

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

IN THE MATTER OF:

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

Reg. No.: 2014-24562
Issue No(s): 2001
Case No.: ██████████
Hearing Date: May 1, 2014
County: Macomb (50-20)

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; 42 CFR 431.200 to 431.250; and 45 CFR 205.10. After due notice, an in-person hearing was held on May 1, 2014, from Warren, Michigan. Participants on behalf of Claimant included ██████████
████████████████████ Participants on behalf of the Department of Human Services (Department) included ██████████

ISSUE

Did the Claimant request a timely hearing regarding the denial of Medical Assistance (MA) benefits?

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 June 9, 2008, Claimant's representative submitted an application for Medical Assistance (MA) and retro MA benefits back to May 2008.
2. On December 20, 2008 (Saturday??), the Department denied Claimant's request for MA benefits based upon a Medical Review Team (MRT) determination.
3. On March 23, 2009, Claimant's representative filed a hearing request.

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, the Department sent a decision notice on Saturday, December 20, 2008, to Claimant and representative. Using December 22, 2008, as the mailed date and counting days until the hearing request was received on March 12, 2009, Claimant's request is not over 90 days. Claimant's representative presented a date-stamped cover sheet indicating a hearing request had been submitted to Ingham County Department of Human Services on March 12, 2009.

At hearing, the Department agreed to reconstruct the June 9, 2008, application with assistance from Claimant's representative. Once reconstructed, the Department will attach the hearing request submitted on March 12, 2009, for processing as a disability determination. Claimant's representative agreed to this action being taken.

DECISION AND ORDER

Accordingly, the Department's decision is PARTIAL REVERSAL.

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. Reconstruct the June 9, 2008, application for MA benefits with the assistance of Claimant's representative;
2. Attach a copy of the March 12, 2009, request for hearing to the reconstructed application packet;
3. Forward the hearing request and packet to the Michigan Administrative Hearings System for scheduling as a disability hearing after a State Hearing Review Team decision is issued.



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

Date Signed: May 8, 2014

Date Mailed: May 8, 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]