

**BEFORE THE ALASKA OFFICE OF ADMINISTRATIVE HEARINGS ON REFERRAL
BY THE COMMISSIONER OF HEALTH AND SOCIAL SERVICES**

In the Matter of)
)
 O N)
_____)

OAH No. 14-1360-ATP
Agency No.

DECISION

I. Introduction

The issue in this case is whether O N is entitled to an extension of the 60 month lifetime limit for receipt of Alaska Temporary Assistance Program (ATAP) benefits on the ground that she is physically or mentally unable to work. The Division of Public Assistance (DPA or Division) denied Ms. N’s extension request because she failed to provide the Division with a health status report form TA-10 documenting her alleged inability to work.¹ The applicable regulations require medical evidence of continuing disability to support an extension on a form provided by the division, and none was provided. For this reason, the Division’s decision denying Ms. N’s request for an extension of the 60 month lifetime limit is affirmed.

II. Facts

The material facts are undisputed. Ms. N is 34 years old.² Her household consists of one adult and two children.³ She applied for ATAP benefits on May 29, 2014.⁴ Because she had previously received 60 months of ATAP benefits, her application was pended while Ms. N provided additional information, including the Division’s form TA-10.⁵

The TA-10 form is a health status report form asking a health care professional to evaluate a person’s capacity to work or participate in other activities geared at a person returning to the workplace.⁶ Ms. N was unable to find a doctor who would sign the form documenting that Ms. N’s physical or mental condition would limit her ability to work.⁷ Rather, the only TA-10 form received by the Division was signed June 26, 2014 and indicated that she could work.⁸

¹ Ex. 9.
² Ex. 2.1.
³ Ex. 2.
⁴ *Id.*
⁵ Ex. 4.
⁶ *See e.g.*, Ex 5.2.
⁷ Exs. 5, 6, and 7.
⁸ Ex. 5.

On July 25, 2014, the Division made its internal decision to deny Ms. N's application for an extension because she was unable to establish that she had physical or mental health problems which prevented her from becoming self-sufficient.⁹ On July 29, 2014, the Division mailed notice of its decision to deny ATAP benefits.¹⁰ Ms. N requested a hearing and asked for an extension to establish a relationship with a primary care provider who would opine that she could not work.¹¹

III. Discussion

The Alaska Temporary Assistance Program (ATAP) is a program created by the Alaska Statutes to implement the federal program for Temporary Aid to Needy Families, or TANF.¹² ATAP is designed to help financially eligible families with minor children.¹³ A family may not normally receive ATAP benefits from the state (or parallel TANF programs in other states) for a cumulative period of more than 60 months.¹⁴ However, the ATAP regulations provide an exception to the 60 month lifetime limit when domestic violence, a physical or mental inability to work, or the need to care for a disabled child or relative interfere with a recipient's ability to work.¹⁵ Ms. N is requesting an exception to the lifetime limit.

In this case, Ms. N seeks an extension because she is mentally and physically unable to work.¹⁶ Under 7 AAC 45.235(a)(2), a person is considered to be physically or mentally unable to work if the individual "has a physical or mental condition that, on the basis of competent medical evidence submitted in accordance with (b) of this section, the department reasonably expects will last at least 30 days, and that is severe enough . . . to prevent the individual from working at full-time employment."

The Division denied the extension request because Ms. N did not provide a TA-10 form signed by a medical professional confirming that she is unable to work. According to 7 AAC 45.235(b), "[t]o substantiate a claim of inability [to work due to physical disability], medical

⁹ Exs. 6.3 and 7.

¹⁰ Ex. 9.

¹¹ Ex. 10; N Testimony.

¹² See AS 47.05.010(1); AS 47.27.005 – AS 47.27.990; 42 USC § 601 *et. seq.* ATAP's governing regulations are found in the Alaska Administrative Code at 7 AAC 45.149 – 7 AAC 45.990.

¹³ AS 47.27.010.

¹⁴ AS 47.27.015(a)(1).

¹⁵ See AS 47.27.015(a)(1)(A)-(C); 7 AAC 45.610(d) – (f). The ATAP regulations also allow an exception to the 60 month lifetime limit for family hardship. AS 47.27.015(a)(1)(D); 7 AAC 45.610(g). However, this exception is not at issue here.

¹⁶ N Testimony.

evidence from a licensed medical or health care practitioner as to the nature, extent, and expected duration of the condition is required.” The regulation also requires that this evidence “be submitted on a form provided or in a format specified by the department.” This form and format is the Division’s TA-10 form.

Ms. N agrees that she was unable to substantiate her claim with a signed TA-10, but finds it ironic that a doctor would say she can work because her conditions will only worsen with time.¹⁷ It is the complexity of her many conditions that Ms. N believes has made it difficult to find a provider that will document that she cannot work.¹⁸ Ms. N has now found a provider who will sign a TA-10 stating she cannot work.¹⁹ Regardless, it is undisputed that, at the time the Division determined Ms. N’s application should be denied, her application was not supported by “competent medical evidence” as required, and the extension could not be granted.

IV. Conclusion

Applicable ATAP regulations require medical evidence of continuing disability to support the granting of an extension of the 60 month lifetime eligibility limit. Ms. N failed to meet her evidentiary burden. Accordingly, the Division’s decision denying her request for ATAP benefits beyond 60 months is AFFIRMED.

DATED this 10th day of September, 2014.

By: Signed _____
Rebecca L. Pauli
Administrative Law Judge

Adoption

The undersigned, by delegation from of the Commissioner of Health and Social Services, adopts this Decision, under the authority of AS 44.64.060(e)(1), as the final administrative determination in this matter.

Judicial review of this decision may be obtained by filing an appeal in the Alaska Superior Court in accordance with Alaska R. App. P. 602(a)(2) within 30 days after the date of this decision.

DATED this 24th day of September, 2014.

By: Signed _____
Name: Rebecca L. Pauli
Title: Administrative Law Judge

[This document has been modified to conform to the technical standards for publication.]

¹⁷ *Id.*
¹⁸ *Id.*
¹⁹ *Id.*