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: 2010-12861

Issue No: 2006-3008

Case No: Load No:

Hearing Date: March 4, 2010

Oakland County DHS

ADMINISTRATIVE LAW JUDGE: Jonathan W. Owens

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 hearing was held on March 4, 2010. Claimant's Representative appeared and testified.

ISSUE

Did the Department properly deny Claimant's Medical Assistance (MA) and Food Assistance Program (FAP) case for failure to provide verifications?

FINDINGS OF FACT

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

- 1. On May 26, 2009, Claimant applied for FAP and MA.
- 2. On June 11, 2009, the Department requested verifications.
- 3. On June 22, 2009, representative dropped off verifications.
- 4. On June 23, 2009, verifications were due to the local office.

- 5. On November 23, 2009, the Department sent a denial notice.
- 6. On December 3, 2009, Claimant requested hearing.

CONCLUSIONS OF LAW

The Food Assistance Program (FAP)(formerly known as the Food Stamp (FS) program) is established by the Food Stamp Act of 1977, as amended, and is implemented by the federal regulations contained in Title 7 of the Code of Federal Regulations (CFR). The Department of Human Services (DHS) administers the FAP program pursuant to MCL 400.10, et seq., and MAC R 400.3001-3015. Department policies are found in the Program Administrative Manual (PAM), the Program Eligibility Manual (PEM) and the Program Reference Manual (PRM).

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).

In the present case, the Claimant's application was denied for failure to provide all requested verifications. On May 26, 2009, the Claimant applied for FAP and MA. The Department requested additional verifications to process the application. The Department asserts they never received the documents requested. The Claimant's representative testified she had personally dropped off the requested verifications and had signed the log. Unfortunately, the Department failed to have logs that went back to June 2009. The Claimant's representative testified she dropped off the requested documents on June 22, 2009.

Relevant policy can be found in PAM Item 130, pp.1-3:

Verification means documentation or other evidence to establish the accuracy of the client's verbal or written statements.

Obtain verification when:

- Required by policy. PEM items specify which factors and under what circumstances verification is required.
- Required as a local office option. The requirement must be applied the same for every client. Local requirements may not be imposed for MA, TMA-Plus or AMP without prior approval from central office.
- Information regarding an eligibility factor is unclear, inconsistent, incomplete or contradictory. The questionable information might be from the client or a third party.

Verification is usually required at application/re-determination and for a reported change affecting eligibility or benefit level.

Obtaining Verification

Tell the client what verification is required, how to obtain it, and the <u>due date</u> (see "Timeliness Standards" in this item). Use the DHS-3503, Verification Checklist, or for MA re-determinations, the DHS-1175, MA Determination Notice, to request verification.

Use the DHS-3503C, Verification Checklist for Citizenship/Identity to request documentation of citizenship or identity for Medicaid determinations.

The client must obtain required verification, but you must assist if they need and request help.

If neither the client nor you can obtain verification despite a reasonable effort, use the best available information. If no evidence is available, use your best judgment.

The Claimant has the burden to demonstrate verifications were in fact submitted to the Department. The Claimant's representative testified she dropped off the verifications on June 22, 2009 and had signed the log. However, the Department failed to have a copy of the sign-in logs back to June 2009. The Claimant testified credibly and this Administrative Law Judge finds the requested verifications were in fact submitted to the Department timely.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, finds the Department acted contrary to policy with regards to Claimant's MA and FAP application.

Therefore, it is ORDERED that the Department's decision in this regard be and is hereby REVERSED. The Department shall reprocess the Claimant's May 26, 2009 application and determine eligibility and if found eligible supplement the Claimant for any loss in benefits.

Joyathan W. Owens Administrative Law Judge for Ismael Ahmed, Director Department of Human Services

Date Signed: 04/05/10

Date Mailed: <u>04/05/10</u>

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.

JWO/di

cc: