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

### IN THE MATTER OF:



Reg. No.:14-009843Issue No.:2001Case No.:IssueHearing Date:October 16, 2014County:JACKSON

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, three-way telephone hearing was held on October 16, 2014, from Lansing, Michigan. Participants on behalf of Claimant included Claimant, and

. Participants on behalf of the Department of Human Services (Department) included Assistance Payments Supervisor and Eligibility Specialist

#### **ISSUE**

Due to excess assets, did the Department properly deny Claimant's application for: Medical Assistance (MA)?

### FINDINGS OF FACT

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

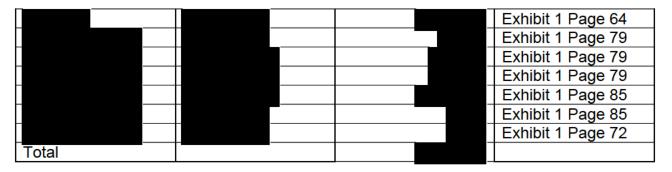
- 1. Claimant applied for MA benefits on April 15, 2014.
- 2. Due to excess assets, on June 12, 2014, the Department denied Claimant's application for MA.
- 3. On August 14, 2014, the Department received Claimant's hearing request, protesting the Department's actions.

### CONCLUSIONS OF LAW

Department policies are found 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 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.

Per BEM 400 (2/1/14) p. 7, the MA limit is **a second** for an individual, and **based** for a couple. Claimant had several accounts with a bank account and a credit union. The low balances in those accounts (last two digits of account number and sub-account number given) for the month of March 2014 were:



Claimant testified that his account **expression**) should not be included in this total because it is a business account. It is noted that the account is in Claimant's personal name. He has a business tax identification number, but the credit union does not offer business accounts so he put it in his own name rather than in a business name.

BEM 400 (2/1/14) provides the policy regarding asset limits for an applicant to be eligible for various programs. It specifically mentions a "Business Account Exclusion" at page 20.

# "FIP, SDA, G2U, G2C, RMA, SSI-Related MA Only, and FAP

"Use this exclusion only if the funds are **not** commingled with countable assets and **not** in time deposits.

"Exclude a savings, share, checking or draft account used **solely** for the expenses of a business. Continue the exclusion while the business is not operating, provided the person intends to return to the business."

Claimant's testimony was persuasive that he used that account for business purposes exclusively. There was no evidence that he commingled funds with personal accounts.

When the amount in that account is excluded, the personal accounts total only **Excluded**. That is below the asset limit.

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 did not act in accordance with Department policy when it denied Claimant's MA application.

# DECISION AND ORDER

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

THE DEPARTMENT IS ORDERED TO BEGIN DOING THE FOLLOWING, IN ACCORDANCE WITH DEPARTMENT POLICY AND CONSISTENT WITH THIS HEARING DECISION, WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:

- 1. Redetermine Claimant's MA benefit eligibility, effective July 1, 2014;
- 2. Issue a supplement to Claimant for any benefits improperly not issued

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

Date Signed: 10/20/2014

Date Mailed: 10/20/2014

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: