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

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	Reg. No.: Issue No.: Case No.: Hearing Date: County:	20122236 3008 November 2, 2011 Oakland DHS (03)		
ADMINISTRATIVE LAW JUDGE: Christian G				
HEARING DE	CISION			
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 November 2, 2011, from Detroit, Michigan. Participants on behalf of Claimant included Claimant. Participants on behalf of Department of Human Services (Department) included Manager.				
ISSUE	Ī			
Due to a failure to comply with the verification properly ☐ deny Claimant's application ☒ clobenefits for:				
<ul><li>☐ Family Independence Program (FIP)?</li><li>☐ Food Assistance Program (FAP)?</li><li>☐ Medical Assistance (MA)?</li></ul>		assistance (SDA)? ent and Care (CDC)?		
FINDINGS O	F FACT			
The Administrative Law Judge, based upon tevidence on the whole record, including testime	•	-		
Claimant ☐ applied for ☒ was receiving: [	_FIP ⊠FAP □MA	□SDA □CDC.		
2. Claimant ⊠ was ☐ was not provided with a	a Verification Checkli	ist (DHS-3503).		

3. Claimant was required to submit requested verification by 2/7/11.

	On 2/8/11, the Department denied Claimant's application closed Claimant's case reduced Claimant's benefits for failure to submit verification in a timely manner.
5.	On 2/8/11, the Department sent notice of the denial of Claimant's application. closure of Claimant's case. reduction of Claimant's benefits.
	On 4/21/11, Claimant filed a hearing request, protesting the ⊠ denial. ☐ closure. ☐ reduction.
	CONCLUSIONS OF LAW
	partment policies are found in the Bridges Administrative Manual (BAM), the Bridges gibility Manual (BEM) and the Reference Tables Manual (RFT).
Res 42 Age	The Family Independence Program (FIP) was established pursuant to the Personal sponsibility and Work Opportunity Reconciliation Act of 1996, Public Law 104-193, USC 601, et seq. The Department (formerly known as the Family Independence ency) administers FIP pursuant to MCL 400.10, et seq., and 1999 AC, Rule 400.3101 ough Rule 400.3131. FIP replaced the Aid to Dependent Children (ADC) program ective October 1, 1996.
pro imp Re Age	The Food Assistance Program (FAP) [formerly known as the Food Stamp (FS) ogram] is established by the Food Stamp Act of 1977, as amended, and is oblemented by the federal regulations contained in Title 7 of the Code of Federal gulations (CFR). The Department (formerly known as the Family Independence ency) administers FAP pursuant to MCL 400.10, et seq., and 1999 AC, Rule 0.3001 through Rule 400.3015.
Sec The	The Medical Assistance (MA) program is established by the Title XIX of the Social curity Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). e Department (formerly known as the Family Independence Agency) administers the program pursuant to MCL 400.10, et seq., and MCL 400.105.
for as	The State Disability Assistance (SDA) program which provides financial assistance disabled persons is established by 2004 PA 344. The Department (formerly known the Family Independence Agency) administers the SDA program pursuant to MCL 0.10, et seq., and 2000 AACS, Rule 400.3151 through Rule 400.3180.
and	The Child Development and Care (CDC) program is established by Titles IVA, IVE d XX of the Social Security Act, the Child Care and Development Block Grant of 90, 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 provides services to adults and children pursuant to MCL 400.14(1) and 1999 AC, Rule 400.5001 through Rule 400.5015.

DHS must periodically redetermine an individual's eligibility for benefit programs. BAM 210 at 1. A complete redetermination is required at least every 12 months. *Id.* 

The redetermination process begins with DHS mailing a redetermination packet in the month prior to the end of the benefit period. *Id* at 4. The packet consists of forms and requests for verification that are necessary for DHS to process the redetermination. The forms needed for redetermination may vary, though a Redetermination (DHS-1010) is an acceptable review form for all programs. Verifications for redetermination must be provided by the end of the current benefit period or within 10 days after they are requested, whichever allows more time.

In the present case, DHS terminated Claimant's FAP benefits after Claimant failed to verify self-employment income. Claimant returned a Redetermination (Exhibit 2) to DHS which stated in part, "Send proof of ALL income your household received." Though Claimant returned the Redetermination to DHS, he failed to include any documents verifying the \$5400 in listed self-employment income. Subsequently, DHS mailed a Verification Checklist (Exhibit 1) to Claimant on 1/27/11 requesting proof of self-employment income. The due date to return the verification was 2/7/11. Again Claimant failed to verify the income.

Claimant sincerely testified that the income came from various odd-jobs and that he was confused about how to verify the income. He also contended that he believed that he left a telephone message for his DHS specialist prior to the termination to inquire how he could comply with the request.

Though it would have been preferable that Claimant received an immediate return phone call from DHS and/or that Claimant was informed by DHS that he had an opportunity to reapply for FAP benefits, Claimant's failure to return any document verifying self-employment income trumps the failure by DHS to return Claimant's telephone message. Claimant could have made further inquiries or made stronger efforts trying to comply with the mandatory verification request. It is found that DHS properly terminated Claimant's FAP benefits beginning 2/2011.

Based upon the above Findings of Fact and Conclusions of Law, and for th stated on the record, the Administrative Law Judge concludes that the Dep $\square$ properly $\square$ 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 Department's decision is $\boxtimes$ AFFIRMED $\square$ REVERSED for the reasons stated on the record.					
Christin Dardock					
Christian Gardocki					

Christian Gardocki
Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: 11/4/11

Date Mailed: <u>11/4/11</u>

**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 receipt 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 <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
Reconsideration/Rehearing Request
P. O. Box 30639
Lansing, Michigan 48909-07322

CG/hw

cc:

## 2012-2236/CG

