

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

**IN THE MATTER OF:**

[REDACTED]

Reg. No.: 201423836  
Issue No.: 2003  
Case No.: [REDACTED]  
Hearing Date: March 26, 2014  
County: Wayne (57)

**ADMINISTRATIVE LAW JUDGE:** Alice C. Elkin

**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, a telephone hearing was held on March 26, 2014, from Detroit, Michigan. Participants on behalf of Claimant included Claimant and [REDACTED], Claimant's wife. Participants on behalf of the Department of Human Services (Department) included [REDACTED], Family Independence Specialist, and [REDACTED], Family Independence Manager.

**ISSUE**

Did the Department properly close 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.
2. On December 16, 2013, the Department sent Claimant a redetermination concerning his ongoing MA eligibility, requiring a completed form to be returned by January 2, 2014.
3. On January 17, 2014, the Department sent Claimant a Notice of Case Action notifying him that his MA case would close effective February 1, 2014.
4. On January 27, 2014, Claimant submitted a request for hearing disputing the Department's actions.

## **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.

The Department requires recipients of state benefits to complete redeterminations at least once every twelve months. BAM 210 (October 2013), p. 1. MA benefits stop at the end of the benefit period unless a redetermination is completed and a new benefit period is certified. BAM 210, p. 2.

On December 16, 2013, the Department sent Claimant a redetermination form to determine his ongoing eligibility for MA. Claimant was required to complete the form, sign it, and return it to the Department by January 2, 2014. At the hearing, Claimant's wife acknowledged that they had received the form but did not complete it by the due date.

The Department sent Claimant a January 17, 2014, Notice of Case Action, informing him that his MA case would close effective February 1, 2014, because he failed to return the redetermination form and because he was no longer aged, blind or disabled. At the hearing, the Department testified that Claimant continued to be eligible for MA due to age or disability and clarified that his case was closed based on failure to complete the redetermination. The Department further testified that Claimant contacted his worker after receiving the Notice of Case Action, and she informed him that he could complete the redetermination sent to him in December 2013 or a new redetermination form for completion and his case would not close as long as the completed document was received by January 31, 2014.

At the hearing, Claimant and his wife testified that they mailed the completed redetermination at about the same time that they filed the request for hearing on January 27, 2014. However, their testimony did not clearly establish that they submitted the completed redetermination by the January 31, 2014 effective closure date of the MA case. Furthermore, the Department denied ever receiving a completed redetermination.

Under these facts, the Administrative Law Judge finds that the Department acted in accordance with Department policy when it closed Claimant's MA case for failure to complete the redetermination.

**DECISION AND ORDER**

Accordingly, the Department's decision is AFFIRMED.



Alice C. Elkin

Administrative Law Judge  
for Maura Corrigan, Director  
Department of Human Services

Date Signed: April 3, 2014

Date Mailed: April 3, 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.

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

ACE/tlf

cc:

