

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

IN THE MATTER OF:

[REDACTED]

Reg. No.: 201326597
Issue No.: 2026
Case No.: [REDACTED]
Hearing Date: May 22, 2013
County: Wayne (18)

ADMINISTRATIVE LAW JUDGE: Alice C. Elkin

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 telephone hearing was held on May 22, 2013, from Detroit, Michigan. Participants on behalf of Claimant included Claimant; [REDACTED], Claimant's daughter; and [REDACTED] Claimant's son-in-law. Participants on behalf of the Department of Human Services (Department) included [REDACTED], Family Independence Manager, and [REDACTED], Eligibility Specialist.

ISSUE

Did the Department properly take action concerning Claimant's Medical Assistance (MA) case?

FINDINGS OF FACT

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

1. Claimant was an ongoing recipient of MA coverage.
2. On January 7, 2013, Claimant had a hearing concerning his MA deductible.
3. On January 16, 2013, the Department sent Claimant a Notice of Case Action notifying him that, effective March 1, 2013, he was approved for MA coverage with a \$1097 monthly deductible. The Notice of Case Action also indicated that MA coverage for Zaki Asoofi was closing effective March 1, 2013 because she had not met her deductible in at least one of the last 3 months.

4. On January 24, 2013, Claimant filed a request for hearing concerning his deductible.

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), and Department of Human Services Reference Tables Manual (RFT).

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.

In a January 16, 2013 Notice of Case Action, the Department notified Claimant that, effective March 1, 2013, he had MA coverage subject to a \$1097 monthly deductible. Claimant requested a hearing on January 24, 2013, disputing the Department's calculation of his deductible.

Hearing Regarding January 16, 2013 Notice of Case Action

The evidence at the hearing established that Claimant had a hearing on January 7, 2013, concerning the calculation of his MA deductible. Before the administrative law judge rendered a decision in connection with that hearing, the Department sent Claimant the January 16, 2013 Notice of Action on informing him that effective March 1, 2013, his MA coverage under the Group 2 Caretaker (G2C) program was closing because he had not met his deductible for the preceding three months, but he would receive SSI-related MA coverage based on his disability with a \$1097 monthly deductible. Pending the hearing decision, the Department may not reduce or terminate restored benefits unless a change not related to the hearing issue occurs that affects the recipient's eligibility or benefits **and** the recipient fails to request a hearing about the change after the subsequent notice of negative action. BAM 600 (February 2013, pp 19-20). On January 24, 2013, Claimant filed a request for hearing concerning the change in his deductible in the January 16, 2013 Notice of Case Action. Because Claimant's pending hearing decision concerned his deductible and Claimant requested a hearing arising from the January 16, 2013 Notice of Case Action concerning the deductible, the Department could not make the changes indicated on the January 16, 2013 Notice of Case Action until the hearing decision from the January 7, 2013 hearing was issued.

At the hearing, the Department presented evidence that the ALJ issued a decision concerning the January 7, 2013 hearing on February 5, 2013, reversing the Department's calculation of Claimant's deductible and requiring the Department to recalculate Claimant's deductible from October 1, 2012, ongoing. The Department testified that, in response to the ALJ's decision, on February 8, 2013, it recalculated

Claimant's deductible from October 1, 2012 through February 1, 2013. The eligibility summary showed that Claimant continued to receive MA coverage under the G2C program for March 1, 2013, ongoing, with a deductible of \$611 for March and April 2013 and \$638 for May 1, 2013. Thus, the Department established that it had recalculated Claimant's deductible in accordance with the February 5, 2013 ALJ Hearing Decision, and that Claimant was receiving ongoing MA coverage under the G2C program with a monthly deductible of \$638 for May 2013. Because the Department complied with the Hearing Decision and established that it had not taken the action in the January 16, 2013 Notice of Case Action setting a \$1097 monthly MA deductible, Claimant failed to establish that he was aggrieved by a Department action. Mich Admin Code R 400.903(1).

At the hearing, Claimant testified that he continued to be concerned about the current amount of his deductible. Because Claimant's hearing request resulting in the current hearing was filed on January 24, 2013, this hearing could not address actions by the Department taken after the request was filed. Claimant was advised, however, that he could request a hearing concerning the calculation of his May 2013, ongoing, deductible.

September 2012 Hospital Bill

At the hearing, Claimant also testified that he was concerned about the Department's failure to pay a September 2012 hospital bill. A client is required to report and verify medical expenses. BEM 545 (July 2011), p 9. Claimant did not raise the issue of the payment of his hospital bill in his hearing request, and the February 5, 2013, Hearing Decision does not indicate that it was raised at the January 7, 2013, hearing. Thus, it was not properly raised at the current hearing. Furthermore, the evidence presented failed to establish that Claimant timely submitted this bill to the Department. Claimant was advised, however, that this bill, if supplied to the Department, could be applied towards his ongoing deductible if it satisfied the requirements of BEM 545.

Closure of Wife's MA Case

Although Claimant expressed concerns regarding the closure of his wife's MA case, his request for hearing only expressed concerns regarding his MA deductible. Thus, Claimant did not preserve this issue for the hearing. Furthermore, the Department testified that the wife's case was closed effective March 1, 2013, because she had not met her deductible for three consecutive months, and it certified this decision on February 8, 2013. If a group has not met its deductible in at least one of the three calendar months before that month **and** none of the members are QMB, SLM or ALM eligible, the Department will automatically notify the group of closure. BEM 545, p 9. There was no evidence in this case to counter the Department's testimony that Claimant's wife had not met her deductible for three consecutive months. Claimant was advised that his wife could reapply for MA coverage, including retroactive coverage for three months, at any time.

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 acted in accordance with Department policy when it withheld its intended action in the January 16, 2013 Notice of Case Action and complied with the February 5, 2013 Hearing Decision.

Accordingly, the Department's decision is AFFIRMED.



Alice C. Elkin
Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: 6/12/2013

Date Mailed: 6/12/2013

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 **MAY** be granted if there is newly discovered evidence that could affect the outcome of the original hearing decision.
- A reconsideration **MAY** 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

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ACE/hw

cc:

