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

#### IN THE MATTER OF:



Reg. No.: 201425813

Issue No.: 2001

Case No.:

Hearing Date: April 28, 2014 County: Oakland (02)

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, an in-person hearing was held on April 28, 2014, from Madison Heights, Michigan. Participants on behalf of Claimant included Claimant and Claimant's authorized hearing representative (AHR). Participants on behalf of the Department of Human Services (Department) included Residual Assistance Payment Worker.

## ISSUE

Did the Department properly provide Medical Assistance (MA) coverage to Claimant for January 1, 2014 ongoing?

### FINDINGS OF FACT

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

- Claimant was an ongoing recipient of MA benefits.
- Claimant has minor children in her home who receive MA.
- Claimant submitted her MA redetermination after the due date but before the end of the certification period on December 31, 2013.
- 4. The Department reinstated Claimant's MA case and activated her MA coverage under the Plan First program effective January 1, 2014.

5. On January 27, 2014, Claimant requested a hearing disputing the Department's actions concerning her MA case.

# 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, at the hearing, the AHR clarified that a hearing was requested concerning only Claimant's MA coverage.

The evidence at the hearing established that, although Claimant had been notified that her MA case would close for failure to complete a redetermination, she submitted the completed redetermination prior to the expiration of the MA certification period on December 31, 2013, and the Department had reinstated Claimant's MA case as of January 1, 2014. However, the Department testified that, because of a system-wide issue, Claimant received MA coverage under the Plan First program. Evidence at the hearing established that Claimant received MA coverage from January 1, 2014 to April 30, 2014 under the Plan First program, and effective May 1, 2014 she would receive MA coverage under the Healthy Michigan Plan (HMP).

The Plan First program provides family planning services. BEM 124 (January 2014), p. 1. The HMP program provides coverage beginning April 1, 2014 for individuals who (i) are age 19 to 64 years, (ii) have income at or below 133% of the federal poverty level under the Modified Adjusted Gross Income (MAGI) methodology, (iii) do not qualify for or are not enrolled in Medicare, (iv) do not qualify for or are not enrolled in other Medicaid programs, (v) are not pregnant at the time of application, and (vi) are residents of the State of Michigan. The HMP plan covers ambulatory patient services; emergency services; hospitalization; maternity care; mental health and substance use disorder treatment services, including behavioral health treatment; prescription drugs; rehabilitative and habilitative services and devices; laboratory services; preventive and wellness services and chronic disease management; pediatric services for 19 & 20 year olds, including oral and vision care; and other services such as dental, home health, and family planning. <a href="http://michigan.gov/mdch/0,4612,7-132-2943">http://michigan.gov/mdch/0,4612,7-132-2943</a> 66797-325160--,00.html#Coverages.

When an individual qualifies under more than one MA category, federal law gives the individual the right to the most beneficial category. BEM 105 (January 2014), p. 2. The most beneficial category is the one that results in eligibility or the least amount of excess income. BEM 105, p. 2. For MAGI-related MA categories, the Department must consider a client's eligibility for MA coverage for parent/caretaker programs before Plan First eligibility. BEM 105, p. 3.

In this case, the Department acknowledges that Claimant is the parent is minor children who reside in her home. However, there is no evidence that it considered her eligibility for MA coverage under parent/caretaker programs before considering her eligibility under the Plan First program or the HMP program. Furthermore, if Claimant's most beneficial program is the HMP program, the Department failed to explain why her eligibility as of April 1, 2014, when the HMP program became available, was not considered.

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 determined Claimant's MA coverage for January 1, 2014, ongoing.

## **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. Reprocess Claimant's MA coverage for January 1, 2014, ongoing, considering her eligibility under the most beneficial category;
- 2. Provide Claimant with the MA coverage she is eligible to receive from January 1, 2014 ongoing; and
- 3. Notify Claimant and the AHR in writing of its decision.

Alice C. Elkin

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

Date Signed: May 12, 2014

Date Mailed: May 12, 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

