



RICK SNYDER
GOVERNOR

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

SHELLY EDGERTON
DIRECTOR

[REDACTED]

Date Mailed: March 1, 2017
MAHS Docket No.: 16-018944
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 January 30, 2017, from Detroit, Michigan. The Petitioner was represented by Petitioner. Petitioner's wife and group member, [REDACTED] also attended the hearing. The Department of Health and Human Services (Department) was represented by [REDACTED], Eligibility Specialist, [REDACTED], Family Independence Manager, and [REDACTED], Family Independence Manager.

ISSUE

Did the Department properly deny Petitioner's [REDACTED] application for MA benefits?

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 and his wife applied for MA benefits on [REDACTED].
2. On [REDACTED], the Department sent Petitioner a Health Care Coverage Supplemental Questionnaire which was required to be returned on or before [REDACTED].
3. The Department erroneously believed that it did not receive the questionnaire and on [REDACTED], sent Petitioner a Health Care Coverage Determination

Notice which notified Petitioner that the [REDACTED] application for MA benefits had been denied.

4. On [REDACTED], Petitioner filed a Request for 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.

In this case, Petitioner and his wife applied for benefits on [REDACTED]. It should be noted that a prior application was submitted relating to MA benefits for Petitioner's wife only. The Department approved Petitioner's wife for Emergency Services Only. The decision by the Department to grant Emergency Services Only was not appealed within 90 days, and therefore on the [REDACTED] application for MA benefits will not be addressed in this decision.

The Department testified that on [REDACTED], it sent Petitioner a Health Care Coverage Supplemental Questionnaire, which was due to be completed and returned on or before [REDACTED]. The DHS-1004, Health Care Coverage Supplemental Questionnaire, is used to gather additional information when the applicant indicates a disability on the DCH-1426. BEM 105 (October 2016), p. 3.

The Department indicated that Petitioner returned the document but failed to sign the document, and as a result, it was not valid. The Department stated because Petitioner attempted to timely return the document, it sent a second Health Care Coverage Supplemental Questionnaire to Petitioner on [REDACTED]. The Department believed that it did not receive the questionnaire and as a result denied Petitioner's application for MA benefits on [REDACTED]. The Department acknowledged at the hearing that the questionnaire had been received. However, as of the date of the hearing, Petitioner's [REDACTED] application had not been reprocessed.

DECISION AND ORDER

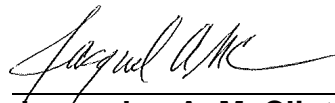
The Administrative Law Judge, based on the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, if any, finds that the Department did not act in accordance with Department policy when it denied Petitioner's [REDACTED] application for MA benefits.

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. Reregister and reprocess Petitioner's [REDACTED] application for MA benefits;
2. Issue supplements Petitioner was entitled to receive but did not; and
3. Notify Petitioner in writing of its decision.

JM/hw



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]