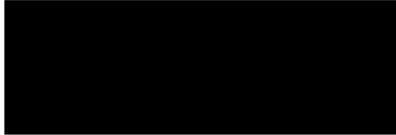


**STATE OF MICHIGAN
MICHIGAN ADMINISTRATIVE HEARING SYSTEM
ADMINISTRATIVE HEARINGS FOR THE
DEPARTMENT OF HUMAN SERVICES**

IN THE MATTER OF:



Reg. No.: 14-012549
Issue No.: 2001
Case No.: [REDACTED]
Hearing Date: December 04, 2014
County: Wayne-District 18

ADMINISTRATIVE LAW JUDGE: Zainab Baydoun

HEARING DECISION

notice, a three way telephone hearing was held on December 4, 2014, from Detroit, Michigan. Participants on behalf of Claimant included Claimant; [REDACTED], Claimant's Authorized Hearing Representative (AHR) from [REDACTED] (L&S). [REDACTED], Eligibility Specialist/Hearings Facilitator.

ISSUE

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

FINDINGS OF FACT

evidence on the whole record, finds as material fact:

1. Claimant submitted an application for MA benefits on April 16, 2014, on which she did not allege that she was disabled. (Exhibit 1)
2. On April 18, 2014, the Department sent Claimant a Health Care Coverage Determination Notice informing her that she was approved for MA benefits for April 1, 2014, ongoing under the Healthy Michigan Plan (HMP). (Exhibits 2 and 3)
3. On May 15, 2014, L&S submitted an application for MA benefits on behalf of Claimant, retroactive to February 2014, alleging that she had a physical, mental, or emotional health condition that causes limitations. (Exhibits 4 and 5)

4. On June 4, 2014, the Department sent Claimant and L&S a Health Care Coverage Determination Notice informing them that Claimant's Retroactive MA application had been denied for February 1, 2014 to March 31, 2014, on the basis that the value of the countable assets was higher than allowed for the program. (Exhibit 8)
5. On August 29, 2014, L&S submitted a hearing request on behalf of Claimant disputing the denial of the Retroactive MA application and the Department's failure to properly process Claimant's May 15, 2014, MA application.

CONCLUSIONS OF LAW

(BEM), Department of Human Services Reference Tables Manual (RFT), and Department of Human Services Emergency Relief Manual (ERM).

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, 111-152; and 42 CFR 430.10-.25. The Department (formerly known as the Family 400.10, and MCL 400.105-.112k.

respect to her May 15, 2014, application for MA benefits, retroactive to February 2014. At the hearing, the Department testified that Claimant's retroactive application was denied on the basis that her countable assets exceeded the limit for MA purposes. The Department presented a MA Assets Summary showing that Claimant had liquid assets

joint owner. (Exhibit 6 and Exhibit 7).

The Department further testified that Claimant's application was not forwarded to the

Department withdrew the application and Claimant remained eligible for MA benefits under the HMP.

Additionally, assets must be considered in determining eligibility for MA. BEM 400 (February 2014), p. 4. An asset must be available to be countable. Available means t
400, pp.8-9. Asset eligibility exists when the asset group's countable assets are less than, or equal to, the applicable asset limit at least one day during the month being

tested. BEM 400, p. 3. For disability related MA purposes, the asset limit is \$2,000. BEM 400, p. 7. Assets are defined as cash, any other personal property and real property. BEM 400, p.1. Money in checking, savings, and money market accounts are counted as cash and applied towards the MA asset limit. BEM 400, pp.13-15.

owner's consent, and the other owner is not in the asset group, and the other owner refuses consent. BEM 400, p. 10. For joint cash assets, the Department is to count the

owner's share is the amount they own. BEM 400, p. 11.

At the hearing, Claimant's AHR argued that although Claimant's name is listed on the bank accounts at issue, the assets are unavailable to her as Claimant's father is the primary account holder and that all of the money in the accounts belongs to Claimant's father. Claimant and her father both credibly testified that Claimant was added to her

died and that the money in the accounts is not Claimant's. A review of the bank account

claimed a different ownership of the assets, the Department should have allowed Claimant to verify her share of the amount in the bank accounts and used that information to determine the value of Claimant's countable assets for MA purposes. BEM 400, pp. 11-15.

Claimant's AHR also raised additional concerns regarding the Department's failure to properly process Claimant's MA application, as the Department did not send the

that took place between Claimant and a Department case worker. Claimant stated that

a client or authorized representative may withdraw an application at any time before it is

represent them before the client may withdraw the application. BAM 110 (January

Claimant withdrew her application. Therefore, the Department failed to establish that it application.

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 Retroactive MA application and forward to the MRT for a disability determination.

DECISION AND ORDER

Accordingly, the Department's decision is **REVERSED**.

HEARING DECISION, WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:

1. Register and process Claimant's May 15, 2014, application for MA, retroactive to February 2014, to determine Claimant's eligibility for MA under the most beneficial category;
2. Issue supplements to Claimant for any MA coverage that she was entitled to receive but did not from February 2014, ongoing, and
3. Notify Claimant and L&S of its decision in writing.



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

Date Signed: **12/23/2014**

Date Mailed: **12/23/2014**

ZB / tlf

NOTICE OF APPEAL: A party may appeal this Hearing Decision in the circuit court in of the receipt date.

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.

A request must be *received* in MAHS within 30 days of the date this Hearing Decision is mailed.

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:

