

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

IN THE MATTER OF:

[REDACTED]

Reg. No.: 2011-14413
Issue No.: 2006
Case No.: [REDACTED]
Hearing Date: March 30, 2011
DHS County: Wayne (82-57)

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 Wednesday, March 30, 2011. The Claimant appeared, along with [REDACTED], and testified. [REDACTED] appeared on behalf of the Department of Human Services ("Department").

ISSUE

Whether the Department properly denied the Claimant's application for Medical Assistance ("MA-P") and State Disability Assistance ("SDA") benefits?

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 submitted an application for public assistance seeking MA-P and SDA benefits on August 9, 2010.
2. On this date, August 9th, the Department provided the Claimant with a Verification Checklist requesting the verifications be submitted by August 19, 2010. (Exhibit 1)
3. The Claimant contacted her case worker (who has since retired) informing her that she was unable to obtain the requested medical records by the due date.
4. On September 2, 2010, the Department received some of the Claimant's medical records via facsimile.

5. On September 3, 2010, the Department denied the Claimant's application based on the failure to submit the requested information. (Exhibit 2)
6. On November 24, 2010, the Department received the Claimant's timely written request for hearing. (Exhibit 3)

CONCLUSIONS OF LAW

The Medical Assistance ("MA") program is established by Subchapter XIX of Chapter 7 of The Public Health & Welfare Act, 42 USC 1397, and is administered by the Department, formerly known as the Family Independence Agency, 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. Clients are allowed 10 calendar days (or other time limit specified in policy) to provide the requested verifications. BAM 130. If the client cannot provide the verification for MA purposes despite a reasonable effort, the time limit should be extended up to three times. BAM 130. Verifications are considered timely if received by the due date. BAM 130.

In establishing medical eligibility, medical evidence provided by the client is reviewed by the Medical Review Team ("MRT") and a physician. BAM 815. If the client was seen by a physician, has gone to a clinic within the last 6 months, or has been hospitalized within the past 12 months, an Authorization to Release Protected Health Information (DHS-1555) is completed. The Department then requests the existing medical records. BAM 815. If the client has no current medical sources, a consultative examination is scheduled. BAM 815. All medical evidence is forwarded to the medical contact person who in turn will forward the packet to the MRT. BAM 815. If additional medical evidence is required, the MRT will defer the disability determination and will authorize what specific evidence is needed. BAM 815

In this case, the Department instructed the Claimant (via the Verification Checklist) to submit the requested verifications by August 19, 2010. The Claimant testified credibly that she was in contact with her case worker (who has since retired) that she was attempting to get the medical records and that she would not be able to submit them by the August 19th due date. There was no evidence that extensions were granted or that other assistance was provided. On September 2nd, the Department received the

Claimant's medical evidence. Despite receipt of the verifications, the application was denied the following day. Conversely, there was no evidence that the Claimant had refused to cooperate or had refused to submit the requested verifications. In light of the foregoing, it is found that the Department's determination to deny the Claimant's application 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 denial of the August 9, 2010 application is not upheld.

Accordingly, it is ORDERED:

1. The Department's denial of MA-P and SDA benefits is not upheld.
2. The Department shall reopen/reprocess the Claimant's August 9, 2010, MA and SDA application in accordance with Department policy.
3. The Department shall notify the Claimant of the determination in accordance with Department policy.
4. The Department shall supplement for lost benefits (if any) that the Claimant was entitled to receive if otherwise eligible and qualified in accordance with Department policy.

Colleen M. Mamelka

Colleen M. Mamelka
Administrative Law Judge
For Maura Corrigan, Director
Department of Human Services

Date Signed: April 12, 2011

Date Mailed: April 13, 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.

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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.

CMM/pf

cc:

