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

IN THE MATTER OF:



Reg. No.: 14-015409

Issue No.: 2004 Case No.:

Hearing Date: February 04, 2015 County: February 04, 2015 Genesee-District 2

ADMINISTRATIVE LAW JUDGE: Kevin Scully

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, telephone hearing was held on February 04, 2015, from Lansing, Michigan. Participants on behalf of Claimant included her authorized hearings representative of Participants on behalf of the Department of Human Services (Department) included as Hearing Facilitator.

<u>ISSUE</u>

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

FINDINGS OF FACT

The Administrative Law Judge, based on the competent, material, and substantial evidence on the whole record, finds as material fact:

- On September 28, 2012, the Claimant applied for Medical Assistance (MA) and requested retroactive benefits.
- 2. On January 23, 2013, the Claimant's application was denied.
- 3. On March 20, 2014, the Department reinstated the Claimant's application for Medical Assistance (MA).
- 4. On October 24, 2014, the Department received the Claimant's request for a hearing protesting the Department's failure to process the application for benefits within a reasonable standard of promptness.

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.

Clients have the right to contest a department decision affecting eligibility or benefit levels whenever it is believed that the decision is incorrect. The Department will provide an administrative hearing to review the decision and determine the appropriateness. The Michigan Administrative Hearing System (MAHS) may grant a hearing for any of the following:

MAHS may grant a hearing about any of the following:

- Denial of an application and/or supplemental payments.
- Reduction in the amount of program benefits or service.
- Suspension or termination of program benefits or service.
- Restrictions under which benefits or services are provided.
- Delay of any action beyond standards of promptness.
- For FAP only, the current level of benefits or denial of expedited service.
 Department of Human Services Bridges Administrative Manual (BAM) 600 (March 1, 2014), p 4.

An adequate notice is a written notice sent to the client at the same time an action takes effect. Adequate notice is given when the Department approved or denies an application for benefits. Department of Human Services Bridges Administrative Manual (BAM) 220 (October 1, 2014), p 2.

On September 28, 2013, the Claimant applied for Medical Assistance (MA) with retroactive benefits. The Department denied this application on January 23, 2013, but reinstated the application on March 20, 2014. The Department did not dispute that the application was reinstated. The Department later determined that there was no basis for the reinstatement and closed the case without approving or denying benefits.

This Administrative Law Judge finds that the Department failed to give the Claimant and her representative adequate notice of the closure of her application for Medical Assistance (MA) that was reinstated March 20, 2014.

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 the Claimant's application for Medical Assistance (MA).

DECISION AND ORDER

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

Administrative Law Judge for Nick Lyon, Acting DHS Director Department of Human Services

Date Signed: 2/13/2015

Date Mailed: 2/13/2015

KS/las

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

