

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: 2009-5801
Issue No: 2006
Case No: [REDACTED]
Load No: [REDACTED]
Hearing Date: July 8, 2009
Eaton 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 conducted from Flint, Michigan on July 8, 2009. The claimant, [REDACTED], appeared. Nellie Harvey appeared on behalf of the department. Both were sworn and and testified by telephone.

ISSUE

Whether the department properly denied the claimant's Medical Assistance 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 September 9, 2008, claimant was mailed a new application with a verification check list to establish continued eligibility.

2. Claimant had until September 19, 2008, to return the completed application with verification documents as requested.

3. On September 17, 2008, claimant called and said he had information. Claimant was given additional time within which to apply, up to October 28, 2008. He did not respond by October 28, 2008 and the case was closed.

4. On October 29, 2008, within 10 days, claimant filed an appeal from the action.

5. Claimant did not supply the application or the supporting data within the time period requested.

6. Claimant was confused and thought that his submission of documents to the United States Social Security Administration was the same as applying for State Medical Assistance.

7. Since claimant's request was after the closure of the file, it was treated as a protest.

8. Claimant is paraplegic, he needs additional assistance.

9. On the record, the claimant and Department agreed that his claim would be reopened.

CONCLUSIONS OF LAW

The Medical Assistance ("MA") 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 ("DHS"), formally 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 (“PEM”), and the Program Reference Manual (“PRM”).

Clients must cooperate with the local office in determining initial and ongoing eligibility to include the completion of the necessary forms. PAM 105, p. 5. 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 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 for MA purposes, despite a reasonable effort, the time limit should be extended up to three times. *Id.* Verifications are considered timely if received by the due date. *Id.* An authorized representative is a person who applies for assistance on behalf of the client and/or otherwise acts on his behalf. PAM 110, p. 7.

In the record presented, the Department did not receive any documents for the claimant to pursue his entitlement. The department acted in accordance with the departmental policy when they denied the Claimant’s MA application for failure to cooperate.

Under Program Administrative Manual Item 600, clients have the right to contest any agency decision affecting eligibility or benefit levels whenever they believe the decision is illegal. The agency provides an Administrative Hearing to review the decision and determine if it is appropriate. Agency policy includes procedures to meet the minimal requirements for a fair hearing. Efforts to clarify and resolve the client’s concerns start when the agency receives a hearing request and continues through the day of the hearing.

In the present case, claimant is contesting the denial of his/her application for MA and SDA (The department failure to process claimant's application for MA and SDA) At the hearing, the department agreed to reinstate and reprocess claimant's application. As a result of this agreement, claimant indicated he/she no longer wished to proceed with the hearing. Since the claimant and the department have come to an agreement it is unnecessary for this Administrative Law Judge to make a decision regarding the facts and issues in this case.

During the hearing, the parties discussed the matter and agreed to a settlement. The Department, through Nellie Harvey, will send a new application and revised verification list to the claimant. The claimant will reapply and submit the needed documents including his Social Security card, bank account statements, health insurance cards, outstanding medical bills (if any), title to vehicles or property (if any) and a completed application.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, finds that the department's denial of the claimant's MA application is moot for failure to cooperate because the parties reached a settlement.

Accordingly, it is ORDERED:

1. The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that the department and claimant have come to a settlement regarding claimant's request for a hearing. Therefore it is ORDERED that

the department process claimant's application for MA and SDA in accordance with this settlement agreement.

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

Date Signed: July 16, 2009

Date Mailed: July 21, 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/kilt

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