



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]

Date Mailed: February 11, 2025  
MOAHR Docket No.: 24-013377  
Agency No.: [REDACTED]  
Petitioner: [REDACTED]

**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 January 15, 2025, from Lansing, Michigan. The Petitioner was represented by himself. The Department of Health and Human Services (Department) was represented by Rebecca Scott. Department Exhibit 1, pp. 1-47 was received and admitted.

**ISSUE**

Did the Department properly close Petitioner's Medical Assistance (MA) case and did the Department properly process Petitioner's MA application?

**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 September 4, 2024, redetermination paperwork was sent to Petitioner with an October 4, 2024, due date.
2. Between October 5, 2024, and November 14, 2024, the Department called, texted and emailed Petitioner reminding him about his redetermination.
3. On November 15, 2024, a Health Care Coverage Determination Notice was sent to Petitioner informing him that he was not eligible for MA effective December 1, 2024, because he failed to return redetermination forms.
4. On November 25, 2024, Petitioner requested hearing disputing the closure of MA-HMP.

5. On [REDACTED], Petitioner applied for MA and reported monthly income of \$[REDACTED].
6. On [REDACTED], Petitioner applied for MA reported monthly income of \$[REDACTED].
7. On [REDACTED], Petitioner applied for MA.
8. On December 9, 2024, a Health Care Coverage Supplemental Questionnaire was sent to Petitioner with a due date of December 20, 2024.
9. Petitioner credibly testified at hearing that he dropped off the Health Care Coverage Supplemental Questionnaire at the local office in [REDACTED] Michigan on [REDACTED] on [REDACTED], 2024.
10. Petitioner testified at hearing that he did not receive the redetermination paperwork purportedly sent to him on September 4, 2024.

### **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 Benefits stop at the end of the benefit period unless a renewal is completed, and a new benefit period is certified. Also, the renewal month is 12 months from the date the most recent complete application was submitted. BAM 220, p.4

In this case, Petitioner was sent redetermination paperwork on September 4, 2024, with a October 4, 2024, due date. Nothing was received from Petitioner and phone calls and emails were placed to him. Petitioner testified that he did not receive the redetermination paperwork and his phone may have blocked the phone calls. The Department followed the appropriate steps to allow Petitioner to complete his redetermination but it did not happen. The Department followed policy in closing Petitioner's MA case for failing to return redetermination paperwork. BAM 220

Petitioner applied for MA on [REDACTED], [REDACTED] and [REDACTED], 2024. On December 8, 2024, a Health Care Coverage Supplemental Questionnaire was sent to Petitioner. Petitioner credibly testified that he dropped off the Health Care Coverage Supplemental Questionnaire at the local office in [REDACTED] on [REDACTED] 2024. Petitioner's [REDACTED], 2024, MA application was not properly processed and needs to be reinstated and reprocessed.

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 on December 1, 2024. The Department did not act in accordance with Department policy when it failed to process Petitioner's Health Care Coverage Supplemental Questionnaire he submitted on December 17, 2024.

### **DECISION AND ORDER**

Accordingly, the Department's decision is **AFFIRMED IN PART** with respect to the December 1, 2024, closure of MA and **REVERSED IN PART** with respect to the failure to process Petitioner's [REDACTED] 2024, MA application.

THE DEPARTMENT 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. Reinstatement and reprocess Petitioner's [REDACTED] 2024, MA application going back to the date of application.
2. Activate MA benefits if Petitioner is found to be eligible.

AM/mp

  
\_\_\_\_\_  
**Aaron McClintic**  
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**  
Tracy Felder  
Wayne-Southwest-DHHS  
2524 Clark Street  
Detroit, MI 48209  
**MDHHS-Wayne-41-  
Hearings@michigan.gov**

**Interested Parties**  
EQAD Hearings  
M. Schaefer  
MOAHR  
BSC4

**Via-First Class Mail :**

**Petitioner**  
