

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

IN THE MATTER OF:

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██████████
████████████████████

Reg. No.: 2013 39381
Issue No.: 2012
Case No.: ██████████
Hearing Date: July 11, 2013
County: Wayne (31)

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 following Claimant's request for a hearing. After due notice, a three way telephone hearing was held on July 11, 2013, from Detroit, Michigan. Participants on behalf of Claimant included the Claimant's Authorized Hearing Representative (AHR), ██████████. The Claimant appeared through her mother ██████████. Participants on behalf of the Department of Human Services (Department) included ██████████ ES.

ISSUE

Did the Department properly process the Claimant's application for Medical Assistance.

FINDINGS OF FACT

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

1. The Claimant's AHR filed an incomplete application with a Filing Form dated November 30, 2012. The application was faxed to the DHS on November 30, 2012 as verified by the FAX confirmation of same date. Claimant Exhibit 1.
2. The application was sent to the correct fax number for the Department but was not processed to determine Claimant's eligibility. Claimant Exhibit 1. The Department did not process the application as of the November 30, 2012 filing date for the application.

3. The Department approved the application retro to September 1, 2012 and did not include August 2012 as a coverage month as the application month was December 2012 and did not allow retro 3 month coverage back to August 2012.
4. The Claimant's AHR requested a hearing on March 27, 2013 protesting the failure of the Department to process the MA-P application for August 1, 2012 retro month.

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 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.

Additionally, for unexplained reasons it was determined at the hearing the Department had no record of receiving or processing an incomplete application and filing form dated November 30, 2012 for MA-P and retro MA for August 2012. The Department confirmed that the fax number shown on the fax confirmation and fax lead sheet was a proper Department number but did not have the fax documents in the Claimant's file. Based upon the proof of fax sending with the attached documents of same date, the evidence presented indicated that the application with filing form was received but never processed as no record of the application registration existed in the Bridges system for November 30, 2012. The subsequent completed application was processed.

The Department conceded that the incomplete application and Filing Form may have been received, but was not in the case file and was never processed. Based upon a review of the evidence admitted, the evidence did establish the existence of an incomplete application and a Filing Form dated November 30, 2012; therefore, it is determined that based on the record as a whole the Department failed to process the application when received and thus must register an application based upon the November 30, 2012 filing Form and date.

The Department is required to process any application it receives and did not do so in the Claimant's case. Therefore, it is determined that the Department did not follow Department policy in failing to process the application and is required to do so and complete the registration or reregistration and processing of the incomplete application and Filing Form within the standard of promptness and determine the proper retroactive months for eligibility. BAM 110 and BAM 115.

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

- did act properly when it .
 did not act properly when it failed to process the incomplete Medical Assistance application and Filing Form dated November 30, 2012.

Accordingly, the Department's AMP FIP FAP MA SDA CDC decision is AFFIRMED REVERSED for the reasons stated 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. The Department shall register or re register and process the Claimant's November 30, 2012 application and Filing Form for November 30, 2012 and determine Claimant's eligibility for Medical Assistance for August 2012, the retro month not previously approved.
2. The Department shall issue a Notice to the Claimant and the Claimant's Authorized Hearing Representative regarding eligibility for Medical Assistance for August 2012.



LYNN M. FERRIS
Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: July 22, 2013

Date Mailed: July 22, 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

LMF/cl

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