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

| П | N | т | н | F | N | ΙΔ | T | ΓΕ | R | 0 | F | • |
|---|---|---|---|---|----|----|---|----|---|---|---|---|
| ш | • | | п | _ | IV | | | | • | • | | |

| | Reg. No.: Issue No.: Case No.: Hearing Date: County: | 2012-71123 1005 March 14, 2013 Wayne (43) | | | |
|---|--|---|--|--|--|
| ADMINISTRATIVE LAW JUDGE: Jan Leventer | r | | | | |
| HEARING DECISION | | | | | |
| 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 March 14, 2013, from Detroit, Michigan. Participants on behalf of Claimant included the Claimant and Lerise Boyd, Claimant's daughter-in-law. Participants on behalf of the Department of Human Services (Department) included , Jobs, Education and Training (JET) Case Manager. | | | | | |
| ISSUE | | | | | |
| Did the Department properly \boxtimes deny Claimant for: | 's application ☐ cl | ose Claimant's case | | | |
| ☐ Family Independence Program (FIP)?☐ Food Assistance Program (FAP)?☐ Medical Assistance (MA)? | | sistance (AMP)? assistance (SDA)? ent 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: | | | | | |
|----|--|--|--|--|--|--|
| | ☐ Family Independence Program (FIP).☐ Food Assistance Program (FAP).☐ Medical Assistance (MA). | ☐ Adult Medical Assistance (AMP).☐ State Disability Assistance (SDA).☐ Child Development and Care (CDC). | | | | |

effective October 1, 1996.

| 2. | On August 6, 2012, the Department denied Claimant's application closed Claimant's case due to a determination that Claimant failed to verify her home address. | | | | |
|--------------------|--|--|--|--|--|
| 3. | On August 6, 2012, the Department sent Claimant Claimant's Authorized Representative (AR) notice of the denial. Closure. | | | | |
| 4. | On August 15, 2012, Claimant filed a hearing request, protesting the \boxtimes denial of the application. \square closure of the case. | | | | |
| CONCLUSIONS OF LAW | | | | | |
| | partment policies are contained in the Bridges Administrative Manual (BAM), the dges Eligibility Manual (BEM), and the Reference Tables Manual (RFT). | | | | |
| \boxtimes | The Family Independence Program (FIP) was established pursuant to the Personal | | | | |

Additionally, the Department's Bridges Administrative Manual (BAM) 105, "Rights and Responsibilities," requires customers to cooperate fully with the Department's requests for information. In this case it is found and determined that the customer failed to present verification of her address in a timely fashion. Department of Human Services Bridges Administrative Manual (BAM) 105 (2013).

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

The Claimant's May 8, 2012 application listed an address of 18184 Dequindre in Detroit. On or about July 13, 2012, the Department requested verification of Claimant's address. Dept. Exh. 1, pp. 1, 3.

Although the Claimant testified that she brought address identification to the Department, it was not in the Department's case file. The Claimant testified that she brought a State of Michigan Identification card, and she produced the card at the hearing. However, she could not verify the correct address because her address changed smore than once, and the dates she moved were not shown on the card. Claimant also testified that she submitted an envelope with her current address, but she did not produce it at the hearing.

Ilt is found and determined that Claimant's testimony is insufficient to establish that she cooperated fully in providing verification to the Department. Claimant's ID card does not establish the date or dates she moved, and Claimant presented no other evidence at the hearing.

Bridges Administrative Manual (BAM) 130, "Verification and Collateral Contacts," requires the Department to verify residence information in order to determine if a person is eligible for benefits and the amount of benefits to which they are entitled. It is impossible for the Department to make benefit decisions without shelter and shelter cost information. Department of Human Services Bridges Administrative Manual (BAM) 130 (2012).

In conclusion it is found and determined that the Department acted correctly in this case and it shall be affirmed.

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: \square AMP \boxtimes FIP \square FAP \square MA \square SDA \square 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. Accordingly, the Department's AMP X FIP FAP MA SDA CDC decision is \square AFFIRMED \square REVERSED for the reasons stated on the record. Jan Jan Leventer

Administrative Law Judge for Maura Corrigan, Director

Department of Human Services

Date Signed: March 18, 2013

Date Mailed: March 18, 2013

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.

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

JL/tm

