

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: 2008-19686

Issue No: 2006

Case No: [REDACTED]

Load No: [REDACTED]

Hearing Date:

March 18, 2009

Wayne 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 March 18, 2009. Claimant did not appear at hearing. 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) 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) August 21, 2007, claimant filed an application for MA.

(2) On or about September 12, 2007 and March 13, 2008 claimant and representative were sent a Verification Checklist indicating needed proofs with due dates of September 24, 2007 and March 24, 2008, respectively. Department A. pages 1-4.

(3) December 21, 2007, the department denied the application. The department did not send a written notice of the denial to the claimant or her representative.

(4) At the time of hearing, the department has sent the medical documentation to MRT with the notation that not all requested medical information was provided. The packet has apparently been misdirected or lost its way to MRT.

(5) At the time of hearing, the claimant's representative is not in receipt of information as to what medical documentation was not received and what more is needed. Extensions of deadline have apparently not been granted.

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:

All Programs

Tell the client what verification is required, how to obtain it, and the due date. Use the DHS-3503, Verification Checklist, or for MA redeterminations, the DHS-1175, MA Determination Notice, to request verification.

Use the DHS-3503C, Verification Checklist for Citizenship/Identity to request documentation of citizenship or identity for FIP, SDA, and Medicaid determinations.

The client must obtain required verification, but you must assist if they need and request help.

If neither the client nor you can obtain verification despite a reasonable effort, use the best available information. If no evidence is available, use your best judgment.

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 at least once.

Verifications are considered to be timely if received by the date they are due. Send a negative action notice when:

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

Only adequate notice is required for an application denial. Timely notice is required to reduce or terminate benefits.

Program Administrative Manual (PAM) 130

LEGAL BASE

MA

42 CFR 435.913(a)

42 CFR 435.916(b)

MCL 400.37

Public Law 109-171

In this case, the claimant representative has been in contact with the department to obtain instructions for needed medical documentation. The department has, apparently, not received all proper documents and sent what documentation it has received to MRT and said packet has been misdirected, misplaced, and cannot be located. Finding of Fact 4-5. Accordingly, the department has not met its burden of proof that claimant has missed the deadline for providing medical information, has not met its burden of proof that proper deadline extensions were provided, and has not met its burden of proof that the application has been properly processed. Accordingly, the department's actions can not be upheld.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides the Department of Human Services did not act in compliance with department policy when it processed claimant's application for Medical Assistance.

Accordingly, the department's action is **HEREBY REVERSED**. The department is to promptly provide claimant and representative with written notice of required proofs needed to determine disability and financial eligibility, giving proper deadline and extensions of the deadline if needed and requested by claimant representative. Upon receipt of all medical documentation, the department is to promptly provide a complete medical packet to the MRT. These actions are to be conducted in compliance with department policy and this decision and order.

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

Date Signed:  _____

Date Mailed:  _____

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.

2008-19686/jab

JAB/db

cc:

