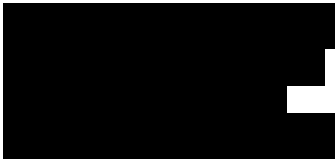


STATE OF MICHIGAN
STATE OFFICE OF ADMINISTRATIVE HEARINGS AND RULES
ADMINISTRATIVE HEARINGS FOR THE
DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF:



Reg No. 201053219
Issue No. 2006
Case No. [REDACTED]
Load No. [REDACTED]
Hearing Date: January 18, 2011
Kalamazoo 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 the claimant's request for a hearing. After due notice, a telephone hearing was held on January 18, 2011. Claimant did not appear; however, he was represented by his authorized representative.

ISSUE

Did the department properly deny claimant's June 2010 Medicaid (MA)/retro-MA application?

FINDINGS OF FACT

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

1. Claimant is an incapacitated, 85-year-old male who entered long term care on September 14, 2009 (Department Exhibit #1, pg 3).
2. On June 25, 2010, the department received an MA/retro-MA application filed by claimant's authorized representative on his behalf (Department Exhibit #1, pgs 1-9).
3. On June 28, 2010, the department requested in writing certain necessary asset/income verifications from this authorized representative to determine whether or not claimant met the financial requirements necessary to qualify for MA/retro-MA (Department Exhibit #1, pgs 10 and 11).

4. The initial deadline for return of these verifications was July 8, 2010; however, at the authorized representative's request the department extended this deadline with the final due date being July 29, 2010 (Department Exhibit #1, pg 11).
5. When this date passed without the department receiving all of the necessary, requested verifications they mailed claimant's authorized representative a denial notice (DHS-1150) dated July 30, 2010.
6. In response, claimant's authorized representative filed a hearing request on August 24, 2010 to protest this denial.
7. Claimant's hearing was held by conference telephone on January 18, 2011.
8. Claimant's authorized representative stipulated on the record at hearing she was not able to get the necessary items by the final due date due to her client's physical and/or mental infirmities.
9. Subsequently, a court-appointed guardian began handling claimant's financial affairs, per his representative's testimony at hearing.
10. Additionally, claimant's representative stipulated his multiple real properties were not sold until approximately three months ago.

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.

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

The client must obtain required verification, but you must assist if they need and request help. PAM, Item 130, p. 2.

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 acted in accordance with the above-referenced policy. Claimant’s authorized representative had the duty and responsibility to submit certain verifications necessary to application processing by the specified due date. Her failure to do so required the department to deny claimant’s MA application. Put simply, no basis exists in fact, law or policy to reverse the department’s action.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides the department properly denied claimant’s June 2010 MA/retro-MA application.

Accordingly, the department's action is AFFIRMED.

/s/
Marlene B. Magyar
Administrative Law Judge
for Duane Berger, Acting Director
Department of Human Services

Date Signed: January 19, 2011

Date Mailed: January 19, 2011

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/db

cc:

