

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

IN THE MATTER OF:



Reg. No.: 14-012851
Issue No.: 2004, 2002
Case No.: [REDACTED]
Hearing Date: December 18, 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 three-way hearing was held on December 18, 2014, from Detroit, Michigan. Participants on behalf of Claimant included [REDACTED], the Claimant's Authorized Hearing Representative (AHR) The Claimant did not appear. Participants on behalf of the Department of Human Services (Department) included [REDACTED], Hearing Facilitator.

ISSUE

Did the Department properly process the Claimant's Application for Medical Assistance (MA-P) based upon disability?

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 applied for medical assistance on June 12, 2014 based on disability and retroactive coverage to March 2014.
2. On July 9, 2014, the Department issued a Health Care Coverage Determination Notice denying the Claimant's Application for Medical assistance for the reasons: "you are not under 21, pregnant, or a caretaker of a minor child in your home. You are not over 65 (aged), blind, or disabled." Exhibit , p.3-4.
3. The Department sent a Verification Checklist to Claimant/Claimant's AHR on July 9, 2014 requesting verification of income and assets, medical expenses and

pensions/retirement information with a due date of July 21, 2014 Exhibit 1 (15-16). The Claimant's AHR responded to the verifications and requested a first extension. Claimant Exhibit A, p.3. The Claimant's AHR provided verifications with the request for extension.

4. The Claimant's AHR requested a hearing which was timely on September 25, 2014, indicating it would appeal the July 9, 2014 Medical Review Team's denial.

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, at the hearing, it was apparent that the Claimant's AHR had responded to the verification checklist in a timely manner and had requested an extension on two occasions. Claimant Exhibit A. Apparently, the Department never responded to, or acknowledged the receipt of the verifications. The Department's Hearing Summary indicates that the Claimant's Application for Medical Assistance was denied due to failure to verify information. No notice of case action confirming Application denial for failure to verify information was produced. The only notice of denial was the Healthcare Determination Notice dated July 9, 2014, indicating the Application had been denied due to failure to establish disability.

Additionally, no proofs were provided by the Department that the Application filed by the Claimant was ever processed to the Medical Review Team. The only case action provided by the Department was the Health Determination Notice issued on July 9, 2014, the same day the Department issued the Verification Check List. It appears, that perhaps inadvertently due to a glitch in the Bridges system, that the Department incorrectly denied the Application based upon disability, when in fact the Application had not been processed to the MRT and the verification due date had not expired. BAM 130 (7/1/14) p.3.

In accordance with BAM 815, the Application for MA-P may only be denied by MRT for lack of medical evidence. BAM 815 (7/1/13). It did appear that the Department denied the Application for failure of the Claimant to establish disability and that no MRT

submission was ever made. Also contrary to the Hearing Summary, there was no evidence that the Application was denied for a different reason, failure to verify information.

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 denied Claimant's Application for Medical Assistance based on disability without processing the Application and sending it to the Medical Review Team. The Department also failed to satisfy its burden of showing that it acted in accordance with Department policy when it claimed in its Hearing Summary that the Claimant/AHR failed to verify information as the reason for the Medical Assistance Application denial, as no such denial of current based upon the facts presented.

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 re-register the June 12, 2014 Application for Medical Assistance based upon MA-P and retro Application for March 2014 and process the Application to determine eligibility.
2. The Department shall provide notice of its determination to the Claimant and Claimant's AHR, L&S Associates.



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

Date Signed: **12/22/2014**

Date Mailed: **12/22/2014**

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 48909-8139

cc:

