



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: August 16 , 2019
MOAHR Docket No.: 19-006953
Agency No.: [REDACTED]
Petitioner: [REDACTED]

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 August 15, 2019, from Detroit, Michigan. The Petitioner was self-represented. The Department of Health and Human Services (Department) was represented by [REDACTED] Assistance Payments Worker Supervisor.

ISSUE

Did the Department properly close Petitioner's Medical Assistance (MA) Program benefits for failure to complete the Redetermination process?

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 May 4, 2019, the Department mailed a blank Redetermination form to Petitioner to be completed and returned to the Department by June 17, 2019.
2. On June 17, 2019, the Department had not received the completed Redetermination so a Health Care Coverage Determination Notice (HCCDN) was issued informing Petitioner that her MA benefits would close effective July 1, 2019 for failure to complete the Redetermination process.
3. On June 27, 2019, the Department received Petitioner's request for hearing disputing the closure of her MA benefits.

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 disputes the closure of her MA benefits for failure to complete the Redetermination process. A complete redetermination/renewal is required at least every 12 months. BAM 210 (April 2019), p. 3. In MA cases, benefits stop at the end of the benefit period unless a renewal is completed and a new benefit period is certified. BAM 210, p. 4. A redetermination/review packet is considered complete when all of the sections of the Redetermination form including the signature section are completed. BAM 210, p. 12. Verifications are due the same date as the Redetermination/renewal. BAM 210, p. 16. At renewal, the Department must provide 30 calendar days for the client to return the form. BAM 130 (April 2017), p. 8. Case action notices are sent when the client refuses to provide verification or the time period given has lapsed. *Id.* All notices from the Department are made to the client's address of record, and the client has the responsibility to check his/her mail and notify the Department of any changes in his/her mailing address. BAM 105 (January 2019), p. 12. Finally, the proper mailing and addressing of a letter creates a presumption of receipt which may be rebutted by evidence. *Stacey v Sankovich*, 173 NW2d 225 688 (1969); *Good v Detroit Automobile Inter-Insurance Exchange*, 241 NW2d 71 (1976); *Long-Bell Lumber Co v Nynam*, 108 NW 1019 (1906).

Petitioner admits that she received the Redetermination. She also admits that she returned pay stubs to the Department about five days after the Redetermination due date, but is uncertain whether she also returned the completed Redetermination. Since Petitioner did not return the required verifications or the Redetermination by the due date, the Department properly issued a HCCDN to Petitioner informing her of the closure of her MA benefits.

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 closed Petitioner's MA case for failure to complete the Redetermination process.

DECISION AND ORDER

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



AM/tm

Amanda M. T. Marler

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



Petitioner



cc:

