

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: 2009-11894  
Issue No: 2006  
Case No: [REDACTED]  
Load No: [REDACTED]  
Hearing Date:  
August 6, 2009  
Grand Traverse County DHS

ADMINISTRATIVE LAW JUDGE: Susan Payne Woodrow

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 from Flint, Michigan on August 6, 2009. Present were [REDACTED] claimant, and Cindy Nelson, Family Independence Manager. The parties were sworn.

ISSUE

Whether the Department properly denied the claimant's application for State Disability Assistance (SDA).

FINDINGS OF FACT

The Administrative Law Judge, based upon the competent, material and substantial evidence on the whole record, finds as material fact:

1. In May of 2008, Sandra Pfeifer, from Michigan Rehabilitation Services (MRS), informed the Department of Human Services (DHS) that [REDACTED]

- ██████████ would be participating in their rehabilitation program, expected to end December 30, 2008.
2. ██████████ began to participate in the program.
  3. ██████████ is a diabetic.
  4. ██████████ currently has an apple-sized tumor in his pancreas.
  5. ██████████ diabetes currently is out of control.
  6. ██████████ case was scheduled to be reviewed in October 2008.
  7. On October 21, 2008, a verification checklist was sent to the claimant requesting that he verify his Michigan Rehabilitation Service status (see Exhibit I).
  8. The verification checklist was not returned by November 3, 2008 as requested.
  9. ██████████ did not request additional time to comply; but, he was no longer involved with the program.
  10. ██████████ is unsure if he received the verification checklist.
  11. ██████████ claim was entered into closure on December 11, 2008.
  12. On December 11, 2008, a Notice Of Case Action canceling his SDA grant was sent to the claimant at his current address (see Exhibit II).
  13. On December 16, 2008, ██████████ wrote a letter appealing the cancellation. (see Exhibit III).
  14. On January 14, 2009, Sandra Pfeifer sent the Department notification that ██████████ MRS case was closed.

15. As of July 2009, [REDACTED] physician has indicated that he is not medically able to participate in the Michigan Rehabilitation Services program and needs to begin injections for his diabetes.
16. [REDACTED] recently reapplied for SDA without the MRS involvement because of his medical problems and has a meeting next week in furtherance of that claim.

### CONCLUSIONS OF LAW

The State Disability Assistance (SDA) Program, which provides financial assistance for disabled persons is established by 2004 PA344. The Department of Human Services (formerly known as the Family Independence Agency) administers the SDA Program pursuant to MCL 400.10, et seq. and MAC R 400.3151-400.3180. Department policies are found in the Program Administrative Manual (PAM). The Program Eligibility Manual (PEM) and the Program Reference Manual (PRM).

Clients must cooperate with the local office in determining initial and ongoing eligibility, including the completion of the necessary forms. PAM 105, p. 5. Claimants must take action within their ability to obtain verification. The local office must assist clients who ask for help in completing forms or gathering verification. Verification means documentation or other evidence to establish the accuracy of the client's verbal or written statements. PAM 130, p. 1. Clients are allowed ten (10) calendar days (or other time limit specified in policy) to provide the requested verifications. PAM 130, p. 4. If the client cannot provide the verification, despite a reasonable effort, the time limit should be extended up to three times. *Id.*

The claimant acknowledges that he likely received the verification checklist, but cannot remember. He responded promptly to the cancellation of his benefits indicating that the Department's address was correct and that he likely did receive that notification. I find that the claimant failed to comply with the requirements of the Department. The action of the Department is upheld.

**DECISION AND ORDER**

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, finds that the action of the Department in closing the case is UPHELD.

/s/  
\_\_\_\_\_  
Susan Payne Woodrow  
Administrative Law Judge  
for Ismael Ahmed, Director  
Department of Human Services

Date Signed: August 12, 2009

Date Mailed: August 14, 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 receipt 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.

SPW/law

cc: 