

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



Date Mailed: August 28, 2024 MOAHR Docket No.: 24-007395

Agency No.:
Petitioner:

ADMINISTRATIVE LAW JUDGE: Caralyce M. Lassner

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 by telephone on July 31, 2024. Petitioner appeared and represented himself. The Department of Health and Human Services (Department) was represented by Avery Smith, Assistance Payments Supervisor.

<u>ISSUE</u>

Did the Department properly close Petitioner's Medicaid (MA) case for failure to complete the redetermination process?

FINDINGS OF FACT

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

- 1. Petitioner was an ongoing recipient of MA.
- 2. On April 4, 2024, the Department sent Petitioner a MA redetermination application with a due date of May 6, 2024. (Exhibit A, pp. 7 15).
- 3. On June 17, 2024, the Department sent Petitioner a Health Care Coverage Determination Notice (HCCDN) closing Petitioner's MA case effective July 1, 2024 because Petitioner did not return a completed redetermination application. (Exhibit A, pp. 16 18).

4. On June 24, 2024, the Department received a request for hearing from Petitioner, disputing the closure of his MA case and requesting that he be able to complete the redetermination process. (Exhibit A, pp. 3 – 6).

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.

Petitioner requested a hearing to dispute the closure of his MA case. The Department closed Petitioner's MA case because Petitioner did not return a completed redetermination application.

The Department must complete a full review of eligibility factors for MA clients annually unless the client's MA coverage is specifically exempted. BAM 210 (July 2024), pp. 1, 3 – 5. A MA review begins by the Department sending the client a redetermination application with a due date. BAM 210, p. 9. Clients must cooperate with the local office to determine ongoing eligibility, including completing necessary forms. BAM 105 (March 2024), p. 7. 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.

In this case, The Department sent Petitioner a redetermination application to Petitioner at his verified address of record on April 4, 2024 with a due date of May 6, 2024. (Exhibit A, pp. 7 – 15). At the hearing, Petitioner confirmed his address and testified that he never received the redetermination application; however, in his request for hearing, rather than asserting that he never received a redetermination application, Petitioner asserted that he was unable to respond it and that he made several attempts to do so online. (Exhibit A, p. 4). Petitioner's testimony and assertions are inconsistent and do not establish that there was any error on the Department's part when it sent Petitioner a redetermination application to his address of record more than 30 days prior to its due date. Petitioner's request for hearing and testimony confirmed his acknowledgment that he was due for a redetermination, and during the hearing, Petitioner confirmed that he made no attempt to complete the redetermination application after April 4, 2024 or contact the Department again despite knowing he was due for a MA redetermination or when he received the HCCDN dated June 17, 2024.

Ultimately, Petitioner did not return the redetermination application, and the Department properly sent Petitioner a HCCDN on June 17, 2024, closing Petitioner's MA case effective July 1, 2024. (Exhibit A, pp. 16 – 18).

Petitioner may reapply for MA and request retroactive coverage for any past months he may have incurred uncovered medical expenses.

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 closed Petitioner's MA case for failure to complete the redetermination process.

DECISION AND ORDER

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

CML/nr

Caralyce M. Lassner Administrative Law Judge

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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 <u>Via-Electronic Mail : DHHS</u>

Tracey Jones

Oakland County Southfield Disctrict III

25620 W. 8 Mile Rd Southfield, MI 48033

MDHHS-Oakland-6303-Hearings@michigan.gov

Interested Parties

BSC4

M. Schaefer

EQAD MOAHR

<u>Via-First Class Mail : Petitioner</u>

