

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

**IN THE MATTER OF:**

[REDACTED]

Reg. No.: 2012-70411  
2012-33742 REHD/RECON  
Issue No.: 2018  
Case No.: [REDACTED]  
Hearing Date: October 1, 2012  
County: Wayne (82-82)

**ADMINISTRATIVE LAW JUDGE:** Jonathan W. Owens

**DECISION AFTER REHEARING**

This matter is before the undersigned Administrative Law Judge pursuant to MCL 400.9, MCL 400.37, and Mich Admin Code Rule 400.919 and an Order Granting Rehearing that was generated after review of Claimant's request for rehearing/reconsideration of the Hearing Decision generated by the assigned Administrative Law Judge (ALJ) at the conclusion of the hearing conducted on June 27, 2012. The date for a new hearing having been assigned and due notice having been provided, a telephone hearing was conducted from Detroit, Michigan, on October 1, 2012. Participants on behalf of Claimant included Claimant's guardian/daughter, [REDACTED] her grandson, [REDACTED], and her representative, [REDACTED]. Participants on behalf of the Department of Human Services (Department) included [REDACTED].

**ISSUE**

Did the Department properly  deny Claimant's application  close Claimant's case for:

- |  |   |
|--|---|
| <input type="checkbox"/> Family Independence Program (FIP)?  | <input type="checkbox"/> Adult Medical Assistance (AMP)?    |
| <input type="checkbox"/> Food Assistance Program (FAP)?      | <input type="checkbox"/> State Disability Assistance (SDA)? |
| <input checked="" type="checkbox"/> Medical Assistance (MA)? | <input type="checkbox"/> Child Development and Care (CDC)?  |

**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  received benefits for:  

<input type="checkbox"/> Family Independence Program (FIP).	<input type="checkbox"/> Adult Medical Assistance (AMP).
<input type="checkbox"/> Food Assistance Program (FAP).	<input type="checkbox"/> State Disability Assistance (SDA).
<input checked="" type="checkbox"/> Medical Assistance (MA).	<input type="checkbox"/> Child Development and Care (CDC).
  
2. On December 19, 2011, the Department  denied Claimant's application  closed Claimant's case due to failure to provide verifications.
  
3. On December 19, 2011, the Department sent  Claimant  Claimant's Authorized Representative (AR) notice of the  denial.  closure.
  
4. On January 20, 2012, Claimant filed a hearing request, protesting the  denial of the application.  closure of the case.

### **CONCLUSIONS OF LAW**

Department policies are contained in the Bridges Administrative Manual (BAM), the Bridges Eligibility Manual (BEM), and the Reference Tables Manual (RFT).

The Family Independence Program (FIP) was established pursuant to the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Public Law 104-193, 42 USC 601, *et seq.* The Department (formerly known as the Family Independence Agency) administers FIP pursuant to MCL 400.10, *et seq.*, and 1999 AC, Rule 400.3101 through Rule 400.3131. FIP replaced the Aid to Dependent Children (ADC) program effective October 1, 1996.

The Food Assistance Program (FAP) [formerly known as the Food Stamp (FS) program] is established by the Food Stamp Act of 1977, as amended, and is implemented by the federal regulations contained in Title 7 of the Code of Federal Regulations (CFR). The Department (formerly known as the Family Independence Agency) administers FAP pursuant to MCL 400.10, *et seq.*, and 1999 AC, Rule 400.3001 through Rule 400.3015.

The Medical Assistance (MA) program is established by the Title XIX of the Social Security Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). The Department of Human Services (formerly known as the Family Independence Agency) administers the MA program pursuant to MCL 400.10, *et seq.*, and MCL 400.105.

The Adult Medical Program (AMP) is established by 42 USC 1315, and is administered by the Department pursuant to MCL 400.10, *et seq.*

The State Disability Assistance (SDA) program, which provides financial assistance for disabled persons, is established by 2004 PA 344. The Department of Human Services (formerly known as the Family Independence Agency) administers the SDA program pursuant to MCL 400.10, *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.

On November 23, 2011, an application for MA benefits was filed on behalf of Claimant. Claimant's daughter is also Claimant's guardian. At hearing, the Department testified a verification checklist was mailed to Claimant's guardian on November 29, 2011, requesting the submission of asset verifications. The Department provided a copy of the verification mailed with a due date of December 9, 2011, for verifications to be returned. The Department further testified the requested verifications were not submitted. On December 19, 2011, the Department denied Claimant's application for failure to return verifications.

Claimant's guardian testified she, in fact, returned the requested verifications. Claimant's guardian indicated she mailed the verifications on December 9, 2011, the date the verifications were due.

At hearing, the only issue presented by the Department and Claimant's representative was whether or not the verifications were, in fact, provided. However, upon review of the exhibits submitted for consideration, it was discovered that Claimant's guardian was not the authorized representative (AR) for the application submitted on November 23, 2011. Claimant's Exhibit A, page 1, clearly demonstrates that Claimant's guardian had assigned authorization to represent Claimant to [REDACTED] on October 28, 2011. This authorization was date-stamped received by the Department on November 23, 2011, the same date as the application submitted on behalf of Claimant. This authorization clearly states "Please tell [REDACTED] if additional paperwork is needed to process my application...." The evidence submitted by the Department demonstrates that both the verification request and the case action notice were sent to Claimant's guardian. There is no evidence that the actual AR was copied on these communications.

Relevant Policy Section BAM 110 (2011), p. 7, reads:

### All Programs

An authorized representative (AR) is a person who applies for assistance on behalf of the client and/or otherwise acts on his behalf (for example, to obtain FAP benefits for the group).

An AR is **not** the same as an Authorized Hearings Representative (AHR); see the Bridges Policy Glossary (BPG) for hearings policy definition.

When no one in the group is able to make application for program benefits, any group member capable of understanding AR responsibilities may designate the AR.

The AR assumes all the responsibilities of a client; see BAM 105.

AR's must give their name, address, and title or relationship to the client. To establish the client's eligibility, they must be familiar enough with the circumstances to complete the application, answer interview questions, and collect needed verifications.

As indicated by the above policy, the AR assumes all the responsibilities of a client. Further, Claimant's assigned AR form directed the Department to inform them of any additional paperwork necessary to process Claimant's application. The Department did send requests to the Claimant's guardian but failed to demonstrate the request for verification was, in fact, sent to Claimant's actual AR. While the testimony does indicate the AR was aware of the verification request at least as of December 9, 2011, there was no evidence or testimony submitted to demonstrate that Claimant's AR was given proper notice of the need for verifications prior to that date.

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 denied Claimant's application     improperly denied Claimant's application  
 properly closed Claimant's case             improperly 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  
 did act properly.     did not act properly.

2012-70411/JWO  
2012-33742 REHD/RECON

Accordingly, the Department's  AMP  FIP  FAP  MA  SDA  CDC decision is  AFFIRMED  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:

1. Initiate processing of Claimant's application dated November 23, 2011;
2. Process Claimant's application for MA including any request for retro;
3. Issue a written determination.



---

**Jonathan W. Owens**  
Administrative Law Judge  
for Maura Corrigan, Director  
Department of Human Services

Date Signed: October 10, 2012

Date Mailed: October 10, 2012

**NOTICE:** The law provides that within 30 days of receipt of this decision, the claimant may appeal this decision to the circuit court for the county in which he/she lives.

JWO/pf

cc:

