

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

**IN THE MATTER OF:**

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

Reg. No.: 14-019236  
Issue No.: 2001  
Case No.: ██████████  
Hearing Date: March 11, 2015  
County: Wayne-District 15

**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 3-way telephone hearing was held on March 11, 2015, from Detroit, Michigan. Participants on behalf of Claimant included ██████████, appeals analyst for ██████████, Claimant's authorized hearing representative (AHR). Participants on behalf of the Department of Human Services (Department) included ██████████, Assistance Payment Worker.

**ISSUE**

Did the Department properly process Claimant's April 24, 2014 application for Medical Assistance (MA) benefits?

**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 April 25, 2014, an application for MA benefits was submitted on Claimant's behalf.
2. On April 28, 2014, the Department sent Claimant a Health Care Coverage Supplemental Questionnaire requesting additional information concerning her MA eligibility.
3. Claimant did not respond to the Supplemental Questionnaire.

4. On May 10, 2014, the Department sent Claimant a Health Care Coverage Determination Notice denying her application on the basis that she failed to return the supplemental questionnaire.
5. On December 17, 2014, the AHR filed a request for hearing alleging that the Department failed to properly process Claimant's April 24, 2014 MA application.

### **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 the AHR filed a request for hearing on December 17, 2014; more than 90 days after the Department sent a notice of case action to Claimant denying her application. However, the AHR alleges that the Department failed to properly process the application because it did not send any correspondence, including a notice of case action denying the application, to the AHR. Because the AHR's request for hearing concerns a failure to process and it is not tied to receipt of a written notice sent to the AHR, the 90-day timeliness issue is not applicable. See BAM 600 (April 2015), p. 6.

In this case, the AHR testified that it submitted the April 25, 2014 MA application on Claimant's behalf, listing itself as Claimant's authorized representative. The Department could not verify that the AHR was identified as Claimant's authorized representative in the application but did not present any documentation to counter the AHR's testimony despite being aware from the AHR's hearing request that it asserted that it was Claimant's authorized representative. In the absence of any evidence to the contrary, it is found that the AHR was Claimant's authorized representative regarding the application.

The authorized representative assumes all the responsibilities of a client. BAM 110 (July 2014), p. 9. Accordingly, the Department should send all correspondence concerning the client's case to the authorized representative. In this case, the Department confirmed that the April 28, 2014 Health Care Coverage Supplemental

Questionnaire and the May 10, 2014 Notice of Case Action were sent only to Claimant. Because the Department did not send the Health Care Coverage Supplemental Questionnaire and Notice of Case Action denying Claimant's MA application to the AHR, acting as authorized representative, the Department did not act in accordance with Department policy when it processed Claimant's MA case.

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 processed Claimant's April 25, 2014 MA application.

### **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. Reregister Claimant's April 25, 2014 MA application, and any request for retroactive coverage;
2. Reprocess the application; and
3. Notify Claimant and the AHR in writing of its decision.



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**Alice C. Elkin**  
Administrative Law Judge  
for Nick Lyon, Interim Director  
Department of Human Services

Date Signed: **3/13/2015**

Date Mailed: **3/13/2015**

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.

