

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

IN THE MATTER OF:

[REDACTED]

Reg. No.: 201265705
Issue No.: 2018
Case No.: [REDACTED]
Hearing Date: October 24, 2012
County: Wayne (19)

ADMINISTRATIVE LAW JUDGE: Alice C. Elkin

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 following Claimant's request for a hearing. After due notice, a telephone hearing was held on October 24, 2012, from Detroit, Michigan. Participants on behalf of Claimant included [REDACTED], Claimant's Authorized Hearing Representative (AHR). Participants on behalf of the Department of Human Services (Department) included [REDACTED], Eligibility Specialist, and [REDACTED], Assistance Payment Supervisor.

ISSUE

Did the Department properly process Claimant's June 29, 2011, application for Medical Assistance (MA) coverage, with retroactive coverage to March 2011?

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 June 29, 2011, Claimant applied for MA coverage, with retroactive coverage to March 2011.
2. Claimant authorized the AHR to represent him and the authorization to represent was included with the application.
3. On August 19, 2011, the Department sent Claimant a Notice of Case Action denying MA coverage under the Ad-Care program.

4. On March 19, 2012, the Department sent Claimant a Notice of Case Action denying MA coverage because no group member was an eligible child and because Claimant failed to verify or allow the Department to verify necessary information to determine eligibility.
5. On June 18, 2012, Claimant's AHR filed a hearing request, disputing the Department's actions.

CONCLUSIONS OF LAW

Department policies are contained in the Department of Human Services Bridges Administrative Manual (BAM), Department of Human Services Bridges Eligibility Manual (BEM), and Department of Human Services Reference Tables Manual (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, R 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 (FS) 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, R 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 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, R 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, R 400.5001 through R 400.5015.

Additionally, the evidence at the hearing established that on August 19, 2011, the Department denied Claimant's June 29, 2011, MA application under the Ad-Care program because his income exceeded the income limit. On March 19, 2012, the Department denied the application, citing the fact that there was no eligible child in the group and Claimant had failed to verify requested information. Because Claimant was seeking disability-based MA coverage, the fact that there were no eligible children in his group was irrelevant. See BEM 166 (October 1, 2010). The Department testified that a Verification Checklist (VCL) had been sent to Claimant requesting that he submit several documents, including an Activities of Daily Living (DHS 49G) form, and that Claimant had failed to provide the DHS-49G, resulting in the denial of his application.

In this case, the AHR was also Claimant's authorized representative (AR). An AR applies for assistance on behalf of the client and otherwise acts on his behalf. BAM 110, p 7. The AR assumes all of the responsibilities of the client. BAM 110, p 7. At the hearing, the Department acknowledged that the Notices of Case Action denying Claimant's application were not sent to Claimant's AHR until June 25, 2012, and that the VCL requesting the DHS-49G was never sent to the AHR. Because the VCL was never sent to Claimant's AHR/AR, the Department did not act in accordance with Department policy when it denied Claimant's MA application on the basis that Claimant had failed to verify requested verification.

DECISION AND ORDER

The Administrative Law Judge, based upon the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, finds that the Department


- did act properly when .
 did not act properly when denied Claimant's MA application.

Accordingly, the Department's decision is AFFIRMED REVERSED for the reasons stated on the record and above.

THE DEPARTMENT IS ORDERED TO DO THE FOLLOWING WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:

1. Reregister Claimant's June 29, 2011 MA application, with retroactive coverage to March 2011;
2. Begin reprocessing the application in accordance with Department policy and consistent with this Hearing Decision, including sending any required verification checklist to Claimant and Claimant's AR and, if applicable, forwarding the completed medical packet to the Medical Review Team (MRT) for disability determination;
3. Provide Claimant with any MA coverage he is eligible to receive from March 2011, ongoing; and

4. Notify Claimant and the AR in writing of its decision in accordance with Department policy.



Alice C. Elkin
Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: 10/29/2012

Date Mailed: 10/29/2012

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

ACE/hw

cc:

