

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

**IN THE MATTER OF:**

[REDACTED]

Reg. No.: 14-011235-RECON  
Issue No.: 2009  
Case No.: [REDACTED]  
Hearing Date: July 29, 2015  
County: Tuscola

**ADMINISTRATIVE LAW JUDGE:** Carmen G. Fahie

**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; 42 CFR 431.200 to 431.250; and 45 CFR 205.10. After due notice, a telephone hearing was held on Wednesday, July 29, 2015, from Caro, Michigan. Participants on behalf of Claimant included the Claimant, the Claimant's friend, [REDACTED], and his Authorized Representative, [REDACTED], from [REDACTED]. Participants on behalf of the Department of Health and Human Services (Department) included [REDACTED], Eligibility Specialist.

**ISSUE**

Whether the Department properly determined that Claimant was not disabled for purposes of the Medical Assistance (MA) and retroactive MA benefit programs?

**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 April 21, 2014, the Claimant applied for MA-P with an application for retroactive MA-P to January 2014.
2. The Social Security Administration subsequently determined that the Claimant met the disability criteria for the SSI program with an application date of March 2014. Claimant Exhibit a-c.
3. This Administrative Law Judge finds, based on the objective medical evidence in the file of his hospitalization requiring his left leg to be amputated below the knee from January 25, 2014 through February 4, 2014, that the Claimant is eligible for MA retroactive to January 2014 pending a Department non-financial eligibility determination. Department Exhibit 14.

### **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), and Department of Human Services Reference Tables Manual (RFT).

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.

Because of the Social Security Administration determination, it is not necessary for the Administrative Law Judge to discuss the issue of disability. PEM, Item 260; PEM, Item 261. To be automatically eligible for MA, an SSI recipient must be a Michigan resident and cooperate with third-party resource liability requirements. BEM 150. Ongoing MA eligibility begins the first day of the month of SSI entitlement. BEM 150. Retro MA coverage is available back to the first day of the third calendar month prior to entitlement for SSI. BAM 115. A separate determination of eligibility must be made for each of the three retro months. BAM 115. To be eligible for a retro MA month, the person must meet all financial and non-financial (i.e., be disabled) factors in that month and have unpaid medical expense incurred during the month or have been entitled to Medicare Part A. BAM 115. A DHS-1171 (application) is not required for SSI recipients. BAM 115.

In this matter, the Claimant applied for MA-P with an application for retroactive MA-P to January 2014 on April 21, 2014. Subsequently, the Social Security Administration determined that the Claimant met the disability criteria for the SSI program with an application date of March 2014. Claimant Exhibit a-c. This Administrative Law Judge finds, based on the objective medical evidence in the file of his hospitalization requiring his left leg to be amputated below the knee from January 25, 2014 through February 4, 2014, that the Claimant is eligible for MA retroactive to January 2014 pending a Department non-financial eligibility determination. Department Exhibit 14. BAM 110, 115, and 815. BEM 260.

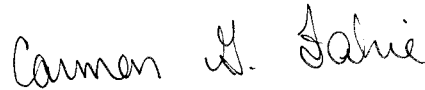
The Administrative Law Judge, based upon the above findings of fact and conclusions of law decides that the Claimant meets the definition of medically disabled under MA-P retroactive to January 2014.

**DECISION AND ORDER**

Accordingly, the Department's determination is **REVERSED**.

THE DEPARTMENT IS ORDERED TO INITIATE 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. Initiate a redetermination of the Claimant's eligibility for MA-P retroactive to January 2014 if the Claimant meets the non-financial eligibility requirements.
2. Provide the Claimant and his Authorized Representative with written notification of the Department's revised eligibility determination.
3. Issue the Claimant any retroactive benefits she/he may be eligible to receive, if any.



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**Carmen G. Fahie**  
Administrative Law Judge  
for Nick Lyon, Director  
Department of Health and Human  
Services

Date Signed: **7/31/2015**

Date Mailed: **7/31/2015**

CGF/las

**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 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:

