



GRETCHEN WHITMER
GOVERNOR

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

MARLON I. BROWN, DPA
DIRECTOR

[REDACTED]
[REDACTED]
[REDACTED]

Date Mailed: April 23, 2024
MOAHR Docket No.: 24-001196
Agency No.: [REDACTED]
Petitioner: [REDACTED] [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 March 27, 2024, from Lansing, Michigan. The Petitioner was represented by [REDACTED] mother. The Department of Health and Human Services (Department) was represented by Lianne Scupholm, Hearing Facilitator (HF).

During the hearing proceeding, the Department's Hearing Summary packet was admitted as Exhibit A, pp. 1-9.

ISSUE

Did the Department properly determine that Petitioner's Medical Assistance (MA) benefit case should close?

FINDINGS OF FACT

The Administrative Law Judge, based on the competent, material, and substantial evidence on the whole record, finds as material fact:

1. A data exchange with the Social Security Administration (SSA) notified the Department that Petitioner's Supplemental Security Income (SSI) was closing. (Exhibit A, pp. 1 and 4)
2. On November [REDACTED] 2023, an SSI-Terminated Medicaid Coverage notice was issued to Petitioner stating that the SSA notified the Department that Petitioner's SSI benefits stopped. This notice indicated the Department must determine if Petitioner remained eligible for any other type of Medicaid and/or the Medicare Savings Program (MSP). Petitioner must complete and return the enclosed application and forms, and provide

the proofs requested on the forms, by a due date of December 11, 2023. This notice stated MA coverage may be cancelled if the forms and proofs are not returned by the due date. (Exhibit A, pp. 3 and 5-8)

3. The Department did not receive the MA application and forms needed to redetermine MA eligibility for Petitioner. (Exhibit A, p. 1; HF Testimony)
4. On January 31, 2024, a Request for Hearing was filed on Petitioner's behalf contesting the Department's action. (Hearing Request, unnumbered pages)

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.

The Department must periodically redetermine or renew an individual's eligibility for active programs. The redetermination/renewal process includes thorough review of all eligibility factors. BAM 210, October 1, 2023, p. 1. MA Benefits stop at the end of the benefit period unless a renewal is completed, and a new benefit period is certified. BAM 210, p. 4.

The Department administers MA for SSI recipients, including a continued MA eligibility determination when SSI benefits end. BEM 150, July 1, 2021, p. 1. A redetermination/ex-parte review packet is sent to the client to complete so that eligibility can be considered for all MA categories. BEM 150, July 1, 2021, p. 6.

In this case, on November ■ 2023, an SSI-Terminated Medicaid Coverage notice was issued to Petitioner stating that the SSA notified the Department that Petitioner's SSI benefits stopped. This notice indicated the Department must determine if Petitioner remained eligible for any other type of Medicaid and/or the MSP. Petitioner must complete and return the enclosed application and forms, and provide the proofs requested on the forms, by a due date of December 11, 2023. This notice stated MA coverage may be cancelled if the forms and proofs are not returned by the due date. (Exhibit A, pp. 3 and 5-8). The Department did not receive the MA application and forms needed to redetermine MA eligibility for Petitioner. (Exhibit A, p. 1; HF Testimony). Accordingly, the Department properly determined that Petitioner's MA benefit case should close.

Petitioner's mother explained that they received paperwork for the rest of the family's MA a few days prior to the SSI-terminated MA Coverage paperwork. Petitioner's mother called the Department, and it was explained to her that the Department was resolving COVID paperwork and updating everything regarding the rest of the family's MA. Petitioner's mother asked if both sets of paperwork needed to be completed and returned or just the paperwork for the family. Petitioner's mother was told that the review for the family was not until February, and she did not need to do anything. Petitioner's mother waited until paperwork for the entire family came, she completed it and returned it. Petitioner's mother was then told that she had to do the paperwork for her son separately. Petitioner's mother then filed the hearing request. Petitioner's mother has filled out paperwork for the MA renewal for the family. Additionally, paperwork with SSA has been completed as SSA is also updating and reviewing Petitioner's benefits since COVID. Petitioner's mother was unaware that Petitioner's MA was separate from the MA for the rest of the family. (Mother Testimony).

The HF explained that the family MA redetermination could not be utilized to redetermine MA for Petitioner's son because no MA application had been filed for him. It was confirmed that the MA coverage he most recently had was automatic when he was receiving SSI. A redetermination form cannot be utilized to add another member to the rest of the family's MA case. (HF Testimony).

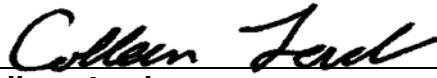
Ultimately, the determination to close Petitioner's MA benefit case must be upheld because the MA application forms were not returned in time to certify a new benefit period before the end of the prior benefit period. As discussed, if Petitioner is reapproved for SSI benefits, his automatic MA coverage would resume. If Petitioner's SSI benefits have not restarted, Petitioner's mother may wish to file a MA application for Petitioner so that he can be added to the MA case for the rest of the family.

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 acted in accordance with Department policy when it determined that Petitioner's MA benefit case should close.

DECISION AND ORDER

Accordingly, the Department's decision is **AFFIRMED**.

CL/dm



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
Kristina Etheridge
Calhoun County DHHS
MDHHS-Calhoun-
Hearings@michigan.gov

SchaeferM

EQADHearings

BSC3HearingDecisions

MOAHR

Via-First Class Mail :

Petitioner

[REDACTED]
[REDACTED]
[REDACTED]