# STATE OF MICHIGAN MICHIGAN ADMINISTRATIVE HEARING SYSTEM ADMINISTRATIVE HEARINGS FOR THE DEPARTMENT OF HUMAN SERVICES

### IN THE MATTER OF:



Reg. No.: 2011-50499

Issue No.: 1005

Case No.:

Hearing Date: October 3, 2011
County: Wayne County DHS

ADMINISTRATIVE LAW JUDGE: Susan C. Burke

## **HEARING DECISION**

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37 following Claim ant's request for a hearing. After due notice, a telephone hearing was held on October 3, 2011, from Detroit, Michigan. Participants on behalf of Claimant inc luded Claimant. Part icipants on behalf of Department of Human Services (Department) included

Did the Departm ent properly ⊠ deny Claim for:	nan t's application 🔲 close Claimant's case					
<ul><li>☐ Family Independence Program (FIP)?</li><li>☐ Food Assistance Program (FAP)?</li><li>☐ Medical Assistance (MA)?</li></ul>	<ul><li>☐ Adult Medical Assistance (AMP)?</li><li>☐ State Disability Assistance (SDA)?</li><li>☐ Child Development and Care (CDC)?</li></ul>					
FINDINGS OF FACT						

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

<ol> <li>Cla imant</li></ol>	for:
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Family Independence Program (FIP).	Adult Medical Assistance (AMP).
Food Assistance Program (FAP).	State Disability Assistance (SDA).
Medical Assistance (MA).	☐ Child Development and Care (CDC)

2. On July 15, 2011, the Department issued to Claim ant a Medical Determination Verification Checklist, with proofs due by July 25, 2011.

3.	On July 15, 2011, the Department issued to Claimant a Jobs Education and Training (JET) appointment notice for August 8, 2011.
4.	Claimant did not submit t he medical proofs by July 25, 2011 and did not attend the JET appointment of August 8, 2011 due to being hospitalized for back issues.
	On August 13, 2011, the Department  ightharpoonup Grade    ightharpo
6.	On August 13, 2011, the Department sent  Claimant Claimant's Authorized Representative (AR)  notice of the Claimant Closure.
7.	On August 22, 2011, Claimant filed a hearing request, protesting the denial of the application.   closure of the case.

# **CONCLUSIONS OF LAW**

Department policies are contained in the Br idges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM), and the Reference Tables Manual (RFT).

The Family Independence Program (FIP) was established pursuant to the Personal Responsibility and W ork Opportunity Reconc iliation Act of 1996, Public Law 104-193, 42 USC 601, *et seq*. The Department (formerly k nown as the Family Independence Agency) administers FIP pursuant to MCL 400.10, *et seq*., and 1999 AC, Rule 400.3101 through Rule 400.3131. FIP replaced the Aid to Dependent Children (ADC) program effective October 1, 1996.

Clients must cooperate with the local DHS office in obtaining verification for determining initial and ongoing eligibility. BAM 130. If the client refuses to provide the information or has not made a reasonable e ffort within the specified time period, then policy directs that a negative action be issued. BAM 130.

The Depar tment requires clients to partici pate in employment and s elf-sufficiency-related activities and to accept employment when offered. BEM 230A; BEM 233A. All Work Eligible Indiv iduals (WEIs) are required to participate in the development of a Family Self-Sufficiency Plan (FSSP) unless good cause exists. BEM 228.

In the pres ent case, Claimant testified credibly that s he did not submit the requested information in the Medical Dete rmination Verification Checklist by its due date of July 25, 2011 and that she did not attend the J ET appointment of A ugust 8, 2011 due to being hospitalized for back issues. Claimant te stified further that she notified her case

worker by phone. Claimant stated that the D epartment worker then made an appointment with Claimant at which time Claimant reappl ied for FIP. The Department representative testified that Claimant reapplied for FIP on August 30, 2011. In addition, Claimant has an appointment to obtain the required medical verification. First. I do not find that Claimant refused to cooperate in providing medical verification, as Claimant testified without dispute from the Department that she was hospitalized and was not able to provide the documentati on by the due date. Claimant notified the Department by phone and scheduled an appointment with the Department. Second, I do not find that Claimant failed to attend the JET ap pointment without good cause. I do find good cause for failing to attend the Jet appoint ment in that Claimant was hospitalized at the time of the scheduled JET appointment. Based upon the abov e Findings of Fact and Co nclusions of Law, and for the reasons stated within the record, the Administrative Law Judge concludes that the Department properly denied Claimant's application improperly denied Claimant's application properly closed Claimant's case improperly closed Claimant's case for:  $\square$  AMP  $\boxtimes$  FIP  $\square$  FAP  $\square$  MA  $\square$  SDA  $\square$  CDC. **DECISION AND ORDER** The Administrative Law Judge, based upon the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, finds that the Department  $\bowtie$  did not act properly. did act properly. Accordingly, the Department's  $\square$  AMP  $\boxtimes$  FIP  $\square$  FAP  $\square$  MA  $\square$  SDA  $\square$  CDC decision is AFFIRMED REVERSED for the reasons stated within the record. THE DEPARTMENT IS ORDERED TO DO THE FOLLOWING WITHIN 10 DAYS OF

1. Initiate reinstatement and reprocessing of Claimant's FIP applic ation of July 15, 2011.

THE DATE OF MAILING OF THIS DECISION AND ORDER:

2. Initiate issuance of FIP supplements to Claimant, July 15, 2011 and ongoing, if Claimant is found to be eligible for FIP.

Susan C. Burke

Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: 10/6/11

Date Mailed: 10/6/11

**NOTICE**: Michigan Administrative Hearing Syst em (MAHS) may order a rehearing or reconsideration on either its own motion or at the request of a par ty within 30 days of the mailing date of this Dec ision and Order. MAHS will not or der a rehearing or reconsideration on the Department's mo tion where the final decis ion cannot be implemented within 90 days of the filing of the original request. (60 days for FAP cases)

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.

Claimant may request a rehearing or reconsideration for the following reasons:

- A rehearing <u>MAY</u> be granted if there is newly discovered evidence that could affect the outcome of the original hearing decision.
- A reconsideration MAY be granted for any of the following reasons:
  - misapplication of manual policy or law in the hearing decision,
  - typographical errors, mathematical error, or other obvious errors in the hearing decision that effect the substantial rights of the claimant:
  - the failure of the ALJ to address other relevant issues in the hearing decision.

Request must be submitted through the local DHS office or directly to MAHS by mail at Michigan Administrative hearings

consideration/Rehearing Request

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### SCB/sm

