

GRETCHEN WHITMER GOVERNOR

STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR



Date Mailed: November 1, 2024 MOAHR Docket No.: 24-009610

Agency No.: Petitioner:

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 October 2, 2024, via teleconference. Petitioner appeared and represented herself. April Sprague, Hearings Facilitator, appeared on behalf of the Michigan Department of Health and Human Services (MDHHS or Department). MDHHS' Hearing Packet was admitted into evidence at the hearing as MDHHS Exhibit A, pp. 1-33.

<u>ISSUE</u>

Did MDHHS properly determine Petitioner's eligibility for Medicaid (MA) coverage?

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 coverage.
- 2. On 2024, Petitioner submitted a MA application, reporting a household of one (Exhibit A, p. 8). Petitioner submitted additional MA applications on 2024 and 2024 (Exhibit A, p. 16).
- 3. On August 1, 2024, MDHHS sent Petitioner a Health Care Coverage Determination Notice, indicating that she was not eligible for MA coverage because she was eligible on another case (Exhibit A, p. 13).
- 4. On August 15, 2024, Petitioner requested a hearing (Exhibit A, p. 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).

Medicaid (MA) 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.

In this case, MDHHS denied Petitioner's MA applications because she was active on another MA case. Any person, regardless of age, or their authorized representative (AR) may apply for assistance. BAM 110 (July 2024), p. 5. When the case is already active for program benefits and additional application(s) are received, the specialist must review the application for changes in circumstances. *Id.*, p. 8. Additionally, the specialist must either complete a redetermination or deny the programs requested since they are already active. *Id.*

MDHHS requests verification of a client's written or verbal statements when required by policy or when information regarding an eligibility factor is unclear, inconsistent, incomplete, or contradictory. BAM 130 (October 2023), p. 1. The questionable information might be from a client or third party. *Id.* Verification is usually required at application or redetermination. *Id.* To request verification, MDHHS must send the client a Verification Checklist (VCL), which tells the client what verification is required, how to obtain it and the due date. *Id.*, pp. 3-4. Before determining eligibility, MDHHS must give the client a reasonable opportunity to resolve any discrepancy between the client's statements and information from another source. *Id.*, p. 9.

Here, Petitioner submitted multiple MA applications and reported that she had a household of one. MDHHS denied the applications because she was already active on her mother's MA case. However, MDHHS should have reviewed the applications for reported changes and requested additional information as needed. Petitioner reported a household of one, which is a reported change. MDHHS should have processed the reported change and/or requested additional information regarding the group size, if needed, prior to denying Petitioner's MA application.

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 failed to satisfy its burden of showing that it acted in accordance with Department policy when it denied Petitioner's MA applications.

DECISION AND ORDER

Accordingly, MDHHS' decision is **REVERSED**. MDHHS 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. Reprocess Petitioner's eligibility for MA, beginning August 1, 2024, requesting additional information from Petitioner, as necessary;
- 2. Provided Petitioner with the most beneficial category of MA coverage that she is eligible to receive, effective August 1, 2024 ongoing; and
- 3. Notify Petitioner of its decision in writing.

LJ/nr

Linda Jordan

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</u>: DHHS

Janice Collins

Genesee County DHHS Union St District Office

125 E. Union St 7th Floor

Flint, MI 48502

MDHHS-Genesee-UnionSt-Hearings@michigan.gov

Interested Parties

BSC4

M. Schaefer

EQAD MOAHR

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

