

STATE OF MICHIGAN  
STATE OFFICE OF ADMINISTRATIVE HEARINGS AND RULES  
ADMINISTRATIVE HEARINGS FOR THE  
DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF THE CLAIM OF:

[REDACTED]

Reg. No.: 201042720  
Issue No.: 2027  
Case No.: [REDACTED]  
Load No.: [REDACTED]  
Hearing Date: October 20, 2010  
Wayne County DHS (76)

**ADMINISTRATIVE LAW JUDGE:** Lynn M. Ferris

**HEARING DECISION**

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 upon the claimant's request for a hearing. After due notice, a telephone hearing was held on October 20, 2010. The claimant appeared and testified. Representative [REDACTED] appeared as the authorized representative of the claimant. The Department's representative [REDACTED] FIM and [REDACTED], Assistant Payments Worker also appeared and testified on behalf of the Department.

**ISSUE**

Whether the Department properly closed the Claimant's Medical Assistance case due to Claimant's failure to return the requested redetermination form?

**FINDINGS OF FACT**

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

1. The Department scheduled to a redetermination for the claimant's Medical Assistance in January 2010.
2. The claimant was a recipient of Medical Assistance and SDA Medicaid.
3. A redetermination notice was sent to the claimant, on December 15, 2010 and was to be returned by the claimant on January 15, 2010.
4. The claimant was in the hospital in November 2010.

5. At the time of the redetermination, the claimant was living for period of time at [REDACTED], and then lived at a different location.
6. The claimant did not notify the department of any change of address.
7. The claimant did not provide the Department with a change of address when he moved or no longer resided at [REDACTED]
8. The department mailed a redetermination form to the claimant on December 15, 2009 to the last address of the claimant the redetermination form was due January 15, 2010.
9. The claimant did not return the redetermination form.
10. The Department closed the claimant's medical assistance and SDA Medicaid on February 1, 2010 because the claimant failed to return the redetermination form.
11. A notice of case action was sent to the claimant on January 15, 2010 which closed the Claimant's SDA medical assistance and his adult medical care cases.
12. The claimant requested a hearing protesting the closure of his medical benefits on February 10, 2010 which was received by the department on the same day.

### **CONCLUSIONS OF LAW**

The Medical Assistance (MA) program is established by the 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 (formerly known as the Family Independence Agency) 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).

Clients must cooperate with the local office in determining initial and ongoing eligibility to provide verification. BAM 130, p. 1. The information might be from the client or a third party. *Id.* The Department can use documents, collateral contacts or home calls to verify information. *Id.* The client should be allowed 10 calendar days to provide the verification. If the client cannot provide the verification despite a reasonable effort, the time limit to provide should be extended at least once. BAM 130, p.4; BEM 702. If the

client refuses to provide the information or has not made a reasonable effort within the specified time period, then policy directs that a negative action be issued. BAM 130, p. 4. Before making an eligibility determination, however, the department must give the client a reasonable opportunity to resolve any discrepancy between his statements and information from another source. BAM 130, p. 6.

In this case, the Department mailed out a request for redetermination requesting that information be returned by the due date and sent it to the last known address provided to the Department by the claimant. The department never received a response to the redetermination and its request for information so it could complete the redetermination. The Department closed the claimant's medical assistance cases because it had not received a response from the Claimant. Unfortunately, the claimant never provided a change of address to either the department or to the US postal office so that he could receive mail. Additionally, the Department sent the notice of case action which closed the claimant's medical assistance to the claimant at the same address where the redetermination forms were sent and a hearing was requested by the claimant shortly after the Notice of Case Action was sent. The proper mailing and addressing of a letter creates a presumption of receipt. That presumption may be rebutted by evidence. *Stacey v Sankovich*, 19 Mich App 638 (1969); *Good v Detroit Automobile Inter-Insurance Exchange*, 67 Mich App 270 (1976).

Based on the record as a whole it is found that the Department properly mailed the redetermination to the Claimant at the last known address and non receipt of the letter was not the fault of the Department. Based on these circumstances, it must be found that the department properly closed the claimant's medical assistance cases on February 1, 2010 because he did not respond to the redetermination. While the administrative law judge is sympathetic to the claimant's problems and the lack of medical coverage, these problems were not caused by any action or inappropriate action or failure to follow Department Policy requirement by the department. It was not the department's fault that the department did not have a current address.

Based upon these facts and circumstances it is found that the Department did properly close the Claimant's Medical Assistance cases because the redetermination forms were never returned to the Department. The claimant is urged to reapply for medical assistance immediately and must await the Medical Review Team's determination with regard to his eligibility for SDA benefits which is currently pending with the department for review in Lansing Michigan.

### **DECISION AND ORDER**

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, finds that the evidence presented at the hearing did support the decision of the

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Department to close the Claimant's Medicaid cases for failure to return the requested redetermination forms and therefore, the Department's decisions is AFFIRMED.



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Lynn M. Ferris  
Administrative Law Judge  
For Ismael Ahmed, Director  
Department of Human Services

Date Signed: 10/21/2010

Date Mailed: 10/21/2010

**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.

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