

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

IN THE MATTER OF:

[REDACTED]

Reg. No.: 201327735
Issue No.: 2018
Case No.: [REDACTED]
Hearing Date: May 23, 2013
County: Oakland (02)

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 May 23, 2013, from Detroit, Michigan. Participants on behalf of Claimant included Claimant and [REDACTED], Claimant's husband and witness. Participants on behalf of the Department of Human Services (Department) included [REDACTED], Eligibility Specialist.

ISSUE

Did the Department properly deny Claimant's application for Medical Assistance (MA)?

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 November 13, 2012, Claimant applied for MA, with retroactive coverage to August 1, 2012.
2. On November 20, 2012, the Department sent Claimant and Marcus Mims, an agent at Accretive Health Care, Claimant's authorized representative (AR), a Medical Determination Verification Checklist (VCL) requesting a completed DHS-49B and DHS-49F.
3. On November 20, 2012, the Department sent Claimant and her AR a Notice of Case Action indicating that Claimant's application was denied with a note from the

specialist that “your case is still pending for medicaid, the following forms are needed for the medical review team; dhs-49f and dhs-49b . . .”

4. Neither Claimant nor Claimant’s AR provided the requested documents to the Department.
5. On December 5, 2012, Claimant’s worker sent the medical packet to the Medical Review Team (MRT) with a request that determination for MA eligibility be made.
6. On January 10, 2013, MRT referred the medical packet back to the Department worker, indicating that a decision could not be made without the DHS-49B and DHS-49F.
7. On January 15, 2013, the Department sent Claimant a Notice of Case Action denying her MA application.
8. On January 22, 2013, Claimant filed a request for hearing, 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 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.

Additionally, Claimant applied for MA benefits on November 13, 2012, with retroactive coverage to August 1, 2012. On January 15, 2013, the Department sent Claimant a Notice of Case Action denying her MA application. Under the reason for intended action in the Notice of Case Action, the Department stated that the Adult Medical Program was closed to new enrollment and Claimant was “not aged, blind, disabled, under 21, pregnant, or parent/caretaker relative of dependent child. Disability blindness determination made by [the Department].” The evidence in this case clearly established that a determination of disability was never made by MRT because MRT concluded that an assessment of disability could not be made without the mandatory DHS-49B and DHS-49F. In the comments from the specialist section of the Notice of Case Action, the Department added “Customer and [her AR] failed to provide needed documents for the Medical Review Team.” This established that the reason the Department denied Claimant’s MA application was because Claimant and her AR had not provided requested verifications necessary to establish the disability.

At the hearing, the Department established that a Medical Determination Verification Checklist (VCL) was sent to Claimant and her AR on November 20, 2012, requesting a completed DHS-49B and DHS 49-F by November 30, 2012. The Department also sent a Notice of Case Action that same day requesting the completed forms. The DHS-49B, Social Summary, and DHS-49F, Medical-Social Questionnaire, are mandatory documents that must be included in the medical packet referred to MRT. BEM 260 (July 2012), p 3. However, because the DHS-49B must be completed by the Department specialist at initial determination, the Department could not rely on Claimant's failure to provide a completed DHS-49B in denying her application. BAM 815 (June 2012), p 3; see also Reference Forms and Publications Manual (RFF) 49B, p 3. However, the client is required to complete all sections of the DHS-49F, with the Department assisting if the client or the client's AR is unable to complete it or the client is hospitalized. BAM 815, p 3; RFF 49F, p 4. The medical packet is incomplete without the DHS-49F. RFF 49F, p 4.

In this case, Claimant acknowledged receiving the VCL requesting the DHS-49F. Claimant was not hospitalized at the time the VCL was sent, and she testified that her AR had previously completed the form for her. While she testified that she contacted her AR and was told that the AR submitted the form to the Department, Claimant had no first-hand knowledge that the document was properly submitted and there was no evidence from the AR concerning delivery of the documents. The Department testified that it had not received the form. Under the facts in this case, Claimant has failed to establish that she timely submitted the DHS-49F. Thus, the Department acted in accordance with Department policy when it denied her MA application on the basis that she had failed to provide verifications necessary to establish her disability.

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 acted in accordance with Department policy when it denied Claimant's MA application.

Accordingly, the Department's decision is AFFIRMED.



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

Date Signed: 6/12/2013

Date Mailed: 6/12/2013

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:

