

**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.: 2014-13146
Issue No(s): 2001
Case No.: ██████████
Hearing Date: February 24, 2014
County: Wayne (82-76)

ADMINISTRATIVE LAW JUDGE: Jonathan W. Owens

HEARING DECISION

Following Claimant's request for a hearing, this matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and 400.37; 7 CFR 273.15 to 273.18; 42 CFR 431.200 to 431.250; 45 CFR 99.1 to 99.33; and 45 CFR 205.10. After due notice, an in-person hearing was held on February 24, 2014, from Detroit, Michigan. Participants on behalf of Claimant included Claimant ██████████ ██████████ ██████████ ██████████ Participants on behalf of the Department of Human Services (Department) included ██████████ ██████████

ISSUE

Did the Department properly process Claimant's request for Medical Assistance (MA)?

FINDINGS OF FACT

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

1. August 31, 2012, Claimant's representative ██████████ ██████████ submitted an application for MA benefits.
2. On October 31, 2012, ██████████ sent the Department an email including an MSA-2565, hospital bill, DHS-49B, DHS-49F and a release.
3. On November 8, 2012, ██████████ sent the Department a DHS-49.
4. On March 1, 2013, Claimant's medical was sent to the Medical Review Team (MRT)

5. On March 22, 2013, the MRT denied Claimant's request from September 5, 2012, with a request for retro back to June 2012.
6. On March 26, 2013, a notice of case action denying MA benefits back to July 2012 was issued. The notice indicated Claimant's mailing address only.
7. On October 8, 2013, a copy of the March 26, 2013, notice of case action was faxed to [REDACTED].
8. On November 7, 2013, [REDACTED] submitted a hearing request to protest the MRT determination denying MA benefits dated March 26, 2013.

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

The Medical Assistance (MA) program is established by the Title XIX of the Social Security Act, 42 USC 1396-1396w-5, and is implemented by 42 CFR 400.200 to 1008.59. The Department of Human Services (formerly known as the Family Independence Agency) administers the MA program pursuant to MCL 400.10 and MCL 400.105.

In the instant case, on August 31, 2012, an application for benefits was submitted to the Department for MA benefits including a request for retro back to June 2012. Exhibit 1, p. 6. This request was submitted by an authorized representative. On October 31, 2012, a second request for MA benefits was received via email from a purported second authorized representative. The email indicated it included as attachments an MSA-2565, hospital bill, DHS-49B, DHS-49 F and a release. Exhibit B, p. 1. The Department received an additional email on November 8, 2012, which indicated a DHS-49 was attached. Exhibit B, p. 3. Several email communications were provided at hearing from Claimant's purported second authorized representative discussing the progression of an application for benefits.

On March 1, 2013, the Department sent MRT a medical packet regarding a September 5, 2012, application with a request for retro to June 1, 2012. Claimant's alleged second authorized representative asserted this application was, in fact, the application in question. The belief is that Claimant had applied on September 5, 2012, for MA benefits. There was no evidence submitted regarding a September 5, 2012, application other than the MRT packet dated March 1, 2013, which indicated a September 5, 2012, application date.

According to BAM 110, p. 7 (October 2012), an application or filing form, with the minimum information, must be registered on Bridges **unless** the client is already active

for that program. BAM 110, p. 8 (October 2012), indicates when an application is pending and additional application(s) are received prior to certification of the initial application, do **not** automatically deny the application(s). Do the following:

- Review the information for impact on eligibility and benefit level.
- Ensure the case record is documented with the additional application(s) received and note the application(s) used to determine eligibility and/or benefit levels.
- Attach the additional application(s) to the initial application.

When the case is already active for program benefits and additional application(s) are received, the specialist **must** review the application for changes in circumstances. Additionally, the specialist **must** either complete a redetermination or deny the programs requested since they are already active. BAM 110, p. 15 (October 2012), requires all applications, redeterminations, referrals, initial asset assessments, member adds and program adds must be registered on Bridges. According to BAM 110, pp. 7-8 (October 2012), an authorized representative (AR) is a person who applies for assistance on behalf of the client and/or otherwise acts on his behalf (for example, to obtain FAP benefits for the group). When no one in the group is able to make application for program benefits, any group member capable of understanding AR responsibilities may designate the AR. The AR assumes all the responsibilities of a client. AR's must give their name, address, and title or relationship to the client. To establish the client's eligibility, they must be familiar enough with the circumstances to complete the application, answer interview questions, and collect needed verifications.

After reviewing the evidence and testimony provided, this Administrative Law Judge finds the Department did fail to follow policy. The Department failed to demonstrate the request filed by the first representative on August 31, 2012, was ever processed. The date-stamped document confirms a request was filed on that date. Exhibit 1, p. 6. Further, the Department has failed to demonstrate the October 31, 2012, request filed by email, which included an MSA 2565, was ever registered or processed. The Department did show an MRT packet was sent out on March 1, 2013, regarding an alleged September 5, 2012, application for benefits. However, there was no evidence presented to demonstrate this application existed or who, in fact, may have filed the alleged application. The Department was, in fact, communicating with Claimant's alleged second authorized representative following the application date. The Department presented no evidence that demonstrated any case action notice was ever sent to Claimant's alleged first authorized hearing representative.

Based upon the above, this Administrative Law Judge finds the Department failed to process the application dated August 31, 2012, with a request for retro MA. The Department also failed to demonstrate processing of an application dated September 5, 2012, and a filing form dated October 31, 2012, in accordance with policy. Since a

finding has been made that includes a failure to send notice and process applications, the hearing request as filed cannot be found untimely.

DECISION AND ORDER

Accordingly, the Department's decision is REVERSED.

THE DEPARTMENT IS ORDERED TO BEGIN DOING THE FOLLOWING, IN ACCORDANCE WITH DEPARTMENT POLICY AND CONSISTENT WITH THIS HEARING DECISION, WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:

1. Register the request for benefits for August 31, 2012, including retro MA benefits;
2. Process the request for MA benefits;
3. Issue a notice of case action to Claimant and the authorized representatives.



Jonathan W. Owens
Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: March 5, 2014

Date Mailed: March 6, 2014

NOTICE OF APPEAL: 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 or Reconsideration was made, within 30 days of the receipt date of the Decision and Order of Reconsideration or Rehearing Decision.

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).

A Request for Rehearing or Reconsideration may be granted when one of the following exists:

- Newly discovered evidence that existed at the time of the original hearing that could affect the outcome of the original hearing decision;
- Misapplication of manual policy or law in the hearing decision which led to a wrong conclusion;
- Typographical, mathematical or other obvious error in the hearing decision that affects the rights of the client;
- Failure of the ALJ to address in the hearing decision relevant issues raised in the hearing request.

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The Department, AHR or the claimant must specify all reasons for the request. MAHS will not review any response to a request for rehearing/reconsideration. A request must be *received* in MAHS within 30 days of the date the hearing decision is mailed.

The written request must be faxed to (517) 335-6088 and be labeled as follows:

Attention: MAHS Rehearing/Reconsideration Request

If submitted by mail, the written request must be addressed as follows:

Michigan Administrative Hearings
Reconsideration/Rehearing Request
P.O. Box 30639
Lansing, Michigan 48909-07322

JWO/pf

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