

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

**IN THE MATTER OF:**

██████████  
██████████  
██████████

Reg. No.: 15-015311  
Issue No.: 2004  
Case No.: ██████████  
Hearing Date: October 12, 2015  
County: Wayne – District 55

**ADMINISTRATIVE LAW JUDGE: Zainab Baydoun**

**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 October 12, 2015, from Detroit, Michigan. The Petitioner was represented by his Authorized Hearing Representative, ██████████, from ██████████. A representative from the Department of Health and Human Services (Department) did not appear for the hearing and the hearing was held in the absence of the Department.

**ISSUE**

Did the Department properly process Petitioner's eligibility for Medical Assistance (MA) benefits for the month of November 2013?

**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 or around March 19, 2013, ██████████ submitted an application for MA on behalf of Petitioner, retroactive to February 2013. (Exhibit 1)
2. On August 19, 2015, ██████████ requested a hearing on behalf of Petitioner disputing the Department's actions with respect to a failure to process Petitioner's MA coverage from November 2013. (Exhibit 1; Petitioner's Request for Hearing)

## 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.

Additionally, when the Department receives an application for assistance, it is to be registered and processed in accordance with Department policies. The date of application is the date the local office receives the required minimum information on an application or the filing form. BAM 110 (July 2013), pp.5-7, 18-19. Retro MA coverage is available back to the first day of the third calendar month prior to the current or most recent application for MA applicants. BAM 115 (July 2013), pp. 10-14.

Once an application is registered, the Department must certify eligibility results for each program requested within the applicable standard of promptness (SOP). The SOP begins the date the department receives an application/filing form, with minimum required information. The SOP is 45 days for an MA application in which disability is not an eligibility factor and 90 days for an application involving MA in which disability is an eligibility factor, with this date being extended in 60 day intervals by deferral by the Medical Review Team. BAM 115, pp. 1,15-19,22-23. The Department is to notify clients in writing of positive and negative actions by generating the appropriate notice of case action, which is printed and mailed centrally from the consolidated print center. A negative action is a Department action to deny an application or to reduce, suspend or terminate a benefit. After processing an initial application, the Department will notify clients of the approval or denial. BAM 115, pp. 1,18;BAM 220 (July 2013), pp. 1-3.

A review of Petitioner's August 19, 2015, hearing request establishes that [REDACTED] was disputing the Department's failure to process Petitioner's MA eligibility from November 2013. The Department did not appear for the hearing; however, the Hearing Summary prepared for the hearing was read into the record. According to the Hearing Summary, "Medical Coverage is already active from Nov 2013 (dates state[d] in hearing summary for [REDACTED]). Please review enclosed documents for verification." (See Hearing Summary).

At the hearing, Petitioner's AHR asserted that there was an error and discrepancy with the information that [REDACTED] included in the August 19, 2015, hearing request. Petitioner's AHR stated that the hearing was actually requested to dispute the Department's failure to process Petitioner's March 19, 2013, MA application, retro to February 2013 and not Petitioner's MA coverage for November 2013. Petitioner's AHR asserted that in February 2015, a previous hearing had been requested concerning the March 19, 2013 MA application and that the request was not scheduled for a hearing. Although [REDACTED] provided a copy of the February 2015 hearing request, upon review of the evidence, it is found and determined that this ALJ does not retain any jurisdiction to address the failure to process the March 19, 2013, MA application, as that is not the issue for which [REDACTED] requested a hearing on when it submitted the August 19, 2015, hearing request nor is it the issue that the Department responded to in the Hearing Summary.

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 processed Petitioner's MA benefits for November 2013, as Petitioner's AHR did not dispute that MA coverage for November 2013 was active.

**DECISION AND ORDER**

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



---

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

Date Signed: 11/10/2015

Date Mailed: 11/10/2015

ZB / 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: [REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]  
[REDACTED]