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

IN THE MATTER OF:

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Reg. No.: 2011-51286 Issue No.: 6019 Case No.: November 10, 2011 Hearing Date: Macomb (12) County:

ADMINISTRATIVE LAW JUDGE: Alice C. Elkin

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 November 10, 2011, from Detroit, Michigan. Participants on behalf of Claimant inclu ded Claim ant. Participants on behalf of Department of Human Services (Department) included Elig ibility Specialist.

ISSUE

Did the Department fail to proces s 🛛 Claimant's application 🗌 Claimant's case for the following benefits:

Family Independence Program (FIP)?

Food Assistance Program (FAP)?

Medical Assistance (MA)?

- Adult Medical Assistance (AMP)? State Disability Assistance (SDA)?
- Child Development and Care (CDC)?

State SSI Payments (SSP)?

FINDINGS OF FACT

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

1. Cla imant 🛛 applied for benefits 🗌 received benefits for:

Food Assistance Program (FAP).

Family Independence Program (FIP).

Medical Assistance (MA).

State SSI Payments (SSP)?

Adult Medical Assistance (AMP).

State Disability Assistance (SDA).

Child Development and Care (CDC).

2. The Department \boxtimes did \square did not process Claimant's \boxtimes application \square case.

3. On Augus t 9, 2011, Claimant filed a hearing request, contending that the Department had failed to process the ⊠ application □ 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 purs uant 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 Mich Admin Code, R 400.3101 t hrough R 400.3131. FI P replaced the Aid to Dependent Children (ADC) program effective October 1, 1996.

The Food Assistanc e Program (FAP) [for merly 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 (formerly known as the Family Independence Agency) administers FAP pursuant to MCL 400.10, *et seq.*, and Mich Admin Code, R 400.3001 through R 400.3015.

☐ The Medical Ass istance (MA) program is es tablished by the Title XIX of the Soc ial Security Act and is im plemented by Title 42 of the Code of Federal Regulations (CFR). The Department of Human Services (formerly known as the Family Independ ence Agency) administers the MA pr ogram pursuant to MCL 400.10, *et seq*., and MC L 400.105.

The Adult Medical Program (AMP) is established by 42 USC 1315, and is administered by the Department pursuant to MCL 400.10, *et seq*.

☐ The State Disabilit y Assistance (SDA) progr am, which provides financial ass istance for disabled persons, is established by 2004 PA 344. The D epartment of Human Services (formerly known as the Family Independence Agency) administers the SDA program pursuant to MCL 400.10, *et seq*., and 2000 Annual Admin Code Supp, R 400.3151 through R 400.3180.

The Child Development and Care (CDC) program is establis hed by Titles IVA, IVE and XX of the Soc ial Security Act, the Ch ild Care and Developm ent 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 Fede ral Regulations, Parts 98

and 99. The Depart ment provides servic es to adults and children pursuant to MCL 400.14(1) and Mich Admin Code, R 400.5001 through R 400.5015.

The State SSI Payments (SSP) program is establish ed by 20 CFR 41 6 and the Social Sec urity Act, 616 [42 USC 1382e]. The Department administers the program pursuant to MCL 400.10, *et seq*.

Additionally, Claimant filed a CDC application on July 20, 2011, and was approved t o receive CDC benefits effective July 17, 2011. At the hear ing, Claimant contended that she had completed a CDC app lication in May 2011 a nd had be en approved for CDC benefits beginning in June 2011, but her provider di d not receive any CDC payments until July 17, 2011.

The Department initially found n o CDC ap plication by Claimant prior to the July 20, 2011, application, but upon further investigation, the Department testifed that its records supported Claimant's testimony that she had applied for CDC benefits sometime in May 2011. The Department testified that its correspondence files indicated that a Verification Checklist (VCL) was sent to Claimant reques ting certain information by May 24, 2011. On May 26, 2011, a Notice of Case Action was sent to Claimant indicating that her CDC application was denied becaus e she had failed to verify, or allow the Department to verify, certain information. Claimant denied receiving either the VCL or the May 26, 2011, Notice of Case Action. However, s he did co nfirm that the address on the VCL and Notice were both correct and she had rece ived all other doc uments sent to her by the Department. Although Claimant testified that she had documentation supporting her claim that her May 2011 applic ation had been approved and she was notified that she was to begin receiv ing CD C benefits beginning June 2011, she did not provide any documentary evidence to support her testi mony. The Department testified that it had reviewed it's system. Claimant's paper file, and the Departm ent's correspondence file and had not found any notice approving Claimant's CDC application prior to the July 20, 2011, Notice of Case Action. Under t hese circumstances, t here is no evidenc e supporting Claimant's contention that the D epartment was required, and had faile d, to pay CDC benefits for any period prior to July 17, 2011.

Based upon the abov e Findings of Fact and Co nclusions of Law, and for the reasons stated on the record, the Administrative Law Judge concludes that the Department \Box did \Box did not properly process Claimant's \Box application \Box case for: \Box AMP \Box FIP \Box FAP \Box MA \Box SDA \boxtimes CDC \Box SSP.

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 \square did act properly. \square did not act properly.

Accordingly, the Department's \square AMP \square FIP \square FAP \square MA \square SDA \boxtimes CDC \square SSP decision, for the reasons stated above and on the record, is

REVERSED

AFFIRMED IN PART with respect to to

and REVERSED IN PART with r espect

THE DEPARTMENT IS ORDERED TO DO THE FOLLOWING WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:

1.

Alice C. Elkin Administrative Law Judge for Maura Corrigan, Director **Department of Human Services**

Date Signed: December 13, 2011

Date Mailed: December 13, 2011

NOTICE: Michigan Administrative Hearing Syst em (MAHS) 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 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 **MAY** 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 Re

consideration/Rehearing Request

P. O. Box 30639 Lansing, Michigan 48909-07322

ACE/ctl

