

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

IN THE MATTER OF:



Reg. No.: 14-002241
Issue No.: 3008; 2007
Case No.: [REDACTED]
Hearing Date: August 5, 2014
County: Montcalm

ADMINISTRATIVE LAW JUDGE: Vicki L. Armstrong

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, an in-person hearing was held on August 5, 2014, at the Montcalm County Department of Human Services (Department) office. Claimant, represented by [REDACTED], appeared and provided testimony. Participants on behalf of the Department of Human Services (Department) included Lead Worker [REDACTED].

ISSUE

Did the Department properly decrease Claimant's FAP benefits and close Claimant's Medicare Savings 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 was receiving FAP benefits at the time of the hearing.
2. On October 4, 2013, Claimant was mailed a Notice of Case Action indicating the Medicare Savings Program would close effective 11/1/13, for failure to verify Claimant's checking account.
3. On April 23, 2014, Claimant was mailed a Notice of Case Action informing him that his FAP benefits would be decreased to \$[REDACTED] a month beginning June 1, 2014.
4. On May 5, 2014, Claimant submitted a timely hearing request contesting the closure of the Medicare Savings Program and decrease in FAP benefits.

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.

Prior to the closure of the hearing record, Claimant testified that he now understood the Department's actions regarding the decrease in FAP benefits beginning June 1, 2014. Once Claimant heard the Department's explanation and understood why his FAP benefits decreased, Claimant did not want to continue the hearing regarding the FAP issue.

Additionally, Claimant testified that his Medicare Savings Program was closed in error on November 1, 2013, and he wanted the monies refunded.

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.

A Meaningful Prehearing Conference was scheduled and held on May 13, 2014. As a result of information received during the conference, the Departmental Representative researched the Medicare Savings Program issue, finding Claimant was correct. According to the notes in the file, Claimant's Medicare Savings Program should not have been closed on 11/1/13, because Claimant did timely submit other documentation satisfying the checking account verification.

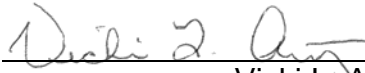
The Administrative Law Judge, based on the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, if any, finds the Department did act in accordance with Department policy in decreasing Claimant's FAP benefits, but did not act in accordance with Department policy when it closed Claimant's Medicare Savings Program.

DECISION AND ORDER

Accordingly, the Department's decision is **AFFIRMED IN PART** regarding the FAP decrease and **REVERSED IN PART** with respect to the Medicare Savings Program.

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. The Department shall re-determine Claimant's eligibility for the Medicare Savings Program beginning November 1, 2013, and shall award him all the benefits he may be entitled to receive, as long as he meets the remaining financial and non-financial eligibility factors.



Vicki L. Armstrong
Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: **8/7/2014**

Date Mailed: **8/7/2014**

VLA/las

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:

