



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 31, 2016
MAHS Docket No.: 16-001352
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Aaron McClintic

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 23, 2016, from Lansing, Michigan. The Petitioner was represented by [REDACTED] from [REDACTED]. The Department of Health and Human Services (Department) was represented by [REDACTED], [REDACTED] and [REDACTED]. [REDACTED] also testified for the Department.

ISSUE

Did the Department properly deny Petitioner's application for Medicaid?

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's Authorized Representative [REDACTED] submitted a Retroactive Medicaid application on April 30, 2015.
2. Petitioner's Authorized Representative [REDACTED] submitted a Health Care Coverage application on May 11, 2015, with Petitioner's signature.
3. The Department refused to process the May 11, 2015, application because it was not signed by the Petitioner and the Department contends that the "Authorization for Release of Information" does not give [REDACTED] the authority to apply on behalf of the Petitioner.

4. Petitioner signed a document titled "Authorization for Release of Information" on January 6, 2015. This document is in Spanish, the translated English version is in the record.
5. The "Authorization for Release of Information" contains the following clause: "Under this release, I acknowledge that upon action by [REDACTED] to seek assistance on my behalf, [REDACTED] is acting on my behalf and is authorized to do so up to and including an appeal of my request for benefits."

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, [REDACTED] had the authority to file an application on behalf of Petitioner pursuant to the "Authorization for Release of Information" signed on January 6, 2015. Specifically, that form contained the following clause: "Under this release, I acknowledge that upon action by [REDACTED] to seek assistance on my behalf, [REDACTED] is acting on my behalf and is authorized to do so up to and including an appeal of my request for benefits." This clause was adequate to give [REDACTED] the authority to file the May 11, 2015 application and the April 30, 2015 retroactive application. The Department's refusal to process the applications because [REDACTED] did not have the authority to act on behalf of the Petitioner was improper and incorrect. The Department argued that the form submitted usually is accompanied by another form specifically titled "Authorization to Represent" and questioned why that was standard practice if the Release served that purpose as well. The Department also alleged that the "Authorization for Release of Information" expired because there is a clause that allows for renewals every 60 days. Nothing in the "Authorization for Release of Information" requires that it be renewed every 60 days.

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 failed to process Petitioner's application for Medicaid. The Department raised issues with regard to the timeliness of Petitioner's request for hearing. The denial was never sent to [REDACTED] despite them being Authorized Representative so the request was timely.

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. Reinstate and reprocess Petitioner's application for Medicaid going back to the date of application.
2. Award MA benefits if Petitioner is found eligible.

AM/las



Aaron McClintic

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]

Counsel for Complainant

[REDACTED]

Petitioner

[REDACTED]