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

IN THE MATTER OF:



MAHS Reg. No.: 15-018298 Issue No.: 2003

Agency Case No.:

Hearing Date:

December 14, 2015

County: Macomb (20)

ADMINISTRATIVE LAW JUDGE: Christian Gardocki

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 December 14, 2015, from Detroit, Michigan. Petitioner appeared and was unrepresented.

Petitioner's son, testified on behalf of Petitioner. The Michigan Department of Health and Human Services (MDHHS) was represented by hearing facilitator.

ISSUE

The issue is whether MDHHS properly terminated Petitioner's Medical Assistance (MA) eligibility due to a failure to return redetermination documents.

FINDINGS OF FACT

The administrative law judge, based on the competent, material, and substantial evidence on the whole record, finds as material fact:

- 1. Petitioner was an ongoing MA benefit recipient whose benefit period was scheduled to end after September 30, 2015.
- 2. On August 17, 2015, MDHHS mailed a Redetermination (Exhibits 1-6) to Petitioner.
- 3. On September 28, 2015, Petitioner requested a hearing to dispute the termination of MA benefits.
- 4. Petitioner failed to return the Redetermination to MDHHS before October 1, 2015.

CONCLUSIONS OF LAW

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. MDHHS (formerly known as the Family Independence Agency) administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.105-.112k. MDHHS policies are contained in the Bridges Administrative Manual (BAM), Bridges Eligibility Manual (BEM), and Reference Tables Manual (RFT).

In response to a question asking if special arrangements were needed, Petitioner's hearing request indicated she was years old and could not see or hear very well. During the telephone hearing, Petitioner had difficulty hearing some of the testimony. In response, MDHHS had Petitioner sit by the telephone so she would be near it; Petitioner stated no other accommodations were needed.

Petitioner requested a hearing to dispute a termination of MA benefits, effective October 2015. MDHHS presented a Health Care Coverage Determination Notice (Exhibits 7-10) dated September 18, 2015. The stated reason for MA benefit termination was an alleged failure by Petitioner to return a Redetermination.

For all programs, Bridges generates a redetermination packet to the client three days prior to the negative action cut-off date in the month before the redetermination is due. BEM 210 (July 2015), p. 6. The packet is sent to the mailing address in Bridges. *Id.* Redetermination forms... include a Redetermination DHHS-1010. *Id.* Benefits stop at the end of the benefit period unless a renewal is completed and a new benefit period is certified. *Id.*, p. 2.

Petitioner testified that her son takes care of all of his paperwork. Petitioner's son testified that the failure to return the Redetermination was "probably just a paperwork mistake" made by him. Petitioner's son's testimony essentially conceded the failure to timely return the Redetermination to MDHHS.

Based on the presented evidence, it is found that Petitioner failed to timely return a Redetermination. Accordingly, the corresponding MA benefit termination was proper.

DECISION AND ORDER

The administrative law judge, based upon the above findings of fact and conclusions of law, finds that MDHHS properly terminated Petitioner's MA eligibility, effective October 2015, due to Petitioner's failure to return a Redetermination. The actions taken by MDHHS are **AFFIRMED**.

Christian Gardocki

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

Date Signed: 12/15/2015

Date Mailed: 12/15/2015

CG/tm

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 <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

