



RICK SNYDER
GOVERNOR

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

SHELLY EDGERTON
DIRECTOR

[REDACTED]

Date Mailed: November 30, 2016
MAHS Docket No.: 16-014281
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Michael J. Bennane

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 [REDACTED] Detroit, Michigan. The Petitioner was represented by [REDACTED] and her mother, [REDACTED]. The Department of Health and Human Services (Department) was represented by [REDACTED], Medical Contact Worker.

ISSUE

Did the Department properly deny her State Disability Assistance (SDA)?

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 [REDACTED], the Department sent the Petitioner a Medical Determination Verification Checklist requesting various pieces of information.
2. On [REDACTED], the Department sent the Petitioner a Verification of Application or Appeal for Supplemental Security Income (SSI)/Retirement, Survivors and Disability Income (RSDI).
3. On [REDACTED], the Department sent the Petitioner a Notice of Case Action informing the Petitioner that her State Disability Assistance (SDA) had been closed effective [REDACTED].
4. On [REDACTED], Petitioner requested a hearing to appeal denial of her SDA.

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 State Disability Assistance (SDA) program is established by the Social Welfare Act, MCL 400.1-.119b. The Department of Health and Human Services (formerly known as the Department of Human Services) administers the SDA program pursuant to 42 CFR 435, MCL 400.10 and Mich Admin Code, R 400.3151-.3180.

In this case, the Petitioner's disability was denied by Social Security Administration (SSA). SSA's determination that disability or blindness does not exist for SSI is final and the SDA/MA case must proceed for foreclosure if:

...The client is not claiming:

(A)n additional impairment(s), change, or deterioration in his/her condition that SSA has reviewed and not made a determination yet. (BEM 271, January 2016).

If the client alleges either condition listed above, obtain a new medical report and resubmit to the DHS for a new determination in accordance with BEM 260.

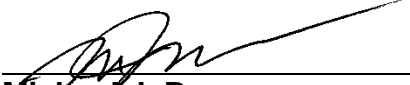
In the instant case, the Petitioner must submit new medical documentation showing additional impairment, change or deterioration of her original condition that SSA has reviewed and not made a determination on yet.

DECISION AND ORDER

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 the Petitioner's SDA case.

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

MJB/jaf



Michael J. Bennane
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]

Petitioner

[REDACTED]

[REDACTED]