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

IN THE MATTER OF:

Reg. No: 2011-1383

Issue No: 6015

Hearing Date: November 9, 2010

Genesee County DHS

ADMINISTRATIVE LAW JUDGE: Suzanne L. Morris

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 November 9, 2010. The claimant appeared and provided testimony.

<u>ISSUE</u>

Did the department properly deny the claimant's Child Development and Care (CDC) application?

FINDINGS OF FACT

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

- The claimant applied for CDC benefits on June 10, 2010. On her provider's application, the provider indicated that her son, KJ, resided with her.
- 2. On June 25, 2010 the department mailed the claimant a Verification Checklist (DHS-3503), requiring the claimant to submit a driver's license or ID card for KJ and requested proof that he had now moved out of the provider's home. (Department Exhibit 1 2)
- 3. On August 25, 2010, the department mailed the claimant a Notice of Case Action (DHS-1605) that informed the claimant her CDC application was

denied because the claimant failed to verify the required information. (Department Exhibit 3 - 11)

4. On September 24, 2010, the claimant submitted a hearing request.

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 MAC R 400.5001-5015. Department policies are contained in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) and the Program Reference Manual (PRM).

Department policy states:

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. BAM, 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. BAM, Item 105, p. 5.

Verifications

All Programs

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

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. BAM, Item 105, p. 9.

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

Obtaining Verification

All Programs

Tell the client what verification is required, how to obtain it, and the due date (see "**Timeliness Standards**" in this item). Use the DHS-3503, Verification Checklist, or for MA redeterminations, the DHS-1175, MA Determination Notice, to request verification. BAM, Item 130, p. 2.

The client must obtain required verification, but you must assist if they need and request help. BAM, Item 130, p. 2.

Timeliness Standards

All Programs (except TMAP)

Allow the client 10 calendar days (**or** other time limit specified in policy) to provide the verification you request. If the client <u>cannot</u> provide the verification despite a reasonable effort, extend the time limit at least once. BAM, Item 130, p. 4.

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. BAM, Item 130, p. 4.

Department policy states that CDC payments will not be made until all eligibility and need requirements are met and care is being provided by an eligible provider. BEM 706. Eligibility and need requirements can not be determined until all forms and requested information have been received by the department. BEM 702.

The claimant's provider originally submitted an application that indicated her son, resided with her in the house. The department is required to clear all individuals residing in the provider's household. The provider subsequently reported that her son was no longer residing in the household.

The claimant was mailed a Verification Checklist on June 25, 2010, requiring the claimant to provider a driver's license or ID card for KJ to prove that he was no longer residing in the provider's household. While the claimant and her provider did submit new applications reflecting KJ was no longer in the household, no verification was provided showing he resided elsewhere (such as a driver's license with correct address). Thus, the department denied the claimant's application on August 25, 2010 because the required verification was not provided.

Claimants are required to comply with the local office to allow the department to determine initial or ongoing eligibility. BAM 105. The department informs the client what verification is required, how to obtain it, and the due date by using the Verification Checklist form (DHS-3503). BAM 130. Clients are provided ten days to return the verifications, but can request an extension of time to provide the verifications. BAM 130. If the time period to provide the verifications expires and the verifications have not been provided, the department is directed to send a negative action notice. BAM 130. Therefore, the department acted in accordance with department policy when they denied the claimant's application for failure to return the required verification.

DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, decides that the department properly denied the claimant's CDC application.

Accordingly, the department's actions are UPHELD. SO ORDERED.

	/s/ Suzanne L. Morris Administrative Law Judge for Maura Corrigan, Director Department of Human Services
Date Signed:1/25/11	
Date Mailed: 1/25/11	

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.

