

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

IN THE MATTER OF:

██████████
██████████
██████████

Reg. No.: 14-005898
Issue No.: 2001;3004
Case No.: ██████████
Hearing Date: August 20, 2014
County: Wayne-District 18

ADMINISTRATIVE LAW JUDGE: Zainab Baydoun

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 August 20, 2014, from Detroit, Michigan. Participants on behalf of Claimant included her Authorized Hearing Representative (AHR), ██████████. Participants on behalf of the Department of Human Services (Department) included ██████████, Assistance Payment Supervisor and ██████████, Eligibility Specialist.

ISSUE

Did the Department properly process Claimant's Food Assistance Program (FAP) and 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. On April 3, 2014, Claimant's AHR submitted an application for FAP benefits on behalf of Claimant.
2. On May 16, 2014, Claimant's AHR resubmitted the same application for FAP benefits on behalf of Claimant.
3. On June 13, 2014, the Department sent Claimant a Notice of Case Action informing her that she was approved for FAP benefits effective May 16, 2014, ongoing. (Exhibit 1)

4. Claimant was receiving MA benefits under the G2S MA category through March 31, 2014. (Exhibit 3)
5. Effective April 1, 2014, Claimant was approved for MA under the Healthy Michigan Plan (HMP). (Exhibit 3)
6. On June 13, 2014, Claimant's AHR submitted a hearing request disputing the Department's actions.

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).

FAP

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.

In this case, Claimant submitted an application for FAP benefits on April 3, 2014. The Department testified that it did not receive Claimant's application until May 16, 2014. The Department stated that Claimant's FAP application was registered and processed and that she was approved for FAP benefits effective May 16, 2014, ongoing. (Exhibits 1 and 3). At the hearing, Claimant's AHR provided a fax confirmation page in support of her testimony that the FAP application was sent to and received by the Department on April 3, 2014. (Exhibit A). Claimant's AHR testified that she resent the application and related documents on May 16, 2014 and argued that at issue in this case is the lapse in FAP benefits that Claimant was entitled to receive from April 3, 2014 to May 16, 2014. After reviewing the evidence presented by Claimant's AHR, the Department acknowledged that the application was received on April 3, 2014, and that Claimant's eligibility for FAP should have been determined from April 3, 2014, ongoing.

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 failed to satisfy its burden of showing that it acted in accordance with Department policy when it processed Claimant's FAP benefits.

MA

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 this case, Claimant's AHR requested a hearing concerning Claimant's MA benefits because she did not know if Claimant had active MA coverage. At the hearing, Claimant's AHR testified that Claimant is disabled and that she is a resident of a licensed adult foster care home. There was testimony provided from both Claimant's AHR and the Department that an application for MA benefits was submitted in April 2014, however, an application was not presented for review at the hearing, so this remained unverified.

At the hearing, the Department presented evidence that Claimant was previously receiving MA benefits under the G2S category with a monthly deductible. The Department stated that effective April 1, 2014, Claimant's MA coverage was transferred to the HMP category. (Exhibit 3). The Department sent Claimant a Health Care Coverage Determination Notice informing her that she was eligible for MA benefits for April 1, 2014, ongoing, but the category or type of MA coverage was not listed on the Notice. (Exhibit 2). The Department remained unable to explain why Claimant's MA case under the G2S category was terminated, and transferred to the HMP category, as the Department testified that because Claimant is disabled, she is not eligible for HMP. The Department acknowledged that although Claimant was approved for MA benefits, the category for which she was approved under is incorrect.

BEM 105 provides that persons may qualify under more than one MA category and federal law gives persons the right to the most beneficial category which is considered the category that results in eligibility or the least amount of excess income. BEM 105 (January 2014), p.2. Therefore, 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 has failed to satisfy its burden in establishing that it acted in accordance with Department policy when it processed Claimant's MA benefits.

DECISION AND ORDER

Accordingly, the Department's FAP and MA decisions are 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. Register and process Claimant's April 3, 2014, FAP application;

2. Issue supplements to Claimant for any FAP benefits that she was eligible to receive but did not from April 3, 2014, to May 16, 2014;
3. Determine Claimant's MA eligibility under the most beneficial category for April 1, 2014, ongoing;
4. Issue MA coverage to Claimant for any MA benefits that she was entitled to receive but did not from April 1, 2014, ongoing; and
5. Notify Claimant and her AHR in writing of its decision.



Zainab Baydoun

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

Date Signed: **8/25/2014**

Date Mailed: **8/25/2014**

ZB / tlf

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:

[REDACTED]