

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: 2010-5705  
Issue No: 2006  
Case No: [REDACTED]  
Load No: [REDACTED]  
Hearing Date:  
June 9, 2010  
Kent County DHS

ADMINISTRATIVE LAW JUDGE: Marlene B. Magyar

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 upon request for hearing. After due notice, a telephone hearing was held on June 9, 2010. Claimant is a developmentally disabled individual who was represented at hearing by his court-appointed guardian.

ISSUE

Did the department properly close claimant's Medicaid (MA) case based on failure to return necessary documents during his mandatory redetermination process?

FINDINGS OF FACT

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

(1) At all times relevant, claimant was (and remains) a protected adult (DOB: [REDACTED]) with a court-appointed guardian.

(2) Claimant was an ongoing MA recipient until the department initiated the mandatory redetermination process in June 2009 to determine whether or not he still met all of the financial and non-financial factors necessary to receive continued assistance.

(3) On June 18, 2009, the department mailed all the required redetermination paperwork to the mutual address-of-record shared by claimant and his court-appointed guardian (Department Exhibit #1 and #2).

(4) This paperwork specifically states the required information and all the requested proofs therein must be returned to the local office no later than July 1, 2009.

(5) This paperwork also clearly states:

If you do **NOT** return this form and all of the required proofs by the due date, your benefits may be cancelled or reduced.

(6) The department did not receive any of the completed paperwork or requested proofs by the stated deadline; consequently, on August 20, 2009, the department mailed a Notice of Case Action (DHS-1605) to the correct address-of-record which indicated claimant's ongoing MA case would be closed effective September 1, 2009 (Department Exhibit #3).

(7) Claimant's case did, in fact, close in September 2009; however, claimant's court-appointed guardian sought assistance from [REDACTED] in filing a new application.

(8) The department approved claimant's new application effective November 2009 and his MA benefits have remained uninterrupted since then.

#### 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).

The applicable departmental policy states:

### **AUTHORIZED REPRESENTATIVES**

#### **All Programs**

An **Authorized Representative** (AR) is a person who applies for assistance on behalf of the client and/or otherwise acts on his behalf (e.g., to obtain FAP benefits for the group.) An AR is not the same as an Authorized Hearing Representative (AHR) PAM, Item 110, p. 6.

The AR assumes all the responsibilities of a client. See PAM 105. PEM, Item 110, p. 7.

### **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.

#### **All Programs**

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

Verification is usually required at application/redetermination **and** for a reported change affecting eligibility or benefit level. PAM, Item 130, p. 1.

At application and redetermination:

- . Thoroughly review all eligibility factors in the case.

Applications and redeterminations must be completed within the standards of promptness. See PAM 115, 210. PAM, Item 105, p. 11.

## **VERIFICATION AND COLLATERAL CONTACTS**

### **DEPARTMENT POLICY**

#### **All Programs**

**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. PAM, Item 130, p. 1.

#### **Obtaining Verification**

##### **All Programs**

Tell the client what verification is required, how to obtain it, and the due date (see “**Timeliness Standards**” in this item). Use the DHS-3503, Verification Checklist, or for MA redeterminations, the DHS-1175, MA Determination Notice, to request verification. PAM, Item 130, p. 2.

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. PAM, Item 130, p. 4.

##### **MA Only**

Send a negative action notice when:

- the client indicates refusal to provide a verification, or
- the time period given has elapsed. PAM, Item 130, p. 4.

The evidence of record clearly establishes the department properly applied all the above-referenced policy in claimant's case. Claimant's mother, in her capacity as his court-appointed guardian, had the responsibility to comply with this policy. When she failed to do so, the department had no alternate but to close claimant's MA case.

At hearing, claimant's mother alleged she mailed everything the department requested back to them before the stated due date; however, she submitted no documentary evidence or corroborating testimony to support this allegation. As such, no basis exists to reverse the department's MA case closure.

Lastly, it must be noted claimant's MA coverage lapse was very brief once his court-appointed guardian sought help from [REDACTED] in complying with the department's rules.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides the department properly closed claimant's MA case based on failure to return necessary documents during his mandatory redetermination process.

Accordingly, the department's action is AFFIRMED.

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/s/  
Marlene B. Magyar  
Administrative Law Judge  
for Ismael Ahmed, Director  
Department of Human Services

Date Signed: July 12, 2010

Date Mailed: July 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 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.

MBM/cv

cc:

