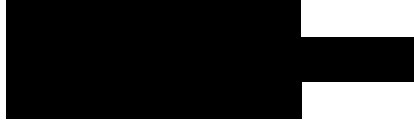


**STATE OF MICHIGAN  
MICHIGAN ADMINISTRATIVE HEARING SYSTEM  
ADMINISTRATIVE HEARINGS FOR THE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**IN THE MATTER OF:**



MAHS Reg. No.: 15-007103  
Issue No.: 2009  
Agency Case No.: [REDACTED]  
Hearing Date: July 09, 2015  
County: Ingham

**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; 42 CFR 431.200 to 431.250; and 45 CFR 205.10. After due notice, a telephone hearing was held on July 9, 2015, from Lansing, Michigan. Participants on behalf of Claimant included [REDACTED] [REDACTED] Authorized Hearing Representative. Participants on behalf of the Department of Health and Human Services (Department) included [REDACTED], Hearing Facilitator.

**ISSUE**

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

**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 June 7, 2012, Claimant applied for Medicaid (MA-P) and retroactive MA-P for May 2012.
2. On August 2, 2012, another application for MA-P and retroactive MA-P to May 2012 was filed on Claimant's behalf.
3. On April 9, 2015, the Medical Review Team (MRT) found Claimant not disabled for the retroactive MA month of May 2012.
4. On April 16, 2015, the Department notified Claimant of the MRT determination.
5. On April 27, 2015, the Department received Claimant's timely written request for hearing.

6. Claimant was found disabled by the Social Security Administration (SSA) as of June 28, 2012, for Supplemental Security Income (SSI).

### **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), 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 Department of Human Services) administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.105-.112k.

To be automatically eligible for MA, an SSI recipient must be a Michigan resident and cooperate with third-party resource liability requirements. BEM 150, (April 1, 2015), p. 1. Ongoing MA eligibility begins the first day of the month of SSI entitlement. BEM 150, p. 1. Retro MA coverage is available back to the first day of the third calendar month prior to entitlement for SSI. BAM 115, (January 1, 2015), p.11. A separate determination of eligibility must be made for each of the three retro months. BAM 115, p. 13. 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, pp. 13-14. A DHS-1171 (application) is not required for SSI recipients. BAM 115, p. 10.

In this case, on January 30, 2014, Claimant was found disabled by the SSA as of June 28, 2012, for a June 28, 2012, SSI application. The SSA would not have made any determination of disability prior to when this SSI application was filed. However, the MRT denied Claimant's June 7, 2012, application for retroactive MA-P for May 2012 based on the eligibility date established by the SSA. Therefore, it appears that the MRT did not actually review the available documentation to determine if the disability criteria were met for May 2012. A review of the submitted medical records indicates Claimant's disabling impairments have been present since the [REDACTED]. Further, the SSA Decision finding Claimant disabled as of June 28, 2012, references the [REDACTED] hospitalization as confirmation that Claimant's condition has deteriorated since a prior SSA hearing decision. (Claimant Exhibit 1, p. 5)

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 Claimant disabled for purposes of the MA benefit program for the June 7, 2012, and August 2, 2012, applications for MA-P and retroactive MA-P to May 2012.

**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. The Department shall initiate processing of the June 7, 2012, and August 2, 2012, applications for MA-P and retroactive MA-P to May 2012, to determine if all other non-medical criteria are met and inform Claimant of the determination in accordance with Department policy.
2. The Department shall supplement for lost benefits (if any) that Claimant was entitled to receive, if otherwise eligible and qualified in accordance with Department policy.



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Colleen Lack  
Administrative Law Judge  
for Nick Lyon, Director  
Department of Health and Human Services

Date Mailed: **7/21/2015**

CL/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 **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:

