

**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.: 2013-41883
Issue No.: 2012
Case No.: 1 ██████████
Hearing Date: July 18, 2013
Wayne County DHS (82)

ADMINISTRATIVE LAW JUDGE: Colleen M. Mamelka

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 telephone hearing was conducted from Detroit, Michigan on Thursday, July 18, 2013. Claimant did not appear; however, his Authorized Hearing Representative, ██████████ ██████████"), appeared on her behalf. The hearing was scheduled for 2:30p.m. Several attempts were made to contact someone from the Department of Human Services ("Department") to participate, including attempts by the undersigned. At approximately 3:10p.m., the undersigned was informed that the caseworker was going to the hearing room and would call in for the hearing. A call was not received and the hearing went forward without participation from the Department at 3:30.

ISSUE

Did the Department properly process Claimant's August 31, 2012 application for Medical Assistance ("MA-P") benefits retroactive to May 2012?

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, through a third party, submitted an application for public assistance seeking MA-P benefits retroactive to May 2012, in June 2012. (Exhibit 1, pp. 17 – 36)

2. On August 21, 2013, Claimant authorized the AHR to act on her behalf. (Exhibit 1, p. 6).
3. On August 31, 2012, the AHR submitted a second application seeking MA benefits retroactive to May 2012. (Exhibit 1, pp. 41 – 60)
4. On December 5, 2012, the Medical Review Team found Claimant not disabled and referenced a July 16, 2012 application. (Exhibit 1, pp. 7, 8)
5. On August 29th and November 13, 2012, verification checklists were sent to Claimant regarding the June 2012 application. (Exhibit 1, pp. 37, 38)
6. On December 12, 2012, a Notice of Case Action was sent to Claimant informing her that MA benefits were denied effective July 1, 2012 based on Claimant being found not disabled. (Exhibit 1, pp. 39, 40)
7. On April 5, 2013, the Department received the AHR's written request for hearing protesting the failure of the Department to process the August 2013 MA application, retroactive to May 2012.

CONCLUSIONS OF LAW

The Medical Assistance ("MA") program is established by Subchapter XIX of Chapter 7 of The Public Health & Welfare Act, 42 USC 1397, and is administered by the Department of Human Services, formally known as the Family Independence Agency, 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 Bridges Reference Manual ("BRM").

An application or filing form, with the minimum information, must be registered unless the client is already active for the program requested. BAM 110 (May 2012), p. 6. The required minimum information is the name, birth date, address, and authorized signature. BAM 105 (May 2012), p. 1. Retro-MA coverage is available back to the first day of the third calendar month prior to the application date. BAM 115 (May 2012), p. 9.

Application for MA benefits may be made on behalf of a client by the spouse, parent, legal guardian, adult child, stepchild, specified relative, or any other person provided the person is at least age 18 or married. BAM 110, p. 8. If the person is not a spouse, parent, legal guardian, adult child, stepchild, or specified relative, the person must have a signed authorization to act on behalf of the client, by the client, client's spouse, parent(s), or legal guardian. BAM 110, p. 9. Any person, regardless of age, or his AR, may apply for assistance. BAM 110, p. 4. An AR is a person who applies for assistance on behalf of the client and/or otherwise acts of his behalf. BAM 110, p. 7.

For MA purposes, an AR must be an adult child or stepchild; a specified relative; designated in writing by the client; court appointed; or a representative of an institution (such as jail or prison) where the client is in custody. BAM 110, p. 9.

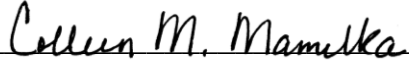
In this case, two applications for MA coverage were submitted on behalf of Claimant; one in June 2012 and another in August 2012. Both applications sought MA coverage retroactive to May 2012. Based on the submitted record, the Department processed a July 2012 application. There is no evidence that the August 2012 application was registered and/or processed. The December 5, 2012, Notice of Case Action provided notice that Claimant was found not disabled effective July 2012, ongoing based on the December 5th MRT determination. The MRT determination denied retroactive benefits; however, the Notice of Case Action did not cover the months of May and June 2012. In light of the foregoing, it is found that the Department failed to register and/or process Claimant's August 2012 application, seeking retroactive benefits to May 2012.

DECISION AND ORDER

The Administrative Law Judge, based on the above findings of fact and conclusions of law finds the Department failed to register and process Claimant's August 2012 MA application.

Accordingly, it is ORDERED:

1. The Department's actions are not upheld.
2. The Department shall register and process Claimant's August 2012 MA application, seeking retroactive benefits to May 2012, in accordance with department policy.
3. The Department shall notify Claimant and her Authorized Hearing Representative of the determination in accordance with department policy.
4. The Department shall supplement for lost benefits (if any) that Claimant was entitled to receive if otherwise eligible and qualified based on the August 2012 application, retroactive to May 2012.



Colleen M. Mamelka
Administrative Law Judge
For Maura Corrigan, Director
Department of Human Services

Date Signed: July 31, 2013
Date Mailed: August 5, 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

CMM/tm

cc: [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
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