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

IN THE MATTER OF:



Reg. No.: Issue No(s).: Case No.: Hearing Date: County:

2013-68411 2007

January 30, 2014 Macomb #20

ADMINISTRATIVE LAW JUDGE: Michael S. Newell

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 CF R 431.200 to 431.250; 45 CFR 99. 1 to 99.33; and 45 CFR 205.10. After due notice, a t elephone hearing wa s held on January 3 0, 2014, from Lansing, Michigan. Participants on behalf of Claimant incl uded Claimant's son an authorized hearing representative Participants on behalf of the Department of Human Services (Department) included

ISSUE

Did the Department properly deny Claimant's Medicaid application?

FINDINGS OF FACT

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

- 1. On August 5, 2013, Claimant applied for Medicaid
- 2. On September 4, 2013, the Department processed the application.
- 3. Claimant provided documentation of her alien status.
- 4. According to the Hearing Summary, on September 4, 2013, the Department denied the application, effective August 1, 2013.
- 5. On September 10, 2013, the Department received Claimant's hearing request.

CONCLUSIONS OF LAW

Department policies are contained in the Department of Human Service s Bridges Administrative Manual (BAM), Department of Human Services Bridges Eligibility Manual (BEM), D epartment of Human Servic es Reference Tables Manual (RFT), and Department of Human Services Emergency Relief Manual (ERM).

The Medic al Assistance (MA) program is est ablished by the Title XIX of the Socia I 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 did not meet its burden of pr oof under BAM 600. The Department did not provide a Notice of Case Action or any verification forms for the hearing. The witnesses disputed whether the worker told Claimant's Representative by phone that the second fax was illegible. The Department bears the burden of proof and relying on a phone c onversation rather than a r equired form or forms for verification as Notably, BAM 130 required by BAM 130 is problematic. page 3 requires the Department to verify alien infor mation. BAM 130 directs the Department to request verification when required by policy (page 1). BAM 130 page 3 provides the method for obtaining verification, which is to use the form specified on page 3, which depends on the benefit type and the verification required. Regardless of the type of form needed, a form is clearly needed to comply with BAM 130, rather than a mere phone call, and the Department did not provide such a form for the hearing. Requesting to view the original documents before closure through a verific ation from would certainly be reasonable if the documents were illegible, and BAM 130 specifically r equires originals for purposes of determining citizenship and identity.

The Administrative Law Judge, based on the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, if any, finds that the Department failed to satisfy its burden of showing t hat it acted in accordance with Department policy when it denied Claimant's FAP application.

DECISION AND ORDER

Accordingly, the Department's decision is **REVERSED**.

- THE DEP ARTMENT IS ORDERE D TO BEGIN DOING THE FOLLOWING, IN ACCORDANCE WIT H DE PARTMENT P OLICY AND CONSIS TENT WIT H THIS HEARING DECISION, WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:
- 1. Issue the proper form to Claimant s pecified by BAM 130 page 3 to verify any needed information, together with applicable deadlines as required by policy. Such verification may expressly request original documents if necessary.

2. Reinstate the application and redetermine eligibility in accordance with policy.

Michael & Newell

MICHAEL S. NEWELL Administrative Law Judge for Maura Corrigan, Director Department of Human Services

Date Signed: February 21, 2014

Date Mailed: February 21, 2014

NOTICE OF APP EAL: The claimant may appea I the Dec ision and Order to Circuit Court within 30 days of the receipt of the Decision and Order or, if a timely Request for Rehearing or Reconsiderati on was made, within 30 days of the receipt date of the Decision and Order of Reconsideration or Rehearing Decision.

Michigan Administrative Hearing Syst em (MAHS) may order a rehearing or reconsideration on either its own motion or at the request of a par ty within 30 days of the mailing date of this Dec ision and Order . MAHS will not order a rehearing or reconsideration on the Department's mo tion where the final decis ion 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 or iginal 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 clai mant must specify all reas ons 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

MSN/las

CC: