

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

IN THE MATTER OF:

[REDACTED]

Reg. No.: 2014-20289
Issue No(s): 2002, 4002
Case No.: [REDACTED]
Hearing Date: February 5, 2014
County: Ottawa County DHS

ADMINISTRATIVE LAW JUDGE: Colleen Lack

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, a telephone hearing was held on February 5, 2014, from Lansing, Michigan. Participants on behalf of Claimant included [REDACTED] the Claimant. Participants on behalf of the Department of Human Services (Department) included [REDACTED] Eligibility Specialist, and [REDACTED] Family Independence Manager.

ISSUE

Did the Department properly deny the Claimant's Medical Assistance (MA) and State Disability Assistance (SDA) application based on a failure to comply with 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. On September 20, 2013, the Claimant applied for MA and SDA.
2. On October 10, 2013, a Medical Determination Verification Checklist was issued to the Claimant to provide the requested verifications by the October 21, 2013 due date.
3. On November 15, 2013, a Notice of Case Action was issued to the Claimant stating the cash program was denied because verification of disability and address was not returned.

4. On December 16, 2013, the Claimant filed a request for hearing contesting the Department's actions.

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.

The State Disability Assistance (SDA) program is established by the Social Welfare Act, MCL 400.1-.119b. The Department of Human Services (formerly known as the Family Independence Agency) administers the SDA program pursuant to MCL 400.10 and Mich Admin Code, R 400.3151-.3180.

Additionally, a Claimant must cooperate with the local office in determining initial and ongoing eligibility, including completion of necessary forms, and must completely and truthfully answer all questions on forms and in interviews. BAM 105.

Verification is usually required upon application or redetermination and for a reported change affecting eligibility or benefit level as well as when information regarding an eligibility factor is unclear, inconsistent, incomplete or contradictory. Verifications are considered timely if received by the date they are due. The Department must allow a client 10 calendar days (or other time limit specified in policy) to provide the requested verification. The Department worker must tell the client what verification is required, how to obtain it, and the due date. The client must obtain required verification, but the Department must assist if the client needs and requests help. For MA, if the client cannot provide the verification despite a reasonable effort, the time limit can be extended up to three times. If neither the client nor the Department can obtain verification despite a reasonable effort, the Department worker should use the best available information. If no evidence is available, the Department worker is to use their best judgment. The Department is to send a case action notice when the client indicates refusal to provide a verification, or the time period given has elapsed. BAM 130.

On September 20, 2013, the Claimant applied for MA and SDA. On October 10, 2013, a Medical Determination Verification Checklist was issued to the Claimant to provide the requested verifications. The Eligibility specialist testified the due date listed on the Medical Determination Verification Checklist was October 21, 2013 due date. The

screen shot of the correspondence history indicates that several Departmental forms utilized in determining disability were also printed on October 10, 2013.

On November 15, 2013, a Notice of Case Action was issued to the Claimant stating the cash program was denied because verification of disability and address was not returned. It is noted that this notice does not list any Medicaid determination under the "INTENDED ACTION" and "REASON FOR INTENDED ACTION" sections. The Department has failed to present sufficient evidence that written notice of the Medicaid denial was issued to the Claimant in accordance with BAM 220.

No copy of the Medical Determination Verification Checklist was included in the Department's exhibits for this hearing. Accordingly, there is not sufficient evidence to establish what the Department actually requested the Claimant provide for verification(s) of disability and address.

The testimony of the Eligibility Specialist and the Claimant establish that in conversations on October 23, 2013 and November 15, 2013, the Department was aware that the Claimant was trying to provide the requested verifications. The Claimant's doctor's office had lost the packet, then found it and were going to send it to the Department. The Eligibility Specialist testified he never extended the due date in the Department's computer system despite these conversations with the Claimant. Rather, the Notice of Case Action was issued on November 15, 2013, the same date the Eligibility Specialist testified the Claimant told him the verification packet had been found and would be submitted.

In this case, there is insufficient evidence to establish what specific verifications the Department requested from the Claimant. There is also insufficient evidence that notice of the Medicaid determination was issued to the Claimant in accordance with the BEM 220 policy. Lastly, the above cited BAM 130 policy allows for up to three extensions of the due date when the client cannot provide the verification despite a reasonable effort. When the Notice of Case Action was issued in this case, the Department was aware that the Claimant was making a reasonable effort to provide the requested verifications, but no extension of the due date was granted. Accordingly, the determination to deny the Claimant's MA and SDA application cannot be upheld.

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 that it acted in accordance with Department policy when it denied the Claimant's MA and SDA application based on a failure to comply with verification requirements.

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. Re-register the Claimant's September 20, 2013 MA and SDA application and re-determine eligibility, to include requesting any additional verifications that may still be needed, in accordance with Department policies.
2. Issue the Claimant written notice of any case actions in accordance with Department policies.



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

Date Signed: February 12, 2014

Date Mailed: February 12, 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:

201420289/CL

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

CL/hj

cc:

