

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: 2008-27330
Issue No: 2006
Case No: [REDACTED]
Load No: [REDACTED]
Hearing Date:
May 13, 2009
Kalamazoo County DHS

ADMINISTRATIVE LAW JUDGE: Jana A. Bachman

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9; and MCL 400.37 upon claimant's request for a hearing. After due notice, a telephone hearing was held on May 13, 2009. Claimant was represented by [REDACTED]

ISSUE

Whether the Department of Human Services (department) acted in compliance with department policy when it determined claimant's Medical Assistance (MA) and benefits?

FINDINGS OF FACT

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

- (1) May 21, 2008, claimant's representative applied for MA on behalf of claimant.
 - (2) May 21, 2008, the department sent claimant and representative a Verification Checklist (DHS-3503) indicating required proofs and a due date of May 31, 2008.
- May 21, 2008, claimant's representative requested and received an extension of deadline to

June 19, 2008. A second extension was requested and granted to June 29, 2008. A third request was requested and granted for July 7, 2008. Department A.

(3) July 7, 2008, the department denied claimant's application due to failure to provide proof of citizenship and (for February 2008) also failure to provide proof of income for February. Department A.

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 (DHS or department) 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).

Department manuals provide the following policy statements and instructions for caseworkers:

Obtain proof of countable income.
Program Eligibility Manual (PEM) 500.

To be eligible for full MA coverage a person must be a U.S. citizen or an alien admitted to the U.S. under a specific immigration status.

- U.S. citizenship must be verified with an acceptable document to receive Medicaid.
- The alien status of each noncitizen must be verified to be eligible for full MA coverage.

MA coverage is limited to emergency services for:

- Persons refusing to provide citizenship/alien status information on the application, or

- Persons unable or refusing to provide satisfactory verification of alien information.

All other eligibility requirements including residency MUST be met even when MA coverage is limited to emergency services.

Program Eligibility Manual (PEM) 225

All Programs

P.L. 104-193 of 1996, as amended

P.L. 106-386 of 2000

65 FR 58301

MA

42 CFR 435.403, 406, 407, Public Law 109-171

MA Only

Allow the client 10 calendar days (or other time limit specified in policy) to provide the verification you request. If the client cannot provide the verification despite a reasonable effort, extend the time limit up to three times.

Verifications are considered to be timely if received by the date they are due. For electronically transmitted verifications (e.g., fax, email), the date of the transmission is the receipt date. Verifications that are submitted after the close of regular business hours through the drop box or by delivery of a DHS representative are considered to be received the next business day.

Send a negative action notice when:

- The client indicates refusal to provide a verification, or
- The time period given has elapsed.

Program Administrative Manual (PAM) 130

42 CFR 435.913(a)

42 CFR 435.916(b)

MCL 400.37

Public Law 109-171

In this case, claimant did not provide evidence of citizenship. Department policy provides that citizenship must be verified to qualify for full MA. Proof of income must be provided in order to determine financial eligibility. The time period for providing the proof was

expired and the department properly denied the application. Accordingly, the department has met its burden of proof and its action must be upheld. Finding of Fact 1-3.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides the Department of Human Services acted in compliance with department policy. Accordingly, the department's action is HEREBY UPHELD.

/s/

Jana A. Bachman
Administrative Law Judge
for Ismael Ahmed, Director
Department of Human Services

Date Signed: September 29, 2009

Date Mailed: September 30, 2009

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 receipt 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.

JAB/db

cc:

