



2. The Department sent the Claimant a Verification Checklist on November 17, 2010, which included a Provider Verification form to be completed and returned by November 29, 2010. The Claimant received the Verification. Checklist Exhibit 1
3. The Claimant credibly testified that she faxed the Provider Verification, on November 29, 2010, to her caseworker and called the caseworker on that date to confirm receipt of the fax. Claimant Exhibit 1
4. The Claimant also called her caseworker on several dates to determine if she received the Provider Verification and did not receive a call back from her caseworker confirming that she had received the faxed Provider Verification.
5. The Claimant's caseworker confirmed that because of high call volume, at the time, she may not have received the Claimant's message as messages were being taken by others.
6. The Department issued a Notice of Case Action denying the CDC application on December 2, 2010, because the Claimant failed to verify necessary information and the child, [REDACTED] was deemed not eligible. Exhibit 2
7. The hearing record was held open by the undersigned to allow the Claimant to submit a completed Provider Verification, which she testified she provided the Department. On March 2, 2011, prior to the record closure date, the Claimant provided, via fax, a Provider Verification dated November 26, 2010. Claimant Exhibit 1.

8. The Claimant filed a request for hearing on December 19, 2010, protesting the Department's denial of the application for the CDC benefits.
9. On December 22, 2010, the Department received the Claimant's Request for Hearing.

### 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 (formerly known as the Family Independence Agency) provides services to adults and children pursuant to MCL 400.14(1) and MAC R 400.5001-5015. Department policies are found in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM) and the Reference Tables Manual (RFT).

Clients must cooperate with the local office in determining initial and ongoing eligibility to provide verification. PAM 130, p. 1. 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 should be extended at least once. PAM 130, p.4; PEM 702. 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. PAM 130, p. 4. Before making an eligibility determination, however, the department must give the client a reasonable opportunity to resolve any

discrepancy between his statements and information from another source. PAM 130, p. 6.

In this case, the Department sent the Claimant a Verification Checklist requesting a Provider Verification be completed and returned by the due date. The claimant provided a completed Provider Verification dated and signed November 26, 2010. Based upon the Claimant's testimony that she faxed the information on the due date and attempted to follow up with the caseworker on various dates, it is determined that the Claimant did not refuse to cooperate and her application should not have been denied. Further, this determination was also influenced by the fact that the Claimant's caseworker confirmed that high call volumes could have affected whether she received the Claimant's message and responded so that the Claimant could have hand delivered the information by the due date. The undersigned finds that Claimant did not refuse to cooperate and did provide requested information by the due date.

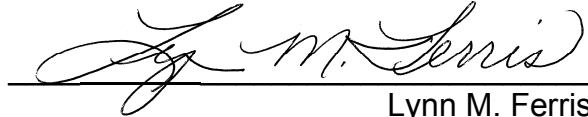
Accordingly, it is found that the Department's denial of the Claimant's CDC application, on December 2, 2010, was in error and the Department's decision to deny the CDC application is REVERSED.

#### DECISION AND ORDER

The Administrative Law Judge, based upon the above findings of fact and conclusions of law, finds that the Department's denial of the Claimant's CDC case for failure to provide a Provider Verification was in error as the Claimant did not refuse to cooperate. Accordingly, the Department's decision to deny the CDC application is REVERSED.

Accordingly, it is ORDERED:

1. The Department shall re register and reprocess the Claimant's CD C application of October 25, 2010 and determine eligibility in accordance with Department policy.



Lynn M. Ferris  
Law Judge

Maura Corrigan, Director  
of Human Services

Administrative  
for  
Department

Date Signed: 03/30/11

Date Mailed: 03/30/11

**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.

LMF/dj

cc:

