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

IN THE MATTER OF:

Reg. No.: 15-008948 Issue No.: 4001

Case No.:

Hearing Date: July 15, 2015

County: Wayne (35-Redford)

ADMINISTRATIVE LAW JUDGE: Michael J. Bennane

#### **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; and Mich Admin Code, R 792.11002. After due notice, a hearing was held on July 15, 2015, from Detroit, Michigan. Participants on behalf of Claimant included Claimant. Participants on behalf of the Department of Health and Human Services (Department) included

## <u>ISSUE</u>

Did the Department properly deny Claimant's application for State Disability Assistance (SDA) benefits?

#### **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 March 24, 2015, Claimant applied for SDA benefits.
- 2. On April 6, 2015, the Department sent Claimant a Medical Determination Verification Checklist requesting various pieces of documentation/information.
- 3. On April 30, 2015, the Department sent Claimant a notice of case action informing her that her SDA application had been denied.

#### **CONCLUSIONS OF LAW**

Department policies are contained in the Department of Health and Human Services Bridges Administrative Manual (BAM), Bridges Eligibility Manual (BEM), Reference Tables Manual (RFT), and Emergency Relief Manual (ERM).

The State Disability Assistance (SDA) program is established by the Social Welfare Act, MCL 400.1-.119b. The Department of Health and Human Services (formerly known as the Department of Human Services) administers the SDA program pursuant to 42 CFR 435, MCL 400.10 and Mich Admin Code, R 400.3151-.3180.

In this case, the Department sent Claimant a verification checklist requesting various pieces of information concerning her disability application with proofs due April 16, 2015.

The Medical Examination Report that was returned to the Department stated that Claimant had not been seen by the physician.

Claimant requested an extension to April 20, 2015. The documents were not provided within this timeframe and an additional extension was granted to April 30, 2015. When the requested documents were not provided, Claimant's SDA application was denied on April 30, 2015, for failure to submit various medical proofs.

Claimant testified that she had provided a request for documents to her physician in a timely manner but that the doctor had failed to provide the documentation requested.

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 SDA application

### **DECISION AND ORDER**

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

Administrative Law Judge

for Nick Lyon, Director

Department of Health and Human Services

Date Signed: 8/19/2015

Date Mailed: 8/19/2015

#### MJB / pf

**NOTICE OF APPEAL**: A party may appeal this Hearing Decision in the circuit court in the county in which he/she resides, or the circuit court in Ingham County, within 30 days of the receipt date. A copy of the claim or application for appeal must be filed with the Michigan Administrative Hearing System (MAHS).

A party may request a rehearing or reconsideration of this Hearing Decision from MAHS within 30 days of the mailing date of this Hearing Decision, or MAHS <u>MAY</u> order a rehearing or reconsideration on its own motion. MAHS <u>MAY</u> 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 48909-8139

