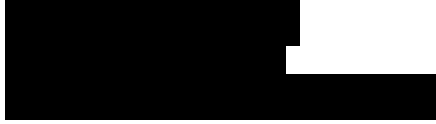


STATE OF MICHIGAN
STATE OFFICE OF ADMINISTRATIVE HEARINGS AND RULES
ADMINISTRATIVE HEARINGS FOR THE
DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF:



Reg. No: 2010-12268
Issue No: 2006
Case No: [REDACTED]
Load No: [REDACTED]
Hearing Date:
September 1, 2010
Wayne 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 September 1, 2010. Claimant's Representative appeared and represented.

ISSUE

Did the Department properly deny Claimant's Medical Assistance (MA) application 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 August 22, 2008, Claimant's representative applied for MA benefits.
2. Agency admitted to failing to send out a verification request to the Claimant's representative and agreed to reprocess.
3. On January 26, 2009, the Claimant's representative submitted a reconstructed copy of the August 22, 2008 application to the Department.

4. A verification checklist was sent to the Claimant's representative with a due date of February 9, 2009.
5. Prior to the due date, Claimant's representative requested an extension, which was granted until February 20, 2009.
6. On February 20, 2009, Claimant's representative faxed 5 pages of documents along with a letter indicating they were submitting all requested items and for the Department to advise if further verifications were necessary.
7. On November 25, 2009, a hearing request was received.

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 (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 requested verifications. The Claimant was not present at the hearing. The Claimant's representative stated verification checklists were sent to the Department on February 20, 2009, the extended due date granted by the Department via a fax. The Claimant's representative provided a copy of the fax confirmation and a copy of the attached cover letter. The Department representative stated she was not the worker of record nor was she the supervisor for the case in question. The Department could only assert what was provided in the hearing packet.

Relevant policy can be found in BAM 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. BEM 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 due date (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.

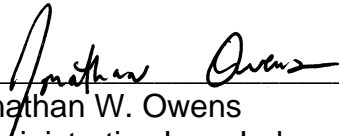
The Department is required by policy to obtain verifications. The Claimant's representative provided adequate evidence they had complied fully with the request for verifications within the timeframe given. This Administrative Law Judge finds the

Department failed to act in accordance with policy when it denied the Claimant's application for MA based upon a failure to submit verifications.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that the Department of Human Services was not acting in compliance with Department policy when it denied the Claimant's MA application.

Accordingly, the Department's decision is REVERSED and the Department is ORDERED to process the Claimant's MA application dated August 22, 2008.



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

Date Signed: 09/02/10

Date Mailed: 09/02/10

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/dj

cc:

