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

IN THE MATTER OF:			
	Reg. No.: Issue No.: Case No.: Hearing Date: County:	2012-72488 2006; 2017; 3008	
ADMINISTRATIVE LAW JUDGE: Suzanne Mo	rris		
HEARING DEC	CISION		
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 the following claimant and his sister to behalf of Claimant included Claimant and his sister to behalf of Department of Human Services (Department) included			
ISSUE			
Due to a failure to comply with the verificat properly ☐ deny Claimant's application ☒ close benefits for:			
Family Independence Program (FIP)? Food Assistance Program (FAP)? Medical Assistance (MA)?		assistance (SDA)? ent and Care (CDC)?	
FINDINGS OF	FACT		
The Administrative Law Judge, based upon the evidence on the whole record, including testimor	•	•	
1. Claimant ☐ applied for ⊠ was receiving: ☐	FIP SFAP MA	□SDA □CDC.	
2. Claimant ⊠ was ☐ was not provided with a	Verification Checkli	st (DHS-3503).	
3. Claimant was required to submit requested v	erification by		
4. On, the Department ☐ denied Claimant's application ☐ closed Claimant's case			

	educed Claimant's benefits ailure to submit verification in a timely manner.
⊠ cl	, the Department sent notice of the denial of Claimant's application. closure of Claimant's case. eduction of Claimant's benefits.
6. On ☐ de	Claimant filed a hearing request, protesting the denial. Closure. reduction.
	CONCLUSIONS OF LAW
•	ment policies are found in the Bridges Administrative Manual (BAM), the Bridges by Manual (BEM) and the Reference Tables Manual (RFT).
Respons 42 USC Agency) through	Family Independence Program (FIP) was established pursuant to the Personal sibility and Work Opportunity Reconciliation Act of 1996, Public Law 104-193, 601, et seq. The Department (formerly known as the Family Independence) administers FIP pursuant to MCL 400.10, et seq., and 1999 AC, R 400.3101 Rule 400.3131. FIP replaced the Aid to Dependent Children (ADC) program e October 1, 1996.
program impleme Regulati Agency)	Food Assistance Program (FAP) [formerly known as the Food Stamp (FS) n] is established by the Food Stamp Act of 1977, as amended, and is ented by the federal regulations contained in Title 7 of the Code of Federal tions (CFR). The Department (formerly known as the Family Independence) administers FAP pursuant to MCL 400.10, et seq., and 1999 AC, R 400.3001 Rule 400.3015.
Security The Dep	Medical Assistance (MA) program is established by the Title XIX of the Social Act and is implemented by Title 42 of the Code of Federal Regulations (CFR). partment (formerly known as the Family Independence Agency) administers the gram pursuant to MCL 400.10, et seq., and MCL 400.105.
for disat as the F	State Disability Assistance (SDA) program which provides financial assistance bled persons is established by 2004 PA 344. The Department (formerly known Family Independence Agency) administers the SDA program pursuant to MCL et seq., and 2000 AACS, R 400.3151 through Rule 400.3180.
and XX 1990, ar The pro and 99.	Child Development and Care (CDC) program is established by Titles IVA, IVE of the Social Security Act, the Child Care and Development Block Grant of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. Orgram is implemented by Title 45 of the Code of Federal Regulations, Parts 98. The Department provides services to adults and children pursuant to MCL (1) and 1999 AC. R 400,5001 through Rule 400,5015.

Additionally, the claimant's sister, who is also the claimant's representative/Power of Attorney (POA), testified that she did not submit verification of the claimant's checking account until which is when the department has the document date stamped. The claimant's sister kept stating that she was told this was timely for the case. However, when the department worker checked Bridges, it appears that this was for the sister's case, not the claimant's case, as the sister's case came due for a redetermination after the Claimant's. The Claimant's representative did not deny receiving the Verification Checklist for account information by to re-determine the Medicare Cost Sharing, Food Assistance Program and Medicaid. This was not timely for the cases closed.
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 \square properly \square 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. \square did not act properly.
Accordingly, the Department's decision is \boxtimes AFFIRMED \square REVERSED for the reasons stated on the record.
Suzanne L. Morris Administrative Law Judge For Maura Corrigan, Director
Department of Human Services Date Signed:
Date Mailed:

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:

- 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 <u>MAY</u> 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

SLM/jk

CC:

