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

#### IN THE MATTER OF:



Reg. No:2011-42181Issue No:1005Case No:1005Hearing Date:1005August 17, 20111005Isabella County DHS

ADMINISTRATIVE LAW JUDGE: Suzanne L. Morris

### **HEARING DECISION**

This matter is before the undersigned Admini strative Law Judge pursuant to MCL 400.9 and MCL 400.37 upon claimant's request for a hearing. After due notic e, a telephone hearing was held on August 17, 2011. The claim ant appeared and provided testimony, along with a witness , a home therapist through

#### **ISSUE**

Did the department properly close the claimant's Fam ily Independence Program (FIP) application for failure to return the required verifications?

#### FINDINGS OF FACT

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

- On May 5, 2011, the claimant s ubmitted a DHS-54-E (Medical Needs JET) form that indic ated the claimant could not work, but indic ated "to be determined" for the duration. (Department Exhibit 3 – 4)
- On May 6, 2011, the claimant was mailed a Verification Checklist (DHS-3503) and a cover letter that indicated the claimant must return completed Medical Needs form (DHS-54-E), a Medical Examination form (DHS-54), a Psychiatric/Psychological Exami nation Report (DHS -49-D) and an Authorization to Releas e Protected Health Info rmation (DHS- 49-D) by June 4, 2011. Copies of all forms were sent to the claimant for completion. (Department Exhibit 5 – 15)

- 3. The claimant did not return the requested information by the due date and the department mailed the claim ant a No tice of Cas e Action (DHS-1605) on June 8, 2011 that informed the claim ant her FIP would close effective July 1, 2011. (Department Exhibit 16 20)
- The department did receive a c ompleted Medical Needs JET (DHS-54-E) and Psychiatric/Psychological Examination Report (DHS-49-D) on June 14, 2011. No medical records, co mpleted Authorization t o Release Protected Health Information (DHS-1555) or Medical Exam ination Report (DHS-49) was returned.
- 5. The claimant submitted a hearing request on June 15, 2011.

# CONCLUSIONS OF LAW

The Family Independence Progr am (FIP) was establis hed pursuant to the Personal Responsibility and W ork Opportunity Reconciliation Act of 1996, Public Law 104-193, 8 USC 601, *et seq.* The Department of Human Serv ices (DHS or department) administers the FIP progr am pursuant to MCL 400.10, *et seq.*, and MAC R 400.3101-3131. The FIP program replaced the Ai d to Dependent Children (ADC) program effective October 1, 1996. Department policies are found in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) a nd the Program Reference Manual (PRM).

Department policy states:

#### CLIENT OR AUTHORIZED REPRESENTATIVE RESPONSIBILITIES

#### Responsibility to Cooperate

#### All Programs

Clients must cooperate w ith the local office in determining initial and ongoing eligibility. This includes completion of the necessary forms. BAM 105.

#### Refusal to Cooperate Penalties

#### All Programs

Clients who are able but refu se to provide necessary information or take a required action are subject to penalties. BAM 105.

## Verifications

### All Programs

Clients must take actions with in their ability to obtain verifications. DHS staff must a ssist when necessary. See BAM 130 and BEM 702. BAM 105.

# FIP, SDA, CDC, FAP

Allow the client 10 calendar days (**or** other time limit specified in policy) to provide the verification you request.

Verifications are considered to be timely if received by the date they are due. For electronically transmitted verifications (fax, email), the date of the transmission is the receipt date. Verifications that are submitted after the close of regular business hours through the drop box or by delivery of a DHS representative are considered to be received the next business day.

Send a negative action notice when:

- The client indic ates a refusal to provide the verification, **or**
- The time period given has elaps ed and the client has **not** made a reasonable effort to provide it. BAM 130

Department policy requires client s to submit verifications requested by the department within 10 calendar days. Clients may request assistance from DHS if they are unable to get the verifications by the due date. For certain programs, an extension may be granted if the client is unable to provide the verification despite a reasonable effort. BAM 130. A negative action notice will be sent when the time period to provide the verification has elaps ed and the client has not made a reasonable effort to obtain the documents.

BEM 230A requires clients to verify any disabling condition that is expected to last more than 90 days. The claimant was mailed a Verification Checklist (DHS-3503) and a cover letter instructing the client to return completed Medical Needs form (DHS-54-E), a Medical Examination f orm (DHS-54), a Psy chiatric/Psychological Examination Report (DHS-49-D) and an Authorization to Release Protected Health Information (DHS-49-D) by June 4, 2011. It is undisputed that the forms were not submitted to the department by the due date of June 4, 2011. The depart tment did receive a completed Medical Needs – J ET (DHS-54-E) and Psychiatric/P sychological Examination Report (DHS-49-D) on June 14, 2011. No medical records, completed Aut horization to Release e

Protected Health Information (DHS-1555) or Medical Examination Report (DHS-49) was returned.

The claim ant and her witness both indicat ed that they believed the forms were completed and returned by the d ue date. The claimant's witness testified that CMH did not get the forms dictated and mailed to t he department in time, largely due to the disorganization of CM H and t he fact that the physic ian authoring the forms was not a full-time employee.

Department policy does allow for extensions to be provided if the claimant shows a reasonable effort is being made to obtain the documentation. However, the department representative testifie d that no contact was initiated by the claimant to request an extension. The claim ant failed to adv ise the department of any problems she was having in getting the forms completed.

Further, the claimant failed to provide some of the required verifications at all. No medical records, completed Authorization to Release Protec ted Health Information (DHS-1555) or Medical Examination Report (DHS-49) was returned. Thus, even if the department accepted the documents submitted on June 14, 2011, it was not all of the material required by the Verification Chec klist. Thus, when the department did not receive the verifications time ly and no extension was r equested, they properly issued a negative action notice closing the claimant's case.

# DECISION AND ORDER

The Administrative Law Judge, based upon t he above findings of fact and conclusion s of law, decides the depar tment properly closed the c laimant's F amily Independenc e Program (FIP) application for failure to return the required verifications.

Accordingly, the department's determination is UPHELD. SO ORDERED.

Suzanne

<u>/s/</u>

L. Morris Administrative Law Judge for Maura Corrigan, Director Department of Human Services

Date Signed: <u>September 20, 2011</u>

Date Mailed: <u>September 20, 2011</u>

### 2011-42181/SLM

**NOTICE**: Administrative Hearings may or der a rehearing or reconsideration on either its own motion or at t he request of a party within 30 days of the mailing date of this Decision and Order. Administrative Hear ings will not orde r a rehearing or reconsideration on the Department's mo tion where the final decis ion 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 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.

CC:

SM/ac