

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

**IN THE MATTER OF:**

[REDACTED]

Reg. No.: 2011-31632  
Issue No.: 2018  
Case No.: [REDACTED]  
Hearing Date: June 16, 2011  
DHS County: Macomb (50-20)

**ADMINISTRATIVE LAW JUDGE:** Andrea Bradley-Lipsey

**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 Thursday, June 16, 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 Medical Assistance ("MA-P") application?

**FINDINGS OF FACT**

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

1. On December 16, 2010, the Claimant submitted an application requesting MA-P benefits.
2. On January 11, 2011, a verification checklist was mailed to the Claimant requesting medical documentation on or before January 21, 2011. (Exhibit 1).
3. On January 18, 2011, the Claimant submitted the following documents to the department: Medical Examination Report, Medical Social Questionnaire, Authorization to Release Protected Health Information ("Medical Release"), and Activities of Daily Living.

4. On January 27, 2011, the Department sent the Claimant a Notice of Case Action, which notified the Claimant that her MA-P benefits were denied for her failure to provide medical documentation. (Exhibit 1).
5. On April 15, 2011, the Department received the Claimant's written request for hearing.

### **CONCLUSIONS OF LAW**

MA-P is established by the Title XIX of the Social Security Act and is implemented by Title 42 of the Code of Federal Regulations. The Department, formerly known as the Family Independence Agency, administers MA-P 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 Reference Manuals ("RFT").

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. Client's 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-P 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 this case, all parties testified that the Claimant submitted some of the requested verifications before the due date contained on the Verification Checklist. Further, the evidence shows that the Claimant signed the Medical Release form prior to the due date for the purpose of allowing the Department to obtain the requested medical documentation on her behalf. Accordingly, the Department had the ability to, and should have, obtained the medical documents listed on the verification checklist that were not otherwise provided by the Claimant. Under this scenario, the Department failed to establish it acted in accordance with Department policy when it denied the Claimant's MA-P application. Accordingly, the Department's MA-P denial is REVERSED.

**DECISION AND ORDER**

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, finds that the Department's denial of the Claimant's MA-P application is not upheld.

Accordingly, it is Ordered:

1. The Department's denial of the MA-P application is REVERSED.
2. The Department shall re-open and process the Claimant's December 16, 2010, MA-P application in accordance with Department policy.
3. The Department shall notify the Claimant in writing of the determination in accordance with Department policy.
4. The Department shall supplement the Claimant for any lost benefits she was otherwise eligible and qualified to receive in accordance with Department policy.
5. The Department shall assist Claimant by using the Medical Release to obtain any and all medical records needed by the Department.



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**Andrea Bradley-Lipsey**  
Administrative Law Judge  
for Maura Corrigan, Director  
Department of Human Services

Date Signed: June 28, 2011

Date Mailed: June 30, 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.

AJB/pf

cc:

