

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: 2010-16101

Issue No: 2006, 3008

Case No: [REDACTED]

Load No: [REDACTED]

Hearing Date: [REDACTED]

St Joseph County DHS

ADMINISTRATIVE LAW JUDGE: Gary F. Heisler

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 [REDACTED]. Claimant appeared and testified.

ISSUES

Did the Department of Human Services properly close Claimant's Medical Assistance (MA) case?

Did the Department of Human Services properly close Claimant's Food Assistance Program (FAP) case due to failure to provide 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) Claimant was an ongoing recipient of Medical Assistance (MA) and Food

Assistance Program (FAP) benefits. Claimant's Food Assistance Program (FAP) case was due for re-determination by December 31, 2009.

(2) On November 16, 2009, Claimant was sent a Redetermination Form (DHS-1010).

(3) On November 30, 2009, Claimant returned the Redetermination Form (DHS-1010) and one of his biweekly pay stubs dated November 27, 2009.

(4) On December 3, 2009, Claimant participated in a telephone interview with his Department case worker. Also on this date Claimant was sent a Verification Checklist (DHS Form 3503) which stated he was to submit verification of the last 30 days income. The verifications were due by December 14, 2009.

(5) On December 14, 2009, Claimant sent in his biweekly pay stubs covering the period November 9, 2009 through December 6, 2009.

(6) On December 15, 2009, Claimant was sent a Notice of Case Action (DHS-1605) which stated his Medical Assistance (MA) and Food Assistance Program (FAP) cases would close on 1/1/2010.

(7) On January 11, 2010, Claimant submitted a request for hearing.

CONCLUSIONS OF LAW

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 Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) 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 Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) and the Program Reference Manual (PRM).

In this case there is no dispute that Claimant only submitted verification of 28 days of income with two biweekly pay stubs by the due date of December 14, 2009. Claimant asserts that he feels he provided what was required because he only gets two pay checks a month. During the hearing the Department case worker testified that no additional requests for income verification were made nor was Claimant informed he had not provided sufficient income verification. It is noted that Claimant submitted paystubs from the two pay periods immediately following his receipt of the Redetermination Form (DHS-1010). There is no evidence in the record that Claimant requested assistance in obtaining income verification or refused to provide any additional income verification. The Department asserts that since Claimant did not provide the required 30 days of income verification, the case should have been closed. Department policy provides the following guidance for case workers. The Department's policies are available on the internet through the Department's website.

VERIFICATION AND COLLATERAL CONTACTS

DEPARTMENT POLICY

All Type of Assistance (TOA)

Verification means documentation or other evidence to establish the accuracy of the client's verbal or written statements.

Obtain verification when:

- Required by policy. BE M items specify which factors and under what circumstances verification is required.
- Required as a local office option. The requirement must be applied the same for every client. Local requirements may not be imposed for MA, TMA-Plus or AMP.
- Information regarding an eligibility factor is unclear, inconsistent, incomplete or contradictory. The questionable information might be from the client or a third party.

Verification is usually required at application/redetermination **and** for a reported change affecting eligibility or benefit level.

Obtaining Verification

All TOA

Tell the client what verification is required, how to obtain it, and the due date (see **Timeliness of Verifications** in this item). Use the DHS-3503, Verification Checklist, or for MA redeterminations, the DHS-1175, MA Determination Notice, to request verification.

The client must obtain required verification, but you must assist if they need and request help.

If neither the client nor you can obtain verification despite a reasonable effort, use the best available information. If **no** evidence is available, use your best judgment.

Timeliness of Verifications

CDC, FIP, FAP

Allow the client 10 calendar days (**or** other time limit specified in policy) to provide the verification you request. If the client cannot provide the verification despite a reasonable effort, extend the time limit at least once.

Verifications are considered to be timely if received by the date they are due. For electronically transmitted verifications (fax, email), the date of the transmission is the receipt date. Verifications that are submitted after the close of regular business hours through the drop box or by delivery of a DHS representative are considered to be received the next business day.

Send a negative action notice when:

- The client indicates refusal to provide a verification, **or**
- The time period given has elapsed and the client has **not** made a reasonable effort to provide it.

Only **adequate** notice is required for an application denial. **Timely** notice is required to reduce or terminate benefits.

Exception: At redetermination, **FAP** clients have until the last day of the redetermination month **or** 10 days, whichever is later, to provide verification. See BAM 210.

MA and AMP

Allow the client 10 calendar days (or other time limit specified in policy) to provide the verification you request. Refer to above policy for citizenship verifications. If the client cannot provide the verification despite a reasonable effort, extend the time limit up to three times.

Verifications are considered to be timely if received by the date they are due. For electronically transmitted verifications (fax, email), the date of the transmission is the receipt date.

Verifications that are submitted after the close of regular business hours through the drop box or by delivery of a DHS representative are considered to be received the next business day.

Send a case action notice when:

- The client indicates refusal to provide a verification, or
- The time period given has elapsed. (BAM 130)

The Department's policy specifies that Claimant had until the due date to provide income verification for his Medical Assistance (MA) case and until December 31, 2009 to provide verification for his Food Assistance Program (FAP) case. Claimant was given notice that his benefits were going to end and that if he requested a hearing by December 28, 2009 that his benefits would continue. There was no testimony that Claimant made any attempt to determine

and correct the problem that was causing the loss of benefits and Claimant did not request a hearing until January 11, 2010. The Department's action regarding Claimant's Medical Assistance (MA) and Food Assistance Program (FAP) cases was in accordance with their policy.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides the Department of Human Services properly closed Claimant's Medical Assistance (MA) and Food Assistance Program (FAP) cases.

It is ORDERED that the actions of the Department of Human Services, in this matter, are UPHELD.

/s/

Gary F. Heisler
Administrative Law Judge
for Ismael Ahmed, Director
Department of Human Services

Date Signed: April 7, 2010

Date Mailed: April 8, 2010

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 60 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.

GFH/alc

cc:

