



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: January 17, 2025
MOAHR Docket No.: 24-013208
Agency No.: ██████████
Petitioner: ██████████

ADMINISTRATIVE LAW JUDGE: Zainab A. Baydoun

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 January 8, 2025, from Detroit, Michigan. Petitioner appeared for the hearing and represented himself. The Department of Health and Human Services (Department) was represented by Karen Smalls, Assistance Payments Supervisor.

ISSUE

Did the Department properly process Petitioner's eligibility for Medical Assistance (MA) benefits?

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 benefits. In connection with a redetermination, Petitioner's eligibility to receive MA benefits was reviewed.
2. On or around August 6, 2024, Petitioner timely returned a completed redetermination to the Department.
3. In processing the redetermination and Petitioner's continued eligibility for MA benefits, the Department completed an asset detection report which showed that Petitioner had a checking account with Fifth Third Bank ending in account number ██████████ and a checking account with Citizens Bank ending in account number ██████████ (Exhibit A, pp. 29-30)

4. On or around September 10, 2024, the Department sent Petitioner a Verification Checklist (VCL) Instructing him to submit proof of his checking accounts by September 20, 2024. (Exhibit A, pp.27-28)
5. The Department asserted that Petitioner failed to submit proof of his income by the September 20, 2024, due date identified on the VCL.
6. On or around September 24, 2024, the Department sent Petitioner a Health Care Coverage Determination Notice, advising him that effective November 1, 2024, ongoing, he was eligible for MA benefits under the Plan First category. (Exhibit A, pp31-35)
7. The Department determined that Petitioner was eligible for MA under the Plan First category only, as there was no asset test. The Department determined that Petitioner and his household were ineligible for other MA categories because he failed to verify requested asset information.
8. On or around November 21, 2024, Petitioner submitted a bank statement for his business and a bank statement for his joint checking account with Comerica Bank ending in account number [REDACTED]
9. On or around November 21, 2024, Petitioner requested a hearing disputing the Department's actions with respect to the MA program. (Exhibit A, pp. 3-5)

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.

In this case, Petitioner disputed the Department's actions with respect to the MA program.

Verification is usually required at application/redetermination and for a reported change affecting eligibility or benefit level. BAM 130 (May 2024), p.1. To request verification of information, the Department sends a verification checklist (VCL) which tells the client what verification is required, how to obtain it, and the due date. BAM 130, p. 3. Although the client must obtain the required verification, the Department must assist if a client needs

and requests help. If neither the client nor the Department can obtain the verification despite a reasonable effort, the Department is to use the best available information; and if no evidence is available, the Department is to use its best judgment. BAM 130, pp. 3-4.

For MA cases, clients are given 10 calendar days (or other time limit specified in policy) to provide the verifications requested by the Department. BAM 130, pp. 7-9. If the client cannot provide the verification despite a reasonable effort, the Department is to extend the time limit to submit the verifications up to two times. BAM 130, pp. 7-9. Verifications are considered to be timely if received by the date they are due. BAM 130, pp. 7-9. The Department will send a negative action notice when the client indicates refusal to provide a verification, or the time period given has lapsed. BAM 130, pp. 8-9.

At the hearing, the Department representative testified that an asset detection report was completed during the processing of Petitioner's redetermination and the Department issued the VCL on September 10, 2024, instructing Petitioner to submit proof of his bank checking accounts by September 20, 2024. The Department representative testified that because Petitioner failed to submit any verification of his bank accounts by the September 20, 2024, due date identified on the VCL, and because asset eligibility is required for certain types of MA programs, the Petitioner was only approved for limited coverage Plan First effective November 1, 2024, as that MA category did not have an asset test. There was no evidence that Petitioner requested an extension or additional time to submit the requested verification or that Petitioner requested assistance from the Department in obtaining the verifications that were requested.


While Petitioner testified that on November 21, 2024, he submitted some bank account information to the Department, Petitioner did not dispute that he failed to timely return verification of his checking account with Fifth Third Bank ending in account number [REDACTED] and his checking account with Citizens Bank ending in account number [REDACTED]. Petitioner asserted that the Fifth Third checking account was closed in June 2024 and because the Citizens Bank checking account did not have much money in it, he did not think he had to submit verification.

Upon review, notwithstanding Petitioner's testimony during the hearing, in accordance with Department policy, Petitioner was required to timely submit verification of his bank accounts in order for the Department to review his household's asset eligibility for MA. Petitioner failed to establish that he timely submitted verification of his assets to the Department. Therefore, 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 processed Petitioner's MA benefits. Because there was no evidence presented regarding MA eligibility for Petitioner's additional household members, Petitioner is advised that he is entitled to submit a new application for MA benefits and current MA eligibility for all of his household members will be determined.

DECISION AND ORDER

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

ZB/ml



Zainab A. Baydoun
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

Tracey Jones

Oakland County Southfield District III

25620 W. 8 Mile Rd

Southfield, MI 48033

MDHHS-Oakland-6303-Hearings@michigan.gov

Interested Parties

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M Schaefer

EQAD

MOAHR

Via First Class Mail:

Petitioner

[REDACTED]

[REDACTED]

[REDACTED] MI [REDACTED]