

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

**IN THE MATTER OF:**



MAHS Reg. No.: 16-000288  
Issue No.: 3003, 2003  
Agency Case No.: [REDACTED]  
Hearing Date: February 22, 2016  
County: WAYNE-DISTRICT  
57 (CONNER)

**ADMINISTRATIVE LAW JUDGE: Lynn M. Ferris**

**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 February 22, 2016, from Detroit, Michigan. The Petitioner was represented by the Petitioner, [REDACTED]. The Department of Health and Human Services (Department) was represented by [REDACTED], Family Independence Manager.

**ISSUE**

Did the Department properly close the Petitioner's Food Assistance Program (FAP) case and Medical Assistance (MA) case due to failure to complete the redetermination?

**FINDINGS OF FACT**

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

1. The Department sent Petitioner an FAP redetermination on December 15, 2015, with a due date of January 7, 2016. Exhibit 3. On December 15, 2015, the Department sent the Petitioner a Notice of Missed Interview advising Petitioner of her responsibility to reschedule. Exhibit 2.
2. The Petitioner never completed the FAP redetermination form. The Department closed the Petitioner's FAP case effective January 31, 2016.
3. The Petitioner was sent an MA redetermination on October 13, 2015, with a due date of November 2, 2015. The Petitioner never completed or returned the redetermination. Exhibit 4.

4. On November 19, 2015, the Department sent the Petitioner a Health Care Coverage Determination Notice closing the Petitioner's MA case for failure to complete the MA redetermination. Exhibit 1.
5. The Petitioner requested a hearing on January 13, 2016

### **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 Food Assistance Program (FAP) [formerly known as the Food Stamp program] is established by the Food and Nutrition Act of 2008, as amended, 7 USC 2011 to 2036a and is implemented by the federal regulations contained in 7 CFR 273. The Department (formerly known as the Department of Human Services) administers FAP pursuant to MCL 400.10, the Social Welfare Act, MCL 400.1-.119b, and Mich Admin Code, R 400.3001-.3011.

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, the Petitioner conceded that she did not complete the redeterminations for FAP and MA. Consequently, because the redeterminations were not completed, the Department closed both her FAP and MA cases.

The Department must review cases periodically; and if the case information is not updated and completed by the due date, the Department must close the case. Department policy regarding redeterminations provides:

The Michigan Department of Health & Human Services (MDHHS) must periodically redetermine or renew an individual's eligibility for active programs. The redetermination process includes thorough review of all eligibility factors. BAM 210, (January 1, 2016) p. 1.

For Medical Assistance cases, the Department policy provides:

Benefits stop at the end of the benefit period **unless** a renewal is completed **and** a new benefit period is certified.

Also, the renewal month is 12 months from the **date the most recent complete application was submitted.** BAM 210, p. 3

At application, redetermination, ex parte review, or other change, explain to the client/authorized representative the availability of your assistance in obtaining needed information. Extension may be granted when the following exists:

- The customer/authorized representative need to make the request. An extension should not automatically be given.
- The need for the extension and the reasonable efforts taken to obtain the verifications are documented.
- Every effort by the department was made to assist the client in obtaining verifications.

Verifications are considered to be timely if received by the date they are due. For electronically transmitted verifications (fax, email or MI Bridges document upload), the date of the transmission is the receipt date.

Verifications that are submitted after the close of regular business hours through the drop box or by delivery of a MDHHS representative are considered to be received the next business day.

Send a case action notice when:

- The client indicates refusal to provide a verification, **or**
- The time period given has elapsed. BAM 130, (January 1, 2016), p. 8-9.

In this case, because the redetermination for MA was not returned, the Department was correct in closing the Petitioner's MA case.

As regards the closure of the Petitioner's FAP case Department policy provides:

### **FAP Only**

#### **Delays**

The group loses its right to uninterrupted FAP benefits if it fails to do any of the following:

- File the FAP redetermination by the timely filing date.
- Participate in the scheduled interview.

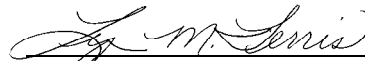
- Submit verifications timely, provided the requested submittal date is **after** the timely filing date. BAM 201 (January 2016), p. 18.

As the Petitioner did not return the redetermination form and did not complete an interview, the Department correctly closed the Petitioner's FAP case.

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 closed the Petitioner's FAP and MA cases for failure to return and complete the redeterminations for FAP and MA.

### **DECISION AND ORDER**

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



**Lynn M. Ferris**

Administrative Law Judge  
for Nick Lyon, Director

Department of Health and Human Services

Date Mailed: **2/22/2016**

LMF/jaf

**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:

