

STATE OF MICHIGAN  
MICHIGAN ADMINISTRATIVE HEARING SYSTEM  
FOR THE  
DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF:

[REDACTED]

[REDACTED]

[REDACTED]

**HEARING DECISION**

This matter is before the undersigned Administrative Law Judge by authority of MCL 400.9 and MCL 400.37. Claimant's request for a hearing was received on [REDACTED]. After due notice, a telephone hearing was held on [REDACTED].

**ISSUE**

Whether the Department of Human Services (Department) properly determined the Claimant's Medical Assistance (MA) and State Disability Assistance (SDA) eligibility?

**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 applied for Medical Assistance (MA) and State Disability Assistance (SDA) on [REDACTED].
2. On [REDACTED], the Department sent the Claimant a Verification Checklist with a due date of [REDACTED]. The Department requested that the Claimant provide verification of her disability.
3. On [REDACTED], the Department denied the Claimant's Medical Assistance (MA) and State Disability Assistance (SDA) application for failure to provide information necessary to determine her eligibility to receive benefits.
4. The Department received the Claimant's request for a hearing on [REDACTED] protesting the denial of her application for assistance.

**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 Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM), Reference Table Manual (RFT), and the Bridges Reference Manual (BRM).

The State Disability Assistance (SDA) program which provides financial assistance for disabled persons is established by 2004 PA 344. The Department of Human Services (Department) administers the SDA program pursuant to MCL 400.10, et seq., and MAC R 400.3151-400.3180. Department policies are found in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM).

Clients must cooperate with the local office in determining initial and ongoing eligibility. This includes the completion of necessary forms. BAM 105. Verification means documentation or other evidence to establish the accuracy of the client's verbal or written statements. BAM 130. Verification is usually required at application/redetermination and for a reported change affecting eligibility or benefit level when it is required by policy, required as a local office option, or information regarding an eligibility factor is unclear, inconsistent, incomplete, or contradictory. BAM 130. The Department uses documents, collateral contacts, or home calls to verify information. BAM 130. A collateral contact is a direct contact with a person, organization, or agency to verify information from the client. BAM 130. When documentation is not available, or clarification is needed, collateral contact may be necessary. BAM 130.

Clients are allowed ten calendar days to provide the verifications requested by the Department. BAM 130. The Department should send a negative action notice when the client indicates a refusal to provide the verification, or the time period provided has lapsed and the client has not made a reasonable effort to provide it. BAM 130. The Department should extend the time limit no more than once if the client cannot provide the verification despite a reasonable effort. BAM 130.

In this case, the Claimant applied for Medical Assistance (MA) and State Disability Assistance (SDA) benefits on [REDACTED] [REDACTED] Verification Checklist with a due date of [REDACTED]. The Department requested that the Claimant provide verification of her disability, and provided her with a pack of forms to complete and return by the due date. On [REDACTED] the Department had not received the Claimant's verification documents, and it denied the Claimant's application for benefits.

The Claimant argued that the cost of obtaining the medical verification documents the Department requested is a barrier to her applying for Medical Assistance (MA) and State Disability Assistance (SDA) benefits. The Claimant testified that without Medical Assistance (MA) she is unable to be evaluated by a physician, which is necessary for her to verify her disability.

The Claimant has a duty to establish that she is eligible to receive assistance from the Department. The Claimant has a duty to provide the Department with information necessary to determine her eligibility to receive benefits. In this case, the Claimant has failed to establish that she provided the Department with sufficient information to

determine her eligibility for Medical Assistance (MA) and State Disability Assistance (SDA) benefits.

Based on the evidence and testimony available during the hearing, the Department has established that it properly determined the Claimant's eligibility for Medical Assistance (MA) and State Disability Assistance (SDA) benefits.

**DECISION AND ORDER**

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that the Department acted in accordance with policy in determining the Claimant's Medical Assistance (MA) and State Disability Assistance (SDA) eligibility.

The Department's Medical Assistance (MA) and State Disability Assistance (SDA) eligibility determination is AFFIRMED. It is SO ORDERED.

\_\_\_\_\_/s/\_\_\_\_\_  
[Redacted Signature]

Date Signed: \_\_\_\_\_

Date Mailed: \_\_\_\_\_

**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 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.

[Redacted]