

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

IN THE MATTER OF:

[REDACTED]

Reg. No.: 201124118
Issue No.: 2006
Case No.: [REDACTED]
Load No.: [REDACTED]
Hearing Date: April 14, 2011
DHS County: Wayne

ADMINISTRATIVE LAW JUDGE: [REDACTED]

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 14, 2011. Claimant appeared and testified. The Department of Human Services (Department or DHS) was represented by [REDACTED], FI Worker, and [REDACTED] FIM.

ISSUE

Was the Department correct in closing Claimant's Medial Assistance (MA) Case for failing to verify information?

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 was an ongoing MA recipient.
2. The Department closed Claimant's MA case, effective March 1, 2011, for failure to return verification.
3. Claimant requested a hearing on March 8, 2011, contesting the closure.

CONCLUSIONS OF LAW

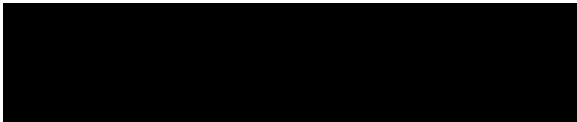
The Medical Assistance (MA) program is established by the Title XIX of the Social Security Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). The Department administers the MA program pursuant to MCL 400.10, *et seq.*, and MCL 400.105. Department policies are found in BAM, BEM, and PRM.

Clients must cooperate with the local DHS office in obtaining verification for determining initial and ongoing eligibility. BAM 105, 130. 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 the information should be extended at least once. BAM 130. 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.

In the present case, the Department failed to submit into evidence a verification checklist or other notification given to Claimant, to prove that the Department issued a request for information, and which information the Department was asking to be verified. Claimant testified credibly that she did receive one request for verification and that she submitted to the Department all verification requested from that particular request. This Administrative Law Judge cannot find that Claimant failed to cooperate. Therefore, the Department was incorrect in closing Claimant's MA case.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, finds that the Department's decision to close Claimant's MA case was incorrect and, therefore, it is ORDERED that the Department's decision is REVERSED. It is further ORDERED that the Department reinstate Claimant's Medical MA case, effective March 1, 2011.



Administrative Law Judge
For Maura Corrigan, Director
Department of Human Services

201124118/SCB

Date Signed: May 19, 2011

Date Mailed: May 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 of the rehearing decision.

SCB/ hw

cc:

[REDACTED]

Wayne County DHS (76)/ 1843

[REDACTED]

Administrative Hearing System