



GRETCHEN WHITMER
GOVERNOR

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

ORLENE HAWKS
DIRECTOR

[REDACTED]

Date Mailed: January 24, 2020
MOAHR Docket No.: 19-012849
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Christian Gardocki

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 January 15, 2020, from Detroit, Michigan. Petitioner appeared and was unrepresented. The Michigan Department of Health and Human Services (MDHHS) was represented by Hiba Murray, specialist.

ISSUE

The issue is whether MDHHS properly terminated Petitioner's Medicaid eligibility.

FINDINGS OF FACT

The administrative law judge, based on the competent, material, and substantial evidence on the whole record, finds as material fact:

1. As of October 2019, Petitioner was an ongoing Medicaid recipient with an eligibility period certified through November 2019.
2. On October 4, 2019, MDHHS mailed Petitioner a Redetermination form to Petitioner.
3. On November 15, 2019, MDHHS initiated termination of Petitioner's Medicaid eligibility, effective December 2019 due to Petitioner's failure to return the Redetermination form.
4. On November 27, 2019, Petitioner requested a hearing to dispute the termination of Medicaid benefits.

5. As of December 1, 2019, Petitioner did not return a Redetermination to MDHHS.

CONCLUSIONS OF LAW

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. MDHHS policies are contained in the Bridges Administrative Manual (BAM), Bridges Eligibility Manual (BEM), and Reference Tables Manual (RFT).

Petitioner requested a hearing to dispute a termination of Medicaid benefits. Exhibit A, p. 4. A Health Care Coverage Determination Notice dated November 15, 2019, stated that Petitioner's Medicaid eligibility would end beginning December 2019 due to Petitioner's failure to return a Redetermination form. Exhibit A, pp. 8-10.

MDHHS must periodically redetermine or renew an individual's eligibility for active programs. BAM 210 (January 2019) p. 1. The redetermination/renewal process includes a thorough review of all eligibility factors. *Id.*

For all programs, the MDHHS database generates a redetermination packet to the client three days prior to the negative action cut-off date in the month before the redetermination is due. *Id.*, p. 8. For all programs, a redetermination/review packet is considered complete when all of the sections of the redetermination form including the signature section are completed. *Id.*, p. 12. Medicaid benefits stop at the end of the benefit period unless a renewal is completed and a new benefit period is certified. *Id.*, p. 4. For Medicaid, a written notice must be issued because benefits are not automatically terminated for failure to record receipt of the renewal packet. *Id.*, p. 13.

MDHHS mailed Petitioner a Redetermination form on October 4, 2019, concerning renewal of Petitioner's Medicaid eligibility. Exhibit A, pp. 12-19. The stated due date for Petitioner to return the Redetermination was November 4, 2019. Petitioner's testimony acknowledged that he did not return the form to MDHHS. Thus, MDHHS properly initiated closure of Petitioner's Medicaid eligibility on November 15, 2019.


Petitioner testified that he called MDHHS after receiving notice of closure. Petitioner also testified that he had to leave a message for his specialist and that he never received a return phone call. If someone from MDHHS returned Petitioner's phone call, perhaps Petitioner would have been advised of his procedural failure and he would have corrected it before his Medicaid benefits officially closed. Despite such a possibility, Petitioner's failure to return the Redetermination form is not cured by an attempted correction.

The evidence established that MDHHS properly mailed Petitioner a Redetermination form, Petitioner failed to return the form to MDHHS, and that MDHHS properly sent notice of case closure. Thus, MDHHS properly terminated Petitioner's Medicaid eligibility. As discussed during the hearing, Petitioner's recourse, if Medicaid is still needed, is to reapply.

DECISION AND ORDER

The administrative law judge, based upon the above findings of fact and conclusions of law, finds that MDHHS properly terminated Petitioner's Medicaid eligibility effective December 2019. The actions taken by MDHHS are **AFFIRMED**.

CG/cg



Christian Gardocki
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-19-Hearings
D. Smith
EQAD
BSC4- Hearing Decisions
MOAHR

Petitioner – Via First-Class Mail:

