

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

IN THE MATTER OF:

[REDACTED]

Reg. No: 2011-40409

[REDACTED]
[REDACTED]
Oakland County DHS

ADMINISTRATIVE LAW JUDGE: C. Adam Purnell

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 upon the DHS client's (also referred to as "Claimant") request for a hearing received on May 25, 2011. After due notice, a telephone hearing was held on August 28, 2011. Claimant personally appeared and provided testimony.

ISSUE

Did the department properly deny Claimant's application for Family Independence Program (FIP), State Disability Assistance (SDA) and Medical Assistance (MA) benefits for failure to timely 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:

1. Claimant applied for FIP, MA and SDA. (Hearing Summary).
2. On April 1, 2011, the department mailed Claimant a Verification Checklist (DHS-3503) that requested Claimant provide medical records and information for the Medical Review Team (MRT). (Department Exhibit 1). The deadline to provide the verifications was April 11, 2011. (Department Exhibit 1).
3. The department timely received all requested documentation from Claimant on or before April 11, 2011 except for the Medical Social Questionnaire form (DHS-0049-F).
4. On May 12, 2011, the department mailed Claimant a Notice of Case Action (DHS-1605), informing him that his application for benefits was denied because he failed to returned documentation to complete the

disability determination. (Notice of Case Action, Department Exhibits 20-24).

5. On May 25, 2011, Claimant submitted a hearing request challenging the denial of his application for SDA, FIP and MA benefits. (Request for a Hearing).

CONCLUSIONS OF LAW

The client has the right to request a hearing for any action, failure to act or undue delay by the department. BAM 105. The department provides an administrative hearing to review the decision and determine its appropriateness. BAM 600.

The regulations that govern the hearing and appeal process for applicants and recipients of public assistance in Michigan are contained in the Michigan Administrative Code (Mich Admin Code) Rules 400.901 through 400.951. An opportunity for a hearing shall be granted to a recipient who is aggrieved by an agency action resulting in suspension, reduction, discontinuance, or termination of assistance. Mich Admin Code 400.903(1).

The Family Independence Program (FIP) was established pursuant to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Public Law 104-193, 8 USC 601, et seq. The Department of Human Services (DHS or Department) administers the FIP program pursuant to MCL 400.10, et seq., and MAC R 400.3101-3131. The FIP program replaced the Aid to Dependent Children (ADC) program effective October 1, 1996. Department policies are found in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM), Reference Table Manual (RFT), and the Bridges Reference Manual (BRM).

The Medical Assistance (MA) program was established by 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 for the MA programs are contained in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM), the Bridges Reference Manual (BRM), and the Reference Tables Manual (RFT).

The MA program is also referred to as Medicaid. BEM 105. The goal of the Medicaid program is to ensure that essential health care services are made available to those who otherwise could not afford them. BEM 105. The Medicaid program is comprised of several sub-programs or categories. One category is FIP recipients. BEM 105. Another category is SSI recipients. BEM 105. There are several other categories for persons not receiving FIP or SSI. BEM 105. However, the eligibility factors for these categories are based on (related to) the eligibility factors in either the FIP or SSI program. BEM 105. Therefore, these categories are referred to as either FIP-related or SSI-related. BEM 105.

To receive Medicaid under an SSI-related category, the person must be aged (65 or older), blind, disabled, entitled to Medicare or formerly blind or disabled. Families with dependent children, caretaker relatives of dependent children, persons under age 21 and pregnant, or recently pregnant women, receive Medicaid under FIP-related

categories. For MA only, a client and the client's community spouse have the right to request a hearing on an initial asset assessment only if an application has actually been filed for the client. BAM 105. Families with dependent children, caretaker relatives of dependent children, persons under age 21 and pregnant, or recently pregnant, women receive MA under FIP-related categories. BEM 105.

The State Disability Assistance (SDA) program provides financial assistance to disabled adults to help them pay for living expenses such as rent, heat, utilities, clothing, food and personal care items. The Department of Human Services (DHS or department) administers the SDA program pursuant to MCL 400.10, *et seq.*, and MAC R 400.3151-400.3180.

Verification is usually required upon application or redetermination and for a reported change affecting eligibility or benefit level. BAM 130. Clients must take actions within their ability to obtain verifications and DHS staff must assist when necessary. BAM 105. Specifically, the local office must assist clients who ask for help in completing forms or gathering verifications. BAM 105 and BAM 130. The department must allow a client 10 calendar days (or other time limit specified in policy) to provide the requested verification. BAM 130. Should the client indicate a refusal to provide a verification or, conversely, if the time period given has elapsed and the client has not made a reasonable effort to provide it, the department may send the client a negative action notice. BAM 130.

Verifications are considered timely if received by the date they are due. BAM 130. For FAP only, if the client contacts the department prior to the due date requesting an extension or assistance in obtaining verifications, you must assist them with the verifications but do not grant an extension. BAM 130.

In the instant case, Claimant is disputing the department's denial of his application for FIP, SDA and MA benefits for failure to timely provide the Medical-Social Questionnaire (DHS-49-F). The DHS-49-F is completed by the client at the time of initial application and, when requested by the MRT, at each subsequent medical review for any of the following: MA (based on disability/blindness), SDA, or other agency programs and services for which a disability/medical determination is required. RFF 49F. The department is required to assist the client in completing the DHS-49-F if the client and/or his representative is incapable or unable to complete the form or the client is hospitalized or in a long-term facility and the facility chooses not to complete the form. RFF 49F. Policy provides that the medical packet is incomplete without the DHS-49-F. RFF 49F.

Here, the department mailed Claimant several documents required by the MRT, including the DHS-49F form on April 1, 2011. Claimant's completed MRT packet, including the DHS-49-F form was due to the department no later than April 11, 2011. The DHS-49-F form functions the same as the departmental request for verifications as the purpose of the DHS-49-F form is to allow the MRT to verify and/or determine whether Claimant has a disability. Claimant, through his authorized hearing representative, stated during the hearing that that she delivered the entire MRT packet, including the DHS-49-F, to the department on April 19, 2011 and April 29, 2011. This was beyond the April 11, 2011 deadline. This is confirmed by the record presented before the Administrative Law Judge.

Therefore, this Administrative Law Judge finds, based on the material and substantial evidence presented during the hearing, that the department properly denied Claimant's application for FIP, MA and SDA benefits for failure to timely submit the Medical-Social Questionnaire form (DHS-49-F).

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that the department properly denied Claimant's application for FIP, MA and SDA benefits for failure to timely turn in the requested Medical-Social Questionnaire form (DHS-49-F).

Accordingly, the department's action is AFFIRMED.

It is SO ORDERED.

/s/
C. Adam Purnell
Administrative Law Judge
for Maura D. Corrigan, Director
Department of Human Services

Date Signed: 9/1/11

Date Mailed: 9/1/11

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 60 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.

CAP/ds

■ [REDACTED]