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

### IN THE MATTER OF:



MAHS Reg. No.: 15-018871 Issue No.: 2002

Agency Case No.:

Hearing Date: December 10, 2015
County: GENESEE-DISTRICT 6

(CLIO RD)

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 December 10, 2015, from Lansing, Michigan. Participants on behalf of Claimant included (Hearing Facilitator) represented the Department of Health and Human Services (Department).

# <u>ISSUE</u>

Did the Department of Health and Human Services (Department) properly deny 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:

- 1. On July 14, 2015, the Department received the Claimant's application for Medical Assistance (MA).
- The Claimant reported receiving Medicare benefits.
- On August 14, 2015, the Department sent the Claimant a Verification Checklist (DHS-3503) requesting verification of all bank accounts by August 24, 2015.
- 4. On September 15, 2015, the Department notified the Claimant that it had denied his application for Medical Assistance (MA).
- 5. On September 24, 2015, the Department received the Claimant's request for a hearing protesting the closure of Medical Assistance (MA) benefits.

## **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.

Assets means cash, any other personal property and real property. Real property is land and objects affixed to the land such as buildings, trees and fences. Condominiums are real property. Personal property is any item subject to ownership that is not real property. Countable assets cannot exceed the applicable asset limit. An asset is countable if it meets the availability tests and is not excluded. Available means that someone in the asset group has the legal right to use or dispose of the asset. Department of Human Services Bridges Eligibility Manual (BEM) 400 (October 1, 2014), pp 1-7.

Clients must cooperate with the local office in determining initial and ongoing eligibility and this includes the completion of necessary forms. Department of Human Services Bridges Assistance Manual (BAM) 105 (July 1, 2015), p 8.

Verification means documentation or other evidence to establish the accuracy of the client's verbal or written statements. Verification is usually required at application/redetermination and for a reported change affecting eligibility or benefit level when it is required by policy, required as a local office option, or information regarding an eligibility factor is unclear, inconsistent, incomplete, or contradictory. The Department uses documents, collateral contacts, or home calls to verify information. A collateral contact is a direct contact with a person, organization, or agency to verify information from the client. When documentation is not available, or clarification is needed, collateral contact may be necessary. Department of Human Services Bridges Assistance Manual (BAM) 130 (July 1, 2015), pp 1-9.

On July 14, 2015, the Department received the Claimant's application for Medical Assistance (MA). On this application, the Claimant reported receiving Medicare benefits. On August 14, 2015, the Department sent the Claimant a Verification Checklist (DHS-3503) requesting verification of all bank accounts by August 24, 2015. On September 24, 2015, the Department had not received the verification documents that were requested and notified the Claimant that it had denied his MA application.

The receipt of Medicare does not make the Claimant ineligible for MA benefits, but it excludes him from categories of MA benefits that do not have an asset limit. Since the Claimant is limited to MA categories with an asset limit, the Department was required to verify the value of all cash assets including all bank accounts. When the Department did not receive the requested verification documents, it denied the Claimant's 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 acted in accordance with Department policy when it denied the Claimant's application for Medical Assistance (MA) benefits for failure to provide the Department with information necessary to determine his eligibility to receive benefits.

# **DECISION AND ORDER**

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

Administrative Law Judge

for Nick Lyon, Director Department of Health and Human Services

Date Signed: 12/17/2015

Date Mailed: 12/17/2015

KS/

**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

