

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

**IN THE MATTER OF:**

[REDACTED]

Reg. No.: 201432225  
Issue No.: 2001, 3001, 4001  
Case No.: [REDACTED]  
Hearing Date: April 15, 2014  
County: Muskegon County DHS

**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 April 15, 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 denied the Claimant's eligibility for Medical Assistance (MA) and State Disability Assistance (SDA) benefits?

**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 31, 2014, the Claimant submitted an application for Medical Assistance (MA) and State Disability Assistance (SDA) and Food Assistance Program (FAP) benefits.
2. The Claimant was approved for an allotment of Food Assistance Program (FAP) benefits in the monthly amount of \$ [REDACTED].
3. On February 6, 2014, the Department notified the Claimant that it had denied his application for Medical Assistance (MA) and State Disability Assistance (SDA) benefits because he does not meet the criteria for these programs.
4. The Department received the Claimant's request for a hearing on March 10, 2014, protesting the denial of his Medical Assistance (MA) and State Disability Assistance (SDA) 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 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.

The Family Independence Program (FIP) was established pursuant to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 PL 104-193, and 42 USC 601 to 679c. The Department (formerly known as the Family Independence Agency) administers FIP pursuant to MCL 400.10 and 400.57a and Mich Admin Code, R 400.3101 to .3131. Department policies are contained in the Department of Human Services Bridges Administrative Manual (BAM), Department of Human Services Bridges Eligibility Manual (BEM), and Department of Human Services Reference Tables Manual (RFT).

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 January 31, 2014, the Claimant submitted an application for Medical Assistance (MA), Food Assistance Program (FAP), and cash assistance.

The Claimant is not a minor child, a pregnant woman, and is not the primary caretaker of a minor child.

Eligibility for the Family Independence Program (FIP) requires that the group must include a dependent child who lives with a legal parent, stepparent or other qualifying caretaker. Department of Human Services Bridges Eligibility Manual (BEM) 210 (July 1, 2013), p 1.

A non-disabled person may qualify for Medical Assistance (MA) where the person is the parent of the dependent child; or the specified relative (other than a parent) who acts as parent for the dependent child. Department of Human Services Bridges Eligibility Manual (BEM) 135 (July 1, 2013), p 1.

State Disability Assistance (SDA) benefits require a finding that the Claimant is disabled. Certain categories of Medical Assistance (MA) are available to disabled applicants. Disability can be demonstrated by a finding by the Social Security Administration of disability, or a finding by the Department's Medical Review Team that the Claimant is disabled. Department of Human Services Bridges Eligibility Manual

(BEM) 260 (July 1, 2013). Department of Human Services Bridges Eligibility Manual (BEM) 261 (July 1, 2013).

In this case, the Claimant did not indicate that he was disabled, and therefore the Department had not reason to make a determination whether he is disabled.

The Claimant was approved for Food Assistance Program (FAP) benefits in the monthly amount of \$189, which the Claimant did not dispute during the hearing.

Based on the evidence and testimony available during the hearing, this Administrative Law Judge finds that the Department has established that it properly determined the Claimant's eligibility for the Food Assistance Program (FAP) and was acting in accordance with policy when it denied his application for Medical Assistance (MA), and cash assistance under either the Family Independence Program (FIP) or State Disability Assistance (SDA) programs.

### **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 the Claimant's application for Medical Assistance (MA) and State Disability Assistance (SDA) benefits.

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



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

Date Signed: April 23, 2014

Date Mailed: April 23, 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:

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

KS/hj

cc:

