

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

IN THE MATTER OF:

[REDACTED]

MAHS Reg. No.: 15-014794
Issue No.: 2001
Agency Case No.: [REDACTED]
Hearing Date: October 07, 2015
County: Washtenaw

ADMINISTRATIVE LAW JUDGE: Carmen G. Fahie

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, an in-person hearing was held on October 7, 2015, from Ypsilanti, Michigan. The Petitioner was represented by her son in law and authorized representative, [REDACTED] and [REDACTED], Washtenaw Health Plan caseworker. The Department was represented by [REDACTED], Eligibility Specialist and [REDACTED], Family Independence Manager.

ISSUE

Did the Department properly determine the Claimant's eligibility 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 February 18, 2014, the Claimant applied for MA, Emergency Only Services (ESO) for her household.
2. The Claimant and her household was eligible for MA ESO effective November 1, 2014.
3. On July 1, 2015, the Department changed the Claimant's household coverage beginning November 1, 2014 due to a BRIDGES error.
4. On August 5, 2015, the Department received a hearing request from the Claimant, contesting the Department's action.
5. On August 7, 2015, the Department caseworker worked on fixing the problem, but ESO coverage was only approved beginning September 1, 2015.

6. On August 12, 2015, the Department caseworker contacted the Help Desk to change the ESO date retroactive to November 1, 2014 where a ticket [REDACTED] was issued so that the problem could be resolved.

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.

In this case, On February 18, 2014, the Claimant applied for MA, Emergency Only Services (ESO) for her household. The Claimant and her household were eligible for MA ESO effective November 1, 2014. On July 1, 2015, the Department changed the Claimant's household coverage beginning November 1, 2014 due to a BRIDGES error. On August 5, 2015, the Department received a hearing request from the Claimant, contesting the Department's action.

On August 7, 2015, the Department caseworker worked on fixing the problem, but ESO coverage was only approved beginning September 1, 2015. On August 12, 2015, the Department caseworker contacted the Help Desk to change the ESO date retroactive to November 1, 2014 where a ticket [REDACTED] was issued so that the problem could be resolved. Department Exhibit 1.6-1.19. BAM and BEM 100 and 200 Series.

During the hearing, the Department Caseworker stated that the issue would be fixed by Monday. The Claimant and her household is only eligible for ESO. However, BRIDGES keeps giving them full MA instead of ESO. 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 determined that BRIDGES changed the MA placement from ESO to full MA in error and submitted a BRIDGES ticket to correct the error.

DECISION AND ORDER

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



Carmen G. Fahie
Administrative Law Judge
for Nick Lyon, Director
Department of Health and Human Services

Date Signed: **10/26/2015**

Date Mailed: **10/26/2015**

CGF/las

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:

