

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

**IN THE MATTER OF:**

██████████  
██████████  
██████████████████

Reg. No.: 15-007656  
Issue No.: 3000; 2001  
Case No.: ██████████  
Hearing Date: June 18, 2015  
County: Wayne-District 41

**ADMINISTRATIVE LAW JUDGE: Alice C. Elkin**

**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; and Mich Admin Code, R 792.11002. After due notice, a telephone hearing was held on June 18, 2015, from Detroit, Michigan. Participants on behalf of Claimant included Claimant and ██████████, Claimant's authorized hearing representative (AHR). Participants on behalf of the Department of Health and Human Services (Department) included J ██████████ ██████████, Hearing Liaison.

**ISSUE**

Did the Department properly close Claimant's Medical Assistance (MA) and Medicare Savings Program (MSP) cases due to failure to verify requested information?

**FINDINGS OF FACT**

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

1. Claimant was an ongoing recipient of MA, MSP and Food Assistance Program (FAP) benefits.
2. On March 17, 2015, the Department sent Claimant a redetermination concerning her ongoing MA and MSP eligibility (Exhibit E).
3. In her timely submitted redetermination, Claimant reported employment but did not submit any proof of employment.

4. On April 30, 2015, the Department sent Claimant a Health Care Coverage Determination Notice notifying her that her health care cases were closing effective June 1, 2015 (Exhibit A).
5. On May 11, 2015, Claimant filed a request for hearing disputing the Department's actions concerning her FAP and medical cases.

### **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).

At the hearing, the AHR testified that she was satisfied with the Department's actions concerning Claimant's FAP cases and agreed to withdraw her hearing request concerning that issue. Therefore, Claimant's hearing request concerning FAP is dismissed. The hearing proceeded to address Claimant's MA and MSP cases.

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. MSP is part of the MA program.

The April 30, 2015, Health Care Coverage Determination notified Claimant that her medical cases were closing because she was not under 21 or over 65, pregnant, the caretaker of a minor child, blind or disabled and because she failed to verify requested information. At the hearing, the Department acknowledged that Claimant is disabled and the closure of her MA and MSP cases was due to her failure to verify the income she had identified on the redetermination.

The Department requires recipients of state benefits to complete redeterminations at least once every twelve months. BAM 210 (April 2015), p 1. MA benefits stop at the end of the benefit period unless a redetermination is completed and a new benefit period is certified. BAM 210, p 2. Verifications in connection with MA redeterminations are due the same date as the redetermination interview, and, if an interview is not required, the verifications are due the date the packet is due. BAM 210, p. 14.

In this case, the redetermination packet was due on April 1, 2015 and no interview was scheduled. The redetermination required Claimant to identify income sources and

provide proof of all income, specifically stating that proof of the last 30 days for employment was required. Because no interview was required, the proofs were also due on April 1, 2015. The AHR admitted at the hearing that no paystubs were included with the redetermination and that she first provided those proofs to the Department on May 11, 2015.

While under BAM 210 verifications were due by April 1, 2015, BAM 220 (April 2015), p. 12 provides that the Department should delete a negative action when a client provides the information needed to meet the requirement that caused the negative action before the negative action effective date. The negative action date is 12 calendar days following the date of the Department's actions. BAM 220, p. 11.

In this case, based on the April 30, 2015, Health Care Coverage Determination Notice, the negative action date is May 12, 2015. Claimant submitted paystubs, which the Department testified were sufficient for processing her case, on May 11, 2015. Because Claimant submitted her paystubs prior to May 12, 2015, and the Department testified that the submitted paystubs were sufficient for processing her case, the Department did not act in accordance with Department policy when it closed Claimant's MA and MSP cases for failure to verify employment income.

### **DECISION AND ORDER**

Claimant's hearing request concerning FAP is dismissed.

The Department's MSP and MA decisions are **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. Reinstate Claimant MA and MSP cases effective June 1, 2015;
2. Reprocess Claimant's redetermination;

3. Issue supplements to Claimant for MA and MSP benefits she was eligible to receive from June 1, 2015 ongoing; and
4. Notify Claimant in writing of its decision.



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**Alice C. Elkin**  
Administrative Law Judge  
for Nick Lyon, Director  
Department of Health and Human Services

Date Signed: **6/25/2015**

Date Mailed: **6/25/2015**

ACE / tlf

**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.

