



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]

Date Mailed: June 18, 2019
MOAHR Docket No.: 19-004841
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Alice C. Elkin

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 13, 2019, from Detroit, Michigan. Petitioner appeared and represented himself. The Department of Health and Human Services (Department) was represented by [REDACTED], Hearing Facilitator.

ISSUE

Did the Department properly deny Petitioner's March 21, 2019 application for Medicaid (MA) and Medicare Savings Program (MSP) 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. Petitioner's MA and MSP cases closed effective October 1, 2018 because Petitioner had not timely returned a redetermination.
2. Beginning January 1, 2019, Petitioner received monthly Social Security benefits of [REDACTED], which was reduced by [REDACTED] for medical insurance premiums (Exhibit A, p. 13).
3. On March 21, 2019, Petitioner applied for MA and MSP benefits (Exhibit A, pp. 19-31).
4. On March 21, 2019, the Department sent Petitioner a Health Care Coverage Supplemental Questionnaire due on April 1, 2019 (Exhibit A, pp. 32-35).

5. On April 8, 2019, the Department sent Petitioner a Health Care Coverage Supplemental Questionnaire due on April 19, 2019.
6. On April 17, 2019, the Department sent Petitioner a Health Care Coverage Determination Notice notifying him that his application was denied because he failed to return the supplemental questionnaire (Exhibit A, pp. 40-42).
7. On April 30, 2019, Petitioner returned the completed supplemental questionnaire (Exhibit A, pp. 9-12).
8. On April 30, 2019, the Department received Petitioner's request for hearing disputing the denial of MA. Petitioner appointed his sister as his authorized hearing representative.

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.

Petitioner appeared at the hearing without his authorized hearing representative. At the commencement of the hearing, he stated he wished to proceed with a hearing without his representative and signed and submitted documentation indicating he no longer wished to have his sister as his authorized hearing representative. The hearing proceeded to address Petitioner's hearing request disputing the denial of his MA and MSP benefits.

The Department testified that Petitioner's application was denied because he failed to submit a completed healthcare coverage supplemental questionnaire prior to its April 19, 2019 due date. When asked to identify the relevant information the Department sought to verify through the questionnaire, the Department explained that the questionnaire was required in order to verify Petitioner's assets. Petitioner, who is disabled, may be eligible for MA under on SSI-related category if he meets the eligibility criteria. BEM 105 (April 2017), pp. 1, 4-6; BEM 163 (July 2017), pp. 1-2; BEM 166 (April 2017), pp. 1-2. One of the eligibility criteria is having countable assets that do not

exceed the asset limit. BEM 163, p. 1; BEM 166, p. 1; BEM 400 (April 2019), pp. 6-8. A client must provide verification at application when required by Department policy and an application is denied when the time period to provide verification lapses. BAM 130 (April 2017), pp. 1, 8.

The Department initially sent the supplemental questionnaire on March 21, 2019, with an April 1, 2019 due date; a second copy of the questionnaire was sent on April 8, 2019 with an April 19, 2019 due date. The Department testified that it did not receive verification of assets through the supplemental questionnaire until April 30, 2019 (Exhibit A, pp. 9-11). Although the client comments on the form indicate that the questionnaire had previously been filled out twice (Exhibit A, p. 12), Petitioner was unable to provide any testimony at the hearing to dispute the Department's testimony and establish that the form was completed and submitted to the Department prior to the April 30, 2019. At the hearing, the Department testified that, because the questionnaire was timely received with respect to the April 26, 2019 MA and MSP application Petitioner had submitted, that application was processed and Petitioner was approved for MA effective April 1, 2019 and MSP benefits under the Qualified Medicare Beneficiary (QMB) program effective May 1, 2019.

However, because the supplemental questionnaire was not timely received with respect to the March 21, 2019 application, based the above Findings of Fact and Conclusions of Law, the Administrative Law Judge finds that the Department acted in accordance with Department policy when it denied Petitioner's March 21, 2019 MA and MSP application.

DECISION AND ORDER

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



AE/tm

Alice C. Elkin

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

[REDACTED]
[REDACTED]
[REDACTED]

Petitioner

[REDACTED]
[REDACTED]

cc:

[REDACTED]
[REDACTED]