



RICK SNYDER  
GOVERNOR

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

SHELLY EDGERTON  
DIRECTOR

[REDACTED]  
[REDACTED]  
[REDACTED]

Date Mailed: June 3, 2016  
MAHS Docket No.: 16-004093  
Agency No.: [REDACTED]  
Petitioner: [REDACTED]

**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 May 9, 2016, from Detroit, Michigan. The Petitioner appeared for the hearing and represented himself. The Department of Health and Human Services (Department) was represented by [REDACTED], Hearings Facilitator.

**ISSUE**

Did the Department properly close Petitioner's Medical Assistance (MA) case on the basis that he failed to return a redetermination?

**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 MA eligibility was reviewed.
2. On December 15, 2015, the Department sent Petitioner a Redetermination for his MA case that was to be completed and returned to the Department by January 4, 2016. (Exhibit A)
3. On January 22, 2016, the Department sent Petitioner a Health Care Coverage Determination Notice (Notice) informing him that effective March 1, 2016, his MA

case would be closed on the basis that he failed to return the redetermination. (Exhibit B)

4. On March 21, 2016, the Department received Petitioner's completed Redetermination. (Exhibit A)
5. On March 23, 2016, Petitioner requested a hearing disputing the Department's closure of his MA case.

### **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 (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, 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.

In this case, the Department testified that because it did not receive a completed redetermination form from Petitioner by the January 4, 2016, due date and because it did not receive any contact from Petitioner concerning the redetermination prior to the due date, it sent Petitioner a Notice informing him that effective March 1, 2016, his MA case would be closed due to a failure to return the redetermination. BAM 210, p. 14; (Exhibit A; Exhibit B). The Department confirmed receiving Petitioner's completed redetermination on March 21, 2016, however, his case had already closed.

At the hearing, Petitioner confirmed receiving the Redetermination but stated that he did not receive it until mid-January 2016. Petitioner stated that he lives in his father's home and that his father spends winters in [REDACTED] and has all the mail (including Petitioner's) forwarded to [REDACTED]. Petitioner stated that his father sends him the mail once a month. Petitioner confirmed that he did not notify the Department of the mail delay, that his mail was being forwarded to [REDACTED] and that he did not provide the Department with an updated mailing address.

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 because the Department did not receive the Redetermination prior to the due date or the end of the benefit period, the Department acted in accordance with Department policy when it closed Petitioner's MA case. Petitioner was informed that he was entitled to submit a new application for MA benefits.

#### **DECISION AND ORDER**

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

ZB/tlf



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**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

[REDACTED]

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