



RICK SNYDER
GOVERNOR

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

SHELLY EDGERTON
DIRECTOR

[REDACTED]
[REDACTED]
[REDACTED]

Date Mailed: March 14, 2018
MAHS Docket No.: 18-000192
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Lynn M. Ferris

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 three way telephone hearing was held on March 1, 2018, from Detroit, Michigan. The Petitioner was represented by [REDACTED], her Authorized Hearing Representative (AHR). The Department of Health and Human Services (Department) was represented by [REDACTED], Family Independence Manager and [REDACTED], Eligibility Specialist.

At the hearing, the Petitioner's AHR testified that he had previously faxed the Michigan Administrative Hearing System on February 28, 2018 a 23 page fax which included Letters of Guardianship authorizing the AHR to represent the Petitioner. The undersigned had received only 3 pages of a 23 page fax at the time of the hearing. The undersigned Administrative Law Judge proceeded with the hearing with the understanding that the Petitioner's AHR would refax the documents regarding his guardianship for Petitioner and that no hearing decision would be issued until the guardianship authority was received. The Letters of Guardianship were received and confirm the Petitioner's AHR's status as her Guardian.

ISSUE

Did the Department properly close the Petitioner's Long Term Case Medical Assistance benefits due to failure to complete the 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. The Department sent a redetermination for Long Term Medicaid on November 4, 2017 which was due December 1, 2017/. Exhibit A, p.5.

2. A Verification Checklist (VLC) was sent to the Petitioner on December 4, 2017 with a December 14, 2017 due date. Exhibit A, p.6.
3. The VCL requested a gross current Pension Statement.
4. The Petitioner's AHR had to obtain the Pension Statement from [REDACTED] and had difficulty with obtaining the statement.
5. The Department issued a Health Care Coverage Determination Notice on December 28, 2017 closing the Petitioner's Medicaid effective February 1, 2018 due to failure to return (verify) assets regarding the Pension Statement from the [REDACTED]
6. The Petitioner requested a timely hearing on January 8, 2018 protesting 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, the Department closed the Petitioner's Medicaid for Long Term Care when the Petitioner's AHR was unable to provide the Petitioner's income statement for a pension from the [REDACTED] by the verification due date or before the Petitioner's case closed. Even though he diligently tried to obtain the information, it was not made available and the Medicaid closed on February 1, 2018. Exhibit A.

The processing of redeterminations for Medical assistance must be completed in order to continue to receive Medicaid. A complete redetermination/renewal is required at least every 12 months. Bridges sets the redetermination/renewal date according to benefit periods; see Eligibility Decisions in BAM 115. BAM 210 (January 2018), p. 3.

Benefits stop at the end of the benefit period **unless** a redetermination is completed **and** a new benefit period is certified. If the client does not begin the

redetermination process, allow the benefit period to expire. BAM 210 (January 2018) p.

If the redetermination packet is not logged in by the last working day of the redetermination month, Bridges automatically closes the EDG. A DHS-1605 is not generated. If the client fails to return a complete DHS-2240A by the last day of the 12th month. Bridges will automatically close the case. If the client reapplies, treat it as a new application and Bridges will prorate the benefits. BAM 210 p. 13

Verifications are due the same date as the redetermination/review interview. When an interview is not required, verifications are due the date the packet is due.

Bridges allows clients a full 10 calendar days from the date the verification is requested (date of request is not counted) to provide all documents and information. If the tenth day falls on a weekend or holiday, the verification would not be due until the next business day. BAM 210, p. 17;

The Department is also required to obtain verifications of eligibility factors at redetermination. BAM 130 (April 2017), p. 1. The Department is required to send a case action notice when:

- The client indicates refusal to provide a verification, **or**
The time period given has elapsed. BAM 130, p. 9.

In this case, the Petitioner's AHR did not contest that the requested income statement for a pension from the █████ was not returned by the due date or before the Petitioner's case closed. However, it should be noted that the information was ultimately received and was pending an IRS review at the time of the hearing based upon a new application filed by Petitioner's AHR in January 2018. However, based upon the evidence presented at the hearing, it is determined that the Department properly closed the Petitioner's MA benefits due to failure to verify information by the due date.

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 failed to provide the request verification of pension income.

DECISION AND ORDER

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

LF/tm



Lynn M. Ferris
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]
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[REDACTED] [REDACTED]
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