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

# IN THE MATTER OF:

	Reg. No.: Issue No.: Case No.: Hearing Date: County:	2012-10145 3002; 3008 December 1, 2011 Wayne County	
ADMINISTRATIVE LAW JUDGE: Susan C. Bo	urke		
HEARING DE	CISION		
This matter is before the undersigned Administ and MCL 400.37 following Claim ant's requestelephone hearing was held on December 1, 20 on behalf of Claimant included Claimant. Pathuman Services (Department) included	st for a hearing. Afte 011, from Detroit, Mi articipants on beha	r due notice, a	
Due to a failure to comply with the ve rification requirements, did the Department properly deny Claimant's application close Claimant's case reduce Claimant's benefits for:			
<ul><li>☐ Family Independence Program (FIP)?</li><li>☐ Food Assistance Program (FAP)?</li><li>☐ Medical Assistance (MA)?</li></ul>		ent and Care (CDC)?	
FINDINGS OF	F FACT		
The Administrative Law Judge, based upon tevidence on the whole record, including testimo	•	•	
1. Cla imant ☐ applied for ⊠ was receiving: [	_FIP ⊠FAP _MA	□SDA □CDC.	
2. Cla imant ☐ was ⊠ was not provided with a	a Verification Checkli	st (DHS-3503).	
3. On December 1, 2011, the Department ☐ denied Claimant's application			

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4.	On October 25, 2011, the Department sent notice of the  ☐ denial of Claimant's application.  ☐ closure of Claimant's case.  ☐ reduction of Claimant's benefits.
5.	On October 31, 2011, Claimant filed a hearing request, protesting the denial. Sclosure and the amount of benef its for September 2011 and October, 2011. reduction.

# **CONCLUSIONS OF LAW**

Department policies are found 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 19 77, as amended, and is implemented by the federal regulations contained in Title 7 of the Code of Feder al Regulations (CFR). The Department (formerly known as the Fam ily Independence Agency) administers FAP pursuant to MCL 400.10, *et seq.*, and 1999 AC, Rule 400.3001 through Rule 400.3015.

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 polic y directs that a negative action be issued. BAM 130.

In the present case, there was some evidence that the Department issued a Verification Checklist requesting pay stubs of Claimant's spouse for the past thirty days. Claimant testified credibly that he did not receive the Verification Checklist. Claimant testified further that he and his wife completed employment information for the month of September. The Department admitted to receiving employ ment information from the month of September. The Verification Checklist was sent on October 14, 2011, rendering only one possible check verification missing, as Claimant's spouse was paid every two weeks. I cannot find that Claimant refused to cooperate, as he did cooperate to the best of his understanding.

In addition, Claimant requested a review of his September, 2011 and October, 2011 benefits. A review of the budget submitted by the Department (Exhibit 16) shows

inclusion of unearned income in the amount of \$452.00. However, the Department did not provide proof of the unearned income.

Based upon the above Findings of Fact and Conclusions of Law, and for the reasons stated on the record, the Administrative Law Judge concludes that the Department ☐ properly ☐ improperly		
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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 ☐ did act properly. ☐ did not act properly.		
Accordingly, the Depar tment's decision is  AFFIRMED  REVERSED for the reasons stated on the record.		
oxtimes THE DEPARTMENT IS ORDERED TO DO THE FOLLOWING WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:		

- 1. Initiate recalculation of Claimant's FAP benefits, September 1, 2011 and ongoing, verifying any unearned income.
- 2. Initiate reinstatement of Claim ant's FAP case, effective Dec ember 1, 2011, if Claimant is otherwise eligible.
- 3. Initiate issuance of FAP supplement s for any missed or increased pay ments to Claimant, September 1, 2011 and ongoing, if Claimant is otherwise eligible for FAP.

Susan C. Burke

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Administrative Law Judge
for Maura Corrigan, Director

Department of Human Services

Date Signed: <u>12/6/11</u>

Date Mailed: 12/6/11

**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 receipt date of this Dec ision and Orde r. 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)

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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 ti mely 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

Re consideration/Rehearing Request P. O. Box 30639
Lansing, Michigan 48909-07322

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