

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

**IN THE MATTER OF:**

[REDACTED]

Reg No.: 2012-64470  
Issue No.: 2006  
Case No.: [REDACTED]  
Hearing Date: October 18, 2012  
Macomb County DHS (20)

**ADMINISTRATIVE LAW JUDGE:** Colleen M. Mamelka

**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 conducted from Detroit, Michigan on Thursday, June 28, 2012. The Claimant appeared and testified. The Claimant was represented by [REDACTED] of Medicaid Assistance Service. Participating on behalf of the Department of Human Services ("Department") was [REDACTED].

**ISSUE**

Whether the Department properly denied the Claimant's January 12, 2012 application for Medical Assistance ("MA") benefits?

**FINDINGS OF FACT**

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

1. The Claimant/Representative submitted an application for public assistance seeking MA benefits on January 12, 2012.
2. On April 10, 2012, the Medical Review Team ("MRT") deferred the disability determination, requesting a consultative examination and medical records from two hospitals. (Exhibit 1, pp. 24, 25)
3. On April 16, 2012, the Department sent a Verification checklist to the Claimant/Representative specifically requesting medical records from two hospitals in 2011 and 2012. (Exhibit 1, p. 22)

4. The Representative requested, and was granted, two extension requests with a due date of May 14, 2012. (Exhibit 1, pp. 13 – 18)
5. On May 2, 2012, the Department sent a Medical Appointment Confirmation Notice to the Claimant/Representative instructing the Claimant to attend the consultative evaluation on May 14, 2012. (Exhibit 1, p. 19)
6. The Claimant was hospitalized from May 12<sup>th</sup> through May 16, 2012. (Exhibit 1, p. 8)
7. The requested medical records were not submitted on or before May 14, 2012.
8. On May 18, 2012, the Department denied the application and sent the Notice of Case Action to the Claimant/Representative based on the failure to submit requested medical verifications by the due date. (Exhibit 1, pp. 4 – 7; 9 – 12)
9. On July 10, 2012, the Department received the Claimant/Representative's written request for hearing. (Exhibit 1, p. 2)

### **CONCLUSIONS OF LAW**

Department policies are contained in the Bridges Administrative Manual ("BAM"), the Bridges Eligibility Manual ("BEM"), and the Reference Tables ("RFT").

The Family Independence Program ("FIP") was established pursuant to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Public Law 104-193, 42 USC 601, *et seq.* The Department, formerly known as the Family Independence Agency, administers FIP pursuant to MCL 400.10, *et seq.*, and Mich Admin Code, Rules 400.3101 through R 400.3131. FIP replaced the Aid to Dependent Children ("ADC") program effective October 1, 1996.

The Food Assistance Program ("FAP"), formerly known as the Food Stamp program, is established by the Food Stamp Act of 1977, as amended, and is implemented by the federal regulations contained in Title 7 of the Code of Federal Regulations ("CFR"). The Department, formerly known as the Family Independence Agency, administers FAP pursuant to MCL 400.10, *et seq.*, and Mich Admin Code, Rules 400.3001 through R 400.3015.

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 of Human Services, formerly known as the Family Independence Agency, administers the MA program pursuant to MCL 400.10, *et seq.*, and MCL 400.105.

The Adult Medical Program ("AMP") is established by 42 USC 1315, and is administered by the Department of Human Services pursuant to MCL 400.10, *et seq.*

The State Disability Assistance (“SDA”) program, which provides financial assistance for disabled persons, is established by 2004 PA 344. The Department of Human Services, formerly known as the Family Independence Agency, administers the SDA program pursuant to MCL 400.10, *et seq.*, and Mich Admin Code, Rules 400.3151 through R 400.3180.

The Child Development and Care (“CDC”) program is established by Titles IVA, IVE and XX of the Social Security Act, the Child Care and Development Block Grant of 1990, and the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. The program is implemented by Title 45 of the Code of Federal Regulations, Parts 98 and 99. The Department provides services to adults and children pursuant to MCL 400.14(1) and Mich Admin Code, Rules 400.5001 through R 400.5015.

Clients must cooperate with the local office in determining initial and ongoing eligibility to include the completion of the necessary forms. BAM 105 (2011), p. 5. Verification means documentation or other evidence to establish the accuracy of the client’s verbal or written statements. BAM 130 (2011), p. 1. The client must obtain the required verification, however, the Department must assist if needed and/or requested. BAM 130, p. 3. Clients are allowed 10 calendar days (or other time limit specified in policy) to provide the requested verifications. BAM 130, p. 5. For MA purposes, if a client cannot provide the verification, despite reasonable effort, an extension should be granted up to three times. BAM 130, p. 5. A negative action notice is sent when the client refuses to provide a verification **or** the time period given has elapsed. BAM 130, p. 5.

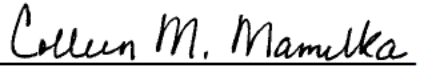
In this case, the Department initiated processing of a January 2012 application for MA benefits in January 2012. The Department sent a Medical Verification Checklist to the Claimant/Representative requesting medical records from two prior hospitalizations. The Department granted two extension requests pushing the due date for the verifications to May 14, 2012. The requested verifications were not received. On May 18, 2012, the Department denied the application based on the failure to submit the medical verifications as required. Ultimately, the Department established it acted in accordance with Department policy when it denied the Claimant’s MA application based on the failure to submit the requested verifications necessary to determine eligibility. Accordingly, the Department’s actions are AFFIRMED.

### **DECISION AND ORDER**

The Administrative Law Judge, based on the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, finds the Department established it acted in accordance with department policy when it denied the Claimant’s January 2012 MA application based on the failure to timely submit requested verifications.

Accordingly, it is ORDERED:

The Department's determination is **AFFIRMED**.

  
**Colleen M. Mamelka**  
Administrative Law Judge  
for Maura Corrigan, Director  
Department of Human Services

Date Signed: October 23, 2012

Date Mailed: October 23, 2012

**NOTICE:** Michigan Administrative Hearing System (MAHS) 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. MAHS 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. (60 days for FAP cases)

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.

Claimant may request a rehearing or reconsideration for the following reasons:

- A rehearing **MAY** be granted if there is newly discovered evidence that could affect the outcome of the original hearing decision.
- A reconsideration **MAY** be granted for any of the following reasons:
  - misapplication of manual policy or law in the hearing decision,
  - typographical errors, mathematical error, or other obvious errors in the hearing decision that effect the substantial rights of the claimant:
  - the failure of the ALJ to address other relevant issues in the hearing decision.

Request must be submitted through the local DHS office or directly to MAHS by mail at  
Michigan Administrative Hearings  
Reconsideration/Rehearing Request  
P. O. Box 30639  
Lansing, Michigan 48909-07322

CMM/tm

cc:

