

STATE OF MICHIGAN
STATE OFFICE OF ADMINISTRATIVE HEARINGS AND RULES

ADMINISTRATIVE HEARINGS FOR THE
DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF:

[REDACTED]

Claimant

Reg No: 2008-22166
Issue No: 2008
Case No: [REDACTED]
Load No: [REDACTED]
Hearing Date:
April 23, 2009
Wayne County DHS

ADMINISTRATIVE LAW JUDGE: Jeanne M. VanderHeide

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 upon the Claimant's request for hearing. After due notice, a telephone hearing was conducted from Detroit, Michigan on April 23, 2009. The Claimant was present and testified. Rhonda Robinson appeared on behalf of the Department.

ISSUE

Whether the Department properly denied Claimant's request for SDA & MA?

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 July 17, 2007, the Department received the Claimant's application for public assistance seeking Medical Assistance ("MA") benefits and State Disability Assistance ("SDA").

2. The Department scheduled a medical examination for Claimant on February 13, 2008. (Exhibit 1, p. 4).
3. The Department mailed notice of the examination on 2/5/08 to Claimant at [REDACTED] and the notice was returned as Claimant had moved to a new address. (Exhibit 1, p. 6).
4. The Department scheduled another medical examination for Claimant on April 3, 2008. (Exhibit 1, p. 4).
5. The Department mailed notice of the second examination on 3/19/08 to Claimant at [REDACTED] (Exhibit 1, p. 6).
6. Claimant did not show for the medical examination appointment.
7. Claimant testified that he had to move from his home on [REDACTED] in March of 2008 to [REDACTED] and he never received notice of the medical examination. Claimant further testified that he just started receiving his mail in May of 2008.
8. Claimant testified that he informed the Department of his change of address, but could not testify as to exactly when he informed the Department.
9. The Department denied Claimant's claims on 4/16/2008.
10. On May 29, 2008, the Department received the Claimant's Request for Hearing protesting the Department's denial of MA and SDA.

CONCLUSIONS OF LAW

The Medical Assistance ("MA") program is established by Title XIX of the Social Security Act and is implemented by Title 42 of the Code of Federal Regulations ("CFR"). The Department of Human Services, formally known as the Family Independence Agency,

administers the MA program pursuant to MCL 400.10, *et seq* and MCL 400.105. Department policies are found in the Program Administrative Manual (“PAM”), the Program Eligibility Manual (“PEM”), and the Program Reference Manual (“PRM”).

The State Disability Assistance (SDA) program which provides financial assistance for disabled persons is established by 2004 PA 344. The Department of Human Services (formerly known as the Family Independence Agency) administers the SDA program pursuant to MCL 400.10, *et seq.*, and MAC R 400.3151-400.3180. Department policies are found in the Program Administrative Manual (PAM), the Program Eligibility Manual (PEM) and the Program Reference Manual (PRM).

The goal of the Medicaid program is to ensure that essential health care services are made available to those who otherwise could not afford them. PEM 105, p. 1 Medicaid is also known as Medical Assistance (“MA”). *Id.* The Medicaid program is comprised of several categories; one category is for FIP recipients while another is for SSI recipients. *Id.* Programs for individuals not receiving FIP or SSI are based on eligibility factors in either the FIP or SSI program thus are categorized as either FIP-related or SSI-related. *Id.* To receive MA under an SSI-related category, the person must be aged (65 or older), blind, disabled, entitled to Medicare or formally blind or disabled. *Id.* Families with dependent children, caretaker relatives of dependent children, persons under age 21 and pregnant, or recently pregnant women, receive MA under FIP-related categories. *Id.*

Clients are required to report changes in circumstance that potentially affect eligibility or benefit amount. Changes must be reported within 10 days after the client is aware of them. These include but are not limited to, changes in”

- Persons in the home

- Marital Status
- Address and shelter cost changes that result from the move.
- Vehicles
- Assets
- Child support expenses pain
- Health or hospital coverage and premiums
- Day care needs or providers.

PAM 105, pp. 7-8. Case workers are required to explain reporting requirements to clients at application, redetermination and when discussing changes in circumstances. Changes may be reported in person, by mail or by telephone. A DHS 2240, Change Report Form, may be used by clients to reports changes, but it is not mandatory. PAM 105 at 8.

In this case, Claimant testified credibly that he did not receive the notice of medical appointment as he had changed his address. Claimant testified that he informed the Department of his address change. There is no evidence to show that Claimant did not report his address change within ten (10) days. Therefore, this Administrative Law Judge finds that Claimant had good cause for missing his medical examination.

Accordingly, the Department's determination is REVERSED.

DECISION AND ORDER

The Administrative Law Judge, based upon the findings of fact and conclusions of law, finds that there was insufficient evidence presented to affirm the Department's actions.

Accordingly, it is ORDERED:

1. The Department's April 17, 2008 MA & SDA denial is REVERSED.
2. The Department shall reopen and reprocess Claimant's MA & SDA cases as of the date of closure 4/3/08.

3. The Department shall reimburse Claimant for any lost benefits he was otherwise eligible to receive in accordance with department policy.

/s/

Jeanne M. VanderHeide
Administrative Law Judge
for Ismael Ahmed, Director
Department of Human Services

Date Signed: 05/01/09

Date Mailed: 05/04/09

NOTICE: Administrative Hearings may order a rehearing or reconsideration on either its own motion or at the request of a party within 30 days of the mailing date of this Decision and Order. Administrative Hearings will not order a rehearing or reconsideration on the Department's motion where the final decision cannot be implemented within 90 days of the filing of the original request.

The Claimant may appeal the Decision and Order to Circuit Court within 30 days of the mailing of the Decision and Order or, if a timely request for rehearing was made, within 30 days of the receipt date of the rehearing decision.

JV/dj

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