

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: 2009-7364
Issue No: 2006
Case No: [REDACTED]
Load No: [REDACTED]
Hearing Date:
August 12, 2009
Montcalm County DHS

ADMINISTRATIVE LAW JUDGE: Susan Payne Woodrow

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 August 12, 2009. Present were: [REDACTED] Claimant, Aunt, [REDACTED], Mother, [REDACTED], Richard Stilson, Family Independence Manager. All parties were sworn.

ISSUE

Whether the Department properly denied the claimant's application for Medical Assistance (MA).

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 September 3, 2008, [REDACTED] was injured. He is a farmer.
2. He was taken to the Michigan Hand Center for treatment.

3. The Michigan Hand Center sent him to Spectrum Health for further treatment.
4. He applied for Medical Assistance (MA) on September 26, 2008.
5. His Aunt, [REDACTED], and his Mother, [REDACTED], worked together with [REDACTED] to complete his paperwork several days, using the kitchen table and filling out whatever they needed.
6. Because [REDACTED] and [REDACTED] live in the same town, and the mother lives farther away, out of town, [REDACTED] handled most of the paperwork with [REDACTED] because of his medical inability.
7. [REDACTED] and [REDACTED] met with the Worker, Sam Ventocilla, when they turned in the paperwork. He reviewed the documents for completeness.
8. On October 11, 2008, [REDACTED] k faxed a letter of inquiry to Mr. Ventocilla without response.
9. They understood that Mr. Ventocilla could not find the medical and asked it to be faxed again.
10. The Michigan Hand Center faxed medical on October 3, 2008.
11. Spectrum Health faxed medical on October 15, 2008.
12. Despite the claimant's and his aunt's ongoing efforts and multiple phone calls, claimant was denied benefits on November 5, 2008 due to failure to cooperate in providing verification.
13. On the following dates, [REDACTED] faxed inquiries to Mr. Ventocilla without any response: November 13, 2008 and November 24, 2008.
14. One of the faxes was within 10 days of the denial.

15. [REDACTED] had difficulty reaching Mr. Ventocilla on multiple occasions. She would leave phone messages on his direct line and get no response. When she called through the main number with the receptionist, he would answer the phone and then assist.

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 (formerly known as the Family Independence Agency) 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).

Clients must cooperate with the local office in determining initial and ongoing eligibility, including the completion of the necessary forms. PAM 105, p. 5. Claimants must take action within their ability to obtain verification. The local office must assist clients who ask for help in completing forms or gathering verification. Verification means documentation or other evidence to establish the accuracy of the client's verbal or written statements. PAM 130, p. 1. Clients are allowed ten (10) calendar days (or other time limit specified in policy) to provide the requested verifications. PAM 130, p. 4. If the client cannot provide the verification, despite a reasonable effort, the time limit should be extended up to three times. *Id.*

It appears that the claimant and his aunt turned in the documents directly to the Department worker. At that time, the Department worker did not tell them that it was incomplete. The claimant's aunt was in continual contact, as was the mother, to ensure that everything was being completed as required. There is no failure to cooperate in

this matter. The Department witness had no personal knowledge and could not dispute the testimony of both claimant and his aunt that they handed the documents to the worker.

The aunt showed copies of fax transmittals indicating transmissions to the department. Those transmittals do not appear in the file. The fact that those faxed documents are not in the file corroborates the likelihood that that other documents may have been received and were not placed in the file properly.

Further, since the claimant and his aunt responded within eight days of receiving the denial, the application should not have been denied due to non-cooperation.

The Department has failed to process the claim properly and the denial was inappropriate.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that the denial dated November 5, 2008 is REVERSED.

It is ORDERED that the Department process the claim from the application date of September 26, 2008.

Should the claimant request additional time, it is to be granted at least four times consistent with policy set forth above.

/s/ _____
Susan Payne Woodrow
Administrative Law Judge
for Ismael Ahmed, Director
Department of Human Services

Date Signed: August 17, 2009

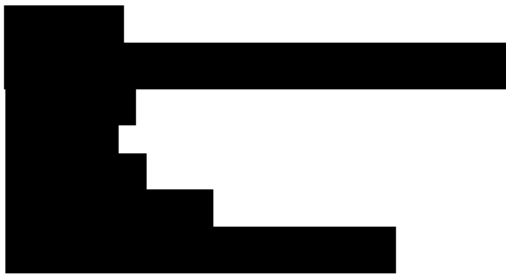
Date Mailed: September 2, 2009

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 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.

SPW/law

cc:

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