

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

**IN THE MATTER OF:**

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

Reg. No.: 14-001586  
Issue No.: 2001  
Case No.: ██████████  
Hearing Date: June 12, 2014  
County: MACOMB-DISTRICT 12

**ADMINISTRATIVE LAW JUDGE: Jacquelyn A. McClinton**

**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 telephone hearing was held on June 12, 2012, from Detroit, Michigan. Participants on behalf of Claimant included ██████████, Claimant's Authorized Hearing Representative (AHR). Participants on behalf of the Department of Human Services (Department) included ██████████, Eligibility Specialist.

**ISSUE**

Did the Department properly close Claimant's case for Medical Assistance (MA) because she was unable to be located?

**FINDINGS OF FACT**

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

1. Claimant was an ongoing MA recipient.
2. In approximately December 2011, Claimant began residing with her AHR in Detroit, Michigan.
3. In March 2012, the Department received an application for benefits showing that Claimant resided in Macomb County.
4. Claimant's AHR moved to another home in Detroit, Michigan and notified the Department in approximately March 2013 of Claimant's new address.

5. Claimant had been receiving services with the adult services unit of the Department approximately twice per week from July 2013 until the closure of her MA case.
6. On January 14, 2014, the Office of Inspector General (OIG) notified the benefits section of the Department that Claimant no longer resided at the Macomb County address.
7. In January 2014, the only address the benefits section of the Department had on record for Claimant was the Macomb County address.
8. On January 21, 2014, the Department sent Claimant a Notice of Case Action to the Macomb County address notifying her that her MA benefits would end effective March 1, 2013.
9. On May 6, 2014, Claimant filed a Request for Hearing disputing the Department's actions.

### **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 Title XIX of the Social Security Act, 42 USC 1396-1396w-5; 42 USC 1315; the Affordable Care Act of 2010, the collective term for the Patient Protection and Affordable Care Act, Pub. L. No. 111-148, as amended by the Health Care and Education Reconciliation Act of 2010, Pub. L. No. 111-152; and 42 CFR 430.10-.25. The Department (formerly known as the Family Independence Agency) administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.105-.112k.

Additionally, in this case, The Office of Inspector General (OIG) went to Claimant's Macomb County address in January 2014 and discovered that no one resided at that location. The agent with the OIG left a note on the door with contact information for the Department. No one contacted the Department and as a result, the Department closed Claimant's case for MA benefits.

The Department indicated that the last application it received was in March 2012 with the St. Clair Shores address. Claimant's AHR testified that Claimant moved in with her in December 2011 and they were residing in Detroit, Michigan. At that time, Claimant's AHR stated that she made the Department aware of the new address. Claimant's AHR

further indicated she later moved to the current Detroit address and first made Claimant's worker aware of the new Detroit address in approximately March 2013.

Claimant had been receiving MA funded services at the current Detroit address at least since July 2013. Claimant's AHR testified that these services included Department workers coming to the home approximate twice per week. The Department testified that the services Claimant was receiving were through adult services unit and not through the benefits section of the Department. The Department representative that appeared for the hearing indicated that prior to the filing of the hearing request, it had not received any updated address information. The Department verified that both the benefits section and the adult services section are units within the Department. Therefore, it is found that the Department knew that Claimant was no longer residing at the Macomb County address when it closed her case.

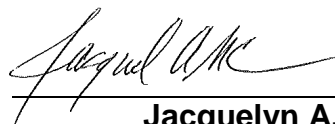
Because Claimant was receiving services from the Department since at least July 2013, the Administrative Law Judge, based on the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, if any, finds that the Department did not act in accordance with policy when it closed Claimant's MA case.

### **DECISION AND ORDER**

Accordingly, the Department's decision is **REVERESED**.

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. Reinstate Claimant's MA benefits; and
2. Issue any supplements Claimant was eligible to receive, if any, but did not receive from March 1, 2014, ongoing.



**Jacquelyn A. McClinton**  
Administrative Law Judge  
for Maura Corrigan, Director  
Department of Human Services

Date Signed: **6/30/2014**

Date Mailed: **6/30/2014**

JAM/cl

**NOTICE OF APPEAL:** A party may appeal this Hearing Decision in the circuit court in the county in which he/she resides, or the circuit court in Ingham County, within 30 days of the receipt date.

A party may request a rehearing or reconsideration of this Hearing Decision from the Michigan Administrative Hearing System (MAHS) within 30 days of the mailing date of this Hearing Decision, or MAHS may order a rehearing or reconsideration on its own motion.

MAHS may grant a party's Request for Rehearing or Reconsideration 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 party requesting a rehearing or reconsideration 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 this Hearing Decision is mailed.

A written request may be faxed or mailed to MAHS. If submitted by fax, 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

CC:

[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]