RICK SNYDER GOVERNOR

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

SHELLY EDGERTON



Date Mailed: August 11, 2017 MAHS Docket No.: 17-006771

Agency No.:
Petitioner:

ADMINISTRATIVE LAW JUDGE: Carmen G. Fahie

## **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; 42 CFR 438.400 to 438.424; 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 July 13, 2017, from Lansing, Michigan. The Petitioner was represented by himself. The Department of Health and Human Services (Department) was represented by Eligibility Specialist, and Family Independence Manager.

### <u>ISSUE</u>

Did the Department properly determine Petitioner's eligibility for Medical Assistance (MA)?

#### 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 hospitalized in October 2016
- 2. On October 4, 2016, the Department received an application for MA for Petitioner.
- 3. On October 14, 2016, Petitioner applied for Food Assistance Program (FAP) and State Disability Assistance (SDA).
- 4. On October 25, 2016, the Department sent Petitioner a Health Care Coverage Determination Notice that he was eligible for MA from October 1, 2016, ongoing

that was sent to his address at Department Exhibit 1, pgs.4-6.

- 5. On April 28, 2017, Petitioner called the Department requesting that his MA case be closed.
- 6. On April 28, 2017, the Department sent Petitioner a Health Care Coverage Determination Notice, that he his MA case would be closed on June 1, 2017, that was sent to his address at Department Exhibit 1, pgs.7-9.
- 7. On May 12, 2017, the Department received a hearing request from Petitioner, contesting the Department's negative 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.

In this case, Petitioner was hospitalized in October 2016. On October 4, 2016, the Department received an application for MA for Petitioner. On October 14, 2016, Petitioner applied for Food Assistance Program (FAP) and State Disability Assistance (SDA). On October 25, 2016, the Department sent Petitioner a Health Care Coverage Determination Notice that he was eligible for MA from October 1, 2016, ongoing that was sent to his address at Department Exhibit 1, pgs.4-6. On April 28, 2017, Petitioner called the Department requesting that his MA case be closed. On April 28, 2017, the Department sent Petitioner a Health Care Coverage Determination Notice, that his MA case would be closed on June 1, 2017, that was sent to his address at Department Exhibit 1, pgs.7-9. On May 12, 2017, the Department received a hearing request from Petitioner, contesting the Department's negative action.

During the hearing, Petitioner said that he did not know that the hospital applied for him while he was there. He did not participate with any information, but when he applied on October 14, 2016, for FAP and SDA he submitted the required verification to determine his edibility for MA. Petitioner was put on notice on October 25, 2016, that he had been

approved for MA. His address is the same and no notice was returned to the Department.

Petitioner has been hospitalized several times and the hospital fills out an MA application for him while he is hospitalized because he does not have insurance. After he receives the notice that he was approved for MA, he contacts the Department and requests that they close his MA case. Petitioner would rather the hospital's charitable foundation cover his medical bills rather than MA. However, that is between him and the hospital and outside the jurisdiction of the Administrative Law Judge and the Department. The Department is required to process every application that is submitted and the hospital is allowed to apply for MA for Petitioner to cover his medical bills since he does not have any insurance. The Department gave Petitioner proper notice that he had been approved for MA with the notice sent to him on October 25, 2016. He could have called then and request his case to be closed, but he did not request his case be closed timely until April 28, 2017.

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 acted in accordance with Department policy when it determined that Petitioner was eligible for MA from October 1, 2016, through June 1, 2017.

# **DECISION AND ORDER**

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

Carmen G. Fahie

Administrative Law Judge for Nick Lyon, Director Department of Health and Human Services

Cormon II. Salvie

CF/md

**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

