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

IN THE MATTER OF:



Reg. No.: 14-014541 Issue No.: 2001

Issue No.: 2 Case No.:

Hearing Date: January 28, 2015

County: SAGINAW

ADMINISTRATIVE LAW JUDGE: Darryl Johnson

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 January 28, 2015, from Lansing, Michigan. Participants on behalf of Claimant included Claimant. Participants on behalf of the Department of Human Services (Department) included Hearings Facilitator

<u>ISSUE</u>

Did the Department properly close Claimant's 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. Claimant was an on-going recipient of MA benefits through the Freedom to Work (FTW) program.
- 2. On September 23, 2014, the Department mailed to Claimant a notice that her FTW would be closing due to excess income.
- 3. Claimant is years old, and is in a group of one.
- 4. Claimant receives \$ per month as a chore provider, \$ per month for RSDI, and \$ per month from a pension.
- 5. The Department received Claimant's hearing request on September 29, 2014.

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 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.

BEM 174 (7/1/13) provides the policies applicable to the FTW program. It is available to a client with disabilities age 16 through 64 who has earned income. Because Claimant is receiving RSDI, the undersigned presumes for purposes of this Decision that she is disabled. The evidence establishes that she has earned income, and that she is 61 years old. To receive FTW, the Claimant must meet financial eligibility factors which are found at page 2 of BEM 174. Income eligibility exists when a client's net unearned income does not exceed 100 percent of the Federal Poverty Level (FPL); see RFT 246. If the client's net earned income is above 250 percent of the FPL, refer the client to FTW.

RFT 246 (4/1/14) references FPLs, but it does not state the FPLs. Exhibit 2 provides the 2014 FPL guidelines by family size. For a family of 1, 100% of the FPL is \$ annually or \$ monthly.

Claimant's unearned income (RSDI + pension) is \$_____ She is above the limit for unearned income and therefore is ineligible for the FTW program.

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 acted in accordance with Department policy when it closed Claimant's FTW MA.

DECISION AND ORDER

Accordingly, the Department's decision is **AFFIRMED**.

Administrative Law Judge for Nick Lyon, Interim Director Department of Human Services

Date Signed: 2/4/2015

Date Mailed: 2/4/2015

DJ/jaf

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 <u>MAY</u> 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 48909-8139

