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:2009-35277Issue No:2006Case No:1000Load No:1000Hearing Date:1000October 14 2009142009Gladwin County DHS

ADMINISTRATIVE LAW JUDGE: Marlene B. Magyar

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 October 14, 2009. Claimant and his daughter personally appeared and testified.

<u>ISSUE</u>

Did the department properly process claimant's February 11, 2009 Medicaid (MA) and State Disability Assistance (SDA) application?

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 February 11, 2009, claimant applied for disability-based medical coverage(MA) and a monthly cash grant (SDA).

(2) The local office took no steps toward application processing until four months later, on June 9, 2009.

(3) On June 9, 2009, the application processing worker sent a written request toto return all claimant's treatment records from that facility.

(4) When the hospital failed to respond to the department's request, the department put the sole burden on claimant to obtain these records.

(5) On June 22, 2009, the department sent claimant a <u>Verification Checklist</u>
(DHS-3503) requesting him to call the hospital and get the missing records (Department Exhibit #1).

(6) As soon as claimant received this checklist, on or about June 24, 2009, his daughter called the hospital.

(7) The hospital denied ever receiving a request from the department, contrary to the department's representation of action taken (See Finding of Fact #3 above).

(8) Claimant's daughter telephoned the department that same day and relayed the hospital's message of non-receipt, thus prompting claimant's application processing worker to immediately fax another request to the hospital, which again merited no response.

(9) Initiating no further contact with either the hospital record staff or claimant, the department summarily denied claimant's disputed application by written notice to claimant dated July 14, 2009.

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

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Manual (PAM), the Program Eligibility Manual (PEM) and the Program Reference Manual

(PRM).

The applicable departmental policy states:

DEPARTMENT POLICY

All Programs

Clients have rights and responsibilities as specified in this item.

The local office must do **all** of the following:

- . Determine eligibility.
- . Calculate the level of benefits.
- Protect client rights. PAM, Item 105, p. 1.

LOCAL OFFICE RESPONSIBILITIES

All Programs

Ensure client rights described in this item are honored and that client responsibilities are explained in understandable terms. Clients are to be treated with dignity and respect by all DHS employees. PAM, Item 105, p. 8.

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.

The client must obtain required verification, but you must assist if they need and request help. PAM, Item 130, p. 2.

The department's witness stipulated on the record the first departmental error occurred

when the application was not processed within the internal standard-of-promptness required by

policy. She also acknowledged claimant and his daughter took all action within their power and

control to obtain the necessary hospital records. In fact, claimant did not even know the

department was having trouble with the hospital's co-operation until he received the application denial notice in mid-July (five months after application filing).

The department admitted this application was not properly processed at the threshold level because the standard-of-promptness for doing so was greatly exceeded. This fact alone warrants a reversal of departmental action. Additionally, the department's policies require assistance from staff if an applicant requests help in obtaining necessary records from uncooperative third parties, which is exactly what occurred in this case. As such, the department's actions during application processing cannot be upheld.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides the department erred in processing claimant's February 11, 2009 MA/SDA application.

Accordingly, the department's denial is REVERSED and this case is returned to the local office for immediate application reinstatement/reprocessing in accordance with departmental policy, invoking the department's assistance in obtaining any outstanding medical records necessary for the Medical Review Team (MRT) to assess claimant's disability or lack thereof. **SO ORDERED.**

<u>/s/</u>____

Marlene B. Magyar Administrative Law Judge for Ismael Ahmed, Director Department of Human Services

Date Signed: October 15, 2009

Date Mailed:_ October 15, 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. MBM/db

cc: