

STATE OF MICHIGAN
STATE OFFICE OF ADMINISTRATIVE HEARINGS AND RULES

ADMINISTRATIVE HEARINGS FOR THE
DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF: [REDACTED]

Claimant

Reg. No: 2010-26554
Issue No: 2005
Case No: [REDACTED]
Load No: [REDACTED]
Hearing Date:
April 28, 2010
Bay County DHS

ADMINISTRATIVE LAW JUDGE: Landis Y. Lain

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 upon claimant's request for a hearing. After due notice, a telephone hearing was held on April 28, 2010. Claimant personally appeared and testified.

ISSUE

Did the Department of Human Services (the department) properly cancel claimant's Transitional MA-Plus (TMA-Plus) based upon its determination that claimant failed to provide proof of citizenship in a timely manner?

FINDINGS OF FACT

The Administrative Law Judge, based upon the competent, material and substantial evidence on the whole record, finds as material fact:

- (1) On October 13, 2009, claimant was receiving Transitional MA-Plus. A case file review was conducted and it was found that there was no proof of citizenship in the file.
- (2) On October 13, 2009, the department caseworker sent claimant a DHS-3503, Verification Checklist, requesting proof of citizenship with a due date of October 23, 2009 (Department Exhibit A).

(3) On October 26, 2009, the department received a note from claimant indicating confusion as to why a birth certificate or proof of citizenship was needed (Department Exhibit B).

(4) On October 27, 2009, the department caseworker called claimant and left a message on the telephone indicating proof of citizenship is a requirement for department policy for continued medical benefits and requested documentation be supplied by the due date listed on the DHS-3503.

(5) On October 28, 2009, no proof of citizenship was received. The case was put in suspense for closure with an effective date of November 9, 2009 (Department Exhibit C).

(6) On October 28, 2009, a DHS-1605 was mailed by a central print to claimant indicating medical had been closed as the department was unable to verify citizenship (Department Exhibit D).

(7) On November 23, 2009, the birth certificates were received in the department for claimant (Department Exhibit E).

(8) On December 8, 2009, claimant's wife called and asked what she needed to do to reopen her medical case and she was told that she needed to complete a new application.

(9) On December 13, 2009, a DHS-1171 application was completed requesting medical benefits (Department Exhibit F).

(10) On December 30, 2009, claimant contacted the department and asked that his TMA-Plus medical program be reopened.

(11) On January 6, 2010, claimant filed a request for a hearing to contest the department's negative action.

CONCLUSIONS OF LAW

The Medical Assistance (MA) program is established by Title XIX of the Social Security Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). The Department of Human Services (DHS or department) administers the MA program pursuant to MCL 400.10, *et seq.*, and MCL 400.105. Department policies are found in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) and the Program Reference Manual (PRM).

TMA-Plus is a state-funded medical program. TMA-Plus is available to families after Transitional MA (TMA) and is to assist families who are unable to purchase employer-sponsored health care. TMA-Plus offers a way to extend medical coverage through a premium payment plan. The TMA-Plus group must contain a child who is under age 18, or age 18 or 19 and a full-time student expected to graduate before age 20. The TMA-Plus group members cannot have other comprehensive health insurance. (BEM, Item 647, p. 1) There is no asset test. Income eligibility exists when net income of a TMA-Plus income group does not exceed 185% of the poverty level for the income group. The income limit is found in RFT 246. (BEM, Item 647, p. 3)

The TMA-Plus qualified group is:

- TMA-Plus group members who have met all eligibility requirements, and
- are not eligible for any other MA category.

During each 12-month period between redeterminations, eligibility continues unless:

- premiums are not paid on or before the due date;
- payment received is less than the full premium amount or considered to be insufficient funds;
- the TMA-Plus group no longer contains a child who meets age and school attendance requirement;

- other comprehensive health insurance is obtained or is available from an employer for the same or less than the TMA-Plus premium amount;
- residence/institutional status factors and non-financial eligibility factors are no longer met by a TMA-Plus eligible group member; or
- a TMA-Plus eligible group or a group member is approved for an MA category including FIP. A pregnant woman must be transferred to Healthy Kids for Pregnant woman (HKP). She may regain her TMA-Plus eligibility after the pregnancy ends.

A TMA group member who loses TMA-Plus eligibility cannot re-enroll in TMA-Plus unless the group member is once again TMA eligible. (BEM, Item 647, p. 10)

A determination of continuing MA eligibility must be completed at least 40 days before the last day of the 12th month of the TMA period (BEM, Item 647, p. 5)

The TMA-Plus coordinator indicated by email that citizenship is not required with TMA-Plus, so claimant's TMA-Plus eligibility should be reinstated with no break in eligibility, if all other factors remain. BEM, Item 105, p. 3, indicates that TMA-Plus is a state-funded program, not a Medicaid category. BEM, Item 225, p. 60, indicates that United States citizenship must be verified for Medical Assistance and the Adult Medical Assistance programs.

This Administrative Law Judge finds that since TMA-Plus is not a Medical Assistance program and the policy indicates that Medical Assistance programs require citizenship, this Administrative Law Judge cannot definitively determine that TMA-Plus requires proof of citizenship. In addition, TMA-Plus is a state-funded program and not a federally-funded program. Therefore, it was not required that claimant have a birth certificate because it was not required that he verify citizenship. In addition, claimant and his wife testified that they put a note into the drop box stating that it was going to take them approximately 4 to 6 weeks to provide the birth certificate. The department caseworker said that she did not get a copy of the note from the

NOTICE: Administrative Hearings may order a rehearing or reconsideration on either its own motion or at the request of a party within 30 days of the mailing date of this Decision and Order. Administrative Hearings will not order a rehearing or reconsideration on the Department's motion where the final decision cannot be implemented within 90 days of the filing of the original request.

The Claimant may appeal the Decision and Order to Circuit Court within 30 days of the mailing of the Decision and Order or, if a timely request for rehearing was made, within 30 days of the receipt date of the rehearing decision.

LYL/cv

cc:

