

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

IN THE MATTER OF:



Reg. No: 201118676  
Issue No: 6019  
Case No: [REDACTED]  
Hearing Date: May 12, 2011  
Ingham County DHS

ADMINISTRATIVE LAW JUDGE: **Kandra Robbins**

**HEARING DECISION**

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9 and MCL 400.37, 7 CFR 273.16, MAC R 400.3130, and MAC R 400.3178 upon the Claimant's request for hearing. After due notice, a 3-way telephone conference hearing was held on May 12, 2011. The Claimant was present and testified.

**ISSUE**

1. Did the department properly determine claimant was not eligible for the Child Development and Care (CDC) benefit?

**FINDINGS OF FACT**

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

1. The claimant was sent a DHS 101 Redetermination packet on May 12, 2010. (Department Exhibit 1, pages 1-4).
2. As of August 20, 2010, the required documents still had not been sent to the Department.
3. On August 20, 2010, the claimant was sent a Notice of Case Action.
4. On November 10, 2010, the department received the claimant's Request for Hearing.

## CONCLUSIONS OF LAW

The regulations governing the hearing and appeal process for applicants and recipients of public assistance in Michigan are found in the Michigan Administrative Code, MAC R 400.901-.951. An opportunity for a hearing shall be granted to an applicant who requests a hearing because his claim for assistance is denied. MAC R 400.903(1) an opportunity for a hearing shall be granted to an applicant who requests a hearing because of a denial. MAC R 400.903(2)

Clients have the right to contest a department decision affecting eligibility or benefit levels whenever it is believed that the decision is incorrect. BAM 600. The department will provide an administrative hearing to review the decision and determine the appropriateness. BAM 600.

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 found in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM), Reference Table Manual (RFT), State Emergency Relief Manual (ERM) and the Bridges Reference Manual (BRM). Department policy states:

### **BEM 703 PROGRAM OVERVIEW**

The goal of the Child Development and Care (CDC) program is to preserve the family unit and to promote its economic independence and self-sufficiency by promoting safe, affordable, accessible, quality child care for qualified Michigan families. The Department of Human Services (DHS) may provide a subsidy for child care services for qualifying families when the parent(s)/substitute parent(s) is **unavailable** to provide the child care because of employment, participation in an approved activity and/or because of a condition for which treatment is being received **and** care is provided by an eligible provider.

Eligibility for CDC services exists when the department has established **all** of the following:

- There is a **signed application** requesting CDC services.
- Each parent/substitute parent; see Parent/Substitute Parent section in this item is a member of a valid **ELIGIBILITY GROUP**.

- Each parent/substitute parent (P/SP) meets the **NEED** criteria as outlined in this item.
- An eligible provider is providing the care.
- All eligibility requirements are met.

## **BAM 105 CLIENT OR AUTHORIZED REPRESENTATIVE RESPONSIBILITIES**

### **Responsibility to Cooperate**

Clients must cooperate with the local office in determining initial and ongoing eligibility. This includes completion of necessary forms. Clients must completely and truthfully answer all questions on forms and in interviews. The client might be unable to answer a question about himself or another person whose circumstances must be known. Allow the client at least 10 days (or other timeframe specified in policy) to obtain the needed information.

### **Verifications All Programs**

Clients must take actions within their ability to obtain verifications. DHS staff must assist when necessary.

## **BAM 130 DEPARTMENT POLICY**

Verification means documentation or other evidence to establish the accuracy of the client's verbal or written statements. Obtain verification when:

- Required by policy. BEM items specify which factors and under what circumstances verification is required.
- Required as a local office option. The requirement **must** be applied the same for every client.
- Information regarding an eligibility factor is unclear, inconsistent, incomplete or contradictory. The questionable information might be from the client or a third party.

Verification is usually required at application/redetermination **and** for a reported change affecting eligibility or benefit level. If the individual indicates the existence of a disability that impairs their ability to gather verifications and information necessary to establish eligibility for benefits, offer to assist the individual in the gathering of such information.

### **Obtaining Verification**

Tell the client what verification is required, how to obtain it, and the due date.

### **Timeliness of Verifications**

#### **FIP, SDA, CDC, FAP**

Allow the client 10 calendar days (**or** other time limit specified in policy) to provide the verification you request.

**Exception:** For CDC only, if the client cannot provide the verification despite a reasonable effort, extend the time limit at least once. Verifications are considered to be timely if received by the date they are due. For electronically transmitted verifications (fax, email), the date of the transmission is the receipt date. Verifications that are submitted after the close of regular business hours through the drop box or by delivery of a DHS representative are considered to be received the next business day.

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.

Department policy requires that a person meet the need criteria outlined in BEM 703 in order to be eligible for CDC assistance. The claimant failed to submit the required documentation for the department to determine continued eligibility for the CDC benefits. Although the claimant states that she submitted the redetermination packet, she has no proof or verification, such as a date stamp copy or fax verification to support her claim. She was given an additional day in which to provide evidence to support her claim. She has not provided any documents. Therefore, her claim is not found to be persuasive. The claimant was required to submit the redetermination documents in order for the department to determine her continued eligibility. The claimant failed to provide the required documents in a timely manner.

### **DECISION AND ORDER**

This Administrative Law Judge, based upon the above findings and conclusion of law, decides that the Department correctly determined the claimant was not eligible for the CDC program.

It is so ORDERED.

/s/  
Kandra Robbins  
Administrative Law Judge  
for Maura D. Corrigan, Director  
Department of Human Services

Date Signed: May 19, 2011

Date Mailed: May 20, 2011

**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.

KKR/ar

cc:

