



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
MICHIGAN OFFICE OF ADMINISTRATIVE HEARINGS AND RULES

ORLENE HAWKS  
DIRECTOR

[REDACTED]  
[REDACTED]  
[REDACTED], MI [REDACTED]

Date Mailed: January 16, 2020  
MOAHR Docket No.: 19-012362  
Agency No.: [REDACTED]  
Petitioner: [REDACTED]

**ADMINISTRATIVE LAW JUDGE: Carmen G. Fahie**

### **HEARING DECISION**

Following Petitioner'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; 42 CFR 438.400 to 438.424; 45 CFR 99.1 to 99.33; and 45 CFR 205.10; and Mich Admin Code, R 792.11002. After due notice, a telephone hearing was held on December 18, 2019, from Lansing, Michigan. The Petitioner was represented by herself and her cousin, [REDACTED]. The Department of Health and Human Services (Department) was represented by Brian Magda, Family Independence Specialist.

### **ISSUE**

Did the Department properly determine Petitioner's eligibility for Medical Assistance (MA) and State Disability Assistance (SDA)?

### **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 [REDACTED], Petitioner applied for MA and SDA.
2. On October 8, 2019, the Department Caseworker sent Petitioner a DHS-49F, Medical Social Questionnaire, DHS-1555, Authorization to Release Protected Health Information, DHS-3975, Reimbursement Authorization, and DHS-54A, Medical Needs Form that were due back to the Department on October 18, 2019. Department Exhibit 1, pgs. 25-36.
3. On October 15, 2019, the Department Caseworker received incomplete and unsigned or undated forms, a medical form completed by the Petitioner not her

medical doctor, and other required forms were missing. Department Exhibit 1, pgs. 25-36.

4. On November 1, 2019, the Department Caseworker sent Petitioner a Notice of Case Action, DHS-1605, that she was denied for SDA for failure to provide required verifications. Department Exhibit 1, pgs. 21-24.
5. On November 13, 2019, the Department received a hearing request from the Petitioner, contesting the Department's negative action.

### **CONCLUSIONS OF LAW**

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

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 Department of Human Services) 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 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, Petitioner applied for SDA and MA with an application dated [REDACTED]. She had a telephone interview with the Department Caseworker who explained to her what was required for her to apply for SDA and MA and the importance of completing the entire form and answering all of the questions. On October 15, 2019, the Department Caseworker received incomplete and unsigned or undated forms, a medical form completed by Petitioner not her medical doctor, and other required forms were missing. Department Exhibit 1, pgs. 25-36. On November 1, 2019, the Department Caseworker sent Petitioner a Notice of Case Action, DHS-1605, that she was denied for SDA for failure to provide required verifications. Department Exhibit 1, pgs. 21-24. BAM 105, 110, and 115. BEM 163, 209, 214, and 261.

During the hearing, the FIS stated that Petitioner was never contacted about the incomplete, incorrect, or missing paperwork. The Department received Petitioner's attempt to comply with the verification requirements on October 15, 2019, which was three days before the due date of October 18, 2019. There was enough time to contact

Petitioner to assist her in completing the required paperwork to determine MA and SDA eligibility.

**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 did not act in accordance with Department policy when it denied Petitioner's SDA and MA application dated October 7, 2019, for failure to provide required verifications.

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:

1. Initiate a redetermination of Petitioner's eligibility for MA retroactive to her application date of [REDACTED], by sending a new Verification Checklist with a scheduled appointment for assistance with completing the required verifications to determine MA and SDA eligibility.
2. Based on policy, the Department should provide Petitioner with written notification of the Department's revised eligibility determination.
3. Issue Petitioner any retroactive benefits she may be eligible to receive, if any

CF/hb

  
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**Carmen G. Fahie**  
Administrative Law Judge  
for Robert Gordon, Director  
Department of Health and Human Services

**NOTICE OF APPEAL:** A party may appeal this Order in circuit court within 30 days of the receipt date. A copy of the circuit court appeal must be filed with the Michigan Office of Administrative Hearings and Rules (MOAHR).

A party may request a rehearing or reconsideration of this Order if the request is received by MOAHR within 30 days of the date the Order was issued. The party requesting a rehearing or reconsideration must provide the specific reasons for the request. MOAHR will not review any response to a request for rehearing/reconsideration.

A written request may be mailed or faxed to MOAHR. If submitted by fax, the written request must be faxed to (517) 763-0155; Attention: MOAHR Rehearing/Reconsideration Request.

If submitted by mail, the written request must be addressed as follows:

Michigan Office of Administrative Hearings and Rules  
Reconsideration/Rehearing Request  
P.O. Box 30639  
Lansing, Michigan 48909-8139

**DHHS**

Kelly Sutherland  
2300 E Grand River Ste. 1  
Howell, MI 48843

Livingston County, DHHS

BSC4 via electronic mail

L. Karadsheh via electronic mail

D. Smith via electronic mail

EQADHS via electronic mail

**Petitioner**

[REDACTED]  
[REDACTED]  
[REDACTED], MI [REDACTED]