

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

IN THE MATTER OF:

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

Reg. No.: 15-013923
Issue No.: 2003
Case No.: ██████████
Hearing Date: September 21, 2015
County: Macomb-District 12

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 September 21, 2015, from Detroit, Michigan. Participants on behalf of Claimant included Claimant; ██████████, Claimant's authorized hearing representative (AHR); and ██████████, Claimant's friend. Participants on behalf of the Department of Health and Human Services (Department) included ██████████, Eligibility Specialist/ Alternative Hearing Facilitator.

ISSUE

Did the Department properly close Claimant's Medical Assistance (MA) and Medicare Savings Program (MSP) cases for failure to complete the redetermination process?

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 Food Assistance Program (FAP), MSP, and MA benefits.
2. On June 16, 2015, the Department sent Claimant (i) a redetermination telephone interview notice advising him of a phone interview on July 1, 2015 and (ii) a redetermination form to determine his ongoing eligibility for MA, MSP, and FAP, requesting that he complete and return the form by July 1, 2015.
3. On July 1, 2015, the Department sent Claimant a Notice of Missed Interview notifying him that he did not complete his interview and it was now his

responsibility to reschedule an interview before July 31, 2015 or his redetermination would be denied and his FAP case would close (Exhibit B).

4. On July 20, 2015, the Department sent Claimant a Health Care Coverage Determination Notice notifying him that his MSP and MA cases were closing effective August 1, 2015 because he had failed to return the redetermination.
5. On July 30, 2015, Claimant submitted a request for hearing disputing the Department's actions concerning his MA 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).

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. MSP is an MA program. 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.

Claimant requested a hearing to dispute the closure of his MA and MSP cases. The Department sent Claimant a July 20, 2015 Health Care Coverage Determination Notice, informing him that his MA and MSP cases would close effective August 1, 2015, because he failed to return the redetermination form to allow the Department to assess his continued eligibility for assistance.

The Department requires recipients of state benefits to complete redeterminations at least once every twelve months. BAM 210 (July 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.

The Department testified that it sent Claimant a redetermination concerning his ongoing MA and MSP eligibility on June 16, 2015 that was due on July 1, 2015. The redetermination is addressed to Claimant at the address he identified on the record (Exhibit A). At the hearing, the AHR did not allege that Claimant did not receive the redetermination, and she admitted that it was likely not completed and returned to the Department. She explained that Claimant is a mentally disabled individual and his mother, who lived with Claimant and used to complete all of his paperwork, had recently

died. The AHR was not aware of the redetermination. However, the Department testified that there was no authorized representative on Claimant's case. Therefore, the Department properly sent the redetermination and other mail to Claimant.

Because Claimant did not return the completed redetermination before August 1, 2015, the Administrative Law Judge finds that the Department acted in accordance with Department policy when it closed Claimant's MA and MSP cases.

DECISION AND ORDER

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



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

Date Signed: **9/25/2015**

Date Mailed: **9/25/2015**

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.

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:

A horizontal bar chart with 10 black bars of varying lengths, representing redacted data for the CC list. The bars are arranged in descending order of length from top to bottom. The longest bar is approximately 75% of the width, while the shortest is about 5%.

Redacted CC Entry	Relative Length (approximate)
[Redacted]	75%
[Redacted]	65%
[Redacted]	55%
[Redacted]	70%
[Redacted]	100%
[Redacted]	15%
[Redacted]	20%
[Redacted]	40%
[Redacted]	35%
[Redacted]	10%