



Date Mailed: September 23, 2025
Docket No.: 25-026087
Case No.: [REDACTED]
Petitioner: [REDACTED]

[REDACTED]
MI [REDACTED]

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

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

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Docket No.: 25-026087

Case No.: [REDACTED]

Petitioner: [REDACTED]

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 September 3, 2025. Petitioner appeared and represented himself. The Department of Health and Human Services (Department) was represented by Lori Morgan, Eligibility Specialist, and Michael Fritz, Family Independence Manager.

ISSUE

Did the Department properly deny Petitioner's application for Medicaid (MA) and Medicare Savings Program (MSP) assistance effective May 1, 2025?

FINDINGS OF FACT

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

1. Until May 1, 2025, Petitioner was approved for Healthy Michigan Plan (HMP) MA coverage under his wife's MA case, Department case number [REDACTED].
1. On [REDACTED] 2025, the Department received a completed application through MIBridges for MA and MSP from Petitioner. The application indicated that Petitioner was [REDACTED] years old, married, a tax filer, and disabled. (Exhibit A, pp. 8 – 13).
2. On May 7, 2025, the Department sent Petitioner a Verification Checklist (VCL) that requested Petitioner provide verification of his last 30 days of income to the Department by May 19, 2025. (Exhibit A, pp. 14 – 15).
3. On May 7, 2025, the Department also sent Petitioner a Health Care Coverage Supplemental Questionnaire (Questionnaire) that was due by May 19, 2025. (Exhibit A, pp. 16 – 19).
4. Petitioner did not return the requested Questionnaire by May 19, 2025.
5. On May 21, 2025, the Department sent Petitioner a Health Care Coverage Determination Notice (HCCDN) that denied Petitioner MA and MSP effective

May 1, 2025 ongoing for failure to return the Questionnaire. (Exhibit A, pp. 20 – 21).

6. On May 23, 2025, the Department received a completed Questionnaire from Petitioner. (Exhibit A, pp. 22 – 25).
7. On July 10, 2025, the Department received a request for hearing from Petitioner to dispute the denial of his application for MA. (Exhibit A, pp. 3 – 7).

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 denial or closure of his MA case. The Department testified that Petitioner had full coverage HMP MA under his wife's MA case until May 1, 2025, and that it denied Petitioner's application for MA, effective May 1, 2025, for failure to return the Questionnaire by the due date.

Clients must cooperate with the local office in determining initial and ongoing eligibility, including completion of necessary forms. BAM 105 (April 2025), pp. 8 – 9. However, an online application submitted through MIBridges is considered the same as a paper application and program-specific supplement form, or an Application for Health Coverage & Help Paying Costs. BAM 115 (October 2024), p. 1.

In this case, the Department received an online application for MA from Petitioner through MIBridges, and sent Petitioner the program-specific MA Questionnaire with a due date of May 19, 2025. There was no dispute that Petitioner did not return the Questionnaire by the due date, and the Department denied Petitioner's application for failure to return the Questionnaire. However, the Department did not establish or clearly explain why the Questionnaire was necessary when Petitioner's application was completed online through MIBridges, and included the same information requested on the Questionnaire.

Thus, the Department failed to establish that it properly required Petitioner to complete the Health Care Coverage Supplemental Questionnaire. Therefore, it failed to satisfy its burden of showing that it acted in accordance with Department policy when it denied Petitioner's application for MA effective May 1, 2025, due to his failure to return the Questionnaire.

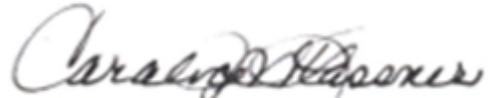
DECISION AND ORDER

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 failed to satisfy its burden of showing that it acted in accordance with Department policy when it denied Petitioner's application for MA effective May 1, 2025.

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. Redetermine Petitioner's MA eligibility effective May 1, 2025;
1. If eligible, provide Petitioner with the most beneficial MA coverage he was eligible to receive for May 1, 2025 ongoing; and
2. Notify Petitioner of its decision in writing.



**CARALYCE M. LASSNER
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:

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