

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

IN THE MATTER OF:

██████████
████████████████████
██████████

Reg. No.: 12-000005
Issue No.: 2004
Case No.: ██████████
Hearing Date: August 13, 2014
County: Wayne-District 35

ADMINISTRATIVE LAW JUDGE: Zainab Baydoun

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; 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. After due notice, a three way telephone hearing was held on August 13, 2014, from Detroit, Michigan. Participants on behalf of Claimant included his Authorized Hearing Representative (AHR), ██████████, from ██████████ (L&S). Participants on behalf of the Department of Human Services (Department) included ██████████, Hearings Facilitator.

ISSUE

Did the Department properly process Claimant's application for Medical Assistance (MA) benefits?

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 January 27, 2012, L&S submitted an application for MA benefits, retroactive to December 2011, on behalf of Claimant. (Exhibit A)
2. On February 16, 2012, the Department sent Claimant a Notice of Case Action informing him that for December 1, 2011, ongoing, his application was denied on the basis that the Adult Medical Program was closed to new enrollments and that Claimant was not blind, disabled, pregnant, parent/caretaker relative of a dependent child, does not meet age requirements and that the individual was active on another case. (Exhibit 1)

3. The Department did not send L&S the Notice of Case Action denying the application.
4. On June 6, 2012, L&S submitted a hearing request on Claimant's behalf, disputing the Department's actions and requesting that the Department properly process Claimant's MA application.

CONCLUSIONS OF LAW

Department policies are contained in the Department of Human Services Bridges Administrative Manual (BAM), Department of Human Services Bridges Eligibility Manual (BEM), Department of Human Services Reference Tables Manual (RFT), and Department of Human Services Emergency Relief Manual (ERM).

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 Family Independence Agency) administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.105-.112k.

Additionally, when the Department receives an application for assistance, it is to be registered and processed in accordance with Department policies. The date of application is the date the local office receives the required minimum information on an application or the filing form. BAM 110 (December 2011), pp.4,6,17. The standard of promptness (SOP) begins the date the department receives an application/filing form, with minimum required information. BAM 115 (December 2011), pp. 1,12. Retro MA coverage is available back to the first day of the third calendar month prior to the current application for FIP and MA applicants and persons applying to be added to the group. BAM 115, pp. 9-10.

The Department is to certify program approval or denial of the application within 45 days, unless an exception applies, and upon certification of eligibility results, the Department is to notify clients in writing of positive and negative actions by generating the appropriate notice of case action. After processing an initial application, the Department will notify clients and the representative of the approval or denial. BAM 115, pp. 1, 13-19;BAM 220 (January 2011), p. 1.

In this case, on January 27, 2012, L&S submitted an application for MA on behalf of Claimant, retroactive to December 2011. L&S sought to obtain MA coverage for Claimant based on his status as a parent/caretaker. (Exhibit A). The Department testified that it received the MA application and that the application was registered and processed. The Department stated that on February 16, 2012, it sent Claimant a Notice

of Case Action informing him that for December 1, 2011, ongoing, his application was denied on the basis that the Adult Medical Program was closed to new enrollments and that Claimant was not blind, disabled, pregnant, parent/caretaker relative of a dependent child, does not meet age requirements. The Notice also indicated that an individual listed on the application had active MA on another case. (Exhibit 1). The Department testified that because Claimant did not allege a disability on his application and because the children listed on the application were active on another case with their mother, who was also listed on the application, he was not eligible for MA under any program.

At the hearing, Claimant's AHR testified that L&S did not receive any communication from the Department concerning the MA application. The AHR stated that it did not receive a copy of the Notice of Case Action informing L&S of the denial of the application and that it was never given an opportunity to verify that Claimant was the parent/caretaker of the minor children in the home. The Department confirmed that a verification checklist concerning the caretaker status was never issued and that a copy of the Notice of Case Action denying the MA application was not sent to L&S.

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 failed to satisfy its burden of showing that it acted in accordance with Department policy when it processed Claimant's MA application.

DECISION AND ORDER

Accordingly, the Department's decision is REVERSED.

THE DEPARTMENT IS ORDERED TO BEGIN DOING 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. Register and process Claimant's January 27, 2012, application for MA, retroactive to December 2011, to determine Claimant's eligibility for MA benefits under the most beneficial category;
2. Issue supplements to Claimant for any MA coverage that he was entitled to receive but did not from December 2011, ongoing; and

3. Notify Claimant and L&S of its decision in writing.



Zainab Baydoun
Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: **9/3/2014**

Date Mailed: **9/3/2014**

ACE / tlf

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 48909-07322

CC: [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]