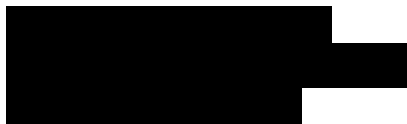


STATE OF MICHIGAN  
MICHIGAN ADMINISTRATIVE HEARING SYSTEM  
ADMINISTRATIVE HEARINGS FOR THE  
DEPARTMENT OF HUMAN SERVICES

**IN THE MATTER OF:**



Reg. No.: 2014-29998  
Issue No.: 2009  
Case No.: [REDACTED]  
Hearing Date: June 26, 2014  
County: Ingham

**ADMINISTRATIVE LAW JUDGE:** Aaron McClintic

**HEARING DECISION**

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, upon the Claimant's request for a hearing. After due notice, a telephone hearing was held on June 26, 2014, from Lansing, Michigan. Participants on behalf of the Claimant included the Claimant. Participants on behalf of the Department included [REDACTED].

**ISSUE**

Did the Department properly deny Claimant's Medical Assistance application?

**FINDINGS OF FACT**

1. Claimant applied for MA-P on August 29, 2013, with a request for retroactive coverage back to May 2013.
2. The Medical Review Team denied the application on February 20, 2014.
3. Claimant filed a request for hearing on February 24, 2014, regarding the MA denial.
4. A telephone hearing was held on June 26, 2014.
5. On May 6, 2014, The State Hearing Review Team denied Claimant's appeal because she retained the capacity to perform light work.
6. Updated records were gathered following hearing, Claimant agreed to this and waived timeliness standards.
7. On March 17, 2014, the State Hearing Review Team approved the application effective May 2013 because the medical evidence of record indicates that the

Claimant does not retain the capacity to perform even sedentary work on a sustained basis.

**CONCLUSIONS OF LAW**

The Medical Assistance (MA) program is established by Title XIX of the Social Security Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). The Department of Human Services (DHS or department) administers the MA program pursuant to MCL 400.10, *et seq.*, and MCL 400.105. Department policies are found in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) and the Bridges Reference Manual (BRM).

The State Hearing Review Team approved benefits effective May 2013. Therefore, the Administrative Law Judge finds that the Claimant met the Department's definition of being disabled for the purposes of MA-P.

**DECISION AND ORDER**

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that Claimant is medically disabled as of May 2013.

Accordingly, the Department's decision is hereby **REVERSED**, and the Department is ORDERED to:

1. Initiate a review of the application for MA and Retro MA dated August 29, 2013, if not done previously, to determine Claimant's non-medical eligibility.
2. The Department shall inform Claimant of the determination in writing. A review of this case shall be set for August 2015.



\_\_\_\_\_  
**Aaron McClintic**  
Administrative Law Judge  
for Maura Corrigan, Director  
Department of Human Services

Date Signed: 08/13/14

Date Mailed: 08/13/14

ATM/jaf

**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.

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:

