

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

IN THE MATTER OF:



Reg. No.: 2014-28195
Issue No(s): 2004
Case No.: [REDACTED]
Hearing Date: April 10, 2014
County: Wayne (19)

ADMINISTRATIVE LAW JUDGE: Eric Feldman

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 three-way telephone hearing was held on April 10, 2014, from Detroit, Michigan. Participants on behalf of Claimant included Claimant's Authorized Hearing Representative (AHR), [REDACTED]. Participants on behalf of the Department of Human Services (Department or DHS) included [REDACTED] Eligibility Specialist.

ISSUE

Did the Department properly process Claimant's Medical Assistance (MA) application dated June 20, 2013, retroactive to March 2013?

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 20, 2013, Claimant and/or the authorized representative (AR) (who is also the AHR) applied for MA benefits and also sought retroactive MA coverage to March 2013. (See Exhibits 1 and A).
2. The Department failed to send Claimant's AR a Notice of Case Action and/or medical packet.
3. On July 31, 2013, the Department sent Claimant a Notice of Case Action notifying her that her MA benefits were denied effective June 1, 2013, ongoing, due to her not being aged, blind, disabled, under 21, pregnant, or a parent/caretaker relative

of a dependent child, and individual failed to return documentation to complete a disability determination. (See Exhibit 1).

4. On November 21, 2013, Claimant's AHR filed a hearing request, protesting the Department's failure to process the MA application. (See Exhibit 1).

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.

Preliminary Matter

On July 31, 2013, the Department sent Claimant a Notice of Case Action notifying her that her MA benefits were denied effective June 1, 2013, ongoing. (See Exhibit 1). However, the evidence presented that a Notice of Case Action was never sent to Claimant's AR (who is also Claimant's AHR) at that time. The AHR testified that he requested a hearing because he never received a Verification Checklist (VCL) or an Application Eligibility Notice. (See Hearing Request, Exhibit 1). Thus, Claimant's AHR filed a hearing request, protesting the Department's failure to process the MA application. (See Exhibit 1). Claimant's AHR discovered the Notice of Case Action upon receipt of the hearing summary. (See Exhibit 1).

Based on the foregoing information, Claimant's AHR filed a timely hearing request. The evidence presented that a Notice of Case Action was never sent to Claimant's AR (who is also Claimant's AHR) at that time. The AHR indicated that it first received notice of the denial when it received the hearing summary. As such, Claimant's AHR hearing request is proper and the hearing proceeded with addressing the MA failure to process issue. [See BAM 600 (March 2014), pp. 4-6].

MA Application

The Department determines eligibility and benefit amounts for all requested programs. BAM 105 (July 2013), p. 13.

Any person, regardless of age, or their authorized representative (AR) may apply for assistance. BAM 110 (July 2013), p. 4. The AR assumes all the responsibilities of a client. BAM 110, p. 9. The Department must register a signed application or filing form,

with the minimum information, within one workday for all requested programs. BAM 110, p. 19.

The standard of promptness (SOP) begins the date the department receives an application/filing form, with minimum required information. BAM 115 (July 2013), p. 15. For MA applications, the Department certifies the program approval or denial of the application within 45 days. BAM 115, p. 15. However, there are exceptions to these benefits programs for processing times, which are described as follows: 90 days for MA categories in which disability is an eligibility factor. BAM 115, p. 16. The SOP can be extended 60 days from the date of deferral by the Medical Review Team. BAM 115, p. 16.

Moreover, if the group is ineligible or refuses to cooperate in the application process, the Department must certify the denial within the standard of promptness and also send a DHS-1605, Client Notice, or the DHS-1150, Application Eligibility Notice, with the denial reason(s). BAM 115, p. 23. If approved, the Department sends the DHS-1605 detailing the approval at certification of program opening. BAM 115, p. 23.

In this case, on June 20, 2013, Claimant and/or the AR (who is also the AHR) applied for MA benefits and also sought retroactive MA coverage to March 2013. (See Exhibits 1 and A). The Department testified that it sent a medical packet on an unspecified date and the Claimant failed to return the documentation. It should be noted that the Department did not provide a copy of the medical packet request. On July 31, 2013, the Department sent Claimant a Notice of Case Action notifying her that her MA benefits were denied effective June 1, 2013, ongoing, due to her not being aged, blind, disabled, under 21, pregnant, or a parent/caretaker relative of a dependent child, and individual failed to return documentation to complete a disability determination. (See Exhibit 1). The Department testified it was unsure if the medical packet or the Notice of Case Action was sent to the AR.

At the hearing, Claimant's AHR testified that it never received a VCL or an Application Eligibility Notice. (See Hearing Request, Exhibit 1). As such, Claimant's AHR filed a hearing request in which it wanted the Department to process the application. (See Exhibit 1).

Based on the foregoing information and evidence, the Department failed to satisfy its burden of showing that it acted in accordance with Department policy when it improperly processed Claimant's MA application dated June 20, 2013, retroactive to March 2013. Moreover, based upon on the Department's failure to properly process the MA application, it improperly denied the application as well.

First, the AHR provided credible evidence that when it submitted the application; it also provided all proper documentation to show that it was the AR. (See Exhibit A). Because Claimant's AHR properly provided all documentation showing it was the AR, the Department should have sent the AR all the correspondence as it related to the MA application (i.e., VCL or Notice of Case Action). (See BAM 110, pp. 4 and 9).

Second, the evidence presented that the Department failed to send Claimant's AR the medical packet or a Notice of Case Action. Therefore, the Department failed to properly process Claimant's MA application because it did not send any correspondence to the AR. Moreover, the Department failed to present if a medical packet was sent at all. Therefore, the Department will reprocess Claimant's MA application dated June 20, 2013, retroactive to March 2013 in accordance with Department policy and for the above stated reasons. BAM 105, p. 13; BAM 110, pp. 4, 9, and 19; and BAM 115, pp. 15 16, and 23.

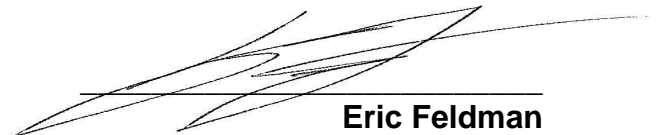
DECISION AND ORDER

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 improperly processed Claimant's MA application dated June 20, 2013 and retroactive to March 2013.

Accordingly, the Department's MA 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 re-registration and reprocessing of Claimant's MA application dated June 20, 2013, retroactive to March 2013, ongoing;
2. Begin issuing supplements to Claimant for any MA benefits she was eligible to receive but did not from March 2013, ongoing; and
3. Begin notifying Claimant and Claimant's AHR in writing of its MA decision in accordance with Department policy.



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

Date Signed: 4/18/2014

Date Mailed: 4/18/2014

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

EF/hw

cc:

