

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

**IN THE MATTER OF:**

[REDACTED]

Reg. No.: 14-010596  
Issue No.: 2001  
Case No.: [REDACTED]  
Hearing Date: September 25, 2014  
County: MUSKEGON

**ADMINISTRATIVE LAW JUDGE: Darryl 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 September 25, 2014, from Lansing, Michigan. Participants on behalf of Claimant included Claimant. Participants on behalf of the Department of Human Services (Department) included Assistance Payments Supervisor [REDACTED], and Eligibility Specialist [REDACTED].

**ISSUE**

Did the Department properly close Claimant's Medical Assistance (MA) benefits?

**FINDINGS OF FACT**

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

1. Lori Pullen was an on-going Food Assistance Program (FAP) and MA recipient.
2. Ms. Pullen married Claimant, and in May 2014 she asked the Department to have her case put in his name since he is "the man of the house" and the Department complied.
3. On August 1, 2014, the Department mailed to Claimant a Semi-Annual Contact Form (Exhibit 1 Pages 14-15), which he completed and returned. In the form, he reported that he had income of [REDACTED] monthly from retirement, and his wife had [REDACTED] per month from disability income.
4. On August 26, 2014, the Department mailed to Claimant a Health Care Coverage Determination Notice, informing Claimant that MA had been closed for him and his wife because their income exceeded the eligibility limits. (Exhibit 1 Pages 19-20.)
5. The Department received Claimant's hearing request on August 25, 2014.

### **CONCLUSIONS OF LAW**

Department policies are contained in the Department of Human Services Bridges Administrative Manual (BAM), Department of Human Services Bridges Eligibility Manual (BEM), Department of Human Services Reference Tables Manual (RFT), and Department of Human Services Emergency Relief Manual (ERM).

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 273. The Department (formerly known as the Family Independence Agency) administers FAP pursuant to MCL 400.10, the Social Welfare Act, MCL 400.1-.119b, and Mich Admin Code, R 400.3001 to .3015.

The Medical Assistance (MA) program is established by Title XIX of the Social Security Act, 42 USC 1396-1396w-5; 42 USC 1315; the Affordable Care Act of 2010, the collective term for the Patient Protection and Affordable Care Act, Pub. L. No. 111-148, as amended by the Health Care and Education Reconciliation Act of 2010, Pub. L. No. 111-152; and 42 CFR 430.10-.25. The Department (formerly known as the Family Independence Agency) administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.105-.112k.

It is noted that Claimant's hearing request identified issues with FAP and MA. During the hearing, the Claimant stated that he only wanted a hearing on MA, and he did not want a hearing on FAP. Any issue that might have been raised regarding FAP is waived.

The Department provided evidence of the couple's income. In addition to the income Claimant reported, he also receives two pension payments each month: [REDACTED] and [REDACTED], for a total unearned income of [REDACTED] per month. The Department has provided sufficient evidence of the unearned income, and the budgets that were used in determining Claimant's MA. (Exhibit 1 Page 22 and 33.) Claimant did not dispute the amounts that the Department used in the budget. The eligibility limit for a household of two members between the age of 19 and 64 is [REDACTED] annually. Claimant's group's income is [REDACTED] annually.

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 closed Claimant's MA.

**DECISION AND ORDER**

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



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

Date Signed: **10/1/2014**

Date Mailed: **10/1/2014**

DJ/jaf

**NOTICE OF APPEAL:** A party may appeal this Hearing Decision in the circuit court in the county in which he/she resides, or the circuit court in Ingham County, within 30 days of the receipt date.

A party may request a rehearing or reconsideration of this Hearing Decision from the Michigan Administrative Hearing System (MAHS) within 30 days of the mailing date of this Hearing Decision, or MAHS may order a rehearing or reconsideration on its own motion.

MAHS may grant a party's Request for Rehearing or Reconsideration 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 party requesting a rehearing or reconsideration 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 this Hearing Decision is mailed.

A written request may be faxed or mailed to MAHS. If submitted by fax, 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

cc:

