

STATE OF MICHIGAN
STATE OFFICE OF ADMINISTRATIVE HEARINGS AND RULES

ADMINISTRATIVE HEARINGS FOR THE
DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF: [REDACTED]

Claimant

Reg. No: 2009-10650
Issue No: 1005; 2006; 3008
Case No: [REDACTED]
Load No: [REDACTED]
Hearing Date:
February 26, 2009
Wayne County DHS

ADMINISTRATIVE LAW JUDGE: Carmen G. Fahie

HEARING DECISION

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 upon claimant's request for a hearing. After due notice, a telephone hearing was held on Thursday, February 26, 2009. The claimant testified on her own behalf via telephone conference call.

ISSUE

Did the department properly propose to cancel the claimant's benefits for Family Independence Program (FIP), Medical Assistance (MA), and Food Assistance Program (FAP) based upon its determination that the claimant failed to provide the required verifications?

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 was a recipient of FIP, FAP, and MA benefits with a review required November 2008.

(2) On November 6, 2008, the department caseworker sent the claimant a Semi-Annual Contact Report that was due back December 1, 2008. (Department Exhibit 1-1A)

(3) On November 17, 2008, the Change Reporting Center submitted a Change Process Documentation Record that stated that the claimant called to report that her husband was working at [REDACTED] with a start date of [REDACTED] at a pay rate of [REDACTED].40 an hour paid weekly with the first paycheck [REDACTED] where hours per week worked were 60 hours per week with a payday on Friday. The claimant stated there were no other changes. The Change Reporting Center was unable to process the change due to the fact that the claimant's husband was not on the FIP case and the system shows he is only on the FAP case. Therefore, the department caseworker would have to make the changes. (Department Exhibit B)

(4) On November 21, 2008, the claimant sent back the Semi-Annual Contact Report stating that her husband was back in the home and employed at [REDACTED] on a weekly basis starting [REDACTED]. (Department Exhibit 1-1A)

(5) On December 1, 2008, the department caseworker sent the claimant a Verification of Employment that was due back December 12, 2008. (Department Exhibit 2-2A)

(6) On December 17, 2008, the department caseworker received an uncompleted Verification of Employment for the claimant's husband that did not have the number of hours expected to work, the date employment began, the date of first paycheck, the date employment is expected to end, or the income information. (Department Exhibit 2-2A)

(7) Since the previous Verification of Employment was completed incompletely, the claimant requested another copy of the Verification of Employment to be resent out. (Department Exhibit 3-3A)

(8) On December 30, 2008, the claimant's FIP case closed because of failure to provide proof of income. (Department Exhibit 8)

(9) On December 31, 2008, the claimant's FAP benefits expired and her FAP closed because the department did not receive the required income information.

(10) On January 5, 2009, the department caseworker received a completed copy of the Verification of Employment stating the number of hours expected to work per week, employment begin date was [REDACTED], date of first paycheck was [REDACTED] and included the income information. (Department Exhibit 3-3A)

(11) On January 5, 2009, the department received a hearing request from the claimant, contesting the department's negative action.

(12) During the hearing, the claimant stated that the claimant's husband left the household in [REDACTED] where he was removed from the case [REDACTED], but he came back in the home in [REDACTED].

(13) During the hearing, the department caseworker testified that the claimant's husband was only put back on the FAP case on November 17, 2008, but he was not put on the FIP case because the verification was not provided.

(14) During the hearing, the claimant stated that she called the call center in October 2008 to report that her husband was back in the home, but there was no record of the call.

(15) During the hearing, the claimant stated that her husband was self-employed and not an employee of [REDACTED].

CONCLUSIONS OF LAW

The Family Independence Program (FIP) was established pursuant to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Public Law 104-193,

8 USC 601, *et seq.* The Department of Human Services (DHS or department) administers the FIP program pursuant to MCL 400.10, *et seq.*, and MAC R 400.3101-3131. The FIP program replaced the Aid to Dependent Children (ADC) program effective October 1, 1996. Department policies are found in the Program Administrative Manual (PAM), the Program Eligibility Manual (PEM) and the Program Reference Manual (PRM).

The Medical Assistance (MA) program is established by Title XIX of the Social Security Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). The Department of Human Services (DHS or department) administers the MA program pursuant to MCL 400.10, *et seq.*, and MCL 400.105. Department policies are found in the Program Administrative Manual (PAM), the Program Eligibility Manual (PEM) and the Program Reference Manual (PRM).

The Food Assistance Program (FAP) (formerly known as the Food Stamp (FS) program) is established by the Food Stamp Act of 1977, as amended, and is implemented by the federal regulations contained in Title 7 of the Code of Federal Regulations (CFR). The Department of Human Services (DHS or department) administers the FAP program pursuant to MCL 400.10, *et seq.*, and MAC R 400.3001-3015. Department policies are found in the Program Administrative Manual (PAM), the Program Eligibility Manual (PEM) and the Program Reference Manual (PRM).

The department policy manuals provide the following relevant policy statements and instructions for caseworkers.

DEPARTMENT POLICY

All Programs

Clients have rights and responsibilities as specified in this item.

The local office must do **all** of the following:

- . Determine eligibility.
- . Calculate the level of benefits.
- . Protect client rights. PAM, Item 105, p. 1.

CLIENT OR AUTHORIZED REPRESENTATIVE RESPONSIBILITIES

Responsibility to Cooperate

All Programs

Clients must cooperate with the local office in determining initial and ongoing eligibility. This includes completion of the necessary forms. PAM, Item 105, p. 5.

Client Cooperation

The client is responsible for providing evidence needed to prove disability or blindness. However, you must assist the client when they need your help to obtain it. Such help includes the following:

- . Scheduling medical exam appointments
- . Paying for medical evidence and medical transportation
- . See PAM 815 and 825 for details. PEM, Item 260, p. 4.

All Programs

Clients must completely and truthfully answer all questions on forms and in interviews. PAM, Item 105, p. 5.

Refusal to Cooperate Penalties

All Programs

Clients who are able but refuse to provide necessary information or take a required action are subject to penalties. PAM, Item 105, p. 5.

Responsibility to Report Changes

All Programs

This section applies to all groups **except** most FAP groups with earnings.

Clients must report changes in circumstances that potentially affect eligibility or benefit amount. Changes must be reported **within 10 days**:

- . after the client is aware of them, or
- . the start date of employment. PAM, Item 105, p. 7.

For TLFA only, the client must report to the specialist any month the work requirement is not fulfilled.

Explain reporting requirements to all clients at application, redetermination and when discussing changes in circumstances. PAM, 105, p. 8.

Verifications

All Programs

Clients must take actions within their ability to obtain verifications. DHS staff must assist when necessary. See PAM 130 and PEM 702. PAM, Item 105, p. 8.

LOCAL OFFICE RESPONSIBILITIES

All Programs

Ensure client rights described in this item are honored and that client responsibilities are explained in understandable terms. Clients are to be treated with dignity and respect by all DHS employees. PAM, Item 105, p. 8.

Verification is usually required at application/redetermination **and** for a reported change affecting eligibility or benefit level. PAM, Item 130, p. 1.

Assisting the Client

All Programs

The local office must assist clients who ask for help in completing forms (including the DCH-0733-D) or gathering verifications. Particular sensitivity must be shown to clients who are illiterate, disabled or **not** fluent in English. PAM, Item 105, p. 9.

In the instant case, the claimant was required to provide proof of her husband's income by December 12, 2008. The claimant was notified that if the information was not provided that her FAP case would close automatically on December 31, 2008. The claimant did provide an incomplete Verification of Employment on December 17, 2008. The completed form was not received by the department until January 5, 2009, which was after the December 12, 2008 due date. As a result, the claimant's FAP case closed on December 31, 2008 expired automatically and her FIP case was closed by the worker on December 30, 2008.

During the hearing, the claimant stated that her husband was self-employed and not an employee of [REDACTED]. However, the claimant on her Semi-Annual Contact Report stated that her husband was an employee of [REDACTED] with a weekly salary starting [REDACTED]. She did not fill out the portion that was for self-employment, which would require different forms. The claimant was not aware that she had filled out the wrong form when she submitted her Semi-Annual Contact Report. Even if the claimant's husband was self-employed, the required information needed to be submitted for the department to determine eligibility. The required information was not provided by the due date. Therefore, the department has established that it was acting in compliance with department policy by determining that the claimant failed to provide the required verifications.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that the department appropriately cancelled the claimant's FIP, FAP, and MA benefits because the claimant did not provide the required income information to determine continued eligibility.

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

/s/
Carmen G. Fahie
Administrative Law Judge
for Ismael Ahmed, Director
Department of Human Services

Date Signed: March 27, 2009

Date Mailed: March 27, 2009

NOTICE: Administrative Hearings 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. Administrative Hearings 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.

The Claimant may appeal the Decision and Order to Circuit Court within 30 days of the mailing of the Decision and Order or, if a timely request for rehearing was made, within 30 days of the receipt date of the rehearing decision.

CGF/vmc

cc:

