

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

IN THE MATTER OF:

[REDACTED]

MAHS Reg. No.: 15-015231
Issue No.: 2001
Agency Case No.: [REDACTED]
Hearing Date: October 21, 2015
County: Wayne (31) Grandmont

ADMINISTRATIVE LAW JUDGE: Lynn M. Ferris

HEARING DECISION

Following Petitioner'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; and Mich Admin Code, R 792.11002. After due notice, a telephone hearing was held on October 21, 2015, from Detroit, Michigan. The Petitioner was represented by the Petitioner, [REDACTED]. The Department of Health and Human Services (Department) was represented by [REDACTED], Family Independence Specialist.

ISSUE

Did the Department properly close the Petitioner's Medical Assistance (MA) case?

FINDINGS OF FACT

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

1. The Petitioner was an ongoing recipient of MA subject to a deductible.
2. The Department sent the Petitioner a Health Care Coverage Determination Notice closing his MA case because the Petitioner had not met the deductible in at least one of the last three months. Exhibit 2. The Notice was sent to an old address on [REDACTED] in [REDACTED], Michigan, but was received by the Petitioner who filed a timely hearing request after he received it. At the time of the Notice, the Petitioner was living on [REDACTED] in [REDACTED] which is his now current address.
3. The Petitioner had moved in March 2015 to his current address on [REDACTED] in [REDACTED] and had filed a change of address with the Department. The Department had no record of the [REDACTED] change of address.

4. The Department had sent the Petitioner a redetermination on July 29, 2015, to the [REDACTED] address. Even though sent to the wrong address, the Petitioner completed and filed the redetermination with the Department.
5. The Department sent the Petitioner a Health Care Coverage Determination Notice on January 15, 2015, which was sent to the Petitioner's then correct address on [REDACTED] in [REDACTED]. This Notice advised the Petitioner that he was subject to a MA deductible and had the necessary forms to file medical expenses with the Department.
6. The Petitioner requested a timely hearing on August 12, 2015, protesting the Department's action closing the MA case.

CONCLUSIONS OF LAW

Department policies are contained in the Department of Health and Human Services Bridges Administrative Manual (BAM), Department of Health and Human Services Bridges Eligibility Manual (BEM), Department of Health and Human Services Reference Tables Manual (RFT), and Department of Health and Human Services Emergency Relief Manual (ERM).

The Family Independence Program (FIP) was established pursuant to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Pub. L. No. 104-193, and 42 USC 601 to 679c. The Department (formerly known as the Department of Human Services) administers FIP pursuant to 45 CFR 233-260, MCL 400.10, the Social Welfare Act, MCL 400.1-.119b, and Mich Admin Code, R 400.3101-.3131.

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 Department of Human Services) administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.105-.112k.

In this case, the Department closed the Petitioner's MA as of September 1, 2015, for the reason the deductible had not been met in at least one of the last three months. Exhibit 2. The Petitioner got the Health Care Coverage Determination Notice closing his MA case even though he no longer lived at the address on the notice. Exhibit 2. Even though the Notice had not been sent to the correct address, the Petitioner received it and requested a timely hearing on August 12, 2015.

The Petitioner testified at the hearing that he had not provided the Department medical expenses at any time. The Petitioner also asserted that he did not know he had to submit medical bills because he was never told that he had to do so.

The Petitioner was sent a redetermination in July 2015 and returned the redetermination unsigned. Ultimately, the redetermination was completed and returned signed in August 2015. The redetermination was also sent to the wrong address but was returned by Petitioner. Thereafter the Department closed the Petitioner's case for failure to meet his deductible for a least once in a three-month period. Department policy provides:

Redetermination

Redetermine eligibility for active deductible cases at least every 12 months unless the group has not met its deductible within the past three months.

If a group has not met its deductible in at least one of the three calendar months before that month **and** none of the members are QMB, SLM or ALM eligible, Bridges will automatically notify the group of closure. BEM 545 (October 1, 2015) p. 11.

Although the Petitioner filed a change of address with the Department in March 2015, when he moved to his current address on [REDACTED] in [REDACTED] Michigan, the Department continued to send the Petitioner's mail to [REDACTED] in [REDACTED] where he no longer lived. Even though sent to the wrong address, the Petitioner did testify that he received the redetermination sent in July 2015, which he completed and also received the Health Care Coverage Determination Notice closing his MA case effective September 1, 2015.

Ultimately, it is determined that notwithstanding the Department sent the mail to the wrong address, the mail was received by the Petitioner; and no adverse action was taken by the Department because of failure to respond to any of the Notices. Thus, it is determined that the Department properly closed the Petitioner's MA case for the reason stated, that he did not meet his deductible for at least one of the last three calendar months.

Although the Petitioner testified that he did not know he had a deductible case and that he had to submit medical bills, the Department had previously sent Petitioner a Notice on January 15, 2015, to the then correct address ([REDACTED]) advising the Petitioner about the amount of his MA deductible with the forms to submit medical expenses. Once the proper Notice was provided, it was the Petitioner's responsibility to read the documents sent with the Notice and contact his caseworker if he did not understand the notice or had questions. As the January 15, 2015, Notice was sent to the correct address, it is presumed received as it was properly mailed and addressed. The proper mailing and addressing of a letter creates a presumption of receipt. That presumption may be rebutted by evidence. *Stacey v Sankovich*, 19 Mich App 638 (1969); *Good v Detroit Automobile Inter-Insurance Exchange*, 67 Mich App 270 (1976).

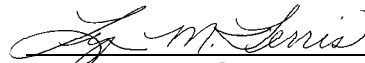
After a review of the testimony and the evidence presented, it is determined that the Department properly closed the Petitioner's MA case for failure to meet the MA deductible for at least one month in a three-month period.

As stated at the hearing, the Petitioner may reapply for MA at any time.

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 acted in accordance with Department policy when it closed the Petitioner's MA case.

DECISION AND ORDER

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



Lynn M. Ferris
Administrative Law Judge
for Nick Lyon, Director
Department of Health and Human Services

Date Mailed: **11/6/2015**

LMF/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 copy of the claim or application for appeal must be filed with the Michigan Administrative Hearing System (MAHS).

A party may request a rehearing or reconsideration of this Hearing Decision from 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:

