

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: 2010-816

Issue No: 2006

Case No: [REDACTED]

Load No: [REDACTED]

Hearing Date:

April 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 telephone hearing was held on April 1, 2010. Claimant appeared and testified.

ISSUE

Did the Department properly deny the Claimant's Medicaid application for failure to return verifications and attend interview?

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 June 9, 2009, the Department received a mailed in application for FAP and MA.
2. On June 30, 2009, the Claimant left the country.

3. On July 7, 2009, the Department mailed a DHS 330 pending application notice with a DHS 3503 and DHS 3503 C with an appointment for interview.
4. On July 14, 2009, the Claimant failed to appear for appointment.
5. On July 14, 2009, Claimant sent missed appointment notice. The Claimant had until July 24, 2009 to reschedule appointment with Department.
6. On July 15, 2009, the Claimant returned to the United States.
7. On July 27, 2009, Claimant's application was denied.
8. On August 17, 2009, the Claimant requested a hearing regarding his MA denial.

CONCLUSIONS OF LAW

The Medicaid 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, Claimant requested a hearing to protest the denial of his MA application. The Department had sent the Claimant verification forms and an appointment date to attend an interview. The Department testified they didn't receive any communication from the Claimant regarding an inability to attend the appointment as scheduled. The Claimant testified he, in fact, had a call placed by his sister prior to the appointment date to request a rescheduling as he had left the country. The Department denied receipt of any such call. The Claimant testified he called several times after his return to the country on or about July 15th requesting an appointment. The Department testified no calls were received. The Claimant testified he went to

the local office in person prior to July 24th and was not given access to his worker. The Claimant was unable to specify a date of which he went up to the local office. The Department again testified they received no voicemails nor did the worker receive any notice from his supervisor or the front desk indicating the Claimant had been in the office.

Relevant policy can be found in PAM Item 130, p.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. 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.

Verification is usually required at application/re-determination and for a reported change affecting eligibility or benefit level.

Verification is not required:

- When the client is clearly ineligible, or
- For excluded income and assets unless needed to establish the exclusion.

Types of Verification

Use documents, collateral contacts or home calls to verify information.

A document is a written form of verification. It may include a photocopy, facsimile or e-mail copy if the source is identifiable.

Permanent documents must be obtained only once. Examples: birth certificate, passports, divorce papers, death notice.

Nonpermanent documents must be current. Examples: driver's license, pay stub, rent receipt, utility bill, DHS-49.

MA Only

Documents used to verify citizenship and identity may be originals or copies of the original document.

Current means the following:

- Income documents must correspond to the period used to determine eligibility or benefit amount (e.g., patient-pay amount). See PEM 500.
- Medical documents must correspond to the period set by the Medical Review Team (MRT) or State Review Team (SRT) or to the date(s) stated on the document if MRT approval is not required.
- Other nonpermanent documents are generally considered current if dated within 60 days before your eligibility determination. Older documents may be used if available information indicates the document remains current and there have been no changes in circumstances.

A collateral contact is a direct contact with a person, organization or agency to verify information from the client. It might be necessary when documentation is not available or when available evidence needs clarification.

The client must name suitable collateral contacts when requested. You may assist the client to designate them. You are responsible for obtaining the verification. If the contact requires the client's signed release, use the DHS-27, Release of Information, (DHS-20, Verification of Resources, for inquiries to financial institutions), and specify on it what information is requested.

When talking with collateral contacts, disclose only the information necessary to obtain the needed information. Do not disclose specific programs for which the household has applied. Do not release any information supplied by the household or imply that the household is suspected of any wrongdoing.

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 Claimant had applied for both Food Assistance and MA. The Claimant stated he was only appealing the denial of his MA application. The Department is only required to perform an in-person interview according to PAM 115, pg 13 for the FAP application not for MA. However, the Department, as indicated above, must obtain certain verifications in order to process any application for benefits. Here, the Department properly sent a notice of both an in-person interview appointment and a request for verifications. The Claimant failed to appear for the appointment and failed to supply any of the verifications as requested. The Department sent a missed appointment notice and provided instructions for the Claimant to contact the Department to reschedule prior to July 24, 2009.

While the Claimant testified he had made numerous attempts to request a new appointment, no evidence, other than testimony, was submitted to support the alleged phone calls. The Claimant was given the opportunity to provide additional records, and the Claimant chose to proceed without obtaining phone records. This Administrative Law Judge is left with the Claimant's testimony regarding whether the Claimant had requested another appointment or had advised the Department he was unavailable for the original appointment. The Department provided copies of all communications sent to the Claimant. The Communications were sent to the address indicated by the Claimant to be correct.

In this case, this ALJ finds the Department testimony more credible. The Claimant failed to provide the requested verifications or contact the Department regarding the missed interview or documents being requested. Therefore, the Department properly denied Claimant's MA application.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, finds the Department acted appropriately with regards to Claimant's application and in this regard is hereby AFFIRMED.



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

Date Signed: 04/13/10

Date Mailed: 04/14/10

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:

