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

IN	THE	MAT	TER	OF:

		Reg. No.: Issue No.: Case No.:	201270376 2006	
		Hearing Date: County:	September 27, 2012 Ingham	
ADMINISTR	ATIVE LAW JUDGE: Kevin Scully			
	HEARING DEC	SION		
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 September 27, 2012, from Lansing, Michigan. Participants on behalf of Claimant included Participants on behalf of Department of Human Services (Department) included				
	<u>ISSUE</u>			
Due to a failure to comply with the verification requirements, did the Department properly \boxtimes deny Claimant's application \square close Claimant's case \square reduce Claimant's benefits for:				
Food As	idependence Program (FIP)? sistance Program (FAP)? Assistance (MA)?	_	ssistance (SDA)? nt and Care (CDC)?	
	FINDINGS OF I	ACT		
	strative Law Judge, based upon the the whole record, including testimony	•	-	
1.	Claimant ⊠ applied for ☐ was re ☐CDC.	ceiving:	FAP ⊠MA □SDA	
2.	Claimant \boxtimes was \square was not p (DHS-3503).	rovided with a V	erification Checklist	
3.	Claimant was required to submit red	uested verification	ı by May 29, 2012.	

4.	On May 29, 2012, the Department \boxtimes denied Claimant's application \square closed Claimant's case \square reduced Claimant's benefits for failure to submit verification in a timely manner.			
5.	On May 29, 2012, the Department sent notice of the \boxtimes denial of Claimant's application. \square closure of Claimant's case. \square reduction of Claimant's benefits.			
6.	On August 2, 2012, Claimant filed a hearing request, protesting the \boxtimes denial. \square closure. \square reduction.			
CONCLUSIONS OF LAW				
	policies are found in the Bridges Administrative Manual (BAM), the Bridges nual (BEM) and the Reference Tables Manual (RFT).			
Responsibilit 42 USC 601, Agency) adm through Rule	Ily Independence Program (FIP) was established pursuant to the Personal y 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 e 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 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, <i>et seq.</i> , and MCL 400.105.			
for disabled pas the Famil	e Disability Assistance (SDA) program which provides financial assistance persons is established by 2004 PA 344. The Department (formerly known y Independence Agency) administers the SDA program pursuant to MCL eq., and 2000 AACS, R 400.3151 through Rule 400.3180.			

Additionally, the Department did not dispute that it had a duty to sent the Verification Checklist to the Claimant's authorized representative and failed to respond to the authorized representative's request for information about the application, which it had submitted to the Department on the Claimant's behalf.

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 closed Claimant's case. denied Claimant's application. reduced Claimant's benefits.
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 \square did act properly. \boxtimes did not act properly.
Accordingly, the Department's decision is \square AFFIRMED \boxtimes 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:
 Initiate a determination of the Claimant's eligibility for Medical Assistance (MA) based on the April 11, 2012, application for assistance. Provide the Claimant with written notification of the Department's revised eligibility determination. Issue the Claimant any retroactive benefits she may be eligible to receive, if any.
/s/ Kevin Scully Administrative Law Judge For Maura Corrigan, Director Department of Human Services

Date Signed: September 28, 2012

Date Mailed: September 28, 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 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:

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- 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

