



GRETCHEN WHITMER
GOVERNOR

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

MARLON BROWN
DIRECTOR

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Date Mailed: June 24, 2024
MOAHR Docket No.: 24-004437
Agency No.: ██████████
Petitioner: ██████████

ADMINISTRATIVE LAW JUDGE: Aaron McClintic

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 June 4, 2024, from Lansing, Michigan. The Petitioner was represented by his wife ██████████. The Department of Health and Human Services (Department) was represented by Jennifer Richard. Department Exhibit 1, pp. 1-128 was received and admitted.

ISSUE

Did the Department properly close Petitioner's Medical Assistance (MA) case for failing to verify employment income?

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 February 14, 2024, Petitioner submitted redetermination paperwork.
2. On March 7, 2024, a Verification Checklist was sent to Petitioner.
3. On March 9, 2024, a Verification Checklist was sent to Petitioner.
4. On March 18, 2024, Petitioner submitted asset and income verifications, including his 2022 income tax return and an agent compensation statement from ██████████. (Ex. 1, pp. 14-94)
5. On March 29, 2024, a Health Care Coverage Determination Notice was sent to Petitioner informing him that his children were approved for MI Child Medicaid and

he was approved for MA Plan First but other potential MA programs were denied for failing to verify employment income.

6. On April 16, 2024, Petitioner requested a hearing disputing the denial of MA.
7. On May 1, 2024, a Health Care Coverage Determination Notice was sent to Petitioner informing him that his MA was closing for failing to verify income.

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.

Medicaid

Allow the client 10 calendar days (or other time limit specified in policy) to provide the verification requested. Refer to policy in this item for citizenship verifications. If the client cannot provide the verification despite a reasonable effort, extend the time limit up to two times. At renewal if an individual is required to return a pre-populated renewal form, allow 30 calendar days for the form to be returned. At application, renewal, ex parte review, or other change, explain to the client/authorized representative the availability of your assistance in obtaining needed information. Extension may be granted when the following exists:

- The customer/authorized representative need to make the request. An extension should not automatically be given.
- The need for the extension and the reasonable efforts taken to obtain the verifications are documented.
- Every effort by the department was made to assist the client in obtaining verifications. Verifications are considered to be timely if received by the date they are due. For electronically transmitted verifications (fax, email or MI Bridges document upload), the date of the transmission is the receipt date. Verifications that are submitted after the close of regular business hours through the drop box or by delivery of a MDHHS representative are considered to be received the next business day. Send a case action notice when: The client indicates refusal to provide a verification, or
- The time period given has elapsed. BAM 130

In this case, Petitioner submitted an Agent Compensation Statement from [REDACTED]. The Agent Compensation Statement from [REDACTED] that Petitioner submitted did not give clear information regarding how much compensation he received and how many hours he worked. Petitioner has the burden to establish that he is income eligible for MA. The Department did not have sufficient information from the Agent Compensation Statement to determine Petitioner's eligibility. Therefore, the denial for failing to verify income was proper and correct and consistent with Department policy. BAM 130

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 denied Petitioner's MA application for failing to verify income.

DECISION AND ORDER

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

AM/cc



Aaron McClintic
Administrative Law Judge

