

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

**IN THE MATTER OF:**

[REDACTED]

Reg. No.: 2014-17873  
Issue No(s): 2002, 2003  
Case No.: [REDACTED]  
Hearing Date: March 4, 2014  
County: Macomb County DHS #12

**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 March 4, 2014, from Lansing, Michigan. Participants on behalf of Claimant included [REDACTED] the Claimant, and [REDACTED] sister in law. Participants on behalf of the Department of Human Services (Department) included [REDACTED] Eligibility Specialist.

**ISSUE**

Did the Department properly close Claimant's Medicaid (MA) case 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. Claimant's MA case was due for a medical review.
2. On October 14, 2013, a Medical Determination Verification Checklist was issued to the Claimant stating what verifications were needed by the October 24, 2013, due date.
3. The Department did not receive any of the requested verifications by the October 24, 2013 due date.
4. On October 28, 2013, a Notice of Case Action was issued to the Claimant stating the Medicaid case would close effective December 1, 2013.
5. On December 17, 2013, Claimant filed a request for hearing contesting the Department's action.

## **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, 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. 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. For MA, if the client cannot provide the verification despite a reasonable effort, the time limit can be extended up to three times. The client must obtain required verification, but the Department must assist if the client needs and requests help. 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 and the client has not made a reasonable effort to provide it. BAM 130.

On October 14, 2013, a Medical Determination Verification Checklist was issued to the Claimant stating what verifications were needed by the October 24, 2013, due date. (Exhibit 1) The Eligibility Specialist testified that the Department closed Claimant's MA case because the requested verifications were not returned. (Exhibit 2)

Claimant and his sister in law testified that they never received the October 14, 2013 Medical Determination Verification Checklist. If they had received it, they would have gotten the forms completed and been compliant. Claimant noted that previously all paperwork has been returned on time. Claimant's sister in law gets the mail for the Claimant and helps him stay on top of things. Typically there is only a one or two day turn around for returning paperwork. Claimant did not know why he would not have received the October 14, 2013 Medical Determination Verification Checklist.

Claimant also noted his attorney had advised him that the MA would continue while his appeal is pending with the Social Security Administration. Department policy does state

that refusal to pursue a potential benefit results in the person's ineligibility. Types of potential benefits include Retirement, Survivors, and Disability Insurance (RSDI) and Supplemental Security Income (SSI). BEM 270. However, the Department must periodically re-determine an individual's eligibility for active programs. BAM 210. The redetermination process includes thorough review of all eligibility factors. Pursuit of potential benefits is not the only eligibility criteria for ongoing MA benefits. BEM 163 and 166 address non-financial and financial eligibility factors.

Claimant was unable to provide any explanation of why he did not have receive the October 14, 2013 Medical Determination Verification Checklist, such as a history of problems with receiving mail. The Department has provided sufficient evidence that the verifications were requested in accordance with the BAM 130 policy. The October 14, 2013 Medical Determination Verification Checklist told the Claimant what verification is required, how to obtain it, and the due date. The Department allowed 10 calendar days to provide the requested verifications. The October 14, 2013 Medical Determination Verification Checklist was mailed to the address Claimant verified during the hearing proceedings. The evidence establishes that the Department did not receive any of the verifications, nor any request for assistance or extension of the due date by the October 24, 2013 due date. In accordance with the BAM 130 policy, the Department closed Claimant's MA case when the time period elapsed and there was no indication a reasonable effort was being made to provide the requested verifications.

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 acted in accordance with Department policy when it closed Claimant's MA case based on a failure to comply with verification requirements.

### **DECISION AND ORDER**

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



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

Date Signed: March 24, 2014

Date Mailed: March 24, 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:

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

CL/hj

cc:

