

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

IN THE MATTER OF:



MAHS Reg. No.: 15-020938
Issue No.: 2001
Agency Case No.: [REDACTED]
Hearing Date: January 12, 2016
County: Genesee (Clio Rd)

ADMINISTRATIVE LAW JUDGE: Vicki Armstrong

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 January 12, 2016, from Lansing, Michigan. Claimant personally appeared and testified. The Department was represented by Hearing Facilitator [REDACTED] [REDACTED] who also testified.

ISSUE

Did the Department properly close Claimant's Medical Assistance (MA) for failure to timely return verifications?

Did the Department properly close Claimant's Medical Savings Program (MSP) because there was not a child in the group?

FINDINGS OF FACT

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

1. Claimant has been Medicaid eligible as a Disabled Adult Child (DAC) since May 1, 2014. (Dept Ex. A, p 33).
2. On September 18, 2015 Claimant applied for Medicaid.
3. Hearing Facilitator [REDACTED] testified that Claimant was currently for Medicaid active and has been active Medicaid since September 18, 2015.
4. Hearing Facilitator [REDACTED] testified Claimant had submitted the required verifications.

5. Hearing Facilitator [REDACTED] testified that through her research, she determined the medical providers were using the wrong billing codes and because Claimant is a DAC, she would make the telephone calls on his behalf.
6. Claimant submitted a Request for Hearing on November 2, 2015, contesting the Department's negative actions. (Dept Ex. A, p 2).
7. On November 4, 2015 the Department issued a Health Care Coverage Determination Notice to Claimant indicating Claimant was not eligible for Medicaid as of June 1, 2015, because no group member was an eligible child. The Notice also stated Claimant was not eligible for the Medical Savings Program (MSP) because he had failed to verify or allow the Department to verify information necessary to determine eligibility for the MSP. (Dept Ex. A, pp 83-85).

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. Medicare Savings Programs are SSI-related MA categories. BEM 165.

In this case, Hearing Facilitator [REDACTED] testified that Claimant had submitted the required verifications and that Claimant was a Disabled Adult Child (DAC). Hearing Facilitator DeKruger stated that Claimant was currently active Medicaid and based on the file and the Department's Bridge's computer program, Claimant should have been active Medicaid back to at least June, 2015.

According to the evidence submitted, Claimant has been Medicaid eligible as a Disabled Adult Child (DAC) since May 1, 2014. Therefore, the Department improperly closed Claimant's Medicaid beginning October 1, 2015 because Claimant is a Disabled Adult Child.

Further, according to Hearing Facilitator [REDACTED] testimony, the Department improperly closed Claimant's Medical Savings Program because the Department had received the requested verifications from Claimant.

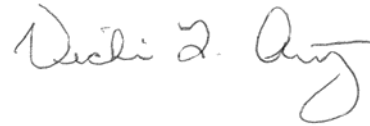
Therefore, this Administrative Law Judge, based on the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, finds that the Department failed to satisfy its burden of showing that it acted in accordance with Department policy when it closed Claimant's Medicaid and MSP cases.

DECISION AND ORDER

Accordingly, the Department's decision is **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. Redetermine Claimant's MA and MSP eligibility back to May 1, 2015.
2. Issue any retroactive MA or MSP benefits if Claimant is otherwise entitled to them.



Vicki Armstrong
Administrative Law Judge
for Nick Lyon, Director
Department of Health and Human Services

Date Mailed: **1/27/2016**

VA/nr

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:

