

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

IN THE MATTER OF:

[REDACTED]

Reg. No.: 2014-16004
Issue No.: 2004
Case No.: [REDACTED]
Hearing Date: March 20, 2014
County: Wayne (49)

ADMINISTRATIVE LAW JUDGE: Christian Gardocki

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 March 20, 2014, from Detroit, Michigan. Participants included Bruce [REDACTED] as Claimant's authorized hearing representative/legal counsel. Participants on behalf of the Department of Human Services (DHS) included [REDACTED], Specialist, and [REDACTED], Specialist.

ISSUE

The issue is whether DHS properly denied Claimant's Medical Assistance (MA) application, in part, due to Claimant's failure to allege a claim of disability.

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 [REDACTED], Claimant submitted an Assistance Application to DHS.
2. Claimant's application failed to list a disabled household member.
3. DHS processed Claimant's MA benefit eligibility without factoring a Claimant claim for disability.
4. On 1 [REDACTED], DHS mailed Claimant a Notice of Case Action (Exhibits 4-6) informing Claimant of the MA application denial, in part, based on a failure by Claimant to qualify for any MA eligible category.

5. On [REDACTED], Claimant requested a hearing to dispute the denial of MA benefits.

CONCLUSIONS OF LAW

The Medical Assistance (MA) program is established by the Title XIX of the Social Security Act, 42 USC 1396-1396w-5, and is implemented by 42 CFR 400.200 to 1008.59. The Department of Human Services (formerly known as the Family Independence Agency) administers the MA program pursuant to MCL 400.10 and MCL 400.105. Department policies are contained in the Department of Human Services Bridges Administrative Manual (BAM) and Department of Human Services Bridges Eligibility Manual (BEM) and Department of Human Services Reference Tables Manual (RFT).

The Medicaid program is comprised of several sub-programs which fall under one of two categories; one category is FIP-related and the second category is SSI-related. BAM 105 (7/2013), p. 1. To receive MA under an SSI-related category, the person must be aged (65 or older), blind, disabled, entitled to Medicare or formerly blind or disabled. *Id.* Families with dependent children, caretaker relatives of dependent children, persons under age 21 and pregnant, or recently pregnant, women receive MA under FIP-related categories. *Id.* AMP is an MA program available to persons not eligible for Medicaid through the SSI-related or FIP-related categories though DHS does always offer the program to applicants.

Claimant requested a hearing to dispute a denial of an MA benefit application. Claimant's AHR contended that DHS should have evaluated Claimant's eligibility for Medicaid based on a claim of disability.

DHS presented various pages of Claimant's MA application (Exhibits 1-3) dated [REDACTED]. Page K of the Assistance Application instructs clients to "list anyone applying for assistance who is physically or mentally unable to work full time". DHS presented testimony that claims of disability are inferred when clients list persons who are unable to work full-time. The presented application verified that Claimant's response to the instructions was to check the box "none" (see Exhibit 2).

Clients must cooperate with the local office in determining initial and ongoing eligibility. BAM 105 (10/2013), p. 6. This includes completion of necessary forms. *Id.*

Claimant's AHR contended that Claimant intended to allege a claim of disability but that he was confused by the application instructions. Claimant's AHR's contention was pure speculation. Claimant failed to attend the hearing and no reliable evidence was presented to suggest that the application instructions confused Claimant. Further, even if Claimant was so confused, Claimant's AHR failed to present persuasive evidence that DHS should have known of Claimant's confusion.


Claimant's AHR contended that DHS should have inferred a claim of disability based on Claimant's application statement that he lives in a rehabilitation center. Residence in a

rehabilitation center is mildly suggestive of a claim of disability; it is also suggestive of drug rehabilitation, a temporary injury or other scenarios where disability is inapplicable. Thus, DHS cannot be expected to presume a claim of disability solely based on the reporting of residence in a rehabilitation center.

Based on the presented evidence, Claimant failed to report a claim of disability to DHS. Accordingly, DHS properly did not evaluate Claimant for a claim of disability and properly denied Claimant's MA benefit application. As stated during the hearing, Claimant's proper remedy is and was to reapply for MA benefits.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, finds that DHS properly denied Claimant's MA application dated [REDACTED]. The actions taken by DHS are **AFFIRMED**.


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

Date Signed: 4/7/2014

Date Mailed: 4/7/2014

NOTICE OF APPEAL: The claimant may appeal the Decision and Order to Circuit Court within 30 days of the receipt of the Decision and Order or, if a timely Request for Rehearing or Reconsideration was made, within 30 days of the receipt date of the Decision and Order of Reconsideration or Rehearing Decision.

Michigan Administrative Hearing System (MAHS) may order a rehearing or reconsideration on either its own motion or at the request of a party within 30 days of the mailing date of this Decision and Order. MAHS will not order a rehearing or reconsideration on the Department's motion where the final decision cannot be implemented within 90 days of the filing of the original request (60 days for FAP cases).

A Request for Rehearing or Reconsideration may be granted 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 Department, AHR or the claimant 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 the hearing decision is mailed.

2014-16004/CG

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

CG/hw

cc:

