

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

IN THE MATTER OF:

██████████
██████████
██████████

Reg. No.: 14-000977
Issue No.: 2004
Case No.: ██████████
Hearing Date: May 29, 2014
County: WAYNE-DISTRICT 17

ADMINISTRATIVE LAW JUDGE: Eric Feldman

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 May 29, 2014, from Detroit, Michigan. Participants on behalf of Claimant included Claimant's Authorized Hearing Representative (AHR), ██████████. The Department of Human Services (Department) was not present for the hearing.

ISSUE

Whether the Department properly processed Claimant's Medical Assistance (MA) application and retroactive 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. On January 23, 2014, Claimant's authorized representative (AR) (who is also the AHR) applied for MA benefits on behalf of the Claimant, retroactive to October 2013. See Exhibit A, pp. 1-10.
2. Claimant's AHR did not receive a response to the application from the Department.
3. On April 10, 2014, Claimant's AHR filed a hearing request, protesting the Department's failure to process the MA application. See Exhibit A, p. 1.

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, the Michigan Administrative Hearing System (MAHS) made multiple attempts to contact the Department in order for the Department to participate in the administrative hearing. However, the Department failed to contact the MAHS in regards to the hearing. Thus, the hearing proceeded with only Claimant's AHR present.

Any person, regardless of age, or their authorized representative (AR) may apply for assistance. BAM 110 (January 2014), p. 4. The Department must register a signed application or filing form, with the minimum information, within one workday for all requested programs. BAM 110, p. 19.

The standard of promptness (SOP) begins the date the department receives an application/filing form, with minimum required information. BAM 115 (January 2014), p. 14. For MA applications, the Department certifies the program approval or denial of the application within 45 days. BAM 115, p. 15. However, there are exceptions to these benefits programs for processing times, which are described as follows: 90 days for MA categories in which disability is an eligibility factor. BAM 115, p. 15. The SOP can be extended 60 days from the date of deferral by the Medical Review Team. BAM 115, p. 15.

Moreover, if the group is ineligible or refuses to cooperate in the application process, the Department must certify the denial within the standard of promptness and also send a DHS-1605, Client Notice, or the DHS-1150, Application Eligibility Notice, with the denial reason(s). BAM 115, p. 22. If approved, the Department sends the DHS-1605 detailing the approval at certification of program opening. BAM 115, p. 23.

In this case, on January 23, 2014, Claimant's AHR testified that it applied for MA benefits on behalf of the Claimant and sought retroactive coverage to October 2013. See Exhibit A, pp. 1-10. Claimant's AHR provided proof that the application was sent via shipping to the DHS office on January 22, 2014 and received the following day. See Exhibit A, pp. 6-10. This package included the MA application, Retroactive Medicaid

Application, and authorization for the AHR to represent Claimant. See Exhibit A, p. 8. Claimant's AHR testified that he never received a response to the application from the Department.

Even though the Department was not present for the hearing, the Hearing Summary indicated that an MA application was received on February 3, 2014. See Exhibit 1, p. 1. Moreover, the Department's evidence indicated that a Verification Checklist (VCL) with accompanying documents was sent on February 6, 2014, with a due date of February 18, 2014. See Exhibit 1, pp. 1-8. Claimant's AHR testified that it did not receive this documentation. It should also be noted that the documents were only addressed to the Claimant and not the AR at the time. See Exhibit 1, pp. 1-8.

Additionally, the Hearing Summary indicated that the verification documents were not returned and the application was denied on or around March 6, 2014. See Exhibit 1, pp. 1 and 10. Again, Claimant's AHR testified that he did not receive any denial notice and also noted that he believed the Department was referencing a different application.

Based on the foregoing information and evidence, the Department failed to process the MA application dated January 23, 2014, retroactive to October 2013. The Department was unable to rebut Claimant's AHR's evidence as it was not present for the hearing. Moreover, the evidence presented that Claimant's AHR sent an application on January 23, 2014 and the Department failed to process it. See Exhibit A, pp. 1-10. Additionally, the Department appeared to process an MA application dated February 3, 2014 and subsequently sent verification documentation and a denial letter. See Exhibit 1, pp. 1-10. Nevertheless, this correspondence was only sent to the Claimant and did not indicate whether it was sent to the AR. See Exhibit 1, pp. 1-10. As such, the Department failed to process Claimant's MA application and retroactive application in accordance with Department policy. See BAM 110, pp. 4 and 19 and BAM 115, pp. 14-15 and 22-23. The Department will process the MA application dated January 23, 2014, retroactive to October 2013, in accordance with Department policy.


DECISION AND ORDER

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 process the MA application dated January 23, 2014, retroactive to October 2013.

Accordingly, the Department's MA 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. Register and initiate processing of Claimant's MA application dated January 23, 2014, retroactive to October 2013;
2. Begin issuing supplements to Claimant for any MA benefits he was eligible to receive but did not from October 2013, ongoing; and
3. Notify Claimant and Claimant's AHR in writing of its decision in accordance with Department policy.



Eric Feldman
Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: **6/9/2014**

Date Mailed: **6/9/2014**

EJF/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]