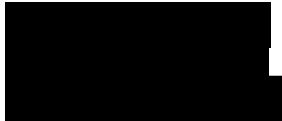


STATE OF MICHIGAN
STATE OFFICE OF ADMINISTRATIVE HEARINGS AND RULES
ADMINISTRATIVE HEARINGS FOR THE
DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF THE CLAIM OF:



Reg. No.: 201038950
Issue No.: 2006
Case No.: [REDACTED]
Load No.: [REDACTED]
Hearing Date: July 26, 2010
Wayne County DHS

ADMINISTRATIVE LAW JUDGE: Aaron McClintic

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to an Order from the Circuit Court for the County of Wayne remanding to the State Office of Administrative Hearings for a new hearing, at which the Administrative Law Judge shall evaluate if, at the time the Department of Human Services issued its October 31, 2008 denial of the February 15, 2008 Medicaid application of Claimant, DHS had evidence in Claimant's file that could have been forwarded to the Medical Review Team. After due notice, a telephone hearing was held on July 26, 2010. The Claimant's Authorized Representative, [REDACTED] appeared and testified. [REDACTED] appeared on behalf of the Department.

ISSUE

Did Claimant submit medical evidence in support of his claim for Medical Assistance?

FINDINGS OF FACT

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

- (1) A previous hearing was held in this matter whereby the Administrative Law Judge issued a decision on August 12, 2009 affirming the Department's denial of Claimant's Medicaid application.

- (2) Claimant appealed that decision to the Wayne County 3rd Circuit Court.
- (3) This matter was remanded from the Wayne County 3rd Circuit Court on June 11, 2010 for the sole purpose of conducting a hearing to evaluate if, at the time the Department of Human Services issued its October 31, 2008 denial of the February 15, 2008 Medicaid application of petitioner, [REDACTED] DHS had evidence in Petitioner's file that could have been forwarded to the Medical Review Team.
- (4) Claimant presented medical records at hearing previously submitted to the Department on March 26, 2008 and April 3, 2008 that were faxed to the Department at that time. Fax transmission reports were submitted with the medical records verifying these submissions. These records should have been submitted to the Medical Review Team.

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 Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) and the Program Reference Manual (PRM).

Clients must cooperate with the local office in determining initial and ongoing eligibility to provide verification. BAM 130, p. 1. The questionable information might be from the client or a third party. *Id.* The Department can use documents, collateral contacts or home calls to verify information. *Id.* The client should be allowed 10 calendar days to provide the verification. If the client cannot provide the verification despite a reasonable effort, the time limit to provide should be extended at least once. BAM 130, p.4; BEM 702. If the client refuses to provide the information or has not made a reasonable effort within the specified time period, then policy directs that a negative action be issued. BAM 130, p. 4. Before making an eligibility determination, however, the department must give the client a reasonable opportunity to resolve any discrepancy between his statements and information from another source. BAM 130, p. 6.

In the present case, Claimant presented medical records at hearing previously submitted to the Department on March 26, 2008 and April 3, 2008. Fax transmission records for these submissions were submitted at hearing. These medical records should have been sent to the medical review team. Therefore, it was incorrect for the Department to deny Claimant's application for failing to provide evidence in support of his claim.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law decides that it was improper for the Department to deny Claimant's application for Medicaid for failing to provide evidence in support of his claim, and it is ORDERED that the Department's decision is hereby REVERSED. Claimant's application shall be reinstated and reprocessed going back to the date of application.

/s/



Aaron McClintic
Administrative Law Judge
For Ismael Ahmed, Director
Department of Human Services

Date Signed: August 4, 2010

Date Mailed: August 4, 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 60 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.

AM/hw

cc:

