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

IN THE MATTER OF:

Reg. No.: 2013-63070

Issue No.: 2012

Case No.:

Hearing Date: November 4, 2013 County: Oakland (63-02)

ADMINISTRATIVE LAW JUDGE: Alice C. Elkin

HEARING DECISION

Following Claimant's request for a hearing, this matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and 400.37; 7 CFR 273.15 to 273.18; 42 CFR 431.200 to 431.250; 45 CFR 99.1 to 99.33; and 45 CFR 205.10. After due notice, an in-person hearing was held on November 4, 2013, from Madison Heights, Michigan. Participants on behalf of Claimant included

Participants on behalf of the Department of Human Services (Department) included

ISSUE

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

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 March 25, 2013, Claimant filed an MA application.
- 2. On April 4, 2013, the AHR, as Claimant's authorized representative (AR), filed another MA application on Claimant's behalf, identifying itself as the AR.
- 3. On April 4, 2013, the Department sent Claimant a Verification Checklist (VCL) containing the medical packet.
- 4. On May 15, 2013, the Department sent Claimant a Notice of Case Action, denying his application.

5. On August 2, 2013, the AHR filed a request for hearing disputing the denial of Claimant's application.

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), Department of Human Services Reference Tables Manual (RFT), and Department of Human Services Emergency Relief Manual (ERM).

The Medical Assistance (MA) program is established by the Title XIX of the Social Security Act, 42 USC 1396-1396w-5, and is implemented by 42 CFR 400.200 to 1008.59. The Department of Human Services (formerly known as the Family Independence Agency) administers the MA program pursuant to MCL 400.10 and MCL 400.105.

Additionally, the Department testified that it denied Claimant's March 25, 2013, MA application because Claimant failed to submit a completed medical packet. Specifically, the Department noted that, although medical documentation had been provided, Claimant had failed to complete and return the other requested medical documents, including the DHS-49F and DHS-49B. The Department established that the AHR was not identified as Claimant's authorized representative in the March 25, 2013, MA application; as such, it acted in accordance with Department policy when it did not send any verification checklists to the AHR. A client must, at a minimum, submit a DHS-49F, Medical-Social Questionnaire to verify a disability. BAM 815 (July 2013), p. 3. Because there was no evidence that Claimant submitted a DHS-49F, the Department acted in accordance with Department policy when it denied the March 25, 2013, application.

At the hearing, however, the AHR testified that it was unaware of Claimant's March 25, 2013, MA application, and presented evidence that it had submitted an application on Claimant's behalf on April 4, 2013, with a retroactive application for MA coverage for March 2013. The April 4, 2013, application identified the AHR as Claimant's AR. The application also included a completed DHS-49B and DHS-49F as well as a Facility Admission Notice for an discharge. Although the local office denied receiving the application and attached documents, the AHR explained that the application was submitted to a Department worker who served as a liaison at and he presented a date-stamped copy of the application showing that it was submitted to the Department's "OCDHS MARA" office on April 4, 2013. Therefore, the AHR established that the application was filed with the Department. See BAM 110 (July July 2013), pp. 13-14.

The Department must register all applications with the minimum information unless the client is already active for that program. BAM 110 (July 2013), pp. 6, 15-16. The Department must process applications, with priority to those applications with the earliest dates. BAM 115 (July 2013), p. 13. The evidence in this case established that

the Department failed to process Claimant's April 4, 2013, MA application. Therefore, the Department did not act in accordance with Department policy.

DECISION AND ORDER

Accordingly, the Department's decision is REVERSED.

THE DEPARTMENT IS ORDERED TO BEGIN DOING THE FOLLOWING, IN ACCORDANCE WITH DEPARTMENT POLICY AND CONSISTENT WITH THIS HEARING DECISION, WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:

- 1. Register Claimant's April 4, 2013, MA application;
- 2. Process the application;
- 3. Provide Claimant with MA coverage he is eligible to receive, if any, from March 1, 2013, ongoing; and
- 4. Notify Claimant and the AHR of its decision in writing.

Alice C. Elkin

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

Date Signed: November 13, 2013

Date Mailed: November 13, 2013

NOTICE OF APPEAL: 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.

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).

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:

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• 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

ACE/p	f	
cc:		