

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

IN THE MATTER OF:

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Reg. No.: 14-005920
Issue No.: 2004
Case No.: ██████████
Hearing Date: October 1, 2014
County: Wayne (17-Greenfield/Joy)

ADMINISTRATIVE LAW JUDGE: Alice 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, a 3-way telephone hearing was held on October 1, 2014, from Detroit, Michigan. Participants on behalf of Claimant included ██████████

████████████████████ Participants on behalf of the Department of Human Services (Department) included ██████████
████████████████████

ISSUE

Did the Department properly process Claimant's August 23, 2012, application for Medical Assistance (MA) benefits?

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 August 23, 2012, Claimant filed an MA application, with request for retroactive coverage to June 1, 2012.
2. In March 2013, the Department denied Claimant's application, and Claimant's AHR requested a hearing.
3. On February 11, 2014, Administrative Law Judge (ALJ) Robert Chavez issued a Hearing Decision reversing the Department and ordering it to reregister the application retroactive to August 23, 2012, and forward the completed medical packet to MRT for a disability determination.

4. On June 9, 2014, the AHR filed a request for hearing alleging that the Department failed to reprocess Claimant's MA application in accordance with ALJ Chavez's Hearing Decision.

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, the Department is required to implement a decision and order within 10 calendar days of the mailing date on the Hearing Decision. BAM 600 (July 2013), p. 38; BAM 600 (July 2014), p. 40.

In this case, in his February 11, 2014, Hearing Decision, the ALJ reversed the Department and ordered it to reregister Claimant's application "retroactive to August 23, 2012 and forward the completed medical packet to MRT for a disability determination." At the hearing, both parties acknowledged that Claimant's application was dated August 23, 2012, and that she had filed a request for retroactive coverage to June 1, 2012. At the hearing, the Department acknowledged that a completed medical packet had not been forwarded to MRT and was unable to verify whether a medical packet, or any request for medical documents, was sent to Claimant and the AHR for completion. The Department admitted that it had failed to reprocess the application in accordance with the ALJ's decision.

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 Department policy when it failed to reregister and reprocess Claimant's MA application.

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. Reregister and process Claimant's August 26, 2012, application with request for retroactive coverage to June 1, 2012;
2. Provide Claimant with MA coverage she is eligible to receive, if any, from June 1, 2012, ongoing; and
3. Notify Claimant and the AHR in writing of its decision in a DHS-1605, Notice of Case Action.



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

Date Signed: **10/2/2014**

Date Mailed: **10/6/2014**

ACE / pf

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]
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