

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

**IN THE MATTER OF:**

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

Reg. No.: 14-002286  
Issue No.: 2001  
Case No.: ██████████  
Hearing Date: June 26, 2014  
County: Wayne (55-Hamtramck)

**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 June 26, 2014, from Hamtramck, Michigan. Participants on behalf of Claimant included Claimant, ██████████

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

**ISSUE**

Did the Department properly process Claimant's request for Medical Assistance (MA)?

**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 September 26, 2013, an application for MA and retro MA was submitted on behalf of Claimant.
2. On April 4, 2014, Claimant was approved Adult Medical Program (AMP) benefits for August 2013 and, beginning September 1, 2013, he was approved MA benefits.
3. On May 2, 2014, a hearing request was filed indicating a desire for the Department to process the retro MA benefits for the month of August 2013.
4. On May 15, 2014, the Department indicated on the hearing summary they had initiated a help desk ticket to resolve the issue.

**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, an application for MA benefits was submitted on September 26, 2013, with a request for retro MA back to August 2013. The Department activated AMP for the month of August 2013 and activated ongoing MA benefits as of September 1, 2013. Claimant's representative filed a hearing request to prompt the Department to activate MA instead of AMP for the month of August 2013. The Department testified a help desk ticket request has been submitted to have the MA coverage put on for August 2013. The Department is not disputing activating MA coverage. The Department agreed to provide the help desk ticket information to Claimant's representative and follow up on the status of the help ticket. Claimant's representative is simply concerned the coverage would not be activated as requested.

While the Department has taken steps to activate the requested coverage, this Administrative Law Judge agrees with Claimant's representative regarding the time that it has taken to process the request. As noted above, the Department does not dispute Claimant's eligibility for MA beginning August 2013. The Department simply has not been able to have the coverage activated.


### **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. Follow up on the status of the help desk ticket;
2. Activate MA coverage as indicated during hearing for the month of August 2013.

3. Notify Claimant and his representative in writing once the coverage is activated.

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

Date Signed: **6/30/2014**

Date Mailed: **6/30/2014**

JWO / 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]  
[REDACTED]  
[REDACTED]