



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 28, 2019
MOAHR Docket No.: 19-005267
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: John Markey

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 20, 2019, from Detroit, Michigan. Petitioner appeared and represented herself. The Department of Health and Human Services (Department) was represented by Lashawnda Starks, Eligibility Specialist. During the hearing, a 30-page packet of documents was offered and admitted into evidence as Exhibit A, pp. 1-30.

ISSUE

Did the Department properly deny Petitioner's [REDACTED] 2019 application for Medicaid (MA)?

Did the Department properly deny Petitioner's [REDACTED] 2019 application for Food Assistance Program (FAP) 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 applied for MA and FAP benefits on [REDACTED] 2019. Exhibit A, pp. 5-11.
2. On April 18, 2019, the Department issued to Petitioner a Verification Checklist informing Petitioner that she was required to submit documentation verifying multiple eligibility-related factors, including assets. Petitioner was required to return the verifications to the Department by April 29, 2019. Exhibit A, pp. 12-13.

3. From the time of the issuance of the April 18, 2019 Verification Checklist through the deadline of April 29, 2019, Petitioner did not provide any information to the Department nor did she request an extension of time.
4. On May 1, 2019, the Department issued to Petitioner a Notice of Case Action informing Petitioner that her FAP application was denied for failing to return verifications related to Petitioner's checking and savings accounts. Exhibit A, pp. 19-22.
5. On May 1, 2019, the Department issued to Petitioner a Health Care Coverage Determination Notice informing Petitioner that her MA application was denied for failing to return verifications related to Petitioner's checking and savings accounts. Exhibit A, pp. 24-27.
6. On ██████ 2019, Petitioner submitted to the Department a request for hearing objecting to the Department's denial of her FAP and MA applications.

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 Food Assistance Program (FAP) [formerly known as the Food Stamp program] is established by the Food and Nutrition Act of 2008, as amended, 7 USC 2011 to 2036a and is implemented by the federal regulations contained in 7 CFR 273. The Department (formerly known as the Department of Human Services) administers FAP pursuant to MCL 400.10, the Social Welfare Act, MCL 400.1-.119b, and Mich Admin Code, R 400.3001-.3011.

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 filed an application for FAP and MA benefits on ██████, 2019. The following day, the Department issued to Petitioner a Verification Checklist requesting, amongst other things, verifications with respect to Petitioner's checking and savings accounts. The verifications were due by April 29, 2019. Petitioner did not provide the verifications to the Department, so the Department denied Petitioner's application via a May 1, 2019 Notice of Case Action and May 1, 2019 Health Care

Coverage Determination Notice. Petitioner timely requested a hearing challenging the denials.

In order to be eligible for FAP benefits, a group must have countable assets of \$5,000 or less. BEM 400 (April 2019), p. 5. There are also asset limits for various MA programs as well. BEM 400, pp. 6-8. Verification is usually required at application/redetermination and for a reported change affecting eligibility or benefit level. BAM 130 (April 2017), p. 1. Additionally, the Department must obtain verification when information regarding an eligibility factor is unclear, inconsistent, incomplete, or contradictory. BAM 130, page 1. To request verification of information, the Department sends a verification checklist (VCL) which tells the client what verification is required, how to obtain it, and the due date. BAM 130, p. 3. The Department allows the client 10 calendar days (or other time limit specified in policy) to provide the verification that is required. BAM 130, p. 7. Verifications are considered to be timely if received by the date they are due. BAM 130, p. 7. The Department sends a negative action notice when: the client indicates a 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.

Petitioner submitted an application for FAP and MA benefits, and the Department appropriately issued to Petitioner a Verification Checklist detailing the information Petitioner needed to provide to the Department, the deadline for doing so, and the consequences for not doing so. By the time the deadline of April 29, 2019 came and went, Petitioner had made no effort to provide the requested documentation. Thus, the Department properly issued the May 1, 2019 Notice of Case Action and May 1, 2019 Health Care Coverage Determination Notice denying Petitioner's [REDACTED] 2019 application for FAP and MA benefits.

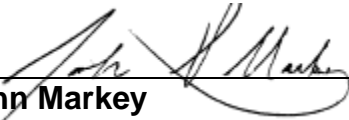
Petitioner testified during the hearing that she had already provided the requested information. However, Petitioner did not provide any evidence to substantiate her contention and further testified that her submissions were provided weeks prior to the application at issue in this case. As the submission came before the request and deals with accounts that are dynamic, the prior submission cannot be considered responsive to the subsequent request.

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 FAP and MA application for failure to timely respond to the Department's request for verifications.

DECISION AND ORDER

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

JM/cg



John Markey
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

Via Email:

MDHHS-Macomb-20-Hearings
M. Holden
D. Sweeney
D Smith
EQAD
BSC4- Hearing Decisions
MOAHR

Petitioner – Via First-Class Mail:

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