

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

**IN THE MATTER OF:**



Reg. No.: 201327854  
Issue No.: 2006, 4003  
Case No.: 103209592  
Hearing Date: May 23, 2013  
County: Wayne County (#18)

**ADMINISTRATIVE LAW JUDGE: MICHELLE HOWIE**

**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 conducted on Thursday, May 23, 2013, from Detroit, Michigan. Participants on behalf of Claimant included the Claimant and his mother (redacted). Participants on behalf of Department of Human Services (Department) included (redacted) (Assistant Payment Supervisor) and (redacted) (Assistant Payment Worker).

**ISSUE**

Whether the Department properly denied the Claimant's application for Medical Assistance (MA) and State Disability Assistance (SDA)?

**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 October 31, 2012, the Department received Claimant's application for SDA and MA benefits.
2. The Department processed the application and on November 8, 2012 sent a Medical Review Team (MRT) packet and verification checklist (VCL) to Claimant requesting medical documentation to be submitted by November 19, 2012. (Exhibit 1)
3. The Claimant failed to submit the verification, and on December 19, 2012 the

Department sent Notice of Case Action denying the SDA and MA application.  
(Exhibit 2)

4. On February 1, 2013, the Department received the Claimant's written hearing request protesting the denial of his application.

### **CONCLUSIONS OF LAW**

The Department Of Human Services (DHS) policies are contained in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM), and the 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.

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 2000 AACRS, R 400.3151 through R 400.3180.

In determining initial and ongoing program eligibility Claimant's must cooperate with the local office to include the completion and submitting of the necessary forms. The Department has the responsibility of telling the client what verification is required, how to obtain it, and the due date. BAM 130 (May 2012), p. 1. Verification means documentation or other evidence to establish the accuracy of the client's verbal or written statements. BAM 130, p. 1. Verification is usually required at application/redetermination and for a reported change affecting eligibility or benefit level. BAM 130, p. 1. The client must obtain any required verification, however, the Department must assist if needed and/or requested. BAM 130, p. 3. If neither the client nor the Department is able to obtain verification despite reasonable effort, the Department should use the best available information. BAM 130, p. 3. If no evidence is available, the Department should use its best judgment. BAM 130, p. 3. Client's are allowed 10 calendar days (or other time limit specified in policy) to provide the requested verification. BAM 130, p. 5. A negative action notice is sent when the client indicates a refusal to provide the verification or the time period provided has lapsed and the client has not made a reasonable effort to provide the verifications. BAM 130, p. 5.

In this case, the Claimant submitted an application for MA and SDA benefits. The Department initiated processing and sent a Verification Checklist to the Claimant with a

due date of November 19, 2012. Claimant acknowledged receipt of the request for verification but did not submit the medical documentation by the due date, nor request an extension. Notably, the Claimant re-applied for benefits on April 15, 2013, and has submitted the requested medical documentation. According to the Department, the current application has been submitted to MRT and is pending a disability determination. Based on the evidence, the Department established it acted in accordance with policy when it denied Claimant's MA and SDA application on December 19, 2012 for failure to provide verification necessary to determine eligibility.

Accordingly, the Department action is upheld.

### **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 policy when it denied the Claimant's October 31, 2012 SDA and MA application.

Accordingly, the Department's MA and SDA determination is hereby, **AFFIRMED**.



**Michelle Howie**  
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

MH/hw

cc:

