

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

IN THE MATTER OF:

[REDACTED]

Reg. No.: 2014-24451
Issue No.: 2004
Case No.: [REDACTED]
Hearing Date: April 1, 2014
County: Wayne(15)

ADMINISTRATIVE LAW JUDGE: Carmen G. Fahie

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, telephone hearing was held on Tuesday, April 1, 2014, from Lansing, Michigan. Participants on behalf of Claimant included the Claimant's Authorized Representative, [REDACTED], [REDACTED]. Participants on behalf of the Department of Human Services (Department) included [REDACTED], APW.

ISSUE

Did the Department properly process the Claimant's application dated September 28, 2011 for MA and retroactive 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. The Claimant through [REDACTED] applied for MA and retroactive MA benefits on September 28, 2011.
2. On May 21, 2013, the Administrative Law [REDACTED] ordered the Department to reregister and reprocess the Claimant's September 28, 2011 application.
3. On June 12, 2013, the Department Caseworker sent the Claimant a Verification Checklist, DHS 3503, that was due on June 24, 2013. Department Exhibit a.
4. On June 12, 2013, the Department sent the Claimant a Notice of Case Action, DHS-1605, that her MA application was denied for August 1, 2012 for AMP because she failed to provide the required verifications. Department Exhibit B-F.

5. On January 17, 2014, the Department received a hearing request from [REDACTED] for failing to process the Claimant's MA application and retro MA application dated September 28, 2011.

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.

Additionally, the Department seems to have reprocessed the wrong application for the wrong time period. The Administrative Law Judge ordered the Department to reprocess the Claimant's application submitted to the Department on [REDACTED]

[REDACTED] time period of [REDACTED]. As a result, the Department has not met their burden that they reprocessed the Claimant's [REDACTED] MA application with retroactive MA. In addition, there was no verification that [REDACTED] had received a copy of the notification.

The Administrative Law Judge, based on the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, if any, finds that the Department failed to satisfy its burden of showing that it acted in accordance with Department policy when it provided written verification that it reprocessed the wrong application, for the wrong program, and for the wrong date.

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. Initiate a redetermination of the Claimant's eligibility for MA and retroactive MA by reprocessing and reregistering the Claimant's [REDACTED] application as ordered by Administrative Law Judge [REDACTED] by sending out another verification checklist to the Claimant and her Authorized Representative.

2. Provide the Claimant and her Authorized Representative with a written notification of the Department's revised eligibility determination.
3. Issue the Claimant any retroactive benefits she/he may be eligible to receive, if any.

Carmen G. Fahie

Carmen G. Fahie
Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: 4/18/14

Date Mailed: 4/18/14

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 Claimant;
- 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.

2014-24451/CGF

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

CGF/tb

cc:

