

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

IN THE MATTER OF:

[REDACTED]

Reg. No.: 201433532
Issue No.: 2004
Case No.: [REDACTED]
Hearing Date: April 29, 2014
County: Macomb County DHS #20

ADMINISTRATIVE LAW JUDGE: Kevin Scully

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 29, 2014, from Lansing, Michigan. Participants on behalf of Claimant included [REDACTED] and his attorney [REDACTED]. Participants on behalf of the Department of Human Services (Department) included [REDACTED].

ISSUE

Whether the Department of Human Services (Department) properly denied the Claimant's Medical Assistance (MA) application?

FINDINGS OF FACT

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

1. The Claimant applied for Medical Assistance (MA) on July 29, 2013, requesting retroactive benefits through April 1, 2013.
2. On August 27, 2013, the Medical Review Team (MRT) deferred making a determination of disability because additional information was required.
3. On October 31, 2013, the Department notified the Claimant that it had denied his application for Medical Assistance (MA).
4. The Department received the Claimant's request for a hearing on January 22, 2014, protesting the denial of his Medical Assistance (MA) application.

CONCLUSIONS OF LAW

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.

Clients must cooperate with the local office in determining initial and ongoing eligibility. This includes the completion of necessary forms. Department of Human Services Bridges Assistance Manual (BAM) 105 (March 1, 2013), p 5. Verification means documentation or other evidence to establish the accuracy of the client's verbal or written statements. Department of Human Services Bridges Assistance Manual (BAM) 130 (May 1, 2012), p 1. Verification is usually required at application/redetermination and for a reported change affecting eligibility or benefit level when it is required by policy, required as a local office option, or information regarding an eligibility factor is unclear, inconsistent, incomplete, or contradictory. BAM 130. The Department uses documents, collateral contacts, or home calls to verify information. BAM 130. A collateral contact is a direct contact with a person, organization, or agency to verify information from the client. BAM 130. When documentation is not available, or clarification is needed, collateral contact may be necessary. BAM 130.

The Department will allow the client 10 calendar days (or other time limit specified in policy) to provide requested verification material, and if the client cannot provide the verification despite a reasonable effort, the Department will extend the time limit up to three times. BAM 130.

The Claimant applied for Medical Assistance (MA) on July 29, 2013, requesting retroactive benefits through April 1, 2013. The Claimant indicated on his application for assistance that he was disabled, and his case was submitted to the Medical Review Team (MRT) for a determination of disability on July 31, 2013. On August 27, 2013, the Medical Review Team (MRT) determined that additional information was necessary to make a determination of disability. On October 31, 2013, the Department notified the Claimant that it had denied his application for assistance.

The October 31, 2013, Notice of Case Action indicates that the Claimant is not eligible for Medical Assistance (MA) because he does not meet the criteria for any category of assistance, including categories for the disabled. The Department's representative testified that the Claimant's application for assistance was denied for failing to return the needed documentation to determine disability.

The Department's representative referred to e-mail communication with the Claimant's authorized representative at the time of his application for assistance. The evidence on the record indicates that the Claimant was granted extensions to supply the Department with unspecified verification material on August 13, 2013; August 19, 2013; and August 27, 2013. The e-mail communication cited by the Department on the record does not indicate what verification material was being requested.

On August 27, 2013, the Medical Review Team (MRT) indicated specific information that was necessary to make a determination of disability and that certain reports previously provided by the Claimant were incomplete.

The Department's representative testified that the Claimant failed to provide the missing parts of the incomplete reports listed on the August 27, 2013, DHS-49A by the end of the third extension, and therefore the Claimant's application was denied.

This Administrative Law Judge finds that the Department failed to establish that it sent the Claimant a Verification Checklist (DHS-3503-MRT) as directed by Department of Human Services Bridges Administrative Manual (BAM) Item 815, or that the Claimant failed to make a reasonable attempt to provide the information listed on the Medical-Social Eligibility Certification (DHS-49-A). The Department will grant three extensions to submit verification material as directed by BAM 130, but these extensions are not cumulative with respect to all requests for information from the Department.

This Administrative Law Judge failed to see how the information requested by the MRT on a form signed on August 27, 2013, was the same information the Claimant was granted an extension to supply on August 13, 2013. The DHS-49A does not list a deadline to submit the information requested by the MRT, and there is no evidence that the Claimant refused to provide this information.

Since the MRT did not make a determination of disability, or a finding of failure to cooperate, this Administrative Law Judge finds that the Department was not acting in accordance with policy when it denied the Claimant's July 29, 2012, application for Medical Assistance (MA) based on disability.

DECISION AND ORDER

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 the Claimant's application for Medical Assistance (MA).

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. Send the Claimant a Verification Checklist (DHS-3503-MRT) listing the information necessary for the Medical Review Team (MRT) to make a determination of disability.
2. Initiate a determination of the Claimant's eligibility for Medical Assistance (MA) based on his July 29, 2013, application for assistance.
3. Provide the Claimant with a Notice of Case Action (DHS-1605) describing the Department's revised eligibility determination.

4. Issue the Claimant any retroactive benefits he may be eligible to receive, if any.



Kevin Scully
Administrative Law Judge
for Maura D. Corrigan, Director
Department of Human Services

Date Signed: May 8, 2014

Date Mailed: May 8, 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:

201433532/KS

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

KS/hj

cc:

