



STATE OF MICHIGAN

GRETCHEN WHITMER
GOVERNOR

DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
MICHIGAN OFFICE OF ADMINISTRATIVE HEARINGS AND RULES
SUZANNE SONNEBORN
EXECUTIVE DIRECTOR

MARLON I. BROWN, DPA
ACTING DIRECTOR

[REDACTED]
MI [REDACTED]

Date Mailed: December 13, 2023
MOAHR Docket No.: 23-007246
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Jeffrey Kemm

HEARING DECISION

On October 18, 2023, Petitioner, [REDACTED] requested a hearing to dispute the Department's decision to close her Medical Assistance (MA). As a result, a hearing was scheduled to be held on December 12, 2023, pursuant to MCL 400.9; 42 CFR 431.200 to 431.250; and Mich Admin Code, R 792.11002. Petitioner appeared and represented herself. Respondent, Department of Health and Human Services (Department), had Lianne Scupholm, Hearings Facilitator, appear as its representative. Neither party had any additional witnesses.

One exhibit was admitted into evidence during the hearing. A 20-page packet of documents provided by the Department was admitted collectively as the Department's Exhibit A.

ISSUE

Did the Department properly close Petitioner's MA?

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 [REDACTED] 2023, Petitioner applied for health insurance through the Affordable Care Act marketplace.
2. The Department treated Petitioner's application as a redetermination since Petitioner was already receiving MA from the Department.
3. On September 25, 2023, the Department mailed a verification checklist to Petitioner. The verification checklist instructed Petitioner to provide a copy of her

direct express card showing her name and account number, and it instructed Petitioner to provide an ATM receipt showing the date and balance of her card. The verification checklist instructed Petitioner to provide the proof by October 5, 2023.

4. Petitioner did not receive the verification checklist, so she was unaware that she was required to provide information to the Department by October 5, 2023.
5. On October 6, 2023, the Department issued a health care coverage determination notice to Petitioner to notify her that she was ineligible for Medicare Savings Program coverage effective August 1, 2023, because she did not provide information as instructed in the verification checklist. The determination also notified Petitioner that she was eligible for limited coverage under Plan First effective September 1, 2023.
6. On October 18, 2023, Petitioner requested a hearing to dispute the Department's decision.

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 administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.105-.112k.

In this case, the Department closed Petitioner's MA because the Department determined that Petitioner did not provide verification as instructed. Petitioner is disputing the Department's decision.

The Department must periodically redetermine or renew a client's eligibility for active programs. BAM 210 (October 1, 2022), p. 1. The redetermination/renewal process includes a thorough review of all eligibility factors. Benefits stop at the end of the benefit period unless a renewal is completed, and a new benefit period is certified. *Id.* at p. 4.

Verification is usually required by the Department at the time of application/redetermination and for a reported change. BAM 130 (January 1, 2023), p. 1. The Department must tell a client what verification is required, how to obtain it, and the due date. *Id.* at 3. The Department must allow the client 10 calendar days to

provide requested verification. *Id.* at 8. The client must obtain the verification, but the local office must assist if the client needs it and asks for help. *Id.* Verifications are only considered timely if they are received by the due date. *Id.* The Department must send a Negative Action Notice when the client refuses to provide the verification, or the client has failed to provide the verification by the due date. *Id.*

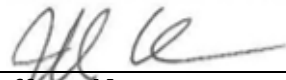
Based on the evidence presented, the Department properly requested verification from Petitioner, and the Department did not receive the requested verification by the due date. Thus, I must find that Petitioner failed to provide the requested verification by the due date. Therefore, the Department properly closed Petitioner's MA. Petitioner may reapply for MA.

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 properly closed Petitioner's Medical Assistance.

IT IS ORDERED the Department's decision is **AFFIRMED**.

JK/ml



Jeffrey Kemm
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 Electronic Mail:

DHHS
Kristina Etheridge
Calhoun County DHHS
190 East Michigan
Battle Creek, MI 49016
MDHHS-Calhoun-Hearings@michigan.gov

Interested Parties

BSC3
M Schaefer
EQAD
MOAHR

Via First Class Mail:

Petitioner

[REDACTED]
[REDACTED], MI [REDACTED]