

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

IN THE MATTER OF:



Reg. No.: 2013-52852
Issue No.: 2006; 4003
Case No.: [REDACTED]
Hearing Date: September 4, 2013
County: Macomb DHS (20)

ADMINISTRATIVE LAW JUDGE: Christian Gardocki

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 September 4, 2013, from Detroit, Michigan. Participants included the above-named claimant. Participants on behalf of Department of Human Services (DHS) included [REDACTED], Specialist.

ISSUE

The issue is whether DHS properly denied Claimant's Medical Assistance (MA) and State Disability Assistance (SDA) eligibility due to a failure by Claimant to complete requested medical documentation.

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 [REDACTED]/13, Claimant applied for MA and SDA benefits.
2. On [REDACTED]/13, DHS mailed Claimant a Verification Checklist requesting various documents including a Medical-Social Questionnaire (DHS-49F).
3. On [REDACTED]/13, Claimant returned requested documents including a partially completed Medical-Social Questionnaire (Exhibits 1-3) but no medical documentation.
4. On [REDACTED]/13, DHS denied Claimant's application for MA and SDA benefits due to Claimant's failure to adequately complete the DHS-49F.

5. On [REDACTED]/13, Claimant requested a hearing to dispute the denial of MA and SDA benefits.

CONCLUSIONS OF LAW

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. DHS regulations are found in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) and the Reference Tables Manual (RFT).

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. DHS regulations are found in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) and the Reference Tables Manual (RFT).

Claimant requested a hearing to dispute a denial of MA and SDA eligibility. It was not disputed that Claimant's potential for both programs required a determination by DHS that Claimant was disabled. It was not disputed that both programs were denied due to Claimant's alleged failure to submit sufficient medical documentation supporting a claim of disability.

For SDA benefits, DHS is to verify the disability or the need for a caretaker at application, redetermination, when required by the DE, or as needed when the client's circumstances change. BEM 261 (1/2012), p. 5. For MA benefits, the client is responsible for providing evidence needed to prove disability or blindness. BEM 260 (7/2012), p. 4.

For all programs, DHS is to use the DHS-3503, Verification Checklist to request verification. BAM 130 (5/2012), pp. 2-3. DHS must give clients at least ten days to submit verifications. *Id.*, p. 3 DHS must tell the client what verification is required, how to obtain it, and the due date. *Id.*, p. 2.

For MA benefits, DHS is to send a negative action notice when the client indicates refusal to provide a verification or the time period given has elapsed. *Id.*, p. 6. For SDA benefits, DHS is to send a negative action notice when the client indicates refusal to provide a verification, or the time period given has elapsed and the client has not made a reasonable effort to provide it.

It was not disputed that DHS mailed Claimant a Medical Determination Verification Checklist requesting various forms, including a DHS-49F and medical records. For MA and SDA benefits, a client is to complete all sections of the DHS-49F. BAM 815 (7/2013), p. 3.

It was not disputed that Claimant timely returned a DHS-49F (Exhibits 3-6) to DHS. It was disputed whether Claimant's submission sufficiently complied with the DHS request.

The submitted DHS-49F listed Claimant's height and weight and noted the following information: Claimant could not stand for long periods due to a back injury, Claimant worked from 2008-2010 and that Claimant completed high school. Claimant left blank sections concerning previous medical testing and hospitalization. In response to a section asking Claimant to list his physicians, Claimant wrote that he signed a release but he did not list the names or addresses of any physicians. Looking at Claimant's form, Claimant's effort in answering the questions was substandard.

DHS is to assist the client in completing the DHS-49-F if the client or representative is unable to complete the form. BAM 815 (7/2013), p. 7. Consideration was given to whether DHS should have accepted Claimant's substandard submission.

It is doubtful that DHS policy requires specialists to complete forms for clients without first being asked. The DHS obligation to assist a client is interpreted to include a requirement of asking for assistance. In the present case, Claimant did not allege that any such request was made. Thus, DHS had no requirement to assist Claimant with the DHS-49F.

It was not disputed that Claimant also failed to submit any other medical documents to DHS. DHS conceded that Claimant returned a completed Activities of Daily Living, a blank Medical Examination Report and a completed Authorization to Release Protected Health Information and no other documents.

Claimant provided DHS with insufficient information to determine disability. Claimant failed to provide DHS with any medical documents and failed to provide any information that would have allowed DHS to obtain medical documents.

It should be noted that Claimant did not allege that he did not have access to medical records or that he did not have a treating physician or previous hospitalizations. There are times when clients have no way to verify a claimed disability. On such occasions, DHS can schedule and pay for a medical examination so that the client has an opportunity to establish a claim of disability. This was not perceived to be one of those occasions. The evidence tended to establish that Claimant did not submit records due to a half-hearted effort rather than an inability to submit documents.

Based on the presented evidence, it is found that Claimant failed to submit a form required to establish disability. Accordingly, the denial of MA and SDA benefits was proper.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, finds that DHS properly denied Claimant's application dated [REDACTED]/13 requesting MA and SDA benefits. The actions taken by DHS are AFFIRMED.



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

Date Signed: 9/25/2013

Date Mailed: 9/25/2013

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

CG/hw

cc:

