STATE OF MICHIGAN STATE OFFICE OF ADMINISTRATIVE HEARINGS AND RULES

ADMINISTRATIVE HEARINGS FOR THE DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF:

Claimant

Reg. No:2009-28219Issue No:2006Case No:Image: Comparison of the second second

ADMINISTRATIVE LAW JUDGE: William A. Sundquist

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 February 25, 2010.

<u>ISSUE</u>

Was good cause for not complying with timely verification requirements established?

FINDINGS OF FACT

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

 Negative case action: Medicaid termination on May 1, 2009 based on issue above per PAM 105, 115, and 130.

(2) The DHS sent claimant two Verification Checklists with return due-dates of April 20, 2009 and April 27, 2009, respectively.

(3) Income was not timely verified.

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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).

Facts above are undisputed.

The claimant testified that she did not understand what was needed for the income

verification requested in the DHS Checklists, and that is why it was not verified.

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.

The client might be unable to answer a question about himself or another person whose circumstances must be known. Allow the client at least 10 days (or other timeframe specified in policy) to obtain the needed information. PAM, Item 105, p. 5.

Assisting the Client

All Programs

The local office must assist clients who ask for help in completing forms (including the DCH-0733-D) or gathering verifications. Particular sensitivity must be shown to clients who are illiterate, disabled or **not** fluent in English. PAM, Item 105, p. 9.

GOOD CAUSE----A circumstance which is considered a valid reason for not complying with a requirement. PRG, page 15.

When a Medicaid recipient does not understand what is required for the DHS, she has the responsibility to ask the DHS for help so that the verification process can be timely completed. This was not done.

There was no evidence presented by the claimant that it was beyond her control to have asked the DHS for help with understanding the income verification requirement. Therefore, this ALJ does not find good cause for the claimant's noncompliance with timely income reporting requirements.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that good cause for not complying with timely verification requirements was not etablished.

Accordingly, Medicaid termination is UPHELD.

<u>/s/</u>

William A. Sundquist Administrative Law Judge for Ismael Ahmed, Director Department of Human Services

Date Signed: March 24, 2010

Date Mailed: March 25, 2010

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.

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