



RICK SNYDER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
MICHIGAN ADMINISTRATIVE HEARING SYSTEM

SHELLY EDGERTON  
DIRECTOR

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Date Mailed: August 18, 2017  
MAHS Docket No.: 17-007079  
Agency No.: ██████████  
Petitioner: ██████████

**ADMINISTRATIVE LAW JUDGE:** Christian Gardocki

**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 July 26, 2017, from Detroit, Michigan. Petitioner appeared and was represented by ██████████ ██████████ Petitioner's authorized hearing representative (AHR). The Michigan Department of Health and Human Services (MDHHS) was represented by ██████████, manager.

**ISSUE**

The issue is whether MDHHS properly terminated Petitioner's Medical Assistance (MA) eligibility.

**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 Medicaid recipient through the AD-Care category.
2. Petitioner's MA benefit period was through January 2017.
3. On December 5, 2016, MDHHS mailed Petitioner a Redetermination to Petitioner's last reported address.
4. On January 25, 2017, MDHHS initiated termination of Petitioner's MA eligibility, effective March 2017.
5. Petitioner failed to return the Redetermination or supporting documents to MDHHS before the effective date of the Medicaid closure.

6. On March 30, 2017, Petitioner's AHR requested a hearing to dispute the termination of MA benefits.

### **CONCLUSIONS OF LAW**

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. MDHHS (formerly known as the Family Independence Agency) administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.105-.112k. MDHHS policies are contained in the Bridges Administrative Manual (BAM), Bridges Eligibility Manual (BEM), and Reference Tables Manual (RFT).

Petitioner requested a hearing to dispute a termination of MA eligibility, effective March 2017. MDHHS presented a Health Care Coverage Determination Notice (Exhibit 1, pp. 1-3) dated January 25, 2017. The notice stated Petitioner's MA eligibility would end beginning March 2017 due to a failure to provide information. MDHHS testimony clarified Petitioner's failure was to submit redetermination documents.

The Michigan Department of Health and Human Services must periodically redetermine or renew an individual's eligibility for active programs. BAM 210 (January 2017), p. 1. The redetermination process includes thorough review of all eligibility factors. *Id.*

A complete redetermination/renewal is required at least every 12 months. *Id.*, p. 2. Bridges sets the redetermination date according to benefit periods... *Id.*

[For all programs,] Bridges generates a redetermination packet to the client three days prior to the negative action cut-off date in the month before the redetermination is due. *Id.*, p. 7. Redetermination/renewal forms may include... a Redetermination DHHS-1010.... *Id.* [For the MA program,] benefits stop at the end of the benefit period unless a renewal is completed and a new benefit period is certified. *Id.*, p. 2.

MDHHS presented two pages of a blank Redetermination (Exhibit 1, p. 4-5) dated December 5, 2016. MDHHS presented the form to establish that it was mailed to Petitioner. It was not disputed that Petitioner did not return the form to MDHHS.

Petitioner's AHR testified that Petitioner began to live in an adult-foster-care (AFC) facility on December 9, 2016. Petitioner's AHR also testified that Petitioner's change in address was reported shortly thereafter to the Social Security Administration. Petitioner's testimony implied a contention that MDHHS mailed the Redetermination and/or notice of termination to an improper address.

MDHHS is a state agency; SSA is a federal agency. Though the agencies are known to exchange information, a reporting to one agency does not equate to a reporting to both. Thus, Petitioner's AHR's reported change in address to SSA may not be interpreted as a reporting to MDHHS. Petitioner's AHR conceded that a reporting to MDHHS did not occur until after Petitioner's case closed due to Petitioner's failure to return redetermination documents.

It is found Petitioner failed to timely return a completed Redetermination to MDHHS. Accordingly, it is found MDHHS properly terminated Petitioner's MA eligibility.

Petitioner's AHR was informed during the hearing that Petitioner can always reapply if Medicaid eligibility is still needed. Petitioner was further advised that retroactive MA benefits are available for 3 months before an application date.

It is notable that MDHHS testimony indicated an intent to reinstate Petitioner's MA eligibility from the date of closure. Nothing within this order prevents MDHHS from doing so, however, this administrative decision does not order MDHHS to perform such an action.

### **DECISION AND ORDER**

The administrative law judge, based upon the above findings of fact and conclusions of law, finds that MDHHS properly terminated Petitioner's MA eligibility, effective March 2017, due to Petitioner's failure to return a Redetermination. The actions taken by MDHHS are **AFFIRMED**.

CG/hw



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**Christian Gardocki**

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]  
[REDACTED]  
[REDACTED]

**Authorized Hearing Rep.**

[REDACTED]  
[REDACTED]  
[REDACTED]

**Petitioner**

[REDACTED]  
[REDACTED]  
[REDACTED]