



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
MICHIGAN OFFICE OF ADMINISTRATIVE HEARINGS AND RULES

ORLENE HAWKS
DIRECTOR

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

Date Mailed: June 27, 2019
MOAHR Docket No.: 19-003954
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 May 29, 2019, from Lansing, Michigan. Petitioner was represented by herself and her husband, [REDACTED]. The Department of Health and Human Services (Department) was represented by Krista Hainey, Family Independence Manager and Liliana Flores, Migrant Program Worker.

ISSUE

Did the Department properly determine that Petitioner was not eligible for Medical Assistance (MA) due to failure to provide verification?

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 applied for MA benefits on [REDACTED] [REDACTED] 2019. Department Exhibit 1, pgs. 1-6.
2. On March 15, 2019, the Department Caseworker sent the Petitioner, a Verification Checklist, DHS-3503, for required verification to determine eligibility for MA by March 25, 2019. Department Exhibit 1, pgs. 17-25.
3. On April 11, 2019, Petitioner filed a hearing request, protesting the Department's action.

4. On April 23, 2019, the Department Caseworker sent Petitioner, a Health Care Coverage Determination Notice, DHS-1606, that her MA application was denied for failure to provide verification. Department Exhibit 1, pgs. 26-30.

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 Petitioner applied for MA benefits on [REDACTED] 2019. Department Exhibit 1, pgs. 1-6. On March 15, 2019, the Department Caseworker sent Petitioner, a Verification Checklist, DHS-3503, for required verification to determine eligibility for MA by March 25, 2019. Department Exhibit 1, pgs. 17-25. Petitioner failed to provide the required verifications by the due date. On April 11, 2019, Petitioner filed a hearing request, protesting the Department's action. On April 23, 2019, the Department Caseworker sent Petitioner, a Health Care Coverage Determination Notice, DHS 1606, that her MA application was denied for failure to provide verification. Department Exhibit 1, pgs. 26-30. BEM 110, 111, 125, 126, 135, 163, and 166. BAM 130 and 220.

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 acted in accordance with Department policy when it denied the Petitioner's application for failure to provide required verifications to determine MA eligibility.

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

CF/hb



Carmen G. Fahie
Administrative Law Judge
for Robert Gordon, 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 Office of Administrative Hearings and Rules (MOAHR).

A party may request a rehearing or reconsideration of this Order if the request is received by MOAHR 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. MOAHR will not review any response to a request for rehearing/reconsideration.

A written request may be mailed or faxed to MOAHR. If submitted by fax, the written request must be faxed to (517) 763-0155; Attention: MOAHR Rehearing/Reconsideration Request.

If submitted by mail, the written request must be addressed as follows:

Michigan Office of Administrative Hearings and Rules
Reconsideration/Rehearing Request
P.O. Box 30639
Lansing, Michigan 48909-8139

DHHS

Cindy Tomczak
401 Eighth Street
PO Box 1407
Benton Harbor, MI 49023

Berrien County (District 22), DHHS

BSC3 via electronic mail

D. Smith via electronic mail

EQADHShearings via electronic mail

Petitioner

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