

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

IN THE MATTER OF:



Reg. No: 2011-36781

Issue No: 2006



Shiawassee County DHS

ADMINISTRATIVE LAW JUDGE: Vicki L. Armstrong

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 received on May 23, 2011. After due notice, a 3-way telephone hearing was held on July 14, 2011. Claimant personally appeared and provided testimony.

ISSUE

Whether the department properly denied Claimant's Medical Assistance (MA) application?

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 applied for Medicaid on April 4, 2011. (Department Exhibits 1-19).
2. On April 18, 2011, a Verification Checklist was mailed to Claimant requesting verification of her employment and verification of the value of her listed IRA and CD, due by April 28, 2011. (Department Exhibit 9, pages 1-2).
3. On May 12, 2011, the department mailed Claimant a Notice of Case Action denying Claimant's Medicaid application effective April 1, 2011, for failure to verify or allow the department to verify necessary information. (Department Exhibit 10, pages 1-2).
4. Claimant submitted a hearing request on May 23, 2011, protesting the denial of her Medicaid application. (Request for a Hearing).

## CONCLUSIONS OF LAW

The regulations governing the hearing and appeal process for applicants and recipients of public assistance in Michigan are found in the Michigan Administrative Code, MAC R 400.901-400.951. Clients have the right to contest a department decision affecting eligibility or benefit levels whenever it is believed that the decision is incorrect. The department will provide an administrative hearing to review the decision and determine the appropriateness. BAM 600.

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) and the Reference Tables Manual (RFT).

Department policy states that Clients must cooperate with the local office in determining initial and ongoing eligibility. This includes completion of the necessary forms. Clients who are able but refuse to provide necessary information or take a required action are subject to penalties. Clients must take actions within their ability to obtain verifications and the department must assist Clients when necessary. BAM 105.

The local office must assist clients who ask for help in completing forms (including the DCH-0733-D) or gathering verifications. Particular sensitivity must be shown to clients who are illiterate, disabled or not fluent in English. BAM 105. Verification is usually required at application/redetermination and for a reported change affecting eligibility or benefit level. BAM 130.

The department tells the Client what verification is required, how to obtain it, and the due date through the use of the DHS-3503, Verification Checklist, or for MA redeterminations, the DHS-1175, MA Determination Notice, to request verification. BAM 130. The Client must obtain the required verification, but the department must assist if they need and request help. BAM 130.

For MA, the Client is allowed 10 calendar days (or other time limit specified in policy) to provide the verification requested. If the Client cannot provide the verification despite a reasonable effort, the time limit is extended up to three times. BAM 130. A Notice of Case Actions is sent when the Client indicates refusal to provide a verification, or the time period given has elapsed. BAM 130.

In this case, the department provided Claimant with a Verification Checklist (DHS-3503), requesting verification of her employment and the value of her IRA and CD, with a due date of April 28, 2011. On May 12, 2011, the department denied Claimant's MA application for failure to return the required verifications.

Claimant testified that she faxed the requested documentation to the department on May 6, 2011. Claimant admitted she was unable to provide proof that she faxed the requested documentation. However, Claimant was more concerned over why the

department did not return her telephone calls, or call her and inform her of what they had not received so she would have the opportunity to resubmit it. The process of the Verification Checklist was reviewed with Claimant on the record. The department also had a record of her telephone call being returned by a customer representative, which Claimant acknowledged. Claimant also stated she talked to another worker on May 9, 2011, who told her that it was too late to re-submit documentation and she would have to request a hearing or reapply.

Based on the evidence provided by the department, Claimant's request for Medicaid benefits was properly denied when she failed to return the requested verifications.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that the department established Claimant did not submit the requested verifications. Accordingly, the department's decision denying Claimant's MA application is UPHELD. It is SO ORDERED.

/s/ \_\_\_\_\_  
Vicki L. Armstrong  
Administrative Law Judge  
for Maura D. Corrigan, Director  
Department of Human Services

Date Signed: 7/15/11

Date Mailed: 7/15/11

**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 date of the rehearing decision.

VLA/ds

