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

IN THE MATTER OF:



Reg. No.: 14-016168

Issue No.: 2001

Case No.:

Hearing Date:

February 10, 2015

County: INGHAM

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 three way telephone hearing was held on February 10, 2015, from Lansing, Michigan.

Participants on behalf of Claimant included

Authorized Hearing Representative (AHR). Participants on behalf of the Department of Human Services (Department) included

Specialist.

<u>ISSUE</u>

Did the Department properly determine Claimant's eligibility 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 November 18, 2013, Claimant applied for Medicaid (MA-P) and retroactive MA-P.
- 2. MA-P was active for Claimant from November 1, 2013, through May 31, 2014.
- 3. The request for retroactive MA-P to August 2013 was not processed.
- 4. On October 28, 2014, a hearing request was filed on Claimant's behalf stating there had been no response from the Department regarding the status of the application.
- 5. The Department stated they will be putting on the retroactive MA-P coverage for August 2013.

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.

The local Department office has a responsibility to determine eligibility and benefit amounts for all requested programs. BAM 105, 7-1-2013, p. 13.

The Department is to notify the client in writing of positive and negative actions by generating the appropriate notice of case action. BAM 220, 7-1-2013, p. 1.

In this case, there was no evidence that the Department issued written notice of the MA eligibility determination for Claimant's November 18, 2013, application for MA-P and retroactive MA-P.

The Hearing Request states Claimant was found disabled by the Social Security Administration with an onset date of May 26, 2012.

The Eligibility Specialist testified that MA-P was active for Claimant from November 1, 2013 through May 31, 2014. It appears that the Department never processed the request for retroactive MA-P to August 2013. The Eligibility Specialist stated that the Department would be putting on the requested retroactive MA-P coverage for August 2013.

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 determined Claimant's eligibility for MA-P.

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. Determine Claimant's eligibility for MA retroactive to August 2013, in accordance with Department policy.
- 2. Issue written notice of the determination in accordance with Department policy.

Colleen Lack

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

Colleen Feed

Date Signed: 3/3/2015

Date Mailed: 3/3/2015

CL/jaf

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 <u>MAY</u> order a rehearing or reconsideration on its own motion.

MAHS <u>MAY</u> 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

