

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

IN THE MATTER OF:

[REDACTED]

Reg. No.: 2014-31361
Issue No(s) : 2002, 4002
Case No.: [REDACTED]
Hearing Date: April 17, 2014
County: Macomb County DHS #20

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 April 17, 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], Hearing Facilitator.

ISSUE

Due to a failure to comply with the verification requirements, did the Department properly deny Claimant's benefits application for Medical Assistance (MA) and State Disability Assistance (SDA)?

FINDINGS OF FACT

The Administrative Law Judge, based upon the competent, material, and substantial evidence on the whole record, including testimony of witnesses, finds as material fact:

1. On January 31, 2014, Claimant applied for MA and SDA benefits.
2. On February 6, 2014, a Medical Determination Verification Checklist was issued to Claimant stating what verifications were needed by the February 18, 2014 due date.
3. On February 24, 2014, a Notice of Case Action was issued to the Claimant stating the MA and SDA application was denied based on a failure to comply with verification requirements.
4. On March 6, 2014, 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), and Department of Human Services Reference Tables Manual (RFT).

The Medical Assistance (MA) program is established by Title XIX of the Social Security Act, 42 USC 1396-1396w-5; 42 USC 1315; the Affordable Care Act of 2010, the collective term for the Patient Protection and Affordable Care Act, Pub. L. No. 111-148, as amended by the Health Care and Education Reconciliation Act of 2010, Pub. L. No. 111-152; and 42 CFR 430.10-.25. The Department (formerly known as the Family Independence Agency) administers the MA program pursuant to 42 CFR 435, MCL 400.10, and MCL 400.105-.112k.

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 42 CFR 435, 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. 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 February 6, 2014, a Medical Determination Verification Checklist was issued to the Claimant stating what verifications were needed by the February 18, 2014 due date. The Hearing Facilitator testified that as of February 24, 2014, no verifications were received from Claimant nor had Claimant requested an extension or assistance with obtaining the verifications. Accordingly, on February 24, 2014, the Department denied Claimant's MA and SDA application based on the failure to provide requested documentation needed to determine disability.

Claimant testified she has applied for Medicaid a handful of times and keeps getting denied for paperwork not being turned in. Claimant asserted she turns in every

pamphlet, notice, booklet, etc. sent to her, but it just gets lost and she gets denied. Claimant reported she has turned in paperwork by fax, mail and drop off at the local Department office. Claimant believes her caseworker at New Oakland may have verification of the fax transmissions, but the caseworker was not able to participate in this hearing. Claimant stated that when she drops off paperwork at the local office, she makes sure her name, the case number, or her social security number is on each page; Claimant puts it in an envelope with the caseworker's name and Claimant's number on it; and the Claimant drops it off at the drop window at the front desk. Claimant stated she has never had to sign a book when dropping off paperwork. Rather, Claimant stated a lady behind the counter takes the envelope and says she will make sure her worker gets it.

The Hearing Facilitator provided credible testimony of the drop off procedure at that local Department office. No documentation is accepted in envelopes and there is a log book to be completed whenever paperwork is dropped off in the office. Each document must be separated and is stamped as received after the log is signed.

Claimant's testimony is not found to be fully credible based on the differences in the procedure for dropping off paperwork at the local office and absence of any fax transmission documentation.

The Department has provided sufficient evidence that the verifications were requested in accordance with the BAM 130 policy. The February 6, 2014 Medical Determination Verification Checklist told the Claimant what verification is required, how to obtain it, and the due date. The Department allowed at least 10 calendar days to provide the requested verifications. Claimant did not provide sufficient credible evidence that she provided the requested verifications by the February 18, 2014 due date. Further, the only documented request for an extension was made well after the February 18, 2014 due date, specifically on March 6, 2014 when the request for hearing was filed. There was no evidence Claimant made any request for the Department to assist with obtaining the verifications. In accordance with the BAM 130 policy, the Department denied Claimant's MA and SDA application when the time period elapsed and there has been no request for an extension or assistance.

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 denied Claimant's MA and SDA application based on a failure to comply with verification requirements.

DECISION AND ORDER

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



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

Date Signed: May 6, 2014

Date Mailed: May 6, 2014

NOTICE OF APPEAL: A party may appeal this Hearing Decision in the circuit court in the county in which he/she resides or has its principal place of business in the State, or the circuit court in Ingham County, within 30 days of the receipt date.

A party may request a rehearing or reconsideration of this Hearing Decision from the Michigan Administrative Hearing System (MAHS) within 30 days of the mailing date of this Hearing Decision, or MAHS may order a rehearing or reconsideration on its own motion.

MAHS may grant a party's Request for Rehearing or Reconsideration 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 party requesting a rehearing or reconsideration 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 this Hearing Decision is mailed.

A written request may be faxed or mailed to MAHS. If submitted by fax, 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

201431361/CL

CL/hj

cc:

