



GRETCHEN WHITMER  
GOVERNOR

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

MARLON I. BROWN, DPA  
DIRECTOR

[REDACTED]  
[REDACTED], MI [REDACTED]

Date Mailed: March 14, 2024  
MOAHR Docket No.: 23-009319  
Agency No.: [REDACTED]  
Petitioner: [REDACTED]

**ADMINISTRATIVE LAW JUDGE: Colleen Lack**

### **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 February 13, 2024, from Lansing, Michigan. The Petitioner was represented by [REDACTED] husband. [REDACTED] the Petitioner, was present. The Department of Health and Human Services (Department) was represented by Julie Parrish, Supervisor, and Jennifer Griswold, Eligibility Specialist (ES).

During the hearing proceeding, the Department's Hearing Summary packet was admitted as Exhibit A, pp. 1-72.

### **ISSUE**

Did the Department properly determine Petitioner's eligibility for Medical Assistance (MA) benefits?

### **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 MA benefits for her family and included the supplemental questionnaire, check stubs for her husband, as well as bank statements. Petitioner reported her husband was self-employed as a truck driver. Petitioner noted that her husband's company is [REDACTED] he receives payments from [REDACTED] deposited to his business account, and he takes

half the amount as his pay. Monthly expenses for diesel, truck payment, insurance payment, and upkeep were reported. (Exhibit A, pp. 2, and 6-13)

2. On October 23, 2023, a Health Care Coverage Supplemental Questionnaire was issued to Petitioner with a due date of November 2, 2023, which was completed and submitted. (Exhibit A, pp. 64-67)
3. On October 31, 2023, a Verification Checklist was issued to Petitioner requesting verification of income for Petitioner's husband from [REDACTED] [REDACTED] as well as self-employment income for both Petitioner and her husband with a due date of November 13, 2023. (Exhibit A, pp. 14-15)
4. On or about November 6, 2023, Petitioner submitted verifications including self-employment income and expense statements for [REDACTED] [REDACTED] [REDACTED] expense receipts, check stubs, and personal and business bank account statements. (Exhibit A, pp. 16-62)
5. The Department denied MA eligibility because verification of Petitioner's income or loss of income was not returned timely. (Exhibit A, pp. 2 and 72)
6. On December 4, 2023, a Health Care Coverage Determination Notice was issued to Petitioner stating MA was denied. (Exhibit A, pp. 69-71)
7. On December 1, 2023, Petitioner filed a hearing request contesting the Department's determination. (Exhibit A, pp. 4-5)

### **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 general, verification is to be obtained when information regarding an eligibility factor is unclear, inconsistent, incomplete, or contradictory. Verification is usually required at application/redetermination and for a reported change affecting eligibility or benefit level. The Department must tell the client what verification is required, how to obtain it, and the due date. The client must obtain required verification, but the Department must

assist if the client needs and requests help. If neither the client nor the Department can obtain verification despite a reasonable effort, the Department should use the best available information. If no evidence is available, the Department is to use their best judgment. BAM 130, October 1, 2023, pp. 1-4.

For MA, the Department must allow the client 10 calendar days (or other time limit specified in policy) to provide the verification requested. If the client cannot provide the verification despite a reasonable effort, the Department can extend the time limit up to two times when specific conditions are met. Verifications are considered timely if received by the date they are due. The Department is to send a case action notice when the client indicates refusal to provide a verification, or the time period given has elapsed. BAM 130, pp. 8-9.

In this case, the Department asserted that the December 4, 2023 denial was based on a failure to return verification of income or loss of income for Petitioner. (Exhibit A, pp. 2 and 72). The Department acknowledged this was in error as it was never reported that Petitioner had income from employment or self-employment. The Department reinstated the MA application and re-determined eligibility. If Petitioner disagrees with the more recent determination, another timely hearing request could be filed to contest that determination.

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 determined Petitioner's eligibility for MA.


### **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. If it has not already been completed, re-determine eligibility for the [REDACTED] 2023 MA application in accordance with Department policy.

CL/nr

  
\_\_\_\_\_  
**Colleen Lack**  
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**  
Kimberly Kornoelje  
Kent County DHHS  
121 Martin Luther King Jr St SE  
Grand Rapids, MI 49507  
**MDHHS-Kent-  
Hearings@michigan.gov**

**Interested Parties**  
Kent County DHHS  
BSC3  
M. Schaefer  
EQAD  
MOAHR

**Via-First Class Mail :**

**Authorized Hearing Rep.**

[REDACTED], MI [REDACTED]

**Petitioner**

[REDACTED], MI [REDACTED]