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

IN THE MATTER OF:



 Reg. No.:
 2013-22764

 Issue No.:
 2006

 Case No.:
 May 13, 2013

 Hearing Date:
 May 13, 2013

 County:
 Wayne (82-19)

ADMINISTRATIVE LAW JUDGE: Eric Feldman

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 following Claimant's request for a hearing. After due notice, a fourway telephone hearing was held on May 13, 2013, from Detroit, Michigan. Participants included Claimant;

. Participants on behalf of the Department of Human Services (Department) included

ISSUE

Whether the Department properly processed Claimant's Medical Assistance (MA) application?

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 October 16, 2009, Claimant applied for MA benefits and sought retroactive coverage back to July of 2009. Exhibit A.
- 2. Neither Claimant nor Claimant's AHR received a response to the application from the Department.
- 3. On May 6, 2010, the Department received Claimant's AHR's written request for hearing disputing the Department's failure to process the MA application. Exhibit A.

CONCLUSIONS OF LAW

Department policies are contained in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM), and the Reference Tables Manual (RFT).

☐ The Family Independence Program (FIP) was established pursuant to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Public Law 104-193, 42 USC 601, *et seq.* The Department (formerly known as the Family Independence Agency) administers FIP pursuant to MCL 400.10, *et seq.*, and Mich Admin Code, R 400.3101 through R 400.3131. FIP replaced the Aid to Dependent Children (ADC) program effective October 1, 1996.

☐ The Food Assistance Program (FAP) [formerly known as the Food Stamp (FS) program] is established by the Food Stamp Act of 1977, as amended, and is implemented by the federal regulations contained in Title 7 of the Code of Federal Regulations (CFR). The Department (formerly known as the Family Independence Agency) administers FAP pursuant to MCL 400.10, *et seq.*, and Mich Admin Code, R 400.3001 through R 400.3015.

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.

The Adult Medical Program (AMP) is established by 42 USC 1315, and is administered by the Department pursuant to MCL 400.10, *et seq.*

The State Disability Assistance (SDA) program, which provides financial assistance for disabled persons, is established by 2004 PA 344. The Department of Human Services (formerly known as the Family Independence Agency) administers the SDA program pursuant to MCL 400.10, *et seq.*, and 2000 AACS, R 400.3151 through R 400.3180.

☐ The Child Development and Care (CDC) program is established by Titles IVA, IVE and XX of the Social Security Act, the Child Care and Development Block Grant of 1990, and the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. The program is implemented by Title 45 of the Code of Federal Regulations, Parts 98 and 99. The Department provides services to adults and children pursuant to MCL 400.14(1) and Mich Admin Code, R 400.5001 through R 400.5015.

Any person, regardless of age, or their authorized representative (AR) may apply for assistance. BAM 110 (October 2009), p. 4. The Department must register a signed application or filing form, with the minimum information, within one workday for all requested programs. BAM 110, p. 16. The standard of promptness (SOP) begins the date the Department receives an application/filing form, with minimum required information. BAM 115 (October 2009), p. 10. For MA applications, the Department approves or denies the application and it mails the client a notice within 45 days. BAM 115, p. 11. If the group is ineligible or refuses to cooperate in the application process,

the Department must send a denial notice within the standard of promptness. BAM 115, p. 15. If approved, the Department sends the DHS-1150 (DHS-4690 and DHS-198 for CDC, DHS-4598 for MA-only or AMP-only) or LOA2 equivalent at case opening. BAM 115, p. 16.

Claimant's AHR testified that Claimant applied for MA benefits on October 16, 2009, and sought retroactive coverage back to July of 2009. Claimant's AHR provided proof that the application was sent via shipping on October 15, 2009, to the Department office. Exhibit A. This package included the MA application, Retroactive Medicaid Application, and authorization for the AHR to represent Claimant. Claimant's AHR testified that she never received a response to the application nor the retroactive application from the Department.

At the hearing, the Department conceded that it did receive the application via shipping on October 15, 2009. Moreover, the Department agreed that it would process the application as a Group 2 Caretaker Relative's application.

Based on the foregoing information and evidence, the Department failed to process the October 16, 2009, application for MA and retroactive MA dating back to July of 2009. The Department conceded that it received the application via shipping on October 15, 2009. Thus, the Department failed to satisfy its burden showing that it acted in accordance with Department policy when it failed to take any action on Claimant's MA and retroactive MA application.

Based upon the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, the Administrative Law Judge concludes that the Department failed to take any action on Claimant's MA and retroactive MA application.

DECISION AND ORDER

The Administrative Law Judge, based upon the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, finds that the Department i did act properly i did not act properly.

Accordingly, the Department's decision is \Box AFFIRMED \boxtimes REVERSED for the reasons stated above and on the record.

THE DEPARTMENT IS ORDERED TO DO THE FOLLOWING WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:

- 1. Register and initiate processing of Claimant's October 16, 2009 MA application, retroactive to July of 2009, under the Group 2 Caretaker Relative's program;
- 2. Begin issuing supplements to Claimant for any MA benefits he was eligible to receive but did not from July of 2009 ongoing; and

3. Notify Claimant and Claimant's AHR in writing of its decision in accordance with Department policy.

Eric Feldman

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

Date Signed: May 21, 2013

Date Mailed: May 23, 2013

NOTICE: Michigan Administrative Hearing System (MAHS) 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. MAHS 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. (60 days for FAP cases)

The Claimant may appeal the Decision and Order to Circuit Court within 30 days of the receipt 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.

Claimant may request a rehearing or reconsideration for the following reasons:

- A rehearing <u>MAY</u> be granted if there is newly discovered evidence that could affect the outcome
 of the original hearing decision.
- A reconsideration <u>MAY</u> be granted for any of the following reasons:
 - misapplication of manual policy or law in the hearing decision,
 - typographical errors, mathematical error, or other obvious errors in the hearing decision that effect the substantial rights of the claimant:
 - the failure of the ALJ to address other relevant issues in the hearing decision.

Request must be submitted through the local DHS office or directly to MAHS by mail at Michigan Administrative Hearings Reconsideration/Rehearing Request P. O. Box 30639

Lansing, Michigan 48909-07322

EJF/pf

