RICK SNYDER GOVERNOR

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

SHELLY EDGERTON



Date Mailed: September 6, 2016 MAHS Docket No.: 16-009002

Agency No.:

ADMINISTRATIVE LAW JUDGE: Zainab A. 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 August 29, 2016, from Detroit, Michigan. The Petitioner appeared for the hearing and represented herself. The Department of Health and Human Services (Department) was represented by Eligibility Specialist.

ISSUE

Did the Department properly close Petitioner's Medical Assistance (MA) case?

FINDINGS OF FACT

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

- 1. Petitioner was an ongoing recipient of MA benefits. In connection with a redetermination, Petitioner's eligibility to receive MA was reviewed.
- On October 13, 2015, the Department sent Petitioner a Redetermination for her MA case that was to be completed and returned to the Department by November 2, 2015. (Exhibit A)
- On June 13, 2016, the Department sent Petitioner a Health Care Coverage Determination Notice (Notice) informing her that effective July 1, 2016, her MA case would be closed on the basis that she failed to verify or allow the Department

to verify information necessary to determine eligibility for the MA program. (Exhibit B)

4. On June 23, 2016, Petitioner requested a hearing disputing the Department's actions.

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.

The Department must periodically redetermine an individual's eligibility for active programs. The redetermination process includes a thorough review of all eligibility factors. BAM 210 (October 2015/January 2016), p. 1. Unless otherwise specified by Department policy, a client must complete a redetermination at least every 12 months in order for the Department to determine the client's continued eligibility for benefits. BAM 210, p. 1. A redetermination packet is considered complete when all sections of the redetermination form including the signature section are completed. BAM 210, p. 10. . For MA cases, verifications are due the same date as the redetermination. The Department allows a client a full 10 calendar days from the date the verification is requested (date of request is not counted) to provide all documents and information. Bridges gives timely notice of the negative action if the time limit is **not** met. MA benefits stop at the end of the benefit period unless a redetermination is completed, requested verifications are received and a new benefit period is certified. BAM 210, p. 2. The Department will provide the client with timely notice of the negative action if the time limit is not met. BAM 210, p. 14; BAM 220 (October 2015/April 2016).

In this case, the Department testified that it did not receive a completed redetermination from Petitioner prior to the due date and prior to the end of the benefit period. The Department stated that it also did not receive any communication from Petitioner concerning the redetermination and that as of the hearing date, the redetermination had not been completed. The Department testified that when it realized that Petitioner's MA case was still open incorrectly, it sent her a June 13, 2016, Health Care Coverage

Determination Notice timely advising of the case closure effective July 1, 2016. (Exhibit B). At the hearing, Petitioner did not assert that she completed and timely submitted the redetermination to the Department. Petitioner stated that she received a letter from the Department in June 2016 advising her that she was approved and eligible for MA, however, Petitioner did not present the letter for review at the hearing and a search of the Department's correspondence during the hearing by the Department representative present indicated that the Department had not issued any MA eligibility notices other than the one dated June 13, 2016.

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 although the Department acted late, the Department acted in accordance with Department policy when it closed Petitioner's MA case and provided her with timely notice of the pending action. Petitioner is informed that she is entitled to submit a new application for MA benefits and have her MA eligibility determined.

DECISION AND ORDER

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

ZB/tlf

Zainab A. Baydoun
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	
Petitioner	
Via Electronic Mail:	