

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

IN THE MATTER OF:



MAHS Reg. No.: 15-016494
Issue No.: 2004
Agency Case No.: [REDACTED]
Hearing Date: November 17, 2015
County: GENESEE-DISTRICT 6

ADMINISTRATIVE LAW JUDGE: Gary Heisler

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 November 17, 2015, from Lansing, Michigan. The Claimant was represented by his authorized hearing representative [REDACTED]. The Department of Health and Human Services (Department) was represented by Hearing Facilitator [REDACTED].

ISSUE

Did the Department properly process Claimant's November 6, 2014 retroactive Medical Assistance (MA) application?

FINDINGS OF FACT

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

1. On December 9, 2013, Claimant submitted an application to the Social Security Administration for disability benefits.
2. On December 26, 2013, [REDACTED] submitted a Medical Assistance (MA) application on behalf of Claimant. The application including a retroactive application for November 2013.
3. On February 21, 2014, the Medical Review Team denied the application based on lack of duration.
4. On October 15, 2015, the Social Security Administration determined Claimant was eligible for Supplemental Security Income (SSI) benefits with December 9, 2013 as the onset date of disability.

5. On November 6, 2014, [REDACTED] submitted a retroactive Medical Assistance (MA) application for November 2013, based on the Social Security Administration's disability determination.
6. On April 7, 2015, the local DHHS Office submitted a request to the Medical Review Team for "re review" due to SSA approval.
7. On April 10, 2015, the Medical Review Team returned the application to the local DHHS Office. No disability determination was made. The Medical-Social Eligibility Certification (DHS-49-A) stated "Why is this being sent back to MRT? We already made a PD3 decision on 2/21/14 for this claimant and this application date."
8. On June 29, 2015, [REDACTED] was verbally informed that MRT would not reconsider the case and the previous denial stands.
9. On September 2, 2015, [REDACTED] submitted a hearing request.

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 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.

Bridges Administration Manual (BAM) 115 Application Processing, under Retro MA Applications, at page 11, states that Retro MA coverage is available back to the first day of the third calendar month prior to entitlement to SSI. Pages 13 & 14 provide:

Standard Retro MA Eligibility Requirements

MA Only

Determine eligibility for **each** retro MA month **separately**.

To be eligible for a retro MA month, the person must:

Meet all financial and nonfinancial eligibility factors in that month, and

Have an unpaid medical expense incurred during the month, or

Have been entitled to Medicare Part A.

Bridges Eligibility Manual (BEM) 260 MA Disability/Blindness, at page 1 under Disability/Blindness Established directs Department workers to BEM 150 if a person is receiving Supplemental Security Income (SSI).

Bridges Eligibility Manual (BEM) 150 MA For SSI Recipients, at page 1 states “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; see BAM 115.”

In this case the date of the Retroactive Medical Assistance (MA) application is November 6, 2014. The MRT denial was based on the original December 26, 2013 application. While the MRT may not be required to re review the December 26, 2013 application, it is required to make an eligibility determination on the November 6, 2014 application.


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 Claimant’s November 6, 2014 retroactive Medical Assistance (MA) application.

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. Register Claimant’s November 6, 2014 Retroactive Medical Assistance (MA) application and process it in accordance with Department policy.



Gary Heisler
Administrative Law Judge
for Nick Lyon, Director
Department of Health and Human Services

Date Mailed: **11/30/2015**

GH/nr

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:

