



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
MICHIGAN ADMINISTRATIVE HEARING SYSTEM
Christopher Seppanen
Executive Director

MIKE ZIMMER
DIRECTOR

[REDACTED]

Date Mailed: June 23, 2016
MAHS Docket No.: 16-001370
Agency No.: [REDACTED]
Petitioner: [REDACTED]

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, an in-person hearing was held on [REDACTED] [REDACTED] from Sandusky, Michigan. The Petitioner was represented by [REDACTED], Attorney for the Petitioner. The Petitioner did not appear. The Department of Health and Human Services (Department) was represented by [REDACTED], Assistant Attorney General, who participated by telephone. [REDACTED], Assistance Payments Worker, also appeared for the Department.

ISSUE

Did the Department properly find a divestment occurred and impose a divestment penalty?

FINDINGS OF FACT

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

1. Prior to the hearing date, the Department, through its attorney, Assistant Attorney General [REDACTED], filed a motion for a Pre-Hearing Conference in lieu of the scheduled hearing. Because the Department had redetermined the penalty period presently under review and in anticipation of a new penalty period being applied, and further anticipating an appeal of this new penalty, the motion proposed that the two penalty matters be consolidated. The Department's motion was denied as the Attorney for Petitioner had not, as of the hearing, requested a hearing on the most recent action of the Department.
2. The Petitioner applied for Medical Assistance (MA) on [REDACTED].

3. The Petitioner submitted with the application verification of a [REDACTED] Annuity (Annuity) in Petitioner's name, which was purchased [REDACTED]. Exhibit 1, pp. 42-61.
4. The Annuity did not name the State of Michigan as a remainder beneficiary of the annuity, and payments from the annuity were made quarterly.
5. The Department found that the annuity was a divestment and imposed a divestment penalty for the period [REDACTED], to [REDACTED], finding the Petitioner was not eligible for long-term care benefits during the divestment period.
6. The Department determined that the amount of the divestment penalty was the face value of the annuity in the amount of \$ [REDACTED] Exhibit 1, p. 31.
7. The Department, relied on the Trust/Annuity Evaluation Department letter dated [REDACTED], which noted that "payments must be in substantially equal monthly payments starting with the first payment and continue for the term of the payout (no balloon or lump-sum payments). An annuity purchased or amended by or for the benefit of the applicant or recipient on or after [REDACTED] must name the State of Michigan as the remainder beneficiary in the first position, or as a second remainder beneficiary after the community spouse, or minor or disabled child, for an amount at least equal to the amount of the Medicaid benefits paid on behalf of the institutionalized individual." Exhibit 1, p. 4.
8. The Department issued a Health Care Coverage Determination Notice dated [REDACTED], advising the Petitioner that the Department determined that the Annuity was a divestment and imposed a penalty for the period [REDACTED] through [REDACTED]. Exhibit 1, pp. 31-33.
9. The Petitioner was first admitted to a long-term care facility on [REDACTED]. [REDACTED], is the baseline date for the Petitioner. The 60-month look-back period is from [REDACTED], to [REDACTED].
10. The purchase of the Annuity was made on [REDACTED], and is not within the specified look-back period, [REDACTED], to [REDACTED].
11. The Petitioner's Attorney requested a timely hearing on [REDACTED].

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, as part of the application process for MA, the Petitioner submitted with his MA application an Annuity, which he purchased on [REDACTED]. As part of the application, the Department must examine eligibility and determine assets and income. As the annuity was an asset, it was provided to the Department as part of the application process.

The Annuity involved in this matter was purchased by Petitioner on [REDACTED], for \$ [REDACTED]. The annuity calls for quarterly payments of \$ [REDACTED] for the remainder of Petitioner's lifetime starting on [REDACTED]. The Department determined that the annuity was found to be within Petitioner's life expectancy and that the annuity was actuarially sound. The Department sent the Annuity to the Trust/Annuity Evaluation Division of the Department for analysis as required by Department policy. BEM 401, (January 1, 2016), p. 2. On [REDACTED], the Trusts/Annuity Division issued a letter regarding its review of the annuity finding:

“Converting countable resources to income through the purchase of an annuity or the amendment of an existing annuity on or after [REDACTED], is considered a transfer for less than fair market value unless the annuity meets the conditions listed below:

Payments must be in substantially equal monthly payments (starting with the first payment and continue for the term of the payout (no balloon or lump-sum payments). (Payments are quarterly)

An annuity purchased or amended **on or after** [REDACTED] must name the State of Michigan as the remainder beneficiary, or as the second remainder beneficiary after the community spouse or minor or disabled child, for an amount at least equal to the amount of the Medicaid benefits provided. The naming of the State in the first or second position must be verified at application or redetermination. **An annuity that does not name the state as the remainder**

beneficiary is a divestment of the total purchase price. (Beneficiary is listed as [REDACTED])
Divestment has occurred.” Exhibit 1 pp. 40–41 (emphasis in original).

Department policy found in BEM 405 sets forth the definitions and requirements to establish a divestment. If a divestment is determined to have occurred, the divestment results in a penalty period in MA, not ineligibility. Divestment is a type of transfer of a resource and not an amount of resources transferred. BEM 405, (January 2016), p. 1.

A Divestment is defined by Department Policy found in BEM 405:

Divestment means a transfer of a resource (see RESOURCE DEFINED below and in glossary) by a client or his spouse **that are all of the following:**

- Is within a specified time; see LOOK-BACK PERIOD in this item.
- Is a transfer for LESS THAN FAIR MARKET VALUE; see definition in glossary.
- Is not listed below under TRANSFERS THAT ARE NOT DIVESTMENT

Note: See Annuity Not Actuarially Sound and Joint Owners and Transfers in this item and BEM 401 about special transactions considered transfers for less than fair market value.

During the penalty period, MA will **not** pay the client’s cost for:

- Long Term Care (LTC) services.
- Home and community-based services.
- Home help.
- Home health.

MA will pay for other MA-covered services. BEM 405, p.1.

A number of defined terms must be considered when analyzing annuities and divestment issues. The following definitions and explanations must be considered in determining whether there is a divestment regarding the annuity in question.

RESOURCE DEFINED

Resource means all the client’s and spouse’s assets and income. It includes all assets and all income, even countable and/or excluded assets, the individual or spouse receive. It also includes all assets and income that the individual (or spouse) were entitled to but did **not** receive because of action by one of the following:

- The client or spouse.

- A person (including a court or administrative body) with legal authority to act in place of or on behalf of the client or the client's spouse.
- Any person (including a court or administrative body) acting at the direction or upon the request of the client or his/her spouse. BEM 405, pp. 1-2

TRANSFER OF A RESOURCE

Transferring a resource means giving up all or partial ownership in (or rights to) a resource. **Not** all transfers are divestment. Examples of transfers include:

- Selling an asset for fair market value (not divestment).
- Giving an asset away (divestment).
- Refusing an inheritance (divestment).
- Payments from a **MEDICAID TRUST** that are **not** to, or for the benefit of, the person or his spouse; see BEM 401 (divestment).
- Putting assets or income in a trust; see BEM 401.
- Giving up the **right** to receive income such as having pension payments made to someone else (divestment).
- Giving away a lump sum or accumulated benefit (divestment).
- Buying an annuity that is **not** actuarially sound (divestment).
- Giving away a vehicle (divestment).
- Putting assets or income into a Limited Liability Company (LLC) BEM 405 (January 2016), pp. 1-2

Department policy requires that as the first step in the analysis of determining the period to be examined for a divestment, the baseline date, the beginning date for purposes of determining the look back period be established. This step requires the Department determine the period of time that transfers can be looked at for divestment and requires the beginning date referred to as the **baseline date** be determined. A person's baseline date is the **first** date that the client was eligible for Medicaid and in long-term care. Once established, the baseline date never changes, even if the client leaves long-term care. Once the baseline date is established, you determine the look-back period. **The look back period is 60 months prior to the baseline date for all transfers made after [REDACTED]**. BEM 405, p. 6. (Emphasis supplied). Once the look-back period is established, all transfers of assets are examined during that period.

Another key defined term is **Less than Fair Market Value** which is defined as:

Less than fair market value means the compensation received in return for a resource was worth less than the fair market value of the resource. That is, the amount received for the resource was less than what would have been received if the resource was offered in the open market and in an arm's length transaction (see glossary). BEM 405, p. 6.

Several aspects of an annuity can trigger a finding that it is a transfer for less than fair market value such as the annuity not being actuarially sound. BEM 405, p. 4.

PENALTY PERIOD

No Maximum Penalty

There is no maximum limit on the penalty period for divestment. There is no minimum amount of resource transfer before incurring a penalty, determine a penalty on **any** amount of resources that are transferred and meet the definition of a divestment even if the penalty is for one day. Divestment is a type of transfer **not** an amount of transfer.

Any penalty period established under previous policy continues until it ends.

Apply the penalty policy in place at the time of transfer for any transfers made before [REDACTED]. BEM 405, p. 12.

Department policy also provides a formula to compute the penalty period, however the penalty period and its calculation was not the basis for the challenge of the Department's determination as the issue to be determined is whether there has been a divestment under the facts presented.

BEM 401 defines what factors must be considered to determine if an annuity purchase will be considered a transfer for less than fair market value and provides:

TRANSFERS TO AN ANNUITY EFFECTIVE 9/1/05

Converting countable resources to income through the purchase of an annuity or the amendment of an existing annuity on or after [REDACTED], **is considered a transfer for less than fair market value unless the annuity meets the conditions listed below:**

- Is commercially issued by a company licensed in the United States and issued by a licensed producer (a person required to be licensed under the laws of this state to sell, solicit, or negotiate insurance), and
- Is irrevocable, and
- Is purchased by an applicant or recipient for Medicaid or their spouse and solely for the benefit of the applicant or recipient or their spouse, and
- Is actuarially sound and returns the principal and interest within the annuitant's life expectancy, and
- Payments must be in substantially equal monthly payments (starting with the first payment) and continue for the term of the payout (no balloon or lump sum payments).

- An annuity purchased or amended by, or for the benefit of, the applicant or recipient on or after [REDACTED], must name the State of Michigan as the remainder beneficiary in the first position, or as the second remainder beneficiary after the community spouse or minor or disabled child, for an amount at least equal to the amount of the Medicaid benefits paid on behalf of the institutionalized individual. The naming of the state in the first or second position must be verified at application or redetermination. An annuity purchased or amended by, or for the benefit of, the applicant or recipient on or after [REDACTED], that does not name the state as the remainder beneficiary is a divestment of the total purchase price. An annuity purchased for the sole benefit of the applicant's spouse is not a transfer for less than fair market value and is not required to name the State of Michigan as a remainder beneficiary if the annuity is actuarially sound and payments are made only to the applicant's spouse during the spouse's lifetime. An annuity purchased or amended for the sole benefit of the applicant's spouse on or after [REDACTED] that does not meet these requirements and does not name the state as a remainder beneficiary is a divestment of the total purchase price. BEM 401, (July 1, 2015), pp. 5-6.

The Policy referenced above in BEM 401 must be analyzed to determine if an annuity is a transfer for less than fair market value and the other requirements set forth in BEM 405. BEM 405 clearly requires that all three mandatory conditions be present to cause a transfer of a resource to be deemed a divestment. The conditions are that the transfer must occur within the look-back period, the transfer must be for less than fair market value and must not be listed in the list of transfers that are not divestment.

The first condition requires that the transfer occur in the Look-Back Period. In this case, the annuity transfer or purchase was not within the look-back period as it was purchased on [REDACTED], well before the look-back period. The look-back period is [REDACTED], through [REDACTED].

The second condition requires that the transfer must be a transfer for less than fair market value and also references the Glossary. The Glossary defines Fair Market Value as:

The amount of money the owner would receive in the local area for his asset (or his interest in an asset) if the asset (or his interest in the asset) was sold on short notice, possibly without the opportunity to realize the full potential of the investment. That is, what the owner would receive and a buyer be willing to pay on the open market and in an arm length transaction. See definition in this glossary. BPG (October 1, 2015), p. 25, and BEM 405, p. 6, supra

The last condition requires that the transfer **not** be listed below under TRANSFERS THAT ARE NOT DIVESTMENT. This section of BEM 405 lists the following:

Transferring Excluded Income

Transferring income that is **not** countable income for SSI-related MA according to BEM 500 is **not** divestment.

Transfers Involving Spouse

It is **not** divestment to transfer resources from the client to:

- The client's spouse.
- Another SOLELY FOR THE BENEFIT OF the client's spouse.

Transfers from the client's spouse to another SOLELY FOR THE BENEFIT OF the client's spouse are **not** divestment.

Transfers Involving Child

Transfers to the client's blind or disabled (see BEM 260) child, regardless of the child's age or marital status, are **not** divestment. This includes transfers to a trust established SOLELY FOR THE BENEFIT OF the child.

Transfer to Funeral Plan

See Life Insurance Funded Funeral in BEM 400 when a person has irrevocably transferred ownership in life insurance or a similar device designated for funeral expenses.

Transfer to Trust

Transfers to a trust established SOLELY FOR THE BENEFIT OF a disabled (see BEM 260) person under age 65 are **not** divestment.

Purchase of Funeral Contract

Placing money in an irrevocable prepaid funeral contract (see BAM 805) is **not** divestment.

Asset Conversion

Converting an asset from one form to another of equal value is **not** divestment even if the new asset is exempt. Most purchases are conversions.

Example: Using \$5,000 from savings to buy a used car priced at \$5,000 is conversion for equal value.

Example: Trading a boat worth about \$8,000 for a car worth about \$8,000 is conversion for equal value.

Payment of expenses such as one's own taxes or utility bills is also **not** divestment.

Transferring Homestead to Family

It is **not** divestment to transfer a homestead to the client's:

- Spouse; see Transfers Involving Spouse above.
- Blind or disabled child; see Transfers Involving Child above.
- Child under age 21.
- Child age 21 or over who:
 - Lived in the homestead for at least two years immediately before the client's admission to LTC or BEM 106 waiver approval, **and**
 - Provided care that would otherwise have required LTC or BEM 106 waiver services, as documented by a physician's (M.D. or D.O.) statement.
- Brother or sister who:
 - Is part owner of the homestead, **and**
 - Lived in the homestead for at least one year immediately before the client's admission to LTC or BEM 106 waiver approval.

Transfers for Another Purpose

As explained below, transfers exclusively for a purpose other than to qualify or remain eligible for MA are **not** divestment.

Assume transfers for less than fair market value were for eligibility purposes until the client or spouse provides convincing evidence that they had no reason to believe LTC or waiver services might be needed.

Example: Mr. Smith, age 40, was in good health when he gave his vacation cottage to his nephew. The next day Mr. Smith was in an automobile accident. His injuries require long-term care. The transfer was **not** divestment because Mr. Smith could **not** anticipate his need for LTC services.

Exception:

- Preservation of an estate for heirs or to avoid probate court is **not** acceptable as another purpose.
- That the asset or income is **not** counted for Medicaid does **not** make its transfer for another purpose.

Trustee Fees

Trusts which designate a business as trustee (for example a bank) usually must compensate the trustee. Reasonable compensation is **not** divestment. Reasonable compensation means compensation within the prevailing rate for the community. For example, banks usually base their fee on a percentage of the value of the principal. There may be a basic charge in addition to the percentage or the percentage may vary based on the value of the trust. BEM 405 pp. 9-11.

Clearly the purchase of the annuity in question, which was purchased on or after [REDACTED], is considered a transfer for less than fair market value. It is deemed such a transfer because the payments must be in substantially equal monthly payments; the annuity in question is paid quarterly, and thus, is a transfer for less than fair market value. This requirement for equal monthly payments is one of several conditions that must be met so an annuity is **not** considered a transfer for less than fair market value. However, the annuity in question (transfer) did not occur in the look-back period and is not on the list in BEM 405 regarding Transfers that are NOT a divestment.

In addition, another requirement to avoid being considered a transfer for less than fair market value, is that the annuity in question also did not name the State of Michigan a remainder beneficiary. This requires that the annuity name the State of Michigan remainder beneficiary for an amount at least equal to the amount of the Medicaid benefits paid on behalf of the institutionalized individual. Even though this requirement is listed as a condition for avoiding the annuity purchase as a transfer of less than fair market value, the policy in this condition concludes that failure to name the State of Michigan as a remainder beneficiary is a divestment.

A transfer for less than fair market value is not per se, a divestment, as divestment requires that the transfer also occur in the look-back period. In addition, the definition of a transfer for less than fair market value nowhere mentions that such a transfer is a divestment. See BEM 405, p. 6.

Department policy found in BEM 405 also acknowledges that not all transfers are divestments and lists several examples of transfers that are divestments:

Transferring a resource means giving up all or partial ownership in (or rights to) a resource. **Not** all transfers are divestment. Examples of transfers include:

- Selling an asset for fair market value (not divestment).
- Giving an asset away (divestment).
- Refusing an inheritance (divestment).
- Payments from a **MEDICAID TRUST** that are **not** to, or for the benefit of, the person or his spouse; see BEM 401 (divestment).
- Putting assets or income in a trust; see BEM 401.
- Giving up the **right** to receive income such as having pension payments made to someone else (divestment).
- Giving away a lump sum or accumulated benefit (divestment).
- Buying an annuity that is **not** actuarially sound (divestment).
- Giving away a vehicle (divestment).
- Putting assets or income into a Limited Liability Company (LLC) BEM 405, p. 2

The above list does not include as an example the purchase of an annuity on or after [REDACTED], and failing to name the State of Michigan as a remainder beneficiary as a divestment. Nor does the above list state that those items deemed divestments do are not required to be in the look-back period.

As regards annuities, the policy above states that a divestment occurs when an annuity is not actuarially sound, but in fact when an annuity is not actuarially sound it is in fact a transfer for less than fair market value under BEM 401. All the items above listed as “divestment”, giving an asset away, refusing an inheritance, giving up the right to receive income, giving away a lump sum or accumulated benefit and giving away a vehicle are transactions that are transfers for less than fair market value and would not be a divestment unless the transfer occurred in the look back period and was not on the list of Transfers That Are Not A Divestment.

In further support of this interpretation, the note made in BEM 405 which directly follows the three conditions paragraph regarding the requirements for divestment provides:

Note: see Annuity Not Actuarially Sound and Joint Owners and Transfers in this item and BEM 401 about special transactions considered **transfers for less than fair market value**. (Emphasis supplied).

In addition, the paragraph regarding the look-back period clearly requires that the first step in determining the period of time that transfers can be looked at for divestment is determining the baseline date.

Read as a whole, there is no confusion about what is required to determine a divestment. Department policy is very clear in that regard. The only issue that remains is whether the BEM 401 and its provisions regarding the purchase of an annuity and whether an annuity is a transfer for less than fair market value creates an additional definition of divestment due to the provision which declares in relevant part that:

An annuity purchased or amended by, or for the benefit of, the applicant or recipient on or after [REDACTED] that does not name the state as a remainder beneficiary is a divestment for the total purchase price. BEM 401, p. 6.

The Federal regulations 42 USC 1396 p (F) specifically requiring the State be named as a beneficiary provides:

(e) For purposes of this paragraph, the purchase of an annuity shall be treated as the disposal of an asset for less than fair market value unless –

(i) the State is named as the remainder beneficiary in the first position for at least the total amount of medical assistance paid on behalf of the institutionalized individual under this subchapter; or

(ii) the State is named as such a beneficiary in the second position after the community spouse or minor or disabled child and is named in the first position if such spouse or representative of such child disposes of any such remainder for less than fair market value.

Nowhere in this definition does the regulation require that an annuity that does not name the State as a remainder beneficiary result in a divestment. It does however explicitly state that such purchase of annuity that fails to name the State as a remainder beneficiary is a transfer for less than fair market value.

The Federal regulatory scheme requires that transfers of a resource for less than fair market value in order to be a divestment resulting in ineligibility, must occur within the look-back period.

42 USC 1396 p (c) (1) (A) provides:

In order to meet the requirements of this subsection for purposes of section 1396a (a) (18) of this title, **the State plan must** provide that if an institutionalized individual or the spouse of such an individual (or, at the option of a State, a non-institutionalized individual or the spouse of such an individual) **disposes of assets for less than fair market value on or after the look back date specified in subparagraph (B) (i)**, the individual is ineligible for medical assistance for services described in subparagraph (C) (i) during the period beginning on the date specified in subparagraph (D) and equal to the number of months specified in subparagraph (E)

(B)

(i) the look-back date specified in this subparagraph is the date that is... In the case of any other disposal of assets made on or after [REDACTED], (60 months) before the date specified in clause (ii) which for an institutionalized individual is the first date as of which the individual both is an institutionalized individual and has applied for medical assistance under the State Plan

The Department has argued that the regulatory language found in 42USC 1396p (e) somehow requires that annuities not naming the State as a remainder beneficiary results in divestment. Without question the regulation does require that the State become the remainder beneficiary. However, the regulatory language does not change the requirement that transfers in order to be considered a divestment must be in the look-back period; this interpretation is not supported by the provisions in 42 USC 1396 p (e) **Disclosure and Treatment of Annuities** which provides:

(1) in order to meet the requirements of this section for purposes of section 1396 a (A) (18) of this title, a State shall require as a condition for the provision of medical assistance for services described in subsection (C) (1) (C) (i) (relating to long-term care services) for an individual, the application of the individual for such assistance (including any recertification of eligibility for such assistance) shall disclose the description of any interest the individual or community spouse has in an annuity (or similar financial instrument, as may be specified by the Secretary), regardless of whether the annuity is irrevocable or is treated as an asset. Such application or recertification form shall include a

statement that under paragraph (2) the state shall become a remainder beneficiary under such an annuity or similar financial instrument by virtue of the provision of such medical assistance. (Emphasis supplied)

- (2) (A) in the case of disclosure concerning an annuity under subsection(c)(1)(F) the State shall notify the issuer of the annuity of the right of the state under such subsection as preferred remainder beneficiary in the annuity for medical assistance furnished to the individual. Nothing in this paragraph shall be construed as preventing such an issuer from notifying persons with any other remainder interest of the state's remainder interest under such subsection
- (4) nothing in this subsection shall be construed as preventing the state from denying eligibility for medical assistance for an individual based on income or resources derived from an annuity described in paragraph (one).

Thus, after a review of the Department policy and Federal regulatory law, it is determined that the Department's conclusion that such failure to so name the State of Michigan as a remainder beneficiary is a divestment is not supported by Department policy or the federal regulatory requirements referenced herein. The transfer in question was not within the look back period and thus is determined to not be a divestment. Thus The Department's determination that the Petitioner's failure to list the State of Michigan as a remainder beneficiary on the annuity policy was a divestment was incorrect and not in conformance with Department policy or federal law.

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 **did not** act in accordance with Department policy when it found that the purchase of the annuity in question was a divestment due to its failure to name the State of Michigan a remainder beneficiary.

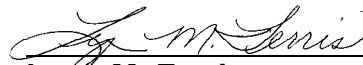
DECISION AND ORDER

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. The Department shall remove the divestment penalty it imposed and shall reprocess the Petitioner's [REDACTED] application and determine the MA benefits he is eligible to receive.
2. The Department shall notify the Petitioner and the Petitioner's attorney of its written determination.

LMF/jaf



Lynn M. Ferris

Administrative Law Judge

for Nick Lyon, Director

Department of Health and Human Services

NOTICE OF APPEAL: A party may appeal this Order in circuit court within 30 days of the receipt date. A copy of the circuit court appeal must be filed with the Michigan Administrative Hearing System (MAHS).

A party may request a rehearing or reconsideration of this Order if the request is received by MAHS within 30 days of the date the Order was issued. The party requesting a rehearing or reconsideration must provide the specific reasons for the request. MAHS will not review any response to a request for rehearing/reconsideration.

A written request may be mailed or faxed to MAHS. If submitted by fax, the written request must be faxed to (517) 335-6088; 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

DHHS

[REDACTED]

Counsel for Respondent

[REDACTED]

Petitioner

[REDACTED]

Counsel for Petitioner

[REDACTED]

cc:

[REDACTED]