

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

IN THE MATTER:

[REDACTED]

Reg. No.: 2010-38446
Issue No.: 2003
Case No.: [REDACTED]
Load No.: [REDACTED]
Hearing Date: August 23, 2010
Wayne County DHS (82)

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 a hearing. After due notice, a hearing was held in Detroit, Michigan on Monday, August 23, 2010. The Claimant did not appear however, the Claimant's authorized hearing representative, [REDACTED] of [REDACTED] appeared and testified. [REDACTED] and [REDACTED] appeared on behalf of the Department.

ISSUE

Whether the Department properly denied the Claimant's application for Medical Assistance ("MA-N") based on the failure to timely provide the requested verifications?

FINDINGS OF FACT

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

1. The Claimant/Representative submitted an application for public assistance seeking MA-N benefits in August 2009. (Exhibit 1)
2. On February 4, 2010, the Department sent a Verification Checklist to the Claimant requesting information regarding a large deposit and subsequent withdrawal occurring in July 2009. (Exhibit 2)
3. The Verifications were due by February 16, 2010. (Exhibit 2)
4. On February 16, 2010, the Claimant/Representative submitted a letter stating that the deposit was from the closure of a pension and the withdrawal was for the purchase of a vehicle. (Exhibit 3)

5. On this same date, the Representative emailed the Department requesting a 10 day extension. (Exhibit 4)
6. On February 24, 2010, the Department denied the application based on the failure to provide the requested information. (Exhibit 4)
7. On March 15, 2010, the Department received the Claimant/Representative's timely request for hearing. (Exhibit 5)

CONCLUSIONS OF LAW

The Medical Assistance 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 Bridges Reference Manual ("BRM").

Clients must cooperate with the local office in determining initial and ongoing eligibility to include the completion of the necessary forms. BAM 105 Verification means documentation or other evidence to establish the accuracy of the client's verbal or written statements. BAM 130 Client's are allowed 10 calendar days (or other time limit specified in policy) to provide the requested verifications. *Id.* If the client cannot provide the verification for MA purposes, despite a reasonable effort, the time limit should be extended up to three times. *Id.* Verifications are considered timely if received by the due date. *Id.* An authorized representative is a person who applies for assistance on behalf of the client and/or otherwise acts on his behalf. BAM 110

In this case, an application for MA-N benefits was submitted in August 2009. Due to some transfers/promotions of some worker(s), a verification checklist was not sent out until February 4, 2010. The Department sought verification regarding a large deposit and subsequent withdrawal from the Claimant's checking account in July 2009. In response, the Claimant submitted a written statement stating that the deposit was from a closed pension and the withdrawal was to purchase a vehicle. On this same date, the Claimant/Representative requested a 10 day extension. This extension request was sent to a worker who temporarily took over the initial worker's caseload however this was not the current working assigned to the case. The Department needed further documentation, specifically, proof of the retirement fund being closed and a copy of the vehicle purchase agreement. A second verification checklist was not sent out nor was the extension request acted upon. Instead, the case was denied on February 24, 2010 based on the failure to submit the documentation the Department required for processing. There was no evidence that the Claimant/Representative was not

cooperating or was not making reasonable attempts to secure the information. Under these facts, the Department's determination 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 determination is not upheld.

Accordingly, it is ORDERED:

1. The Department's determination is REVERSED.
2. The Department shall re-open and process the Claimant's August 2009 application in accordance with department policy.
3. The Department shall notify the Claimant and his authorized representative of the determination in accordance with department policy.
4. The Department shall supplement for any lost benefits (if any) that the Claimant was entitled to receive if otherwise eligible and qualified.

Colleen M. Mamelka

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

Date Signed: 8/24/2010

Date Mailed: 8/24/2010

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 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.

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cc:

