



GRETCHEN WHITMER
GOVERNOR

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

ORLENE HAWKS
DIRECTOR

[REDACTED]
[REDACTED]
[REDACTED], MI [REDACTED]

Date Mailed: January 11, 2019
MAHS Docket No.: 18-011603
Agency No.: [REDACTED]
Petitioner: [REDACTED]

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 December 11, 2018, from Lansing, Michigan. Petitioner was represented by herself, and her authorized representative, [REDACTED], [REDACTED]. The Department of Health and Human Services (Department) was represented by Shanna Ward, Eligibility Specialist.

ISSUE

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. On [REDACTED] [REDACTED] 2018, and [REDACTED] [REDACTED] 2018, Petitioner applied for MA. Department Exhibit 1, pgs. 4-105.
2. On [REDACTED] [REDACTED] 2018, the Department Caseworker sent Petitioner a Verification Checklist, DHS-3503, for required verification that was due on [REDACTED] [REDACTED] 2018. Department Exhibit 1, pgs. 4-105.
3. On [REDACTED] [REDACTED] 2018, Petitioner's MA case was incorrectly approved effective [REDACTED] [REDACTED] 2018 ongoing. Department Exhibit 1, pgs. 4-105.

4. On [REDACTED] [REDACTED] 2018, the Department Caseworker sent Petitioner a Verification Checklist, DHS 3503, for required verification that was due on [REDACTED] [REDACTED] 2018. Department Exhibit 1, pgs. 4-105.
5. On [REDACTED] [REDACTED] 2018, Petitioner's MA case was closed incorrectly for not being under 21, pregnant, or disabled effective [REDACTED], 2018. Department Exhibit 1, pgs. 4-105.
6. On [REDACTED] [REDACTED] 2018, the Department sent Petitioner a notice that her MA case was closed for failure to submit verifications effective [REDACTED] [REDACTED] 2018. Department Exhibit 1, pgs. 4-105.
7. Since Petitioner was not given appropriate due notice, the Department reinstated her MA from [REDACTED] 2018 through [REDACTED] 2018. Department Exhibit 1, pgs. 4-105.
8. On [REDACTED] [REDACTED] 2018, Petitioner applied for MA. Department Exhibit 1, pgs. 4-105.
9. On [REDACTED] [REDACTED] 2018, the Department Caseworker sent Petitioner a Verification Checklist, DHS-3503, for required verification that was due on [REDACTED] [REDACTED] 2018. Department Exhibit 1, pgs. 4-105.
10. On [REDACTED] [REDACTED] 2018, the Department sent Petitioner a notice that her MA case was denied for failure to submit verifications effective [REDACTED] [REDACTED] 2018. Department Exhibit 1, pgs. 4-105.
11. On September 27, 2018, the Department received a hearing request from Petitioner, contesting the Department's negative action. Department Exhibit 1, pgs. 4-105.
12. On [REDACTED], 2018, Petitioner applied for MA. Department Exhibit 1, pgs. 4-105.
13. On [REDACTED] [REDACTED] 2018, Petitioner was approved for MA retroactive to [REDACTED], 2018, ongoing and for the Medical Savings Program (MSP) for [REDACTED], 2018, because you are not eligible for MSP in the month that you apply. Department Exhibit 1, pgs. 4-105.

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 applied for MA on [REDACTED] [REDACTED] 2018, and [REDACTED] [REDACTED] 2018. On [REDACTED] [REDACTED] 2018, the Department Caseworker sent Petitioner a Verification Checklist, DHS-3503, for required verification that was due on [REDACTED] 2018. On [REDACTED] [REDACTED] 2018, Petitioner's MA case was incorrectly approved effective [REDACTED], 2018, ongoing. Department Exhibit 1, pgs. 4-105.

On [REDACTED] [REDACTED] 2018, the Department Caseworker sent Petitioner a Verification Checklist, DHS-3503, for required verification that was due on [REDACTED], 2018. On [REDACTED], 2018, Petitioner's MA case was closed incorrectly for not being under 21, pregnant, or disabled effective [REDACTED], 2018. On [REDACTED], 2018, the Department sent Petitioner a notice that her MA case was closed for failure to submit verifications effective [REDACTED], 2018. Since Petitioner was not given appropriate due notice, the Department reinstated her MA from [REDACTED] 2018 through [REDACTED] 2018. Department Exhibit 1, pgs. 4-105.

On [REDACTED], 2018, Petitioner applied for MA. On [REDACTED], 2018, the Department Caseworker sent Petitioner a Verification Checklist, DHS-3503, for required verification that was due on [REDACTED], 2018. On [REDACTED], 2018, the Department sent Petitioner a notice that her MA case was denied for failure to submit verifications effective [REDACTED], 2018. Department Exhibit 1, pgs. 4-105.

On [REDACTED], 2018, Petitioner applied for MA. On [REDACTED], 2018, Petitioner was approved for MA retroactive to [REDACTED], 2018, ongoing and for the Medical Savings Program (MSP) for [REDACTED], 2018, because you are not eligible for MSP in the month that you apply. Department Exhibit 1, pgs. 4-105. BAM 115, 130, 205, 210, and 220. BEM 163, 165, and 400.

During the hearing, Petitioner stated that she tried to comply, but was not sure what verifications the Department required to determine eligibility. A review of the Verification Checklists confirmed that they were not clear, which bank account the Department required to determine eligibility. The Department eventually got the required bank account verifications to determine Petitioner's eligibility for MA. She received MA during the contested time period, but not MSP for April 2018, and August through October 2018. The Department is ordered to redetermine eligibility for MSP for the contested months.

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 failed to satisfy its burden of showing that it acted in accordance with Department policy when it

determined the Petitioner's eligibility for MSP in [REDACTED] 2018, and [REDACTED] through [REDACTED] 2018.

Accordingly, the Department's decision is **AFFIRMED** for MA and **REVERSED** for MSP.

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 of initiating a redetermination of Petitioner's eligibility for MSP in April 2018, and August through October 2018.

Based on policy, the Department should provide Petitioner with written notification of the Department's revised eligibility determination and issue Petitioner any retroactive benefits she may be eligible to receive, if any.



CF/hb

Carmen G. Fahie
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

Amber Gibson
5303 South Cedar
PO BOX 30088
Lansing, MI 48911

Ingham County, DHHS

BSC2 via electronic mail

D. Smith via electronic mail

EQADHShearings via electronic mail

Petitioner

[REDACTED]
[REDACTED]
[REDACTED] MI [REDACTED]

Authorized Hearing Rep.

[REDACTED]
[REDACTED]
[REDACTED], MI [REDACTED]