GRETCHEN WHITMER GOVERNOR STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS MICHIGAN OFFICE OF ADMINISTRATIVE HEARINGS AND RULES

ORLENE HAWKS DIRECTOR



Date Mailed: September 5, 2019 MOAHR Docket No.: 19-007420 Agency No.: Petitioner:

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 August 22, 2019 from Detroit, Michigan. Petitioner appeared and represented himself. Also appearing on behalf of Petitioner was **Exercise**. The Department of Health and Human Services (Department) was represented by Engrid Daniels, Family Independence Manager, and Andrea Jamison, Eligibility Specialist. During the hearing, an 18-page packet of documents was offered and admitted into evidence as Exhibit A, pp. 1-18.

ISSUE

Did the Department properly close Petitioner's Medicaid (MA) case, effective May 1, 2019?

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 was an ongoing recipient of MA benefits from the Department.
- 2. **Example 1**, Petitioner's brother, was designated as Petitioner's Authorized Representative with the Department.
- 3. On March 4, 2019, the Department issued to Petitioner a Redetermination form in order to gather relevant information regarding Petitioner's ongoing eligibility for MA

benefits. Petitioner was instructed to complete the form and return it to the Department by April 4, 2019. Exhibit A, pp. 5-12.

- 4. Petitioner did not receive the Redetermination form.
- 5. The Department did not send a copy of the Redetermination to Petitioner's Authorized Representative.
- 6. On April 19, 2019, the Department issued to both Petitioner and copy of a Health Care Coverage Determination Notice informing them that Petitioner was ineligible for MA benefits, effective May 1, 2019, as a result of Petitioner's failure to timely return the completed Redetermination form. Exhibit A, pp. 13-17.
- 7. On **Department**, 2019, Petitioner submitted to the Department a request for hearing objecting to the Department's April 19, 2019 Health Care Coverage Determination Notice.

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 was an ongoing recipient of MA benefits from the Department. Petitioner's brother, Derrek Jones, was designated as Petitioner's Authorized Representative (AR) for the purposes of communicating with the Department. On April 19, 2019, the Department issued to Petitioner and **Determination** a Health Care Coverage Determination Notice informing Petitioner that Petitioner's MA case was closing effective May 1, 2019, as a result of Petitioner's failure to return a completed Redetermination form in a timely manner. On **Determination**, 2019, the Department received a request for hearing objecting to the Department's action.

Benefits stop at the end of the benefit period unless a redetermination is completed and a new benefit period is certified. BAM 210 (April 2019), p. 4. To start the redetermination process, the Department issues to the client and the client's AR a redetermination packet that includes instructions on how to avoid the closure of the program and a due date. BAM 210, p. 8.

Petitioner's benefit period was set to expire on April 30, 2019. By that date, the redetermination process was not complete. Accordingly, the Department closed petitioner's MA benefits case, effective May 1, 2019.

That, however, does not end the inquiry. Petitioner was entitled to have the Redetermination form provided to his designated Authorized Representative, per Department policy. Petitioner prudently named an Authorized Representative to assist him in his dealings with the Department. Because the Department did not issue the Redetermination to Petitioner's Authorized Representative, Petitioner cannot be held responsible for the consequences of failing to timely return the completed form.

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 did not act in accordance with Department policy when it closed Petitioner's MA benefits case, effective May 1, 2019.

DECISION AND ORDER

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

THE DEPARTMENT IS ORDERED TO BEGIN DOING THE FOLLOWING, IN ACCORDANCE WITH DEPARTMENT POLICY AND CONSISTENT WITH THIS HEARING DECISION, WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:

- 1. Redetermine Petitioner's eligibility for FAP benefits for May 1, 2019, ongoing;
- 2. Ensure that all correspondence is properly provided to Petitioner's Authorized Representative at the correct address;
- 3. If Petitioner is eligible for additional benefits, promptly issue to Petitioner a supplement; and
- 4. Notify Petitioner in writing of its decisions.

JM/cg

Mark. 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-Wayne-57-Hearings D. Smith EQAD BSC4- Hearing Decisions MOAHR

Petitioner – Via First-Class Mail: