

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: 2009-20099
Issue No: 2006
Case No: [REDACTED]
Load No: [REDACTED]
Hearing Date:
August 26, 2009
Wayne County DHS (58)

ADMINISTRATIVE LAW JUDGE: Kenneth P. Poirier

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 a hearing. After due notice, a hearing was held on August 26, 2009, by telephone, in Detroit, Michigan. The Department received the claimant's Request for a Hearing on March 5, 2009. The claimant, [REDACTED], appeared and testified. Eligibility Specialist [REDACTED] appeared on behalf of the Department.

ISSUE

Did the Department properly deny the claimant's State Disability Assistance application due to the claimant's failure to provide required verification?

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 30, 2008, the claimant submitted an application for State Disability Assistance.

2. The Department sent to the claimant a request for information needed by the Department to process the claimant's application, with a return due date of January 26, 2009.
3. The claimant submitted to the Department all requested materials in a timely fashion, except for a medical examination report and a medical needs form.
4. Because of the claimant's failure to submit all the requested materials on time, the Department denied the claimant's application on February 10, 2009.
5. The claimant notified his caseworker that he had a medical appointment on February 24, 2009.
6. Ultimately the claimant did submit requested medical information to the Department, and as result, the claimant was certified as being eligible for assistance under the Adult Medical Program as of May 1, 2009, and the State Disability Assistance program as of May 16, 2009.

CONCLUSIONS OF LAW

The Medical Assistance program is established by Subchapter XIX of Chapter 7 of The Public Health & Welfare Act, 42 USC 1397, and is administered by the Department of Human Services ("Department"), formerly known as the Family Independence Agency, 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, and the Program Reference Manual.

Under PAM 105, customers must cooperate with the local office in determining initial and ongoing eligibility. This includes completing necessary forms. Customers must take actions within their ability to obtain verification. The local office must assist customers who ask for help in completing forms or gathering verification. Particular sensitivity must be shown to customers who are illiterate, disabled, or not fluent in English. The agency must allow the client

10 calendar days (or other time limit specified in policy) to provide verification requested. If the client cannot provide the verification despite a reasonable effort, the agency must extend the time limit at least once. The agency is to send a negative action notice when (a) the client indicates a refusal to provide a verification, or (2) the time period given has elapsed and the client has not made a reasonable effort to provide it. Only adequate notice is required for application denial.

PAM 130. An authorized representative is a person who applies for assistance on behalf of the client and/or otherwise acts on his behalf. PAM 110. The authorized representative assumes all the responsibilities of a client. PAM 110.

At the hearing there was no persuasive evidence offered to show that the claimant told his caseworker about any difficulties that he may have been having in obtaining the requested medical information prior to the January 26, 2009 due date. The Department did have the obligation to assist the claimant in meeting his obligation to cooperate in determining initial and ongoing eligibility. The Department, however, could not reasonably have been expected to extend the due date, if it had no notice that the claimant was encountering difficulty in meeting it.

It is accordingly concluded that the claimant has not fulfilled his duty to cooperate with the Department in establishing State Disability Assistance eligibility. The Department's State Disability Assistance denial should therefore be UPHeld.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that the Department appropriately denied the claimant's State Disability Assistance application due to the claimant's failure to provide required verification.

/s/

Kenneth P. Poirier
Administrative Law Judge
for Ismael Ahmed, Director
Department of Human Services

Date Signed: 09/01/09

Date Mailed: 09/01/09

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 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.

KP/jlg

cc:

