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

SHELLY EDGERTON DIRECTOR



Date Mailed: December 21, 2016 MAHS Docket No.: 16-014157 Agency No.: Petitioner:

ADMINISTRATIVE LAW JUDGE: Gary Heisler

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 December 1, 2016, from Lansing, Michigan. Petitioner was represented by herself. The Department was represented by Assistance Payments Supervisor **Department**'s Exhibit A, pages 1-29 was admitted into evidence.

<u>ISSUE</u>

Did the Department properly determine Petitioner's Medical Assistance (MA) eligibility on February 22, 2016?

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 Medical Assistance (MA) benefits.
- 2. On December 7, 2015, Petitioner submitted a Medical Assistance (MA) application with a new address. Petitioner's household consisted of herself, her 22 year old son, her 19 year old daughter and her 17 year old daughter. All of the children had completed high school and were employed. Petitioner claimed her two daughters as tax dependents.
- 3. On December 15, 2015, a Medical Assistance (MA) Redetermination (DHS-1010) was mailed to Petitioner at her old address.

- 4. On December 16, 2015, the Department updated Petitioner's address and began processing Petitioner's application.
- 5. On February 1, 2016, two of Petitioner's children were no longer living with her.
- 6. On February 17, 2016, Petitioner's youngest daughter turned 18 years old.
- 7. On February 22, 2016, Petitioner was sent a Health Care Coverage Determination Notice (DHHS-1606) which stated Petitioner's two daughters were approved but Petitioner was not eligible from February 1, 2016 ongoing.
- 8. Because Petitioner was no longer the parent care taker of minor children, her Department case worker felt she should be evaluated for Health Michigan Plan (HMP) coverage. A ticket was generated to have Petitioner's eligibility re-evaluated.
- 9. On March 1, 2016, Petitioner's third child was no longer in the household.
- 10. Petitioner did not reapply or request a hearing about her Medical Assistance (MA) eligibility because the Department assured her that it would be resolved by the ticket.
- 11. On July 8, 2016, the ticket was resolved. Based on the group composition information from the December 15, 2015 application, Petitioner's ineligibility from February 1, 2016 ongoing was determined to be correct.
- 12. On August 16, 2016, after several discussions with the Department's local office, Petitioner submitted a new Medical Assistance (MA) application. Retroactive coverage was limited to May 1, 2016.
- 13. On August 22, 2016, the local office requested waiver to approve Petitioner back to March 1, 2016 based on the fact that no children were in the home from then on. The waiver request was denied.
- 14. On September 19, 2016, Petitioner submitted this hearing request. The local office's assurance to Petitioner that her Medical Assistance (MA) eligibility would be resolved favorably, constitutes good cause for not submitting the hearing request within the 90 day time limit after the February 22, 2016 Health Care Coverage Determination Notice (DHHS-1606).

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, Petitioner's February 22, 2016, Medical Assistance (MA) eligibility determination was based on incorrect information. The July 8, 2016 determination that the eligibility determination was correct, was also based on incorrect information.

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 made Petitioner's February 22, 2016 Medical Assistance (MA) eligibility determination.

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:

Reinstate Petitioner's December 15, 2015 Medical Assistance (MA) application and process it in accordance with Department policy to include issuing current notice of her Medical Assistance (MA) eligibility from March 1, 2016 ongoing.

GH/nr

Gafy Heisler 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).

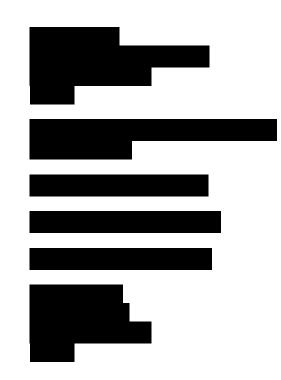
A party may request a rehearing or reconsideration of this Order if the request is received by MAHS within 30 days of the date the Order was issued. The party requesting a rehearing or reconsideration must provide the specific reasons for the request. MAHS will not review any response to a request for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