

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

**IN THE MATTER OF:**



Reg. No.: 14-009884  
Issue No.: 2001  
Case No.: [REDACTED]  
Hearing Date: October 20, 2014  
County: WAYNE-35 (REDFORD)

**ADMINISTRATIVE LAW JUDGE: Lynn Ferris**

**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 October 20, 2014 from Detroit, Michigan. Participants on behalf of Claimant included the Claimant. Participants on behalf of the Department of Human Services (Department) included [REDACTED] Hearing Facilitator.

**ISSUE**

Did the Department properly process the Claimant's redetermination and/or application?

**FINDINGS OF FACT**

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

1. The Claimant timely completed her redetermination in July 2014.
2. The Claimant reapplied for Medical Assistance on August 1, 2014.
3. At the hearing, it could not be determined whether the Department ever processed the Claimant's redetermination and/or August 1, 2014 application.
4. The Claimant requested a hearing on August 12, 2014.

**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, it was very difficult to determine the facts, as the Department on the one hand alleged that the Claimant was approved for medical assistance on August 1, 2014, but was unable to provide updated information indicating the current status of the Claimant's eligibility for medical assistance. The Department was given an opportunity to provide documentation indicating the current status of medical benefits but was unable to do so. The Claimant credibly testified that she completed her redetermination in a timely manner. The Department did not rebut this testimony. The Claimant also indicated that she reapplied on August 1, 2014, but was told her case was closed. Exhibit 1. The Department did not provide any notices of case action so it could not be determined whether the August application for medical assistance was ever processed. Overall, the Department did not meet its burden of proof and did not demonstrate sufficient facts to demonstrate that it complied with Department policy with regard to processing redeterminations and applications, nor did it demonstrate that it complied generally with the required standard of promptness. BAM 115, (7/1/14), 23 and 24.

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 so it could be determined whether or not the Claimant's August 1, 2014 application for medical assistance and redetermination, completed in July 2014, was processed in accordance with Department policy.

### **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. The Department shall determine whether the July 2014 redetermination was processed and if not, shall process the redetermination and determine ongoing eligibility. The Department shall notify the Claimant in writing with regard to its determination.
2. The Department shall also, if necessary, reregister and process the August 1, 2014 application for medical assistance and make a determination regarding the Claimant's eligibility for medical assistance. The Department shall provide written notice to the Claimant of its determination.



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**Lynn Ferris**  
Administrative Law Judge  
for Maura Corrigan, Director  
Department of Human Services

Date Signed: **10/22/2014**  
Date Mailed: **10/22/2014**

LMF / tm

**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:

