

STATE OF MICHIGAN  
STATE OFFICE OF ADMINISTRATIVE HEARINGS AND RULES  
ADMINISTRATIVE HEARINGS FOR THE  
DEPARTMENT OF HUMAN SERVICES

IN THE MATTER:

[REDACTED]

Reg No. 201048689  
Issue No. 2006  
Case No. [REDACTED]  
Load No. [REDACTED]  
Hearing Date: October 13, 2010  
Kent County DHS

**ADMINISTRATIVE LAW JUDGE:** Jana A. Bachman

**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 13, 2010. Claimant was represented by [REDACTED]

**ISSUE**

Whether the Department of Human Services (department) acted in compliance with department policy when it determined claimant's Medical Assistance (MA) and State Disability Assistance (SDA) benefits.

**FINDINGS OF FACT**

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

1. April 21, 2010, claimant applied for Medical Assistance and State Disability Assistance.
2. May 8, 2010, the department sent claimant a Medical Determination Verification Checklist (DHS-3503) including required proofs and setting a due date of May 13, 2010. Department Exhibit A, pg 10. May 10, 2010, claimant requested and was granted an extension of deadline. Department Exhibit A, pg 11.

3. June 1, 2010, the department sent claimant Notice of Case Action (DHS-1605) that required proofs were not received and the application was denied. Department Exhibit a, pgs 3-6.

### **CONCLUSIONS OF LAW**

The Medical Assistance (MA) program is established by the 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 Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) and the Program Reference Manual (PRM).

Department manuals provide the following policy statements and instructions for caseworkers:

#### **Timeliness of Verifications**

##### **All Programs (except TMAP)**

Allow the client 10 calendar days (or other time limit specified in policy) to provide the verification you request. If the client cannot provide the verification despite a reasonable effort, extend the time limit at least once.

Verifications are considered to be timely if received by the date they are due. For electronically transmitted verifications (e.g., fax, email), the date of the transmission is the receipt date. Verifications that are submitted after the close of regular business hours through the drop box or by delivery of a DHS representative are considered to be received the next business day.

Send a negative action notice when:

- The client indicates refusal to provide a verification, or
- The time period given has elapsed and the client has not made a reasonable effort to provide it.

##### **MA Only**

Send a negative action notice when:

- The client indicates refusal to provide a verification, or
- The time period given has elapsed.

##### **Bridges Administrative Manual (BAM) 130**

**MA**

42 CFR 435.913(a)  
42 CFR 435.916(b)  
MCL 400.37

Public Law 109-171

In this case, the department properly sent claimant notice of required proofs and set an appropriate deadline. Claimant requested and was properly granted an extension of deadline. The second deadline expired and the proofs were not received. As such the department properly denied the application. Finding of Fact 1-3. At hearing, claimant's representative testified that medical documentation was date stamped received by the department "May 13, 2010". The department testified that it was date stamped "June 7, 2010". The medical document was completed May 21, 2010 and countersigned by the physician May 25, 2010. Department A, pages 12-14. It is improbable that the department received the completed form on May 13 as that was 7 days before the document was completed by the physician. Accordingly, a preponderance of the evidence establishes that the department's asserted receipt date of June 7, 2010 is accurate. Therefore, the department properly denied claimant's application for benefits and its action must be upheld.

**DECISION AND ORDER**

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides the Department of Human Services acted in compliance with department policy when it determined claimant's eligibility for Medical Assistance and State Disability Assistance benefits.

Accordingly, the department's action is, hereby, UPHELD.

/S/  
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Jana A. Bachman  
Administrative Law Judge  
for Ismael Ahmed, Director  
Department of Human Services

Date Signed: December 10, 2010

Date Mailed: December 13, 2010

201048689/jab

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.

JAB/db

cc:

