## STATE OF MICHIGAN

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

## IN THE MATTER OF:



| Reg. No.: | 201312029 |
| :--- | :--- |
| Issue No.: | 2015 |
| Case No.: |  |
| Hearing Date: | April 18, 2013 |
| County: | Macomb 12 |

ADMINISTRATIVE LAW JUDGE: Gary F. Heisler

## 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 hearing was held on April 18, 2013. Claimant was represented by her authorized hearing representative,


## ISSUE

Did the Department of Human Services properly deny retro-active Medical Assistance (MA) for one month prior to Claimant's approved July 5, 2012 Medical Assistance (MA) application?

## 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 June 19, 2012, Claimant was admitted into McLaren-Macomb Hospital.
(2) On July 5, 2012, submitted a Medical Assistance (MA) application and a Retroactive Medicaid Application (DHS-3243) as Claimant's authorized hearing representative.
(3) On September 25, 2012, submitted Claimant's June 2012 The Department did not process the bills and it was discovered that Claimant was approved for Medical Assistance (MA) from July 5, 2012 ongoing but the retroactive application was never approved.
(4) On November 9, 2012, submitted a request for hearing.

## 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).

In this case the Department representative asserted that policy required the retro-active application to be denied. No such Department policy can be found. The Department representative asserted she had been taught that in training. The Department has failed in its burden to provide evidence showing their determination was correct. The Department cannot be upheld.

## DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides the Department of Human Services DID NOT properly deny retro-active Medical Assistance (MA) for one month prior to Claimant's approved July 5, 2012 Medical Assistance (MA) application.

It is ORDERED that the actions of the Department of Human Services, in this matter, are REVERSED.

It is further ORDERED that the Department reprocess Claimant's retroactive application for June 2012 in accordance with Department policy, process the June 2012 medical bills submitted, and issue a current Notice of Case Action (DHS-1605) to both Claimant and her authorized hearing representative,

Date Signed: 5/10/13
Date Mailed: 5/13/13
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.

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
GFH/tb

CC:


