

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

**IN THE MATTER OF:**

[REDACTED]

Reg. Nos.: 2013-65382  
2014-6641  
Issue No.: 2009  
Case No.: [REDACTED]  
Hearing Date: October 22, 2014  
County: Wayne (18)

**ADMINISTRATIVE LAW JUDGE: Susan C. Burke**

**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, an in-person hearing was held on October 15, 2014 in Iron Mountain, Michigan. Participants on behalf of Claimant included, Claimant, Participants on behalf of the Department of Human Services (Department) included [REDACTED], Medical Contact Specialist, and [REDACTED], Eligibility Specialist.

**ISSUE**

Whether the Department properly determined that Claimant was not disabled for purposes of the Medical Assistance (MA) benefit program.

**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 applied for Supplemental Security Income (SSI) benefits on [REDACTED], with a disability onset date of [REDACTED].
2. Claimant submitted an application for public assistance seeking MA benefits based on disability on [REDACTED].

3. The Department's MRT determined that Claimant was not disabled on [REDACTED].
4. The Department opened an MA case based on disability for Claimant on [REDACTED], effective [REDACTED].
5. On [REDACTED], the Department notified Claimant that his MA case would close, effective September 1, 2013, due to Claimant not being blind or disabled.
6. On [REDACTED], the Department received Claimant's timely request for hearing.
7. On [REDACTED], the Social Security Administration (SSA) found Claimant not disabled.
8. Claimant did not appeal the SSA determination.
9. On [REDACTED], the State Hearing Review Team found Claimant not disabled.

### **CONCLUSIONS OF LAW**

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.

In the present case, Claimant applied for applied for Supplemental Security Income (SSI) benefits on [REDACTED], with a disability onset date of [REDACTED]. Claimant submitted an application for public assistance seeking MA benefits based on disability on [REDACTED]. The Department's MRT determined that Claimant was not disabled on [REDACTED]. The Department opened an MA case based on disability for Claimant on [REDACTED], effective [REDACTED]. On [REDACTED], the Department notified Claimant that his MA case would close, effective [REDACTED], due to Claimant not being blind or disabled. On [REDACTED], the Department received Claimant's timely request for hearing. On [REDACTED], [REDACTED] the Social Security Administration (SSA) found Claimant not disabled. Claimant did not appeal the SSA determination.

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; see EXHIBIT II in this item, 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. Eligibility for MA based on disability or blindness does not exist once SSA's determination is final.

BEM 260 (7/2013), p. 3

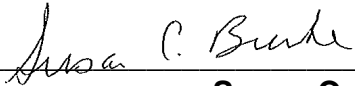
In the record presented, the SSA found Claimant not disabled. Claimant did not appeal the decision and more than 60 days have lapsed since the determination. Claimant has not alleged a new disabling impairment. In light of the foregoing, the final SSA determination is binding on Claimant's MA case. Accordingly, the Department's determination is AFFIRMED.

**DECISION AND ORDER**

The Administrative Law Judge, based on the above findings of fact and conclusions of law finds Claimant not disabled for purposes of the MA-P benefit program.

Accordingly, it is ORDERED:

The Department's determination is AFFIRMED.

  
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**Susan C. Burke**  
Administrative Law Judge  
For Maura Corrigan, Director  
Department of Human Services

Date Signed: 11/12/2014

Date Mailed: 11/12/2014

2014-65382/SCB

**NOTICE OF APPEAL:** A party may appeal this Hearing Decision in the circuit court in the county in which he/she resides or has its principal place of business in the State, 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

SCB/hw

cc:

