

STATE OF MICHIGAN  
STATE OFFICE OF ADMINISTRATIVE HEARINGS AND RULES  
ADMINISTRATIVE HEARINGS FOR THE  
DEPARTMENT OF HUMAN SERVICES

IN THE MATTER OF:

[REDACTED]

Reg. No: 201051389  
Issue No: 6019  
Case No: [REDACTED]  
Load No: [REDACTED]  
Hearing Date:  
September 30, 2010  
Genesee County DHS

**ADMINISTRATIVE LAW JUDGE:** Kevin Scully

**HEARING DECISION**

This matter is before the undersigned Administrative Law Judge by authority of MCL 400.9 and MCL 400.37. Claimant's request for a hearing was received on August 10, 2010. After due notice, a telephone hearing was held on Thursday, September 30, 2010.

**ISSUE**

Whether the Department of Human Services (Department) properly determined the beginning of the Claimant's Child Development and Care (CDC) eligibility period?

**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 applied for CDC benefits on July 7, 2010.
2. The Department received a CDC Relative Provider Application (DHS-220R), and returned it to the Claimant's childcare provider on July 24, 2010, because it did not include the identity all persons living in the household.
3. On August 10, 2010, the Department received the completed CDC Relative Provider Application form (DHS-220R).
4. On August 17, 2010, the Department approved the Claimant's CDC application.

5. The Department received the Claimant's request for a hearing on August 10, 2010, protesting the Department's failure to issue CDC benefits before August 17, 2010.

### **CONCLUSIONS OF LAW**

The Child Development and Care program is established by Titles IVA, IVE, and XX of the Social Security Act, the Child Care and Development Block Grant of 1990, and the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. The program is implemented by Title 45 of the Code of Federal Regulations, Parts 98 and 99. The Department of Human Services (DHS or Department) provides services to adults and children pursuant to MCL 400.14(1) and MCL 400.5001-5015. Department policies are found in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM), Reference Table Manual (RFT), and the Bridges Reference Manual (BRM).

Clients must cooperate with the local office in determining initial and ongoing eligibility. This includes the completion of necessary forms. BAM 105, p. 5. Verification means documentation or other evidence to establish the accuracy of the client's verbal or written statements. BAM 130, p. 1. Verification is usually required at application/redetermination and for a reported change affecting eligibility or benefit level when it is required by policy, required as a local office option, or information regarding an eligibility factor is unclear, inconsistent, incomplete, or contradictory. BAM 130, p. 1. The Department uses documents, collateral contacts, or home calls to verify information. BAM 130, p. 1. A collateral contact is a direct contact with a person, organization, or agency to verify information from the client. BAM 130, p. 2. When documentation is not available, or clarification is needed, collateral contact may be necessary. BAM 130.

Clients are allowed ten calendar days to provide the verifications requested by the Department. BAM 130, p. 4. The Department should send a negative action notice when the client indicates a refusal to provide the verification, or the time period provided has lapsed and the client has not made a reasonable effort to provide it. BAM 130, p. 4. The Department should extend the time limit no more than once if the client cannot provide the verification despite a reasonable effort. BAM 130, p. 4.

Clients must report changes in circumstance that potentially affect eligibility or benefit amount within 10 days of receiving the first payment reflecting the change. BAM 105. Income reporting requirements are limited to the following:

Earned income:

- Starting or stopping employment.
- Changing employers.
- Change in rate of pay.

- Change in work hours of more than five hours per week that is expected to continue for more than one month.

Unearned income:

- Starting or stopping a source of unearned income.
- Change in gross monthly income of more than \$50 since the last reported change.

Other changes:

- Persons in the home.
- Marital status.
- Address and shelter cost changes that result from the move.
- Vehicles
- Assets.
- Child support expenses paid.
- Health or hospital coverage and premiums.
- Day care needs or providers. BAM 105

Clients have the right to choose where the care will be provided as well as the type of childcare provider they wish to use. BEM 704. Care must be provided by an eligible providers regulated by Department or the Bureau of Children and Adult Licensing (BCAL). BEM 704. All childcare providers must be enrolled in Provider Management in order to receive payment from the department. BEM 704. To be eligible to receive payment, childcare providers must complete all required forms and forward them to the designated person. BEM 704.

The first day that CDC benefits may be authorized is the latest of the following:

- The CDC application receipt date.
- The date the child care need begins.
- The date the provider becomes eligible for subsidy payments.

- The date the aide or relative care provider completes the basic training requirement. BAM 115.

The Claimant applied for CDC benefits on July 7, 2010. The Department received a CDC Relative Provider Application (DHS- 220R), but returned it to the Claimant's childcare provider because the provider failed to list all persons living in the household. The discrepancy was discovered because the Claimant's childcare provider is known to the Department, but it remains necessary to fully complete the CDC provider application process as directed by policy. The Department received the CDC Relative Provider Application form on August 10, 2010, and this time it identified everyone living in the household. On August 17, 2010, the Department approved the Claimant's CDC Application.

The Claimant argued that her caseworker intentionally delayed the approval of her CDC application and that she has a high level of animosity towards herself and her family. The Claimant testified that her housing situation is unstable, and that she felt uncomfortable asserting her rights during the CDC application process. The Claimant testified that her caseworker threatened to report her housing situation to Child Protective Services if she didn't stop complaining about her CDC application.

According to Department policy, the State Office of Administrative Hearings and Rules (SOAHR) may grant a hearing about any of the following:

- Denial of an application and/or supplemental payments.
- Reduction in the amount of program benefits or service.
- Suspension or termination of program benefits or service.
- Restrictions under which benefits or services are provided.
- Delay of any action beyond standards of promptness.
- For FAP only, the current level of benefits or denial of expedited service. BAM 600.

Whether the Department provides its clients with the professional service they have a right to expect is beyond the scope of this hearing, and this Administrative Law Judge has no basis for determining whether the Claimant's allegations in this case are true. The Claimant was approved for CDC benefits on August 17, 2010. Therefore, the only issue within the authority of this Administrative Law Judge to decide is whether there was a delay in determining eligibility for CDC beyond the standard of promptness.

In this case, the delay in determining eligibility for CDC benefits was caused by the Claimant's childcare provider failing to identify all household members on the CDC Relative Provider Application form.

The Claimant argued that certain people were not included on the CDC Relative Provider Application form because they do not live there, but only use that address as a mailing address.

However, before the Department can approve a childcare provider, it is necessary for the Department to clarify the identities of all members of the household so that the Department can conduct a complete and thorough investigation. The Department was unable to authorize CDC benefits until the date the childcare provider became eligible for subsidy payments. In this case, the provider returned the form with all household members listed on the returned form, and the childcare provider was approved in a reasonable amount of time. Once the childcare provider was approved, the Claimant was approved for CDC benefits.

Based on the evidence and testimony available during the hearing, the Department has established that it properly determined the beginning of the Claimant's eligibility period for CDC benefits.

### **DECISION AND ORDER**

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that the Department acted in accordance with policy in determining the beginning of the Claimant's eligibility period for CDC benefits.

The Department's CDC eligibility determination is AFFIRMED. It is SO ORDERED.

\_\_\_\_\_/s/

Kevin

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Scully  
Administrative Law Judge  
for Ismael Ahmed, Director  
Department of Human Services

Date Signed: October 12, 2010

Date Mailed: October 13, 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.

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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.

KS/alc

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