



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: February 11, 2019
MAHS Docket No.: 18-013142
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 February 11, 2019, from Detroit, Michigan. The Petitioner was self-represented and appeared with his mother, [REDACTED], as a witness. The Department of Health and Human Services (Department) was represented by Candice Bennis, Hearings Facilitator.

ISSUE

Did the Department properly deny Petitioner's application for Medical Assistance (MA) Program 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. On [REDACTED], 2018, Petitioner submitted an application for MA benefits.
2. On the same day, the Department issued a Health Care Coverage Supplemental Questionnaire (HCCSQ) to Petitioner with a due date of October 22, 2018.
3. On October 24, 2018, the Department issued a Health Care Coverage Determination Notice (HCCDN) to Petitioner informing him that his application for MA benefits had been denied for failure to return requested verifications (the HCCSQ).
4. On November 27, 2018, the Department received the completed HCCSQ.

5. On [REDACTED], 2018, the Department received a new application for MA benefits from Petitioner.
6. On December 7, 2018, the Department received Petitioner's request for hearing disputing the denial of MA benefits.
7. On December 14, 2018, the Department issued a HCCDN to Petitioner informing him that he was eligible for MA benefits, effective December 1, 2018, and Medicare Savings Program (MSP) benefits, effective January 1, 2019.

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's [REDACTED] application for MA benefits was denied because the Department did not receive Petitioner's completed HCCSQ by its due date, October 22, 2018. Petitioner and his mother testified that they submitted applications and forms to the Department multiple times but are unable to identify what they turned in and when. According to Department records, the HCCSQ was received by the Department on November 27, 2018, 36 days after it was due.

Policy provides that at application, the Department is required to verify household circumstances for things that affect eligibility or benefit level. BAM 130 (April 2017), p. 1. The Department is required to tell the client what verification is required, how to obtain it, and the due date. BAM 130, p. 3. In addition, the Department is required to provide the client with 10 calendar days to provide the requested verifications. BAM 130, p. 8. Case action notices are sent when a client indicates a refusal to provide a verification or the time period given for completing the verifications has lapsed. *Id.*

In this case, Petitioner had submitted an application the same day that the Department sought verification of circumstances with the HCCSQ. Therefore, its request to verify information was in accordance with policy. In addition, the Department explained on the form that Petitioner was required to complete the form, sign and date it, and return it by the due date of October 22, 2018, with proofs for each section of the form. Therefore, it explained what to do with the form and when it was due. Petitioner believes he

submitted this form on multiple occasions but is unable to identify the dates upon which he submitted it. Based upon testimony from his mother, Petitioner may have been submitting other applications or the HCCSQ, but she is uncertain what was submitted when. The only date that the Department has confirmed receipt of the HCCSQ was 36 days after the due date; and Petitioner has provided no proof such as a fax confirmation, email, date-stamped document, or other item showing when he submitted the form or if it was submitted at an earlier date. When forms are not submitted by the due date, the Department is required to deny the application. *Id.* Therefore, the Department has met its burden of proof in showing that it has acted in accordance with Department policy by deny his application.

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 Petitioner's application for MA benefits.

DECISION AND ORDER

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

AMTM/jaf



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 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

Deborah Little
MDHHS-Wayne-49-Hearings

Petitioner

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