GRETCHEN WHITMER GOVERNOR

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

ORLENE HAWKS DIRECTOR



Date Mailed: May 21, 2021 MOAHR Docket No.: 21-001774

Agency No.: Petitioner:

**ADMINISTRATIVE LAW JUDGE: Ellen McLemore** 

## **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 May 19, 2021, from Detroit, Michigan. Petitioner was present and was unrepresented. The Department of Health and Human Services (Department) was represented by Jeffrey Robinson, Family Independence Manager.

## **ISSUE**

Did the Department properly deny Petitioner's Medical Assistance (MA) application?

#### 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 2021, Petitioner submitted an application for MA benefits (Exhibit A, pp. 5-13).
- 2. On February 24, 2021, the Department sent Petitioner a Verification Checklist (VCL) requesting verification of her income (Exhibit A, pp. 14-15).
- 3. On March 22, 2021, the Department sent Petitioner a Health Care Coverage Determination Notice informing her that her MA application was denied for her failure to submit the requested verifications (Exhibit A, pp. 25-28).
- 4. On April 5, 2021, Petitioner submitted a request for hearing disputing 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 submitted an application for MA benefits on 2021. In the application, Petitioner indicated she had yearly income in the amount of Conference of Petitioner 24, 2021, the Department sent Petitioner a VCL requesting verification of her income. Proofs were due by March 8, 2021.

Verification is usually required at application/redetermination and for a reported change affecting eligibility or benefit level. BAM 130 (April 2017), p. 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. For MA cases, the Department allows the client 10 calendar days (or other time limit specified in policy) to provide the verification that is required. BAM 130 (April 2017), p. 7. If the client cannot provide the verification despite a reasonable effort, the Department will extend the time limit up to two times. BAM 130, p. 8. 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.

The Department presented Petitioner's electronic case file (ECF). The ECF consists of scanned documents, arranged by category and identified by a client name, recipient ID or case number, established for a particular client group. BAM 300 (October 2016), p. 1. The ECF contains all forms, documents and other evidence to the group's current and past eligibility. BAM 300, p. 1. The ECF indicates Petitioner did not return the verification of income. As a result, the Department denied Petitioner's MA application.

At the hearing, Petitioner testified that she was provided an email address for her local Department office by her worker. Petitioner stated that on March 2, 2021, she emailed two pay stubs for the pay periods of January 2, 2021 through January 16, 2021 and January 22, 2021 through February 8, 2021. Petitioner also testified that in the body of the email, she indicated that she was no longer employed. Petitioner testified that her last day of work was February 4, 2021. Petitioner stated she was never sent a

verification of employment form requesting that she verify her loss of employment. The Department confirmed that the email specified by Petitioner at the hearing was a valid email address for that local office that clients are allowed to submit correspondence.

Petitioner's testimony that she attempted to verify her income timely was credible. The Department sends a negative action 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. Petitioner clearly did not indicate a refusal to provide the verification and made a reasonable effort to comply with the requests for verification. Thus, the Department did not act in accordance with policy when it denied Petitioner's MA application.

## **DECISION AND ORDER**

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 denied Petitioner's MA application.

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. Reinstate and reprocess Petitioner's 2021 MA application;
- 2. If Petitioner is eligible for MA benefits, provide her with coverage she is entitled to receive; and
- 3. Notify Petitioner of its decision in writing.

EM/jem

Ellen McLemore

Administrative Law Judge

**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-Oakland-6303-Hearings

**BSC4-HearingDecisions** 

C. George EQADhearings MOAHR

Petitioner – Via First-Class Mail:

