

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

IN THE MATTER OF:

██████████
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Reg. No.: 2013-68174
Issue No(s): 2001
Case No.: ██████████
Hearing Date: January 13, 2014
County: Macomb (50-20)

ADMINISTRATIVE LAW JUDGE: Jonathan W. Owens

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 January 13, 2014, from Warren, 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 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 May 3, 2013, Claimant's representative applied for MA benefits on behalf of Claimant for the month of April 2013.
2. On May 21, 2013, the Department requested verification that Claimant had applied for Social Security benefits.
3. On June 7, 2013, the Department forwarded Claimant's medical packet to the Medical Review Team (MRT).

4. On June 7, 2013, the Department issued a second request for verification from Claimant to demonstrate the pursuit of benefits with the Social Security Administration.
5. On July 23, 2013, the Department issued a notice of case action denying Claimant's application for failing to verify the pursuit of benefits with the Social Security Administration.
6. On August 7, 2013, Claimant's representative provided the requested verification.
7. On August 23, 2013, Claimant's representative requested a hearing.

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.

In the instant case, the Department denied Claimant's request for MA benefits based upon Claimant's failure to provide evidence that Claimant had applied for SSA benefits. Claimant's representative provided evidence of an application following the case denial. Claimant's representative asserts Claimant was not required to apply for SSA benefits as Claimant was not eligible for SSA benefits based upon Claimant not entering the country until November 14, 2010. Claimant's representative asserted BEM 270, p. 1 (May 2013), which indicates:

Clients must apply for benefits for which they may be eligible. This includes taking action to make the entire benefit amount available to the group. Any action by the client or other group members to restrict the amount of the benefit made available to the group causes ineligibility.

*Except for contractual care arrangements, the requirements in this item **do not** apply to a past month determination for MA when the applicant has taken action to apply for potential benefits.*

Claimant's representative asserts the Department incorrectly denied MA benefits based upon a failure to supply a verification of SSA application. Claimant's representative

acknowledged Claimant was not eligible for ongoing MA benefits and they were seeking emergency services only MA coverage based upon Claimant's residency status. Claimant's representative testified their agency spoke to the worker on July 3, 2013, regarding the requested verification. Claimant's representative asserted during the call a request was made for the Department interpreter to assist with communication with Claimant. The Department worker recalled the conversation being about Claimant's representative's assertion that Claimant did not need to apply due recent admission to the country. An alleged second conversation was purported to have taken place between the representative agency and the Department's interpreter, not the caseworker, on July 9, 2013. During this conversation, the representative alleged a request was made to have the interpreter speak with Claimant regarding applying or verifying the application for SSA. Claimant's representative admitted they do have an Arabic interpreter on staff at their own agency.

It was noted that Claimant, as it turns out, had applied for SSA benefits on June 18, 2013. Claimant's representative, however, failed to verify this until August 7, 2013, which was after the application denial. The Department presented a copy of a SOLQ printed on August 28, 2013, which still showed no pending application for SSA benefits.

This Administrative Law Judge, after reviewing the evidence presented, finds the Department did act in accordance with policy. The Department properly informed Claimant's representative on May 21, 2013, and again on June 7, 2013, of the need for verification of an application for SSA benefits. The policy noted by Claimant's representative does not support the assertion made by Claimant's representative that there was no need to have the verification, since only a retro month was being requested. The policy only says that Claimant need not have filed an SSA application in the retro month being requested "*when the applicant has taken action to apply for potential benefits.*" BEM 270, p. 1 (May 2013). Hence, while Claimant did not have to have an application on file during the retro month, Claimant did have to demonstrate action was taken to apply for benefits.

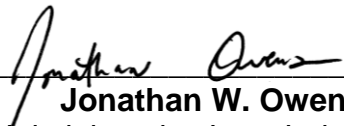
Further, Claimant's representative's lack of communication with their Client is not a basis for failure to comply with a request for verification. According to BAM 110, p. 7 (January 2013), an authorized representative assumes all the responsibilities of a client. In this case, Claimant's representative assumed the responsibility to comply with a request for verification. Claimant's representative failed to present evidence that demonstrated any attempts were made to request the verification from SSA. Claimant's representative asserted they had requested assistance with communicating with Claimant. However, as noted above, Claimant's representative had an [REDACTED] staff member capable of communicating with Claimant. Claimant's representative, as the authorized representative, had the ability to obtain the verification being requested directly from SSA. According to Department policy located in BAM 105, p. 8 (March 2013), clients must take action within their ability to obtain verifications. Department staff must assist when necessary. Here, Claimant's representative has not demonstrated they took actions within their ability to obtain the verification and has not

demonstrated it was necessary for the Department to assist them in obtaining the requested verification.

Based on the above Findings of Fact and Conclusions of Law, this Administrative Law Judge finds that the Department acted in accordance with Department policy.

DECISION AND ORDER

Accordingly, the Department's decision is AFFIRMED.



Jonathan W. Owens
Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: February 3, 2014

Date Mailed: February 3, 2014

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;
- 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:

2013-68174/JWO

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

JWO/pf

cc:

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]