

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

IN THE MATTER OF:

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

Reg. No.: 14-007753
Issue No.: 2001; 3000
Case No.: ██████████
Hearing Date: August 27, 2014
County: Wayne-District 19

ADMINISTRATIVE LAW JUDGE: Alice C. 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 telephone hearing was held on August 27, 2014, from Detroit, Michigan. Participants on behalf of Claimant included Claimant. Participants on behalf of the Department of Human Services (Department) included ██████████ ██████████, Assistance Payment Worker.

ISSUE

Did the Department properly provide Claimant with Medical Assistance (MA) coverage she is eligible to receive?

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 applied for MA in March or April 2014.
2. On July 28, 2014, Claimant filed a request for hearing concerning the denial of MA benefits and the closure of her Food Assistance Program (FAP) case.

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, it is noted that Claimant requested a hearing concerning her FAP case and her MA denial. At the hearing, Claimant testified that her FAP issue had been resolved to her satisfaction and she wished to withdraw her hearing request concerning that issue. Accordingly, Claimant's hearing with respect to the FAP issue is dismissed. The hearing proceeded to address Claimant's MA issue.

Claimant was concerned about the MA coverage she was receiving and testified that, because the coverage provided was inadequate, she had not incurred any medical expenses and was concerned about her ongoing MA coverage. Accordingly, her ongoing MA coverage from the July 28, 2014 date of her hearing request is considered.

The Department had not prepared for the MA issue but testified that Claimant had initially received MA coverage under the Plan First program, then the Healthy Michigan Plan, and then was switched back to Plan First. However, an eligibility summary showed that Claimant had received MA coverage under the Plan First program beginning January 1, 2014 and this coverage had continued, uninterrupted, since then but was due to close on September 1, 2014. Claimant provided an August 1, 2014 Health Care Coverage Determination Notice that showed that she was denied ongoing MA coverage effective September 1, 2014 because she was not under 21 or over 65, pregnant, the caretaker of a minor child, blind or disabled.

Plan First is a health coverage program operated by the Department of Community Health that provides family planning services to women who would not have coverage for these services and do not have other comprehensive health insurance. BEM 124 (July 2014), p. 1. Under federal law, a client who qualifies for more than one MA program is entitled under federal law to the most beneficial category, which is defined as the category that results in eligibility or the least amount of excess income. BEM 105 (January 2014), p. 2. For MAGI-related MA categories, the Department must consider a client's eligibility for MA coverage under parent/caretaker programs before Plan First eligibility. BEM 105, p. 3.

The evidence in this case established that Claimant had a minor child in the home. Therefore, before considering her eligibility for MA under the Plan First program, the Department had to process her eligibility for MA under the parent/caretaker program. There was no evidence presented in this case that the Department did so. In the absence of such evidence, the Department has failed to satisfy its burden of showing

that it acted in accordance with Department policy when it provided Claimant with MA coverage under the Plan First program.

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 provided Claimant with MA coverage under the Plan First program.

DECISION AND ORDER

Claimant's July 28, 2014 hearing request concerning her FAP issue is DISMISSED.

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. Reprocess Claimant's MA eligibility for July 2014 ongoing;
2. Provide Claimant with the MA coverage she is eligible to receive from July 2014 ongoing; and
3. Notify Claimant in writing of its decision.



Alice C. Elkin

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

Date Signed: **8/29/2014**

Date Mailed: **9/03/2014**

ACE / tlf

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]
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