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:	2012 64557 3015,1001 August 23, 2012 Wayne County DHS (19)			
ADMINISTRATIVE LAW JUDGE: Lynn M. Ferri	s				
HEARING DEC	ISION				
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 August 23, 2012, from Detroit, Michigan. Participants on behalf of Claimant included the claimant and the Claimant's spouse, Participants on behalf of the Department of Human Services (Department) included , ES and , Assistance Payments Supervisor.					
ISSUE					
Due to excess income, did the Department properly ☐ deny the Claimant's application ☐ close Claimant's case ☐ reduce Claimant's benefits for:					
Family Independence Program (FIP)? Food Assistance Program (FAP)? Medical Assistance (MA)?		sistance (AMP)? ssistance (SDA)? ent and Care (CDC)?			
Did the Department properly close the Claiman turning 18 years of age and completion of high so		ance due to her son			
FINDINGS OF	FACT				
The Administrative Law Judge, based on the evidence on the whole record, finds as material fa		rial, and substantial			
1. Claimant ☐ applied for benefits for: ☑ r	eceived benefits fo	r:			
☐ Family Independence Program (FIP). ☐ ☐ Food Assistance Program (FAP). ☐		ssistance (AMP). Assistance (SDA).			

2.	On July 1, 2012, the Department
3.	On June 21, 2012, the Department sent Claimant Claimant's Authorized Representative (AR) notice of the denial. Closure. reduction.
4.	On June 29, 2012, Claimant or Claimant's AHR filed a hearing request, protesting the denial of the application. Solution closure of the case. reduction of benefits.
	CONCLUSIONS OF LAW
	epartment policies are contained in the Bridges Administrative Manual (BAM), the idges Eligibility Manual (BEM), and the Reference Tables Manual (RFT).
	The Adult Medical Program (AMP) is established by 42 USC 1315, and is ministered by the Department pursuant to MCL 400.10, et seq.
Re 42 Ag thr	The Family Independence Program (FIP) was established pursuant to the Personal esponsibility and Work Opportunity Reconciliation Act of 1996, Public Law 104-193, USC 601, et seq. The Department (formerly known as the Family Independence jency) administers FIP pursuant to MCL 400.10, et seq., and 1999 AC, Rule 400.3101 rough Rule 400.3131. FIP replaced the Aid to Dependent Children (ADC) program fective October 1, 1996.
pro im Re Ag	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 plemented by the federal regulations contained in Title 7 of the Code of Federal egulations (CFR). The Department (formerly known as the Family Independence Jency) administers FAP pursuant to MCL 400.10, et seq., and 1999 AC, Rule 0.3001 through Rule 400.3015.
Se Th	The Medical Assistance (MA) program is established by the Title XIX of the Social ecurity Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). The Department (formerly known as the Family Independence Agency) administers the Aprogram 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.

The Child Development and Care (CDC) 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 provides services to adults and children pursuant to MCL
400.14(1) and 1999 AC, Rule 400.5001 through Rule 400.5015.

Additionally, At the hearing a thorough review of the Claimant's FAP budget was made and it is determined that the Claimant's gross income at the time of the FAP review in June 2012 exceeded the limit for gross income, which was \$1226. The Claimant's income consisted of earned income of \$2289 and child support of \$398, and was correctly determined by the Department. The Claimant confirmed the amount of income based on pay reporting from the Work Number and the amount of child support she received. At the hearing, the Claimant indicated that her child support was ending and advised her case worker of that fact at the time of her case review. The Department sent a verification checklist to the Claimant, but did not include a request for verification of termination of child support. Notwithstanding this omission, and excluding the child support going forward, the Claimant's earned income of \$2289 still exceeds the gross income limit of \$1226 contained in the Michigan Department of Human Services Bridges Reference Tables, (RFT) 250 (2011) page 1. Thus, based upon a review of the entire record and the testimony of the parties, it is determined that the Department correctly closed the Claimant's food assistance due to excess income.

The Department also closed the Claimant's Medical Assistance (MA) at the time of the review. The Claimant was originally deemed eligible for MA on the basis of a Group 2 MA category. MA is available to parents and other caretaker relatives who met the eligibility factors in this item. All eligibility factors must be met in the calendar month being tested. The Department closed the Claimant's MA case due to the fact that the Claimant's minor son had turned 18 and had graduated high school. BEM 135 defines dependent child as regards age requirements and eligibility for MA Group 2 as that he must be under age 18; or he must be age 18 and a full-time student in a high school or the equivalent. He must be expected to complete his educational training program before age 19. Michigan Department of Human Services Bridges Eligibility Manual (BEM) 135 (2011) pp 1. Therefore, the Department correctly closed the Claimant's Medical Assistance case as she was no longer eligible to receive this benefit.

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 $\ \ \ \ \ \ \ \ \ \ \ \ \ $
 ☐ 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 \square did not act properly.
Accordingly, the Department's \square AMP \square FIP \boxtimes FAP \boxtimes MA \square SDA \square CDC decisions \boxtimes AFFIRMED \square REVERSED for the reasons stated on the record.
☐ THE DEPARTMENT IS ORDERED TO DO THE FOLLOWING WITHIN 10 DAYS OF THE DATE OF MAILING OF THIS DECISION AND ORDER:

Lynn M. Ferris
Administrative Law Judge
for Maura Corrigan, Director
Department of Human Services

Date Signed: August 29, 2012

Date Mailed: August 29, 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).

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.

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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

