



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: March 16, 2016  
MAHS Docket No.: 16-000483  
Agency No.: [REDACTED]  
Petitioner: [REDACTED]

**ADMINISTRATIVE LAW JUDGE: Jacquelyn A. McClinton**

**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 March 9, 2016, from Detroit, Michigan. The Petitioner was represented by Petitioner. The Department of Health and Human Services (Department) was represented by [REDACTED]

**ISSUE**

Did the Department properly close Petitioner's Medical Assistance (MA) benefits effective January 1, 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 MA benefits.
2. On [REDACTED], the Department sent Petitioner a Redetermination which was required to be returned on or before [REDACTED].
3. Petitioner did not return the Redetermination.
4. On [REDACTED], the Department sent Petitioner a Health Care Coverage Determination Notice notifying her that MA benefits for the group would close effective [REDACTED], due to her failure to submit the redetermination.

5. On [REDACTED], the Department received a request for hearing from Petitioner protesting the Department's action.

### **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.

Additionally, the Department is required to periodically redetermine or renew an individual's eligibility for active programs. The redetermination process includes thorough review of all eligibility factors. BAM 210 (July 2014), p. 1. In this case, the Department indicated that it mailed a Redetermination to Petitioner on [REDACTED]

[REDACTED] The Redetermination was required to be completed and returned by [REDACTED]. Petitioner did not return the Redetermination by the required due date. The Department indicated that because Petitioner failed to return the Redetermination, it sent Petitioner a Health Care Coverage Determination Notice which informed Petitioner that effective [REDACTED], the group's MA benefits would close.

The proper mailing and addressing of a letter creates a presumption of receipt which may be rebutted by evidence. *Stacey v Sankovich*, 19 Mich App 638 (1969); *Good v Detroit Automobile Inter-Insurance Exchange*, 67 Mich App 270 (1976). Petitioner testified that she did not receive the Redetermination. Petitioner further testified that she has been experiencing issues with her mail which include her mail being delivered to the incorrect address. Petitioner further testified that she attempted to contact her caseworker upon receipt of the Health Care Coverage Determination, but, never received any contact back.

Based on the foregoing information and evidence, the Department did not act in accordance with Department policy when it closed Petitioner's MA benefits effective [REDACTED]. It is found that Petitioner rebutted the presumption of proper mailing. The undersigned finds Petitioner's testimony credible that she never received the redetermination. As such, the evidence established that because Petitioner never received the redetermination in November 2015, she was unable to submit the form by the due date. Because the Petitioner rebutted the presumption of proper mailing, the

Department improperly closed Petitioner's MA benefits [REDACTED], in accordance with Department policy. See BAM 210, pp. 1-11 (October 2015). Petitioner has therefore established good cause for failing to submit the Redetermination.

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 policy when it closed Claimant's MA benefits effective [REDACTED]

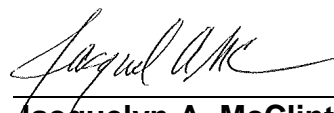
### **DECISION AND ORDER**

Accordingly, the Department's MA 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. Reinstate Petitioner and her group member's MA benefits effective [REDACTED]
2. Redetermine their MA eligibility for [REDACTED], ongoing;
3. Issue supplements to Petitioner for any MA benefits she was eligible to receive but did not from [REDACTED], ongoing; and
4. Notify Petitioner of its decision.

JM/hw



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**Jacquelyn A. McClinton**

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]

[REDACTED]

**Petitioner**

[REDACTED]