

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

**IN THE MATTER OF:**

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

Reg. No.: 14-004466  
Issue No(s): 2001  
Case No.: ██████████  
Hearing Date: August 7, 2014  
County: Wayne (15)

**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 August 7, 2014, from Detroit, Michigan. Participants on behalf of Claimant included Claimant. Participants on behalf of the Department of Human Services (Department) included ██████████ Eligibility Specialist.

**ISSUE**

Did the Department properly close Claimant's Medical Assistance (MA) benefits for failure to timely return the Redetermination?

**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 is an ongoing MA recipient.
2. On or about December 1, 2013, the Department sent Claimant a Redetermination form to be completed and returned no later than December 31, 2014.
3. Claimant returned the completed Redetermination prior to the December 31, 2014 due date.
4. On January 3, 2014, the Department sent Claimant a Notice of Case Action notifying her that she had been approved for MA benefits.

5. Shortly after January 3, 2014, Claimant's case was transferred to another worker.
6. On January 18, 2014, following a review of Claimant's file, the Department sent Claimant a Notice of Case Action notifying her that her MA case would be closed for failure to return the Redetermination.
7. On June 4, 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.

As a preliminary matter, Claimant and one of her minor grandchildren were approved for MA benefits on January 3, 2014. On January 18, 2014, the Department sent Claimant a Notice of Case Action notifying her that her MA case would close effective February 1, 2014. Claimant was advised to reapply for benefits. As a result, instead of timely appealing the closure of her MA benefits, she reapplied and was approved for MA on March 18, 2014. However, the March 18, 2014 Notice of Case Action did not address her grandson's MA coverage. Because Claimant received confusing documentation from the period of January through March 2014, it is found that Claimant's June 4, 2014 Request for Hearing is timely regarding MA benefits from February 2014 ongoing.

Additionally, the Department of Human Services must periodically redetermine an individual's eligibility for active programs. The redetermination process includes thorough review of all eligibility factors. BAM 210 (October 2013), pg. 1. On or about December 1, 2013, the Department sent Claimant a Redetermination to be completed and returned by December 31, 2013. Claimant testified that she returned the completed Redetermination during the second or third week of December 2013. Claimant's testimony is supported by the Notice of Case Action that was sent on January 3, 2014 notifying her that her she would receive MA benefits.

Sometime after the January 3, 2014, Claimant received a new case worker. The new case worker reviewed Claimant's file and was unable to locate a completed Redetermination. Because the due date for the Redetermination had passed, Claimant's new worker sent a Notice of Case Action on January 18, 2014 notifying Claimant that her MA case would close effective February 1, 2014. Claimant's new worker acknowledged that Claimant had not been required to submit any documentation between January 3, 2014 when her MA benefits were approved and January 18, 2014 when she received notice that she had been denied MA benefits. It is therefore found that Claimant's MA case was improperly closed by the Department effective February 1, 2014.

Claimant testified that as a result of the closure, she had QMB and AD Care out-of-pocket expenses for both February and March 2014. It is unclear why Claimant would have had out-of-pocket AD Care expenses since the March 18, 2014 Notice of Case Action approved Claimant for AD Care effective March 1, 2014. Prior to the closure, Claimant had been approved for both QMB and AD Care. Likewise, after Claimant reapplied for benefits in March 2014, she was again approved for QMB and AD Care. The Department confirmed that had Claimant's MA case not closed as a result of the January 18, 2014 Notice of Case Action, these expenses would have been paid in February and March 2014.

At the hearing, Claimant expressed concern as to whether her grandson had MA coverage. The January 3, 2014 Notice of Case Action approved Claimant's grandson for MA coverage. The January 18, 2014 Notice of Case Action did not address Claimant's grandson. The Department only provided the first three pages of the March 18, 2014 Notice of Case Action which only denied Claimant's grandson for ALMB coverage for which he would not have been eligible. Because there was no evidence presented at the hearing as to MA coverage ending for Claimant's grandson, he should be currently receiving MA benefits.

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 effective February 1, 2014 for failure to timely return the Redetermination.

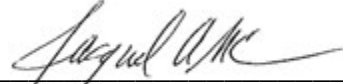
### **DECISION AND ORDER**

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. Reinstate Claimant's MA benefits effective February 1, 2014; and

2. Issue any supplements Claimant was eligible to receive but did not.



**JACQUELYN A. MCCLINTON**  
Administrative Law Judge  
for Maura Corrigan, Director  
Department of Human Services

Date Signed: August 15, 2014

Date Mailed: August 15, 2014

**NOTICE OF APPEAL:** A party may appeal this Hearing Decision in the circuit court in the county in which he/she resides or has its principal place of business in the State, 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

JAM/cl

14-004466/JAM

CC:

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