits based on disability or blindness, automatically qualifies an individual as disabled for purposes of the SDA program.

Department policy at BEM 260 states a claimant 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. A determination may proceed however, if the claimant alleges a totally different disabling condition than the condition SSA based its determination on, or an additional impairment(s) or change or deterioration in his/her condition that SSA has **not** made a determination on.

In the present case, the claimant was found by the Social Security Administration to be ineligible for SSI benefits based upon disability. Claimant testified to this information, and the undersigned is satisfied as to claimant's credibility. This information was also confirmed by an SOLQ run subsequent to the hearing and admitted as Department Exhibit 4. Claimant applied for SSI on May 7, 2012, and was denied SSI in an unfavorable appeals decision on September 13, 2013. Claimant did not appeal that determination, and the time limit for an appeal has passed, making such a determination final. Therefore, as the claimant has had a final determination of not disabled by the SSA, the Administrative Law Judge must find that that determination is

final for the purposes of the MA-P programs. Therefore, the undersigned finds that the claimant does not meet the Department's definition of disabled for the purposes of MA-P programs.

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 Claimant  disabled  not disabled for purposes of the MA and/or SDA benefit program.

**DECISION AND ORDER**

Accordingly, the Department's determination is  AFFIRMED  REVERSED.



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**Robert J. Chavez**  
Administrative Law Judge  
for Maura Corrigan, Director  
Department of Human Services

Date Signed: March 28, 2014

Date Mailed: March 28, 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

2014-11272/RJC

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

RJC/cl

cc:

[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
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