

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

IN THE MATTER OF:



Reg. No.: 2013-55697
Issue No.: 2006
Case No.: [REDACTED]
Hearing Date: August 21, 2013
County: Wayne (18)

ADMINISTRATIVE LAW JUDGE: Eric Feldman

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 August 21, 2013, from Detroit, Michigan. Participants on behalf of Claimant included Claimant. Participants on behalf of the Department of Human Services (Department or DHS) included [REDACTED] [REDACTED] Medical Contact Worker.

ISSUE

Did the Department properly close Claimant's Medical Assistance (MA) benefits effective August 1, 2013, ongoing, due to his failure to comply with the verification requirements?

FINDINGS OF FACT

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

1. Claimant was an ongoing recipient of MA benefits.
2. On June 6, 2013, the Department sent Claimant a Medical Determination Verification Checklist, which was due back by June 17, 2013. Exhibit 1.
3. The Department never received the request medical verifications.
4. On June 18, 2013, the Department sent Claimant a Notice of Case Action notifying him that his MA benefits would close effective August 1, 2013, ongoing, due to his failure to comply with the verifications requirements. Exhibit 1.
5. On June 26, 2013, Claimant filed a hearing request, protesting the Department's action. Exhibit 1.

CONCLUSIONS OF LAW

Department 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.

In this case, Claimant was an ongoing recipient of MA benefits. On June 6, 2013, the Department sent Claimant a Medical Determination Verification Checklist, which was due back by June 17, 2013. Exhibit 1. The Department testified that it never received the requested medical verifications. On June 18, 2013, the Department sent Claimant a Notice of Case Action notifying him that his MA benefits would close effective August 1, 2013, ongoing, due to his failure to comply with the verifications requirements. Exhibit 1.

Clients must cooperate with the local office in the completion of necessary forms for determining initial and ongoing eligibility. BAM 105 (March 2013), p. 5.

For MA cases, the Department allows the client 10 calendar days (or other time limit specified in policy) to provide the verification it requests. BAM 130 (May 2012), p. 5. If the client cannot provide the verification despite a reasonable effort, the Department extends the time limit up to three times. BAM 130, p. 5. Verifications are considered to be timely if received by the date they are due. BAM 130, p. 5. Also for MA cases, if the client indicates refusal to provide a verification or the time period given has elapsed, then policy directs that a negative action be issued. BAM 130, p. 6. Only adequate notice is required for an application denial. BAM 130, p. 6. Timely notice is required to reduce or terminate benefits. BAM 130, p. 6.

At the hearing, the Department testified that it never received the requested verifications. Moreover, the Department testified that it never received verification of Claimant's social security status. The Department testified that the Medical Determination Verification Checklist also requested Claimant to provide proof of his social security status. See Exhibit 1.

Claimant testified that his physician did submit the requested verifications. On or around June 13, 2013, Claimant testified that he provided his physician with all of the medical verification forms. On June 20, 2013, Claimant testified that his physician mailed all of the completed forms to the Department. Claimant testified that he did not submit proof of his social security status.

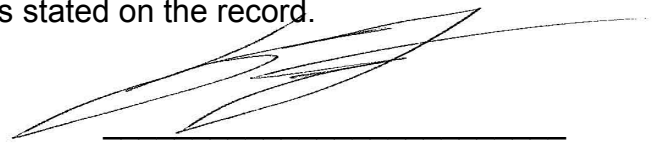
Based on the foregoing information and evidence, the Department properly closed Claimant's MA benefits effective August 1, 2013, ongoing, in accordance with Department policy. The Department credibly testified that it did not receive the requested verifications. Moreover, Claimant testified that his physician mailed all of the documents on or around June 20, 2013, however, he did not present any evidence that

his physician sent the documents to the Department. Additionally, Claimant did not provide verification of his social security status as requested by the Medical Determination Verification Checklist on June 6, 2013. See Exhibit 1. Claimant did not complete the necessary medical verification forms to determine his ongoing MA eligibility. BAM 105, p. 5.

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 it closed Claimant's MA benefits effective August 1, 2013, ongoing.

Accordingly, the Department's AMP FIP FAP MA SDA CDC decision is **AFFIRMED** REVERSED for the reasons stated on the record.



Eric Feldman
Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: August 27, 2013

Date Mailed: August 27, 2013

NOTICE OF APPEAL: 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 or Reconsideration was made, within 30 days of the receipt date of the Decision and Order of Reconsideration or Rehearing Decision.

A Request for Rehearing or Reconsideration may be granted when one of the following exists:

- Newly discovered evidence that existed at the time of the original hearing that could affect the outcome of the original hearing decision;
- Misapplication of manual policy or law in the hearing decision which led to a wrong conclusion;
- Typographical, mathematical or other obvious error in the hearing decision that affects the rights of the client;
- Failure of the ALJ to address in the hearing decision relevant issues raised in the hearing request.

The Department, AHR or the claimant must specify all reasons for the request. MAHS will not review any response to a request for rehearing/reconsideration. A request must be *received* in MAHS within 30 days of the date the hearing decision is mailed.

The written request must be faxed to (517) 335-6088 and be labeled as follows:

Attention: MAHS Rehearing/Reconsideration Request

If submitted by mail, the written request must be addressed as follows:

Michigan Administrative Hearings
Reconsideration/Rehearing Request
P.O. Box 30639
Lansing, Michigan 48909-07322

EJF/las

cc:

