

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

**IN THE MATTER OF:**

[REDACTED]

Reg. No.: 2014-6524  
Issue No(s): 2001, 4001  
Case No.: [REDACTED]  
Hearing Date: December 5, 2013  
County: Emmet County DHS

**ADMINISTRATIVE LAW JUDGE:** Colleen Lack

**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 December 5, 2013, from Lansing, Michigan. Participants on behalf of Claimant included [REDACTED] the Claimant. Participants on behalf of the Department of Human Services (Department) included [REDACTED] Assistance Payments Worker.

**ISSUE**

Did the Department properly close the Claimant's Medicaid and State Disability Assistance (SDA) cases?

**FINDINGS OF FACT**

The Administrative Law Judge, based on the competent, material, and substantial evidence on the whole record, finds as material fact:

1. The Claimant's Medicaid and SDA cases were exchanged with the Medical Review Team (MRT) three times for the November 1, 2012, review.
2. The MRT concluded that the Claimant was ineligible because there was not sufficient evidence that the Claimant was appealing a Social Security denial for an April 2013 application.
3. On July 22, 2013, a Notice of Case Action was issued to the Claimant stating the Medicaid and SDA cases would close effective September 1, 2013.
4. On August 14, 2013, the Claimant's Social Security appeal was filed.

5. On October 14, 2013, the Claimant filed a request for hearing contesting the Department's action.

### **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 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.

The State Disability Assistance (SDA) program is established by the Social Welfare Act, MCL 400.1-.119b. The Department of Human Services (formerly known as the Family Independence Agency) administers the SDA program pursuant to MCL 400.10 and Mich Admin Code, R 400.3151-.3180.

Additionally, refusal to pursue a potential benefit results in the person's ineligibility. Types of potential benefits include Retirement, Survivors, and Disability Insurance (RSDI) and Supplemental Security Income (SSI). BEM 270.

The Claimant's Medicaid and SDA cases were exchanged with the MRT three times for the November 1, 2012, review. The MRT concluded that the Claimant was ineligible because there was not sufficient evidence that the Claimant was appealing a Social Security denial for an April 2013 application. Therefore, on July 22, 2013, a Notice of Case Action was issued to the Claimant stating the Medicaid and SDA cases would close effective September 1, 2013.

However, on August 14, 2013, the Claimant's Social Security appeal was filed. This has been verified on an SOLQ report. (Exhibit A, page 15) Accordingly, it appears that when the Department's July 22, 2013, Notice of Case action was issued, the Claimant still had time to file an appeal with Social Security regarding the April 2013 application. The Department's determination to close the Claimant's Medicaid and SDA cases based on insufficient evidence of the Social Security appeal cannot be upheld.

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 did not act in accordance with Department policy when it closed the Claimant's Medicaid and SDA cases.

**DECISION AND ORDER**

Accordingly, the Department's decision is

- AFFIRMED.
- REVERSED.
- AFFIRMED IN PART with respect to \_\_\_\_\_ and REVERSED IN PART with respect to \_\_\_\_\_.

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. Reinstate the Claimant's Medicaid and SDA case retroactive to the September 1, 2013, effective date and re-determine eligibility in accordance with Department policy.
2. Issue the Claimant any supplement that she may thereafter be due.

/s/ \_\_\_\_\_  
Colleen Lack  
Administrative Law Judge  
for Maura Corrigan, Director  
Department of Human Services

Date Signed: December 16, 2013

Date Mailed: December 17, 2013

**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

CL/hj

cc:

