



RICK SNYDER
GOVERNOR

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

SHELLY EDGERTON
DIRECTOR

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████████████████████, MI ██████████

Date Mailed: June 11, 2018
MAHS Docket No.: 18-003742
Agency No.: ██████████
Petitioner: ██████████

ADMINISTRATIVE LAW JUDGE: Amanda M. T. Marler

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 June 8, 2017, from Detroit, Michigan. The Petitioner was self-represented. The Department of Health and Human Services (Department) was represented by Laura Bensinger, Eligibility Specialist and Hearings Coordinator.

ISSUE

Did the Department properly close Petitioner's Application for Medical Assistance (MA) program 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. On November 2, 2016, the Department received Petitioner's Application for MA benefits.
2. In October or November 2017, the Department received Petitioner's completed Redetermination.
3. On November 2, 2017, the Department issued a Verification Checklist requesting proof of employment income by November 13, 2017.
4. Petitioner did not provide the Department with proof of income.

5. On March 2, 2018, the Department issued a Health Care Coverage Determination Notice (HCCDN) closing Petitioner's MA case effective April 1, 2018, for failure to provide proof of income.
6. On April 5, 2018, the Department received Petitioner's request for hearing disputing the closure of her 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.

In this case, the Department closed the Petitioner's MA case because she failed to provide proof of income as requested. Verification is usually required at application or redetermination and for a reported change affecting eligibility or benefit level. BAM 130 (April 2017), p. 1. All countable income is considered in determining MA eligibility. BEM 530 (July 2017), p. 2. To request verification of information, the Department sends a Verification Checklist (VCL) which tells the client what verification is required, how to obtain it, and the due date. BAM 130, p. 3. Although the client must obtain the required verification, the Department must assist if a client needs and requests help. BAM 130, pp. 3-4.

For MA cases, clients are given 10 calendar days to provide the verifications requested by the Department, and a client can request an extension of time to submit verification up to two extensions. BAM 130, p. 8. Verifications are considered to be timely if received by the date they are due. BAM 130, p. 8. The Department will send a case action notice when the client indicates refusal to provide a verification, or the time period given has elapsed. BAM 130, pp. 8.

In this case, Petitioner admits receiving the VCL and admits that she did not turn in the requested verifications. Petitioner's only explanation for her failure to provide the income information was because she was confused by the request. However, Petitioner only made one attempt to clarify its meaning but did not follow up with the Department when she failed to receive a response. Petitioner is under an obligation to

provide the requested documentation by the due date unless she asks for an extension. No evidence was presented that Petitioner requested an extension of the due date.

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 closed Petitioner's MA case for failure to provide the requested information.

DECISION AND ORDER

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



AM/

Amanda M. T. Marler
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) 763-0155; 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

Laura Bensinger
MDHHS-Eaton-Hearings

Petitioner

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