

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

**IN THE MATTER OF:**

████████████████████  
████████████████████  
████████████████████

Reg. No.: 15-005892  
Issue Nos.: 2000, 5001  
Case No.: ██████████  
Hearing Date: May 27, 2015  
County: Macomb (20-Warren)

**ADMINISTRATIVE LAW JUDGE:** Michael J. Bennane

**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; and Mich Admin Code, R 792.11002. After due notice, a telephone hearing was held on May 27, 2015, from Detroit, Michigan. Participants on behalf of Claimant included Claimant. Participants on behalf of the Department of Health and Human Services (Department) included ██████████

**ISSUE**

Did the Department properly deny Claimant's application for Medical Assistance (MA) and State Emergency Relief (SER) to avoid foreclosure on her home?

**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 March 30, 2015, Claimant applied for MA and SER to avoid foreclosure.
2. On April 1, 2015, the Department sent Claimant a State Emergency Relief Decision Notice informing Claimant that it would pay \$2,000 after Claimant paid \$5,506.67, in order to help Claimant avoid foreclosure.
3. On April 1, 2015, the Department sent Claimant a Health Care Coverage Determination Notice informing her that it had denied her MA application.
4. On May 11, 2015, the Department sent Claimant a verification checklist requesting information concerning her employment and income.

5. On May 27, 2015, Claimant requested a hearing to protest the denial of her MA application and the failure of the Department to pay \$2,000, the amount stated on its April 1, 2015, State Emergency Relief Decision Notice.
6. On April 9, 2015, Claimant requested a hearing to protest the denial of her MA application and the failure of the Department to pay \$2,000 in order for Claimant to avoid foreclosure.

### **CONCLUSIONS OF LAW**

Department policies are contained in the Department of Health and Human Services Bridges Administrative Manual (BAM), Department of Health and Human Services Bridges Eligibility Manual (BEM), Department of Health and Human Services Reference Tables Manual (RFT), and Department of Health and 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 Department of Human Services) administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.105-.112k.

The State Emergency Relief (SER) program is established by the Social Welfare Act, MCL 400.1-.119b. The SER program is administered by the Department (formerly known as the Department of Human Services) pursuant to MCL 400.10 and Mich Admin Code, R 400.7001-.7049.

#### **MA**

Claimant agreed that she understood that the Department denied her MA application for excess income and that it had made the correct decision. The request for hearing questioning the MA denial is DISMISSED.

#### **SER**

Claimant received the Department's decision and attempted to pay the \$5,506.67 demanded by the Department as her portion/copayment of the amount in arrears.

Claimant attempted to pay the \$5,506.67, but the firm representing the mortgage company would not accept separate payments from Claimant and the Department. Claimant then borrowed the money from a second source and, by adding her own \$2,000 payment, was able to avoid foreclosure.

Because Claimant was able to resolve her emergency without the involvement of the Department, Department policy demands that once an emergency has been removed or no longer exists the Department is not authorized to continue to provide relief.

Claimant is seeking the \$2,000 relief the Department stated in its SER decision notice.

Department policy provides that, if a claimant resolves the emergency without the Department's aid, the emergency no longer exists and, therefore, Department funds may not be used. ERM 304 (October 2013), p. 4.

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 denied the \$2,000 relief to avoid foreclosure on Claimant's home.

### **DECISION AND ORDER**

Accordingly, the request for hearing regarding MA is **DISMISSED**. The Department's decision regarding SER is **AFFIRMED**.



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**Michael J. Bennane**  
Administrative Law Judge  
for Nick Lyon, Director  
Department of Health and Human Services

Date Signed: **6/15/2015**

Date Mailed: **6/16/2015**

MJB / pf

**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 copy of the claim or application for appeal must be filed with the Michigan Administrative Hearing System (MAHS).

A party may request a rehearing or reconsideration of this Hearing Decision from 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 48909-8139

CC:

[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]