

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

IN THE MATTER OF:

[REDACTED]

Reg. No: 20132402
Issue No: 2006
Case No: [REDACTED]
Hearing Date: February 20, 2013
Marquette County DHS

ADMINISTRATIVE LAW JUDGE: Suzanne L. Morris

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. After due notice, a telephone hearing was held on February 20, 2013. The claimant appeared and provided testimony, along with his mother, [REDACTED]. The department witnesses were [REDACTED] and [REDACTED].

ISSUE

Did the department properly deny the claimant's Medical Assistance (MA-P) 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. The claimant applied for disability-related Medicaid (MA-P) on April 12, 2012.
2. The Medical Review Team (MRT) issued a deferral and requested the department obtain a psychological examination.
3. The department scheduled the examination with [REDACTED] for July 12, 2012. The claimant rescheduled the appointment for August 2, 2012. The claimant did not attend this appointment, but called later to reschedule it again for August 24, 2012.
4. The department worker called [REDACTED] and the claimant/representative and cancelled the appointment.

5. A Notice of Case Action (DHS-1605) was mailed to the claimant on August 17, 2012, informing him that his MA was denied for failing to attend the appointment.
6. The claimant submitted a hearing request on September 28, 2012.

CONCLUSIONS OF LAW

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 Bridges Reference Manual (RFT).

Department policy states:

CLIENT OR AUTHORIZED REPRESENTATIVE RESPONSIBILITIES

Responsibility to Cooperate

All Programs

Clients must cooperate with 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 refuse to provide necessary information or take a required action are subject to penalties. BAM 105.

Client Cooperation

The client is responsible for providing evidence needed to prove disability or blindness. However, you must assist the customer when they need your help to obtain it. Such help includes the following:

- Scheduling medical exam appointments
- Paying for medical evidence and medical transportation

A client who refuses or fails to submit to an exam necessary to determine disability or blindness **cannot** be determined disabled or blind and you should deny the application or close the case. It is not necessary to return the medical evidence to MRT for another decision in this instance. BEM 260.

Scheduling

Make all arrangements on behalf of the client for a medical exam or other diagnostic tests requested by the MRT or SSSI advocate. If necessary, contact the MRT or SSI advocate for specific providers enrolled in the program (for example physicians, clinics, labs, etc.).

Use the DHS-800, Medical Appointment Confirmation, to notify the client of a scheduled appointment. The DHS-800 tells the client:

- The department will **not** pay for a missed appointment.
- To call the physician, in advance, to reschedule if the client is unable to keep the appointment.
- To call his specialist if assistance is needed in rescheduling the appointment. BAM 815.

In this case, the department denied the claimant's MA application because he missed two appointments that were necessary to determine his disability. The claimant and his witness admit that they missed both appointments. The first appointment was scheduled for July 12, 2012. The claimant and his witness testified that they were unable to attend that appointment because the claimant was out of town, however, they did call and reschedule that appointment prior to the appointment date/time. The next appointment was scheduled for August 2, 2012. The claimant and his witness admit that they confused the date for this appointment and did not attend. The claimant's mother called the physician's office after the appointment and rescheduled the appointment for August 24, 2012. However, before the claimant could attend that appointment, the department worker called and cancelled the appointment because the claimant had missed the two previous appointments. The department then denied the claimant's application because he had failed to keep the scheduled appointments, which were required to determine eligibility.

Department policy indicates that a client who refuses or fails to submit to an exam necessary to determine disability or blindness cannot be determined disabled or blind and directs the department to deny the application or close the case (BAM 260). BAM 815 also directs the client to call the physician in advance if the client is unable to keep the appointment. The claimant did call in advance to reschedule the first appointment

due to a conflict. However, the client admits that he missed the second appointment and did not call to reschedule the appointment until after it was missed.

The department did deny the application in accordance with department policy when the claimant failed to submit to two scheduled exams. The claimant was advised to reapply for benefits.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that the department denied the claimant's Medical Assistance (MA-P) application.

Accordingly, the department's actions are **UPHELD**. SO ORDERED.

/s/_____

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

Date Signed: February 25, 2013

Date Mailed: February 25, 2013

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.

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.

20132402/SLM

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

SLM/cr

cc:

