



GRETCHEN WHITMER
GOVERNOR

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

ORLENE HAWKS
DIRECTOR

[REDACTED], MI [REDACTED]

Date Mailed: October 16, 2019
MOAHR Docket No.: 19-009162
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 October 2, 2019 from Detroit, Michigan. Petitioner appeared and represented himself. The Department of Health and Human Services (Department) was represented by Bonita Drake, Eligibility Specialist, and Amy Gearhart, Assistance Payments Supervisor. During the hearing, a 19-page packet of documents was offered and admitted into evidence as Exhibit A, pp. 1-19, and a three-page packet of documents was offered and admitted into evidence as Exhibit 1, pp. 1-3.

ISSUE

Did the Department properly close Petitioner's Medicaid (MA) case under the Healthy Michigan Plan (HMP), effective August 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 under the HMP.
2. For three days from June 26, 2019 through June 28, 2019, Petitioner performed paid services for employment [REDACTED]. On July 6, 2019, Petitioner received a paycheck for his services for those three days. Exhibit 1, pp. 1-2.

3. On July 8, 2019, the Department issued to Petitioner a New Hire Client Notice. Petitioner was instructed to fill out the form and return it to the Department by July 18, 2019 in order to avoid the closure of his MA case. Exhibit A, pp. 13-14.
4. Petitioner did not timely return the completed form to the Department.
5. On July 18, 2019, the Department issued to Petitioner a Health Care Coverage Determination Notice informing Petitioner that his MA benefits case was closing, effective August 1, 2019, as a result of Petitioner's failure to return the completed New Hire Client Notice. Exhibit A, pp. 15-17.
6. On August 14, 2019, Petitioner submitted to the Department a request for hearing objecting to 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.

In this case, Petitioner objects to the closure of his MA benefits case under the full-coverage HMP, effective August 1, 2019. The closure was based on the Department's determination that Petitioner failed to timely verify his employment and earnings in response to the Department's July 8, 2019 New Hire Client Notice requesting said verifications. The New Hire Client Notice informed Petitioner that he was required to fill out and return the form to the Department by July 18, 2019 in order to avoid having his MA case closed. The New Hire Client Notice was triggered after the Department's automated systems identified new income for Petitioner from his temporary employment with [REDACTED] from three days of employment in June 2019.

Department policy requires clients to cooperate with the local office in determining initial and ongoing eligibility, and this includes the completion of necessary forms like verifications related to starting or stopping employment. BAM 105 (January 2019), p. 9. Verification means documentation or other evidence to establish the accuracy of the client's verbal or written statements. Verification is usually required at application/redetermination and for a change affecting eligibility or benefit level or

information regarding an eligibility factor is unclear, inconsistent, incomplete, or contradictory. BAM 130 (April 2017), p. 1. Verifications are considered timely if received by the date they are due. BAM 130, p. 7. The Department sends a negative case action when either (1) the client indicates a refusal to provide the verification or (2) the time period has elapsed and the client has not made a reasonable effort to provide the verification. BAM 130, p. 7.

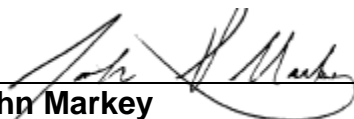
The Department properly issued the July 18, 2019 Health Care Coverage Determination Notice after Petitioner failed to timely provide the required verifications with respect to his new employment as Petitioner had not provided the required verifications nor had he made a reasonable effort to do so by the deadline.

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 benefits case under the HMP, effective August 1, 2019.

DECISION AND ORDER

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

JM/tm



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

DHHS

Jennifer Dunfee
692 E. Main
Centreville, MI
49032

Petitioner

[REDACTED], MI

cc: ME—D. Smith; EQADHShearings
St. Joseph AP Specialist (3)