



Date Mailed: April 17, 2025

Docket No.: 25-008300

Case No.: [REDACTED]

Petitioner: [REDACTED]

«RECIP_FULL_NAME»

«RECIP_ADD0»

«RECIP_ADD1»

«RECIP_ADD2»

«RECIP_CITY», «RECIP_SPCODE»

«RECIP_POSTAL»

This is an important legal document. Please have someone translate the document.

هذه وثيقة قانونية مهمة. يرجى أن يكون هناك شخص ما يترجم المستند.

এটি একটি গুরুত্বপূর্ণ আইনি ডকুমেন্ট। দয়া করে কেউ দস্তাবেজ অনুবাদ করুন।

Este es un documento legal importante. Por favor, que alguien traduzca el documento.

这是一份重要的法律文件。请让别人翻译文件。

Ky është një dokument ligjor i rëndësishëm. Ju lutem, kini dikë ta përktheni dokumentin.

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; 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 via telephone conference on March 26, 2025. Petitioner did not appear for the hearing. Petitioner was represented by his [REDACTED]. The Michigan Department of Health and Human Services (MDHHS or Department) was represented by Avery Smith, Assistance Payments Supervisor.

ISSUE

Did the Department properly process Petitioner's 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 previously an ongoing recipient of MA benefits. On an unverified date, Petitioner's MA case closed.
2. On or around [REDACTED] 2024, Petitioner submitted an application requesting MA benefits.

-
-
3. On or around December 20, 2024, the Department sent Petitioner a Verification Checklist (VCL) instructing him to submit proof of his income and proof of his application of Medicare with the Social Security Administration by December 30, 2024. (Exhibit A, pp. 13-14)
 - a. The December 20, 2024, VCL did not instruct Petitioner to submit proof of alien status.
 4. On or around January 23, 2025, the Department sent Petitioner a VCL instructing him to submit proof of his alien status by April 23, 2025. (Exhibit A, pp. 11-12)
 5. On or around January 30, 2025, the Department sent Petitioner a Health Care Coverage Determination Notice advising him that effective December 1, 2024, he was ineligible for MA benefits and effective March 1, 2025, his wife [REDACTED] was eligible for Emergency Services Only (ESO) MA. (Exhibit A, pp. 21-25)
 6. On or around February 20, 2025, Petitioner requested a hearing disputing the Department's actions with respect to the MA program, specifically, the termination of his MA benefits and the transfer of MA coverage for his wife to ESO. (Exhibit A, pp. 3-5)
 7. The Department acknowledged that on or around March 12, 2025, and March 15, 2025, Petitioner submitted acceptable verification of alien status showing that Petitioner and his wife were legal permanent residents.

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 requested a hearing disputing 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 testified that Petitioner and his wife were previously approved for MA benefits and on an unverified date, the case was closed. Petitioner reapplied for MA benefits on or around [REDACTED] 2024, and in connection with the application, the Department requested that he submit verifications. The Department issued the December 20, 2024, VCL requesting proof of income and application for Medicare by December 30, 2024, and subsequently, the January 23, 2025, VCL requesting proof of alien status by April 23, 2025. The Department testified that because Petitioner failed to submit proof of alien status by the December 30, 2024, due date identified on the December 20, 2024 VCL, the January 30, 2025, Health Care Coverage Determination Notice was issued, advising him that effective December 1, 2024, he was ineligible for MA benefits and effective March 1, 2025, his wife [REDACTED] was eligible for Emergency Services Only (ESO) MA. (Exhibit A, pp. 21-25).

Additionally, while the Department asserted that Petitioner failed to submit acceptable verification of alien status by December 30, 2024, a review of the December 20, 2024, VCL shows that proof of alien status was not requested. The Department requested verification of alien status in connection with the January 23, 2025, VCL which identified a due date of April 23, 2025. The Department acknowledged that Petitioner submitted acceptable verification of alien status for himself and his wife on March 12, 2025, and March 15, 2025, prior to the April 23, 2025, due date identified on the VCL. The Department did not allege that eligibility was denied for any reason other than a failure to timely submit proof of alien status. Upon review, Petitioner timely submitted verification that he and his wife were legal permanent residents and had acceptable alien status within the timeframe identified on the VCL. Thus, the Department's eligibility determination made with the January 23, 2025, Health Care Coverage Determination Notice was not supported by the evidence. It is noted that there was no evidence presented to show Petitioner's wife's MA eligibility for December 1, 2024, through March 1, 2025. Thus, the Department will be ordered to review MA eligibility for Petitioner and his wife from December 1, 2024, ongoing, in connection with the [REDACTED] 2024, application.

DECISION AND ORDER

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 did not act in accordance with Department policy when it determined MA eligibility for Petitioner and his wife.

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

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. Reprocess Petitioner's [REDACTED] 2024, MA application to determine Petitioner and his wife's MA eligibility for December 1, 2024, ongoing,
2. Provide Petitioner and his wife with MA coverage under the most beneficial category, that they were entitled to receive but did not from December 1, 2024, ongoing; and
3. Notify Petitioner in writing of its decision in writing.



ZAINAB A BAYDOUN
ADMINISTRATIVE LAW JUDGE

APPEAL RIGHTS: Petitioner may appeal this Hearing Decision to the circuit court. Rules for appeals to the circuit court can be found in the Michigan Court Rules (MCR), including MCR 7.101 to MCR 7.123, available at the Michigan Courts website at courts.michigan.gov. The Michigan Office of Administrative Hearings and Rules (MOAHR) cannot provide legal advice, but assistance may be available through the State Bar of Michigan at <https://lrs.michbar.org> or Michigan Legal Help at <https://michiganlegalhelp.org>. A copy of the circuit court appeal should be sent to MOAHR. A circuit court appeal may result in a reversal of the Hearing Decision.

Either party who disagrees with this Hearing Decision may also send a written request for a rehearing and/or reconsideration to MOAHR within 30 days of the mailing date of this Hearing Decision. The request should include Petitioner's name, the docket number from page 1 of this Hearing Decision, an explanation of the specific reasons for the request, and any documents supporting the request. The request should be sent to MOAHR

- by email to MOAHR-BSD-Support@michigan.gov, **OR**
- by fax at (517) 763-0155, **OR**
- by mail addressed to
Michigan Office of Administrative Hearings and Rules
Rehearing/Reconsideration Request
P.O. Box 30639
Lansing Michigan 48909-8139

Documents sent via email are not secure and can be faxed or mailed to avoid any potential risks. Requests MOAHR receives more than 30 days from the mailing date of this Hearing Decision may be considered untimely and dismissed.

Via Electronic Mail:

Respondent

OAKLAND COUNTY DHHS -
SOUTHFIELD DIST
25620 W 8 MILE RD
SOUTHFIELD, MI 48033
**MDHHS-OAKLAND-6303-
HEARINGS@MICHIGAN.GOV**

Interested Parties

BSC4
M SCHAEFER
EQAD
MOAHR

Via First Class Mail:

Petitioner

[REDACTED]
[REDACTED]
[REDACTED] MI [REDACTED]

[REDACTED]
[REDACTED]
[REDACTED] MI [REDACTED]