

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.: 2010-8602
Issue No.: 2012
Case No.: [REDACTED]
Load No.: [REDACTED]
Hearing Date:
February 18, 2010
Macomb County DHS (12)

ADMINISTRATIVE LAW JUDGE: Colleen M. Mamelka

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 upon the Claimant's request for hearing. After due notice, a hearing was held in Clinton Township, Michigan on Thursday, February 18, 2010. The Claimant's authorized hearing representative, [REDACTED] of [REDACTED], appeared and testified. [REDACTED] appeared on behalf of the Department.

ISSUE

Whether the Department properly registered and processed the Claimant's May 13, 2009 Medical Assistance ("MA") application?

FINDINGS OF FACT

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

1. On May 19, 2009, the Claimant's authorized representative submitted an application for public assistance seeking MA-P benefits.
2. The Medical Review Team ("MRT") did not make a disability determination.

3. As a result, an Eligibility Notice/Notice of Case Action was never sent to the Claimant and/or the authorized representative.
4. On September 9, 2009, the Department received the Claimant's written Request for Hearing.

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, formerly known as the Family Independence Agency, pursuant to MCL 400.10 *et seq* and MCL 400.105. Departmental policies are found in the Program Administrative Manual ("PAM"), the Program Eligibility Manual ("PEM"), and the Program Reference Manual ("PRM").

A request for public assistance may be in person, by mail, telephone or through by an internet application. PAM 110 Registered applications must contain, at a minimum, the name, birth date, and address of the applicant, along with the signature of the applicant or authorized representative. PAM 105 Retro-MA coverage is available back to the first day of the third calendar month prior to the application date. PAM 115 If a client refuses to cooperate in the application process, a denial notice is sent within the standard of promptness. PAM 115

Any person, regardless of age, or his authorized representative, may apply for assistance. PAM 110 An authorized representative ("AR") is a person who applies for assistance on behalf of the client and/or otherwise acts of his behalf. PAM 110 An application received from an agency is acceptable if it is signed by an individual and is accompanied by written documentation from the client authorizing the agency to act as the authorized representative.

PAM 110 For MA purposes, an authorized representative must be designated in writing by the client. *Id.*

On May 13, 2009, the Claimant's authorized representative submitted an application containing the required information necessary to register and process. The application and medical packet were not forwarded to the MRT for a determination regarding disability. As a result, there has not been an eligibility decision for this application. During the hearing, the Department agreed to (re)register and process the application in accordance with department policy. Under this scenario, the Department's processing of the application is not upheld.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, finds the Department's failure to completely process the application is not upheld.

Accordingly, it is ORDERED:

1. The Department's actions are not upheld.
2. The Department shall process, as agreed, the May 19, 2009 application in accordance with department policy.
3. The Department shall notify the Claimant and her authorized representative in writing of the determination in accordance with department policy.
4. The Department shall supplement for lost benefits (if any) that the Claimant was entitled to receive if otherwise eligible and qualified in accordance with department policy.

Colleen M. Mamelka

Colleen M. Mamelka
Administrative Law Judge
for Ismael Ahmed, Director
Department of Human Services

Date Signed: 3/11/2010

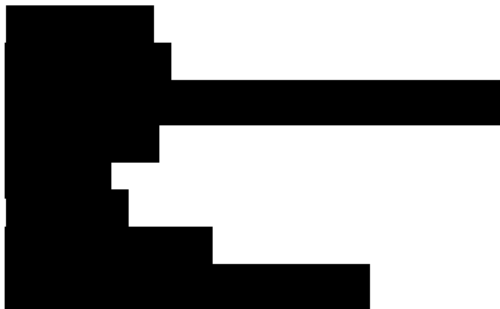
Date Mailed: 3/11/2010

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.

CMM/jlg

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