

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

IN THE MATTER OF:

[REDACTED]

Reg. No.: 14-011783
Issue No.: MEDICAID - ELIGIBILITY
Case No.: [REDACTED]
Hearing Date: December 04, 2014
County: JACKSON

ADMINISTRATIVE LAW JUDGE: Colleen Lack

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 December 4, 2014, from Lansing, Michigan. Participants on behalf of Claimant included [REDACTED], Authorized Hearing Representative. Participants on behalf of the Department of Human Services (Department) included [REDACTED], Family Independence Manager, and [REDACTED] Eligibility Specialist.

ISSUE

Did the Department properly process Claimant's April 8, 2014, request for retroactive Medicaid (MA-P) to his Supplemental Security Income (SSI) approval?

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 was approved for SSI beginning in October 2011.
2. On April 8, 2014, the Department received a request for retroactive MA-P to Claimant's SSI approval for the month of August 2011, from Claimant's Authorized Representative (AR).
3. The Department did not process the April 8, 2014, request for retroactive MA-P to the SSI approval and no written determination notice was issued.
4. On September 10, 2014, Claimant's request for hearing was received.

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.

Ongoing MA eligibility begins the first day of the month of SSI entitlement. Some clients also qualify for retroactive (retro) MA coverage for up to three calendar months prior to SSI entitlement. BEM 150, 1-2-2014, p 1. See also BAM 115, 1-1-2014, p. 11. Further, no DCH-1426, Application for Health Coverage & Help Paying Costs, is required for SSI recipients. BAM 115 p. 10. A separate determination of eligibility must be made for each of the three retro months. BAM 115, p. 13. To be eligible for a retro MA month, the person must meet all financial and non-financial factors in that month and have unpaid medical expense incurred during the month or have been entitled to Medicare Part A. BAM 115, p. 13.

The local Department office has a responsibility to determine eligibility and benefit amounts for all requested programs. BAM 105, 4-1-2014, p. 15.

In this case, Claimant was approved for SSI beginning in October 2011, the date of her SSI application. On April 8, 2014, Claimant's AR submitted a request for retro MA-P to Claimant's SSI approval, for the month August 2011.

There is no evidence indicating the Department processed the April 8, 2014, request for retro MA-P to Claimant's SSI approval and issued a written determination notice.

The Department noted that a December 3, 2013, hearing request was dismissed for lack of jurisdiction because that hearing request was not timely filed. However, the submitted copy of the documents for the December 3, 2013, hearing request show that hearing request related to a May 1, 2013, request for MA coverage that was denied on July 8, 2013. The action at issue for this appeal was the April 8, 2014, request for MA coverage. Therefore, this appeal is for a separate request for MA coverage and is not the same as the dismissed December 3, 2013, hearing request.

The Department should have processed the April 8, 2014 request for retro MA-P to Claimant's SSI approval for the month of August 2011 making an eligibility determination for each requested retro month.

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 failed to satisfy its burden of showing that it acted in accordance with Department policy when it failed to process the April 8, 2014, request for retro MA-P coverage to the SSI approval.

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. Process the April 8, 2014, request for retroactive MA-P to Claimant's SSI approval for the month of August 2011, in accordance with Department policy.
2. Issue written notice of the determination in accordance with Department policy.
3. Supplement for lost benefits (if any) that Claimant was entitled to receive, if otherwise eligible and qualified in accordance with Department policy.



Colleen Lack
Administrative Law Judge
for Nick Lyon, Interim Director
Department of Human Services

Date Signed: **2/13/2015**

Date Mailed: **2/13/2015**

CL/hj

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:

