



RICK SNYDER
GOVERNOR

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

SHELLY EDGERTON
DIRECTOR

[REDACTED]
[REDACTED]
[REDACTED]

Date Mailed: December 14, 2018
MAHS Docket No.: 18-010949
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Jacquelyn A. McClinton

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, from Detroit, Michigan. Petitioner represented herself. The Department of Health and Human Services (Department) was represented by [REDACTED] Eligibility Specialist.

ISSUE

Did the Department properly determine that Petitioner was ineligible for Medical Assistance (MA) benefits effective November 1, 2018?

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 originally applied for MA benefits in 2017.
2. On December 13, 2017, the Department sent Petitioner a Verification Checklist (VCL) which requested that she provide proof of income for the preceding 30 days on or before December 26, 2017.
3. Petitioner failed to provide the proofs by the required due date.
4. The case worker assigned to Petitioner's case failed to close her case due the failure to timely submit verifications.
5. When Petitioner's case was assigned to a new worker, it was discovered that Petitioner failed to submit verifications.

6. On October 9, 2018, the Department sent Petitioner a Health Care Coverage Determination Notice which notified Petitioner that she was not eligible for MA benefits effective November 1, 2018.
7. On October 19, 2018, Petitioner filed a Request for Hearing disputing the Department's actions.

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.

Additionally, verification is usually required at application/redetermination **and** for a reported change affecting eligibility or benefit level. BAM 130 (April 2017), p. 1. In this case, Petitioner applied for benefits in 2017. The Department testified that on December 13, 2017, it sent Petitioner a VCL requesting that she verify her income for the preceding 30 days on or before December 26, 2017. Petitioner failed to submit the requested information. The Department is required to send a negative action notice when:

- The client indicates refusal to provide a verification, **or**
- The time period given has elapsed and the client has **not** made a reasonable effort to provide it. BAM 130, p. 7.

The Department indicated that Petitioner's assigned worker failed to timely close Petitioner's case. The Department testified that once Petitioner's case was assigned to a new worker and reviewed, it was determined that Petitioner failed to submit the requested verifications. As a result, the Department sent Petitioner a Health Care Coverage Determination Notice which notified her that she was ineligible for MA benefits effective November 1, 2018.

Petitioner confirmed that she received the VCL. Petitioner further confirmed that she failed to return the information requested by the Department. As such, the Department properly closed Petitioner's MA case. Petitioner reapplied for MA benefits on November

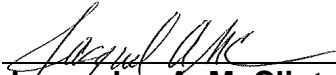
14, 2018 and her application was being processed by the Department at the time of the hearing.

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 determined Petitioner was no longer eligible for MA benefits effective November 1, 2018.

DECISION AND ORDER

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

JAM/tlf



Jacquelyn A. McClinton
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

Via Email:

[REDACTED]

Petitioner – Via First-Class Mail:

[REDACTED]