

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

IN THE MATTER OF:

██████████
██████████
████████████████████

Reg. No.: 2014-9247
Issue No(s): 2001
Case No.: ██████████
Hearing Date: April 24, 2014
Counties: St. Clair & SSPC-West

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 April 24, 2014, from Port Huron, Michigan. Participants on behalf of Claimant included ██████████
██████████ 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. On November 28, 2012, Claimant filed an application for MA benefits including a request for MA benefits back to September 2012.
2. On January 16, 2013, an application for MA benefits including retro MA back to November 2012 was submitted by Claimant's authorized representative.
3. On January 29, 2013, the Department denied Claimant's application and sent a notice of case action to Claimant only.
4. On October 24, 2013, Claimant's representative filed a request for hearing.

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, Claimant submitted an online application for MA benefits on November 28, 2012. Claimant's application included all persons living in the home. The application specifically requested retro MA benefits back to September 2012. Claimant's online application indicated he was the primary caretaker of his ten year old son. The application appeared to only request MA benefits for Claimant. The application did acknowledge the entire household bought and prepared food together. The Department, specifically SSPC-West, started processing the application.

On January 16, 2013, a second application was filed on behalf of Claimant seeking MA benefits back to November 2012. Included with this application was a request for processing and consideration for G2C MA benefits. The local Department official testified this application was scanned and emailed to SSPC-West prior to the case action issued on January 29, 2013. This application was not presented at hearing but the testimony provided by the local Department staff was found to be credible. The SSPC-West official at hearing testified the application dated November 28, 2012, was denied the Adult Medical Program as the program was in a frozen status. Further, the application was denied for other MA programs as Claimant did not allege on the application he was disabled nor was he a qualified caretaker relative per policy. The SSPC-West official was not aware of a second application purported to have been sent to SSPC-West. However, it should be noted that the SSPC-West official at the hearing was not the individual who took the case action or who was involved in the processing of the application.

BEM 135 (January 2011), pp. 2-3, provides the requirements for a child to be considered a dependent. This policy requires the child to be:

- An FIP recipient.
- An SSI recipient.
- An MA applicant.
- Active MA deductible.
- An MA recipient.
- A MICHild recipient.

BEM 105 (October 2010), p. 2, provides for a person to be afforded the opportunity to choose the most beneficial program, specifically stating persons may qualify under more than one MA category. Federal law gives them the right to the most beneficial category. The most beneficial category is the one that results in eligibility.

BAM 110 (November 2012), p. 6, requires an application or filing form, with the minimum information, must be registered on Bridges unless the client is already active for that program(s).

BAM 110 (November 2012), p. 7, indicates the response to multiple applications for FIP, SDA, RCA, CDC and FAP. 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).

The Department is to 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. Policy is silent regarding multiple MA applications.

BAM 110 (November 2012), p.15, requires all applications, redeterminations, referrals, initial asset assessments, member adds and program adds to be registered on Bridges.

After reviewing the applicable policies, this Administrative Law Judge finds the Department failed to process the two applications according to policy. At a minimum, the Department, upon receipt of the first application, should have determined Claimant was alleging to be caretaker of a minor child. Federal law gives them the right to the most beneficial category when determining benefits. The policy, in fact, highlights this point and makes clear applicants are not expected to know the program requirements. Here, Claimant was seeking MA benefits. While his application failed to request benefits for his child, he clearly indicated he was the caretaker of the minor child and his personal need for MA assistance was indicated.

BAM 130 (May 2012), p. 1, requires the Department to seek verification when information regarding an eligibility factor is unclear, inconsistent, incomplete or contradictory. The Department had an application for benefits which indicated an adult caretaker was in need of MA assistance. This same application identified the minor child but noted no request for MA benefits for this child. The Department should have requested clarification when processing this application as this information in the

application appears to be contradictory. Claimant, who indicated he was the primary caretaker, failed to request MA for his child. Further, given the eligibility requirements, the Department had a responsibility in assisting Claimant in obtaining the most beneficial program of MA benefits. In this case, a caretaker relative benefits for which he would be eligible if he simply requested MA benefits for his child.

Finally, the second application which was emailed as a PDF file to SSPC-West was not properly addressed by the Department. This application clearly indicated a request for G2C benefits and provided an authorized representative. This information and any and all other changes contained within the second application should have been utilized to, at a minimum, update the first application pending at the time the second application was submitted.

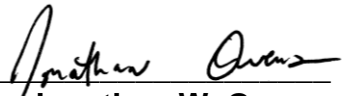
For the above-stated reasons, the Department did not process Claimant's request for MA benefits in accordance with policy. Therefore, the Department must be reversed.

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 November 28, 2012, application for MA benefits including the request for retro MA back to September 2012;
2. Update the November 28, 2012, application with the information provided in the January 16, 2013, application for MA benefits;
3. Add Claimant's representative to the application;
4. Process the application in accordance with Department policy including requesting additional verification regarding the child's need for MA benefits.
5. Issue a written determination.



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

Date Signed: April 28, 2014

Date Mailed: April 28, 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

JWO/pf

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