



RICK SNYDER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
MICHIGAN ADMINISTRATIVE HEARING SYSTEM  
Christopher Seppanen  
Executive Director

MIKE ZIMMER  
DIRECTOR

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Date Mailed: March 8, 2016  
MAHS Docket No.: 16-000542  
Agency No.: ██████████  
Petitioner: ██████████

**ADMINISTRATIVE LAW JUDGE: Alice C. Elkin**

**HEARING DECISION**

Following Petitioner'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 February 29, 2016, from Detroit, Michigan. Petitioner appeared and represented herself. The Department of Health and Human Services (Department) was represented by ██████████, Hearing Facilitator.

**ISSUE**

Did the Department properly approve Petitioner for Medicaid (MA) coverage under the Healthy Michigan Program (HMP)?

**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 August 5, 2015, Petitioner applied for MA alleging a disability.
2. Petitioner does not file taxes and is the sole member of her household.
3. Petitioner does not have any income.
4. On August 6, 2015, the Department sent Petitioner a Health Care Coverage Determination Notice notifying her that she was approved for full-coverage MA effective August 1, 2015.

5. On January 19, 2016, the Department received Petitioner's written request for hearing disputing the Department's actions concerning her MA and Food Assistance Program (FAP) cases.

### **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).

Petitioner requested a hearing disputing the Department's actions concerning her FAP and MA cases. At the hearing, the Department testified that it had erred in reducing Petitioner's FAP benefits but had resolved the issue by increasing her benefits back to the maximum amount a one-person household was eligible to receive and issuing a supplement for December 2015 and January 2016 FAP underissued benefits. Petitioner confirmed the Department's actions and testified that the Department had resolved her FAP issue. She agreed to dismiss her hearing request concerning FAP. The only remaining issue concerned her MA case.

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.

MA is available (i) under SSI-related categories to individuals who are aged (65 or older), blind or disabled, (ii) to individuals who are under age 19, parents or caretakers of children, or pregnant or recently pregnant women, and (iii) to individuals who meet the eligibility criteria for Healthy Michigan Program (HMP) coverage. BEM 105 (October 2014), p. 1; Michigan Department of Health and Human Services, Medicaid Provider Manual, Healthy Michigan Plan, § 1.1, *available at* <http://www.mdch.state.mi.us/dch-medicaid/manuals/MedicaidProviderManual.pdf>.

The Department acknowledged that Petitioner alleged that she was disabled in her April 5, 2015 MA application. In order to qualify for disability-based MA, a client must (i) receive Supplemental Security Income (SSI); **or** (ii) be approved by the Social Security Administration (SSA) for Retirement Survivors and Disability Insurance (RSDI) based on a disability; **or** (iii) be found disabled by the Medical Review Team (MRT), provided that (a) the client is not eligible for RSDI based on disability or blindness and (b) SSA's

determination that the client is not disabled or blind for SSI purposes is **not final**. BEM 260 (July 2015), pp. 1-3, 7; BEM 150 (January 2014), p. 1.

The Department explained that it forwarded Petitioner's medical packet to MRT to determine whether Petitioner was disabled and eligible for disability-based MA. BAM 815 (July 2015), pp. 3-5. While it was awaiting the MRT decision, because Petitioner had no income and met the eligibility criteria for MA under HMP, it approved Petitioner for HMP coverage (Exhibit D). The Department sent Petitioner the August 6, 2015, Health Care Coverage Determination Notice on August 6, 2015, informing her that she was eligible for full-coverage MA effective August 1, 2015 (Exhibit C).

Under Department policy, a client is eligible for the most beneficial program, which is the one that results in eligibility or the least amount of excess income. BEM 105 (October 2014). The Department testified that on February 26, 2016, MRT concluded that Petitioner was not disabled, making her ineligible for disability-based MA. Therefore, the most beneficial program available to Petitioner is HMP.

Petitioner is advised that she can request a hearing concerning the Department's denial of disability-based MA.

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 approved Petitioner for MA coverage under HMP.

### **DECISION AND ORDER**

Per Petitioner's withdrawal of her FAP issue, Petitioner's January 19, 2016, request for hearing concerning FAP is **DISMISSED**.

The Department's MA decision is **AFFIRMED**.



ACE/tlf

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**Alice C. Elkin**  
Administrative Law Judge  
for Nick Lyon, Director  
Department of Health and Human Services

**NOTICE OF APPEAL**: A party may appeal this Order in circuit court within 30 days of the receipt date. A copy of the circuit court appeal must be filed with the Michigan Administrative Hearing System (MAHS).

A party may request a rehearing or reconsideration of this Order if the request is received by MAHS within 30 days of the date the Order was issued. The party requesting a rehearing or reconsideration must provide the specific reasons for the request. MAHS will not review any response to a request for rehearing/reconsideration.

A written request may be mailed or faxed to MAHS. If submitted by fax, the written request must be faxed to (517) 335-6088; 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

**DHHS**

[REDACTED]  
[REDACTED]  
[REDACTED]

**Petitioner**

[REDACTED]  
[REDACTED]  
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cc:

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