



GRETCHEN WHITMER
GOVERNOR

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

ORLENE HAWKS
DIRECTOR

[REDACTED]
[REDACTED]
[REDACTED], MI [REDACTED]

Date Mailed: April 28, 2022
MOAHR Docket No.: 22-000756
Agency No.: [REDACTED]
Petitioner: [REDACTED]

ADMINISTRATIVE LAW JUDGE: Linda Jordan

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 hearing was held on April 11, 2022 via teleconference. Petitioner appeared and represented himself. Olivette Gordon, Family Independence Manager, and Nakeya Glover, Assistance Payments Worker, represented the Michigan Department of Health and Human Services (MDHHS or Department).

ISSUE

Did MDHHS properly deny Petitioner's application for Medicaid (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], 2021, Petitioner applied for MA (Exhibit A, pp. 8-12).
2. On November 22, 2021, MDHHS sent Petitioner a Verification Checklist (VCL) requesting proofs of Petitioner's earned and unearned income (Exhibit A, p. 13). The VCL indicated that proofs were due by December 2, 2021 (Exhibit A, p. 13).
3. On December 8, 2021, MDHHS sent Petitioner a Health Care Coverage Determination Notice indicating that Petitioner's application for MA was denied, effective November 1, 2021 ongoing (Exhibit A, p. 5). The reason for the denial was that Petitioner failed to verify his income (Exhibit A, p. 5).
4. On [REDACTED], 2022, Petitioner filed a Request for Hearing disputing the denial of his MA application (Exhibit A, pp. 3-4).

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 Medicaid (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. MDHHS administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.105-.112k. MA is also known as Medical Assistance. BEM 105 (January 2021), p. 1.

In this case, MDHHS denied Petitioner's application for MA because Petitioner failed to return verification of his employment income by the due date stated on the VCL. The record shows that MDHHS sent Petitioner a VCL on November 22, 2021, which requested proof of his employment income by December 2, 2021 (Exhibit A, p. 13). MDHHS testified that Petitioner did not return proof of his income to MDHHS by the deadline, and therefore, MDHHS denied Petitioner's application for MA benefits on December 8, 2021 (Exhibit A, p. 5).

MDHHS is required to request verifications from clients when required by policy or when information regarding an eligibility factor is unclear, inconsistent, incomplete, or contradictory. BAM 130 (July 2021), p. 1. To obtain verification, MDHHS must send the client a VCL that specifies which verifications are needed, how to obtain them and the due date. *Id.*, p. 3. The client must obtain the required verification, but the local office must assist the client if the client requests help. *Id.* Verifications are considered timely if they are received by the due date. *Id.*, p. 7. For MA, MDHHS must allow the client ten calendar days to provide the requested verification. *Id.*, p. 8. If the client cannot provide the verification despite a reasonable effort, MDHHS is permitted to extend the time limit up to two times. *Id.* MDHHS is required to send a Notice of Case Action when the client indicates a refusal to provide the requested verification, or the time period given has lapsed. *Id.*

At the hearing, Petitioner indicated that he did not submit the verifications by the deadline because he was waiting for the paystubs from his employer. He eventually received the paystubs and sent them to MDHHS (Exhibit 1, pp. 1-22). MDHHS confirmed that it received the documents from Petitioner on or about April 8, 2022. However, at that time, his MA application had already been denied and his case had been closed.

Based on the evidence presented, MDHHS requested verifications for Petitioner's employment information by sending him an VCL. When MDHHS did not receive the documentation by the deadline, it sent Petitioner a notice denying his MA application for failure to verify income information. No evidence was presented that Petitioner contacted MDHHS before the deadline to request an extension of time or to request assistance in obtaining the information. Petitioner was advised that he could reapply for MA benefits, including retroactive coverage, at any time.

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 MDHHS acted in accordance with MDHHS policy when it denied Petitioner's MA application.

DECISION AND ORDER

Accordingly, MDHHS' decision is **AFFIRMED**.

LJ/tm



Linda Jordan
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

Email Recipients:

MDHHS-Wayne-57-Hearings
C. George
EQADHearings
BSC4
MOAHR

**First Class Mail-Recipient:
Petitioner:**

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