

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: 2009-11788

Issue No: 2006

Case No: [REDACTED]

Load No: [REDACTED]

Hearing Date:

June 9, 2009

Monroe County DHS

ADMINISTRATIVE LAW JUDGE: Ivona Rairigh

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 June 9, 2009. Claimant is deceased. Appearing on claimant's behalf was [REDACTED], Patient Representative, H.E.L.P. claimant's authorized representative.

ISSUE

Did the department correctly deny claimant's Medicaid (MA) application in February, 2008?

FINDINGS OF FACT

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

1. On December 27, 2007, department received an application for MA for the claimant and her spouse. (Department's Exhibits 6-8).

2. Included with the application was a letter from H.E.L.P. advising the department of being the authorized representative for the couple. This letter stated that the claimant, who died on October 4, 2007, needs retroactive MA coverage. A note stating "retro appl emailed" is written on the letter. (Department's Exhibit 3).

3. On January 23, 2008, department mailed Verification Checklists, DHS-3503, to the couple requesting personal and income information, and birth certificate for the claimant. Due date for return of this verification was February 4, 2008. (Department's Exhibits 9 and 10).

4. On February 13, 2008 department mailed the couple Application Eligibility Notices denying their MA applications due to failure to provide requested verifications needed to determine eligibility. (Department's Exhibits 12 and 13). Copies of these Notices were also mailed to H.E.L.P. (Department's Exhibits 11 and 14).

5. Claimant's authorized representative requested a hearing on February 21, 2008.

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).

First issue to be addressed in this case is the fact that the claimant is deceased. Department's policy specifies who can be an Authorized Hearing Representative (AHR). As the claimant is deceased, only her spouse or a person authorized by him can be the AHR. Hearing testimony reveals that claimant's spouse is also deceased as of March 18, 2009. Therefore, any

authorization previously given to H.E.L.P. to represent the claimant ended with the death of her spouse. PAM 600. [REDACTED] cannot therefore be the claimant's AHR.

Even if Ms. [REDACTED] could be the AHR, second issue is whether the claimant provided requested information to the department needed to determine MA eligibility.

Department's policy states:

CLIENT OR AUTHORIZED REPRESENTATIVE RESPONSIBILITIES

Responsibility to Cooperate

All Programs

Clients must cooperate with the local office in determining initial and ongoing eligibility. This includes completion of the necessary forms. PAM, Item 105, p. 5.

VERIFICATION AND COLLATERAL CONTACTS

DEPARTMENT POLICY

All Programs

Verification means documentation or other evidence to establish the accuracy of the client's verbal or written statements.

Obtain verification when:

- . required by policy. PEM items specify which factors and under what circumstances verification is required.
- . required as a local office option. The requirement **must** be applied the same for every client. Local requirements may **not** be imposed for MA, TMA-Plus or AMP without prior approval from central office.
- . information regarding an eligibility factor is unclear, inconsistent, incomplete or contradictory. The questionable information might be from the client or a third party. PAM, Item 130, p. 1.

Verification is usually required at application/redetermination **and** for a reported change affecting eligibility or benefit level. PAM, Item 130, p. 1.

Obtaining Verification

All Programs

Tell the client what verification is required, how to obtain it, and the due date (see “**Timeliness Standards**” in this item). Use the DHS-3503, Verification Checklist, or for MA redeterminations, the DHS-1175, MA Determination Notice, to request verification. PAM, Item 130, p. 2.

Timeliness Standards

All Programs (except TMAP)

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. PAM, Item 130, p. 4.

MA Only

Send a negative action notice when:

- . the client indicates refusal to provide a verification, **or**
- . the time period given has elapsed. PAM, Item 130, p. 4.

In claimant’s case, department initially set the 10 day limit to return requested verification on January 23, 2008, with a due date of February 4, 2008. MA application was not denied until February 13, 2008. Hearing testimony from the caseworker that handled claimant’s case is that she does not remember the case due to passage of time; but that it is possible she received a call from someone connected to the case and gave an extension to provide requested information.

Claimant’s representative stated that she did not receive DHS-3503 until February 5, 2009, and that she contacted claimant’s daughter at that time. Claimant’s daughter stated that her father was working on gathering the information on DHS-3503. No testimony was offered to show that department was contacted to request an extension past February 13, 2008, date of MA application denial.

Department's representatives also stated that they were not aware of the death of claimant's spouse, who was apparently receiving assistance, until hearing testimony revealed this fact.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that the department correctly denied claimant's MA application in February, 2008.

Accordingly, department's action is AFFIRMED, and it is SO ORDERED.

/s/ _____
Ivona Rairigh
Administrative Law Judge
for Ismael Ahmed, Director
Department of Human Services

Date Signed: July 1, 2009

Date Mailed: July 2, 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 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.

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