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

IN THE MAT	TER OF:	Reg. No: Issue No:	201247594 3002	
		Case No: Hearing Date: Cass County DI	May 23, 2012 HS	
ADMINISTRATIVE LAW JUDGE: Kevin Scully				
HEARING DECISION				
and MCL 40 telephone he Participants	s before the undersigned Administrative 00.37 following Claimant's request for earing was held on Wednesday, May on behalf of Claimant included on behalf of Department of Human.	or a hearing. At 23, 2012, from l an	fter due notice, a _ansing, Michigan. d	
<u>ISSUE</u>				
Due to excess income, did the Department properly \square deny the Claimant's application \square close Claimant's case \boxtimes reduce Claimant's benefits for:				
Food Assistance Program (FAP)?		dult Medical Assistate Disability Ass Child Development		
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 for: Independence Program (FIP), South Food Assistance Program (FA (SDA), Medical Assistance (MA) (CDC).	Adult Medical A.P.), State Dis	assistance (AMP), sability Assistance	
2.	On April 13, 2012, the Department ☐ ☐ closed Claimant's case ☒ reduced income.		ant's application fits due to excess	

3.	On April 13, 2012, the Department sent \square Claimant \square Claimant's Authorized Representative (AR) notice of the \square denial. \square closure. \square reduction.		
4.	On April 20, 2012, Claimant or Claimant's AHR filed a hearing request, protesting the \square denial of the application. \square closure of the case. \square reduction of benefits.		
CONCLUSIONS OF LAW			
•	policies are contained in the Bridges Administrative Manual (BAM), the bility Manual (BEM), and the Reference Tables Manual (RFT).		
	ult Medical Program (AMP) is established by 42 USC 1315, and is by the Department pursuant to MCL 400.10, et seq.		
Responsibilit 42 USC 601, Agency) adn through Rule	ily Independence Program (FIP) was established pursuant to the Personal by and Work Opportunity Reconciliation Act of 1996, Public Law 104-193, et seq. The Department (formerly known as the Family Independence ninisters FIP pursuant to MCL 400.10, et seq., and 1999 AC, R 400.3101 et 400.3131. FIP replaced the Aid to Dependent Children (ADC) program ober 1, 1996.		
program] is implemented Regulations	d Assistance Program (FAP) [formerly known as the Food Stamp (FS) established by the Food Stamp Act of 1977, as amended, and is by the federal regulations contained in Title 7 of the Code of Federal (CFR). The Department (formerly known as the Family Independence ninisters FAP pursuant to MCL 400.10, et seq., and 1999 AC, R 400.3001 e 400.3015.		
Security Act The Departm	ical Assistance (MA) program is established by the Title XIX of the Social and is implemented by Title 42 of the Code of Federal Regulations (CFR). nent (formerly known as the Family Independence Agency) administers the pursuant to MCL 400.10, et seq., and MCL 400.105.		
for disabled as the Famil	e Disability Assistance (SDA) program, which provides financial assistance persons, is established by 2004 PA 344. The Department (formerly known by Independence Agency) administers the SDA program pursuant to MCL eq., and 2000 AACS, R 400.3151 through Rule 400.3180.		
and XX of the standard that the program and 99. The	d Development and Care (CDC) program is established by Titles IVA, IVE he Social Security Act, the Child Care and Development Block Grant of e Personal Responsibility and Work Opportunity Reconciliation Act of 1996. In is implemented by Title 45 of the Code of Federal Regulations, Parts 98 of Department provides services to adults and children pursuant to MCL d 1999 AC, R 400.5001 through Rule 400.5015.		

Additionally, the Claimant properly reported her income at the time she applied for Medical Assistance (MA). The Department properly determined the Claimant's eligibility for Food Assistance Program (FAP) based the verified information the Claimant reported. 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, due to excess income, the Department \boxtimes properly \square improperly \square denied Claimant's application □ reduced Claimant's benefits □ 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 on the record, finds that the Department \boxtimes did act properly \indid \text{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. /s/ Kevin Scully

Date Signed: May 24, 2012

Date Mailed: May 24, 2012

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)

Administrative Law Judge For Maura Corrigan, Director Department of Human Services

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

KS/tb

CC:

