

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

**IN THE MATTER OF:**



Reg. No.: 2011-53659  
Issue No.: 2006; 3008  
Case No.:   
Hearing Date: October 19, 2011  
County: Wayne County

**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 Claimant's request for a hearing. After due notice, a telephone hearing was held on October 19, 2011, from Detroit, Michigan. Participants on behalf of Claimant included Claimant. Participants on behalf of Department of Human Services (Department) included L , FIM, and , Assistance Payments Worker.

**ISSUE**

Did the Department properly  deny Claimant's application  close Claimant's case for:

- |  |   |
|--|---|
| <input type="checkbox"/> Family Independence Program (FIP)?        | <input type="checkbox"/> Adult Medical Assistance (AMP)?    |
| <input checked="" type="checkbox"/> Food Assistance Program (FAP)? | <input type="checkbox"/> State Disability Assistance (SDA)? |
| <input checked="" type="checkbox"/> Medical Assistance (MA)?       | <input type="checkbox"/> Child Development and Care (CDC)?  |

**FINDINGS OF FACT**

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

1. Claimant  applied for benefits  received benefits for:

- |  |   |
|--|---|
| <input type="checkbox"/> Family Independence Program (FIP).        | <input type="checkbox"/> Adult Medical Assistance (AMP).    |
| <input checked="" type="checkbox"/> Food Assistance Program (FAP). | <input type="checkbox"/> State Disability Assistance (SDA). |
| <input checked="" type="checkbox"/> Medical Assistance (MA).       | <input type="checkbox"/> Child Development and Care (CDC).  |

2. The Department issued to Claimant a New Hire Client Notice on August 3, 2011 for Claimant's son who was not living with Claimant.
3. The Department issued to Claimant a verification checklist on August 11, 2011, requesting banking, income and energy bill information.
4. Claimant submitted income and energy bill information on August 17, 2011.
5. The Department issued a DHS-38 (Verification of Employment) to Claimant on August 23, 2011 and Claimant returned the form on August 31, 2011 with employer contact information missing.
6. On September 1, 2011, the Department  
 denied Claimant's application       closed Claimant's case  
due to failure to provide verification.
7. On September 2, 2011, the Department sent  
 Claimant       Claimant's Authorized Representative (AR)  
notice of the       denial.       closure.
8. On September 21, 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 Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM), and the Reference Tables Manual (RFT).

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 (formerly known as the Family Independence Agency) administers FAP pursuant to MCL 400.10, *et seq.*, and 1999 AC, Rule 400.3001 through Rule 400.3015.

The Medical Assistance (MA) program is established by the 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 (formerly known as the Family Independence Agency) administers the MA program pursuant to MCL 400.10, *et seq.*, and MCL 400.105.

Clients must cooperate with the local DHS office in obtaining verification for determining initial and ongoing eligibility. BAM 130. The questionable information might be from the client or a third party. *Id.* The Department can use documents, collateral contacts or home calls to verify information. *Id.* The client should be allowed 10 calendar days to provide the verification. If the client cannot provide the verification despite a reasonable

effort, the time limit to provide the information should be extended at least once. BAM 130. If the client refuses to provide the information or has not made a reasonable effort within the specified time period, then policy directs that a negative action be issued. BAM 130.

The local office must assist clients who ask for help in completing forms (including the DCH-0373-D) or gathering verifications. Particular sensitivity must be shown to clients who are illiterate, disabled or **not** fluent in English. BAM 105.

In the present case, the Department issued to Claimant a verification checklist which requested information regarding Claimant's energy bill, bank checking and income. Claimant returned copies of his pay checks and his energy bill. The Department also issued to Claimant a verification of employment which was completed by Claimant, and when the Department told Claimant to obtain the information from his employer, Claimant's employer (who was his son) completed the information about the pay, but did not complete the employer contact information. In addition, the Department did not receive requested new hire information about Claimant's son, who was not residing with Claimant. The Department then closed Claimant's case for failure to provide requested information.

It appears that Claimant attempted to cooperate with the Department by submitting copies of pay checks, utility bill information and the verification of employment, even though Claimant's employer-son did not complete the employer contact information. The requested bank information found on the second page of the verification checklist is vague. It states, "Please provide additional information about: bank account checking." This request does not specify whether the Department is requesting a bank statement and for which period. Finally, as to the New Hire Client Notice regarding Claimant's son who was not living with Claimant, it is understandable that Claimant thought the request was a mistake, as his son did not live with him. It is noted, however, that Claimant's son was included in Claimant's group by the Department for FAP purposes. Based on the above discussion, it is concluded that Claimant did not refuse to cooperate. Although it appears that the Department had to take extra steps to retrieve information from Claimant, it was clear from the hearing that Claimant was not completely fluent in English, and BAM 105 requires the Department to be particularly sensitive to such a client.

Based upon the above Findings of Fact and Conclusions of Law, and for the reasons stated within the record, the Administrative Law Judge concludes that the Department

- |   |   |
|---|---|
| <input type="checkbox"/> properly denied Claimant's application | <input type="checkbox"/> improperly denied Claimant's application     |
| <input type="checkbox"/> properly closed Claimant's case        | <input checked="" type="checkbox"/> improperly closed Claimant's case |

for:  AMP  FIP  FAP  MA  SDA  CDC.

**DECISION AND ORDER**

The Administrative Law Judge, based upon the above Findings of Fact and Conclusions of Law, and for the reasons stated within the record, finds that the Department  did act properly.  did not act properly.

Accordingly, the Department's  AMP  FIP  FAP  MA  SDA  CDC decision is  AFFIRMED  REVERSED for the reasons stated on the record.

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

1. Initiate reinstatement of Claimant's FAP and MA cases, effective September 1, 2011 and ongoing, if Claimant is otherwise eligible.
2. Initiate issuance of FAP supplements, September 1, 2011 and ongoing, if Claimant is found to be otherwise eligible for FAP.

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Susan C. Burke  
 Administrative Law Judge  
 for Maura Corrigan, Director  
 Department of Human Services

Date Signed: \_\_\_\_\_

Date Mailed: \_\_\_\_\_

**NOTICE:** Michigan Administrative Hearing System (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 Decision and Order. MAHS 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. (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.

2011-53659/SCB

Request must be submitted through the local DHS office or directly to MAHS by mail at  
Michigan Administrative hearings  
Reconsideration/Rehearing Request  
P. O. Box 30639  
Lansing, Michigan 48909-07322

SCB/sm

cc:

