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

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| 114 | | | | OF. |

Reg. No.: 14-002640
Issue No.: 2001
Case No.:

Hearing Date: September 03,2014

County: Macomb (12-Mt Clemens)

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; 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 September 3, 2014, from Clinton Township, Michigan. Participants on behalf of Claimant included Claimant. Participants on behalf of the Department of Human Services (Department) included

<u>ISSUE</u>

Did the Department properly determine Claimant's medical expenses were too old to be utilized to activate MA coverage for the month of ______?

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's spouse passed away.
- On February 11, 2014, Claimant called the Department regarding his daughter's Medicaid and also to inquire about the medical bills he had received regarding his wife.
- 4. On May 7, 2014, a Quick note was issued by the Department to Claimant advising Claimant the bills for his spouse were submitted too late for the Department to provide coverage.
- 5. On May 13, 2014, Claimant filed a request for hearing.

6. The prehearing conference was not held as Claimant did not want to participate in the prehearing conference as the parties he was told that would participate were not present.

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, Claimant's spouse had an active deductible MA case. Claimant's

| spouse went into the hospital | . Claimant remained hospitalized |
|------------------------------------|--|
| until her death | Claimant contacted the Department on February |
| 11, 2014, and informed the Departn | nent that there were medical expenses for the month |
| of Claimant's spous | se's MA deductible had been reached and activated |
| for the month of | . The only bills remaining were for the month of |
| The Department re | equested that Claimant forward the bills to them so |
| they could be processed. Claimant | s, shortly after being told to provide the |
| bills to the Department, did so. | · · · · · · · · · · · · · · · · · · · |
| note indicating Claimant's medical | he bills until May 7, 2014, when they issued a quick bills were too old for them to activate the month of sited BEM 545 indicating policy required bills to be idered. |
| | |

Per BEM 545 (July 2013), p. 11, a group must report expenses by the last day of the third month following the month in which the group wants MA coverage.

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 acted in accordance with Department policy when it denied Claimant's request to activate MA coverage for the month of Claimant failed to provide the medical bills or inform the Department of the bills until he called the Department on February 11, 2014.

DECISION AND ORDER

Accordingly, the Department's decision is AFFIRMED.

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

Date Signed: 9/22/2014

Date Mailed: 9/23/2014

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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

