

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: 2009-5700

Issue No: 2006

Case No: [REDACTED]

Load No: [REDACTED]

Hearing Date:

December 8, 2009

Genesee County DHS

ADMINISTRATIVE LAW JUDGE: Carmen G. Fahie

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 three-way telephone hearing was held on Tuesday, December 8, 2009. The claimant is deceased, but was represented by his authorized representative, [REDACTED]

ISSUE

Did the department properly deny the claimant's application for Medical Assistance (MA) because the claimant or his authorized representative did not provide the required verifications?

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 March 25, 2008, [REDACTED] submitted an application for MA with retroactive MA to February 2008. (Department Exhibit 1-1A)

(2) On May 8, 2008, the department caseworker sent the claimant and the claimant's authorized representative, [REDACTED], a Verification Checklist for additional information to determine MA eligibility that was due May 28, 2008. (Department Exhibit 2)

(3) On [REDACTED], the claimant died.

(4) On June 4, 2008, [REDACTED] faxed a copy of the claimant's death certificate.

(5) On July 21, 2008, the claimant was approved for MA in error for the month of his death according to the department caseworker. (Department Exhibit 4)

(6) On July 21, 2008, the department caseworker sent the claimant and his authorized representative a denial notice for the RCH program because the asset verifications were not provided. (Department Exhibit 3)

(7) On October 20, 2008, the department received a hearing request from the claimant's authorized representative contesting the department negative action based on a previous application dated March 25, 2008 stating retroactive MA was requested to January 2008, from a February 19, 2008 application.

(8) This Administrative Law Judge notes that the March 25, 2008 application which was dealt with in the hearing only requested retroactive MA to February 2008. (Department Exhibit 1) Even though the hearing request mentions a February 19, 2008 application, this hearing was about the March 25, 2008 application with retroactive benefits to February 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).

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.

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.

Client Cooperation

The client is responsible for providing evidence needed to prove disability or blindness. However, you must assist the client when they need your help to obtain it. Such help includes the following:

- . Scheduling medical exam appointments
- . Paying for medical evidence and medical transportation

- See PAM 815 and 825 for details. PEM, Item 260, p. 4.

All Programs

Clients must completely and truthfully answer all questions on forms and in interviews. PAM, Item 105, p. 5.

Refusal to Cooperate Penalties

All Programs

Clients who are able but refuse to provide necessary information or take a required action are subject to penalties. PAM, Item 105, p. 5.

Verifications

All Programs

Clients must take actions within their ability to obtain verifications. DHS staff must assist when necessary. See PAM 130 and PEM 702. PAM, Item 105, p. 8.

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.

ELIGIBILITY DECISIONS

Denials

All Programs

If the group is ineligible **or** refuses to cooperate in the application process, send a denial notice within the standard of promptness. PAM, Item 115, p. 15.

In the instant case, the claimant's authorized representative submitted an application dated March 25, 2008 with retroactive benefits to February 2008. The department requested additional information to determine medical and asset eligibility. The asset information was not received by the department by the due date of May 28, 2008. On July 21, 2008, the department denied the claimant's resident county application, but no notice was sent for MA.

During the hearing, the department caseworker testified that they did not receive the required verifications to determine asset eligibility for the claimant. The claimant died on [REDACTED]. The department caseworker testified that MA was approved in error for the month of the claimant's death of [REDACTED].

This Administrative Law Judge finds that even though there was no evidence in the file that [REDACTED] submitted the asset verifications required to determine RCH and MA eligibility, the department failed to send a denial notice for the MA program as is required by policy. Therefore, the department has not established that it was acting in compliance with department policy by determining that the claimant was not eligible for MA benefits when they failed to send a MA denial notice.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that the department did not appropriately deny the claimant's application for MA because they did not send an appropriate MA denial notice because neither the claimant nor his authorized representative provided the required asset verifications by the May 28, 2008 deadline.

Accordingly, the department's decision is **REVERSED**. The department is ordered to send the appropriate denial notice denying MA for the March 25, 2008 application with retroactive benefits to February 2008 because of failure to provide asset verifications.

/s/ _____
Carmen G. Fahie
Administrative Law Judge
for Ismael Ahmed, Director
Department of Human Services

Date Signed: January 14, 2010

Date Mailed: January 14, 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 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.

CGF/vmc

cc:

