

**OHIO DEPARTMENT OF JOB AND FAMILY SERVICES
BUREAU OF STATE HEARINGS**

In the matter of:

<u>Case Number:</u>	<u>County:</u>	
5053898879	OTTAWA	
<u>Appeal:</u>	<u>Program:</u>	<u>Disposition:</u>
1329725	DMA	OVERRULED
No Compliance Required		
Decision Date:	04/04/2007	
Request Date:	01/26/2007	
Hearing Officer:	JENNIFER HORN	

State Hearing Decision

ISSUE

As of September 15, 2004, the Director of the Ohio Department of Job and Family Services suspended the approval of any new Disability Medical Assistance applications. By notice mailed 01-17-07, the Ottawa County Department of Job and Family Services (agency) denied the appellant's 01-16-07 application for Disability Medical Assistance (DMA). At issue in this appeal is whether or not the 01-16-07 denial of DMA was correct. After a review of the facts, this Hearing Officer finds the denial is accordance with established rules. It is recommended the appeal be overruled.

PROCEDURAL ISSUES

Notice of denial was issued by the agency on 01-17-07. The appellant's request for a state hearing was received by the Bureau of State Hearings on 01-26-07 and forwarded to the Toledo Hearings Section for scheduling. The state hearing was originally scheduled for 02-13-07 but was rescheduled at the request of the appellant. The rescheduled hearing of 03-06-07 was also rescheduled at the request of the appellant. This rescheduling prevented the hearing decision from being issued within 30 days of the request date. The rescheduled hearing was conducted via speakerphone on 04-03-07. Presenting testimony for the agency was Dorothy Woessner - Income Maintenance Administrator (IMW). The appellant was present with his authorized representative. The appeal summary was received on 02-01-07.

FINDINGS OF FACT

1. The appellant is a single adult, over the age of 21, with no minor children. He submitted an application for medical on 01-16-07.
2. The appellant has been employed off-and-on and is currently employed. At the time of the application he did not claim he was disabled. He later reported disability at the time of the state hearing.
3. The appellant has filed for Social Security disability and is currently in the appeal process. This application was not reported to the agency prior to the state hearing.

STATE HEARING DECISION CONTINUATION

4. Effective 09-15-04, the Director of the Ohio Department of Job and Family Services suspended approval of any new DMA applications. The appellant's 01-16-07 application for DMA was denied on 01-17-07 based on this suspension.

CONCLUSIONS OF POLICY

Ohio Administrative Code (OAC) § 5101:1-42-01(A) (2003) states, in part, the Disability Medical Assistance program is a state administered program with no federal funding and no federal regulations. The Disability Medical Assistance program provides medical assistance to persons who are medication dependent and ineligible for any category of Medicaid. Section (A) (2) of the rule states the Director of Job and Family Services or designee may issue an order at any time suspending the approval of any new applications for Disability Medical Assistance. The order will be distributed to all County Department of Job and Family Services agencies on the same day and will remain in effect until revised or rescinded. During a program suspension, all new applicants will be informed that a suspension is in effect. All new applications will be denied during the time that a suspension is in effect. No waiting lists will be established during periods of suspension.

Medicaid Information Letter 04-015 (September 3, 2004) specifically states that effective September 15, 2004, the Director of Job and Family Services issued an Administrative Order to suspend the approval of applications for Disability Medical Assistance until further notice.

The Disability Medical Assistance program was suspended by administrative order effective 09/15/04. Since the Disability Medical Assistance program has been suspended and all new applications filed after 09/15/04 must be denied, the 01-17-07 denial of appellant's 01-16-07 application for Disability Medical Assistance is in accordance with established rules.

As advised at the time of the state hearing, the appellant may wish to file an application for Medicaid for the Disabled (MAD) now that he is claiming to be disabled.

HEARING OFFICER RECOMMENDATIONS

Based on the record before me, I find the appeal should be **OVERRULED**.

FINAL ADMINISTRATIVE DECISION AND ORDER

Finding the Hearing Officer's decision to be supported by the evidence, the recommendations are adopted, and Appeal number 1329725 is **OVERRULED**.

Hearing Authority

April 4, 2007

Notice to Appellant

STATE HEARING DECISION CONTINUATION

This is the official report of your hearing and is to inform you of the decision and order in your case. All papers and materials introduced at the hearing or otherwise filed in the proceeding make up the hearing record. The hearing record will be maintained by the Ohio Department of Job and Family Services. If you would like a copy of the official record, please telephone the hearing supervisor at the TOLEDO District hearing section at 1-866-635-3748.

If you believe this state hearing decision is wrong, you may request an administrative appeal by writing to: Ohio Department of Job and Family Services, Bureau of State Hearings, P.O. BOX 182825, Columbus, OH 43218-2825 or fax: (614) 728-9574. Your request should include a copy of this hearing decision and an explanation of why you think it is wrong. Your written request must be received by the Bureau of State Hearings within 15 calendar days from the date this decision is issued. *(If the 15th day falls on a weekend or holiday, this deadline is extended to the next work day.)* During the 15-day administrative appeal period you may request a free copy of the tape recording of the hearing by contacting the district hearings section.

If you want information on free legal services but don't know the number of your local legal aid office, you can call the Ohio State Legal Services Association, toll free, at 1-800-589-5888, for the local number.

Aviso a la Apelante

Esta es la decisión estatal administrativa de su caso. Todos los documentos y materiales presentados como prueba en la vista o de otra manera radicados componen el récord administrativo. El récord administrativo será mantenido por el Ohio Department of Job and Family Services.

Si usted cree que esta decisión estatal administrativa es errónea, usted puede solicitar una apelación administrativa escribiendo al: Ohio Department of Job and Family Services, Bureau of State Hearings, P.O. Box 182825, Columbus, Ohio 43218-2825 o facsímil (614) 728-9574. Su solicitud debe indicar por qué usted piensa que la decisión administrativa es errónea. Usted puede completar la solicitud de apelación incluida con esta decisión. Su solicitud escrita o formulario de apelación tiene que ser recibido por el Bureau of State Hearings dentro de los 15 días calendario desde la fecha en que esta decisión es expedida. (Si el 15to. día recae sobre un fin de semana o un día feriado, esta fecha límite es extendida al próximo día laborable). Durante el período de 15 días de apelación administrativa, usted o su representante pueden solicitar una copia gratuita del récord administrativo y de la grabación de la vista llamando al Bureau of State Hearings al 1-866-635-3748 (seleccione la opción 1 del menú principal).

Si usted quiere información sobre servicios legales gratuitos pero no sabe el número de su oficina local de servicios legales, usted puede llamar al Ohio State Legal Services Association, gratuitamente, al 1-800-589-5888, para el número local.

Appendix

Agency Exhibits

- A. Agency appeal summary, dated 01-30-07
- B. Screen CNHD "Notice History Detail", denial notice mail date 01-17-07 (2 pages)

Appellant Exhibits

- 1. State hearing request, date stamped 01-26-07